

By Senator Trumbull

2-01342A-23

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1 A bill to be entitled
2 An act relating to the long-term managed care program;
3 amending s. 409.981, F.S.; requiring the Agency for
4 Health Care Administration to select, through a
5 specified procurement process, a qualified long-term
6 care plan to implement a pilot program in Miami-Dade
7 County to provide coverage of comprehensive services
8 for Medicaid recipients who have developmental
9 disabilities; providing requirements for the pilot
10 program and the selected qualified plan; requiring the
11 agency to contract for an independent evaluation of
12 the performance of the plan; providing requirements
13 for the evaluation; requiring the agency to submit the
14 results of the evaluation to the Legislature by a
15 specified date; providing an effective date.

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17 Be It Enacted by the Legislature of the State of Florida:

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19 Section 1. Subsection (6) is added to section 409.981,
20 Florida Statutes, to read:

21 409.981 Eligible long-term care plans.—

22 (6) INTEGRATED PLAN FOR PERSONS WITH DEVELOPMENTAL
23 DISABILITIES.—The agency shall select, pursuant to s.
24 287.057(1)(c), a single qualified plan to implement a pilot
25 program in Miami-Dade County which provides coverage of
26 comprehensive services for Medicaid recipients as defined in s.
27 409.962 who have a developmental disability as defined in s.
28 393.063.

29 (a) Comprehensive coverage includes benefits described in

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30 s. 409.973, community-based services described in s. 393.066(3),
31 and long-term care plan benefits described in s. 409.98.

32 (b) Participation in the pilot program is voluntary and
33 limited to the maximum number of enrollees specified in the
34 General Appropriations Act. Potential participants will be
35 selected from individuals on the waitlist for iBudget waiver
36 services.

37 (c) The selected plan shall be paid a risk-adjusted
38 capitation rate.

39 (d) A qualified plan must be a provider service network as
40 defined in s. 409.962, the owners of which include licensed
41 health care providers with experience serving iBudget clients.

42 (e) The selected plan must provide all categories of
43 benefits through a single, integrated model of care.

44 (f) The selected plan must document revenues and
45 expenditures related to the pilot program and submit periodic
46 financial reports to the agency. Pretax income may be subject to
47 the income sharing ratios established in s. 409.967(3)(f).

48 (g) Services must be provided to enrollees in accordance
49 with an individualized care plan that is evaluated and updated
50 at least quarterly or as warranted by changes in an enrollee's
51 circumstances.

52 (h) The agency shall contract for an independent evaluation
53 of the performance of the integrated plan based on specific
54 measures of access, quality, and cost. The agency shall submit
55 the results of the evaluation to the President of the Senate and
56 the Speaker of the House of Representatives by October 1, 2024.

57 Section 2. This act shall take effect upon becoming a law.