

By the Committees on Fiscal Policy; and Health Policy; and
Senators Grimsley and Gaetz

594-03750-16

2016132c2

1 A bill to be entitled

2 An act relating to direct primary care; creating s.
3 624.27, F.S.; defining terms; specifying that a direct
4 primary care agreement does not constitute insurance
5 and is not subject to ch. 636, F.S., relating to
6 prepaid limited health service organizations and
7 discount medical plan organizations, or any other
8 chapter of the Florida Insurance Code; specifying that
9 entering into a direct primary care agreement does not
10 constitute the business of insurance and is not
11 subject to ch. 636, F.S., or any other chapter of the
12 code; providing that certain certificates of authority
13 and licenses are not required to market, sell, or
14 offer to sell a direct primary care agreement;
15 specifying requirements for a direct primary care
16 agreement; providing an effective date.

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

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20 Section 1. Section 624.27, Florida Statutes, is created to
21 read:

22 624.27 Application of code as to direct primary care
23 agreements.—

24 (1) As used in this section, the term:

25 (a) "Direct primary care agreement" means a contract
26 between a primary care provider and a patient, the patient's
27 legal representative, or an employer which meets the
28 requirements specified under subsection (4) and does not
29 indemnify for services provided by a third party.

30 (b) "Primary care provider" means a health care
31 practitioner licensed under chapter 458, chapter 459, chapter

594-03750-16

2016132c2

32 460, or chapter 464, or a primary care group practice that
33 provides medical services to patients which are commonly
34 provided without referral from another health care provider.

35 (c) "Primary care service" means the screening, assessment,
36 diagnosis, and treatment of a patient for the purpose of
37 promoting health or detecting and managing disease or injury
38 within the competency and training of the primary care provider.

39 (2) A direct primary care agreement does not constitute
40 insurance and is not subject to chapter 636 or any other chapter
41 of the Florida Insurance Code. The act of entering into a direct
42 primary care agreement does not constitute the business of
43 insurance and is not subject to chapter 636 or any other chapter
44 of the Florida Insurance Code.

45 (3) A primary care provider or an agent of a primary care
46 provider is not required to obtain a certificate of authority or
47 license under chapter 636 or any other chapter of the Florida
48 Insurance Code to market, sell, or offer to sell a direct
49 primary care agreement.

50 (4) For purposes of this section, a direct primary care
51 agreement must:

52 (a) Be in writing.

53 (b) Be signed by the primary care provider or an agent of
54 the primary care provider and the patient, the patient's legal
55 representative, or an employer.

56 (c) Allow a party to terminate the agreement by giving the
57 other party at least 30 days' advance written notice. The
58 agreement may provide for immediate termination due to a
59 violation of the physician-patient relationship or a breach of
60 the terms of the agreement.

594-03750-16

2016132c2

61 (d) Describe the scope of primary care services that are
62 covered by the monthly fee.

63 (e) Specify the monthly fee and any fees for primary care
64 services not covered by the monthly fee.

65 (f) Specify the duration of the agreement and any automatic
66 renewal provisions.

67 (g) Offer a refund to the patient of monthly fees paid in
68 advance if the primary care provider ceases to offer primary
69 care services for any reason.

70 (h) Contain in contrasting color and in not less than 12-
71 point type the following statements on the same page as the
72 applicant's signature:

73 1. The agreement is not health insurance and the primary
74 care provider will not file any claims against the patient's
75 health insurance policy or plan for reimbursement of any primary
76 care services covered by the agreement.

77 2. The agreement does not qualify as minimum essential
78 coverage to satisfy the individual shared responsibility
79 provision of the Patient Protection and Affordable Care Act, 26
80 U.S.C. s. 5000A.

81 Section 2. This act shall take effect July 1, 2016.