



**Medical Care Advisory Committee Meeting Summary**

<b>01/19/2016</b>	<b>Time: 1:00 p.m. – 4:00 p.m.</b>	<b>Location: AHCA Conference Room A</b>
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**Attendees:**

	<u><b>Committee Members</b></u>		<u><b>Resources</b></u>
✓	Amy Guinan		Beth Kidder
✓	Catherine Moffitt, MD		David Rogers
✓	Surgeon General John Armstrong, MD	✓	Erica Floyd Thomas
	Ellen Anderson		Pam Hull
	Iris Wimbush	✓	Devona Pickle
✓	Jennifer Lange	✓	Eunice Medina
✓	Justin Senior	✓	Heather Allman
✓	Martha Pierce (phone)	✓	Sophia Whaley
	Michael Lockwood	✓	Tamara Zanders
✓	Richard R. Thacker, DO	✓	Carla Sims
✓	Robert Payne, DDS	✓	Jessica Turner
	Sarah Sequenzia	✓	Shevaun Harris
	Secretary Samuel Verghese	✓	LaKera Reddick
✓	Stanley Whittaker, MSN		
	Tracie Inman		

**Member Introductions**

**Justin Senior**

Justin Senior called the meeting to order and introductions were made. It was noted that there weren't enough members present for a quorum in the event any decisions needed to be made.

**New Business**

**Justin Senior**

**Governor's Budget Recommendations Update**

Justin Senior gave a brief update on the Governor's budget stating key issues. He informed committee members that in 2018 the Agency is to procure a new MMIS system. The Governor approved the request for 17 million dollars with only 10% of the total being funded by the State. Justin stated the Governor also approved an additional 26 million dollars to be used for educational purposes.

**1115 MMA Waiver Amendment**

Justin Senior referred committee members to the 1115 MMA Waiver Amendment section of the SMMC presentation in their materials packet. He informed the committee that this meeting in Tallahassee is the first public meeting on the 1115 Waiver Amendment. The second public meeting will take place January 21, 2016, in Tampa. He then encouraged anyone who had questions or wanted to make a comment to fill out a comment form.

Mr. Senior noted that the State is seeking federal authority to amend Florida's 1115 MMA Managed Medical Assistance (MMA) Waiver to make the following changes:

- Amend the language related to the Hemophilia program to allow for up to three vendors in order to provide the State the flexibility to contract with 1-3 vendors.



- Amend the waiver to include payment in MMA capitation rates for nursing facility services for recipients under the age of 18 years.
- Amend the waiver to all allow flexibility for Specialty plans that do not have sufficient numbers of eligible members for the mandatory Performance Improvement Projects (PIP) to conduct PIPs on other topics that have more impact on their members, with Agency approval.

After thoroughly reviewing each proposed amendment, Mr. Senior opened the floor for any questions.

The following questions were posed:

- Chris Snow, with the Alliance of Florida PPECS, asked if the amendments would have any anticipated affects on PPECS rather than nursing homes.

Justin Senior responded that it is difficult to predict the affect the amendments might have.

- Amy Guinan asked for clarification on nursing facility services and whether individuals in nursing facilities could also be in managed care plans.

Justin Senior responded that Yes, they can be in managed care plans. However, we want to make sure individual receive the appropriate incentives available through the managed care plans.

### **Low Income Pool (LIP)**

Justin Senior referred committee members to the Low Income Pool (LIP) section of the handout materials.

He noted that:

- The total amount of LIP funding for SFY 2016-2017 is approximately \$608 million (\$607,825,452).
- Funds may be used for health care costs that would be within the definition of medical assistance in Section 1905(a) of the Social Security Act.
- For SFY 2016-2017 these health care costs may be incurred by the state or by providers to furnish uncompensated medical care as charity care for low-income individuals that are uninsured.
- The costs must be incurred pursuant to a charity care program that adheres to the principles of the Healthcare Financial Management Association.
- Distribution **can** include both hospital providers and medical school faculty plan providers.
- For each provider type included, the LIP distribution model:
  - Must rank providers by their amount of uncompensated charity care costs or charges as a percentage of their privately insured patient care costs or charges (commercial pay).
  - Can include up to four tiers for distribution.
  - Must pay providers for the same percentage of their charity care cost within each tier.

Mr. Senior added that next year will be the last year of LIP.

### **SMMC Program Update**

- Justin Senior referred committee members to the Managed Medical Assistance and Long-term Care sections of the handouts. He advised that Medicaid recipients enrolled in Managed Medical Assistance plans now have access to the highest quality of care in the history of the Florida



Medicaid program. Mr Senior then reviewed a number of graphs and charts referencing the following:

- HEDIS Scores
- Health Plan Report Cards
- Consumer Satisfaction Survey

Mr. Senior informed members that the Agency initiated an enrollment freeze on one of the plans due to failure to pay providers in a timely manner. The issue is currently being resolved in accordance with the corrective action plan set-up by the Agency. At the end of this month, the enrollment freeze will be lifted from the plan. Justin added that thus far no enrollment freeze has lasted more than a 60 days period for non-compliance.

### ***Business Intelligence Report***

***Justin Senior***

Justin Senior referred committee members to the Quareteley Statewide Medicaid Managed Care Report provided in their meeting materials. He stated that this report is available on the Agency's website for use. This is a quarterly report that is published in the winter, spring, summer, and fall. Mr. Senior briefly reviewed each report. He then noted that the SMMC program is a 16 billion dollars program, and 3.1 million recipients are enrolled in managed care at any given time. He added that approximately 35,000 recipients have opted out of managed care and are now in FFS. He then stated that PDO is growing overtime and the Agency believes more and more will continue to use this option.

### ***SMMC Complaints and Compliance***

***Damon Rich / Abby Riddle***

Damon Rich referred committee members to the MMA program issues log in their materials packet and briefly discussed the complaints portion. Mr. Rich stated that there was a total of 938 complaints for the month of December 2015. A majority of the complaints were received via the call center, with additional complaints received via the online complaint form. He noted that during the first quarter of SFY 15-16, the top three issues were payment, services, and network access; the second quarter top three issues were payments, services, and customer services.

Abby Riddle provided a compliance overview. She informed committee members that her team meets weekly to review and analyze reports, and then takes action if needed. She stated that liquidated damages had been assessed against 4 plans during the first quarter of SFY 15-16.

### ***MCAC Bylaws Update***

***Carla Sims***

Due to time constraints, the MCAC Bylaws Update will be discussed at the beginning of the next scheduled meeting.

### ***Subpopulation Committee Updates***

***Subcommittee***

Due to time constraints, the committee agreed to have the subcommittee's give updates during the next scheduled meeting.

### ***Next Meeting***

***Justin Senior***

The next Medical Care Advisory Committee meeting is tentatively scheduled for April 19, 2016.

### ***Adjourn***

***Justin Senior***

The MCAC meeting adjourned at 4:07 p.m.

An audio tape of the meeting and all meeting materials are posted on the MCAC webpage located at <http://ahca.myflorida.com/medicaid/mcac/meetings.shtml>.



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Medical Care Advisory Committee  
Meeting Summary**