Resolution 26-312
Preserving Physician Contract Integrity in Preferred-Provider Agreement
Florida Society of Anesthesiologists

Whereas, physicians and physician practices enter into preferred-provider contracts (PPCs) with health insurers and health plans that establish the terms for reimbursement, payment policies, administrative requirements, network participation, and patient access; and

Whereas, preferred-provider participation benefits patients by supporting access to in-network physicians, continuity of care, and lower out-of-pocket costs; and

Whereas, health insurance markets are highly concentrated, giving health insurers and health plans substantial leverage in contract negotiations with physicians and physician practices; and

Whereas, after PPCs are executed, some health insurers and health plans unilaterally change reimbursement terms, payment policies, administrative requirements, network status, tier status, or other material contract terms during the effective term of the agreement[1]; and

Whereas**,** such unilateral adverse material changes undermine the negotiated bargain, impair physician practice stability, increase administrative burden, and may threaten patient access to in-network care; and

Whereas, physicians and physician practices should be able to rely on the material terms and payment policies of PPCs during the effective term of those contracts; therefore, be it

RESOLVED, that the Florida Medical Association (FMA) seeks legislation requiring health plans and related entities to honor the material terms and payment policies of PPCs during the effective term, including, but not limited to, terms affecting reimbursement, administrative burdens, and network or tier status; and be it further

RESOLVED, that the FMA seeks statutory safeguards requiring that adverse material changes during the term of a PPCs occur only with appropriate notice and mutual agreement, and that physicians and physician practices not be penalized or retaliated against for declining such changes.

[1] [1] Henry, Tanya Albert (2026, January 21) How health-insurance consolidation hurts patients, physicians. *American Medical Association*. https://www.ama-assn.org/health-care-advocacy/access-care/how-health-insurance-consolidation-hurts-patients-physicians (Accessed 2026, June 1)

Fiscal Note:

Description	Amount	Budget Narrative
300 Staff hours	$60,000	Can be accomplished with current staff
Total	$60,000	$0 added to the operating budget

Fiscal notes are an estimate of the cost to implement a given Resolution. All Resolutions that are adopted by the House of Delegates will be referred to the FMA Committee on Finance and Appropriations for fiscal consideration.

Reference Committee: III – Legislation and Miscellaneous