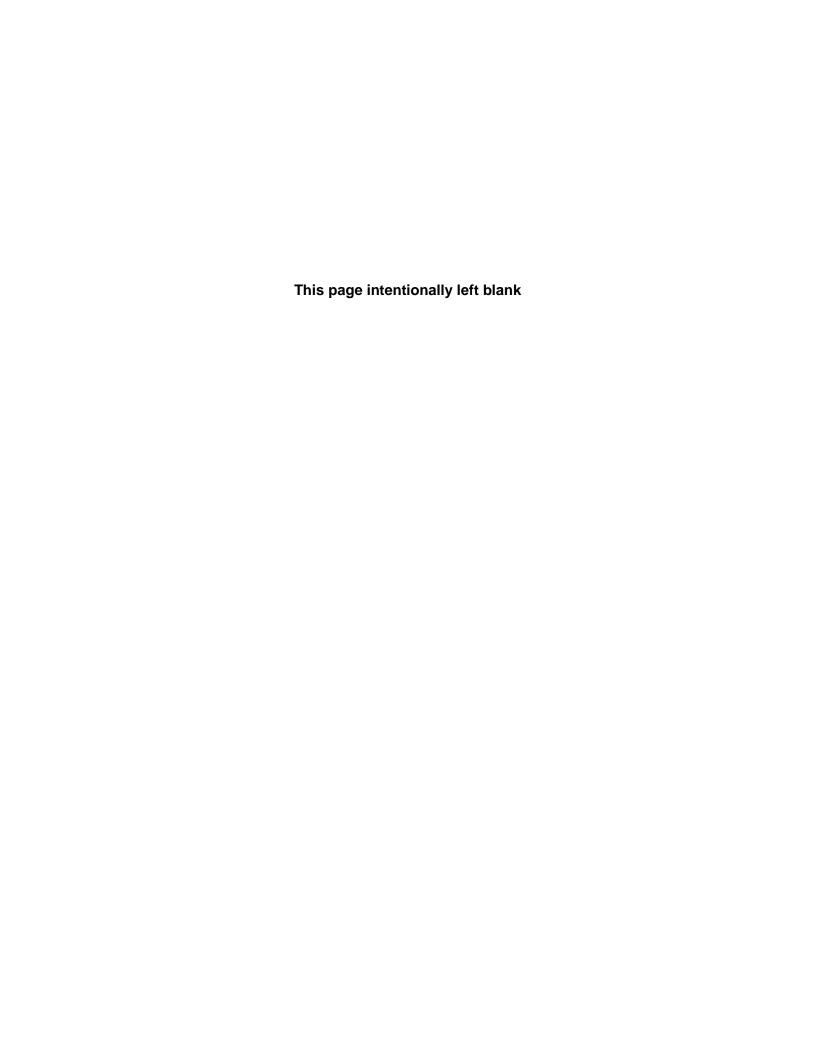
# Florida Medicaid Family Planning Waiver

Section 1115

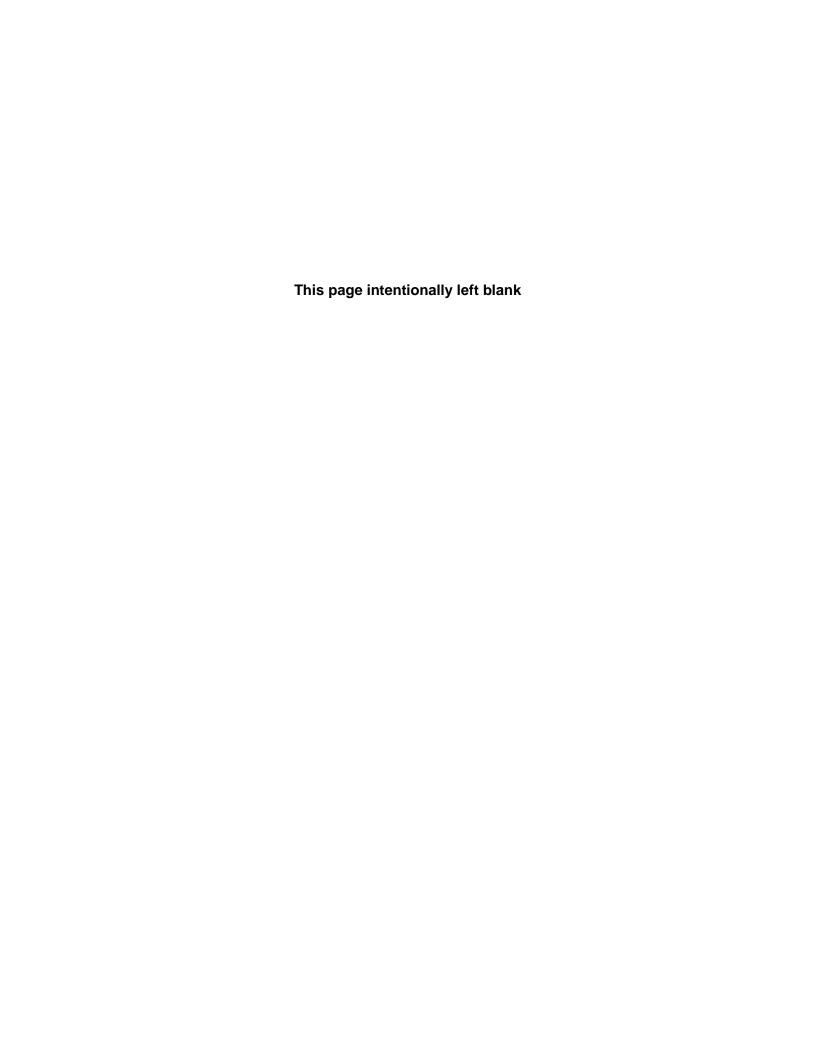
4<sup>th</sup> Quarter Report April 1, 2016 – June 30, 2016 Demonstration Year 18





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## I. Introduction

The Agency for Health Care Administration (Agency), administers Florida's 1115 Family Planning Waiver, Project Number 11-W-00135/4. The Family Planning waiver provides family planning services to all women of child-bearing ages (14–55 years) losing Florida Medicaid coverage, who have a family income at or below 185 percent of the federal poverty level, and who are not otherwise eligible for Florida Medicaid, Children's Health Insurance Program, or other health insurance coverage providing family planning services.

The overall objectives of the Family Planning waiver are to:

- Increase the access to family planning services.
- Increase child spacing intervals through effective contraceptive use.
- Reduce Florida's Medicaid costs by reducing the number of unintended pregnancies by women who, if pregnant, would be eligible for Florida Medicaid pregnancy-related services.

The waiver provides availability of family planning and family planning-related services to eligible women based upon an annual redetermination of income and other criteria specific to the demonstration.

Table 1 shows the quarters for demonstration year (DY) 18 for the waiver.

| TABLE 1 Family Planning Waiver Timeline Dates for DY18 |                 |                    |                       |  |  |  |  |
|--|-----------------|--------------------|-----------------------|--|--|--|--|
| Quarter  | Begin Date      | End Date           | Quarterly Report Due* |  |  |  |  |
| 1  | July 1, 2015    | September 30, 2015 | November 29, 2015     |  |  |  |  |
| 2  | October 1, 2015 | December 31, 2015  | March 1, 2016         |  |  |  |  |
| 3  | January 1, 2016 | March 31, 2016     | May 30, 2016          |  |  |  |  |
| 4  | April 1, 2016   | June 30, 2016      | August 29, 2016       |  |  |  |  |

<sup>\*60</sup> days following the end of quarter.

## **II. Significant Program Changes**

On June 27, 2013, prior to submitting the two-year extension request for the period January 1, 2014 – December 31, 2016, the Centers for Medicare and Medicaid Services (CMS) issued an automatic one-year temporary extension for all Family Planning waivers.

The waiver continues to provide the same services as the previous demonstration period, 2006 -2009, with the addition of one new contraceptive service. The change in services will be detailed in the discussion relating to services and providers.

The Agency submitted an extension request to CMS on June 27, 2014, for the period January 1, 2015 – December 31, 2017. The Agency received approval from CMS on December 29, 2014, for the waiver period January 1, 2015 – December 31, 2017.

## III. Enrollment and Renewal

Enrollment in the Family Planning waiver is offered to women losing Florida Medicaid pregnancy coverage at the conclusion of 60 days postpartum or beneficiaries of the Sixth Omnibus Budget Reconciliation Act (SOBRA) (Population 1), as well as women of child-bearing age losing Florida Medicaid coverage who have an income at or below 185 percent of the federal poverty level, or non-SOBRA (Population 2) beneficiaries.

To clarify the enrollment figures provided, please review the definitions below:

- 1) Enrollees described as all individuals enrolled in the Demonstration;
- 2) <u>Participants</u> defined as all individuals who accessed one or more waiver service(s) through the Demonstration; and,
- 3) <u>Member months</u> summarized as the number of months of service available to enrollees in the Demonstration; for example, if a person is eligible for 5 months of service, that person contributes 5 member months to the total.

Table 2 identifies the waiver population for the fourth quarter of DY18. The quarterly enrollees for the waiver are comprised of approximately 84% SOBRA (Population 1) with the remaining 16% in the non-SOBRA (Population 2). Regarding the level of actual enrollee participation, the table below identifies an 8% participation in the quarter; this low participation level results from incomplete paid claims data for the quarter. Data for these figures were limited to claims paid through June 2016, for dates of service April 2016 – June 2016.

| <b>TABLE 2 Population for DY18</b> July 1, 2015 – June 30, 2016 |                                   |              |                     |                                     |              |                     |  |
|---|-----------------------------------|--------------|---------------------|-------------------------------------|--------------|---------------------|--|
|   | Quarter 1                         |              |                     | Quarter 2                           |              |                     |  |
|   | July 1, 2015 – September 30, 2015 |              |                     | October 1, 2015 – December 31, 2015 |              |                     |  |
|   | Population<br>1                   | Population 2 | Total<br>Population | Population<br>1                     | Population 2 | Total<br>Population |  |
| # of Total Enrollees  | 65,060                            | 8,839        | 73,899              | 70,566                              | 8,726        | 79,292              |  |
| # of Participants   | 4,716                             | 1,871        | 6,587               | 4,479                               | 1,671        | 6,150               |  |
| # of Member Months  | 162,347                           | 21,071       | 183,418             | 178,684                             | 20,698       | 199,382             |  |
|   | Quarter 3                         |              | Quarter 4           |                                     |              |                     |  |
|   | January 1, 2016 – March 31, 2016  |              |                     | April 1, 2016 – June 30, 2016       |              |                     |  |
|   | Population                        | Population   | Total               | Population                          | Population   | Total               |  |
|   | 1                                 | 2            | Population          | 1                                   | 2            | Population          |  |
| # of Total Enrollees  | 66,617                            | 13,915       | 80,532              | 64,716                              | 15,111       | 79,827              |  |
| # of Participants   | 3,279                             | 3,191        | 6,470               | 4,822                               | 1,898        | 6,720               |  |
| # of Member Months  | 114,646                           | 86,853       | 201,499             | 166,638                             | 32,575       | 199,213             |  |

## IV. Service and Providers

- Service Utilization: No new services have been added this quarter.
- **Provider Participation:** County health departments within Florida, under the direction of the Florida Department of Health, are responsible for making eligibility determinations for all women applying to the waiver and for annual redeterminations.

## V. Program Outreach Awareness and Notification

The following outreach activities were provided during this quarter of DY18 by DOH:

#### a) General Outreach and Awareness

- Local county health departments and the department of health central office staff advocate for eligible individual clients to have access to the waiver program. Women who lose full Florida Medicaid coverage including those after pregnancy are guided through the eligibility process in an effort to ensure that applicable clients have access to family planning service coverage. Clients are provided appropriate resolution to eligibility and access issues by local county health departments and department of health staff. Any waiver data entry technical issues that occur within the Florida Medicaid Management Information System are addressed promptly to limit any delay in family planning services that clients receive.
- From April 1, 2016 to June 30, 2015, the Florida Family Health Line, a toll-free hotline, provided 2,075 callers information about the Family Planning waiver program.
- Trainings and presentations on the waiver are available to all department of health staff, including local county health department staff. Family Planning waiver training may be accessed at any time, either for new staff or as a refresher for existing staff, through the department of health family planning program's SharePoint site.
- The department of health central office staff provide individualized Family Planning waiver technical assistance and training to local county health department staff as needed.
- During scheduled statewide family planning program conference calls, the department
  of health central office staff provide guidance, policy clarifications and updates to the
  county health departments about the waiver program. The department of health central
  office staff utilize family planning program e-mail newsletters to provide up-to-date
  information as needed between the statewide family planning program conference
  calls.

#### b) Quality Assurance and Monitoring Activities

The department of health central office staff provide technical assistance for waiver issues on a continual basis. Any eligibility determination errors identified during the application process are addressed appropriately and timely by the local county health department staff and corrections submitted to the department of health central office and Hewlett Packard Enterprise. Waiver recipients are notified in writing of any changes in their eligibility. The waiver program is reviewed during each county health departments performance improvement monitoring. The department of health central office's systematic quality assurance/quality improvement process currently follows a four-year cycle: onsite monitoring visits the first year; follow-up calls the second year; desk review the third year; and a technical assistance call the fourth year. The four-year cycle then begins again for each local county health department. For the fourth quarter of DY18, April 1, 2016 to June

30, 2016, two received an onsite visit; four received a follow-up call; seven received a desk review; and four received a technical assistance call. During performance improvement monitoring, the local Florida Medicaid waiver eligibility and application process is discussed and reviewed. Performance improvement monitoring ensures that local county health departments are in compliance with waiver requirements and appropriate staff have received mandatory waiver training. Department of health central office staff also discuss any outreach activities with local county health department staff.

## VI. Interim Evaluation of Goals and Progress

The Agency has contracted with the University of Florida's Family Data Center to complete an independent evaluation of the Family Planning waiver program authorized under a Section 1115(a) Research and Demonstration Waiver. The evaluation design includes a mixed methods approach, combining quantitative and qualitative analytical techniques to assess changes in access and quality of care over time. Study populations include:

- Enrollees, who are women who have a Family Planning (FP) Aid Category Code in the Florida Medicaid Eligibility file and whose eligibility period falls within the study period by any given day or span of days, regardless of the Aid Category Effective Date.
- 2. Enrollee Participants, who are women who have an FP Aid Category Code in the Florida Medicaid Eligibility file and whose eligibility period falls within the study period by any given day or span of days, regardless of the Aid Category Effective Date, and who have received at least one paid service with a Waiver Family Planning (WFP) benefit plan code during the FP eligibility period.
- 3. Enrollee Non-Participants, who are women who have an FP Aid Category Code in the Florida Medicaid Eligibility file and whose eligibility period falls within the study period by any given day or span of days, regardless of the Aid Category Effective Date, and who have not received any paid service with a WFP benefit plan code during the FP eligibility period.
- 4. New Enrollees, who are women who have an FP Aid Category Code in the Florida Medicaid Eligibility file and the Aid Category Effective Date falls within the study period.
- 5. New Enrollee Participants, who are women who have an FP Aid Category Code in the Florida Medicaid Eligibility file and the Aid Category Effective Date falls within the study period and who have received at least one paid service with a WFP benefit plan code during the FP eligibility period.
- 6. New Enrollee Non-Participants, who are women who have an FP Aid Category Code in the Florida Medicaid Eligibility file and the Aid Category Effective Date falls within the study period and who have not received any paid service with a WFP benefit plan code during the FP eligibility period.

The goals of the Family Planning waiver are:

- **Goal 1**: Increase the access to family planning services.
- Goal 2: Increase child spacing intervals through effective contraceptive use.
- **Goal 3:** Reduce the number of unintended pregnancies.

**Goal 4:** Reduce Florida's Medicaid costs by reducing the number of unintended pregnancies by women who otherwise would be eligible for Florida Medicaid pregnancy-related services.

The research team submitted the final version of the DY16 Final Report to the Agency for

review. The report included descriptive and comparative analyses of the DY16 (July 1, 2013 through June 30, 2014) Family Planning waiver population and final results of the cost savings analysis for DY14–DY16. The Agency is in the process of developing a contract with the research team for the independent evaluation of the waiver program for DYs 17-19.

## VII. Quarterly Expenditures

Table 3 shows the quarterly expenditures through the fourth quarter of DY18.

| TABLE 3  Quarterly Expenditures for DY18  July 1, 2015 – June 30, 2016 |   |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| Quarter  | Service<br>Expenditures as<br>Reported on the<br>CMS-64 | Administrative<br>Expenditures as<br>Reported on the<br>CMS-64 | Total Expenditures as Reported on the CMS-64 | Expenditures as requested on the CMS-37* |  |  |  |
| 1  | \$1,049,897   |  | \$1,049,897                                  |  |  |  |  |
| 2  | \$1,001,665   |  | \$1,001,665                                  |  |  |  |  |
| 3  | \$1,098,731   |  | \$1,098,731                                  |  |  |  |  |
| 4  | \$1,056,443   |  | \$1,056,443                                  |  |  |  |  |
| Annual Total   | \$4,206,736   |  | \$4,206,736                                  | _  |  |  |  |

<sup>\*</sup>The Agency is unable to report expenditures as requested on the CMS-37 report as the estimated expenditures are not reported separately for the Family Planning waiver. The Agency will be unable to report this data over the lifetime of the demonstration extension.

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# State of Florida

Rick Scott, Governor

# **Agency for Health Care Administration**

Elizabeth Dudek, Secretary

2727 Mahan Drive Tallahassee, FL 32308 <u>ahca.myflorida.com</u>

## **Mission Statement**

Better Healthcare for All Floridians.