By the Committee on Health Regulation; and Senators Rich, Lynn, Bennett, Aronberg, Sobel, and Gaetz

588-04448-09 2009918c1 1 A bill to be entitled 2 An act relating to the Florida Kidcare program; 3 amending s. 409.810, F.S.; correcting a cross-4 reference; amending s. 409.811, F.S.; conforming 5 cross-references; amending s. 409.812, F.S.; 6 clarifying the application of the Florida Kidcare 7 program to include all eligible uninsured, low-income 8 children; amending s. 409.813, F.S.; specifying 9 funding sources for health benefits coverage for 10 certain children; specifying program components to be 11 marketed as the Florida Kidcare program; conforming 12 cross-references; amending s. 409.8132, F.S.; revising provisions relating to penalties for nonpayment of 13 14 premiums and waiting periods for reinstatement of 15 coverage; amending s. 409.8134, F.S.; revising 16 provisions relating to enrollment in the Florida Kidcare program; amending s. 409.814, F.S.; removing a 17 18 restriction on participation in the Florida Healthy 19 Kids program; authorizing certain enrollees to opt out 20 of the Children's Medical Services network; revising 21 coverage limitations; revising restrictions on 22 enrollment of children whose coverage was voluntarily 23 canceled; providing exceptions; deleting provisions 24 that place a limit on enrollment in Medikids and the 25 Florida Healthy Kids full-pay program; requiring 26 notice to health plans and providers when a child is 27 no longer eligible for certain coverage; requiring electronic verification of applicants' income; 28 29 providing circumstances under which written

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30	documentation is required; revising the timeframe for
31	an enrollee to resolve disputes regarding the
32	withholding of benefits; amending s. 409.815, F.S.;
33	authorizing the Agency for Health Care Administration
34	to increase premium assistance payments for benefits
35	provided through Florida Kidcare Plus instead of the
36	Children's Medical Services; conforming cross-
37	references; amending ss. 409.816 and 409.817, F.S.;
38	conforming cross-references; amending s. 409.8177,
39	F.S.; revising information to be included in the
40	annual program evaluation to the Governor and
41	Legislature; amending s. 409.818, F.S.; clarifying
42	that the Department of Health is the chair of Florida
43	Kidcare coordinating council; conforming cross-
44	references; amending s. 624.91, F.S.; revising the
45	duties of the Florida Healthy Kids Corporation;
46	revising the date in which the corporation must
47	provide a study to the Legislature and the Governor;
48	correcting a cross-reference; expanding the membership
49	of the board of directors of the Florida Healthy Kids
50	Corporation; providing an effective date.
51	
52	Be It Enacted by the Legislature of the State of Florida:
53	
54	Section 1. Section 409.810, Florida Statutes, is amended to
55	read:
56	409.810 Short titleSections <u>409.810-409.821</u>
57	409.820 may be cited as the "Florida Kidcare Act."
58	Section 2. Subsections (3), (10), and (13) of section

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59	409.811, Florida Statutes, are amended to read									
60	409.811 Definitions relating to Florida Kidcare ActAs									
61	used in <u>ss. 409.810-409.821</u>									
62	(3) "Applicant" means a parent or guardian of a child or a									
63	child whose disability of nonage has been removed under chapter									
64	743, who applies for determination of eligibility for health									
65	benefits coverage under <u>ss. 409.810-409.821</u> ss. 409.810-409.820 .									
66	(10) "Enrollee" means a child who has been determined									
67	eligible for and is receiving coverage under <u>ss. 409.810-409.821</u>									
68	ss. 409.810-409.820 .									
69	<u>(14)</u> "Florida Kidcare program," "Kidcare program," or									
70	"program" means the health benefits program administered through									
71	<u>ss. 409.810-409.821</u> ss. 409.810-409.820 .									
72	Section 3. Section 409.812, Florida Statutes, is amended to									
73	read:									
74	409.812 Program created; purpose.—The Florida Kidcare									
75	program is created to provide a defined set of health benefits									
76	to previously uninsured, low-income children through the									
77	establishment of a variety of affordable health benefits									
78	coverage options from which families may select coverage and									
79	through which families may contribute financially to the health									
80	care of their children.									
81	Section 4. Section 409.813, Florida Statutes, is amended to									
82	read:									
83	409.813 <u>Health benefits coverage;</u> program components;									
84	entitlement and nonentitlement									
85	(1) The Florida Kidcare program includes health benefits									
86	coverage provided to children through the following program									
87	components, which shall be marketed as the Florida Kidcare									

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88	program:
89	(a) (1) Medicaid;
90	(b) (2) Medikids as created in s. 409.8132;
91	<u>(c)</u> The Florida Healthy Kids Corporation as created in
92	s. 624.91;
93	<u>(d)</u> Employer-sponsored group health insurance plans
94	approved under <u>ss. 409.810-409.821</u>
95	<u>(e)</u> The Children's Medical Services network established
96	in chapter 391.
97	(2) Except for Title XIX-funded Florida Kidcare program
98	coverage under the Medicaid program, coverage under the Florida
99	Kidcare program is not an entitlement. No cause of action shall
100	arise against the state, the department, the Department of
101	Children and Family Services, or the agency for failure to make
102	health services available to any person under <u>ss. 409.810-</u>
103	<u>409.821</u> ss. 409.810-409.820 .
104	Section 5. Paragraph (b) of subsection (6) and subsection
105	(8) of section 409.8132, Florida Statutes, are amended to read:
106	409.8132 Medikids program component.—
107	(6) ELIGIBILITY
108	(b) The provisions of s. 409.814(3), (4), and (5) <u>, and (6)</u>
109	shall be applicable to the Medikids program.
110	(8) PENALTIES FOR VOLUNTARY CANCELLATIONThe agency shall
111	establish enrollment criteria that must include penalties or
112	waiting periods of $30 \text{ not fewer than 60}$ days for reinstatement
113	of coverage upon voluntary cancellation for nonpayment of
114	premiums.
115	Section 6. Subsection (2) of section 409.8134, Florida
116	Statutes, is amended to read:

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588-04448-09 2009918c1 117 409.8134 Program expenditure ceiling; enrollment.-118 (2) The Florida Kidcare program may conduct enrollment continuously at any time throughout the year for the purpose of 119 120 enrolling children eligible for all program components listed in 121 s. 409.813 except Medicaid. The four Florida Kidcare 122 administrators shall work together to ensure that the year-round 123 enrollment period is announced statewide. Eligible Children 124 eligible for coverage under Title XXI-funded Florida Kidcare 125 program shall be enrolled on a first-come, first-served basis 126 using the date the enrollment application is received. 127 Enrollment shall immediately cease when the expenditure ceiling 128 is reached. Year-round enrollment shall only be held if the 129 Social Services Estimating Conference determines that sufficient 130 federal and state funds will be available to finance the 131 increased enrollment through federal fiscal year 2007. Any 132 individual who is not enrolled must reapply by submitting a new 133 application. The application for the Florida Kidcare program is 134 shall be valid for a period of 120 days after the date it was 135 received. At the end of the 120-day period, if the applicant has 136 not been enrolled in the program, the application is shall be invalid and the applicant shall be notified of the action. The 137 138 applicant may reactivate resubmit the application after 139 notification of the action taken by the program. Except for the Medicaid program, whenever the Social Services Estimating 140 141 Conference determines that there are presently, or will be by 142 the end of the current fiscal year, insufficient funds to finance the current or projected enrollment in the Florida 143 144 Kidcare program, all additional enrollment must cease and 145 additional enrollment may not resume until sufficient funds are

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588-04448-09 2009918c1 146 available to finance such enrollment. 147 Section 7. Section 409.814, Florida Statutes, is amended to 148 read: 149 409.814 Eligibility.-A child who has not reached 19 years 150 of age whose family income is equal to or below 200 percent of the federal poverty level is eligible for the Florida Kidcare 151 152 program as provided in this section. For enrollment in the 153 Children's Medical Services Network, a complete application 154 includes the medical or behavioral health screening. If, 155 subsequently, an individual is determined to be ineligible for 156 coverage, he or she must immediately be disenrolled from the 157 respective Florida Kidcare program component. 158 (1) A child who is eligible for Medicaid coverage under s. 159 409.903 or s. 409.904 must be enrolled in Medicaid and is not 160 eligible to receive health benefits under any other health

162 (2) A child who is not eligible for Medicaid, but who is 163 eligible for the Florida Kidcare program, may obtain health 164 benefits coverage under any of the other components listed in s. 165 409.813 if such coverage is approved and available in the county 166 in which the child resides. However, a child who is eligible for 167 Medikids may participate in the Florida Healthy Kids program only if the child has a sibling participating in the Florida 168 169 Healthy Kids program and the child's county of residence permits 170 such enrollment.

benefits coverage authorized under the Florida Kidcare program.

(3) A child who is eligible for the Florida Kidcare program
who is a child with special health care needs, as determined
through a medical or behavioral screening instrument, is
eligible for health benefits coverage from and shall be assigned

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175 to and may opt out of referred to the Children's Medical 176 Services Network. 177 (4) The following children are not eligible to receive 178 Title XXI-funded premium assistance for health benefits coverage 179 under the Florida Kidcare program, except under Medicaid if the child would have been eligible for Medicaid under s. 409.903 or 180 181 s. 409.904 as of June 1, 1997: 182 (a) A child who is eligible for coverage under a state health benefit plan on the basis of a family member's employment 183 184 with a public agency in the state. 185 (b) A child who is currently eligible for or covered under 186 a family member's group health benefit plan or under other 187 private or employer health insurance coverage, if excluding coverage provided under the Florida Healthy Kids Corporation as 188 189 established under s. 624.91, provided that the cost of the 190 child's participation is not greater than 5 percent of the 191 family's income. If a child is otherwise eligible for a subsidy 192 under the Florida Kidcare program and the cost of the child's 193 participation in the family member's health insurance benefit 194 plan is greater than 5 percent of the family's income, the child 195 may enroll in the appropriate subsidized Kidcare program. This 196 provision shall be applied during redetermination for children who were enrolled prior to July 1, 2004. These enrollees shall 197 have 6 months of eligibility following redetermination to allow 198 199 for a transition to the other health benefit plan.

(c) A child who is seeking premium assistance for the Florida Kidcare program through employer-sponsored group coverage, if the child has been covered by the same employer's group coverage during the <u>60 days</u> 6 months prior to the family's

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204	submitting an application for determination of eligibility under									
205	the program.									
206	(d) A child who is an alien, but who does not meet the									
207	definition of qualified alien, in the United States.									
208	(e) A child who is an inmate of a public institution or a									
209	patient in an institution for mental diseases.									
210	(f) A child who is otherwise eligible for premium									
211	assistance for the Florida Kidcare program and has had his or									
212	her coverage in an employer-sponsored or private health benefit									
213	plan voluntarily canceled in the last <u>60 days</u> 6 months , except									
214	those children whose coverage was voluntarily canceled for good									
215	cause, including, but not limited to, the following									
216	circumstances:									
217	1. The cost of participation in an employer-sponsored									
218	health benefit plan is greater than 5 percent of the family's									
219	income;									
220	2. The parent lost a job that provided an employer-									
221	sponsored health benefit plan for children;									
222	3. The parent who had health benefits coverage for the									
223	child is deceased;									
224	4. The child has a medical condition that, without medical									
225	care, would cause serious disability, loss of function, or									
226	death;									
227	5. The employer of the parent canceled health benefits									
228	coverage for children;									
229	6. The child's health benefits coverage ended because the									
230	child reached the maximum lifetime coverage amount;									
231	7. The child has exhausted coverage under a COBRA									
232	continuation provision;									

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588-04448-09 2009918c1 233 8. The health benefits coverage does not cover the child's 234 health care needs; or 235 9. Domestic violence led to loss of coverage who were on the waiting list prior to March 12, 2004. 236 237 (5) (g) A child who is otherwise eligible for the Florida 238 Kidcare program and who has a preexisting condition that 239 prevents coverage under another insurance plan as described in 240 paragraph (4) (b) which would have disqualified the child for the Florida Kidcare program if the child were able to enroll in the 241 2.42 plan shall be eligible for Florida Kidcare coverage when 243 enrollment is possible. 244 (6) (5) A child whose family income is above 200 percent of 245 the federal poverty level or a child who is excluded under the 246 provisions of subsection (4) may participate in the Florida 247 Kidcare program Medikids program as provided in s. 409.8132 or, 248 if the child is ineligible for Medikids by reason of age, in the 249 Florida Healthy Kids program, subject to the following 250 provisions: 251 (a) The family is not eligible for premium assistance 252 payments and must pay the full cost of the premium, including 253 any administrative costs. 254 (b) The board of directors of the Florida Healthy Kids 255 Corporation may offer a reduced benefit package to these 256 children in order to limit program costs for such families. 257 (7) (6) Once a child is enrolled in the Florida Kidcare 258 program, the child is eligible for coverage under the program for 12 months without a redetermination or reverification of 259 260 eligibility, if the family continues to pay the applicable 261 premium. Eligibility for program components funded through Title

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588-0448-09200918c1262XXI of the Social Security Act shall terminate when a child263attains the age of 19. Effective January 1, 1999, A child who264has not attained the age of 5 and who has been determined265eligible for the Medicaid program is eligible for coverage for26612 months without a redetermination or reverification of267eligibility.

268 (8) (7) When determining or reviewing a child's eligibility 269 under the Florida Kidcare program, the applicant shall be 270 provided with reasonable notice of changes in eligibility which 271 may affect enrollment in one or more of the program components. 272 When a transition from one program component to another is 273 authorized, there shall be cooperation between the program 274 components and the affected family which promotes continuity of 275 health care coverage. Any authorized transfers must be managed 276 within the program's overall appropriated or authorized levels 277 of funding. Each component of the program shall establish a 278 reserve to ensure that transfers between components will be 279 accomplished within current year appropriations. These reserves shall be reviewed by each convening of the Social Services 280 281 Estimating Conference to determine the adequacy of such reserves 282 to meet actual experience.

283 (9) (8) In determining the eligibility of a child, an assets 284 test is not required. Each applicant shall provide written 285 documentation during the application process and the 286 redetermination process, including, but not limited to, the 287 following:

(a) <u>Each applicant's</u> proof of family income <u>shall be</u>
 verified electronically to determine financial eligibility for
 the Florida Kidcare program. Written documentation, which may

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291	must include wages and earnings statements or pay stubs, W-2
292	forms, or a copy of the applicant's most recent federal income
293	tax return, shall be required only if the electronic
294	verification is not available or does not substantiate the
295	applicant's income. In the absence of a federal income tax
296	return, an applicant may submit wages and earnings statements
297	(pay stubs), W-2 forms, or other appropriate documents.
298	(b) <u>Each applicant shall provide</u> a statement from all
299	applicable, employed family members that:
300	1. Their <u>employers do</u> employer does not sponsor a health
301	benefit <u>plans</u> plan for employees; or
302	2. The potential enrollee is not covered by <u>an</u> the
303	employer-sponsored health benefit plan because the potential
304	enrollee is not eligible for coverage, or, if the potential
305	enrollee is eligible but not covered, a statement of the cost to
306	enroll the potential enrollee in the employer-sponsored health
307	benefit plan. If the cost of the employer-sponsored health
308	benefit plan is greater than 5 percent of the family's income
309	and the potential enrollee is otherwise eligible for premium
310	assistance, he or she may be enrolled in the appropriate,
311	subsidized component of the Florida Kidcare program.
312	<u>(10)</u>
313	Florida Kidcare program shall withhold benefits from an enrollee
314	if the program obtains evidence that the enrollee is no longer
315	eligible, submitted incorrect or fraudulent information in order
316	to establish eligibility, or failed to provide verification of
317	eligibility. The applicant or enrollee shall be notified that
318	because of such evidence program benefits will be withheld
319	unless the applicant or enrollee contacts a designated

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320	representative of the program by a specified date, which must be
321	within 10 working days after the date of notice, to discuss and
322	resolve the matter. The program shall make every effort to
323	resolve the matter within a timeframe that will not cause
324	benefits to be withheld from an eligible enrollee.
325	(11) (10) The following individuals may be subject to
326	prosecution in accordance with s. 414.39:
327	(a) An applicant obtaining or attempting to obtain benefits
328	for a potential enrollee under the Florida Kidcare program when
329	the applicant knows or should have known the potential enrollee
330	does not qualify for the Florida Kidcare program.
331	(b) An individual who assists an applicant in obtaining or
332	attempting to obtain benefits for a potential enrollee under the
333	Florida Kidcare program when the individual knows or should have
334	known the potential enrollee does not qualify for the Florida
335	Kidcare program.
336	Section 8. Paragraphs (u) and (v) of subsection (2) of
337	section 409.815, Florida Statutes, are amended to read:
338	409.815 Health benefits coverage; limitations
339	(2) BENCHMARK BENEFITSIn order for health benefits
340	coverage to qualify for premium assistance payments for an
341	eligible child under <u>ss. 409.810-409.821</u>
342	the health benefits coverage, except for coverage under Medicaid
343	and Medikids, must include the following minimum benefits, as
344	medically necessary.
345	(u) Enhancements to minimum requirements
346	1. This section sets the minimum benefits that must be
347	included in any health benefits coverage, other than Medicaid or
348	Medikids coverage, offered under <u>ss. 409.810-409.821</u> ss.

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588-04448-09 2009918c1 349 409.810-409.820. Health benefits coverage may include additional 350 benefits not included under this subsection, but may not include 351 benefits excluded under paragraph (s). 352 2. Health benefits coverage may extend any limitations 353 beyond the minimum benefits described in this section. 354 355 Except for the Children's Medical Services Network, the agency 356 may not increase the premium assistance payment for either 357 additional benefits provided beyond the minimum benefits 358 described in this section or the imposition of less restrictive 359 service limitations. (v) Applicability of other state laws.-Health insurers, 360 361 health maintenance organizations, and their agents are subject 362 to the provisions of the Florida Insurance Code, except for any 363 such provisions waived in this section. 364 1. Except as expressly provided in this section, a law 365 requiring coverage for a specific health care service or 366 benefit, or a law requiring reimbursement, utilization, or 367 consideration of a specific category of licensed health care 368 practitioner, does not apply to a health insurance plan policy 369 or contract offered or delivered under ss. 409.810-409.821 ss. 370 409.810-409.820 unless that law is made expressly applicable to 371 such policies or contracts. 372 2. Notwithstanding chapter 641, a health maintenance

373 organization may issue contracts providing benefits equal to, 374 exceeding, or actuarially equivalent to the benchmark benefit 375 plan authorized by this section and may pay providers located in 376 a rural county negotiated fees or Medicaid reimbursement rates 377 for services provided to enrollees who are residents of the

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588-04448-09 378 rural county. 379 Section 9. Subsection (3) of section 409.816, Florida 380 Statutes, is amended to read: 381 409.816 Limitations on premiums and cost-sharing.-The 382 following limitations on premiums and cost-sharing are 383 established for the program. 384 (3) Enrollees in families with a family income above 150 385 percent of the federal poverty level, who are not receiving 386 coverage under the Medicaid program or who are not eligible 387 under s. 409.814(7) s. 409.814(5), may be required to pay 388 enrollment fees, premiums, copayments, deductibles, coinsurance, 389 or similar charges on a sliding scale related to income, except 390 that the total annual aggregate cost-sharing with respect to all 391 children in a family may not exceed 5 percent of the family's 392 income. However, copayments, deductibles, coinsurance, or 393 similar charges may not be imposed for preventive services, 394 including well-baby and well-child care, age-appropriate 395 immunizations, and routine hearing and vision screenings.

396 Section 10. Section 409.817, Florida Statutes, is amended to read: 397

398 409.817 Approval of health benefits coverage; financial 399 assistance.-In order for health insurance coverage to qualify 400 for premium assistance payments for an eligible child under ss. 401 409.810-409.821 ss. 409.810-409.820, the health benefits 402 coverage must:

403 (1) Be certified by the Office of Insurance Regulation of 404 the Financial Services Commission under s. 409.818 as meeting, 405 exceeding, or being actuarially equivalent to the benchmark benefit plan; 406

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

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407	(2) Be guarantee issued;
408	(3) Be community rated;
409	(4) Not impose any preexisting condition exclusion for
410	covered benefits; however, group health insurance plans may
411	permit the imposition of a preexisting condition exclusion, but
412	only insofar as it is permitted under s. 627.6561;
413	(5) Comply with the applicable limitations on premiums and
414	cost-sharing in s. 409.816;
415	(6) Comply with the quality assurance and access standards
416	developed under s. 409.820; and
417	(7) Establish periodic open enrollment periods, which may
418	not occur more frequently than quarterly.
419	Section 11. Paragraph (i) of subsection (1) of section
420	409.8177, Florida Statutes, is amended to read:
421	409.8177 Program evaluation
422	(1) The agency, in consultation with the Department of
423	Health, the Department of Children and Family Services, and the
424	Florida Healthy Kids Corporation, shall contract for an
425	evaluation of the Florida Kidcare program and shall by January 1
426	of each year submit to the Governor, the President of the
427	Senate, and the Speaker of the House of Representatives a report
428	of the program. In addition to the items specified under s. 2108
429	of Title XXI of the Social Security Act, the report shall
430	include an assessment of crowd-out and access to health care, as
431	well as the following:
432	(i) An assessment of the effectiveness of the Florida
433	Kidcare program, including Medicaid, the Florida Healthy Kids
434	program, Medikids, and the Children's Medical Services network,
435	and other public and private programs in the state in increasing

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436	the availability of affordable quality health insurance and
437	health care for children.
438	Section 12. Paragraph (c) of subsection (1), paragraph (b)
439	of subsection (2), and paragraph (a) subsection (3), of section
440	409.818, Florida Statutes, are amended to read:
441	409.818 Administration.—In order to implement <u>ss. 409.810-</u>
442	409.821 ss. 409.810-409.820, the following agencies shall have
443	the following duties:
444	(1) The Department of Children and Family Services shall:
445	(c) Inform program applicants about eligibility
446	determinations and provide information about eligibility of
447	applicants to Medicaid, Medikids, the Children's Medical
448	Services Network, and the Florida <u>Kidcare program</u> Healthy Kids
449	Corporation, and to insurers and their agents, through a
450	centralized coordinating office.
451	(2) The Department of Health shall:
452	(b) Chair a state-level <u>Florida Kidcare</u> coordinating
453	council to review and make recommendations concerning the
454	implementation and operation of the program. The coordinating
455	council shall include representatives from the department, the
456	Department of Children and Family Services, the agency, the
457	Florida Healthy Kids Corporation, the Office of Insurance
458	Regulation of the Financial Services Commission, local
459	government, health insurers, health maintenance organizations,
460	health care providers, families participating in the program,
461	and organizations representing low-income families.
462	(3) The Agency for Health Care Administration, under the
463	authority granted in s. 409.914(1), shall:

(a) Calculate the premium assistance payment necessary to

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588-04448-09 2009918c1 465 comply with the premium and cost-sharing limitations specified 466 in s. 409.816. The premium assistance payment for each enrollee 467 in a health insurance plan participating in the Florida Healthy 468 Kids Corporation shall equal the premium approved by the Florida 469 Healthy Kids Corporation and the Office of Insurance Regulation 470 of the Financial Services Commission pursuant to ss. 627.410 and 471 641.31, less any enrollee's share of the premium established 472 within the limitations specified in s. 409.816. The premium 473 assistance payment for each enrollee in an employer-sponsored health insurance plan approved under ss. 409.810-409.821 ss. 474 475 409.810-409.820 shall equal the premium for the plan adjusted 476 for any benchmark benefit plan actuarial equivalent benefit 477 rider approved by the Office of Insurance Regulation pursuant to 478 ss. 627.410 and 641.31, less any enrollee's share of the premium 479 established within the limitations specified in s. 409.816. In 480 calculating the premium assistance payment levels for children 481 with family coverage, the agency shall set the premium 482 assistance payment levels for each child proportionately to the total cost of family coverage. 483 484

The agency is designated the lead state agency for Title XXI of the Social Security Act for purposes of receipt of federal funds, for reporting purposes, and for ensuring compliance with federal and state regulations and rules.

489 Section 13. Subsection (6) and paragraph (a) of subsection 490 (5), of section 624.91, Florida Statutes, are amended to read: 624.91 The Florida Healthy Kids Corporation Act.-492 (5) CORPORATION AUTHORIZATION, DUTIES, POWERS.-(a) There is created the Florida Healthy Kids Corporation,

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- 494 a not-for-profit corporation.
- 495

(b) The Florida Healthy Kids Corporation shall:

496 1. Arrange for the collection of any family, local 497 contributions, or employer payment or premium, in an amount to 498 be determined by the board of directors, to provide for payment 499 of premiums for comprehensive insurance coverage and for the actual or estimated administrative expenses.

2. Arrange for the collection of any voluntary
contributions to provide for payment of <u>Florida Kidcare program</u>
premiums for children who are not eligible for medical
assistance under <u>Title XIX or</u> Title XXI of the Social Security
Act.

506 3. Subject to the provisions of s. 409.8134, accept 507 voluntary supplemental local match contributions that comply 508 with the requirements of Title XXI of the Social Security Act 509 for the purpose of providing additional <u>Florida Kidcare</u> coverage 510 in contributing counties under Title XXI.

511 4. Establish the administrative and accounting procedures512 for the operation of the corporation.

513 5. Establish, with consultation from appropriate 514 professional organizations, standards for preventive health 515 services and providers and comprehensive insurance benefits 516 appropriate to children, provided that such standards for rural 517 areas shall not limit primary care providers to board-certified 518 pediatricians.

519 6. Determine eligibility for children seeking to
520 participate in the Title XXI-funded components of the Florida
521 Kidcare program consistent with the requirements specified in s.
522 409.814, as well as the non-Title-XXI-eligible children as

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 523
 provided in subsection (3).

524 7. Establish procedures under which providers of local 525 match to, applicants to and participants in the program may have 526 grievances reviewed by an impartial body and reported to the 527 board of directors of the corporation.

528 8. Establish participation criteria and, if appropriate,
529 contract with an authorized insurer, health maintenance
530 organization, or third-party administrator to provide
531 administrative services to the corporation.

532 9. Establish enrollment criteria <u>that</u> which shall include
533 penalties or waiting periods of <u>30</u> not fewer than 60 days for
534 reinstatement of coverage upon voluntary cancellation for
535 nonpayment of family premiums.

536 10. Contract with authorized insurers or any provider of 537 health care services, meeting standards established by the 538 corporation, for the provision of comprehensive insurance 539 coverage to participants. Such standards shall include criteria 540 under which the corporation may contract with more than one provider of health care services in program sites. Health plans 541 542 shall be selected through a competitive bid process. The Florida 543 Healthy Kids Corporation shall purchase goods and services in 544 the most cost-effective manner consistent with the delivery of 545 quality medical care. The maximum administrative cost for a 546 Florida Healthy Kids Corporation contract shall be 15 percent. 547 For health care contracts, the minimum medical loss ratio for a 548 Florida Healthy Kids Corporation contract shall be 85 percent. 549 For dental contracts, the remaining compensation to be paid to 550 the authorized insurer or provider under a Florida Healthy Kids 551 Corporation contract shall be no less than an amount which is 85

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588-04448-09 2009918c1 552 percent of premium; to the extent any contract provision does 553 not provide for this minimum compensation, this section shall 554 prevail. The health plan selection criteria and scoring system, and the scoring results, shall be available upon request for 555 556 inspection after the bids have been awarded. 557 11. Establish disenvollment criteria in the event local 558 matching funds are insufficient to cover enrollments. 559 12. Develop and implement a plan to publicize the Florida 560 Kidcare program Healthy Kids Corporation, the eligibility 561 requirements of the program, and the procedures for enrollment 562 in the program and to maintain public awareness of the 563 corporation and the program. 564 13. Secure staff necessary to properly administer the corporation. Staff costs shall be funded from state and local 565 566 matching funds and such other private or public funds as become 567 available. The board of directors shall determine the number of 568 staff members necessary to administer the corporation. 569 14. In consultation with the partner agencies, provide a 570 report on the Florida Kidcare program annually to the Governor, 571 Chief Financial Officer, Commissioner of Education, Senate 572 President of the Senate, the Speaker of the House of 573 Representatives, and Minority Leaders of the Senate and the 574 House of Representatives. 575 15. Provide information on a quarterly basis to the 576 Legislature and the Governor which compares the costs and 577 utilization of the full-pay enrolled population and the Title 578 XXI-subsidized enrolled population in the Florida Kidcare 579 program. The information, at a minimum, must include:

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a. The monthly enrollment and expenditure for full-pay

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588-04448-09 2009918c1 581 enrollees in the Medikids and Florida Healthy Kids programs 582 compared to the Title XXI-subsidized enrolled population; and 583 b. The costs and utilization by service of the full-pay 584 enrollees in the Medikids and Florida Healthy Kids programs and 585 the Title XXI-subsidized enrolled population. 586 587 By February 1, 2010 2009, the Florida Healthy Kids Corporation 588 shall provide a study to the Legislature and the Governor on 589 premium impacts to the subsidized portion of the program from 590 the inclusion of the full-pay program, which shall include 591 recommendations on how to eliminate or mitigate possible impacts 592 to the subsidized premiums. 593 16. Establish benefit packages that which conform to the provisions of the Florida Kidcare program, as created in ss. 594 595 409.810-409.821 ss. 409.810-409.820. 596 (c) Coverage under the corporation's program is secondary 597 to any other available private coverage held by, or applicable 598 to, the participant child or family member. Insurers under 599 contract with the corporation are the payors of last resort and 600 must coordinate benefits with any other third-party payor that 601 may be liable for the participant's medical care. 602 (d) The Florida Healthy Kids Corporation shall be a private corporation not for profit, organized pursuant to chapter 617, 603 604 and shall have all powers necessary to carry out the purposes of 605 this act, including, but not limited to, the power to receive 606 and accept grants, loans, or advances of funds from any public

608 contributions of money, property, labor, or any other thing of 609 value, to be held, used, and applied for the purposes of this

or private agency and to receive and accept from any source

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610	act.										
611	(6) BOARD OF DIRECTORS.—										
612	(a) The Florida Healthy Kids Corporation shall operate										
613	subject to the supervision and approval of a board of directors										
614	chaired by the Chief Financial Officer or her or his designee,										
615	and composed of <u>11</u> 10 other members selected for 3-year terms of										
616	office as follows:										
617	1. The Secretary of Health Care Administration, or his or										
618	her designee;										
619	2. One member appointed by the Commissioner of Education										
620	from the Office of School Health Programs of the Florida										
621	Department of Education;										
622	3. One member appointed by the Chief Financial Officer from										
623	among three members nominated by the Florida Pediatric Society;										
624	4. One member, appointed by the Governor, who represents										
625	the Children's Medical Services Program;										
626	5. One member appointed by the Chief Financial Officer from										
627	among three members nominated by the Florida Hospital										
628	Association;										
629	6. One member, appointed by the Governor, who is an expert										
630	on child health policy;										
631	7. One member, appointed by the Chief Financial Officer,										
632	from among three members nominated by the Florida Academy of										
633	Family Physicians;										
634	8. One member, appointed by the Governor, who represents										
635	the state Medicaid program;										
636	9. One member, appointed by the Chief Financial Officer,										
637	from among three members nominated by the Florida Association of										
638	Counties; and										

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639		10.	The	State	Hea	lth	Office	er or	her	or	his	des	ignee	e; a	and.	
640		11.	The	Secre	tary	of	Child	en a	nd Fa	amil	y Se	ervi	ces,	or	his	
641	or h	er de	esigr	nee.												
642		Sect	tion	14. T	his a	act	shall	take	effe	ect	July	y 1,	2009).		