

By the Committee on Health Care Services and
Representatives Peadar, Bullard, Bloom, Jacobs, Sobel, Heyman,
Turnbull, Wasserman Schultz, Chestnut, Lynn, Betancourt,
Murman, Brown, Edwards, Ritchie, Wilson, Detert, Dockery,
(Additional Sponsors on Last Printed Page)

1 A bill to be entitled
2 An act relating to health care assistance for
3 children; amending s. 216.136, F.S.; requiring
4 the Social Services Estimating Conference to
5 develop certain information relating to the
6 Florida Kidcare program; amending s. 409.8132,
7 F.S.; deleting an inappropriate cross
8 reference; revising eligibility requirements
9 for the Medikids program component of the
10 Florida Kidcare program; authorizing a
11 mandatory assignment process under specified
12 circumstances; revising enrollment procedures;
13 amending s. 409.8134, F.S.; requiring agencies
14 that administer Florida Kidcare components to
15 collect certain information and report to the
16 Social Services Estimating Conference; amending
17 s. 409.814, F.S.; providing for
18 Medicaid-presumptive eligibility; providing for
19 expedited enrollment; revising eligibility for
20 certain children for services under the
21 Children's Medical Services network; requiring
22 implementation of income disregard for certain
23 costs under certain circumstances; allowing
24 premium assistance for certain children
25 ineligible for federal funding; extending the
26 period of continuous eligibility for the
27 Florida Kidcare program; requiring applicant
28 notice of changes in eligibility; requiring
29 certain actions relating to such transition;
30 amending s. 409.815, F.S.; providing for dental
31 benefits under the Florida Kidcare program,

1 subject to a specific appropriation; amending
2 s. 409.8177, F.S.; clarifying annual report
3 requirements; requiring the Agency for Health
4 Care Administration to submit additional
5 monthly reports to the Governor and
6 Legislature; amending s. 409.818, F.S.;
7 extending the period of continuous eligibility
8 for the Florida Kidcare program; requiring
9 simplified eligibility redetermination;
10 amending s. 409.903, F.S.; providing for
11 presumptive eligibility for children eligible
12 for Medicaid; amending s. 409.904, F.S.;
13 revising the eligibility requirements for
14 optional payments for medical assistance and
15 related services for certain children;
16 authorizing optional payments for certain
17 pregnant women; providing for presumptive
18 eligibility; eliminating the local match
19 requirement under the Florida Healthy Kids
20 Corporation under certain circumstances;
21 providing for application to existing contracts
22 of the Florida Healthy Kids Corporation;
23 providing an effective date.

24
25 Be It Enacted by the Legislature of the State of Florida:

26
27 Section 1. Paragraph (a) of subsection (6) of section
28 216.136, Florida Statutes, is amended to read:

29 216.136 Consensus estimating conferences; duties and
30 principals.--

31 (6) SOCIAL SERVICES ESTIMATING CONFERENCE.--

1 (a) Duties.--

2 1. The Social Services Estimating Conference shall
3 develop such official information relating to the social
4 services system of the state, including forecasts of social
5 services caseloads, as the conference determines is needed for
6 the state planning and budgeting system. Such official
7 information shall include, but not be limited to, subsidized
8 child care caseloads mandated by the Family Support Act of
9 1988.

10 2. In addition, the Social Services Estimating
11 Conference shall develop estimates and forecasts of the
12 unduplicated count of children eligible for subsidized child
13 care as defined in s. 402.3015(1). These estimates and
14 forecasts shall not include children enrolled in the
15 prekindergarten early intervention program established in s.
16 230.2305.

17 3. The Department of Children and Family Services and
18 the Department of Education shall provide information on
19 caseloads and waiting lists for the subsidized child care and
20 prekindergarten early intervention programs requested by the
21 Social Services Estimating Conference or individual conference
22 principals, in a timely manner.

23 4. The Social Services Estimating Conference shall
24 develop information relating to the Florida Kidcare program,
25 including, but not limited to, outreach impacts, enrollment,
26 caseload, utilization, and expenditure information that the
27 conference determines is needed to plan for and project future
28 budgets and the drawdown of federal matching funds. The
29 agencies required to collect and analyze Florida Kidcare
30 program data under s. 409.8134 shall be participants in the
31 Social Services Estimating Conference for purposes of

1 developing information relating to the Florida Kidcare
2 program.

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

5 409.8132 Medikids program component.--

6 (4) APPLICABILITY OF LAWS RELATING TO MEDICAID.--The
7 provisions of ss. 409.902, 409.905, 409.906, 409.907, 409.908,
8 ~~409.910~~, 409.912, 409.9121, 409.9122, 409.9123, 409.9124,
9 409.9127, 409.9128, 409.913, 409.916, 409.919, 409.920, and
10 409.9205 apply to the administration of the Medikids program
11 component of the Florida Kidcare program, except that s.
12 409.9122 applies to Medikids as modified by the provisions of
13 subsection (7).

14 (6) ELIGIBILITY.--

15 (a) A child who has attained the age of 1 year but who
16 is under the age of 5 years is eligible to enroll in the
17 Medikids program component of the Florida Kidcare program, if
18 the child is a member of a family that has a family income
19 which exceeds the Medicaid applicable income level as
20 specified in s. 409.903, but which is equal to or below 200
21 percent of the current federal poverty level. In determining
22 the eligibility of such a child, an assets test is not
23 required. A child who is eligible for Medikids may elect to
24 enroll in Florida Healthy Kids coverage or employer-sponsored
25 group coverage. However, a child who is eligible for Medikids
26 may participate in the Florida Healthy Kids program only if
27 the child has a sibling participating in the Florida Healthy
28 Kids program and the child's county of residence permits such
29 enrollment.

30 (b) The provisions of s. 409.814(3), (4), and (5)
31 shall be applicable to the Medikids program.

1 (7) ENROLLMENT.--Enrollment in the Medikids program
2 component may only occur during periodic open enrollment
3 periods as specified by the agency. ~~During the first 12 months~~
4 ~~of the program, there shall be at least one, but no more than~~
5 ~~three, open enrollment periods. The initial open enrollment~~
6 ~~period shall be for 90 days, and subsequent open enrollment~~
7 ~~periods during the first year of operation of the program~~
8 ~~shall be for 30 days. After the first year of the program, the~~
9 ~~agency shall determine the frequency and duration of open~~
10 ~~enrollment periods.~~An applicant may apply for enrollment in
11 the Medikids program component and proceed through the
12 eligibility determination process at any time throughout the
13 year. However, enrollment in Medikids shall not begin until
14 the next open enrollment period; and a child may not receive
15 services under the Medikids program until the child is
16 enrolled in a managed care plan or MediPass. In addition, once
17 determined eligible, an applicant may receive choice
18 counseling and select a managed care plan or MediPass. The
19 agency may initiate mandatory assignment for a Medikids
20 applicant who has not chosen a managed care plan or MediPass
21 provider after the applicant's voluntary choice period ends.
22 An applicant may select MediPass under the Medikids program
23 component only in counties that have fewer than two managed
24 care plans available to serve Medicaid recipients and only if
25 the federal Health Care Financing Administration determines
26 that MediPass constitutes "health insurance coverage" as
27 defined in Title XXI of the Social Security Act.

28 (8) SPECIAL ENROLLMENT PERIODS.--The agency shall
29 establish a special enrollment period of 30 days' duration ~~for~~
30 ~~any newborn child who is eligible for Medikids, or for any~~
31 child who is enrolled in Medicaid if such child loses Medicaid

1 eligibility and becomes eligible for Medikids, or for any
2 child who is enrolled in Medikids if such child moves to
3 another county that is not within the coverage area of the
4 child's Medikids managed care plan or MediPass provider.

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

7 409.8134 Program enrollment and expenditure
8 ceilings.--

9 (3) The agencies that administer the Florida Kidcare
10 program components ~~agency~~ shall collect and analyze the data
11 needed to project Florida Kidcare program enrollment,
12 including outreach impacts, participation rates, caseloads,
13 utilization, and expenditures. The agencies ~~agency~~ shall
14 report the caseload and expenditure trends to the Social
15 Services Estimating Conference in accordance with chapter 216.

16 Section 4. Section 409.814, Florida Statutes, is
17 amended to read:

18 409.814 Eligibility.--A child whose family income is
19 equal to or below 200 percent of the federal poverty level is
20 eligible for the Florida Kidcare program as provided in this
21 section. In determining the eligibility of such a child, an
22 assets test is not required. An applicant under 19 years of
23 age who, based on a complete application, appears to be
24 eligible for the Medicaid component of the Florida Kidcare
25 program is presumed eligible for coverage under Medicaid,
26 subject to federal rules. A child who has been deemed
27 presumptively eligible for Medicaid shall not be enrolled in a
28 managed care plan until the child's full eligibility
29 determination for Medicaid has been completed. The Florida
30 Healthy Kids Corporation shall be designated as an entity to
31 conduct presumptive eligibility determinations. An applicant

1 under 19 years of age who, based on a complete application,
2 appears to be eligible for the Medikids, Florida Healthy Kids,
3 or Children's Medical Services network program component, who
4 is screened as ineligible for Medicaid and prior to the
5 monthly verification of the applicant's enrollment in Medicaid
6 or of eligibility for coverage under the state employee health
7 benefit plan, may be enrolled in and begin receiving coverage
8 from the appropriate program component on the first day of the
9 month following the receipt of a completed application. For
10 enrollment in the Children's Medical Services network, a
11 complete application includes the medical or behavioral health
12 screening. If, after verification, an individual is determined
13 to be ineligible for coverage, he or she must be disenrolled
14 from the respective Title XXI-funded Kidcare program
15 component.

16 (1) A child who is eligible for Medicaid coverage
17 under s. 409.903 or s. 409.904 must be enrolled in Medicaid
18 and is not eligible to receive health benefits under any other
19 health benefits coverage authorized under ss. 409.810-409.820.

20 (2) A child who is not eligible for Medicaid, but who
21 is eligible for the Florida Kidcare program, may obtain
22 coverage under any of the other types of health benefits
23 coverage authorized in ss. 409.810-409.820 if such coverage is
24 approved and available in the county in which the child
25 resides. However, a child who is eligible for Medikids may
26 participate in the Florida Healthy Kids program only if the
27 child has a sibling participating in the Florida Healthy Kids
28 program and the child's county of residence permits such
29 enrollment.

30 (3) A child who is eligible for the Florida Kidcare
31 program who is a child with special health care needs, as

1 determined through a medical or behavioral screening
2 ~~risk-screening~~ instrument, is eligible for health benefits
3 coverage from and shall ~~may~~ be referred to the Children's
4 Medical Services network. When calculating income for purposes
5 of determining the financial eligibility of a child with
6 special health care needs, except for a child who is eligible
7 for Medicaid, the department and the Florida Healthy Kids
8 Corporation shall implement an income disregard for medical
9 and behavioral costs of the child.

10 (4) The following children are not eligible to receive
11 premium assistance for health benefits coverage under ss.
12 409.810-409.820, except under Medicaid if the child would have
13 been eligible for Medicaid under s. 409.903 or s. 409.904 as
14 of June 1, 1997:

15 (a) A child who is eligible for coverage under a state
16 health benefit plan on the basis of a family member's
17 employment with a public agency in the state.†

18 (b) A child who is covered under a group health
19 benefit plan or under other health insurance coverage,
20 excluding coverage provided under the Florida Healthy Kids
21 Corporation as established under s. 624.91.†

22 (c) A child who is seeking premium assistance for
23 employer-sponsored group coverage, if the child has been
24 covered by the same employer's group coverage during the 6
25 months prior to the family's submitting an application for
26 determination of eligibility under the Florida Kidcare
27 program.†

28 (d) A child who is an alien, but who does not meet the
29 definition of qualified alien, in the United States. However,
30 such child may be enrolled, based on age and family income, in
31 the appropriate Florida Kidcare program, and premium

1 assistance must be provided only by state funds, subject to an
2 annual appropriation for this specific purpose. ~~or~~

3 (e) A child who is an inmate of a public institution
4 or a patient in an institution for mental diseases.

5 (5) Except for children enrolled in the Children's
6 Medical Services network who qualify under an income

7 disregard, a child whose family income is above 200 percent of
8 the federal poverty level or a child who is excluded under the
9 provisions of subsection (4) may participate in the Florida
10 Kidcare program, excluding the Medicaid program, but is
11 subject to the following provisions:

12 (a) The family is not eligible for premium assistance
13 payments and must pay the full cost of the premium, including
14 any administrative costs.

15 (b) The agency is authorized to place limits on
16 enrollment in Medikids by these children in order to avoid
17 adverse selection. The number of children participating in
18 Medikids whose family income exceeds 200 percent of the
19 federal poverty level must not exceed 10 percent of total
20 enrollees in the Medikids program.

21 (c) The board of directors of the Florida Healthy Kids
22 Corporation is authorized to place limits on enrollment of
23 these children in order to avoid adverse selection. In
24 addition, the board is authorized to offer a reduced benefit
25 package to these children in order to limit program costs for
26 such families. The number of children participating in the
27 Florida Healthy Kids program whose family income exceeds 200
28 percent of the federal poverty level must not exceed 10
29 percent of total enrollees in the Florida Healthy Kids
30 program.

31

1 (d) Children described in this subsection are not
2 counted in the annual enrollment ceiling for the Florida
3 Kidcare program.

4 (6) Once a child is enrolled in ~~determined eligible~~
5 ~~for~~ the Florida Kidcare program, the child is eligible for
6 coverage under the program for 12 ~~6~~ months without a
7 redetermination or reverification of eligibility, if the
8 family continues to pay the applicable premium. ~~Effective~~
9 ~~January 1, 1999, a child who has not attained the age of 5 and~~
10 ~~who has been determined eligible for the Medicaid program is~~
11 ~~eligible for coverage for 12 months without a redetermination~~
12 ~~or reverification of eligibility.~~

13 (7) When determining or reviewing a child's
14 eligibility under the program, the applicant shall be provided
15 with reasonable notice of changes in eligibility which may
16 affect enrollment in one or more of the program components.
17 When a transition from one program component to another is
18 appropriate, there shall be cooperation between the program
19 components and the affected family which promotes continuity
20 of health care coverage.

21 Section 5. Paragraphs (q), (r), (s), (t), and (u) of
22 subsection (2) of section 409.815, Florida Statutes, are
23 renumbered as paragraphs (r), (s), (t), (u), and (v),
24 respectively, and a new paragraph (q) is added to said section
25 to read:

26 409.815 Health benefits coverage; limitations.--

27 (2) BENCHMARK BENEFITS.--In order for health benefits
28 coverage to qualify for premium assistance payments for an
29 eligible child under ss. 409.810-409.820, the health benefits
30 coverage, except for coverage under Medicaid and Medikids,
31

1 must include the following minimum benefits, as medically
2 necessary.

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

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

9 409.8177 Program evaluation.--The agency, in
10 consultation with the Department of Health, the Department of
11 Children and Family Services, and the Florida Healthy Kids
12 Corporation, shall by January 1 of each year submit to the
13 Governor, the President of the Senate,and the Speaker of the
14 House of Representatives ~~Legislature~~ a report of the Florida
15 Kidcare program. In addition to the items specified under s.
16 2108 of Title XXI of the Social Security Act, the report shall
17 include an assessment of crowd-out and access to health care,
18 as well as the following:

19 (1) An assessment of the operation of the program,
20 including the progress made in reducing the number of
21 uncovered low-income children.

22 (2) An assessment of the effectiveness in increasing
23 the number of children with creditable health coverage,
24 including an assessment of the impact of outreach.

25 (3) The characteristics of the children and families
26 assisted under the program, including ages of the children,
27 family income, and access to or coverage by other health
28 insurance prior to the program and after disenrollment from
29 the program.

30 (4) The quality of health coverage provided, including
31 the types of benefits provided.

1 (5) The amount and level, including payment of part or
2 all of any premium, of assistance provided.

3 (6) The average length of coverage of a child under
4 the program.

5 (7) The program's choice of health benefits coverage
6 and other methods used for providing child health assistance.

7 (8) The sources of nonfederal funding used in the
8 program.

9 (9) An assessment of the effectiveness of Medikids,
10 Children's Medical Services network, and other public and
11 private programs in the state in increasing the availability
12 of affordable quality health insurance and health care for
13 children.

14 (10) A review and assessment of state activities to
15 coordinate the program with other public and private programs.

16 (11) An analysis of changes and trends in the state
17 that affect the provision of health insurance and health care
18 to children.

19 (12) A description of any plans the state has for
20 improving the availability of health insurance and health care
21 for children.

22 (13) Recommendations for improving the program.

23 (14) Other studies as necessary.
24

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

29 Section 7. Paragraph (b) of subsection (1) of section
30 409.818, Florida Statutes, is amended to read:
31

1 409.818 Administration.--In order to implement ss.
2 409.810-409.820, the following agencies shall have the
3 following duties:

4 (1) The Department of Children and Family Services
5 shall:

6 (b) Establish and maintain the eligibility
7 determination process under the program except as specified in
8 subsection (5). The department shall directly, or through the
9 services of a contracted third-party administrator, establish
10 and maintain a process for determining eligibility of children
11 for coverage under the program. The eligibility determination
12 process must be used solely for determining eligibility of
13 applicants for health benefits coverage under the program. The
14 eligibility determination process must include an initial
15 determination of eligibility for any coverage offered under
16 the program, as well as a redetermination or reverification of
17 eligibility each subsequent 12 ~~6~~ months. ~~Effective January 1,~~
18 ~~1999, a child who has not attained the age of 5 and who has~~
19 ~~been determined eligible for the Medicaid program is eligible~~
20 ~~for coverage for 12 months without a redetermination or~~
21 ~~reverification of eligibility.~~In conducting an eligibility
22 determination, the department shall determine if the child has
23 special health care needs. The department, in consultation
24 with the Agency for Health Care Administration and the Florida
25 Healthy Kids Corporation, shall develop procedures for
26 redetermining eligibility which enable a family to easily
27 update any change in circumstances which could affect
28 eligibility without requiring the family to submit a new
29 application. The department may accept changes in a family's
30 status as reported to the department by the Florida Healthy
31 Kids Corporation without requiring a new application from the

1 family. Redetermination of a child's eligibility for Medicaid
2 may not be linked to a child's eligibility determination for
3 other programs.

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

6 409.903 Mandatory payments for eligible persons.--The
7 agency shall make payments for medical assistance and related
8 services on behalf of the following persons who the agency
9 determines to be eligible, subject to the income, assets, and
10 categorical eligibility tests set forth in federal and state
11 law. Payment on behalf of these Medicaid eligible persons is
12 subject to the availability of moneys and any limitations
13 established by the General Appropriations Act or chapter 216.

14 (6) A child born after September 30, 1983, living in a
15 family that has an income which is at or below 100 percent of
16 the current federal poverty level, who has attained the age of
17 6, but has not attained the age of 19. In determining the
18 eligibility of such a child, an assets test is not required. A
19 child who is eligible for Medicaid under this subsection must
20 be offered the opportunity, subject to federal rules, to be
21 made presumptively eligible. A child who has been deemed
22 presumptively eligible for Medicaid shall not be enrolled in a
23 managed care plan until the child's full eligibility
24 determination for Medicaid has been completed.

25 (7) A child living in a family that has an income
26 which is at or below 133 percent of the current federal
27 poverty level, who has attained the age of 1, but has not
28 attained the age of 6. In determining the eligibility of such
29 a child, an assets test is not required. A child who is
30 eligible for Medicaid under this subsection must be offered
31 the opportunity, subject to federal rules, to be made

1 presumptively eligible. A child who has been deemed
2 presumptively eligible for Medicaid shall not be enrolled in a
3 managed care plan until the child's full eligibility
4 determination for Medicaid has been completed.

5 Section 9. Subsections (6) and (7) of section 409.904,
6 Florida Statutes, are amended, and subsections (8) and (9) are
7 added to said section, to read:

8 409.904 Optional payments for eligible persons.--The
9 agency may make payments for medical assistance and related
10 services on behalf of the following persons who are determined
11 to be eligible subject to the income, assets, and categorical
12 eligibility tests set forth in federal and state law. Payment
13 on behalf of these Medicaid eligible persons is subject to the
14 availability of moneys and any limitations established by the
15 General Appropriations Act or chapter 216.

16 (6) A child born before October 1, 1983, living in a
17 family that has an income which is at or below 100 percent of
18 the current federal poverty level, who has attained the age of
19 6, but has not attained the age of 19, and who would be
20 eligible in s. 409.903(6), if the child had been born on or
21 after such date. In determining the eligibility of such a
22 child, an assets test is not required. A child who is eligible
23 for Medicaid under this subsection must be offered the
24 opportunity, subject to federal rules, to be made
25 presumptively eligible. A child who has been deemed
26 presumptively eligible for Medicaid shall not be enrolled in a
27 managed care plan until the child's full eligibility
28 determination for Medicaid has been completed.

29 (7) A child who has not attained the age of 19 who has
30 been determined eligible for the Medicaid program is deemed to
31 be eligible for a total of 12 ~~6~~ months, regardless of changes

1 in circumstances other than attainment of the maximum age.
2 ~~Effective January 1, 1999, a child who has not attained the~~
3 ~~age of 5 and who has been determined eligible for the Medicaid~~
4 ~~program is deemed to be eligible for a total of 12 months~~
5 ~~regardless of changes in circumstances other than attainment~~
6 ~~of the maximum age.~~

7 (8) A child under 1 year of age who lives in a family
8 that has an income above 185 percent of the most recently
9 published federal poverty level, but which is at or below 200
10 percent of such poverty level. In determining the eligibility
11 of such child, an assets test is not required. A child who is
12 eligible for Medicaid under this subsection must be offered
13 the opportunity, subject to federal rules, to be made
14 presumptively eligible.

15 (9) A pregnant woman for the duration of her pregnancy
16 and for the postpartum period, as defined in federal law and
17 rule, who lives in a family that has an income above 185
18 percent of the current federal poverty level, but which is at
19 or below 200 percent of the most current federal poverty
20 level. A pregnant woman who applies for eligibility for the
21 Medicaid program through a qualified Medicaid provider must be
22 offered the opportunity, subject to federal rules, to be made
23 presumptively eligible for the Medicaid program.

24 Section 10. Notwithstanding the provisions of s.
25 624.91, Florida Statutes, local matching funds shall not be
26 required by the Florida Healthy Kids Corporation, provided
27 funds are specifically appropriated as part of the General
28 Appropriations Act to replace the local match contributions to
29 the Florida Healthy Kids program.

30 Section 11. The provisions of this act which would
31 require changes to contracts in existence as of June 30, 2000,

1 between the Florida Healthy Kids Corporation and contracted
2 providers of such corporation shall be applied to such
3 contracts upon renewal of the contracts, but not later than
4 July 1, 2002.

5 Section 12. This act shall take effect July 1, 2000.

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8 HOUSE SUMMARY

9
10 Revises provisions relating to health care assistance for
11 children to require the Social Services Estimating
12 Conference to develop information relating to the Florida
13 Kidcare program, revise eligibility requirements for the
14 Medikids program component of the Florida Kidcare
15 program, authorize a mandatory assignment process under
16 specified circumstances and revise enrollment procedures,
17 require agencies administering Florida Kidcare components
18 to collect information and report to the Social Services
19 Estimating Conference, provide for Medicaid-presumptive
20 eligibility and provide for expedited enrollment, revise
21 eligibility for children for services under the
22 Children's Medical Services network, allow premium
23 assistance for children ineligible for federal funding,
24 extend the period of continuous eligibility for the
25 Florida Kidcare program, provide for dental benefits
26 under the Florida Kidcare program, require the Agency for
27 Health Care Administration to submit additional monthly
28 reports to the Governor and Legislature, revise the
29 eligibility requirements for optional payments for
30 medical assistance and related services for children,
31 authorize optional payments for pregnant women, eliminate
the local match requirement under the Florida Healthy
Kids Corporation, and provide for application to existing
contracts of the Florida Healthy Kids Corporation. See
bill for details.

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26 ADDITIONAL SPONSORS

27 Ritter, Kosmas, Argenziano, Greenstein, C. Green, Frankel,
28 Reddick, Suarez and Roberts