



DEPARTMENT OF FINANCIAL SERVICES

Division of Rehabilitation and Liquidation  
[www.myfloridacfo.com/division/receiver](http://www.myfloridacfo.com/division/receiver)

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**Si necesita una versión en español de este aviso, visite el sitio web de la  
División de Rehabilitación y Liquidación [www.myfloridacfo.com/division/receiver](http://www.myfloridacfo.com/division/receiver).**  
(If you need a Spanish version of this notice, visit the Receiver's website at [www.myfloridacfo.com/division/receiver](http://www.myfloridacfo.com/division/receiver))

**NOTICE TO AGENT OR BROKER – DECEMBER 12, 2014  
REGARDING THE LIQUIDATION OF FLORIDA HEALTHCARE PLUS, INC. (FHCP)**

We are sending this notice to all agents in Florida to inform them of a recent receivership. **If you are or have ever been an agent for Florida Healthcare Plus, Inc. (FHCP), you should pay particularly close attention to the following information.**

FHCP was a Florida health maintenance organization which provided health care coverage to approximately 8,847 Medicare members. On December 10, 2014, the Second Judicial Circuit Court in Tallahassee, Florida, ordered FHCP into receivership for purposes of rehabilitation, with an automatic liquidation effective at 12:01 a.m. on January 1, 2015. The Florida Department of Financial Services is the Court appointed Receiver of FHCP. A copy of the liquidation order and other relevant documents relating to FHCP are available on the Receiver's website, [www.myfloridacfo.com/division/receiver](http://www.myfloridacfo.com/division/receiver).

**All FHCP agents are advised that the liquidation order significantly affects FHCP's members and legally imposes certain obligations on the agents. The Florida Department of Financial Services, as Receiver of FHCP, expects the FHCP agents to contact their clients who are FHCP members and assist them with any questions they may have regarding the receivership proceeding.**

**POLICY CANCELLATION AND OPTIONS FOR SUBSEQUENT COVERAGE:**

By Court Order, effective at 12:01 a.m. on January 1, 2015, FHCP has been ordered liquidated. Medicare contracts and premiums are administered through the Federal Centers for Medicare & Medicaid Services (CMS). **All FHCP coverage is cancelled effective 12:01 a.m. on January 1, 2015.** CMS and the Receiver will be sending letters to the FHCP members regarding the receivership and policy cancellation. **Members are strongly encouraged to closely read the information and follow any instructions which are provided in letters received from CMS regarding their continued health care and prescription drug coverage after January 1, 2015.**

**SPECIAL ELECTION PERIOD:**

As a result of the receivership of FHCP, all beneficiaries enrolled in FHCP have a Special Election Period through February 28, 2015, to enroll in a plan of their choosing. All members who are dual eligible or those eligible for the Low Income Subsidy can enroll in another plan at any time. A beneficiary who selects another Medicare

Advantage or Medicare Advantage-Prescription Drug plan will be covered under the new plan effective the first day of the next month after they enroll. So, for example, if an FHCP member selects a new plan prior to the end of December 31, 2014, and appropriately notifies CMS, the member will be covered by the new plan effective January 1, 2015.

**FHCP members who do not select a new plan prior to January 1, 2015, will be automatically enrolled by CMS into Original Medicare with a Prescription Drug Plan. Benefits provided under Original Medicare, even with a Prescription Drug Plan, are different than those the FHCP members may have received as members of a Medicare Advantage Plan such as FHCP. FHCP members are therefore encouraged to take advantage of the Special Election Period prior to January 1, 2015 to obtain new coverage if they do not wish to be placed into Original Medicare and a Prescription Drug Plan by CMS.**

**Please note that FHCP members who made a new plan choice during Medicare Open Enrollment for coverage beginning January 1, 2015, will still be enrolled in that plan beginning January 1. These members' coverage through Florida HealthCare Plus, Inc. will continue through December 31, 2014.**

It is extremely important that the FHCP members be advised of their options as soon as possible in order to minimize any disruptions in their health care coverage. If you or your clients have any questions on these matters, please contact 1-800-MEDICARE (1-800-633-4227) for more information, 24 hours a day, 7 days a week.

#### **DURING REHABILITATION – DECEMBER 10, 2014 THROUGH DECEMBER 31, 2014:**

During the Rehabilitation period prior to entering liquidation, FHCP will continue to provide health care coverage and authorize services. Again, please note: FHCP's member contracts will terminate at 12:01 a.m. on January 1, 2015, which is the date of liquidation.

#### Consumer/Claims Calls

Consumers with questions regarding FHCP during the Rehabilitation period should visit the company's website at <http://floridahealthcareplus.com/> or call FHCP directly at the numbers or address provided below.

#### FHCP Health Plan – Direct Contact Information:

Customer Services / Main office: 1-305-888-2210 (Toll Free outside Dade County: 1-866-988-2210)

Mailing Address: 2100 Ponce De León Blvd., STE PH1, Coral Gables, FL 33134

Website: <http://floridahealthcareplus.com/>

#### **AGENT'S DUTIES TO NOTIFY FHCP MEMBERS ABOUT THE RECEIVERSHIP:**

**Pursuant to Section 631.341, Florida Statutes, FCHP agents are expected to provide a written notice of the receivership, by registered or certified mail, to FCHP policyholders whose policies have not been replaced or reinsured with a solvent authorized insurer. A copy of Section 631.341, Florida Statutes, is found at the end of this notice. At this time, the Receiver intends to send a notice of the liquidation proceedings to all FHCP members. Please note, however, that FHCP agents are still responsible for providing written notice to the members under Section 631.341, Florida Statutes. When providing notice of the January 1, 2015 liquidation to the FHCP members, agents should particularly inform them of the January 1, 2015 cancellation of their health care coverage with FHCP and the Medicare options that are available to them from CMS for alternate health care coverage from January 1, 2015.**

**AGENT’S DUTIES IN LIQUIDATION REGARDING PREMIUMS AND UNEARNED COMMISSIONS:**

The liquidation order legally imposes certain obligations on FHCP’s agents. In accordance with Section 631.155, Florida Statutes, and paragraph 17 on page 9 of the FHCP liquidation order, all premiums and unearned commissions you may have collected on behalf of FHCP must be accounted for and paid directly to the Receiver within 30 days.

**CLAIMS FOR SERVICES PROVIDED PRIOR TO THE DECEMBER 10, 2014 REHABILITATION DATE:**

**The deadline for filing claims in the FHCP receivership proceeding is 11:59:59 p.m. on December 31, 2015.**

At a later date, the Receiver will provide additional instructions to all known members, medical providers, agents, and other creditors of FHCP regarding the filing requirements. These instructions will include information on how to submit medical claims information. Information regarding the filing of claims for services provided during the Rehabilitation period will also be provided at a later date. In the interim, we are requesting that all medical providers immediately discontinue routine electronic and paper medical claim billing on all FHCP accounts for services rendered prior to December 10, 2014.

Liquidation Claims Procedure: The procedure for the filing and evaluation of claims in a liquidation is set out in Part I, Chapter 631, Florida Statutes. Assuming there are sufficient assets in the receivership, the Receiver will evaluate claims in order of their priority as set out in Section 631.271, Florida Statutes. This statute establishes a system of priorities in paying claims. When the evaluation process has been completed, the Receiver will file a report with the Court setting out our recommendations as to the amounts, if any, which should be allowed on each of the claims evaluated. Notice of the Receiver’s recommendations and the deadline for filing any objections to the recommendations will then be provided to the claimants. It is unlikely that claimants will receive any correspondence or other communication from the Receiver until that time unless the Receiver has questions regarding the claim which has been filed. This is because the Receiver is trying to minimize claims’ processing costs in order to maximize potential distribution to the claimants.

During the claims evaluation period, the Receiver may also commence litigation and/or take whatever other action is necessary to collect and maximize the assets of the receivership estate. Please note: it may be several years before distributions, if any, are made in this receivership. Distributions of assets are made on a pro rata basis in accordance with the priority of claims which is set out in Section 631.271, Florida Statutes. Those whose claims fall into lower priorities are paid only if there is money left after paying the higher priority claims. **It is too early in the receivership process for the Receiver to provide any estimate as to the timing and/or the pro rata percentage of the distributions, if any, which may be made in this receivership.**

**PLEASE NOTE:** Under Section 641.3154, Florida Statutes, members of a health maintenance organization are not liable to any provider of health care services for any services covered by the health maintenance organization. Additionally, health care providers and their representatives are prohibited from attempting to collect payment from the health maintenance organization’s members for such services.

**CONTACT INFORMATION:**

For **Medicare** information: If you need more information regarding Medicare in general, other Medicare Advantage plans, or coverage options for the former FHCP members from 12:01 a.m. on January 1, 2015, please visit [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. A Customer Service Representative will be able to answer your Medicare questions.

For **Medicare Supplement** information: If you need information regarding Medicare Supplement options, please contact the Department of Financial Services at 1-877-693-5236 (Florida only) or 850-413-3089.

For **Receivership** information: For additional information about the FHCP Receivership, or about the receivership process in general, please contact the Receiver by calling the Florida Department of Financial Services at 1-800-882-3054 (Florida only) or 850-413-3081, or use the "Contact Us" form found on the Receiver's website at [www.myfloridacfo.com/division/receiver](http://www.myfloridacfo.com/division/receiver).

### **Section 631.341, Florida Statutes**

631.341 Notice of insolvency to policyholders by insurer, general agent, or agent.—

(1) The receiver shall, immediately after appointment in any delinquency proceeding against an insurer in which the policies have been canceled, give written notice of such proceeding to each general agent and licensed agent of the insurer in this state. Each general agent and licensed agent of the insurer in this state shall forthwith give written notice of such proceeding to all subagents, producing agents, brokers, and service representatives writing business through such general agent or licensed agent, whether or not such subagents, producing agents, brokers, and servicing representatives are licensed or permitted by the insurer and whether or not they are operating under a written agency contract.

(2) Unless, within 15 days subsequent to the date of such notice, all agents referred to in subsection (1) have either replaced or reinsured in a solvent authorized insurer the insurance coverages placed by or through such agent in the delinquent insurer, such agents shall then, by registered or certified mail, send to the last known address of any policyholder a written notice of the insolvency of the delinquent insurer.

(3) The license, permit, or certificate of authority of any person, firm, or corporation which fails to comply with the provisions of this section is subject to revocation as otherwise provided by law.

(4) If such person, firm, or corporation is not licensed or permitted or the holder of a certificate of authority under any section of this code, such person, firm, or corporation, or the officers and directors thereof, are, upon failure to comply with the provisions of this section, guilty of a misdemeanor of the first degree, punishable as provided in s. [775.082](#) or by a fine of not more than \$5,000.

History.—s. 750, ch. 59-205; s. 15, ch. 70-27; s. 809(1st), ch. 82-243; s. 24, ch. 83-38; ss. 187, 188, ch. 91-108; s. 4, ch. 91-429; s. 68, ch. 2002-206.