

# Florida Medicaid: An Overview

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# Statewide Medicaid Managed Care (Beginning 2013/2014)

*During the 2011 Florida Legislative Session, the House and Senate passed House Bill 7107 and HB 7109, which require the state Medicaid program to implement a Statewide Medicaid Managed Care Program.*

- ~ 1915 (b)(c) Waiver*
- ~ 1115 Demonstration Waiver*
- ~ State Plan Amendment*



# Statewide Medicaid Managed Care: Legislation and Key Components

- In 2011, the Florida Legislature created a new program: Statewide Medicaid Managed Care (SMMC) Chapter 409, Part IV, Florida Statutes
- The SMMC program has two key 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 mid - 2014
    - Provides all health care services other than long-term care services to eligible recipients

# Statewide Medicaid Managed Care (2013/2014): Status of Federal Approval

- **Long-term Care Managed Care Program:**
  - The Agency submitted the 1915b/c application for the Long-term Care Managed Care waiver program on August 1, 2011.
  - The LTC SMMC waiver went “back on the clock” for the final 90 day review period on November 9, 2012.
  - After much negotiation/ conversation/ provision of additional information, we anticipate approval by early February, 2013.

# LTC Timelines: Invitation to Negotiate

Long-term Care Managed Care Program: Invitation To Negotiate	
Activity	Date
Release of Invitation to Negotiate	June 29, 2012
Deadline for Receipt of Written Inquiries	July 6, 2012
Vendor Conference for Regions 1-11	July 19, 2012
Deadline for receipt of responses	August 28, 2012
Published List of Respondents for Provider Comments	August 31, 2012
<b>Anticipated</b> Dates for Negotiation	November 13, 2012 – January 4, 2013
Posting of Notice of Intent to Award	January 15, 2013

# LTC Intent to Award Per Region

Region	Plans
1	American Eldercare, Inc.; Sunshine State Health Plan
2	American Eldercare, Inc.; United Healthcare of Florida, Inc.
3	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.
4	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.
5	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.
6	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan
7	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan
8	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.
9	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan
10	American Eldercare, Inc.; Sunshine State Health Plan, Amerigroup Florida, Inc.
11	American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan, Amerigroup Florida Inc.



# LTC Timelines: Recipient Enrollment Schedule

Region	Counties	Plan Readiness Deadline	Enrollment Effective Date	Total Eligible Population
7	Brevard, Orange, Osceola and Seminole	1-May-13	1-Aug-13	Region 1: <u>9,338</u>
8 & 9	Charlotte, Collier, DeSoto, Glades, Hendry, Lee and Sarasota, Indian River, Martin, Okeechobee, Palm Beach and St. Lucie	1-Jun-13	1-Sep-13	Region 8: 5,596; Region 9: 7,854: <u>Total = 13,450</u>
1, 2 & 10	Escambia, Okaloosa, Santa Rosa and Walton, Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla and Washington, Broward	1-Aug-13	1-Nov-13	Region 1: 2,973; Region 2, 4058; Region 10, 7,877; <u>Total = 14,853</u>
11	Miami-Dade and Monroe	1-Sep-13	1-Dec-13	Region 11: <u>17,257</u>
5 & 6	Pasco, Pinellas, Hardee, Highlands, Hillsborough, Manatee and Polk	1-Nov-13	1-Feb-14	Region 5, 9.963; Region 6, 9.575: <u>Total = 19.538</u>
3 & 4	Alachua, Bradford, Citrus, Columbia, Dixie, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Putnam, Sumter, Suwannee Union, Baker, Clay, Duval, Flagler, Nassau, St. Johns and Volusia	1-Dec-13	1-Mar-14	Region 3: 6,911; Region 4: 9.087: <u>Total = 15,990</u>

# LTC Timelines: Recipient Notification & Choice Counseling

## Recipient Notification & Choice Counseling (Region Enrolling August 2013)

Activity	Date
Mail pre-go-live informational letter to recipients	March 2, 2013
Mail welcome letter to recipients to choose a plan	May 20, 2013
Mail plan choice reminder notice to recipients	July 1, 2013
Plans go live/ first date of service	August 1, 2013



# Statewide Medicaid Managed Care (2013/2014): Status of Federal Approval

- **NOTE: Due to the competitive procurement, we are in a statutorily imposed “Blackout Period” until 72 hours after the award and cannot provide interpretation or additional information not included in the or MMA ITN documents.**
- **Managed Medical Assistance Program:**
  - The Agency submitted a request to amend the 1115 Medicaid Reform Demonstration Waiver for implementation of the Managed Medical Assistance Managed Care waiver program on August 1, 2011.
- **Medically Needy Program: Seeking Section 1115 Research and Demonstration Waiver**
  - The Agency submitted a concept paper to federal CMS on August 1, 2011, and submitted the final waiver application on November 21, 2012.
- **State Plan Amendment**
  - To authorize the Health Insurance Premium Payment Program
  - Approved by federal CMS September 2011
  - Rulemaking is in process

# MMA Timelines: Invitation to Negotiate

Long-term Care Managed Care Program: Invitation To Negotiate	
Activity	Date
Release of Invitation to Negotiate	December 28, 2012
Deadline for Receipt of Written Inquiries	January 22, 2013
Vendor Conference for Regions 1-11	February 12, 2013
Anticipated Deadline for Agency Responses to Written Inquiries	February 26, 2012
Deadline for Receipt of Responses	March 15, 2013
Published List of Respondents for Provider Comments	March 20, 2013
<b>Anticipated</b> Dates for Negotiation	July 1, 2013 – August 20, 2013
<b>Anticipated</b> Posting of Notice of Intent to Award	September 16, 2013

# Request for Letters of Intent: MMA Program

- To assist with planning, on August 7, 2012, the Agency requested non-binding letters of intent to bid on the MMA program from interested parties.
- Interested parties were asked to send a letter of intent to the Agency by August 17, 2012.

# Request for Letters of Intent: MMA Program (part 1)

	1	2	3	4	5	6	7	8	9	10	11
Amerigroup	X	X	X	X	X	X	X	X	X	X	X
Care Access											
Community Health Solutions of America	X	X	X	X	X	X	X	X	X	X	X
Confident Care Health Plan	X	X	X	X	X	X	X	X	X	X	X
Shands Jacksonville Medical Center d/b/a First Coast Advantage				X							
First Coast Advantage Central, LLC			X								
Freedom health	X	X	X	X	X	X	X	X	X	X	X
Florida True Health	X			X			X		X		
Healthy Palm Beaches, Inc.									X		
Humana, Inc.	X	X	X	X	X	X	X	X	X	X	X
Integral Quality Care	X		X			X	X	X			
Jackson Health System											X
Magellan Complete Care		X		X	X				X	X	X
Max Care	X	X	X	X	X	X	X	X	X	X	X
Molina	X			X	X	X	X		X	X	X

# Request for Letters of Intent: MMA Program (continued)

	1	2	3	4	5	6	7	8	9	10	11
PPSC USA LLC	X	X	X	X	X	X	X	X	X	X	X
Preferred Medical Plan, Inc.										X	X
Prestige Health Choice	X	X	X		X	X	X	X	X		X
Salubris									X	X	X
Sunshine State Health Plan	X	X	X	X	X	X	X	X	X	X	X
United HealthCare Community plan	X	X	X	X	X	X	X	X	X	X	X
Universal				X	X	X	X	X	X	X	X
WeCare Health Plans	X	X	X		X	X	X	X	X		
WellCare of Florida, Inc.	X	X	X	X	X	X	X	X	X	X	X
<b>TOTAL RESPONDENTS</b>	15	13	14	15	15	15	16	14	18	15	17

# Statewide Medicaid Managed Care (2013/2014): Program Improvements

- Integrates long-term care for a more comprehensive and coordinated delivery system
- Comprehensive Plans
  - Ensure comprehensive care for recipients receiving both long-term care and managed medical assistance services

# Statewide Medicaid Managed Care (2013/2014): Program Improvements

- Achieved Savings Rebate
  - Ensures appropriate medical services expenditures
- Access to Care Partnership
  - Ensures appropriate distribution of local funds (intergovernmental transfers) and Low Income Pool funds
- Florida Medical Schools Quality Network
  - Ensures continued involvement of medical schools and graduate medical education programs to improve clinical outcomes of managed care plans

# Statewide Medicaid Managed Care Program: Program Improvements

- Increased access to quality providers:
  - Plan selection based on the Agency's 11 regions in the state
  - Expanding services available in rural areas.



# Statewide Medicaid Managed Care Program: Program Improvements

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

# Statewide Medicaid Managed Care Program: Program Improvements

- Increased accountability:
  - Enhanced quality measures
  - Enhanced access to encounter data for long-term care services and other services
  - Enhanced contract compliance tools, including liquidated damages, sanctions, and statutory penalties and terminations
  - Additional integrity functions and activities to reduce the incidence of fraud and abuse

# Questions?

