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1 A bill to be entitled
2 An act relating to the Florida Kidcare program; amending
3 s. 409.8132, F.S.; providing that children under the age
4 of 1 may participate in the Medikids program; conforming
5 cross-references; amending s. 409.814, F.S.; providing
6 that children who are eligible for a state-sponsored
7 health benefit plan and the subsidized Kidcare program may
8 enroll in the program; providing that an eligible child
9 who is a lawful immigrant may enroll in the Florida
10 Kidcare program regardless of the child's date of entry;
11 conforming provisions to changes made by the act; amending
12 s. 409.815, F.S.; authorizing Kidcare coverage for
13 temporomandibular joint disease; amending s. 409.816,
14 F.S.; conforming cross-references; amending s. 409.904,
15 F.S.; providing that Medicaid-eligible children are deemed
16 eligible for 12 months of coverage regardless of any
17 change in circumstances; providing that a pregnant woman
18 is eligible for Medicaid for the duration of her pregnancy
19 and for the postpartum period; amending s. 624.91, F.S.,
20 relating to the Florida Healthy Kids Corporation;
21 conforming provisions to changes made by the act;
22 expanding the membership of the board of directors of the
23 Florida Healthy Kids Corporation; directing the Agency for
24 Health Care Administration to implement the federal Family
25 Opportunity Act; providing an effective date.

26
27 Be It Enacted by the Legislature of the State of Florida:
28

29 Section 1. Subsection (6) of section 409.8132, Florida
 30 Statutes, is amended to read:

31 409.8132 Medikids program component.—

32 (6) ELIGIBILITY.—

33 (a) A child who ~~has attained the age of 1 year but who is~~
 34 under the age of 5 years is eligible to enroll in the Medikids
 35 program component of the Florida Kidcare program, if the child
 36 is a member of a family that has a family income that ~~which~~
 37 exceeds the Medicaid applicable income level as specified in s.
 38 409.903, but which is equal to or below 200 percent of the
 39 current federal poverty level. In determining ~~the~~ eligibility ~~of~~
 40 ~~such a child~~, an assets test is not required. A child who is
 41 eligible for Medikids may elect to enroll in Florida Healthy
 42 Kids coverage or employer-sponsored group coverage. However, a
 43 child who is eligible for Medikids may participate in the
 44 Florida Healthy Kids program only if the child has a sibling
 45 participating in the Florida Healthy Kids program and the
 46 child's county of residence permits such enrollment.

47 (b) The provisions of s. 409.814(3)-(8) ~~are 409.814(3),~~
 48 ~~(4), (5), and (6)~~ shall be applicable to the Medikids program.

49 Section 2. Section 409.814, Florida Statutes, is amended
 50 to read:

51 409.814 Eligibility.—A child who has not reached 19 years
 52 of age whose family income is equal to or below 200 percent of
 53 the federal poverty level is eligible for the Florida Kidcare
 54 program as provided in this section. For enrollment in the
 55 Children's Medical Services Network, a complete application
 56 includes the medical or behavioral health screening. If,

57 | subsequently, an individual is determined to be ineligible for
 58 | coverage, he or she must be immediately ~~be~~ disenrolled from the
 59 | respective Florida Kidcare program component.

60 | (1) A child who is eligible for Medicaid coverage under s.
 61 | 409.903 or s. 409.904 must be enrolled in Medicaid and is not
 62 | eligible to receive health benefits under any other health
 63 | benefits coverage authorized under the Florida Kidcare program.

64 | (2) A child who is not eligible for Medicaid, but who is
 65 | eligible for the Florida Kidcare program, may obtain health
 66 | benefits coverage under any of the other components listed in s.
 67 | 409.813 if such coverage is approved and available in the county
 68 | in which the child resides.

69 | (3) A Title XXI-funded child who is eligible for the
 70 | Florida Kidcare program and who is a child with special health
 71 | care needs, as determined through a medical or behavioral
 72 | screening instrument, is eligible for health benefits coverage
 73 | from and shall be assigned to and may opt out of the Children's
 74 | Medical Services Network.

75 | (4) A child who is eligible for a state-sponsored health
 76 | benefit plan through a family member or guardian employed by the
 77 | state and who meets the eligibility requirements for the
 78 | subsidized Florida Kidcare program may enroll in the subsidized
 79 | Florida Kidcare program, subject to an appropriation or the
 80 | availability of local contributions collected pursuant to s.
 81 | 624.91.

82 | (5) A child who is an immigrant lawfully residing in the
 83 | United States and who meets the eligibility requirements for the
 84 | Florida Kidcare program may enroll in the program regardless of

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85 | the child's date of entry.

86 | ~~(6)(4)~~ The following children are not eligible to receive
87 | Title XXI-funded premium assistance for health benefits coverage
88 | under the Florida Kidcare program, except under Medicaid if the
89 | child would have been eligible for Medicaid under s. 409.903 or
90 | s. 409.904 as of June 1, 1997:

91 | ~~(a)~~ ~~A child who is eligible for coverage under a state~~
92 | ~~health benefit plan on the basis of a family member's employment~~
93 | ~~with a public agency in the state.~~

94 | (a)(b) A child who is covered under a family member's
95 | group health benefit plan or under other private or employer
96 | health insurance coverage, if the cost of the child's
97 | participation is not greater than 5 percent of the family's
98 | income. If a child is otherwise eligible for a subsidy under the
99 | Florida Kidcare program and the cost of the child's
100 | participation in the family member's health insurance benefit
101 | plan is greater than 5 percent of the family's income, the child
102 | may enroll in the appropriate subsidized Kidcare program.

103 | ~~(b)(e)~~ A child who is seeking premium assistance for the
104 | Florida Kidcare program through employer-sponsored group
105 | coverage, if the child has been covered by the same employer's
106 | group coverage during the 60 days before the family submitted
107 | ~~prior to the family's submitting~~ an application for
108 | determination of eligibility under the program.

109 | ~~(d)~~ ~~A child who is an alien, but who does not meet the~~
110 | ~~definition of qualified alien, in the United States.~~

111 | (c)(e) A child who is an inmate of a public institution or
112 | a patient in an institution for mental diseases.

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113 (d)~~(f)~~ A child who is otherwise eligible for premium
114 assistance for the Florida Kidcare program and has had his or
115 her coverage in an employer-sponsored or private health benefit
116 plan voluntarily canceled in the last 60 days, except those
117 children whose coverage was voluntarily canceled for good cause,
118 including, but not limited to, the following circumstances:

119 1. The cost of participation in an employer-sponsored
120 health benefit plan is greater than 5 percent of the family's
121 income;

122 2. The parent lost a job that provided an employer-
123 sponsored health benefit plan for children;

124 3. The parent who had health benefits coverage for the
125 child is deceased;

126 4. The child has a medical condition that, without medical
127 care, would cause serious disability, loss of function, or
128 death;

129 5. The employer of the parent canceled health benefits
130 coverage for children;

131 6. The child's health benefits coverage ended because the
132 child reached the maximum lifetime coverage amount;

133 7. The child has exhausted coverage under a COBRA
134 continuation provision;

135 8. The health benefits coverage does not cover the child's
136 health care needs; or

137 9. Domestic violence led to loss of coverage.

138 (7)~~(5)~~ A child who is otherwise eligible for the Florida
139 Kidcare program and who has a preexisting condition that
140 prevents coverage under another insurance plan as described in

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141 paragraph (6) (a) ~~(4) (b)~~ which would have disqualified the child
142 for the Florida Kidcare program if the child were able to enroll
143 in the plan is ~~shall be~~ eligible for Florida Kidcare coverage
144 when enrollment is possible.

145 (8) (6) A child whose family income is above 200 percent of
146 the federal poverty level or a child who is excluded under the
147 provisions of subsection (6) ~~(4)~~ may participate in the Florida
148 Kidcare program as provided in s. 409.8132 or, if the child is
149 ineligible for Medikids by reason of age, in the Florida Healthy
150 Kids program, subject to the following ~~provisions~~:

151 (a) The family is not eligible for premium assistance
152 payments and must pay the full cost of the premium, including
153 any administrative costs.

154 (b) The board of directors of the Florida Healthy Kids
155 Corporation may offer a reduced benefit package to these
156 children in order to limit program costs for such families.

157 (9) (7) Once a child is enrolled in the Florida Kidcare
158 program, the child is eligible for coverage ~~under the program~~
159 for 12 months without a redetermination or reverification of
160 eligibility, if the family continues to pay the applicable
161 premium. Eligibility for program components funded through Title
162 XXI of the Social Security Act ~~shall~~ terminate when a child
163 attains the age of 19. A child who has not attained the age of 5
164 and who has been determined eligible for the Medicaid program is
165 eligible for coverage for 12 months without a redetermination or
166 reverification of eligibility.

167 (10) (8) When determining or reviewing a child's
168 eligibility under the Florida Kidcare program, the applicant

169 shall be provided with reasonable notice of changes in
 170 eligibility which may affect enrollment in one or more of the
 171 program components. If ~~When~~ a transition from one program
 172 component to another is authorized, there shall be cooperation
 173 between the program components and the affected family which
 174 promotes continuity of health care coverage. Any authorized
 175 transfers must be managed within the program's overall
 176 appropriated or authorized levels of funding. Each component of
 177 the program shall establish a reserve to ensure that transfers
 178 between components will be accomplished within current year
 179 appropriations. These reserves shall be reviewed by each
 180 convening of the Social Services Estimating Conference to
 181 determine the adequacy of such reserves to meet actual
 182 experience.

183 (11) ~~(9)~~ In determining the eligibility of a child, an
 184 assets test is not required. Each applicant shall provide
 185 documentation during the application process and the
 186 redetermination process, including, but not limited to, the
 187 following:

188 (a) ~~Each applicant's~~ Proof of family income, which must
 189 ~~shall~~ be verified electronically to determine financial
 190 eligibility for the Florida Kidcare program. Written
 191 documentation, which may include wages and earnings statements
 192 or pay stubs, W-2 forms, or a copy of the applicant's most
 193 recent federal income tax return, are ~~shall be~~ required only if
 194 ~~the~~ electronic verification is not available or does not
 195 substantiate the applicant's income.

196 (b) ~~Each applicant shall provide~~ A statement from all

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197 applicable, employed family members that:

198 ~~1. Their employers do not sponsor health benefit plans for~~
 199 ~~employees;~~

200 ~~2. the potential enrollee is not covered by an employer-~~
 201 ~~sponsored health benefit plan; or~~

202 ~~3. The potential enrollee is covered by an employer-~~
 203 ~~sponsored health benefit plan and the cost of the employer-~~
 204 ~~sponsored health benefit plan is more than 5 percent of the~~
 205 ~~family's income.~~

206 (12)~~(10)~~ Subject to paragraph (6) (a) ~~(4) (b)~~, the Florida
 207 Kidcare program shall withhold benefits from an enrollee if the
 208 program obtains evidence that the enrollee is no longer
 209 eligible, submitted incorrect or fraudulent information in order
 210 to establish eligibility, or failed to provide verification of
 211 eligibility. The applicant or enrollee shall be notified that
 212 because of such evidence program benefits will be withheld
 213 unless the applicant or enrollee contacts a designated
 214 representative of the program by a specified date, which must be
 215 within 10 working days after the date of notice, to discuss and
 216 resolve the matter. The program shall make every effort to
 217 resolve the matter within a timeframe that will not cause
 218 benefits to be withheld from an eligible enrollee.

219 (13)~~(11)~~ The following individuals may be subject to
 220 prosecution in accordance with s. 414.39:

221 (a) An applicant obtaining or attempting to obtain
 222 benefits for a potential enrollee under the Florida Kidcare
 223 program if ~~when~~ the applicant knows or should have known that
 224 the potential enrollee does not qualify for the ~~Florida Kidcare~~

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225 program.

226 (b) An individual who assists an applicant in obtaining or
 227 attempting to obtain benefits for a potential enrollee under the
 228 Florida Kidcare program ~~if when~~ the individual knows or should
 229 have known that the potential enrollee does not qualify for the
 230 ~~Florida Kidcare~~ program.

231 Section 3. Paragraph (f) of subsection (2) of section
 232 409.815, Florida Statutes, is amended to read:

233 409.815 Health benefits coverage; limitations.—

234 (2) BENCHMARK BENEFITS.—In order for health benefits
 235 coverage to qualify for premium assistance payments for an
 236 eligible child under ss. 409.810-409.821, the health benefits
 237 coverage, except for coverage under Medicaid and Medikids, must
 238 include the following minimum benefits, as medically necessary.

239 (f) Outpatient services.—Covered services include
 240 preventive, diagnostic, therapeutic, palliative care, and other
 241 services authorized by the enrollee's health benefits coverage
 242 provider and provided to an enrollee in the outpatient portion
 243 of a health facility licensed under chapter 395, ~~except for the~~
 244 ~~following limitations:~~

245 ~~1. Services must be authorized by the enrollee's health~~
 246 ~~benefits coverage provider; and~~

247 ~~2. Treatment for temporomandibular joint disease (TMJ) is~~
 248 ~~specifically excluded.~~

249 Section 4. Subsection (3) of section 409.816, Florida
 250 Statutes, is amended to read:

251 409.816 Limitations on premiums and cost-sharing.—The
 252 following limitations on premiums and cost-sharing are

253 established for the program.

254 (3) Enrollees in families with a family income above 150
 255 percent of the federal poverty level who are not receiving
 256 coverage under the Medicaid program or who are not eligible
 257 under s. 409.814(8) ~~409.814(7)~~ may be required to pay enrollment
 258 fees, premiums, copayments, deductibles, coinsurance, or similar
 259 charges on a sliding scale related to income, except that the
 260 total annual aggregate cost-sharing with respect to all children
 261 in a family may not exceed 5 percent of the family's income.
 262 However, copayments, deductibles, coinsurance, or similar
 263 charges may not be imposed for preventive services, including
 264 well-baby and well-child care, age-appropriate immunizations,
 265 and routine hearing and vision screenings.

266 Section 5. Subsections (6) and (7) of section 409.904,
 267 Florida Statutes, are amended to read:

268 409.904 Optional payments for eligible persons.—The agency
 269 may make payments for medical assistance and related services on
 270 behalf of the following persons who are determined to be
 271 eligible subject to the income, assets, and categorical
 272 eligibility tests set forth in federal and state law. Payment on
 273 behalf of these Medicaid eligible persons is subject to the
 274 availability of moneys and any limitations established by the
 275 General Appropriations Act or chapter 216.

276 (6) A child who has not attained the age of 19 ~~who has~~
 277 ~~been determined eligible for the Medicaid program is deemed to~~
 278 ~~be eligible for a total of 6 months, regardless of changes in~~
 279 ~~circumstances other than attainment of the maximum age.~~
 280 ~~Effective January 1, 1999, a child who has not attained the age~~

281 ~~of~~ 5 and who has been determined eligible for the Medicaid
 282 program is deemed to be eligible for a total of 12 months
 283 regardless of changes in circumstances other than attainment of
 284 the maximum age.

285 (7) A pregnant woman for the duration of her pregnancy and
 286 for the postpartum period as defined in federal law and rule, or
 287 a child under 1 year of age who lives in a family that has an
 288 income above 185 percent of the most recently published federal
 289 poverty level, but which is at or below 200 percent of such
 290 poverty level. In determining ~~the~~ eligibility ~~of such child~~, an
 291 assets test is not required. An individual ~~A child~~ who is
 292 eligible for Medicaid under this subsection must be offered the
 293 opportunity, subject to federal rules, to be made presumptively
 294 eligible.

295 Section 6. Subsection (3), paragraph (b) of subsection
 296 (5), and paragraph (a) of subsection (6) of section 624.91,
 297 Florida Statutes, are amended to read:

298 624.91 The Florida Healthy Kids Corporation Act.—

299 (3) ELIGIBILITY FOR STATE-FUNDED ASSISTANCE.—Only the
 300 following individuals are eligible for state-funded assistance
 301 in paying Florida Healthy Kids premiums:

302 (a) Residents of this state who are eligible for the
 303 Florida Kidcare program pursuant to s. 409.814.

304 (b) ~~Notwithstanding s. 409.814,~~ Legal aliens who are
 305 enrolled in the Florida Healthy Kids program as of January 31,
 306 2004, who do not qualify for Title XXI federal funds because
 307 they are not qualified aliens as defined in s. 409.811.

308 (5) CORPORATION AUTHORIZATION, DUTIES, POWERS.—

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309 (b) The Florida Healthy Kids Corporation shall:

310 1. Arrange for the collection of any family, local
311 contributions, or employer payment or premium, in an amount to
312 be determined by the board of directors, to provide for payment
313 of premiums for comprehensive insurance coverage and for the
314 actual or estimated administrative expenses.

315 2. Arrange for the collection of any voluntary
316 contributions to provide for payment of Florida Kidcare program
317 premiums for children who are not eligible for medical
318 assistance under Title XIX or Title XXI of the Social Security
319 Act.

320 3. Subject to ~~the provisions of~~ s. 409.8134, accept
321 voluntary supplemental local match contributions that comply
322 with ~~the requirements of~~ Title XXI of the Social Security Act
323 for the purpose of providing additional Florida Kidcare coverage
324 in contributing counties under Title XXI.

325 4. Establish the administrative and accounting procedures
326 for the operation of the corporation.

327 5. Establish, with consultation from appropriate
328 professional organizations, standards for preventive health
329 services and providers and comprehensive insurance benefits
330 appropriate to children if, ~~provided that~~ such standards for
331 rural areas do ~~shall~~ not limit primary care providers to board-
332 certified pediatricians.

333 6. Determine eligibility for children seeking to
334 participate in the Title XXI-funded components of the Florida
335 Kidcare program consistent with the requirements specified in s.
336 409.814, ~~as well as the non-Title XXI-eligible children as~~

337 ~~provided in subsection (3).~~

338 7. Establish procedures under which providers of local
 339 match to, applicants to, and participants in the program may
 340 have grievances reviewed by an impartial body and reported to
 341 the board of directors of the corporation.

342 8. Establish participation criteria and, if appropriate,
 343 contract with an authorized insurer, health maintenance
 344 organization, or third-party administrator to provide
 345 administrative services to the corporation.

346 9. Establish enrollment criteria that include penalties or
 347 30-day waiting periods ~~of 30 days~~ for reinstatement of coverage
 348 upon voluntary cancellation for nonpayment of family premiums.

349 10. Contract with authorized insurers or providers ~~any~~
 350 ~~provider~~ of health care services, who meet ~~meeting~~ standards
 351 established by the corporation, for the provision of
 352 comprehensive insurance coverage to participants. Such standards
 353 must ~~shall~~ include criteria under which the corporation may
 354 contract with more than one provider of health care services in
 355 program sites. Health plans shall be selected through a
 356 competitive bid process. The Florida Healthy Kids Corporation
 357 shall purchase goods and services in the most cost-effective
 358 manner consistent with the delivery of quality medical care. The
 359 maximum administrative cost for a Florida Healthy Kids
 360 Corporation contract is ~~shall be~~ 15 percent. For health care
 361 contracts, the minimum medical loss ratio for a Florida Healthy
 362 Kids Corporation contract is ~~shall be~~ 85 percent. For dental
 363 contracts, the remaining compensation to be paid to the
 364 authorized insurer or provider must be at least ~~under a Florida~~

365 ~~Healthy Kids Corporation contract shall be no less than an~~
 366 ~~amount which is~~ 85 percent of the premium; to the extent any
 367 contract provision does not provide for this minimum
 368 compensation, this section prevails ~~shall prevail~~. The health
 369 plan selection criteria and scoring system, and the scoring
 370 results, must ~~shall~~ be available upon request for inspection
 371 after the bids have been awarded.

372 11. Establish disenrollment criteria if ~~in the event~~ local
 373 matching funds are insufficient to cover enrollments.

374 12. Develop and implement a plan to publicize the Florida
 375 Kidcare program, the eligibility requirements of the program,
 376 and the procedures for enrollment in the program and to maintain
 377 public awareness of the corporation and the program.

378 13. Secure staff necessary to properly administer the
 379 corporation. Staff costs shall be funded from state and local
 380 matching funds and such other private or public funds as become
 381 available. The board of directors shall determine the number of
 382 staff members necessary to administer the corporation.

383 14. In consultation with the partner agencies, provide a
 384 report on the Florida Kidcare program annually to the Governor,
 385 the Chief Financial Officer, the Commissioner of Education, the
 386 President of the Senate, the Speaker of the House of
 387 Representatives, and the Minority Leaders of the Senate and the
 388 House of Representatives.

389 15. Provide information on a quarterly basis to the
 390 Legislature and the Governor which compares the costs and
 391 utilization of the full-pay enrolled population and the Title
 392 XXI-subsidized enrolled population in the Florida Kidcare

393 program. ~~The information,~~ At a minimum, the information must
 394 include:

395 a. The monthly enrollment and expenditure for full-pay
 396 enrollees in the Medikids and Florida Healthy Kids programs
 397 compared to the Title XXI-subsidized enrolled population; and

398 b. The costs and utilization by service of the full-pay
 399 enrollees in the Medikids and Florida Healthy Kids programs and
 400 the Title XXI-subsidized enrolled population.

401
 402 By February 1, 2010, the Florida Healthy Kids Corporation shall
 403 provide a study to the Legislature and the Governor on premium
 404 impacts to the subsidized portion of the program from the
 405 inclusion of the full-pay program, which must ~~shall~~ include
 406 recommendations on how to eliminate or mitigate possible impacts
 407 to the subsidized premiums.

408 16. Establish benefit packages that conform to ~~the~~
 409 ~~provisions of~~ the Florida Kidcare program, as created in ss.
 410 409.810-409.821.

411 (6) BOARD OF DIRECTORS.—

412 (a) The Florida Healthy Kids Corporation is ~~shall operate~~
 413 subject to the supervision and approval of a board of directors
 414 chaired by the Chief Financial Officer or her or his designee,
 415 and composed of 12 ~~11~~ other members selected for 3-year terms of
 416 office as follows:

417 1. The Secretary of Health Care Administration, or his or
 418 her designee.

419 2. One member appointed by the Commissioner of Education
 420 from the Office of School Health Programs of the Florida

421 Department of Education.

422 3. One member appointed by the Chief Financial Officer
 423 from among three members nominated by the Florida Pediatric
 424 Society.

425 4. One member, appointed by the Governor, who represents
 426 the Children's Medical Services Program.

427 5. One member appointed by the Chief Financial Officer
 428 from among three members nominated by the Florida Hospital
 429 Association.

430 6. One member, appointed by the Governor, who is an expert
 431 on child health policy.

432 7. One member, appointed by the Chief Financial Officer,
 433 from among three members nominated by the Florida Academy of
 434 Family Physicians.

435 8. One member, appointed by the Governor, who represents
 436 the state Medicaid program.

437 9. One member, appointed by the Chief Financial Officer,
 438 from among three members nominated by the Florida Association of
 439 Counties.

440 10. The State Health Officer, or her or his designee.

441 11. The Secretary of Children and Family Services, or his
 442 or her designee.

443 12. One member, appointed by the Governor, from among
 444 three members nominated by the Florida Dental Association.

445 Section 7. Subject to appropriation, the Agency for Health
 446 Care Administration shall implement the federal Family
 447 Opportunity Act, ss. 6062-6071 of the Deficit Reduction Act of
 448 2005, to allow families whose income is up to 300 percent of the

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449 federal poverty level to buy Medicaid coverage for their
450 disabled children.

451 Section 8. This act shall take effect October 1, 2010.