5-629-99

A bill to be entitled
An act relating to Medicaid managed health
care; amending s. 409.912, F.S.; authorizing
the Agency for Health Care Administration to
award additional contracts for providing
comprehensive behavioral health care services
to certain Medicaid recipients; defining the
term "comprehensive behavioral health care
services"; providing a deadline for
implementing this act; providing an effective
date.

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

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Section 1. Paragraph (b) of subsection (3) of section 409.912, Florida Statutes, 1998 Supplement, is amended to read:

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409.912 Cost-effective purchasing of health care.--The agency shall purchase goods and services for Medicaid recipients in the most cost-effective manner consistent with the delivery of quality medical care. The agency shall maximize the use of prepaid per capita and prepaid aggregate fixed-sum basis services when appropriate and other alternative service delivery and reimbursement methodologies, including competitive bidding pursuant to s. 287.057, designed to facilitate the cost-effective purchase of a case-managed continuum of care. The agency shall also require providers to minimize the exposure of recipients to the need for acute inpatient, custodial, and other institutional care and the inappropriate or unnecessary use of high-cost services.

(3) The agency may contract with:

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(b) An entity that is providing comprehensive behavioral inpatient and outpatient mental health care services to certain Medicaid recipients in Hillsborough, Highlands, Hardee, Manatee, and Polk Counties, through a capitated, prepaid arrangement pursuant to the federal waiver provided for by s. 409.905(5). Such an entity must become licensed under chapter 624, chapter 636, or chapter 641 and must possess the clinical systems and operational competence to manage risk and provide comprehensive behavioral health care to Medicaid recipients by December 31, 1998, and is exempt from the provisions of part I of chapter 641 until then. As used in this subsection, the term "comprehensive behavioral health care services" means all covered services of psychiatric and substance abuse inpatient, psychiatric outpatient, and community mental health and mental health targeted case management for adults and children which services are available to Medicaid recipients. Beginning October 1, 1999, the agency shall use competitive bidding to award additional capitated, prepaid contracts for comprehensive behavioral health care services. An entity cannot submit a proposal for such a contract unless it is licensed under chapter 624, chapter 636, or chapter 641 and possesses the clinical systems and operational competence to manage risk and provide comprehensive behavioral health care services to Medicaid recipients. However, if the entity assumes risk, the Department of Insurance shall develop appropriate regulatory requirements by rule under the insurance code before the entity becomes operational. Section 2. This act shall take effect October 1, 1999.

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2	SENATE SUMMARY
3	Authorizes the Agency for Health Care Administration to
4	award additional contracts for providing comprehensive behavioral health care services to certain Medicaid recipients in specified counties. Defines the term
5	"comprehensive behavioral health care services." Requires that the act be implemented within 12 months after its
6	effective date.
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