

Amendment No. (for drafter's use only)

CHAMBER ACTION

Senate

House

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1 Representative(s) Benson offered the following:

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3 **Amendment (with title amendment)**

4 Remove line(s) 1042-1052 and insert:

5 Section 9. Section 409.9124, Florida Statutes, is amended
6 to read:

7 409.9124 Managed care reimbursement.--

8 ~~(1)~~ The agency shall develop and adopt by rule a
9 methodology for reimbursing managed care plans.

10 ~~(1)~~~~(2)~~ Final managed care rates shall be published
11 annually prior to September 1 of each year, based on methodology
12 that:

13 (a) Uses Medicaid's fee-for-service expenditures.

14 (b) Is certified as an actuarially sound computation of
15 Medicaid fee-for-service expenditures for comparable groups of

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16 Medicaid recipients and includes all fee-for-service
17 expenditures, including those fee-for-service expenditures
18 attributable to recipients who are enrolled for a portion of a
19 year in a managed care plan or waiver program.

20 (c) Is compliant with applicable federal laws and
21 regulations, including, but not limited to, the requirements to
22 include an allowance for administrative expenses and to account
23 for all fee-for-service expenditures, including fee-for-service
24 expenditures for those groups enrolled for part of a year.

25 ~~(2)(3)~~ Each year prior to establishing new managed care
26 rates, the agency shall review all prior year adjustments for
27 changes in trend, and shall reduce or eliminate those
28 adjustments which are not reasonable and which reflect policies
29 or programs which are not in effect. In addition, the agency
30 shall apply only those policy reductions applicable to the
31 fiscal year for which the rates are being set, which can be
32 accurately estimated and verified by an independent actuary and
33 which have been implemented prior to or will be implemented
34 during the fiscal year. The agency shall pay rates at per-
35 member, per-month averages that equal, but do not exceed, the
36 amounts allowed for in the General Appropriations Act applicable
37 to the fiscal year for which the rates will be in effect.

38 ~~(3)(4)~~ The agency shall by rule prescribe those items of
39 financial information which each managed care plan shall report
40 to the agency, in the time periods prescribed by rule. In
41 prescribing items for reporting and definitions of terms, the

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42 agency shall consult with the Office of Insurance Regulation of
43 the Financial Services Commission wherever possible.

44 ~~(4)(5)~~ The agency shall quarterly examine the financial
45 condition of each managed care plan, and its performance in
46 serving Medicaid patients, and shall utilize examinations
47 performed by the Office of Insurance Regulation wherever
48 possible.

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50 ===== T I T L E A M E N D M E N T =====

51 Remove line(s) 25-28 and insert:
52 s. 409.9124, F.S.; revising managed care rate methodology;
53 providing