1 A bill to be entitled 2 An act relating to solvency of health maintenance and 3 prepaid limited health service organizations; amending 4 s. 636.004, F.S.; defining the term "life and health 5 insurer"; amending s. 636.043, F.S.; revising 6 requirements for annual, quarterly, and miscellaneous 7 reports by a prepaid limited health service 8 organization; amending s. 641.19, F.S.; defining the 9 term "medical services organization"; amending s. 10 641.201, F.S.; providing for applicability; providing that health maintenance organizations are insurers for 11 12 the purposes of certain statutes; providing 13 alternative calculations for determining certain 14 insurance premiums of health maintenance 15 organizations; defining the term "life and health insurer"; amending s. 641.225, F.S.; revising certain 16 surplus requirements for health maintenance 17 organizations; conforming provisions to changes made 18 19 by the act; amending s. 641.26, F.S.; revising 20 requirements for annual and quarterly reports by a 21 health maintenance organization; amending s. 641.27, 2.2 F.S.; revising provisions regarding payment of expenses for examinations of health maintenance 23 24 organizations; amending s. 641.35, F.S.; providing 25 that certain assets of a health maintenance 26 organization may not be considered assets for purposes

Page 1 of 12

of determining the financial condition of the organization; repealing s. 641.365, F.S., relating to payment of dividends by health maintenance organizations; providing an effective date.

3132

Be It Enacted by the Legislature of the State of Florida:

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

51

52

Section 1. Section 636.004, Florida Statutes, is amended to read:

636.004 Applicability of other laws.-

- (1) Except as provided in this act, prepaid limited health service organizations are governed by the provisions of this act and are exempt from the Florida Insurance Code unless specifically referenced.
- (2) For purposes of s. 624.4085, the term "life and health insurer" includes a prepaid limited health service organization, as defined in s. 636.003, initially authorized in this state on or after July 1, 2015, and not authorized in any other state, jurisdiction, or country.

Section 2. Subsections (1) and (4) of section 636.043, Florida Statutes, are amended to read:

636.043 Annual, quarterly, and miscellaneous reports.—

(1) Each prepaid limited health service organization must file an annual report with the office on or before March 1 of each year showing its condition on the last day of the preceding calendar year. The report must be annually, within 3 months

Page 2 of 12

after the end of its fiscal year, a report verified by the oath of at least two officers covering the preceding calendar year.

Any organization licensed prior to October 1, 1993, shall not be required to file a financial statement, as required by paragraph (2) (a), based on statutory accounting principles until the first annual report for fiscal years ending after December 31, 1994.

- organization must file a quarterly report for the first three calendar quarters of each year. The statement for the quarter ending March 31 must be filed with the office on or before May 15, the statement for the quarter ending June 30 must be filed with the office on or before August 15, and the statement for the quarter ending September 30 must be filed with the office on or before August 15, and the statement for the quarter ending September 30 must be filed with the office on or before November 15 each calendar quarter within 45 days after the end of the quarter. The report shall contain:
- (a) A financial statement prepared in accordance with statutory accounting principles. Any entity licensed before October 1, 1993, shall not be required to file a financial statement based on statutory accounting principles until the first quarterly filing after the entity files its annual financial statement based on statutory accounting principles as required by subsection (1).
 - (b) A listing of providers.

(c) Such other information relating to the performance of the prepaid limited health service organization as is reasonably required by the commission or office.

Page 3 of 12

Section 3. Subsection (23) is added to section 641.19, Florida Statutes, to read:

- 641.19 Definitions.—As used in this part, the term:
- (23) "Medical services organization," means an entity providing one or more medical practice management services to health care providers, including, but not limited to, administrative, financial, operational, personnel, records management, educational, compliance, or managed care services.
- Section 4. Section 641.201, Florida Statutes, is amended to read:
 - 641.201 Applicability of other laws.-

- (1) Except as provided in this part, health maintenance organizations shall be governed by the provisions of this part and part III of this chapter and shall be exempt from all other provisions of the Florida Insurance Code except those provisions of the Florida Insurance Code, including provisions specified in this section, that are explicitly made applicable to health maintenance organizations.
- (2) (a) Health maintenance organizations shall be considered insurers for purposes of ss. 624.4073, 628.231, 628.371, 628.381, and 628.391.
- (b) Health maintenance organizations shall be considered insurers for purposes of s. 624.4095, except that in calculating the premium to surplus ratio of a health maintenance organization pursuant to s. 624.4095(1), actual or projected risk revenue shall be added to actual or projected written

Page 4 of 12

106

107

108

109

110

111

112

113

114

115116

117

118

119

120

125

126

127

128

129

- (3) For purposes of s. 624.4085, the term "life and health insurer" shall also include a health maintenance organization and a prepaid limited health service organization, as defined in s. 636.003, initially authorized in this state on or after July 1, 2015, and not authorized in any other state, jurisdiction, or country.
- Section 5. Subsections (1) and (2) of section 641.225, Florida Statutes, are amended to read:
 - 641.225 Surplus requirements.—
 - (1) (a) Each health maintenance organization holding a certificate of authority issued before July 1, 2015, shall at all times maintain a minimum surplus in an amount that is the greater of:
 - 1. Ten \$1,500,000, or 10 percent of total liabilities;, or
 - 2. Two 2 percent of total annualized premium; or
- 3. \$1.5 million until June 30, 2017; \$3 million on or

 after July 1, 2017, and until June 30, 2021; \$6 million on or

 after July 1, 2021, and until June 30, 2025; and \$10 million on

 or after July 1, 2025.
 - (b) Each health maintenance organization holding a certificate of authority issued on or after July 1, 2015, shall at all times maintain a minimum surplus in an amount that is the greater of:
 - 1. Ten percent of total liabilities;
- 2. Two percent of total annualized premium; or

Page 5 of 12

131	3. Ten million.
132	(2) The office shall not issue a certificate of authority,
133	except as provided in subsection (3), unless the health
134	maintenance organization has a minimum surplus in an amount
135	which is the greater of:
136	(a) Ten percent of their total liabilities based on their
137	startup projection as set forth in this part;
138	(b) Two percent of their total projected premiums based on
139	their startup projection as set forth in this part; or
140	(c) \$1,500,000, plus all startup losses, excluding
141	profits, projected to be incurred on their startup projection
142	until the projection reflects statutory net profits for 12
143	consecutive months.
144	Section 6. Subsections (1), (3), and (5) of section
145	641.26, Florida Statutes, are amended to read:
146	641.26 Annual and quarterly reports
147	(1) Every health maintenance organization shall file an
148	annual report with the office on or before March 1 of each year
149	showing its condition on the last day of the preceding calendar
150	year. The report must be, annually within 3 months after the end
151	of its fiscal year, or within an extension of time therefor as
152	the office, for good cause, may grant, in a form prescribed by

Page 6 of 12

corporation, of two persons who are principal managing directors

of the affairs of the organization and τ properly notarized on a

the commission, file a report with the office, verified by the

oath of two officers of the organization or, if not a

CODING: Words stricken are deletions; words underlined are additions.

153

154

155

156

form prescribed by the commission. For good cause, the office may grant the organization an extension of time to file the report. The report must , showing its condition on the last day of the immediately preceding reporting period. Such report shall include:

- (a) A financial statement of the health maintenance organization filed by electronic means in a computer-readable form using a format acceptable to the office.
- (b) A financial statement of the health maintenance organization filed on forms acceptable to the office.
- (c) An audited financial statement of the health maintenance organization, including its balance sheet and a statement of operations for the preceding year certified by an independent certified public accountant, prepared in accordance with statutory accounting principles.
- $\underline{\text{(c)}}$ The number of health maintenance contracts issued and outstanding and the number of health maintenance contracts terminated.
- (d) (e) The number and amount of damage claims for medical injury initiated against the health maintenance organization and any of the providers engaged by it during the reporting year, broken down into claims with and without formal legal process, and the disposition, if any, of each such claim.
 - (e) (f) An actuarial certification that:
- 1. The health maintenance organization is actuarially sound, which certification $\underline{\text{must}}$ $\underline{\text{shall}}$ consider the rates,

Page 7 of 12

benefits, and expenses of, and any other funds available for the payment of obligations of, the organization.

- 2. The rates being charged or to be charged are actuarially adequate to the end of the period for which rates have been guaranteed.
- 3. The health maintenance organization has adequately provided for incurred but not reported claims and claims reported but not fully paid have been adequately provided for.
- 4. The health maintenance organization has adequately provided for all obligations required by s. 641.35(3)(a).
- (g) A report prepared by the certified public accountant and filed with the office describing material weaknesses in the health maintenance organization's internal control structure as noted by the certified public accountant during the audit. The report must be filed with the annual audited financial report as required in paragraph (c). The health maintenance organization shall provide a description of remedial actions taken or proposed to correct material weaknesses, if the actions are not described in the independent certified public accountant's report.
- $\underline{\text{(f)}}$ (h) Such other information relating to the performance of health maintenance organizations as is required by the commission or office.
- (3) (a) Every health maintenance organization <u>must shall</u> file quarterly, for the first three calendar quarters of each year, an unaudited financial statement of the organization as

Page 8 of 12

described in paragraphs (1)(a) and (b). The statement for the quarter ending March 31 <u>must shall</u> be filed <u>with the office</u> on or before May 15, the statement for the quarter ending June 30 <u>must shall</u> be filed <u>with the office</u> on or before August 15, and the statement for the quarter ending September 30 <u>must shall</u> be filed <u>with the office</u> on or before November 15. The quarterly report <u>must shall</u> be verified by the oath of two officers of the organization and, properly notarized.

- (b) Every health maintenance organization must file annually, for the preceding calendar year ending December 31, an audited financial statement of the organization. The statement must be filed with the office on or before the following June 1. The office may require a health maintenance organization to file an audited financial statement earlier than June 1 upon notifying the organization at least 90 days in advance. The audited financial statement must include a balance sheet and statement of operations for the preceding year certified by an independent certified public accountant, prepared in accordance with statutory accounting principles, and, beginning with the financial statement filed for December 31, 2015, subject to commission rules applicable to insurer audits.
- (5) Each authorized health maintenance organization <u>must</u> shall retain an independent certified public accountant, referred to in this section as "CPA," who agrees by written contract with the health maintenance organization to comply with the provisions of this part.

Page 9 of 12

(a) The <u>certified public accountant must CPA shall</u> provide to the <u>health maintenance organization</u> HMO audited financial statements consistent with this part.

- (b) Any determination by the <u>certified public accountant</u>

 CPA that the health maintenance organization does not meet

 minimum surplus requirements as set forth in this part <u>must</u>

 shall be stated <u>in writing</u> by the <u>certified public accountant</u>

 CPA, in writing, in the audited financial statement.
- (c) The completed work papers and any written communications between the <u>certified public accountant CPA</u> firm and the health maintenance organization relating to the audit of the health maintenance organization <u>must shall</u> be made available for review on a visual-inspection-only basis by the office at the offices of the health maintenance organization, at the office, or at any other reasonable place as mutually agreed between the office and the health maintenance organization. The <u>certified public accountant CPA</u> must retain for review the work papers and written communications for a period of <u>at least not less than</u> 6 years.
- (d) The <u>certified public accountant must CPA shall</u> provide to the office a written report describing material weaknesses in the health maintenance organization's internal control structure as noted during the audit. The report must be filed with the <u>annual audited financial statement as required in paragraph</u>
 (3) (b). The health maintenance organization must provide a description of remedial actions taken or proposed to correct

Page 10 of 12

material weaknesses if the actions are not described in the report.

261

262

263

264

265

266

267

268269

270

271

272

273

274

275

276

277

278

279

280

281

282

283

284

285

286

Section 7. Subsection (1) of section 641.27, Florida Statutes, is amended to read:

641.27 Examination by the office department.

The office shall examine the affairs, transactions, accounts, business records, and assets of any health maintenance organization as often as it deems it expedient for the protection of the people of this state, but not less frequently than once every 5 years. However, except when the medical records are requested and copies furnished pursuant to s. 456.057, medical records of individuals and records of physicians providing service under contract to the health maintenance organization shall not be subject to audit, although they may be subject to subpoena by court order upon a showing of good cause. For the purpose of examinations, the office may administer oaths to and examine the officers and agents of a health maintenance organization concerning its business and affairs. The examination of each health maintenance organization by the office, including payment of examination expenses, shall be subject to the same terms and conditions as apply to insurers under chapter 624. In no event shall expenses of all examinations exceed a maximum of \$50,000 for any 1-year period. Any rehabilitation, liquidation, conservation, or dissolution of a health maintenance organization shall be conducted under the supervision of the department, which shall have all power with

Page 11 of 12

respect thereto granted to it under the laws governing the rehabilitation, liquidation, reorganization, conservation, or dissolution of life insurance companies.

- Section 8. Paragraph (j) is added to subsection (2) of section 641.35, Florida Statutes, to read:
 - 641.35 Assets, liabilities, and investments.-

287

288

289

290

291292

293

294

295

296

297

298

299

300

301

302

- (2) ASSETS NOT ALLOWED.—In addition to assets impliedly excluded by the provisions of subsection (1), the following assets expressly shall not be allowed as assets in any determination of the financial condition of a health maintenance organization:
- (j) Beginning January 1, 2016, accounts receivable from a medical services organization, as defined in s. 641.19, pursuant to a contract with the health maintenance organization.
 - Section 9. <u>Section 641.365, Florida Statutes, is repealed.</u>
 Section 10. This act shall take effect July 1, 2015.

Page 12 of 12