



Medical Care Advisory Committee Meeting Summary

10/18/2016	Time: 2:00 p.m. – 5:00 p.m.	Location: AHCA Conference Room A
Attendees:		
	<u>Committee Members</u>	<u>Resources</u>
✓	Amy Guinan Liem	✓
	Catherine Moffitt, MD	
✓	Cheryl Young	✓
✓	Crystal Stickle	✓
	Iris Wimbush	✓
	Jeri Flora Cully	✓
✓	Justin Senior	✓
	Martha Pierce	✓
	Michael Lockwood	✓
✓	Dr. Richard Thacker, D.O.	✓
✓	Robert Payne, DDS	✓
	Sarah Sequenzia	✓
	Madeleine Nobles	✓
	Stanley Whittaker, MSN	✓
	Tracie Inman	✓
✓	Anne Swerlick	

Member Introductions

Beth Kidder

Beth Kidder called the meeting to order and introductions were made. A quorum was not present, so approval of minutes was deferred for the next scheduled meeting, January 24, 2017.

Ms. Kidder informed committee members there would be three public meetings during today's Medical Care Advisory Committee meeting.

New Business

Beth Kidder

1115 Family Planning Post Award Forum

Heather Morrison gave a brief presentation on the Family Planning Waiver, stating that this waiver has been approved for a five year period with renewal every three years. This waiver will be renewed in June 2017. The Agency received a final evaluation from the University of Florida on June, 24, 2016 for the period of July 1, 2011 through June 30, 2014, and this will be submitted to the Centers for Medicare and Medicaid Services (CMS). Ms. Morrison then opened the floor for questions.

- Dr. Payne: The age range set at 14-55 isn't young enough, and 55 is too old.
 Response: The ages outlined were provided by CMS.
- Crystle Stickle: Are long term reversible birth control supplies covered under this waiver?
 Response: Yes.



- Dr Thacker: The definition of abortions should be narrowed in regards to treatment or management, and vaccination for HPV should begin at age 11.
Response: The definition of the circumstances under which abortions can be covered by Medicaid is detailed in federal and state law and regulations. Ms. Morrison stated she will check on HPV vaccine coverage.
- Anne Swerlick: Requested an overview of evaluation findings.
Response: Ms. Morrison will look into the impact and cost savings it would have for this program.

1115 MMA Extension Request and 1115 MMA Waiver Post Award Forum

Beth Kidder informed committee members that the Agency encourages feedback on how this program is doing, and how improvements can be made. She stated that comments could either be made during the meeting, by mail, or email. She noted that in addition to today's meeting, two other public meetings will be held and the public comment period will be open until November 10, 2016.

Ms. Kidder made a presentation to the committee members and other meeting attendees on the 1115 MMA Waiver Extension Request. The Agency is asking CMS to extend this program as-is for another three years. At the conclusion of the presentation, Ms. Kidder opened the floor for comments to the committee members first, the public attendees second, and those attending by phone third.

- Anne Swerlick: Thanked AHCA for creating the sub-committees and noted she will submit written comments.
- Dr. Thacker: Stated he appreciates all of the work that has been done. In regard to Express Enrollment, what happens to the clients who do not make a plan choice? Is there an estimate on the number of recipients who choose a plan? How are recipients assigned to a plan?
Response: About 50% of recipients make a plan choice. Recipients are assigned by an approved algorithm, ex: sister plan in the area if dual-eligible, or based on previous primary care provider. Recipients are not assigned to a plan based on HEDIS scores, but that could be considered for the future. Statistical data in response to this question will be brought to the next scheduled meeting.
- Dr. Thacker: How are the number of complaints broken down; providers, enrollees, vendors, etc.?
Response: Complaints are broken down based on enrollee and provider issues on monthly reports.
- Dr. Thacker: Does the rating stay in place for a specific period of time on the Report Card?
Response: The Report Card is based on a calendar year and is updated once a year. Plans are compared against other Medicaid plans across the nation, not just against each other.
- Dr. Thacker: How many plans have dropped out since MMA?
Response: No plans have dropped out.
- Dr. Payne: Is the secret shopper done to verify PNV?
Response: Yes.
- Crystle Stickle: Does the complaint portal reflect providers?
Response: Yes, anyone who raises a complaint is included in the report.
- Crystle Stickle: Noted she has a list of recommendation for helping this waiver move forward, and will submit all in writing.
- Wynn Adams: Stated cardiac care is the most important for seniors. Based on national averages, are we in the Top 5, Top 10, etc.? The Agency should look into presenting information this way. Has the Agency identified benchmarks on other states?
Response: The national data are not broken down by state, but rather are presented as a national mean.
- William Scrogins: Stated independent pharmacists are not being included in MMA plan networks.
- John Sloan: Stated the Rx Pharmacy is willing to accept contracts from MMA plans, but the MMA plans are not allowing them into their networks. This should be addressed when the Agency asks for the waiver renewal.



- Lois Adams: Noted she had many comments and questions, and would send all in writing.
- Lindy Kennedy: Supported all comments submitted by Crystal Stickle and strongly encourages AHCA to continue LIP when the extension is requested. She added that Florida Statute, Chapter 409 requires LIP. She will also submit written comments.
- Amy Liem: Stated she is pleased with the program's progress, but there is room for improvement. There should be more outreach and education on consumer protections to make more recipients aware. She added that 1.8 million children still are not receiving preventative dental care.

Compliance Action Analysis

Eunice Medina gave a brief presentation on the Compliance Action Analysis. She explained that compliance actions are defined in contract and that the options utilized by the Agency were liquidated damages (non-punitive), corrective action plans, monetary sanction, and non-monetary sanction (enrollment freezes). The analysis covered those compliance actions issued to plans during fiscal year 15-16. Ms. Medina also noted that quarterly updates would be provided in the future. Meeting materials provided covered a high level description of the actions issued organized with the contractual layout in mind. The information was separated by those actions that have completed the plan appeal process and those that are still pending. For fiscal year 15-16, 131 compliance actions were issued, totaling \$994,250. Ms. Medina also went through all of the diagrams created from the fiscal year data. Actions were described by category, subcategory, action types and amounts, total dollar, program type, and data source.

In addition, Ms. Medina addressed a previous question by Dr. Payne regarding whether actions had been issued related to online provider directories and the answer was yes. Almost all plans received at least one action related to online provider directories in FY 15-16.

Federal Managed Care Rule Overview

Beth Kidder presented a brief high level overview on the Federal Managed Care Rule. This presentation highlighted expected impacts to Florida. She informed committee members of what to expect with the new Medicaid Fair Hearings, and stated that David Nam will be heading up the Fair Hearing Office and will go into more details on how the hearings will work during the next scheduled meeting in January. This Final Rule is a milestone in the ongoing modernization of the delivery systems in Medicaid. It seeks to establish a balance between the Federal minimum requirements and State flexibility to determine their own processes and standards. She then opened the floor for questions from committee members.

- Anne Swerlick: Stated most of the changes required by the rule will need to be in effect by next October 2017.

Next Meeting

Carla Sims

The next Medical Care Advisory Committee meeting is tentatively scheduled for January 24, 2017.

Adjourn

Carla Sims

The MCAC meeting adjourned at 4:40 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>.