

Bill No. CS for CS for SB 370

Amendment No.      Barcode 422836

| <u>Senate</u> | CHAMBER ACTION | <u>House</u> |
|---------------|----------------|--------------|
|---------------|----------------|--------------|

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31

·  
·  
·  
·  
·  
·

Senator Peaden moved the following amendment:

**Senate Amendment (with title amendment)**

On page 6, between lines 15 and 16,

insert:

Section 2. Subsection (19) of section 409.913, Florida Statutes, is amended to read:

409.913 Oversight of the integrity of the Medicaid program.--The agency shall operate a program to oversee the activities of Florida Medicaid recipients, and providers and their representatives, to ensure that fraudulent and abusive behavior and neglect of recipients occur to the minimum extent possible, and to recover overpayments and impose sanctions as appropriate.

(19) In making a determination of overpayment to a provider, the agency must use accepted and valid auditing, accounting, analytical, statistical, or peer-review methods, or combinations thereof. Appropriate statistical methods may include, but are not limited to, sampling and extension to the population, parametric and nonparametric statistics, tests of

Bill No. CS for CS for SB 370

Amendment No. \_\_\_\_ Barcode 422836

1 hypotheses, and other generally accepted statistical methods.  
 2 Appropriate analytical methods may include, but are not  
 3 limited to, reviews to determine variances between the  
 4 quantities of products that a provider had on hand and  
 5 available to be purveyed to Medicaid recipients during the  
 6 review period and the quantities of the same products paid for  
 7 by the Medicaid program for the same period, taking into  
 8 appropriate consideration sales of the same products to  
 9 non-Medicaid customers during the same period. In meeting its  
 10 burden of proof in any administrative or court proceeding, the  
 11 agency may introduce the results of such statistical methods  
 12 as evidence of overpayment. A finding of overpayment or  
 13 underpayment must be based on the actual overpayment or  
 14 underpayment and may not be a projection based on the number  
 15 of patients served having a similar diagnosis or on the number  
 16 of similar orders or refills for similar drugs.

17  
 18 (Redesignate subsequent sections.)  
 19

20  
 21 ===== T I T L E A M E N D M E N T =====

22 And the title is amended as follows:

23 On page 1, line 5, after the semicolon,  
 24  
 25 insert:  
 26 amending s. 409.913, F.S.; providing  
 27 requirements for the Agency for Health Care  
 28 Administration in making a finding of an  
 29 overpayment or underpayment to a Medicaid  
 30 provider;  
 31