Statewide Medicaid Managed Care (SMMC) Contract Interpretation

Contract Interpretation: 14-03

Applicable to:
- Comprehensive Long-term Care (LTC) Plan
- Managed Medical Assistance Health Maintenance Organization
- Managed Medical Assistance Provider Service Network
- Managed Medical Assistance Specialty Plan

The purpose of this contract interpretation is to provide guidance on the healthy behavior program requirements under the Managed Medical Assistance (MMA) component of the Statewide Medicaid Managed Care program.

The healthy behavior program requirements are codified in:

- Attachment II, Exhibit II-A, Section V. E. 3., Healthy Behaviors Program.

Pursuant to s. 409.973(3), Florida Statutes, managed care plans must establish and maintain programs to encourage and reward healthy behaviors. Healthy behavior programs are a coordinated and comprehensive set of health promotion and protection strategies/activities designed to encourage or maintain the health and safety of managed care plan enrollees. Healthy behavior programs may be designed by the plan or be offered through a partnership with community organizations providing health-related services.

The managed care plan must establish, at a minimum, the following three programs:

- A medically approved smoking cessation program;
- A medically directed weight loss program; and
- A medically approved alcohol or substance abuse recovery program.

A medically approved smoking cessation program is defined as one that is evidence based and recognized by medical professionals as an effective treatment method in addressing tobacco/nicotine dependence. The program may include interventions such as counseling and/or the use of medications (nicotine replacement products) as a part of the overall therapeutic process.

A medically directed weight loss program is defined as one that requires ongoing supervision by a physician and may include the use of prescription drugs/supplements depending upon the need and goals of the enrollee, along with other physician approved interventions (diet, exercise, etc).

A medically approved alcohol or substance abuse recovery program is defined as one that is evidenced based and recognized by medical professionals as an effective treatment.
method/approach. The program may include interventions such as medically assisted detoxification, medication and behavioral therapy, followed by treatment and relapse prevention as a part of the overall therapeutic process.

Managed care plans may develop and offer healthy behavior programs in addition to those specified above, with Agency approval.

The managed care plan’s healthy behavior program must include a detailed description of the interventions the managed care plan intends to use. An intervention is defined as any measure or action that is intended to improve/restore health or alter the course of disease. A healthy behavior program may deploy a number of interventions as a part of the overall therapeutic process. Examples of interventions:

- Series of counseling sessions
- Series of health educational classes
- Gym membership
- Nicotine replacement therapy patches
- Meal planning services (e.g., NutriSystem®)

The managed care plan’s healthy behavior program must include a detailed description of the research to support the effectiveness of the program. The programs must use relevant evidence-based research and resources. Managed care plans are encouraged to use the following resources: the Guide to Community Preventive Services; the Guide to Clinical Preventive Services; the National Registry of Evidence-Based Programs; and guidelines and resources made available by the Florida Department of Health, Bureau of Chronic Disease Prevention.

The managed care plan’s healthy behavior program must include a detailed description of the rewards and incentives offered to enrollees. In the context of a healthy behavior program, an incentive is something offered to the enrollee that encourages or motivates him or her to take action. For example, an incentive may be offered for enrolling in a series of educational classes focused on the target behavior. Incentives should be linked to effective engagement strategies. For example, providing a financial incentive to address a substance abuse problem needs to be supported by an effective, evidence-based approach/program. As such, incentives by themselves do not constitute an effective program.

A reward differs from an incentive in that it should be offered to an enrollee after successful completion of a milestone (meaningful step towards meeting the goal) or goal attainment. A reward should be linked to positive behavior change. For example, a reward may be offered after successful completion of the series of educational classes focused on the target behavior.

Both incentives and rewards offered to enrollees should be “reasonable” – not too high to invite fraud and abuse and not too low to be irrelevant or unnoticed by enrollees. Incentives or rewards can include any of the following:

- Money through debit cards;
- Gift cards;
- Flexible spending accounts that can be used for health and wellness items;
- Vouchers for health and wellness related items; and
- Points or credits which are redeemable for goods or services.
Incentives and rewards shall be limited to a value of twenty dollars ($20) per occurrence. The exceptions to this monetary limit are as follows:

- Programs that require the enrollee to complete a series of activities (e.g., completion of a series of health education classes). In these instances, the incentive or reward must be limited to a value of fifty dollars ($50) for completion of the series.
- Infant car seats, strollers, and cloth baby carriers/ slings that are offered as incentives to engage in a healthy behavior program or rewards for completion of an action or a series of activities.
- Participation in multiple healthy behavior programs (e.g., smoking cessation and a substance abuse recovery program). In these instances, the enrollee could earn up to $50 for each healthy behavior program in which he or she was enrolled.

Managed care plans cannot employ penalty approaches to incentives, where enrollees lose earned credits or rewards if they are unsuccessful in achieving behavior changes.

Managed care plans shall not include in the dollar limits on incentives or rewards any money spent on the healthy behavior program or associated interventions. For example, paying for a gym membership as a part of the medically directed weight loss program would not count towards the limits specified in the contract for incentives or rewards.

Pursuant to Attachment II, Section XII.I. Disputes, the managed care plan must submit, within twenty-one (21) days after the interpretation of the Contract, a written dispute of the Contract interpretation directly to the Deputy Secretary. This submission shall include all arguments, materials, data, and information necessary to resolve the dispute (to include all evidence, documentation and exhibits). All other provisions in this section apply.

If you have questions or concerns, please contact your Agency contract manager at (850) 412-4003.

Sincerely,

Beth Kidder
Assistant Deputy Secretary for Medicaid Operations

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