

HB 885

2009

1                   A bill to be entitled  
2           An act relating to state university student health  
3           insurance; creating s. 1006.72, F.S.; providing a short  
4           title and legislative intent; providing requirements for  
5           state universities with health centers; authorizing a  
6           state university to require student proof of health  
7           insurance coverage if certain conditions are met or to  
8           require the purchase of university-sponsored or other  
9           insurance in certain circumstances; requiring student  
10          responsibility for resolving outstanding balances owed a  
11          university health center; requiring the cost of health  
12          insurance to be included in calculation of financial aid  
13          awards; providing requirements for acceptable alternative  
14          insurance; providing requirements for proof of coverage;  
15          providing requirements for university-sponsored insurance  
16          providers; requiring annual reporting by state  
17          universities; providing duties of the Board of Governors  
18          and the Office of Insurance Regulation of the Department  
19          of Financial Services; requiring the Board of Governors to  
20          review and report to the Legislature on student access to  
21          health care services; providing an effective date.

22  
23   Be It Enacted by the Legislature of the State of Florida:

24  
25           Section 1.   Section 1006.72, Florida Statutes, is created  
26   to read:

27           1006.72   State university student health insurance.--

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28        (1) TITLE.--This section may be cited as the "Student  
29 Health Insurance Protection Act."

30        (2) INTENT.--It is the intent of the Legislature that:

31        (a) State university students be provided high-quality  
32 health services.

33        (b) State universities ensure that students who have  
34 private health insurance coverage have access to health care  
35 services through billing the private insurer for services  
36 received at the university health center.

37        (c) State universities that require mandatory health  
38 insurance coverage recognize private health insurance as an  
39 alternative to the university health insurance coverage.

40        (d) State universities maximize revenues by collecting  
41 funds from student private health insurers to subsidize the  
42 operations of the university health center, to reduce health  
43 fees to the greatest extent possible, and to create student  
44 health insurance scholarships for those students without private  
45 health insurance coverage.

46        (3) STUDENT HEALTH INSURANCE.--State universities that  
47 have university health centers that employ at least one full-  
48 time physician must:

49        (a) Bill a student's private health insurer for services,  
50 prescriptions, or other items provided by the university health  
51 center for which the student is charged.

52        (b) Ensure that the university health center is considered  
53 an in-network provider with at least five of the 10 largest  
54 health insurance companies or managed care plans providing  
55 coverage in the state.

56  
57 Notwithstanding the provisions of this subsection, a student is  
58 responsible for resolving any outstanding balances owed the  
59 university health center, subject to the health insurer or  
60 managed care agreement between the university and the health  
61 insurance company or managed care plan, prior to registering for  
62 a subsequent term unless other arrangements are approved by the  
63 university.

64 (4) MANDATORY HEALTH INSURANCE COVERAGE.--

65 (a) Each state university that meets the conditions  
66 provided in this subsection may require students to provide  
67 proof of health insurance coverage as a nonacademic condition of  
68 enrollment. Such universities may offer student health insurance  
69 coverage and may require domestic students who do not otherwise  
70 provide proof of acceptable health insurance coverage to  
71 purchase the university-sponsored or other acceptable insurance  
72 as a nonacademic condition of enrollment.

73 (b) In order to require proof of health insurance coverage  
74 as a nonacademic condition of enrollment, state universities  
75 shall:

76 1. Competitively bid any university-sponsored health  
77 insurance.

78 2. Establish policies that outline acceptable alternative  
79 insurance policies as provided in subsection (5).

80 3. Bill a student's private or university-sponsored health  
81 insurer for services, prescriptions, or other items provided by  
82 the university health center for which the student is charged.

83           4. Ensure that the university health center is considered  
84 an in-network provider with at least five of the 10 largest  
85 health insurance companies or managed care plans providing  
86 coverage in the state.

87           5. Ensure that the university-sponsored insurance and  
88 acceptable alternative insurance policies as provided in  
89 subsection (5) cover, at a minimum, the level of services in the  
90 standard health benefit plan as described in s.  
91 627.6699(12)(b)4.

92           6. In order to prevent double billing, accept the student  
93 health fee as a prepaid copayment, deductible, or noncovered  
94 service, subject to provisions in any managed care agreement  
95 that expressly prohibits such prepayment.

96           7. Use at least 10 percent of all net revenues generated  
97 through insurance collections to provide subsidies for uninsured  
98 students to purchase university-sponsored insurance or an  
99 alternative insurance policy as provided in subsection (5).

100           (c) Notwithstanding this subsection, a student is  
101 responsible for resolving any outstanding balances owed the  
102 university health center, subject to the health insurer or  
103 managed care agreement between the university and the health  
104 insurance company or managed care plan, prior to registering for  
105 a subsequent term unless other arrangements are approved by the  
106 university.

107           (d) The cost of health insurance shall be deemed a "cost  
108 of attendance" as that term is used in financial aid  
109 determinations and shall be included in the calculation of  
110 financial aid awards for students.

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111 (5) ACCEPTABLE ALTERNATIVE INSURANCE.--A domestic  
112 student's health insurance policy is considered to be acceptable  
113 for purposes of this section if:

114 (a) The policy meets the level of services in the standard  
115 health benefit plan as described in s. 627.6699(12)(b)4.

116 (b) The policy provides, at a minimum, coverage from the  
117 beginning of a semester, 24 hours a day, until the beginning of  
118 the next semester.

119 (c) The university health center is included in the  
120 network of providers covered by the policy or there are network  
121 providers covered by the policy in reasonable geographic  
122 proximity to the state university campus where the student is  
123 enrolled.

124 (6) PROOF OF COVERAGE.--Proof of health insurance coverage  
125 must be provided in the manner and by the date prescribed by the  
126 state university or the university may require the student to  
127 purchase the university-sponsored health insurance pursuant to  
128 subsection (4) or acceptable alternative insurance pursuant to  
129 subsection (5).

130 (7) UNIVERSITY-SPONSORED INSURANCE PROVIDERS.--To be  
131 eligible to be considered a university-sponsored insurance  
132 provider for student health care services, the insurance company  
133 or managed care plan must:

134 (a) Fulfill the requirements to serve as an insurance  
135 carrier, including an entity that provides health benefit plans  
136 in this state, an authorized insurer, a health maintenance  
137 organization, or any other person providing a health benefit

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138 plan that is subject to insurance regulation in this state as  
139 defined in s. 627.6699.

140 (b) Comply with the loss ratios established by the Office  
141 of Insurance Regulation of the Department of Financial Services,  
142 which require that at least 75 percent of the premiums students  
143 pay from any insurance purchased through the university must be  
144 spent on medical services. The loss ratio shall be assessed  
145 under the Office of Insurance Regulation's processes to measure  
146 loss ratios in the small group carrier insurance programs.

147 (8) REPORTING REQUIREMENTS.--By August 1 of each year,  
148 each state university shall report all revenue generated through  
149 private, university-sponsored, and acceptable alternative  
150 student health insurance billing; expenses associated with  
151 insurance billing from the previous fiscal year; information on  
152 health insurance and managed care plans offered by the  
153 university as university-sponsored student health insurance,  
154 including fiscal status and the loss ratios of each and in the  
155 aggregate for the university-sponsored plans, as defined by the  
156 Office of Insurance Regulation of the Department of Financial  
157 Services; the number of uninsured students each university has  
158 enrolled; the subsidies provided to uninsured students for  
159 health insurance, including the total dollar amount and the  
160 percentage of revenue, through insurance collections used to  
161 subsidize insurance purchase pursuant to subparagraph (4)(b)7.;  
162 and any other information deemed necessary by the Office of  
163 Insurance Regulation to ensure student access to health care  
164 services through health insurance.

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165       (9) PREMIUM REDUCTIONS AND ENHANCED BENEFITS.--The Board  
166 of Governors shall work with the state universities, the Office  
167 of Insurance Regulation of the Department of Financial Services,  
168 and the health insurance providers in the state to reduce  
169 premiums and enhance benefits for the health insurance coverage  
170 available to students attending state universities.

171       (10) REVIEW AND REPORT.--The Board of Governors shall  
172 review student access to health care services as implemented  
173 according to this section, including the scope and use of  
174 services of uninsured students, the means to improve access to  
175 health care for students, the use of revenues from billing  
176 health insurance carriers, the success of university health  
177 centers in becoming in-network providers with major health  
178 insurance carriers in the state, and proposals to improve the  
179 benefits and efficiency of student access to health care  
180 services, and shall provide a report to the President of the  
181 Senate and the Speaker of the House of Representatives by  
182 January 31, 2012.

183       Section 2. This act shall take effect July 1, 2009.