

# Medical Care Advisory Committee Meeting

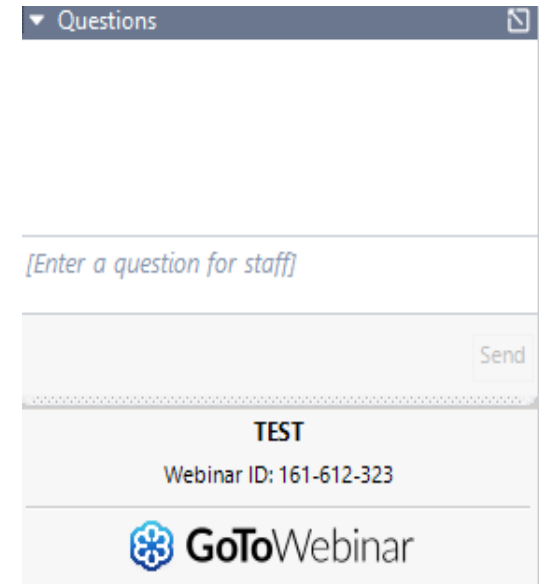
June 2, 2021



# Meeting Logistics



- Attendee lines will be **muted** for the duration of the webinar to minimize disruption.
- All attendees who wish to comment or ask questions should do so by typing them into the “questions” box of your webinar control panel.
- Questions will be addressed at the end of the meeting.



# Agency Changes



**Simone Marsteller**  
Secretary of AHCA



**Tom Wallace**  
Deputy Secretary for  
Medicaid



**Dr. Chris Cogle**  
Chief Medical Officer



**Dietra Cole**  
Chief of Medicaid RPA



**Debbie Warfel**  
Chief of MFAO



**Peter Ring**  
Chief of MDA



**Ann Dalton**  
Acting Chief of  
Medicaid Policy



**Pam Hull**  
Acting Chief of  
PMO



**Cody Farrill**  
Chief of Staff



**Tiffany Vause**  
Deputy Chief of Staff



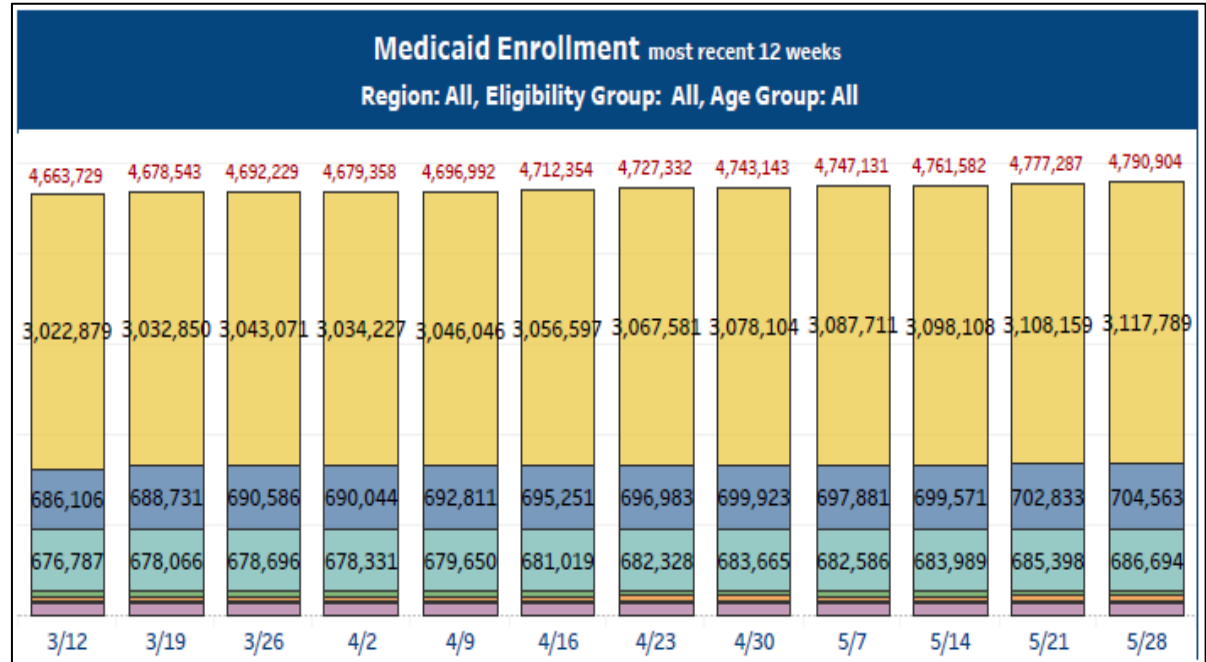
# Legislative Update

- 2021 Legislative Session
  - Policy Bills
- Medicaid Budget passed: \$34.4 Billion  
(Governor may veto certain items)
  - AHCA to establish a Hospital Directed Payment Program.
  - AHCA to establish an Indirect Medical Education program for institutions participating in a graduate medical education program.
  - AHCA to create a Florida Nursing Home Uniform Reporting System to provide financial reporting.

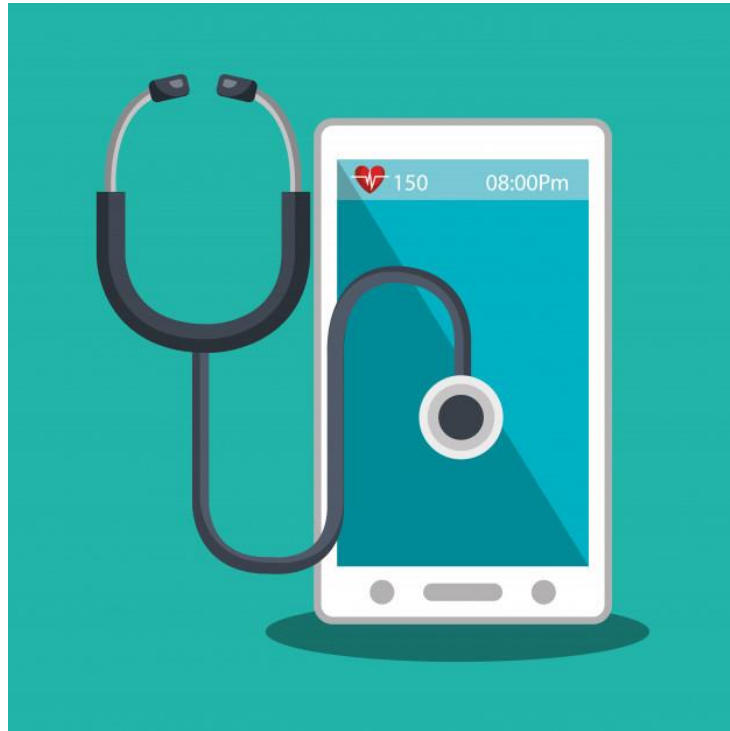


# Medicaid Enrollment

- Total enrollment at the end of May: **4.79 million recipients.**
- A 3-month increase in enrollment is equal to **127,175 recipients** or an **increase of over 3%.**
- The largest portion for the enrollment increase has been children and families (TANF), and the managed care population has grown more than the fee for service population.



# Telemedicine & Behavioral Health



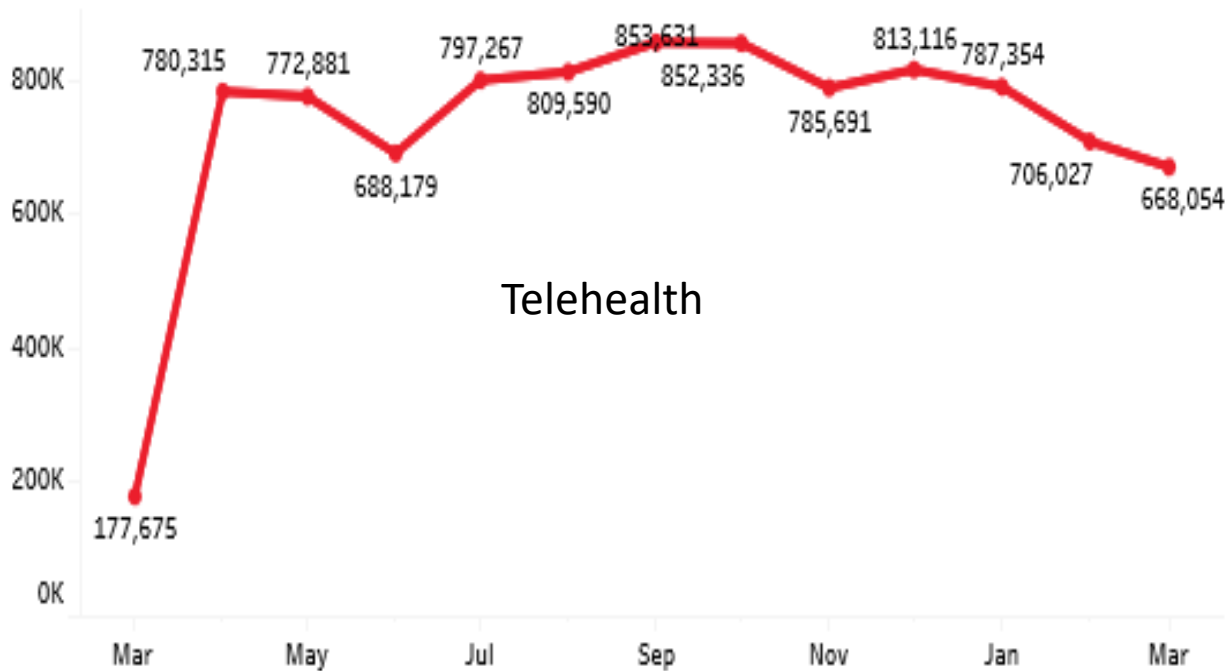


# COVID Telemedicine Flexibilities

- Agency reinforced awareness of existing telemedicine coverage and added COVID flexibilities to address key areas affected by in-person limitations:
  - Additional behavioral health services (e.g., psychosocial rehabilitation, medication-assisted treatment, targeted case management, therapeutic behavioral onsite services, additional evaluation and screening services)
  - Behavior analysis; speech, occupational, and physical therapies; early intervention services; well-child visits for ages 24 months to 20 years
  - Audio-only (i.e., telephone) when necessary
  - Asynchronous modes, e.g., remote patient monitoring
  - Payment parity required for SMMC plans (already included for FFS)



# Telemedicine Utilization (Visits) During Pandemic

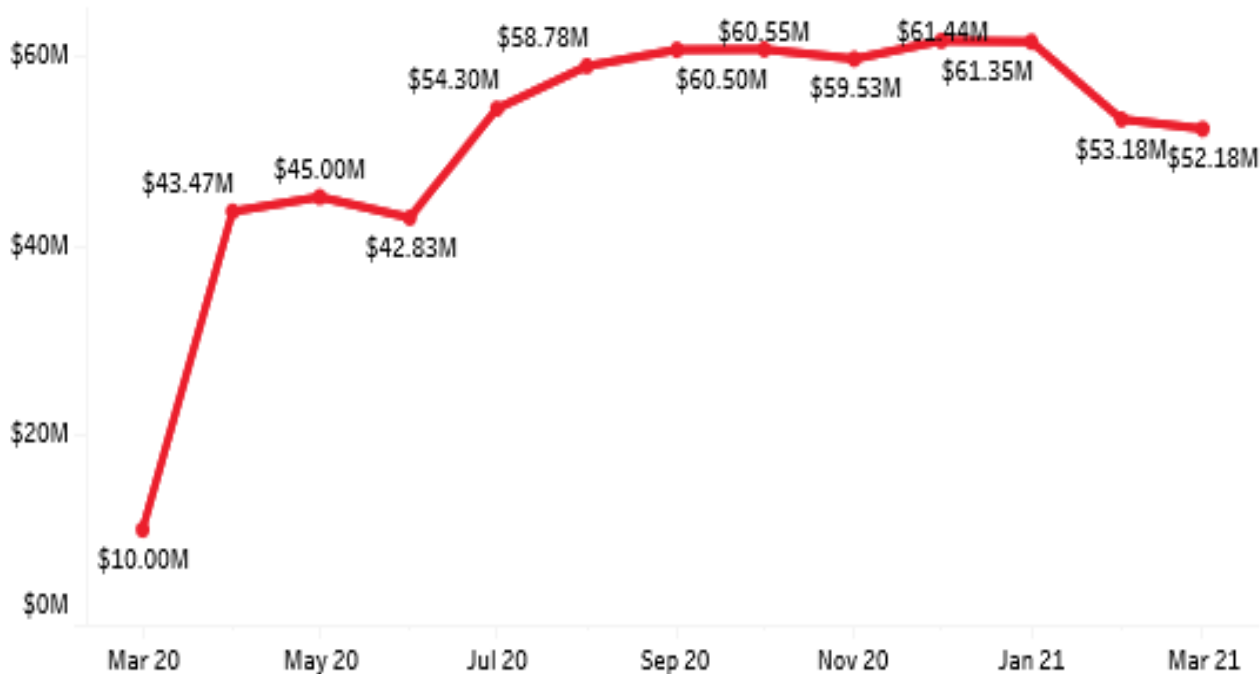


- Telemedicine visits during the pandemic period is 9,501,101 visits
- Behavioral health accounts for most telemedicine expenditures and visits





# Telemedicine Expenditures During Pandemic



The amount paid for all services delivered via telemedicine during the pandemic period through March 2021 is \$663.5 million



# Telemedicine During Pandemic

- During the pandemic period, behavioral health services account for 70% of all telemedicine expenditures and 56% of all telemedicine visits

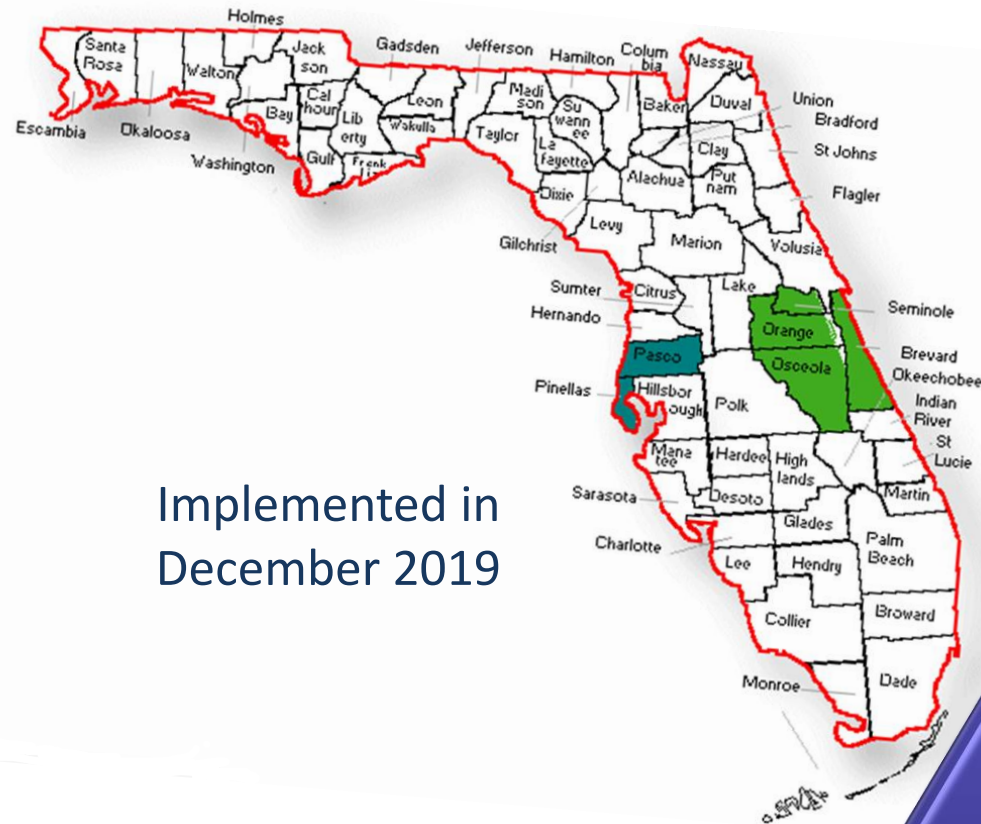
	All Services	Behavioral Health	Non-Behavioral Health
Total Expenditures	\$663,552,045	\$459,335,932	\$204,216,113
Total Visits	9,501,101	5,351,027	4,150,074
Enrollees Served	1,027,836	303,119	837,199
Average Visits per Enrollees Served	9	18	5
Average Dollars per Enrollees Served	\$646	\$1,515	\$244



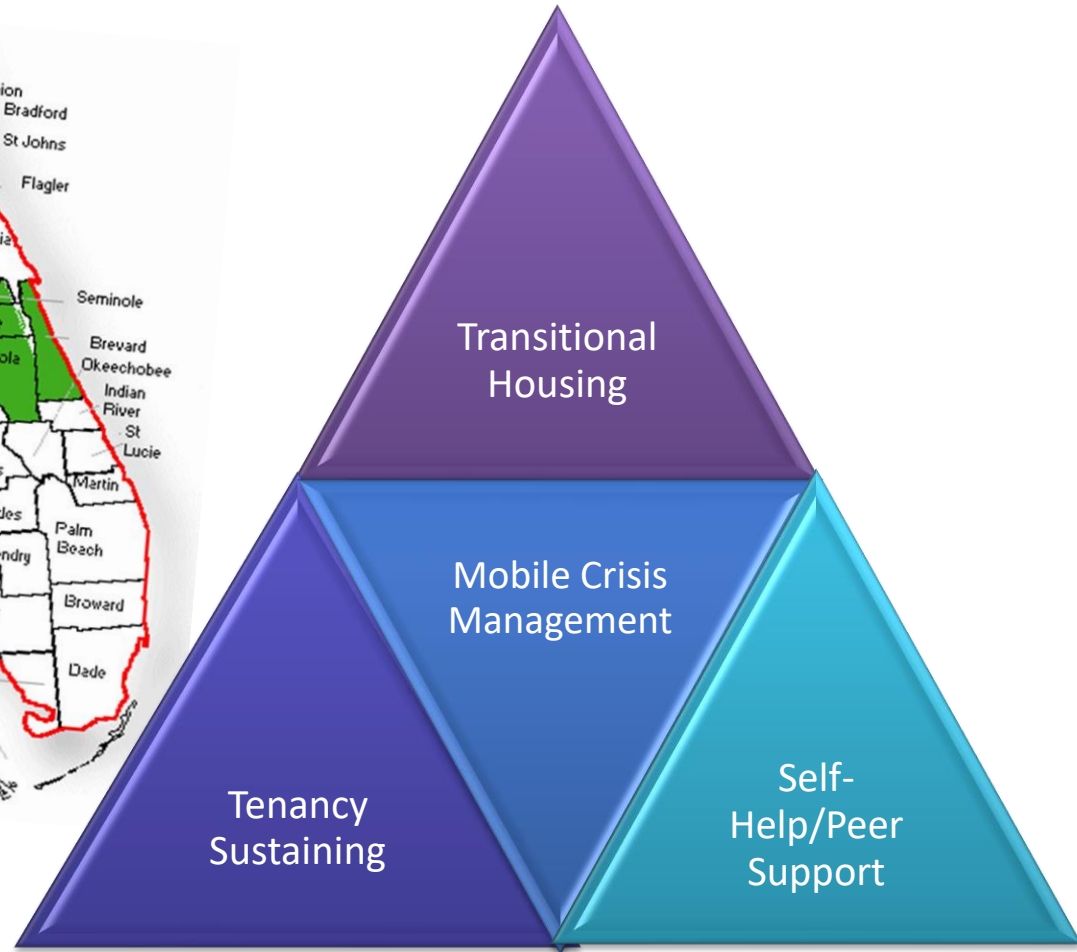
# Behavioral Health and the Supportive Housing Assistance Pilot



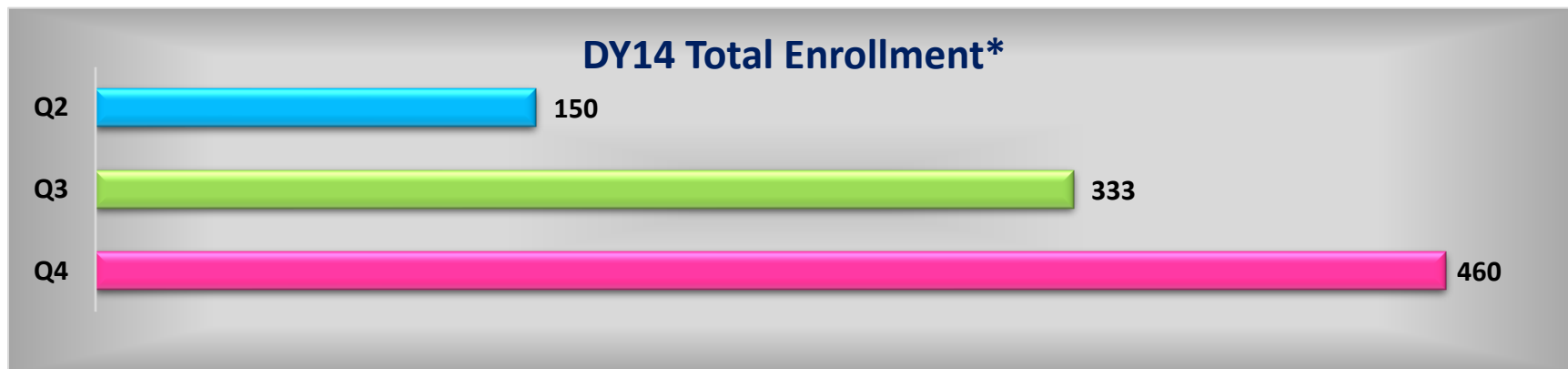
# Behavioral Health and Supportive Housing Assistance Pilot



Implemented in  
December 2019



# Behavioral Health and Supportive Housing Assistance Pilot



**DY14 Enrollment by Age Group\***  
Numbers may not equal the totals above due to birthdays during the quarter

	Q2	Q3	Q4
Age 21-40	48	100	150
Age 41-60	88	195	263
Over 60	14	40	50

Quarters	Time Period Represented
Q2	October – December 2019
Q3	January – March 2020
Q4	April – June 2020



# Housing Waiver Activities

April 2020 – Amendment

- The Behavioral Health and Supportive Housing Assistance Pilot provides flexible services for persons 21 and older, with severe mental illness, substance use disorders, or both, who are at risk of homelessness.
  - Raised the annual enrollment limit from 42,500 to 50,000 member months per demonstration year.





# Health Plan Mergers and Acquisitions



# Recently Completed SMMC Health Plan Acquisitions

## Simply Healthcare Acquisition of Lighthouse

- Effective Date: 2/1/2021
- Impacted Regions 1 and 2.
  - Simply Health is now offering MMA in R1 & R2.
- Enrollment:
  - Simply Pre-Acquisition Enrollment: 534,680
  - Projected Post-Acquisition Enrollment: 575,257

## Simply Healthcare Acquisition of Miami Children's Health Plan

- Effective Date: 5/1/2021
- Impacted Regions 9 and 11.
- Enrollment:
  - Simply Pre-Acquisition Enrollment: 575,257
  - Projected Post-Acquisition Enrollment: 605,584



# SMMC Plans by Region as of 5/01/2021

STATEWIDE MEDICAID MANAGED CARE (SMMC) HEALTH PLANS (2018-2024)													
REGIONAL ROLLOUT SCHEDULE	REGION	AETNA BETTER HEALTH (COV)	COMMUNITY CARE PLAN (CCP)	FLORIDA COMMUNITY CARE (FCC)	HUMANA MEDICAL PLAN (HUM)	MOLINA HEALTHCARE (MOL)	PRESTIGE (PRS)	SIMPLY HEALTHCARE (SHIP)	STAYWELL (STW)	SUNSHINE HEALTH (SUN)	UNITED-HEALTHCARE (URA)	VVIDA HEALTH (BST)	
PHASE 3	2/1/2019	1		FCC LTC+	HUM COMP			SHIP MMA	STW COMP	SUN COMP			
		2		FCC LTC+	HUM COMP			SHIP MMA	STW COMP	SUN COMP			
		3		FCC LTC+	HUM COMP				STW COMP	SUN COMP	URA COMP		
		4		FCC LTC+	HUM COMP				STW COMP	SUN COMP	URA COMP		
PHASE 2	1/1/2019	5		FCC LTC+	HUM COMP			SHIP COMP	STW COMP	SUN COMP			
		6	COV COMP		FCC LTC+	HUM COMP			SHIP COMP	STW COMP	SUN COMP	URA COMP	
		7	COV COMP		FCC LTC+	HUM COMP			SHIP COMP	STW COMP	SUN COMP		
		8			FCC LTC+	HUM COMP	MOL COMP			STW COMP	SUN COMP		BST MMA
PHASE 1	12/1/2018	9		FCC LTC+	HUM COMP		PRS MMA	SHIP MMA	STW COMP	SUN COMP			
		10		CCP MMA	FCC LTC+	HUM COMP			SHIP COMP	STW COMP	SUN COMP		
		11	COV COMP		FCC LTC+	HUM COMP	MOL COMP	PRS MMA	SHIP COMP	STW COMP	SUN COMP	URA COMP	

COMP – Comprehensive Plan    MMA – Managed Medical Assistance Plan    LTC+ – Long Term Care Plan Plan

As of 05-01-2021



# Upcoming SMMC Health Plan Mergers and Acquisitions

## Molina Acquisition of Magellan

- Tentative Effective Date: 9/1/2021
- Impacts Regions 4, 5 and 7.
  - Molina will be SMI-only in R4, 5 & 7.
- Enrollment:
  - Molina Enrollment as of 5/10/2021: 116,964
  - Magellan Enrollment as of 5/10/2021: 24,178
  - Projected Post-Acquisition Enrollment: **141,142**

## Sunshine Merger with Staywell

- Tentative Effective Date: 10/1/2021
- Impacts all Regions.
  - Will impact MMA, LTC, SMI, and CMS Plan
- Enrollment:
  - Sunshine Pre-Merger Enrollment as of 5/10/2021: 657,693
  - Staywell Pre-Merger Enrollment as of 5/10/2021: 1,114,980
  - Projected Post-Merger Enrollment as of 5/10/2021: **1,772,673**



# Canadian Prescription Drug Importation Program



# Importation History

2003

- Medicare Prescription Drug, Improvement, and Modernization Act (MMA) signed into law
- The MMA gave the Secretary of Health and Human Services limited power to allow the importation of some drugs from Canada
- Secretary must certify the imports 1) **pose no additional risk to public health and safety**, and 2) **generate cost-savings for American consumers.**



2019

- **Governor Ron DeSantis** signed House Bill 19 into Law, creating the Program.
- The Agency issued a request for Information.
- The Trump administration announced plans to allow importation.
- The Agency submitted its importation concept paper to HHS.
- FDA published a proposed rule on Importation of Prescription Drugs.

2020

- Agency released an Invitation to Negotiate.
- The FDA published the final rule on Importation of Prescription Drugs.
- Under Governor DeSantis' direction, Florida was the first state to submit a Section 804 Importation Program (SIP) Proposal to the FDA.
- The Agency contracted LifeScience Logistics, LLC (LSL).



# Program Goals



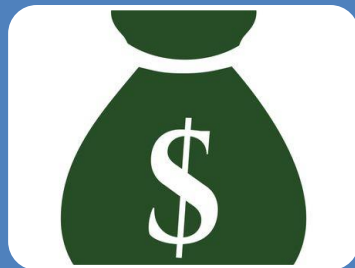
## Quality

- Storage, handling and distribution practices are closely managed and documented.
- All drugs imported must be packaged for sale to the Canadian market prior to purchase.
- The supply chain is secure.
- Screening and testing ensure that products are authentic.
- The importer conducts adverse event reporting and submits other required reports.



## Safety

- Florida selected a **limited set of drug classes** that are used to treat certain chronic conditions and comply with FDA and Health Canada requirements.: Antiviral: Hep C/HIV; COPD Asthma ; Specialty Drugs Anti-Neoplastics (cancer); Anti-psychotics ; Anti-diabetics; Antibiotics; Cardiovascular.
- The drug is not a controlled substance, an injectable, a biologic, a gas, or REMS.



## Savings

- Any savings derived will benefit all Florida taxpayers.
- The savings will reduce the overall state budget can be reinvested in other programs/services that support Floridians.



# Next Steps

- The FDA is reviewing Florida's SIP proposal.
- LSL's warehouse, where imported drugs will be stored, is structurally complete and was licensed on May 18, 2021.
- State agencies will execute agreements with AHCA by July 2021.
- A phased implementation is expected to begin within 90 days following federal approval.
- Florida's Canadian Prescription Drug Importation Program is phased to ensure safety and compliance with all FDA guidelines, serving as the national model for the upwards of 20 states who are pursuing Canadian drug importation.



# Agency Highlights



# Toll-Free Telephone Counseling Services for Fee-for-Service Recipients

## Benefit to the Program:

- Mental health is important to an individual's overall health and well-being, and the additional support offered through this new helpline will significantly improve the quality of care for eligible recipients.
- The helpline supplements behavioral health services Medicaid recipients already receive.
- It is available at no cost to Medicaid recipients age 18 + who are not enrolled in an SMMC plan.
- Services include an initial assessment and one to three telephone or virtual counseling services with follow-up as needed.

## Current Status:

- On March 15th Kepro Acquisitions, Inc. began operating the new 24/7 telephone helpline and providing short-term counseling sessions.



# Change of Ownership (CHOW) Process Update

## Benefit to the Program:

- Goal is to reduce the number of complaints and issues resulting from unreported CHOWs to improve the provider experience.
- The process update identified areas where communication with provider communities needed to be improved. New resources include:
  - CHOW Resources page on the web portal with detailed explanations of the CHOW requirements and reporting process.
  - Quick Reference Guide, FAQ, forms, facilitating tool with updated instructions.
  - Web-based training
  - Interactive changes to the web portal.

## Current Status:

- Work wrapped up March 2021

## Additional Information:

- CHOW Resources website:

[http://portal.flmmis.com/FLPublic/Provider\\_ProviderServices/Provider\\_Enrollment/Provider\\_Enrollment\\_ChangeofOwnership/tabId/159/Default.aspx](http://portal.flmmis.com/FLPublic/Provider_ProviderServices/Provider_Enrollment/Provider_Enrollment_ChangeofOwnership/tabId/159/Default.aspx)



# MCAC Subpopulation Committees

**Reestablishing the 5 Subpopulation Committees required by Special Terms and Conditions of the 1115 Waiver**

- **Behavioral Health/Substance Use**
- **Children, Including Foster Care**
- **Dental Care for Children**
- **HIV/AIDS**
- **Managed Long-Term Care**

**If interested in participating in one of these subcommittees, contact Carla Sims at [Carla.sims@ahca.myflorida.com](mailto:Carla.sims@ahca.myflorida.com)**

**Meetings will be held virtually via Microsoft Teams.**





# NEXT

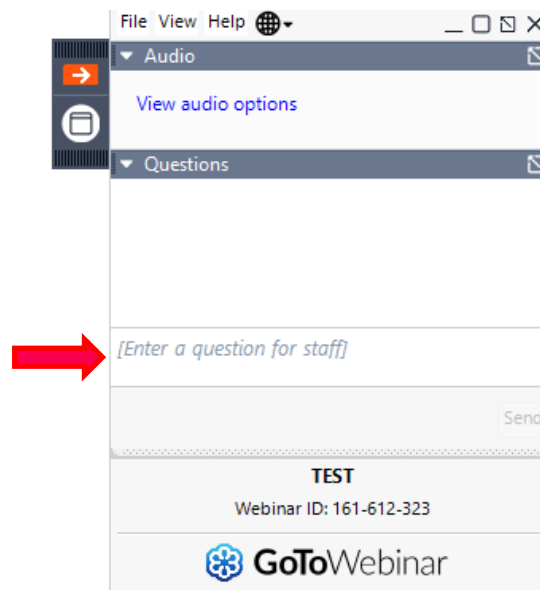
- Please send your questions or suggested meeting topics to our MCAC liaison Carla Sims at [Carla.Sims@ahca.myflorida.com](mailto:Carla.Sims@ahca.myflorida.com).





Please submit any questions into the “questions” box of your webinar control panel.

## Questions?



Thank  
you!

