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The Health and Human Services policy area includes

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- Health
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Health and Human Services Summary of 2011 Reports

Agency for Health Care Administration

Agency for Health Care Administration Continues Efforts to Control Medicaid Fraud and Abuse, Report No. [11-22](#), December 2011. The Agency for Health Care Administration continues to coordinate efforts to prevent and detect fraud and abuse in its Medicaid fee-for-service and managed care programs. It oversees fraud and abuse prevention and detection in Medicaid managed care by requiring plans to perform specific fraud and abuse activities and by monitoring to ensure that plans comply with these requirements. For fee-for-service, the agency follows a systematic process to identify and investigate providers who are suspected of overbilling.

The agency has reduced the time it takes to recover overpayments from providers and has increased the fines and penalties imposed for provider overbilling.

Profile of Florida's Medicaid Home and Community-Based Services Waivers, Report No. [11-03](#), January 2011. OPPAGA produced this profile of Florida's Medicaid Home and Community-Based Services (HCBS) waivers as a descriptive resource for

policy makers and stakeholders. The profile provides uniform information about each waiver including eligibility criteria, services provided, persons served, expenditures, and the state agency responsible for operating the waiver program.

Medicaid HCBS waivers are authorized by Section 2176 of the Omnibus Budget Reconciliation Act of 1981 and incorporated into Title XIX of the Social Security Act as Section 1915(c). States can use this authority to offer a broad array of services not otherwise available through Medicaid that are intended to prevent or delay institutional placement. Florida's HCBS waivers vary on a number of dimensions. Some waivers are limited to persons with specific disease states or physical conditions (such as persons with cystic fibrosis); others serve broader groups (such as persons who are elderly and/or have disabilities). Waivers also differ with respect to the number and types of services provided, payment method, and whether waiver services are available statewide or limited to a few counties.

In Fiscal Year 2010-11, the Legislature appropriated \$1.36 billion to state agencies to serve beneficiaries in these 14 waivers. Of this amount, the Legislature appropriated \$7.9 million for transitioning individuals from nursing home care to the community.

Department of Health

Supplemental Report: Florida Nursing Education Programs 2009-10, Report No. [11-18](#), May 2011. This is a supplement to report No. [11-06](#), Board of Nursing Addressed Statutory Changes; Nursing Program Capacity Expanded in 2009-10, which provides program-specific data for all nursing education programs in Florida for the 2008-09 and 2009-10 academic years. The data includes each program's capacity, student enrollment, number of graduates, program retention, and 2009 and 2010 examination passage rates for the National Council of State Boards of Nursing Licensure Examination (NCLEX).

Board of Nursing Addressed Statutory Changes; Nursing Program Capacity Expanded in 2009-10, Report No. [11-06](#), January 2011. To address the nursing shortage in Florida, the 2009 Legislature modified how the Board of Nursing oversees nursing education programs. Our prior report identified several issues with the board's implementation of program approval and monitoring processes required by the new law. The 2010 Legislature amended the statutes to clarify these processes. The board has implemented the revised processes and addressed other issues we identified.

The intent of the legislative changes was to increase the number of nursing programs and qualified nurses in Florida. Since the 2009 law took effect, the board has approved 64 new nursing programs. As a result, capacity and student enrollment in nursing programs has increased in the past year. However, data is not yet available to evaluate how the new law has affected student graduation and retention rates or employment outcomes.