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Legislature approves bill to expand Medicaid managed long-term care program

By Christine Sexton

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TALLAHASSEE — Florida is expanding its Medicaid managed long-term care program to include people who aren't elderly but who may require long-term care services.

Under [SB 2514](#), individuals with cystic fibrosis who qualify for hospital care will be enrolled in the Medicaid managed long term care plan by January 1, 2018, as will individuals who currently are enrolled in the Traumatic Brain and Spinal Cord Injury Waiver, the Adult Cystic Fibrosis Waiver, and the Project AIDS Care Waiver — so long as the federal government gives the state the green light.

It's one of several changes in SB 2514, a health care bill that changes substantive law to reflect the policy decisions that lawmakers agreed to to settle the 2017-18 budget. The bill passed the Florida Senate by a 37-0 vote and the House by a 109-3 vote.

The bill also changes law to make clear that Florida will use a prospective payment reimbursement methodology, effective October 1, 2018, to set nursing home provider reimbursement rates. There was an [intraindustry fight](#) during the 2017 session between two nursing home association over the prospective payment system and the transition away from the current cost based methodology used to determine nursing home rates.

SB 2514 authorizes the state to make medical assistance payments for people with incomes at or below 300 percent of the federal poverty level who have acquired immune deficiency syndrome (AIDS) and are suffering from a related infection and are at risk of hospitalization.

Annually, \$3 million in cigarette tax revenue is steered away from the Sanford Burnham Prebys Medical Discovery Institute under SB 2514 and directed, instead, toward the National Cancer Institute research entities for advancement of pediatric cancer cures.

Perhaps the most high profile issue in the bill is the distribution of Low Income Pool dollars, commonly called LIP. The bill also spells out how upward of \$1.5 billion in the supplemental Medicaid dollars can be spent.

State Sen. Anitere Flores on Monday acknowledged there are concerns that under the special terms and conditions that the state won't be able to tap into the full \$1.5 billion and that \$1 billion is more likely.

Nevertheless, the bill requires the state Agency for Health Care Administration to submit a budget amendment requesting release of the funds and along with the budget amendment AHCA

must submit a list of counties that contributed the required local matching funds that make the LIP program work. Moreover, the agency must submit the proposed distribution model. The money can be nullified if the chair and vice chair of the Legislative Budget Commission or the President of the Senate and the Speaker of the House of Representatives object in writing to a proposed amendment within 14 days after notification.