

By the Committee on Health, Aging and Long-Term Care; and Senators Clary, Dawson-White, Silver, Klein, Bronson, Gutman, Mitchell, Childers, Kurth, Latvala, Forman, Dyer and Campbell

317-2081A-99

1                                   A bill to be entitled  
2           An act relating to children's health; amending  
3           s. 409.8132, F.S.; revising enrollment  
4           procedures in the Medikids program; amending s.  
5           409.814, F.S.; revising eligibility for certain  
6           children under the Florida Kidcare program;  
7           allowing coverage of certain children  
8           ineligible for federal funding; amending  
9           409.815, F.S.; providing a limited Kidcare  
10          dental program; amending s. 409.904, F.S.;  
11          providing for presumptive eligibility for the  
12          Medicaid program under certain circumstances;  
13          amending s. 409.906, F.S.; establishing a  
14          certified match program for Healthy Start  
15          services; amending s. 624.91, F.S.; providing  
16          for waiver or reduction of local match  
17          requirements; authorizing automated processing;  
18          providing an effective date.

19  
20 Be It Enacted by the Legislature of the State of Florida:

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22           Section 1. Subsection (7) of section 409.8132, Florida  
23 Statutes, 1998 Supplement, is amended to read:

24           409.8132 Medikids program component.--

25           (7) ENROLLMENT.--Enrollment in the Medikids program  
26 component may only occur during periodic open enrollment  
27 periods as specified by the agency. During the first 12 months  
28 of the program, there shall be at least one, but no more than  
29 three, open enrollment periods. The initial open enrollment  
30 period shall be for 90 days, and subsequent open enrollment  
31 periods during the first year of operation of the program

1 shall be for 30 days. After the first year of the program, the  
2 agency shall determine the frequency and duration of open  
3 enrollment periods. An applicant may apply for enrollment in  
4 the Medikids program component and proceed through the  
5 eligibility determination process at any time throughout the  
6 year. However, enrollment in Medikids shall not begin until  
7 the next open enrollment period; and a child may not receive  
8 services under the Medikids program until the child is  
9 enrolled in a managed care plan or MediPass. In addition, once  
10 determined eligible, an applicant may receive choice  
11 counseling and select a managed care plan or MediPass. If the  
12 applicant does not select a managed care plan or MediPass  
13 within 30 days after receiving choice counseling, the agency  
14 shall assign the applicant to a managed care plan or MediPass.  
15 Assignments shall be divided equally between the MediPass  
16 program and managed care plans.~~An applicant may select~~  
17 ~~MediPass under the Medikids program component only in counties~~  
18 ~~that have fewer than two managed care plans available to serve~~  
19 ~~Medicaid recipients and only if the federal Health Care~~  
20 ~~Financing Administration determines that MediPass constitutes~~  
21 ~~"health insurance coverage" as defined in Title XXI of the~~  
22 ~~Social Security Act.~~

23 Section 2. Subsection (4) of section 409.814, Florida  
24 Statutes, 1998 Supplement, is amended to read:

25 409.814 Eligibility.--A child whose family income is  
26 equal to or below 200 percent of the federal poverty level is  
27 eligible for the Florida Kidcare program as provided in this  
28 section. In determining the eligibility of such a child, an  
29 assets test is not required.

30 (4) The following children are not eligible to receive  
31 premium assistance for health benefits coverage under ss.

1 409.810-409.820, except under Medicaid if the child would have  
2 been eligible for Medicaid under s. 409.903 or s. 409.904 as  
3 of June 1, 1997:

4 (a) A child who is eligible for coverage under a state  
5 health benefit plan on the basis of a family member's  
6 employment with a public agency in the state;

7 (b) A child who is covered under a group health  
8 benefit plan or under other health insurance coverage,  
9 excluding coverage provided under the Florida Healthy Kids  
10 Corporation as established under s. 624.91;

11 (c) A child who is seeking premium assistance for  
12 employer-sponsored group coverage, if the child has been  
13 covered by the same employer's group coverage during the 6  
14 months prior to the family's submitting an application for  
15 determination of eligibility under the Florida Kidcare  
16 program; or

17 ~~(d) A child who is an alien, but who does not meet the~~  
18 ~~definition of qualified alien, in the United States; or~~

19 (d)(e) A child who is an inmate of a public  
20 institution or a patient in an institution for mental  
21 diseases.

22  
23 Children who are ineligible for federal funding under Medicaid  
24 and Title XXI of the Social Security Act may be enrolled,  
25 based on age and family income, in the appropriate Florida  
26 Kidcare program, and their coverage shall be provided by state  
27 funds only, subject to available appropriation.

28 Section 3. Subsection (3) is added to section 409.815,  
29 Florida Statutes, 1998 Supplement, to read:

30 409.815 Health benefits coverage; limitations.--

31

1           (3) KIDCARE DENTAL PROGRAM.--A Kidcare dental program  
2 is created for children eligible for the Florida Kidcare  
3 program as created under ss. 409.810-409.820, except for those  
4 children eligible under Medicaid and Medikids. The agency  
5 shall develop and administer the Kidcare dental program. Under  
6 the Kidcare dental program:

7           (a) Dental benefits must include the same services  
8 specified in s. 409.906(6), excluding orthodontics.

9           (b) Dental providers must be enrolled in the Medicaid  
10 program and are to be reimbursed using Medicaid  
11 fee-for-service rates.

12           (c) The agency shall designate a limited number of  
13 sites and a limited number of children to participate in the  
14 program using the following criteria:

15           1. Sites selected for the dental program must comply  
16 with the quality and access standards developed under s.  
17 409.820 and must be a condition of program participation;

18           2. No more than three sites may be selected; and

19           3. Enrollment may not exceed 1,000 children.

20  
21 Implementation of the Kidcare dental program is subject to an  
22 annual appropriation for that specific purpose and may not  
23 result in a decrease in the total number of children served  
24 under the program during the previous fiscal year. The agency  
25 shall include in the report required under s. 409.8177, an  
26 evaluation of the Kidcare dental program. This subsection  
27 expires December 31, 2001.

28           Section 4. Subsection (8) is added to section 409.904,  
29 Florida Statutes, 1998 Supplement, to read:

30           409.904 Optional payments for eligible persons.--The  
31 agency may make payments for medical assistance and related

1 services on behalf of the following persons who are determined  
2 to be eligible subject to the income, assets, and categorical  
3 eligibility tests set forth in federal and state law. Payment  
4 on behalf of these Medicaid eligible persons is subject to the  
5 availability of moneys and any limitations established by the  
6 General Appropriations Act or chapter 216.

7 (8) A child who has not attained the age of 19 who  
8 applies for eligibility for the Medicaid program through a  
9 qualified Medicaid provider must be offered the opportunity,  
10 subject to federal rules, to be made presumptively eligible  
11 for the Medicaid program.

12 Section 5. Subsection (11) of section 409.906, Florida  
13 Statutes, 1998 Supplement, is amended to read:

14 409.906 Optional Medicaid services.--Subject to  
15 specific appropriations, the agency may make payments for  
16 services which are optional to the state under Title XIX of  
17 the Social Security Act and are furnished by Medicaid  
18 providers to recipients who are determined to be eligible on  
19 the dates on which the services were provided. Any optional  
20 service that is provided shall be provided only when medically  
21 necessary and in accordance with state and federal law.

22 Nothing in this section shall be construed to prevent or limit  
23 the agency from adjusting fees, reimbursement rates, lengths  
24 of stay, number of visits, or number of services, or making  
25 any other adjustments necessary to comply with the  
26 availability of moneys and any limitations or directions  
27 provided for in the General Appropriations Act or chapter 216.  
28 Optional services may include:

29 (11) HEALTHY START SERVICES.--The agency may pay for a  
30 continuum of risk-appropriate medical and psychosocial  
31 services for the Healthy Start program in accordance with a

1 federal waiver. The agency may not implement the federal  
2 waiver unless the waiver permits the state to limit enrollment  
3 or the amount, duration, and scope of services to ensure that  
4 expenditures will not exceed funds appropriated by the  
5 Legislature or available from local sources. If the Health  
6 Care Financing Administration does not approve a federal  
7 waiver for Healthy Start services, the agency, in consultation  
8 with the Department of Health and the Florida Association of  
9 Healthy Start Coalitions, is authorized to establish a  
10 Medicaid certified match program for Healthy Start services.  
11 Participation in the Healthy Start certified match program  
12 shall be voluntary and reimbursement shall be limited to the  
13 federal Medicaid share to Medicaid-enrolled Healthy Start  
14 Coalitions for services provided to Medicaid recipients. The  
15 agency shall take no action to implement a certified match  
16 program without ensuring that the consultation provisions of  
17 chapter 216 have been met.

18 Section 6. Paragraph (b) of subsection (4) of section  
19 624.91, Florida Statutes, 1998 Supplement, is amended to read:

20 624.91 The Florida Healthy Kids Corporation Act.--

21 (4) CORPORATION AUTHORIZATION, DUTIES, POWERS.--

22 (b) The Florida Healthy Kids Corporation shall phase  
23 in a program to:

24 1. Organize school children groups to facilitate the  
25 provision of comprehensive health insurance coverage to  
26 children;

27 2. Arrange for the collection of any family, local  
28 contributions, or employer payment or premium, in an amount to  
29 be determined by the board of directors, to provide for  
30 payment of premiums for comprehensive insurance coverage and  
31 for the actual or estimated administrative expenses;

1           3. Establish the administrative and accounting  
2 procedures for the operation of the corporation;

3           4. Establish, with consultation from appropriate  
4 professional organizations, standards for preventive health  
5 services and providers and comprehensive insurance benefits  
6 appropriate to children; provided that such standards for  
7 rural areas shall not limit primary care providers to  
8 board-certified pediatricians;

9           5. Establish eligibility criteria which children must  
10 meet in order to participate in the program;

11           6. Establish procedures under which applicants to and  
12 participants in the program may have grievances reviewed by an  
13 impartial body and reported to the board of directors of the  
14 corporation;

15           7. Establish participation criteria and, if  
16 appropriate, contract with an authorized insurer, health  
17 maintenance organization, or insurance administrator to  
18 provide administrative services to the corporation;

19           8. Establish enrollment criteria which shall include  
20 penalties or waiting periods of not fewer than 60 days for  
21 reinstatement of coverage upon voluntary cancellation for  
22 nonpayment of family premiums;

23           9. If a space is available, establish a special open  
24 enrollment period of 30 days' duration for any child who is  
25 enrolled in Medicaid or Medikids if such child loses Medicaid  
26 or Medikids eligibility and becomes eligible for the Florida  
27 Healthy Kids program;

28           10. Contract with authorized insurers or any provider  
29 of health care services, meeting standards established by the  
30 corporation, for the provision of comprehensive insurance  
31 coverage to participants. Such standards shall include

1 criteria under which the corporation may contract with more  
2 than one provider of health care services in program sites.  
3 Health plans shall be selected through a competitive bid  
4 process. The selection of health plans shall be based  
5 primarily on quality criteria established by the board. The  
6 health plan selection criteria and scoring system, and the  
7 scoring results, shall be available upon request for  
8 inspection after the bids have been awarded;

9           11. Develop and implement a plan to publicize the  
10 Florida Healthy Kids Corporation, the eligibility requirements  
11 of the program, and the procedures for enrollment in the  
12 program and to maintain public awareness of the corporation  
13 and the program;

14           12. Secure staff necessary to properly administer the  
15 corporation. Staff costs shall be funded from state ~~and local~~  
16 ~~matching~~ funds and such other private or public funds as  
17 become available. The board of directors shall determine the  
18 number of staff members necessary to administer the  
19 corporation;

20           13. As appropriate, enter into contracts with local  
21 school boards or other agencies to provide onsite information,  
22 enrollment, and other services necessary to the operation of  
23 the corporation;

24           14. Provide a report on an annual basis to the  
25 Governor, Insurance Commissioner, Commissioner of Education,  
26 Senate President, Speaker of the House of Representatives, and  
27 Minority Leaders of the Senate and the House of  
28 Representatives;

29           15. Each fiscal year, establish a maximum number of  
30 participants by county, on a statewide basis, who may enroll  
31 in the program without the benefit of local matching funds.



1 Thereafter, the corporation may establish local matching  
2 requirements for supplemental participation in the program.  
3 The corporation may vary local matching requirements and  
4 enrollment by county depending on factors which may influence  
5 the generation of local match, including, but not limited to,  
6 population density, per capita income, existing local tax  
7 effort, and other factors. The corporation also may accept  
8 in-kind match in lieu of cash for the local match requirement  
9 to the extent allowed by Title XXI of the Social Security Act.  
10 The corporation shall reduce or waive local match requirements  
11 when appropriations are designated for this purpose in the  
12 General Appropriations Act annually; and

13           16. Establish eligibility criteria, premium and  
14 cost-sharing requirements, and benefit packages which conform  
15 to the provisions of the Florida Kidcare program, as created  
16 in ss. 409.810-409.820.

17           Section 7. The Agency for Health Care Administration,  
18 in conjunction with the Department of Children and Families,  
19 is authorized to implement the automation of the processing of  
20 applications and determination of eligibility for Title XXI  
21 services.

22           Section 8. This act shall take effect upon becoming a  
23 law.

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1                   STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN  
2                   COMMITTEE SUBSTITUTE FOR  
3                   Senate Bills 1414 & 2520  
4  
5                   Deletes a requirement that enrollment in Medikids occur year-  
6                   round; deletes a requirement for a statewide Medikids  
7                   enrollment ceiling; deletes 12 month continuous eligibility in  
8                   Kidcare for children over 5; deletes the option for covered  
9                   services under the Kidcare dental program to be determined by  
10                  the Department of Health; excludes orthodontics from covered  
11                  dental services; deletes the requirement that Kidcare dental  
12                  benefits be paid through a third party administrator; adds a  
13                  requirement that providers be reimbursed under the Kidcare  
14                  dental program using Medicaid fee-for-service rates; limits a  
15                  Kidcare dental benefit to three sites and 1,000 participants;  
16                  requires an evaluation of the Kidcare dental program; requires  
17                  that implementation of a Kidcare dental program not decrease  
18                  the number of children served under the program during the  
19                  previous fiscal year; the section authorizing the Kidcare  
20                  dental program is set for repeal effective December, 2001;  
21                  deletes the requirement that the Healthy Kids corporation  
22                  contract with more than one provider in program sites;  
23                  authorizes a Medicaid certified match program for Healthy  
24                  Start services; requires that the Agency for Health Care  
25                  Administration take no action to implement the certified match  
26                  program until the consultation requirements of chapter 216,  
27                  F.S., have been met; repeals the requirement that the Healthy  
28                  Kids Corporation establish enrollment maximums by county;  
29                  allows the Healthy Kids Corporation to vary local matching  
30                  requirements and enrollments and accept in-kind match in lieu  
31                  of cash; allows the Healthy Kids Corporation to reduce or  
                 waive local match requirements when appropriations are  
                 designated for this purpose; and authorizes the Agency for  
                 Health Care Administration and the Department of Children and  
                 Families to implement automated processing and determination  
                 of eligibility for Title XXI services.