

By Senator Flores

38-00911B-12

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2 A bill to be entitled

3 An act relating to Medicaid hospital rates; amending
4 s. 409.905, F.S.; revising the date for adjusting
5 hospital inpatient rates; providing an effective date.
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7 Be It Enacted by the Legislature of the State of Florida:
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9 Section 1. Paragraph (c) of subsection (5) of section
10 409.905, Florida Statutes, is amended to read:

11 409.905 Mandatory Medicaid services.—The agency may make
12 payments for the following services, which are required of the
13 state by Title XIX of the Social Security Act, furnished by
14 Medicaid providers to recipients who are determined to be
15 eligible on the dates on which the services were provided. Any
16 service under this section shall be provided only when medically
17 necessary and in accordance with state and federal law.

18 Mandatory services rendered by providers in mobile units to
19 Medicaid recipients may be restricted by the agency. Nothing in
20 this section shall be construed to prevent or limit the agency
21 from adjusting fees, reimbursement rates, lengths of stay,
22 number of visits, number of services, or any other adjustments
23 necessary to comply with the availability of moneys and any
24 limitations or directions provided for in the General
25 Appropriations Act or chapter 216.

26 (5) HOSPITAL INPATIENT SERVICES.—The agency shall pay for
27 all covered services provided for the medical care and treatment
28 of a recipient who is admitted as an inpatient by a licensed
29 physician or dentist to a hospital licensed under part I of

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30 chapter 395. However, the agency shall limit the payment for
31 inpatient hospital services for a Medicaid recipient 21 years of
32 age or older to 45 days or the number of days necessary to
33 comply with the General Appropriations Act.

34 (c) The agency shall implement a methodology for
35 establishing base reimbursement rates for each hospital based on
36 allowable costs, as defined by the agency. Rates shall be
37 calculated annually and take effect July 1 of each year based on
38 the most recent complete and accurate cost report submitted by
39 each hospital. Adjustments may not be made to the rates after
40 October 31 ~~September 30~~ of the state fiscal year in which the
41 rates take ~~rate takes~~ effect. Errors in cost reporting or
42 calculation of rates discovered after October 31 ~~September 30~~
43 must be reconciled in a subsequent rate period. The agency may
44 not make any adjustment to a hospital's reimbursement rate more
45 than 5 years after a hospital is notified of an audited rate
46 established by the agency. The requirement that the agency may
47 not make any adjustment to a hospital's reimbursement rate more
48 than 5 years after a hospital is notified of an audited rate
49 established by the agency is remedial and applies ~~shall apply~~ to
50 actions by providers involving Medicaid claims for hospital
51 services. Hospital rates are ~~shall be~~ subject to such limits or
52 ceilings as may be established in law or described in the
53 agency's hospital reimbursement plan. Specific exemptions to the
54 limits or ceilings may be provided in the General Appropriations
55 Act.

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