

The Florida Senate
HOUSE MESSAGE SUMMARY

Prepared By: The Professional Staff of the Committee on Health Policy

[2022s01950.hms.hp]

BILL: CS/CS/SB 1950 1st Engrossed

INTRODUCER: Appropriations Committee; Health Policy Committee and Senator Brodeur

SUBJECT: Statewide Medicaid Managed Care Program

DATE: March 7, 2022

I. Amendments Contained in Message:

House Amendment – 739505 (body with title)

II. Summary of Amendments Contained in Message:

House Amendment 739505 is a strike-all that replaces the contents of the Senate bill with those of CS/HB 7047, along with several minor revisions in the House bill language. The House amendment revises the Statewide Medicaid Managed Care (SMMC) program in anticipation of the next procurement cycle, for plan year 2025, while making other changes to the program that take effect in State Fiscal Year 2022-23. The amendment:

- Consolidates the current 11 regions into eight and adjusts the minimum and maximum numbers of plans with which the Agency for Health Care Administration (AHCA) is directed to contract;
- Creates requirements concerning the delivery of dental benefits;
- Requires the AHCA to conduct a single statewide SMMC procurement, requires negotiation and selection on a regional basis, and authorizes statewide contract awards if deemed the best value for the state;
- Prohibits the AHCA from auto-assigning recipients to a health plan having a regional market share greater than 50 percent;
- Realigns Regional Perinatal Intensive Care Centers from statewide to regional essential providers;
- Requires the AHCA to identify health plans that lack required contracts with essential providers and apply contract financial enforcement measures on the plan in certain circumstances and requires such a plan and the essential provider to enter into mediation to seek a network contract;
- Establishes requirements and timelines for such required mediations and the publishing of the post-mediation report;
- Allows health plans that fail to meet medical loss ratio (MLR) targets to make contributions in support of specified types of medical education and have the dollar amount of those contributions count as Medicaid medical expenses when MLRs and Achieved Savings Rebates are calculated;
- Includes all tobacco cessation, instead of smoking cessation, in the "healthy behaviors" efforts that health plans are required to implement;

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- Requires health plans to include opioid abuse recovery in alcohol and substance abuse recovery as part of the "healthy behaviors" efforts;
 - Requires health plans to contract with Florida's nationally-designated cancer hospitals as statewide essential providers and provides a payment rate for services provided out-of-network;
 - Allows children in the child welfare Guardian Assistance Program to enroll in the child welfare specialty plan as an alternative to a non-specialty plan;
 - Requires regular AHCA testing of plan network adequacy;
 - Provides times for the AHCA to implement specific provisions of the amendment; and
 - Deletes obsolete provisions and makes conforming changes to reflect the amendment's provisions.