CHAMBER ACTION

1 The Committee on Appropriations recommends the following: 2 3 Committee Substitute 4 Remove the entire bill and insert: 5 A bill to be entitled 6 An act relating to the Florida KidCare program; amending 7 s. 409.811, F.S.; defining the term "Florida KidCare 8 program"; deleting a definition to conform; amending s. 9 409.8132, F.S.; limiting when an applicant may apply for 10 Medikids program enrollment; deleting a special enrollment 11 period provision; amending s. 409.8134, F.S.; eliminating 12 the Agency for Health Care Administration's ability to request an increase in the Florida KidCare program 13 14 enrollment ceiling; providing for open enrollment periods; providing a timeframe for statewide announcement of open 15 enrollment periods; providing limitations; providing a 16 17 disenrollment process under certain circumstances; 18 providing additional data for certain agencies to collect 19 and analyze; amending s. 409.814, F.S.; revising Florida 20 KidCare program eligibility criteria; limiting coverage; 21 providing an exception for certain children otherwise 22 eligible or covered under a family member's employer health coverage; restricting enrollment of children whose 23

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24 coverage was voluntarily canceled; providing an age 25 limitation for certain components; requiring certain 26 transfers to be managed within authorized levels of 27 funding; requiring certain reserves to be established and reviewed; requiring each applicant to provide certain 28 29 documentation; requiring the program to withhold benefits from certain enrollees; providing additional fraudulent 30 activities; amending s. 409.815, F.S.; making dental 31 32 services contingent upon an annual appropriation; amending 33 s. 624.91, F.S.; removing the requirement for the Florida Healthy Kids Corporation to work with the Florida 34 35 Partnership for School Readiness; limiting eligibility for state-funded assistance in paying Florida Healthy Kids 36 37 premiums; providing for future repeal of certain 38 provisions; providing additional criteria for the 39 corporation to determine eligibility; eliminating 40 authority to establish an open enrollment period; revising the corporation's purchasing criteria; removing a 41 42 restriction; eliminating authority to contract with certain entities; eliminating authority to establish a 43 44 maximum number of participants; eliminating authority to 45 establish eligibility criteria or premium and cost-sharing requirements; providing that contracted insurers are the 46 47 payors of last resort; requiring contracted insurers to 48 coordinate benefits with certain payors; requiring the 49 Auditor General to provide recommendations to prevent 50 enrollment of ineligible children in the Florida KidCare 51 program and report such recommendations to the Governor

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52 and Legislature; requiring the Florida Healthy Kids 53 Corporation to use certain funds to contract for an 54 actuarial study; requiring the Auditor General to perform 55 audits to ensure the eligibility of children enrolled in the Florida Healthy Kids program; authorizing the Auditor 56 57 General to require and receive any books, accounts, 58 records, or other documentation relating to the Florida 59 Healthy Kids Corporation; requiring the Office of Program 60 Policy Analysis and Government Accountability to perform a 61 study to determine the appropriate family premium for the 62 Florida KidCare program and report its findings to the 63 Legislature; amending s. 409.818, F.S.; deleting a cross reference; repealing s. 409.819, F.S., relating to a 64 65 program identifying low-income, uninsured children for 66 certain purposes; providing appropriations; providing 67 effective dates. 68 69 Be It Enacted by the Legislature of the State of Florida: 70 71 Section 1. Subsections (14) through (22) of section 72 409.811, Florida Statutes, are renumbered as subsections (15) 73 through (23), respectively, present subsection (23) of said section is amended, and a new subsection (14) is added to said 74 section, to read: 75 409.811 Definitions relating to Florida KidCare Kidcare 76

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Act.--As used in ss. 409.810-409.820, the term:

78 (14) "Florida KidCare program," "KidCare program," or 79 "program" means the health benefits program administered through 80 ss. 409.810-409.820. 81 (23) "Program" means the Florida Kidcare program, the medical assistance program authorized by Title XXI of the Social 82 83 Security Act as part of the federal Balanced Budget Act of 1997. Section 2. Subsections (7), (8), and (9) of section 84 409.8132, Florida Statutes, are amended to read: 85 409.8132 Medikids program component. --86 87 ENROLLMENT. -- Enrollment in the Medikids program (7) 88 component may only occur during periodic open enrollment periods 89 as specified in s. 409.8134 by the agency. An applicant may 90 apply for enrollment in the Medikids program component and 91 proceed through the eligibility determination process at any 92 time throughout the year. However, enrollment in Medikids shall 93 not begin until the next open enrollment period; and A child may 94 not receive services under the Medikids program until the child is enrolled in a managed care plan or MediPass. In addition, 95 96 Once determined eligible, an applicant may receive choice 97 counseling and select a managed care plan or MediPass. The agency may initiate mandatory assignment for a Medikids 98 99 applicant who has not chosen a managed care plan or MediPass provider after the applicant's voluntary choice period ends. An 100 101 applicant may select MediPass under the Medikids program 102 component only in counties that have fewer than two managed care plans available to serve Medicaid recipients and only if the 103 104 federal Health Care Financing Administration determines that

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105 MediPass constitutes "health insurance coverage" as defined in 106 Title XXI of the Social Security Act.

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

114 <u>(8)(9)</u> PENALTIES FOR VOLUNTARY CANCELLATION. -- The agency 115 shall establish enrollment criteria that must include penalties 116 or waiting periods of not fewer than 60 days for reinstatement 117 of coverage upon voluntary cancellation for nonpayment of 118 premiums.

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

409.8134 Program enrollment and expenditure ceilings .--121 Except for the Medicaid program, a ceiling shall be 122 (1) 123 placed on annual federal and state expenditures and on 124 enrollment in the Florida KidCare Kidcare program as provided 125 each year in the General Appropriations Act. The agency, in 126 consultation with the Department of Health, may propose to increase the enrollment ceiling in accordance with chapter 216. 127 128 (2) Upon a unanimous recommendation by representatives 129 from each of the four Florida KidCare administrators, the 130 Florida KidCare program may conduct an open enrollment period 131 for the purpose of enrolling children eligible for all program 132 components listed in s. 409.813 except Medicaid. The four

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133 Florida KidCare administrators shall work together to ensure 134 that the open enrollment period is announced statewide at least 1 month before the open enrollment is to begin. Eligible 135 136 children shall be enrolled on a first-come, first-served basis 137 using the date the open enrollment application is received. Open 138 enrollment shall immediately cease when the enrollment ceiling 139 is reached. An open enrollment shall be held only if the Social Services Estimating Conference determines that sufficient funds 140 141 have been appropriated to finance increased enrollment through 142 federal fiscal year 2007. Any individual who is not enrolled, 143 including those added to the waiting list after January 30, 144 2004, must reapply by submitting a new application during the 145 next open enrollment period Except for the Medicaid program, 146 whenever the Social Services Estimating Conference determines 147 that there is presently, or will be by the end of the current 148 fiscal year, insufficient funds to finance the current or 149 projected enrollment in the Florida Kidcare program, all 150 additional enrollment must cease and additional enrollment may not resume until sufficient funds are available to finance such 151 152 enrollment. 153 Upon determination by the Social Services Estimating (3) 154 Conference that there are insufficient funds to finance the 155 current enrollment in the Florida KidCare program within current 156 appropriations, the program shall initiate disenrollment 157 procedures to remove enrollees, except those children enrolled 158 in the Children's Medical Services network, on a last-in, first-159 out basis until the expenditure and appropriation levels are 160 balanced.

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161 (4) (4) (3) The agencies that administer the Florida KidCare 162 Kidcare program components shall collect and analyze the data needed to project Florida Kidcare program enrollment costs, 163 164 including price level adjustments outreach impacts, participation and attrition rates, current and projected 165 166 caseloads, utilization, and current and projected expenditures for the next 3 years. The agencies shall report the caseload and 167 expenditure trends to the Social Services Estimating Conference 168 169 in accordance with chapter 216.

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

409.814 Eligibility.--A child who has not reached 19 years 172 173 of age whose family income is equal to or below 200 percent of the federal poverty level is eligible for the Florida KidCare 174 Kidcare program as provided in this section. In determining the 175 176 eligibility of such a child, an assets test is not required. An 177 applicant under 19 years of age who, based on a complete 178 application, appears to be eligible for the Medicaid component 179 of the Florida Kidcare program is presumed eligible for coverage 180 under Medicaid, subject to federal rules. A child who has been deemed presumptively eligible for Medicaid shall not be enrolled 181 182 in a managed care plan until the child's full eligibility 183 determination for Medicaid has been completed. The Florida 184 Healthy Kids Corporation may, subject to compliance with 185 applicable requirements of the Agency for Health Care 186 Administration and the Department of Children and Family 187 Services, be designated as an entity to conduct presumptive eligibility determinations. An applicant under 19 years of age 188

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189 who, based on a complete application, appears to be eligible for the Medikids, Florida Healthy Kids, or Children's Medical 190 191 Services network program component, who is screened as ineligible for Medicaid and prior to the monthly verification of 192 193 the applicant's enrollment in Medicaid or of eligibility for 194 coverage under the state employee health benefit plan, may be 195 enrolled in and begin receiving coverage from the appropriate 196 program component on the first day of the month following the 197 receipt of a completed application. For enrollment in the 198 Children's Medical Services network, a complete application 199 includes the medical or behavioral health screening. If, 200 subsequently after verification, an individual is determined to 201 be ineligible for coverage, he or she must immediately be 202 disenrolled from the respective Florida KidCare Title XXI-funded 203 Kidcare program component.

(1) A child who is eligible for Medicaid coverage under s.
409.903 or s. 409.904 must be enrolled in Medicaid and is not
eligible to receive health benefits under any other health
benefits coverage authorized under <u>the Florida KidCare program</u>
ss. 409.810-409.820.

A child who is not eligible for Medicaid, but who is 209 (2) 210 eligible for the Florida KidCare Kidcare program, may obtain health benefits coverage under any of the other components 211 212 listed in s. 409.813 types of health benefits coverage 213 authorized in ss. 409.810-409.820 if such coverage is approved 214 and available in the county in which the child resides. However, a child who is eligible for Medikids may participate in the 215 Florida Healthy Kids program only if the child has a sibling 216

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217 participating in the Florida Healthy Kids program and the 218 child's county of residence permits such enrollment.

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

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

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

232 A child who is currently eligible for or covered under (b) 233 a family member's group health benefit plan or under other employer health insurance coverage, excluding coverage provided 234 235 under the Florida Healthy Kids Corporation as established under s. 624.91, provided that the cost of the child's participation 236 is not greater than 7.5 percent of the family's income. This 237 238 provision shall be applied during redetermination for children who were enrolled prior to July 1, 2004. These enrollees shall 239 have 6 months of eligibility following redetermination to allow 240 for a transition to the other health benefit plan. 241

(c) A child who is seeking premium assistance for <u>the</u>
Florida KidCare program through employer-sponsored group
coverage, if the child has been covered by the same employer's

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group coverage during the 6 months prior to the family's submitting an application for determination of eligibility under the Florida Kidcare program.

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

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

252 (f) A child who has had his or her coverage in an 253 employer-sponsored health benefit plan voluntarily canceled in 254 the last 6 months, except those children who were on the waiting 255 list prior to January 31, 2004.

(5) A child whose family income is above 200 percent of the federal poverty level or a child who is excluded under the provisions of subsection (4) may participate in the Florida <u>KidCare Kidcare program, excluding the Medicaid program, but is</u> subject to the following provisions:

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

(b) The agency is authorized to place limits on enrollment in Medikids by these children in order to avoid adverse selection. The number of children participating in Medikids whose family income exceeds 200 percent of the federal poverty level must not exceed 10 percent of total enrollees in the Medikids program.

(c) The board of directors of the Florida Healthy Kids
Corporation is authorized to place limits on enrollment of these
children in order to avoid adverse selection. In addition, the

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board is authorized to offer a reduced benefit package to these children in order to limit program costs for such families. The number of children participating in the Florida Healthy Kids program whose family income exceeds 200 percent of the federal poverty level must not exceed 10 percent of total enrollees in the Florida Healthy Kids program.

(d) Children described in this subsection are not counted
 in the annual enrollment ceiling for the Florida <u>KidCare</u> <del>Kidcare</del>
 program.

282 Once a child is enrolled in the Florida KidCare (6) 283 Kidcare program, the child is eligible for coverage under the 284 program for 6 months without a redetermination or reverification 285 of eligibility, if the family continues to pay the applicable premium. Eligibility for program components funded through Title 286 XXI of the Social Security Act shall terminate when a child 287 288 attains the age of 19. Effective January 1, 1999, a child who 289 has not attained the age of 5 and who has been determined eligible for the Medicaid program is eligible for coverage for 290 291 12 months without a redetermination or reverification of 292 eligibility.

When determining or reviewing a child's eligibility 293 (7)294 under the Florida KidCare program, the applicant shall be 295 provided with reasonable notice of changes in eligibility which 296 may affect enrollment in one or more of the program components. 297 When a transition from one program component to another is 298 authorized appropriate, there shall be cooperation between the 299 program components and the affected family which promotes continuity of health care coverage. Any authorized transfers 300

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301	must be managed within the program's overall appropriated or
302	authorized levels of funding. Each component of the program
303	shall establish a reserve to ensure that transfers between
304	components will be accomplished within current year
305	appropriations. These reserves shall be reviewed by each
306	convening of the Social Services Estimating Conference to
307	determine the adequacy of such reserves to meet actual
308	experience.
309	(8) In determining the eligibility of a child, an assets
310	test is not required. Each applicant shall provide written
311	documentation during the application process and the
312	redetermination process, including, but not limited to, the
313	following:
314	(a) Proof of family income.
315	(b) A statement from all employers of family members that:
316	1. The employer does not sponsor a health benefit plan for
317	employees; or
318	2. The potential enrollee is not covered by the employer-
319	sponsored health benefit plan because the potential enrollee is
320	not eligible for coverage, or, if the potential enrollee is
321	eligible but not covered, a statement of the cost to enroll the
322	potential enrollee in the employer-sponsored health benefit
323	plan.
324	(9) Subject to paragraph (4)(b) and s. 624.91(3), the
325	Florida KidCare program shall withhold benefits from an enrollee
326	if the program obtains evidence that the enrollee is no longer
327	eligible, submitted incorrect or fraudulent information in order
328	to establish eligibility, or failed to provide verification of

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329	eligibility. The applicant or enrollee shall be notified that
330	because of such evidence program benefits will be withheld
331	unless the applicant or enrollee contacts a designated
332	representative of the program by a specified date, which must be
333	within 10 days after the date of notice, to discuss and resolve
334	the matter. The program shall make every effort to resolve the
335	matter within a timeframe that will not cause benefits to be
336	withheld from an eligible enrollee.
337	(10) The following individuals may be subject to
338	prosecution in accordance with s. 414.39:
339	(a) An applicant obtaining or attempting to obtain
340	benefits for a potential enrollee under the Florida KidCare
341	program when the applicant knows or should have known the
342	potential enrollee does not qualify for the Florida KidCare
343	program.
344	(b) An individual who assists an applicant in obtaining or
345	attempting to obtain benefits for a potential enrollee under the
346	Florida KidCare program when the individual knows or should have
347	known the potential enrollee does not qualify for the Florida
348	KidCare program.
349	Section 5. Paragraph $(q)$ of subsection (2) of section
350	409.815, Florida Statutes, is amended to read:
351	409.815 Health benefits coverage; limitations
352	(2) BENCHMARK BENEFITSIn order for health benefits
353	coverage to qualify for premium assistance payments for an
354	eligible child under ss. 409.810-409.820, the health benefits
355	coverage, except for coverage under Medicaid and Medikids, must
356	include the following minimum benefits, as medically necessary.
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357 (q) Dental services.--Covered services may include those dental services provided to children by the Florida Medicaid 358 program under s. 409.906(5), contingent upon an annual 359 360 appropriation in the General Appropriations Act up to a maximum benefit of \$750 per enrollee per year. 361 362 Section 6. Subsections (3) through (7) of section 624.91, 363 Florida Statutes, are renumbered as subsections (4) through (8), 364 respectively, present subsections (2) and (4) of said section 365 are amended, and a new subsection (3) is added to said section, 366 to read: 367 624.91 The Florida Healthy Kids Corporation Act .--368 (2) LEGISLATIVE INTENT.--369 The Legislature finds that increased access to health (a) 370 care services could improve children's health and reduce the incidence and costs of childhood illness and disabilities among 371 children in this state. Many children do not have comprehensive, 372 affordable health care services available. It is the intent of 373 374 the Legislature that the Florida Healthy Kids Corporation 375 provide comprehensive health insurance coverage to such 376 children. The corporation is encouraged to cooperate with any 377 existing health service programs funded by the public or the 378 private sector and to work cooperatively with the Florida 379 Partnership for School Readiness.

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

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385 recipients of services provided through the corporation be 386 school-age children with a family income below 200 percent of 387 the federal poverty level, who do not qualify for Medicaid. It 388 is also the intent of the Legislature that state and local government Florida Healthy Kids funds be used to continue and 389 390 expand coverage, subject to specific appropriations in the 391 General Appropriations Act, to children not eligible for federal 392 matching funds under Title XXI.

393 <u>(3) ELIGIBILITY FOR STATE-FUNDED ASSISTANCE.--Only the</u> 394 <u>following individuals are eligible for state-funded assistance</u> 395 <u>in paying Florida Healthy Kids premiums:</u>

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

398 (b) Notwithstanding s. 409.814, legal aliens who are 399 enrolled in the Florida Healthy Kids program as of January 31, 400 2004, who do not qualify for Title XXI federal funds because 401 they are not qualified aliens as defined in s. 409.811.

402 (c) Notwithstanding s. 409.814, individuals who have 403 attained the age of 19 as of March 31, 2004, who were receiving 404 Florida Healthy Kids benefits prior to the enactment of the 405 Florida KidCare program. This paragraph shall be repealed March 406 31, 2005.

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

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

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412 (a) There is created the Florida Healthy Kids Corporation,413 a not-for-profit corporation.

414

(b) The Florida Healthy Kids Corporation shall:

415 1. Arrange for the collection of any family, local 416 contributions, or employer payment or premium, in an amount to 417 be determined by the board of directors, to provide for payment 418 of premiums for comprehensive insurance coverage and for the 419 actual or estimated administrative expenses. $\div$ 

2. Arrange for the collection of any voluntary 420 421 contributions to provide for payment of premiums for children 422 who are not eligible for medical assistance under Title XXI of 423 the Social Security Act. Each fiscal year, the corporation shall 424 establish a local match policy for the enrollment of non-Title-425 XXI-eligible children in the Healthy Kids program. By May 1 of 426 each year, the corporation shall provide written notification of 427 the amount to be remitted to the corporation for the following 428 fiscal year under that policy. Local match sources may include, but are not limited to, funds provided by municipalities, 429 430 counties, school boards, hospitals, health care providers, charitable organizations, special taxing districts, and private 431 organizations. The minimum local match cash contributions 432 433 required each fiscal year and local match credits shall be determined by the General Appropriations Act. The corporation 434 435 shall calculate a county's local match rate based upon that county's percentage of the state's total non-Title-XXI 436 437 expenditures as reported in the corporation's most recently audited financial statement. In awarding the local match 438 439 credits, the corporation may consider factors including, but not

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440 limited to, population density, per capita income, and existing 441 child-health-related expenditures and services.÷

3. <u>Subject to the provisions of s. 409.8134</u>, accept voluntary supplemental local match contributions that comply with the requirements of Title XXI of the Social Security Act for the purpose of providing additional coverage in contributing counties under Title XXI.÷

447 4. Establish the administrative and accounting procedures 448 for the operation of the corporation. $\div$ 

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

455 6. <u>Determine</u> Establish eligibility for criteria which
456 children <u>seeking</u> must meet in order to participate in the <u>Title</u>
457 <u>XXI-funded</u> components of the Florida KidCare program consistent
458 with the requirements specified in s. 409.814, as well as the
459 <u>non-Title-XXI-eligible</u> children as provided in subsection (3).÷

460 7. Establish procedures under which providers of local 461 match to, applicants to and participants in the program may have 462 grievances reviewed by an impartial body and reported to the 463 board of directors of the corporation. $\div$ 

8. Establish participation criteria and, if appropriate,
contract with an authorized insurer, health maintenance
organization, or <u>third-party</u> insurance administrator to provide
administrative services to the corporation.÷

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

472 10. If a space is available, establish a special open 473 enrollment period of 30 days' duration for any child who is 474 enrolled in Medicaid or Medikids if such child loses Medicaid or 475 Medikids eligibility and becomes eligible for the Florida 476 Healthy Kids program;

477 10.11. Contract with authorized insurers or any provider 478 of health care services, meeting standards established by the corporation, for the provision of comprehensive insurance 479 480 coverage to participants. Such standards shall include criteria 481 under which the corporation may contract with more than one 482 provider of health care services in program sites. Health plans 483 shall be selected through a competitive bid process. The Florida 484 Healthy Kids Corporation shall purchase goods and services in 485 the most cost-effective manner consistent with the delivery of 486 quality medical care. The maximum administrative cost for a 487 Florida Healthy Kids Corporation contract shall be 15 percent. The minimum medical loss ratio for a Florida Healthy Kids 488 489 Corporation contract shall be 85 percent. The selection of 490 health plans shall be based primarily on quality criteria 491 established by the board. The health plan selection criteria and 492 scoring system, and the scoring results, shall be available upon request for inspection after the bids have been awarded. $\div$ 493

494 <u>11.12.</u> Establish disenrollment criteria in the event local 495 matching funds are insufficient to cover enrollments. $\div$ 

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496 <u>12.13.</u> Develop and implement a plan to publicize the 497 Florida Healthy Kids Corporation, the eligibility requirements 498 of the program, and the procedures for enrollment in the program 499 and to maintain public awareness of the corporation and the 500 program. $\div$ 

501 <u>13.14.</u> Secure staff necessary to properly administer the 502 corporation. Staff costs shall be funded from state and local 503 matching funds and such other private or public funds as become 504 available. The board of directors shall determine the number of 505 staff members necessary to administer the corporation. $\dot{\cdot}$ 

506 15. As appropriate, enter into contracts with local school 507 boards or other agencies to provide onsite information, 508 enrollment, and other services necessary to the operation of the 509 corporation;

510 <u>14.16.</u> Provide a report annually to the Governor, Chief 511 Financial Officer, Commissioner of Education, Senate President, 512 Speaker of the House of Representatives, and Minority Leaders of 513 the Senate and the House of Representatives.+

514 17. Each fiscal year, establish a maximum number of 515 participants, on a statewide basis, who may enroll in the 516 program; and

517 <u>15.18.</u> Establish eligibility criteria, premium and cost-518 sharing requirements, and benefit packages which conform to the 519 provisions of the Florida <u>KidCare</u> <del>Kidcare</del> program, as created in 520 ss. 409.810-409.820.

(c) Coverage under the corporation's program is secondary
to any other available private coverage held by, or applicable
to, the participant child or family member. <u>Insurers under</u>

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CS 524 contract with the corporation are the payors of last resort and 525 must coordinate benefits with any other third-party payor that 526 may be liable for the participant's medical care The corporation 527 may establish procedures for coordinating benefits under this 528 program with benefits under other public and private coverage. 529 (d) The Florida Healthy Kids Corporation shall be a private corporation not for profit, organized pursuant to 530 531 chapter 617, and shall have all powers necessary to carry out 532 the purposes of this act, including, but not limited to, the 533 power to receive and accept grants, loans, or advances of funds 534 from any public or private agency and to receive and accept from 535 any source contributions of money, property, labor, or any other 536 thing of value, to be held, used, and applied for the purposes 537 of this act. The Auditor General shall provide 538 Section 7. 539 recommendations to implement mechanisms to prevent enrollment of children in the Florida KidCare program who are ineligible 540 541 pursuant to the requirements of s. 409.814(4), Florida Statutes. 542 Such recommendations shall be reported to the Governor, the 543 President of the Senate, and the Speaker of the House of Representatives by March 1, 2005. 544 545 Section 8. The Florida Healthy Kids Corporation shall use 546 existing funds from their operating fund established by s. 547 624.915, Florida Statutes, to contract for an actuarial study on 548 the impact of full-pay enrollees on the cost of services for 549 each Florida KidCare program component. 550 The Auditor General shall perform periodic Section 9. 551 audits through the 2005-2006 fiscal year to ensure that children

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552	enrolled in the Florida Healthy Kids program are eligible
553	pursuant to ss. 409.814 and 624.91, Florida Statutes. The
554	Auditor General shall have the authority to require and receive
555	from the Florida Healthy Kids Corporation or from its
556	independent auditor any books, accounts, records, or other
557	documentation relating to the corporation. Any contract entered
558	into by the corporation pursuant to s. 624.91(4)(b)11. or s.
559	624.91(4)(b)15., Florida Statutes, shall specify that the
560	records of the contractor relating to the contract or its
561	performance must be available for review and audit by the
562	Auditor General.
563	Section 10. The Office of Program Policy Analysis and
564	Government Accountability shall perform a study to determine the
565	appropriate family premium for the Florida KidCare program and
566	submit a report to the President of the Senate and the Speaker
567	of the House of Representatives by January 1, 2005. The report
568	shall set out no fewer than three options and shall make a
569	recommendation as to the appropriate family premium for the
570	Florida KidCare program. Each option shall include a detailed
571	explanation of the analysis that led to the conclusion. A
572	discussion of family premiums collected by Title XXI programs in
573	other states shall be part of the report.
574	Section 11. Subsection (2) of section 409.818, Florida
575	Statutes, is amended to read:
576	409.818 AdministrationIn order to implement ss.
577	409.810-409.820, the following agencies shall have the following
578	duties:
579	(2) The Department of Health shall:
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(a) Design an eligibility intake process for the program,
in coordination with the Department of Children and Family
Services, the agency, and the Florida Healthy Kids Corporation.
The eligibility intake process may include local intake points
that are determined by the Department of Health in coordination
with the Department of Children and Family Services.

586 (b) Design and implement program outreach activities under 587 s. 409.819.

(b)(c) Chair a state-level coordinating council to review 588 589 and make recommendations concerning the implementation and 590 operation of the program. The coordinating council shall include 591 representatives from the department, the Department of Children 592 and Family Services, the agency, the Florida Healthy Kids 593 Corporation, the Office of Insurance Regulation of the Financial 594 Services Commission, local government, health insurers, health 595 maintenance organizations, health care providers, families 596 participating in the program, and organizations representing 597 low-income families.

598 <u>(c)</u>(d) In consultation with the Florida Healthy Kids 599 Corporation and the Department of Children and Family Services, 600 <u>establish</u> establishing a toll-free telephone line to assist 601 families with questions about the program.

602 (d)(e) Adopt rules necessary to implement outreach
603 activities.

604Section 12.Section 409.819, Florida Statutes, is605repealed.

606Section 13.The sums of \$6,566,073 from the General607Revenue Fund, \$454,687 from the Grants and Donations Trust Fund,

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CODING: Words stricken are deletions; words underlined are additions.

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2004

## HB 1073

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608	and \$16,272,440 from the Medical Quality Assurance Trust Fund
609	are appropriated to the Agency for Health Care Administration,
610	and the sum of \$1,984,113 is appropriated from the Grants and
611	Donations Trust Fund to the Department of Health, for the 2003-
612	2004 fiscal year for the purpose of serving children on whose
613	behalf applications are submitted to the Florida KidCare program
614	as of January 30, 2004, and who are determined to be eligible
615	for program components funded under Title XXI of the Social
616	Security Act.
617	Section 14. Except as otherwise provided herein, this act

618 shall take effect upon becoming a law.