HB 461

1	A bill to be entitled
2	An act relating to Medicare transportation services;
3	amending s. 409.908, F.S.; revising a requirement that
4	Medicaid pay deductibles and coinsurance for certain
5	Medicare services provided to certain eligible
6	persons; providing an effective date.
7	
8	Be It Enacted by the Legislature of the State of Florida:
9	
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
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26 full payment at the recalculated rate shall be effected 27 retroactively. Medicare-granted extensions for filing cost reports, if applicable, shall also apply to Medicaid cost 28 29 reports. Payment for Medicaid compensable services made on 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. 33 Further, nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, 34 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 38 provided for in the General Appropriations Act, provided the 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 43 Medicare services rendered to Medicaid-eligible persons, 44 Medicaid shall pay Medicare deductibles and coinsurance as 45 follows:

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

1. Medicaid payments for Nursing Home Medicare part A coinsurance are limited to the Medicaid nursing home per diem rate less any amounts paid by Medicare, but only up to the amount of Medicare coinsurance. The Medicaid per diem rate shall

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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
55 Medicare-eligible recipients receiving freestanding end stage
56 renal dialysis center services.

57 3. Medicaid payments for general and specialty hospital 58 inpatient services are limited to the Medicare deductible and 59 coinsurance per spell of illness. Medicaid payments for hospital Medicare Part A coinsurance shall be limited to the Medicaid 60 hospital per diem rate less any amounts paid by Medicare, but 61 62 only up to the amount of Medicare coinsurance. Medicaid payments for coinsurance shall be limited to the Medicaid per diem rate 63 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.

4. Medicaid shall pay all deductibles and coinsurance for
Medicare emergency transportation services provided by <u>an</u>
<u>ambulance or emergency medical services vehicle as defined in s.</u>
401.23 <u>ambulances licensed pursuant to chapter 401</u>.

5. Medicaid shall pay all deductibles and coinsurance for portable X-ray Medicare Part B services provided in a nursing home, in an assisted living facility, or in the patient's home. Section 2. This act shall take effect July 1, 2021.

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