

By the Committees on Health and Human Services Appropriations;
Health Care; and Senator Rich

603-2303-05

1 A bill to be entitled

2 An act relating to developmental disabilities;

3 amending s. 409.912, F.S.; requiring the Agency

4 for Health Care Administration to develop a

5 model waiver program to serve children with

6 specified disorders; requiring the agency to

7 seek federal waiver approval and implement the

8 approved waiver subject to availability of

9 funds and certain limitations; authorizing

10 rules; providing an appropriation; providing an

11 effective date.

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

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15 Section 1. Subsection (50) is added to section

16 409.912, Florida Statutes, to read:

17 409.912 Cost-effective purchasing of health care.--The

18 agency shall purchase goods and services for Medicaid

19 recipients in the most cost-effective manner consistent with

20 the delivery of quality medical care. To ensure that medical

21 services are effectively utilized, the agency may, in any

22 case, require a confirmation or second physician's opinion of

23 the correct diagnosis for purposes of authorizing future

24 services under the Medicaid program. This section does not

25 restrict access to emergency services or poststabilization

26 care services as defined in 42 C.F.R. part 438.114. Such

27 confirmation or second opinion shall be rendered in a manner

28 approved by the agency. The agency shall maximize the use of

29 prepaid per capita and prepaid aggregate fixed-sum basis

30 services when appropriate and other alternative service

31 delivery and reimbursement methodologies, including

1 competitive bidding pursuant to s. 287.057, designed to
2 facilitate the cost-effective purchase of a case-managed
3 continuum of care. The agency shall also require providers to
4 minimize the exposure of recipients to the need for acute
5 inpatient, custodial, and other institutional care and the
6 inappropriate or unnecessary use of high-cost services. The
7 agency may mandate prior authorization, drug therapy
8 management, or disease management participation for certain
9 populations of Medicaid beneficiaries, certain drug classes,
10 or particular drugs to prevent fraud, abuse, overuse, and
11 possible dangerous drug interactions. The Pharmaceutical and
12 Therapeutics Committee shall make recommendations to the
13 agency on drugs for which prior authorization is required. The
14 agency shall inform the Pharmaceutical and Therapeutics
15 Committee of its decisions regarding drugs subject to prior
16 authorization. The agency is authorized to limit the entities
17 it contracts with or enrolls as Medicaid providers by
18 developing a provider network through provider credentialing.
19 The agency may limit its network based on the assessment of
20 beneficiary access to care, provider availability, provider
21 quality standards, time and distance standards for access to
22 care, the cultural competence of the provider network,
23 demographic characteristics of Medicaid beneficiaries,
24 practice and provider-to-beneficiary standards, appointment
25 wait times, beneficiary use of services, provider turnover,
26 provider profiling, provider licensure history, previous
27 program integrity investigations and findings, peer review,
28 provider Medicaid policy and billing compliance records,
29 clinical and medical record audits, and other factors.
30 Providers shall not be entitled to enrollment in the Medicaid
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1 provider network. The agency is authorized to seek federal
2 waivers necessary to implement this policy.

3 (50) The agency shall work with the Agency for Persons
4 with Disabilities to develop a model home and community-based
5 waiver to serve children who are diagnosed with familial
6 dysautonomia or Riley-Day syndrome caused by a mutation of the
7 IKBKAP gene on chromosome 9. The agency shall seek federal
8 waiver approval and implement the approved waiver subject to
9 the availability of funds and any limitations provided in the
10 General Appropriations Act. The agency may adopt rules to
11 implement this waiver program.

12 Section 2. The sums of \$171,840 from the General
13 Revenue Fund and \$246,160 from the Medical Care Trust Fund are
14 appropriated to the Agency for Health Care Administration for
15 the purpose of implementing this act during the 2005-2006
16 fiscal year.

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

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19 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
20 COMMITTEE SUBSTITUTE FOR
21 CS for SB 428

22 Provides \$171,840 from the General Revenue Fund and \$246,160
23 from the Medical Care Trust Fund to the Agency for Health Care
24 Administration.
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