During the 2011 Florida Legislative Session, the House and Senate passed House Bill 7107 and HB 7109, which require the state Medicaid program to implement a Statewide Medicaid Managed Care Program.

~ 1915 (b)(c) Waiver
~ 1115 Demonstration Waiver
~ State Plan Amendment
Statewide Medicaid Managed Care: Legislation and Key Components

• In 2011, the Florida Legislature created a new program: Statewide Medicaid Managed Care (SMMC) Chapter 409, Part IV, Florida Statutes

• The SMMC program has two key program components:
  ▪ Long-term Care Managed Care Program
    ▪ Will begin in the fall of 2013
    ▪ Only provides long-term care services
  ▪ Managed Medical Assistance Program
    ▪ Will begin in mid - 2014
    ▪ Provides all health care services other than long-term care services to eligible recipients
Statewide Medicaid Managed Care (2013/2014): Status of Federal Approval

• Long-term Care Managed Care Program:
  – The Agency submitted the 1915b/c application for the Long-term Care Managed Care waiver program on August 1, 2011.
  – The LTC SMMC waiver went “back on the clock” for the final 90 day review period on November 9, 2012.
  – After much negotiation/ conversation/ provision of additional information, we anticipate approval by early February, 2013.
## LTC Timelines: Invitation to Negotiate

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Release of Invitation to Negotiate</td>
<td>June 29, 2012</td>
</tr>
<tr>
<td>Deadline for Receipt of Written Inquiries</td>
<td>July 6, 2012</td>
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<tr>
<td>Vendor Conference for Regions 1-11</td>
<td>July 19, 2012</td>
</tr>
<tr>
<td>Deadline for receipt of responses</td>
<td>August 28, 2012</td>
</tr>
<tr>
<td>Published List of Respondents for Provider Comments</td>
<td>August 31, 2012</td>
</tr>
<tr>
<td>Posting of Notice of Intent to Award</td>
<td>January 15, 2013</td>
</tr>
</tbody>
</table>
## LTC Intent to Award Per Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Plans</th>
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<tbody>
<tr>
<td>1</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan</td>
</tr>
<tr>
<td>3</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.</td>
</tr>
<tr>
<td>4</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.</td>
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<td>5</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.</td>
</tr>
<tr>
<td>6</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan</td>
</tr>
<tr>
<td>7</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan</td>
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<tr>
<td>8</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc.</td>
</tr>
<tr>
<td>9</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan</td>
</tr>
<tr>
<td>10</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, Amerigroup Florida, Inc.</td>
</tr>
<tr>
<td>11</td>
<td>American Eldercare, Inc.; Sunshine State Health Plan, United Healthcare of Florida, Inc., Coventry Health Plan, Amerigroup Florida Inc.</td>
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</table>
# LTC Timelines: Recipient Enrollment Schedule

<table>
<thead>
<tr>
<th>Region</th>
<th>Counties</th>
<th>Plan Readiness Deadline</th>
<th>Enrollment Effective Date</th>
<th>Total Eligible Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Brevard, Orange, Osceola and Seminole</td>
<td>1-May-13</td>
<td>1-Aug-13</td>
<td>Region 1: 9,338</td>
</tr>
<tr>
<td>8 &amp; 9</td>
<td>Charlotte, Collier, DeSoto, Glades, Hendry, Lee and Sarasota, Indian River, Martin, Okeechobee, Palm Beach and St. Lucie</td>
<td>1-Jun-13</td>
<td>1-Sep-13</td>
<td>Region 8: 5,596; Region 9: 7,854; Total = 13,450</td>
</tr>
<tr>
<td>1, 2 &amp; 10</td>
<td>Escambia, Okaloosa, Santa Rosa and Walton, Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla and Washington, Broward</td>
<td>1-Aug-13</td>
<td>1-Nov-13</td>
<td>Region 1: 2,973; Region 2, 4058; Region 10, 7,877; Total = 14,853</td>
</tr>
<tr>
<td>11</td>
<td>Miami-Dade and Monroe</td>
<td>1-Sep-13</td>
<td>1-Dec-13</td>
<td>Region 11: 17,257</td>
</tr>
<tr>
<td>5 &amp; 6</td>
<td>Pasco, Pinellas, Hardee, Highlands, Hillsborough, Manatee and Polk</td>
<td>1-Nov-13</td>
<td>1-Feb-14</td>
<td>Region 5, 9.963; Region 6, 9.575; Total = 19.538</td>
</tr>
</tbody>
</table>
# LTC Timelines: Recipient Notification & Choice Counseling

The following table outlines the important timeline dates for Recipient Notification & Choice Counseling in the Region Enrolling for August 2013:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mail pre-go-live informational letter to recipients</td>
<td>March 2, 2013</td>
</tr>
<tr>
<td>Mail welcome letter to recipients to choose a plan</td>
<td>May 20, 2013</td>
</tr>
<tr>
<td>Mail plan choice reminder notice to recipients</td>
<td>July 1, 2013</td>
</tr>
<tr>
<td>Plans go live/ first date of service</td>
<td>August 1, 2013</td>
</tr>
</tbody>
</table>
Statewide Medicaid Managed Care (2013/2014): Status of Federal Approval

• NOTE: Due to the competitive procurement, we are in a statutorily imposed “Blackout Period” until 72 hours after the award and cannot provide interpretation or additional information not included in the or MMA ITN documents.

• Managed Medical Assistance Program:
  – The Agency submitted a request to amend the 1115 Medicaid Reform Demonstration Waiver for implementation of the Managed Medical Assistance Managed Care waiver program on August 1, 2011.

• Medically Needy Program: Seeking Section 1115 Research and Demonstration Waiver
  – The Agency submitted a concept paper to federal CMS on August 1, 2011, and submitted the final waiver application on November 21, 2012.

• State Plan Amendment
  – To authorize the Health Insurance Premium Payment Program
  – Approved by federal CMS September 2011
  – Rulemaking is in process
## MMA Timelines:
### Invitation to Negotiate

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
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<tbody>
<tr>
<td>Release of Invitation to Negotiate</td>
<td>December 28, 2012</td>
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<tr>
<td>Deadline for Receipt of Written Inquiries</td>
<td>January 22, 2013</td>
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<tr>
<td>Vendor Conference for Regions 1-11</td>
<td>February 12, 2013</td>
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<tr>
<td>Anticipated Deadline for Agency Responses to Written Inquiries</td>
<td>February 26, 2012</td>
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<tr>
<td>Deadline for Receipt of Responses</td>
<td>March 15, 2013</td>
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<tr>
<td>Published List of Respondents for Provider Comments</td>
<td>March 20, 2013</td>
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<tr>
<td><strong>Anticipated</strong> Dates for Negotiation</td>
<td>July 1, 2013 – August 20, 2013</td>
</tr>
<tr>
<td><strong>Anticipated</strong> Posting of Notice of Intent to Award</td>
<td>September 16, 2013</td>
</tr>
</tbody>
</table>
Request for Letters of Intent: MMA Program

• To assist with planning, on August 7, 2012, the Agency requested non-binding letters of intent to bid on the MMA program from interested parties.

• Interested parties were asked to send a letter of intent to the Agency by August 17, 2012.
## Request for Letters of Intent: MMA Program (part 1)

<table>
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<tr>
<th>Provider Name</th>
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### Request for Letters of Intent: MMA Program (continued)

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<td>Sunshine State Health Plan</td>
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<td>WeCare Health Plans</td>
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<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
</tr>
</tbody>
</table>

**TOTAL RESPONDENTS**

|     | 15 | 13 | 14 | 15 | 15 | 15 | 16 | 14 | 18 | 15 | 17 |
Statewide Medicaid Managed Care (2013/2014): Program Improvements

- Integrates long-term care for a more comprehensive and coordinated delivery system
- Comprehensive Plans
  - Ensure comprehensive care for recipients receiving both long-term care and managed medical assistance services
Statewide Medicaid Managed Care (2013/2014): Program Improvements

• Achieved Savings Rebate
  – Ensures appropriate medical services expenditures

• Access to Care Partnership
  – Ensures appropriate distribution of local funds (intergovernmental transfers) and Low Income Pool funds

• Florida Medical Schools Quality Network
  – Ensures continued involvement of medical schools and graduate medical education programs to improve clinical outcomes of managed care plans
Statewide Medicaid Managed Care Program: Program Improvements

• Increased access to quality providers:
  – Plan selection based on the Agency’s 11 regions in the state
  – Expanding services available in rural areas.
Statewide Medicaid Managed Care Program: Program Improvements

• Increased predictability for recipients and providers:
  – Five year contracting period - less confusion for providers and recipients
  – Penalties for plan withdrawals
  – Maintenance of role of critical community-based providers
  – Parameters for payments to certain providers (nursing facilities, hospice)
Statewide Medicaid Managed Care Program: Program Improvements

• Increased accountability:
  – Enhanced quality measures
  – Enhanced access to encounter data for long-term care services and other services
  – Enhanced contract compliance tools, including liquidated damages, sanctions, and statutory penalties and terminations
  – Additional integrity functions and activities to reduce the incidence of fraud and abuse
Questions?