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LEGISLATIVE ACTION

Senate

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House

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03/04/2016 12:54 PM

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Senator Negron moved the following:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause  
and insert:

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

409.973 Benefits.—

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

(a) Advanced registered nurse practitioner services.

(b) Ambulatory surgical treatment center services.



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- 12 (c) Birthing center services.
- 13 (d) Chiropractic services.
- 14 ~~(e) Dental services.~~
- 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)~~(\*)~~ 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.  
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



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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  
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



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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.

107  
108 ===== T I T L E A M E N D M E N T =====

109 And the title is amended as follows:

110 Delete everything before the enacting clause  
111 and insert:

112 A bill to be entitled  
113 An act relating to the sunset review of Medicaid  
114 Dental Services; amending s. 409.973, F.S.; providing  
115 for the future removal of dental services as a minimum  
116 benefit of managed care plans; requiring the Office of  
117 Program Policy Analysis and Government Accountability  
118 to provide a report to the Governor and Legislature;  
119 specifying requirements for the report; providing for  
120 use of the report's findings; requiring the Agency for  
121 Health Care Administration to implement a statewide  
122 Medicaid prepaid dental health program upon the  
123 occurrence of certain conditions; specifying  
124 requirements for the program and the selection of  
125 providers; providing effective dates.