

ENROLLED
 HB 17, Engrossed 1

2005 Legislature

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A bill to be entitled
 An act relating to developmental disabilities; amending s.
 409.912, F.S.; requiring the Agency for Health Care
 Administration, in coordination with the Agency for
 Persons with Disabilities, to develop a model waiver
 program to serve children with specified disorders;
 requiring the Agency for Health Care Administration to
 seek federal waiver approval and implement the approved
 waiver subject to availability of funds and certain
 limitations; authorizing rules; providing an
 appropriation; providing an effective date.

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

Section 1. Subsection (50) is added to section 409.912,
 Florida Statutes, to read:

409.912 Cost-effective purchasing of health care.--The
 agency shall purchase goods and services for Medicaid recipients
 in the most cost-effective manner consistent with the delivery
 of quality medical care. To ensure that medical services are
 effectively utilized, the agency may, in any case, require a
 confirmation or second physician's opinion of the correct
 diagnosis for purposes of authorizing future services under the
 Medicaid program. This section does not restrict access to
 emergency services or poststabilization care services as defined
 in 42 C.F.R. part 438.114. Such confirmation or second opinion
 shall be rendered in a manner approved by the agency. The agency
 shall maximize the use of prepaid per capita and prepaid

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29 aggregate fixed-sum basis services when appropriate and other
30 alternative service delivery and reimbursement methodologies,
31 including competitive bidding pursuant to s. 287.057, designed
32 to facilitate the cost-effective purchase of a case-managed
33 continuum of care. The agency shall also require providers to
34 minimize the exposure of recipients to the need for acute
35 inpatient, custodial, and other institutional care and the
36 inappropriate or unnecessary use of high-cost services. The
37 agency may mandate prior authorization, drug therapy management,
38 or disease management participation for certain populations of
39 Medicaid beneficiaries, certain drug classes, or particular
40 drugs to prevent fraud, abuse, overuse, and possible dangerous
41 drug interactions. The Pharmaceutical and Therapeutics Committee
42 shall make recommendations to the agency on drugs for which
43 prior authorization is required. The agency shall inform the
44 Pharmaceutical and Therapeutics Committee of its decisions
45 regarding drugs subject to prior authorization. The agency is
46 authorized to limit the entities it contracts with or enrolls as
47 Medicaid providers by developing a provider network through
48 provider credentialing. The agency may limit its network based
49 on the assessment of beneficiary access to care, provider
50 availability, provider quality standards, time and distance
51 standards for access to care, the cultural competence of the
52 provider network, demographic characteristics of Medicaid
53 beneficiaries, practice and provider-to-beneficiary standards,
54 appointment wait times, beneficiary use of services, provider
55 turnover, provider profiling, provider licensure history,
56 previous program integrity investigations and findings, peer

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57 | review, provider Medicaid policy and billing compliance records,
58 | clinical and medical record audits, and other factors. Providers
59 | shall not be entitled to enrollment in the Medicaid provider
60 | network. The agency is authorized to seek federal waivers
61 | necessary to implement this policy.

62 | (50) The agency shall work with the Agency for Persons
63 | with Disabilities to develop a model home and community-based
64 | waiver to serve children who are diagnosed with familial
65 | dysautonomia or Riley-Day syndrome caused by a mutation of the
66 | IKBKAP gene on chromosome 9. The agency shall seek federal
67 | waiver approval and implement the approved waiver subject to the
68 | availability of funds and any limitations provided in the
69 | General Appropriations Act. The agency may adopt rules to
70 | implement this waiver program.

71 | Section 2. The sums of \$171,840 from the General Revenue
72 | Fund and \$246,160 from the Medical Care Trust Fund are
73 | appropriated to the Agency for Health Care Administration for
74 | the purpose of implementing this act during the 2005-2006 fiscal
75 | year.

76 | Section 3. This act shall take effect July 1, 2005.