



495410

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/19/2010	.	
	.	
	.	
	.	

The Committee on Health and Human Services Appropriations
(Gaetz) recommended the following:

Senate Amendment (with title amendment)

Between lines 111 and 112
insert:

Section 2. Section 393.0662, Florida Statutes, is created
to read:

393.0662 Individual budgets for delivery of home and
community-based services; iBudget system established.—The
Legislature finds that improved financial management of the
existing home and community-based Medicaid waiver program is
necessary to avoid deficits that impede the provision of



495410

13 services to individuals who are on the waiting list for
14 enrollment in the program. The Legislature further finds that
15 clients and their families should have greater flexibility to
16 choose the services that best allow them to live in their
17 community within the limits of an established budget. Therefore,
18 the Legislature intends that the agency, in consultation with
19 the Agency for Health Care Administration, develop and implement
20 a comprehensive redesign of the service delivery system using
21 individual budgets as the basis for allocating the funds
22 appropriated for the home and community-based services Medicaid
23 waiver program among eligible enrolled clients. The service
24 delivery system that uses individual budgets shall be called the
25 iBudget system.

26 (1) The agency shall establish an individual budget,
27 referred to as an iBudget, for each individual served by the
28 home and community-based services Medicaid waiver program. The
29 funds appropriated to the agency shall be allocated through the
30 iBudget system to eligible, Medicaid-enrolled clients. The
31 iBudget system shall be designed to provide for: enhanced client
32 choice within a specified service package; appropriate
33 assessment strategies; an efficient consumer budgeting and
34 billing process that includes reconciliation and monitoring
35 components; a redefined role for support coordinators that
36 avoids potential conflicts of interest; a flexible and
37 streamlined service review process; and a methodology and
38 process that ensures the equitable allocation of available funds
39 to each client based on the client's level of need, as
40 determined by the variables in the allocation algorithm.

41 (a) In developing each client's iBudget, the agency shall



495410

42 use an allocation algorithm and methodology. The algorithm shall
43 use variables that have been determined by the agency to have a
44 statistically validated relationship to the client's level of
45 need for services provided through the home and community-based
46 services Medicaid waiver program. The algorithm and methodology
47 may consider individual characteristics, including, but not
48 limited to, a client's age and living situation, information
49 from a formal assessment instrument that the agency determines
50 is valid and reliable, and information from other assessment
51 processes.

52 (b) The allocation methodology shall provide the algorithm
53 that determines the amount of funds allocated to a client's
54 iBudget. The agency may approve an increase in the amount of
55 funds allocated, as determined by the algorithm, based on the
56 client having:

57 1. An extraordinary need that would place the health and
58 safety of the client, the client's caregiver, or the public in
59 immediate, serious jeopardy unless the increase is approved. An
60 extraordinary need may include, but is not limited to:

61 a. A documented history of significant, potentially life-
62 threatening behaviors, such as recent attempts at suicide,
63 arson, nonconsensual sexual behavior, or self-injurious behavior
64 requiring medical attention;

65 b. A complex medical condition that requires active
66 intervention by a licensed nurse on an ongoing basis that cannot
67 be taught or delegated to a nonlicensed person;

68 c. A chronic co-morbid condition. As used in this
69 subparagraph, the term "co-morbid condition" means a medical
70 condition existing simultaneously but independently with another



495410

71 medical condition in a patient; or

72 d. A need for total physical assistance with activities
73 such as eating, bathing, toileting, grooming, and personal
74 hygiene.

75
76 However, the presence of an extraordinary need alone does not
77 warrant an increase in the amount of funds allocated to a
78 client's iBudget as determined by the algorithm.

79 2. A significant need for one-time or temporary support or
80 services that, if not provided, would place the health and
81 safety of the client, the client's caregiver, or the public in
82 serious jeopardy, unless the increase, as determined by the
83 total of the algorithm and any adjustments based on
84 subparagraphs 1. and 3., is approved. A significant need may
85 include, but is not limited to, the provision of environmental
86 modifications, durable medical equipment, services to address
87 the temporary loss of support from a caregiver, or special
88 services or treatment for a serious temporary condition when the
89 service or treatment is expected to ameliorate the underlying
90 condition. As used in this subparagraph, the term "temporary"
91 means a period of fewer than 12 continuous months.

92 3. A significant increase in the need for services after
93 the beginning of the service plan year that would place the
94 health and safety of the client, the client's caregiver, or the
95 public in serious jeopardy because of substantial changes in the
96 client's circumstances, including, but not limited to, permanent
97 or long-term loss or incapacity of a caregiver, loss of services
98 authorized under the state Medicaid plan due to a change in age,
99 or a significant change in medical or functional status which



495410

100 requires the provision of additional services on a permanent or
101 long-term basis that cannot be accommodated within the client's
102 current iBudget. As used in this subparagraph, the term "long-
103 term" means a period of 12 or more continuous months.

104
105 The agency shall reserve portions of the appropriation for the
106 home and community-based services Medicaid waiver program for
107 adjustments required pursuant to this paragraph and may use the
108 services of an independent actuary in determining the amount of
109 the portions to be reserved.

110 (c) A client's iBudget shall be the total of the amount
111 determined by the algorithm and any additional funding provided
112 pursuant to paragraph (a). A client's annual expenditures for
113 home and community-based services Medicaid waiver services may
114 not exceed the limits of his or her iBudget. The total of a
115 client's projected annual iBudget expenditures may not exceed
116 the agency's appropriation for waiver services.

117 (2) The Agency for Health Care Administration, in
118 consultation with the agency, shall seek federal approval to
119 amend current waivers, request a new waiver, and amend contracts
120 as necessary to implement the iBudget system to serve eligible,
121 enrolled clients through the home and community-based services
122 Medicaid waiver program and the Consumer-Directed Care Plus
123 Program.

124 (3) The agency shall transition all eligible, enrolled
125 clients to the iBudget system. The agency may gradually phase in
126 the iBudget system.

127 (a) While the agency phases in the iBudget system, the
128 agency may continue to serve eligible, enrolled clients under



495410

129 the four-tiered waiver system established under s. 393.065 while
130 those clients await transitioning to the iBudget system.

131 (b) The agency shall design the phase-in process to ensure
132 that a client does not experience more than one-half of any
133 expected overall increase or decrease to his or her existing
134 annualized cost plan during the first year that the client is
135 provided an iBudget due solely to the transition to the iBudget
136 system.

137 (4) A client must use all available services authorized
138 under the state Medicaid plan, school-based services, private
139 insurance and other benefits, and any other resources that may
140 be available to the client before using funds from his or her
141 iBudget to pay for support and services.

142 (5) Rates for any or all services established under rules
143 of the Agency for Health Care Administration shall be designated
144 as the maximum rather than a fixed amount for individuals who
145 receive an iBudget, except for services specifically identified
146 in those rules that the agency determines are not appropriate
147 for negotiation, which may include, but are not limited to,
148 residential habilitation services.

149 (6) The agency shall ensure that clients and caregivers
150 have access to training and education to inform them about the
151 iBudget system and enhance their ability for self-direction.
152 Such training shall be offered in a variety of formats and at a
153 minimum shall address the policies and processes of the iBudget
154 system; the roles and responsibilities of consumers, caregivers,
155 waiver support coordinators, providers, and the agency;
156 information available to help the client make decisions
157 regarding the iBudget system; and examples of support and



495410

158 resources available in the community.

159 (7) The agency shall collect data to evaluate the
160 implementation and outcomes of the iBudget system.

161 (8) The agency and the Agency for Health Care
162 Administration may adopt rules specifying the allocation
163 algorithm and methodology; criteria and processes for clients to
164 access reserved funds for extraordinary needs, temporarily or
165 permanently changed needs, and one-time needs; and processes and
166 requirements for selection and review of services, development
167 of support and cost plans, and management of the iBudget system
168 as needed to administer this section.

169

170

171 ===== T I T L E A M E N D M E N T =====

172 And the title is amended as follows:

173

174 Delete line 8

175 and insert:

176

177 service to eligible clients; creating s. 393.0662,
178 F.S.; establishing the iBudget program for the
179 delivery of home and community-based services;
180 providing for amendment of current contracts to
181 implement the iBudget system; providing for the
182 phasing in of the program; requiring clients to use
183 certain resources before using funds from their
184 iBudget; requiring the agency to provide training for
185 clients and evaluate and adopt rules with respect to
186 the iBudget system; providing an effective