

Florida Medicaid
Managed Medical Assistance Waiver
1115 Research and Demonstration Waiver
#11-00206/4

Quarterly Report
(First Quarter)
July 1, 2019 – September 30, 2019



Agency for Health Care Administration

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Executive Summary

The Managed Medical Assistance (MMA) program is one component of the Statewide Medicaid Managed Care (SMMC) program. In 2014, the Centers for Medicare and Medicaid Services (CMS) approved the MMA 1115 Research and Demonstration Waiver renewal application, which authorized the statewide implementation of the MMA program.

Recent amendments to the MMA Waiver have added additional programs and pilot projects, including the Pre-Paid Dental Health Program and the Behavioral Health and Supportive Housing Assistance Pilot. CMS also approved the State's request for a waiver of retroactive eligibility.

With these changes, the State is now required under Special Term and Condition #76 to submit three Quarterly Reports in addition to the Annual Report to CMS.

The Quarterly MMA Reports are due 60 days following the end of each quarter and are limited in scope to the Pre-Paid Dental Health Program, the Behavioral Health and Supportive Housing Assistance Pilot, and the retroactive eligibility waiver.

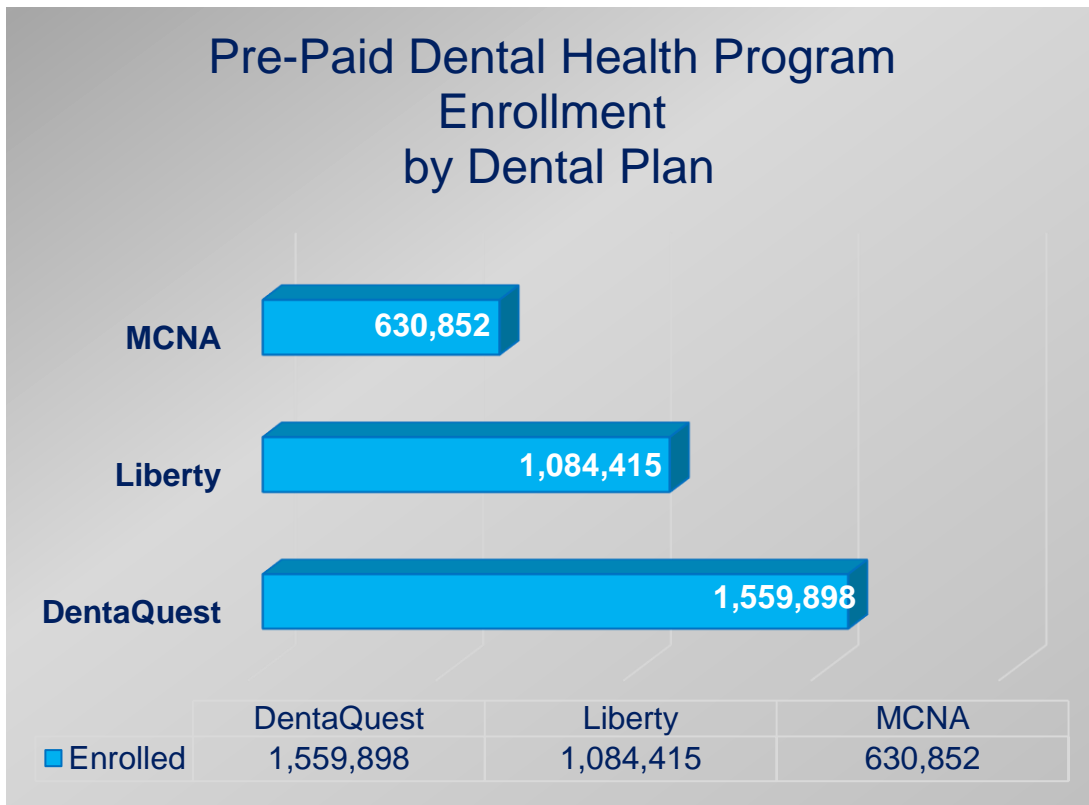
This Quarterly Report contains operational updates, performance metrics, and evaluation activities and interim findings for the Pre-Paid Dental Health Program, the Behavioral Health and Supportive Housing Assistance Pilot, and the retroactive eligibility waiver for the first quarter of Demonstration Year 14 (DY14_Q1); July 1, 2019 through September 30, 2019.

Section I: Pre-Paid Dental Health Program

1.1 Operational Update

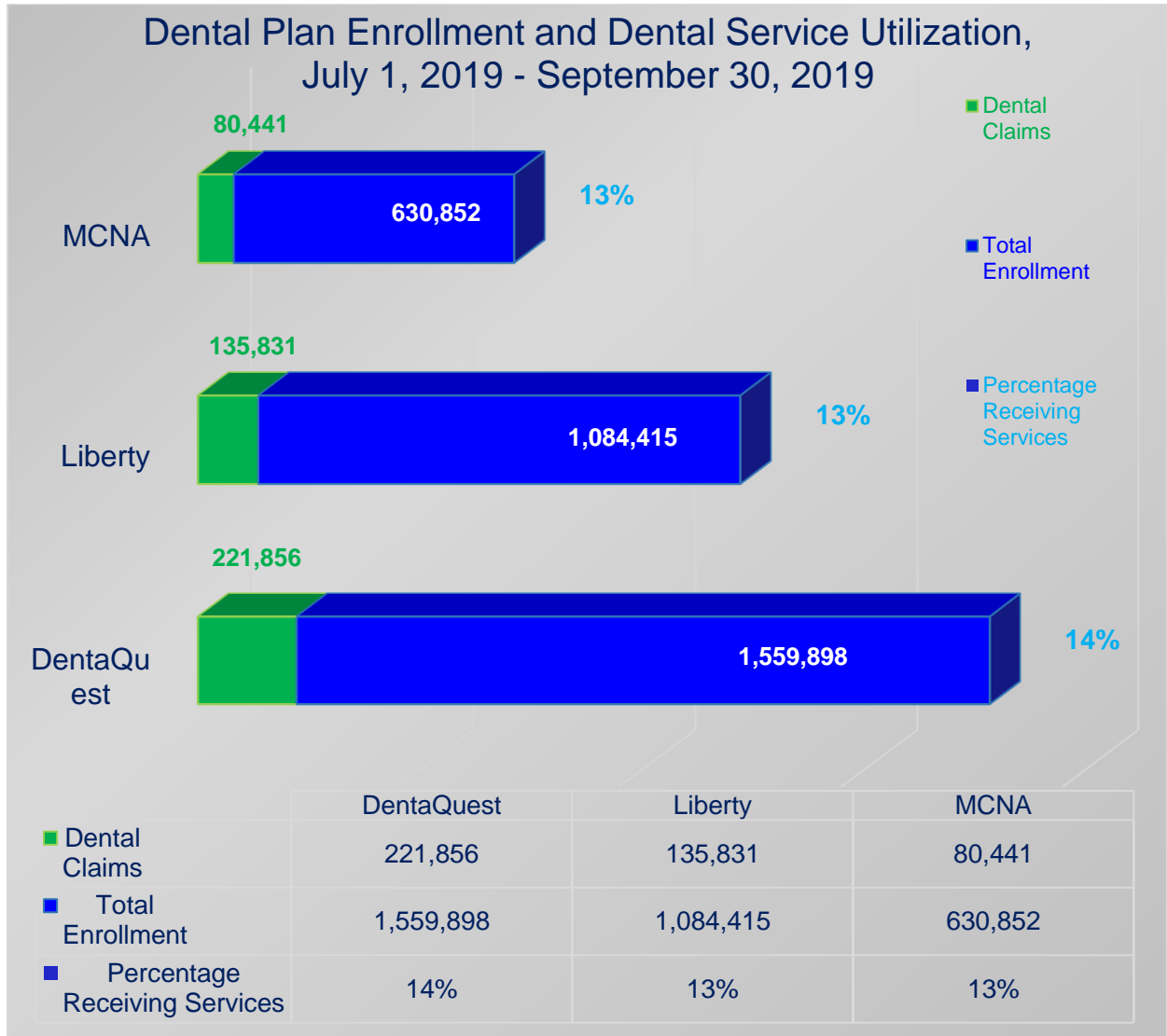
A. Pre-Paid Dental Health Plan Enrollment

The State completed the implementation of the Pre-Paid Dental Health Program in February 2019. The majority of Florida Medicaid recipients receive their dental services through the Pre-Paid Dental Health Program. In addition to preventive and therapeutic dental coverage, dental health plans also offer expanded benefit packages under which they provide preventive, diagnostic, and restorative care services, including periodontics, oral, maxillofacial surgery, and diabetic testing. Previously, adults enrolled in Florida Medicaid only received limited dental services including dentures and emergency services to relieve pain and infection. Currently, there are 3,275,165 Florida Medicaid recipients enrolled into the three dental health plans contracted with the State of Florida. Each plan serves all counties in the state. The following graph contains enrollment data for the Pre-Paid Dental Health Program by dental health plan.



B. Utilization

The following chart details the Pre-Paid Dental Health Program’s enrollment and service utilization for DY14_Q1. Service utilization, in this instance, is based on any dental service claim submitted by a Pre-Paid Dental Health Program provider during the first quarter of DY14. Since service utilization is based on claims data, the figures reflected in the chart will increase over time, as providers may not yet have billed for services rendered during this time period. The chart below illustrates the enrollment and utilization data by the dental health plan.



C. Complaints, Grievances, and Appeals

The Pre-Paid Dental Health Program has been operating statewide for three quarters, during which it has maintained a low complaint rate, with each quarter having less than one complaint per 1,000 enrollees. The following chart represents all of the complaints reported to the Agency, and the DY14_Q1 reporting period figures are highlighted below.

Pre-Paid Dental Health Program Complaint Rates			
	DY13 3 rd Quarter	DY13 4 th Quarter	DY14 1 st Quarter
Dental Enrollment	3,109,753	3,093,332	3,275,165
Dental Complaints	308	357	478
Complaints per 1,000 Enrollees	.099	.115	.146

D. Fair Hearings

During DY14_Q1, there were 81 Fair Hearings requested under the Pre-Paid Dental Health Program. The 81 requested Fair Hearings are itemized by service type and dental health plan in the chart below.

Dental Health Plan Fair Hearings (DY14_Q1)		
Dental Health Plan Name	Service Description	Count
DentaQuest	Dental - Endodontics	1
	Dental - Oral And Maxillofacial Surgery	21
	Dental - Orthodontics	16
	Dental - Periodontics	2
	Dental - Preventive	1
	Dental - Prosthodontics	9
	Dental - Restorative	3
	Extra Benefits Offered By Plan	2
Liberty	Dental - Diagnostic	1
	Dental - Endodontics	1
	Dental - Oral And Maxillofacial Surgery	4
	Dental - Orthodontics	7
	Dental - Restorative	1
MCNA Dental	Dental - Endodontics	1
	Dental - Oral And Maxillofacial Surgery	5
	Dental - Periodontics	1
	Dental - Prosthodontics	1
	Dental - Restorative	1
Total		81

1.2 Performance Metrics

There are no updates to report for performance metrics related to the Pre-Paid Dental Health Program for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

1.3 Evaluation Activities and Interim Findings

There are no updates to report for evaluation activities related to the Pre-Paid Dental Health Program for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

Section II: Behavioral Health and Supportive Housing Assistance Pilot

2.1 Operational Update

A. Overview

In March 2019, CMS approved the State's 1115 MMA Waiver amendment request authorizing the State to implement a Behavioral Health and Supportive Housing Assistance Pilot in Medicaid Regions 5 and 7.

- Region 5 consists of Pasco and Pinellas counties
- Region 7 consists of Seminole, Brevard, Orange, and Osceola counties

The Behavioral Health and Supportive Housing Assistance Pilot will provide services to recipients who have a severe mental illness (SMI), substance use disorder (SUD), a combination of SUD and SMI, and are homeless or at risk of being homeless. The Behavioral Health and Supportive Housing Assistance Pilot services will be available to enrollees of the four MMA plans that were selected to participate in the pilot.

B. Behavioral Health and Supportive Housing Assistance Pilot Services

The MMA plans selected to participate in the Behavioral Health and Supportive Housing Assistance Pilot are authorized to provide the following services to their members who qualify for the pilot:

- **Transitional Housing Services:** Services that support a member in the preparation for and transition into housing. This includes but is not limited to:
 - Conducting tenant screenings and housing assessments
 - Developing an individualized housing support plans
 - Assisting with housing searches and the application process
 - Identifying resources to pay for on-going housing expenses such as rent
 - Ensuring that living environments are safe and ready for move-in
- **Tenancy Sustaining Services:** Services that support a member in being a successful tenant.
 - Early identification and interventions for behaviors that may jeopardize housing such as late rental payment or other lease violations
 - Education and training on the roles, rights and responsibilities of the tenant and landlord
 - Coaching on developing and maintaining key relationships with landlord/property managers
 - Assistance in resolving disputes with landlords and/or neighbors to reduce risk of eviction, advocacy and linkage with community resources to prevent eviction

- Assistance with the housing recertification process
- Coordinating with enrollees to review, update, and modify their housing support and crisis plans
- **Mobile Crisis Management:** The delivery of immediate de-escalation services for emotional symptoms and/or behaviors at the location in which the crisis occurs. Provided by a team of behavioral health professionals who are available 24/7 for the purpose of preventing loss of a housing arrangement or emergency inpatient psychiatric service when possible.
- **Self-Help/Peer Support:** Person-centered service promoting skills for coping with and managing symptoms while utilizing natural resources and the preservation and enhancement of community living skills with the assistance of a peer support specialist.

C. First Quarter Activities:

- The Agency mailed award letters and program notifications on September 17, 2019 to the four selected MMA plans.
- The Final Evaluation Design, containing the Behavioral Health and Supportive Housing Assistance Pilot, was submitted to CMS in July 2019.
- The Agency is developing the reporting mechanism for the selected MMA plans.
- The rate setting process is underway for the selected MMA plans.

D. Behavioral Health and Supportive Housing Assistance Pilot Current and Future Activities

- The selected MMA plans are currently preparing their implementation timelines, which will continue through pilot implementation.
- Implementation of the Behavioral Health and Supportive Housing Assistance Pilot, including the availability of services, will take place on December 1, 2019.

2.2 Performance Metrics

There are no updates to report for performance metrics related to the Behavioral Health and Supportive Housing Assistance Pilot for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

2.3 Evaluation Activities and Interim Findings

There are no updates to report for evaluation activities related to the Behavioral Health and Supportive Housing Assistance Pilot for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

Section III: Retroactive Eligibility Waiver

3.1 Operational Update

A. Background

In 2018, the Florida Legislature directed the Agency to request federal approval for the state to eliminate retroactive Medicaid coverage for non-pregnant adults. The Agency subsequently submitted an amendment request to the CMS for approval, which was granted on November 30, 2018. The change to retroactive eligibility took effect on February 1, 2019.

The MMA waiver states that the Agency shall make payments for Medicaid-covered services, for Medicaid eligible children and pregnant women, retroactively for up to 90-days prior to the month in which an application for Medicaid was submitted. However, for Medicaid eligible non-pregnant adults, payments for Medicaid-covered services are retroactive to the first day of the month in which the Medicaid application was submitted.

The State's analysis determined approximately 39,000 non-pregnant adult recipients were made retroactively eligible in Demonstration Year 10, representing less than 1% of all Florida Medicaid recipients.

B. Overview

The State has a robust outreach/communications system to disseminate information to interested stakeholders about the Florida Medicaid program. The State's goal is to ensure potential recipients understand the importance of applying for Florida Medicaid timely and for providers and stakeholders who help individuals enroll in Florida Medicaid to ensure individuals apply at the earliest opportunity when in need of services. The State continues to make information available by:

- Maintaining information on the Agency's and its partners' (e.g., the Department of Children and Families, which processes eligibility applications) Web sites
- Maintaining information on Florida Medicaid-related social media platforms
- Ensuring appropriate State call centers and information hub staff are trained, understand the change, and can answer callers' questions

3.2 Performance Metrics

There are no updates to report for performance metrics related to retroactive eligibility for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

3.3 Evaluation Activities and Interim Findings

There are no updates to report for evaluation activities related to retroactive eligibility for the period of July 1, 2019 – September 30, 2019. This will be reported in our DY14 Annual Report.

Section IV: Budget Neutrality and Financial Reporting

CMS Form 64, on MMA program expenditures associated with the populations affected by this demonstration, was submitted through CMS' Medicaid and Children's Health Insurance Program Budget and Expenditure System (MBES/CBES) on October 30, 2019.

The 1115 Managed Medical Assistance Waiver continues to be budget neutral. The Budget Neutrality Workbook will be submitted to CMS, via the 1115 Performance Metrics Database and Analytics (PMDA) system, by December 1, 2019.