By Senator Baxley

	12-01151A-19 2019778
1	A bill to be entitled
2	An act relating to the Program of All-Inclusive Care
3	for the Elderly; creating s. 430.84, F.S.; defining
4	terms; authorizing the Agency for Health Care
5	Administration, in consultation with the Department of
6	Elderly Affairs, to approve entities applying to
7	deliver Program of All-Inclusive Care for the Elderly
8	(PACE) services in the state; requiring the agency, in
9	consultation with the department, to review and
10	consider applications; requiring that notice of such
11	applications be published in the Florida
12	Administrative Register; specifying application
13	requirements; requiring prospective PACE organizations
14	that are granted initial state approval to submit a
15	complete application to the agency and the Federal
16	Government within a certain timeframe; specifying
17	funding and enrollment requirements for PACE
18	organizations; requiring the agency, in consultation
19	with the department and the Social Services Estimating
20	Conference, to submit a certain report to the
21	Legislature; requiring the agency and department to
22	provide certain notices to certain individuals;
23	requiring PACE organizations to meet certain
24	standards; requiring the agency to oversee and monitor
25	the PACE program based on certain information;
26	exempting PACE organizations from ch. 641, F.S.;
27	amending s. 409.981, F.S.; conforming a provision to
28	changes made by the act; providing that specified
29	individuals may be enrolled in the PACE program under

Page 1 of 6

	12-01151A-19 2019778
30	certain circumstances; requiring the Comprehensive
31	Assessment and Review for Long-Term Care Services
32	program to determine a PACE applicant's eligibility
33	within a certain timeframe; requiring the Department
34	of Children and Families to determine a PACE
35	applicant's financial eligibility; specifying
36	requirements for the agency in paying contractors
37	providing services to eligible applicants; authorizing
38	certain actions by a contractor with respect to
39	certain applicants; providing an effective date.
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41	Be It Enacted by the Legislature of the State of Florida:
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43	Section 1. Section 430.84, Florida Statutes, is created to
44	read:
45	430.84 Program of All-Inclusive Care for the Elderly
46	(1) DEFINITIONSAs used in this section, the term:
47	(a) "Agency" means the Agency for Health Care
48	Administration.
49	(b) "Applicant" means an entity that has filed an
50	application with the agency for consideration as a Program of
51	All-Inclusive Care for the Elderly (PACE) organization.
52	(c) "CMS" means the Centers for Medicare and Medicaid
53	Services within the United States Department of Health and Human
54	Services.
55	(d) "Department" means the Department of Elderly Affairs.
56	(e) "PACE organization" means an entity under contract with
57	the agency to deliver PACE services.
58	(f) "Participant" means an individual receiving PACE
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Page 2 of 6

	12-01151A-19 2019778
59	services who the department has determined needs the level of
60	care required under the state Medicaid plan for coverage of
61	nursing facility services.
62	(2) PROGRAM CREATIONThe agency, in consultation with the
63	department, may approve entities that have submitted the
64	application the CMS requires to the agency for review and
65	consideration. An entity must submit the data and information
66	required in subsection (3) to provide benefits pursuant to the
67	PACE program as established in 42 U.S.C. s. 1395eee and in
68	accordance with the requirements set forth in this section.
69	(3) PACE ORGANIZATION SELECTION The agency, in
70	consultation with the department, shall review and consider on a
71	continuous basis applications the CMS requires for PACE which
72	have been submitted to the agency by entities seeking initial
73	state approval to become PACE organizations. Notice of such
74	applications must be published in the Florida Administrative
75	Register.
76	(a) A prospective PACE organization shall submit
77	application documents to the agency before requesting program
78	funding. Application documents submitted to and reviewed by the
79	agency, in consultation with the department, must include all of
80	the following:
81	1. Evidence that the applicant is able to meet all of the
82	applicable federal regulations and requirements established by
83	the CMS for participation as a PACE organization by the proposed
84	implementation date.
85	2. Market studies, including an estimate of the number of
86	potential participants and the geographic service area the
87	applicant proposes to serve.

Page 3 of 6

	12-01151A-19 2019778
88	3. A business plan of operation, including pro forma
89	financial statements and projections, based on the proposed
90	implementation date.
91	(b) Each applicant must propose to serve a unique and
92	defined geographic service area without duplication of services
93	or target populations. No more than one PACE organization may be
94	authorized to provide services within any unique and defined
95	geographic service area.
96	(c) An existing PACE organization seeking authority to
97	serve an additional geographic service area not previously
98	authorized by the agency or Legislature must meet the
99	requirements set forth in paragraphs (a) and (b).
100	(d) A prospective PACE organization granted initial state
101	approval by the agency, in consultation with the department,
102	shall submit its complete federal PACE application, in
103	accordance with the application process and guidelines
104	established by the CMS, to the agency and the CMS within 12
105	months after the date of initial state approval, or such
106	approval is void.
107	(4) FUNDING AND ENROLLMENT
108	(a) PACE organizations shall enroll participants at such
109	levels as funded by the General Appropriations Act, which must
110	reflect a reasonable growth of capacity sufficient to meet
111	community needs and which must be consistent with the pro forma
112	or other projections submitted pursuant to paragraph (3)(a) or
113	projections of PACE census and demand growth that are
114	periodically submitted by PACE organizations. The agency, in
115	consultation with the department and the Social Services
116	Estimating Conference, shall submit a report to the Legislature

Page 4 of 6

	12-01151A-19 2019778
117	requesting the amount of funding necessary for prospective PACE
118	participants to have access to PACE services as a program
119	service option in all authorized geographic service areas.
120	(b) Funds may be used within any PACE organization's
121	authorized geographic service area, regardless of county lines.
122	(c) The department shall notify individuals who are
123	determined to need the level of care required under the state
124	Medicaid plan for coverage of nursing facility services that the
125	PACE program is a service plan option and that enrollment in the
126	PACE program is voluntary.
127	(d) The agency shall notify individuals who are determined
128	eligible for managed long-term care that the PACE program is
129	available as a choice for a managed care plan pursuant to s.
130	409.969 in statewide Medicaid managed care regions wherein a
131	PACE organization operates.
132	(5) ACCOUNTABILITYAll PACE organizations must meet
133	specific quality and performance standards established by the
134	CMS for the PACE program. The agency shall oversee and monitor
135	the PACE program and organizations based upon data and reports
136	PACE organizations submit periodically to the agency and the
137	CMS. A PACE organization is exempt from the requirements of
138	chapter 641.
139	Section 2. Subsection (4) of section 409.981, Florida
140	Statutes, is amended to read:
141	409.981 Eligible long-term care plans
142	(4) PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY
143	(a) Participation by the Program of All-inclusive Care for
144	the Elderly (PACE) shall be pursuant to a contract with the
145	agency and not subject to the procurement requirements or
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Page 5 of 6

CODING: Words stricken are deletions; words underlined are additions.

SB 778

146regional plan number limits of this section. PACE organizations147shall plans may continue to provide services to participants148individuals at such levels and enrollment caps as authorized by149the General Appropriations Act pursuant to s. 430.84.150(b) A prospective participant who applies for the PACE151program and has been determined by the Comprehensive Assessment152and Review for Long-Term Care Services (CARES) program to be153medically eligible but has not been determined financially154eligible for Medicaid by the Department of Children and155Families, or who has been determined financially eligible for156Medicaid by the Department of Children and Families but has not157been determined medically eligible by the CARES program, may be158enrolled in the PACE program if contractors elect to provide159services to PACE program applicants pending final determination160of eligibility. The CARES program shall determine each161applicant's medical eligibility within 21 days after receiving162the complete application packet. The Department of Children and163Families shall determine each applicant's financial eligibility164according to federal and state requirements. If the applicant is165determined eligible, the Agency for Health Care Administration166shall pay the contractor that provided the services the167applicable Medicaid rate, retroactive to the first day of the
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168 month following the CARES program eligibility determination. If
169 the applicant is not eligible for the PACE program with Medicaid
170 as the payor, the contractor may continue to provide services as
171 <u>a private-pay PACE participant or terminate services and seek</u>
172 reimbursement from the applicant.
173 Section 3. This act shall take effect July 1, 2019.

Page 6 of 6