

**Conference Committee on  
Health & Human Services Appropriations/  
Health Care Appropriations**

**Proviso (Senate Offer #1)**

**Wednesday, April 21, 2010  
8:00 a.m.  
212 Knott Building (Webster Hall)**

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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The moneys contained herein are appropriated from the named funds to the Agency for Health Care Administration, Agency for Persons with Disabilities, Department of Children and Families, Department of Elder Affairs, Department of Health, and the Department of Veterans' Affairs as the amounts to be used to pay the salaries, other operational expenditures and fixed capital outlay of the named agencies.

IDENTICAL The moneys contained herein are appropriated from the named funds to the Agency for Health Care Administration, Agency for Persons with Disabilities, Department of Children and Families, Department of Elder Affairs, Department of Health, and the Department of Veterans' Affairs as the amounts to be used to pay the salaries, other operational expenditures and fixed capital outlay of the named agencies.

AGENCY FOR HEALTH CARE ADMINISTRATION  
PROGRAM: ADMINISTRATION AND SUPPORT

151 OTHER PERSONAL SERVICES

From the funds in Specific Appropriation 151, \$257,000 in nonrecurring administrative trust funds is provided to assist with the planning and implementation of a State Health Information Exchange (HIE) Cooperative Agreement program.

Senate From the funds in Specific Appropriation 151, \$408,903 in nonrecurring administrative trust funds is provided to assist with the planning and implementation of a Florida Health Information Exchange (HIE) Infrastructure.

152 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$9,256 from the General Revenue Fund and \$126,077 from the Administrative Trust Fund in Specific Appropriation 152 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission based on the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

STATEWIDE  
ISSUE

From the funds in Specific Appropriation 156A and 156B, \$5,912,752  
4,688,977 from the Administrative Trust Fund is provided to contract  
with independent consultants and vendors to develop implementation plans  
and to implement for the Medicaid Provider Incentive program. Of these  
funds, \$4,300,000 is contingent upon the receipt of federal funds from  
the American Recovery and Reinvestment Act of 2009 and shall be held in  
reserve. The agency is directed to submit a budget amendment in  
accordance with the provisions of chapter 216, Florida Statutes,  
requesting release of these funds upon receipt of an official grant  
award for the implementation phase of the Medicaid Provider Incentive  
program.

Accept  
House  
Offer

154 SPECIAL CATEGORIES  
CONTRACTED SERVICES

Senate From the funds in Specific Appropriation 154, \$10,000,000 from the Administrative Trust Fund is provided for the creation of a Florida Health Information Exchange Infrastructure. The agency shall issue an Invitation to Negotiate by July 15, 2010, and award the contract to a vendor who can demonstrate the expertise to design and create a state infrastructure for Health Information Exchange through an integrated solution leveraging the ongoing federal investments to ensure meaningful use of health information. The infrastructure must ensure interoperability with the established National Health Information

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157 DATA PROCESSING SERVICES TECHNOLOGY RESOURCE CENTER - DEPARTMENT OF MANAGEMENT SERVICES	STATEWIDE ISSUE	Network using national standards as the first step in implementing a Florida Health Information Exchange. The infrastructure must include open source technologies where appropriate, give the highest priority to privacy, security, and interoperability with existing and future electronic patient medical records.
	STATEWIDE ISSUE	From the funds in Specific Appropriation 157, the Agency for Health Care Administration shall develop and submit a transition plan by October 1, 2010, to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government & Health Care and Senate Policy and Steering Committee on Ways and Means for the relocation and consolidation of the computing services and associated resources, located in the Fort Knox Center to a state primary data center by June 30, 2012, pursuant to s.282.201(2)(d)1.e., Florida Statutes. The plan shall be in accordance with requirements of the ABIT, consistent with applicable federal guidelines, including a recommendation identifying the state primary data center where the agency proposes to transfer its data center service functions, based upon the results of a cost benefit analysis coordinated with the ABIT.
	STATEWIDE ISSUE	The agency shall work with the ABIT and the state primary data centers in developing the plan that shall, at a minimum, include an inventory of all resources, including but not limited to, all computing equipment; a description of resources for computing services proposed to remain in the department; the budget, full time personnel, and contracted services associated with the costs of its current computing services; the necessary budget adjustments required to accomplish the transfer of computing resources; and a timetable with significant milestones for the completion of the relocation and consolidation.
	STATEWIDE ISSUE Senate Changes	<u>By September 1, 2010, the agency shall execute a service level agreement, pursuant to s. 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the Southwood Shared Resource Center. If the agency is unable to complete and execute a service level agreement with that date, the agency shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government and Health Care and the Senate Policy and Steering Committee or and Means within five working days explaining the specific issues preventing execution, and describing the agency's plan and schedule for resolving the issues.</u>
PROGRAM: HEALTH CARE SERVICES CHILDREN'S SPECIAL HEALTH CARE	IDENTICAL	Funds in Specific Appropriations 158 through 163 are provided to operate the Florida KidCare Program. The Executive Office of the Governor may authorize transfer of these resources between programs or agencies pursuant to chapter 216, Florida Statutes, based on projections from the Social Services Estimating Conference.

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158 SPECIAL CATEGORIES  
GRANTS AND AIDS - FLORIDA HEALTHY KIDS CORPORATION

Funds in Specific Appropriations 158 and 161 are provided to contract with the Florida Healthy Kids Corporation to provide comprehensive health insurance coverage, including dental services, to Title XXI children eligible under the Florida KidCare Program and pursuant to section 624.91, Florida Statutes. The corporation shall use local funds to serve non-Title XXI children that are eligible for the program pursuant to section 624.91(3)(b), Florida Statutes. The corporation shall return unspent local funds collected in Fiscal Year 2009-2010 to provide premium assistance for non-Title XXI eligible children based on a formula developed by the corporation.

IDENTICAL

Funds in Specific Appropriations 158 and 161 are provided to contract with the Florida Healthy Kids Corporation to provide comprehensive health insurance coverage, including dental services, to Title XXI children eligible under the Florida KidCare Program and pursuant to section 624.91, Florida Statutes. The corporation shall use local funds to serve non-Title XXI children that are eligible for the program pursuant to section 624.91(3)(b), Florida Statutes. The corporation shall return unspent local funds collected in Fiscal Year 2009-2010 to provide premium assistance for non-Title XXI eligible children based on a formula developed by the corporation.

Funds in Specific Appropriation 158 reflect a reduction of \$3,186,287 from the General Revenue Fund and \$7,006,570 from the Medical Care Trust Fund to reflect a reduction to the per member per month rate adjustment for Florida Healthy Kids Corporation contracts for Fiscal Year 2010-2011. Average per member per month rates shall not exceed \$110.08 per member per month. The corporation shall amend its contracts, effective October 1, 2010, to achieve this reduction.

Accept  
House  
Offer

161 SPECIAL CATEGORIES  
GRANTS AND AIDS - FLORIDA HEALTHY KIDS CORPORATION DENTAL SERVICES

Funds in Specific Appropriation 161 are provided for Florida Healthy Kids dental services to be paid a monthly premium of no more than \$11.99 per member per month.

Accept  
House  
Offer

~~Funds in Specific Appropriation 161 are provided for Florida Healthy Kids dental services to be paid a monthly premium of no more than \$12 per member per month.~~

From the funds in Specific Appropriation 161, \$686,633 from the General Revenue Fund and \$1,509,890 from the Medical Care Trust Fund are provided to implement the mandatory provisions of the Children's Health Insurance Program Reauthorization Act of 2009.

Accept  
House  
Offer

EXECUTIVE DIRECTION AND SUPPORT SERVICES

Any requests pursuant to chapter 216, Florida Statutes, by the Agency for Health Care Administration to increase budget authority to expand existing programs using increased federal reimbursement through Low Income Pool (LIP) provisions and exemptions to hospital Medicaid rate ceilings shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue or tobacco settlement funds. The agency is authorized to seek federal Medicaid waivers as necessary to implement this provision.

IDENTICAL

From the funds in Specific Appropriations 164 through 175, any requests pursuant to chapter 216, Florida Statutes, by the Agency for Health Care Administration to increase budget authority to expand existing programs using increased federal reimbursement through Low Income Pool (LIP) provisions and exemptions to hospital Medicaid rate ceilings shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue or tobacco settlement funds. The agency is authorized to seek federal Medicaid waivers as necessary to implement this provision.

The agency is authorized to contract on a contingency fee basis for post-audit claims analyses to identify and recover overpayments for the Medicaid program. The state may pay the contractor a rate based on recoveries. The agency shall receive approval from the Centers for Medicare and Medicaid Services prior to entering into a contractual

IDENTICAL

From the funds in Specific Appropriations 164 through 175, the agency is authorized to contract on a contingency fee basis for post-audit claims analyses to identify and recover overpayments for the Medicaid program. The state may pay the contractor a rate based on recoveries. The agency shall receive approval from the Centers for Medicare and Medicaid prior

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relationship.		to entering into a contractual relationship.
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168 SPECIAL CATEGORIES  
PHARMACEUTICAL EXPENSE ASSISTANCE

Funds in Specific Appropriation 168 reflect a reduction of \$400,000 from the General Revenue Fund and represent the unused appropriation amount for the Pharmaceutical Expense Assistance Program based on current participation rates.	IDENTICAL	Funds in Specific Appropriation 168 reflect a reduction of \$400,000 from the General Revenue Fund and represent the unused appropriation amount for the Pharmaceutical Expense Assistance Program based on current participation rates.
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171 SPECIAL CATEGORIES  
CONTRACTED SERVICES

From the funds in Specific Appropriation 171, \$814,796 from the General Revenue Fund and \$814,796 from the Medical Care Trust Fund are provided to continue contracting with the existing provider for the Medicaid wireless handheld drug information database program.	Accept House Offer	<del>From the funds in Specific Appropriation 171, the agency may continue to contract with the existing provider for the Medicaid wireless handheld drug information database program.</del>
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From the funds in Specific Appropriation 171, \$2,600,000 in nonrecurring medical care trust funds is provided to contract with an independent consultant to perform a Medicaid Information Technology Architecture (MITA) self-assessment of Medicaid Fiscal Agent Operations.	Accept House Offer	
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MEDICAID SERVICES TO INDIVIDUALS

175 SPECIAL CATEGORIES

Senate	From the funds in Specific Appropriations 176 through 213, any entity that contracts with the agency on a prepaid or fixed sum bases as a managed care plan as defined in sections 409.9122 (2)(f) or 409.91211, Florida Statutes, shall post a surety bond with the agency equivalent to a one year guaranteed savings amount as specified in the contract. In lieu of a surety bond, the agency may establish an irrevocable account in which the vendor can fund an equivalent amount over a 6 month period. The purpose of the surety bond or account is to protect the agency should the entity terminate its contract with the agency prior to the contract scheduled end date. If the contract is terminated by the vendor for any reason, the agency shall pursue a claim against the surety bond or account for an early termination fee. The early termination fee shall be equal to administrative costs incurred by the state due to early termination and the differential of the guaranteed savings based on the original contract term and the corresponding termination date. The agency shall terminate the contracts of any vendor that does not make payment in full of the early termination fees described above to the state within 30 days.
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Senate	From the funds in Specific Appropriations 176 through 213, the agency shall implement patient centered medical home networks in Agency for Health Care Administration Areas 1 and 2 by October 1, 2010. The projects shall utilize primary care case management centrally managed by a primary care physician, and enhanced by medical home networks that use coordinated evidence based medicine and health information technology for data management and ongoing quality improvement. Each medical home
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network shall consist of a provider service network; health maintenance organization licensed under chapter 641 Florida Statutes, or other managed care entity authorized by Florida law to assume risk; or a partnership of health providers such as hospitals, county health departments, physicians, federally qualified health centers, and other health care providers in partnership with a managed care entity authorized by Florida law to assume risk, that contracts with the agency to provide medical services to Medicaid patients. No less than 85% of the capitated rate paid to the network by the agency shall be expended for direct patient care and the network shall be required to save the state at least 8 percent compared to the existing fee for service delivery system in agency Areas 1 and 2. Direct patient care shall mean payments to health care providers for the provision of direct medical services to a patient. Providers within the network shall be eligible to receive an enhanced case management fee and other incentives to encourage care coordination. The agency shall transition the existing Medipass patients in Areas 1 and 2 into the medical home networks, as approved by the federal Centers for Medicare and Medicaid Services, within 60 days of giving the patients advance notice of the pending transition. The agency is authorized to seek any necessary state plan amendment or federal waiver to implement this provision. The agency shall evaluate these networks and report on the following measures: the savings to the Medicaid Program, provider participation, patient satisfaction, the percent of the capitation payment spent on direct patient care, and the quality of the medical care provided to Medicaid patients enrolled in the networks. The agency shall issue a report on these measures to the Legislature and the public prior to October 1, 2011, and a final assessment shall be submitted by October 1, 2012.

Senate From the funds in Specific Appropriations 176 through 223, the agency shall prepare a federal Medicaid waiver to permit the state, through legislative enactment, to limit annual spending on the Medicaid program to the amount appropriated in the state budget. The waiver request shall include authorization for the legislature to make changes to optional eligibility groups and services in order to prevent spending more in any fiscal year than is appropriated. In addition, the waiver shall request authority to revise the benefit structure and delivery system to allow Medicaid recipients to be integrated into the private insurance market through the use of state vouchers. The waiver shall include a provision to require Medicaid recipients with higher incomes to participate in program costs through coinsurance and deductibles and to be provided incentives for cost effective utilization of the health care system. The agency shall submit the waiver application to the Legislative Budget Commission for approval by September 30, 2010, before submission to the federal Centers for Medicare and Medicaid Services.

176 SPECIAL CATEGORIES  
ADULT VISION AND HEARING SERVICES

From the funds in Specific Appropriations 176, 180, 184, 187, 189, 193, 194, 196, 198-201, 203-205, 208, 209A, 210, and 212, \$228,008,289 in nonrecurring general revenue funds, \$32,423,511 in nonrecurring

Senate From the funds in Specific Appropriations 176, 180, 182, 184, 187, 189, 193, 194, 196, 198-201, 203, 205-208, 210, and 212, \$228,008,289 in with non-recurring general revenue funds, \$12,470,082 in non-recurring grants

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<p>grants and donations trust funds, and \$366,070,093 in nonrecurring medical care trust funds are provided to continue the Medicaid for the Aged and Disabled (MEDS-AD) program.</p>	<p>Changes</p>	<p>and donations trust funds, and <u>\$386,023,522</u> in non-recurring medical care trust funds are provided to continue the Medicaid for the Aged and Disabled (MEDS-AD) program through <u>June 30, 2010</u>.</p>
<p>From the funds in Specific Appropriations 176, 180, 182, 184, 187, 189, 193, 194, 196, 198-201, 203, 205-208, and 212, \$264,928,422 in nonrecurring general revenue funds, \$28,400,000 in nonrecurring health care trust funds, \$66,399,527 in nonrecurring grants and donations trust funds, and \$457,442,063 in nonrecurring medical care trust funds are provided to continue the Medically Needy program.</p>	<p>Senate with Changes</p>	<p>From the funds in Specific Appropriations 176, 180, 182, 184, 187, 189, 193, 194, 196, 198-201, 203-208, 209A, 210, and 212, <u>\$293,328,422</u> in non-recurring general revenue funds, <u>\$25,537,258</u> in non-recurring grants and donations trust funds, and <u>\$498,304,332</u> in non-recurring medical care trust funds are provided to continue the Medically Needy program through <u>June 30, 2010</u>.</p>
<p><del>Funds in Specific Appropriations 176, 180, 182, 184, 187, 189, 193, 194, 196-200, 203-206, 208, 209A, 210, and 212 reflect a reduction of \$12,999,350 from the General Revenue Fund, \$266,746 from the Grants and Donations Trust Fund, and \$16,386,884 from the Medical Care Trust Fund to reflect a policy to eliminate coverage and eligibility for pregnant women with incomes between 150 and 185 percent of the federal poverty level, effective January 1, 2011. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.</del></p>	<p>Accept House Offer</p>	<p>No Proviso</p>
<p>177 SPECIAL CATEGORIES CASE MANAGEMENT</p>		
<p>Funds in Specific Appropriation 177 reflect a reduction of \$727,495 from the General Revenue Fund and \$1,164,069 from the Medical Care Trust Fund to reflect the elimination of the Children's Medical Services (CMS) Primary Care Center targeted case management reimbursement fee, effective October 1, 2010. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.</p>	<p>Accept House Offer</p>	
<p>Funds in Specific Appropriation 177 reflect a reduction of \$692,280 from the General Revenue Fund and \$1,107,720 from the Medical Care Trust Fund to reflect the elimination of incentive payments in Disease Management contracts. The agency shall amend disease management contracts to reflect this change effective July 1, 2010.</p>	<p>Accept House Offer</p>	
<p><del>Upon approval of an amendment of the existing disease management waiver, the agency is authorized to develop Requests for Proposals or Invitations to Negotiate for State of Florida Medicaid beneficiaries residing in certain counties in the Agency for Health Care Administration's Areas 1 and 6 currently enrolled in Medipass. In both areas, qualified providers must meaningfully deploy health information technology for the provision of health care services and reimbursement for those services shall be on a per member per month basis based on the person's underlying disease state. The agency shall contract with entities in AHCA Areas 1 and 6 and in all counties with fewer than 95,000 residents to implement disease management, health information technology primary care pilots. In Area 1, the agency shall contract with a give preference to a non-profit consortium of hospitals that supports primary care in the community and whose member entities contribute health information to a regional health information organization. In Area 6</del></p>	<p>Senate</p>	<p>From the funds in Specific Appropriations 177 and 204, upon approval of an amendment of the existing disease management waiver, the agency is authorized to develop Requests for Proposals or Invitations to Negotiate for State of Florida Medicaid beneficiaries residing in certain counties in the Agency for Health Care Administration's Areas 1 and 6 currently enrolled in Medipass. In both areas, qualified providers must meaningfully deploy health information technology for the provision of health care services and reimbursement for those services shall be on a per member per month basis based on the person's underlying disease state. In Area 1, the agency shall give preference to a non-profit consortium of hospitals that supports primary care in the community and whose member entities contribute health information to a regional health information organization. In Area 6, the agency shall give preference to a federally qualified health care center using a Florida-based health information technology company with disease management functionality.</p>

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<p><del>and rural counties, the agency shall contract with give preference to a federally qualified health care center using a Florida-based developer of Certification Commission for Healthcare Information Technology (CCHIT) approved technology health information technology company with disease management functionality to work with federally qualified health centers, Department of Health clinics, and primary care providers. Reimbursement for services shall be on a per member per month basis based on the eligible person's underlying disease state. Prior to implementation, the claims data for persons residing in pilot areas with the identified chronic illnesses will be compiled and used to measure and evaluate the effectiveness of the pilots. The pilot programs shall be for a period of at least 36 months. The agency shall seek is authorized to seek any necessary state plan an amendment to the existing disease management or federal waiver to implement this provision.</del></p>		<p>The pilot programs shall be for a period of 36 months. The agency is authorized to seek any necessary state plan amendment or federal waiver to implement this provision.</p>

178 SPECIAL CATEGORIES  
THERAPEUTIC SERVICES FOR CHILDREN

<p>No Proviso</p>	<p>Accept House Offer</p>	<p><del>From the funds provided in specific appropriation 178, \$690,226 from the General Revenue Fund and \$1,104,433 from the Medical Care Trust Fund reflects the reduction of cost savings from reducing behavioral health overlay services for youths in juvenile justice and child welfare settings from seven to six days per week.</del></p>
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179 SPECIAL CATEGORIES  
COMMUNITY MENTAL HEALTH SERVICES

<p>The agency is authorized to amend the Medicaid State Plan to include the following specialized substance abuse services: community based substance abuse intervention services and comprehensive community support services for substance abuse.</p>	<p>House</p>	<p>From the funds in Specific Appropriation 179, the agency is authorized to amend the Medicaid State Plan to include the following specialized substance abuse services: community based substance abuse intervention services and comprehensive community support services for substance abuse.</p>
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<p>The agency is authorized to work with the Department of Children and Family Services and Florida county governments to develop a local match program to fund these Medicaid specialized substance abuse services using local county funds. The public funds required to match the Medicaid funds for these specialized substance abuse services are limited to those funds that are local public tax revenues and are made available to the state for this purpose. As required by Medicaid policy, participating counties shall make these services available to any qualified Florida Medicaid beneficiary regardless of county of residence. Payment for these services is contingent upon the local matching funds being provided by participating counties.</p>	<p>HOUSE</p>	<p>From the funds in Specific Appropriation 179, the agency is authorized to work with the Department of Children and Family Services and Florida county governments to develop a local match program to fund these Medicaid specialized substance abuse services using county funds. The public funds required to match the Medicaid funds for these specialized substance abuse services are limited to those funds that are local public tax revenues and are made available to the state for this purpose. As required by Medicaid policy, participating counties shall make these services available to any qualified Florida Medicaid beneficiary regardless of county of residence. Payment for these services is contingent upon the local matching funds being provided by participating counties.</p>
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<p>Funds in Specific Appropriation 179 reflect an increase of \$5,200,208 from the Medical Care Trust Fund to provide Medicaid specialized mental health services. The agency is authorized to seek any necessary state plan amendment or federal waiver required Medicaid waiver approved to include mental health services for juveniles in the evidence based redirection program at the Department of Juvenile Justice. The agency is authorized to work with the Department of Juvenile Justice to</p>	<p>Accept House Offer</p>	<p>From the funds in Specific Appropriation 179, the agency is authorized to seek any necessary state plan amendment or federal waiver to include mental health services for juveniles in the evidence based redirection program at the Department of Juvenile Justice. The agency is authorized to work with the Department of Juvenile Justice to develop a match program to fund Medicaid specialized mental health services contingent upon the use of existing eligible matching funds within the</p>
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<p>develop a match program to fund Medicaid specialized mental health services using existing funding within the Department of Juvenile Justice. Payment for these services is contingent upon the availability of state matching funds in the Department of Juvenile Justice in Specific Appropriation 1141.</p>		<p>Department of Juvenile Justice.</p>

181 SPECIAL CATEGORIES  
DEVELOPMENTAL EVALUATION AND INTERVENTION/  
PART C

<p>Funds in Specific Appropriation 181 are contingent on the availability of state match being provided in Specific Appropriation 539.</p>	<p>IDENTICAL</p>	<p>Funds in Specific Appropriation 181 are contingent on the availability of state match being provided in Specific Appropriation 539.</p>
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183 SPECIAL CATEGORIES  
GRANTS AND AIDS - RURAL HOSPITAL FINANCIAL ASSISTANCE PROGRAM

<p>Funds in Specific Appropriation 183 are provided for a federally matched Rural Hospital Disproportionate Share program and a state funded Rural Hospital Financial Assistance program as provided in section 409.9116, Florida Statutes.</p>	<p>IDENTICAL</p>	<p>Funds in Specific Appropriation 183 are provided for a federally matched Rural Hospital Disproportionate Share program and a state-funded Rural Hospital Financial Assistance program as provided in section 409.9116, Florida Statutes.</p>
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185 SPECIAL CATEGORIES  
GRANTS AND AIDS - SHANDS TEACHING HOSPITAL

<p>The funds in Specific Appropriation 185, shall be primarily designated for transfer to the Agency for Health Care Administration's Grants and Donations Trust Fund for use in the Medicaid or Low Income Pool programs. Of these funds, up to \$3,820,670 may be used in the Low Income Pool program or as funding to buy back the Medicaid inpatient and outpatient trend adjustments applied to Shands Healthcare Systems' individual hospital rates and other Medicaid reductions to their rates up to the actual Medicaid inpatient and outpatient costs. The transfer of the funds from the Low Income Pool program is contingent upon another local government or healthcare taxing district providing an equivalent amount of funds to be used in the Low Income Pool program. Should the Agency for Health Care Administration be unable to use the full amount of these designated funds, remaining funds may be used secondarily for payments to Shands Teaching Hospital to continue the original purpose of providing health care services to indigent patients through Shands Healthcare System.</p>	<p>IDENTICAL</p>	<p>The funds in Specific Appropriation 185, shall be primarily designated for transfer to the Agency for Health Care Administration's Grants and Donations Trust Fund for use in the Medicaid or Low Income Pool programs. Of these funds, up to \$3,820,670 may be used in the Low Income Pool program or as funding to buy back the Medicaid inpatient and outpatient trend adjustments applied to Shands Healthcare Systems' individual hospital rates and other Medicaid reductions to their rates up to the actual Medicaid inpatient and outpatient costs. The transfer of the funds from the Low Income Pool program is contingent upon another local government or healthcare taxing district providing an equivalent amount of funds to be used in the Low Income Pool program. Should the Agency for Health Care Administration be unable to use the full amount of these designated funds, remaining funds may be used secondarily for payments to Shands Teaching Hospital to continue the original purpose of providing health care services to indigent patients through Shands Healthcare System.</p>
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187 SPECIAL CATEGORIES  
HOME HEALTH SERVICES

<p>From the funds in Specific Appropriation 187, the agency may implement accreditation requirements for Durable Medical Equipment and Consumable Medical Supply providers.</p>	<p>IDENTICAL</p>	<p>From the funds in Specific Appropriation 187, the agency may implement accreditation requirements for Durable Medical Equipment and Consumable Medical Supply providers.</p>
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Funds in Specific Appropriation 187 reflect a transfer of \$1,182,645 from the General Revenue Fund and \$1,892,355 from the Medical Care Trust

Accept

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Fund from the Agency for Persons with Disabilities to provide disposable incontinence products to children ages 4 through 20 as a Medicaid state plan service rather than a Home and Community Based Waiver service, effective October 1, 2010.	House Offer	
From the funds in Specific Appropriation 187, \$5,626,415 from the General Revenue Fund and \$9,002,846 from the Medical Care Trust Fund are provided to expand Medicaid state plan coverage for disposable incontinence products to children ages 4 through 20 effective October 1, 2010.	Accept House Offer	
No Proviso	Accept House Offer	<del>From the funds provided in specific appropriation 187, \$218,471 from the General Revenue Fund and \$271,924 from the Medical Care Trust Fund reflects the reduction of cost savings from reducing home health visits from four to three visits per day.</del>
	Senate	From funds in Specific Appropriation 187, the agency shall competitively procure a statewide managed disposable incontinence medical supply program in order to maximize efficiencies and savings in the Medicaid program. In developing the competitive solicitation, the agency shall establish three distinct service delivery regions each of which shall contain an equal distribution of the Medicaid State Plan, Medicaid Waiver, and dual eligible beneficiaries. Beneficiaries enrolled in a prepaid, capitated managed care plan shall be excluded from this procurement. A vendor may bid on multiple regions. The contract for these services must be awarded by December 1, 2010. The agency is authorized to establish a fixed statewide rate for these supplies until such time as waiver approval is received and the contracts are established in accordance with the requirements set forth in this paragraph. The agency shall seek any federal Medicaid waivers or authority necessary to implement this provision.
188 SPECIAL CATEGORIES HOSPICE SERVICES		
Funds in Specific Appropriation 188 reflect a reduction of \$4,469,806 from the General Revenue Fund and \$7,152,155 from the Medical Care Trust Fund as a result of adjusting nursing home rates.	Senate	Funds in Specific Appropriation 188 reflect a reduction of \$6,745,601 from the General Revenue Fund and \$10,793,664 from the Medical Care Trust Fund as a result of adjusting nursing home rates.
From the funds in Specific Appropriation 188, \$13,378,003 from the Grants and Donations Trust Fund and \$21,406,196 from the Medical Care Trust Fund are provided to buy back hospice rate reductions, effective on or after January 1, 2008 and are contingent on the nonfederal share being provided through nursing home quality assessments. Authority is granted to buy back rate reductions up to, but not higher than, the amounts available under the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.	IDENTICAL	From the funds in Specific Appropriation 188, \$13,378,003 from the Grants and Donations Trust Fund and \$21,406,196, from the Medical Care Trust Fund are provided to buy back nursing facility rate reductions, effective on or after January 1, 2008, and are contingent upon the non-federal share being provided through nursing home quality assessments. Authority is granted to buy back rates up to, but not higher than, the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.
No Proviso	Accept House Offer	<del>From the funds provided in Specific Appropriation 188, \$4,390,678 from the General Revenue Fund and \$7,025,541 from the Medical Care Trust Fund reflect the reduction of cost savings from limiting Medicaid hospice payments to the Medicare annual hospice aggregate amount of a</del>

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HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
		<del>maximum of 210 days per year. The agency is authorized to seek federal Medicaid waivers as necessary to implement this provision.</del>

189 SPECIAL CATEGORIES  
HOSPITAL INPATIENT SERVICES

From the funds in Specific Appropriation 189, \$61,382,891 from the Medical Care Trust Fund is provided to the Agency for Health Care Administration to fund services for children in the Statewide Inpatient Psychiatric Program. The program shall be designed to permit limits on services, prior authorization of services, and selective provider enrollment. The program must also include monitoring and quality assurance, as well as discharge planning and continuing stay reviews, of all children admitted to the program. The funding is contingent upon the availability of state matching funds in the Department of Children and Family Services in Specific Appropriations 315 and 340.

From the funds in Specific Appropriation 189, \$168,300 from the General Revenue Fund is provided to Lee Memorial Hospital for the Regional Perinatal Intensive Care Center (RPICC) Program.

Funds in Specific Appropriation 189, reflect a reduction of \$52,596,452 from the General Revenue Fund, \$84,159,793 from the Medical Care Trust Fund, and \$99,479 from the Refugee Assistance Trust Fund as a result of modifying the reimbursement for inpatient hospital rates. The agency shall implement a recurring methodology in the Title XIX Inpatient Hospital Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget. Hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent and rural hospitals as defined in section 395.602, Florida Statutes are excluded from this reduction.

From the funds in Specific Appropriation 189, \$59,990,120 from the Grants and Donations Trust Fund and \$95,990,432 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for hospitals whose charity care and Medicaid days, as a percentage of total adjusted hospital days, equal or exceed 11 percent. For any public hospital or any leased public hospital found to have sovereign immunity or hospital with graduate medical education positions that does not qualify for the elimination of the inpatient ceilings under this section of proviso or any other proviso listed, such hospitals shall be exempt from the inpatient reimbursement ceilings contingent on the hospital or local governmental entity providing the required state match. The agency shall use the average of the 2003, 2004 and 2005 audited DSH data available as of March 1, 2010. In the event

Identical  
From the funds in Specific Appropriation 189, \$61,382,891 from the Medical Care Trust Fund is provided to the Agency for Health Care Administration to fund services for children in the Statewide Inpatient Psychiatric Program. The program shall be designed to permit limits on services, prior authorization of services, and selective provider enrollment. The program must also include monitoring and quality assurance, as well as discharge planning and continuing stay reviews, of all children admitted to the program. The funding is contingent upon the availability of state matching funds in the Department of Children and Family Services in Specific Appropriations 315 and 340.

From the funds in Specific Appropriation 189, \$168,300 from the General Revenue Fund is provided to Lee Memorial Hospital for the Regional Perinatal Intensive Care Center (RPICC) Program.

To be developed based on LIP Model  
Funds in Specific Appropriation 189, reflect a reduction of \$86,622,131 from the General Revenue Fund, \$137,004,315 from the Medical Care Trust Fund, and \$161,942 from the Refugee Assistance Trust Fund as a result of modifying the reimbursement for inpatient hospital rates. The agency shall implement a recurring methodology in the Title XIX Inpatient Hospital Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.

To be developed based on LIP Model  
From the funds in Specific Appropriation 189, \$59,990,120 from the Grants and Donations Trust Fund and \$95,990,432 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for hospitals whose charity care and Medicaid days, as a percentage of total adjusted hospital days, equal or exceed 11 percent. For any public hospital or any leased public hospital found to have sovereign immunity or hospital with graduate medical education positions that does not qualify for the elimination of the inpatient ceilings under this section of proviso or any other proviso listed, such hospitals shall be exempt from the inpatient reimbursement ceilings contingent on the hospital or local governmental entity providing the required state match. The agency shall use the average of the 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as

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<p>the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>		<p>of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>From the funds in Specific Appropriation 189, \$1,822,057 from the Grants and Donation Trust Fund and \$2,915,482 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for hospitals that have a minimum of ten licensed Level II Neonatal Intensive Care Beds and are located in Trauma Services Area 2.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 189, \$1,822,057 from the Grants and Donation Trust Fund and \$2,915,482 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for hospitals that have a minimum of ten licensed Level II Neonatal Intensive Care Beds and are located in Trauma Services Area 2.</p>
<p>From the funds in Specific Appropriation 189, \$45,609,650 from the Grants and Donations Trust Fund and \$72,980,183 from the Medical Care Trust Fund are provided to eliminate the inpatient hospital reimbursement ceilings for hospitals whose Medicaid days as a percentage of total hospital days exceed 7.3 percent, and are designated or provisional trauma centers. This provision shall apply to all hospitals that are designated or provisional trauma centers on July 1, 2010 and any hospitals that becomes a designated or provisional trauma center during Fiscal Year 2010-2011. Included in these funds are the annualized amounts to offset the reductions taken against certified trauma centers as identified in Section 12, chapter 2007-326, Laws of Florida. The agency shall use the average of the 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as of March 1, 2010. In the event the agency does not have the prescribed three years of audited Disproportionate Share Hospital (DSH) data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 189, \$45,609,650 from the Grants and Donations Trust Fund and \$72,980,183 from the Medical Care Trust Fund are provided to eliminate the inpatient hospital reimbursement ceilings for hospitals whose Medicaid days as a percentage of total hospital days exceed 7.3 percent, and are designated or provisional trauma centers. This provision shall apply to all hospitals that are designated or provisional trauma centers on July 1, 2010, and any hospital that becomes a designated or provisional trauma center during Fiscal Year 2010-2011. Included in these funds are the annualized amounts to offset the reductions taken against certified trauma centers as identified in Section 12, chapter 2007-326, Laws of Florida. The agency shall use the average of the 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>Funds in Specific Appropriation 189 are contingent upon the state share being provided through grants and donations from state, county or other governmental funds. In the event the state share provided through grants and donations is not available to fund the removal of inpatient ceilings for hospitals, the Agency for Health Care Administration shall submit a revised hospital reimbursement plan to the Legislative Budget Commission for approval.</p>	<p>To be developed based on LIP Model</p>	<p>Funds in Specific Appropriation 189, are contingent upon the state share being provided through grants and donations from state, county or other governmental funds. In the event the state share provided through grants and donations is not available to fund the removal of inpatient ceilings for hospitals, the Agency for Health Care Administration shall submit a revised hospital reimbursement plan to the Legislative Budget Commission for approval.</p>
<p>From the funds in Specific Appropriation 189, \$3,819,847 from the Grants and Donations Trust Fund and \$6,112,153 from the Medical Care Trust Fund are provided to make Medicaid payments to hospitals. These payments shall be used to pay approved liver transplant facilities a global fee for providing transplant services to Medicaid beneficiaries.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 189, \$3,819,847 from the Grants and Donations Trust Fund and \$6,112,153 from the Medical Care Trust Fund are provided to make Medicaid payments to hospitals. These payments shall be used to pay approved liver transplant facilities a global fee for providing transplant services to Medicaid beneficiaries.</p>
<p>From the funds in Specific Appropriation 189, \$13,750,000 from the General Revenue Fund, \$135,932,090 from the Grants and Donations Trust Fund and \$239,506,912 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for teaching, specialty, Community Hospital Education Program hospitals and Level III Neonatal Intensive Care Units that have a minimum of three of the following designated tertiary services as regulated under the Certificate of Need Program: pediatric bone marrow transplantation, pediatric open heart surgery, pediatric cardiac catheterization and pediatric heart transplantation. Included in these funds are the annualized amounts to</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 189, \$149,682,090 from the Grants and Donations Trust Fund and \$239,506,912 from the Medical Care Trust Fund are provided to eliminate the inpatient reimbursement ceilings for teaching, specialty, Community Hospital Education Program hospitals and Level III Neonatal Intensive Care Units that have a minimum of three of the following designated tertiary services as regulated under the Certificate of Need Program: pediatric bone marrow transplantation, pediatric open heart surgery, pediatric cardiac catheterization and pediatric heart transplantation. Included in these funds are the annualized amounts to offset the reductions taken against</p>

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<p>offset the reductions taken against hospitals defined in section 408.07 (45), Florida Statutes, that are not certified trauma centers, as identified in Section 12, chapter 2007-326, Laws of Florida.</p>		<p>hospitals defined in section 408.07 (45), Florida Statutes, that are not certified trauma centers, as identified in Section 12, chapter 2007-326, Laws of Florida.</p>
<p>From the funds in Specific Appropriation 189, \$19,076,447 from the Grants and Donations Trust Fund, and \$30,524,300 from the Medical Care Trust Fund are provided to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates for the following three categories of hospitals. Of these funds \$31,984,943 is provided to the first category of hospitals, which are those hospitals that are part of a system that operates a provider service network in the following manner: \$18,773,903 is for Jackson Memorial Hospital; \$2,133,277 is for hospitals in Broward Health; \$4,906,684 is for hospitals in the Memorial Healthcare System; and \$760,226 is for Shands Jacksonville and \$5,410,853 is for Shands Gainesville. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the inpatient rate. Of the above funds, \$12,139,819 shall be used for the second category to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates for those hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent. In the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the inpatient rate for those individual hospitals. Of the above funds, \$5,475,985 shall be used for the third category to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates to rural hospitals. In the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the inpatient rate for those individual hospitals. For this section of proviso the agency shall use the 2003, 2004 and 2005 audited DSH data available as of March 1, 2010. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>		<p>From the funds in Specific Appropriation 189, \$19,076,447 from the Grants and Donations Trust Fund, and \$30,524,300 from the Medical Care Trust Fund are provided to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates for the following three categories of hospitals. Of these funds \$31,984,943 is provided to the first category of hospitals, which are those hospitals that are part of a system that operates a provider service network in the following manner: \$18,773,903 is for Jackson Memorial Hospital; \$2,133,277 is for hospitals in Broward Health; \$4,906,684 is for hospitals in the Memorial Healthcare System; and \$760,226 is for Shands Jacksonville and \$5,410,853 is for Shands Gainesville. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the inpatient rate. Of the above funds, \$12,139,819 shall be used for the second category to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates for those hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent. In the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the inpatient rate for those individual hospitals. Of the above funds, \$5,475,985 shall be used for the third category to buy back the Medicaid trend adjustment that is being applied against the Medicaid inpatient rates to rural hospitals. From the funds in Specific Appropriation 189, in the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the inpatient rate for those individual hospitals. For this section of proviso the agency shall use the 2003, 2004 and 2005 audited Disproportionate Share Data (DSH) data available as of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>From the funds in Specific Appropriation 189, \$72,682,614 from the Grants and Donations Trust Fund and \$116,299,742 from the Medical Care Trust Fund are provided for public hospitals, including any leased public hospital found to have sovereign immunity, teaching hospitals as defined in section 408.07 (45) or 395.805, Florida Statutes, which have seventy or more full-time equivalent resident physicians and for designated trauma hospitals to buy back the Medicaid inpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their inpatient rates up to actual Medicaid inpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid inpatient trend adjustment applied to the</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 189, \$72,682,614 from the Grants and Donations Trust Fund and \$116,299,742 from the Medical Care Trust Fund are provided for public hospitals, including any leased public hospital found to have sovereign immunity, teaching hospitals as defined in section 408.07 (45) or 395.805, Florida Statutes, which have seventy or more full-time equivalent resident physicians and for designated trauma hospitals to buy back the Medicaid inpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their inpatient rates up to actual Medicaid inpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid inpatient trend adjustment applied to the</p>

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individual state mental health hospitals.

individual state mental health hospitals.

From the funds in Specific Appropriations 189 and 203, \$2,307,600 from the Grants and Donations Trust Fund and \$3,692,400 from the Medical Care Trust Fund are provided to make Medicaid payments for multi-visceral transplant and intestine transplants in Florida. The agency shall establish a reasonable global fee for these transplant procedures and the payments shall be used to pay approved multi-visceral transplant and intestine transplant facilities a global fee for providing transplant services to Medicaid beneficiaries. Payment of the global fee is contingent upon the nonfederal share being provided through grants and donations from state, county or other governmental funds. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.

To be developed based on LIP Model  
 From the funds in Specific Appropriations 189 and 203, \$2,307,600 from the Grants and Donations Trust Fund and \$3,692,400 from the Medical Care Trust Fund are provided to make Medicaid payments for multi-visceral transplant and intestine transplants in Florida. The agency shall establish a reasonable global fee for these transplant procedures and the payments shall be used to pay approved multi-visceral transplant and intestine transplant facilities a global fee for providing transplant services to Medicaid beneficiaries. Payment of the global fee is contingent upon the non-federal share being provided through grants and donations from state, county or other governmental funds. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.

From the funds in Specific Appropriation 189, \$336,525 from the Grants and Donation Trust Fund and \$538,475 from the Medical Care Trust Fund are provided to adjust the Medicaid rate for any rural hospital that moved into a replacement facility during calendar year 2009 to reflect Medicaid costs for the period of time from moving into the replacement facility to when the rate would reflect the costs of the replacement facility through the routine rate setting process. To qualify for this adjustment a hospital must have a combined Medicaid and charity care utilization rate of at least 25 percent based on the most recent information reported to the Agency for Health Care Administration prior to moving into the replacement facility. This rate adjustment is contingent upon the nonfederal share being provided through grants and donations from state, county or other governmental funds that do not increase the current requirement for state general revenue or tobacco settlement trust funds.

To be developed based on LIP Model  
 From the funds in Specific Appropriation 189, \$336,525 from the Grants and Donations Trust Fund and \$538,475 from the Medical Care Trust Fund are provided to adjust the Medicaid rate for any rural hospital that moved into a replacement facility during calendar year 2009 to reflect the Medicaid costs for the period of time from moving into the replacement facility to when the rate would reflect the costs of the replacement facility through the routine rate setting process. To qualify for this adjustment a hospital must have a combined Medicaid and charity care utilization rate of at least 25 percent based on the most recent information reported to the agency prior to moving into the replacement facility. This rate adjustment is contingent upon the non-federal share being provided through grants and donations from state, county, or other governmental funds that do not increase the current requirement for state general revenue or tobacco settlement trust funds.

From the funds in Specific Appropriation 189, \$109,225,608 from the the Grants and Donations Trust Fund and \$174,772,332 from the Medical Care Trust Fund are provided for hospitals, not previously included in the proviso above, to buy back the Medicaid inpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their inpatient rates up to actual Medicaid inpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. The agency shall not include the funds described in this paragraph for the buy back of reductions to inpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations unless the nonfederal share is provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid inpatient trend adjustment applied to the individual state mental health hospitals.

To be developed based on LIP Model  
 From the funds in Specific Appropriation 189, \$85,622,131 from the Public Medical Assistance Trust Fund and \$137,166,257 from the Medical Care Trust Fund are provided to restore reductions applied to inpatient hospital rates. The agency shall implement a recurring methodology in the Title XIX Inpatient Hospital Reimbursement Plan to achieve this restoration. The agency shall not include the funds described in this paragraph for the restoration of reductions to inpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations.

From the funds in Specific Appropriation 189, \$56,590,897 from the Grants and Donations Trust Fund and \$90,551,319 from the Medical Care Trust Fund are provided for hospitals, not previously included in the proviso above, to buy back the Medicaid inpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their inpatient rates up to actual Medicaid inpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. The agency shall not include the funds described in this paragraph for the buy back of reductions to inpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations, unless the required state share for including these funds

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No Proviso	Accept House Offer	<p>in the calculation of the capitation rates are provided through grants and donations from county or other local governmental funds.</p> <p><del>From the funds provided in Specific Appropriations 189, 194 and 203, \$1,267,895 from the General Revenue Fund and \$2,188,773 from the Medical Care Trust Fund reflects a the reduction of cost savings from reducing the timeframe for provider billing from 12 months to 6 months.</del></p>
	Senate	<p>From the funds in Specific Appropriation 189, the agency shall research and develop an efficiency based adjustment method for institutional providers. The method will provide definitions and measures of efficiencies. The agency must receive approval of the methodology from the Centers for Medicare and Medicaid Services prior to implementation and shall notify the Legislature upon receipt of such approval.</p>
	Senate	<p>From the funds in Specific Appropriation 189, the agency shall publish the most current Medicaid inpatient rates for the current rate semester on the agency's web site each month.</p>
<p>190 SPECIAL CATEGORIES REGULAR DISPROPORTIONATE SHARE</p>		
<p>Funds in Specific Appropriation 190 shall be used for a Disproportionate Share Hospital Program as provided in sections 409.911, 409.9113, and 409.9119, Florida Statutes, and is contingent on the state share being provided through grants and donations from state, county, or other government entities.</p>	IDENTICAL	<p>Funds in Specific Appropriation 190 shall be used for a Disproportionate Share Hospital Program as provided in sections 409.911, 409.9113, and 409.9119, Florida Statutes, and is contingent on the state share being provided through grants and donations from state, county, or other government entities.</p>
<p>From the funds in Specific Appropriation 190, \$69,151,938 from the Grants and Donations Trust Fund and \$86,071,267 from the Medical Care Trust Fund are provided for payments to public hospitals.</p>	IDENTICAL	<p>From the funds in Specific Appropriation 190, \$69,151,938 from the Grants and Donations Trust Fund and \$86,071,267 from the Medical Care Trust Fund are provided for payments to public hospitals.</p>
<p>From the funds in Specific Appropriation 190, \$29,461,437 from the Grants and Donations Trust Fund and \$36,669,735 from the Medical Care Trust Fund are provided for payments to defined statutory teaching hospitals. Prior to the distribution of these funds to the statutorily defined teaching hospitals, \$6,487,220 shall be allocated to Shands Jacksonville Hospital, \$2,660,440 shall be allocated to Tampa General Hospital, and \$1,083,512 shall be allocated to Shands Teaching Hospital.</p>	IDENTICAL	<p>From the funds in Specific Appropriation 190, \$29,461,437 from the Grants and Donations Trust Fund and \$36,669,735 from the Medical Care Trust Fund are provided for payments to defined statutory teaching hospitals. Prior to the distribution of these funds to the statutorily defined teaching hospitals, \$6,487,220 shall be allocated to Shands Jacksonville Hospital, \$2,660,440 shall be allocated to Tampa General Hospital, and \$1,083,512 shall be allocated to Shands Teaching Hospital.</p>
<p>From the funds in Specific Appropriation 190, \$891,000 from the Grants and Donations Trust Fund and \$1,109,000 from the Medical Care Trust Fund are provided for payments to hospitals participating in graduate medical education initiatives, specifically consortiums engaged in developing new graduate medical education positions and programs. Consortiums shall consist of a combination of statutory teaching hospitals, statutory rural hospitals, hospitals with existing accredited graduate medical education positions, medical schools, Department of Health clinics, federally qualified health centers, and where possible, the Department of Veterans' Affairs clinics. Ideally, each consortium will have at least five residents per training year. Each consortium must include primary care providers and at least one hospital, and</p>	IDENTICAL	<p>From the funds in Specific Appropriation 190, \$891,000 from the Grants and Donations Trust Fund and \$1,109,000 from the Medical Care Trust Fund are provided for payments to hospitals participating in graduate medical education initiatives, specifically consortiums engaged in developing new graduate medical education positions and programs. Consortiums shall consist of a combination of statutory teaching hospitals, statutory rural hospitals, hospitals with existing accredited graduate medical education positions, medical schools, Department of Health clinics, federally qualified health centers, and where possible, the Department of Veterans' Affairs clinics. Ideally, each consortium will have at least five residents per training year. Each consortium must include primary care providers and at least one hospital, and</p>

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<p>consortium residents shall rotate between participating primary care sites and hospitals. All consortiums that were selected and funded in state Fiscal Year 2009-2010 shall continue to receive funding under this section of proviso for state Fiscal Year 2010-2011. All consortium-initiated residency programs and positions shall be reviewed by the Community Hospital Education Council, which shall report all findings to the Executive Office of the Governor, the chair of the Senate Policy and Steering Committee on Ways and Means, and the chair of the House Full Appropriations Council on General Government and Health Care.</p>		<p>consortium residents shall rotate between participating primary care sites and hospitals. All consortiums that were selected and funded in state Fiscal Year 2009-2010 shall continue to receive funding under this section of proviso for state Fiscal Year 2010-2011. All consortium-initiated residency programs and positions shall be reviewed by the Community Hospital Education Council, which shall report all findings to the Executive Office of the Governor, the chair of the Senate Policy and Steering Committee on Ways and Means, and the chair of the House Full Appropriations Council on General Government and Health Care.</p>

~~From the Funds in Specific Appropriation 190, \$5,800,600 from the Grants and Donations Trust Fund and \$7,319,400 from the Medical Care Trust Fund are provided for payments to family practice teaching hospitals.~~

Accept House Offer From the funds in Specific Appropriation 190, \$750,000 from the General Revenue Fund, \$5,130,600 from the Grants and Donations Trust Fund and \$7,319,400 from the Medical Care Trust Fund are provided for payments to family practice teaching hospitals.

From the funds in Specific Appropriation 190, \$356,400 from the Grants and Donations Trust Fund and \$443,600 from the Medical Care Trust Fund are provided for payments to hospitals licensed as specialty children's hospitals. The funds shall be distributed equally among the hospitals that qualify.

IDENTICAL From the funds in Specific Appropriation 190, \$356,400 from the Grants and Donations Trust Fund and \$443,600 from the Medical Care Trust Fund are provided for payments to hospitals licensed as specialty children's hospitals. The funds shall be distributed equally among the hospitals that qualify.

From the funds in Specific Appropriation 190, \$4,105,817 from the Grants and Donations Trust Fund and \$5,110,383 from the Medical Care Trust Fund are provided for payments to Provider Service Networks. Distributions are made to qualifying Provider Service Network hospitals or systems proportionally based on Fiscal Year 2006-2007 Provider Service Network patient days from qualifying Provider Service Network hospitals or systems. For purposes of this section of proviso, the Provider Service Network inpatient days used in distributing these funds shall be based on the utilization for the following individual hospitals or hospital systems only: Jackson Memorial Hospital - 15,464 days; Broward Health - 18,109 days; Memorial Healthcare System - 12,047 days; Shands Teaching - Gainesville - 1,581 days; and Shands Teaching - Jacksonville - 13,227 days.

IDENTICAL From the funds in Specific Appropriation 190, \$4,105,817 from the Grants and Donations Trust Fund and \$5,110,383 from the Medical Care Trust Fund are provided for payments to Provider Service Networks. Distributions are made to qualifying Provider Service Network hospitals or systems proportionally based on Fiscal Year 2006-2007 Provider Service Network patient days from qualifying Provider Service Network hospitals or systems. For purposes of this section of proviso, the Provider Service Network inpatient days used in distributing these funds shall be based on the utilization for the following individual hospitals or hospital systems only: Jackson Memorial Hospital - 15,464 days; Broward Health - 18,109 days; Memorial Healthcare System - 12,047 days; Shands Teaching - Gainesville - 1,581 days; and Shands Teaching - Jacksonville - 13,227 days.

191 SPECIAL CATEGORIES  
LOW INCOME POOL

From the funds in Specific Appropriation 191, \$10,020,323 from the Grants and Donations Trust Fund and \$16,033,559 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to hospitals providing primary care to low-income individuals, hospitals operating as designated or provisional trauma centers, and rural hospitals. Hospitals providing primary care to low-income individuals and participating in the Primary Care Disproportionate Share Hospital (DSH) program in Fiscal Year 2003-2004 shall be paid \$10,054,727 distributed in the same proportion as the Primary Care DSH payments for Fiscal Year 2003-2004, excluding Imperial Point Hospital, Memorial Regional Hospital, and Memorial Hospital Pembroke who will receive individual amounts equal to \$536,489, \$1,620,659, and \$536,489 respectively. Hospitals that are designated or provisional trauma

To be developed based on LIP Model From the funds in Specific Appropriation 191, \$9,798,198 from the Grants and Donations Trust Fund and \$15,678,137 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to hospitals providing primary care to low-income individuals, hospitals operating as designated or provisional trauma centers, and rural hospitals. Hospitals providing primary care to low-income individuals and participating in the Primary Care Disproportionate Share Hospital (DSH) program in Fiscal Year 2003-2004 shall be paid \$9,831,840 distributed in the same proportion as the Primary Care DSH payments for Fiscal Year 2003-2004, excluding Imperial Point Hospital, Memorial Regional Hospital, and Memorial Hospital Pembroke who will receive individual amounts equal to \$524,596, \$1,584,733, and \$524,596 respectively. Hospitals that are designated or provisional trauma



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<p>centers shall be paid \$9,683,541. Of that amount, \$4,237,709 shall be distributed equally among hospitals that are a Level I trauma center; \$3,475,560 shall be distributed equally among hospitals that are either a Level II or pediatric trauma center; and \$1,970,272 shall be distributed equally among hospitals that are both a Level II and pediatric trauma center. Rural hospitals participating in the Rural Hospital DSH Program shall be paid \$6,315,614 distributed in the same proportion as the DSH payments.</p>		<p>centers shall be paid \$9,468,882. Of that amount, \$4,143,770 shall be distributed equally among hospitals that are a Level I trauma center; \$3,398,516 shall be distributed equally among hospitals that are either a Level II or pediatric trauma center; and \$1,926,596 shall be distributed equally among hospitals that are both a Level II and pediatric trauma center. Rural hospitals participating in the Rural Hospital DSH Program shall be paid \$6,175,613 distributed in the same proportion as the DSH payments.</p>
<p>From the funds in Specific Appropriation 191, \$323,169,240 from the Grants and Donations Trust Fund and \$517,104,397 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to hospitals provider access systems. The funding shall be distributed in a two-step allocation process. The first phase of the allocation process shall distribute payments to qualified hospitals based on the amount of local government funding provided for the uninsured and underinsured. Payments to qualified hospitals shall be capped at 115.0 percent of the amount of local government funding it would have received for the uninsured and underinsured without the Low Income Pool program. The second phase of the allocation process is to distribute the remaining funds based on a hospital's Medicaid days, charity care days, and 50 percent of bad debt days to the total Medicaid days, charity care days, and 50 percent of bad debt days of all qualifying hospitals. To receive funds in this distribution, the hospital's Medicaid days, charity care days and 50 percent of bad debt days divided by the hospital's total days must equal or exceed 10 percent. Of the funds allocated in the second phase, \$2,419,573 shall be allocated to the rural hospitals and the remaining funds shall be allocated to the remaining hospitals that qualify for a distribution. All hospitals with accepted 2008 Financial Hospital Uniform Reporting System (FHURS) data are eligible for the second phase of the allocation process.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, \$306,648,996 from the Grants and Donations Trust Fund and \$490,670,288 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to hospitals provider access systems. The funding shall be distributed in a two-step allocation process. The first phase of the allocation process shall distribute payments to qualified hospitals based on the amount of local government funding provided for the uninsured and underinsured. Payments to qualified hospitals shall be capped at 114.6 percent of the amount of local government funding it would have received for the uninsured and underinsured without the Low Income Pool program. The second phase of the allocation process is to distribute the remaining funds based on a ratio of a hospital's Medicaid days, charity care days, and 50 percent of bad debt days to the total Medicaid days, charity care days, and 50 percent of bad debt days of all qualifying hospitals. To receive funds in this distribution, the hospital's Medicaid days, charity care days and 50 percent of bad debt days divided by the hospital's total days must equal or exceed 10 percent. Of the funds allocated in the second phase, \$2,419,573 shall be allocated to the rural hospitals and the remaining funds shall be allocated to the remaining hospitals that qualify for a distribution. All hospitals with accepted 2008 Financial Hospital Uniform Reporting System (FHURS) data are eligible for the second phase of the allocation process.</p>
<p>From the funds in Specific Appropriation 191, \$608,803 from the Grants and Donations Trust Fund and \$974,150 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to specialty pediatric facilities. To qualify for a Medicaid low-income pool payment under this section, a hospital must be licensed as a children's specialty hospital and its combined Medicaid managed care and fee-for-service days as a percentage to total inpatient days must equal or exceed 30 percent. The agency shall use the 2003 Financial Hospital Uniform Reporting System (FHURS) data to determine the combined Medicaid managed care and fee-for-service days. The total Medicaid low-income pool payments made shall be distributed equally to the qualifying hospitals.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, \$595,307 from the Grants and Donations Trust Fund and \$952,555 from the Medical Care Trust Fund are provided for Medicaid low-income pool payments to specialty pediatric facilities. To qualify for a Medicaid low-income pool payment under this section, a hospital must be licensed as a children's specialty hospital and its combined Medicaid managed care and fee-for-service days as a percentage to total inpatient days must equal or exceed 30 percent. The agency shall use the 2003 Financial Hospital Uniform Reporting System (FHURS) data to determine the combined Medicaid managed care and fee-for-service days. The total Medicaid low-income pool payments made shall be distributed equally to the qualifying hospitals.</p>
<p>From the funds in Specific Appropriation 191, \$950,000 from the General Revenue Fund, \$28,826,710 from the Grants and Donations Trust Fund and \$47,245,805 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to hospitals that serve as a safety net in providing emergency, specialized pediatric trauma services and inpatient hospital care to low-income individuals. These amounts shall be paid to the following:</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, \$700,000 from the General Revenue Fund, \$27,832,494 from the Grants and Donations Trust Fund and \$45,254,931 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to hospitals that serve as a safety net in providing emergency, specialized pediatric trauma services and inpatient hospital care to low-income individuals. These amounts shall be paid to the following:</p>

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Jackson Memorial Hospital.....	2,388,887		Jackson Memorial Hospital.....	2,335,932
Shands Jacksonville Hospital.....	32,766,305	To be developed	Shands Jacksonville Hospital.....	32,039,960
All Children's Hospital.....	5,620,075	based on	All Children's Hospital.....	4,835,455
Shands Teaching Hospital.....	4,796,704	LIP Model	Shands Teaching Hospital.....	4,690,372
Tampa General Hospital.....	12,990,914		Tampa General Hospital.....	12,702,939
Orlando Regional Medical Center.....	4,159,665		Orlando Regional Medical Center.....	4,067,456
Lee Memorial Hospital/CMS.....	886,896		Lee Memorial Hospital/CMS.....	867,236
St. Mary's Hospital.....	195,801		St. Mary's Hospital.....	191,461
Miami Children's Hospital.....	4,906,059		Miami Children's Hospital.....	3,924,100
Broward General Medical Center.....	144,898		Broward General Medical Center.....	141,686
Tallahassee Memorial Healthcare.....	40,983		Tallahassee Memorial Healthcare.....	40,075
St. Joseph's Hospital.....	15,852		St. Joseph's Hospital.....	15,501
Florida Hospital.....	41,488		Florida Hospital.....	40,568
Baptist Hospital of Pensacola.....	321,894		Baptist Hospital of Pensacola.....	314,758
Mt. Sinai Medical Center.....	6,834,326		Mt. Sinai Medical Center.....	6,682,827
Bayfront Medical Center.....	145,594		Bayfront Medical Center.....	142,367
Sacred Heart Hospital.....	327,840		Sacred Heart Hospital.....	320,573
Naples Community Hospital.....	188,334		Naples Community Hospital.....	184,159
Baptist Medical Center - Jacksonville.....	250,000		Baptist Medical Center - Jacksonville.....	250,000

From the funds in Specific Appropriation 191, \$1,399,224 from the General Revenue Fund, \$7,168,224 from the Grants and Donations Trust Fund and \$13,708,808 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to Federally Qualified Health Centers. These payments may be used to provide funding for Federally Qualified Health Centers supporting primary care services in medically underserved areas.

From the funds in Specific Appropriation 191, \$3,673,291 from the Grants and Donations Trust Fund and \$5,877,648 from the Medical Care Trust Fund are provided for county health initiatives emphasizing the expansion of primary care services, and rural health networks. The Department of Health will develop the funding criteria processes, which include assessing statewide benefits, sustainability, access to primary care improvements, ER diversion potential, and health care innovations that are replicable and with a three-year limit on low-income pool funding. The total low-income pool payments provided in this proviso are contingent on the state share being provided through grants and donations from state, county or other governmental funds.

From the funds in Specific Appropriation 191, \$1,153,800 from the Grants and Donations Trust Fund and \$1,846,200 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to hospitals. These payments shall be used, in collaboration with the Department of Health to provide funding for hospitals with hospital based primary care initiatives.

From the funds in Specific Appropriation 191, \$96,150 from the Grants and Donations Trust Fund and \$153,850 from the Medical Care Trust Fund are provided to make health insurance premium payments for low-income residents enrolled in the Miami-Dade Premium Assistance Program. These funds are contingent on a local government contribution of \$96,150.

To be developed based on LIP Model From the funds in Specific Appropriation 191, \$1,220,261 from the General Revenue Fund and \$1,952,544 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to hospitals. These payments shall be used, in collaboration with the Department of Health to provide funding for hospitals providing poison control programs.

To be developed based on LIP Model From the funds in Specific Appropriation 191, \$11,399,224 from the General Revenue Fund, \$26,655,519 from the Grants and Donations Trust Fund and \$60,891,546 from the Medical Care Trust Fund are provided to increase access to primary care services in the state to reduce and prevent unnecessary emergency room visits and inpatient hospitalizations. In developing a plan to increase access to primary care services and the funding of these primary care services, the agency shall solicit proposals from general acute care hospitals, county health departments, faith based and community clinics, and Federally Qualified Health Centers in order to establish new primary clinics for the uninsured and underinsured. Of the funds provided, the agency shall use \$52,002,080, which includes \$10,000,000 in general revenue and \$10,000,000 in local funding pay for the increased access to primary care services. The use of general revenue is contingent upon an equal amount of local funds being provided in cash. The agency shall develop

To be developed based on LIP Model a plan for expanding primary care services by October 1, 2010, and submit the plan to the Legislative Budget Commission for approval before expending any funding. The agency may use \$46,944,209 of the funds provided in this paragraph, which include \$1,399,224 of general revenue for Federally Qualified Health Centers, to continue the funding for primary care services being provided by Federally Qualified Health Centers, for county health initiatives in conjunction with the

To be developed based on LIP Model Department of Health, hospital based primary care services, other non hospital programs and premium access systems that were funded in Specific Appropriation 190 of Section 3, Chapter 2009-81, Laws of Florida. If the agency determines it would be more beneficial to discontinue any or all of these programs, then the funds from the

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<p>From the funds in Specific Appropriation 191, \$6,102,454, from the Grants and Donations Trust Fund and \$9,764,560 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments for premium assistance programs operated by the Palm Beach County Health Care District. These funds are contingent on a local government contribution from the Palm Beach Health Care District in the amount of \$13,367,014.</p>		<p>discontinued program or programs can be included with the \$52,002,080 for increasing access to primary care services.</p>
<p>From the funds in Specific Appropriation 191, \$1,220,261 from the General Revenue Fund and \$1,952,544 from the Medical Care Trust Fund are provided to make Medicaid low-income pool payments to hospitals. These payments shall be used, in collaboration with the Department of Health to provide funding for hospitals providing poison control programs.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, in the event that there is federal legislation that extends the federal enhanced matching rate through June 30, 2011, the agency shall submit a plan which will adopt the recommendations of the Low Income Pool Council for state Fiscal Year 2010-2011 to the Legislative Budget Commission. The agency shall submit a plan with proportional adjustments to the Low Income Council recommendations to account for an additional \$52,002,080 for primary care services as described in this section of proviso.</p>
<p>From the funds in Specific Appropriation 191, \$461,520 from the General Revenue Fund and \$738,480 from the Medical Care Trust Fund are provided to continue the primary care and emergency room diversion program in Manatee, Sarasota and DeSoto counties.</p>		
<p>The agency is authorized to transfer a hospital's low-income pool payments between the various low-income programs listed in this specific appropriation if it is required to obtain approval of the low-income pool payment methodology from the Centers for Medicare and Medicaid Services. Any transfer of funds, however, is contingent on the hospital's net low-income pool payments under the low-income pool plan remaining unchanged.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, the agency is authorized to transfer a hospital's low-income pool payments between the various low-income programs listed in this specific appropriation if it is required to obtain approval of the low-income pool payment methodology from the Centers for Medicare and Medicaid Services. Any transfer of funds, however, is contingent on the hospital's net low-income pool payments under the low-income pool plan remaining unchanged.</p>
<p>In the event that the amount of approved nonfederal share of matching funds is not provided by local governmental entities, the agency may re-allocate low-income pool funds between programs described within this specific appropriation as necessary to ensure sufficient nonfederal matching funds. No re-allocation, under this provision, of low-income pool funds may occur if the level of program increase for any provider access system exceeds the amount of the additional increases in the local nonfederal share match that their local governments transfer to the state Medicaid program, and for which the provider access system would have otherwise received.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, in the event that the amount of approved non-federal share of matching funds is not provided by local governmental entities, the agency may re-allocate low-income pool funds between programs described within this specific appropriation as necessary to ensure sufficient non-federal matching funds. No re-allocation, under this provision, of low-income pool funds may occur if the level of program increase for any provider access system exceeds the amount of the additional increases in the local non-federal share match that their local government transfers to the state Medicaid program, and which the provider access system would have otherwise received.</p>
<p>The agency may make low-income pool Medicaid payments to hospitals in an accelerated manner that is more frequent than on a quarterly basis subject to the availability of state, local and federal funds.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 191, the agency may make low income pool Medicaid payments to hospitals in an accelerated manner that is more frequent than on a quarterly basis, subject to the availability of state, local, and federal funds.</p>
<p>Funds provided in Specific Appropriation 191 are contingent upon the nonfederal share being provided through grants and donations from state, county or other governmental funds. In the event the nonfederal share provided through grants and donations is not available to fund the Medicaid low-income payments for eligible Medicaid providers, known as provider access systems, the agency shall submit a revised low-income pool plan to the Legislative Budget Commission for approval.</p>	<p>To be developed based on LIP Model</p>	<p>Funds provided in Specific Appropriation 191 are contingent upon the non-federal share being provided through grants and donations from state, county or other governmental funds. In the event the non-federal share provided through grants and donations is not available to fund the Medicaid low-income payments for eligible Medicaid providers, known as provider access systems, the agency shall submit a revised low-income pool plan to the Legislative Budget Commission for approval.</p>

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Distribution of such funds provided in Specific Appropriation 191 are contingent upon approval from the Centers for Medicare and Medicaid Services.	To be developed based on LIP Model	Distribution of such funds provided in Specific Appropriation 191 are contingent upon approval from the Centers for Medicare and Medicaid Services.
<p>192 SPECIAL CATEGORIES FREESTANDING DIALYSIS CENTERS</p>		
<p>Funds in Specific Appropriation 192 are for the inclusion of freestanding dialysis clinics in the Medicaid program. The agency shall limit payment to \$100.00 per visit for each dialysis treatment. Freestanding dialysis facilities may obtain, administer and submit claims directly to the Medicaid program for End-Stage Renal Disease pharmaceuticals subject to coverage and limitations policy. All pharmaceutical claims for this purpose must include National Drug Codes (NDC) to permit the invoicing for federal and/or state supplemental rebates from manufacturers. Claims for drug products that do not include National Drug Code information are not payable by Florida Medicaid unless the drug product is exempt from federal rebate requirements.</p>	Accept House Offer	<p><del>Funds in Specific Appropriation 192 are for the inclusion of freestanding dialysis clinics in the Medicaid program. The agency shall limit payment to \$95.00 per visit for each dialysis treatment. Freestanding dialysis facilities may obtain, administer and submit claims directly to the Medicaid program for End-Stage Renal Disease pharmaceuticals subject to coverage and limitations policy. All pharmaceutical claims for this purpose must include National Drug Codes (NDC) to permit the invoicing for federal and/or state supplemental rebates from manufacturers. Claims for drug products that do not include NDC information are not payable by Florida Medicaid unless the drug product is exempt from federal rebate requirements.</del></p>
<p>Funds in Specific Appropriation 192 reflect an increase of \$163,118 from the General Revenue Fund and \$261,006 from the Medical Care Trust Fund as a result of increasing the payment to Medicaid freestanding dialysis clinics from \$95.00 to \$100.00 per visit.</p>	Accept House Offer	
<p>194 SPECIAL CATEGORIES HOSPITAL OUTPATIENT SERVICES</p>		
<p>From the funds in Specific Appropriation 194, \$19,653,060 from the Grants and Donations Trust Fund and \$31,446,942 from the Medical Care Trust Fund are appropriated so that the agency may amend its current facility fees and physician services to allow for payments to hospitals providing primary care to low-income individuals and participating in the Primary Care Disproportionate Share Hospital (DSH) program in Fiscal Year 2003-2004 provided such hospital implements an emergency room diversion program so that non-emergent patients are triaged to lesser acute settings; or a public hospital assumed the fiscal and operating responsibilities for one or more primary care centers previously operated by the Florida Department of Health or the local county government. Any payments made to qualifying hospitals because of this change shall be contingent on the state share being provided through grants and donations from counties, local governments, public entities, or taxing districts, and federal matching funds. This provision shall be contingent upon federal approval of a state plan amendment.</p>	To be developed based on LIP Model	<p>From the funds in Specific Appropriation 194, \$19,653,060 from the Grants and Donations Trust Fund and \$31,446,942 from the Medical Care Trust Fund are appropriated so that the agency may amend its current facility fees and physician services to allow for payments to hospitals providing primary care to low-income individuals and participating in the Primary Care Disproportionate Share Hospital (DSH) program in Fiscal Year 2003-2004 provided such hospital implements an emergency room diversion program so that non-emergency patients are triaged to lesser acute settings; or a public hospital assumed the fiscal and operating responsibilities for one or more primary care centers previously operated by the Florida Department of Health or the local county government. Any payments made to qualifying hospitals because of this change shall be contingent on the state share being provided through grants and donations from counties, local governments, public entities, or taxing districts, and federal matching funds. This provision shall be contingent upon federal approval of a state plan amendment.</p>
<p>Funds in Specific Appropriation 194, reflect a reduction of \$13,561,973 from the General Revenue Fund, \$21,801,327 from the Medical Care Trust Fund, and \$62,971 from the Refugee Assistance Trust Fund as a result of implementing a reduction in outpatient hospital reimbursement rates. The agency shall implement a recurring methodology in the Title XIX Outpatient Hospital Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used</p>	To be developed based on LIP Model	<p>Funds in Specific Appropriation 194 reflect a reduction of \$22,077,630 from the General Revenue Fund, \$35,490,533 from the Medical Care Trust Fund, and \$102,511 from the Refugee Assistance Trust Fund as a result of implementing a reduction in outpatient hospital reimbursement rates. The agency shall implement a recurring methodology in the Title XIX Outpatient Hospital Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the</p>

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<p>in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget. Hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent and rural hospitals as defined in s. 395.602, Florida Statutes are excluded from this reduction.</p>		<p>unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.</p>
<p>From the funds in Specific Appropriation 194, \$23,436,079 from the Grants and Donations Trust Fund and \$37,500,164 from the Medical Care Trust Fund are provided to increase the outpatient cap for adults from \$1,000 to \$1,500 per year and to eliminate the outpatient reimbursement ceilings for teaching, specialty, Community Health Education Program hospitals and Level III Neonatal Intensive Care Units that have a minimum of three of the following designated tertiary services as regulated under the certificate of need program: pediatric bone marrow transplantation, pediatric open heart surgery, pediatric cardiac catheterization and pediatric heart transplantation. Included in these funds are the annualized amounts to offset the reductions taken against hospitals defined in section 408.07 (45), Florida Statutes, that are not certified trauma centers, as identified in Section 13, chapter 2007-326, Laws of Florida.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$23,436,079 from the Grants and Donations Trust Fund and \$37,500,164 from the Medical Care Trust Fund are provided to increase the outpatient cap for adults from \$1,000 to \$1,500 per year and to eliminate the outpatient reimbursement ceilings for teaching, specialty, Community Health Education Program hospitals and Level III Neonatal Intensive Care Units that have a minimum of three of the following designated tertiary services as regulated under the certificate of need program: pediatric bone marrow transplantation, pediatric open heart surgery, pediatric cardiac catheterization and pediatric heart transplantation. Included in these funds are the annualized amounts to offset the reductions taken against hospitals defined in section 408.07 (45), Florida Statutes, that are not certified trauma centers, as identified in Section 13, chapter 2007-326, Laws of Florida.</p>
<p>From the funds in Specific Appropriation 194, \$4,678,761 from the Grants and Donations Trust Fund and \$7,486,505 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement ceilings for hospitals whose charity care and Medicaid days as a percentage of total adjusted hospital days equals or exceeds 11 percent. For any public hospital or any leased public hospital found to have sovereign immunity or hospital with graduate medical education positions that does not qualify for the elimination of the outpatient ceilings under this provision of proviso or any other proviso listed, such hospitals shall be exempt from the outpatient reimbursement ceilings contingent on the public hospital or local governmental entity providing the required state match. The agency shall use the average of the 2003, 2004 and 2005 audited DSH data available as of March 1, 2010. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$4,678,761 from the Grants and Donations Trust Fund and \$7,486,505 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement ceilings for hospitals whose charity care and Medicaid days as a percentage of total adjusted hospital days equals or exceeds 11 percent. For any public hospital or any leased public hospital found to have sovereign immunity or hospital with graduate medical education positions that does not qualify for the elimination of the outpatient ceilings under this provision of proviso or any other proviso listed, such hospitals shall be exempt from the outpatient reimbursement ceilings contingent on the public hospital or local governmental entity providing the required state match. The agency shall use the average of the 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>From the funds in Specific Appropriation 194, \$82,610 from the Grants and Donation Trust Fund and \$132,185 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement ceilings for hospitals that have a minimum of ten licensed Level II Neonatal Intensive Care Beds and are located in Trauma Services Area 2.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$82,610 from the Grants and Donation Trust Fund and \$132,185 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement ceilings for hospitals that have a minimum of ten licensed Level II Neonatal Intensive Care Beds and are located in Trauma Services Area 2.</p>
<p>From the funds in Specific Appropriation 194, \$4,609,114 from the Grants and Donations Trust Fund and \$7,375,061 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement</p>	<p>To be developed</p>	<p>From the funds in Specific Appropriation 194, \$4,609,114 from the Grants and Donations Trust Fund and \$7,375,061 from the Medical Care Trust Fund are provided to eliminate the outpatient reimbursement</p>

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<p>ceilings for hospitals whose Medicaid days, as a percentage of total hospital days, exceed 7.3 percent, and are designated or provisional trauma centers. This provision shall apply to all hospitals that are designated or provisional trauma centers on July 1, 2010 or become a designated or provisional trauma center during Fiscal Year 2010-2011. Included in these funds are the annualized amounts to offset the reductions taken against certified trauma centers as identified in section 13, chapter 2007-326, Laws of Florida. The agency shall use the average of the 2003, 2004 and 2005 audited DSH data available as of March 1, 2010. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>	<p>based on LIP Model</p>	<p>ceilings for hospitals whose Medicaid days, as a percentage of total hospital days, exceed 7.3 percent, and are designated or provisional trauma centers. This provision shall apply to all hospitals that are designated or provisional trauma centers on July 1, 2010, or become a designated or provisional trauma center during Fiscal Year 2010-2011. Included in these funds are the annualized amounts to offset the reductions taken against certified trauma centers as identified in section 13, chapter 2007-326, Laws of Florida. The agency shall use the average of the 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>Funds provided for the elimination of hospital outpatient ceilings in Specific Appropriation 194 are contingent upon the state share being provided through grants and donations from state, county or other governmental funds. The agency shall submit a revised hospital outpatient reimbursement plan to the Legislative Budget Commission for approval if the state share is not available to fund the removal of hospital outpatient ceilings or if the Centers for Medicare and Medicaid Services does not approve amendments to the Medicaid Hospital Outpatient Reimbursement Plan to eliminate the reimbursement ceilings for certain hospitals.</p>	<p>To be developed based on LIP Model</p>	<p>Funds provided for the elimination of hospital outpatient ceilings in Specific Appropriation 194 are contingent upon the state share being provided through grants and donations from state, county or other governmental funds. The agency shall submit a revised hospital outpatient reimbursement plan to the Legislative Budget Commission for approval if the state share is not available to fund the removal of hospital outpatient ceilings or if the Centers for Medicare and Medicaid Services does not approve amendments to the Medicaid Hospital Outpatient Reimbursement Plan to eliminate the reimbursement ceilings for certain hospitals.</p>
<p>From the funds in Specific Appropriation 194, \$4,702,344 from the Grants and Donations Trust Fund and \$7,524,239 from the Medical Care Trust Fund are provided to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for the following three categories of hospitals. Of these funds \$3,372,389 is provided to the first category of hospitals, which are those hospitals that are part of a system that operate a provider service network in the following manner: \$570,978 is for Jackson Memorial Hospital; \$458,668 is for hospitals in Broward Health; \$840,958 is for hospitals in the Memorial Healthcare System; and \$256,166 to Shands Jacksonville and \$1,245,619 to Shands Gainesville. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the outpatient rate. Of the above funds, \$4,221,468 shall be used for the second category to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for those hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the outpatient rate. Of the above funds, \$4,632,726 shall be used for the third category to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for rural hospitals. In the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the outpatient rate for those individual hospitals. For this section of proviso the agency shall use</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$4,702,344 from the Grants and Donations Trust Fund and \$7,524,239 from the Medical Care Trust Fund are provided to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for the following three categories of hospitals. Of these funds \$3,372,389 is provided to the first category of hospitals, which are those hospitals that are part of a system that operate a provider service network in the following manner: \$570,978 is for Jackson Memorial Hospital; \$458,668 is for hospitals in Broward Health; \$840,958 is for hospitals in the Memorial Healthcare System; and \$256,166 to Shands Jacksonville and \$1,245,619 to Shands Gainesville. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the outpatient rate. Of the above funds, \$4,221,468 shall be used for the second category to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for those hospitals that are licensed as a children's specialty hospital and whose Medicaid days plus charity care days divided by total adjusted patient days equals or exceeds 30 percent. In the event that the above amounts exceed the amount of the Medicaid trend adjustment applied to each hospital, then the excess funds will be used to buy back other Medicaid reductions in the outpatient rate. Of the above funds, \$4,632,729 shall be used for the third category to buy back the Medicaid trend adjustment that is being applied against the Medicaid outpatient rates for rural hospitals. In the event that the funds under this category exceed the amount of the Medicaid trend adjustment, then any excess funds will be used to buy back other Medicaid reductions in the outpatient rate for those individual hospitals. For this section of proviso the agency shall use</p>

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<p>the average of 2003, 2004 and 2005 audited DSH data available as of March 1, 2010. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>		<p>the average of 2003, 2004 and 2005 audited Disproportionate Share Hospital (DSH) data available as of March 1, 2009. In the event the agency does not have the prescribed three years of audited DSH data for a hospital, the agency shall use the average of the audited DSH data for 2003, 2004 and 2005 that are available.</p>
<p>From the funds in Specific Appropriation 194, \$12,543,857 from the Grants and Donations Trust Fund and \$20,071,476 from the Medical Care Trust Fund are provided for public hospitals, including any leased public hospital found to have sovereign immunity, teaching hospitals as defined in sections 408.07 (45) or 395.805, Florida Statutes, which have seventy or more full-time equivalent resident physicians and designated trauma hospitals to buy back the Medicaid outpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their outpatient rates up to actual Medicaid outpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid outpatient trend adjustment applied to the individual state mental health hospitals.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$12,543,857 from the Grants and Donations Trust Fund and \$20,071,476 from the Medical Care Trust Fund are provided for public hospitals, including any leased public hospital found to have sovereign immunity, teaching hospitals as defined in sections 408.07 (45) or 395.805, Florida Statutes, which have seventy or more full-time equivalent resident physicians and designated trauma hospitals to buy back the Medicaid outpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their outpatient rates up to actual Medicaid outpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid outpatient trend adjustment applied to the individual state mental health hospitals.</p>
<p>From the funds in Specific Appropriation 194, \$29,345,048 from the Grants and Donations Trust Fund and \$46,955,156 from the Medical Care Trust Fund are provided for hospitals, not previously included in the proviso above, to buy back the Medicaid outpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their outpatient rates up to actual Medicaid outpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. The agency shall not include the funds described in this paragraph for the buy back of reductions to outpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations unless the nonfederal share is provided through grants and donations from state, county or other governmental funds. This section of proviso does not include the buy back of the Medicaid outpatient trend adjustment applied to the individual state mental health hospitals.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$22,077,630 from the Public Medical Assistance Trust Fund and \$35,593,044 from the Medical Care Trust Fund are provided to restore reductions applied to outpatient hospital rates. The agency shall implement a recurring methodology in the Title XIX Outpatient Hospital Reimbursement Plan to achieve this restoration. The agency shall not include the funds described in this paragraph for the restoration of reductions to outpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations.</p>
<p>From the funds in Specific Appropriation 194, \$15,720,104 from the Grants and Donations Trust Fund and \$25,153,799 from the Medical Care Trust Fund are provided for hospitals, not previously included in the proviso above, to buy back the Medicaid outpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their outpatient rates up to actual Medicaid outpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. The agency shall not include the funds described in this paragraph for the buy back of reductions to outpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations, unless the required state share for including these funds in the calculation of the capitation rates is provided through grants and donations from county or other local governmental funds.</p>	<p>To be developed based on LIP Model</p>	<p>From the funds in Specific Appropriation 194, \$15,720,104 from the Grants and Donations Trust Fund and \$25,153,799 from the Medical Care Trust Fund are provided for hospitals, not previously included in the proviso above, to buy back the Medicaid outpatient trend adjustment applied to their individual hospital rates and other Medicaid reductions to their outpatient rates up to actual Medicaid outpatient cost. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. The agency shall not include the funds described in this paragraph for the buy back of reductions to outpatient hospital rates in the calculation of capitation rates for Health Maintenance Organizations, unless the required state share for including these funds in the calculation of the capitation rates is provided through grants and donations from county or other local governmental funds.</p>
<p>From the funds in Specific Appropriation 194, the agency shall research and develop an efficiency based adjustment method for institutional providers. The method will provide definitions and measures of efficiencies. The agency must receive approval of the methodology from the Centers for Medicare and Medicaid Services prior to implementation and shall notify the Legislature upon receipt of such</p>	<p>Senate</p>	<p>From the funds in Specific Appropriation 194, the agency shall research and develop an efficiency based adjustment method for institutional providers. The method will provide definitions and measures of efficiencies. The agency must receive approval of the methodology from the Centers for Medicare and Medicaid Services prior to implementation and shall notify the Legislature upon receipt of such</p>

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approval.

Senate: From the funds in Specific Appropriation 194, the agency shall publish the most current Medicaid outpatient rates for the current rate semester on the agency's web site each month.

198 SPECIAL CATEGORIES  
OTHER LAB AND X-RAY SERVICES

From the funds in Specific Appropriation 198, the agency shall continue a program to assess HIV drug resistance for cost-effective management of anti-retroviral drug therapy.

IDENTICAL

From the funds in Specific Appropriation 198, the agency shall continue a program to assess HIV drug resistance for cost-effective management of anti-retroviral drug therapy.

201 SPECIAL CATEGORIES  
PERSONAL CARE SERVICES

~~The Agency for Health Care Administration shall encourage a beneficiary who is medically able to attend a Prescribed Pediatric Extended Care (PPEC) center and whose needs can be met by the PPEC to have PPEC services when PPEC services are medically appropriate and are available within a reasonable distance from the pick-up or drop-off location for the child. Private duty nursing may be provided as a wraparound alternative for an individual requiring additional services when PPEC is not available.~~

Accept  
House  
Offer

From the funds in Specific Appropriation 201, the Agency for Health Care Administration shall direct a beneficiary who is medically able to attend a prescribed pediatric extended care facility and whose needs can be met by such center, to a prescribed pediatric extended care facility for patient care within a reasonable distance from the pick-up or drop-off location for the child. Prescribed pediatric extended care facility services must be approved by the Medicaid program or its designee. Private duty nursing may be provided as a wrap around alternative for an individual needing additional services when a prescribed pediatric extended care facility is not available.

203 SPECIAL CATEGORIES  
PHYSICIAN SERVICES

From the funds in Specific Appropriation 203, the agency is authorized to continue the physician lock-in program for recipients who participate in the pharmacy lock-in program.

Senate

In conducting the hospitalist program as required in section 409.905 (5) (d), Florida Statutes, the agency shall exclude the University of Miami at Cedars Hospital in Miami-Dade County from participation in the program. The agency is authorized to modify appropriate contractual arrangements or federal waivers, as necessary, to effect this exclusion.

Senate

~~Funds in Specific Appropriation 203 reflect a reduction of \$320,786 from the General Revenue Fund, \$513,290 from the Medical Care Trust Fund, and \$2,271 from the Refugee Assistance Trust Fund to reflect a policy to limit coverage of chiropractic services to beneficiaries under the age of 21, effective October 1, 2010. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.~~

Accept  
House  
Offer

No Proviso

From the funds in Specific Appropriation 203, \$120,000,000 95,000,000 from the Medical Care Trust Fund is provided for special Medicaid payments for services provided by doctors of medicine and osteopathy employed by or under contract with a medical school in

Accept  
House

~~From the funds in Specific Appropriation 203, \$95,000,000 from the Medical Care Trust Fund is provided for special Medicaid payments for services provided by doctors of medicine and osteopathy employed by or under contract with a medical school in Florida. The expansion of~~



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<p>Florida. The expansion of existing programs to increase federal reimbursement through Upper Payment Limit (UPL) provisions, shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue or tobacco settlement funds. The agency is authorized to seek a Florida Title XIX State Plan Amendment or waiver to include additional medical schools in Florida.</p>	<p>Offer</p>	<p><del>existing programs to increase federal reimbursements through Upper Payment Limit (UPL) provisions, shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue or tobacco settlement funds. The agency is authorized to seek a Florida Title XIX State Plan Amendment or waiver to include additional medical schools in Florida.</del></p>
<p>The Agency for Health Care Administrative shall seek federal approval to implement a supplemental payment program for medical school faculty who provide services to Medicaid beneficiaries enrolled in capitated managed care plans so that such payments may be made directly to physicians employed by or under contract with the state's medical schools for costs associated with graduate medical education or their teaching mission. The agency shall amend its Medicaid policies as necessary to implement this program. Nothing herein shall be construed as requiring capitated managed care plans to fund the state share of the supplemental payments.</p>	<p>Accept House Offer</p>	<p><del>From the funds in Specific Appropriation 203, the Agency for Health Care Administration shall seek federal approval to implement a supplemental payment program for medical school faculty who provide services to Medicaid beneficiaries enrolled in capitated managed care plans so that such payments may be made directly to physicians employed by or under contract with the state's medical schools for costs associated with graduate medical education. The agency shall amend its Medicaid policies as necessary to implement this program. Nothing herein shall be construed as requiring capitated managed care plans to fund the state share of the supplemental payments.</del></p>
<p>204 SPECIAL CATEGORIES PREPAID HEALTH PLANS</p>		
<p><del>Funds in Specific Appropriation 204, include reductions of \$19,500,302 from the General Revenue Fund, \$31,343,450 from the Medical Care Trust Fund and \$200,177 from the Refugee Assistance Trust Fund to Health Maintenance Organization and Provider Service Network capitation payments as a result of reducing the reimbursement of inpatient and outpatient hospital rates, effective September 1, 2010.</del></p>	<p>Accept House Offer</p>	<p>Funds in Specific Appropriation 204, include reductions of \$31,860,117 from the General Revenue Fund, \$50,979,501 from the Medical Care Trust Fund and \$325,584 from the Refugee Assistance Trust Fund to Health Maintenance Organization and Provider Service Network capitation payments as a result of reducing the reimbursement of inpatient and outpatient hospital rates, effective September 1, 2010.</p>
<p>Funds in Specific Appropriation 204, include reductions of \$6,223,057 from the General Revenue Fund, \$9,958,348 from the Medical Care Trust Fund, and \$63,598 from the Refugee Assistance Trust Fund to Health Maintenance Organization and Provider Service Network capitation payments as a result of reducing the Medicaid reimbursement rates for clinic services, effective September 1, 2010.</p>	<p>Senate</p>	<p>Funds in Specific Appropriation 204, include reductions of \$762,693 from the General Revenue Fund, \$1,220,388 from the Medical Care Trust Fund, and \$7,794 from the Refugee Assistance Trust Fund to Health Maintenance Organization and Provider Service Network capitation payments as a result of reducing the Medicaid reimbursement rates for clinic services, effective September 1, 2010.</p>
<p>From the funds appropriated in Specific Appropriation 204, the agency is authorized to provide Medicaid children enrolled in the Medicaid Prepaid Dental Health Program in Miami-Dade County with a choice of at least two licensed managed care dental providers, who shall have experience in providing dental care to Medicaid or Title XXI enrollees, and who meet all standards and requirements of the agency.</p>	<p>IDENTICAL</p>	<p>From the funds appropriated in Specific Appropriation 204, the agency is authorized to provide Medicaid children enrolled in the Medicaid Prepaid Dental Health Program in Miami-Dade County with a choice of at least two licensed managed care dental providers, who shall have experience in providing dental care to Medicaid or Title XXI enrollees, and who meet all standards and requirements of the agency.</p>
<p>Funds in Specific Appropriation 204 reflect a reduction of \$8,731,766 from the General Revenue Fund and \$13,971,733 from the Medical Care Trust Fund to reflect a policy of increasing the managed care discount factor by 4.5 percent in Agency for Health Care Administration Medicaid Area 11 due to a fraud and abuse adjustment.</p>	<p>IDENTICAL</p>	<p>From the funds provided in specific appropriation 204, \$8,731,766 from the General Revenue Fund and \$ 13,971,733 from the Medical Care Trust Fund reflects the reduction of cost savings from increasing the managed care discount factor by 4.5 percent in Agency for Health Care Administration's Area 11 due to a fraud and abuse adjustment.</p>
<p>Funds in Specific Appropriation 204 reflect an increase of \$89,738 from the General Revenue Fund, \$143,591 from the Medical Care Trust and \$917 from the Refugee Assistance Trust Fund as a result of increasing the payment to Medicaid freestanding dialysis clinics from \$95.00 to</p>	<p>Accept House Offer</p>	

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\$100.00 per visit.

Senate From the funds in Specific Appropriation 204, beginning September 1, 2010, for all prepaid capitated contracts with plans for the provision of diagnosis specific specialty care, the agency shall apply a discount factor to the rate equal to 10 percent.

~~The agency is directed to integrate provisions of acute care and behavioral health services in the public hospital operated managed care model to the extent feasible and consistent with continuity of care and patient choice. The agency is authorized to seek any federal waiver or state plan amendment necessary to implement this provision.~~

Accept  
House  
Offer No Proviso

Senate From the funds in Specific Appropriation 204, the Agency for Health Care Administration is authorized to contract on a prepaid or fixed-sum basis with appropriately-licensed prepaid dental health plans to provide dental services for a period not to exceed two years. The agency may contract with a single qualified entity to provide dental services on a regional or statewide basis that will result in greater efficiency to the state and will facilitate better access and outcomes for Medicaid beneficiaries. On a quarterly basis, the contracting entity shall report Medicaid beneficiary utilization data and encounter data by Current Dental Terminology (CDT) code to the agency. On an annual basis, the agency shall provide a report comparing the data provided by the contracting entity with available data from the pool of Medicaid recipients from previous years to the Speaker of the House, the Senate President and the Governor. The contract(s) shall be awarded through competitive procurement. The agency shall include in the contract(s), a provision that requires no less than 90% of the contracting fee be used to directly offset the cost of providing direct patient care as opposed to administrative costs. The agency may include in this contract dental services that are provided through the Medicaid fee for service and managed care delivery system, but shall exclude Miami-Dade County. If the agency includes the managed care delivery system, the agency may also include Medicaid reform counties. The agency is authorized to seek any necessary state plan amendments or federal waivers to implement this provision.

205 SPECIAL CATEGORIES  
PRESCRIBED MEDICINE/DRUGS

Funds in Specific Appropriation 205 reflect a reduction of \$634,423 from the General Revenue Fund and \$1,015,142 from the Medical Care Trust Fund as a result of implementing manufacturer drug rebate collections on injectable drugs reimbursed through physician services claims.

Accept  
House  
Offer

~~Funds in Specific Appropriation 205 reflect a reduction of \$5,657,881 from the General Revenue Fund and \$9,053,199 from the Medical Care Trust Fund to reflect the Medicaid maximum allowable fee for pharmaceutical ingredient costs on the lowest of: the wholesaler acquisition costs (WAC), the federal upper limit (FUL), the state maximum allowable cost (SMAC), or the usual and customary (UAC) charge billed by the provider effective March 1, 2011.~~

Accept  
House  
Offer No Proviso

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207 SPECIAL CATEGORIES  
PRIVATE DUTY NURSING SERVICES

Identical proviso to be researched by House: Funds in Specific Appropriation 207 reflect a reduction of \$2,696,554 from the General Revenue Fund and \$3,356,316 from the Medical Care Trust Fund based on limiting private duty nursing services to 12 continuous hours per day, except as determined medically necessary in circumstances where the parent or guardian cannot participate in the care of their child because of physical or mental limitations, which are documented by a licensed physician or for employment purposes, which must be verifiable through the parent or guardian's place of employment.

212 SPECIAL CATEGORIES  
CLINIC SERVICES

Funds in Specific Appropriation 212 reflect a reduction of \$15,421,299 from the General Revenue Fund, \$24,676,267 from the Medical Care Trust Fund, and \$281,534 from the Refugee Assistance Trust Fund as a result of modifying the reimbursement for county health department rates. The agency shall implement a recurring methodology in the Title XIX County Health Department Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.

Senate: Funds in Specific Appropriation 212 reflect a reduction of \$3,349,398 from the General Revenue Fund, \$5,359,386 from the Medical Care Trust Fund, and \$61,146 from the Refugee Assistance Trust Fund as a result of modifying the reimbursement for county health department rates. The agency shall implement a recurring methodology in the Title XIX County Health Department Reimbursement Plan to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.

From the funds in Specific Appropriation 212, \$16,396,032 from the Grants and Donations Trust Fund and \$26,235,356 from the Medical Care Trust Fund are provided to buy back Clinic Services rate adjustments, effective on or after July 1, 2009- 8 and are contingent on the nonfederal share being provided through grants and donations from state, county or other governmental funds. Authority is granted to buy back rate reductions up to, but not higher than the amounts available under the authority appropriated in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

Senate with Changes: From the funds in Specific Appropriation 212, \$11,073,235 from the Medical Care Trust Fund and \$6,920,322 from the Grants and Donations Trust Fund are provided to buy back legislative rate reductions authorized on or after July 1, 2008, but not to exceed this appropriation. The payments under this proviso are contingent on the state share being provided through grants and donations from state, county, or other governmental funds. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

MEDICAID LONG TERM CARE  
214 SPECIAL CATEGORIES  
ASSISTIVE CARE SERVICES

Funds in Specific Appropriation 214 are provided to implement Medicaid coverage for Assistive Care Services and are contingent on the availability of state match being provided in Specific Appropriation 373.

IDENTICAL: Funds in Specific Appropriation 214 are provided to implement Medicaid coverage for Assistive Care Services and are contingent on the availability of state match being provided in Specific Appropriation 373.

215 SPECIAL CATEGORIES  
HOME AND COMMUNITY BASED SERVICES

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Funds in Specific Appropriations 215 and 223 for the Developmental Services Waiver, the Aged and Disabled Waiver, the Project AIDS Care Waiver, and the Nursing Home Diversion Waiver may be used for reimbursement for services provided through agencies licensed pursuant to section 400.506, Florida Statutes.

IDENTICAL

Funds in Specific Appropriations 215 and 223 for the Developmental Services Waiver, the Aged and Disabled Waiver, the Project AIDS Care Waiver, and the Nursing Home Diversion Waiver may be used for reimbursement for services provided through agencies licensed pursuant to section 400.506, Florida Statutes.

Accept  
House  
Offer

From the funds in Specific Appropriation 215, the Agency for Health Care Administration, in cooperation with the Department of Children and Families (DCF), is authorized to seek federal approval to amend the Assisted Living for the Elderly (ALE) Waiver to allow for enrollment of those between the ages of 18 and 59 in addition to the currently eligible enrollees. The Department of Children and Families is authorized to use funds in Specific Appropriation line item 306 to serve adults with disabilities ages 18 to 59 under the Assisted Living for the Elderly (ALE) Waiver.

218 SPECIAL CATEGORIES

INTERMEDIATE CARE FACILITIES/DEVELOPMENTALLY DISABLED COMMUNITY

From the funds in Specific Appropriation 218, \$11,563,682 from the Grants and Donations Trust Fund and \$18,503,094 from the Medical Care Trust Fund are provided to buy back intermediate care facilities for the developmentally disabled rate reductions, effective on or after October 1, 2008 and are contingent on the nonfederal share being provided through intermediate care facilities for the developmentally disabled quality assessments. Authority is granted to buy back rate reductions up to, but not higher than, the amounts available under the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

IDENTICAL

From the funds in Specific Appropriation 218, \$11,563,683 from the Grants and Donations Trust Fund and \$18,503,096 from the Medical Care Trust Fund are provided to buy back intermediate care facilities for the developmentally disabled rate reductions, effective on or after October 1, 2009. Funds provided in the Grants and Donations Trust Fund are contingent upon the non-federal share being provided through an intermediate care facilities for the developmentally disabled quality assessment. Authority is granted to buy back rates up to, but not higher than, the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

Senate

Funds in Specific Appropriation 218 reflect a reduction of \$5,330,607 from the General Revenue Fund and \$8,529,524 from the Medical Care Trust Fund as a result of modifying the reimbursement for intermediate care facilities for the developmentally disabled, effective October 1, 2009. The agency shall implement a recurring methodology in the Title XIX Intermediate Care Facility for the Mentally Retarded and Developmentally Disabled for Community Owned and Operated Facilities Reimbursement Plan to achieve this reduction.

No Proviso

Accept  
House  
Offer

~~Funds in Specific Appropriation 218 reflect a reduction of \$491,042 from the Grants and Donations Trust Fund and \$765,718 from the Medical Care Trust Fund as a result of reduced net patient service revenue available for quality assessments under the federal maximum allowable calculation.~~

Senate

From the funds in Specific Appropriation 218, the agency shall research and develop an efficiency based adjustment method for institutional providers. The method will provide definitions and measures of efficiencies. The agency must receive approval of the methodology from the Centers for Medicare and Medicaid Services prior to

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implementation and shall notify the Legislature upon receipt of such approval.

219 SPECIAL CATEGORIES  
NURSING HOME CARE

From the funds in Specific Appropriation 219, \$5,199,157 from the Grants and Donations Trust Fund and \$8,319,193 from the Medical Care Trust Fund are provided for the purpose of maximizing federal revenues through the continuation of the Special Medicaid Payment Program for governmentally funded nursing homes. Any requests pursuant to chapter 216, Florida Statutes, by the Agency for Health Care Administration to increase budget authority to expand existing programs using increased

federal reimbursement through these provisions, shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue. The agency is authorized to seek federal Medicaid waivers as necessary to implement this provision.

Funds in Specific Appropriation 219 reflect a reduction of \$51,068,058 from the General Revenue Fund and \$81,714,203 from the Medical Care Trust Fund as a result of modifying the reimbursement for nursing home rates. The agency shall implement a recurring methodology in the Title XIX Nursing Home Reimbursement Plan to reduce nursing home rates to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.

From the funds in Specific Appropriation 219, the Agency for Health Care Administration, in consultation with the Department of Elder Affairs, the Department of Health, and the Department of Children and Families, is authorized to transfer funds, in accordance with the provisions of chapter 216, Florida Statutes, to Specific Appropriation 310 Home and Community Based Services Waiver, Specific Appropriation 395 Home and Community Based Services Waiver, Specific Appropriation 396 Assisted Living Facility Waiver, Specific Appropriation 401 Capitated Nursing Home Diversion Waiver, and Specific Appropriation 563 Brain and Spinal Cord Home and Community Based Services Waiver to transition the greatest number of appropriate eligible beneficiaries from skilled nursing facilities to community-based alternatives in order to maximize the reduction in Medicaid nursing home occupancy. Priority for the use of these funds will be given to the planning and service areas with the greatest potential for transition success.

Funds in Specific Appropriation 219 reflect the transfer of \$3,257,203 from the General Revenue Fund and \$5,211,863 from the

IDENTICAL

From the funds in Specific Appropriation 219, \$5,199,157 from the Grants and Donations Trust Fund and \$8,319,193 from the Medical Care Trust Fund are provided for the purpose of maximizing federal revenues through the continuation of the Special Medicaid Payment Program for governmentally funded nursing homes. Any requests pursuant to chapter 216, Florida Statutes, by the Agency for Health Care Administration to increase budget authority to expand existing programs using increased

federal reimbursement through these provisions, shall be contingent upon the availability of state match from existing state funds or local sources that do not increase the current requirement for state general revenue. The agency is authorized to seek federal Medicaid waivers as necessary to implement this provision.

Funds in Specific Appropriation 219 reflect a reduction of \$76,690,037 from the General Revenue Fund and \$122,712,036 from the Medical Care Trust Fund as a result of modifying the reimbursement for nursing home rates. The agency shall implement a recurring methodology in the Title XIX Nursing Home Reimbursement Plan to reduce nursing home rates to achieve this reduction. In establishing rates through the normal process, prior to including this reduction, if the unit cost is equal to or less than the unit cost used in establishing the budget, then no additional reduction in rates is necessary. In establishing rates through the normal process, prior to including this reduction, if the unit cost is greater than the unit cost used in establishing the budget, then rates shall be reduced by an amount required to achieve this reduction, but shall not be reduced below the unit cost used in establishing the budget.

Senate

Accept  
House  
Offer

~~From the funds in Specific Appropriation 219, the Agency for Health Care Administration, in consultation with the Department of Elder Affairs, the Department of Health, and the Department of Children and Families, is authorized to transfer funds, in accordance with the provisions of chapter 216, Florida Statutes, to Specific Appropriation 310 Home and Community Based Services Waiver, Specific Appropriation 395 Home and Community Based Services Waiver, Specific Appropriation 396 Assisted Living Facility Waiver, Specific Appropriation 401 Capitated Nursing Home Diversion Waiver, and Specific Appropriation 563 Brain and Spinal Cord Home and Community Based Services Waiver to transition the greatest number of appropriate eligible beneficiaries from skilled nursing facilities to community-based alternatives in order to maximize the reduction in Medicaid nursing home occupancy. Priority for the use of these funds will be given to the planning and service areas with the greatest potential for transition success.~~

Accept  
House

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Medical Care Trust Fund for the implementation of the Florida Nursing Home Transition Plan.

Offer

From the funds in Specific Appropriation 219, \$335,935,864 from the Grants and Donations Trust Fund and \$537,532,321 from the Medical Care Trust Fund are provided to buy back nursing facility rate reductions, effective on or after January 1, 2008 and are contingent on the non federal share being provided through nursing home quality assessments. Authority is granted to buy back rate reductions up to, but not higher than, the amounts available under the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

IDENTICAL

From the funds in Specific Appropriation 219, \$335,935,864 from the Grants and Donations Trust Fund and \$537,532,321 from the Medical Care Trust Fund are provided to buy back nursing facility rate reductions, effective on or after January 1, 2008, and are contingent upon the non-federal share being provided through nursing home quality assessments. Authority is granted to buy back rates up to, but not higher than, the budgeted authority in this line. In the event that the funds are not available in the Grants and Donations Trust Fund, the State of Florida is not obligated to continue reimbursements at the higher amount.

Senate

From the funds in Specific Appropriation 219, the agency shall research and develop an efficiency based adjustment method for institutional providers. The method will provide definitions and measures of efficiencies. The agency must receive approval of the methodology from the Centers for Medicare and Medicaid Services prior to implementation and shall notify the Legislature upon receipt of such approval.

**AGENCY FOR PERSONS WITH DISABILITIES**

PROGRAM: SERVICES TO PERSONS WITH DISABILITIES  
HOME AND COMMUNITY SERVICES

238 SPECIAL CATEGORIES  
GRANT AND AID INDIVIDUAL AND FAMILY  
SUPPORTS

Funds in Specific Appropriation 238 expended for developmental training programs shall require a 12.5 percent match from local sources. In-kind match is acceptable provided there is no reduction in the number of persons served or level of services provided.

IDENTICAL

Funds in Specific Appropriation 238 expended for developmental training programs shall require a 12.5 percent match from local sources. In-kind match is acceptable provided there are no reductions in the number of persons served or level of services provided.

242 SPECIAL CATEGORIES  
HOME AND COMMUNITY BASED SERVICES WAIVER

ACCEPT  
SENATE

Funds from Specific Appropriation 242 shall not be used for administrative costs.

ACCEPT  
SENATE

Funds in Specific Appropriation 242 for developmental training programs shall require a 12.5 percent match from local sources. In-kind match is acceptable provided there are no reductions in the number of persons served or level of services provided.

Funds in Specific Appropriation 242 reflect a reduction of \$5,465,891 from the General Revenue Fund and \$10,346,098 from the Operations and Maintenance Trust Fund as a result of reducing provider rates by 2.5 percent, effective July 1, 2010. Personal Care Assistance, transportation, waiver support coordination, durable medical equipment, consumable medical supplies, and environmental and home accessibility services are specifically excluded from this reduction target. The

COUNTER  
OFFER -  
SENATE  
WITH  
CHANGES

Funds in Specific Appropriation 242 reflect a reduction of ~~\$26,963,403~~ \$13,481,701 from the General Revenue Fund and ~~\$43,144,248~~ and \$21,572,124 from the Operations and Maintenance Trust Fund as a result of reducing provider rates by 5 percent, effective July 1, 2010. Personal Care Assistance, transportation, waiver support coordination, durable medical equipment, consumable medical supplies, and environmental and home accessibility services are specifically excluded from this

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SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
agency shall amend provider contracts, cost plans and rules as necessary to achieve this recurring reduction.		reduction target. The agency shall amend provider contracts, cost plans and rules as necessary to achieve this recurring reduction.
Funds in Specific Appropriation 242 reflect a reduction of \$924,885 from the General Revenue Fund and \$1,479,911 from the Operations and Maintenance Trust Fund as a result of reducing the geographic differential in residential rehabilitation rates, effective July 1, 2010, from 7.5 percent to 4.5 percent in Miami-Dade, Broward, and Palm Beach Counties and from 20 percent to 15 percent in Monroe County.	ACCEPT HOUSE PROVISIO	
Funds in Specific Appropriation 242 reflect a reduction of \$769,200 from the General Revenue Fund and \$1,230,800 from the Operations and Maintenance Trust Fund as a result of eliminating behavior assistant services in standard and behavior focus group homes, effective January 1, 2011.	ACCEPT HOUSE PROVISIO	Funds in Specific Appropriation 242 reflect a reduction of \$769,200 from the General Revenue Fund and \$1,230,800 from the Operations and Maintenance Trust Fund as a result of eliminating behavior assistant services in standard and behavior focus group homes, effective July 1, 2010. The agency shall amend provider contracts, cost plans and rules as necessary to achieve this recurring reduction.
Funds in Specific Appropriation 242 reflect a transfer of \$1,182,645 from the General Revenue Fund and \$1,892,355 from the Operations and Maintenance Trust Fund to the Agency for Health Care Administration to provide disposable incontinence products to children ages 4 through 20 as a Medicaid state plan service rather than a Home and Community Based Waiver service, effective October 1, 2010.	ACCEPT HOUSE PROVISIO	
Funds in Specific Appropriation 242 reflect a recurring reduction of \$1,613,921 from the General Revenue Fund and \$2,582,441 from the Operations and Maintenance Trust Fund as a result of reducing expenditure caps in Tiers 2, 3, and 4 by 2.5 percent. The agency shall amend cost plans and rules as necessary to achieve this recurring reduction.	ACCEPT HOUSE PROVISIO	Funds in Specific Appropriation 242 reflect a recurring reduction of \$3,227,841 from the General Revenue Fund and \$5,164,882 from the Operations and Maintenance Trust Fund as a result of reducing expenditure caps in Tiers 2, 3, and 4 by 10 percent. The agency shall amend cost plans and rules as necessary to achieve this recurring reduction.
Funds in Specific Appropriation 242 reflect a reduction of \$535,804 from the General Revenue Fund and \$857,341 from the Operations and Maintenance Trust Fund as a result of limiting annual expenditures under tier one to not exceed \$150,000 per client each year, effective January 1, 2011. <u>Clients in tier one with a documented medical necessity requiring intensive behavioral residential habilitation services, intensive behavioral residential habilitation services with medical needs, or special medical care, as provided in the Developmental Disabilities Waiver Services Coverage and Limitations Handbook, shall not be subject to the \$150,000 limit on annual expenditures.</u>	ACCEPT HOUSE PROVISIO	Funds in Specific Appropriation 242 reflect a reduction of \$2,422,980 from the General Revenue Fund and \$3,877,020 from the Operations and Maintenance Trust Fund as a result of implementing an expenditure cap in Tier 1 of \$120,000 per year per client. The agency shall amend cost plans and rules as necessary to achieve this recurring reduction.

PROGRAM MANAGEMENT AND COMPLIANCE

STATEWIDE ISSUE From the funds in Specific Appropriations 245 through 258, by September 1, 2010, the Agency for Persons with Disabilities shall execute service level agreements, pursuant to section 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the Northwood Shared Resource Center (NSRC) and the Southwood Shared Resource Center (SSRC). If the agency is unable to complete and execute a service level agreement by that date, the agency shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government & Health Care and Senate Policy and Steering Committee on Ways and Means within five working

Health Care Appropriations

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HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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days, explaining the specific issues preventing execution and describing the agency's plan and schedule for resolving those issues.

247 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$24,873 from the General Revenue Fund in Specific Appropriation 247 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission of the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

STATEWIDE  
ISSUE

DEVELOPMENTAL DISABILITIES PUBLIC FACILITIES

The Agency for Persons with Disabilities shall purchase pharmaceuticals through the Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP), thereby enabling the agency to obtain pharmaceuticals at reduced prices. Additionally, the Department of Health and the agency shall determine the feasibility of consolidating drug dispensing and repackaging services under the Department of Health's central pharmacy.

SENATE

CONCUR WITH HOUSE POSITION Funds in Specific Appropriations 259 through 265 reflect a reduction of 332 full time equivalent positions, 8,807,807 in salary rate, \$2,032,958 from the General Revenue Fund and \$8,035,032 from the Operations and Maintenance Trust Fund as a result of the closure of the Gulf Coast Center facility, effective July 1, 2010.

CHILDREN AND FAMILY SERVICES, DEPARTMENT OF

ADMINISTRATION  
PROGRAM: EXECUTIVE LEADERSHIP  
EXECUTIVE DIRECTION AND SUPPORT SERVICES

272 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$1,750,212 from the General Revenue Fund, \$9,002 from the Federal Grants Trust Fund, \$15,737 from the Working Capital Trust Fund and in Specific Appropriations 272, 290, 296, 302, 326, 348, and 358 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission based on the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

STATEWIDE  
ISSUE

PROGRAM: SUPPORT SERVICES  
INFORMATION TECHNOLOGY

From the funds in Specific Appropriations 288 through 293 the Department of Children and Family Services shall develop and submit a transition plan by October 1, 2010, to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government &



Health Care Appropriations

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
STATEWIDE ISSUE		<p>Health Care and Senate Policy and Steering Committee on Ways and Means for the relocation and consolidation of its computing services and associated resources, located at the Winewood Office Complex, to the Northwood Share Resource Center (NSRC) by July 1, 2011, pursuant to s.282.201(2)(d)1.e., Florida Statutes.</p>
STATEWIDE ISSUE		<p>From the funds in Specific Appropriations 288 through 293, the department shall work with the Agency for Enterprise Information Technology (AEIT) and the NSRC in developing the plan that shall, at a minimum, include an inventory of all resources, including but not limited to, all computing equipment; a description of resources for computing services proposed to remain in the department; the budget, full time personnel, and contracted services associated with the costs of its current computing services; the necessary budget adjustments required to accomplish the transfer of computing resources; and a timetable with significant milestones for the completion of the relocation.</p>
STATEWIDE ISSUE		<p>From the funds in Specific Appropriations 288 through 293, by September 1, 2010, the department shall execute service level agreements, pursuant to section 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the NSRC and the Southwood Shared Resource Center (SSRC). If the department is unable to complete and execute a service level agreement by that date, the department shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government &amp; Health Care and Senate Policy and Steering Committee on Ways and Means within five working days, explaining the specific issues preventing execution and describing the department's plan and schedule for resolving those issues.</p>
STATEWIDE ISSUE		<p>From the funds in Specific Appropriations 294 through 298A, the Northwood Shared Resource Center (NSRC) shall develop a transition plan for absorbing the transfer of customer agency data center resources to the center based upon the timetables for transition as provided in the transferring agency's data center consolidation transition plan. The plan shall include Fiscal Year 2011-2012 legislative budget request adjustments submitted from each customer agency transferring resources, as well as budget adjustments required by the NSRC to accomplish the efficient transfer of the data center service resources. The plan shall describe and make recommendations relating to issues which must be resolved to accomplish the transfer. The plan shall be submitted to the Agency for Enterprise Information Technology (AEIT), Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government &amp; Health Care and Senate Policy and Steering Committee on Ways and Means by November 15, 2010.</p>
STATEWIDE ISSUE		<p>From the funds in Specific Appropriations 294 through 298A, the NSRC, in coordination with the AEIT, shall work with the agencies that are required to develop and submit data center consolidation transition plans to transfer computing resources to the state primary data center, pursuant to section 282.201(2)(d)1.e., Florida Statutes.</p>

NORTHWOOD SHARED RESOURCE CENTER (NSRC)

Health Care Appropriations

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HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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STATEWIDE  
ISSUE

From the funds in Specific Appropriations 294 through 298A, the NSRC shall also work with the AEIT and the agencies required to develop comparative cost benefit analyses for the purpose of determining the most cost effective center to provide their data center service functions.

STATEWIDE  
ISSUE

From the funds in Specific Appropriations 294 through 298A, in filling positions, the NSRC is to give priority consideration to state employees whose jobs have been adversely affected by workforce reductions in the agencies from where agency data center services are being transferred. Every reasonable effort is to be made to identify vacant positions and to match the adversely affected employees' skills with the requirements of available vacant positions in the data center.

STATEWIDE  
ISSUE

From the funds in Specific Appropriations 294 through 298A, beginning July 1, 2010, the Department of Juvenile Justice, Department of Business and Professional Regulation and the Department of Corrections shall each have one trustee with one vote each on the NSRC Board of Trustees in Fiscal Year 2010-11 to facilitate proposed data center consolidations during Fiscal Years 2010-2011 and 2011-2012.

PROGRAM: FAMILY SAFETY PROGRAM  
FAMILY SAFETY AND PRESERVATION SERVICES

308 SPECIAL CATEGORIES  
GRANTS AND AIDS - GRANTS TO SHERIFFS FOR  
PROTECTIVE INVESTIGATIONS

The funds in Specific Appropriation 308 shall be used by the Department of Children and Family Services to award grants to the sheriffs of Manatee, Pasco, Pinellas, Broward, Seminole, Hillsborough and Citrus counties to conduct child protective investigations as mandated in section 39.3065, Florida Statutes. The funds shall be allocated as follows:

Manatee County Sheriff.....	3,410,532
Pasco County Sheriff.....	4,591,619
Pinellas County Sheriff.....	10,040,024
Broward County Sheriff.....	12,565,620
Hillsborough County Sheriff.....	12,054,683
Seminole County Sheriff.....	3,323,114
Citrus County Sheriff.....	1,505,562

CONCUR -  
SENATE

The funds in Specific Appropriation 308 shall be used by the Department of Children and Family Services to award grants to the sheriffs of Manatee, Pasco, Pinellas, Broward, Seminole, Hillsborough and Citrus counties to conduct child protective investigations as mandated in section 39.3065, Florida Statutes. The funds shall be allocated as follows:

Manatee County Sheriff.....	3,410,532
Pasco County Sheriff.....	4,591,619
Pinellas County Sheriff.....	10,040,024
Broward County Sheriff.....	12,565,620
Hillsborough County Sheriff.....	12,054,683
Seminole County Sheriff.....	3,323,114
Citrus County Sheriff.....	1,505,562

~~The sheriffs receiving grants from the funds appropriated in Specific Appropriation 308 shall submit detailed expenditure reports to the Department of Children and Family Services for the fiscal year ending June 30, 2010, by July 31, 2010. The Department of Children and Family Services shall assemble the information reported by the sheriffs and submit the collection of reports to the Executive Office of the Governor, the chair of the Senate Policy and Steering Committee on Ways and Means, and the chair of the House Full Appropriations Council on~~

CONCUR -  
SENATE

No Proviso

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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~~General Government & Health Care by September 1, 2010.~~

312 SPECIAL CATEGORIES  
GRANTS AND AIDS - CHILD PROTECTION

CONCUR - From the funds in Specific Appropriation 312, the nonrecurring sum of  
SENATE \$500,000 is appropriated from the Welfare Transition Trust Fund for a  
program to empower families and promote healthy marriages in Florida.

OFFER - From the funds in Specific Appropriation 312, the nonrecurring sum of  
SENATE \$250,000 from the General Revenue Fund is appropriated for the Salvation  
Army Children's Village.

315 SPECIAL CATEGORIES  
GRANTS AND AIDS - FAMILY FOSTER CARE

From the funds in Specific Appropriation 315, the department shall transfer \$4,000,000 from the General Revenue Fund to the Agency for Health Care Administration to provide Medicaid coverage for children in the Statewide Inpatient Psychiatric Program (SIPP) and Residential Group Care beds.

IDENTICAL

From the funds in Specific Appropriation 315, the department shall transfer \$4,000,000 from the General Revenue Fund to the Agency for Health Care Administration to provide Medicaid coverage for children in the Statewide Inpatient Psychiatric Program (SIPP) and Residential Group Care beds.

320 SPECIAL CATEGORIES  
GRANTS AND AIDS - COMMUNITY BASED CARE FUNDS FOR PROVIDERS OF CHILD WELFARE SERVICES

CONCUR -  
SENATE

From the funds in Specific Appropriation 320, the nonrecurring sum of \$10,315,978 is appropriated from the Federal Grants Trust Fund to achieve a more equitable funding distribution among community based care lead agencies. These funds shall be distributed to the lead agencies with funding allocations, excluding Independent Living and Maintenance Adoption Subsidies, that fall below their fair share, using a distribution formula that is based on the following four weighted factors: number of children in poverty (30 percent); number of reports to the Abuse Hotline that are either referred for investigation or whose findings have been verified (30 percent); number of children in out-of-home care (30 percent); contribution to a safe reduction in out-of-home care (10 percent). Community based care lead agencies not meeting the criteria for receiving additional equity funds shall receive no additional funding from this appropriation increase.

321 SPECIAL CATEGORIES  
GRANTS AND AIDS - COMMUNITY BASED CARE - AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

From the funds available in Specific Appropriation 321, \$10,315,976 from the Federal Grants Trust Fund is provided for the Foster Care Waiver Program from federal funds available from an increase in Title IV-E Foster Care funds authorized by the American Recovery and Reinvestment Act of 2009.

CONCUR -  
SENATE

No Proviso

From the funds available in Specific Appropriation 321, \$1,055,316 from the Federal Grants Trust Fund is provided for Maintenance Adoption Subsidies from additional federal funds available from Title IV-E Adoption Assistance authorized by the American Recovery and Reinvestment Act of 2009.

CONCUR -  
SENATE

No Proviso

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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322 SPECIAL CATEGORIES

GRANTS AND AIDS - VIOLENCE AGAINST WOMEN ACT - AMERICAN RECOVERY AND REINVESTMENTACT OF 2009

From the funds provided in Specific Appropriation 322, \$2,486,729 from the Federal Grants Trust Fund is provided for the Domestic Violence Program from increased federal funds available from the Violence Against Women Act authorized by the American Recovery and Reinvestment Act of 2009. The department is authorized to administer the distribution of these funds through a grant application and award process.

IDENTICAL

From the funds provided in Specific Appropriation 322, \$2,486,729 from the Federal Grants Trust Fund is provided for the Domestic Violence Program from increased federal funds available from the Violence Against Women Act authorized by the American Recovery and Reinvestment Act of 2009. The department is authorized to administer the distribution of these funds through a grant application and award process.

PROGRAM: MENTAL HEALTH PROGRAM  
MENTAL HEALTH SERVICES

334 SPECIAL CATEGORIES

GRANTS AND AIDS - CONTRACTED SERVICES

From the funds in Specific Appropriation 334, the department may pay the contracted provider of operations at the Florida Civil Commitment Center (FCCC) a fixed-price unit rate of \$55.00 per bed day based on the midnight census to cover housing costs provided by the DeSoto County Sheriff. Eligible payments are for residents of FCCC that are in the the DeSoto County Sheriff's custody after being arrested and charged for having committed a crime at the FCCC facility.

ACCEPT  
HOUSE

From the funds in Specific Appropriation 334, the department may pay the contracted provider of operations at the Florida Civil Commitment Center (FCCC) a fixed price unit rate of \$55.00 per bed day based on the midnight census to cover housing costs provided by the DeSoto County Sheriff. Eligible payments are for residents of FCCC who are in the DeSoto County Sheriff's custody after being arrested and charged for having committed a crime at the FCCC facility.

340 SPECIAL CATEGORIES

GRANTS AND AIDS - PURCHASED RESIDENTIAL TREATMENT SERVICES FOR EMOTIONALLY DISTURBED CHILDREN AND YOUTH

From the funds in Specific Appropriation 340, the department may transfer up to \$16,607,860 from the General Revenue Fund to the Agency for Health Care Administration to provide Medicaid coverage for children in the Statewide Inpatient Psychiatric Program (SIPP) and Residential Group Care beds. The department must transfer funds up to this amount to cover all services provided to Medicaid eligible children through the Statewide Inpatient Psychiatric Program and Residential Group Care beds. The remaining Care beds. The remaining funds may be used to provide residential treatment services to non-Medicaid eligible children.

ACCEPT  
HOUSE  
WITH  
CHANGES

From the funds in Specific Appropriation 340, the department shall transfer \$16,607,859 from the General Revenue Fund to the Agency for Health Care Administration to provide Medicaid coverage for children in the Statewide Inpatient Psychiatric Program (SIPP) and Residential Group Care beds. The remaining funds shall be used to provide residential services to non-Medicaid eligible children.

PROGRAM: ECONOMIC SELF SUFFICIENCY PROGRAM  
ECONOMIC SELF SUFFICIENCY SERVICES

361 SPECIAL CATEGORIES

GRANTS AND AIDS - FEDERAL EMERGENCY SHELTER GRANT PROGRAM

ACCEPT -  
SENATE

From the funds in Specific Appropriation 361, the Department of Children and Families may accept and administer funding allocated to the State of Florida by the U.S. Department of Urban Development (HUD) for the Emergency Shelter Grant (ESG) Program. The ESG Program will be administered by the Department of Children and Families in accordance with HUD rules and regulations. This funding may be granted by the state to local governments in the state, which may include cities and counties that are ESG grantees, or to private nonprofit organizations, if the local government where the project is located certifies its

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SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
		approval of the project. Initial preference will be given to local governments and nonprofit organizations in areas of the state where local governments do not receive funding directly from HUD. Grant applications will be ranked competitively based on grant application requirements and criteria published by the Department of Children and Families.

361A SPECIAL CATEGORIES  
GRANTS AND AIDS - HOMELESS HOUSING ASSISTANCE GRANTS

OFFER - From the funds in Specific Appropriation 361A, the non-recurring sum  
SENATE of \$250,000 from the General Revenue Fund is provided for services to prevent or eliminate homelessness.

363 SPECIAL CATEGORIES  
GRANTS AND AIDS - CONTRACTED SERVICES

ACCEPT - From the funds in Specific Appropriation 363, an increase of \$847,548  
SENATE from the Federal Grants Trust Fund is provided to continue the Supplemental Nutrition Assistance Program (SNAP) Nutrition Education. Subject to the federal grant specifications, the program curriculum shall include a public health education component, which, at a minimum, shall provide specific information on the importance of good dental care, and general information on diabetes, heart disease and other chronic illnesses associated with poor nutrition.

OFFER - From the funds in Specific Appropriation 363, the non-recurring sum  
SENATE of \$100,000 from the Welfare Transition Trust Fund is provided to the Richmond Heights Homeowners Association for crisis intervention and support services to low-income persons.

OFFER - From the funds in Specific Appropriation 363, the non-recurring sum  
SENATE of \$100,000 from the Welfare Transition Trust Fund is provided to the Goulds Coalition of Ministries and Lay People, Inc., for information and referral services to low-income families.

371 SPECIAL CATEGORIES  
GRANTS AND AIDS - HOMELESS PREVENTION - AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

From the funds in Specific Appropriation 371, \$8,602,844 from the Federal Grants Trust Fund is provided for homeless prevention from increased Homeless Prevention federal grant funds authorized by the American Recovery and Reinvestment Act of 2009.

IDENTICAL From the funds in Specific Appropriation 371, \$8,602,844 from the Federal Grants Trust Fund is provided for homeless prevention from increased Homeless Prevention federal grant funds authorized by the American Recovery and Reinvestment Act of 2009.

~~The Office on Homelessness may accept and administer funding allocated to the State of Florida by the U.S. Department of Urban Development (HUD) for the Emergency Shelter Grant (ESG) Program. The ESG Program will be administered by the Office on Homelessness in accordance with HUD rules and regulations. This funding may be granted by the state to local governments in the state, which may include cities and counties that are ESG grantees, or to private nonprofit organizations, if the local government where the project is located certifies its approval of the project. Initial preference will be given to local governments and~~

CONCUR -  
SENATE

No Proviso

Health Care Appropriations

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HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
<p><del>nonprofit organizations in areas of the state where local governments do not receive funding directly from HUD. Grant applications will be ranked competitively based on grant application requirements and criteria published by the Office on Homelessness.</del></p>		

372 FINANCIAL ASSISTANCE PAYMENTS  
CASH ASSISTANCE

<p>From the funds in Specific Appropriation 372, \$22,645,739 in nonrecurring funds from the Welfare Transition Trust Fund is provided for the Cash Assistance Program from federal funds available from the Temporary Assistance for Needy Families (TANF) Emergency Contingency Fund authorized by the American Recovery and Reinvestment Act of 2009.</p>	<p>ACCEPT HOUSE PROVISIO</p>
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**ELDER AFFAIRS, DEPARTMENT OF**  
PROGRAM: SERVICES TO ELDERS PROGRAM  
HOME AND COMMUNITY SERVICES

390 SPECIAL CATEGORIES  
GRANTS AND AIDS - COMMUNITY CARE FOR THE ELDERLY

<p>Funds in Specific Appropriation 390 appropriated for Aging Resource Centers shall be equally allocated to each Aging Resource Center at the beginning of the fiscal year. The Department may re-allocate funds during the fiscal year based on negotiations with the Aging Resource Centers.</p>	<p>IDENTICAL</p>	<p>Funds in Specific Appropriation 390 provided for Aging Resource Centers shall be equally allocated to each Aging Resource Center at the beginning of the fiscal year. The department may re-allocate funds during the fiscal year based on negotiations with the Aging Resource Centers.</p>
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395 SPECIAL CATEGORIES  
HOME AND COMMUNITY BASED SERVICES WAIVER

<p>CONCUR - SENATE</p>	<p>From the funds in Specific Appropriation 395, \$5,039,900 from the Operations and Maintenance Trust Fund and \$3,149,733 from the General Revenue Fund are provided for the department to serve elders in the Aged and Disabled Adult Home and Community Based Services Waiver. The department shall first enroll individuals from the waitlist who are assessed at a priority score of 4 or higher.</p>
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401 SPECIAL CATEGORIES  
CAPITATED NURSING HOME DIVERSION WAIVER

<p>From the funds in Specific Appropriation 401, \$1,027,534 from the General Revenue Fund and \$1,644,161 from the Operations and Maintenance Trust Fund are provided to increase the Program for All Inclusive Care for the Elderly (PACE) by 200 slots. 100 PACE slots are provided for Pinellas County effective July 1, 2010 and 100 PACE slots are provided for Hillsborough County, effective April 1, 2011.</p>	<p>ACCEPT HOUSE PROVISIO</p>
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401A GRANTS AND AIDS TO LOCAL GOVERNMENTS AND  
NONSTATE ENTITIES - FIXED CAPITAL OUTLAY  
GRANTS AND AIDS - SENIOR CITIZEN CENTERS

Funds in Specific Appropriation 401A are provided to complete construction of the Charles and Rae Kane Senior Center.

Health Care Appropriations

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HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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EXECUTIVE DIRECTION AND SUPPORT SERVICES

STATEWIDE  
ISSUE

From the funds in Specific Appropriation 402 through 410, by September 1, 2010, the Department of Elder Affairs shall execute a service level agreement, pursuant to s. 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the Southwood Shared Resource Center (SSRC). If the department is unable to complete and execute the service level agreements by that date, the department shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government & Health Care and Senate Policy and Steering Committee on Ways and Means within five working days, explaining the specific issues preventing execution and describing the department's plan and schedule for resolving those issues.

404 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$6,163 from the General Revenue Fund, \$12,203 from the Administrative Trust Fund and \$21,939 from the Federal Grants Trust Fund in Specific Appropriation 404 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission based on the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

STATEWIDE  
ISSUE

**HEALTH, DEPARTMENT OF**

PROGRAM: EXECUTIVE DIRECTION AND SUPPORT

ADMINISTRATIVE SUPPORT

421 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$561,121 from the General Revenue Fund, \$1,204,565 from the County Health Department Trust Fund, \$48,295 from the Medical Quality Assurance Trust Fund, and \$15,752 from the U. S. Trust Fund in Specific Appropriations 421, 430, 440, 462, 482, 494, 510, 531, 545, 555, and 573 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission based on the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

STATEWIDE  
ISSUE

425 SPECIAL CATEGORIES

CONTRACTED SERVICES

From the funds provided in Specific Appropriation 425, no more than \$500,000 is provided for the Department of Health to contract with a private financial consultant to prepare a cost allocation plan that includes a comprehensive planning and management review of each county health department's financial structure and a detailed cost allocation methodology for all expenditures. This review should include a funding source allocation methodology, as well as proposed allocation plan. The

ACCEPT

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
<p>plan must identify and describe in detail (1) the anticipated funding model and method to be used to pay for each service, specifically identifying any federal, state, and local agency funding sources; (2) the estimated expenses to be incurred by contractors as a result of outsourcing services; and (3) the proposed overhead costs for the cost allocation plan and the specific services that will be provided for such costs. The plan shall be submitted to the Executive Office of the Governor, the chair of the Senate Policy and Steering Committee on Ways and Means, and the chair of the House Full Appropriations Council on General Government and Health Care no later than March 31, 2011.</p>	<p>HOUSE PROVISIO</p>	

INFORMATION TECHNOLOGY

STATEWIDE  
ISSUE

From the funds in Specific Appropriations 428 through 437, by September 1, 2010, the Department of Health shall execute service level agreements, pursuant to section 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the Northwood Shared Resource Center (NSRC) and Southwood Shared Resource Center (SSRC). If the department is unable to complete and execute a service level agreement by that date, the department shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government & Health Care and Senate Policy and Steering Committee on Ways and Means within five working days, explaining the specific issues preventing execution and describing the department's plan and schedule for resolving those issues.

PROGRAM: COMMUNITY PUBLIC HEALTH  
FAMILY HEALTH OUTPATIENT AND NUTRITION SERVICES

445A AID TO LOCAL GOVERNMENTS  
GRANTS AND AIDS-RURAL DIVERSITY MINORITY HEALTH CARE

SENATE

From the funds in Specific Appropriation 445A, \$10,257,386 is provided for the Department of Health to contract with the Florida Agricultural and Mechanical University to continue a project, first funded in Fiscal Year 2008-2009, to address some of the chronic health disparities found in rural and underserved communities. One hundred percent of the funds in this appropriation shall be provided to the university, and the university shall use one hundred percent of the funds received in this contract to train health care professionals committed to serving in rural or under served areas of the state and to provide direct services to residents.

SENATE

From the funds in Specific Appropriation 445A, \$1,000,000 is provided for comprehensive primary and preventive dental and medical services to the uninsured and under-insured population in Lake Wales and surrounding communities.

449 SPECIAL CATEGORIES  
GRANTS AND AIDS - CRISIS COUNSELING

From the funds in Specific Appropriation 449, a minimum of 85 percent shall be spent on direct client services, website maintenance and Option

COUNTER  
OFFER -

From the funds in Specific Appropriation 449, ~~85 percent of all monies spent shall be spent on overall direct client service providers,~~



Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
Line and no more than \$400 shall be spent per month per direct service provider on contract management. The 85 percent shall be divided between contract management providers based on the number of 2009-2010 fiscal year maximum allowed direct service providers (70 percent/30 percent).	HOUSE WITH CHANGES	option line call center, and website maintenance. a minimum of 85 percent shall be spent on direct client services, website maintenance and Option Line and no more than \$400 shall be spent per month per direct service provider on contract management. The 85 percent shall be divided between contract management providers based on the number of 2009-2010 fiscal year maximum allowed direct service providers (70 percent/30 percent). To ensure program transparency and efficiency each contract management provider shall cross-monitor the five highest 2009-2010 contract year program utilizers of the other contract management provider.

451 SPECIAL CATEGORIES  
GRANTS AND AIDS - CONTRACTED SERVICES

SENATE From the funds in Specific Appropriation 451, \$139,000 from the General Revenue Fund is provided to the current contract provider of vision examinations and prescription glasses for students in the Miami-Dade County Public Schools who have failed the state-mandated, school vision screening.

INFECTIOUS DISEASE CONTROL

SENATE From the funds in Specific Appropriations 460 through 478, the Department of Health shall maximize the utilization of grants, services, and property from the Federal Government, foundations, organizations, medical schools and other entities as may be made available for chronic obstructive pulmonary disease (COPD) initiatives in Florida.

464 AID TO LOCAL GOVERNMENTS  
GRANTS AND AIDS - RYAN WHITE CONSORTIA

Funds in Specific Appropriation 464 from the Federal Grants Trust Fund are contingent upon sufficient state matching funds being identified to qualify for the federal Ryan White grant award. The Department of Health and the Department of Corrections shall collaborate in determining the amount of general revenue funds expended by the Department of Corrections for AIDS-related activities and services that qualify as state matching funds for the Ryan White grant.	IDENTICAL	Funds in Specific Appropriation 464, from the Federal Grants Trust Fund are contingent upon sufficient state matching funds being identified to qualify for the federal Ryan White grant award. The Department of Health and the Department of Corrections shall collaborate in determining the amount of general revenue funds expended by the Department of Corrections for AIDS-related activities and services that qualify as state matching funds for the Ryan White grant.
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ENVIRONMENTAL HEALTH SERVICES

486 SPECIAL CATEGORIES  
CONTRACTED SERVICES

From the funds in Specific Appropriation 486, \$2,000,000 from the Grants and Donations Trust Fund is provided to the department to continue phase II and complete the study authorized in Specific Appropriation 1682 of chapter 2008-152, Laws of Florida. The report shall include recommendations on passive strategies for nitrogen reduction that complement use of conventional onsite wastewater treatment systems. The department shall submit an interim report of phase II on February 1, 2011, a subsequent status report on May 16, 2011, and a final report upon completion of phase II to the Governor, the President of the Senate, and the Speaker of the House of Representatives prior to proceeding with any nitrogen reduction activities.	ACCEPT HOUSE PROVISIO
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Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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COUNTY HEALTH DEPARTMENTS LOCAL HEALTH NEEDS

507 FIXED CAPITAL OUTLAY

CONSTRUCTION, RENOVATION, AND EQUIPMENT - COUNTY HEALTH DEPARTMENTS

From the funds in Specific Appropriation 507, the following projects are funded from nonrecurring funds in the County Health Department Trust Fund:

Polk County Health Department.....	6,876,200
Bay County Health Department.....	2,379,000
Baker County Health Department.....	600,000

COUNTER  
OFFER  
SENATE  
PROVISIO

From the funds in Specific Appropriation 507, the following projects are funded from nonrecurring funds in the County Health Department Trust Fund:

Polk County Health Department.....	6,876,200
Bay County Health Department.....	2,379,000
Baker County Health Department.....	600,000
Miami-Dade Health Department for the Liberty City Health Center Planning, Design, and Construction.....	1,500,000

STATEWIDE PUBLIC HEALTH SUPPORT SERVICES

510 EXPENSES

From the funds in Specific Appropriation 510, \$250,000 in recurring funds from the General Revenue Fund shall be used to support the Statewide Council on Deafness.

IDENTICAL

From the funds provided in Specific Appropriation 510, \$250,000 in recurring general revenue funds shall be used to support the Statewide Council on Deafness.

517 SPECIAL CATEGORIES

DRUGS, VACCINES AND OTHER BIOLOGICALS

Funds in Specific Appropriation 517 from the Federal Grants Trust Fund are contingent upon sufficient state matching funds being identified to qualify for the federal Ryan White grant award. The Department of Health and the Department of Corrections shall collaborate in determining the amount of state general revenue funds expended by the Department of Corrections for AIDS-related activities and services that qualify as state matching funds for the Ryan White grant.

IDENTICAL

Funds in Specific Appropriation 517, from the Federal Grants Trust Fund, are contingent upon sufficient state matching funds being identified to qualify for the federal Ryan White grant award. The Department of Health and the Department of Corrections shall collaborate in determining the amount of general revenue funds expended by the Department of Corrections for AIDS-related activities and services that qualify as state matching funds for the Ryan White grant.

518 SPECIAL CATEGORIES

JAMES AND ESTHER KING BIOMEDICAL RESEARCH PROGRAM

OFFER  
SENATE  
PROVISIO

Funds in Specific Appropriations 518 and 519 from the Biomedical Research Trust Fund are contingent upon Senate Bill 620, related to biomedical research programs, or similar legislation becoming law.

519 SPECIAL CATEGORIES

WILLIAM G. "BILL" BANKHEAD, JR., AND DAVID COLBY CANCER RESEARCH PROGRAM

OFFER  
SENATE  
PROVISIO

From the funds provided in Specific Appropriation 519, \$500,000 is provided to maintain the statewide Brain Tumor Registry Program at the McKnight Brain Institute. Funds are contingent upon Senate Bill 620, related to biomedical research programs, or similar legislation becoming law.

519A SPECIAL CATEGORIES

GRANTS AND AIDS - NEUROSCIENCE CENTERS OF FLORIDA - FLORIDA INTERNATIONAL UNIVERSITY

ACCEPT  
HOUSE

Funds in Specific Appropriation 519A, are provided to support the development of the Neuroscience Centers of Florida facility for

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
	PROVISIO	multi-cultural research and diagnosis of Multiple Sclerosis, Alzheimer's and Parkinson's diseases at the Florida International University.

519B SPECIAL CATEGORIES  
CANCER RESEARCH

ACCEPT From the funds in Specific Appropriation 519B, \$1,000,000 is provided  
HOUSE to the Moffitt Cancer Center, \$1,000,000 is provided to the Sylvester  
PROVISIO Cancer Center at the University of Miami, and \$1,000,000 is provided to  
the Shands Cancer Hospital to provide support for cancer research.

PROGRAM: CHILDREN'S MEDICAL SERVICES  
CHILDREN'S SPECIAL HEALTH CARE

533 SPECIAL CATEGORIES  
GRANTS AND AIDS - CHILDREN'S MEDICAL SERVICES NETWORK

Funds in Specific Appropriation 533 shall not be used to support continuing education courses or training for health professionals or staff employed by the Children's Medical Services (CMS) Network or under contract with the department. This limitation shall include but not be limited to: classroom instruction, train the trainer, or web-based continuing education courses that may be considered professional development, or that results in continuing education credits that may be applied towards the initial or subsequent renewal of a health professionals' license. This does not preclude the CMS Network from providing information on treatment methodologies or best practices to appropriate CMS network health professionals, staff, or contractors.

IDENTICAL

Funds in Specific Appropriation 533 shall not be used to support continuing education courses or training for health professionals or staff employed by the Children's Medical Services (CMS) Network or under contract with the department. This limitation shall include but not be limited to: classroom instruction, train the trainer, or web-based continuing education courses that may be considered professional development, or that results in continuing education credits that may be applied towards the initial or subsequent renewal of a health professionals' license. This does not preclude the CMS Network from providing information on treatment methodologies or best practices to appropriate CMS network health professionals, staff, or contractors.

539 SPECIAL CATEGORIES  
GRANTS AND AIDS - DEVELOPMENTAL EVALUATION  
AND INTERVENTION SERVICES/PART C

From the funds in Specific Appropriation 539, \$2,526,016 from the General Revenue Fund is provided as the state match for Medicaid reimbursable early intervention services in Specific Appropriation 181.

IDENTICAL

From the funds in Specific Appropriation 539, \$2,526,016 from the General Revenue Fund is provided as the state match for Medicaid reimbursable early intervention services in Specific Appropriation 181.

From the funds in Specific Appropriation 539, \$9,753,063 from the Federal Grants Trust Fund is provided for Early Steps-IDEA Part C as a result of federal funding received from the American Recovery and Reinvestment Act of 2009.

ACCEPT  
HOUSE  
PROVISIO

PROGRAM: HEALTH CARE PRACTITIONER AND ACCESS  
COMMUNITY HEALTH RESOURCES

553 SALARIES AND BENEFITS

From the funds in Specific Appropriation 553, \$303,313 and four positions are provided to implement the Comprehensive Statewide Tobacco Prevention and Education Program in accordance with Section 27, Article X of the State Constitution.

ACCEPT  
HOUSE  
PROVISIO

From the funds in Specific Appropriation 553, \$303,313 from the Tobacco Settlement Trust Fund is provided to implement the Comprehensive Statewide Tobacco Prevention and Education Program in accordance with Section 27, Article X of the State Constitution.

568 SPECIAL CATEGORIES  
COMPREHENSIVE STATEWIDE TOBACCO PREVENTION AND EDUCATION PROGRAM

**Health Care Appropriations**

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
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Funds in Specific Appropriation 568 shall be used to implement the Comprehensive Statewide Tobacco Prevention and Education Program in accordance with Section 27, Article X of the State Constitution. The appropriation shall be allocated as follows:

State and Community Interventions.....	1,860,519
State and Community Interventions - Community Mental Health.....	9,000,000
State and Community Interventions - AHEC.....	6,000,000
Health Communications Interventions.....	20,532,122
Cessation Interventions.....	11,768,879
Cessation Interventions - AHEC.....	4,000,000
Surveillance & Evaluation.....	5,355,029
Administration & Management.....	2,776,505

The department may use nicotine replacements and other treatments approved by the Federal Food and Drug Administration as part of smoking cessation interventions.

**COUNTER OFFER WITH SENATE PROVISIO** Funds in Specific Appropriation 568 shall be used to implement the Comprehensive Statewide Tobacco Education and Prevention Program in accordance with Section 27, Article X of the State Constitution as adjusted annually for inflation, using the Consumer Price Index as published by the United States Department of Labor. The appropriation shall be allocated as follows:

State & Community Interventions.....	10,679,950
State & Community Interventions - AHEC.....	6,000,000
Health Communications Interventions.....	20,613,744
Cessation Interventions .....	11,831,565
Cessation Interventions - AHEC.....	4,000,000
Surveillance & Evaluation .....	5,376,317
Administration & Management.....	2,791,478

**VETERANS' AFFAIRS, DEPARTMENT OF**  
**PROGRAM: SERVICES TO VETERANS' PROGRAM**  
**EXECUTIVE DIRECTION AND SUPPORT SERVICES**

**STATEWIDE ISSUE**

From the funds in Specific Appropriation 588 through 595, by September 1, 2010, the Department of Veterans Affairs shall execute a service level agreement, pursuant to s. 282.203(1)(g), Florida Statutes, to specify the services and levels of services it is to receive from the Southwood Shared Resource Center (SSRC). If the department is unable to complete and execute a service level agreement by that date, the department shall submit a report to the Executive Office of the Governor and to the chairs of the Full Appropriations Council on General Government & Health Care and Senate Policy and Steering Committee on Ways and Means within five working days, explaining the specific issues preventing execution, and describing the department's plan and schedule for resolving those issues.

590 EXPENSES

Contingent upon House Bill 7163 or similar legislation becoming a law, \$10,729 from the General Revenue Fund and \$1,488 from the Operations and Maintenance Trust Fund in Specific Appropriation 590 shall be held in reserve. These funds shall be released upon approval by the Legislative Budget Commission based on the agency Wireless Communication Utilization Plan submitted in accordance with the requirements of House Bill 7163, except that any fiscal year 2010-2011 savings identified in the plan shall remain in reserve.

**STATEWIDE ISSUE**

**BACK OF THE BILL**

SECTION 8.(3)(1)

**Health Care Appropriations**

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
	<p>Offer Senate</p>	<p>From the funds provided in Specific Appropriation 2183A, the sum of \$3,846,311 is provided from the Federal Grants Trust Fund of the Department of Children And Family Services to grant one-time salary bonuses of \$500 to each of the department's ACCESS Florida program employees for superior achievement and national recognition.</p>
<p>SECTION 65. The sum of \$16,505,048 from unexpended funds appropriated from the Social Services Block Grant Trust Fund in Specific Appropriation 278B of chapter 2009-81, Laws of Florida, and transferred and released by the Legislative Budget Commission in approved budget amendment B2010-0111 shall revert immediately and is appropriated for the purposes authorized in the budget amendment.</p>	<p>Identical</p>	<p>SECTION 13. The sum of \$16,505,048 from unexpended funds appropriated from the Social Services Block Grant Trust Fund in Specific Appropriation 278B of chapter 2009-81, Laws of Florida, and transferred and released by the Legislative Budget Commission in approved budget amendment EOG #B0111 shall revert immediately and is appropriated for the purposes authorized in the budget amendment.</p>
<p>SECTION 62. There is hereby appropriated <del>\$239,271,553</del> <u>255,839,873</u> in nonrecurring funds from the General Revenue Fund and \$899,837,794 in nonrecurring funds from the Medical Care Trust Fund to the Agency for Health Care Administration to cover Fiscal Year 2009-10 Medicaid Program costs. This section shall take effect upon the General Appropriations Act becoming law.</p>	<p>House with changes</p>	<p>SECTION 14. There is hereby appropriated the sum of \$222,371,554 in nonrecurring general revenue, \$9,600,000 from the unreserved cash balance of the Medical Care Trust Fund, and \$899,837,794 in nonrecurring Medical Care Trust Fund to the Agency for Health Care Administration for Fiscal Year 2009-2010 Medicaid program costs. This section shall take effect upon the General Appropriations Act becoming law.</p>
<p>SECTION 63. There shall be a reduction of \$7,300,000 from the funds provided from the Tobacco Settlement Trust Fund in Specific Appropriation 202 of chapter 2009-81, Laws of Florida. This section shall take effect upon becoming law.</p>	<p>OFFER HOUSE</p>	
<p>SECTION 64. The unexpended balance of funds provided to the Department of Children and Family Services in Specific Appropriation 353 of chapter 2009-81, Laws of Florida, and subsequently transferred to the Grants and Aids - Homeless Prevention - American Recovery and Reinvestment Act of 2009 appropriation category shall revert immediately and is re-appropriated for Fiscal Year 2010-2011 for the same purpose.</p>	<p>OFFER HOUSE</p>	
	<p>STEWIDE ISSUE</p>	<p>SECTION 15. (1) The appropriations and reductions in appropriations contained in this section are from the named funds for the 2009-2010 fiscal year to the state agency indicated. These appropriations and reductions in appropriations shall be reflected as adjustments to the approved operating budgets, as previously adjusted for lawful budget amendments, of the state agencies. These amounts represent adjustments to the Children and Families Data Center and the Northwood Shared Resource Center data processing categories to reflect estimated billings by the center to its user agencies, including the federal share of depreciation expense. These adjustments are in accordance with Sections 11 and 15, 2 CFR, Part 225, Attachment B, Code of Federal Regulations. This section shall take effect upon becoming a law.</p>
		<p>(2) Data Processing Services Children and Families Data Center            Department of State            From General Revenue Fund..... -160,000            From Grants and Donations Trust Fund..... -40,000            Department of Children and Family Services            From General Revenue Fund..... -3,310,974            From Federal Grants Trust Fund..... 170,069            Department of Health</p>

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
		From Administrative Trust Fund..... -570,560
		Agency for Persons with Disabilities
		From the General Revenue Fund..... -224,686
		Department of Revenue
		From General Revenue Fund..... 261,408
		From Federal Grants Trust Fund..... 1,218,825
		(3) Data Processing Services Northwood Shared Resource Center
		Department of State
		From General Revenue Fund..... 397,304
		From Grants and Donations Trust Fund..... 40,000
		Department of Education
		From General Revenue Fund..... 28,443
		Department of Children and Family Services
		From General Revenue Fund..... 3,635,667
		From Federal Grants Trust Fund..... 3,362,075
		Department of Health
		From Administrative Trust Fund..... -410,035
		Agency for Persons with Disabilities
		From General Revenue Fund..... 956,459
		Department of Revenue
		From General Revenue Fund..... -1,583,621
		From Federal Grants Trust Fund..... -3,770,374
		(4) NSRC Depreciation
		Department of Children and Family Services
		From the Federal Grants Trust Fund..... 363,236
		Department of Health
		From the Administrative Trust Fund..... 17,011
		Department of Revenue
		From the Federal Grants Trust Fund..... 188,787
		SECTION 16. The Northwood Shared Resource Center is authorized to execute a non-operating transfer of up to \$2,084,858 from the Working Capital Trust Fund to reimburse the Department of Children and Family Services Office of Information Technology for administrative support provided by this office. The center shall bill its user agencies pursuant to Sections 11 and 15, 2 CFR, Part 225, Attachment B, Code of Federal Regulations.
SECTION 66. The unexpended balance of funds appropriated to the Department of Elder Affairs in Specific Appropriation 382 of Chapter 2009-81, Laws of Florida, and subsequently transferred to the Grants and Aids - Older American's Act - American Recovery and Reinvestment Act of 2009 appropriation category shall revert immediately and is reappropriated for the 2010-2011 fiscal year for the same purpose.	STATEWIDE ISSUE	SECTION 17. The unexpended balance of funds provided to the Department of Elder Affairs in Specific Appropriation 382 of chapter 2009-81, Laws of Florida, and subsequently transferred to the Grants and Aids - Older American's Act - American Recovery and Reinvestment Act of 2009 appropriation category shall revert immediately and is reappropriated for the 2010-2011 fiscal year for the same purpose.
SECTION 67. The unexpended balance of funds provided to the Department of Children and Families in Specific Appropriation 278B of Chapter 2009-81, Laws of Florida, and subsequently distributed by approved budget amendment EOG #B0119 to the Department of Elder Affairs for projects meeting the criteria for hurricane relief in the 2008 Social	OFFER SENATE	SECTION 18. The unexpended balance of funds provided to the Department of Children and Families in Specific Appropriation 278B of chapter 2009-81, Laws of Florida, and subsequently distributed by approved budget amendment EOG #B0119 to the Department of Elder Affairs for projects meeting the criteria for hurricane relief in the 2008 Social

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
Services Disaster Relief Grant shall revert immediately and are reappropriated for the 2010-2011 fiscal year for the same purpose.		Services Disaster Relief Grant and the 2006 Hurricane Relief Grant shall revert immediately and is reappropriated for the 2010-2011 fiscal year for the same purpose.

SECTION 68. The unexpended balance of funds appropriated to the Department of health in Specific Appropriation 516 of Chapter 2009-81, Laws of Florida, and subsequently moved to Grants and Aids - Children's Medical Services - American Recovery and Reinvestment Act of 2009 (appropriation category 109993), is hereby reverted and reappropriated for Fiscal year 2010-11.

ACCEPT  
HOUSE  
PROVISIO

SECTION 69. The unexpended balance of funds appropriated by the Legislative Budget Commission in its meeting on December 9, 2009, to the Department of Health in EOG #B2010-0318, EOG #B2010-376 and EOG #B2010-0377 is hereby reverted and reappropriated for Fiscal Year 2010-11 for the same purpose.

ACCEPT  
HOUSE  
PROVISIO

SECTION 83. Pursuant to section 215.32(2)(b)4.a., Florida Statutes, \$54,500,000 from unobligated cash balance amounts specified from the following trust funds shall be transferred to the General Revenue Fund for Fiscal Year 2010-11:

AGENCY FOR HEALTH CARE ADMINISTRATION	
Health Care Trust Fund.....	14,500,000
Medical Care Trust Fund.....	9,500,000
Quality Long-Term Care Trust Fund.....	2,500,000
AGENCY FOR PERSONS WITH DISABILITIES	
Social Services Block Grant Trust Fund.....	8,000,000
Operations and Maintenance Trust Fund.....	4,000,000
DEPARTMENT OF HEALTH	
Florida Drug, Device and Cosmetic Trust Fund.....	1,600,000
Grants and Donations Trust Fund.....	1,900,000
Medical Quality Assurance Trust Fund.....	10,000,000
Planning and Evaluation Trust Fund.....	1,500,000
Radiation Protection Trust Fund.....	1,000,000

SECTION 90. Pursuant to section 215.32(2)(b)4.a., Florida Statutes, \$40,450,000 from unobligated cash balance amounts specified from the following trust funds shall be transferred to the General Revenue Fund for Fiscal Year 2010-11:

AGENCY FOR HEALTH CARE ADMINISTRATION	
Health Care Trust Fund.....	10,700,000
Quality Long-Term Care Trust Fund.....	3,000,000
DEPARTMENT OF HEALTH	
Radiation Protection Trust Fund.....	500,000
Donations Trust Fund.....	750,000
Federal Grants Trust Fund.....	10,000,000
Grants and Donations Trust Fund.....	1,000,000
Florida Drug, Device and Cosmetic Trust Fund.....	3,000,000
Medical Quality Assurance Trust Fund.....	10,000,000
Radiation Protection Trust Fund.....	1,500,000

SECTION 93. There is appropriated \$243,620,204 in nonrecurring funds from the General Revenue Fund and \$8,951,662 in nonrecurring trust funds to restore reductions in the Agency for Health Care Administration, the Agency for Persons with Disabilities, the Department of Children and Family Services, and the Department of Elder Affairs. The sum of \$186,605,207 in nonrecurring funds from the General Revenue Fund and \$557,569,951 in nonrecurring trust funds is appropriated on a nonrecurring basis to provide funding for the Medically Needy program and Medicaid Aged and Disabled program (Meds AD) through June 30, 2011.

AGENCY FOR HEALTH CARE ADMINISTRATION	
Restores the Clinic Services rate reduction.....	8,769,930
Restores the Intermediate Care Facility for the Developmentally Disabled rate reduction.....	13,860,131

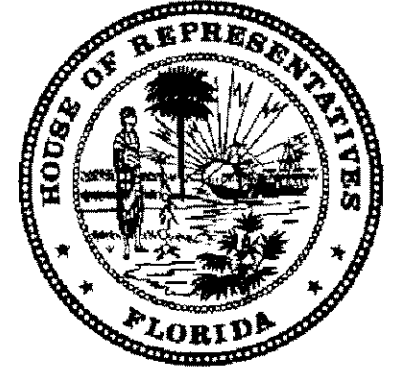
Eliminates the increased assessment on hospital inpatient and outpatient services and the associated fund shifts from the General Revenue Fund to the Public Medical Assistance Trust Fund. Reduces hospital inpatient

Health Care Appropriations

SIDE BY SIDE APPRO BILL - PROVISIO ONLY

HB 5001 Engrossed 1	Comments	SB 2700 Engrossed 1
	and outpatient rate reductions from 7% to 6%. Eliminates the authority to buy back rate reductions from the Public Medical Assistance Trust Fund and provides authority to buy back the reduced rate reduction from the Grants and Donations Trust Fund.	
	Restores the Health maintenance Organization reduction that flows through from Clinic Services rate reductions and the restored portion associated with reducing Hospital Inpatient and Outpatient rate reductions from 7% to 6%.....	11,620,155
	AGENCY FOR PERSONS WITH DISABILITIES	
	Restores behavior assistant services in standard and behavior focus group homes.....	2,000,000
	Restores provider rate reductions.....	70,107,651
	Restores the cap for Tires 2, 3, and 4.....	8,392,723
	DEPARTMENT OF CHILDREN AND FAMILY SERVICES	
	Restores Adult Community Mental Health - County Criminal Justice Grants.....	3,000,000
	Restores the Community Adult Substance Abuse Program.....	12,484,745
	Restores the Healthy Families Program.....	27,380,442
	Restores the Community Adult Mental Health Program.....	85,622,768
	DEPARTMENT OF ELDER AFFAIRS	
	Restores the Home Care for the Elderly Program.....	3,951,679
	Restores Alzheimer's disease projects.....	5,381,642





**Conference Committee on Health & Human Services Appropriations/  
Health Care Appropriations**

**Senate Offer #3**

**Wednesday, April 21, 2010  
8:00 a.m.  
212 Knott Building (Webster Hall)**

## Health Care Appropriations/Health and Human Services Appropriations

Row	Issue	Issue Title	HOUSE OFFER #2							SENATE OFFER #3							Row	
			FTE	Salary Rate	General Revenue	NR General Revenue	Tobacco	Other State TFS	Federal Funds	All Funds	FTE	Salary Rate	General Revenue	NR General Revenue	Tobacco	Other State TFS		Federal Funds
<b>1</b>		<b>AGENCY/HEALTH CARE ADMIN</b>																
5	17C01C0	Deduct Agency Data Center Services Funding																0
6	17C02C0	Add Services Provided By Primary Data Center													(3,744)	(3,744)		(7,488)
17	3004510	Medicaid Managed Care Expansion - Add												3,744	3,744		7,488	
18	3004520	Medicaid Managed Care Expansion - Deduct																0
29	33V0140	Impact To Hospice Rates From Adjusting Nursing Home Rates			(6,745,601)					(10,793,664)	(17,539,265)							0
39	33V0580	Reduce Low Income Pool And Exemptions General Revenue													(14,211,000)			0
43	33V4290	Reduce Clinic Services Reimbursement Rates			(15,421,299)					(24,957,801)	(40,379,100)				(3,981,949)			(14,211,000)
48	33V7010	Nursing Home Rate Reduction			(76,690,037)					(122,712,036)	(199,402,073)				(5,472,617)			(8,854,566)
50	33V7030	Hospital Inpatient Rate Reduction			(93,392,302)					(149,599,766)	(242,992,068)				(76,690,037)			(199,402,073)
51	33V7040	Health Maintenance Organization Rate Reduction			(39,311,124)					(63,293,365)	(102,604,489)				(96,029,128)			(153,816,962)
		Intermediate Care Facility For The Developmentally Disabled (ICF-DD) Rate Reduction													(33,656,455)			(67,844,747)
52	33V7050	Delete Unfunded Budget													(5,330,607)			0
53	3300100	General Revenue To Health Care Trust Fund - Deduct			(28,200,000)					(7,878,076)	(12,605,740)							(20,483,816)
55	3400120	General Revenue To Health Care Trust Fund - Add													(28,200,000)			0
56	3400130	Realignment Of Tobacco Settlement Trust Fund/General Revenue Appropriations - Deduct								28,200,000	28,200,000							(28,200,000)
		Realignment Of Tobacco Settlement Trust Fund/General Revenue Appropriations - Add													28,200,000			28,200,000
61	3400200	Tobacco Settlement Trust Fund To Health Care Trust Fund - Deduct								(2,329,367)	(2,329,367)							(2,329,367)
62	3400210	Tobacco Settlement Trust Fund To Health Care Trust Fund - Add																0
65	3400240	Grants And Donations Trust Fund To General Revenue For Low-Income Pool - Add																0
66	3400250	Grants And Donations Trust Fund To General Revenue For Low-Income Pool - Deduct																0
73	3402500	Freestanding Dialysis Centers			252,856					405,514	658,370				9,749,480		1	9,749,481
74	3402600	Clinic Services Rate Reduction Buy Back																0
85	4100020	Hospital Inpatient Services Rate Reduction Buy Back								15,421,299	24,676,267							0
88	4100230	Hospital Outpatient Services Rate Reduction Buy Back								167,964,193	269,301,490							0
89	4100240	Establish Budget Authority For Medicaid Services								45,006,630	72,300,480							0
90	4100250	Additional Resources Required To Support Consolidation Of Technology Services								5,687,478	9,100,557							0
93	4105400	AGENCY/HEALTH CARE ADMIN	6.00	0	(257,178,140)	0				(2,329,367)	254,401,524	(8,178,064)	(13,284,047)					0
94	55C01C0	AGENCY/PERSONS WITH DISABL													2,264	2,264		4,528
95	Total																	0
96																		0
97																		0
99	17C01C0	Deduct Agency Data Center Services Funding																0
100	17C02C0	Add Services Provided By Primary Data Center																0
102	17053C0	Align Northwood Shared Resource Center Budget Between Agencies - Deduct																0
103	17054C0	Align Northwood Shared Resource Center Budget Between Agencies - Add													(224,686)			0
109	3004510	Workload Increase For Fair Hearings	7.00	362,782	301,500	13,570									956,459			956,459
110	3200100	Delete Unfunded Budget																0
114	33V0200	Provider Rate Reduction			(6,465,891)													0
117	33001C0	Reductions From Technology Service Consolidations													(13,481,701)			(2,434,955)
121A	36115C0	Transfer Budget And Positions Between Northwood Shared Resource Center And The Department of Children and Families - Deduct																0
121B	36114C0	Transfer Budget And Positions Between Northwood Shared Resource Center And The Department of Children and Families - Add																0
123	4000670	Vocational And Educational Services Of South Florida																0
124	55C01C0	Additional Resources Required To Support Consolidation Of Technology Services																0
125	Total		7.00	362,782	(6,164,391)	13,570	0	0		(10,044,600)	(16,208,991)	0.00	0	(12,749,928)	0	0	320,404	
126																		0
127																		0
135	17C01C0	Deduct Agency Data Center Services Funding																0
136	17C02C0	Add Services Provided By Primary Data Center																0
137	17C03C0	Consolidate Services In Primary Data Centers																0
139	17053C0	Align Northwood Shared Resource Center Budget Between Agencies - Deduct																0



## Health Care Appropriations/Health and Human Services Appropriations

Row	Issue	Issue Title	HOUSE OFFER #2								SENATE OFFER #3								Row	
			FTE	Salary Rate	General Revenue	NR General Revenue	Tobacco	Other State TPs	Federal Funds	All Funds	FTE	Salary Rate	General Revenue	NR General Revenue	Tobacco	Other State TPs	Federal Funds	All Funds		
216B	3400850	Replace General Revenue with Adoption Incentive Award - Deduct							3,996,990		3,996,990							3,996,990	216B	
216C	4403060	Maintenance Adoption Subsidies Workload Increase			3,996,990					5,847,858	9,844,848							3,996,990	216C	
218	4009360	Restore Revenue For The Homeless Program							5,900,000		5,900,000							250,000	218	
226	4403120	Maintenance Adoption Subsidies Restore Nonrecurring			12,806,222	12,806,222					12,806,222							12,806,222	226	
229	<b>Total</b>	<b>CHILDREN &amp; FAMILY SERVICES</b>	<b>(21.25)</b>	<b>(1,225,496)</b>	<b>31,895,870</b>	<b>28,042,290</b>	<b>0</b>	<b>20,867,457</b>	<b>18,819,606</b>	<b>71,582,933</b>	<b>(178.75)</b>	<b>(6,244,324)</b>	<b>(30,649,791)</b>	<b>60,648,906</b>	<b>0</b>	<b>22,857,120</b>	<b>16,436,343</b>	<b>8,643,672</b>	229	
230		<b>ELDER AFFAIRS, DEPT OF</b>																	230	
231		<b>ELDER AFFAIRS, DEPT OF</b>																	231	
235	17C01C0	Deduct Agency Data Center Services Funding									0							(155,085)	235	
236	17C02C0	Add Services Provided By Primary Data Center									0							155,085	236	
250	3401340	Realignment Of Tobacco Settlement Trust Fund/General Revenue Appropriations - Deduct						(24,770,633)			(24,770,633)			(24,770,633)					250	
251	3401345	Realignment Of Tobacco Settlement Trust Fund/General Revenue Appropriations - Add			24,770,633						24,770,633							24,770,633	251	
260	990G000	Grants And Aids - Fixed Capital Outlay									0							1,222,503	260	
261	<b>Total</b>	<b>ELDER AFFAIRS, DEPT OF</b>	<b>0.00</b>	<b>0</b>	<b>24,770,633</b>	<b>0</b>	<b>(24,770,633)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00</b>	<b>0</b>	<b>25,993,136</b>	<b>1,222,503</b>	<b>(24,770,633)</b>	<b>0</b>	<b>0</b>	<b>1,222,503</b>	261
262		<b>HEALTH, DEPT OF</b>																	262	
263		<b>HEALTH, DEPT OF</b>																	263	
267A	1601230	Reapproval Of Orange County Health Department Hug-Me Program Budget Amendment										53.00	2,247,341					3,030,517	267A	
276	17C01C0	Deduct Agency Data Center Services Funding									0	(14,000)	(760,421)	(100,000)				(1,789,240)	276	
277	17C02C0	Add Services Provided By Primary Data Center									0			100,000				1,789,240	277	
279	17053C0	Align Northwood Shared Resource Center Budget Between Agencies - Deduct									0							(570,560)	279	
280	17054C0	Align Northwood Shared Resource Center Budget Between Agencies - Add									0							(410,035)	280	
290	33N0100	Redirect Recurring Appropriations To Nonrecurring - Add			35,615,550	35,615,550	7,940,521				43,556,071							7,940,521	290	
291	33N0200	Redirect Recurring Appropriations To Nonrecurring - Deduct			(56,135,475)		(7,940,521)				(64,075,996)							(7,940,521)	291	
292	33V0010	Reduction/Elimination Of Special Projects			(1,176,592)						(1,176,592)							0	292	
293	33V0020	Eliminate Area Health Education Center Networks			(9,777,475)						(9,777,475)							0	293	
294	33V0080	Children's Medical Services Network			(3,400,000)						(3,400,000)							0	294	
295A	33V1460	Healthy Start Services			(2,603,040)						(2,129,760)							0	295A	
297	33V2070	Crisis Counseling									0			(1,000,000)				(1,000,000)	297	
299	33V5003	Reduce General Revenue Contribution To County Health Departments			(23,420,931)				(23,420,931)		(46,841,862)			(10,000,000)				(10,000,000)	299	
302	3300040	Tobacco Funds									0							0	302	
303	33001C0	Reductions From Technology Service Consolidations									0			(11,720)				(11,720)	303	
310A	36115C0	Transfer Budget And Positions Between Northwood Shared Resource Center And The Department of Children and Families - Deduct									0					(32,422)		(32,422)	310A	
310B	36114C0	Transfer Budget And Positions Between Northwood Shared Resource Center And The Department of Children and Families - Add									0					32,422		32,422	310B	
311	36235C0	Shared Resource Center Federal Depreciation									0						17,011	17,011	311	
321	4000540	Rural Diversity Minority Health Care									0		11,257,386					11,257,386	321	
322	4000550	Neuroscience Centers Of Florida									0							0	322	
323	4000560	Miami-Dade/Liberty City Health Facility									0		1,500,000	1,500,000				1,500,000	323	
324A	4000580	Islet Cell Transplantation To Cure Diabetes			300,000						300,000			300,000				300,000	324A	
334	55C01C0	Additional Resources Required To Support Consolidation Of Technology Services									0							21,250	334	
335	5800080	Nitrogen Reduction Strategies							2,000,000		2,000,000							2,000,000	335	
345	990S000	Special Purpose							9,855,200		9,855,200							11,355,000	345	
346	<b>Total</b>	<b>HEALTH, DEPT OF</b>	<b>0.00</b>	<b>0</b>	<b>(60,597,963)</b>	<b>35,615,550</b>	<b>0</b>	<b>(11,565,731)</b>	<b>(2,129,760)</b>	<b>(74,293,454)</b>	<b>39.00</b>	<b>1,486,920</b>	<b>2,045,666</b>	<b>1,800,000</b>	<b>0</b>	<b>16,385,517</b>	<b>(942,334)</b>	<b>17,488,849</b>	346	
347		<b>VETERANS' AFFAIRS, DEPT OF</b>																	347	
348		<b>VETERANS' AFFAIRS, DEPT OF</b>																	348	
352	17C01C0	Deduct Agency Data Center Services Funding									0							(2,677)	352	
353	17C02C0	Add Services Provided By Primary Data Center									0							2,677	353	
367	<b>Total</b>	<b>VETERANS' AFFAIRS, DEPT OF</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	367	
368	<b>Grand</b>	<b>HEALTHCARE</b>	<b>(14.25)</b>	<b>(862,714)</b>	<b>(267,273,991)</b>	<b>63,671,410</b>	<b>(27,100,000)</b>	<b>263,703,250</b>	<b>(1,532,818)</b>	<b>(32,203,559)</b>	<b>(139.75)</b>	<b>(4,757,404)</b>	<b>(267,273,991)</b>	<b>63,671,409</b>	<b>(27,100,000)</b>	<b>270,532,883</b>	<b>(60,164,884)</b>	<b>(84,005,992)</b>	368	