March 20, 2020

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2020-16

Applicable to the 2018-2023 SMMC contract benefits for:
- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

Re: COVID-19 State of Emergency: Temporary Expansion of Long-Term Care Provider Qualifications

It is the Agency for Health Care Administration’s (Agency) intention that managed care plans serving long-term care (LTC) enrollees have the maximum flexibility needed to ensure enrollees continue to receive all services necessary to maintain health, safety, and welfare during the 2019 novel coronavirus (COVID-19) state of emergency. The Agency also recognizes the impact that the COVID-19 is having on certain LTC network providers, resulting in location closures and potential workforce shortages. The purpose of this policy transmittal is to inform the managed care plan of temporary expansions to the LTC provider qualifications and temporary modification to services during the state of emergency.

The managed care plan’s credentialing and recredentialing process must ensure that all long-term care (LTC) providers are appropriately qualified, as specified in Rule 59G-4.192, Florida Administrative Code and the participant directed option provider qualifications specified in the SMMC Contract. (Attachment II, Exhibit II-B, Section VIII.C.2.c.). Effectively immediately, the following service providers are temporarily eligible to render additional LTC services (as specified in the chart below and as authorized by the managed care plan) in the enrollee’s home during the state of emergency:

<table>
<thead>
<tr>
<th>LTC Covered Services</th>
<th>Eligible LTC Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Companion</td>
<td>Adult Day Health Care Center</td>
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<tr>
<td></td>
<td>Independent Registered Nurse</td>
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<td></td>
<td>Licensed Practical Nurse</td>
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<td></td>
<td>Older Americans Act (OAA) Provider</td>
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<tr>
<td>Attendant Care</td>
<td>Adult Day Health Care Center</td>
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<tr>
<td></td>
<td>Community Care for the Elderly</td>
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<tr>
<td></td>
<td>Health Care Service Pool</td>
</tr>
<tr>
<td>Behavior Management</td>
<td>Nurse Registry</td>
</tr>
<tr>
<td>Homemaker</td>
<td>Independent Registered Nurse</td>
</tr>
<tr>
<td></td>
<td>Licensed Practical Nurse</td>
</tr>
<tr>
<td>Home Delivered Meals</td>
<td>Adult Day Health Care Center</td>
</tr>
</tbody>
</table>

(Attachment II, Exhibit II-B, Section VIII.C.2.c.)
Statewide Medicaid Managed Care (SMMC) Policy Transmittal 2020-16  
Re: COVID-19 State of Emergency: Temporary Modification of Long-Term Care Provider Qualifications  
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</table>
| Intermittent and Skilled Nursing | Adult Day Health Care Center  
|                              | Center for Independent Living  
|                              | Community Care for the Elderly  
|                              | Health Care Service Pool  
|                              | Independent Registered Nurse  
|                              | Licensed Practical Nurse  
|                              | Nurse Registry  
| Medical Supplies and Equipment | Community Care for the Elderly  
| Medication Administration    | Adult Day Health Care Center  
|                              | Participant Direction Option (see footnote)  
| Medication Management        | Adult Day Health Care Center  
|                              | Participant Direction Option (see footnote)  
| Personal Care                | Adult Day Health Care Center  
|                              | Health Care Service Pool  
|                              | Independent Registered Nurse  
|                              | Licensed Practical Nurse  
|                              | OAA Provider  
| Respite Care                 | Case Management Agency  
|                              | Health Care Service Pool  
|                              | Participant Direction Option  
| Transportation Services      | Community Care for the Elderly  
|                              | Participant Direction Option  

The managed care plan must ensure that providers are utilizing appropriately licensed staff to perform services within the individual’s scope of practice (e.g., a home health aide cannot be substituted to perform a skilled nursing task). In all cases, the managed care plan must document in the enrollee’s plan of care and case file the reason for the alteration of service providers or services during the state of emergency. The managed care plan may collect the enrollee’s or authorized representative’s signature on the updated care plan by mail or during the next face-to-face visit with the enrollee.

If you have questions or concerns, please contact your contract manager at (850) 412-4004.

Sincerely,

[Signature]

Shevaun Harris  
Assistant Deputy Secretary for Medicaid Policy and Quality

SH/dvp

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1 Must be performed by MD, RN, LPN, PA within scope of practice
2 Ibid.