

Florida Managed Medical Assistance Waiver

**1115 Research and Demonstration Waiver
Project Number 11-W-00206/4**

Amendment Request Low Income Pool

1/17/2018

**Agency for Health Care
Administration**



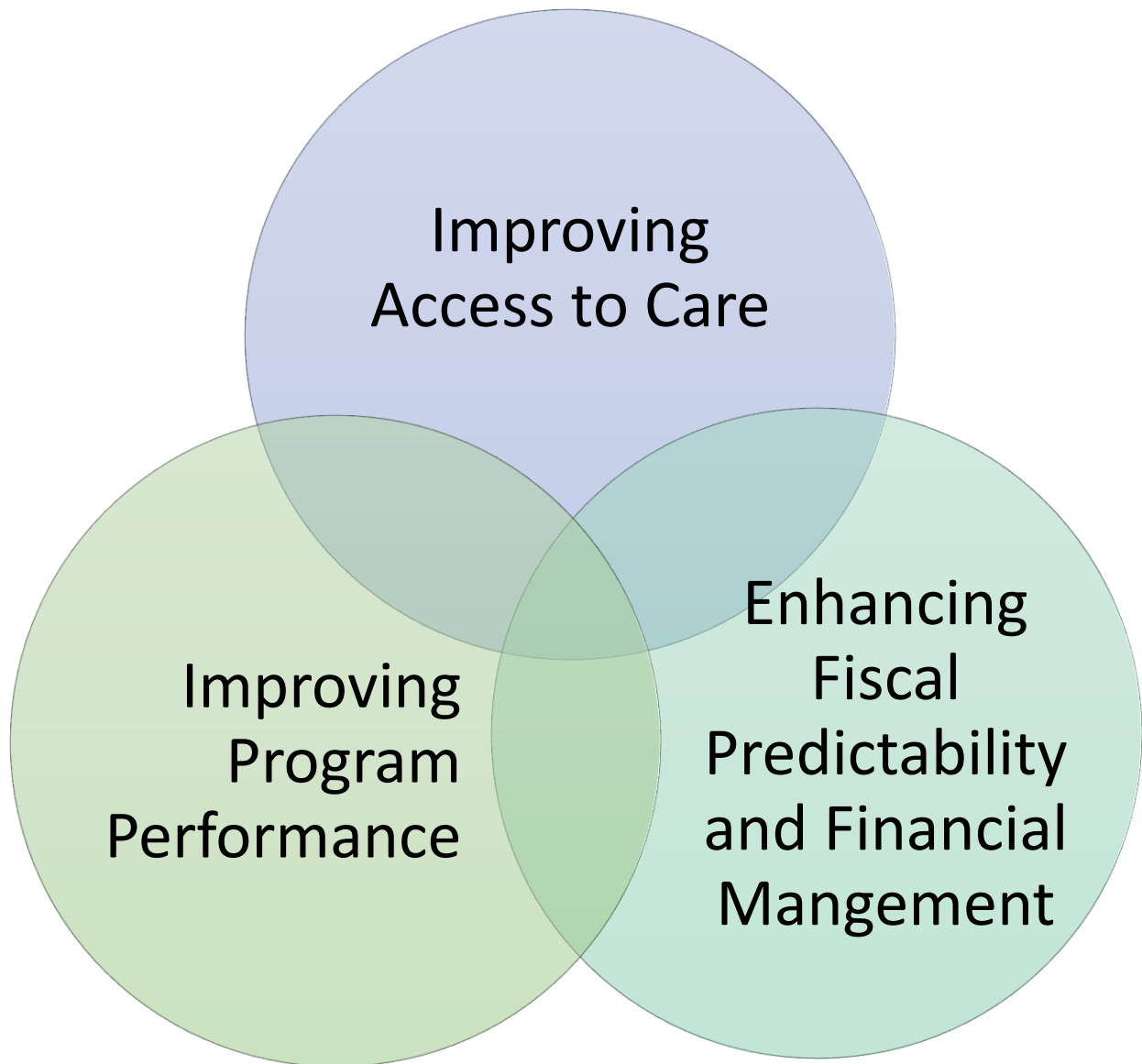
This page intentionally left blank.

Table of Contents

INTRODUCTION	3
PURPOSE, GOALS, AND OBJECTIVES	4
STATEMENT OF PURPOSE	4
EFFECT ON RECIPIENTS	4
GOALS AND OBJECTIVES.....	4
FEDERAL WAIVER AND EXPENDITURE AUTHORITIES	4
HISTORICAL OVERVIEW	5
TRIBAL NOTIFICATION	6
CONSULTATION WITH INDIAN HEALTH PROGRAMS	6
EVALUATION DESIGN	7
BUDGET NEUTRALITY	8
ATTACHMENT I TRIBAL NOTIFICATION	9
ATTACHMENT II LETTERS OF SUPPORT.....	13

Introduction

The Managed Medical Assistance (MMA) program improves health outcomes for Florida Medicaid recipients while maintaining fiscal responsibility. This is achieved through care coordination, patient engagement in their own health care, enhancing fiscal predictability and financial management, improving access to coordinated care and improving overall program performance.



Purpose, Goals, and Objectives

Statement of Purpose

The Agency for Health Care Administration (Agency) is seeking federal authority to amend Florida Medicaid's 1115 Managed Medical Assistance (MMA) Waiver (Project Number 11-W-00206/4) to modify the Low Income Pool (LIP) Provider Participation requirements described in the Special Terms and Conditions (STC) #69 related to Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC).

Effect on Recipients

Recipients will not be affected by this amendment.

Goals and Objectives

The objective of this amendment is to remove the requirement that FQHCs and RHCs receive their full payment from the Medicaid health plans and reduce a requirement so these providers only have to contract with 50%, rather than 100%, of Medicaid standard plans in their region. The Agency engaged in intensive discussions with providers about implementation of the new LIP FQHC/RHC STCs and gave assurances of actions we would take to mitigate their concerns. When these efforts were unable to gain a consensus from providers, the Agency determined that this amendment was needed to ensure that providers could access the LIP funds.

The State proposes to amend the STC #69, subparagraph c., as follows:

Federally Qualified Health Centers and Rural Health Clinics

1. Must contract with at least fifty percent of the Standard Plan MCOs in their corresponding region.
2. Must be enrolled in Florida Medicaid.

In addition, the State requests the flexibility to grant an exemption to MCO contracting requirements for FQHCs and RHCs when the provider has demonstrated it was refused sufficient contracts despite good faith efforts to negotiate with the MCOs.

Federal Waiver and Expenditure Authorities

The State is not requesting any changes to the current waiver authorities and expenditure authorities authorized December 20, 2017. The current approved waiver authorities and expenditure authorities are included in the Special Terms and Conditions on the Agency's Web site at

http://ahca.myflorida.com/medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waivers/mma_fed_auth.shtml

Historical Overview

In 2005, the State received CMS approval for Florida's 1115 MMA Waiver, previously named "Medicaid Reform". The "Medicaid Reform" program operated in Broward and Duval Counties, Baker, Clay and Nassau Counties and established LIP to ensure continued support for the provision of health care services to Medicaid, underinsured and uninsured populations.

In 2011, the Florida Legislature created Part IV of Chapter 409, Florida Statutes (F.S.), directing the Agency to create the Statewide Medicaid Managed Care (SMMC) program. The SMMC program has two key components: the MMA program and the Long-term Care (LTC) program. The State submitted an amendment request to CMS to amend the 1115 Medicaid Reform Waiver in order to implement the MMA program. The State received approval from CMS on June 14, 2013 to terminate the Medicaid Reform program, implement the Managed Medical Assistance (MMA) program, and rename the waiver "Managed Medical Assistance".

In 2014, the State received approval from CMS to extend all portions of the MMA Waiver for three years, with the exception of the LIP program. The approval from CMS only authorized extension of the LIP program for one year, from July 1, 2014 through June 30, 2015. During the one-year LIP extension, the state was required to use a portion of the funds to commission a report from an independent entity on Medicaid provider payment in the state that reviews the adequacy of payment levels, and the adequacy, equity, accountability and sustainability of the State's funding mechanisms for these payments. On October 15, 2015, CMS approved an amendment that authorized the LIP program through June 30, 2017 based on the States revisions to the LIP program administration and fund distribution.

On August 3, 2017 the State received approval from CMS to extend all portions of the MMA Waiver, including the LIP program, for the period August 3, 2017 through June 30, 2022. The approval from CMS allows the state to continue operating the MMA program while increasing the LIP to \$1.5 billion annually.

Tribal Notification

Consultation with Indian Health Programs

The State sent written correspondence to the Indian Health Programs located in Florida to solicit input on the waiver amendment request (Attachment I). The State of Florida does not have any Urban Indian Organizations, but has two federally recognized tribes: the Seminole Tribe and Miccosukee Tribe.

Evaluation Design

The current evaluation design includes research questions that sufficiently analyze the LIP program under this demonstration. Therefore, the State will not be modifying the evaluation based on this amendment.

Budget Neutrality

The State is required to provide an estimate of the expected increase or decrease in annual enrollment, and in annual aggregate expenditures, including historic enrollment or budgetary data, if applicable. This includes a financial analysis of any changes to the demonstration requested by the State in its amendment request. There will be no changes to budget neutrality as a result of this amendment.

Attachment I

Tribal Notification



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

January 2, 2018

Ms. Cassandra Osceola
Health Director
Miccosukee Tribe of Indians of Florida
P. O. Box 440021, Tamiami Station
Miami, FL 33144

Dear Ms. Osceola:

Further to my letter dated December 22, 2017, the Agency is proposing to amend the 1115 Managed Medical Assistance (MMA) Waiver' Special Term and Condition (STC) #69, subparagraph c., to read:

Federally Qualified Health Centers and Rural Health Clinics

1. Must contract with at least fifty percent of the Standard Plan MCOs in their corresponding region.
2. Must be enrolled in Florida Medicaid.

To view the current approved STCs, please visit the Agency's Web site at http://ahca.myflorida.com/medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waiver/s/docs/mma/FL_MMA_STCs_CMS_APPROVED_2017-12-21.pdf.

If you would like to make any comments or need additional information, please contact Heather Morrison of my staff by phone at (850) 412-4034 or by email at Heather.Morrison@ahca.myflorida.com.

Sincerely,

/s/

Beth Kidder
Deputy Secretary for Medicaid

BK/jzr
cc: Alfred Phillips, Miccosukee Health Department



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

January 2, 2018

Dr. Paul Isaacs
Executive Director, Health and Human Services
Seminole Tribe of Florida
6365 Taft Street, Suite 2004
Hollywood, FL 33024

Dear Dr. Isaacs:

Further to my letter dated December 22, 2017, the Agency is proposing to amend the 1115 Managed Medical Assistance (MMA) Waiver' Special Term and Condition (STC) #69, subparagraph c., to read:

Federally Qualified Health Centers and Rural Health Clinics

1. Must contract with at least fifty percent of the Standard Plan MCOs in their corresponding region.
2. Must be enrolled in Florida Medicaid.

To view the current approved STCs, please visit the Agency's Web site at http://ahca.myflorida.com/medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waivers/docs/mma/FL_MMA_STCs_CMS_APPROVED_2017-12-21.pdf.

If you would like to make any comments or need additional information, please contact Heather Morrison of my staff by phone at (850) 412-4034 or by email at Heather.Morrison@ahca.myflorida.com.

Sincerely,

/s/

Beth Kidder
Deputy Secretary for Medicaid

BK/jzr
cc: Kathy Wilson, Seminole Health Department



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

January 17, 2018

Ms. Cassandra Osceola
Health Director
Miccosukee Tribe of Indians of Florida
P. O. Box 440021, Tamiami Station
Miami, FL 33144

Dear Ms. Osceola:

Further to my letters dated December 22, 2017 and January 2, 2018, the Agency is proposing an additional amendment to the 1115 Managed Medical Assistance (MMA) Waiver Special Term and Condition (STC) #69. The Agency is requesting the flexibility to grant Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) an exemption from the proposed managed care organization participation requirements. The exemption will allow an FQHC or RHC to receive Low Income Pool funding when the FQHC or RHC has made a good faith effort, but was unable, to contract with a sufficient number of health plans.

To view the current approved STCs, please visit the Agency's Web site at http://ahca.myflorida.com/medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waiver/s/docs/mma/FL_MMA_STCs_CMS_APPROVED_2017-12-21.pdf.

If you would like to make any comments or need additional information, please contact Heather Morrison of my staff by phone at (850) 412-4034 or by email at Heather.Morrison@ahca.myflorida.com.

Sincerely,

Beth Kidder
Deputy Secretary for Medicaid

BK/jzr
cc: Alfred Phillips, Miccosukee Health Department



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

January 17, 2018

Dr. Paul Isaacs
Executive Director, Health and Human Services
Seminole Tribe of Florida
6365 Taft Street, Suite 2004
Hollywood, FL 33024

Dear Dr. Isaacs:

Further to my letters dated December 22, 2017 and January 2, 2018, the Agency is proposing an additional amendment to the 1115 Managed Medical Assistance (MMA) Waiver Special Term and Condition (STC) #69. The Agency is requesting the flexibility to grant Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) an exemption from the proposed managed care organization participation requirements. The exemption will allow an FQHC or RHC to receive Low Income Pool funding when the FQHC or RHC has made a good faith effort, but was unable, to contract with a sufficient number of health plans.

To view the current approved STCs, please visit the Agency's Web site at http://ahca.myflorida.com/medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waivers/docs/mma/FL_MMA_STCs_CMS_APPROVED_2017-12-21.pdf.

If you would like to make any comments or need additional information, please contact Heather Morrison of my staff by phone at (850) 412-4034 or by email at Heather.Morrison@ahca.myflorida.com.

Sincerely,

Beth Kidder
Deputy Secretary for Medicaid

BK/jzr
cc: Kathy Wilson, Seminole Health Department

Attachment II

Letters of Support

FLORIDA ASSOCIATION OF FACHC COMMUNITY HEALTH CENTERS THE VOICE OF PRIMARY CARE

January 2, 2018

Justin Senior
Secretary
Florida Agency for Health Care Administration
2727 Mahan Drive, Mail Stop 8
Tallahassee, FL 32308

Dear Secretary Senior:

On behalf of each of Florida's federally qualified health centers (FQHCs) and the Florida Association of Community Health Centers, I wish to express our full support in your efforts to amend the 1115 Waiver by removing the FQHC condition of participation for LIP requiring capitation of the wrap payments. The impact to our centers, and more so for the hundreds of thousands of people we will be able to serve, is immeasurable.

I also want to take a moment to thank you and Beth Kidder for working through this very difficult issue with us. Please know that we intend to continue working with the Agency on a long-term solution that will have a positive impact on the Medicaid program and the people for whom we provide services. That is certainly a goal we all share.

If there is anything you might need from me or collectively from the Association, please do not hesitate to call.

Sincerely,



Andrew R Behrman, MBA
President & CEO

Cc: Beth Kidder, Agency for Healthcare Administration
Anita Riels, Chair, FACHC

2340 Hansen Lane Tallahassee, FL 32301 (850) 942-1822 www.fachc.org
