

Statewide Medicaid Managed Care (SMMC) New Program Highlight: Utilization of Hope Florida Programs

The Agency for Health Care Administration (Agency) contracts with health and dental plans to provide Medicaid services to health plan enrollees. The Agency recently entered into new contracts with health and dental plans that will greatly benefit enrollees and providers. This document is part of a series that highlights the program changes in the new Statewide Medicaid Managed Care (SMMC) health and dental plan contracts. Hope Florida is a Statewide initiative spearheaded by First Lady Casey DeSantis with the goal of assisting Floridians in need through community involvement and resource coordination to establish a pathway to achieving prosperity, independence, or purpose. SMMC health and dental plans will utilize and coordinate with Hope Florida Hope Navigators and partners to assist enrollees with achieving their goals through closed-loop verification, assist enrollees achieve independence, and supporting graduation out of the Medicaid program.

The Agency will transition to the new contracts in February of 2025. The plans will operate in 9 Regions throughout the state.

Region	Counties	
Α	Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and Washington	
в	Alachua, Baker, Bradford, Citrus, Clay, Columbia, Dixie, Duval, Flagler, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Nassau, Putnam, St. Johns, Sumter, Suwannee, Union, and Volusia	
С	Pasco and Pinellas	
D	Hardee, Highlands, Hillsborough, Manatee, and Polk	
Е	Brevard, Orange, Osceola, and Seminole	
F	Charlotte, Collier, DeSoto, Glades, Hendry, Lee, and Sarasota	
G	Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie	
н	Broward	
I	Miami-Dade and Monroe	

Florida Medicaid has a program called the Managed Medical Assistance (MMA) program. This program provides Medicaid state plan services through a managed care plan.

SMMC and Hope Florida: Integration

Plans providing MMA and LTC Services will connect enrollees with tools to overcome barriers to employment, economic self-sufficiency, and independence. SMMC plan case managers will coordinate with Hope navigators to ensure effective use of resources, and continuous care navigation. Additionally, plan case managers will support Hope navigators and ensure referral information and outcomes are shared. Health and Dental Plans will exchange necessary enrollee data with Hope Florida Navigators and programs across agencies.

System Integration

Plans' case management systems will integrate information from providers, including their interface with the Hope Florida integrated data and tracking system for targeting services and supports to address health-related social needs.

Ensuring Successful Referral: Requiring Closed Loop Verification

Plans will implement a closed-loop referral system integrated as part of Hope Florida that will ensure needs are identified, referrals are made to faith-based and other community-based organizations, services are provided and reported back to the plans.

Plans will report to the Agency on the closed-loop referral system and the Agency will review and verify outcomes after the receipt of services. If plans do not meet reporting requirements via the closed-loop system, corrective action and financial consequences will be assessed.

Helping People be Independent: Enhanced Services Geared Towards Independence

In addition to services provided through referral to their community-based network of providers, plans providing MMA and LTC services will offer additional direct services (Expanded Benefits) to support enrollees in achieving their goals.

Examples of Hope Florida-related Expanded Benefits Offered by Health Plans			
K-12 Tutoring, Test, and GED Preparation Courses	Work Force Training and Job Readiness Programs		
Professional Licensure or Certification Subsidies	Housing Assistance		
Emergency and Non-Emergency Food assistance	Non-medical Transportation		

Supporting Graduation from the Medicaid Program

Health Plan programs will be structured with the goal of helping enrollees graduate from (leave) the Medicaid program. Plans will communicate with the Agency on the number of enrollees who have graduated out of Medicaid. Plans that are successful in assisting people in graduating out of Medicaid will get additional new members based on Agency-defined quality metrics.

For more information on the SMMC program, visit: <u>ahca.myflorida.com/medicaid/statewide-medicaid-managed-</u><u>care</u>.

What to Expect:			
Late September 2024	The Agency will mail all voluntary Florida Medicaid recipients a letter explaining that the Statewide Medicaid Managed Care program is transitioning and that they will need to either select a managed care, opt not to enroll in a managed care plan, or be automatically enrolled in a managed care plan.		
Mid-November 2024 (Regions F-I)	The Agency will inform all recipients of their managed care plan assignments via letter, which will include additional information on how to disenroll or change plans if desired. Recipients may change their		
Early December 2024 (Regions A-E)	assigned plan by visiting flsmmc.com or calling 1-877-711-3662.		
February 1, 2025	All recipients, including voluntary recipients who have opted to enroll in a managed care plan will begin receiving their Florida Medicaid services through the Statewide Medicaid Managed Care program.		