



RICK SCOTT  
GOVERNOR

ELIZABETH DUDEK  
SECRETARY

August 21, 2016

## Statewide Medicaid Managed Care (SMMC) Policy Transmittal

### Policy Transmittal: 16-24

#### 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
- Children's Medical Services (CMS) Plan

#### Applicable to enrollees in:

- Managed Medical Assistance (MMA)
- Long-term Care (LTC)

### Re: Ad Hoc Request for Dental Rate Information due September 21, 2016

The managed care plan may be required to provide the Agency or its agents information or data relative to this contract. In such instances, and at the direction of the Agency, the managed care plan must fully cooperate with such requests and furnish all data or information in a timely manner, in the format in which it is requested. The managed care plan must have at least thirty (30) days to fulfill such ad hoc requests, unless the Agency directs the managed care plan to provide data or information in less than thirty (30) days. The managed care plan must verify that data and information it submits to the Agency is accurate. (Attachment II, Section II.D.2.<sup>1</sup>)

Managed care plans are required to contract with specified dental provider specialties, such as General Dentists, Orthodontists, and Oral & Maxillofacial Surgery providers. (Attachment II, Exhibit II-A, Section VI.A.1.b.<sup>2</sup> and Section VI.A.4.c.<sup>3</sup>) The Florida Legislature has directed the Office of Program Policy Analysis and Government Accountability (OPPAGA) to examine the effectiveness of Medicaid managed care plans in providing Medicaid dental services. The statutory language ordering the Medicaid dental study (see s. 409.973(5), Florida Statutes (F.S.)) directs OPPAGA to examine (by plan and in the aggregate) rates paid to dental providers and to dental plan subcontractors. To comply with the statutory direction, OPPAGA requires the current and historical rates paid by the managed care plans during the time period 2010 through 2016 to dental providers under the Managed Medical Assistance (MMA) component of the Statewide Medicaid Managed Care (SMMC) and, prior to the implementation of MMA, the historical rates paid by the statewide prepaid dental health plans, Medicaid Reform health plans, and the Miami-Dade prepaid dental health plans to dental providers.

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<sup>1</sup> The citation for the CMS Plan contract is Attachment I, Section II.D.2.

<sup>2</sup> The citation for the CMS Plan contract is Attachment I, Section VI.A.2.a.(3).

<sup>3</sup> The citation for the CMS Plan contract is Section VI.A.2.d.(3).



To provide reassurance and support to the private businesses from which the Legislature occasionally needs to obtain competitive information as part of determining the best policy course forward, a specific section of Florida Statutes provides that any such information provided to OPPAGA to enable OPPAGA's work for the Legislature is not a public record and will not be provided to a person requesting access to that information. (See s. 11.51(4), F.S.) OPPAGA has protocols in place to ensure secure transmission, receipt, and destruction of the managed care plan's important business information when OPPAGA's work is complete. To further protect the managed care plan's business information, OPPAGA will de-identify the plan's information, and the report will not attribute rates to specific dental providers.

To protect the required information, the managed care plan must provide dental rate information to OPPAGA using the attached electronic templates for dental services provided to SMMC enrollees between May 2014 and August 2016. The electronic template can be duplicated to provide rates by year, by specialty provider, and by geographic region. The data must be submitted by no later than September 21, 2016 to OPPAGA's secure FTP server.

When the plan has compiled the rate information, please contact Justin Graham, OPPAGA Methodologist, at (850) 717-0508 to obtain an uplink to OPPAGA's secure FTP server, the password, and any additional instructions that will allow the plan to upload the file. If you have any concerns about meeting this deadline or if you have any additional questions, please call Dr. Mary Alice Nye, Staff Director for this project, at (850) 717-0567.

Sincerely,



Beth Kidder  
Assistant Deputy Secretary for  
Medicaid Policy and Quality

BK/dp

Attachment: Dental Rate Request Template  
Letter