${\bf By}$ Senator Rodriguez

| | 39-00678-21 2021348 |
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| 1 | A bill to be entitled |
| 2 | An act relating to Medicaid; amending s. 409.908, |
| 3 | F.S.; revising the types of emergency transportation |
| 4 | vehicle services provided to Medicare-eligible persons |
| 5 | for which Medicaid shall pay deductibles and |
| 6 | coinsurance; providing an effective date. |
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| 8 | Be It Enacted by the Legislature of the State of Florida: |
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| 10 | Section 1. Paragraph (c) of subsection (13) of section |
| 11 | 409.908, Florida Statutes, is amended to read: |
| 12 | 409.908 Reimbursement of Medicaid providersSubject to |
| 13 | specific appropriations, the agency shall reimburse Medicaid |
| 14 | providers, in accordance with state and federal law, according |
| 15 | to methodologies set forth in the rules of the agency and in |
| 16 | policy manuals and handbooks incorporated by reference therein. |
| 17 | These methodologies may include fee schedules, reimbursement |
| 18 | methods based on cost reporting, negotiated fees, competitive |
| 19 | bidding pursuant to s. 287.057, and other mechanisms the agency |
| 20 | considers efficient and effective for purchasing services or |
| 21 | goods on behalf of recipients. If a provider is reimbursed based |
| 22 | on cost reporting and submits a cost report late and that cost |
| 23 | report would have been used to set a lower reimbursement rate |
| 24 | for a rate semester, then the provider's rate for that semester |
| 25 | shall be retroactively calculated using the new cost report, and |
| 26 | full payment at the recalculated rate shall be effected |
| 27 | retroactively. Medicare-granted extensions for filing cost |
| 28 | reports, if applicable, shall also apply to Medicaid cost |
| 29 | reports. Payment for Medicaid compensable services made on |

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39-00678-21 2021348 30 behalf of Medicaid eligible persons is subject to the 31 availability of moneys and any limitations or directions 32 provided for in the General Appropriations Act or chapter 216. Further, nothing in this section shall be construed to prevent 33 34 or limit the agency from adjusting fees, reimbursement rates, 35 lengths of stay, number of visits, or number of services, or 36 making any other adjustments necessary to comply with the 37 availability of moneys and any limitations or directions provided for in the General Appropriations Act, provided the 38 39 adjustment is consistent with legislative intent.

40 (13) Medicare premiums for persons eligible for both 41 Medicare and Medicaid coverage shall be paid at the rates 42 established by Title XVIII of the Social Security Act. For Medicare services rendered to Medicaid-eligible persons, 43 44 Medicaid shall pay Medicare deductibles and coinsurance as 45 follows:

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(c) Notwithstanding paragraphs (a) and (b):

47 1. Medicaid payments for Nursing Home Medicare part A coinsurance are limited to the Medicaid nursing home per diem 48 49 rate less any amounts paid by Medicare, but only up to the 50 amount of Medicare coinsurance. The Medicaid per diem rate shall 51 be the rate in effect for the dates of service of the crossover 52 claims and may not be subsequently adjusted due to subsequent 53 per diem rate adjustments.

54 2. Medicaid shall pay all deductibles and coinsurance for Medicare-eligible recipients receiving freestanding end stage 55 56 renal dialysis center services.

57 3. Medicaid payments for general and specialty hospital inpatient services are limited to the Medicare deductible and 58

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| 59 | coinsurance per spell of illness. Medicaid payments for hospital |
| 60 | Medicare Part A coinsurance shall be limited to the Medicaid |
| 61 | hospital per diem rate less any amounts paid by Medicare, but |
| 62 | only up to the amount of Medicare coinsurance. Medicaid payments |
| 63 | for coinsurance shall be limited to the Medicaid per diem rate |
| 64 | in effect for the dates of service of the crossover claims and |
| 65 | may not be subsequently adjusted due to subsequent per diem |
| 66 | adjustments. |
| 67 | 4. Medicaid shall pay all deductibles and coinsurance for |
| 68 | Medicare-eligible recipients receiving Medicare emergency |
| 69 | transportation services provided by ambulances or emergency |
| 70 | medical services vehicles as defined by s. 401.23(5) licensed |
| 71 | pursuant to chapter 401. |
| 72 | 5. Medicaid shall pay all deductibles and coinsurance for |
| 73 | portable X-ray Medicare Part B services provided in a nursing |
| 74 | home, in an assisted living facility, or in the patient's home. |
| 75 | Section 2. This act shall take effect July 1, 2021. |
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