

Amendment No. \_\_\_\_ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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Representative(s) Maygarden offered the following:

**Substitute Amendment for Amendment (064079) (with title amendment)**

On page 5, line 12, through page 9, line 24  
remove from the bill: all of said lines

and insert in lieu thereof:

Section 3. Subsection (1) of section 409.904, Florida Statutes, is amended, and subsection (9) 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 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.

(1) A person who is age 65 or older or is determined to be disabled, whose income is at or below 90 ~~100~~ percent of

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1 federal poverty level, and whose assets do not exceed  
2 established limitations.

3 (9) A Medicaid-eligible individual for the  
4 individual's health insurance premiums, if the agency  
5 determines that such payments are cost-effective.

6 Section 4. Subsection (5) of section 409.905, Florida  
7 Statutes, is amended to read:

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

21 (5) HOSPITAL INPATIENT SERVICES.--The agency shall pay  
22 for all covered services provided for the medical care and  
23 treatment of a recipient who is admitted as an inpatient by a  
24 licensed physician or dentist to a hospital licensed under  
25 ~~part I~~ of chapter 395. However, the agency shall limit the  
26 payment for inpatient hospital services for a Medicaid  
27 recipient 21 years of age or older to 45 days or the number of  
28 days necessary to comply with the General Appropriations Act.

29 (a) The agency is authorized to implement  
30 reimbursement and utilization management reforms in order to  
31 comply with any limitations or directions in the General

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1 Appropriations Act, which may include, but are not limited to:  
2 prior authorization for inpatient psychiatric days; prior  
3 authorization for nonemergency hospital inpatient admissions;  
4 enhanced utilization and concurrent review programs for highly  
5 utilized services; reduction or elimination of covered days of  
6 service; adjusting reimbursement ceilings for variable costs;  
7 adjusting reimbursement ceilings for fixed and property costs;  
8 and implementing target rates of increase.

9 (b) A licensed hospital maintained primarily for the  
10 care and treatment of patients having mental disorders or  
11 mental diseases is not eligible to participate in the hospital  
12 inpatient portion of the Medicaid program except as provided  
13 under in federal law or pursuant to a federally approved  
14 waiver. ~~However, the department shall apply for a waiver,~~  
15 ~~within 9 months after June 5, 1991,~~ designed to provide  
16 behavioral health hospitalization services for mental health  
17 ~~reasons~~ to children and adults in the most cost-effective and  
18 lowest cost setting possible. Such waiver shall include a  
19 request for the opportunity to pay for care in hospitals known  
20 under federal law as "institutions for mental disease" or  
21 "IMD's." The behavioral health waiver proposal shall propose  
22 no additional aggregate cost to the state or Federal  
23 ~~Government, and shall be conducted in Hillsborough County,~~  
24 ~~Highlands County, Hardee County, Manatee County, and Polk~~  
25 ~~County.~~ Implementation of the behavioral health waiver  
26 proposal shall not be the basis for adjusting a hospital's  
27 Medicaid inpatient or outpatient rate. The waiver proposal may  
28 incorporate competitive bidding for hospital services,  
29 comprehensive brokering, prepaid capitated arrangements, or  
30 other mechanisms deemed by the department to show promise in  
31 reducing the cost of acute care and increasing the

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1 effectiveness of preventive care. ~~When developing~~ The waiver  
2 proposal, ~~the department~~ shall take into account price,  
3 quality, accessibility, linkages of the hospital to community  
4 services and family support programs, plans of the hospital to  
5 ensure the earliest discharge possible, and the  
6 comprehensiveness of the mental health and other health care  
7 services offered by participating providers.

8 (c) ~~The agency for Health Care Administration~~ shall  
9 adjust a hospital's current inpatient per diem rate to reflect  
10 the cost of serving the Medicaid population at that  
11 institution if:

12 1. The hospital experiences an increase in Medicaid  
13 caseload by more than 25 percent in any year, primarily  
14 resulting from the closure of a hospital in the same service  
15 area occurring after July 1, 1995; or

16 2. The hospital's Medicaid per diem rate is at least  
17 25 percent below the Medicaid per patient cost for that year.

18  
19 ~~No later than November 1, 2000, the agency must provide~~  
20 ~~estimated costs for any adjustment in a hospital inpatient per~~  
21 ~~diem pursuant to this paragraph to the Executive Office of the~~  
22 ~~Governor, the House of Representatives General Appropriations~~  
23 ~~Committee, and the Senate Budget Committee. Before the agency~~  
24 ~~implements a change in a hospital's inpatient per diem rate~~  
25 ~~pursuant to this paragraph, the Legislature must have~~  
26 ~~specifically appropriated sufficient funds in the 2001-2002~~  
27 ~~General Appropriations Act to support the increase in cost as~~  
28 ~~estimated by the agency. This paragraph is repealed on July 1,~~  
29 ~~2001.~~

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1 ===== T I T L E A M E N D M E N T =====  
2 And the title is amended as follows:  
3       On page 1, lines 8-15,  
4 remove from the title of the bill: all of said lines  
5  
6 and insert in lieu thereof:  
7       amending s. 409.904, F.S.; revising Medicaid  
8       eligibility requirements for certain elderly or  
9       disabled persons; authorizing payment for  
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