

By the Committee on Governmental Oversight and Accountability

585-01994-22

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1 A bill to be entitled
2 An act relating to the state group health insurance
3 program; amending s. 110.123, F.S.; requiring the
4 Department of Management Services to provide an online
5 education component relating to all health insurance
6 plans in the State Group Insurance Program; requiring
7 the department to contract with the State Board of
8 Administration to provide retirement and health
9 insurance planning education to members of the state
10 group insurance program; setting a minimum monthly
11 employer contribution to health savings accounts for
12 certain employees; establishing new preventive care
13 benefits to be covered by high deductible health
14 insurance plans in the state group insurance program
15 without the member meeting the required deductible,
16 beginning with a specified plan year; providing an
17 effective date.

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19 Be It Enacted by the Legislature of the State of Florida:
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21 Section 1. Paragraph (a) of subsection (12) of section
22 110.123, Florida Statutes, is amended, and paragraphs (j) and
23 (k) of subsection (5) and subsection (14) are added to that
24 section, to read:

25 110.123 State group insurance program.—

26 (5) DEPARTMENT POWERS AND DUTIES.—The department is
27 responsible for the administration of the state group insurance
28 program. The department shall initiate and supervise the program
29 as established by this section and shall adopt such rules as are

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30 necessary to perform its responsibilities. To implement this
31 program, the department shall, with prior approval by the
32 Legislature:

33 (j) Provide to employees eligible to participate in the
34 state group insurance program an online education component with
35 impartial and balanced information about plan choices, including
36 high deductible health plans and associated health savings
37 accounts.

38 (k) Contract with the State Board of Administration and its
39 financial advisors to provide, as an elective benefit at no cost
40 to the enrollees, at least 2 hours per plan year of tax and
41 financial education relating to retirement and health care
42 planning.

43
44 Final decisions concerning enrollment, the existence of
45 coverage, or covered benefits under the state group insurance
46 program shall not be delegated or deemed to have been delegated
47 by the department.

48 (12) HEALTH SAVINGS ACCOUNTS.—The department is authorized
49 to establish health savings accounts for full-time and part-time
50 state employees in association with a health insurance plan
51 option authorized by the Legislature and conforming to the
52 requirements and limitations of federal provisions relating to
53 the Medicare Prescription Drug, Improvement, and Modernization
54 Act of 2003.

55 (a) A member participating in this health insurance plan
56 option is eligible to:

57 1. Receive an employer contribution into the employee's
58 health savings account from the State Employees Health Insurance

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59 Trust Fund in an amount to be determined by the Legislature. A
60 member is not eligible for an employer contribution upon
61 termination of employment. For the 2013-2014 fiscal year, the
62 state's monthly contribution for employees having individual
63 coverage shall be \$41.66 and the monthly contribution for
64 employees having family coverage shall be \$83.33. For the 2014-
65 2015 fiscal year and thereafter, the state's contribution from
66 the trust fund into the member's health savings account shall be
67 set in the annual General Appropriations Act. However, in the
68 2023 plan year and thereafter, for a member whose annual rate of
69 pay is \$38,000 or less, the state's monthly contribution from
70 the trust fund into a member's health savings account shall be
71 no less than \$55 for an employee having individual coverage and
72 \$110 for an employee having family coverage.

73 2. Deposit the member's own funds into a health savings
74 account.

75 (14) Beginning with the 2023 plan year, a high deductible
76 health plan offered under the state group insurance program must
77 provide coverage for preventive care benefits relating to
78 specific chronic conditions before the member fully meets the
79 deductible otherwise required for coverage by the plan. For
80 purposes of this subsection, the following services and items,
81 when prescribed to treat diagnoses of specified chronic
82 conditions, will be covered as preventive care:

83 (a) Angiotensin-converting enzyme inhibitors for a member
84 diagnosed with congestive heart failure, diabetes, or coronary
85 artery disease.

86 (b) Anti-resorptive therapy for a member diagnosed with
87 osteoporosis or osteopenia.

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88 (c) Beta-blockers for a member diagnosed with congestive
89 heart failure or coronary artery disease.

90 (d) Blood pressure monitors for a member diagnosed with
91 hypertension.

92 (e) Inhaled corticosteroids and peak flow meters for a
93 member diagnosed with asthma.

94 (f) Insulin, other glucose-lowering agents, retinopathy
95 screening, glucometers, and hemoglobin A1C testing for a member
96 diagnosed with diabetes.

97 (g) International normalized ratio testing for a member
98 diagnosed with liver disease or a bleeding disorder.

99 (h) Low-density lipoprotein testing for a member diagnosed
100 with heart disease.

101 (i) Selective serotonin reuptake inhibitors for a member
102 diagnosed with depression.

103 (j) Statins for a member diagnosed with heart disease or
104 diabetes.

105 Section 2. This act shall take effect July 1, 2022.