

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Atlanta Regional Office
61 Forsyth Street, Suite 4T20
Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

December 19, 2016

Ms. Beth Kidder
Interim Deputy Secretary for Medicaid
Agency for Health Care Administration
2727 Mahan Drive, Mailstop #20
Tallahassee, FL 32308

Dear Ms. Kidder:

The Centers for Medicare & Medicaid Services (CMS) is approving your request for a five year renewal of Florida's Long-Term Care Managed Care, 1915(c) Home and Community Based Services (HCBS) waiver for individuals who are aged 65 and older, and for individuals with physical disabilities from ages 18 through 64 years old. This waiver will provide HCBS for individuals who, absent the waiver, would require nursing facility level of care. This waiver is assigned control number FL 0962.R01.00, which should be referenced in all future correspondence relating to this program. This approval does not relieve the state of its obligations under the Americans with Disabilities Act (ADA) and the Olmstead decision.

Concurrently, the CMS is approving Florida's five year renewal of the 1915(b) program authorized under section 1915(b)(1) and (4) of the Social Security Act (the Act) under CMS control number FL.17-R01. This 1915(b) waiver allows Florida to require mandatory enrollment of all individuals into the state's contracted managed long term care plans for services approved under the 1915(c) waiver.

For the 1915(c) waiver, the state has requested a waiver of 1902(a)(10)(B) of the Act in order to waiver comparability of services. The managed care program is authorized under section 1915(b)(1) and (4) of the Act and provides for waivers of the following section of Title XIX:

- Section 1902 (a)(23) Freedom of Choice
- Section 1902 (a)(10)(B) Comparability of Services

The 1915 (c) waiver will provide participant direction opportunities and will offer the following services: adult day health care, case management, homemaker, respite, attendant care, intermittent and skilled nursing, medical equipment and supplies, occupational therapy, personal care, physical therapy, respiratory therapy, speech therapy, transportation, adult companion, assisted living, behavior management, caregiver training, home accessibility adaptations, home delivered meals, medication administration, medication management, nutritional assessment and risk reduction, and personal emergency response system.

The following number of unduplicated recipients and the estimates of average per capita cost of waiver services have been approved:

Waiver Year	Unduplicated Recipients (Factor C)	Average Per Capita Cost of Waiver Services (Factor C x Factor D)
WY1 (12/28/16 – 12/27/17)	62,500	\$499,875,000
WY2 (12/28/17 – 12/27/18)	62,500	\$512,375,000
WY3 (12/28/18 – 12/27/19)	62,500	\$525,000,000
WY4 (12/28/19 – 12/27/20)	62,500	\$538,062,500
WY4 (12/28/20 – 12/27/21)	62,500	\$551,500,000

These approvals are subject to the agreement to serve no more individuals than those indicated above. If the state wishes to serve more individuals or make any other alterations to these waivers, an amendment must be submitted for approval.

The state has agreed to work on an ongoing basis to assure continuous quality and quality improvements in this waiver. Our decision is based on the evidence submitted to the CMS demonstrating that the state's managed care program and meets all statutory and regulatory requirements for assuring beneficiaries' access to and quality of services, and will be a cost-effective means of providing services to beneficiaries in Florida's Medicaid population.

These waivers are effective for five years beginning December 28, 2016 through December 27, 2021 and operate concurrently. The state may request renewal of these authorities by providing evidence and documentation of satisfactory performance and oversight. Florida's request that these authorities be renewed should be submitted to the CMS no later than March 31, 2021. The state will report all managed care waiver expenditures on the CMS 64-9 and 1915(c) waiver expenditures on the CMS 372 report. A separate 372 report should be submitted for the time the waiver was on extension. Florida is also responsible for documenting cost- effectiveness, access and quality in subsequent renewal requests.

We appreciate the cooperation and effort provided by you and your staff during the review of this waiver renewal. For questions relating to this approval letter, please contact Cheryl L. Brimage, of my staff at 404-562-7116 or email her at cheryl.brimage@cms.hhs.gov.

Sincerely,



Jackie Glaze
Associate Regional Administrator
Division of Medicaid & Children's Health Operations