

HB 521

2008

1 A bill to be entitled  
2 An act relating to Medicaid assistance for breast and  
3 cervical cancer treatment; amending s. 409.904, F.S.;  
4 authorizing Medicaid reimbursement for medical assistance  
5 provided to certain persons for treatment of breast or  
6 cervical cancer; revising eligibility standards for  
7 certain Medicaid optional medical assistance; providing an  
8 effective date.

9  
10 Be It Enacted by the Legislature of the State of Florida:

11  
12 Section 1. Subsection (9) of section 409.904, Florida  
13 Statutes, is amended to read:

14 409.904 Optional payments for eligible persons.--The  
15 agency may make payments for medical assistance and related  
16 services on behalf of the following persons who are determined  
17 to be eligible subject to the income, assets, and categorical  
18 eligibility tests set forth in federal and state law. Payment on  
19 behalf of these Medicaid eligible persons is subject to the  
20 availability of moneys and any limitations established by the  
21 General Appropriations Act or chapter 216.

22 (9) (a) Eligible women with incomes at or below 200 percent  
23 of the federal poverty level and under age 65, for cancer  
24 treatment pursuant to the federal Breast and Cervical Cancer  
25 Prevention and Treatment Act of 2000, screened through the Mary  
26 Brogan Breast and Cervical Cancer Early Detection Program  
27 established under s. 381.93.

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28        (b) A woman who has not attained 65 years of age and who  
29 has been screened for breast or cervical cancer by a qualified  
30 entity under the Mary Brogan Breast and Cervical Cancer Early  
31 Detection Program of the Department of Health and needs  
32 treatment for breast or cervical cancer and is not otherwise  
33 covered under creditable coverage, as defined in s. 2701(c) of  
34 the Public Health Service Act. For purposes of this paragraph,  
35 the term "qualified entity" means a county public health  
36 department or other entity that has contracted with the  
37 Department of Health to provide breast and cervical cancer  
38 screening services paid for under this section. In determining  
39 the eligibility of such a woman, an assets test is not required.  
40 A presumptive eligibility period begins on the date on which all  
41 eligibility criteria appear to be met and ends on the date  
42 determination is made with respect to the eligibility of such  
43 woman for services under the state plan or, in the case of such  
44 a woman who does not file an application, by the last day of the  
45 month following the month in which the presumptive eligibility  
46 determination is made. A woman is eligible until she gains  
47 creditable coverage, until treatment is no longer necessary, or  
48 until attainment of 65 years of age.

49        Section 2. This act shall take effect July 1, 2008.