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A bill to be entitled

An act relating to the Florida KidCare program; amending s. 409.811, F.S.; defining the term "Florida KidCare program"; deleting a definition to conform; amending s. 409.8132, F.S.; limiting when an applicant may apply for Medikids program enrollment; deleting a special enrollment period provision; amending s. 409.8134, F.S.; eliminating the Agency for Health Care Administration's ability to request an increase in the Florida KidCare program enrollment ceiling; providing for open enrollment periods; providing a timeframe for statewide announcement of open enrollment periods; providing limitations; providing a disenrollment process under certain circumstances; providing additional data for certain agencies to collect and analyze; amending s. 409.814, F.S.; revising Florida KidCare program eligibility criteria; limiting coverage; providing an exception for certain children otherwise eligible or covered under a family member's employer health coverage; restricting enrollment of children whose coverage was voluntarily canceled; providing an age limitation for certain components; requiring certain transfers to be managed within authorized levels of funding; requiring certain reserves to be established and reviewed; requiring each applicant to provide certain documentation; requiring the program to withhold benefits from certain enrollees; providing additional fraudulent activities; amending s. 409.815, F.S.; making dental services contingent upon an annual appropriation; amending s. 624.91, F.S.; removing the requirement for the Florida

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30 Healthy Kids Corporation to work with the Florida
31 Partnership for School Readiness; limiting eligibility for
32 state-funded assistance in paying Florida Healthy Kids
33 premiums; providing for future repeal of certain
34 provisions; providing additional criteria for the
35 corporation to determine eligibility; eliminating
36 authority to establish an open enrollment period; revising
37 the corporation's purchasing criteria; removing a
38 restriction; eliminating authority to contract with
39 certain entities; eliminating authority to establish a
40 maximum number of participants; eliminating authority to
41 establish eligibility criteria or premium and cost-sharing
42 requirements; providing that contracted insurers are the
43 payors of last resort; requiring contracted insurers to
44 coordinate benefits with certain payors; requiring the
45 Auditor General to perform an analysis on certain children
46 enrolled in the Florida KidCare program and report such
47 findings to the Governor and Legislature; requiring the
48 Florida Healthy Kids Corporation to use certain funds to
49 contract for an actuarial study; requiring the Auditor
50 General to perform random audits to determine eligibility
51 of children enrolled in the Florida Healthy Kids program;
52 requiring the Office of Program Policy Analysis and
53 Government Accountability to perform a study to determine
54 the appropriate family premium for the Florida KidCare
55 program and report its findings to the Legislature;
56 amending s. 409.818, F.S.; deleting a cross reference;
57 repealing s. 409.819, F.S., relating to a program
58 identifying low-income, uninsured children for certain

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59 purposes; providing appropriations; providing effective
60 dates.

61

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

63

64 Section 1. Subsections (14) through (22) of section
65 409.811, Florida Statutes, are renumbered as subsections (15)
66 through (23), respectively, present subsection (23) of said
67 section is amended, and a new subsection (14) is added to said
68 section, to read:

69 409.811 Definitions relating to Florida KidCare ~~Kideare~~
70 Act.--As used in ss. 409.810-409.820, the term:

71 (14) "Florida KidCare program," "KidCare program," or
72 "program" means the health benefits program administered through
73 ss. 409.810-409.820.

74 ~~(23) "Program" means the Florida Kideare program, the~~
75 ~~medical assistance program authorized by Title XXI of the Social~~
76 ~~Security Act as part of the federal Balanced Budget Act of 1997.~~

77 Section 2. Subsections (7), (8), and (9) of section
78 409.8132, Florida Statutes, are amended to read:

79 409.8132 Medikids program component.--

80 (7) ENROLLMENT.--Enrollment in the Medikids program
81 component may only occur during periodic open enrollment periods
82 as specified in s. 409.8134 ~~by the agency. An applicant may~~
83 ~~apply for enrollment in the Medikids program component and~~
84 ~~proceed through the eligibility determination process at any~~
85 ~~time throughout the year. However, enrollment in Medikids shall~~
86 ~~not begin until the next open enrollment period; and A child may~~
87 not receive services under the Medikids program until the child

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88 is enrolled in a managed care plan or MediPass. ~~In addition,~~
 89 Once determined eligible, an applicant may receive choice
 90 counseling and select a managed care plan or MediPass. The
 91 agency may initiate mandatory assignment for a Medikids
 92 applicant who has not chosen a managed care plan or MediPass
 93 provider after the applicant's voluntary choice period ends. An
 94 applicant may select MediPass under the Medikids program
 95 component only in counties that have fewer than two managed care
 96 plans available to serve Medicaid recipients and only if the
 97 federal Health Care Financing Administration determines that
 98 MediPass constitutes "health insurance coverage" as defined in
 99 Title XXI of the Social Security Act.

100 ~~(8) SPECIAL ENROLLMENT PERIODS. The agency shall~~
 101 ~~establish a special enrollment period of 30 days' duration for~~
 102 ~~any child who is enrolled in Medicaid if such child loses~~
 103 ~~Medicaid eligibility and becomes eligible for Medikids, or for~~
 104 ~~any child who is enrolled in Medikids if such child moves to~~
 105 ~~another county that is not within the coverage area of the~~
 106 ~~child's Medikids managed care plan or MediPass provider.~~

107 (8)~~(9)~~ PENALTIES FOR VOLUNTARY CANCELLATION.--The agency
 108 shall establish enrollment criteria that must include penalties
 109 or waiting periods of not fewer than 60 days for reinstatement
 110 of coverage upon voluntary cancellation for nonpayment of
 111 premiums.

112 Section 3. Section 409.8134, Florida Statutes, is amended
 113 to read:

114 409.8134 Program enrollment and expenditure ceilings.--

115 (1) Except for the Medicaid program, a ceiling shall be
 116 placed on annual federal and state expenditures and on

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117 enrollment in the Florida KidCare ~~Kideare~~ program as provided
118 each year in the General Appropriations Act. ~~The agency, in~~
119 ~~consultation with the Department of Health, may propose to~~
120 ~~increase the enrollment ceiling in accordance with chapter 216.~~

121 (2) Upon a unanimous recommendation by representatives
122 from each of the four Florida KidCare administrators, the
123 Florida KidCare program may conduct an open enrollment period
124 for the purpose of enrolling children eligible for all program
125 components listed in s. 409.813 except Medicaid. The four
126 Florida KidCare administrators shall work together to ensure
127 that the open enrollment period is announced statewide at least
128 1 month before the open enrollment is to begin. Eligible
129 children shall be enrolled on a first-come, first-served basis
130 using the date the open enrollment application is received. Open
131 enrollment shall immediately cease when the enrollment ceiling
132 is reached. An open enrollment shall be held only if the Social
133 Services Estimating Conference determines that sufficient funds
134 have been appropriated to finance increased enrollment through
135 federal fiscal year 2007. Individuals, including those on a
136 waiting list after January 30, 2004, must reapply by submitting
137 a new application during each new open enrollment period ~~Except~~
138 ~~for the Medicaid program, whenever the Social Services~~
139 ~~Estimating Conference determines that there is presently, or~~
140 ~~will be by the end of the current fiscal year, insufficient~~
141 ~~funds to finance the current or projected enrollment in the~~
142 ~~Florida Kideare program, all additional enrollment must cease~~
143 ~~and additional enrollment may not resume until sufficient funds~~
144 ~~are available to finance such enrollment.~~

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145 (3) Upon determination by the Social Services Estimating
 146 Conference that there are insufficient funds to finance the
 147 current enrollment in the Florida KidCare program within current
 148 appropriations, the program shall initiate disenrollment
 149 procedures to remove enrollees, except those children enrolled
 150 in the Children's Medical Services network, on a last-in, first-
 151 out basis until the expenditure and appropriation levels are
 152 balanced.

153 (4)(3) The agencies that administer the Florida KidCare
 154 Kidcare program components shall collect and analyze the data
 155 needed to project ~~Florida Kidcare~~ program enrollment costs,
 156 including price level adjustments ~~outreach impacts~~,
 157 participation and attrition rates, current and projected
 158 caseloads, utilization, and current and projected expenditures
 159 for the next 3 years. The agencies shall report ~~the~~ caseload and
 160 expenditure trends to the Social Services Estimating Conference
 161 in accordance with chapter 216.

162 Section 4. Effective July 1, 2004, section 409.814,
 163 Florida Statutes, is amended to read:

164 409.814 Eligibility.--A child who has not reached 19 years
 165 of age whose family income is equal to or below 200 percent of
 166 the federal poverty level is eligible for the Florida KidCare
 167 Kidcare program as provided in this section. ~~In determining the~~
 168 ~~eligibility of such a child, an assets test is not required. An~~
 169 ~~applicant under 19 years of age who, based on a complete~~
 170 ~~application, appears to be eligible for the Medicaid component~~
 171 ~~of the Florida Kidcare program is presumed eligible for coverage~~
 172 ~~under Medicaid, subject to federal rules. A child who has been~~
 173 ~~deemed presumptively eligible for Medicaid shall not be enrolled~~

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174 ~~in a managed care plan until the child's full eligibility~~
 175 ~~determination for Medicaid has been completed. The Florida~~
 176 ~~Healthy Kids Corporation may, subject to compliance with~~
 177 ~~applicable requirements of the Agency for Health Care~~
 178 ~~Administration and the Department of Children and Family~~
 179 ~~Services, be designated as an entity to conduct presumptive~~
 180 ~~eligibility determinations. An applicant under 19 years of age~~
 181 ~~who, based on a complete application, appears to be eligible for~~
 182 ~~the Medikids, Florida Healthy Kids, or Children's Medical~~
 183 ~~Services network program component, who is screened as~~
 184 ~~ineligible for Medicaid and prior to the monthly verification of~~
 185 ~~the applicant's enrollment in Medicaid or of eligibility for~~
 186 ~~coverage under the state employee health benefit plan, may be~~
 187 ~~enrolled in and begin receiving coverage from the appropriate~~
 188 ~~program component on the first day of the month following the~~
 189 ~~receipt of a completed application. For enrollment in the~~
 190 ~~Children's Medical Services network, a complete application~~
 191 ~~includes the medical or behavioral health screening. If,~~
 192 ~~subsequently after verification, an individual is determined to~~
 193 ~~be ineligible for coverage, he or she must immediately be~~
 194 ~~disenrolled from the respective KidCare Title XXI-funded Kidcare~~
 195 ~~program component.~~

196 (1) A child who is eligible for Medicaid coverage under s.
 197 409.903 or s. 409.904 must be enrolled in Medicaid and is not
 198 eligible to receive health benefits under any other health
 199 benefits coverage authorized under the Florida KidCare program
 200 ~~ss. 409.810-409.820.~~

201 (2) A child who is not eligible for Medicaid, but who is
 202 eligible for the Florida KidCare ~~Kidcare~~ program, may obtain

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203 health benefits coverage under any of the other components
 204 listed in s. 409.813 ~~types of health benefits coverage~~
 205 ~~authorized in ss. 409.810-409.820~~ if such coverage is approved
 206 and available in the county in which the child resides. However,
 207 a child who is eligible for Medikids may participate in the
 208 Florida Healthy Kids program only if the child has a sibling
 209 participating in the Florida Healthy Kids program and the
 210 child's county of residence permits such enrollment.

211 (3) A child who is eligible for the Florida KidCare
 212 ~~Kidcare~~ program who is a child with special health care needs,
 213 as determined through a medical or behavioral screening
 214 instrument, is eligible for health benefits coverage from and
 215 shall be referred to the Children's Medical Services network.

216 (4) The following children are not eligible to receive
 217 premium assistance for health benefits coverage under the
 218 Florida KidCare program ~~ss. 409.810-409.820~~, except under
 219 Medicaid if the child would have been eligible for Medicaid
 220 under s. 409.903 or s. 409.904 as of June 1, 1997:

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

224 (b) A child who is currently eligible for or covered under
 225 a family member's group health benefit plan or under other
 226 employer health insurance coverage, excluding coverage provided
 227 under the Florida Healthy Kids Corporation as established under
 228 s. 624.91, provided that the cost of the child's participation
 229 is not greater than 7.5 percent of the family's income. This
 230 provision shall be applied during redetermination for children
 231 who were enrolled prior to July 1, 2004. These enrollees shall

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232 have 6 months of eligibility following redetermination to allow
 233 for a transition to the other health benefit plan.

234 (c) A child who is seeking premium assistance for the
 235 Florida KidCare program through employer-sponsored group
 236 coverage, if the child has been covered by the same employer's
 237 group coverage during the 6 months prior to the family's
 238 submitting an application for determination of eligibility under
 239 the ~~Florida Kidcare~~ program.

240 (d) A child who is an alien, but who does not meet the
 241 definition of qualified alien, in the United States.

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

244 (f) A child who has had his or her coverage in an
 245 employer-sponsored health benefit plan voluntarily canceled in
 246 the last 6 months, except those children who were on the waiting
 247 list prior to January 31, 2004.

248 (5) A child whose family income is above 200 percent of
 249 the federal poverty level or a child who is excluded under the
 250 provisions of subsection (4) may participate in the Florida
 251 ~~KidCare~~ ~~Kideare~~ program, excluding the Medicaid program, but is
 252 subject to the following provisions:

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

256 (b) The agency is authorized to place limits on enrollment
 257 in Medikids by these children in order to avoid adverse
 258 selection. The number of children participating in Medikids
 259 whose family income exceeds 200 percent of the federal poverty

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260 level must not exceed 10 percent of total enrollees in the
 261 Medikids program.

262 (c) The board of directors of the Florida Healthy Kids
 263 Corporation is authorized to place limits on enrollment of these
 264 children in order to avoid adverse selection. In addition, the
 265 board is authorized to offer a reduced benefit package to these
 266 children in order to limit program costs for such families. The
 267 number of children participating in the Florida Healthy Kids
 268 program whose family income exceeds 200 percent of the federal
 269 poverty level must not exceed 10 percent of total enrollees in
 270 the Florida Healthy Kids program.

271 (d) Children described in this subsection are not counted
 272 in the annual enrollment ceiling for the Florida KidCare ~~Kideare~~
 273 program.

274 (6) Once a child is enrolled in the Florida KidCare
 275 ~~Kideare~~ program, the child is eligible for coverage under the
 276 program for 6 months without a redetermination or reverification
 277 of eligibility, if the family continues to pay the applicable
 278 premium. Eligibility for program components funded through Title
 279 XXI of the Social Security Act shall terminate when a child
 280 attains the age of 19. Effective January 1, 1999, a child who
 281 has not attained the age of 5 and who has been determined
 282 eligible for the Medicaid program is eligible for coverage for
 283 12 months without a redetermination or reverification of
 284 eligibility.

285 (7) When determining or reviewing a child's eligibility
 286 under the Florida KidCare program, the applicant shall be
 287 provided with reasonable notice of changes in eligibility which
 288 may affect enrollment in one or more of the program components.

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289 When a transition from one program component to another is
 290 authorized ~~appropriate~~, there shall be cooperation between the
 291 program components and the affected family which promotes
 292 continuity of health care coverage. Any authorized transfers
 293 must be managed within the program's overall appropriated or
 294 authorized levels of funding. Each component of the program
 295 shall establish a reserve to ensure that transfers between
 296 components will be accomplished within current year
 297 appropriations. These reserves shall be reviewed by each
 298 convening of the Social Services Estimating Conference to
 299 determine the adequacy of such reserves to meet actual
 300 experience.

301 (8) In determining the eligibility of a child, an assets
 302 test is not required. Each applicant shall provide written
 303 documentation during the application process and the
 304 redetermination process, including, but not limited to, the
 305 following:

306 (a) Proof of family income.

307 (b) A statement from all employers of family members that:

308 1. The employer does not sponsor a health benefit plan for
 309 employees; or

310 2. The potential enrollee is not covered by the employer-
 311 sponsored health benefit plan because the potential enrollee is
 312 not eligible for coverage, or, if the potential enrollee is
 313 eligible but not covered, a statement of the cost to enroll the
 314 potential enrollee in the employer-sponsored health benefit
 315 plan.

316 (9) Subject to paragraph (4)(b) and s. 624.91(3), the
 317 Florida KidCare program shall withhold benefits from an enrollee

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318 if the program obtains evidence that the enrollee is no longer
 319 eligible, submitted incorrect or fraudulent information in order
 320 to establish eligibility, or failed to provide verification of
 321 eligibility. The applicant or enrollee shall be notified that
 322 because of such evidence program benefits will be withheld
 323 unless the applicant or enrollee contacts a designated
 324 representative of the program by a specified date, which must be
 325 within 10 days after the date of notice, to discuss and resolve
 326 the matter. The program shall make every effort to resolve the
 327 matter within a timeframe that will not cause benefits to be
 328 withheld from an eligible enrollee.

329 (10) The following individuals may be subject to
 330 prosecution in accordance with s. 414.39:

331 (a) An applicant obtaining or attempting to obtain
 332 benefits for a potential enrollee under the Florida KidCare
 333 program when the applicant knows or should have known the
 334 potential enrollee does not qualify for the Florida KidCare
 335 program.

336 (b) An individual who assists an applicant in obtaining or
 337 attempting to obtain benefits for a potential enrollee under the
 338 Florida KidCare program when the individual knows or should have
 339 known the potential enrollee does not qualify for the Florida
 340 KidCare program.

341 Section 5. Paragraph (q) of subsection (2) of section
 342 409.815, Florida Statutes, is amended to read:

343 409.815 Health benefits coverage; limitations.--

344 (2) BENCHMARK BENEFITS.--In order for health benefits
 345 coverage to qualify for premium assistance payments for an
 346 eligible child under ss. 409.810-409.820, the health benefits

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347 coverage, except for coverage under Medicaid and Medikids, must
 348 include the following minimum benefits, as medically necessary.

349 (q) Dental services.--Covered services may include those
 350 dental services provided to children by the Florida Medicaid
 351 program under s. 409.906(5), contingent upon an annual
 352 appropriation in the General Appropriations Act ~~up to a maximum~~
 353 ~~benefit of \$750 per enrollee per year.~~

354 Section 6. Subsections (3) through (7) of section 624.91,
 355 Florida Statutes, are renumbered as subsections (4) through (8),
 356 respectively, present subsections (2) and (4) of said section
 357 are amended, and a new subsection (3) is added to said section,
 358 to read:

359 624.91 The Florida Healthy Kids Corporation Act.--

360 (2) LEGISLATIVE INTENT.--

361 (a) The Legislature finds that increased access to health
 362 care services could improve children's health and reduce the
 363 incidence and costs of childhood illness and disabilities among
 364 children in this state. Many children do not have comprehensive,
 365 affordable health care services available. It is the intent of
 366 the Legislature that the Florida Healthy Kids Corporation
 367 provide comprehensive health insurance coverage to such
 368 children. The corporation is encouraged to cooperate with any
 369 existing health service programs funded by the public or the
 370 private sector ~~and to work cooperatively with the Florida~~
 371 ~~Partnership for School Readiness.~~

372 (b) It is the intent of the Legislature that the Florida
 373 Healthy Kids Corporation serve as one of several providers of
 374 services to children eligible for medical assistance under Title
 375 XXI of the Social Security Act. Although the corporation may

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376 serve other children, the Legislature intends the primary
 377 recipients of services provided through the corporation be
 378 school-age children with a family income below 200 percent of
 379 the federal poverty level, who do not qualify for Medicaid. It
 380 is also the intent of the Legislature that state and local
 381 government Florida Healthy Kids funds be used to continue ~~and~~
 382 ~~expand~~ coverage, subject to specific appropriations in the
 383 General Appropriations Act, to children not eligible for federal
 384 matching funds under Title XXI.

385 (3) ELIGIBILITY FOR STATE-FUNDED ASSISTANCE.--Only the
 386 following individuals are eligible for state-funded assistance
 387 in paying Florida Healthy Kids premiums:

388 (a) Residents of this state who are eligible for the
 389 Florida KidCare program pursuant to s. 409.814.

390 (b) Notwithstanding s. 409.814, legal aliens who are
 391 enrolled in the Florida Healthy Kids program as of January 31,
 392 2004, who do not qualify for Title XXI federal funds because
 393 they are not qualified aliens as defined in s. 409.811.

394 (c) Notwithstanding s. 409.814, individuals who have
 395 attained the age of 19 as of March 31, 2004, who were receiving
 396 Florida Healthy Kids benefits prior to the enactment of the
 397 Florida KidCare program. This paragraph shall be repealed March
 398 31, 2005.

399 (d) Notwithstanding s. 409.814, state employee dependents
 400 who were enrolled in the Florida Healthy Kids program as of
 401 January 31, 2004. Such individuals shall remain eligible until
 402 January 1, 2005.

403 (5)(4) CORPORATION AUTHORIZATION, DUTIES, POWERS.--

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404 (a) There is created the Florida Healthy Kids Corporation,
 405 a not-for-profit corporation.

406 (b) The Florida Healthy Kids Corporation shall:

407 1. Arrange for the collection of any family, local
 408 contributions, or employer payment or premium, in an amount to
 409 be determined by the board of directors, to provide for payment
 410 of premiums for comprehensive insurance coverage and for the
 411 actual or estimated administrative expenses.†

412 2. Arrange for the collection of any voluntary
 413 contributions to provide for payment of premiums for children
 414 who are not eligible for medical assistance under Title XXI of
 415 the Social Security Act. Each fiscal year, the corporation shall
 416 establish a local match policy for the enrollment of non-Title-
 417 XXI-eligible children in the Healthy Kids program. By May 1 of
 418 each year, the corporation shall provide written notification of
 419 the amount to be remitted to the corporation for the following
 420 fiscal year under that policy. Local match sources may include,
 421 but are not limited to, funds provided by municipalities,
 422 counties, school boards, hospitals, health care providers,
 423 charitable organizations, special taxing districts, and private
 424 organizations. The minimum local match cash contributions
 425 required each fiscal year and local match credits shall be
 426 determined by the General Appropriations Act. The corporation
 427 shall calculate a county's local match rate based upon that
 428 county's percentage of the state's total non-Title-XXI
 429 expenditures as reported in the corporation's most recently
 430 audited financial statement. In awarding the local match
 431 credits, the corporation may consider factors including, but not

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432 limited to, population density, per capita income, and existing
 433 child-health-related expenditures and services.†

434 3. Subject to the provisions of s. 409.8134, accept
 435 voluntary supplemental local match contributions that comply
 436 with the requirements of Title XXI of the Social Security Act
 437 for the purpose of providing additional coverage in contributing
 438 counties under Title XXI.†

439 4. Establish the administrative and accounting procedures
 440 for the operation of the corporation.†

441 5. Establish, with consultation from appropriate
 442 professional organizations, standards for preventive health
 443 services and providers and comprehensive insurance benefits
 444 appropriate to children,† provided that such standards for rural
 445 areas shall not limit primary care providers to board-certified
 446 pediatricians.†

447 6. Determine ~~Establish~~ eligibility for ~~criteria which~~
 448 children seeking ~~must meet in order~~ to participate in the Title
 449 XXI-funded components of the Florida KidCare program consistent
 450 with the requirements specified in s. 409.814, as well as the
 451 non-Title-XXI-eligible children as provided in subsection (3).†

452 7. Establish procedures under which providers of local
 453 match to, applicants to and participants in the program may have
 454 grievances reviewed by an impartial body and reported to the
 455 board of directors of the corporation.†

456 8. Establish participation criteria and, if appropriate,
 457 contract with an authorized insurer, health maintenance
 458 organization, or third-party insurance ~~insurance~~ administrator to provide
 459 administrative services to the corporation.†

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460 9. Establish enrollment criteria which shall include
 461 penalties or waiting periods of not fewer than 60 days for
 462 reinstatement of coverage upon voluntary cancellation for
 463 nonpayment of family premiums.†

464 ~~10. If a space is available, establish a special open~~
 465 ~~enrollment period of 30 days' duration for any child who is~~
 466 ~~enrolled in Medicaid or Medikids if such child loses Medicaid or~~
 467 ~~Medikids eligibility and becomes eligible for the Florida~~
 468 ~~Healthy Kids program;†~~

469 10.11. Contract with authorized insurers or any provider
 470 of health care services, meeting standards established by the
 471 corporation, for the provision of comprehensive insurance
 472 coverage to participants. Such standards shall include criteria
 473 under which the corporation may contract with more than one
 474 provider of health care services in program sites. Health plans
 475 shall be selected through a competitive bid process. The Florida
 476 Healthy Kids Corporation shall purchase goods and services in
 477 the most cost-effective manner consistent with the delivery of
 478 quality medical care. The maximum administrative cost for a
 479 Florida Healthy Kids Corporation contract shall be 15 percent.
 480 The minimum medical loss ratio for a Florida Healthy Kids
 481 Corporation contract shall be 85 percent. ~~The selection of~~
 482 ~~health plans shall be based primarily on quality criteria~~
 483 ~~established by the board.~~ The health plan selection criteria and
 484 scoring system, and the scoring results, shall be available upon
 485 request for inspection after the bids have been awarded.†

486 11.12. Establish disenrollment criteria in the event local
 487 matching funds are insufficient to cover enrollments.†

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488 ~~12.13.~~ Develop and implement a plan to publicize the
 489 Florida Healthy Kids Corporation, the eligibility requirements
 490 of the program, and the procedures for enrollment in the program
 491 and to maintain public awareness of the corporation and the
 492 program. ~~+~~

493 ~~13.14.~~ Secure staff necessary to properly administer the
 494 corporation. Staff costs shall be funded from state and local
 495 matching funds and such other private or public funds as become
 496 available. The board of directors shall determine the number of
 497 staff members necessary to administer the corporation. ~~+~~

498 ~~15.~~ ~~As appropriate, enter into contracts with local school~~
 499 ~~boards or other agencies to provide onsite information,~~
 500 ~~enrollment, and other services necessary to the operation of the~~
 501 ~~corporation;~~

502 ~~14.16.~~ Provide a report annually to the Governor, Chief
 503 Financial Officer, Commissioner of Education, Senate President,
 504 Speaker of the House of Representatives, and Minority Leaders of
 505 the Senate and the House of Representatives. ~~+~~

506 ~~17.~~ ~~Each fiscal year, establish a maximum number of~~
 507 ~~participants, on a statewide basis, who may enroll in the~~
 508 ~~program; and~~

509 ~~15.18.~~ Establish ~~eligibility criteria, premium and cost-~~
 510 ~~sharing requirements, and~~ benefit packages which conform to the
 511 provisions of the Florida KidCare ~~Kidcare~~ program, as created in
 512 ss. 409.810-409.820.

513 (c) Coverage under the corporation's program is secondary
 514 to any other available private coverage held by, or applicable
 515 to, the participant child or family member. Insurers under
 516 contract with the corporation are the payors of last resort and

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517 must coordinate benefits with any other third-party payor that
 518 may be liable for the participant's medical care ~~The corporation~~
 519 ~~may establish procedures for coordinating benefits under this~~
 520 ~~program with benefits under other public and private coverage.~~

521 (d) The Florida Healthy Kids Corporation shall be a
 522 private corporation not for profit, organized pursuant to
 523 chapter 617, and shall have all powers necessary to carry out
 524 the purposes of this act, including, but not limited to, the
 525 power to receive and accept grants, loans, or advances of funds
 526 from any public or private agency and to receive and accept from
 527 any source contributions of money, property, labor, or any other
 528 thing of value, to be held, used, and applied for the purposes
 529 of this act.

530 Section 7. The Auditor General shall perform an analysis
 531 of children enrolled in the Florida KidCare program who are
 532 ineligible pursuant to the requirements of s. 409.814, Florida
 533 Statutes, to obtain recommendations to implement mechanisms to
 534 prevent such enrollment. The results of such analysis and the
 535 consequent recommendations shall be reported to the Governor,
 536 the President of the Senate, and the Speaker of the House of
 537 Representatives by December 31, 2004.

538 Section 8. The Florida Healthy Kids Corporation shall use
 539 existing funds from their operating fund established by s.
 540 624.915, Florida Statutes, to contract for an actuarial study on
 541 the impact of full-pay enrollees on the cost of services for
 542 each KidCare program component.

543 Section 9. The Auditor General shall perform random audits
 544 to ensure that all children enrolled in the Florida Healthy Kids

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545 program are eligible pursuant to ss. 409.814 and 624.91, Florida
 546 Statutes.

547 Section 10. The Office of Program Policy Analysis and
 548 Government Accountability shall perform a study to determine the
 549 appropriate family premium for the Florida KidCare program and
 550 submit a report to the President of the Senate and the Speaker
 551 of the House of Representatives by January 1, 2005. The report
 552 shall set out no fewer than three options and shall make a
 553 recommendation as to the appropriate family premium for the
 554 Florida KidCare program. Each option shall include a detailed
 555 explanation of the analysis that led to the conclusion. A
 556 discussion of family premiums collected by Title XXI programs in
 557 other states shall be part of the report.

558 Section 11. Subsection (2) of section 409.818, Florida
 559 Statutes, is amended to read:

560 409.818 Administration.--In order to implement ss.
 561 409.810-409.820, the following agencies shall have the following
 562 duties:

563 (2) The Department of Health shall:

564 (a) Design an eligibility intake process for the program,
 565 in coordination with the Department of Children and Family
 566 Services, the agency, and the Florida Healthy Kids Corporation.
 567 The eligibility intake process may include local intake points
 568 that are determined by the Department of Health in coordination
 569 with the Department of Children and Family Services.

570 ~~(b) Design and implement program outreach activities under~~
 571 ~~s. 409.819.~~

572 (b)(e) Chair a state-level coordinating council to review
 573 and make recommendations concerning the implementation and

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574 operation of the program. The coordinating council shall include
 575 representatives from the department, the Department of Children
 576 and Family Services, the agency, the Florida Healthy Kids
 577 Corporation, the Office of Insurance Regulation of the Financial
 578 Services Commission, local government, health insurers, health
 579 maintenance organizations, health care providers, families
 580 participating in the program, and organizations representing
 581 low-income families.

582 (c)~~(d)~~ In consultation with the Florida Healthy Kids
 583 Corporation and the Department of Children and Family Services,
 584 establish ~~establishing~~ a toll-free telephone line to assist
 585 families with questions about the program.

586 (d)~~(e)~~ Adopt rules necessary to implement outreach
 587 activities.

588 Section 12. Section 409.819, Florida Statutes, is
 589 repealed.

590 Section 13. The sums of \$6,566,073 from the General
 591 Revenue Fund, \$454,687 from the Grants and Donations Trust Fund,
 592 and \$16,272,440 from the Medical Quality Assurance Trust Fund
 593 are appropriated to the Agency for Health Care Administration,
 594 and the sum of \$1,984,113 is appropriated from the Grants and
 595 Donations Trust Fund to the Department of Health, for the 2003-
 596 2004 fiscal year for the purpose of serving children on whose
 597 behalf applications are submitted to the Florida KidCare program
 598 as of January 30, 2004, and who are determined to be eligible
 599 for program components funded under Title XXI of the Social
 600 Security Act.

601 Section 14. Except as otherwise provided herein, this act
 602 shall take effect upon becoming a law.