Florida Medicaid MMA Physician Incentive Payment Program

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Introduction

- Florida law directs the Agency for Health Care Administration to implement and operate the Statewide Medicaid Managed Care Program. [Chapter 409, Part IV, Florida Statute (F.S.)]
- The program has two components:
 - Long-Term Care
 - Managed Medical Assistance (MMA)



Statutory Requirement

- Specifically, section 409.967(2)(a), F.S., requires that:
 - MMA plans coordinate care, manage chronic disease and prevent the need for more costly care, and that such effective care management should enable plans to redirect available resources and increase compensation for physicians.
 - The Agency may impose fines or other sanctions on a plan that fails to meet this performance standard after 2 years of continuous operation.
- October 2016 begins year 3 of operations.



Funded by MMA Program Savings

- Health plans will pay incentive program payments out of savings they achieve from efficiencies through care coordination such as:
 - Reducing unnecessary emergency department visits
 - Preventing hospital readmissions
- Payments must be within Agency-identified savings targets.



Two Program Types

There are two types of MMA Physician Incentive Programs:

- <u>Agency's Alternative Incentive Program (AP)</u>:
 All program parameters developed by the Agency.
- Individual Health Plan Incentive Program (IHP):
 - Some program parameters developed by the Agency and others developed by the health plan.
 - All IHP Incentive Programs must be approved by the Agency.
 - If the Agency does not approve a plan's proposed IHP, the plan must implement the Agency's Alternative Proposal.



Identified Providers

- <u>Identified Providers</u> are those <u>eligible to qualify</u> for the MMA Physician Incentive Program payments.
- All Identified Providers must have a reasonable opportunity to earn the MMA Physician Incentive Program payment (payment at the Medicare rate).
 - Identified Providers qualify for enhance payments by meeting quality and access standards.



Identified Providers: AP program

- The Florida Medicaid program serves approximately 2.3 million children and was responsible for coverage of 136,000 Medicaid births in SFY 2014-15.
- The AP Incentive Program includes the following Agency Identified Providers who have the opportunity to earn the enhanced rate:
 - Board Certified Pediatricians
 - Board Certified OB/GYNs



Identified Providers: IHP program

- IHP Incentive Programs must include, <u>at a minimum</u>:
 - Board Certified Pediatricians
 - Board Certified OB/GYNs
- Health plans can also propose to include primary care physicians for the services they provide to children.
 - These must be approved by the Agency.



Excluded Providers: AP Program

- Certain providers who would otherwise be included in the definition of Identified Providers are considered excluded from the program.
- The AP Incentive Program excludes the following providers:
 - Providers that are not part of the plan's network (nonparticipating providers)
 - Federally Qualified Health Centers
 - Rural Health Clinics
 - County Health Departments





Excluded Providers: IHP Program

- IHP Incentive Programs must exclude these providers:
 - Providers that are not part of the plan's network (nonparticipating providers)
 - Federally Qualified Health Centers
 - Rural Health Clinics
 - County Health Departments
- Plans can propose additional Excluded Providers.
 - These must be approved by the Agency.



Qualified Providers

• An Identified Provider who has met all requirements to receive the MMA Physician Incentive Program payment.



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Qualified Providers: AP Program

- The following are Qualified Providers who must receive the enhanced payment from the health plan.
- Any Board Certified Pediatrician or Board Certified OB/GYN whose practice has been recognized by one of the following organizations as a Patient-Centered Medical Home:
 - Accreditation Association for Ambulatory Health Care
 - National Committee for Quality Assurance, Level 2
 - The Joint Commission



Qualified Providers: AP Program

- The following are Qualified Providers who must receive the enhanced payment from the health plan.
- Any Board Certified OB/GYN who has met <u>all</u> of the following qualifications:
 - HEDIS measure, Frequency of Ongoing Prenatal Care: for calendar year 2015, the rate of the plan's patients with 81% or more of expected visits must be at or above the Medicaid 75th percentile as calculated by NCQA.
 - HEDIS measure, Postpartum Care: for calendar year 2015, the rate of the plan's patients must be at or above the National Medicaid Mean as calculated by NCQA.
 - Florida Medicaid Cesarean Section Rate: rate below 35% for Medicaid births between January - December 2015.



Qualified Providers: IHP Program

- The method by which Identified Providers can <u>qualify</u> for the enhanced payment can differ from the AP program.
 - Plans do not have to use the qualifications on slides 14 and 15.
- All proposed IHP Incentive Program provider qualifications must be approved by the Agency.



Payment Structure

- Payments to Qualified Providers must be at least equivalent to the Medicare Fee-for-Service (FFS) rate.
- Incentive payments must be one of the following:
 - FFS payment using a fee schedule equivalent to the appropriate Medicare Rate,
 - For subcapitated medical groups, per member per month rate adjusted to reflect the relative effect of reimbursing Qualified Providers at the Medicare rate, based on the volume and value of the services they provide, or
 - Alternative payment methodology for which the health plan has demonstrated convincing reimbursement equivalency with Medicare levels.
- Incentive payments must be effective for dates of service beginning October 1, 2016.



Timeline

- May August 2016: Agency reviews and approves health plan incentive programs.
- September 1, 2016: Plans must identify all network providers who qualify for the MMA Physician Incentive Program starting October 1.
- October 1, 2016: Qualified Providers begin earning enhanced reimbursement for Qualified Services
- April 2017: All MMA Physician Incentive Programs must be opened to new providers every six months.
- Annually: Health plans can propose MMA Physician Incentive Program changes each year, to be effective on October 1 each year.



Additional Information

 Additional information and resources can be accessed on the MMA Physician Incentive Payment Program website: <u>http://ahca.myflorida.com/medicaid/statewide_mc/mma_phys_ician_incentive.shtml</u>



Public Comment Period



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