307222

	LEGISLATIVE ACTION	
Senate		House
Comm: RCS		
03/27/2017		

The Committee on Health Policy (Stargel) recommended the following:

Senate Amendment to Amendment (716712)

3 Delete lines 134 - 151

4 and insert:

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indicators, and price. For the first 12 months of a contract period following a procurement for the long-term care managed care program under s. 409.981, if a plan is period between October 1, 2013, and September 30, 2014, each selected for a region and that region was not served by the plan after the most recent procurement, the plan must offer a network contract to



all nursing homes in that region which meet the recredentialing requirements and to all hospices in that region which meet the credentialing requirements specified in the plan's contract with the agency the following providers in the region: (a) Nursing homes. (b) Hospices. (c) Aging network service providers that have previously participated in home and community-based waivers serving elders or community-service programs administered by the Department of Elderly Affairs. After a provider specified in this subsection has actively participated in a managed care plan's network for

12 months of active participation in a managed care plan's

network, the plan may exclude the provider any of the providers

named in this subsection from the plan's network for failure to

2.5 meet quality

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