By Senator Flores

	39-00014-17A 20174A
1	A bill to be entitled
2	An act making supplemental appropriations for Medicaid
3	hospital programs; providing moneys for the annual
4	period beginning July 1, 2017, and ending June 30,
5	2018, to fund the state Medicaid program;
6	incorporating by reference certain calculations of the
7	Medicaid Disproportionate Share Hospital and Hospital
8	Reimbursement programs; providing effective dates.
9	
10	Be It Enacted by the Legislature of the State of Florida:
11	
12	Section 1. Specific Appropriation 198 of Chapter 2017-70,
13	Laws of Florida, is amended to read:
14	
15	SECTION 3 - HUMAN SERVICES
16	
17	SPECIFIC APPROPRIATION
18	
19	The moneys contained herein are appropriated from the named
20	funds to the Agency for Health Care Administration, Agency for
21	Persons with Disabilities, Department of Children and Families,
22	Department of Elder Affairs, Department of Health, and the
23	Department of Veterans' Affairs as the amounts to be used to pay
24	the salaries, other operational expenditures and fixed capital
25	outlay of the named agencies.
26	
27	AGENCY FOR HEALTH CARE ADMINISTRATION
28	
29	From the funds provided in Specific Appropriations 162 through

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39-00014-17A 20174A 30 232, the Agency for Health Care Administration shall submit 31 quarterly reports on all travel related to training, seminars, 32 workshops, conferences, or similarly purposed travel that was 33 completed by senior management employees or division or program 34 directors. Each quarterly report shall include the following 35 information: (a) employee name, (b) position title, (c) purpose 36 of travel, (d) dates and location of travel, (e) confirmation of 37 agency head authorization if required by SB 2502, and (f) total travel cost. The report shall be submitted to the chair of the 38 39 Senate Appropriations Committee, the chair of the House of 40 Representatives Appropriations Committee, and the Executive 41 Office of the Governor. The first report shall be submitted on 42 July 15, 2017, for the period of April 1, 2017, through June 30, 2017, and quarterly thereafter. 43 44 45 PROGRAM: HEALTH CARE SERVICES 46 47 MEDICAID SERVICES TO INDIVIDUALS 48 49 From the funds in Specific Appropriations 191 through 220A, the 50 Agency for Health Care Administration shall provide a quarterly 51 reconciliation report of all Medicaid service appropriation 52 expenditures and fund sources. The reconciliation shall compare 53 actual expenditures paid through each specific appropriation 54 category by fund either through the Florida Medicaid Management Information System (FMMIS) or the Agency for Health Care 55 56 Administration to expenditure estimates forecasted through the 57 Social Services Estimating Conference Medicaid services 58 forecasting model, as directed in section 216.136(6), Florida

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59
    Statutes. The comparison shall include fund source detail for
60
    each comparison. For any category where a variance is
    identified, the Agency for Health Care Administration shall
61
62
    submit a written corrective action plan to address each variance
63
    by category and fund source. The reconciliation shall be
    submitted to the Office of the Governor, the President of the
64
65
    Senate, and the Speaker of the House of Representatives no later
66
    than 30 days after the close of each quarter. The Agency for
    Health Care Administration may submit budget amendments to the
67
    Legislative Budget Commission to realign appropriation
68
    categories based on the reconciliation pursuant to the
69
70
    provisions of chapter 216, Florida Statutes.
71
     198 SPECIAL
     CATEGORIES
72
     HOSPITAL INPATIENT
     SERVICES
73
     FROM GENERAL REVENUE
                                     256,362,940
                                     285,444,787
     FUND
74
                                                             42,300,000
     FROM HEALTH CARE
     TRUST FUND
75
     FROM GRANTS AND
                                                             15,915,715
     DONATIONS TRUST FUND
76
     FROM MEDICAL CARE
                                                           585,613,606
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	TRUST FUND 631,984,098	3
77		
	FROM PUBLIC MEDICAL 47,450,732	2
	ASSISTANCE TRUST	
	FUND	
78		
	FROM REFUGEE 1,362,689	Э
	ASSISTANCE TRUST	
	FUND	
79		
80		
81	Funds in Specific Appropriation 198 are contingent upon the	
82	state share being provided through grants and donations from	
83	state, county or other governmental funds. In the event the	
84	state share provided through grants and donations in the Grants	
85	and Donations Trust Fund is not available, the Agency for Health	1
86	Care Administration may submit a revised hospital reimbursement	
87	plan, pursuant to chapter 216, Florida Statutes, to the	
88	Legislative Budget Commission for approval.	
89		
90	From the funds in Specific Appropriation 198, the calculations	
91	of the Medicaid Hospital Funding Programs for the 2017-2018	
92	fiscal year are incorporated by reference in Senate Bill 2502.	
93	The calculations are the basis for the appropriations made in	
94	the General Appropriations Act.	
95		
96	From the funds in Specific Appropriation 198, the Agency for	
97	Health Care Administration may establish a global fee for bone	
98	marrow transplants and the global fee payment shall be paid to	

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99	approved bone marrow transplant providers that provide bone
100	marrow transplants to Medicaid beneficiaries.
101	
102	From the funds in Specific Appropriations 198 and 206,
103	\$2,827,046 from the Grants and Donations Trust Fund and
104	\$4,538,889 from the Medical Care Trust Fund are provided to make
105	Medicaid payments for multi-visceral transplants and intestine
106	transplants in Florida. The Agency for Health Care
107	Administration shall establish a global fee for these transplant
108	procedures and the payments shall be used to pay approved multi-
109	visceral transplant and intestine transplant facilities a global
110	fee for providing these transplant services to Medicaid
111	beneficiaries. Payment of the global fee is contingent upon the
112	non-federal share being provided through grants and donations
113	from state, county or other governmental funds. The agency is
114	authorized to seek any federal waiver or state plan amendment
115	necessary to implement this provision.
116	
117	From the funds in Specific Appropriation 198, the Agency for
118	Health Care Administration shall continue a Diagnosis Related
119	Grouping (DRG) reimbursement methodology for hospital inpatient
120	services as directed in section 409.905 (5)(c), Florida
121	Statutes.
122	Base Rate - <u>\$3,485.82</u> \$3,310.98
123	Neonates Service Adjustor Severity Level 1 - 1.0
124	Neonates Service Adjustor Severity Level 2 - 1.52
125	Neonates Service Adjustor Severity Level 3 - 1.8
126	Neonates Service Adjustor Severity Level 4 - 2.0
127	Neonatal, Pediatric, Transplant Pediatric, Mental Health
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128
     and
129
           Rehab DRGs:
130
           Severity Level 1 - 1.0
131
           Severity Level 2 - 1.52
132
           Severity Level 3 - 1.8
           Severity Level 4 - 2.0
133
134
           Free Standing Rehabilitation Provider Adjustor - 2.840
135
     2.843
           Rural Provider Adjustor - 2.115 2.116
136
137
           Long Term Acute Care (LTAC) Provider Adjustor - 2.218
138
     2.199
139
           High Medicaid and High Outlier Provider Adjustor - 2.504
     2.548
140
141
           Outlier Threshold - $60,000
142
           Marginal Cost Percentage - 60%
143
           Marginal Cost Percentage for Pediatric Claims Severity
144
           Levels 3 or 4 - 80%
145
           Marginal Cost Percentage for Neonates Claims Severity
146
           Levels 3 or 4 - 80%
147
           Marginal Cost Percentage for Transplant Pediatric Claims
           Severity Levels 3 or 4 - 80%
148
149
           Documentation and Coding Adjustment - 1/3 of 1%
150
           Level I Trauma Add On - 17%
151
           Level II or Level II and Pediatric Add On - 11%
152
           Pediatric Trauma Add On - 4%
153
154
     Funds in Specific Appropriation 198 reflect an increase of
155
     $2,668,209 <del>$2,480,485</del> in nonrecurring funds from the General
     Revenue Fund and $4,283,872 $3,982,478 in nonrecurring funds
156
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157	
158	that meet the definition of "rural hospital" under section
159	395.602 (2) (e), Florida Statutes, to be recognized as rural
160	hospitals in the Agency for Health Care Administration's
161	Diagnosis Related Group (DRG) reimbursement methodology for
162	hospital inpatient services (HB 3791).
163	
164	Funds in Specific Appropriation 198 reflect an increase of
165	\$9,421,726 in the General Revenue Fund, of which, \$804,168 is
166	nonrecurring, and \$15,126,804 in the Medical Care Trust Fund, of
167	which, \$1,291,111 is nonrecurring, to increase the High Medicaid
168	and High Outlier Provider Adjustor for the Agency for Health
169	Care Administration's Diagnosis Related Group (DRG)
170	reimbursement methodology for hospital inpatient services.
171	
172	Funds in Specific Appropriations 198 and 207 reflect a reduction
173	of \$58,284,811 from the General Revenue Fund and \$93,577,645
174	from the Medical Care Trust Fund based on a reduction to the
175	Diagnosis Related Grouping Base Rate.
176	
177	Funds in Specific Appropriations 198 and 207 reflect a reduction
178	of <u>\$160,882,696</u> \$160,401,653 from the General Revenue Fund and
179	<u>\$258,300,982</u>
180	result of reducing Hospital Inpatient Automatic Rate
181	Enhancements. The calculations of the Medicaid Hospital Funding
182	Programs for the 2017-2018 fiscal year are incorporated by
183	reference in Senate Bill 2502. The calculations are the basis
184	for the appropriations made in the General Appropriations Act.
185	
I	

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186	From the funds in Specific Appropriations 198 <u>,</u> and 203, and 207,
187	\$50,000,000 in nonrecurring funds from the General Revenue Fund
188	and \$80,276,186 in nonrecurring funds from the Medical Care
189	Trust Fund are provided to partially restore reductions applied
190	to DRG base rates and Hospital Inpatient and Hospital Outpatient
191	exemption payments.
192	
193	From the funds in Specific Appropriations 198, 203, and 207,
194	\$100,000,000 in nonrecurring funds from the General Revenue Fund
195	and \$160,552,371 in nonrecurring funds from the Medical Care
196	Trust Fund are provided to restore reductions applied to DRG
197	base rates and Hospital Inpatient and Hospital Outpatient
198	exemption payments.
199	Section 2. Specific Appropriation 203 of Chapter 2017-70,
200	Laws of Florida, is amended to read:
201	
202	SECTION 3 - HUMAN SERVICES
203	
204	SPECIFIC APPROPRIATION
205	
206	The moneys contained herein are appropriated from the named
207	funds to the Agency for Health Care Administration, Agency for
208	Persons with Disabilities, Department of Children and Families,
209	Department of Elder Affairs, Department of Health, and the
210	Department of Veterans' Affairs as the amounts to be used to pay
211	the salaries, other operational expenditures and fixed capital
212	outlay of the named agencies.
213	
214	AGENCY FOR HEALTH CARE ADMINISTRATION
	AGENCY FOR HEALTH CARE ADMINISTRATION

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216 From the funds provided in Specific Appropriations 162 through 217 232, the Agency for Health Care Administration shall submit 218 quarterly reports on all travel related to training, seminars, 219 workshops, conferences, or similarly purposed travel that was 220 completed by senior management employees or division or program 221 directors. Each quarterly report shall include the following 222 information: (a) employee name, (b) position title, (c) purpose of travel, (d) dates and location of travel, (e) confirmation of 223 224 agency head authorization if required by SB 2502, and (f) total 225 travel cost. The report shall be submitted to the chair of the 226 Senate Appropriations Committee, the chair of the House of 227 Representatives Appropriations Committee, and the Executive 228 Office of the Governor. The first report shall be submitted on 229 July 15, 2017, for the period of April 1, 2017, through June 30, 230 2017, and quarterly thereafter.

- 232 PROGRAM: HEALTH CARE SERVICES
- 234 MEDICAID SERVICES TO INDIVIDUALS

235

233

231

236 From the funds in Specific Appropriations 191 through 220A, the 237 Agency for Health Care Administration shall provide a quarterly 238 reconciliation report of all Medicaid service appropriation 239 expenditures and fund sources. The reconciliation shall compare 240 actual expenditures paid through each specific appropriation 241 category by fund either through the Florida Medicaid Management 242 Information System (FMMIS) or the Agency for Health Care 243 Administration to expenditure estimates forecasted through the

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244	Social Services Estimating Conference Medicaid services
245	forecasting model, as directed in section 216.136(6), Florida
246	Statutes. The comparison shall include fund source detail for
247	each comparison. For any category where a variance is
248	identified, the Agency for Health Care Administration shall
249	submit a written corrective action plan to address each variance
250	by category and fund source. The reconciliation shall be
251	submitted to the Office of the Governor, the President of the
252	Senate, and the Speaker of the House of Representatives no later
253	than 30 days after the close of each quarter. The Agency for
254	Health Care Administration may submit budget amendments to the
255	Legislative Budget Commission to realign appropriation
256	categories based on the reconciliation pursuant to the
257	provisions of chapter 216, Florida Statutes.
258	
	203 SPECIAL
	CATEGORIES
259	
	HOSPITAL OUTPATIENT
	SERVICES
260	
	FROM GENERAL REVENUE 54,208,290
	FUND <u>62,253,217</u>
261	
	FROM GRANTS AND 5,047,647
	DONATIONS TRUST FUND
262	
	FROM MEDICAL CARE <u>129,294,879</u>
	TRUST FUND 142,211,200

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263	
	FROM PUBLIC MEDICAL 20,768,022
	ASSISTANCE TRUST
	FUND
264	
	FROM REFUGEE 948,222
	ASSISTANCE TRUST
	FUND
265	
266	
267	From the funds in Specific Appropriation 203, the calculations
268	of the Medicaid Hospital Funding Programs for the 2017-2018
269	fiscal year are incorporated by reference in Senate Bill 2502.
270	The calculations are the basis for the appropriations made in
271	the General Appropriations Act.
272	
273	From the funds in Specific Appropriations 203 and 207,
274	\$22,767,278 from the Grants and Donations Trust Fund and
275	\$36,553,405 from the Medical Care Trust Fund are provided to
276	increase the outpatient cap for adults from \$500 to \$1,500 per
277	year. Payments to increase outpatient caps are contingent upon
278	the non-federal share being provided through intergovernmental
279	transfers in the Grants and Donations Trust Fund. In the event
280	the funds are not available in the Grants and Donations Trust
281	Fund, the State of Florida is not obligated to continue
282	reimbursements at the higher amount.
283	
284	From the funds in Specific Appropriation 203, \$400,000 from the
285	General Revenue Fund and \$642,209 from the Medical Care Trust
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286	Fund is provided to Nemours Children's Hospital as a Hospital
287	Outpatient exemption payment.
288	
289	From the funds in Specific Appropriation 203, the Agency for
290	Health Care Administration shall implement an Enhanced
291	Ambulatory Patient Grouping (EAPG) reimbursement methodology for
292	hospital outpatient services as directed in section
293	409.905(6)(b), Florida Statutes.
294	
295	Ambulatory Surgical Center Base Rate - \$276.66
296	Hospital Outpatient Base Rate - \$267.82
297	Rural Hospital Provider Adjustor - 1.4736
298	High Medicaid and High Outlier Hospital Adjustor - 2.0182
299	Documentation and Coding Adjustment - 2%
300	
301	From the funds in Specific Appropriation 203, the Agency for
302	Health Care Administration shall apply a transition methodology
303	that will limit provider gains and losses in a budget neutral
304	manner resulting from the implementation of EAPG payment
305	methodologies. The agency shall cap provider losses from EAPG
306	payment at 5% for any in-state hospital with at least 1,000
307	annual Medicaid outpatient visits and a payment decrease
308	projected to be greater than 5%. For each applicable hospital,
309	the hospital's EAPG base rate shall be set to a value that
310	models EAPG payment to be 95% of the hospital's current baseline
311	payment. The agency shall cap gains from EAPG payment at a
312	percentage to ensure budget neutrality. Both EAPG and current
313	baseline payments shall be values independent of rate
314	enhancements. EAPG base rate adjustments shall be applied after
I	

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315	the impact related to Graduate Medical Education funding has
316	been transferred to the Graduate Medical Education category.
317	
318	Funds in Specific Appropriations 203 and 207 reflect a reduction
319	of <u>\$30,832,608</u> \$31,313,536 from the General Revenue Fund and
320	<u>\$49,502,484</u> \$50,274,625 from the Medical Care Trust Fund as a
321	result of reducing Hospital Outpatient Automatic Rate
322	Enhancements. The calculations of the Medicaid Hospital Funding
323	Programs for the 2017-2018 fiscal year are incorporated by
324	reference in Senate Bill 2502. The calculations are the basis
325	for the appropriations made in the General Appropriations Act.
326	Section 3. Specific Appropriation 207 of Chapter 2017-70,
327	Laws of Florida, is amended to read:
328	
329	SECTION 3 - HUMAN SERVICES
330	
331	SPECIFIC APPROPRIATION
332	
333	The moneys contained herein are appropriated from the named
334	funds to the Agency for Health Care Administration, Agency for
335	Persons with Disabilities, Department of Children and Families,
336	Department of Elder Affairs, Department of Health, and the
337	Department of Veterans' Affairs as the amounts to be used to pay
338	the salaries, other operational expenditures and fixed capital
339	outlay of the named agencies.
340	
341	AGENCY FOR HEALTH CARE ADMINISTRATION
342	
343	From the funds provided in Specific Appropriations 162 through

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	39-00014-17A 20174A
344	232, the Agency for Health Care Administration shall submit
345	quarterly reports on all travel related to training, seminars,
346	workshops, conferences, or similarly purposed travel that was
347	completed by senior management employees or division or program
348	directors. Each quarterly report shall include the following
349	information: (a) employee name, (b) position title, (c) purpose
350	of travel, (d) dates and location of travel, (e) confirmation of
351	agency head authorization if required by SB 2502, and (f) total
352	travel cost. The report shall be submitted to the chair of the
353	Senate Appropriations Committee, the chair of the House of
354	Representatives Appropriations Committee, and the Executive
355	Office of the Governor. The first report shall be submitted on
356	July 15, 2017, for the period of April 1, 2017, through June 30,
357	2017, and quarterly thereafter.
358	
359	PROGRAM: HEALTH CARE SERVICES
360	
361	MEDICAID SERVICES TO INDIVIDUALS
362	
363	From the funds in Specific Appropriations 191 through 220A, the
364	Agency for Health Care Administration shall provide a quarterly
365	reconciliation report of all Medicaid service appropriation
366	expenditures and fund sources. The reconciliation shall compare
367	actual expenditures paid through each specific appropriation
368	category by fund either through the Florida Medicaid Management
369	Information System (FMMIS) or the Agency for Health Care
370	Administration to expenditure estimates forecasted through the
371	Social Services Estimating Conference Medicaid services
372	forecasting model, as directed in section 216.136(6), Florida

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373	
374	each comparison. For any category where a variance is
375	identified, the Agency for Health Care Administration shall
376	submit a written corrective action plan to address each variance
377	by category and fund source. The reconciliation shall be
378	submitted to the Office of the Governor, the President of the
379	Senate, and the Speaker of the House of Representatives no later
380	than 30 days after the close of each quarter. The Agency for
381	Health Care Administration may submit budget amendments to the
382	Legislative Budget Commission to realign appropriation
383	categories based on the reconciliation pursuant to the
384	provisions of chapter 216, Florida Statutes.
385	
	207 SPECIAL
	CATEGORIES
386	
	PREPAID HEALTH PLANS
387	
	FROM GENERAL REVENUE <u>3,259,771,877</u>
	FUND 3,125,225,879
388	
	FROM HEALTH CARE 388,170,046
	TRUST FUND
389	
	FROM TOBACCO 283,209,096
	SETTLEMENT TRUST
	FUND
390	
	FROM GRANTS AND 1,409,122,479

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	39-00014-17A 20174A_	
	DONATIONS TRUST FUND	
391		
	FROM MEDICAL CARE <u>7,521,165,423</u>	}
	TRUST FUND 7,305,709,389	<u>}</u>
392		
	FROM PUBLIC MEDICAL 692,598,885)
	ASSISTANCE TRUST	
	FUND	
393		
	FROM REFUGEE 57,759,492	•
	ASSISTANCE TRUST	
	FUND	
394		
395	Section 4. For the purposes of Specific Appropriations 198,	
396	199, 203, and 207 of the 2017-2018 General Appropriations Act,	
397	the calculations for the Medicaid Disproportionate Share	
398	Hospital and Hospital Reimbursement programs for the 2017-2018	
399	fiscal year contained in the document titled "Medicaid Hospital	
400	Funding Programs," dated June 6, 2017, and filed with the	
401	Secretary of the Senate, are incorporated by reference for the	
402	purpose of displaying the calculations used by the Legislature,	
403	consistent with the requirements of state law, in making	
404	appropriations for the Medicaid Disproportionate Share Hospital	
405	and Hospital Reimbursement programs. This section expires July	
406	<u>1, 2018.</u>	
407	Section 5. This act shall take effect July 1, 2017; or, if	
408	this act fails to become a law until after that date, it shall	
409	take effect upon becoming a law and shall operate retroactively	
410	to July 1, 2017.	
I		

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