

Amendment No.

CHAMBER ACTION

Senate

House

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Representative Learned offered the following:

Amendment (with title amendment)

Between lines 79 and 80, insert:

Section 1. Subsection (9) of section 409.908, Florida Statutes, is amended, and subsection (27) is added to that section, to read:

409.908 Reimbursement of Medicaid providers.—Subject to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by reference therein. These methodologies may include fee schedules, reimbursement

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14 methods based on cost reporting, negotiated fees, competitive
15 bidding pursuant to s. 287.057, and other mechanisms the agency
16 considers efficient and effective for purchasing services or
17 goods on behalf of recipients. If a provider is reimbursed based
18 on cost reporting and submits a cost report late and that cost
19 report would have been used to set a lower reimbursement rate
20 for a rate semester, then the provider's rate for that semester
21 shall be retroactively calculated using the new cost report, and
22 full payment at the recalculated rate shall be effected
23 retroactively. Medicare-granted extensions for filing cost
24 reports, if applicable, shall also apply to Medicaid cost
25 reports. Payment for Medicaid compensable services made on
26 behalf of Medicaid-eligible persons is subject to the
27 availability of moneys and any limitations or directions
28 provided for in the General Appropriations Act or chapter 216.
29 Further, nothing in this section shall be construed to prevent
30 or limit the agency from adjusting fees, reimbursement rates,
31 lengths of stay, number of visits, or number of services, or
32 making any other adjustments necessary to comply with the
33 availability of moneys and any limitations or directions
34 provided for in the General Appropriations Act, provided the
35 adjustment is consistent with legislative intent.

36 (9) A provider of home health care services or of medical
37 supplies and appliances shall be reimbursed on the basis of
38 competitive bidding or for the lesser of the amount billed by

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39 the provider or the agency's established maximum allowable
 40 amount, except that, in the case of the rental or purchase of
 41 durable medical equipment and complex rehabilitation technology,
 42 the provider, including veteran providers, must be reimbursed by
 43 the agency, managed care plans, and any subcontractors at an
 44 amount equal to 100 percent of, ~~the total rental payments may~~
 45 ~~not exceed the purchase price of the equipment over its expected~~
 46 ~~useful life or~~ the agency's established maximum allowable
 47 amount, ~~whichever amount is less.~~ Any agency cost increase must
 48 be accounted for in the managed care rate setting process.

49 (27) Any provider of mental health care for veterans must
 50 be reimbursed by the agency, managed care plans, and any
 51 subcontractors at an amount equal to 100 percent of the agency's
 52 established maximum allowable amount.

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

56 Remove line 3 and insert:
 57 program; amending s. 409.908, F.S.; requiring that the
 58 rental and purchase of durable medical equipment and
 59 complex rehabilitation technology and providers of
 60 mental health care for veterans be reimbursed by the
 61 Agency for Health Care Administration, managed care
 62 plans, and subcontractors at a specified amount;
 63 amending s. 409.912, F.S.; requiring, rather

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