The Committee on Appropriations (Flores) recommended the following LATE FILED amendment:

Section: 03
On Page: 047
Spec App: 176

**EXPLANATION:**
Transfers proviso language for the Children's Medical Services Network from the Agency for Health Care Administration to the Department of Health.

<table>
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<th>NET IMPACT ON:</th>
<th>Total Funds</th>
<th>General Revenue</th>
<th>Trust Funds</th>
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<td>Non-Recurring -</td>
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AGENCY FOR HEALTH CARE ADMINISTRATION
Program: Health Care Services
Children's Special Health Care 68500100

In Section 03 On Page 047
176 Special Categories 102342
Children's Medical Services Network IOEB

DELETE the proviso immediately following Specific Appropriation 176:

From the funds in Specific Appropriation 176, the Agency for Health Care Administration shall, by August 1, 2017, notify in writing parents or guardians of each Medicaid beneficiary under age 21 who was transferred out of the Children's Medical Services Network to a capitated Medicaid Managed Medical Assistance health plan between May 2015 and September 2015 as a result of a clinical ineligibility determination that they may request a new eligibility screening for their child. A re-screening for clinical eligibility shall be based on the provisions of 64C-2.002, F.A.C. If a child is determined to be clinically eligible, the parent or guardian shall be offered the option of transferring the child to the Children's Medical Services Network or remaining enrolled in the child's current Medicaid Managed Medical Assistance health plan.

HEALTH, DEPARTMENT OF
Program: Children's Medical Services
Children's Special Health Care 64300100
At the end of existing proviso language, following Specific Appropriation 522, INSERT:

From the funds in Specific Appropriation 522, the Department of Health shall, by August 1, 2017, notify in writing parents or guardians of each Medicaid beneficiary under age 21 - who was transferred out of the Children's Medical Services Network to a capitated Medicaid Managed Medical Assistance health plan between May 2015 and September 2015 as a result of a clinical ineligibility determination - that they may request a new eligibility screening for their child. A re-screening for clinical eligibility shall be based on the provisions of 64C-2.002, F.A.C. If a child is determined to be clinically eligible, the parent or guardian shall be offered the option of transferring the child to the Children's Medical Services Network or remaining enrolled in the child's current Medicaid Managed Medical Assistance health plan.

Line item amendments are accepted as part of the amendatory process. However, due to the necessity of using computerized systems this may entail a different placement within a budget entity or the renumbering of the specific appropriation items.