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LEGISLATIVE ACTION

Senate	.	House
Comm: UNFAV	.	
03/10/2015	.	
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The Committee on Health Policy (Braynon) recommended the following:

Senate Amendment

Delete lines 404 - 474

and insert:

as described in s. 409.966(2), by July 1, 2016.

(1) READINESS REVIEW.—Before implementation of any phase under this section, the agency shall conduct a readiness review in consultation with the FHIX Workgroup described in s. 409.729. The agency must determine that the region has satisfied, at a minimum, the following readiness milestones:



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11 (a) Functional readiness of the service delivery platform
12 for the phase.

13 (b) Plan availability and presence of plan choice.

14 (c) Provider network capacity and adequacy of the available
15 plans in the region.

16 (d) Availability of customer support.

17 (e) Other factors critical to the success of FHIIX.

18 (2) PHASE ONE.—

19 (a) Phase One begins on July 1, 2015. The agency, the
20 corporation, and the Florida Healthy Kids Corporation shall
21 coordinate activities to ensure that enrollment begins by July
22 1, 2015.

23 (b) To be eligible during this phase, a participant must
24 meet the requirements under s. 409.723(1) (a).

25 (c) An enrollee is entitled to receive health benefits
26 coverage in the same manner as provided under and through the
27 selected managed care plans in the Medicaid managed care program
28 in part IV of this chapter.

29 (d) An enrollee shall have a choice of at least two managed
30 care plans in each region.

31 (e) Choice counseling and customer service must be provided
32 in accordance with s. 409.724(2).

33 (3) PHASE TWO.—

34 (a) Beginning no later than July 1, 2016, and contingent
35 upon federal approval, participants may enroll or transition to
36 health benefits coverage under the FHIIX marketplace.

37 (b) To be eligible during this phase, a participant must
38 meet the requirements under s. 409.723(1) (a) and (b).

39 (c) An enrollee may select any benefit, service, or product



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40 available.

41 (d) The corporation shall notify an enrollee of his or her
42 premium credit amount and how to access the FHIIX marketplace
43 selection process.

44 (e) A Phase One enrollee must be transitioned to the FHIIX
45 marketplace by October 1, 2016. An enrollee who does not select
46 a plan or service on the FHIIX marketplace by that deadline shall
47 be moved to inactive status.

48 (f) An enrollee shall have a choice of at least two managed
49 care plans in each region which meet or exceed the Affordable
50 Care Act's requirements and which qualify for a premium credit
51 on the FHIIX marketplace.

52 (g) Choice counseling and customer service must be provided
53 in accordance with s. 409.724(2) and (4).

54 (4) PHASE THREE.—

55 (a) No later than January 1, 2017, the corporation and the
56 Florida Healthy Kids Corporation must begin the transition of
57 enrollees under s. 624.91 to the FHIIX marketplace.

58 (b) Eligibility during this phase is based on meeting the
59 requirements of Phase II and s. 409.723(1)(c).

60 (c) An enrollee may select any benefit, service, or product
61 available under s. 409.725.

62 (d) A Florida Healthy Kids enrollee who selects a FHIIX
63 marketplace plan must be provided a premium credit equivalent to
64 the average capitation rate paid in his or her county of
65 residence under Florida Healthy Kids as of December 31, 2016.
66 The enrollee is responsible for any difference in costs and may
67 use any remaining funds for supplemental benefits on the FHIIX
68 marketplace.



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69 (e) The corporation shall notify an enrollee of his or her
70 premium credit amount and how to access the FHIIX marketplace
71 selection process.

72 (f) Choice counseling and customer service must be provided
73 in accordance with s. 409.724(2) and (4).

74 (g) Enrollees under s. 624.91 must transition to the FHIIX
75 marketplace by March 31, 2017.