1 A bill to be entitled 2 An act relating to the state group insurance program; 3 amending s. 110.123, F.S.; providing and revising 4 definitions; authorizing eligible former employees to 5 participate in the state group insurance program; 6 removing certain benefit levels for certain health 7 plans; conforming provisions to changes made by the 8 act; conforming cross-references; creating s. 9 110.12306, F.S.; defining the term "designated antifraud unit"; requiring the Division of State Group 10 11 Insurance to establish and maintain, or contract with 12 other entities to establish and maintain, a designated 13 anti-fraud unit for certain purposes, to adopt an 14 anti-fraud plan, and to designate staff with certain 15 responsibilities by a specified date; creating s. 16 110.12313, F.S.; requiring the Department of 17 Management Services to provide an open enrollment 18 period for eligible former employees for a certain 19 plan year for certain purposes; providing requirements for certain health insurance coverage options; 20 requiring that eligible former employees enroll in the 21 22 state group insurance program within a specified time; 23 ratifying specified rules of the Florida 24 Administrative Code; providing construction; providing effective dates. 25

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27	Be It Enacted by the Legislature of the State of Florida:						
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29	Section 1. Paragraphs (b) through (p) of subsection (2) of						
30	section 110.123, Florida Statutes, are redesignated as						
31	paragraphs (c) through (q), respectively, present paragraphs						
32	(b), (k), (m), and (o) of subsection (2), paragraphs (d), (g),						
33	and (j) of subsection (3), paragraph (e) of subsection (4), and						
34	paragraphs (c) and (d) of subsection (13) are amended, and a new						
35	paragraph (b) is added to subsection (2) of that section, to						
36	read:						
37	110.123 State group insurance program						
38	(2) DEFINITIONSAs used in ss. 110.123-110.1239, the						
39	term:						
40	(b) "Eligible former employee" means a former full-time						
41	state employee who worked at least 6 cumulative years with a						
42	branch or agency of state government, was enrolled in the state						
43	group insurance program at the time of his or her separation						
44	from employment, and whose separation from employment occurred						
45	on or after July 1, 2022. The term "eligible former employee"						
46	does not include seasonal workers who were paid from OPS funds						
47	during their employment, state university employees, or other						
48	benefits-only employees.						
49	<u>(c)</u> "Enrollee" means all state officers and employees,						
50	retired state officers and employees, surviving spouses of						
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51 deceased state officers and employees, eligible former 52 employees, and terminated employees or individuals with 53 continuation coverage who are enrolled in an insurance plan 54 offered by the state group insurance program. The term 55 "enrollee" includes all state university officers and employees, 56 retired state university officers and employees, surviving 57 spouses of deceased state university officers and employees, and terminated state university employees or individuals with 58 59 continuation coverage who are enrolled in an insurance plan 60 offered by the state group insurance program.

61 <u>(1) (k)</u> "State group health insurance plan or plans" or 62 "state plan or plans" means the state self-insured health 63 insurance plan or plans offered to state officers and employees, 64 retired state officers and employees, <u>eligible former employees</u>, 65 and surviving spouses of deceased state officers, and employees, 66 <u>and eligible former employees under pursuant to</u> this section.

(n) (m) "State group insurance program" or "programs" means 67 68 the package of insurance plans offered to state officers and 69 employees, retired state officers and employees, eligible former 70 employees, and surviving spouses of deceased state officers, and employees, and eligible former employees under pursuant to this 71 72 section, including the state group health insurance plan or 73 plans, health maintenance organization plans, TRICARE 74 supplemental insurance plans, and other plans required or authorized by law. 75

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76 (p) (o) "Surviving spouse" means the widow or widower of a deceased state officer, full-time state employee, part-time state employee, eligible former employee, or retiree if such widow or widower was covered as a dependent under the state group health insurance plan, TRICARE supplemental insurance plan, or a health maintenance organization plan established under pursuant to this section at the time of the death of the deceased officer, employee, eligible former employee, or retiree. The term "surviving spouse" also means any widow or widower who is receiving or eligible to receive a monthly state warrant from a state retirement system as the beneficiary of a state officer, full-time state employee, or retiree who died prior to July 1, 1979. For the purposes of this section, any such widow or widower shall cease to be a surviving spouse upon his or her remarriage.

91

(3) STATE GROUP INSURANCE PROGRAM.-

92 (d)1. Notwithstanding chapter 287 and the authority of the 93 department, for the purpose of protecting the health of, and 94 providing medical services to, state employees and eligible 95 former employees participating in the state group insurance 96 program, the department may contract to retain the services of 97 professional administrators for the state group insurance 98 program. The agency shall follow good purchasing practices of 99 state procurement to the extent practicable under the circumstances. 100

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101 Each vendor in a major procurement, and any other 2. 102 vendor if the department deems it necessary to protect the 103 state's financial interests, shall, at the time of executing any 104 contract with the department, post an appropriate bond with the 105 department in an amount determined by the department to be 106 adequate to protect the state's interests but not higher than 107 the full amount estimated to be paid annually to the vendor 108 under the contract.

3. Each major contract entered into by the department <u>under pursuant to</u> this section <u>must</u> shall contain a provision for payment of liquidated damages to the department for material noncompliance by a vendor with a contract provision. The department may require a liquidated damages provision in any contract if the department deems it necessary to protect the state's financial interests.

116 4. Section 120.57(3) applies to the department's 117 contracting process, except:

a. A formal written protest of any decision, intended
decision, or other action subject to protest <u>must shall</u> be filed
within 72 hours after receipt of notice of the decision,
intended decision, or other action.

b. As an alternative to any provision of s. 120.57(3), the department may proceed with the bid selection or contract award process if the director of the department sets forth, in writing, particular facts and circumstances that demonstrate the

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126 necessity of continuing the procurement process or the contract 127 award process in order to avoid a substantial disruption to the 128 provision of any scheduled insurance services.

5. The department shall make arrangements as necessary to contribute claims data of the state group health insurance plan to the contracted vendor selected by the Agency for Health Care Administration <u>under pursuant to</u> s. 408.05(3)(c).

6. Each contracted vendor for the state group health insurance plan shall contribute Florida claims data to the contracted vendor selected by the Agency for Health Care Administration <u>under pursuant to</u> s. 408.05(3)(c).

Participation by individuals in the program is 137 (a) 138 available to all state officers, full-time state employees, and 139 part-time state employees, and eligible former employees and is 140 voluntary. Participation in the program is also available to 141 retired state officers and employees who elect at the time of retirement to continue coverage under the program, but may elect 142 143 to continue all or only part of the coverage they had at the 144 time of retirement. A surviving spouse may elect to continue 145 coverage only under a state group health insurance plan, a 146 TRICARE supplemental insurance plan, or a health maintenance 147 organization plan.

148 (j) For the 2020 plan year and each plan year thereafter, 149 health plans shall be offered in the following benefit levels: 150 1. Platinum level, which shall have an actuarial value of

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151	at least 90 percent.						
152	2. Gold level, which shall have an actuarial value of at						
153	least 80 percent.						
154	3. Silver level, which shall have an actuarial value of at						
155	least 70 percent.						
156	4. Bronze level, which shall have an actuarial value of at						
157	least 60 percent.						
158	(4) PAYMENT OF PREMIUMS; CONTRIBUTION BY STATE; LIMITATION						
159	ON ACTIONS TO PAY AND COLLECT PREMIUMS						
160	(e) <u>A</u> No state contribution for the cost of any part of						
161	1 the premium <u>may not</u> shall be made for retirees <u>,</u> or surviving						
162	spouses, or eligible former employees for any type of coverage						
163	3 under the state group insurance program. However, any state						
164	agency that employs a full-time law enforcement officer,						
165	correctional officer, or correctional probation officer who is						
166	killed or suffers catastrophic injury in the line of duty as						
167	provided in s. 112.19, or a full-time firefighter who is killed						
168	or suffers catastrophic injury in the line of duty as provided						
169	in s. 112.191, shall pay the entire premium of the state group						
170	health insurance plan selected for the employee's surviving						
171	spouse until remarried, and for each dependent child of the						
172	employee, subject to the conditions and limitations set forth in						
173	s. 112.19 or s. 112.191, as applicable.						
174	(13) OTHER-PERSONAL-SERVICES EMPLOYEES (OPS)						
175	(c) The initial measurement period used to determine						
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176	whether an employee hired before April 1, 2013, and paid from					
177	OPS funds is a full-time employee described in subparagraph					
178	(2)(d)1. subparagraph (2)(c)1. is the 6-month period from April					
179	1, 2013, through September 30, 2013.					
180	(d) All other measurement periods used to determine					
181	whether an employee paid from OPS funds is a full-time employee					
182	described in <u>paragraph (2)(d)</u> paragraph (2)(c) must be for 12					
183	consecutive months.					
184	Section 2. Section 110.12306, Florida Statutes, is created					
185	to read:					
186	110.12306 Anti-fraud investigative units					
187	(1) As used in this section, the term "designated anti-					
188	fraud unit" means a distinct unit within the Division of State					
189	Group Insurance which is made up of employees whose principal					
190	responsibilities are the investigation and disposition of claims					
191	and who are also assigned to investigate fraud.					
192	(2) By December 31, 2022, the division:					
193	(a)1. Shall establish and maintain a designated anti-fraud					
194	unit to investigate and report possible fraudulent insurance					
195	acts by insureds, persons making claims for services against the					
196	State Employees Health Insurance Trust Fund, or vendors under					
197	contract with the division.					
198	2. May contract with other entities to investigate and					
199	report possible fraudulent insurance acts by insureds, persons					
200	making claims for services against the State Employees Health					

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201 Insurance Trust Fund, or vendors under contract with the 202 division. 203 (b) Shall adopt an anti-fraud plan. 204 (c) Shall designate staff with the primary responsibility 205 of implementing the requirements of this section. 206 Section 3. Section 110.12313, Florida Statutes, is created 207 to read: 208 110.12313 Open enrollment period for eligible former 209 employees.-On or after October 1, 2022, for the plan year 210 beginning January 1, 2023, the Department of Management Services shall provide an open enrollment period for eligible former 211 212 employees who want to obtain health insurance coverage under s. 213 110.123. The options offered during the open enrollment period 214 must provide the same health insurance coverage as the coverage 215 provided to active employees and under the same premium payment 216 conditions in effect for early retirees. The department shall 217 continue to provide an open enrollment period for eligible 218 former employees for each successive plan year. An eligible 219 former employee who wishes to obtain health insurance coverage 220 under s. 110.123 must enroll in the state group insurance 221 program within 24 months after his or her date of separation 222 from employment. 223 Section 4. (1) The following rules, as filed for adoption 224 with the Department of State pursuant to the certification 225 packages dated October 1, 2019, and November 3, 2021, are

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226 ratified for the sole and exclusive purpose of satisfying any 227 condition on their effectiveness imposed under s. 228 110.123(3)(h)2.d., Florida Statutes: (a) Rule 60P-1.003, Florida Administrative Code, entitled 229 230 Definitions. 231 (b) Rule 60P-2.002, Florida Administrative Code, entitled 232 Eligibility and Enrollment. 233 (c) Rule 60P-2.003, Florida Administrative Code, entitled 234 Changes in Coverage. 235 (2) This section serves no other purpose and may not be 236 codified in the Florida Statutes. The enactment and effective 237 dates of this act shall be noted in the Florida Administrative 238 Code, the Florida Administrative Register, or both, as 239 appropriate after the act becomes law. This section does not 240 alter rulemaking authority delegated by prior law, does not 241 constitute legislative preemption of or exception to any law 242 governing adoption or enforcement of the rule cited, and is 243 intended to preserve the status of any cited rule as a rule 244 under chapter 120, Florida Statutes. This section does not cure 245 any rulemaking defect or preempt any challenge based on lack of authority or a violation of the legal requirements governing the 246 247 adoption of any rule cited. 248 (3) This section shall take effect upon becoming a law. 249 Section 5. Except as otherwise expressly provided in this act and except for this section, which shall take effect upon 250 Page 10 of 11

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251 this act becoming a law, this act shall take effect July 1, 252 2022.

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