

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
CHILDREN SPECIAL HLTH CARE		68500100
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
REDUCE FLORIDA HEALTHY KIDS THIRD		
PARTY ADMINISTRATOR CONTRACT		33V0560
SPECIAL CATEGORIES		100000
G/A-CONTRACT SVCS-FHK ADMN		100784
GENERAL REVENUE FUND	1,014,202-	1000
MEDICAL CARE TRUST FUND	1,884,912-	2474
TOTAL APPRO.....	2,899,114-	
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AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO
 1

ISSUE TITLE: Reduce Florida Healthy Kids Third Party Administrator Contract

ISSUE SUMMARY: This issue proposes a reduction of \$2,899,114 in the contracted services category in the Children's Special Health Care budget entity. This reduction can be achieved due to the Florida Healthy Kids Corporation's (FHKC) negotiation for a new Third Party Administrator (TPA).

ISSUE DETAIL: The Agency for Health Care Administration (AHCA) contracts with FHKC to process all Florida KidCare applications and to determine eligibility for the Title XXI programs. FHKC contracts with a TPA to perform most of its administrative functions. The current TPA contract will expire on July 31, 2013, and the new TPA contract will begin August 1, 2013. The new TPA contract requires greater efficiencies, and therefore, the cost of processing Florida KidCare applications and renewals will decrease.

BUDGET SUMMARY:

FY 13-14	Recurring
G/A Contracted Services-FHK Admin (100784)	
General Revenue (1000-2)	(\$1,014,202)
Medical Care Trust Fund (2474-3)	(\$1,884,912)
Total	(\$2,899,114)
Issue Total	(\$2,899,114)

COL A93
SCH VIIIB-2
REDUCTIONS
POS AMOUNT

AGENCY/HEALTH CARE ADMIN
PGM: HEALTH CARE SERVICES
CHILDREN SPECIAL HLTH CARE
HEALTH AND HUMAN SERVICES
HEALTH SVCS/INDIVIDUALS

68000000
68500000
68500100
13
1301.00.00.00

TOTAL: HEALTH SVCS/INDIVIDUALS
BY FUND TYPE

1301.00.00.00

GENERAL REVENUE FUND 1,014,202-
TRUST FUNDS 1,884,912-

TOTAL PROG COMP..... 2,899,114-
=====

1000
2000

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
EXECUTIVE DIR/SUPPORT SVCS		68500200
GOV OPERATIONS/SUPPORT		16
EXEC LEADERSHIP/SUPPRT SVC		<u>1602.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ADMINISTRATIVE REDUCTION IN OTHER		
PERSONAL SERVICES CATEGORY		33V0510
OTHER PERSONAL SERVICES		030000

MEDICAL CARE TRUST FUND..... 1,176,650- 2474
 =====

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO
 3

ISSUE TITLE: Administrative Reduction in Other Personal Services Category

ISSUE SUMMARY: This issue proposes to reduce \$1,211,650 in trust fund authority from the Other Personal Services (OPS) category.

ISSUE DETAIL: This proposed reduction of \$1,211,650 would result in a cutback in OPS staffing. This issue proposes to reduce funding in the Executive Direction/Support Services budget entity (\$1,176,650 includes the proportionate federal share) and Health Care Regulation budget entity (\$35,000).

BUDGET SUMMARY:

FY 13-14	Recurring
Other Personnel Services (030000)	
Health Care Trust Fund (2003-1)	(\$ 35,000)
Medical Care Trust Fund (2474-2)	(\$ 328,234)
Medical Care Trust Fund (2474-3)	(\$ 848,416)
Total	(\$1,211,650)
Issue Total	(\$1,211,650)

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SCH VIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
EXECUTIVE DIR/SUPPORT SVCS		68500200
GOV OPERATIONS/SUPPORT		16
EXEC LEADERSHIP/SUPPRT SVC		<u>1602.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
REDUCTION IN CONTRACTED SERVICES		
CATEGORY		33V0550
SPECIAL CATEGORIES		100000
CONTRACTED SERVICES		100777
GENERAL REVENUE FUND	278,404-	1000
MEDICAL CARE TRUST FUND	278,405-	2474
TOTAL APPRO.....	556,809-	
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO
 4

ISSUE TITLE: Reduction in Contracted Services Category

ISSUE SUMMARY: This issue proposes to reduce \$556,809 (\$278,404 in General Revenue and \$278,405 in Medical Care Trust Fund) from the Contracted Services category.

ISSUE DETAIL: This proposed reduction would result in a cutback in the contracted services category. This issue proposes to reduce funding in the Executive Direction/Support Services budget entity in the amount of \$556,809, which includes the proportionate federal share.

BUDGET SUMMARY:

FY 13-14 Recurring

Special Categories:

Contracted Services (100777)	
General Revenue (1000-2)	(\$278,404)
Medical Care Trust Fund (2474-3)	(\$278,405)
Total	(\$556,809)

Issue Total (\$556,809)

COL A93
SCH VIIIB-2
REDUCTIONS
POS AMOUNT

CODES

AGENCY/HEALTH CARE ADMIN
PGM: HEALTH CARE SERVICES
EXECUTIVE DIR/SUPPORT SVCS
GOV OPERATIONS/SUPPORT
EXEC LEADERSHIP/SUPPRT SVC

68000000
68500000
68500200
16
1602.00.00.00

TOTAL: EXEC LEADERSHIP/SUPPRT SVC
BY FUND TYPE

1602.00.00.00

GENERAL REVENUE FUND 278,404-
TRUST FUNDS 1,455,055-

1000
2000

TOTAL PROG COMP..... 1,733,459-
=====

COL A93 SCH VIIIB-2 REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
OCCUPATIONAL THERAPY SERVICES RATE REDUCTION		33V0320
SPECIAL CATEGORIES		100000
OCCUPATIONAL THERAPY SVCS		103740
GENERAL REVENUE FUND	260,433-	1000
MEDICAL CARE TRUST FUND	368,944-	2474
REFUGEE ASSISTANCE TF	14-	2579
TOTAL APPRO.....	<u>629,391-</u>	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 6

IT COMPONENT? NO

ISSUE TITLE: Occupational Therapy Services Rate Reduction

ISSUE SUMMARY: This issue proposes to reduce the occupational therapy services fee by two percent. This rate reduction for occupational therapy services would result in a budgetary reduction of \$629,391, which includes the proportionate federal share.

ISSUE DETAIL: Occupational therapy addresses the functional needs of an individual related to the performance of self-help skills, adaptive behavior, and sensory, motor, and postural development. Medicaid reimburses for occupational therapy services provided by licensed, Medicaid-participating occupational therapists and by supervised occupational therapy assistants. Medicaid reimbursable services include evaluation and treatment to prevent or correct physical and emotional deficits, or to minimize the disabling effect of these deficits. Typical activities are perceptual motor activity exercises to enhance functional performance, kinetic movement, guidance in the use of adaptive equipment and other techniques related to improving motor development. Services are available in the home or other appropriate setting.

For Fiscal Year 2013-2014, there will be an estimated 959,055 individuals eligible to use these services. This issue proposes a two percent rate reduction to the occupational therapy services fee. This change in policy would be effective August 1, 2013.

BUDGET SUMMARY:

FY 13-14	Recurring
Occupational Therapy Service (103740)	
General Revenue (1000-2)	(\$260,433)
Medical Care Trust Fund (2474-3)	(\$368,944)

COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
OCCUPATIONAL THERAPY SERVICES RATE		
REDUCTION		33V0320

Refugee Assistance Trust Fund (2579-3)	(\$14)
Total	(\$629,391)

Issue Total (\$629,391)

RESPIRATORY THERAPY SERVICES RATE		33V0330
REDUCTION		
SPECIAL CATEGORIES		100000
RESPIRATORY THERAPY SVCS		101938
GENERAL REVENUE FUND	145,320-	1000
MEDICAL CARE TRUST FUND	205,901-	2474
REFUGEE ASSISTANCE TF	9-	2579

TOTAL APPRO.....	351,230-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 7

IT COMPONENT? NO

ISSUE TITLE: Respiratory Therapy Services Rate Reduction

ISSUE SUMMARY: This issue proposes to reduce the respiratory therapy services fee by two percent. This rate reduction for respiratory therapy services would result in a budgetary reduction of \$351,230, which includes the proportionate federal share.

ISSUE DETAIL: Respiratory therapy is the evaluation and treatment of pulmonary dysfunction. Medicaid reimbursable services include ventilator support, therapeutic use of medical gases, respiratory rehabilitation, management of life support systems, bronchopulmonary drainage, breathing exercises, and chest physiotherapy. Medicaid reimburses for respiratory therapy services that are personally rendered by licensed registered respiratory therapists. These services are available in the home or other appropriate setting.

For Fiscal Year 2013-2014, there will be an estimated 959,055 individuals eligible to use these services. This issue proposes a two percent rate reduction to the respiratory therapy services fee. The change in policy would be effective August 1, 2013.

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
RESPIRATORY THERAPY SERVICES RATE REDUCTION		33V0330

BUDGET SUMMARY:

FY 13-14	Recurring
Respiratory Therapy Service (101938)	
General Revenue (1000-2)	(\$145,320)
Medical Care Trust Fund (2474-3)	(\$205,901)
Refugee Assistance Trust Fund (2579-3)	(\$9)
Total	(\$351,230)
Issue Total	(\$351,230)

SPEECH THERAPY SERVICES RATE
 REDUCTION

SPECIAL CATEGORIES		33V0340
SPEECH THERAPY SERVICES		100000
		103529
GENERAL REVENUE FUND	398,363-	1000
MEDICAL CARE TRUST FUND	564,351-	2474
REFUGEE ASSISTANCE TF	33-	2579
TOTAL APPRO.....	962,747-	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE:

IT COMPONENT? NO

8

ISSUE TITLE: Speech Therapy Services Rate Reduction

ISSUE SUMMARY: This issue proposes to reduce the speech therapy services fee by two percent. This rate reduction for speech therapy services would result in a budgetary reduction of \$962,747, which includes the proportionate federal share.

ISSUE DETAIL: Speech-language pathology services involve the evaluation and treatment of speech-language disorders.

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN	68000000
PGM: HEALTH CARE SERVICES	68500000
MEDICAID SERV/INDIVIDUALS	68501400
HEALTH AND HUMAN SERVICES	13
HEALTH SVCS/INDIVIDUALS	<u>1301.00.00.00</u>
PROGRAM REDUCTIONS	33V0000
SPEECH THERAPY SERVICES RATE	
REDUCTION	33V0340

Medicaid reimburses for speech-language pathology services provided by licensed, Medicaid-participating speech-language pathologists and by supervised speech-language pathologist assistants. These services are available in the home or other appropriate setting and may be rendered to a group of children.

For Fiscal Year 2013-2014, there will be an estimated 959,055 individuals eligible to use these services. This issue proposes a two percent rate reduction to the speech therapy services fee. This change in policy would be effective August 1, 2013.

BUDGET SUMMARY:

FY 13-14	Recurring
Speech Therapy Service (103529)	
General Revenue (1000-2)	(\$398,363)
Medical Care Trust Fund (2474-3)	(\$564,351)
Refugee Assistance Trust Fund (2579-3)	(\$33)
Total	(\$962,747)
Issue Total	(\$962,747)

LIMIT ELIGIBILITY FOR MEDICALLY
 NEEDY TO 138 PERCENT OF THE FEDERAL
 POVERTY LEVEL

SPECIAL CATEGORIES		33V0630
HOSPITAL INPATIENT SERVICE		100000
		101582
GENERAL REVENUE FUND	27,381,972-	1000
MEDICAL CARE TRUST FUND	38,790,025-	2474

TOTAL APPRO.....	66,171,997-	
	=====	

HOSPITAL OUTPATIENT SVCS

		101596
GENERAL REVENUE FUND	8,329,289-	1000
MEDICAL CARE TRUST FUND	11,799,490-	2474

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
LIMIT ELIGIBILITY FOR MEDICALLY NEEDY TO 138 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0630
SPECIAL CATEGORIES		100000
HOSPITAL OUTPATIENT SVCS		101596
TOTAL APPRO.....	20,128,779-	
	=====	
PHYSICIAN SERVICES		102541
GENERAL REVENUE FUND	5,674,206-	1000
MEDICAL CARE TRUST FUND	8,038,230-	2474
TOTAL APPRO.....	13,712,436-	
	=====	
PRESCRIBED MEDICINE/DRUGS		102681
GENERAL REVENUE FUND	3,971,789-	1000
GRANTS AND DONATIONS TF	9,912,843-	2339
MEDICAL CARE TRUST FUND	5,626,541-	2474
TOTAL APPRO.....	19,511,173-	
	=====	
TOTAL: LIMIT ELIGIBILITY FOR MEDICALLY NEEDY TO 138 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0630
TOTAL ISSUE.....	119,524,385-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 15

IT COMPONENT? NO

ISSUE TITLE: Limit Eligibility for Medically Needy to 138 Percent of the Federal Poverty Level

ISSUE SUMMARY: This issue proposes to reduce the Medically Needy Program to 138 percent of the Federal Poverty Level (FPL). This limitation in eligibility would have a budgetary impact of \$119,524,385, which includes the proportionate federal share. This issue would be effective January 1, 2014.

ISSUE DETAIL: This issue proposes that coverage for those beneficiaries in the Medically Needy Eligibility group

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
LIMIT ELIGIBILITY FOR MEDICALLY NEEDY TO 138 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0630

currently above 138% of the FPL be eliminated since they will become a part of the insurance clearinghouse, known as a health exchange, effective January 1, 2014. As part of the health exchange, the impacted beneficiaries will be able to purchase their own insurance and not be enrolled in Medicaid. There will be an estimated 10,417 beneficiaries who would utilize this service and whose Medicaid eligibility would be eliminated.

The top 93.12 percent of the projected reduction in expenditures for Fiscal Year 2013-2014 under the Medically Needy program for current eligibles are as follows:

Hospital Inpatient	- \$57,948,289	- 48.48%
Hospital Outpatient	- \$20,128,779	- 16.84%
Prescribed Medicine	- \$19,511,173	- 16.33%
Physician Services	- \$13,712,436	- 11.47%
Other	- \$ 8,223,708	- 6.88%

The "Other" portion of this funding has been included in Hospital Inpatient for ease of presentation below.

Legislative Authority is needed to achieve this reduction. Also, it should be noted that federal authorization, likely through a specific waiver of federal regulation, may be needed to enact this change.

BUDGET SUMMARY:

FY 13-14	Recurring
Hospital Inpatient Service (101582)	
General Revenue (1000-2)	(\$27,381,972)
Medical Care Trust Fund (2474-3)	(\$38,790,025)
Total	(\$66,171,997)
Hospital Outpatient Service (101596)	
General Revenue (1000-2)	(\$8,329,289)
Medical Care Trust Fund (2474-3)	(\$11,799,490)
Total	(\$20,128,779)
Prescribed Medicine (102683)	
General Revenue (1000-2)	(\$3,971,789)
Grants & Donations Trust Fund (2339-2)	(\$9,912,843)
Medical Care Trust Fund (2474-3)	(\$5,626,541)
Total	(\$19,511,173)

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
LIMIT ELIGIBILITY FOR MEDICALLY NEEDY TO 138 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0630

Physician Service (102541)	
General Revenue (1000-2)	(\$5,674,206)
Medical Care Trust Fund (2474-3)	(\$8,038,230)
Total	(\$13,712,436)

Issue Total	
General Revenue (1000-2)	(\$45,357,256)
Grants & Donations Trust Fund (2339-2)	(\$9,912,843)
Medical Care Trust Fund (2474-3)	(\$64,254,286)
Total	(\$119,524,385)

LIMIT ELIGIBILITY FOR PREGNANT WOMEN TO 150 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0640
SPECIAL CATEGORIES		100000
HOSPITAL INPATIENT SERVICE		101582

GENERAL REVENUE FUND	8,313,042-	1000
MEDICAL CARE TRUST FUND	11,776,475-	2474

TOTAL APPRO.....	20,089,517-	
	=====	

HOSPITAL OUTPATIENT SVCS		101596
GENERAL REVENUE FUND	1,863,114-	1000
MEDICAL CARE TRUST FUND	2,639,336-	2474

TOTAL APPRO.....	4,502,450-	
	=====	

OTHER LAB & X-RAY SERVICES		102324
GENERAL REVENUE FUND	849,397-	1000
MEDICAL CARE TRUST FUND	1,203,278-	2474

COL A93		
SCH VIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
LIMIT ELIGIBILITY FOR PREGNANT		
WOMEN TO 150 PERCENT OF THE FEDERAL		
POVERTY LEVEL		33V0640
SPECIAL CATEGORIES		100000
OTHER LAB & X-RAY SERVICES		102324
TOTAL APPRO.....	2,052,675-	
	=====	
PHYSICIAN SERVICES		102541
GENERAL REVENUE FUND	3,168,280-	1000
MEDICAL CARE TRUST FUND	4,488,268-	2474

TOTAL APPRO.....	7,656,548-	
	=====	
PRESCRIBED MEDICINE/DRUGS		102681
GENERAL REVENUE FUND	225,716-	1000
GRANTS AND DONATIONS TF	602,466-	2339
MEDICAL CARE TRUST FUND	319,756-	2474

TOTAL APPRO.....	1,147,938-	
	=====	
TOTAL: LIMIT ELIGIBILITY FOR PREGNANT		33V0640
WOMEN TO 150 PERCENT OF THE FEDERAL		
POVERTY LEVEL		
TOTAL ISSUE.....	35,449,128-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 16

IT COMPONENT? NO

ISSUE TITLE: Limit the Pregnant Women Eligibility to 150 Percent of Federal Poverty Level

ISSUE SUMMARY: This issue proposes to reduce the eligibility for pregnant women to 150 percent of the Federal Poverty Level (FPL). This limitation in eligibility would have a budgetary impact of \$35,449,128, which includes the proportionate federal share. This issue would be effective January 1, 2014.

ISSUE DETAIL: This issue proposes that coverage for those beneficiaries in the pregnant women greater than 100% FPL

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN	68000000
PGM: HEALTH CARE SERVICES	68500000
MEDICAID SERV/INDIVIDUALS	68501400
HEALTH AND HUMAN SERVICES	13
HEALTH SVCS/INDIVIDUALS	<u>1301.00.00.00</u>
PROGRAM REDUCTIONS	33V0000
LIMIT ELIGIBILITY FOR PREGNANT WOMEN TO 150 PERCENT OF THE FEDERAL POVERTY LEVEL	33V0640

eligibility category currently above 150% of the FPL be eliminated since they will become a part of the insurance clearinghouse, known as a health exchange, effective January 1, 2014. As part of the health exchange, the eliminated beneficiaries will be able to purchase their own insurance and not be enrolled in Medicaid. There will be an estimated 7,389 beneficiaries who would utilize this service and whose eligibility would be eliminated.

The top 94.18% of the projected reduction in expenditures for FY 2013-14 under the pregnant women eligibility for current eligibles are as follows:

Hospital Inpatient	- \$18,026,714	- 50.85%
Physician Services	- \$ 7,656,548	- 21.60%
Hospital Outpatient	- \$ 4,502,450	- 12.70%
Other Lab and X-Ray	- \$ 2,052,675	- 5.79%
Prescribed Medicine	- \$ 1,147,938	- 3.24%
Other	- \$ 2,062,803	- 5.82%

The "Other" portion of this funding has been included in Hospital Inpatient for ease of presentation below.

Legislative Authority is needed to achieve reduction.

FY 13-14	Recurring
Hospital Inpatient Service (101582)	
General Revenue (1000-2)	(\$8,313,042)
Medical Care Trust Fund (2474-3)	(\$11,776,475)
Total	(\$20,089,517)
Physician Service (102541)	
General Revenue (1000-2)	(\$3,168,280)
Medical Care Trust Fund (2474-3)	(\$4,488,268)
Total	(\$7,656,548)
Hospital Outpatient Service (101596)	
General Revenue (1000-2)	(\$1,863,114)
Medical Care Trust Fund (2474-3)	(\$2,639,336)
Total	(\$4,502,450)
Other Lab and X-Ray (102324)	
General Revenue (1000-2)	(\$849,397)

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 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
LIMIT ELIGIBILITY FOR PREGNANT WOMEN TO 150 PERCENT OF THE FEDERAL POVERTY LEVEL		33V0640

Medical Care Trust Fund (2474-3)	(\$1,203,278)
Total	(\$2,052,675)

Prescribed Medicine (102683)	
General Revenue (1000-2)	(\$225,716)
Grants & Donations Trust Fund (2339-2)	(\$602,466)
Medical Care Trust Fund (2474-3)	(\$319,756)
Total	(\$1,147,938)

Issue Total	
General Revenue (1000-2)	(\$14,419,549)
Grants & Donations Trust Fund (2339-2)	(\$602,466)
Medical Care Trust Fund (2474-3)	(\$20,427,113)
Total	(\$35,449,128)

ELIMINATION OF THE CHIROPRACTIC PROGRAM		33V4015
SPECIAL CATEGORIES		100000
PHYSICIAN SERVICES		102541

GENERAL REVENUE FUND	312,814-	1000
MEDICAL CARE TRUST FUND	443,141-	2474
REFUGEE ASSISTANCE TF	2,216-	2579

TOTAL APPRO.....	758,171-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO

ISSUE TITLE: Elimination of the Chiropractic Program

ISSUE SUMMARY: This issue proposes the elimination of chiropractic services as a covered Medicaid benefit. The elimination of chiropractic services would result in a budgetary reduction of \$758,171, which includes the proportionate

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
<u>MEDICAID SERV/INDIVIDUALS</u>		68501400
HEALTH AND HUMAN SERVICES		13
<u>HEALTH SVCS/INDIVIDUALS</u>		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ELIMINATION OF THE CHIROPRACTIC PROGRAM		33V4015

federal share.

ISSUE DETAIL: Chiropractors treat neuromusculoskeletal disorders and related clinical conditions including back pain, neck pain, and headaches. Under Medicaid, chiropractic services are not a mandatory benefit, but rather an optional service. It is within each state's discretion whether to include chiropractic services as a covered Medicaid benefit. Currently 30 state Medicaid programs cover chiropractic services. Chiropractic care does not take the place of medically necessary physician services such as orthopedic, neurological, and pain management services utilized by beneficiaries with chronic conditions such as headache, neck and back pain.

For Fiscal Year 2013-2014, there will be an estimated 8,779 adult beneficiaries who would utilize this optional service and that would be impacted by this elimination of chiropractic services. This would require amendment of the Florida Medicaid State Plan and legislative approval including a revision to Florida Statutes. Additionally, this would require a change to Florida Administrative Code for deletion of the Chiropractic Services Coverage and Limitations Handbook rule. This change in policy would be effective October 1, 2013.

Legislative authority is needed to achieve this reduction.

BUDGET SUMMARY:

FY 13-14	Recurring
Physician Services (102541)	
General Revenue (1000-2)	(\$312,814)
Medical Care Trust Fund (2474-3)	(\$443,141)
Refugee Assistance Trust Fund (2579-3)	(\$2,216)
Total	(\$758,171)
Issue Total	(\$758,171)

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		1301.00.00.00
PROGRAM REDUCTIONS		33V0000
REDUCE CLINIC SERVICES		
REIMBURSEMENT RATES		33V4290
SPECIAL CATEGORIES		100000
PREPAID HEALTH PLANS		102673
GENERAL REVENUE FUND	2,052,978-	1000
MEDICAL CARE TRUST FUND	2,908,561-	2474
REFUGEE ASSISTANCE TF	21,758-	2579
TOTAL APPRO.....	4,983,297-	
CLINIC SERVICES		103742
GENERAL REVENUE FUND	4,576,987-	1000
MEDICAL CARE TRUST FUND	6,483,879-	2474
REFUGEE ASSISTANCE TF	63,131-	2579
TOTAL APPRO.....	11,123,997-	
TOTAL: REDUCE CLINIC SERVICES		33V4290
REIMBURSEMENT RATES		
TOTAL ISSUE.....	16,107,294-	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 14

IT COMPONENT? NO

ISSUE TITLE: Reduce Clinic Services Reimbursement Rates

ISSUE SUMMARY: This issue proposes a reduction to the reimbursement rates for county health department services by 8.8 percent. This rate reduction for clinic services would result in a budgetary reduction of \$16,107,294, which includes the proportionate federal share.

ISSUE DETAIL: The Agency for Health Care Administration is recommending that a price level reduction adjustment of 8.8 percent be made to reduce the county health departments' reimbursement rates.

The following details reflect the calculations used as the basis for developing this issue:

CLINIC SERVICES	8.8%	Reduction	13-14 Reduction
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 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

CODES
 68000000
 68500000
 68501400
 13
 1301.00.00.00
 33V0000
 33V4290

AGENCY/HEALTH CARE ADMIN
 PGM: HEALTH CARE SERVICES
 MEDICAID SERV/INDIVIDUALS
 HEALTH AND HUMAN SERVICES
 HEALTH SVCS/INDIVIDUALS
 PROGRAM REDUCTIONS
 REDUCE CLINIC SERVICES
 REIMBURSEMENT RATES

Medicaid Caseload	1,403,435	1,403,435		
Medicaid Utilization Rate	4.76%	4.76%		
Medicaid Services Per Month	66,870	66,870		
Medicaid Unit Cost	\$157.53	\$143.67	(\$13.86)	
Medicaid Total Cost	\$126,409,052	\$115,285,055	(\$11,123,997)	(\$11,123,997)

PREPAID HEALTH PLAN				
Caseload	1,363,120	1,363,120		
Unit Cost	\$227.48	\$227.12	(\$.366)	
Total Cost	\$3,721,052,257	\$3,715,072,301	(\$5,979,956)	(\$4,983,297)

Legislative authority is needed to achieve reduction.

BUDGET SUMMARY:

FY 13-14	Recurring
Clinic Service (103742)	
General Revenue (1000-2)	(\$4,576,987)
Medical Care Trust Fund (2474-3)	(\$6,483,879)
Refugee Assistance Trust Fund (2579-3)	(\$63,131)
Total	(\$11,123,997)
Prepaid Health Plans (102673)	
General Revenue (1000-2)	(\$2,052,978)
Medical Care Trust Fund (2474-3)	(\$2,908,561)
Refugee Assistance Trust Fund (2579-3)	(\$21,758)
Total	(\$4,983,297)
Issue Total	
General Revenue (1000-2)	(\$6,629,965)
Medical Care Trust Fund (2474-3)	(\$9,392,440)
Refugee Assistance Trust Fund (2579-3)	(\$84,889)
Total	(\$16,107,294)

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ELIMINATE PODIATRIST PROGRAM		33V4540
SPECIAL CATEGORIES		100000
PHYSICIAN SERVICES		102541
GENERAL REVENUE FUND	1,111,153-	1000
MEDICAL CARE TRUST FUND	1,574,090-	2474
REFUGEE ASSISTANCE TF	7,870-	2579
TOTAL APPRO.....	<u>2,693,113-</u>	
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE:

IT COMPONENT? NO

10

ISSUE TITLE: Elimination of the Podiatrist Program

ISSUE SUMMARY: This issue proposes the elimination of podiatrist services as a covered Medicaid benefit for adults. The elimination of podiatrist services would result in a budgetary reduction of \$2,693,113, which includes the proportionate federal share.

ISSUE DETAIL: Podiatrists treat corns, calluses, ingrown toenails, bunions, heel spurs and arch problems in addition to ankle and foot injuries, deformities, infections, and foot complaints associated with diabetes and other diseases. They perform surgery and prescribe medications along with physical therapy to treat these problems. Under Medicaid, podiatrist services are not a mandatory benefit, but are an optional service. It is within each state's discretion whether to include podiatrist services as a covered Medicaid benefit. Currently 30 state Medicaid programs cover podiatrist services.

For Fiscal Year 2013-2014, there will be an estimated 25,584 adult beneficiaries who would utilize this optional service and that would be impacted by the elimination of the podiatrist program. This change in policy would require an amendment of the Florida Medicaid State Plan and legislative approval including a revision to Florida Statutes. Additionally, this would require a change to Florida Administrative Code for deletion of the Podiatrist Services Coverage and Limitations Handbook rule. This change in policy would be effective October 1, 2013.

Legislative authority is needed to achieve this reduction.

BUDGET SUMMARY:

FY 13-14

Recurring

Physician Services (102541)

COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ELIMINATE PODIATRIST PROGRAM		33V4540

General Revenue (1000-2)	(\$1,111,153)
Medical Care Trust Fund (2474-3)	(\$1,574,090)
Refugee Assistance Trust Fund (2579-3)	(\$7,870)
Total	(\$2,693,113)

Issue Total (\$2,693,113)

NURSING HOME RATE REDUCTION		33V7010
SPECIAL CATEGORIES		100000
HOSPICE SERVICES		101575

GENERAL REVENUE FUND	8,820,465-	1000
MEDICAL CARE TRUST FUND	12,495,303-	2474

TOTAL APPRO.....	21,315,768-	
	=====	

NURSING HOME CARE		102233
-------------------	--	--------

GENERAL REVENUE FUND	104,670,611-	1000
MEDICAL CARE TRUST FUND	148,279,149-	2474

TOTAL APPRO.....	252,949,760-	
	=====	

TOTAL: NURSING HOME RATE REDUCTION		33V7010
TOTAL ISSUE.....	274,265,528-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 12

IT COMPONENT? NO

ISSUE TITLE: Nursing Home Rate Reduction

ISSUE SUMMARY: This issue proposes a reduction to the reimbursement rates for nursing home services by 8.8 percent. This rate reduction for nursing home services would result in a budgetary reduction of \$274,265,528, which includes the proportionate federal share.

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN	68000000
PGM: HEALTH CARE SERVICES	68500000
MEDICAID SERV/INDIVIDUALS	68501400
HEALTH AND HUMAN SERVICES	13
HEALTH SVCS/INDIVIDUALS	<u>1301.00.00.00</u>
PROGRAM REDUCTIONS	33V0000
NURSING HOME RATE REDUCTION	33V7010

ISSUE DETAIL: The Agency for Health Care Administration is recommending that a price level reduction adjustment of 8.8 percent be made to reduce the Nursing Home rates.

The following details reflect the calculations used as the basis for developing this issue:

		8.8%	Reduction	13-14 Reduction
NURSING HOME SERVICES				
Skilled Caseload	10,683	10,683		
Skilled Care Unit Cost	\$5,618.92	\$5,124.45	(\$494.47)	
Skilled Care Total Cost	\$720,322,836	\$656,933,992	(\$63,388,844)	(\$63,388,844)
Crossover Caseload				
Crossover Caseload	216	216		
Crossover Unit Cost	\$1,867.68	\$1,867.68	\$0.00	
Crossover Total Cost	\$4,841,027	\$4,841,027	\$0	\$0
Intermediate Care Caseload				
Intermediate Care Caseload	31,543	31,543		
Intermediate Care Unit Cost	\$5,622.50	\$5,127.72	(\$494.78)	
Intermediate Care Total Cost	\$2,128,207,656	\$1,940,924,064	(\$187,283,592)	(\$187,283,592)
General Care Caseload				
General Care Caseload	394	394		
General Care Unit Cost	\$5,473.47	\$4,991.80	(\$481.67)	
General Care Total Cost	\$25,878,554	\$23,601,230	(\$2,277,324)	(\$2,277,324)
Special Payments Nursing Homes	\$11,002,179	\$11,002,179	\$0	\$0
HOSPICE SERVICES				
Caseload	10,907	10,907		
Unit Cost	\$2,606.60	\$2,443.74	(\$162.86)	
Total Cost	\$341,162,076	\$319,846,308	(\$21,315,768)	(\$21,315,768)

Legislative authority is needed to achieve reduction.

BUDGET SUMMARY:

FY 13-14	Recurring
Nursing Home Service (102233)	
General Revenue (1000-2)	(\$104,670,611)
Medical Care Trust Fund (2474-3)	(\$148,279,149)
Total	(\$252,949,760)

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
NURSING HOME RATE REDUCTION		33V7010

Hospice Services (101575)		
General Revenue (1000-2)		(\$8,820,465)
Medical Care Trust Fund (2474-3)		(\$12,495,303)
Total		(\$21,315,768)

Issue Total		
General Revenue (1000-2)		(\$113,491,076)
Medical Care Trust Fund (2474-3)		(\$160,774,452)
Total		(\$274,265,528)

HOSPITAL OUTPATIENT RATE REDUCTION		33V7020
SPECIAL CATEGORIES		100000
HOSPITAL OUTPATIENT SVCS		101596

GENERAL REVENUE FUND	21,188,685-	1000
GRANTS AND DONATIONS TF	14,347,352-	2339
MEDICAL CARE TRUST FUND	50,386,875-	2474
REFUGEE ASSISTANCE TF	146,123-	2579

TOTAL APPRO.....	86,069,035-	
	=====	

PREPAID HEALTH PLANS		102673
GENERAL REVENUE FUND	13,754,573-	1000
MEDICAL CARE TRUST FUND	19,485,093-	2474
REFUGEE ASSISTANCE TF	145,770-	2579

TOTAL APPRO.....	33,385,436-	
	=====	

TOTAL: HOSPITAL OUTPATIENT RATE REDUCTION		33V7020
TOTAL ISSUE.....	119,454,471-	
	=====	

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT CODES

AGENCY/HEALTH CARE ADMIN 68000000
 PGM: HEALTH CARE SERVICES 68500000
 MEDICAID SERV/INDIVIDUALS 68501400
 HEALTH AND HUMAN SERVICES 13
 HEALTH SVCS/INDIVIDUALS 1301.00.00.00
 PROGRAM REDUCTIONS 33V0000
 HOSPITAL OUTPATIENT RATE REDUCTION 33V7020

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO
 11

ISSUE TITLE: Hospital Outpatient Rate Reduction

ISSUE SUMMARY: This issue proposes to reduce the reimbursement rates for hospital outpatient services by 8.8 percent. This rate reduction for hospital outpatient services would result in a budgetary reduction of \$119,454,471, which includes the proportionate federal share.

ISSUE DETAIL: The Agency for Health Care Administration is recommending that a price level reduction adjustment of 8.8 percent be made to reduce the Hospital Outpatient Services.

The following details reflect the calculations used as the basis for developing this issue:

		8.8%	Reduction	13-14 Reduction
HOSPITAL OUTPATIENT SERVICES				
Medicaid Caseload	1,403,435	1,403,435		
Medicaid Utilization Rate	77.68%	77.68%		
Medicaid Services Per Month	1,090,168	1,090,168		
Medicaid Unit Cost	\$74.76	\$68.18	(\$7)	
Medicaid Total Cost	\$978,057,216	\$891,988,181	(\$86,069,035)	(\$86,069,035)
PREPAID HEALTH PLAN				
Caseload	1,363,120	1,363,120		
Unit Cost	\$227.48	\$225.03	(\$2.45)	
Total Cost	\$3,721,052,257	\$3,680,989,734	(\$40,062,523)	(\$33,385,436)

Legislative authority is needed to achieve reduction.

BUDGET SUMMARY:

FY 13-14	Recurring
Hospital Outpatient Service (101596)	
General Revenue (1000-2)	(\$21,188,685)
Grants & Donations Trust Fund (2339-2)	(\$14,347,352)
Medical Care Trust Fund (2474-3)	(\$50,386,875)
Refugee Assistance Trust Fund (2579-3)	(\$146,123)
Total	(\$86,069,035)

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
HOSPITAL OUTPATIENT RATE REDUCTION		33V7020

Prepaid Health Plans (102673)	
General Revenue (1000-2)	(\$13,754,573)
Medical Care Trust Fund (2474-3)	(\$19,485,093)
Refugee Assistance Trust Fund (2579-3)	(\$145,770)
Total	(\$33,385,436)

Issue Total	
General Revenue (1000-2)	(\$34,943,258)
Grants & Donations Trust Fund (2339-2)	(\$14,347,352)
Medical Care Trust Fund (2474-3)	(\$69,871,968)
Refugee Assistance Trust Fund (2579-3)	(\$291,893)
Total	(\$119,454,471)

INTERMEDIATE CARE FACILITY FOR
 THE DEVELOPMENTALLY DISABLED
 (ICF-DD) RATE REDUCTION
 SPECIAL CATEGORIES
 ICF/DD COMMUNITY

33V7050
 100000
 101649

GENERAL REVENUE FUND	7,044,371-
MEDICAL CARE TRUST FUND	9,979,242-

1000
 2474

TOTAL APPRO..... 17,023,613-

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 13

IT COMPONENT? NO

ISSUE TITLE: Intermediate Care Facility for the Developmentally Disabled (ICF-DD) Rate Reduction

ISSUE SUMMARY: This issue proposes a reduction to the reimbursement rates for ICF/DD services by 8.8 percent. This rate reduction for ICF/DD services would result in a budgetary reduction of \$17,023,613, which includes the proportionate federal share.

This issue would be effective October 1, 2013.

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID SERV/INDIVIDUALS		68501400
HEALTH AND HUMAN SERVICES		13
HEALTH SVCS/INDIVIDUALS		<u>1301.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
INTERMEDIATE CARE FACILITY FOR THE DEVELOPMENTALLY DISABLED (ICF-DD) RATE REDUCTION		33V7050

ISSUE DETAIL: Medicaid reimburses for services rendered by state owned and operated intermediate care facilities for the developmentally disabled (ICF/DD). Medicaid reimbursement for ICF/DD services includes the following: Basic wardrobe, dental care, food and food supplements, medical supplies, durable medical equipment, eyeglasses, hearing aids, nursing services, rehabilitative care, room and board, training and help with daily living skills, therapy, and transportation.

The Agency for Health Care Administration is recommending that a price level reduction adjustment of 8.8 percent be made to reduce the ICF/DD rates.

The following details reflect the calculations used as the basis for developing this issue:

ICF-DD COMMUNITY		8.8%	Reduction	13-14 Reduction
Caseload Private	1,178	1,178		
Unit Cost	\$9,379.14	\$8,553.78	(\$825.36)	
Total Cost	\$132,583,522	\$120,916,234	(\$11,667,288)	(\$8,750,466)
Caseload Cluster	624	624		
Unit Cost	\$13,583.94	\$12,388.55	(\$1,195.39)	
Total Cost	\$101,716,519	\$92,765,462	(\$8,951,057)	(\$6,713,292)
Caseload Six bed	226	226		
Unit Cost	\$8,714.61	\$7,947.72	(\$666.89)	
Total Cost	\$23,634,023	\$21,554,217	(\$2,079,806)	(\$1,559,855)

Legislative authority is needed to achieve reduction.

BUDGET SUMMARY:

FY 13-14	Recurring
Special Category:	
ICF/DD Community (101649)	
General Revenue (1000-2)	(\$7,044,371)
Medical Care Trust Fund (2474-3)	(\$9,979,242)
Issue Total	(\$17,023,613)

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SCH VIIIB-2
REDUCTIONS
POS AMOUNT

AGENCY/HEALTH CARE ADMIN
PGM: HEALTH CARE SERVICES
MEDICAID SERV/INDIVIDUALS
HEALTH AND HUMAN SERVICES
HEALTH SVCS/INDIVIDUALS

68000000
68500000
68501400
13
1301.00.00.00

TOTAL: HEALTH SVCS/INDIVIDUALS
BY FUND TYPE

1301.00.00.00

GENERAL REVENUE FUND 224,113,558-
TRUST FUNDS 363,105,513-

1000
2000

TOTAL PROG COMP..... 587,219,071-
=====

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HEALTH CARE SERVICES		68500000
MEDICAID LONG TERM CARE		68501500
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		1303.00.00.00
PROGRAM REDUCTIONS		33V0000
COMPANION TO ISSUES PROPOSED BY OTHER HEALTH AND HUMAN SERVICES AGENCIES		33V0530
SPECIAL CATEGORIES		100000
HOME & COMMUNITY BASED SVC		101554
MEDICAL CARE TRUST FUND.....	161,591,283-	2474
	=====	
ALF WAIVER		101557
MEDICAL CARE TRUST FUND.....	37,257,303-	2474
	=====	
NURSNG HOME DIVRSN WAIVER		109970
MEDICAL CARE TRUST FUND.....	359,036,110-	2474
	=====	
TOTAL: COMPANION TO ISSUES PROPOSED BY OTHER HEALTH AND HUMAN SERVICES AGENCIES		33V0530
TOTAL ISSUE.....	557,884,696-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:
 2

IT COMPONENT? NO

ISSUE TITLE: Companion to Issues Proposed by Other Health and Human Services Agencies

ISSUE SUMMARY: This issue is a companion issue to issues proposed by other state health and human services agencies that impact Medicaid Services.

ISSUE DETAIL: This issue proposes to reduce double budget authority in the Medical Care Trust Fund in the Medicaid Long Term Care (LTC) budget entity to reflect the actions recommended by the Department of Elder Affairs (DOEA) and the Department of Children and Families (DCF) in the home and community based services waiver (HCBSW) categories. This reduction in the amount of \$557,884,696 will keep the double budget authority in the HCBSW categories in balance with the federal financial participation rate.

DOEA (via Issue 1700010) and DCF (via Issue 1700110) request the transfer of funding appropriated for its long term care waivers to the Agency for Health Care Administration (AHCA) to implement the LTC component of the Statewide Medicaid

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN	68000000
PGM: HEALTH CARE SERVICES	68500000
<u>MEDICAID LONG TERM CARE</u>	68501500
HEALTH AND HUMAN SERVICES	13
<u>LONG-TERM CARE</u>	<u>1303.00.00.00</u>
PROGRAM REDUCTIONS	33V0000
COMPANION TO ISSUES PROPOSED BY	
OTHER HEALTH AND HUMAN SERVICES	
AGENCIES	33V0530

Managed Care (SMMC) program, effective July 1, 2013. Upon full implementation of the SMMC program, the Aged and Disabled waiver, the Channeling waiver, the Assisted Living Facility waiver, and the Capitated Nursing Home Diversion waiver will cease to exist. The LTC program is projected to begin enrollment on August 1, 2013. DOEA and DCF request that its General Revenue and trust fund authority for the impacted waiver categories be transferred to AHCA to pay the claims for client services through the fiscal agent.

BUDGET SUMMARY: Transfer amounts from DOEA and DCF reflect the entire base budget appropriation for the impacted long-term care waivers.

FY 13-14	Recurring
Home and Community Based Services Waiver (101554)	
Medical Care Trust Fund (2474-2)	(\$68,161,867)
Medical Care Trust Fund (2474-3)	(\$93,429,416)
Total	(\$161,591,283)
Assisted Living Facility Waiver (101557)	
Medical Care Trust Fund (2474-2)	(\$15,748,662)
Medical Care Trust Fund (2474-3)	(\$21,508,641)
Total	(\$37,257,303)
Capitated Nursing Home Diversion Waiver (109970)	
Medical Care Trust Fund (2474-2)	(\$151,764,563)
Medical Care Trust Fund (2474-3)	(\$207,271,547)
Total	(\$359,036,110)
Issue Total	
Medical Care Trust Fund (2474-2)	(\$235,675,092)
Medical Care Trust Fund (2474-3)	(\$322,209,604)
Total	(\$557,884,696)

TOTAL: LONG-TERM CARE		<u>1303.00.00.00</u>
BY FUND TYPE		
TRUST FUNDS.....	557,884,696-	2000
	=====	

COL A93		
SCH VIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HLTH CARE REGULATION		68700000
HEALTH CARE REGULATION		68700700
PUBLIC PROTECTION		12
FACILITY REGULATION		<u>1204.01.00.00</u>
PROGRAM REDUCTIONS		33V0000
ADMINISTRATIVE REDUCTION IN OTHER		
PERSONAL SERVICES CATEGORY		33V0510
OTHER PERSONAL SERVICES		030000
HEALTH CARE TRUST FUND.....	35,000-	2003
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 13-14 NARRATIVE: IT COMPONENT? NO
 3

ISSUE TITLE: Administrative Reduction in Other Personal Services Category

ISSUE SUMMARY: This issue proposes to reduce \$1,211,650 in trust fund authority from the Other Personal Services (OPS) category.

ISSUE DETAIL: This proposed reduction of \$1,211,650 would result in a cutback in OPS staffing. This issue proposes to reduce funding the Executive Direction/Support Services budget entity (\$1,176,650 include proportionate federal share) and Health Care Regulation budget entity (\$35,000).

BUDGET SUMMARY:

FY 13-14	Recurring
Other Personnel Services (030000)	
Health Care Trust Fund (2003-2)	(\$ 35,000)
Medical Care Trust Fund (2474-2)	(\$ 328,234)
Medical Care Trust Fund (2474-3)	(\$ 848,416)
Total	(\$1,211,650)
Issue Total	(\$1,211,650)

COL A93		
SCH VIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES

AGENCY/HEALTH CARE ADMIN		68000000
PGM: HLTH CARE REGULATION		68700000
HEALTH CARE REGULATION		68700700
PUBLIC PROTECTION		12
MANAGED CARE		<u>1205.02.00.00</u>
PROGRAM REDUCTIONS		33V0000
ELIMINATION OF THE SUBSCRIBER		
ASSISTANCE PANEL		33V0520
SALARY RATE		000000
SALARY RATE.....	82,212-	
	=====	
SALARIES AND BENEFITS		010000
HEALTH CARE TRUST FUND.....	2.00- 115,515-	2003
	=====	
OTHER PERSONAL SERVICES		030000
HEALTH CARE TRUST FUND.....	63,568-	2003
	=====	
EXPENSES		040000
HEALTH CARE TRUST FUND.....	12,194-	2003
	=====	
SPECIAL CATEGORIES		100000
CONTRACTED SERVICES		100777
HEALTH CARE TRUST FUND.....	330-	2003
	=====	
TR/DMS/HR SVCS/STW CONTRCT		107040
HEALTH CARE TRUST FUND.....	712-	2003
	=====	
TOTAL: ELIMINATION OF THE SUBSCRIBER		33V0520
ASSISTANCE PANEL		
TOTAL POSITIONS.....	2.00-	
TOTAL ISSUE.....	192,319-	
TOTAL SALARY RATE.....	82,212-	
	=====	

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 13-14 NARRATIVE:

IT COMPONENT? NO

COL A93
 SCH VIIIB-2
 REDUCTIONS

POS	AMOUNT	CODES
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HLTH CARE REGULATION		68700000
HEALTH CARE REGULATION		68700700
<u>PUBLIC PROTECTION</u>		12
<u>MANAGED CARE</u>		<u>1205.02.00.00</u>
PROGRAM REDUCTIONS		33V0000
ELIMINATION OF THE SUBSCRIBER ASSISTANCE PANEL		33V0520

ISSUE TITLE: Elimination of the Subscriber Assistance Panel

ISSUE SUMMARY: This issue proposes the elimination of the Subscriber Assistance Panel (SAP) authorized by section 408.7056, Florida Statutes, and \$192,319 in budget fund authority.

ISSUE DETAIL: The proposed reduction of \$192,319 would result in the elimination of the SAP, which is a panel that helps health maintenance organization subscribers resolve grievances against providers. The elimination of the panel would not impact AHCA's regulatory efforts. The issue proposes to reduce two full-time equivalent (FTE) positions, salary rate and funding in the Salaries and Benefits, Other Personal Services, Expenses, and Contracted Services categories. The two FTE positions and temporary staffing are utilized to provide administrative support to the panel.

Legislative action is required to implement this reduction.

BUDGET SUMMARY:

	FTE	Pos. #	PG	Salary Rate	Annual Salaries	Expenses	Contracted Services	HR Services	FY 2013-14 Total
Med/Hlth Care Program Analyst	(1)	64317	24	(\$41,106)	(\$57,758)	(\$6,097)	(\$165)	(\$356)	(\$64,358)
Med/Hlth Care Program Analyst	(1)	64447	24	(\$41,106)	(\$57,757)	(\$6,097)	(\$165)	(\$356)	(\$64,357)
Total				(\$82,212)	(\$115,515)	(\$12,194)	(\$330)	(\$712)	(\$128,751)

BUDGET SUMMARY:

FY 13-14	Recurring
Salaries and Benefits (010000)	
Health Care Trust Fund (2003-1)	(\$115,515)
Other Personnel Services (030000)	
Health Care Trust Fund (2003-1)	(\$63,568)
Expenses (040000)	
Health Care Trust Fund (2003-1)	(\$12,194)
Contracted Services (100777)	

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

AGENCY/HEALTH CARE ADMIN	68000000
PGM: HLTH CARE REGULATION	68700000
HEALTH CARE REGULATION	68700700
PUBLIC PROTECTION	12
MANAGED CARE	1205.02.00.00
PROGRAM REDUCTIONS	33V0000
ELIMINATION OF THE SUBSCRIBER ASSISTANCE PANEL	33V0520

Health Care Trust Fund (2003-1) (\$330)

TR/DMS/HR Services/STW Contract (107040)
 Health Care Trust Fund (2003-1) (\$712)

Issue Total
 Health Care Trust Fund (2003-1) (\$192,319)

POSITION DETAIL OF SALARIES AND BENEFITS:

	FTE	BASE RATE	ADDITIVES	BENEFITS	SUBTOTAL	LAPSE %	LAPSED SALARIES AND BENEFITS
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A93 - SCH VIIIB-2 REDUCTIONS							
CHANGES TO CURRENTLY AUTHORIZED POSITIONS							
5875 MEDICAL/HEALTH CARE PROGRAM ANALYST							
64317 001	1.00-	41,106-		15,450-	56,556-	0.00	56,556-
64447 001	1.00-	41,106-		15,450-	56,556-	0.00	56,556-

TOTALS FOR ISSUE BY FUND							
2003 HEALTH CARE TRUST FUND							113,112-
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	2.00-	82,212-		30,900-	113,112-		113,112-
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OTHER SALARY AMOUNT							
2003 HEALTH CARE TRUST FUND							2,403-

							115,515-
							=====

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
AGENCY/HEALTH CARE ADMIN		68000000
PGM: HLTH CARE REGULATION		68700000
<u>HEALTH CARE REGULATION</u>		68700700
PUBLIC PROTECTION		12
<u> MANAGED CARE</u>		<u>1205.02.00.00</u>
TOTAL: MANAGED CARE		<u>1205.02.00.00</u>
BY FUND TYPE		
2.00-		
TRUST FUNDS.....	192,319-	2000
SALARY RATE.....	82,212-	
	=====	
TOTAL: HEALTH CARE REGULATION		68700700
BY FUND TYPE		
2.00-		
TRUST FUNDS.....	227,319-	2000
SALARY RATE.....	82,212-	
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