

AHCA Annual Report



Better Health Care for all Floridians
July 2008 – June 2009

Message from the Secretary

Dear Friends:

Our team at the Agency for Health Care Administration worked diligently and passionately for Better Health Care for all Floridians over the last year, and we wanted to share our accomplishments with you. As our stakeholders, you have a vested interest in the work we do, and we are grateful for your help in our mission.

The pages of this annual report are filled with our achievements. From attracting new health plans for our Medicaid recipients to making more health care information available to consumers to implementing technology to streamline the regulation of health care facilities, our team is always looking for ways to improve how we do business.

We made investments internally, from redefining our mission and values to launching wellness initiatives, and we made improvements for our customers, both consumers and providers, from enhancing our Web site to investing in technology to make reporting easier. Every day we are looking for ways to serve you better.

Health care reform is in the headlines everyday and more Americans and more Floridians are thinking about what role government should play in our health care system. The people of the Agency for Health Care Administration remain committed to serving the people of Florida and will do our part to continue in our quest for Better Health Care for all Floridians.

Thank you for your support of our efforts.

Sincerely,



Holly Benson



Secretary Holly Benson

Overview

Our Agency was statutorily created within Chapter 20, Florida Statutes, as the chief health policy and planning entity for the state. We are primarily responsible for the state's \$17.5 billion Medicaid program that serves over 2.5 million Floridians, the licensure and regulation of the state's 37,000 health care facilities and the sharing of health care data through the Florida Center for Health Information and Policy Analysis.

Florida's 11 Medicaid Area Field Offices handle 58,000 calls per month.

We conducted more than 21,000 surveys and complaint inspections of health care facilities in Florida this year.

Health Quality Assurance

The Division of Health Quality Assurance protects the citizens of Florida through the oversight of health care service providers. The Division has 618 staff and is funded with approximately \$49.5 million in state and federal funds. Health Quality Assurance is charged with regulating 40 types of health care service providers, including hospitals, nursing homes, assisted living facilities, and home health agencies. The Division licenses, certifies or regulates more than 37,000 providers.

Florida Medicaid Program

The Florida Medicaid program is a \$17.5 billion state and federal partnership that provides health care to more than 2.5 million recipients in Florida. The Medicaid program is responsible for overseeing the management and operation of a broad range of health care services offered through Medicaid to low-income families, the elderly and disabled. The ongoing operations of the program, from policy development to fiscal management, are administered through the bureaus including Medicaid Services, the policy arm; Health Systems Development, the managed care arm; Program Analysis, the financial arm; Pharmacy Services, which handles the prescription drug program; Quality Management, which focuses on project management and optimizing quality in our programs; and Contract Management, which administers the contract with the fiscal agent to process over 130 million Medicaid claims per year.

Florida has more than 65,000 active Medicaid providers and we process an average of 300 Medicaid provider enrollment applications a week.



Florida Center for Health Information and Policy Analysis

The Florida Center for Health Information and Policy Analysis (Florida Center) is responsible for collecting, analyzing and distributing information, research findings and data on health care providers in Florida. Decision support tools and data are made available to the public on the FloridaHealthFinder.gov Web site. Consumers, policy analysts, administrators and others interested in examining performance and outcomes of Florida's health care providers can access this information online. In addition, the Florida Center works with health care providers and stakeholders statewide to promote and implement health information technology programs including the adoption of electronic health records through the American Recovery and Reinvestment Act of 2009 (ARRA).

Members of the State Consumer Health Information and Policy Advisory Council work with the Florida Center staff to advise on issues regarding health care transparency and the implementation of electronic health records.

Division of Operations

The Division of Operations is responsible for the administration of human resources, finance and accounting, budgeting, grants management, revenue management, procurements, purchasing, facility management, records management, safety and mailroom operations. In order to accomplish these tasks, the Division is comprised of four bureaus: Budget Services, Finance and Accounting, Human Resources and Support Services.

The Florida Center collects health care patient data from 260 hospitals, 205 emergency departments, 630 ambulatory surgical centers and 15 comprehensive inpatient rehabilitation centers.

Our Team

Highly qualified, innovative and dedicated public servants are key to carrying out the important work we do. Every day, our staff devotes their energy and creativity to making Florida health care safer, more transparent and easier to access. This year, we took steps to advance our standing as an employer of choice and to measure and improve the quality of the services we provide.



Investing In Our Employees

Our employees are our most valuable asset. Without their commitment and talent, we could not serve the needs of our citizens. We must ensure our employees have a healthy work environment, the tools necessary to do their jobs and that they are recognized for the important work they do.

Climate Survey

In December 2008, we conducted the first annual climate survey to measure how personnel viewed their work environment. A total of 1,375 of our 1,737 employees completed the survey. We learned about employee job satisfaction, the training we provide, the skills of supervisors and the perception employees have about the direction of the Agency. We were pleased to see that 83% reported being generally satisfied with their job and their supervisors and a majority felt that the Agency for Health Care Administration is a great place to work. The results focused us on the areas needing improvement and we used this important feedback to develop detailed action plans in each of the 43 bureaus and offices throughout the Agency.



Many of our employees indicated that they wanted more feedback from their managers, and we overhauled our employee evaluation system. Now, employee evaluations must be done annually, and each employee is asked to list three stretch goals to accomplish during the course of the year with a commitment from their managers to help them achieve their goals.

In addition, our leadership team wanted to ensure that employees had a clear sense of the mission and values of the Agency. After evaluating the various functions of the Agency, the team united behind the mission of Better Health Care for all Floridians. They then defined the Agency's values as Accountability, Fairness, Responsiveness and Teamwork.

By establishing this mission, we believe we can hold ourselves to higher standards and continue to be an employer of choice.

Wellness Initiative

Because we are a health care agency, we wanted to lead by example. Our Human Resources Department developed and implemented an Agency-wide Wellness Plan Initiative. Through the initiative, we offered employees a Wellness Fair that included participation from health care vendors, literature on improving health through better nutrition, opportunities to exercise on breaks, exercise classes and courses on how to quit smoking. As a result, many employees have improved their eating habits and use their fifteen minute breaks for walks, and some have even quit smoking. By providing a healthy work environment, we hope to benefit the people of Florida by having healthy public servants with fewer sick days and increased productivity.

Our Values

Accountability
We are responsible, efficient and transparent.

Fairness
We treat people in a respectful, consistent and objective manner.

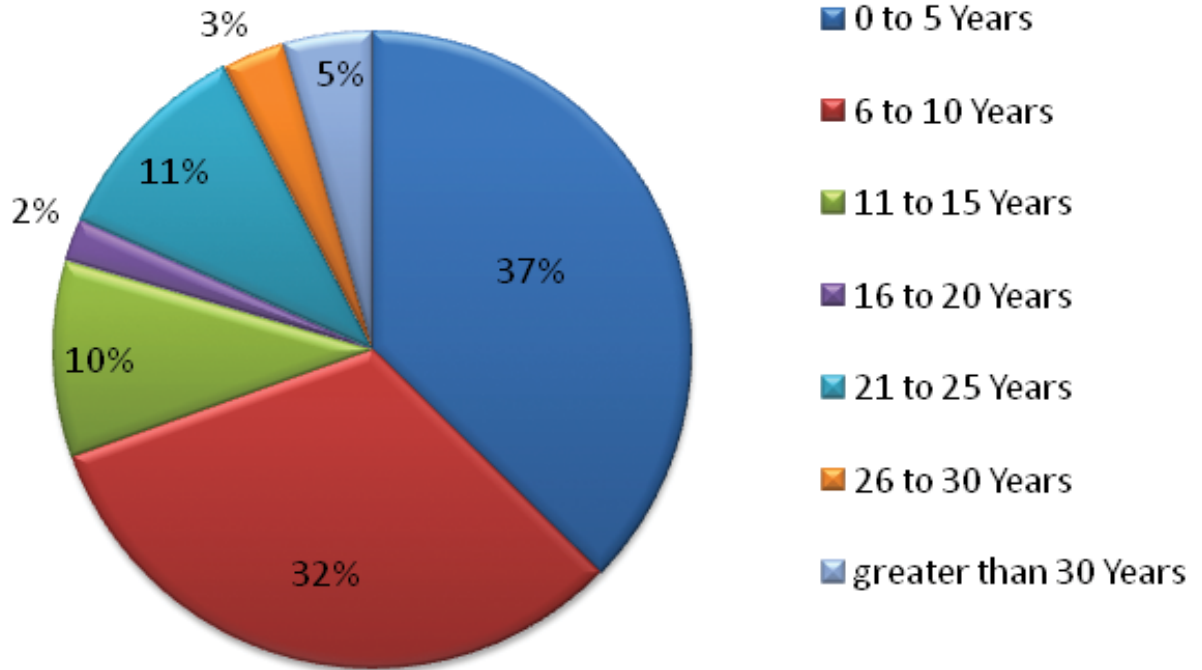
Responsiveness
We address people's needs in a timely, effective and courteous manner.

Teamwork
We collaborate and share our ideas.



Our Team

Employee Years of State Service



Becoming an Employer of Choice

We work to attract and retain the best possible employees. One of the best measures of our success is the length of our employees' service to our Agency. Our employees are passionate about public service, and many of them devote a significant percentage of their careers to public service. Fifty-seven percent of our employees have worked for the Agency for more than six years and employee turnover is less than eight percent. This year we reviewed and updated our hiring policies to ensure we continue recruiting and hiring talented and committed public servants. Our employees remain with the Agency because they find their work to be gratifying, they have found opportunities for advancement, and they have received professional development opportunities throughout their tenure. We are committed to continuing to invest in our employees in order to attract and retain the best workforce.

Chief of Staff Tom Arnold, Secretary Holly Benson and Chief Information Officer Rob Fields present Beverly Gavin with her 30 year service award.





The Agency's IT Team during a Disaster Recovery exercise at the SUNGARD facility in Smyrna, GA.

Staying Current with Technology

Information technology is advancing at a record pace. Nowhere is that felt more than in health care, as electronic transmission of health information takes center stage on both a state and national level. Our Information Technology (IT) team upgrades our computer systems and applications on a regular basis to keep us current with today's technology advances. The new systems and applications provide tools and services that create more efficient work processes and have the flexibility to easily adapt and communicate with other developing technologies. Having the right equipment and technology allows our employees to perform their work effectively and efficiently.

Staying Operational in a Disaster

This year, our team developed and implemented a System Disaster Recovery program. This program gives us the ability to have most applications online and available within 48 hours if a major disaster impacts our headquarters in Tallahassee. This allows for continuous operations of our systems, including emergency information availability in case a disaster arises.

Reducing Our Energy Footprint

Our team moved our technology systems from a physical server to a virtual server. The server virtualization reduces our energy footprint by consolidating our server environment, saving energy and equipment costs for us. This gives us the ability to roll out new solutions even when budget dollars may not exist. The virtual server environment also allows us to migrate systems to the disaster recovery environment in a fraction of the time ensuring staff can continue to perform their jobs.

Our Team



Our Agency is committed to professional development. Each month we invite guest speakers from the health care industry to speak to our Agency leaders about changes in the industry. Pictured here is Jim Frogue from the Center for Health Transformation speaking at one of our Leadership Forums.

Keeping Employees Informed

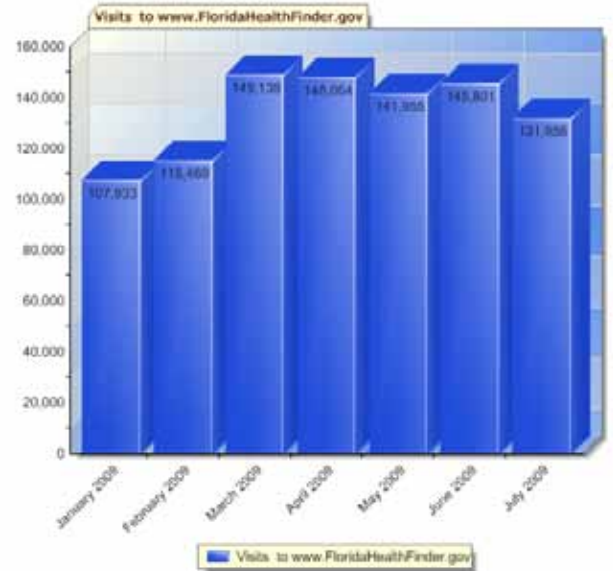
Internal communication is an integral part of running any successful organization. This year, we redesigned our Intranet to maximize its functionality and improve internal communications. The new AHCA Portal provides our staff with a variety of features such as:

- **daily health care news stories,**
- **AHCA Calendar – an agency wide calendar allowing staff to identify public meetings occurring at the Agency,**
- **Inside AHCA – daily updates of internal Agency news,**
- **Employee Phonebook – allows employees to search for phone numbers and email addresses by first or last name, and**
- **SharePoint workflow and work collaboration/ management tools.**

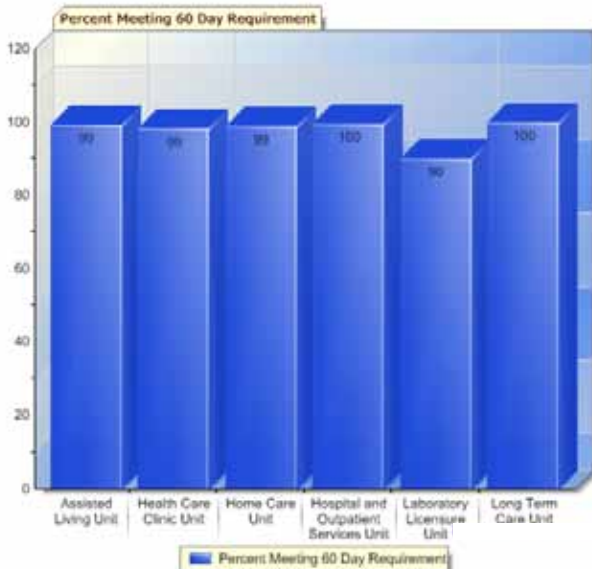
Measuring our Performance

Governor Crist has said that you cannot manage what you do not measure, and in an effort to drive improvement in our processes, we implemented a performance measurement tool called the AHCA Dashboard. The dashboard is displayed on our Web site, www.ahca.myflorida.com. This application allows citizens and Agency managers to monitor key performance measures. Data for the AHCA Dashboard is updated by the various Agency business units on a periodic basis (monthly in most cases).

We use the AHCA Dashboard to review our progress on various projects and to understand how we can better serve our customers. Each week, members of the Agency Management Team review a division's performance measures that are displayed on the dashboard and determine a plan of action on how to improve or maintain performance. By helping agency managers monitor and react to performance measurements within their business units, this application keeps a focus on improving the work we do.



Florida Center Team – Number of Visits to FloridaHealthFinder.gov



Health Quality Assurance Team – Percent of Applications Completed in the 60 Day Requirement



Medicaid Team - Area Offices – Medicaid Provider Training Satisfaction Results (Scale of 0 - 5)

Patients

Patients are at the center of everything we do. Whether we are looking at ways to make hospitals and nursing homes safer, finding new and better ways to assure that Medicaid recipients receive well-coordinated and efficient care or helping physicians adopt electronic health record technology, we are ultimately working to make health care better for patients and their families.



This year, Secretary Benson implemented Health eNotes, a weekly publication for Agency employees and stakeholders designed to provide insight into the Agency's activities and efforts.

Empowering Consumers

We believe in empowering Floridians to make informed choices about their health care. This year, in an effort to become a better resource to the people we serve, we overhauled our Internet site, www.ahca.myflorida.com, and revamped our Web site for consumers, FloridaHealthFinder.gov. In addition, we worked with Governor Crist to provide uninsured Floridians with access to affordable health insurance and we created more choices for Medicaid recipients.

Educating Consumers

We are committed to making information about the quality of Florida's health care accessible to the public. The Florida Center redesigned the FloridaHealthFinder.gov Web site to provide a more user-friendly format with more quality comparative information. The site contains interactive tools that give Floridians the opportunity to compare performance for hospitals, ambulatory surgery centers, health plans, nursing homes and hospice organizations as well as pricing on prescription drugs.

This year, we took several steps to expand the information included on the Web site.

Florida Health Finder now includes:

- **statistics on over 150 conditions/procedures for hospitals and ambulatory surgery centers,**
- **hospice satisfaction measures from the Family Evaluation of Hospice Care Satisfaction Survey Tool,**

FloridaHealthFinder.gov currently averages 140,000 visitors per month compared to 95,000 visitors per month in 2008.

- **statistics on potentially preventable 15 day readmission rates for hospitals which identify hospital readmissions that are potentially preventable, and**
- **an improved facility/provider locator and proximity search tool.**

The Florida Center is highly regarded as a primary resource for state health care data and information.

In addition to updating and improving features of www.FloridaHealthFinder.gov, the Florida Center distributed 200,000 English and Spanish health care brochures to consumers this year. Distribution of this literature provides information to the public to assist them in making educated health care decisions. These brochures include information on Florida Medicaid, hospital and emergency care, long-term care, patient safety, prescription drugs, end-of-life issues and health and human programs at various state agencies. These publications are also available online for health care facilities to print and utilize additional copies.

Transparency in health care gives consumers the information they need to compare the quality and price of health care services so they can make choices that are best for them.

Providing Access to Affordable Health Coverage

As the cost of health care continues to rise in our country, many Floridians have had trouble finding affordable health insurance. Governor Crist sought to find a solution to this problem and worked with the Legislature to create the [Cover Florida Health Care Access Program](#) in 2008. We played an integral part in the implementation of Cover Florida, which gives Floridians access to more affordable health insurance options.

We launched a competitive bid process and selected six companies to provide Cover Florida benefit plans. Participating Cover Florida insurers offer innovative health insurance products that are reasonably priced and guaranteed to Floridians who have been without insurance for at least six months or who are recently unemployed. All Cover Florida plans must provide at least two types of coverage. One provides coverage for preventive services such as doctor visits, lab tests and periodic examinations. The second is a catastrophic plan, which in addition to the benefits of the preventive plan provides coverage for emergency department services, inpatient and outpatient services as well as urgent care. Enrollment is guaranteed even if there are pre-existing health conditions that may be excluded from coverage for some time period.

We have conducted broad outreach to help make Floridians aware of this important program. In the first six months, 3,757 Floridians enrolled in a Cover Florida health plan.

Increasing Options for Medicaid Recipients

Florida Medicaid has increased the number of health plans available to Medicaid recipients, including Prestige Health Plan (the state's first capitated provider service network), Sunshine State Health Plan, Freedom Health, Better Health Plan and Molina Health Plan. New plans entering the market



Governor Crist, Lt. Governor Kottkamp and Secretary Benson launch the Cover Florida Health Care Access Program in December 2008.

provide additional choices for Medicaid recipients, empowering them to make the best choices for their families.

Increasing Access and Services for the Elderly Medicaid Recipients

Removing barriers to care for Florida's most vulnerable citizens requires a strong collaboration between those involved. Florida Medicaid, the Department of Elder Affairs, the Department of Children and Families and the Agency for Persons with Disabilities worked together to increase access to home and community based services for the elderly and disabled. This was accomplished through the expansion of the Nursing Home Diversion and PACE (Program of All- Inclusive Care for the Elderly) programs and the permanent establishment of the Consumer Directed Care + program as a Medicaid state plan service. This allows frail elders and adults with developmental disabilities the freedom to manage and budget for their own care. Working with our partner agencies, we successfully lobbied the Florida Legislature for greater flexibility in helping people move from nursing homes to home and community based services. We have also dedicated staff to finding individuals in nursing homes who would be better served in their communities with community based services.

Patients



Liz Dudek, Deputy Secretary of Health Quality Assurance, congratulates lead members of the Agency's Quality Indicator Survey training team, Kim Smoak and Barbara Alford (not pictured) for receiving a Survey and Certification Achievement Award from the Centers for Medicare and Medicaid Services for high quality work during a challenging year as an early pilot state in the Quality Indicator Survey method.

The Centers for Medicare and Medicaid Services chose the State of Florida as a test state due to the high level of skills of Florida's surveyors and the quality of Florida's surveyor training.

Protecting Consumers

Florida's health care facilities provide critical health care services to many of our most vulnerable citizens. Our regulatory oversight is designed to promote quality and protect consumers receiving services in health care facilities across the state.

Improving the Nursing Home Surveying Process

This year, Florida made great strides in strengthening the nursing home survey process that protects our most vulnerable citizens. Our staff accepted a challenge from the Centers for Medicare and Medicaid Services to pilot the revised and improved Quality Indicator Survey that streamlines and improves the nursing home surveying process.

The Quality Indicator Survey is a computer-assisted survey process that uses customized software on tablet personal computers. This structured, two-stage process allows surveyors to systematically review specific nursing home requirements and objectively investigate any regulatory areas that are triggered.

The Quality Indicator Survey is especially valuable because it reduces the amount of time surveyors spend on paperwork and prior research and allows them to focus more attention on evaluating the quality of care and quality of life each patient receives. The Quality Indicator Survey also creates more consistency among surveyors across the state by guiding the surveyor through the process.

Designing Better Facilities

Designing a facility involves more than ensuring the exits are properly identified and hallways are accessible. The design of the facility not only affects the safety of patients but can also impact their recovery time. This year, we had appointees serve on a national task force to develop revisions for the National Fire Protection Association to permit home-like environments in nursing homes. Our team revised our own policies and assisted other states in revising nursing home criteria to reflect the latest developments in nursing home design. These changes give nursing home residents improved environments for healing and living, which in turn, result in fewer falls, more ambulation, fewer infections, less staff turnover and overall better nursing care.

In addition this year, we hosted another successful Agency for Health Care Administration and Florida Healthcare Engineering Association Seminar and Trade Show for more than 1,200 health care design professionals. Each year, this conference brings together health care design professionals from across the country. As a result, these professionals take what they learn back to their regions and design safer and more efficient health care facilities. This year's conference included information sessions on:

- **emergency power problems and solutions for large hospitals,**
- **an overview on the future of health care technologies,**
- **advances in robotic surgery,**
- **isolation room technologies,**
- **fire door inspections, and**
- **wireless technologies for nurse call systems.**



The screenshot shows a web application interface for 'Quality of Care Indicators - Ratings'. It features a search bar and a table with columns for various performance metrics. The table includes rows for different facility types and their corresponding scores across multiple indicators.

Facility	Overall Rating	Medicare	Medicaid	Private Pay	Long-Term Care	Skilled Nursing	Home Care	Other	Quality Improvement
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Medicaid (Nursing Home)	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0

Increasing Accountability and Quality in Medicaid Managed Care

We believe in holding health plans accountable for improving health outcomes for Medicaid recipients. Over the last year, staff members of the Florida Medicaid program worked to improve Medicaid managed care plan accountability and quality.

These initiatives included the development of a comprehensive strategy to require plans to work toward a three year goal of performing at or above the 75th national percentile on key measures. Health plans participating in the Florida Medicaid program are now required to submit quarterly reports on their progress and develop corrective action plans to address measures needing improvement. Medicaid recipients who are required or who choose to enroll in Medicaid health plans can be assured that health plans are working toward providing better health care. Health plans will take a more active role in ensuring that their enrollees receive recommended preventive care and treatment for chronic conditions.

In addition, we have undertaken initiatives to ensure that accurate provider network information is available to Medicaid recipients. Our staff developed and posted a Web page on our Web site that provides key information about the quality activities occurring with managed care plans, http://ahca.myflorida.com/Medicaid/quality_mc/index.shtml. Health plans, providers, advocates and Medicaid recipients can now locate information quickly in a centralized location. By making the managed care quality improvement requirements transparent and accessible, health plans will be further motivated to improve their performance and outcomes.

Providers



Jim Alfred, Ashley James, James McFaddin, Clarise Waddill and Warren Moore serve as the Agency's Legislative Affairs team and worked diligently with the Florida Legislature to pass Senate Bill 1986 to help streamline regulations for health care providers in Florida.



Government regulation of health care is important in order to ensure public safety, and we are committed to regulating Florida's health care facilities fairly. We work in partnership with providers in order to ensure quality health care and patient safety without unnecessary red tape.

Streamlining Regulation

Every day health care providers across the state spend time filling out forms, checking off boxes and reporting new data. Providers told us the paperwork takes time away from patient care and that they are not always sure the data is used. Health Quality Assurance staff worked with providers to identify those regulations that were most important for safety and to repeal those that were least important.

We took these concerns to the Florida Legislature in 2009. Our Health Quality Assurance team, who handles the regulation of health care facilities across the state, reviewed many of the regulations to determine if they were truly necessary and crafted a regulatory reduction bill. Senate Bill 1986 which was sponsored by Senator Don Gaetz, contained the Health Care Facility/Provider Regulatory Reduction and Streamlining provisions that Senator Andy Gardiner and Representative Matt Hudson championed for the Agency. The bill was

successfully passed by the Legislature and signed into law by Governor Charlie Crist.

Effective July 1, 2009, this bill:

- **reduced duplicative and unnecessary regulations of providers licensed or registered by our agency,**
- **eliminated registration of private utilization review agents,**
- **eliminated state licensure of waived laboratories already certified by the federal government,**
- **eliminated duplicative and unnecessary reporting,**
- **repealed obsolete reports, workgroups and pilot projects,**
- **simplified change of ownership requirements,**
- **clarified notice and correction of licensure violations, and**
- **authorized electronic access to information.**

This is a major step forward in our efforts to streamline our operations. We also have ongoing efforts to map and streamline our processes across the Agency.

While it is difficult to measure the savings as a result of reducing the paperwork burden, deregulation of private review agents and waived laboratories will save providers \$428,700.

Providers



Improving the Data Collection Process

Citizens need access to accurate and up-to-date information to make informed decisions about their health care. It is our job to ensure the data Floridians use to make these important decisions is accurate, timely and complete. As a part of the regulatory process, we collect and post health care data submitted from Florida's health care facilities. To ensure Floridians receive this information in a timely manner, the process to submit the data must be easily accessible by health care facilities.



Data reporting provides citizens with the most current and complete information in order to make informed health care decisions. Working with health care facilities to improve the data collection process has allowed us to provide Floridians with the most current and accurate information available.

Creating Automated Interfaces

In an effort to make reporting as easy as possible for health care providers, we continue to create automated, secure

interfaces for providers to submit their forms and data, including the Nursing Facility Quality Assessment Application and others.

Nursing homes are required to submit the number of days a Medicaid patient stays with them in order to receive reimbursement. The Nursing Facility Quality Assessment application was designed and developed for the nursing facilities to submit monthly assessments and generate invoices to the state. After the nursing facilities report patient days online, the system calculates the assessment fee based on reported patient days and predefined rate and generates invoices instantly. Our Medicaid staff and Finance and Accounting staff can retrieve the real-time data reported by the providers and manage assessment rates and the user accounts efficiently. Instructions for the application are posted online and are readily accessible for providers. The data collected through this application allows us to track health care information and provide trend analysis information to providers.

Improving Quality and Timeliness of Data Submission

Florida Center staff have greatly improved the quality and timeliness of facility data reporting through our facility outreach program. If a facility is delinquent in their reporting, we work with them to construct a recovery plan and manage their project status. In April 2008, there were 69 delinquent facilities with 142 past due reporting quarters, causing us to delay reporting information by 68-150 days. As a result of the facility outreach program, this information is now current, and the facilities are reporting their data on a more timely basis.

Assisting Providers in the Data Collection Process

The quality of the data received is also important. To assist providers in the data collection process, we developed the Data Collection Guide. The electronic guide is a resource for providers that addresses requirements for each specific data element and gives data submission instructions. The Data Collection Guide has improved the quality of the data submitted and has received overwhelming positive feedback from our provider contacts.

Taxpayers

With a budget of \$18 billion, we are the second largest agency in state government. Almost all of the dollars go directly to patient services, and less than two percent of the budget is spent on administrative expenses. Nevertheless, every day our employees look for new ways to streamline operations, combat Medicaid fraud, reduce costs to providers and stretch taxpayers' dollars farther.



Members of the AHCA-celerate Team, Sue Conte, Mike Magnuson, Richard Shoop, Scott Ward and Molly McKinstry, work to find ways to reduce regulatory costs for health care providers.

Reducing Regulatory Costs

In follow-up to Governor Crist's Accelerate Florida initiative to stimulate the economy, we put together a team of leaders to develop AHCA-celerate Florida. The AHCA-celerate team is charged with finding ways to reduce regulatory costs to licensees and Medicaid providers using business process evaluation and finding ways to use Web and portal technologies for ease of use by our regulated entities. A key element in this effort is the elimination of duplication of effort in the Agency's work processes and data management. Better Health Care for all Floridians includes helping providers spend less time on paperwork and more time on patient care. The team has identified over 40 processes that can be implemented to increase efficiency and eliminate duplication throughout the Agency.

Initiatives include:

- **eliminating unnecessary complexity in the Medicaid organ transplant reimbursement process,**
- **offering an electronic signature process to allow entities that submit data to do so electronically,**
- **increasing the use of Web portal technology for required data submissions, and**
- **identifying statutory changes needed to reduce and streamline regulations.**



Fighting Medicaid Fraud

Protecting taxpayers from fraud and abuse in the Medicaid system is a team effort. Over the last year, our Medicaid Program Integrity division improved and strengthened external partnerships with the Attorney General's Medicaid Fraud Control Unit, Centers for Medicare and Medicaid Services, Department of Health and the Agency for Persons with Disabilities in the fight against Medicaid fraud. Bi-monthly inter-agency meetings are held to coordinate action against fraud. During the 2008-2009 fiscal year, our Medicaid Program Integrity division referred 123 cases to the Attorney General's Medicaid Fraud Control Unit for criminal prosecution, 163 cases to Department of Health for disciplinary review of providers and 90 providers for termination from the Medicaid program.

Preventing Fraud and Abuse

In order to ensure that taxpayers' dollars are being used efficiently, we continuously look for cost prevention avenues and seek the recovery of overpayment to Medicaid providers throughout the state. Our Inspector General's Office has an Agency-wide mapping system used to identify how every member of our staff can help prevent fraud in our Medicaid system.

This year, the Medicaid Program Integrity division made significant gains in our cost avoidance and overpayment recoupment efforts. The division conducted multiple

The Medicaid Program Integrity division's cost prevention and overpayment recovery efforts for fiscal year 2008-09 totaled approximately \$65 million, with imposed fines of approximately \$475,000, yielding an ROI of 5:1. Actual overpayment recoveries increased in fiscal year 2008-09 by 55%, from \$29 million to \$45 million.

field office operations involving coordinated interviews of providers, prescribers and recipients. These field office operations produced both the recoupment of overpayments and recommendations for policy enhancements.

- **In fiscal year 2008-09, Medicaid Program Integrity conducted approximately 100 prepayment reviews that resulted in a cost avoidance of over \$5.5 million.**
- **In fiscal year 2008-09, Medicaid Program Integrity reviewed the activities of 3,766 providers and opened 1,438 cases in pursuit of overpayment recoveries.**



General Counsel Justin Senior, Secretary Holly Benson and Medicaid Program Integrity Office Administrator for the Miami Field Office Jesus Rossello took part in an ongoing investigation of durable medical equipment providers in South Florida.

Taxpayers

DONATE LIFE Florida

TOTAL REGISTRANTS: 4,974,633
(as of Fri, August 21, 2009)

Welcome to the Joshua Abbott Organ and Tissue Donor Registry!

Thank you for your interest in saving lives as an organ, tissue and eye donor. This Web site gives you the opportunity to join Florida's organ, tissue and eye donor registry by signing up online.

Organ, tissue and eye donors have the power to save up to eight lives and enhance many more. You can make a world of difference.

[Sign Me Up Today](#)

[Update My Donor Profile](#)

[About Donate Life Florida](#)

[Support the Registry](#)

[About Joshua Abbott](#)

[Español »](#)

AHCA
THE REAL ALTERNATIVE FOR HEALTH CARE ALTERNATIVES

Personal Stories...

Towana Robinson is no stranger to health challenges. She was diagnosed with Type 1 diabetes at age n... [Read My Story >>](#)



Donate Life Florida Chairwoman Kathy Giery and Joshua Abbott's family, Mr. and Mrs. Deeter and Joshua's brothers, Kevin Abbott and Jon Abbott shared Joshua's story during the press conference launching www.DonateLifeFlorida.org. Joshua Abbott was a lung transplant recipient who championed the cause of organ and tissue donation prior to his untimely death in 2006.



Florida Department of Highway Safety and Motor Vehicles Executive Director, Electra Theodorides-Bustle, Florida Speaker of the House of Representatives Larry Cretul and Secretary Benson update their organ, tissue and eye donor profiles on Florida's Joshua Abbott Organ, Tissue and Eye Donation Online Registry, www.donateliflorida.org. They are guided through the process by Kathy Giery, Donate Life Florida Chairwoman.

Improving the Organ, Tissue and Eye Donor Registry

After passing legislation in 2008, we facilitated the transfer of the state's organ, tissue and eye donor registry to a private, non-profit 501(c)3 organization, Donate Life Florida. They will be able to combine public funding and private donations to improve the registry and expand donor education activities. Not only will the partnership save taxpayer money, but it will provide them direct access to the new Internet-based organ, tissue and eye donor registry.

Prior to the new online registry, Floridians could only register as organ, tissue and/or eye donors by completing paperwork at their local driver license office. The new organ, tissue and eye donor registry will add an option which allows citizens to designate themselves as organ, tissue and eye donors online. Registered donors will be able to update their wishes on the secure Web site with their user name and password.

With the help of the Department of Highway Safety and Motor Vehicles Florida's current donors are already uploaded into the new, online registry. Floridians who are already donors are encouraged to visit the Web site and update their donor profile and ensure their wishes are noted.



Finding Efficiencies through Partnerships

In an effort to ensure every taxpayer dollar is used efficiently and effectively, agencies often work together to provide the best product for Floridians. We entered into a data sharing agreement with the Department of Health to provide hospital, ambulatory surgery center and emergency department discharge data to the Department for use in public health surveillance and research. In return, the Department of Health provides vital statistics data, births and deaths to the Agency. Both of our agencies continue to approve user agreements for access to our data enabling streamlined access for both. Access to data enables us to report on information consumers need in order to make better decisions concerning their health care and provides the groundwork for better information for consumers and researchers. Next steps include continued collaboration on the structure of an enhanced HIPAA compliant data set for researchers.

Next Steps



We continue to look for ways to improve our performance in support of Better Health Care for all Floridians. Below are just a few of the goals we have for next year.

Health Quality Assurance:

We will:

- **continue working to reduce and streamline regulatory requirements,**
- **increase the electronic intake and processing of health care facility applications and regulatory reporting, and**
- **implement the pilot ambulatory surgery center survey program.**

Florida Medicaid Program:

We will:

- **fully implement the Medicaid Encounter Data program,**
- **introduce managed care to previously un-served Florida counties, and**
- **finalize the transition to the new Florida fiscal agent, EDS.**

Florida Center for Health Information and Policy Analysis:

We will:

- **implement a comprehensive Medicaid provider portal with a partnership with Availity and a personal health records system for Medicaid recipients through a partnership with Health Trio,**
- **initiate an outreach program to encourage health care providers to begin using electronic health records with funds from the American Recovery and Reinvestment Act of 2009 www.FHIN.net, and**
- **improve the Facility Locator functionality and expand the consumer information provided on FloridaHealthFinder.gov.**

Our Team:

We will:

- **incorporate performance measures in the Legislative Budget Request process,**
- **develop additional leadership training for Agency personnel,**
- **streamline contract processes throughout the Agency,**
- **implement Voice Over Internet Provider (VOIP) telecommunications technology to improve the efficiency of our systems and provide future cost benefits to taxpayers, and**
- **create and improve portal technologies to accommodate regulated entities and other Florida residents in doing business with the Agency via the Internet.**

Inspector General:

We will:

- **establish a Fraud Steering Committee to develop and coordinate ideas for enhancing our efforts to prevent, detect and recoup Medicaid fraud and overpayment,**
- **continue to increase the absolute levels of cost avoidance and fraud recoupment, by applying Agency resources in the most efficient and productive manner possible, and**
- **enhance several areas within Medicaid Program Integrity, including the Data Detection Unit, the Managed Care Unit and field operations.**





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