



Florida's Medicaid Reform

Information Workshop

Baker, Clay and Nassau Counties

Macclenny, Florida

December 11, 2006





Introductions

Lisa Broward
Field Office Manager
Medicaid Area 4



A light green map of Florida is in the background. A yellow circle with a black outline is placed over Tallahassee, and the word "Tallahassee" is written in a light green font next to it. The Florida state seal is also visible in the lower right area of the map.

Tallahassee

Medicaid Reform Overview

Thomas W. Arnold
Deputy Secretary for Medicaid



Why Do We Need Medicaid Reform?

- ❖ *Under traditional fee-for-service Medicaid consumers have few choices – and few opportunities to participate in health care decisions.*
- ❖ *Lack of access to specialists.*
- ❖ *The traditional program is complex and hard to manage.*
 - *Florida operates 20 different “waiver” programs (examples include: Prepaid Mental Health, Healthy Start; and Prepaid Dental, etc.).*
- ❖ *In addition, the state covers over 44 services.*
- ❖ *We need to control the growth of expenditures – left unchecked by Medicaid will make up 59% of the state’s total budget by the year 2015.*
- ❖ *We need a system that focuses on improving the health of beneficiaries, not just paying claims when people are sick.*

Reform Timeline

- ❖ **May 2005:** Reform authorized by Florida Legislature in SB 838.
- ❖ **August 2005:** Draft waiver request posted on AHCA website.
 - Agency for Health Care Administration (Agency), the state Medicaid Agency, received comments on the draft.
 - Agency reached agreement on Upper Payment Limit (UPL) program with Centers for Medicare and Medicaid Services (CMS).
- ❖ **October 2005:** Waiver request approved by CMS.
- ❖ **December 2005:** Approved by the Legislature.

Reform Timeline

(continued)

- ❖ **July 2006:** *Choice counseling hotline available for beneficiaries in Duval and Broward Counties.*
- ❖ **September 2006:** *Enrollment began for Duval and Broward Counties.*
- ❖ **December 2006:** *Application and Model Contract for Reform Plans in Baker, Clay and Nassau Counties available.*
- ❖ **July 2007:** *Choice counseling hotline available for beneficiaries in Baker, Clay and Nassau Counties.*
- ❖ **September 2007:** *Enrollment to begin for Baker, Clay and Nassau Counties.*

Authorization for Reform

- ❖ *The Agency has been authorized through Section 409.91211, Florida Statutes to:*
 - *Seek experimental, pilot, or demonstration project waivers, pursuant to s. 1115 of the Social Security Act, to create a statewide initiative to provide a more efficient and effective service delivery system that enhances quality of care and client outcomes in the Florida Medicaid program.*
 - *Implement the program in Broward County and Duval County.*
 - *Expand into Baker, Clay, and Nassau Counties within 1 year after the Duval County program becomes operational.*

What Will Medicaid Reform NOT DO?

❖ It will NOT:

- Change who receives Medicaid.*
- “Cut” the Medicaid budget.*
- Limit medically necessary services for children.*
- Limit medically necessary services for pregnant women.*
- Permit Reform health plans to charge higher cost sharing.*

What Will Medicaid Reform DO?

❖ It will:

- Increase beneficiary choice.*
- Empower beneficiaries to participate in health care.*
- Encourage benefits that better meet beneficiary needs.*
- Allow access to services not traditionally covered by Medicaid.*
- Reward beneficiary healthy behavior and choices.*
- Bridge the gap to private insurance.*

Who Will Participate in Medicaid Reform?

- ❖ *Beginning July 2007 we will offer Choice Counseling in Baker, Clay and Nassau Counties.*
- ❖ *Enrollment to begin September 2007:*
 - *Temporary Assistance for Needy Families (TANF).*
 - *TANF-Related Group.*
 - *Aged and Disabled (non dually eligible).*
 - *Children with Chronic Conditions (when a network is available).*
 - *HIV / AIDS Patients.*

Who May Participate in Medicaid Reform?

- ❖ *The following individuals eligible under the below groups will be excluded from mandatory participation during the initial phase, however, they may voluntarily choose to participate:*
 - *Foster care children;*
 - *Individuals diagnosed with developmental disabilities;*
 - *Pregnant women with incomes above the TANF poverty level; and*
 - *Individuals with Medicare coverage.*

Who Will Not Participate in Medicaid Reform?

❖ Will Not Participate:

- Women who are eligible for Medicaid due to breast and/or cervical cancer.*
- Individuals age 65 and over who are in state mental facilities.*
- Individuals eligible for Medicaid because they are in the family planning waiver.*
- Individuals eligible because they are “medically needy”.*

Baker, Clay and Nassau Medicaid Eligible December 1, 2006

❖ *Baker:*

- *Total Medicaid Eligible*:* 3,521
 - *Mandatory Reform: 2,434*
 - *Voluntary Reform: 305*

❖ *Clay:*

- *Total Medicaid Eligible*:* 13,217
 - *Mandatory Reform: 8,870*
 - *Voluntary Reform: 1,155*

❖ *Nassau:*

- *Total Medicaid Eligible*:* 5,936
 - *Mandatory Reform: 3,780*
 - *Voluntary Reform: 607*

* "Total Medicaid Eligible" includes beneficiary groups who would not be eligible for Reform, as well as those groups eligible for Reform.

Letters of Intent

- ❖ *Letter of Intent have been received for Baker, Clay and Nassau from the following:*
 - *Florida NetPass, LLC (PSN).*
 - *PhyTrust of Florida LLC, d/b/a Access Health Solutions (PSN).*
 - *Better Health, LLC (PSN).*
 - *United Healthcare of Florida, Inc. (HMO).*
 - *Wellcare of Florida Inc. d/b/a/ Staywell Health Plan of Florida (HMO).*
 - *HealthEase Health Plans of Florida, Inc. (HMO).*
 - *Citrus Health Plan (HMO).*
 - *USMD, LLC/ FLMD, LLC (PSN).*
 - *Universal Health Care, Inc. (HMO).*
 - *Children's Medical Services (Specialty PSN).*

Broward: 10 HMOs + 5 PSNs

<i>HMOs</i>	<i>PSNs</i>
<i>HealthEase</i>	<i>Florida NetPASS</i>
<i>Humana Family</i>	<i>South Florida Community Care Network</i>
<i>Preferred Medical Plan, Inc.</i>	<i>Access Health Solutions (PhyTrust)</i>
<i>Staywell</i>	<i>Pediatric Associates</i>
<i>Total Health Choice</i>	<i>CMS</i>
<i>United Health Care</i>	
<i>Vista Healthplan of South Florida</i>	
<i>Amerigroup Community Care</i>	
<i>Buena Vista</i>	
<i>NOTE: Voluntary enrollment in Universal, a new reform plan, will begin January 2007, with mandatory enrollments beginning in February 2007</i>	

Duval: 4 HMOs + 2 PSNs

<i>HMOs</i>	<i>PSNs</i>
<i>Staywell</i>	<i>First Coast Advantage (Shands Jax)</i>
<i>United Healthcare</i>	<i>Access Health Solutions (Phytrust)</i>
<i>Healthease</i>	
<i>NOTE: Voluntary enrollment in Universal, a new reform plan, will begin January 2007, with mandatory enrollments beginning in February 2007</i>	

Beneficiary Timeline

❖ *February 2007:*

- *Brochures and Area Office Training Schedule flyers mailed to beneficiaries.*

❖ *May 2007:*

- *Second mailing of brochures and Area Office Training Schedule to beneficiaries.*

Beneficiary Timeline

(continued)

❖ July 2007:

- Choice Counseling hotline available for Baker, Clay and Nassau Counties.*
- Choice Counseling for enrollment begins.*

❖ September 2007:

- Enrollment to begin for Baker, Clay and Nassau Counties.*

❖ October 2007:

- Mandatory assignments for beneficiaries who have not voluntarily chosen a plan begins.*

Outreach to Beneficiaries

- ❖ *Announcements of public meetings broadcast in the Florida Administrative Weekly and to an interested parties list.*
- ❖ *Community advertisements.*
- ❖ *Additional public access to information about Reform through Medicaid Website:*

http://ahca.myflorida.com/Medicaid/medicaid_reform/index.shtml

- ❖ *Outreach workshops to continue through start of enrollment.*

How will Medicaid Reform Effect the Beneficiary?

- ❖ *Health Plan Choices.*
- ❖ *Choice Counseling.*
- ❖ *Customized Benefit Packages.*
- ❖ *Enhanced Benefits Accounts.*
- ❖ *Option to Opt-out of Medicaid into Employer Sponsored Health Plan.*

How will Medicaid Reform Effect the Beneficiary? (continued)

❖ Health Plan Choices:

- Reform will attract Medicaid health plans to your area.*
- In each area beneficiaries will choose from:*
 - At least 2 Reform plans: managed care plans, provider service networks –*
or
 - One Reform plan and MediPass – in areas where there is only one Reform plan.*

How will Medicaid Reform Effect the Beneficiary? (continued)

❖ Customized Benefit Packages:

- Reform health plans will create benefits to meet your needs – you choose the right package.*
- Benefit packages will include all Federally required benefits – and may include some services not currently covered by Medicaid.*
- Benefit packages must have the same value as the current Medicaid benefit package.*
- Benefits must meet State defined standards of “sufficiency” – based on the health plan’s target population – not just the “average” member.*

Customized Benefit Packages

Plan Design Guidelines

- ❖ *Plan services:*
 - *Certain services must be provided at least to current coverage levels.*
 - *Other services must be provided at least to meet standards set by the Agency.*
 - *Remaining services must be offered, but amount, scope and duration are flexible within boundaries established by the Agency.*
- ❖ *Reform plans can offer services above current levels.*
 - *For Example: Several existing Reform plans offer expanded adult vision benefit (up to \$125 per year for upgrades such as scratch resistant lenses).*
- ❖ *Reform plans can add services not currently covered.*
 - *For Example: Several existing Reform plans offer over the counter drug benefit (\$10-25/Month).*

Customized Benefit Packages

Plan Design Guidelines (continued)

❖ Required at least to current limits:

- Physician and physician extender services.*
- Hospital inpatient care.*
- Emergency care.*
- EPSDT and other services to children.*
- Maternity care and other services to pregnant women.*
- Transplant services.*
- Medical/drug therapies (chemo, dialysis).*
- Family planning.*
- Outpatient surgery.*
- Laboratory and radiology.*
- Transportation (emergent and non-emergent).*
- Outpatient mental health services.*

Customized Benefit Packages

Plan Design Guidelines (continued)

- ❖ *Required and tested for benefit sufficiency:*
 - *Hospital outpatient services.*
 - *Durable medical equipment.*
 - *Home health care.*
 - *Prescription drugs.*
- ❖ *Existing Reform plans offer a range of services:*
 - *For Example:*
 - *To meet the sufficiency standards, existing plans were required to provide a minimum of 9 prescriptions/month to the Children and Families group and a minimum of 16 prescriptions/month to the Aged and Disabled group.*
 - *However, many plans offered a prescription benefit above the minimum determined to be sufficient.*

Customized Benefit Packages

Plan Design Guidelines (continued)

- ❖ *Required to be offered, but amount, scope and duration are flexible.*
 - *Chiropractic services.*
 - *Podiatry services.*
 - *Outpatient therapy services for adults.*
 - *Adult dental services.*
 - *Adult vision services.*
 - *Adult hearing services.*
 - *Existing Reform plans offer a range of services:*
 - *For Example: Podiatry services offered by different plans range from 6 visits to 24 visits per year.*

How will Medicaid Reform Effect the Beneficiary?

- ❖ *Option to “Opt-Out” of Medicaid:*
 - *If you are employed by a company that offers health insurance, you will have the choice of applying the premium towards the purchase of this insurance.*
 - *You may enroll in your employer’s plan at any time, even after you enroll in a reform health plan.*
 - *If you Opt-Out, you will still have the option to reenroll in Medicaid at the time of your Medicaid open enrollment period, your employer’s open enrollment period, or due to loss of your job.*
 - *This option is completely voluntary.*
 - *Program is up and running.*

How will Medicaid Reform Effect the Beneficiary?

❖ Enhanced Benefit Accounts:

- Rewards healthy behavior and wellness activities.*
- You can earn up to a maximum of \$125 per year in “credit dollars.”*
- Funds deposited in an individual account.*
- You have control over how the funds are used.*
- The current Medicaid I.D. card will be used to access the accounts.*
- Program is up and running, beneficiaries are earning “credit dollars” now.*
- Most beneficiaries will be able to use funds for up to 3 years after losing Medicaid eligibility.*

Enhanced Benefits Access to the Accounts

- ❖ *All beneficiaries enrolled in a Medicaid Reform Health plan are eligible for the Enhanced Benefit program.*
- ❖ *An account will be established for each beneficiary at the time of the first credit deposit in the account .*
- ❖ *Account statements will be mailed to the beneficiary on a monthly basis (credits and debits).*

Enhanced Benefits Account Program: Approved Healthy Behaviors and Credits

Children: Behavior Name	Credit Amount Per Occurrence	Annual Occurrence Limit	Reporting Process
Childhood dental exam	\$ 25.00	2	Claims Data
Childhood vision exam	\$ 25.00	1	Claims Data
Childhood preventive care (age-appropriate screenings and immunizations)	\$ 25.00	Any combination, up to 5	Claims Data
Childhood wellness visit	\$ 25.00		
Keeps all primary care appointments	\$ 25.00		

Adults: Behavior Name	Credit Amount Per Occurrence	Annual Occurrence Limit	Reporting Process
Keeps all primary care appointments	\$ 15.00	2	Claims Data
Mammogram	\$ 25.00	1	Claims Data
PAP Smear	\$ 25.00	1	Claims Data
Colorectal Screening	\$ 25.00	1	Claims Data
Adult Vision Exam	\$ 25.00	1	Claims Data
Adult Dental Exam	\$ 15.00	2	Claims Data or Universal Form

Enhanced Benefits Account Program: Approved Healthy Behaviors and Credits

ALL: Behavior Name	Credit Amount Per Occurrence	Annual Occurrence Limit	Reporting Process
Disease management participation	\$ 25.00	1	Universal Form
Alcohol and/or drug treatment program participation	\$25.00	1	Universal Form
Alcohol and/or drug treatment program 6 month success	\$15.00	2	Universal Form
Smoking cessation program participation	\$25.00	1	Universal Form
Smoking cessation program 6 month success	\$15.00	2	Universal Form
Weight loss program participation	\$25.00	1	Universal Form
Weight loss program 6 month success	\$15.00	2	Universal Form
Exercise program participation	\$25.00	1	Universal Form
Exercise program 6 month success	\$15.00	2	Universal Form
Flu Shot when recommended by physician	\$25.00	1	Claims Data or Universal Form
Compliance with prescribed maintenance medications	\$7.50	4	Claims Data

Enhanced Benefits Account Program: Approved Health Related Products and Supplies

Category	Examples
Analgesics/anti-inflammatory agents	Advil, Aspirin
Cough and Cold OTC	Cough and Cold Medications that do not require a prescription
Cough and Cold by Rx only	Cough and Cold Medications that require a prescription and are not covered by Medicaid
Ear	Debrox, Ear drops, Nurine ear drops
Eye	Visine, Refresh, Tears Naturale
First Aid Products	Bandages, braces, ointments
Gastrointestinal	Antacids, Pepto-Bismol, Prilosec OTC
Laxatives	Phillip's Milk of Magnesia, Metamucil Fiber Wafer
Nose	Simple Saline, Sinus Nasal Spray
Orthopedic aids	Arthritis Relief Gloves, Arch Supports, Heating Pad
Topical	Sunscreens, medicated shampoos, lotion
Topical Antifungal	Clotrimazole, Desenex, Lamisil
Topical Vaginal	Summers Eve Cream, Vagasil
Vitamin	Vitamin A, Vitamin B, Vitamin C, Multi-vitamin tablet(s), Stress B tablet(s)
Dental Supplies	Toothpaste, Tooth brushes, Mouthwash, Floss, etc.



Break

FLORIDA
MEDICAID





Florida Medicaid Reform Choice Counseling

Scott Ettaro
Outreach Manager, ACS

Florida Medicaid Reform Choice Counseling Different Ways to Receive Help

- ❖ *Helpful Support Each Step of the Way:*
 - *By Phone:*
 - *Monday – Friday, 8:00am - 7:00pm.*
 - *Saturday, 9:00am – 1:00pm.*
 - *By Mail:*
 - *Blue/Green “Check It Out” Envelope.*
 - *In Person, in the Communities:*
 - *Offices located near residences of Medicaid beneficiaries.*
 - *Home visits available, if needed by the individual.*
 - *By Internet.*

Helping Beneficiaries Make a Choice

- ❖ *Provider Search:*
 - *by Primary Care doctor.*
 - *by Specialist.*
 - *Updated weekly.*
- ❖ *Easy to Understand Question and Answers.*
- ❖ *The information offered to beneficiaries will be fair across all plans.*
- ❖ *Choice counselors are monitored to ensure they do not direct individuals to a particular plan.*

Florida Medicaid Reform Choice Counseling

- ❖ *Teaming with State and Local Stakeholders:*
 - *Community Based Organizations.*
 - *Faith Based Organizations.*
 - *Health Planning Councils.*
 - *Healthy Start Coalitions.*
 - *Department of Children and Families.*
 - *WorkForce Centers.*
 - *Consumer Advocacy Groups.*

Florida Medicaid Reform Choice Counseling (continued)

- ❖ *Group and Face-to-Face Counseling:*
 - *Counseling sessions when and where needed.*
 - *Sixty-five percent voluntary enrollment rate, is the goal for year one.*
 - *Community Ambassador Program.*
 - *Oral and written translation services.*
 - *Focus on unbiased information.*
 - *Understanding and accommodating “Special Needs” population.*
 - *Flexibility in approach to diverse groups.*



Florida Medicaid Reform Choice Counseling Help and Information

- ❖ *“Check It Out” outreach and media campaign.*
- ❖ *Outbound call to alert beneficiary “Check It Out” envelope is on the way.*
- ❖ *Choice Counseling envelope received by every beneficiary who must enroll in Reform.*
- ❖ *It will include:*
 - *Brightly Colored “Check It Out” Envelope.*
 - *Plan information.*
 - *Choice Counseling Help line phone number.*
 - *Choice Counseling website address.*



AHCA
Agency for Healthcare Administration
P.O. Box 5197
Tallahassee, FL 32314-5197



Check it Out!

*New Choices and
Changes in your
Healthcare Coverage*

Outreach Strategies to Beneficiaries, Advocates, Agencies, Local Officials, Community Leaders

- ❖ *Community Events.*
- ❖ *Public Meetings.*
- ❖ *Mass Media ~ May include:*
 - *Local Newspaper Ads.*
 - *Local Radio Spots.*
 - *Billboards.*



Ensuring Performance Choice Counseling Certification

- ❖ *Certified Choice Counselors.*
 - *Florida has the only program in the nation.*
- ❖ *On-line 10 module course.*
- ❖ *Comprehensive written exam.*
- ❖ *Oral examination with live scenarios.*

Ensuring Performance Choice Counseling (continued)

- ❖ *Agency will monitor all Choice Counseling activities.*
- ❖ *Performance Standards:*
 - *65 percent will choose in year one.*
 - *Increase to 80 percent by year three.*

Unique Needs in Baker, Clay and Nassau Counties

Open Discussion

*Lisa Broward
Field Office Manager
Medicaid Area 4*





***What Can I Do
to Get Ready for Reform?***

***Lisa Broward
Field Office Manager
Medicaid Area 4***



What Can I Do to Get Ready for Reform?

- ❖ *Make sure your local Department of Children and Families office (DCF) has your most up-to-date contact and family information:*
 - *Address.*
 - *Phone number(s).*
 - *Marital status.*
 - *Family income.*
 - *Place of employment.*
 - *Dependents/children.*

What Can I Do to Get Ready for Reform?

- ❖ *In preparation for making a choice of benefit packages, discuss with your family and your doctor(s):*
 - *What Medicaid services are most critical to you given you and your family's health condition?*
 - *What services that Medicaid does not cover at present would be of most benefit to you and your family?*

What Can I Do to Get Ready for Reform?

- ❖ *Read up on the details of the Medicaid Reform initiative.*
- ❖ *Area Four Medicaid Field Office 904-353-2100.*
- ❖ *State identified resources:*
 - *Face to face.*
 - *DCF Call Center 866-762-2237.*

How to Obtain More Information

Area Four Medicaid Office:

Lisa Broward

Field Office Manager

Area4MedicaidHelp@ahca.myflorida.com

904-353-2100

904-353-2198 Fax

1-800-273-5880 (toll free)

Medicaid Website:

<http://ahca.myflorida.com/Medicaid/index.shtml>





Florida's Medicaid Reform

Questions and Answers