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Managed Medical Assistance Program Goes Live for First Three Medicaid Regions

~ Recipients from Panama City to Jacksonville become the first to receive services ~

Tallahassee, Fla.— The Agency for Health Care Administration is celebrating the launch of Florida’s Managed Medical Assistance (MMA) program today. Following an extensive outreach campaign, recipients in three regions that cover an area from Panama City to Jacksonville and as far south as Lake and Sumter Counties will begin receiving services from health plans contracted to participate in the MMA program.

The Managed Medical Assistance program is the second and final installment of Florida’s new system of Statewide Medicaid Managed Care (SMMC). The first segment, covering long-term care services for aged and disabled adults and children, was rolled out statewide from August 1, 2013 to March 1, 2014. The MMA program, which will also roll out on a regional basis, is part of a plan to change Florida’s Medicaid delivery system that was originally set in motion back in 2011. Today, the Agency’s planning and outreach efforts will culminate with the rollout of the first three regions.

“We are extremely excited to move forward with the rollout of the Managed Medical Assistance program around the state,” said Agency Secretary Liz Dudek. “There have been many, many hours invested in contract negotiations, planning conferences, and stakeholder education and outreach events. I personally want to extend my most sincere appreciation for the efforts of our staff, our Agency partners, Florida’s healthcare providers, and the patient advocacy organizations that have all assisted us in informing recipients about this program. We look forward to a smooth statewide implementation over the next three months.”

Medicaid Regions 2, 3 and 4* are the first group to transition to the Managed Medical Assistance program. They will be followed by Regions 5, 6 and 8 (June 1), 10 and 11 (July 1), and 1, 7 and 9 (August 1). During the transition period, it is important that recipients and providers work together to maintain a 60-day continuity of care period.

“One of our biggest focuses moving forward is ensuring that recipients are able to transition to the MMA program without missing any appointments, treatments, or prescriptions,” said Florida’s Medicaid Director, Justin Senior. “We want to make sure that providers, whether they are in the managed care network or not, know that they should honor appointments and prescriptions in the weeks immediately following the roll-out date and that plans will pay providers for these services in a timely manner.”

More specifically, the Agency has instituted the following continuity of care provisions:



- **Health care providers should not cancel appointments with current patients.** Health plans must honor any ongoing treatment that was authorized prior to the recipient's enrollment into the plan for up to 60 days after MMA starts in each region.
- **Providers will be paid.** Providers should continue providing any services that were previously authorized, regardless of whether the provider is participating in the plan's network. Plans must pay for previously authorized services for up to 60 days after MMA starts in each region, and must pay providers at the rate previously received for up to 30 days.
- **Prescriptions will be honored.** Plans must allow recipients to continue to receive their prescriptions through their current provider, for up to 60 days after MMA starts in their respective region, until their prescriptions can be transferred to a provider in the plan's network.

There are two methods of addressing concerns and providing feedback during the MMA rollout period. First, recipients and providers can complete an online form to receive assistance with issues regarding enrollment, billing, or eligibility. This form can be accessed by selecting the large blue button on the right-hand side of the SMMC website referenced below. Additionally, program-specific questions and concerns can be sent to a dedicated email inbox at FLMedicaidManagedCare@ahca.myflorida.com, where they will be addressed and added to a regularly updated frequently asked questions document.

In total, the Managed Medical Assistance program will affect approximately 85 percent of Florida's 3.5 million Medicaid recipients. To better inform providers, plans, and recipients, the Agency has created a website dedicated to the Statewide Medicaid Managed Care program. Here you can find detailed information about the program as well as a calendar of outreach events and trainings and a frequently asked questions document. For more information about Statewide Medicaid Managed Care and its subsets, please visit <http://ahca.myflorida.com/SMMC>.

** Regions 2, 3 and 4 include Alachua, Baker, Bradford, Calhoun, Citrus, Clay, Columbia, Dixie, Duval, Flagler, Franklin, Gadsden, Gilchrist, Gulf, Hamilton, Hernando, Holmes, Jackson, Jefferson, Lafayette, Lake, Leon, Levy, Liberty, Madison, Marion, Nassau, Putnam, St. Johns, Sumter, Suwannee, Taylor, Union, Volusia, Wakulla, and Washington counties.*

The Agency for Health Care Administration is committed to better health care for all Floridians. The Agency administers Florida's Medicaid program, licenses and regulates more than 45,000 health care facilities and 34 health maintenance organizations, and publishes health care data and statistics at www.FloridaHealthFinder.gov. Additional information about Agency initiatives is available via Facebook ([AHCAFlorida](https://www.facebook.com/AHCAFlorida)), Twitter ([@AHCA_FL](https://twitter.com/AHCA_FL)) and YouTube ([/AHCAFlorida](https://www.youtube.com/AHCAFlorida)).

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