

1 A bill to be entitled
2 An act implementing the 2001-2002 General
3 Appropriations Act; providing legislative
4 intent; providing for allocation of moneys
5 provided for workforce development and
6 providing for budget amendment when a program
7 is moved; requiring the Agency for Health Care
8 Administration to use a specified
9 disproportionate share formula, specified
10 audited financial data, and a specified
11 Medicaid per diem rate in fiscal year 2001-2002
12 for qualifying hospitals; amending s. 409.9116,
13 F.S.; providing a formula for rural hospital
14 disproportionate share payments; amending s.
15 216.181, F.S.; authorizing the Department of
16 Children and Family Services and the Department
17 of Health to advance certain moneys for certain
18 contract services; directing the Agency for
19 Health Care Administration to include health
20 maintenance organization recipients in the
21 county billing for a specified purpose;
22 amending s. 409.905, F.S.; prescribing
23 conditions upon which an adjustment in a
24 hospital's inpatient per diem rate may be
25 based; amending s. 216.177, F.S.; providing
26 notice requirements for the Department of
27 Children and Family Services with respect to
28 transferring portions of district budgets;
29 amending s. 409.915, F.S.; exempting counties
30 from contributing toward the increased cost of
31 hospital inpatient services due to elimination

1 of Medicaid ceilings on certain types of
2 hospitals and for special Medicaid
3 reimbursements to hospitals; revising the level
4 of county participation; prohibiting the Agency
5 for Health Care Administration from adjusting
6 premiums paid to health maintenance
7 organizations or prepaid health care plans due
8 to elimination of Medicaid ceilings on certain
9 types of hospitals and special Medicaid
10 payments to hospitals; amending s. 409.904,
11 F.S.; revising eligibility requirements for
12 certain medical assistance payments; amending
13 s. 409.905, F.S.; prescribing additional
14 limitations that may be placed on hospital
15 inpatient services under Medicaid; amending s.
16 409.906, F.S.; revising standards for payable
17 intermediate care services; amending s.
18 409.908, F.S.; revising standards, guidelines,
19 and limitations relating to reimbursement of
20 Medicaid providers; amending s. 409.91195,
21 F.S.; providing for a restricted drug formulary
22 applicable to Medicaid providers; amending s.
23 409.912, F.S.; prescribing additional services
24 that the Agency for Health Care Administration
25 may provide through competitive bidding;
26 authorizing the agency to establish, and make
27 exceptions to, a restricted drug formulary;
28 amending s. 409.904, F.S.; providing additional
29 limitations on services that may be furnished
30 to medically needy patients; amending s.
31 409.913, F.S.; requiring the Agency for Health

Care Administration to implement a pilot program to prevent Medicaid fraud and abuse with respect to pharmaceuticals; amending s. 409.906, F.S.; providing for reimbursement and use-management reforms with respect to community mental health services; amending s. 409.912, F.S.; authorizing the agency to contract with children's clinic networks for certain purposes; amending s. 409.9122, F.S.; providing for disproportionate assignment of certain Medicaid-eligible children to children's clinic networks; providing for the assignment of certain Medicaid recipients to managed care plans; amending s. 409.904, F.S.; providing for the Agency for Health Care Administration to pay for specified cancer treatment; amending s. 39.3065, F.S.; prescribing responsibility of the Seminole County Sheriff with respect to child protective investigations; amending s. 414.045, F.S.; revising reporting requirements with respect to the cash assistance program; providing legislative intent and directives with respect to community-based care initiatives; requiring the availability of certain funds for the temporary assistance for needy families program; authorizing a transfer of funds between the Department of Children and Family Services and the Department of Juvenile Justice relating to transfer of staff between the departments; amending s. 925.037, F.S.;

1 providing that the state courts system shall
2 allocate conflict counsel funds among certain
3 counties; amending s. 25.402, F.S.; revising
4 membership of the County Article V Trust Fund
5 advisory committee; revising uses of the fund;
6 amending s. 216.262, F.S.; providing for
7 additional positions to operate additional
8 prison bed capacity under certain
9 circumstances; amending ss. 938.01, 943.25,
10 F.S.; providing for deposit of certain funds
11 for use by the Department of Law Enforcement,
12 rather than the Department of Community
13 Affairs; providing for future reversion to
14 current text; transferring the Criminal Justice
15 Program from the Department of Community
16 Affairs to the Department of Law Enforcement;
17 transferring the Prevention of Domestic and
18 Sexual Violence Program from the Department of
19 Community Affairs to the Department of Children
20 and Family Services; providing matching funds
21 for the administration of such program;
22 directing Enterprise Florida, Inc., to operate
23 sister-city and sister-state programs according
24 to specified standards; authorizing Enterprise
25 Florida, Inc., to contract for the
26 implementation of Florida's international
27 volunteer corps; authorizing the Department of
28 Community Affairs to use specified methods to
29 issue notices of intent; amending s. 287.161,
30 F.S.; requiring the Department of Management
31 Services to charge all persons receiving

1 transportation from the executive aircraft pool
2 a specified rate; providing for deposit and use
3 of such fees; amending s. 403.709, F.S.;
4 providing for use of moneys allocated to the
5 Solid Waste Management Trust Fund; amending s.
6 403.7095, F.S., relating to the solid waste
7 management grant program; requiring a specified
8 level of funding for counties receiving solid
9 waste management and recycling grants; amending
10 s. 373.59, F.S.; requiring release of certain
11 moneys by the Secretary of Environmental
12 Protection to water management districts, upon
13 request; amending s. 252.373, F.S.; authorizing
14 the use of certain funds to improve local
15 disaster preparedness; amending s. 110.12315,
16 F.S.; providing copayment requirements for the
17 state employees' prescription drug program;
18 providing for a preferred brand name drug list
19 to be used in the administration of such
20 program; amending s. 110.1239, F.S.; providing
21 requirements for the funding of the state group
22 health insurance program; providing for future
23 repeal of various provisions; providing effect
24 of veto of specific appropriation or proviso to
25 which implementing language refers; providing
26 applicability to other legislation;
27 incorporating by reference specified
28 performance measures and standards directly
29 linked to the appropriations made in the
30 2001-2002 General Appropriations Act, as
31 required by the Government Performance and

Accountability Act of 1994; providing
severability; providing an effective date.

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

Section 1. It is the intent of the Legislature that the implementing and administering provisions of this act apply to the General Appropriations Act for fiscal year 2001-2002.

Section 2. In order to implement Specific Appropriation _____ of the 2001-2002 General Appropriations Act, the funds provided for workforce development shall be initially allocated to the school district or community college as designated. If, for any reason, a program in whole or in part is moved from a community college to a school district or moved from a school district to a community college, the Commissioner of Education or the Executive Director of the Division of Community Colleges shall submit a budget amendment pursuant to chapter 216, Florida Statutes, to transfer the appropriate amount of the 2001-2002 appropriation between the affected district and community college. The amount transferred shall be as near as practicable to the actual amount appropriated for the FTE funded for that program. This section expires July 1, 2002.

Section 3. In order to implement Specific Appropriation ____ of the 2001-2002 General Appropriations Act, and for the 2001-2002 fiscal year only, the Agency for Health Care Administration shall use the 1992-1993 disproportionate share formula, the 1994 audited financial data, and the Medicaid per diem rate as of January 1, 1999, for those hospitals that qualify for the hospital disproportionate share

1 program funded in that specific appropriation. This section
2 expires July 1, 2002.

3 Section 4. In order to implement Specific
4 Appropriation ____ of the 2001-2002 General Appropriations Act,
5 subsection (6) of section 409.9116, Florida Statutes, is
6 amended to read:

7 409.9116 Disproportionate share/financial assistance
8 program for rural hospitals.--In addition to the payments made
9 under s. 409.911, the Agency for Health Care Administration
10 shall administer a federally matched disproportionate share
11 program and a state-funded financial assistance program for
12 statutory rural hospitals. The agency shall make
13 disproportionate share payments to statutory rural hospitals
14 that qualify for such payments and financial assistance
15 payments to statutory rural hospitals that do not qualify for
16 disproportionate share payments. The disproportionate share
17 program payments shall be limited by and conform with federal
18 requirements. Funds shall be distributed quarterly in each
19 fiscal year for which an appropriation is made.

20 Notwithstanding the provisions of s. 409.915, counties are
21 exempt from contributing toward the cost of this special
22 reimbursement for hospitals serving a disproportionate share
23 of low-income patients.

24 (6) For the 2001-2002 ~~2000-2001~~ fiscal year only, the
25 Agency for Health Care Administration shall use the following
26 formula for distribution of the funds in Specific
27 Appropriation ____ ~~212~~ of the 2001-2002 ~~2000-2001~~ General
28 Appropriations Act for the disproportionate share/financial
29 assistance program for rural hospitals.

(a) The agency shall first determine a preliminary payment amount for each rural hospital by allocating all available state funds using the following formula:

$$\text{PDAER} = (\text{TAERH} \times \text{TARH}) / \text{STAERH}$$

Where:

PDAER = preliminary distribution amount for each rural hospital.

TAERH = total amount earned by each rural hospital.

TARH = total amount appropriated or distributed under this section.

STAERH = sum of total amount earned by each rural hospital.

(b) Federal matching funds for the disproportionate share program shall then be calculated for those hospitals that qualify for disproportionate share in paragraph (a).

(c) The state-funds-only payment amount is then calculated for each hospital using the formula:

$$\text{SFOER} = \text{Maximum value of (1) SFOL} - \text{PDAER or (2) 0}$$

Where:

SFOER = state-funds-only payment amount for each rural hospital.

SFOL = state-funds-only payment level, which is set at 4 percent of TARH.

(d) The adjusted total amount allocated to the rural disproportionate share program shall then be calculated using the following formula:

$$\text{ATARH} = (\text{TARH} - \text{SSFOER})$$

Where:

ATARH = adjusted total amount appropriated or distributed under this section.

SSFOER = sum of the state-funds-only payment amount calculated under paragraph (c) for all rural hospitals.

(e) The determination of the amount of rural disproportionate share hospital funds is calculated by the following formula:

$$\text{TDAERH} = [(\text{TAERH} \times \text{ATARH}) / \text{STAERH}]$$

Where:

TDAERH = total distribution amount for each rural hospital.

(f) Federal matching funds for the disproportionate share program shall then be calculated for those hospitals that qualify for disproportionate share in paragraph (e).

(g) State-funds-only payment amounts calculated under paragraph (c) are then added to the results of paragraph (f) to determine the total distribution amount for each rural hospital.

(h) This subsection expires ~~is repealed on~~ July 1, 2002 ~~2001~~.

Section 5. In order to implement Specific Appropriations and of the 2001-2002 General Appropriations Act, paragraph (c) is added to subsection (16) of section 216.181, Florida Statutes, to read:

216.181 Approved budgets for operations and fixed capital outlay.--

1 (16)

2 (c) For the 2001-2002 fiscal year only, funds
3 appropriated to the Department of Children and Family Services
4 in Specific Appropriations and the Department of Health
5 in Specific Appropriations of the 2001-2002 General
6 Appropriations Act may be advanced, unless specifically
7 prohibited in such General Appropriations Act, for those
8 contracted services that were approved for advancement by the
9 Comptroller in fiscal year 1993-1994, including those services
10 contracted on a fixed-price or unit-cost basis. This
11 paragraph expires July 1, 2002.

12 Section 6. In order to implement Specific
13 Appropriation ____ of the 2001-2002 General Appropriations Act,
14 and for the 2001-2002 fiscal year only, the Agency for Health
15 Care Administration shall include health maintenance
16 organization recipients in the county billing for inpatient
17 hospital stays for the purpose of shared costs with counties
18 in accordance with the Florida Statutes. This section expires
19 July 1, 2002.

20 Section 7. In order to implement Specific
21 Appropriation ____ of the 2001-2002 General Appropriations Act,
22 paragraph (c) of subsection (5) of section 409.905, Florida
23 Statutes, is amended to read:

24 409.905 Mandatory Medicaid services.--The agency may
25 make payments for the following services, which are required
26 of the state by Title XIX of the Social Security Act,
27 furnished by Medicaid providers to recipients who are
28 determined to be eligible on the dates on which the services
29 were provided. Any service under this section shall be
30 provided only when medically necessary and in accordance with
31 state and federal law. Nothing in this section shall be

1 construed to prevent or limit the agency from adjusting fees,
 2 reimbursement rates, lengths of stay, number of visits, number
 3 of services, or any other adjustments necessary to comply with
 4 the availability of moneys and any limitations or directions
 5 provided for in the General Appropriations Act or chapter 216.

6 (5) HOSPITAL INPATIENT SERVICES.--The agency shall pay
 7 for all covered services provided for the medical care and
 8 treatment of a recipient who is admitted as an inpatient by a
 9 licensed physician or dentist to a hospital licensed under
 10 part I of chapter 395. However, the agency shall limit the
 11 payment for inpatient hospital services for a Medicaid
 12 recipient 21 years of age or older to 45 days or the number of
 13 days necessary to comply with the General Appropriations Act.

14 (c) Agency for Health Care Administration shall adjust
 15 a hospital's current inpatient per diem rate to reflect the
 16 cost of serving the Medicaid population at that institution
 17 if:

18 1. The hospital experiences an increase in Medicaid
 19 caseload by more than 25 percent in any year, primarily
 20 resulting from the closure of a hospital in the same service
 21 area occurring after July 1, 1995; or

22 2. The hospital's Medicaid per diem rate is at least
 23 25 percent below the Medicaid per patient cost for that year.

24
 25 No later than November 1, 2001 ~~2000~~, the agency must provide
 26 estimated costs for any adjustment in a hospital inpatient per
 27 diem pursuant to this paragraph to the Executive Office of the
 28 Governor, the House of Representatives General Appropriations
 29 Committee, and the Senate Budget Committee. Before the agency
 30 implements a change in a hospital's inpatient per diem rate
 31 pursuant to this paragraph, the Legislature must have

1 specifically appropriated sufficient funds in the 2001-2002
 2 General Appropriations Act to support the increase in cost as
 3 estimated by the agency. This paragraph expires ~~is repealed on~~
 4 July 1, 2002 ~~2001~~.

5 Section 8. In order to implement Specific
 6 Appropriations _____ of the 2001-2002 General Appropriations
 7 Act, subsection (4) of section 216.177, Florida Statutes, is
 8 amended to read:

9 216.177 Appropriations acts, statement of intent,
 10 violation, notice, review and objection procedures.--

11 (4) Notwithstanding the 14-day notice requirements of
 12 this section, and for the 2001-2002 ~~2000-2001~~ fiscal year
 13 only, the Department of Children and Family Services is
 14 required to provide notice of proposed transfers submitted
 15 pursuant to s. 20.19(5)(b) to the Executive Office of the
 16 Governor and the chairs of the legislative appropriations
 17 committees at least 3 working days prior to their
 18 implementation.

19 Section 9. In order to implement Specific
 20 Appropriation ____ of the 2001-2002 General Appropriations Act,
 21 paragraph (a) of subsection (1) and subsection (7) of section
 22 409.915, Florida Statutes, are amended to read:

23 409.915 County contributions to Medicaid.--Although
 24 the state is responsible for the full portion of the state
 25 share of the matching funds required for the Medicaid program,
 26 in order to acquire a certain portion of these funds, the
 27 state shall charge the counties for certain items of care and
 28 service as provided in this section.

29 (1) Each county shall participate in the following
 30 items of care and service:
 31

1 (a) Payments for inpatient hospitalization in excess
 2 of 11 ~~12~~ days, but not in excess of 45 days, with the
 3 exception of pregnant women and children whose income is in
 4 excess of the federal poverty level and who do not participate
 5 in the Medicaid medically needy program.

6 (7) Counties are exempt from contributing toward the
 7 cost of new exemptions on inpatient ceilings for statutory
 8 teaching hospitals, specialty hospitals, and community
 9 hospital education program hospitals that came into effect
 10 July 1, 2000, and for special Medicaid payments that came into
 11 effect on or after July 1, 2000. This subsection expires July
 12 1, 2002. ~~Notwithstanding any provision of this section to the~~
 13 ~~contrary, counties are exempt from contributing toward the~~
 14 ~~increased cost of hospital inpatient services due to the~~
 15 ~~elimination of ceilings on Medicaid inpatient reimbursement~~
 16 ~~rates paid to teaching hospitals, specialty hospitals, and~~
 17 ~~community health education program hospitals and for special~~
 18 ~~Medicaid reimbursements to hospitals for which the Legislature~~
 19 ~~has specifically appropriated funds. This subsection is~~
 20 ~~repealed on July 1, 2001.~~

21 Section 10. The amendment of paragraph 409.915(1)(a),
 22 Florida Statutes, by this act shall expire July 1, 2002, and
 23 the text of that paragraph shall revert to that in existence
 24 on June 30, 2001, except that any amendments to such text
 25 exacted other than by this act shall be preserved and continue
 26 to operate to the extent that such amendments are not
 27 dependent upon the portions of such text which expire pursuant
 28 to the provisions of this act. The Division of Statutory
 29 Revision of the Office of Legislative Services shall include
 30 in an appropriate reviser's bill any amendments to such
 31

subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 11. In order to implement Specific Appropriations ___ and ___ of the 2001-2002 General Appropriations Act, the Agency for Health Care Administration shall not adjust a premium paid to a health maintenance organization or a prepaid health care plan to reflect an increase in such premium because of specifically appropriated funds in the General Appropriations Act to eliminate ceilings on Medicaid reimbursement rates paid to teaching hospitals, specialty hospitals, and community health education program hospitals and for making special Medicaid payments to hospitals. This section expires July 1, 2002.

Section 12. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, subsection (1) of section 409.904, Florida Statutes, is amended to read:

409.904 Optional payments for eligible persons.--The agency may make payments for medical assistance and related services on behalf of the following persons who are determined to be eligible subject to the income, assets, and categorical eligibility tests set forth in federal and state law. Payment on behalf of these Medicaid eligible persons is subject to the availability of moneys and any limitations established by the General Appropriations Act or chapter 216.

(1) A person who is age 65 or older or is determined to be disabled, whose income is at or below 87.5 ~~100~~ percent of federal poverty level, and whose assets do not exceed established limitations.

Section 13. The amendment of subsection 409.904(1), Florida Statutes, by this act shall expire July 1, 2002, and

1 the text of that subsection shall revert to that in existence
 2 on June 30, 2001, except that any amendments to such text
 3 exacted other than by this act shall be preserved and continue
 4 to operate to the extent that such amendments are not
 5 dependent upon the portions of such text which expire pursuant
 6 to the provisions of this act. The Division of Statutory
 7 Revision of the Office of Legislative Services shall include
 8 in an appropriate reviser's bill any amendments to such
 9 subsection which are necessary to give effect to the
 10 legislative intent expressed in this section.

11 Section 14. In order to implement Specific
 12 Appropriation of the 2001-2002 General Appropriations
 13 Act, paragraph (a) of subsection (5) of section 409.905,
 14 Florida Statutes, is amended to read:

15 409.905 Mandatory Medicaid services.--The agency may
 16 make payments for the following services, which are required
 17 of the state by Title XIX of the Social Security Act,
 18 furnished by Medicaid providers to recipients who are
 19 determined to be eligible on the dates on which the services
 20 were provided. Any service under this section shall be
 21 provided only when medically necessary and in accordance with
 22 state and federal law. Nothing in this section shall be
 23 construed to prevent or limit the agency from adjusting fees,
 24 reimbursement rates, lengths of stay, number of visits, number
 25 of services, or any other adjustments necessary to comply with
 26 the availability of moneys and any limitations or directions
 27 provided for in the General Appropriations Act or chapter 216.

28 (5) HOSPITAL INPATIENT SERVICES.--The agency shall pay
 29 for all covered services provided for the medical care and
 30 treatment of a recipient who is admitted as an inpatient by a
 31 licensed physician or dentist to a hospital licensed under

part I of chapter 395. However, the agency shall limit the payment for inpatient hospital services for a Medicaid recipient 21 years of age or older to 45 days or the number of days necessary to comply with the General Appropriations Act.

(a) The agency is authorized to implement reimbursement and utilization management reforms in order to comply with any limitations or directions in the General Appropriations Act, which may include, but are not limited to: prior authorization for inpatient psychiatric days; prior authorization for nonemergency hospital inpatient admissions; enhanced utilization and concurrent review programs for highly utilized services; reduction or elimination of covered days of service; adjusting reimbursement ceilings for variable costs; adjusting reimbursement ceilings for fixed and property costs; and implementing target rates of increase.

Section 15. The amendment of paragraph 409.905(1)(a), Florida Statutes, by this act shall expire July 1, 2002, and the text of that paragraph shall revert to that in existence on June 30, 2001, except that any amendments to such text exacted other than by this act shall be preserved and continue to operate to the extent that such amendments are not dependent upon the portions of such text which expire pursuant to the provisions of this act. The Division of Statutory Revision of the Office of Legislative Services shall include in an appropriate reviser's bill any amendments to such subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 16. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, subsection (16) of section 409.906, Florida Statutes, is amended to read:

409.906 Optional Medicaid services.--Subject to specific appropriations, the agency may make payments for services which are optional to the state under Title XIX of the Social Security Act and are furnished by Medicaid providers to recipients who are determined to be eligible on the dates on which the services were provided. Any optional service that is provided shall be provided only when medically necessary and in accordance with state and federal law. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. If necessary to safeguard the state's systems of providing services to elderly and disabled persons and subject to the notice and review provisions of s. 216.177, the Governor may direct the Agency for Health Care Administration to amend the Medicaid state plan to delete the optional Medicaid service known as "Intermediate Care Facilities for the Developmentally Disabled." Optional services may include:

(16) INTERMEDIATE CARE SERVICES.--The agency may pay for 24-hour-a-day intermediate care nursing and rehabilitation services rendered to a recipient in a nursing facility licensed under part II of chapter 400, if the services are ordered by and provided under the direction of a physician, meet nursing home level of care criteria as determined by the Comprehensive Assessment and Review for Long-Term Care (CARE) Program of the Department of Elderly Affairs, and do not meet the definition of "general care" as used in the Medicaid budget estimating process.

1 Section 17. The amendment of subsection 409.906(16),
 2 Florida Statutes, by this act shall expire July 1, 2002, and
 3 the text of that subsection shall revert to that in existence
 4 on June 30, 2001, except that any amendments to such text
 5 exacted other than by this act shall be preserved and continue
 6 to operate to the extent that such amendments are not
 7 dependent upon the portions of such text which expire pursuant
 8 to the provisions of this act. The Division of Statutory
 9 Revision of the Office of Legislative Services shall include
 10 in an appropriate reviser's bill any amendments to such
 11 subsection which are necessary to give effect to the
 12 legislative intent expressed in this section.

13 Section 18. In order to implement Specific
 14 Appropriation of the 2001-2002 General Appropriations
 15 Act, paragraph (a) of subsection (1), paragraph (b) of
 16 subsection (2), and subsections (4), (9), (11), (13), (14),
 17 and (18) of section 409.908, Florida Statutes, are amended to
 18 read:

19 409.908 Reimbursement of Medicaid providers.--Subject
 20 to specific appropriations, the agency shall reimburse
 21 Medicaid providers, in accordance with state and federal law,
 22 according to methodologies set forth in the rules of the
 23 agency and in policy manuals and handbooks incorporated by
 24 reference therein. These methodologies may include fee
 25 schedules, reimbursement methods based on cost reporting,
 26 negotiated fees, competitive bidding pursuant to s. 287.057,
 27 and other mechanisms the agency considers efficient and
 28 effective for purchasing services or goods on behalf of
 29 recipients. 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

provided for in the General Appropriations Act or chapter 216. Further, nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act, provided the adjustment is consistent with legislative intent.

(1) Reimbursement to hospitals licensed under part I of chapter 395 must be made prospectively or on the basis of negotiation.

(a) Reimbursement for inpatient care is limited as provided for in s. 409.905(5), except for:

1. The raising of rate reimbursement caps, excluding rural hospitals.

2. Recognition of the costs of graduate medical education.

3. Other methodologies recognized in the General Appropriations Act.

During the years funds are transferred from the Board of Regents, any reimbursement supported by such funds shall be subject to certification by the Board of Regents that the hospital has complied with s. 381.0403. The agency is authorized to receive funds from state entities, including, but not limited to, the Board of Regents, local governments, and other local political subdivisions, for the purpose of making special exception payments, including federal matching funds, through the Medicaid inpatient reimbursement methodologies. Funds received from state entities or local governments for this purpose shall be separately accounted for

1 and shall not be commingled with other state or local funds in
 2 any manner. ~~Notwithstanding this section and s. 409.915,~~
 3 ~~counties are exempt from contributing toward the cost of the~~
 4 ~~special exception reimbursement for hospitals serving a~~
 5 ~~disproportionate share of low income persons and providing~~
 6 ~~graduate medical education.~~

7 (2)

8 (b) Subject to any limitations or directions provided
 9 for in the General Appropriations Act, the agency shall
 10 establish and implement a Florida Title XIX Long-Term Care
 11 Reimbursement Plan (Medicaid) for nursing home care in order
 12 to provide care and services in conformance with the
 13 applicable state and federal laws, rules, regulations, and
 14 quality and safety standards and to ensure that individuals
 15 eligible for medical assistance have reasonable geographic
 16 access to such care. The agency shall not provide for any
 17 increases in reimbursement rates to nursing homes associated
 18 with changes in ownership effective January 1, 2002. Under the
 19 plan, interim rate adjustments shall not be granted to reflect
 20 increases in the cost of general or professional liability
 21 insurance for nursing homes unless the following criteria are
 22 met: have at least a 65 percent Medicaid utilization in the
 23 most recent cost report submitted to the agency, and the
 24 increase in general or professional liability costs to the
 25 facility for the most recent policy period affects the total
 26 Medicaid per diem by at least 5 percent. This rate adjustment
 27 shall not result in the per diem exceeding the class ceiling.
 28 This provision shall apply only to fiscal year 2000-2001 and
 29 shall be implemented to the extent existing appropriations are
 30 available. The agency shall report to the Governor, the
 31 Speaker of the House of Representatives, and the President of

1 the Senate by December 31, 2000, on the cost of liability
2 insurance for Florida nursing homes for fiscal years 1999 and
3 2000 and the extent to which these costs are not being
4 compensated by the Medicaid program. Medicaid-participating
5 nursing homes shall be required to report to the agency
6 information necessary to compile this report. Effective no
7 earlier than the rate-setting period beginning April 1, 1999,
8 the agency shall establish a case-mix reimbursement
9 methodology for the rate of payment for long-term care
10 services for nursing home residents. The agency shall compute
11 a per diem rate for Medicaid residents, adjusted for case mix,
12 which is based on a resident classification system that
13 accounts for the relative resource utilization by different
14 types of residents and which is based on level-of-care data
15 and other appropriate data. The case-mix methodology developed
16 by the agency shall take into account the medical, behavioral,
17 and cognitive deficits of residents. In developing the
18 reimbursement methodology, the agency shall evaluate and
19 modify other aspects of the reimbursement plan as necessary to
20 improve the overall effectiveness of the plan with respect to
21 the costs of patient care, operating costs, and property
22 costs. In the event adequate data are not available, the
23 agency is authorized to adjust the patient's care component or
24 the per diem rate to more adequately cover the cost of
25 services provided in the patient's care component. The agency
26 shall work with the Department of Elderly Affairs, the Florida
27 Health Care Association, and the Florida Association of Homes
28 for the Aging in developing the methodology. It is the intent
29 of the Legislature that the reimbursement plan achieve the
30 goal of providing access to health care for nursing home
31 residents who require large amounts of care while encouraging

1 diversion services as an alternative to nursing home care for
2 residents who can be served within the community. The agency
3 shall base the establishment of any maximum rate of payment,
4 whether overall or component, on the available moneys as
5 provided for in the General Appropriations Act. The agency may
6 base the maximum rate of payment on the results of
7 scientifically valid analysis and conclusions derived from
8 objective statistical data pertinent to the particular maximum
9 rate of payment.

10 (4) Subject to any limitations or directions provided
11 for in the General Appropriations Act, alternative health
12 plans, health maintenance organizations, and prepaid health
13 plans shall be reimbursed a fixed, prepaid amount negotiated,
14 or competitively bid pursuant to s. 287.057, by the agency and
15 prospectively paid to the provider monthly for each Medicaid
16 recipient enrolled. The amount may not exceed the average
17 amount the agency determines it would have paid, based on
18 claims experience, for recipients in the same or similar
19 category of eligibility. The agency shall calculate
20 capitation rates on a regional basis and, beginning September
21 1, 1995, shall include age-band differentials in such
22 calculations. Effective July 1, 2001, the cost of exempting
23 statutory teaching hospitals, specialty hospitals, and
24 community hospital education program hospitals from
25 reimbursement ceilings and the cost of special Medicaid
26 payments shall not be included in premiums paid to health
27 maintenance organizations or prepaid health care plans.

28 (9) A provider of home health care services or of
29 medical supplies and appliances shall be reimbursed on the
30 basis of competitive bidding or for the lesser of the amount
31 billed by the provider or the agency's established maximum

1 allowable amount, except that, in the case of the rental of
2 durable medical equipment, the total rental payments may not
3 exceed the purchase price of the equipment over its expected
4 useful life or the agency's established maximum allowable
5 amount, whichever amount is less.

6 (11) A provider of independent laboratory services
7 shall be reimbursed on the basis of competitive bidding or for
8 the least of the amount billed by the provider, the provider's
9 usual and customary charge, or the Medicaid maximum allowable
10 fee established by the agency.

11 (13) Medicare premiums for persons eligible for both
12 Medicare and Medicaid coverage shall be paid at the rates
13 established by Title XVIII of the Social Security Act. For
14 Medicare services rendered to Medicaid-eligible persons,
15 Medicaid shall pay Medicare deductibles and coinsurance as
16 follows:

17 (a) Medicaid shall make no payment toward deductibles
18 and coinsurance for any service that is not covered by
19 Medicaid.

20 (b) Medicaid's financial obligation for deductibles
21 and coinsurance payments shall be based on Medicare allowable
22 fees, not on a provider's billed charges.

23 (c) Medicaid will pay no portion of Medicare
24 deductibles and coinsurance when payment that Medicare has
25 made for the service equals or exceeds what Medicaid would
26 have paid if it had been the sole payor. The combined payment
27 of Medicare and Medicaid shall not exceed the amount Medicaid
28 would have paid had it been the sole payor. The Legislature
29 finds that there has been confusion regarding the
30 reimbursement for services rendered to dually eligible
31 Medicare beneficiaries. Accordingly, the Legislature clarifies

1 that it has always been the intent of the Legislature before
 2 and after 1991 that, in reimbursing in accordance with fees
 3 established by Title XVIII for premiums, deductibles, and
 4 coinsurance for Medicare services rendered by physicians to
 5 Medicaid eligible persons, physicians be reimbursed at the
 6 lesser of the amount billed by the physician or the Medicaid
 7 maximum allowable fee established by the Agency for Health
 8 Care Administration, as is permitted by federal law. It has
 9 never been the intent of the Legislature with regard to such
 10 services rendered by physicians that Medicaid be required to
 11 provide any payment for deductibles, coinsurance, or
 12 copayments for Medicare cost sharing, or any expenses incurred
 13 relating thereto, in excess of the payment amount provided for
 14 under the State Medicaid plan for such service. This payment
 15 methodology is applicable even in those situations in which
 16 the payment for Medicare cost sharing for a qualified Medicare
 17 beneficiary with respect to an item or service is reduced or
 18 eliminated. This expression of the Legislature is in
 19 clarification of existing law and shall apply to payment for,
 20 and with respect to provider agreements with respect to, items
 21 or services furnished on or after the effective date of this
 22 act. This paragraph applies to payment by Medicaid for items
 23 and services furnished before the effective date of this act
 24 if such payment is the subject of a lawsuit that is based on
 25 the provisions of this section, and that is pending as of, or
 26 is initiated after, the effective date of this act.

27 (d) Notwithstanding ~~The following provisions are~~
 28 ~~exceptions to paragraphs (a)-(c):~~

29 1. Medicaid payments for Nursing Home Medicare part A
 30 coinsurance shall be the lesser of the Medicare coinsurance
 31 amount or the Medicaid nursing home per diem rate.

1 ~~2. Medicaid shall pay all deductibles and coinsurance~~
 2 ~~for Nursing Home Medicare part B services.~~

3 ~~2.3.~~ Medicaid shall pay all deductibles and
 4 coinsurance for Medicare-eligible recipients receiving
 5 freestanding end stage renal dialysis center services.

6 ~~4. Medicaid shall pay all deductibles and coinsurance~~
 7 ~~for hospital outpatient Medicare part B services.~~

8 ~~3.5.~~ Medicaid payments for general hospital inpatient
 9 services shall be limited to the Medicare deductible per spell
 10 of illness. Medicaid shall make no payment toward coinsurance
 11 for Medicare general hospital inpatient services.

12 ~~4.6.~~ Medicaid shall pay all deductibles and
 13 coinsurance for Medicare emergency transportation services
 14 provided by ambulances licensed pursuant to chapter 401.

15 (14) A provider of prescribed drugs shall be
 16 reimbursed on the basis of competitive bidding or for the
 17 least of the amount billed by the provider, the provider's
 18 usual and customary charge, or the Medicaid maximum allowable
 19 fee established by the agency, plus a dispensing fee. The
 20 agency is directed to implement a variable dispensing fee for
 21 payments for prescribed medicines while ensuring continued
 22 access for Medicaid recipients. The variable dispensing fee
 23 may be based upon, but not limited to, either or both the
 24 volume of prescriptions dispensed by a specific pharmacy
 25 provider and the volume of prescriptions dispensed to an
 26 individual recipient. The agency is authorized to limit
 27 reimbursement for prescribed medicine in order to comply with
 28 any limitations or directions provided for in the General
 29 Appropriations Act, which may include implementing a
 30 prospective or concurrent utilization review program.

(18) Unless otherwise provided for in the General Appropriations Act, a provider of transportation services shall be reimbursed the lesser of the amount billed by the provider or the Medicaid maximum allowable fee established by the agency, except when the agency has entered into a direct contract with the provider, or with a community transportation coordinator, for the provision of an all-inclusive service, or when services are provided pursuant to an agreement negotiated between the agency and the provider. The agency, as provided for in s. 427.0135, shall purchase transportation services through the community coordinated transportation system, if available, unless the agency determines a more cost-effective method for Medicaid clients. Nothing in this subsection shall be construed to limit or preclude the agency from contracting for services using a prepaid capitation rate or from establishing maximum fee schedules, individualized reimbursement policies by provider type, negotiated fees, prior authorization, competitive bidding, increased use of mass transit, or any other mechanism that the agency considers efficient and effective for the purchase of services on behalf of Medicaid clients, including implementing a transportation eligibility process. The agency shall not be required to contract with any community transportation coordinator or transportation operator that has been determined by the agency, the Department of Legal Affairs Medicaid Fraud Control Unit, or any other state or federal agency to have engaged in any abusive or fraudulent billing activities. The agency is authorized to competitively procure transportation services or make other changes necessary to secure approval of federal waivers needed to permit federal financing of Medicaid

1 transportation services at the service matching rate rather
 2 than the administrative matching rate.

3 Section 19. The amendment of section 409.908(1)(a),
 4 (2)(b), (4), (9), (11), (13), (14), and (19), Florida
 5 Statutes, by this act shall expire July 1, 2002, and the text
 6 of those paragraphs and subsections shall revert to that in
 7 existence on June 30, 2001, except that any amendments to such
 8 text exacted other than by this act shall be preserved and
 9 continue to operate to the extent that such amendments are not
 10 dependent upon the portions of such text which expire pursuant
 11 to the provisions of this act. The Division of Statutory
 12 Revision of the Office of Legislative Services shall include
 13 in an appropriate reviser's bill any amendments to such
 14 subsection which are necessary to give effect to the
 15 legislative intent expressed in this section.

16 Section 20. In order to implement Specific
 17 Appropriation of the 2001-2002 General Appropriations
 18 Act, section 409.91195, Florida Statutes, is amended to read:

19 409.91195 Medicaid Pharmaceutical and Therapeutics
 20 Committee; restricted drug formulary.--There is created a
 21 Medicaid Pharmaceutical and Therapeutics Committee for the
 22 purpose of developing a restricted drug formulary. ~~The~~
 23 ~~committee shall develop and implement a voluntary Medicaid~~
 24 ~~preferred prescribed drug designation program.~~ The program
 25 established under this section shall provide information to
 26 Medicaid providers on medically appropriate and cost-efficient
 27 prescription drug therapies through the development and
 28 publication of a restricted drug formulary ~~voluntary Medicaid~~
 29 ~~preferred prescribed drug list.~~

30 (1) The Medicaid Pharmaceutical and Therapeutics
 31 Committee shall be comprised of nine members as specified in

~~42 U.S.C. s. 1396 appointed as follows: one practicing physician licensed under chapter 458, appointed by the Speaker of the House of Representatives from a list of recommendations from the Florida Medical Association; one practicing physician licensed under chapter 459, appointed by the Speaker of the House of Representatives from a list of recommendations from the Florida Osteopathic Medical Association; one practicing physician licensed under chapter 458, appointed by the President of the Senate from a list of recommendations from the Florida Academy of Family Physicians; one practicing podiatric physician licensed under chapter 461, appointed by the President of the Senate from a list of recommendations from the Florida Podiatric Medical Association; one trauma surgeon licensed under chapter 458, appointed by the Speaker of the House of Representatives from a list of recommendations from the American College of Surgeons; one practicing dentist licensed under chapter 466, appointed by the President of the Senate from a list of recommendations from the Florida Dental Association; one practicing pharmacist licensed under chapter 465, appointed by the Governor from a list of recommendations from the Florida Pharmacy Association; one practicing pharmacist licensed under chapter 465, appointed by the Governor from a list of recommendations from the Florida Society of Health System Pharmacists; and one health care professional with expertise in clinical pharmacology appointed by the Governor from a list of recommendations from the Pharmaceutical Research and Manufacturers Association. The members shall be appointed to serve for terms of 2 years from the date of their appointment. Members may be appointed to more than one term. The Agency for Health Care Administration~~

1 shall serve as staff for the committee and assist them with
2 all ministerial duties.

3 (2) With the advice of ~~Upon recommendation by~~ the
4 committee, the Agency for Health Care Administration shall
5 establish a restricted drug formulary ~~the voluntary Medicaid~~
6 ~~preferred prescribed drug list. Upon further recommendation by~~
7 ~~the committee, the agency shall add to, delete from, or modify~~
8 ~~the list.~~ The committee shall also review requests for
9 additions to, deletions from, or modifications of the
10 formulary as presented to it by the agency; and, upon further
11 recommendation by the committee, the agency shall add to,
12 delete from, or modify the formulary as appropriate ~~list. The~~
13 ~~list shall be adopted by the committee in consultation with~~
14 ~~medical specialists, when appropriate, using the following~~
15 ~~criteria: use of the list shall be voluntary by providers and~~
16 ~~the list must provide for medically appropriate drug therapies~~
17 ~~for Medicaid patients which achieve cost savings in the~~
18 ~~Medicaid program.~~

19 (3) The Agency for Health Care Administration shall
20 publish and disseminate the restricted drug formulary
21 ~~voluntary Medicaid preferred prescribed drug list~~ to all
22 Medicaid prescribing providers in the state.

23 Section 21. The amendment of section 409.91195,
24 Florida Statutes, by this act shall expire July 1, 2002, and
25 the text of that section shall revert to that in existence on
26 June 30, 2001, except that any amendments to such text exacted
27 other than by this act shall be preserved and continue to
28 operate to the extent that such amendments are not dependent
29 upon the portions of such text which expire pursuant to the
30 provisions of this act. The Division of Statutory Revision of
31 the Office of Legislative Services shall include in an

1 appropriate reviser's bill any amendments to such subsection
 2 which are necessary to give effect to the legislative intent
 3 expressed in this section.

4 Section 22. In order to implement Specific
 5 Appropriation of the 2001-2002 General Appropriations
 6 Act, subsections (34) and (37) of section 409.912, Florida
 7 Statutes, are amended to read:

8 409.912 Cost-effective purchasing of health care.--The
 9 agency shall purchase goods and services for Medicaid
 10 recipients in the most cost-effective manner consistent with
 11 the delivery of quality medical care. The agency shall
 12 maximize the use of prepaid per capita and prepaid aggregate
 13 fixed-sum basis services when appropriate and other
 14 alternative service delivery and reimbursement methodologies,
 15 including competitive bidding pursuant to s. 287.057, designed
 16 to facilitate the cost-effective purchase of a case-managed
 17 continuum of care. The agency shall also require providers to
 18 minimize the exposure of recipients to the need for acute
 19 inpatient, custodial, and other institutional care and the
 20 inappropriate or unnecessary use of high-cost services.

21 (34) The agency may provide for cost-effective
 22 purchasing of home health services, private duty nursing
 23 services, transportation, independent laboratory services,
 24 durable medical equipment and supplies, and prescribed drug
 25 services through competitive bidding ~~negotiation~~ pursuant to
 26 s. 287.057. The agency may request appropriate waivers from
 27 the federal Health Care Financing Administration in order to
 28 competitively bid such ~~home health~~ services. The agency may
 29 exclude providers not selected through the bidding process
 30 from the Medicaid provider network.

1 (37)(a) The agency shall implement a Medicaid
2 prescribed-drug spending-control program that includes the
3 following components:

4 1. Medicaid prescribed-drug coverage for brand-name
5 drugs for adult Medicaid recipients not residing in nursing
6 homes or other institutions is limited to the dispensing of
7 four brand-name drugs per month per recipient. Children and
8 institutionalized adults are exempt from this restriction.
9 Antiretroviral agents are excluded from this limitation. No
10 requirements for prior authorization or other restrictions on
11 medications used to treat mental illnesses such as
12 schizophrenia, severe depression, or bipolar disorder may be
13 imposed on Medicaid recipients. Medications that will be
14 available without restriction for persons with mental
15 illnesses include atypical antipsychotic medications,
16 conventional antipsychotic medications, selective serotonin
17 reuptake inhibitors, and other medications used for the
18 treatment of serious mental illnesses. The agency shall also
19 limit the amount of a prescribed drug dispensed to no more
20 than a 34-day supply. The agency shall continue to provide
21 unlimited generic drugs, contraceptive drugs and items, and
22 diabetic supplies. The agency may authorize exceptions to the
23 brand-name-drug restriction or to the restricted drug
24 formulary, based upon the treatment needs of the patients,
25 only when such exceptions are based on prior consultation
26 provided by the agency or an agency contractor, but the agency
27 must establish procedures to ensure that:

28 a. There will be a response to a request for prior
29 consultation by telephone or other telecommunication device
30 within 24 hours after receipt of a request for prior
31 consultation; and

1 b. A 72-hour supply of the drug prescribed will be
2 provided in an emergency or when the agency does not provide a
3 response within 24 hours as required by sub-subparagraph a.

4 2. Reimbursement to pharmacies for Medicaid prescribed
5 drugs shall be set at the average wholesale price less 13.25
6 percent.

7 3. The agency shall develop and implement a process
8 for managing the drug therapies of Medicaid recipients who are
9 using significant numbers of prescribed drugs each month. The
10 management process may include, but is not limited to,
11 comprehensive, physician-directed medical-record reviews,
12 claims analyses, and case evaluations to determine the medical
13 necessity and appropriateness of a patient's treatment plan
14 and drug therapies. The agency may contract with a private
15 organization to provide drug-program-management services.

16 4. The agency may limit the size of its pharmacy
17 network based on need, competitive bidding, price
18 negotiations, credentialing, or similar criteria. The agency
19 shall give special consideration to rural areas in determining
20 the size and location of pharmacies included in the Medicaid
21 pharmacy network. A pharmacy credentialing process may include
22 criteria such as a pharmacy's full-service status, location,
23 size, patient educational programs, patient consultation,
24 disease-management services, and other characteristics. The
25 agency may impose a moratorium on Medicaid pharmacy enrollment
26 when it is determined that it has a sufficient number of
27 Medicaid-participating providers.

28 5. The agency shall develop and implement a program
29 that requires Medicaid practitioners who prescribe drugs to
30 use a counterfeit-proof prescription pad for Medicaid
31 prescriptions. The agency shall require the use of

1 standardized counterfeit-proof prescription pads by
2 Medicaid-participating prescribers. The agency may implement
3 the program in targeted geographic areas or statewide.

4 6. The agency may enter into arrangements that require
5 manufacturers of generic drugs prescribed to Medicaid
6 recipients to provide rebates of at least 15.1 percent of the
7 average manufacturer price for the manufacturer's generic
8 products. These arrangements shall require that if a
9 generic-drug manufacturer pays federal rebates for
10 Medicaid-reimbursed drugs at a level below 15.1 percent, the
11 manufacturer must provide a supplemental rebate to the state
12 in an amount necessary to achieve a 15.1-percent rebate level.
13 If a generic-drug manufacturer raises its price in excess of
14 the Consumer Price Index (Urban), the excess amount shall be
15 included in the supplemental rebate to the state.

16 7. The agency may establish a restricted drug
17 formulary in accordance with 42 U.S.C. s. 1396r, and, pursuant
18 to the establishment of such formulary, it is authorized to
19 negotiate supplemental rebates from manufacturers at no less
20 than 10 percent of the average manufacturer price as defined
21 in 42 U.S.C. s. 1936 on the last day of the quarter unless the
22 federal or supplemental rebate, or both, exceeds 25 percent
23 and the agency determines the product competitive. The agency
24 may determine that specific generic products are competitive
25 at lower rebate percentages.

26 (b) The agency shall implement this subsection to the
27 extent that funds are appropriated to administer the Medicaid
28 prescribed-drug spending-control program. The agency may
29 contract all or any part of this program to private
30 organizations.

(c) The agency shall submit a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 15 of each year. The report must include, but need not be limited to, the progress made in implementing Medicaid cost-containment measures and their effect on Medicaid prescribed-drug expenditures.

Section 23. The amendment of subsections 409.912(34) and (37), Florida Statutes, by this act shall expire July 1, 2002, and the text of those subsections shall revert to that in existence on June 30, 2001, except that any amendments to such text exacted other than by this act shall be preserved and continue to operate to the extent that such amendments are not dependent upon the portions of such text which expire pursuant to the provisions of this act. The Division of Statutory Revision of the Office of Legislative Services shall include in an appropriate reviser's bill any amendments to such subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 24. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, subsection (2) of section 409.904, Florida Statutes, is amended to read:

409.904 Optional payments for eligible persons.--The agency may make payments for medical assistance and related services on behalf of the following persons who are determined to be eligible subject to the income, assets, and categorical eligibility tests set forth in federal and state law. Payment on behalf of these Medicaid eligible persons is subject to the availability of moneys and any limitations established by the General Appropriations Act or chapter 216.

(2) A family, a pregnant woman, a child under age 18, a person age 65 or over, or a blind or disabled person who would be eligible under any group listed in s. 409.903(1), (2), or (3), except that the income or assets of such family or person exceed established limitations. For a family or person in this group, medical expenses are deductible from income in accordance with federal requirements in order to make a determination of eligibility. A family or person in this group, which group is known as the "medically needy," is eligible to receive the same services as other Medicaid recipients, with the exception of services in skilled nursing facilities; ~~and~~ intermediate care facilities for the developmentally disabled; inpatient hospital services; home health services; private duty nursing; and adult dental, visual, and hearing services, to the extent such services may be limited under federal law and regulation.

Section 25. The amendment of subsection 409.904(2), Florida Statutes, by this act shall expire July 1, 2002, and the text of that subsection shall revert to that in existence on June 30, 2001, except that any amendments to such text exacted other than by this act shall be preserved and continue to operate to the extent that such amendments are not dependent upon the portions of such text which expire pursuant to the provisions of this act. The Division of Statutory Revision of the Office of Legislative Services shall include in an appropriate reviser's bill any amendments to such subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 26. In order to implement Specific Appropriation of the 2001-2002 General Appropriations

1 Act, subsection (26) is added to section 409.913, Florida
2 Statutes, to read:

3 409.913 Oversight of the integrity of the Medicaid
4 program.--The agency shall operate a program to oversee the
5 activities of Florida Medicaid recipients, and providers and
6 their representatives, to ensure that fraudulent and abusive
7 behavior and neglect of recipients occur to the minimum extent
8 possible, and to recover overpayments and impose sanctions as
9 appropriate.

10 (26)(a) The Agency for Health Care Administration
11 shall develop and implement a pilot program to prevent
12 Medicaid fraud and abuse in Medicaid-participating pharmacies
13 by using a type of automated fingerprint imaging of Medicaid
14 beneficiaries eligible under this chapter.

15 (b) In adopting rules under this subsection, the
16 agency shall ensure that any automated fingerprint imaging
17 performed by the agency is used only to prevent fraud and
18 abuse of pharmacy benefits by Medicaid beneficiaries and is in
19 compliance with state and federal disclosure requirements.

20 (c) The agency shall prepare, by October 2001, a plan
21 for implementation of this program. Implementation shall begin
22 with a pilot of the program in one or more areas of the state
23 by April 1, 2002. Pilot evaluation results shall be used to
24 determine the method of statewide expansion.

25 (d) The agency shall request any federal waivers
26 necessary to implement the program within the limits described
27 in this subsection.

28 (e) This subsection expires July 1, 2002.

29 Section 27. In order to implement Specific
30 Appropriation of the 2001-2002 General Appropriations
31

1 Act, subsection (8) of section 409.906, Florida Statutes, is
2 amended to read:

3 409.906 Optional Medicaid services.--Subject to
4 specific appropriations, the agency may make payments for
5 services which are optional to the state under Title XIX of
6 the Social Security Act and are furnished by Medicaid
7 providers to recipients who are determined to be eligible on
8 the dates on which the services were provided. Any optional
9 service that is provided shall be provided only when medically
10 necessary and in accordance with state and federal law.

11 Nothing in this section shall be construed to prevent or limit
12 the agency from adjusting fees, reimbursement rates, lengths
13 of stay, number of visits, or number of services, or making
14 any other adjustments necessary to comply with the

15 availability of moneys and any limitations or directions
16 provided for in the General Appropriations Act or chapter 216.

17 If necessary to safeguard the state's systems of providing
18 services to elderly and disabled persons and subject to the
19 notice and review provisions of s. 216.177, the Governor may
20 direct the Agency for Health Care Administration to amend the
21 Medicaid state plan to delete the optional Medicaid service
22 known as "Intermediate Care Facilities for the Developmentally
23 Disabled." Optional services may include:

24 (8) COMMUNITY MENTAL HEALTH SERVICES.--

25 (a) The agency may pay for rehabilitative services
26 provided to a recipient by a mental health or substance abuse
27 provider licensed by the agency and under contract with the
28 agency or the Department of Children and Family Services to
29 provide such services. Those services which are psychiatric
30 in nature shall be rendered or recommended by a psychiatrist,
31 and those services which are medical in nature shall be

1 rendered or recommended by a physician or psychiatrist. The
2 agency must develop a provider enrollment process for
3 community mental health providers which bases provider
4 enrollment on an assessment of service need. The provider
5 enrollment process shall be designed to control costs, prevent
6 fraud and abuse, consider provider expertise and capacity, and
7 assess provider success in managing utilization of care and
8 measuring treatment outcomes. Providers will be selected
9 through a competitive procurement or selective contracting
10 process. In addition to other community mental health
11 providers, the agency shall consider for enrollment mental
12 health programs licensed under chapter 395 and group practices
13 licensed under chapter 458, chapter 459, chapter 490, or
14 chapter 491. The agency is also authorized to continue
15 operation of its behavioral health utilization management
16 program and may develop new services if these actions are
17 necessary to ensure savings from the implementation of the
18 utilization management system. The agency shall coordinate the
19 implementation of this enrollment process with the Department
20 of Children and Family Services and the Department of Juvenile
21 Justice. The agency is authorized to utilize diagnostic
22 criteria in setting reimbursement rates, to preauthorize
23 certain high-cost or highly utilized services, to limit or
24 eliminate coverage for certain services, or to make any other
25 adjustments necessary to comply with any limitations or
26 directions provided for in the General Appropriations Act.

27 (b) The agency is authorized to implement
28 reimbursement and use management reforms in order to comply
29 with any limitations or directions in the General
30 Appropriations Act, which may include, but are not limited to:
31 prior authorization of treatment and service plans; prior

1 authorization of services: enhanced use review programs for
 2 highly used services; and limits on services for those
 3 determined to be abusing their benefit coverages. This
 4 paragraph expires July 1, 2002.

5 Section 28. In order to implement Specific
 6 Appropriation of the 2001-2002 General Appropriations
 7 Act, paragraph (g) is added to subsection (3) of section
 8 409.912, Florida Statutes, to read:

9 409.912 Cost-effective purchasing of health care.--The
 10 agency shall purchase goods and services for Medicaid
 11 recipients in the most cost-effective manner consistent with
 12 the delivery of quality medical care. The agency shall
 13 maximize the use of prepaid per capita and prepaid aggregate
 14 fixed-sum basis services when appropriate and other
 15 alternative service delivery and reimbursement methodologies,
 16 including competitive bidding pursuant to s. 287.057, designed
 17 to facilitate the cost-effective purchase of a case-managed
 18 continuum of care. The agency shall also require providers to
 19 minimize the exposure of recipients to the need for acute
 20 inpatient, custodial, and other institutional care and the
 21 inappropriate or unnecessary use of high-cost services.

22 (3) The agency may contract with:

23 (g) Children's clinic networks that provide care
 24 coordination and care management for Medicaid-eligible
 25 pediatric patients, primary care, authorization or specialty
 26 care, and other urgent and emergency care through organized
 27 clinics designed to service Medicaid eligibles under age 18.
 28 The networks shall provide after-hour operations, including
 29 evening and weekend hours, to promote, when appropriate, the
 30 use of the children's clinics rather than hospital emergency
 31 departments. This paragraph expires July 1, 2002.

Section 29. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, paragraph (f) of subsection (2) of section 409.9122, Florida Statutes, is amended to read:

409.9122 Mandatory Medicaid managed care enrollment; programs and procedures.--

(2)

(f) When a Medicaid recipient does not choose a managed care plan or MediPass provider, the agency shall assign the Medicaid recipient to a managed care plan or MediPass provider. Medicaid recipients who are subject to mandatory assignment but who fail to make a choice shall be assigned to managed care plans or provider service networks until an equal enrollment of 50 percent in MediPass and provider service networks and 50 percent in managed care plans is achieved. Once equal enrollment is achieved, the assignments shall be divided in order to maintain an equal enrollment in MediPass and managed care plans for the 2001-2002 ~~1998-1999~~ fiscal year. Thereafter, assignment of Medicaid recipients who fail to make a choice shall be based proportionally on the preferences of recipients who have made a choice in the previous period. Such proportions shall be revised at least quarterly to reflect an update of the preferences of Medicaid recipients. The agency shall also disproportionately assign Medicaid-eligible children in families who are required to but have failed to make a choice of managed-care plan or MediPass for their child and who are to be assigned to the MediPass program to children's clinic networks as described in s. 409.912(3)(g) and where available. The disproportionate assignment of children to children's clinic networks shall be made until the agency has determined

1 that the children's clinic networks have sufficient numbers to
 2 be economically operated. When making assignments, the agency
 3 shall take into account the following criteria:

4 1. A managed care plan has sufficient network capacity
 5 to meet the need of members.

6 2. The managed care plan or MediPass has previously
 7 enrolled the recipient as a member, or one of the managed care
 8 plan's primary care providers or MediPass providers has
 9 previously provided health care to the recipient.

10 3. The agency has knowledge that the member has
 11 previously expressed a preference for a particular managed
 12 care plan or MediPass provider as indicated by Medicaid
 13 fee-for-service claims data, but has failed to make a choice.

14 4. The managed care plan's or MediPass primary care
 15 providers are geographically accessible to the recipient's
 16 residence.

17 Section 30. The amendment of paragraph 409.9122(2)(f),
 18 Florida Statutes, by this act shall expire July 1, 2002, and
 19 the text of that paragraph shall revert to that in existence
 20 on June 30, 2001, except that any amendments to such text
 21 exacted other than by this act shall be preserved and continue
 22 to operate to the extent that such amendments are not
 23 dependent upon the portions of such text which expire pursuant
 24 to the provisions of this act. The Division of Statutory
 25 Revision of the Office of Legislative Services shall include
 26 in an appropriate reviser's bill any amendments to such
 27 subsection which are necessary to give effect to the
 28 legislative intent expressed in this section.

29 Section 31. In order to implement Specific
 30 Appropriation of the 2001-2002 General Appropriations
 31

Act, paragraph (k) of subsection (2) of section 409.9122,
Florida Statutes, is amended to read:

409.9122 Mandatory Medicaid managed care enrollment;
programs and procedures.--

(2)

(k)1. ~~Notwithstanding the provisions of paragraph (f),
and for the 2000-2001 fiscal year only, when a Medicaid
recipient does not choose a managed care plan or MediPass
provider, the agency shall assign the Medicaid recipient to a
managed care plan, except in those counties in which there are
fewer than two managed care plans accepting Medicaid
enrollees, in which case assignment shall be to a managed care
plan or a MediPass provider. Medicaid recipients in counties
with fewer than two managed care plans accepting Medicaid
enrollees who are subject to mandatory assignment but who fail
to make a choice shall be assigned to managed care plans until
an equal enrollment of 50 percent in MediPass and provider
service networks and 50 percent in managed care plans is
achieved. Once equal enrollment is achieved, the assignments
shall be divided in order to maintain an equal enrollment in
MediPass and managed care plans. When making assignments, the
agency shall take into account the following criteria:~~

a. A managed care plan has sufficient network capacity
to meet the need of members.

b. The managed care plan or MediPass has previously
enrolled the recipient as a member, or one of the managed care
plan's primary care providers or MediPass providers has
previously provided health care to the recipient.

c. The agency has knowledge that the member has
previously expressed a preference for a particular managed

1 care plan or MediPass provider as indicated by Medicaid
2 fee-for-service claims data, but has failed to make a choice.

3 d. The managed care plan's or MediPass primary care
4 providers are geographically accessible to the recipient's
5 residence.

6 e. The agency has authority to make mandatory
7 assignments based on quality of service and performance of
8 managed care plans.

9 2. This paragraph expires ~~is repealed on~~ July 1, 2002
10 ~~2001~~.

11 Section 32. In order to implement Specific
12 Appropriation of the 2001-2002 General Appropriations
13 Act, subsection (9) is added to section 409.904, Florida
14 Statutes, to read:

15 409.904 Optional payments for eligible persons.--The
16 agency may make payments for medical assistance and related
17 services on behalf of the following persons who are determined
18 to be eligible subject to the income, assets, and categorical
19 eligibility tests set forth in federal and state law. Payment
20 on behalf of these Medicaid eligible persons is subject to the
21 availability of moneys and any limitations established by the
22 General Appropriations Act or chapter 216.

23 (9) The agency may pay for cancer treatment pursuant
24 to the federal Breast and Cervical Cancer Prevention and
25 Treatment Act of 2000, screened through the National Breast
26 and Cervical Cancer Early Detection program, for eligible
27 women with incomes below 200 percent of the federal poverty
28 level and from ages 50 to 64. This subsection expires July 1,
29 2002.

30 Section 33. In order to implement Specific
31 Appropriation of the 2001-2002 General Appropriations

Act, paragraph (a) of subsection (3) of section 39.3065, Florida Statutes, is amended to read:

39.3065 Sheriffs of certain counties to provide child protective investigative services; procedures; funding.--

(3)(a) ~~Beginning in fiscal year 1999-2000,~~ The sheriffs of Pasco County, Manatee County, Broward County, ~~and~~ Pinellas County, and Seminole County have the responsibility to provide all child protective investigations in their respective counties. Beginning in fiscal year 2000-2001, the Department of Children and Family Services is authorized to enter into grant agreements with sheriffs of other counties to perform child protective investigations in their respective counties.

Section 34. The amendment of paragraph 39.3065(3)(a), Florida Statutes, by this act shall expire July 1, 2002, and the text of that paragraph shall revert to that in existence on June 30, 2001, except that any amendments to such text exacted other than by this act shall be preserved and continue to operate to the extent that such amendments are not dependent upon the portions of such text which expire pursuant to the provisions of this act. The Division of Statutory Revision of the Office of Legislative Services shall include in an appropriate reviser's bill any amendments to such subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 35. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, subsection (1) of section 414.045, Florida Statutes, is amended to read:

414.045 Cash assistance program.--Cash assistance families include any families receiving cash assistance

1 payments from the state program for temporary assistance for
2 needy families as defined in federal law, whether such funds
3 are from federal funds, state funds, or commingled federal and
4 state funds. Cash assistance families may also include
5 families receiving cash assistance through a program defined
6 as a separate state program.

7 (1) For reporting purposes, families receiving cash
8 assistance shall be grouped into ~~in~~ the following categories.
9 The department may develop additional groupings in order to
10 comply with federal reporting requirements, to comply with the
11 data-reporting needs of the board of directors of Workforce
12 Florida, Inc., or to better inform the public of program
13 progress. ~~Program reporting data shall include, but not~~
14 ~~necessarily be limited to, the following groupings:~~

15 (a) Work-eligible cases.--Work-eligible cases shall
16 include:

17 1. Families containing an adult or a teen head of
18 household, as defined by federal law. These cases are
19 generally subject to the work activity requirements provided
20 in s. 445.024 and the time limitations on benefits provided in
21 s. 414.105.

22 2. Families with a parent where the parent's needs
23 have been removed from the case due to sanction or
24 disqualification shall be considered work-eligible cases to
25 the extent that such cases are considered in the calculation
26 of federal participation rates or would be counted in such
27 calculation in future months.

28 3. Families participating in transition assistance
29 programs.
30
31

1 4. Families otherwise eligible for temporary cash
2 assistance that receive diversion services, a severance
3 payment, or participate in the relocation program.

4 (b) Child-only cases.--Child-only cases include cases
5 that do not have an adult or teen head of household as defined
6 in federal law. Such cases include:

7 1. ~~Child-only families with~~ Children in the care of
8 caretaker relatives where the caretaker relatives choose to
9 have their needs excluded in the calculation of the amount of
10 cash assistance.

11 2. Families in the Relative Caregiver Program as
12 provided in s. 39.5085.

13 3. Families in which the only parent in a
14 single-parent family or both parents in a two-parent family
15 receive supplemental security income (SSI) benefits under
16 Title XVI of the Social Security Act, as amended. To the
17 extent permitted by federal law, individuals receiving SSI
18 shall be excluded as household members in determining the
19 amount of cash assistance, and such cases shall not be
20 considered families containing an adult. Parents or caretaker
21 relatives who are excluded from the cash assistance group due
22 to receipt of SSI may choose to participate in work
23 activities. An individual who volunteers to participate in
24 work activity but whose ability to participate in work
25 activities is limited shall be assigned to work activities
26 consistent with such limitations. An individual who volunteers
27 to participate in a work activity may receive child care or
28 support services consistent with such participation.

29 4. Families where the only parent in a single-parent
30 family or both parents in a two-parent family are not eligible
31 for cash assistance due to immigration status or other

1 ~~limitation requirements~~ of federal law. To the extent required
 2 by federal law, such cases shall not be considered families
 3 containing an adult.

4 5. To the extent permitted by federal law and subject
 5 to appropriations, special needs children who have been
 6 adopted pursuant to s. 409.166, and whose adopting family
 7 qualifies as a needy family under the State Plan for Temporary
 8 Assistance for Needy Families. Notwithstanding any provision
 9 to the contrary in s. 414.075, s. 414.085, or s. 414.096, a
 10 family shall be considered a needy family if:

11 a. The family is determined by the department to have
 12 an income below 200 percent of the federal poverty level;

13 b. The family meets the requirements of subsections
 14 (2) and (3) of s. 414.095 related to residence, citizenship,
 15 or eligible noncitizen status; and

16 c. The family provides any information necessary to
 17 meet federal reporting requirements specified under Part A of
 18 Title IV of the Social Security Act.

19
 20 Families described in subparagraph 1., subparagraph 2., or
 21 subparagraph 3. may receive child care assistance or other
 22 supports or services so that the children may continue to be
 23 cared for in their own homes or the homes of relatives. Such
 24 assistance or services may be funded from the temporary
 25 assistance for needy families block grant to the extent
 26 permitted under federal law and to the extent ~~permitted by~~
 27 ~~appropriation of funds~~ have been provided in the General
 28 Appropriations Act.

29 Section 36. The amendment of subsection 414.045(1),
 30 Florida Statutes, by this act shall expire July 1, 2002, and
 31 the text of that subsection shall revert to that in existence

1 on June 30, 2001, except that any amendments to such text
2 exacted other than by this act shall be preserved and continue
3 to operate to the extent that such amendments are not
4 dependent upon the portions of such text which expire pursuant
5 to the provisions of this act. The Division of Statutory
6 Revision of the Office of Legislative Services shall include
7 in an appropriate reviser's bill any amendments to such
8 subsection which are necessary to give effect to the
9 legislative intent expressed in this section.

10 Section 37. In order to implement Specific
11 Appropriation of the 2001-2002 General Appropriations
12 Act, it is the intent of the Legislature to improve services
13 and local participation in community-based care initiatives by
14 fostering community support and providing enhanced prevention
15 and in-home services, thereby reducing the risk otherwise
16 faced by lead agencies. Therefore, there is established a
17 community partnership matching grant program to be operated by
18 the Department of Children and Family Services for the purpose
19 of encouraging local participation in community-based care for
20 child welfare. Any children's services council or other local
21 government entity that makes a financial commitment to a
22 community-based care lead agency is eligible for a grant
23 subject to the following conditions: upon proof that the
24 children's services council has provided the selected lead
25 agency at least \$825,000 in start-up funds, from any local
26 resources otherwise available to it, the total amount of local
27 contribution may be matched on a two-for-one basis up to a
28 maximum amount of \$2 million per council. Awarded matching
29 grant funds may be used for any prevention or in-home services
30 provided by the children's services council or other local
31 government entity that meets

1 temporary-assistance-for-needy-families' eligibility
2 requirements and can be reasonably expected to reduce the
3 number of children entering the child welfare system. In order
4 to ensure necessary flexibility for the development, start-up,
5 and ongoing operation of community-based care initiatives, the
6 notice period required for any budget action authorized by the
7 provisions of section 20.19(5)(b), Florida Statutes, is waived
8 for the family safety program; however, the Department of
9 Children and Family Services must provide copies of all such
10 actions to the Executive Office of the Governor and
11 Legislature within 72 hours of their occurrence. Funding
12 available for the matching grant program is subject to
13 legislative appropriation of nonrecurring
14 temporary-assistance-for-needy-families funds provided for the
15 purpose. This sections expires July 1, 2002.

16 Section 38. In order to implement Specific
17 Appropriation of the 2001-2002 General Appropriations
18 Act, for purposes of meeting the maintenance of effort for the
19 temporary-assistance-for-needy-families (TANF) block grant,
20 the Partnership for School Readiness shall ensure that
21 \$106,936,783 in state funds are expended in accordance with
22 the federal requirements and limitations of Part A of Title VI
23 of the Social Security Act, as amended. This shall not be
24 construed as a transfer of funds, but rather as authorization
25 to designate these funds as TANF maintenance of effort. Any
26 expenditures of general revenue or other state funds, which
27 are determined by the director of the agency or his or her
28 designee to be qualified state expenditures to meet the
29 maintenance of effort requirement for the
30 temporary-assistance-for-needy-families block grant, must be
31 made in accordance with the federal requirements and

1 limitations of Part A of Title IV of the Social Security Act,
 2 as amended. The director or his or her designee shall certify
 3 to the Department of Children and Family Services that
 4 controls are in place to ensure that such funds are expended
 5 in accordance with the requirements and limitations of federal
 6 law and that any reporting requirements of federal law are
 7 met. If House Bill 977 or similar legislation is enacted, the
 8 Agency for Workforce Innovation or the entity administering
 9 the school readiness program shall ensure that state funds are
 10 expended for purposes of meeting the state's maintenance of
 11 effort requirement for temporary-assistance-for-needy-families
 12 (TANF). Funds are provided in Specific Appropriation _____ and
 13 _____ (G/A-Child Care-WAGES and G/A-Pre-School Projects) to
 14 provide slots for children participating in the school
 15 readiness initiative. From these funds, the Agency for
 16 Workforce Innovation or administering entity is required to
 17 expend at least \$77,736,783 of WAGES Child Care funds and
 18 \$29,200,000 of Pre-Kindergarten funds as maintenance of effort
 19 for temporary-assistance-to-needy-family (TANF) funds. It is
 20 the responsibility of any entity to which such funds are
 21 appropriated to obtain the required certification and
 22 documentation prior to any expenditure of funds. This section
 23 expires July 1, 2002.

24 Section 39. In order to implement Specific
 25 Appropriations _____ of the 2001-2002 General Appropriations
 26 Act, notwithstanding the provisions of chapter 216, Florida
 27 Statutes, the Department of Children and Family Services is
 28 authorized to transfer funds as necessary to achieve a
 29 successful transition of staff between that department and the
 30 Department of Juvenile Justice. Such transfers of funds shall
 31 only require a 3-day consultation period with the House and

Senate Appropriations Committees prior to their implementation. The Department of Juvenile Justice is directed to give priority for employment to persons employed at G. Pierce Wood Memorial Hospital (GPW). The Departments of Juvenile Justice and Children and Family Services are also directed to require the contracted Department of Juvenile Justice programs in the catchment area in the contracted sexually violent predator program to give employees from GPW priority for employment. This section expires July 1, 2002.

Section 40. In order to implement Specific Appropriation _____ of the 2001-2002 General Appropriations Act, subsection (8) of section 925.037, Florida Statutes, is amended to read:

925.037 Reimbursement of counties for fees paid to appointed counsel; circuit conflict committees.--

(8) Notwithstanding any other provision of this section to the contrary, and for the 2001-2002 ~~2000-2001~~ fiscal year only, funds allocated pursuant to this section shall be distributed to the counties in the designated circuits by the state courts system. This subsection expires ~~is repealed on~~ July 1, 2002 ~~2001~~.

Section 41. In order to implement Specific Appropriation _____ of the 2001-2002 General Appropriations Act, section 25.402, Florida Statutes, is amended to read:

25.402 County Article V Trust Fund.--

(1)(a) The trust fund moneys in the County Article V Trust Fund, administered by the Supreme Court, may ~~must~~ be used to compensate counties for the costs they incur under Article V of the State Constitution in operating the state courts system, including the costs they incur in providing and maintaining court facilities.

(b) The Supreme Court shall adopt an allocation and disbursement plan for the operation of the trust fund and the expenditure of moneys deposited in the trust fund. The Supreme Court shall include the plan in its legislative budget request. A committee of 15 people shall develop and recommend the allocation and disbursement plan to the Supreme Court. The committee shall be composed of:

1. Six persons appointed by the Florida Association of Counties, as follows:

a. Two persons residing in counties with populations fewer ~~less~~ than 85,000 ~~75,000~~.

b. Two persons residing in counties with populations greater than 84,999 ~~74,999~~, but fewer ~~less~~ than 700,000.

c. Two persons residing in counties with populations greater than 699,999.

2. Six persons appointed by the Chief Justice of the Supreme Court, as follows:

a. Two persons residing in counties with populations fewer ~~less~~ than 85,000 ~~75,000~~.

b. Two persons residing in counties with populations greater than 84,999 ~~74,999~~, but fewer ~~less~~ than 700,000.

c. Two persons residing in counties with populations greater than 699,999.

3. Three persons appointed by the Florida Association of Court Clerks and Comptrollers, as follows:

a. One person residing in a county with a population fewer ~~less~~ than 85,000 ~~75,000~~.

b. One person residing in a county with a population greater than 84,999 ~~74,999~~, but fewer ~~less~~ than 700,000.

c. One person residing in a county with a population greater than 699,999.

1
2 The allocation and disbursement plan shall include provisions
3 to compensate counties with fewer than 85,000 ~~75,000~~ residents
4 for court facility needs.

5 (c) Amendments to the approved operating budget for
6 expenditures from the County Article V Trust Fund must be
7 approved in accordance with the provisions of s. 216.181. The
8 total amount disbursed from the County Article V Trust Fund
9 may not exceed the amount authorized by the General
10 Appropriations Act.

11 (d) Effective July 1, 2001 ~~1998~~, moneys generated from
12 civil penalties distributed under s. 318.21(2)(h) shall be
13 deposited in the trust fund for the following purposes:

14 1. Funds paid to counties with populations fewer ~~less~~
15 than 85,000 ~~75,000~~ shall be grants-in-aid to be used, in
16 priority order, for: operating expenditures of the offices of
17 the state attorneys and public defenders; consulting or
18 architectural studies related to the improvement of courthouse
19 facilities; improving court facilities to ensure compliance
20 with the Americans with Disabilities Act and other federal or
21 state requirements; other renovations in court facilities;
22 improvements in court security; and expert witness fees in
23 criminal cases, court reporting and transcribing costs in
24 criminal cases, and costs associated with the appointment of
25 special public defenders.

26 2. Funds paid to counties with populations exceeding
27 84,999 ~~74,999~~ shall be grants-in-aid to be used, in priority
28 order, for operating expenditures of the offices of the state
29 attorneys and public defenders, costs paid by the county for
30 expert witness fees in criminal cases, court reporting and
31

transcribing costs in criminal cases, and costs associated with the appointment of special public defenders.

(2) This section expires ~~is repealed~~ June 30, 2002.

Section 42. In order to implement Specific Appropriation ____ of the 2001-2002 General Appropriations Act, subsection (4) of section 216.262, Florida Statutes, is amended to read:

216.262 Authorized positions.--

(4) Notwithstanding the provisions of this chapter on increasing the number of authorized positions, and for the 2001-2002 ~~2000-2001~~ fiscal year only, if the actual inmate population of the Department of Corrections exceeds by 2 percent for 2 consecutive months or more the inmate population projected by the Criminal Justice Estimating Conference on March 2, 2000, the Executive Office of the Governor may request positions in excess of the number authorized by the Legislature and sufficient funding from the Working Capital Fund to operate the additional prison bed capacity necessary to accommodate the actual inmate population. Such request is subject to the budget amendment and consultation provisions of this chapter. This subsection expires ~~is repealed on~~ July 1, 2002 ~~2001~~.

Section 43. In order to implement Specific Appropriations _____, _____, and _____ of the 2001-2002 General Appropriations Act, subsection (1) of section 938.01, Florida Statutes, as amended by section 39 of chapter 2000-171, Laws of Florida, is amended to read:

938.01 Additional Court Cost Clearing Trust Fund.--

(1) All courts created by Art. V of the State Constitution shall, in addition to any fine or other penalty, assess \$3 as a court cost against every person convicted for

1 violation of a state penal or criminal statute or convicted
2 for violation of a municipal or county ordinance. Any person
3 whose adjudication is withheld pursuant to the provisions of
4 s. 318.14(9) or (10) shall also be assessed such cost. In
5 addition, \$3 from every bond estreature or forfeited bail bond
6 related to such penal statutes or penal ordinances shall be
7 forwarded to the Treasurer as described in this subsection.
8 However, no such assessment may be made against any person
9 convicted for violation of any state statute, municipal
10 ordinance, or county ordinance relating to the parking of
11 vehicles.

12 (a) All such costs collected by the courts shall be
13 remitted to the Department of Revenue, in accordance with
14 administrative rules adopted by the executive director of the
15 Department of Revenue, for deposit in the Additional Court
16 Cost Clearing Trust Fund and shall be earmarked to the
17 Department of Law Enforcement for distribution as follows:

18 1. Two dollars and seventy-five cents of each \$3
19 assessment shall be deposited in the Criminal Justice
20 Standards and Training Trust Fund, and the remaining 25 cents
21 of each such assessment shall be deposited into the Department
22 of Law Enforcement Operating Trust Fund and shall be disbursed
23 to the Department of Law Enforcement.

24 2. Ninety-two percent of the money distributed to the
25 Additional Court Cost Clearing Trust Fund pursuant to s.
26 318.21 shall be earmarked to the Department of Law Enforcement
27 for deposit in the Criminal Justice Standards and Training
28 Trust Fund, and 8 percent of such money shall be deposited
29 into the Department of Law Enforcement Operating Trust Fund
30 and shall be disbursed to the Department of Law Enforcement.
31

(b) The funds deposited in the Criminal Justice Standards and Training Trust Fund and the Department of Law Enforcement Operating Trust Fund may be invested. Any interest earned from investing such funds and any unencumbered funds remaining at the end of the budget cycle shall remain in the respective trust fund until the following year.

(c) All funds in the Criminal Justice Standards and Training Trust Fund earmarked to the Department of Law Enforcement shall be disbursed only in compliance with s. 943.25(9).

Section 44. The amendment of subsection (1) of section 938.01, Florida Statutes, by this act shall expire on July 1, 2002, and the text of that subsection shall revert to that in existence on June 30, 2000, except that any amendments to such text enacted other than by this act shall be preserved and continue to operate to the extent that such amendments are not dependent upon the portions of such text which expire pursuant to the provisions of this act. The Division of Statutory Revision of the Office of Legislative Services shall include in an appropriate reviser's bill any amendments to such subsection which are necessary to give effect to the legislative intent expressed in this section.

Section 45. In order to implement Specific Appropriations _____, _____, and _____ of the 2001-2002 General Appropriations Act, subsection (1) of section 943.25, Florida Statutes, as amended by section 41 of chapter 2000-171, Laws of Florida, is amended to read:

943.25 Criminal justice trust funds; source of funds; use of funds.--

(1) The Department of Law Enforcement may approve, for disbursement from the Department of Law Enforcement Operating

1 Trust Fund, those appropriated sums necessary and required by
 2 the state for grant matching, implementing, administering,
 3 evaluating, and qualifying for such federal funds.

4 Disbursements from the trust fund for the purpose of
 5 supplanting state general revenue funds may not be made
 6 without specific legislative appropriation.

7 Section 46. The amendment of subsection (1) of section
 8 943.25, Florida Statutes, by this act shall expire on July 1,
 9 2002, and the text of that subsection shall revert to that in
 10 existence on June 30, 2000, except that any amendments to such
 11 text enacted other than by this act shall be preserved and
 12 continue to operate to the extent that such amendments are not
 13 dependent upon the portions of such text which expire pursuant
 14 to the provisions of this act. The Division of Statutory
 15 Revision of the Office of Legislative Services shall include
 16 in an appropriate reviser's bill any amendments to such
 17 subsection which are necessary to give effect to the
 18 legislative intent expressed in this section.

19 Section 47. (1) In order to implement Specific
 20 Appropriations _____, _____, and _____ of the 2001-2002
 21 General Appropriations Act, and for the 2001-2002 fiscal year
 22 only, the Criminal Justice Program shall be transferred from
 23 the Department of Community Affairs to the Department of Law
 24 Enforcement by a type two transfer, pursuant to section
 25 20.06(2), Florida Statutes. The Criminal Justice Program so
 26 transferred is comprised of the Byrne State and Local Law
 27 Enforcement Assistance Program, Local Law Enforcement Block
 28 Grants, Drug-Free Communities Program, Residential Substance
 29 Abuse Treatment for State Prisoners, the Bulletproof Vest
 30 Program, the Guantanamo Bay Refugee and Entrant Assistance
 31 Program, the National Criminal History Improvement Program,

1 and the Violent Offender Incarceration and Truth-in-Sentencing
 2 Program.

3 (2)(a) In order to implement Specific Appropriations
 4 _____, _____, and _____ of the 2001-2002 General
 5 Appropriations Act, and for the 2001-2002 fiscal year only,
 6 the Prevention of Domestic and Sexual Violence Program is
 7 transferred from the Department of Community Affairs to the
 8 Department of Children and Family Services by a type two
 9 transfer, pursuant to section 20.06(2), Florida Statutes. The
 10 Domestic and Sexual Violence Program so transferred is
 11 comprised of the Governor's Task Force on Domestic and Sexual
 12 Violence and the Violence Against Women Program.

13 (b) From the funds deposited into the Department of
 14 Law Enforcement Operating Trust Fund pursuant to section
 15 938.01(1)(a)1. and 2., Florida Statutes, the Department of Law
 16 Enforcement shall transfer funds to the Department of Children
 17 and Family Services to be used as matching funds for the
 18 administration of the Prevention of Domestic and Sexual
 19 Violence Program transferred from the Department of Community
 20 Affairs. The amount of the transfer for fiscal year 2001-2002
 21 shall be determined by the Governor's Office of Planning and
 22 Budgeting, in consultation with the Department of Community
 23 Affairs, the Department of Law Enforcement, and the Department
 24 of Children and Family Services, and shall be based on the
 25 historic use of these funds and current needs of the
 26 Prevention of Domestic and Sexual Violence Program.

27 (3) This section expires July 1, 2002.

28 Section 48. In order to implement Specific
 29 Appropriations of the 2001-2002 General Appropriations
 30 Act, notwithstanding any provisions of section 288.816,
 31 Florida Statutes, to the contrary, and for the 2001-2002

1 fiscal year only, Enterprise Florida, Inc., shall operate the
 2 sister city and sister state program in a manner consistent
 3 with the provisions prescribed in such section.

4 Section 49. In order to implement Specific
 5 Appropriations of the 2001-2002 General Appropriations
 6 Act, notwithstanding any provisions of section 288.0251,
 7 Florida Statutes, to the contrary, and for the 2001-2002
 8 fiscal year only, Enterprise Florida, Inc., may contract for
 9 the implementation of Florida's international volunteer corps
 10 in a manner consistent with the provisions prescribed in such
 11 section.

12 Section 50. In order to implement Specific
 13 Appropriations of the 2001-2002 General Appropriations
 14 Act, notwithstanding any provision of section 163.3184(8),
 15 Florida Statutes, to the contrary, and for the 2001-2002
 16 fiscal year only, the Department of Community Affairs may use
 17 the internet or other methods to issue notice of intent as
 18 related to comprehensive plan amendments.

19 Section 51. In order to implement Specific
 20 Appropriations _____ of the 2001-2002 General
 21 Appropriations Act, subsection (4) of section 287.161, Florida
 22 Statutes, is amended to read:

23 287.161 Executive aircraft pool; assignment of
 24 aircraft; charge for transportation.--

25 (4) Notwithstanding the requirements of subsections
 26 (2) and (3) and for the 2001-2002 ~~2000-2001~~ fiscal year only,
 27 the Department of Management Services shall charge all persons
 28 receiving transportation from the executive aircraft pool a
 29 rate not less than the mileage allowance fixed by the
 30 Legislature for the use of privately owned vehicles. Fees
 31 collected for persons traveling by aircraft in the executive

1 aircraft pool shall be deposited into the Bureau of Aircraft
 2 Trust Fund and shall be expended for costs incurred to operate
 3 the aircraft management activities of the department. It is
 4 the intent of the Legislature that the executive aircraft pool
 5 be operated on a full cost recovery basis, less available
 6 funds. This subsection expires July 1, 2002 ~~2001~~.

7 Section 52. In order to implement Specific
 8 Appropriation _____ of the 2001-2002 General Appropriations
 9 Act, subsection (1) of section 403.709, Florida Statutes, is
 10 amended to read:

11 403.709 Solid Waste Management Trust Fund; use of
 12 waste tire fee moneys; waste tire site management.--

13 (1) There is created the Solid Waste Management Trust
 14 Fund, to be administered by the department for the purposes
 15 of:

16 (a) Funding solid waste activities of the department,
 17 such as providing technical assistance to local governments,
 18 performing solid waste regulatory and enforcement functions,
 19 preparing solid waste documents, and implementing solid waste
 20 education programs.

21 (b) Making grants and awards to local governments as
 22 provided in s. 403.7095.

23 (c) Providing funding for research, demonstration, and
 24 training by state universities, community colleges, and
 25 independent nonprofit colleges and universities within the
 26 state which are accredited by the Southern Association of
 27 Colleges and Schools, and other organizations that can
 28 reasonably demonstrate the capability to carry out such
 29 projects. Of the annual amounts appropriated by the
 30 Legislature for the Solid Waste Management Trust Fund, up to 5
 31 percent may be reserved by the secretary and used to fund on a

1 matching basis research, demonstration, and training projects
 2 related to solid waste management. Those projects may
 3 include, but are not limited to, undertakings such as market
 4 development for recycled materials, composting techniques and
 5 use, and plastic materials.

6 (d) For the 2001-2002 fiscal year only, the use of
 7 funds allocated to the Solid Waste Management Trust Fund shall
 8 be as provided in the General Appropriations Act. The sum of
 9 \$33.8 million is transferred for water projects. This
 10 paragraph expires July 1, 2002.

11 Section 53. In order to implement Specific
 12 Appropriation _____ of the 2001-2002 General Appropriations
 13 Act, subsection (8) of section 403.7095, Florida Statutes, is
 14 amended to read:

15 403.7095 Solid waste management grant program.--

16 (8) Notwithstanding the provisions of this section,
 17 for fiscal year 2001-2002 ~~2000-2001~~ only, the department shall
 18 provide solid waste management and recycling grants only to
 19 counties with populations under 100,000. Such grants must be
 20 with at least 80 percent of the level of funding they received
 21 in fiscal year 2000-2001 ~~1997-1998 for solid waste management~~
 22 ~~and recycling grants.~~ This subsection expires ~~is repealed on~~
 23 July 1, 2002 ~~2001~~.

24 Section 54. In order to implement Specific
 25 Appropriations _____ and _____ of the 2001-2002 General
 26 Appropriations Act, subsection (11) of section 373.59, Florida
 27 Statutes, is amended to read:

28 373.59 Water Management Lands Trust Fund.--

29 (11) Notwithstanding any provision of this section to
 30 the contrary, and for the 2001-2002 ~~2000-2001~~ fiscal year
 31 only, the governing board of a water management district may

request, and the Secretary of Environmental Protection shall release upon such request, moneys allocated to the districts pursuant to subsection (8) for the purpose of carrying out the purposes of s. 373.0361, s. 375.0831, s. 373.139, or ss. 373.451-373.4595 and for legislatively authorized land acquisition and water restoration initiatives. No funds may be used pursuant to this subsection until necessary debt service obligations, requirements for payments in lieu of taxes, and land management obligations that may be required by this chapter are provided for. This subsection expires ~~is repealed~~ ~~on~~ July 1, 2002 ~~2001~~.

Section 55. In order to implement Specific Appropriation of the 2001-2002 General Appropriations Act, paragraph (b) of subsection (1) of section 252.373, Florida Statutes, is amended to read:

252.373 Allocation of funds; rules.--

(1)

(b) Notwithstanding the provisions of paragraph (a), and for the 2001-2002 ~~2000-2001~~ fiscal year only, up to \$2 ~~\$4~~ million of the unencumbered balance of the Emergency Management, Preparedness, and Assistance Trust Fund shall be utilized to improve, and increase the number of, disaster shelters within the state and improve local disaster preparedness. This paragraph expires ~~is repealed~~ on July 1, 2002 ~~2001~~.

Section 56. In order to implement section ____ of the 2001-2002 General Appropriations Act, subsection (7) of section 110.12315, Florida Statutes, is amended to read:

110.12315 Prescription drug program.--The state employees' prescription drug program is established. This program shall be administered by the Department of Management

Services, according to the terms and conditions of the plan as established by the relevant provisions of the annual General Appropriations Act and implementing legislation, subject to the following conditions:

(7) Notwithstanding the provisions of subsections (1) and (2), under the state employees' prescription drug program copayments must be made as follows:

~~(a) For the period July 1, 2000, through December 31, 2000:~~

~~1. For generic drug with card.....\$7.~~

~~2. For brand name drug with card.....\$20.~~

~~3. For generic mail order drug with card.....\$7.~~

~~4. For brand name mail order drug with card.....\$20.~~

(a)~~(b)~~ Effective January 1, 2001:

1. For generic drug with card.....\$7.

2. For preferred brand name drug with card.....\$20.

3. For nonpreferred brand name drug with card.....\$35.

4. For generic mail order drug with card.....\$10.50.

5. For preferred brand name mail order drug with card.....\$30.

6. For nonpreferred brand name drug with card..\$52.50.

(b)~~(c)~~ The Department of Management Services shall create a preferred brand name drug list to be used in the administration of the state employees' prescription drug program.

This subsection expires July 1, 2002 ~~2001~~.

Section 57. In order to implement section ____ of the 2001-2002 General Appropriations Act, section 110.1239, Florida Statutes, is amended to read:

110.1239 State group health insurance program funding.--For the 2001-2002 ~~2000-2001~~ fiscal year only, it is the intent of the Legislature that the state group health insurance program be managed, administered, operated, and funded in such a manner as to maximize the protection of state employee health insurance benefits. Inherent in this intent is the recognition that the health insurance liabilities attributable to the benefits offered state employees should be fairly, orderly, and equitably funded. Accordingly:

(1) The division shall determine the level of premiums necessary to fully fund the state group health insurance program for the next fiscal year. Such determination shall be made after each revenue estimating conference on health insurance as provided in s. 216.136(1), but not later than December 1 and April 1 of each fiscal year.

(2) The Governor, in the Governor's recommended budget, shall provide premium rates necessary for full funding of the state group health insurance program, and the Legislature shall provide in the General Appropriations Act for a premium level necessary for full funding of the state group health insurance program.

(3) For purposes of funding, any additional appropriation amounts allocated to the state group health insurance program by the Legislature shall be considered as a state contribution and thus an increase in the state premiums.

(4) This section expires ~~is repealed on~~ July 1, 2002 ~~2001~~.

Section 58. A section of this act that implements a specific appropriation or specifically identified proviso language in the 2001-2002 General Appropriations Act is void if the specific appropriation or specifically identified

1 proviso language is vetoed. A section of this act that
2 implements more than one specific appropriation or more than
3 one portion of specifically identified proviso language in the
4 2001-2002 General Appropriations Act is void if all the
5 specific appropriations or portions of specifically identified
6 proviso language are vetoed.

7 Section 59. If any other act passed during the 2001
8 Regular Session of the Legislature or any extension thereof
9 contains a provision that is substantively the same as a
10 provision in this act, but that removes or is otherwise not
11 subject to the future repeal applied to such provision by this
12 act, the Legislature intends that the provision in the other
13 act shall take precedence and shall continue to operate,
14 notwithstanding the future repeal provided by this act.

15 Section 60. The agency performance measures and
16 standards in the document entitled "Senate Approved Agency
17 Performance Measures and Standards for Fiscal Year 2001-02"
18 dated March 19, 2001, and filed with the Secretary of the
19 Senate are incorporated by reference. Such performance
20 measures and standards are directly linked to the
21 appropriations made in the General Appropriations Act for
22 fiscal year 2001-2002, as required by the Government
23 Performance and Accountability Act of 1994. State agencies are
24 directed to revise their Long-Range Program Plans required
25 under section 216.013, Florida Statutes, to be consistent with
26 these performance measures and standards.

27 Section 61. If any provision of this act or its
28 application to any person or circumstance is held invalid, the
29 invalidity shall not affect other provisions or applications
30 of the act which can be given effect without the invalid
31

1 provision or application, and to this end the provisions of
2 this act are declared severable.

3 Section 62. This act shall take effect July 1, 2001;
4 or, in the event this act fails to become a law until after
5 that date, it shall take effect upon becoming a law and shall
6 operate retroactively to July 1, 2001.
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SENATE SUMMARY

Implements the 2001-2002 General Appropriations Act.