

By the Committee on Health Policy; and Senators Flores, Abruzzo, and Altman

588-03223-14

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1 A bill to be entitled
2 An act relating to mandatory medical payments for
3 pregnancy; amending s. 409.903, F.S.; revising
4 eligibility criteria for a pregnant woman or a child
5 under 1 year of age to qualify for medical assistance
6 and related services payments; providing an effective
7 date.

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

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11 Section 1. Section 409.903, Florida Statutes, is amended to
12 read:

13 409.903 Mandatory payments for eligible persons.—Subject to
14 the availability of moneys and any limitations established by
15 the General Appropriations Act or chapter 216, the agency shall
16 make payments for medical assistance and related services on
17 behalf of the following Medicaid eligible persons who the
18 department, or the Social Security Administration by contract
19 with the Department of Children and Families ~~Family Services~~,
20 determines to be eligible, subject to the income, assets, and
21 categorical eligibility tests set forth in federal and state
22 law. ~~Payment on behalf of these Medicaid eligible persons is~~
23 ~~subject to the availability of moneys and any limitations~~
24 ~~established by the General Appropriations Act or chapter 216.~~

25 (1) Low-income families with children are eligible for
26 Medicaid provided they meet the following requirements:

27 (a) The family includes a dependent child who is living
28 with a caretaker relative.

29 (b) The family's income does not exceed the gross income

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30 test limit.

31 (c) The family's countable income and resources do not
32 exceed the applicable Aid to Families with Dependent Children
33 (AFDC) income and resource standards under the AFDC state plan
34 in effect in July 1996, except as amended in the Medicaid state
35 plan to conform as closely as possible to the requirements of
36 the welfare transition program, to the extent permitted by
37 federal law.

38 (2) A person who receives payments from, who is determined
39 eligible for, or who was eligible for but lost cash benefits
40 from the federal program known as the Supplemental Security
41 Income program (SSI). This category includes a low-income person
42 age 65 or over and a low-income person under age 65 considered
43 to be permanently and totally disabled.

44 (3) A child under age 21 living in a low-income, two-parent
45 family, and a child under age 7 living with a nonrelative, if
46 the income and assets of the family or child, as applicable, do
47 not exceed the resource limits under the Temporary Cash
48 Assistance Program.

49 (4) A child who is eligible under Title IV-E of the Social
50 Security Act for subsidized board payments, foster care, or
51 adoption subsidies, and a child for whom the state has assumed
52 temporary or permanent responsibility and who does not qualify
53 for Title IV-E assistance but is in foster care, shelter or
54 emergency shelter care, or subsidized adoption. This category
55 includes a young adult who is eligible to receive services under
56 s. 409.1451, until the young adult reaches 21 years of age,
57 without regard to any income, resource, or categorical
58 eligibility test that is otherwise required. This category also

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59 includes a person who as a child was eligible under Title IV-E
60 of the Social Security Act for foster care or the state-provided
61 foster care and who is a participant in the Road-to-Independence
62 Program.

63 (5) A pregnant woman for the duration of her pregnancy and
64 for the postpartum period as defined in federal law and rule, or
65 a child under age 1, ~~if either is living in a family that has an~~
66 ~~income which is at or below 150 percent of the most current~~
67 ~~federal poverty level, or, effective January 1, 1992,~~ that has
68 an income which is at or below 200 ~~185~~ percent of the most
69 current federal poverty level. Such a person is not subject to
70 an assets test. Further, a pregnant woman who applies for
71 eligibility for the Medicaid program through a qualified
72 Medicaid provider must be offered the opportunity, subject to
73 federal rules, to be made presumptively eligible for the
74 Medicaid program.

75 (6) A child born after September 30, 1983, living in a
76 family that has an income which is at or below 100 percent of
77 the current federal poverty level, who has attained the age of
78 6, but has not attained the age of 19. In determining the
79 eligibility of such a child, an assets test is not required. A
80 child who is eligible for Medicaid under this subsection must be
81 offered the opportunity, subject to federal rules, to be made
82 presumptively eligible. A child who has been deemed
83 presumptively eligible for Medicaid shall not be enrolled in a
84 managed care plan until the child's full eligibility
85 determination for Medicaid has been completed.

86 (7) A child living in a family that has an income which is
87 at or below 133 percent of the current federal poverty level,

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88 who has attained the age of 1, but has not attained the age of
89 6. In determining the eligibility of such a child, an assets
90 test is not required. A child who is eligible for Medicaid under
91 this subsection must be offered the opportunity, subject to
92 federal rules, to be made presumptively eligible. A child who
93 has been deemed presumptively eligible for Medicaid shall not be
94 enrolled in a managed care plan until the child's full
95 eligibility determination for Medicaid has been completed.

96 (8) A person who is age 65 or over or is determined by the
97 agency to be disabled, whose income is at or below 100 percent
98 of the most current federal poverty level and whose assets do
99 not exceed limitations established by the agency. However, the
100 agency may only pay for premiums, coinsurance, and deductibles,
101 as required by federal law, unless additional coverage is
102 provided for any or all members of this group by s. 409.904(1).

103 Section 2. This act shall take effect July 1, 2014.