

## CHAPTER 2020-79

### Committee Substitute for House Bill No. 81

An act relating to health care for children; amending s. 383.14, F.S.; requiring the Department of Health to create and make available electronically a pamphlet with specified information; amending s. 383.318, F.S.; requiring birth centers to provide the informational pamphlet to clients during postpartum care; amending s. 395.1053, F.S.; requiring hospitals that provide birthing services to provide the informational pamphlet to parents during postpartum education; creating s. 456.0496, F.S.; requiring certain health care practitioners to ensure that the pamphlet is provided to parents after a planned out-of-hospital birth; amending s. 409.9071, F.S.; revising applicable provisions for the reimbursement of school-based services by the Agency for Health Care Administration to certain school districts; deleting a requirement specifying the use of certified state and local education funds for school-based services; conforming a provision to changes made by the act; deleting an obsolete provision; amending s. 409.908, F.S.; specifying the federal agency that may waive certain school-based provider qualifications; amending s. 1002.391, F.S.; revising the definition for the term “auditory-oral education program”; requiring certain individual educational plan teams and individualized family support plan teams to include a specified specialist; providing an effective date.

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

Section 1. Paragraph (i) is added to subsection (3) of section 383.14, Florida Statutes, to read:

383.14 Screening for metabolic disorders, other hereditary and congenital disorders, and environmental risk factors.—

(3) DEPARTMENT OF HEALTH; POWERS AND DUTIES.—The department shall administer and provide certain services to implement the provisions of this section and shall:

(i) Create and make available electronically a pamphlet with information on screening for, and the treatment of, preventable infant and childhood eye and vision disorders, including, but not limited to, retinoblastoma and amblyopia.

All provisions of this subsection must be coordinated with the provisions and plans established under this chapter, chapter 411, and Pub. L. No. 99-457.

Section 2. Paragraph (i) is added to subsection (3) of section 383.318, Florida Statutes, to read:

383.318 Postpartum care for birth center clients and infants.—

(3) The birth center shall provide a postpartum evaluation and followup care that includes all of the following:

(i) Provision of the informational pamphlet on infant and childhood eye and vision disorders created by the department pursuant to s. 383.14(3)(i).

Section 3. Section 395.1053, Florida Statutes, is amended to read:

395.1053 Postpartum education.—A hospital that provides birthing services shall incorporate information on safe sleep practices and the possible causes of Sudden Unexpected Infant Death into the hospital's postpartum instruction on the care of newborns and provide to each parent the informational pamphlet on infant and childhood eye and vision disorders created by the department pursuant to s. 383.14(3)(i).

Section 4. Section 456.0496, Florida Statutes, is created to read:

456.0496 Provision of information to parents during planned out-of-hospital births.—A health care practitioner who attends an out-of-hospital birth must ensure that the informational pamphlet on infant and childhood eye and vision disorders created by the department pursuant to s. 383.14(3)(i) is provided to each parent after such a birth.

Section 5. Subsection (1), paragraph (b) of subsection (2), and subsection (6) of section 409.9071, Florida Statutes, are amended to read:

409.9071 Medicaid provider agreements for school districts certifying state match.—

(1) The agency shall reimburse school-based services as provided in ss. 409.908(21) and 1011.70 ~~former s. 236.0812~~ pursuant to the rehabilitative services option provided under 42 U.S.C. s. 1396d(a)(13). For purposes of this section, billing agent consulting services are ~~shall be~~ considered billing agent services, as that term is used in s. 409.913(10), and, as such, payments to such persons may ~~shall~~ not be based on amounts for which they bill nor based on the amount a provider receives from the Medicaid program. This provision may ~~shall~~ not restrict privatization of Medicaid school-based services. Subject to any limitations provided for in the General Appropriations Act, the agency, in compliance with appropriate federal authorization, shall develop policies and procedures and shall allow for certification of state and local education funds that ~~which~~ have been provided for school-based services as specified in s. 1011.70 and authorized by a physician's order where required by federal Medicaid law. ~~Any state or local funds certified pursuant to this section shall be for children with specified disabilities who are eligible for both Medicaid and part B or part H of the Individuals with Disabilities Education Act (IDEA), or the exceptional student education program, or who have an individualized educational plan.~~

(2) School districts that wish to enroll as Medicaid providers and that certify state match in order to receive federal Medicaid reimbursements for services, pursuant to subsection (1), shall agree to:

(b) Develop and maintain the financial and other student individual education plan records needed to document the appropriate use of state and federal Medicaid funds.

~~(6) Retroactive reimbursements for services as specified in former s. 236.0812 as of July 1, 1996, including reimbursement for the 1995-1996 and 1996-1997 school years, are subject to federal approval.~~

Section 6. Subsection (21) of section 409.908, Florida Statutes, is amended to read:

409.908 Reimbursement of Medicaid providers.—Subject to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by reference therein. These methodologies may include fee schedules, reimbursement methods based on cost reporting, negotiated fees, competitive bidding pursuant to s. 287.057, and other mechanisms the agency considers efficient and effective for purchasing services or goods on behalf of recipients. If a provider is reimbursed based on cost reporting and submits a cost report late and that cost report would have been used to set a lower reimbursement rate for a rate semester, then the provider's rate for that semester shall be retroactively calculated using the new cost report, and full payment at the recalculated rate shall be effected retroactively. Medicare-granted extensions for filing cost reports, if applicable, shall also apply to Medicaid cost reports. Payment for Medicaid compensable services made on behalf of Medicaid eligible persons is subject to the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. Further, 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, provided the adjustment is consistent with legislative intent.

(21) The agency shall reimburse school districts ~~that~~ which certify the state match pursuant to ss. 409.9071 and 1011.70 for the federal portion of the school district's allowable costs to deliver the services, based on the reimbursement schedule. The school district shall determine the costs for delivering services as authorized in ss. 409.9071 and 1011.70 for which the state match will be certified. Reimbursement of school-based providers is contingent on such providers being enrolled as Medicaid providers and meeting the qualifications contained in 42 C.F.R. s. 440.110, unless otherwise waived by the United States Department of Health and Human Services ~~federal Health Care Financing Administration~~. Speech therapy providers who are certified through the Department of Education pursuant to rule 6A-4.0176, Florida Administrative Code, are eligible for reimbursement for services that are provided on school premises. Any employee of the school district who has been fingerprinted and has received a criminal background check in accordance with Department of Education rules and

guidelines ~~is shall~~ be exempt from any agency requirements relating to criminal background checks.

Section 7. Paragraph (a) of subsection (1) and subsection (3) of section 1002.391, Florida Statutes, are amended to read:

1002.391 Auditory-oral education programs.—

(1) As used in this section, the term:

(a) “Auditory-oral education program” means a program that develops and relies solely on listening skills and uses an implant or assistive hearing device for the purpose of relying on speech and spoken language skills as the method of communication and uses faculty and supervisors certified as listening and spoken language specialists each day the child is in attendance.

(3) The level of services shall be determined by the individual educational plan team or individualized family support plan team, which includes the child’s parent in accordance with the rules of the State Board of Education and a certified listening and spoken language specialist from the family’s chosen program. A child is eligible for services under this section until the end of the school year in which he or she reaches the age of 7 years or after grade 2, whichever comes first.

Section 8. This act shall take effect July 1, 2020.

Approved by the Governor June 23, 2020.

Filed in Office Secretary of State June 23, 2020.