

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative Bogdanoff offered the following:

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3 **Amendment (with title amendment)**

4 Between lines 199 and 200, insert:

5 Section 4. Subsection (9) of section 627.736, Florida
6 Statutes, is amended to read:

7 627.736 Required personal injury protection benefits;
8 exclusions; priority; claims.—

9 (9) An insurer may negotiate and enter into contracts with
10 licensed health care providers for the benefits described in
11 this section, referred to in this section as "preferred
12 providers," which shall include health care providers licensed
13 under chapters 458, 459, 460, 461, and 463. The insurer may
14 provide an option to an insured to use a preferred provider at
15 the time of purchase of the policy for personal injury
16 protection benefits, if the requirements of this subsection are
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17 met. If the insured elects to use a provider who is not a
18 preferred provider, whether the insured purchased a preferred
19 provider policy or a nonpreferred provider policy, the medical
20 benefits provided by the insurer shall be as required by this
21 section. If the insured elects to use a provider who is a
22 preferred provider, the insurer may pay medical benefits in
23 excess of the benefits required by this section and may waive or
24 lower the amount of any deductible that applies to such medical
25 benefits. Alternatively, or in addition to such benefits or
26 waiver, the insurer may provide an actuarially appropriate
27 premium discount as specified in an approved rate filing to a
28 policyholder who selects the preferred provider option. If the
29 preferred provider option provides for a premium discount, the
30 policy may provide that charges for nonemergency services
31 provided within this state are payable only if provided by
32 members of the preferred provider network, except if there is no
33 member of the preferred provider network located within 15 miles
34 of the insured's place of residence whose scope of practice
35 includes the required services. If the insurer offers a
36 preferred provider policy to a policyholder or applicant, it
37 must also offer a nonpreferred provider policy. The insurer
38 shall provide each policyholder with a current roster of
39 preferred providers in the county in which the insured resides
40 at the time of purchase of such policy, and shall make such list
41 available for public inspection during regular business hours at
42 the principal office of the insurer within the state. The
43 insurer may contract with a health insurer for the right to use
44 an existing preferred provider network to implement the

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45 preferred provider option. If the insurers enter into such
46 contract, the health insurer must notify all members of the
47 network and provide network members with an opportunity to opt
48 out of the network for purposes of treatment or services under
49 this subsection. Any other arrangement is subject to the
50 approval of the Office of Insurance Regulation.

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T I T L E A M E N D M E N T

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Remove line 64 and insert:

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information at the insurer's expense; amending s. 627.736, F.S.;

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revising provisions relating to preferred provider arrangements

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to provide for premium discounts; providing an