

Florida Voices for Health – 2020 Legislative Priorities

Consumer Protections

Pre-existing Conditions Protections

During the 2019 session, the Florida Legislature passed SB 322 requiring insurers to offer at least one comprehensive major medical policy to people with preexisting medical conditions in the event the Affordable Care Act (ACA) is repealed. However, the new law does not prohibit insurers from charging higher premium rates based on health status or other factors. Without this protection, pre-ACA history shows that plans offered to people with pre-existing conditions will be substantially more costly. Policies will be out of reach of most people with pre-existing conditions and they will be at serious risk of losing coverage. Florida law needs to be changed to prohibit discriminatory premium rates based on health status and limit plans to varying rates for only certain factors.

Strengthening Medicaid

Medicaid Expansion

Medicaid is only available to parents who earn no more than 32% of the Federal poverty level (approx. \$7,000 per year). Also, most single low-income adults (even those with no income) cannot qualify. If Florida adopted Medicaid expansion, over 400,000 Floridians would gain health coverage while saving the state millions annually. SJR 224 (Medicaid Expansion) the joint resolution filed by Senator Annette Taddeo would allow Floridians to vote on whether to expand Medicaid eligibility to those under 65 with income equal to or below 138% of Federal Poverty Guidelines.

Medicaid School Based Services

In 2014, CMS clarified that schools can bill Medicaid for services provided in schools to ALL children with Medicaid coverage. Florida's current state law still follows the old federal policy of only reimbursing schools for care given to children with special needs. Florida has already changed the state's Medicaid plan to allow reimbursement for all students, but state law needs to change to align with the federal Medicaid policy. In 2019, the Florida legislature failed to pass a bill to match our state law to federal law, but it has been reintroduced for the 2020 legislative session (SB 190).

Retroactive Eligibility

During the 2018 session, Florida lawmakers voted to cut the Retroactive Medicaid Eligibility (RME) period for non-pregnant adults over 21. Seniors, people with disabilities, and parents taking care of minor children are now only eligible for up to 30 days of retroactive coverage once they qualify for Medicaid. The enrollee would only have coverage going back to the first day of the month that the person applies. If an eligible parent or senior files on March 28th, Medicaid would only pay for coverage going back to March 1st. If an application is filed on March 4th, Medicaid will still only cover expenses up to March 1st. This is less than the 90 days still reserved for pregnant women and children. Florida needs to restore 90-days of Retroactive Medicaid Eligibility for seniors and Floridians with disabilities.

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SIX-T Provision

Florida's SIX-T provision required the managed care plan and services delivery to remain in place for up to sixty days during the annual re-determination. This was to prevent an unnecessary loss of coverage and interruption of services in the event of a delay in the annual re-determination process. In 2018, the Agency for Health Care Administration eliminated the SIX-T provision despite ongoing challenges with the re-determination process. For everyone, and especially Florida's frail elders, whom the state has already determined need long-term care services, this loss of coverage, through no fault of their own, is devastating. Subsequently, Florida's Aging & Disability Resource Centers have seen an uptick in high risk referral from Adult Protective Services (APS). APS has identified numerous clients who should be approved and enrolled in Medicaid. Florida needs to reinstate the SIX-T provision for Statewide Medicaid Managed Care.

iBudget Waiver

We oppose any harmful cuts to the Medicaid iBudget program. The Medicaid iBudget Waiver provides home and community-based supports and services to Floridians with developmental disabilities living at home or in a home-like setting. The program is designed to help people with developmental disabilities stay healthy and to prevent institutionalization while encouraging self-determination. It serves over 34,500 Floridians and their families. AHCA and APD have recommended limited cuts to the iBudget program to Florida legislators. The final decision on whether to adopt these recommendations will be up to the Legislature in 2020, which ordered a redesign of the program.

Oral Health

Dental Therapy

We support the official recognition of dental therapists to help satisfy Florida's oral health care needs. A dental therapist is an oral health professional who works under the supervision of a licensed dentist. They already provide a variety of routine treatments under the supervision of dentists in private practices, as well as community settings such as schools and nursing homes. Dental therapists make it easier and less costly for dentists to expand their practices and capacity to provide routine and preventive care – care that helps reduce future health-related costs. Additionally, dental therapists provide care at the lower reimbursement rates offered by Medicaid, which could mean more dentists may be willing to expand their services for Medicaid enrollees.