Bill No. <u>SB 1828</u>

Barcode 325302

CHAMBER ACTION

	CHAMBER ACTION
I	<u>Senate</u> <u>House</u>
1	Comm: RCS
2	04/24/2007 02:28 PM .
3	· .
4	·
5	
6	
7	
8	
9	
10	
11	The Committee on Health and Human Services Appropriations
12	(Saunders) recommended the following amendment:
13	
14	Senate Amendment (with title amendment)
15	Delete everything after the enacting clause
16	
17	and insert:
18	Section 1. Subsections (8) and (9) of section
19	409.91211, Florida Statutes, are amended to read:
20	409.91211 Medicaid managed care pilot program
21	(8)(a) The agency shall develop a methodology for
22	calculating risk-adjusted capitation rates using comprehensive
23	encounter data pursuant to subparagraph (3)(p)4. for all
24	Medicaid services specified under this section. The agency
25	shall concentrate on the managed care pilot areas in its
26	efforts to gather comprehensive encounter data. Prior to the
27	implementation of a risk-adjusted capitation rate methodology
28	that uses a comprehensive encounter data system, the agency
29	shall ensure that all of the following criteria are met:
30	1. The agency has confirmed that the encounter data
31	are accurate and have been screened for completeness, logic, 1

Barcode 325302

and consistency.

2.4

Bill No. SB 1828

2. The agency has compiled no less than 1 year's worth of complete encounter data to permit the adjustment of capitation rates for health risk differences and has ensured that the data are of sufficient integrity to be used for risk-adjustment purposes in accordance with actuarial standards of practice which are generally recognized as sound and appropriate.

- 3. The agency has consulted with and sought input from the technical advisory panel regarding the development and implementation of the comprehensive encounter data system as the system is developed.
- (b) The agency may implement an interim risk-adjusted capitation rate methodology to be used before a fully functional encounter data system has been in operation for 12 months, pursuant to paragraph (a).

The agency must ensure, in the first two state fiscal years in which a risk-adjusted methodology is a component of rate setting, that no managed care plan providing comprehensive benefits to TANF and SSI recipients has an aggregate risk score that varies by more than 10 percent from the aggregate weighted mean of all managed care plans providing comprehensive benefits to TANF and SSI recipients in a reform area. The agency's payment to a managed care plan shall be based on such revised aggregate risk score.

- (9) <u>Risk-adjusted</u> After any calculations of aggregate risk scores or revised aggregate risk scores in subsection (8), the capitation rates for plans participating under this section shall be phased in as follows:
- 30 (a) In the first year of the pilot program, the

 31 capitation rates shall be weighted so that 75 percent of each

 2
 12:52 PM 04/24/07 s1828.ha37.j04

Bill No. SB 1828

Barcode 325302

capitation rate is based on the current methodology developed under s. 409.9124 and 25 percent is based on a new 2 risk-adjusted capitation rate methodology <u>developed under</u> 3 subsection (8). During the first year of the pilot program, no managed care plan's aggregate risk score shall vary by more 5 than 10 percent from the aggregate weighted mean of all 7 managed care plans providing comprehensive benefits to TANF or SSI recipients in a reform area. 8 9 (b) In the second year of the pilot program, the capitation rates shall be weighted so that 67 50 percent of 10 11 each capitation rate is based on the current methodology developed under s. 409.9124 and 33 50 percent is based on a 12 new risk-adjusted capitation rate methodology developed under 13 subsection (8). During the second year of the pilot program, 14 15 no managed care plan's aggregate risk score shall vary by more than 10 percent from the aggregate weighted mean of all 16 managed care plans providing comprehensive benefits to TANF or 17 SSI recipients in a reform area. 18 (c) In the third year of the pilot program, the 19 capitation rates shall be weighted so that 67 percent of each 20 21 capitation rate is based on the methodology developed under s. 22 409.9124 and 33 percent is based on a risk-adjusted capitation rate methodology developed under subsection (8). During the 23 24 third year of the pilot program, no managed care plan's aggregate risk score shall vary by more than 12.5 percent from 25 the aggregate weighted mean of all managed care plans 26 providing comprehensive benefits to TANF or SSI recipients in 27 a reform area. In the following fiscal year, the risk-adjusted 28 29 capitation methodology may be fully implemented. 30 (d) In the fourth year of the pilot program, the 31 agency shall seek to implement a risk-adjusted capitation rate 12:52 PM 04/24/07 s1828.ha37.j04

Barcode 325302

1	methodology using comprehensive encounter data pursuant to
2	paragraph (8)(a). Capitation rates in the fourth year shall be
3	weighted so that 50 percent of each capitation rate is based
4	on the methodology developed under s. 409.9124 and 50 percent
5	is based on a risk-adjusted capitation rate methodology which
6	uses a comprehensive encounter data system, and no managed
7	care plan's aggregate risk score shall vary by more than 15
8	percent from the aggregate weighted mean of all managed care
9	plans providing comprehensive benefits to TANF or SSI
10	recipients in a reform area.
11	(e) In the years following the first use of a
12	risk-adjusted capitation rate methodology using comprehensive
13	encounter data pursuant to paragraph (8)(a), such methodology
14	shall be fully implemented and shall account for 100 percent
15	of managed care plan capitation rates.
16	Section 2. For the purposes of payment to otherwise
17	noncontracted hospital providers for services rendered to
18	persons who are eligible for Medicaid in the reform pilot
19	areas and enrolled in a managed care organization under
20	chapter 409 or chapter 641, Florida Statutes, the managed care
21	organization shall reimburse such providers at a rate that is
22	equivalent to the amount the Agency for Health Care
23	Administration would pay on a fee-for-service basis.
24	Section 3. This act shall take effect July 1, 2007.
25	
26	
27	======== T I T L E A M E N D M E N T ==========
28	And the title is amended as follows:
29	Delete everything before the enacting clause
30	
31	and insert:
	12:52 PM 04/24/07 s1828.ha37.j04

Bill No. <u>SB 1828</u>

Barcode 325302

1	A bill to be entitled
2	An act relating to the Medicaid managed care
3	pilot program; amending s. 409.91211, F.S.;
4	requiring the Agency for Health Care
5	Administration to develop a methodology for
6	calculating risk-adjusted capitation rates
7	based on comprehensive encounter data;
8	requiring that specified criteria be met prior
9	to implementation of the methodology; providing
10	for use of an interim risk-adjusted
11	methodology; providing a phase-in schedule for
12	the risk-adjusted methodology for participating
13	managed care plans; providing a payment rate
14	for noncontracted providers in Medicaid reform
15	pilot areas; providing an effective date.
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	5
	12:52 PM 04/24/07 s1828.ha37.j04