

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative Diaz, J. offered the following:

2

3 **Amendment (with title amendment)**

4 Remove everything after the enacting clause and insert:

5 Section 1. Effective March 1, 2019, subsection (1) of
6 section 409.973, Florida Statutes, is amended to read:

7 409.973 Benefits.—

8 (1) MINIMUM BENEFITS.—Managed care plans shall cover, at a
9 minimum, the following services:

10 (a) Advanced registered nurse practitioner services.

11 (b) Ambulatory surgical treatment center services.

12 (c) Birthing center services.

13 (d) Chiropractic services.

14 ~~(e) Dental services.~~

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- 15 (e)~~(f)~~ Early periodic screening diagnosis and treatment
16 services for recipients under age 21.
- 17 (f)~~(g)~~ Emergency services.
- 18 (g)~~(h)~~ Family planning services and supplies. Pursuant to
19 42 C.F.R. s. 438.102, plans may elect to not provide these
20 services due to an objection on moral or religious grounds, and
21 must notify the agency of that election when submitting a reply
22 to an invitation to negotiate.
- 23 (h)~~(i)~~ Healthy start services, except as provided in s.
24 409.975(4).
- 25 (i)~~(j)~~ Hearing services.
- 26 (j)~~(k)~~ Home health agency services.
- 27 (k)~~(l)~~ Hospice services.
- 28 (l)~~(m)~~ Hospital inpatient services.
- 29 (m)~~(n)~~ Hospital outpatient services.
- 30 (n)~~(o)~~ Laboratory and imaging services.
- 31 (o)~~(p)~~ Medical supplies, equipment, prostheses, and
32 orthoses.
- 33 (p)~~(q)~~ Mental health services.
- 34 (q)~~(r)~~ Nursing care.
- 35 (r)~~(s)~~ Optical services and supplies.
- 36 (s)~~(t)~~ Optometrist services.
- 37 (t)~~(u)~~ Physical, occupational, respiratory, and speech
38 therapy services.
- 39 (u)~~(v)~~ Physician services, including physician assistant
40 services.

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- 41 (v)~~(w)~~ Podiatric services.
- 42 (w)~~(x)~~ Prescription drugs.
- 43 (x)~~(y)~~ Renal dialysis services.
- 44 (y)~~(z)~~ Respiratory equipment and supplies.
- 45 (z)~~(aa)~~ Rural health clinic services.
- 46 (aa)~~(bb)~~ Substance abuse treatment services.
- 47 (bb)~~(cc)~~ Transportation to access covered services.
- 48 Section 2. Subsection (5) is added to section 409.973,
- 49 Florida Statutes, to read:
- 50 409.973 Benefits.—
- 51 (5) PROVISION OF DENTAL SERVICES.—
- 52 (a) The Office of Program Policy Analysis and Government
- 53 Accountability shall provide a comprehensive report on the
- 54 provision of dental services under this part to the Governor,
- 55 the President of the Senate, and the Speaker of the House of
- 56 Representatives by December 1, 2016. The Office of Program
- 57 Policy Analysis and Government Accountability is authorized to
- 58 contract with an independent third party to assist in the
- 59 preparation of the report required by this paragraph.
- 60 1. The report must examine the effectiveness of medical
- 61 managed care plans in increasing patient access to dental care,
- 62 improving dental health, achieving satisfactory outcomes for
- 63 Medicaid recipients and the dental provider community, providing
- 64 outreach to Medicaid recipients, and delivering value and
- 65 transparency to the state's taxpayers regarding the dollars
- 66 intended for, and spent on, actual dental services.

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67 Additionally, the report must examine, by plan and in the
68 aggregate, the historical trends of rates paid to dental
69 providers and to dental plan subcontractors, dental provider
70 participation in plan networks, and provider willingness to
71 treat Medicaid recipients. The report must also compare current
72 and historical efforts and trends and the experiences of other
73 states in delivering dental services, increasing patient access
74 to dental care, and improving dental health.

75 2. The Legislature may use the findings of this report in
76 setting the scope of minimum benefits set forth in this section
77 for future procurements of eligible plans as described in s.
78 409.966. Specifically, the decision to include dental services
79 as a minimum benefit under this section, or to provide Medicaid
80 recipients with dental benefits separate from the Medicaid
81 managed medical assistance program described in this part, may
82 take into consideration the data and findings of the report.

83 (b) In the event the Legislature takes no action before
84 July 1, 2017, with respect to the report findings required under
85 subparagraph (a)2., the agency shall implement a statewide
86 Medicaid prepaid dental health program for children and adults
87 with a choice of at least two licensed dental managed care
88 providers who must have substantial experience in providing
89 dental care to Medicaid enrollees and children eligible for
90 medical assistance under Title XXI of the Social Security Act
91 and who meet all agency standards and requirements. To qualify
92 as a provider under the prepaid dental health program, the

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93 entity must be licensed as a prepaid limited health service
 94 organization under part I of chapter 636 or as a health
 95 maintenance organization under part I of chapter 641. The
 96 contracts for program providers shall be awarded through a
 97 competitive procurement process. The contracts must be for 5
 98 years and may not be renewed; however, the agency may extend the
 99 term of a plan contract to cover delays during a transition to a
 100 new plan provider. The agency shall include in the contracts a
 101 medical loss ratio provision consistent with s. 409.967(4). The
 102 agency is authorized to seek any necessary state plan amendment
 103 or federal waiver to commence enrollment in the Medicaid prepaid
 104 dental health program no later than March 1, 2019.

105 Section 3. Except as otherwise expressly provided in this
 106 act, this act shall take effect July 1, 2016.

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109 **T I T L E A M E N D M E N T**

110 Remove everything before the enacting clause and insert:

111 A bill to be entitled

112 An act relating to the sunset review of Medicaid
 113 Dental Services; amending s. 409.973, F.S.; providing
 114 for the future removal of dental services as a minimum
 115 benefit of managed care plans; requiring the Office of
 116 Program Policy Analysis and Government Accountability
 117 to provide a report to the Governor and Legislature;
 118 specifying requirements for the report; providing for

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119 use of the report's findings; requiring the Agency for
120 Health Care Administration to implement a statewide
121 Medicaid prepaid dental health program upon the
122 occurrence of certain conditions; specifying
123 requirements for the program and the selection of
124 providers; providing effective dates.

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