

By Senator Storms

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1 A bill to be entitled
2 An act relating to telebehavioral health care
3 services; amending s. 409.906, F.S.; requiring that
4 the Agency for Health Care Administration implement
5 telebehavioral health care services by licensed mental
6 health professionals as authorized by the Centers for
7 Medicare and Medicaid Services for all community-based
8 behavioral health care services, except for those
9 services that require physical contact; requiring that
10 telebehavioral health care services be delivered by
11 certain persons from a location in this state;
12 requiring that the agency seek authorization from the
13 Centers for Medicare and Medicaid Services to allow
14 the delivery of telebehavioral health care services by
15 any person currently authorized by rule to deliver
16 such services; providing an effective date.

17
18 Be It Enacted by the Legislature of the State of Florida:

19
20 Section 1. Subsection (8) of section 409.906, Florida
21 Statutes, is amended to read:

22 409.906 Optional Medicaid services.—Subject to specific
23 appropriations, the agency may make payments for services which
24 are optional to the state under Title XIX of the Social Security
25 Act and are furnished by Medicaid providers to recipients who
26 are determined to be eligible on the dates on which the services
27 were provided. Any optional service that is provided shall be
28 provided only when medically necessary and in accordance with
29 state and federal law. Optional services rendered by providers

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30 in mobile units to Medicaid recipients may be restricted or
31 prohibited by the agency. Nothing in this section shall be
32 construed to prevent or limit the agency from adjusting fees,
33 reimbursement rates, lengths of stay, number of visits, or
34 number of services, or making any other adjustments necessary to
35 comply with the availability of moneys and any limitations or
36 directions provided for in the General Appropriations Act or
37 chapter 216. If necessary to safeguard the state's systems of
38 providing services to elderly and disabled persons and subject
39 to the notice and review provisions of s. 216.177, the Governor
40 may direct the Agency for Health Care Administration to amend
41 the Medicaid state plan to delete the optional Medicaid service
42 known as "Intermediate Care Facilities for the Developmentally
43 Disabled." Optional services may include:

44 (8) COMMUNITY MENTAL HEALTH SERVICES.-

45 (a) The agency may pay for rehabilitative services provided
46 to a recipient by a mental health or substance abuse provider
47 under contract with the agency or the Department of Children and
48 Family Services to provide such services. Those services that
49 ~~which~~ are psychiatric in nature shall be rendered or recommended
50 by a psychiatrist, and those services that ~~which~~ are medical in
51 nature shall be rendered or recommended by a physician or
52 psychiatrist. The agency shall ~~must~~ develop a provider
53 enrollment process for community mental health providers which
54 bases provider enrollment on an assessment of service need. The
55 provider enrollment process shall be designed to control costs,
56 prevent fraud and abuse, consider provider expertise and
57 capacity, and assess provider success in managing utilization of
58 care and measuring treatment outcomes. Providers will be

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59 selected through a competitive procurement or selective
60 contracting process. In addition to other community mental
61 health providers, the agency shall consider for enrollment
62 mental health programs licensed under chapter 395 and group
63 practices licensed under chapter 458, chapter 459, chapter 490,
64 or chapter 491. The agency may ~~is also authorized to~~ continue
65 operation of its behavioral health utilization management
66 program and may develop new services if these actions are
67 necessary to ensure savings from the implementation of the
68 utilization management system. The agency shall coordinate the
69 implementation of this enrollment process with the Department of
70 Children and Family Services and the Department of Juvenile
71 Justice. The agency may use ~~is authorized to utilize~~ diagnostic
72 criteria in setting reimbursement rates, to preauthorize certain
73 high-cost or highly utilized services, to limit or eliminate
74 coverage for certain services, or to make any other adjustments
75 necessary to comply with any limitations or directions provided
76 for in the General Appropriations Act.

77 (b) The agency may ~~is authorized to~~ implement reimbursement
78 and use management reforms in order to comply with any
79 limitations or directions in the General Appropriations Act,
80 which may include, but are not limited to, + prior authorization
81 of treatment and service plans, + prior authorization of
82 services, + enhanced use review programs for highly used
83 services, + and limits on services for those determined to be
84 abusing their benefit coverages.

85 (c) The agency shall implement telebehavioral health care
86 services by licensed mental health professionals as authorized
87 by the Centers for Medicare and Medicaid Services for all

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88 community-based behavioral health care services, except for
89 those services that require physical contact, such as physical
90 exams. Telebehavioral health care services must be delivered by
91 a person who provides the telebehavioral health services from a
92 location in this state. The agency shall also seek authorization
93 from the Centers for Medicare and Medicaid Services to allow the
94 delivery of telebehavioral health care services by any person
95 currently authorized by rule to deliver such services.

96 Section 2. This act shall take effect July 1, 2012.