

LEGISLATIVE ACTION

Senate House

Comm: RCS 02/22/2013

The Committee on Rules (Thrasher) recommended the following:

Senate Amendment

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Delete lines 3148 - 3251 and insert:

Section 79. Subsection (6) of section 430.205, Florida Statutes, is amended to read:

430.205 Community care service system.-

- (6) Notwithstanding other requirements of this chapter, the Department of Elderly Affairs and the Agency for Health Care Administration shall develop an integrated long-term-care delivery system.
 - (a) The duties of the integrated system shall include

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organizing and administering service delivery for the elderly, obtaining contracts for services with providers in each service area, monitoring the quality of services provided, determining levels of need and disability for payment purposes, and other activities determined by the department and the agency in order to operate an integrated system.

(b) During the 2004-2005 state fiscal year:

1. The agency and the department shall reimburse providers for case management services on a capitated basis and develop uniform standards for case management within the Aged and Disabled Adult Medicaid waiver program. The coordination of acute and chronic medical services for individuals may be included in the capitated rate for case management services. The agency, in consultation with the department, shall adopt any rules necessary to comply with or administer these requirements.

2. The Legislature finds that preservation of the historic aging network of lead agencies is essential to the well-being of Florida's elderly population. The Legislature finds that the Florida aging network constitutes a system of essential community providers which should be nurtured and assisted to develop systems of operations which allow the gradual assumption of responsibility and financial risk for managing a client through the entire continuum of long-term care services within the area the lead agency is currently serving, and which allow lead agency providers to develop managed systems of service delivery. The department, in consultation with the agency, shall therefore:

a. Develop a demonstration project in which existing community care for the elderly lead agencies are assisted in

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transferring their business model and the service delivery system within their current community care service area to enable assumption, over a period of time, of full risk as a community diversion pilot project contractor providing long-term care services in the areas of operation. The department, in consultation with the agency and the Department of Children and Family Services, shall develop an implementation plan for no more than three lead agencies by October 31, 2004.

b. In the demonstration area, a community care for the elderly lead agency shall be initially reimbursed on a prepaid or fixed-sum basis for all home and community-based services provided under the long-term care community diversion pilot project. By the end of the third year of operation, the lead agency shall be reimbursed on a prepaid or fixed-sum basis for all services under the long-term care community diversion pilot project.

c. During the first year of operation, the department, in consultation with the agency, may place providers at risk to provide nursing home services for the enrolled individuals who are participating in the demonstration project. During the 3year development period, the agency and the department may limit the level of custodial nursing home risk that the administering entities assume. Under risk-sharing arrangements, during the first 3 years of operation, the department, in consultation with the agency, may reimburse the administering entity for the cost of providing nursing home care for Medicaid-eligible participants who have been permanently placed and remain in a nursing home for more than 1 year, or may disenroll such participants from the demonstration project.

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d. The agency, in consultation with the department, shall develop reimbursement rates based on the federally approved, actuarially certified rate methodology for the long-term care community diversion pilot project.

e. The department, in consultation with the agency, shall ensure that the entity or entities receiving prepaid or fixedsum reimbursement are assisted in developing internal management and financial control systems necessary to manage the risk associated with providing services under a prepaid or fixed-sum rate system.

f. If the department and the agency share risk of custodial nursing home placement, payment rates during the first 3 years of operation shall be set at not more than 100 percent of the costs to the agency and the department of providing equivalent services to the population within the area of the pilot project for the year prior to the year in which the pilot project is implemented, adjusted forward to account for inflation and policy changes in the Medicaid program.

q. Community care for the elderly lead agencies that have operated for a period of at least 20 years, which provide Medicare-certified services to elders, and which have developed a system of service provision by health care volunteers shall be given priority in the selection of the pilot project if they meet the minimum requirements specified in the competitive procurement.

h. The agency and the department shall adopt rules necessary to comply with or administer these requirements, effect and implement interagency agreements between the agency and the department, and comply with federal requirements.

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i. The department and the agency shall seek federal waivers necessary to implement the requirements of this section.

j. The Department of Elderly Affairs shall conduct or contract for an evaluation of the demonstration project. The department shall submit the evaluation to the Governor and the Legislature by January 1, 2007. The evaluation must address the effectiveness of the pilot project in providing a comprehensive system of appropriate and high-quality, long-term care services to elders in the least restrictive setting and make recommendations on expanding the project to other parts of the state. This subparagraph is subject to an appropriation by the Legislature.

3. The agency, in consultation with the department, shall work with the fiscal agent for the Medicaid program to develop a service utilization reporting system that operates through the fiscal agent for the capitated plans.

(c) During the 2005-2006 state fiscal year:

1. The agency, in consultation with the department, shall monitor the newly integrated programs and report on the progress of those programs to the Governor, the President of the Senate, and the Speaker of the House of Representatives by June 30, 2006. The report must include an initial evaluation of the programs in their early stages following the evaluation plan developed by the department, in consultation with the agency and the selected contractor.

2. The department shall monitor the pilot projects for resource centers on aging and report on the progress of those projects to the Governor, the President of the Senate, and the Speaker of the House of Representatives by June 30, 2006. The

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report must include an evaluation of the implementation process in its early stages.

3. The department, in consultation with the agency, shall integrate the database systems for the Comprehensive Assessment and Review for Long-Term Care Services (CARES) program and the Client Information and Referral Tracking System (CIRTS) into a single operating assessment information system by June 30, 2006.

(d) During the 2006-2007 state fiscal year:

1. The agency, in consultation with the department, shall evaluate the Alzheimer's Disease waiver program and the Adult Day Health Care waiver program to assess whether providing limited intensive services through these waiver programs produces better outcomes for individuals than providing those services through the fee-for-service or capitated programs that provide a larger array of services.

2. The agency, in consultation with the department, shall begin discussions with the federal Centers for Medicare and Medicaid Services regarding the inclusion of Medicare into the integrated long-term care system. By December 31, 2006, the agency shall provide to the Governor, the President of the Senate, and the Speaker of the House of Representatives a plan for including Medicare in the integrated long-term care system.

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