By Senator Braynon

36-00966-13 2013488

1

A bill to be entitled

An act relating to Medicaid dental services; amending s. 409.906, F.S.; authorizing the Agency for Health Care Administration to reimburse a health access setting operating as a Medicaid provider for dental services under certain conditions; providing an effective date.

7 8 9

2

3

4

5

6

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

10 11

12

13

14

15

16

17

18

1920

2122

23

2425

26

27

28

29

Section 1. Subsection (6) of section 409.906, Florida Statutes, is amended to read:

409.906 Optional Medicaid services. - Subject to specific appropriations, the agency may make payments for services which are optional to the state under Title XIX of the Social Security Act and are furnished by Medicaid providers to recipients who are determined to be eligible on the dates on which the services were provided. Any optional service that is provided shall be provided only when medically necessary and in accordance with state and federal law. Optional services rendered by providers in mobile units to Medicaid recipients may be restricted or prohibited by the agency. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. If necessary to safeguard the state's systems of providing services to elderly and disabled persons and subject

36-00966-13 2013488

to the notice and review provisions of s. 216.177, the Governor may direct the Agency for Health Care Administration to amend the Medicaid state plan to delete the optional Medicaid service known as "Intermediate Care Facilities for the Developmentally Disabled." Optional services may include:

- diagnostic, preventive, or corrective procedures, including orthodontia in severe cases, provided to a recipient under age 21, by or under the supervision of a licensed dentist. Services provided under this program include treatment of the teeth and associated structures of the oral cavity, as well as treatment of disease, injury, or impairment that may affect the oral or general health of the individual. The agency may reimburse a health access setting as defined in s. 466.003 that operates as a Medicaid provider for dental services authorized under s. 466.024(2) and provided to a recipient younger than 21 years of age by a licensed dental hygienist. However, Medicaid will not provide reimbursement for dental services provided in a mobile dental unit, except for a mobile dental unit:
- (a) Owned by, operated by, or having a contractual agreement with the Department of Health and complying with Medicaid's county health department clinic services program specifications as a county health department clinic services provider.
- (b) Owned by, operated by, or having a contractual arrangement with a federally qualified health center and complying with Medicaid's federally qualified health center specifications as a federally qualified health center provider.
 - (c) Rendering dental services to Medicaid recipients, 21

36-00966-13	2013488
years of age and older, at nursing facilities.	
(d) Owned by, operated by, or having a contrac	
Section 2. This act shall take effect July 1,	2013.
	years of age and older, at nursing facilities.