



## Statewide Medicaid Managed Care (SMMC) New Program Highlight: Chronic Disease Management Programs (CDM)

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. **Under the new contracts, health plan chronic disease management (CDM) programs will be equipped to provide enhanced care coordination for more chronic diseases. Additionally, CDM programs will be evaluated and reported on for the purpose of continual progression and improvement.**

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

Region	Counties
<b>A</b>	Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and Washington
<b>B</b>	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
<b>C</b>	Pasco and Pinellas
<b>D</b>	Hardee, Highlands, Hillsborough, Manatee, and Polk
<b>E</b>	Brevard, Orange, Osceola, and Seminole
<b>F</b>	Charlotte, Collier, DeSoto, Glades, Hendry, Lee, and Sarasota
<b>G</b>	Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie
<b>H</b>	Broward
<b>I</b>	Miami-Dade and Monroe

Florida Medicaid has a program called the Managed Medical Assistance (MMA) program. This program utilizes a health plan to provide Medicaid state plan services to enrollees with health needs, such as enrollees with a chronic health condition.

Under the new contracts, each health plan in the MMA program will expand its CDM programs. CDM programs offer proactive and organized interventions focused on defined populations with chronic diseases. These programs have been designed with many features to improve health outcomes of enrollees diagnosed with a chronic condition(s). Enrollees are encouraged to contact their health plan to inquire which CDM programs are provided by the plan.

Under the new contract, health plans are required to collaborate with the Agency on the structure, development, and evaluation of their CDM programs. Health plans will develop and evaluate their CDM programs based on clearly defined parameters within the new contract.

### **What CDM programs are Available from Health Plans?**

All SMMC health plans will have CDM programs for enrollees with these health conditions:

Cancer	Diabetes
HIV and AIDS	Depression

Every SMMC health plan will offer at least two additional CDM programs which may include:

Chronic Kidney Disease <sup>New</sup>	Dementia <sup>New</sup>
End Stage Renal Disease (ESRD) <sup>New</sup>	Hypertension <sup>New</sup>
Osteoporosis <sup>New</sup>	Parkinson's Disease <sup>New</sup>

CDM programs from MMA Plus Plan or Comprehensive Plus plans offering a Specialty Product include:

Anxiety Disorders <sup>New</sup>	Attention Deficit Hyperactivity Disorder (ADHD) <sup>New</sup>
Bipolar Disorder <sup>New</sup>	Substance Abuse Disorders <sup>New</sup>

**NOTE:** Under the new dental contracts, dental plans will offer special care coordination to Medicaid enrollees with chronic diseases such as diabetes.

**Enrollee Identification Methodology**

Within the first 90 days of the new contract, health plans will conduct a comprehensive analysis of its enrollees to develop meaningful CDM programs. The health plans will then develop a methodology to identify enrollees and providers of those enrollees with multiple or severe chronic conditions as a target population that would benefit from participating in the CDM.

**Program Development**

For the first time under the new contract, the Agency will review and assess CDM programs and collaborate with health plans for quality improvement and compliance. The contract provides the following core interventions for health plans to develop their CDM programs:

Provide care coordination and case management services	Promote lifestyle changes
Use of preventive services	Use of effective disease management toolkits, guidelines, and best practice recommendations
Implement strategies to address health-related social needs	Establish and maintain partnerships with providers, community-based organizations, and other stakeholders
Effective communication to enrollees and caregivers	Engage in chronic disease education and outreach interventions
Provide medication adherence education	Implement reward and incentive program(s)

**Transparency Requirements**

Health Plans will provide quarterly and annual updates for each of their CDM programs to the Agency to allow for collaborative assessment of the programs and identify opportunities for programmatic improvement to the benefit of the enrollee.

Prior to the beginning of a CDM program, the health plan will report the following information to the Agency:

- the target population and methodology for identification;
- the quality indicators that will be used to quantifiably measure progress;
- the clinical knowledge or research that justify the quality indicators as credible progress measures
- the data sources informing identification and progress (e.g., claims data or HEDIS);
- how the CDM will improve health outcomes for the target population;
- the specific, quantifiable, appropriate target goals for the quality indicators for the chronic disease target population; and
- the link between the target goals and the planned interventions.

After implementation of the CDM program, the health plan will provide annual updates on the parameters and goals listed in the health plan’s initial report for Agency review and assessment.