

By Senator Saunders

25-341B-00

1                                   A bill to be entitled  
2           An act relating to health care; amending s.  
3           395.701, F.S.; providing for an assessment  
4           against hospitals for inpatient services;  
5           amending s. 408.904, F.S.; increasing benefits  
6           for certain persons who receive hospital  
7           outpatient services; amending s. 408.905, F.S.;  
8           increasing benefits furnished by Medicaid  
9           providers to recipients of hospital outpatient  
10          services; amending s. 905.908, F.S.; increasing  
11          reimbursement to hospitals for outpatient care;  
12          repealing s. 395.7015, F.S., relating to  
13          assessments against certain health care  
14          entities; providing appropriations; providing  
15          effective dates.

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17           WHEREAS, the Legislature finds that the Public Medical  
18          Assistance Trust Fund is not uniformly applied to all health  
19          care entities, and

20           WHEREAS, the responsibility for indigent care is a  
21          broad societal problem, not to be placed just on those who  
22          provide or receive health care, and

23           WHEREAS, the economic conditions that exist today for  
24          health care entities are different than those conditions  
25          existing when the assessment was instituted in 1984, and  
26          consequently this assessment places a greater burden on the  
27          taxed entities, NOW, THEREFORE,

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

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1           Section 1. Subsection (2) of section 395.701, Florida  
2 Statutes, is amended to read:

3           395.701 Annual assessments on net operating revenues  
4 to fund public medical assistance; administrative fines for  
5 failure to pay assessments when due; exemption.--

6           (2) There is imposed upon each hospital an assessment  
7 in an amount equal to 1.5 percent of the annual net operating  
8 revenue for inpatient services for each hospital, such revenue  
9 to be determined by the agency, based on the actual experience  
10 of the hospital as reported to the agency. Within 6 months  
11 after the end of each hospital fiscal year, the agency shall  
12 certify the amount of the assessment for each hospital. The  
13 assessment shall be payable to and collected by the agency in  
14 equal quarterly amounts, on or before the first day of each  
15 calendar quarter, beginning with the first full calendar  
16 quarter that occurs after the agency certifies the amount of  
17 the assessment for each hospital. All moneys collected  
18 pursuant to this subsection shall be deposited into the Public  
19 Medical Assistance Trust Fund.

20           Section 2. Paragraph (c) of subsection (2) of section  
21 408.904, Florida Statutes, is amended to read:

22           408.904 Benefits.--

23           (2) Covered health services include:

24           (c) Hospital outpatient services. Those services  
25 provided to a member in the outpatient portion of a hospital  
26 licensed under part I of chapter 395, up to a limit of \$2,000  
27 ~~\$1,000~~ per calendar year per member, that are preventive,  
28 diagnostic, therapeutic, or palliative.

29           Section 3. Subsection (6) of section 409.905, Florida  
30 Statutes, is amended to read:

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1           409.905 Mandatory Medicaid services.--The agency may  
2 make payments for the following services, which are required  
3 of the state by Title XIX of the Social Security Act,  
4 furnished by Medicaid providers to recipients who are  
5 determined to be eligible on the dates on which the services  
6 were provided. Any service under this section shall be  
7 provided only when medically necessary and in accordance with  
8 state and federal law. Nothing in this section shall be  
9 construed to prevent or limit the agency from adjusting fees,  
10 reimbursement rates, lengths of stay, number of visits, number  
11 of services, or any other adjustments necessary to comply with  
12 the availability of moneys and any limitations or directions  
13 provided for in the General Appropriations Act or chapter 216.

14           (6) HOSPITAL OUTPATIENT SERVICES.--The agency shall  
15 pay for preventive, diagnostic, therapeutic, or palliative  
16 care and other services provided to a recipient in the  
17 outpatient portion of a hospital licensed under part I of  
18 chapter 395, and provided under the direction of a licensed  
19 physician or licensed dentist, except that payment for such  
20 care and services is limited to \$2,000~~\$1,000~~ per state fiscal  
21 year per recipient, unless an exception has been made by the  
22 agency, and with the exception of a Medicaid recipient under  
23 age 21, in which case the only limitation is medical  
24 necessity.

25           Section 4. Paragraph (a) of subsection (1) of section  
26 409.908, Florida Statutes, is amended to read:

27           409.908 Reimbursement of Medicaid providers.--Subject  
28 to specific appropriations, the agency shall reimburse  
29 Medicaid providers, in accordance with state and federal law,  
30 according to methodologies set forth in the rules of the  
31 agency and in policy manuals and handbooks incorporated by

1 reference therein. These methodologies may include fee  
2 schedules, reimbursement methods based on cost reporting,  
3 negotiated fees, competitive bidding pursuant to s. 287.057,  
4 and other mechanisms the agency considers efficient and  
5 effective for purchasing services or goods on behalf of  
6 recipients. Payment for Medicaid compensable services made on  
7 behalf of Medicaid eligible persons is subject to the  
8 availability of moneys and any limitations or directions  
9 provided for in the General Appropriations Act or chapter 216.  
10 Further, nothing in this section shall be construed to prevent  
11 or limit the agency from adjusting fees, reimbursement rates,  
12 lengths of stay, number of visits, or number of services, or  
13 making any other adjustments necessary to comply with the  
14 availability of moneys and any limitations or directions  
15 provided for in the General Appropriations Act, provided the  
16 adjustment is consistent with legislative intent.

17 (1) Reimbursement to hospitals licensed under part I  
18 of chapter 395 must be made prospectively or on the basis of  
19 negotiation.

20 (a) Reimbursement for inpatient care is limited as  
21 provided for in s. 409.905(5). Reimbursement for hospital  
22 outpatient care is limited to \$2,000~~\$1,000~~ per state fiscal  
23 year per recipient, except for:

24 1. Such care provided to a Medicaid recipient under  
25 age 21, in which case the only limitation is medical  
26 necessity;

27 2. Renal dialysis services; and

28 3. Other exceptions made by the agency.

29 Section 5. (1) The sum of \_\_\_\_\_ is appropriated from  
30 the General Revenue Fund to the Public Medical Assistance  
31 Trust Fund to replace the revenues lost due to the repeal of

1 section 395.7015, Florida Statutes, and to maintain federal  
2 financial participation.

3 (2) The sum of \_\_\_\_\_ is appropriated from the General  
4 Revenue Fund to the Public Medical Assistance Trust Fund to  
5 provide for the increased reimbursement to hospitals for  
6 hospital outpatient care.

7 Section 6. Section 395.7015, Florida Statutes, is  
8 repealed.

9 Section 7. This act shall take effect July 1, 2000,  
10 except that the amendment to section 395.701, Florida  
11 Statutes, by this act shall take effect only upon the receipt  
12 by the Agency for Health Care Administration of written  
13 confirmation from the federal Health Care Financing  
14 Administration that the changes contained in such amendment  
15 will not adversely affect the use of the remaining assessments  
16 as state match for the state's Medicaid program.

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19 SENATE SUMMARY

20 Provides for an assessment of 1.5 percent of the annual  
21 net operating revenues for inpatient services of  
22 hospitals to fund public medical assistance. Increases to  
23 \$2,000 the limit on benefits for hospital outpatient  
24 services for persons enrolled in the MedAccess program.  
25 Increases to \$2,000 the benefits furnished by Medicaid  
26 providers to recipients of hospital outpatient services.  
27 Increases to \$2,000 the amount of reimbursement to  
28 hospitals for outpatient care. Repeals s. 395.7015, F.S.,  
29 relating to assessments on defined health care entities.  
30 Provides appropriations.  
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