

Amendment No.

CHAMBER ACTION

Senate

House

.

1 Representative Brodeur offered the following:

2
3 **Substitute Amendment for Amendment (735629) (with title**
4 **amendment)**

5 Remove everything after the enacting clause and insert:

6 Section 1. Effective March 1, 2019, subsection (1) of
7 section 409.973, Florida Statutes, is amended to read:

8 409.973 Benefits.—

9 (1) MINIMUM BENEFITS.—Managed care plans shall cover, at a
10 minimum, the following services:

- 11 (a) Advanced registered nurse practitioner services.
- 12 (b) Ambulatory surgical treatment center services.
- 13 (c) Birthing center services.
- 14 (d) Chiropractic services.

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- 15 ~~(e) Dental services.~~
- 16 (e)~~(f)~~ Early periodic screening diagnosis and treatment
17 services for recipients under age 21.
- 18 (f)~~(g)~~ Emergency services.
- 19 (g)~~(h)~~ Family planning services and supplies. Pursuant to
20 42 C.F.R. s. 438.102, plans may elect to not provide these
21 services due to an objection on moral or religious grounds, and
22 must notify the agency of that election when submitting a reply
23 to an invitation to negotiate.
- 24 (h)~~(i)~~ Healthy start services, except as provided in s.
25 409.975(4).
- 26 (i)~~(j)~~ Hearing services.
- 27 (j)~~(k)~~ Home health agency services.
- 28 (k)~~(l)~~ Hospice services.
- 29 (l)~~(m)~~ Hospital inpatient services.
- 30 (m)~~(n)~~ Hospital outpatient services.
- 31 (n)~~(o)~~ Laboratory and imaging services.
- 32 (o)~~(p)~~ Medical supplies, equipment, prostheses, and
33 orthoses.
- 34 (p)~~(q)~~ Mental health services.
- 35 (q)~~(r)~~ Nursing care.
- 36 (r)~~(s)~~ Optical services and supplies.
- 37 (s)~~(t)~~ Optometrist services.
- 38 (t)~~(u)~~ Physical, occupational, respiratory, and speech
39 therapy services.

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40 (u)~~(v)~~ Physician services, including physician assistant
41 services.

42 (v)~~(w)~~ Podiatric services.

43 (w)~~(x)~~ Prescription drugs.

44 (x)~~(y)~~ Renal dialysis services.

45 (y)~~(z)~~ Respiratory equipment and supplies.

46 (z)~~(aa)~~ Rural health clinic services.

47 (aa)~~(bb)~~ Substance abuse treatment services.

48 (bb)~~(cc)~~ Transportation to access covered services.

49 Section 2. Subsection (5) is added to section 409.973,
50 Florida Statutes, to read:

51 409.973 Benefits.—

52 (5) PROVISION OF DENTAL SERVICES.—

53 (a) The Office of Program Policy and Government

54 Accountability shall provide a comprehensive report on the
55 provision of dental services to the President of the Senate and
56 the Speaker of the House of Representatives by December 1, 2016.

57 1. The report must examine the provision of dental
58 services by managed care plans participating in the managed
59 medical assistance program pursuant to part IV of chapter 409,
60 and by statewide and regional Medicaid prepaid dental health
61 plans and the non-managed care state plan program prior to the
62 implementation of the managed medical assistance program. The
63 report must document and compare each delivery model's
64 effectiveness at increasing patient access to dental care,
65 improving dental health, and achieving satisfactory outcomes for

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66 Medicaid recipients. In preparing the report, the Office of
67 Program Policy and Government Accountability must use comparable
68 measures applied to comparable data in 12-month data sets from
69 audited data sources. Additionally, the report must examine, by
70 plan and in the aggregate, the historical trends of dental
71 provider participation in plan networks.

72 2. The Legislature may use the findings of this report in
73 setting the scope of minimum benefits set forth in this section
74 for future procurements of eligible plans as described in s.
75 409.966. Specifically, the decision to include dental services
76 as a minimum benefit under this section, or to provide Medicaid
77 recipients with dental benefits separate from the Medicaid
78 managed medical assistance program described in this part, may
79 take into consideration the data and findings of the report.

80 (b) In the event the Legislature takes no action before
81 July 1, 2017, with respect to the report findings required under
82 subparagraph (a)2., the agency shall implement a statewide
83 Medicaid prepaid dental health program for children and adults
84 with a choice of at least two providers licensed under part I of
85 chapter 636 or part I of chapter 641 who must have substantial
86 experience in providing dental care to Medicaid enrollees and
87 children eligible for medical assistance under Title XXI of the
88 Social Security Act and who meet all agency standards and
89 requirements. The contracts for program providers shall be
90 awarded through a competitive procurement process. The contracts
91 must be for 5 years and may not be renewed; however, the agency

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92 may extend the term of a plan contract to cover delays during a
 93 transition to a new plan provider. The agency shall include in
 94 the contracts a medical loss ratio provision consistent with s.
 95 409.967(4). The agency is authorized to seek any necessary state
 96 plan amendment or federal waiver to commence enrollment in the
 97 Medicaid prepaid dental health program no later than March 1,
 98 2019. This paragraph expires July 1, 2017.

99 Section 3. Except as otherwise expressly provided in this
 100 act, this act shall take effect July 1, 2016.

101

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103 **T I T L E A M E N D M E N T**

104 Remove everything before the enacting clause and insert:

105 A bill to be entitled

106 An act relating to the sunset review of Medicaid
 107 Dental Services; amending s. 409.973, F.S.; providing
 108 for the future removal of dental services as a minimum
 109 benefit of managed care plans; requiring the Office of
 110 Program Policy Analysis and Government Accountability
 111 to provide a report to the Legislature; specifying
 112 requirements for the report; providing for use of the
 113 report's findings; requiring the Agency for Health
 114 Care Administration to implement a statewide Medicaid
 115 prepaid dental health program upon the occurrence of
 116 certain conditions; specifying requirements for the
 117 program and the selection of providers; providing for

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118 | expiration of such requirements at a specified date;
119 | providing effective dates.

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