Florida MEDS-AD Waiver

1115 Research and Demonstration Waiver
(Project Number 11-W-00205/4)

Public Notice Document
August 1, 2017 – August 30, 2017

Agency for Health Care Administration
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Statement of Purpose

The State of Florida is seeking federal authority to transition authority for the 1115 MEDS-AD Waiver (Project No. 11-W-00205/4) under the authority of Florida’s 1115 Managed Medical Assistance Waiver, effective January 1, 2018. The State is currently operating the MEDS-AD Waiver under a temporary extension from the Centers from Medicare and Medicaid Services until December 31, 2017.

Background/History

In 2005, State legislation (Chapter 2005-60, Laws of Florida) directed the Agency to discontinue coverage of certain aged and disabled individuals with incomes up to 88 percent of the federal poverty level (an optional Medicaid eligibility group) under the Medicaid state plan. However, concerned that this population was at risk for costly adverse events, the Florida Legislature directed the Agency to seek a federal waiver to continue to provide benefits to a subset of the individuals in this eligibility group.

The current Florida MEDS-AD Research and Demonstration Waiver began operations in January 2006 and provides Florida Medicaid coverage for aged or disabled residents of the State of Florida with incomes at or below 88 percent of the federal poverty level and assets at or below $5,000 for an individual or $6,000 for a couple. Coverage is available to those aged and disabled persons who are either receiving or eligible to receive institutional care, hospice or HCBS, or who are not eligible for Medicare. The waiver is designed to delay or prevent the need for institutionalization of these vulnerable individuals by maintaining their level of care in the community longer through the provision of:

- Access to health care services
- High-intensity pharmacy case management services for non-institutionalized individuals (also referred to as the Medication Therapy Management (MTM) program)

The continued coverage is designed to avoid costs of preventable hospitalizations or institutional placement that would otherwise occur had these vulnerable individuals not had access to prescribed drugs and other medical services.

The MTM program provides high intensity pharmacy case management to a sample of recipients who are not Medicare eligible, institutionalized, or in hospice care. Recipients who elect to participate in the MTM program engage in a comprehensive medication review with a pharmacist and are provided a Patient Medication Action Plan at the conclusion of the review. The results of the comprehensive medication review, along with the Patient Medication Action Plan, are sent to the recipient’s treating practitioner. Quarterly follow-up calls are completed with the recipient and recommendations are communicated to the treating practitioner, as necessary. The goal of this process is to maximize opportunities for patient treatment adherence and facilitate use of evidence-based prescribing practices among treating practitioners.
There are currently approximately 50,000 recipients enrolled in the MEDS-AD Waiver. Approximately 91% are enrolled in an MMA plan. The MMA plans are required to provide case management/care coordination services and programs that have similar objectives to the MTM program. To avoid duplication, only recipients who are receiving services through the fee-for-service delivery system (approximately 9% of the MEDS-AD population) are potentially eligible to participate in the MTM program. As a result, the total population that is eligible to participate in the MTM program is small and continues to diminish as more individuals elect to enroll in an MMA plan. To recruit the minimum number of MTM participants (100), the evaluation team historically has had to contact up to three times this number of individuals. Consequently, maintaining the integrity of the MTM program has become increasingly difficult given the declining eligible population, reduced interest, and the attrition rate from the waiver whereby individuals participating in the MTM program transition to another Florida Medicaid eligibility group or program prior to completing the MTM program.

**Transition Plan for the MEDS-AD Population**

With this amendment, the State is seeking federal approval to transition the federal authority to serve individuals enrolled in the 1115 MEDS-AD Waiver to the 1115 MMA Waiver. This is a technical amendment request – transitioning the authority to operate the demonstration from one 1115 waiver to another. The eligibility, enrollment, and benefit design elements that are currently approved in the 1115 MEDS-AD Waiver will not substantively change.

Recipients enrolled in the demonstration will continue to receive medical/acute care services through an MMA plan, consistent with the mandatory and voluntary participation requirements currently approved in the 1115 MMA Waiver. Recipients who do not enroll in an MMA plan will receive services through the Florida Medicaid fee-for-service delivery system.

The Agency will allow recipients who are currently enrolled in the MTM program as of July 1, 2017 to complete their term. The Agency will not enroll new participants after that cohort of participants completes the program. Since the majority of MEDS-AD recipients are receiving services through the MMA program, and are already eligible to receive case management/care coordination through their managed care plan, the Agency believes that the goals and objectives of the MTM program are satisfied by the design and contractual requirements of the SMMC program. As such, the Agency is not requesting authority to continue the MTM program as a unique demonstration component under the 1115 MMA Waiver.

**Transition Objectives**

The objective of this transition is to ensure continued Medicaid coverage and access to needed health care services for vulnerable populations while also achieving administrative simplifications/efficiencies through the consolidation of federal authorities.
Effect on Recipients

Individuals enrolled in the MEDS-AD Waiver will continue to be eligible for Florida Medicaid and receive their acute care services in the same manner they do now unless they choose to change MMA plan or their service provider is no longer available.

Public Notice

The State will conduct the public comment period from August 1, 2017 – August 30, 2017 to solicit input on the waiver transition/phase-out request. See the “Public Notice Process” section for additional information.
Public Notice Process

The State will conduct the public comment period from August 1, 2017 – August 30, 2017 to solicit input on the waiver amendment request.

The State notified stakeholders of the public comment period using the following methods:

- Published public notice on July 31, 2017 in the Florida Administrative Register (FAR) in compliance with Chapter 120, Florida Statutes
- Emailed individuals and organizations on its interested stakeholders list
- Provider Alert posted on the Agency’s website

Public Notice Materials

The State posted the dates, times, and locations of two public meetings and a link to this public notice document on the Agency’s Web site at: http://ahca.myflorida.com/Medicaid/Policy_and_Quality/Policy/federal_authorities/federal_waivers/index.shtml

The State provided this link in the FAR notice and email to interested stakeholders.

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.

Public Meetings

The State will hold two public meetings during the public comment period. Individuals who are unable to attend the meetings in person may participate via conference call by using the toll-free number provided. During the meetings, the State will provide a brief overview of the 1115 MMA Waiver amendment request and allow time for public comment.
<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Time</th>
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</thead>
<tbody>
<tr>
<td>Tallahassee</td>
<td>August 9, 2017</td>
<td>11:00 am-12:00 pm</td>
</tr>
<tr>
<td>Agency for Health Care Administration 2727 Mahan Drive, Building 3 Tallahassee, FL 32308 Conference Line: 1-877-309-2071 Participant Code: 798-884-808</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tampa</td>
<td>August 11, 2017</td>
<td>1:00 pm-2:00 pm</td>
</tr>
</tbody>
</table>

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least seven days before the workshop/meeting by contacting Kimberly Quinn at (850) 412-4284 or by email at Kimberly.Quinn@ahca.myflorida.com.

Individuals who are hearing or speech impaired may contact the Agency using the Florida Relay Service, 1 (800) 955-8771 (TDD) or 1 (800) 955-8770 (Voice).

**Submitting Written Comments**

Written comments on the waiver extension may be submitted via mail or email with the subject “1115 MEDS-AD Amendment – Waiver Consolidation” during the public comment period.

**Mail:**
Agency for Health Care Administration
Bureau of Medicaid Policy
2727 Mahan Drive, MS #20
Tallahassee, Florida 32308

**Email:** FLMedicaidWaivers@ahca.myflorida.com
Attachment I

Tribal Notification

July 31, 2017

Ms. Cassandra Oseola
Health Director
Micosukee Tribe of Florida
P.O. Box 440021, Tamiami Station
Miami, FL 33144

Dear Ms. Oseola:

The Agency for Health Care Administration (Agency) is announcing the start of a 30-day public notice and comment period. The Agency is seeking to amend Florida’s 1115 Managed Medical Assistance (MMA) Waiver and 1915(b)(c) Long-term Care (LTC) Waiver to:

- Transition individuals enrolled in the 1915(c) Adults with Cystic Fibrosis (ACF) Waiver and the 1915(c) Traumatic Brain and Spinal Cord Injury (TBI/SCI) Waiver into the 1915(b)(c) LTC Waiver in order for them to continue to receive home and community-based services (HCBS). This change will result in no loss of Medicaid coverage or services for these populations.
- Transition individuals enrolled in the 1915(c) Project AIDS Care (PAC) Waiver who are receiving HCBS and who meet nursing facility level of care into the 1915(b)(c) LTC Waiver in order for them to continue to receive HCBS. This change will result in no loss of Medicaid coverage or services for the population.
- Establish financial and non-financial eligibility criteria (specified in section 409.904, Florida Statutes) in the 1115 MMA Waiver that will enable individuals who are diagnosed with Acquired Immune Deficiency Syndrome (AIDS) to obtain and maintain Medicaid coverage without the need for enrollment in the 1915(c) PAC Waiver. This population does not need HCBS but are at risk for institutionalization without access to necessary medication and care services (prescribed drugs, physician services, etc.). This change enables the population to maintain access to needed services and will result in no loss of Medicaid coverage.
- Transition the federal authority to serve individuals enrolled in the 1115 MEDS-AD Waiver to the 1115 MMA Waiver. This is a technical change; the population will continue to have access to all Medicaid-covered services.

The vast majority of these individuals are currently enrolled in an MMA plan for receipt of their medical, behavioral health, prescribed drugs, and dental services. The proposed changes will not affect how they receive these services or the plan in which they are enrolled.

Individuals who are transitioning to the 1915(b)(c) LTC Waiver will have an opportunity to choose their LTC plan and will continue to have access to HCBS that are comparable to the services they are currently utilizing. In addition, the LTC program offers a more robust benefit package than the 1915(c) TBI/SCI, ACF, and PAC Waivers, including enhanced case management standards and expanded benefits. The LTC program also offers individuals an opportunity to receive care/services through a program with enhanced quality outcome measures.

The Agency is also seeking authority from the Centers for Medicare and Medicaid Services to end the 1915(c) TBI/SCI, ACF, and PAC Waivers, and the 1115 MEDS-AD Waiver once all transitions (described above) are complete.
The Agency is seeking federal approval to have all transitions completed by January 1, 2018.

The Agency will conduct a 30-day public comment period from August 1, 2017 through August 30, 2017. The Agency will consider all public comments received during the public notice period regarding the proposed amendments. You may view the full waiver amendment requests on the Agency’s Web site at the following link: http://ahca.myflorida.com/Medicaid/Policy_and_Quality/Policy/other_authorities/federal waivers/index.shtml.

The Agency has scheduled two public meetings to solicit meaningful input on the proposed waiver amendments. The meetings will be held in:

- Tallahassee, Florida on August 9, 2017 from 11:00 am – 12:00 pm at the Agency for Health Care Administration, 2727 Mahan Drive, Building 3, Conference Room B, Tallahassee, FL 32308. To participate by phone, please call: 1 (877) 309-2071 and enter the participant passcode: 798-884-808. To participate by webinar, please visit: https://attendee.gotowebinar.com/register/4945210935346411.

- Tampa, Florida on August 11, 2017 from 1:00 – 2:00 pm at the Agency for Health Care Administration, 8800 N. Dale Mabry Highway, Suite 220, Main Training Conference Room, Tampa, FL 33614. To participate by phone, please call: 1 (877) 309-2071 and enter the participant passcode: 536-371-224. To participate by webinar, please visit: https://attendee.gotowebinar.com/register/3884192334865326387.

When providing comments, please include “Proposed Amendment to 1115 MMA Waiver,” “Proposed Amendment to 1115 MEDS-AD Waiver,” “Proposed Amendment to 1915(b)/(c) Long-term Care Waiver,” or “Proposed Amendment to 1915(c) Project AIDS Care Waiver” in the subject line as appropriate:

- Submit email comments to FL.MedicaidWaivers@ahca.myflorida.com.
- Submit comments by mail to Bureau of Medicaid Policy, Agency for Health Care Administration, 2727 Mahan Drive, MS 20, Tallahassee, Florida 32308.

If you have any questions about the amendment request or would like to hold a call, please contact Kimberly Quinn of my staff via email at Kimberly.Quinn@ahca.myflorida.com or by phone at (850) 412-4284.

Sincerely,

Beth Kidd
Deputy Secretary for Medicaid

BK/kq
July 31, 2017

Paul Isaacs, MD, CHFP, CHC
Executive Director, Health & Human Services
Seminole Tribe of Florida
6305 Taft Street, Suite 2004
Hollywood, FL 33024

Dear Dr. Isaacs:

The Agency for Health Care Administration (Agency) is announcing the start of a 30-day public notice and comment period. The Agency is seeking to amend Florida’s 1115 Managed Medical Assistance (MMA) Waiver and 1915(b)(c) Long-term Care (LTC) Waiver to:

- Transition individuals enrolled in the 1915(c) Adults with Cystic Fibrosis (ACF) Waiver and the 1915(c) Traumatic Brain and Spinal Cord Injury (TBI/SCI) Waiver into the 1915(b)(c) LTC Waiver in order for them to continue to receive home and community-based services (HCBS). This change will result in no loss of Medicaid coverage or services for these populations.
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The Agency is also seeking authority from the Centers for Medicare and Medicaid Services to end the 1915(c) TBI/SCI, ACF, and PAC Waivers, and the 1115 MEDS-AD Waiver once all transitions (described above) are complete.

2727 Mahan Drive • Mail Stop #6
Tallahassee, FL 32308
AHCA.MyFlorida.com
Facebook.com/AHCAFlorida
Twitter.com/AHCA_FL
Slideshare.net/AHCAFlorida
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The Agency will conduct a 30-day public comment period from August 1, 2017 through August 30, 2017. The Agency will consider all public comments received during the public notice period regarding the proposed amendments. You may view the full waiver amendment requests on the Agency’s Web site at the following link:

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When providing comments, please include “Proposed Amendment to 1115 MMA Waiver,” “Proposed Amendment to 1115 MEDS-AD Waiver,” “Proposed Amendment to 1915(b)(3) Long-term Care Waiver,” or “Proposed Amendment to 1915(c) Project AIDS Care Waiver” in the subject line as appropriate:

- Submit email comments to FLMedicaidWaivers@ahca.myflorida.com.
- Submit written comments by mail to Bureau of Medicaid Policy, Agency for Health Care Administration, 2727 Mahan Drive, MS 20, Tallahassee, Florida 32308.

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Sincerely,

Beth Kidder
Deputy Secretary for Medicaid

BK/kq