Amendment No. ____ (for drafter's use only)

	<u>Senate</u> <u>House</u>
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.1	The Committee on Health & Human Services Appropriations
.2	offered the following:
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.4	Amendment (with title amendment)
.5	Remove from the bill: Everything after the enacting clause
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-7	and insert in lieu thereof:
-8	Section 1. Paragraph (a) of subsection (6) of section
.9	216.136, Florida Statutes, is amended to read:
20	216.136 Consensus estimating conferences; duties and
21	principals
22	(6) SOCIAL SERVICES ESTIMATING CONFERENCE
23	(a) Duties
24	1. The Social Services Estimating Conference shall
25	develop such official information relating to the social
26	services system of the state, including forecasts of social
27	services caseloads, as the conference determines is needed for
28	the state planning and budgeting system. Such official
29	information shall include, but not be limited to, subsidized
30	child care caseloads mandated by the Family Support Act of
31	1988.

CHAMBER ACTION

- 2. In addition, the Social Services Estimating Conference shall develop estimates and forecasts of the unduplicated count of children eligible for subsidized child care as defined in s. 402.3015(1). These estimates and forecasts shall not include children enrolled in the prekindergarten early intervention program established in s. 230.2305.
- 3. The Department of Children and Family Services and the Department of Education shall provide information on caseloads and waiting lists for the subsidized child care and prekindergarten early intervention programs requested by the Social Services Estimating Conference or individual conference principals, in a timely manner.
- 4. The Social Services Estimating Conference shall develop information relating to the Florida Kidcare program, including, but not limited to, outreach impacts, enrollment, caseload, utilization, and expenditure information that the conference determines is needed to plan for and project future budgets and the drawdown of federal matching funds. The agencies required to collect and analyze Florida Kidcare program data under s. 409.8134 shall be participants in the Social Services Estimating Conference for purposes of developing information relating to the Florida Kidcare program.

Section 2. Subsections (4), (6), (7), and (8) of section 409.8312, Florida Statutes, are amended to read:

409.8132 Medikids program component.--

(4) APPLICABILITY OF LAWS RELATING TO MEDICAID.--The provisions of ss. 409.902, 409.905, 409.906, 409.907, 409.908, 409.910, 409.912, 409.9121, 409.9122, 409.9123, 409.9124, 409.9127, 409.9128, 409.913, 409.916, 409.919, 409.920, and

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409.9205 apply to the administration of the Medikids program component of the Florida Kidcare program, except that s. 409.9122 applies to Medikids as modified by the provisions of subsection (7).

- (6) ELIGIBILITY. --
- (a) A child who has attained the age of 1 year but who is under the age of 5 years is eligible to enroll in the Medikids program component of the Florida Kidcare program, if the child is a member of a family that has a family income which exceeds the Medicaid applicable income level as specified in s. 409.903, but which is equal to or below 200 percent of the current federal poverty level. In determining the eligibility of such a child, an assets test is not required. A child who is eligible for Medikids may elect to enroll in Florida Healthy Kids coverage or employer-sponsored group coverage. However, a child who is eligible for Medikids may participate in the Florida Healthy Kids program only if the child has a sibling participating in the Florida Healthy Kids program and the child's county of residence permits such enrollment.
- (b) The provisions of s. 409.814(3), (4), and (5) shall be applicable to the Medikids program.
- component may only occur during periodic open enrollment periods as specified by the agency. During the first 12 months of the program, there shall be at least one, but no more than three, open enrollment periods. The initial open enrollment period shall be for 90 days, and subsequent open enrollment periods during the first year of operation of the program shall be for 30 days. After the first year of the program, the agency shall determine the frequency and duration of open

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enrollment periods. An applicant may apply for enrollment in the Medikids program component and proceed through the eligibility determination process at any time throughout the year. However, enrollment in Medikids shall not begin until the next open enrollment period; and a child may not receive services under the Medikids program until the child is enrolled in a managed care plan or MediPass. In addition, once determined eligible, an applicant may receive choice counseling and select a managed care plan or MediPass. The agency may initiate mandatory assignment for a Medikids applicant who has not chosen a managed care plan or MediPass provider after the applicant's voluntary choice period ends. An applicant may select MediPass under the Medikids program component only in counties that have fewer than two managed care plans available to serve Medicaid recipients and only if the federal Health Care Financing Administration determines that MediPass constitutes "health insurance coverage" as defined in Title XXI of the Social Security Act.

(8) SPECIAL ENROLLMENT PERIODS. -- The agency shall establish a special enrollment period of 30 days' duration for any newborn child who is eligible for Medikids, or for any child who is enrolled in Medicaid if such child loses Medicaid eligibility and becomes eligible for Medikids, or for any child who is enrolled in Medikids if such child moves to another county that is not within the coverage area of the child's Medikids managed care plan or MediPass provider.

Section 3. Subsection (3) of section 409.8134, Florida Statutes, is amended to read:

409.8134 Program enrollment and expenditure ceilings.--

The agencies that administer the Florida Kidcare

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program components agency shall collect and analyze the data
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    needed to project Florida Kidcare program enrollment,
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    including outreach impacts, participation rates, caseloads,
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    utilization, and expenditures. The agencies agency shall
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    report the caseload and expenditure trends to the Social
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    Services Estimating Conference in accordance with chapter 216.
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           Section 4. Section 409.814, Florida Statutes, is
    amended to read:
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           409.814 Eliqibility.--A child whose family income is
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    equal to or below 200 percent of the federal poverty level is
    eligible for the Florida Kidcare program as provided in this
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    section. In determining the eligibility of such a child, an
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    assets test is not required. An applicant under 19 years of
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    age who, based on a complete application, appears to be
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    eligible for the Medicaid component of the Florida Kidcare
    program is presumed eligible for coverage under Medicaid,
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    subject to federal rules. A child who has been deemed
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    presumptively eligible for Medicaid shall not be enrolled in a
    managed care plan until the child's full eligibility
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    determination for Medicaid has been completed. The Florida
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    Healthy Kids Corporation may, subject to compliance with
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    applicable requirements of the Agency for Health Care
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    Administration and the Department of Children and Family
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    Services, be designated as an entity to conduct presumptive
    eligibility determinations. If, after verification, an
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    individual is determined to be ineligible for coverage, he or
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    she must be disenrolled from Medicaid.
           (1) A child who is eligible for Medicaid coverage
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    under s. 409.903 or s. 409.904 must be enrolled in Medicaid
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    and is not eligible to receive health benefits under any other
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- (2) A child who is not eligible for Medicaid, but who is eligible for the Florida Kidcare program, may obtain coverage under any of the other types of health benefits coverage authorized in ss. 409.810-409.820 if such coverage is approved and available in the county in which the child resides. However, a child who is eligible for Medikids may participate in the Florida Healthy Kids program only if the child has a sibling participating in the Florida Healthy Kids program and the child's county of residence permits such enrollment.
- (3) A child who is eligible for the Florida Kidcare program who is a child with special health care needs, as determined through a <u>medical or behavioral screening</u>

 risk-screening instrument, is eligible for health benefits coverage from and <u>shall</u> <u>may</u> be referred to the Children's Medical Services network.
- (4) The following children are not eligible to receive premium assistance for health benefits coverage under ss. 409.810-409.820, except under Medicaid if the child would have been eligible for Medicaid under s. 409.903 or s. 409.904 as of June 1, 1997:
- (a) A child who is eligible for coverage under a state health benefit plan on the basis of a family member's employment with a public agency in the state.
- (b) A child who is covered under a group health benefit plan or under other health insurance coverage, excluding coverage provided under the Florida Healthy Kids Corporation as established under s. 624.91.÷
- (c) A child who is seeking premium assistance for employer-sponsored group coverage, if the child has been covered by the same employer's group coverage during the 6

months prior to the family's submitting an application for determination of eligibility under the Florida Kidcare program. $\dot{\tau}$

- (d) A child who is an alien, but who does not meet the definition of qualified alien, in the United States. $\frac{1}{1}$ or
- (e) A child who is an inmate of a public institution or a patient in an institution for mental diseases.
- (5) A child whose family income is above 200 percent of the federal poverty level or a child who is excluded under the provisions of subsection (4) may participate in the Florida Kidcare program, excluding the Medicaid program, but is subject to the following provisions:
- (a) The family is not eligible for premium assistance payments and must pay the full cost of the premium, including any administrative costs.
- (b) The agency is authorized to place limits on enrollment in Medikids by these children in order to avoid adverse selection. The number of children participating in Medikids whose family income exceeds 200 percent of the federal poverty level must not exceed 10 percent of total enrollees in the Medikids program.
- (c) The board of directors of the Florida Healthy Kids Corporation is authorized to place limits on enrollment of these children in order to avoid adverse selection. In addition, the board is authorized to offer a reduced benefit package to these children in order to limit program costs for such families. The number of children participating in the Florida Healthy Kids program whose family income exceeds 200 percent of the federal poverty level must not exceed 10 percent of total enrollees in the Florida Healthy Kids program.

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- (d) Children described in this subsection are not counted in the annual enrollment ceiling for the Florida Kidcare program.
- (6) Once a child is <u>enrolled in determined eligible</u> for the Florida Kidcare program, the child is eligible for coverage under the program for 6 months without a redetermination or reverification of eligibility, if the family continues to pay the applicable premium. Effective January 1, 1999, a child who has not attained the age of 5 and who has been determined eligible for the Medicaid program is eligible for coverage for 12 months without a redetermination or reverification of eligibility.
- (7) When determining or reviewing a child's eligibility under the program, the applicant shall be provided with reasonable notice of changes in eligibility which may affect enrollment in one or more of the program components.

 When a transition from one program component to another is appropriate, there shall be cooperation between the program components and the affected family which promotes continuity of health care coverage.
- Section 5. Paragraphs (q), (r), (s), (t), and (u) of subsection (2) of section 409.815, Florida Statutes, are renumbered as paragraphs (r), (s), (t), (u), and (v), respectively, and a new paragraph (q) is added to said section to read:
 - 409.815 Health benefits coverage; limitations.--
- (2) BENCHMARK BENEFITS.--In order for health benefits coverage to qualify for premium assistance payments for an eligible child under ss. 409.810-409.820, the health benefits coverage, except for coverage under Medicaid and Medikids, must include the following minimum benefits, as medically

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necessary.

(q) Dental services.--Subject to a specific appropriation for this benefit, covered services include those dental services provided to children by the Florida Medicaid program under s. 409.906(6).

Section 6. Section 409.8177, Florida Statutes, is amended to read:

409.8177 Program evaluation.--The agency, in consultation with the Department of Health, the Department of Children and Family Services, and the Florida Healthy Kids Corporation, shall by January 1 of each year submit to the Governor, the President of the Senate, and the Speaker of the House of Representatives Legislature a report of the Florida Kidcare program. In addition to the items specified under s. 2108 of Title XXI of the Social Security Act, the report shall include an assessment of crowd-out and access to health care, as well as the following:

- (1) An assessment of the operation of the program, including the progress made in reducing the number of uncovered low-income children.
- (2) An assessment of the effectiveness in increasing the number of children with creditable health coverage, including an assessment of the impact of outreach.
- (3) The characteristics of the children and families assisted under the program, including ages of the children, family income, and access to or coverage by other health insurance prior to the program and after disenvollment from the program.
- (4) The quality of health coverage provided, including the types of benefits provided.
 - (5) The amount and level, including payment of part or

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all of any premium, of assistance provided.

- (6) The average length of coverage of a child under the program.
- (7) The program's choice of health benefits coverage and other methods used for providing child health assistance.
- (8) The sources of nonfederal funding used in the program.
- (9) An assessment of the effectiveness of Medikids, Children's Medical Services network, and other public and private programs in the state in increasing the availability of affordable quality health insurance and health care for children.
- (10) A review and assessment of state activities to coordinate the program with other public and private programs.
- (11) An analysis of changes and trends in the state that affect the provision of health insurance and health care to children.
- (12) A description of any plans the state has for improving the availability of health insurance and health care for children.
 - (13) Recommendations for improving the program.
 - (14) Other studies as necessary.

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The agency shall also submit each month to the Governor, the President of the Senate, and the Speaker of the House of Representatives a report of enrollment for each program component of the Florida Kidcare program.

Section 7. Paragraph (b) of subsection (1) of section 409.818, Florida Statutes, is amended to read:

409.818 Administration.--In order to implement ss.

409.810-409.820, the following agencies shall have the

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following duties:

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- (1) The Department of Children and Family Services shall:
- Establish and maintain the eligibility determination process under the program except as specified in subsection (5). The department shall directly, or through the services of a contracted third-party administrator, establish and maintain a process for determining eligibility of children for coverage under the program. The eligibility determination process must be used solely for determining eligibility of applicants for health benefits coverage under the program. The eligibility determination process must include an initial determination of eligibility for any coverage offered under the program, as well as a redetermination or reverification of eligibility each subsequent 6 months. Effective January 1, 1999, a child who has not attained the age of 5 and who has been determined eligible for the Medicaid program is eligible for coverage for 12 months without a redetermination or reverification of eligibility. In conducting an eligibility determination, the department shall determine if the child has special health care needs. The department, in consultation with the Agency for Health Care Administration and the Florida Healthy Kids Corporation, shall develop procedures for redetermining eligibility which enable a family to easily update any change in circumstances which could affect eligibility. The department may accept changes in a family's status as reported to the department by the Florida Healthy Kids Corporation without requiring a new application from the family. Redetermination of a child's eligibility for Medicaid may not be linked to a child's eligibility determination for

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other programs.

Section 8. Subsections (6) and (7) of section 409.903, Florida Statutes, are amended to read:

409.903 Mandatory payments for eligible persons.--The agency shall make payments for medical assistance and related services on behalf of the following persons who the agency determines to be eligible, subject to the income, assets, and categorical eligibility tests set forth in federal and state law. Payment on behalf of these Medicaid eligible persons is subject to the availability of moneys and any limitations established by the General Appropriations Act or chapter 216.

- (6) A child born after September 30, 1983, living in a family that has an income which is at or below 100 percent of the current federal poverty level, who has attained the age of 6, but has not attained the age of 19. In determining the eligibility of such a child, an assets test is not required. A child who is eligible for Medicaid under this subsection must be offered the opportunity, subject to federal rules, to be made presumptively eligible. A child who has been deemed presumptively eligible for Medicaid shall not be enrolled in a managed care plan until the child's full eligibility determination for Medicaid has been completed.
- which is at or below 133 percent of the current federal poverty level, who has attained the age of 1, but has not attained the age of 6. In determining the eligibility of such a child, an assets test is not required. A child who is eligible for Medicaid under this subsection must be offered the opportunity, subject to federal rules, to be made presumptively eligible. A child who has been deemed presumptively eligible for Medicaid shall not be enrolled in a

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determination for Medicaid has been completed.

Section 9. Subsection (6) of section 409.904, Florida Statutes, is amended, and subsection (8) is added to said section, to read:

409.904 Optional payments for eligible persons.--The agency may make payments for medical assistance and related services on behalf of the following persons who are determined to be eligible subject to the income, assets, and categorical eliqibility tests set forth in federal and state law. Payment on behalf of these Medicaid eligible persons is subject to the availability of moneys and any limitations established by the General Appropriations Act or chapter 216.

- (6) A child born before October 1, 1983, living in a family that has an income which is at or below 100 percent of the current federal poverty level, who has attained the age of 6, but has not attained the age of 19, and who would be eligible in s. 409.903(6), if the child had been born on or after such date. In determining the eligibility of such a child, an assets test is not required. A child who is eligible for Medicaid under this subsection must be offered the opportunity, subject to federal rules, to be made presumptively eligible. A child who has been deemed presumptively eligible for Medicaid shall not be enrolled in a managed care plan until the child's full eligibility determination for Medicaid has been completed.
- (8) A child under 1 year of age who lives in a family that has an income above 185 percent of the most recently published federal poverty level, but which is at or below 200 percent of such poverty level. In determining the eligibility of such child, an assets test is not required. A child who is

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the opportunity, subject to federal rules, to be made presumptively eligible.

Section 10. Subsection (3) of section 391.025, Florida Statutes, is amended to read:

391.025 Applicability and scope. --

(3) The Children's Medical Services program shall not be deemed an insurer and is not subject to the licensing requirements of the Florida Insurance Code or the rules of the Department of Insurance, when providing services to children who receive Medicaid benefits, other Medicaid-eligible children with special health care needs, and children participating in the Florida Kidcare program. This exemption shall not extend to contractors.

Section 11. The provisions of this act which would require changes to contracts in existence as of June 30, 2000, between the Florida Healthy Kids Corporation and contracted providers of such corporation shall be applied to such contracts upon renewal of the contracts, but not later than July 1, 2002.

Section 12. The Division of State Group Insurance of the Department of Management Services and the Florida Healthy Kids Corporation shall study the feasibility of providing a subsidy comparable to the subsidy available through the Florida Healthy Kids Corporation for health insurance coverage through the state employee health insurance program for children of state employees who meet the eligibility requirements for the Florida Healthy Kids program. The Division of State Group Insurance and the Florida Healthy Kids Corporation shall submit a report by January 1, 2001, to the Governor, the President of the Senate, and the Speaker of the

House of Representatives with their recommendations as to

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whether such a subsidy should be provided through the state
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    employee health insurance program and how a subsidy could be
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    administered.
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           Section 13. This act shall take effect July 1, 2000.
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    ======== T I T L E A M E N D M E N T ==========
    And the title is amended as follows:
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           On page 1, line 2, through page 2, line 23
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    remove from the title of the bill: all of said lines
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    and insert in lieu thereof:
           An act relating to health care assistance for
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           children; amending s. 216.136, F.S.; requiring
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           the Social Services Estimating Conference to
           develop certain information relating to the
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           Florida Kidcare program; amending s. 409.8132,
           F.S.; deleting an inappropriate cross
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           reference; revising eligibility requirements
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           for the Medikids program component of the
           Florida Kidcare program; authorizing a
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           mandatory assignment process under specified
           circumstances; deleting obsolete language;
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           revising enrollment procedures; amending s.
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           409.8134, F.S.; requiring agencies that
           administer Florida Kidcare components to
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           collect certain information and report to the
           Social Services Estimating Conference; amending
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           s. 409.814, F.S.; providing for
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           Medicaid-presumptive eligibility; providing for
           expedited enrollment; requiring applicant
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notice of changes in eligibility; requiring certain actions relating to such transition; amending s. 409.815, F.S.; providing for dental benefits under the Florida Kidcare program, subject to a specific appropriation; amending s. 409.8177, F.S.; clarifying annual report requirements; requiring the Agency for Health Care Administration to submit additional monthly reports to the Governor and Legislature; amending s. 409.818, F.S.; providing for a more simple eligibility redetermination process; amending s. 409.903, F.S.; providing for presumptive eligibility for children eligible for Medicaid; amending s. 409.904, F.S.; revising the eligibility requirements for optional payments for medical assistance and related services for certain children; providing for presumptive eligibility; amending s. 391.025, F.S.; deleting a contractor exclusion from an exemption for the Children's Medical Services program from certain licensing requirements of the Insurance Code and the Department of Insurance; providing for application to existing contracts of the Florida Healthy Kids Corporation; requiring the Division of State Group Insurance of the Department of Management Services and the Florida Healthy Kids Corporation to study the feasibility of subsidizing health insurance coverage for children of certain state employees; specifying Amendment No. ____ (for drafter's use only)

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            date.
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