



Appropriations Conference Chairs

Bump Issues Appropriations Conference Committee on Health and Human Services/Health Care

SENATE OFFER 1
Implementing Bill
Conforming Bill

June 13, 2025 412 Knott Building

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
1	5	STATEWIDE MEDICAID MANAGED CARE REALIGNMENT-AHCA/DOH. Authorizes the Agency for Health Care Administration (AHCA) to submit a budget amendment to realign funding between the AHCA and the Department of Health (DOH) for the Children's Medical Services (CMS) Network for the implementation of the Statewide Medicaid Managed Care program, to reflect actual enrollment changes due to the transition from fee-for-service into the capitated CMS Network.	Identical	No Language	Accept BUMP House Offer #1	4	STATEWIDE MEDICAID MANAGED CARE REALIGNMENT-AHCA/DOH. Authorizes the Agency for Health Care Administration (AHCA) to submit a budget amendment to realign funding between the AHCA and the Department of Health (DOH) for the Children's Medical Services (CMS) Network for the implementation of the Statewide Medicaid Managed Care program, to reflect actual enrollment changes due to the transition from fee-for-service into the capitated CMS Network.
2	6	AHCA BUDGET AMENDMENTS FOR MEDICAID REALIGNMENT. Authorizes AHCA to submit a budget amendment to realign funding within the Medicaid program appropriation categories to address any projected surpluses and deficits.	Identical	Identical		5	AHCA BUDGET AMENDMENTS FOR MEDICAID REALIGNMENT. Authorizes AHCA to submit a budget amendment to realign funding within the Medicaid program appropriation categories to address any projected surpluses and deficits.
3			Different	House	Accept BUMP House Offer #1	6	AHCA BUDGET AMENDMENTS FOR MEDICAID REALIGNMENT - CURRENT YEAR. Authorizes AHCA to submit a budget amendment to realign funding within the Medicaid program appropriation categories to address any projected surpluses and deficits. The realignment shall not provide funds to increase managed care rates beyond amounts adopted at the February 27, 2025 Social Services Estimating Conference.
4	7	BUDGET AMENDMENTS FOR FLORIDA KIDCARE. Authorizes AHCA and DOH to each submit a budget amendment to realign funding within the Florida KidCare program appropriation categories, or to increase budget authority in the CMS Network category, to address projected surpluses and deficits within the program or to maximize the use of state trust funds. A single budget amendment must be submitted by each agency in the last quarter of Fiscal Year 2025-2026.	Identical	Identical		7	BUDGET AMENDMENTS FOR FLORIDA KIDCARE. Authorizes AHCA and DOH to each submit a budget amendment to realign funding within the Florida KidCare program appropriation categories, or to increase budget authority in the CMS Network category, to address projected surpluses and deficits within the program or to maximize the use of state trust funds. A single budget amendment must be submitted by each agency in the last quarter of Fiscal Year 2025-2026.

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
5	8	DEPARTMENT OF HEALTH RULE ADOPTION. Amends s. 381.986(17), F.S., to provide that DOH is not required to prepare a statement of estimated regulatory costs when adopting rules relating to medical marijuana testing laboratories, and any such rules adopted prior to July 1, 2025, are exempt from the legislative ratification provision of s. 120.541(3), F.S. Medical marijuana treatment centers are authorized to use a laboratory that has not been certified by the department until rules relating to medical marijuana testing laboratories are adopted by the department, but no later than July 1, 2026.	Similar	House Modified See House Bump Attachment #1	Accept BUMP House Offer #1	8	DEPARTMENT OF HEALTH RULE ADOPTION. Amends s. 381.986(17), F.S., to provide that DOH is not required to prepare a statement of estimated regulatory costs when adopting rules relating to medical marijuana testing laboratories, and any such rules adopted prior to July 1, 2026, are exempt from the legislative ratification provision of s. 120.541(3), F.S. Medical marijuana treatment centers are authorized to use a laboratory that has not been certified by the department until rules relating to medical marijuana testing laboratories are adopted by the department, but no later than July 1, 2026.
6	9	DEPARTMENT OF HEALTH RULE ADOPTION. Amends s. 14(1) of Chapter 2017-232, L.O.F., to provide limited emergency rulemaking authority to DOH and applicable boards to adopt emergency rules to implement the Medical Use of Marijuana Act (2017). The DOH and applicable boards are not required to prepare a statement of estimated regulatory costs when promulgating rules to replace emergency rules, and any such rules are exempt from the legislative ratification provision of s. 120.541(3), F.S., until July 1, 2026.	Identical	House Modified See House Bump Attachment #1	Accept BUMP House Offer #1	9	DEPARTMENT OF HEALTH RULE ADOPTION . Amends s. 14(1) of Chapter 2017-232, L.O.F., to provide limited emergency rulemaking authority to DOH and applicable boards to adopt emergency rules to implement the Medical Use of Marijuana Act (2017). The DOH and applicable boards are not required to prepare a statement of estimated regulatory costs when promulgating rules to replace emergency rules, and any such rules are exempt from the legislative ratification provision of s. 120.541(3), F.S., until July 1, 2026.
7		STATUTORY REVERSIONS. Provides that the amendments to s. 14(1) of Chapter 2017-232, L.O.F., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2019.	Identical	House Modified See House Bump Attachment #1	Accept BUMP House Offer #1	10	STATUTORY REVERSIONS. Provides that the amendments to s. 14(1) of Chapter 2017-232, L.O.F., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2019.
8		AHCA BUDGET AMENDMENT - HOSPITAL DIRECTED PAYMENT PROGRAM AND INDIRECT MEDICAL EDUCATION. Authorizes AHCA to submit a budget amendment to implement the federally approved Directed Payment Program for hospitals statewide and the Indirect Medical Education Program and nursing workforce expansion and education program.	Identical	ldentical	Identical	11	AHCA BUDGET AMENDMENT - HOSPITAL DIRECTED PAYMENT PROGRAM AND INDIRECT MEDICAL EDUCATION. Authorizes AHCA to submit a budget amendment to implement the federally approved Directed Payment Program for hospitals statewide and the Indirect Medical Education Program and nursing workforce expansion and education program.

		House Bill 5003		BUMP	BUMP		Senate Bill 2502
				House Offer #1	Senate Offer #1		
Line	Section Number	Description	Status			Section Number	Description
9		AHCA BUDGET AMENDMENT- DIRECTED PAYMENT PROGRAM FOR CANCER HOSPITALS. Authorizes AHCA to submit a budget amendment for the Directed Payment Program and supplemental payments for Florida cancer hospitals.	Identical	Identical	Identical		AHCA BUDGET AMENDMENT- DIRECTED PAYMENT PROGRAM FOR CANCER HOSPITALS. Authorizes AHCA to submit a budget amendment for the Directed Payment Program and supplemental payments for Florida cancer hospitals.
10		AHCA BUDGET AMENDMENT - LOW INCOME POOL. Authorizes AHCA to submit a budget amendment to implement the Low Income Pool Program.	Identical	Identical	Identical		AHCA BUDGET AMENDMENT - LOW INCOME POOL. Authorizes AHCA to submit a budget amendment to implement the Low Income Pool Program.
11	14	AHCA BUDGET AMENDMENT - SUPPLEMENTAL PAYMENT PLAN FOR PHYSICIANS. Authorizes AHCA to submit a budget amendment to implement a Supplemental Payment Plan for physicians and subordinate licensed health care practitioners employed with a medical or dental school, or a public hospital.	Identical	Identical	Identical	14	AHCA BUDGET AMENDMENT - SUPPLEMENTAL PAYMENT PLAN FOR PHYSICIANS. Authorizes AHCA to submit a budget amendment to implement a Supplemental Payment Plan for physicians and subordinate licensed health care practitioners employed with a medical or dental school, or a public hospital.
12	15	AHCA BUDGET AMENDMENT - EMERGENCY MEDICAL TRANSPORTATION SERVICES. Authorizes AHCA to submit a budget amendment to implement a certified expenditure program for emergency medical transportation services.	Identical	Identical	Identical	15	AHCA BUDGET AMENDMENT - EMERGENCY MEDICAL TRANSPORTATION SERVICES. Authorizes AHCA to submit a budget amendment to implement a certified expenditure program for emergency medical transportation services.
13		DISPROPORTIONATE SHARE HOSPITAL PROGRAM. Authorizes AHCA to submit a budget amendment to establish spending authority for the Disproportionate Share Hospital Program.	Similar	House Modified See House Bump Attachment #2	Accept BUMP House Offer #1	16	DISPROPORTIONATE SHARE HOSPITAL PROGRAM. Authorizes AHCA to submit a budget amendment to establish spending authority for the Disproportionate Share Hospital Program.
14	17	TEACHING HOSPITAL DESIGNATION. Amends s. 408.07, F.S., to specify that the Legislature is responsible for determining which hospitals meet the definition of a teaching hospital.	Different	No Language	Accept BUMP House Offer #1		
15	18	STATUTORY REVERSIONS. Provides that the amendments to s. 408.07, F.S., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2025.	Different	No Language	Accept BUMP House Offer #1		

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
16			Different	House Modified	Accept BUMP House Offer #1	17	MEDICAID NURSING HOME PROSPECTIVE PAYMENT. Amends s. 409.908, F.S., to increase the nursing home prospective payment reimbursement methodology for the Quality Incentive Program Payment Pool from 10 percent to 13.5 42 percent of the September 2016 non-property related payments of included facilities. Quality Score Threshold ot Qualify for Quality Incentive Payment33 percent of all available points in the Medicaid Quality Incentive Program 20th percentile of included facilities.
17			Different	House	Accept BUMP House Offer #1	18	STATUTORY REVERSIONS. Provides that the amendments to s. 409.908, F.S., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2025.
18	19	DEFINITIONS OF MEDICAID SUPPLEMENTAL PAYMENT PROGRAMS. Amends s. 409.901, F.S., to provide statutory definitions for the "Hospital directed payment program," "Indirect graduate medical education program," and "Low Income Pool Program."	Different	No Language	Accept BUMP House Offer #1		
19	20	ELIGIBILITY FOR SUPPLEMENTAL PAYMENT PROGRAMS. Amends s. 409.908, F.S., to specify that a teaching hospital's participation in the hospital directed payment program and indirect graduate medical education program is contingent on the hospital's participation in the Low Income Pool Program.	Different	No Language	Accept BUMP House Offer #1		
20	21	CONFORMING CROSS REFERENCE. Updates the reference in s. 409.910 from s. 409.901(27), F.S., to s. 409.901, F.S. to conform to changes in section 19 of this bill.	Different	No Language	Accept BUMP House Offer #1		

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
21	22	STATUTORY REVERSIONS. Provides that the amendments to s. 409.910(20)(a), F.S., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2025.	Different	No Language	Accept BUMP House Offer #1		
22	23	PARTICIPATION IN THE LOW INCOME POOL. Provides that a hospital may not participate in the Low Income Pool Program if another hospital with fewer than 300 beds from the same affiliated health care system has closed or is scheduled to close between March 1, 2025 and January 31, 2026.	Different	No Language	Accept BUMP House Offer #1		
23	24	ICONNECT USE REQUIREMENT. Amends s. 393.066, F.S., to remove the requirement for providers to use the iCONNECT system as a condition of payment prior to billing for services and authorizes the Agency for Persons with Disabilities (APD) providers to maintain information in its own data management system and electronically transmit required information in a standard electronic format designated by APD.	Different	House	BUMP Senate Offer #1 Modified		ICONNECT USE REQUIREMENT. Amends s. 393.066, F.S., to remove the requirement for providers to use the iCONNECT system as a condition of payment prior to billing for services and authorizes the Agency for Persons with Disabilities (APD) providers to maintain information in its own data management system and electronically transmit required information in a standard electronic format designated by APD. See Senate Bump Offer #1 - iConnect Attachment
24	25	STATUTORY REVERSIONS. Provides that the amendments to s. 393.066(2), F.S., expire on July 1, 2026, and the text of that provision reverts back to that in existence on June 30, 2025.	Different	House	Accept BUMP House Offer #1		Coo Conato Danio Chia in Trodinicat Attachment
25			Different	Senate	Accept BUMP House Offer #1	19	DCF BUDGET AMENDMENT - CAREGIVER PAYMENTS. Authorizes the Department of Children and Families (DCF) to submit a budget amendment to realign funding between guardianship assistance payments, foster care Level 1 board payments, and relative caregiver assistance payments for current caseload.
26			Different	Senate	Accept BUMP House Offer #1	20	BUDGET AMENDMENT - REFUGEE PROGRAM SERVICES. Authorizes DCF, DOH and AHCA to submit budget amendments to increase budget authority as necessary to meet caseload requirements for Refugee Programs administered by the federal Office of Refugee Resettlement. Requires DCF to submit quarterly reports on caseload and expenditures.

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Line	Section Number	Description	Status			Section Number	Description
27	26	DCF BUDGET AMENDMENT - SELECT FEDERAL GRANTS. Authorizes DCF to submit budget amendments to increase funding for the following federal grants: Supplemental Nutrition Assistance Program (SNAP) Summer Electronic Benefit Transfer, American Rescue Plan Grant, State Opioid Response Grant, Substance Abuse Prevention and Treatment Block Grant, and Mental Health Block Grant.	Different	Senate	Accept BUMP House Offer #1	21	GRANTS. Authorizes DCF to submit budget amendments to increase funding for the following federal grants if additional revenues become available: Supplemental Nutrition Assistance Program (SNAP), Pandemic Electronic Benefit Transfer, American Rescue Plan Grant, State Opioid Response Grant, Substance Abuse Prevention and Treatment Block Grant, Chafee Independent Living Services Grant, Education and Traditional Voucher Grant, Title IV-B Subparts 1 and 2 Grants, Elder Justice Act Grant, STOP Violence Against Women Grant, Rapid Unsheltered Survivor Housing Grant, and Mental Health Block Grant.
28			Different	Senate	Accept BUMP House Offer #1	23	DCF FUNDING MODEL FOR CBCs. Requires DCF to develop and report on an alternative tiered funding methodology for lead child welfare agencies to strengthen the existing proposed funding framework, enhancing transparency, performance, and innovation. It outlines specific funding tiers, requires detailed cost data, and requires monthly reports on progress and a final report be submitted to the Governor, President of the Senate, and Speaker of the House by December 1, 2025.
29	27	DOH BUDGET AMENDMENT - WOMEN, INFANTS AND CHILDREN (WIC) AND CHILD CARE FOOD PROGRAM. Authorizes DOH to submit a budget amendment to increase budget authority for the Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Child Care Food Program if additional federal revenues become available.	Identical	Identical		24	DOH BUDGET AMENDMENT - WOMEN, INFANTS AND CHILDREN (WIC) AND CHILD CARE FOOD PROGRAM. Authorizes DOH to submit a budget amendment to increase budget authority for the Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Child Care Food Program if additional federal revenues become available.
30		DOH BUDGET AMENDMENT - HIV/AIDS PREVENTION AND TREATMENT. Authorizes DOH to submit a budget amendment to increase budget authority for the HIV/AIDS Prevention and Treatment Program if additional federal revenues become available.	Identical	Identical		25	DOH BUDGET AMENDMENT - HIV/AIDS PREVENTION AND TREATMENT. Authorizes DOH to submit a budget amendment to increase budget authority for the HIV/AIDS Prevention and Treatment Program if additional federal revenues become available.

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Line	Section Number	Description	Status			Section Number	Description
31			Different	Senate	Accept BUMP House Offer #1	26	DOH BUDGET AMENDMENT - COVID-19 RELIEF FUNDS. Authorizes DOH to submit a budget amendment to increase budget authority for COVID-19 if additional federal revenues become available.
32	29	FLORIDA MEDICAID MANAGEMENT INFORMATION SYSTEM. Requires AHCA to replace the current Florida Medicaid Management Information System and provides requirements of the system. This section also establishes the executive steering committee (ESC) membership, duties and the process for ESC meetings and decisions. Provides requirements for deliverables-based fixed price contracts.	Identical	Identical		27	FLORIDA MEDICAID MANAGEMENT INFORMATION SYSTEM. Requires AHCA to replace the current Florida Medicaid Management Information System and provides requirements of the system. This section also establishes the executive steering committee (ESC) membership, duties and the process for ESC meetings and decisions. Provides requirements for deliverables-based fixed price contracts.
33	30	CONTRACT FOR PRESCRIPTION DRUGS. Requires AHCA, in consultation with DOH, APD, DCF, and the Department of Corrections, to competitively procure a contract with a vendor to negotiate prices for prescriptions drugs, including insulin and epinephrine, for all participating agencies. The contract must require that the vendor be compensated on a contingency basis paid from a portion of the savings achieved through the negotiation and purchase of prescription drugs.	Similar	Senate	Accept BUMP House Offer #1	28	contract for prescription drugs. Requires AHCA, in consultation with DOH, APD, DCF, and the Department of Corrections, to competitively procure a contract with a vendor to negotiate prices for prescriptions drugs, including insulin and epinephrine, for all participating agencies. The contract must require that the vendor be compensated on a contingency basis paid from a portion of the savings achieved through the negotiation and purchase of prescription drugs.
34	31	APD BUDGET AMENDMENT - DEVELOPMENTAL DISABILITY CENTERS STAFF AUGMENTATION. Authorizes APD to submit budget amendments to transfer funding from salaries and benefits to contractual services in order to support additional staff augmentation at the Developmental Disability Centers.	Identical			29	APD BUDGET AMENDMENT - DEVELOPMENTAL DISABILITY CENTERS STAFF AUGMENTATION. Authorizes APD to submit budget amendments to transfer funding from salaries and benefits to contractual services in order to support additional staff augmentation at the Developmental Disability Centers.
35			Different	Senate	Accept BUMP House Offer #1	30	LUMP SUM-HOME AND COMMUNITY BASED WAIVER CATEGORY. Authorizes APD to submit budget amendments to request funds from the Lump Sum Home and Community Based Waiver category necessary to address any deficits or funding shortfalls within its existing appropriation.

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
36	32	HOME AND COMMUNITY BASED SERVICES FOR PERSONS WITH DISABILITIES REALIGNMENT-AHCA/APD. Authorizes AHCA and APD to submit a budget amendment to realign funding between AHCA and APD for the implementation of APD's Medicaid Home and Community Based Services Program.	Different	House	Accept BUMP House Offer #1	31	HOME AND COMMUNITY BASED SERVICES FOR PERSONS WITH DISABILITIES REALIGNMENT-AHCA/APD. Authorizes APD to submit a budget amendment to realign funding between AHCA and APD for the implementation of APD's Medicaid Home and Community Based Services Program.
37	33	DVA - VETERANS' NURSING HOME DIRECT CARE STAFFING. Provides that the Department of Veterans' Affairs (DVA), subject to LBC approval, may request authority to establish positions in excess of the number authorized by the Legislature, increase appropriations from the Operations and Maintenance Trust Fund, or provide necessary salary rate sufficient to provide for essential staff for veterans' nursing homes, if DVA projects that additional direct care staff are needed to meet its staffing ratios.	Identical			32	DVA - VETERANS' NURSING HOME DIRECT CARE STAFFING. Provides that the Department of Veterans' Affairs (DVA), subject to LBC approval, may request authority to establish positions in excess of the number authorized by the Legislature, increase appropriations from the Operations and Maintenance Trust Fund, or provide necessary salary rate sufficient to provide for essential staff for veterans' nursing homes, if DVA projects that additional direct care staff are needed to meet its staffing ratios.
38			Different	House	Accept BUMP House Offer #1	33	DVA - NURSING HOME CONTRACTED SERVICES. Authorizes DVA to contract for the management and operations of the Alwyn C. Cashe State Veterans' Nursing Home.
39	34	county contributions to Medicaid. Provides that, notwithstanding s. 409.915, F.S., the state Medicaid expenditures shall exclude the specially assessed funds for the Hospital directed payment program.	Identical			34	COUNTY CONTRIBUTIONS TO MEDICAID. Provides that, notwithstanding s. 409.915, F.S., the state Medicaid expenditures shall exclude the specially assessed funds for the Hospital directed payment program.
40	35	DCF MANAGING ENTITIES CARRY FORWARD. Provides that funding appropriated to the Managing Entities from the Opioid Settlement Trust Fund in Fiscal Year 2024-2025 and Fiscal Year 2025-2026 shall be exempt from the 8 percent carry forward threshold pursuant to s. 394.9082(9)(a), F.S.	Similar	Senate	Accept BUMP House Offer #1	22	DCF MANAGING ENTITIES CARRY FORWARD. Provides that funding appropriated to the Managing Entities from the Opioid Settlement Trust Fund in Fiscal Year 2025-2026 shall be exempt from the 8 percent carry forward threshold pursuant to s. 394.9082(9)(a), F.S.
41			Different	Senate	Accept BUMP House Offer #1		DVA - STATE VETERAN NURSING HOME COLLIER COUNTY. Authorizes DVA to submit a budget amendment pursuant to chapter 216 Florida Statutes, subject to federal approval, requesting additional spending authority to support the development and construction of a new State Veterans Nursing Home and Adult Day Health Care Center in Collier County.

		House Bill 5003		BUMP House Offer #1	BUMP Senate Offer #1		Senate Bill 2502
Line	Section Number	Description	Status			Section Number	Description
42			Different	Senate	Accept BUMP House Offer #1	36	ADULT CARE FOOD PROGRAM. Authorizes the Department of Elder Affairs to submit a budget amendment to increase budget authority for the U.S. Department of Agriculture's Adult Care Food Program if additional federal revenues will be expended in the 2025-2026 fiscal year.
42a		Children's Hospital Supplemental Payment. Authorizes AHCA to submit a budget amendment to implement a Supplemental Payment Plan for specialty children's hospitals. See House Bump Attachment #3		House New	Accept BUMP House Offer #1		
42b		Florida School Based Services Program. Authorizes AHCA to submit a budget amendment to request additional budget authority to implement the School Based Program. See House Bump Attachment #4		House New	Accept BUMP House Offer #1		
42c		ACCESS. Authorizes DCF to submit budget amendments to transfer funds and increase budget authority as needed to support the ACCESS system. See House Bump Attachment #5		House New	Accept BUMP House Offer #1		
42d		Neurological Injury Compensation Association Claims. Amends s. 766.314, F.S., authorizing the association to accept new claims during Fiscal Year 2025-2026, in excess of the total of all current estimates for the fiscal year. See House Bump Attachment #6		House New	Accept BUMP House Offer #1		

	House Bill 5003			BUMP House Offer #1	BUMP Senate Offer #1	Senate Bill 2502	
Line	Section Number	Description	Status			Section Number	Description
42e		FX. Medicaid Information Technology Architecture See House Bump Attachment #7		House New	Accept BUMP House Offer #1		
42f		Monthly Rate Structure for Life Skills Development Services. Directs the Agency for Health Care Administration to establish a monthly reimbursement rate for Life Skills Development Levels 3 and 4 services under the iBudget waiver, effective October 1, 2025, and authorizes budget amendments to address any resulting deficits. See House Bump Attachment #8		House New	Accept BUMP House Offer #1		

Senate Bump Offer #1 - iConnect

APD – iConnect – Implementing Bill

Section XX. In order to implement Specific Appropriation XXXX of the 2025-2026 General Appropriations Act, subsection (2) of section 393.066, Florida Statutes, is amended to read:

(2) Necessary services shall be purchased, rather than provided directly by the agency, when the purchase of services is more cost-efficient than providing them directly. All purchased services must be approved by the agency. As a condition of payment and before billing, persons Persons or entities under contract with the agency to provide services shall use agency data management systems to document service provision to clients or shall maintain such information in its own data management system and electronically transmit it to the agency data management system in an industry standard electronic format designated by the agency. The agency shall not require training on the use of agency data management systems by persons or entities that choose to maintain data in their own data management system provided that they electronically transmit required information in a format and frequency designated by the agency and shall use such systems to bill for services. Contracted persons and entities shall meet the minimum hardware and software technical requirements established by the agency for the use of such systems. Such persons or entities shall also meet any requirements established by the agency for training and professional development of staff providing direct services to clients.

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services	BUMP House	BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
1	1	Health Care Innovation Council. Repeals s. 381.4015, F.S., the Health Care Innovation Council, a 15-member council and the revolving loan program within the Department of Health (DOH), and the revolving loan program which provides for funding for applicants seeking to implement innovative solutions, as directed by the Health Care Innovation Council.	Different			Senate	Accept BUMP House Offer #1
2			Different	1	Dental Student Loan Repayment Program. Amends s. 381.4019, F.S., authorizing dental and dental hygiene students with job offers from eligible public health programs or private practices to apply for the Dental Student Loan Repayment Program prior to beginning employment.	Senate	Accept BUMP House Offer #1
3	2	Casey DeSantis Cancer Research Program. Amends s. 381.915, F.S., requiring the Cancer Connect Collaborative to seek input from children's specialty hospitals and allow these hospitals to receive funding through the Cancer Innovation Fund. Also changes the submission of the long-range comprehensive plan for the Casey DeSantis Cancer Research Program from a one-time requirement to an annual requirement.	Different	2		Senate	Accept BUMP House Offer #1
4	3	Graduate Medical Education. Amends s. 409.909, F.S., removing provisions allowing the Agency for Health Care Administration (AHCA) to fund up to 200 residency slots through the Slots for Doctors Program that were in existence prior to July 1, 2023, and removes certain reporting requirements related to the Graduate Medical Education (GME) Program. The bill also removes the requirement for AHCA to prioritize positions in a primary care specialty when applications exceed the number of allocated resident positions. Additionally, the bill abolishes the Graduate Medical Education Committee.	Different		Graduate Medical Education. Amends s. 409.909, F.S., removing provisions allowing the Agency for Health Care Administration (AHCA) to fund up to 100 residency slots through the Slots for Doctors Program that were in existence prior to July 1, 2023. Additionally, the bill abolishes the Graduate Medical Education Committee. See Senate Bump Offer #1 - Graduate Medical Education Attachment 1	House	BUMP Senate Offer #1 Modified
5			Different	3	Bascom Palmer Eye Institute VisionGen Initiative. Amends s. 381.922, F.S., establishing the Bascom Palmer Eye Institute VisionGen Initiative within the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program in DOH to advance genetic and epigenetic research on inherited eye diseases and ocular oncology by awarding grants through the peer-reviewed, competitive process statutorily-required under the Bankhead-Coley program. The initiative is subject to the annual appropriation of funds by the Legislature.	Senate	Accept BUMP House Offer #1

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services	BUMP House	BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
6		Achieved Savings Rebate. Amends s. 409.967, F.S., removing language which declares the Achieved Savings Rebate audit report as dispositive. The bill also specifies that administrative costs incurred by a Statewide Medicaid Managed Care Plan for the operation of a hospital directed payment program, is not an allowable expense in calculating income for determining the achieved savings rebate.			Achieved Savings Rebate. Amends s. 409.967, F.S., revising audit and review procedures for achieved savings rebate reports submitted by Medicaid managed care plans; The bill also specifies that administrative costs incurred by a Statewide Medicaid Managed Care Plan for the operation of a hospital directed payment program, is not an allowable expense in calculating income for determining the achieved savings rebate. See Senate Bump Offer #1 - Achieved Savings Rebate Attachment 2	House	BUMP Senate Offer #1 Modified
7			Different	4	Medical Marijuana Use Registry. Amends s. 381.986, F.S., revising suspension and revocation requirements for the registration of qualified patients and caregivers charged with or convicted of certain controlled substance offenses under ch. 893, F.S.; authorizing reinstatement upon completion of sentencing and submission of a notarized attestation; provides a second-degree misdemeanor penalty for false attestations. See Senate Bump Offer #1 - Medical Marijuana Use Registry	Senate	BUMP Senate Offer #1 Modified
8			Different	5	Reinstatement Attachment 3 Child and Adolescent Mental Health System of Care. Amends s. 394.495, F.S., authorizing the Department of Children and Families to contract with Valerie's House, Inc., a mental health support program that provides free child grief support services to bereaved children and their caregivers. The contract is subject to the annual appropriation of funds by the Legislature.	House	House
9			Different	6	Nursing Home Customer Satisfaction Surveys. Amends s. 400.0225, F.S., requiring AHCA to develop user-friendly consumer satisfaction surveys to capture resident and family member satisfaction with care provided by nursing home facilities. Provides requirements for the survey validity, administration, and data reporting.	Senate	Accept BUMP House Offer #1

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services	BUMP House	BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
10			Different	7	Nursing Home Medical Director Qualifications and Patient Safety Culture Surveys. Amends s. 400.141, F.S., requiring nursing home directors to obtain designation as a certified medical director by the American Medical Directors Association, hold a comparable credential, or be in the process of seeking such designation by January 1, 2026. Also requires each nursing home to conduct, at least biennially, a patient safety culture survey using instruments developed by the federal Agency for Health Care Research and Quality.	Senate	Accept BUMP House Offer #1
11			Different	8	Nursing Home Survey Results. Amends s. 400.191, F.S., requiring AHCA to include the results of customer satisfaction surveys in its Nursing Home Guide.	Senate	Accept BUMP House Offer #1
12			Different	9	Nursing Home Electronic Health Records. Amends s. 408.051, F.S., requiring nursing homes that maintain certified electronic health records technology to make available all admission, transfer, and discharge data to the Florida Health Information Exchange.	Senate	Accept BUMP House Offer #1
13			Different	10	Nursing Home Financial Reporting. Amends s. 408.061, F.S., creating a fine, effective January 1, 2026, of \$10,000 per violation against a nursing home or home office of a nursing home that fails to comply with the requirement to submit specific audited financial data to the Florida Nursing Home Uniform Reporting System (FNHURS). The bill exempts state-owned nursing homes from the FNHURS submission requirement.	Senate	Accept BUMP House Offer #1
14			Different	11	Nursing Home Fines. Amends s. 408.08, F.S., clarifying that a facility fined for a FNHURS violation under s. 408.061, F.S., may not also be fined for the same violation under s. 408.08, F.S.	Senate	Accept BUMP House Offer #1
15			Different	12	Nursing Home Quality Incentive Program. Amends s. 409.908, F.S., directing AHCA to include the results of the consumer satisfaction survey as a quality measure in calculating Medicaid Quality Incentive Program (QIP) payments when sufficient survey data has been collected to be statically valid. The bill also requires AHCA to submit an annual report to the Governor and Legislature on each QIP payment made and sets minimum requirements for data to include in the report.	Senate	Accept BUMP House Offer #1

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services	BUMP House	BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
16			Different	13	Training, Education, and Clinicals in Health (TEACH) Funding Program. Amends s. 409.91256, F.S., expanding the definition of qualified facilities eligible for the TEACH Funding Program to include publicly funded nonprofits serving Medicaid recipients or other low-income patients in areas designated as health professional shortage areas and approved by AHCA. The bill also adds to the program a reimbursement rate of \$22 per hour for nursing students.	Senate	Accept BUMP House Offer #1
17			Different	14	Nursing Home Quality Incentive Program. Requires AHCA to commission a comprehensive study of nursing home quality incentive programs in other states, provides requirements for the study, and requires submission of a final report to the Governor and Legislature by January 5, 2026. See Senate Bump Offer #1 - Nursing Home Study Attachment 4	Senate	BUMP Senate Offer #1 Modified
17a		Casey DeSantis Cancer Research Program. Amends s. 381.915, F.S., authorizing funding in the Casey DeSantis Research Program for cancer centers accredited as Comprehensive Community Cancer Program or Integrated Network Cancer Program. See House Bump Attachment #1			Casey DeSantis Cancer Research Program. Amends s. 381.915, F.S., authorizing funding in the Casey DeSantis Research Program for cancer centers accredited as Comprehensive Community Cancer Program or Integrated Network Cancer Program. Between lines 310 and 311, insert: 8. Operates as a licensed hospital that is accredited by the American College of Surgeons as a Comprehensive Community Cancer Program or Integrated Network Cancer Program.	House New	BUMP Senate Offer #1 Modified
17b		Medicaid Redetermination. Amends s. 409.904, F.S., requiring a continuous presumption of Medicaid eligibility for permanently disabled persons currently receiving Medicaid-covered services. See House Bump Attachment #2				House New	Accept BUMP House Offer #1

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services		BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
17c		PACE Designated Geographic Service Areas. Amends s. 430.84, F.S., allowing a PACE provider to operate in a geographic service area which has an existing provider, if there is a need for additional service availability, as determined by AHCA and CMS. See House Bump Attachment #3			PACE Designated Geographic Service Areas. Amends s. 430.84, F.S., allowing a PACE provider to operate in a geographic service area which has an existing provider, if there is a need for additional service availability, as determined by AHCA and CMS. See Senate Bump Offer #1 - PACE Designated Geographic Service Areas Attachment 5	House New	BUMP Senate Offer #1 Modified
17d		Premium Assistance. Amends s. 409.977, F.S., authorizing AHCA to provide financial assistance to high-cost Medicaid recipients in excess of the Medicaid premium, if it would be cost effective to do so. See House Bump Attachment #4				House New	Accept BUMP House Offer #1
17e		Monthly Rate Structure for Life Skills Development Services. Directs the Agency for Health Care Administration to establish a monthly reimbursement rate for Life Skills Development Levels 3 and 4 services under the iBudget waiver, effective October 1, 2025, and authorizes budget amendments to address any resulting deficits. See House Bump Attachment #5				House New	Senate No Language
17f		Behavioral Health Teaching Hospitals. Revises the eligibility requirements for hospitals to be designated as behavioral health teaching hospitals by updating residency and fellowship program criteria and clarifying university affiliation requirements. See House Bump Attachment #6				House New	Senate No Language

		House Bill 5301 - Health Care			Senate Bill 2514 - Health and Human Services		BUMP Senate
Line	Section Number	Description	Status	Section Number	Description	Offer #1	Offer #1
17g		Dental Hygienist Diode Laser. Amends s. 466.023, F.S., to allow a dental hygienist, under the general supervision of a licensed dentist, to use a dental diode laser if certain criteria are met. See House Bump Attachment #7				House New	Senate No Language
17h					Colorectal Cancer Screening. Amends ss. 409.906 and 409.9745, F.S., to require Medicaid managed care plans to cover medically necessary biomarker testing consistent with the state plan, establish authorization procedures, and require coverage of blood-based biomarker tests for colorectal cancer screening as specified in federal Medicare determinations. See Senate Bump Offer #1 - Colorectal Cancer Screening Attachment		Senate New
18	5	Effective Date. Provides an effective date of July 1, 2025.	Different	15	Effective Date. Provides an effective date of July 1, 2025, except as otherwise expressly provided in the bill.		

Senate Bump Offer #1 - Graduate Medical Education Attachment #1

A bill to be entitled

An act relating to ... providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (10) of section 409.909, Florida Statutes, is renumbered as subsection (9) and paragraph (a) of subsection (6) and present subsection (9) of that section are amended, to read:

409.909 Statewide Medicaid Residency Program.-

- (6) The Slots for Doctors Program is established to address the physician workforce shortage by increasing the supply of highly trained physicians through the creation of new resident positions, which will increase access to care and improve health outcomes for Medicaid recipients.
- (a)1. Notwithstanding subsection (4), the agency shall annually allocate \$100,000 to hospitals and qualifying institutions for each newly created resident position that is first filled on or after June 1, 2023, and filled thereafter, and that is accredited by the Accreditation Council for Graduate Medical Education or the Osteopathic Postdoctoral Training Institution in an initial or established accredited training program which is in a physician specialty or subspecialty in a statewide supply-and-demand deficit.
- 2. Notwithstanding the requirement that a new resident position be created to receive funding under this subsection, the agency may allocate \$100,000 to hospitals and qualifying institutions, pursuant to subparagraph 1., for up to $\underline{100}$ $\underline{200}$ resident positions that existed before July 1, 2023, if such resident position:
- a. Is in a physician specialty or subspecialty experiencing a statewide supply-and-demand deficit;

remains filled thereafter; and

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program.

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- within the agency. (a) The committee shall be composed of the following members:

specialty as specified in paragraph (2)(a).

1. Three deans, or their designees, from medical schools in this state, appointed by the chair of the Council of Florida Medical School Deans.

b. Has been unfilled for a period of 3 or more years;

Medical Education or the Osteopathic Postdoctoral Training

Institution in an initial or established accredited training

3. If applications for resident positions under this

paragraph exceed the number of authorized resident positions or

the available funding allocated, the agency shall prioritize

applications for resident positions that are in a primary care

(9) The Graduate Medical Education Committee is created

c. Is subsequently filled on or after June 1, 2024, and

Is accredited by the Accreditation Council for Graduate

- Four members appointed by the Governor, one of whom is representative of the Florida Medical Association or the Florida Osteopathic Medical Association who has supervised or is currently supervising residents, one of whom is a member of the Florida Hospital Association, one of whom is a member of the Safety Net Hospital Alliance, and one of whom is a physician licensed under chapter 458 or chapter 459 practicing at a qualifying institution.
- 3. Two members appointed by the Secretary of Health Care Administration, one of whom represents a statutory teaching hospital as defined in s. 408.07(46) and one of whom is a physician who has supervised or is currently supervising residents.

 4. Two members appointed by the State Surgeon General, one of whom must represent a teaching hospital as defined in s.

408.07 and one of whom is a physician who has supervised or is currently supervising residents or interns.

5. Two members, one appointed by the President of the Senate and one appointed by the Speaker of the House of Representatives.

(b)1. The members of the committee appointed under subparagraph (a)1. shall serve 4-year terms. When such members' terms expire, the chair of the Council of Florida Medical School Deans shall appoint new members as detailed in subparagraph (a)1. from different medical schools on a rotating basis and may not reappoint a dean from a medical school that has been represented on the committee until all medical schools in the state have had an opportunity to be represented on the committee.

2. The members of the committee appointed under subparagraphs (a) 2.-4. shall serve 4-year terms, with the initial term being 3 years for members appointed under subparagraph (a) 4. and 2 years for members appointed under subparagraph (a) 3. The committee shall elect a chair to serve for a 1-year term.

(c) Members shall serve without compensation but are entitled to reimbursement for per diem and travel expenses pursuant to s. 112.061.

(d) The committee shall convene its first meeting by July 1, 2024, and shall meet as often as necessary to conduct its business, but at least twice annually, at the call of the chair. The committee may conduct its meetings through teleconference or other electronic means. A majority of the members of the committee constitutes a quorum, and a meeting may not be held with less than a quorum present. The affirmative vote of a

majority of the members of the committee present is necessary for any official action by the committee.

- (e) Beginning on July 1, 2025, the committee shall submit an annual report to the Governor, the President of the Senate, and the Speaker of the House of Representatives which must, at a minimum, detail all of the following:
- 1. The role of residents and medical faculty in the provision of health care.
- 2. The relationship of graduate medical education to the state's physician workforce.
- 3. The typical workload for residents and the role such workload plays in retaining physicians in the long-term workforce.
- 4. The costs of training medical residents for hospitals and qualifying institutions.
- 5.—The availability and adequacy of all sources of revenue available to support graduate medical education.
- 6. The use of state funds, including, but not limited to, intergovernmental transfers, for graduate medical education for each hospital or qualifying institution receiving such funds.
- (f) The agency shall provide reasonable and necessary support staff and materials to assist the committee in the performance of its duties. The agency shall also provide the information obtained pursuant to subsection (8) to the committee and assist the committee, as requested, in obtaining any other information deemed necessary by the committee to produce its report.
 - Section 2. This act shall take effect July 1, 2025.

Senate Bump Offer #1 - Achieved Savings Rebate Attachment #2

A bill to be entitled

An act relating to ; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Subsection (3) of section 409.967, Florida Statutes, is amended to read:

409.967 Managed care plan accountability.-

- (3) ACHIEVED SAVINGS REBATE.-
- (e) Once the certified public accountant completes the audit, the certified public accountant shall submit an audit report to the agency attesting to the achieved savings of the plan. The agency shall review the report to determine compliance with the requirements of this subsection. The agency shall notify the certified public accountant of any deficiencies in the audit report. The certified public accountant must correct such deficiencies in the audit report and resubmit the revised audit report to the agency before the report is considered final. Once finalized, the results of the audit report are dispositive.
- (h) The following may not be included as allowable expenses in calculating income for determining the achieved savings rebate:
 - 1. Payment of achieved savings rebates.
- 2. Any financial incentive payments made to the plan outside of the capitation rate.
- 3. Any financial disincentive payments levied by the state or federal government.
 - 4. Expenses associated with any lobbying or political

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- 5. The cash value or equivalent cash value of bonuses of any type paid or awarded to the plan's executive staff, other than base salary.
 - 6. Reserves and reserve accounts.
- 7. Administrative costs, including, but not limited to, reinsurance expenses, interest payments, depreciation expenses, bad debt expenses, and outstanding claims expenses in excess of actuarially sound maximum amounts set by the agency.
- 8. Administrative costs for a hospital directed payment program.

The agency shall consider these and other factors in developing contracts that establish shared savings arrangements.

Section 2. This act shall take effect July 1, 2025.

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Senate Bump Offer #1 - Medical Marijuana Use Registry Reinstatement Attachment #3

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Palmer Eye Institute VisionGen Initiative. The purpose of the initiative is to advance genetic and epigenetic research on inherited eye diseases and ocular oncology by awarding grants through the peer-reviewed, competitive process established under subsection (3). Funding for the initiative is subject to the annual appropriation of funds by the Legislature.

Section 4. Paragraphs (d) and (e) of subsection (5) of section 381.986, Florida Statutes, are amended to read:

381.986 Medical use of marijuana.-

- (5) MEDICAL MARIJUANA USE REGISTRY.-
- The department shall immediately suspend the registration of a qualified patient charged with a violation of chapter 893 until final disposition of the any alleged offense. Based upon such final disposition Thereafter, the department may extend the suspension, revoke the registration, or reinstate the registration. However, the department must revoke the registration of the qualified patient upon such final disposition if the qualified patient was convicted of, or pled guilty or nolo contendere to, regardless of adjudication, a violation of chapter 893 if such violation was for trafficking in, or the sale, manufacture, or delivery of, or possession with intent to sell, manufacture, or deliver, a controlled substance. If such person wishes to seek reinstatement of his or her registration as a qualified patient, the person may submit a new application accompanied by a notarized attestation by the applicant that he or she has completed all terms of incarceration, probation, community control, or supervision related to the offense. A person who knowingly makes a false attestation under this paragraph is guilty of a misdemeanor of

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the second degree, punishable as provided in s. 775.082 or s. 775.083.

(e) The department shall immediately suspend the registration of a any caregiver charged with a violation of chapter 893 until final disposition of the any alleged offense. The department must revoke the registration of the caregiver upon such final disposition if the caregiver was convicted of, or pled guilty or nolo contendere to, regardless of adjudication, a violation of chapter 893 if such violation was for trafficking in, or the sale, manufacture, or delivery of, or possession with intent to sell, manufacture, or deliver, a controlled substance. If such person wishes to seek reinstatement of his or her registration as a caregiver, the person may submit a new application accompanied by a notarized attestation by the applicant that he or she has completed all terms of incarceration, probation, community control, or supervision related to the offense. A person who knowingly makes a false attestation under this paragraph is guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083. Additionally, the department must shall revoke a caregiver registration if the caregiver does not meet the requirements of subparagraph (6)(b)6.

Section 5. Subsection (8) is added to section 394.495, Florida Statutes, to read:

394.495 Child and adolescent mental health system of care; programs and services.—

(8) As authorized by and consistent with funding appropriated in the General Appropriations Act, the department may contract with Valerie's House, Inc., a nonprofit

Senate Bump Offer #1 - Nursing Home Study Attachment #4

- Section X. (1) To support and enhance quality outcomes in Florida's nursing homes, the Agency for Health Care

 Administration shall contract with a third-party vendor to conduct a comprehensive study of nursing home quality incentive programs in other states.
- (a) At a minimum, the study must include a detailed analysis of quality incentive programs implemented in each of the states examined, identify components of such programs which have demonstrably improved nursing home quality outcomes, and provide recommendations to modify or enhance this state's existing Medicaid Quality Incentive Program based on its historical performance and trends since it was first implemented.
 - (b) The study must also include:
- 1. An in-depth review of emerging and existing technologies applicable to nursing home care and an analysis of how their adoption in this state could improve quality of care, operational efficiency, and quality of life outcomes for nursing home residents adoption in this state could improve quality of care and operational efficiency; and
- 2. An examination of other states' Medicaid add-on payment structures related to the provision of ventilator care, bariatric services, and behavioral health services.
- (2) The agency shall submit a final report on the study, including findings and actionable recommendations, to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 5, 2026December 1, 2025.

Senate Bump Offer #1 - PACE Designated Geographic Service Areas Attachment #5

HOUSE AMENDMENT

Bill No. (2025)

Amendment No.

CHAMBER ACTION

<u>Senate</u> <u>House</u>

Representative(s) offered the following:

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Amendment (with title amendment)

Remove line(s) - and insert:

Section 1. Subsection (3) of section 430.84, Florida Statutes, is amended to read:

430.84 Program of All-Inclusive Care for the Elderly.

- (3) PACE ORGANIZATION SELECTION.—The agency, in consultation with the department, shall, on a continuous basis, review and consider applications required by the CMS for PACE that have been submitted to the agency by entities seeking initial state approval to become PACE organizations. Notice of such applications shall be published in the Florida Administrative Register.
- (a) A prospective PACE organization shall submit application documents to the agency before requesting program funding. Application documents submitted to and reviewed by the agency, in consultation with the department, must include all of the following:
- 1. Evidence that the applicant has the ability to meet all of the applicable federal regulations and requirements,

Amendment No.

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established by the CMS, for participation as a PACE organization by the proposed implementation date.

- 2. Market studies, including an estimate of the number of potential participants and the geographic service area in which the applicant proposes to serve.
- 3. A business plan of operation, including pro forma financial statements and projections, based on the proposed implementation date.
- Each applicant must propose to serve a unique and (b) defined geographic service area. In designating a service area under a contract with a PACE program agreement organization, the State state administering agency, may exclude from designation an area that is already covered under another PACE program agreement organization contract in order to avoid unnecessary duplication of services and avoid impairing the financial and service viability of an existing programPACE organization. However, if a new applicant submits a letter of intent to establish aprovide PACE program services in an area where an existing program PACE organization is under contract and has been established and operating for at least 10 years, the state shall determine whether there is an unmet need that could be provided by the new programPACE organization. T, and the applicant must satisfactorily demonstrate to the State administering agency that there is justification for the proposed PACE programorganization in such service area. All

Amendment No.

 applicants must demonstrate in the application that the PACE services provided by the proposed PACE program organization will be comprehensive and organized to meet all state and CMS requirements. without duplication of services or target populations. No more than one PACE organization may be authorized to provide services within any unique and defined geographic service area.

- (c) Upon agency approval, a PACE organization that is authorized to provide and has received funding for PACE slots in a given geographic area may use such slots and funding to serve the needs of participants in a contiguous geographic area if such PACE organization is authorized to provide PACE services in that area.
- (d) An existing PACE organization seeking authority to serve an additional geographic service area not previously authorized by the agency or Legislature shall meet the requirements set forth in paragraphs (a) and (b).
- (e) Any prospective PACE organization that is granted initial state approval by the agency, in consultation with the department, shall submit its complete federal PACE application, in accordance with the application process and guidelines established by the CMS, to the agency and the CMS within 12 months after the date of initial state approval, or such approval is void.

Bill No. (2025)

Amendment No.

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TITLE AMENDMENT

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Remove line(s) - and insert:
amending s. 430.84, F.S.; amends the geographic area
requirements for PACE organizations;

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Senate Bump Offer #1 - Colorectal Cancer Screening Attachment #6

A bill to be entitled

An act relating to ; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Paragraph (d) of subsection (29) of section 409.906, Florida Statutes, is amended to read:

409.906 Optional Medicaid services. - Subject to specific appropriations, the agency may make payments for services which are optional to the state under Title XIX of the Social Security Act and are furnished by Medicaid providers to recipients who are determined to be eligible on the dates on which the services were provided. Any optional service that is provided shall be provided only when medically necessary and in accordance with state and federal law. Optional services rendered by providers in mobile units to Medicaid recipients may be restricted or prohibited by the agency. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. If necessary to safequard the state's systems of providing services to elderly and disabled persons and subject to the notice and review provisions of s. 216.177, the Governor may direct the Agency for Health Care Administration to amend the Medicaid state plan to delete the optional Medicaid service known as "Intermediate Care Facilities for the Developmentally Disabled." Optional services may include:

- (29) BIOMARKER TESTING SERVICES.-
- (d) This subsection does not require coverage of biomarker testing for screening purposes. The agency may pay for blood-based biomarker tests at an in-network or out-of-network laboratory facility for colorectal cancer screening covered under a National Coverage Determination from the Centers for Medicare and Medicaid Services.
- Section 2. Section 409.9745, Florida Statutes, is amended to read:
 - 409.9745 Managed care plan biomarker testing.-
- (1) A managed care plan must provide coverage for biomarker testing for recipients, as authorized under s. 409.906, at the same scope, duration, and frequency as the Medicaid program provides for other medically necessary treatments.
- (a) (2) A recipient and health care provider shall have access to a clear and convenient process to request authorization for biomarker testing as provided under this section. Such process shall be made readily accessible on the website of the managed care plan.
- $\underline{\text{(b)}}$ This section does not require coverage of biomarker testing for screening purposes.
- (c) (4) The agency shall include the rate impact of this section in the applicable Medicaid managed medical assistance program and long-term care managed care program rates.
- (2) A managed care plan must provide coverage for blood-based biomarker tests for colorectal cancer screening covered under a National Coverage Determination from the Centers for Medicare and Medicaid Services at the same scope and frequency as described in the National Coverage Determination.

59 Section 3. This act shall take effect July 1, 2025.