

By Senator Dawson

30-1585-02

1 A bill to be entitled
2 An act relating to the Agency for Health Care
3 Administration; repealing s. 1 of ch. 2001-377,
4 Laws of Florida; abrogating the repeal of s.
5 409.904(11), F.S., which provides eligibility
6 of specified persons for certain optional
7 medical assistance; amending s. 409.904, F.S.;
8 revising standards for eligibility for certain
9 optional medical assistance; amending s.
10 409.906, F.S.; revising guidelines for payment
11 for certain services; revising eligibility for
12 certain Medicaid services; amending s.
13 409.9065, F.S.; eliminating certain limitations
14 on enrollment levels with respect to assistance
15 for pharmaceutical expenses; amending s.
16 409.815, F.S., relating to benchmark benefits;
17 conforming a cross-reference to changes made by
18 the act; providing an effective date.

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

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22 Section 1. Section 1 of chapter 2001-377, Laws of
23 Florida, is repealed.

24 Section 2. Subsections (1) and (2) of section 409.904,
25 Florida Statutes, as amended by section 2 of chapter 2001-377,
26 Laws of Florida, are amended to read:

27 409.904 Optional payments for eligible persons.--The
28 agency may make payments for medical assistance and related
29 services on behalf of the following persons who are determined
30 to be eligible subject to the income, assets, and categorical
31 eligibility tests set forth in federal and state law. Payment

1 on behalf of these Medicaid eligible persons is subject to the
2 availability of moneys and any limitations established by the
3 General Appropriations Act or chapter 216.

4 (1) A person who is age 65 or older or is determined
5 to be disabled, whose income is at or below 100 ~~88~~ percent of
6 federal poverty level, and whose assets do not exceed
7 established limitations.

8 (2)~~(a)~~ A family, a pregnant woman, a child under age
9 18, a person age 65 or over, or a blind or disabled person who
10 would be eligible under any group listed in s. 409.903(1),
11 (2), or (3), except that the income or assets of such family
12 or person exceed established limitations. ~~A pregnant woman who~~
13 ~~would otherwise qualify for Medicaid under s. 409.903(5)~~
14 ~~except for her level of income and whose assets fall within~~
15 ~~the limits established by the Department of Children and~~
16 ~~Family Services for the medically needy. A pregnant woman who~~
17 ~~applies for medically needy eligibility may not be made~~
18 ~~presumptively eligible.~~

19 ~~(b) A child under age 21 who would otherwise qualify~~
20 ~~for Medicaid or the Florida Kidcare program except for the~~
21 ~~family's level of income and whose assets fall within the~~
22 ~~limits established by the Department of Children and Family~~
23 ~~Services for the medically needy.~~

24
25 For a family or person in this group, medical expenses are
26 deductible from income in accordance with federal requirements
27 in order to make a determination of eligibility. A family or
28 person in this group, which group is known as the "medically
29 needy," is eligible to receive the same services as other
30 Medicaid recipients, with the exception of services in skilled
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1 nursing facilities and intermediate care facilities for the
2 developmentally disabled.

3 Section 3. Subsections (1), (12), (13), and (23) of
4 section 409.906, Florida Statutes, as amended by sections 3
5 and 4 of chapter 2001-377, Laws of Florida, are amended to
6 read:

7 409.906 Optional Medicaid services.--Subject to
8 specific appropriations, the agency may make payments for
9 services which are optional to the state under Title XIX of
10 the Social Security Act and are furnished by Medicaid
11 providers to recipients who are determined to be eligible on
12 the dates on which the services were provided. Any optional
13 service that is provided shall be provided only when medically
14 necessary and in accordance with state and federal law.

15 Optional services rendered by providers in mobile units to
16 Medicaid recipients may be restricted or prohibited by the
17 agency. Nothing in this section shall be construed to prevent
18 or limit the agency from adjusting fees, reimbursement rates,
19 lengths of stay, number of visits, or number of services, or
20 making any other adjustments necessary to comply with the
21 availability of moneys and any limitations or directions
22 provided for in the General Appropriations Act or chapter 216.

23 If necessary to safeguard the state's systems of providing
24 services to elderly and disabled persons and subject to the
25 notice and review provisions of s. 216.177, the Governor may
26 direct the Agency for Health Care Administration to amend the
27 Medicaid state plan to delete the optional Medicaid service
28 known as "Intermediate Care Facilities for the Developmentally
29 Disabled." Optional services may include:

30 (1) ADULT DENTURE SERVICES.--The agency may pay for
31 dentures, the procedures required to seat dentures, and the

1 repair and relines of dentures, provided by or under the
2 direction of a licensed dentist, for a recipient who is age 21
3 or older. However, Medicaid will not provide reimbursement for
4 dental services provided in a mobile dental unit, except for a
5 mobile dental unit:

6 (a) Owned by, operated by, or having a contractual
7 agreement with the Department of Health and complying with
8 Medicaid's county health department clinic services program
9 specifications as a county health department clinic services
10 provider.

11 (b) Owned by, operated by, or having a contractual
12 arrangement with a federally qualified health center and
13 complying with Medicaid's federally qualified health center
14 specifications as a federally qualified health center
15 provider.

16 (c) Rendering dental services to Medicaid recipients,
17 21 years of age and older, at nursing facilities.

18 (d) Owned by, operated by, or having a contractual
19 agreement with a state-approved dental educational
20 institution.

21 ~~(e) This subsection is repealed July 1, 2002.~~

22 (12) ~~CHILDREN'S~~ HEARING SERVICES.--The agency may pay
23 for hearing and related services, including hearing
24 evaluations, hearing aid devices, dispensing of the hearing
25 aid, and related repairs, if provided to a recipient ~~under age~~
26 ~~21~~ by a licensed hearing aid specialist, otolaryngologist,
27 otologist, audiologist, or physician.

28 (13) HOME AND COMMUNITY-BASED SERVICES.--The agency
29 may pay for home-based or community-based services that are
30 rendered to a recipient in accordance with a federally
31 approved waiver program. ~~The agency may limit or eliminate~~

1 ~~coverage for certain Project AIDS Care Waiver services,~~
2 ~~preauthorize high-cost or highly utilized services, or make~~
3 ~~any other adjustments necessary to comply with any limitations~~
4 ~~or directions provided for in the General Appropriations Act.~~

5 (23) ~~CHILDREN'S~~ VISUAL SERVICES.--The agency may pay
6 for visual examinations, eyeglasses, and eyeglass repairs for
7 a recipient ~~under age 21~~, if they are prescribed by a licensed
8 physician specializing in diseases of the eye or by a licensed
9 optometrist.

10 Section 4. Subsections (3) and (5) of section
11 409.9065, Florida Statutes, as amended by section 5 of chapter
12 2001-377, Laws of Florida, are amended to read:

13 409.9065 Pharmaceutical expense assistance.--

14 (3) BENEFITS.--Medications covered under the
15 pharmaceutical expense assistance program are those covered
16 under the Medicaid program in s. 409.906(20)~~s. 409.906(19)~~.
17 Monthly benefit payments shall be limited to \$80 per program
18 participant. Participants are required to make a 10-percent
19 coinsurance payment for each prescription purchased through
20 this program.

21 (5) NONENTITLEMENT.--The pharmaceutical expense
22 assistance program established by this section is not an
23 entitlement. ~~Enrollment levels are limited to those authorized~~
24 ~~by the Legislature in the annual General Appropriations Act.~~
25 ~~If funds are insufficient to serve all individuals eligible~~
26 ~~under subsection (2) and seeking coverage, the agency may~~
27 ~~develop a waiting list based on application dates to use in~~
28 ~~enrolling individuals in unfilled enrollment slots.~~

29 Section 5. Paragraph (q) of subsection (2) of section
30 409.815, Florida Statutes, as amended by section 19 of chapter
31 2001-377, Laws of Florida, is amended to read:

1 409.815 Health benefits coverage; limitations.--

2 (2) BENCHMARK BENEFITS.--In order for health benefits
3 coverage to qualify for premium assistance payments for an
4 eligible child under ss. 409.810-409.820, the health benefits
5 coverage, except for coverage under Medicaid and Medikids,
6 must include the following minimum benefits, as medically
7 necessary.

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

12 Section 6. This act shall take effect July 1, 2002.

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15 SENATE SUMMARY

16 Abrogates various changes made with respect to the
17 Medicaid program by chapter 2001-377, Laws of Florida.
18 Reinstates eligibility for certain persons to receive
19 optional medical benefits. Revises income requirements
for eligibility. Deletes a limitation on enrollment
levels concerning assistance for pharmaceutical expenses.
(See bill for details.)

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