Florida Medicaid Update

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Overview of 2011 Legislation

- In 2011, the Florida Legislature created a new program, Statewide Medicaid Managed Care (SMMC) in Part IV of Chapter 409, Florida Statutes.

- Statewide Medicaid Managed Care has two program components:
  - Long-term Care Managed Care Program
    - Will begin in the fall of 2013
    - Only provides long-term care services
  - Managed Medical Assistance Program
    - Will begin in the fall of 2014
    - Provides all health care services other than long-term care services to eligible recipients

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Current Status of SMMC Implementation: Long-term Care Managed Care

- In order to implement the Long-term Care portion of the SMMC program, the Agency is seeking a 1915 b/c combination waiver:
  - To identify and allow qualified individuals to receive home and community based care services in lieu of nursing home care services; and
  - To enroll individuals in managed care plans statewide, and to allow for selective contracting of those plans.

Current Status of SMMC Implementation: Long-term Care Managed Care *(cont.)*

- The Long-term Care Managed Care Invitation to Negotiate was released June 29, 2012*.

Activity	Date/Time
Deadline for Receipt of Written Inquiries	July 6, 2012
Vendor Conference for Regions 1 – 11	July 19, 2012
Anticipated Date for Agency Response to Written Inquiries	July 26, 2012
Deadline for Receipt of Responses	August 28, 2012
Public Opening of Responses	August 29, 2012
Publish List of Respondents for Provider Comments	August 31, 2012
Anticipated Dates for Negotiation	November 13, 2012 – January 4, 2013
Anticipated Posting of Notice of Intent to Award	January 15, 2013

*The Agency cannot discuss the provisions of the ITN.

Who will enroll in the Long-term Care Managed Care Program?

- Individuals who are:
  - 65 years of age or older AND need nursing facility level of care; or
  - 18 years of age or older AND are eligible for Medicaid by reason of a disability AND need nursing facility level of care.

AND

- Live in a nursing facility; or
- Are enrolled in one of the following programs:
  - Aged and Disabled Adult Waiver
  - Consumer-Directed Care Plus for individuals in the A/DA waiver
  - Assisted Living Waiver
  - Channeling Services for Frail Elders Waiver
  - Program of All-inclusive Care for the Elderly (PACE)
  - Nursing Home Diversion Waiver.

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Long-term Care Managed Care Required Services

Adult companion care	Hospice
Adult day health care	Intermittent and skilled nursing
Assisted living	Medical equipment and supplies
Assistive care services	Medication administration
Attendant care	Medication management
Behavioral management	Nursing facility
Care coordination/Case management	Nutritional assessment/Risk reduction
Caregiver training	Personal care
Home accessibility adaptation	Personal emergency response system (PERS)
Home-delivered meals	Respite care
Homemaker	Therapies, occupational, physical, respiratory, and speech
Transportation, non-emergency	

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Long-term Care Managed Care Program Enhancements

- Increased access to quality providers:
    - Selection of the most qualified plans
    - Expanding services available in rural areas

- Increased access to quality services:
    - Increased access to participant direction
    - Plans can offer expanded benefits
    - Increase opportunity for integration between Medicaid and Medicare through participation of special needs plans (SNPs)

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Long-term Care Managed Care Program Enhancements *(cont.)*

- Increased emphasis on Home and Community Based (HCB) Services:
  - Integration of financing for nursing home and HCB services to facilitate nursing home transition
  - Plan incentives for community based care
  - Increased care coordination and case management across care settings—more integrated care/case management
  - Individuals have choice of receiving services in HCB settings while financial eligibility is pending

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Long-term Care Managed Care Program Enhancements *(cont.)*

- Increased accountability:
  - Enhanced quality measures
  - Enhanced access to encounter data for long-term care services
  - Enhanced contract compliance tools, including liquidated damages, sanctions and statutorily provides penalties and terminations
  - Increased tools to monitor plan service expenditures

Long-term Care Managed Care Program Enhancements *(cont.)*

- Increased predictability for recipients and providers:
  - Five year contracting period - less confusions for providers and recipients
  - Penalties for plan withdrawals
  - Maintenance of role of critical community based providers (ADRCs and Aging Network providers)
  - Parameters for payments to certain providers (nursing homes, hospice)

Current Status of SMMC Implementation: Managed Medical Assistance

- In order to implement the Managed Medical assistance portion of the SMMC program, the Agency is seeking amendment of its 1115 Medicaid Reform Demonstration Waiver that currently operates in Baker, Broward, Clay, Duval, and Nassau counties. The amendment seeks:

  - To mandatorily enroll most Medicaid recipients in Statewide Medicaid Managed Care plans
  - To allow health plans to develop customized benefits packages
  - To implement the SMMC on a statewide basis

- The Agency continues to work with CMS to provide additional information on the pending 1115 amendment to implement the Managed Medical Assistance program.

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Current Status of Other SMMC Program Components

- Seeking amendment of the 1115 MEDS AD Demonstration waiver to implement the required premium option for Medically Needy population:
  - To require a premium not to exceed share of cost after the first month of qualifying as a medically needy recipient and enrolling in a plan. The recipient would pay a portion of the monthly premium equal to the enrollee's share of the cost.
  - To provide Medically Needy recipients with continuous enrollment for up to six months.
- The Agency submitted the amendment to the MEDS AD 1115 Research and Demonstration Waiver on April 26, 2012. At this time the Agency has received no official questions from CMS.

Current Status of Other SMMC Program Components *(cont.)*

- Sought amendment of the 1115 Medicaid Reform Demonstration Waiver to impose additional premiums and co-payments:
  - $10 monthly premium on recipients enrolling in the SMMC program.
  - $100 copayment for non-emergency ER visits.
- In a letter data February 9, 2012, the federal Centers for Medicare and Medicaid Services informed the Agency that they would no longer consider these amendments under active review.
- Submitted a statutorily required report July 1, 2012, to the Florida Legislature outlining the estimated operational cost of implementing a premium and cost sharing system and estimated revenues to be collected from parents of children in the Developmentally Disabled waiver program.

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Current Status of Other SMMC Program Components *(cont.)*

- Health Insurance Premium Payment Program:
  - To develop a program that will enable Medicaid recipients to participate in employer-sponsored insurance.
  - The Medicaid MCO capitation payment will be used to pay the recipient's employee share of their employer-sponsored health insurance.
  - Medical services that are not covered by the recipient's employer-sponsored health insurance will be provided by Medicaid
- CMS approved the State Plan Amendment regarding enrollment in employer-sponsored health programs. The effective date is July 1, 2011.

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Affordable Care Act Resources

- Department of Health and Human Services proposed rule regarding ACA Increased Primary Care Physician Rates:

http://www.gpo.gov/fdsys/pkg/FR-2012-05-11/pdf/2012-11421.pdf

- FL Social Services Estimating Conference

http://edr.state.fl.us/Content/