

Family Planning Waiver

**1115 Research and Demonstration Waiver
#11-W-00135/4**

Public Notice Document

**Public Notice Period May 1 – 30, 2017
5-Year Waiver Extension Request**

**Florida Medicaid
Florida Agency for Health Care
Administration**



TABLE OF CONTENTS

PROGRAM OVERVIEW	1
GOALS AND OBJECTIVES	1
ELIGIBILITY	1
FAMILY PLANNING WAIVER SERVICES.....	2
INCREASING ENROLLMENT AND ACCESS TO SERVICES	2
EVALUATION	3
CURRENT EVALUATION DESIGN	3
EXPENDITURE AUTHORITY.....	4
BUDGET NEUTRALITY COMPLIANCE	5
PUBLIC NOTICE PROCESS	6
PUBLIC NOTICE PROCESS	6
PUBLIC NOTICE MATERIALS.....	6
CONSULTATION WITH INDIAN HEALTH PROGRAMS.....	6
PUBLIC MEETINGS.....	6
SUBMITTING WRITTEN COMMENTS	7
APPENDIX I BUDGET NEUTRALITY TABLES.....	8
APPENDIX II NOTICE TO TRIBES.....	11
APPENDIX III EXPENDITURE AUTHORITY	13

Program Overview

The State is seeking federal authority to extend Florida's 1115 Family Planning Waiver (Project Number 11-W-00135/4) for the period January 1, 2018 through December 31, 2022. The Family Planning Waiver operates statewide and provides family planning services to non-pregnant women who meet the eligibility requirements for the waiver.

Prior to submitting the extension application to the Centers for Medicare and Medicaid Services (CMS), the State is holding a 30-day public notice and comment period. The public notice and comment period is from May 1, 2017 through May 30, 2017, during which the State will hold two public meetings to allow all interested stakeholders the opportunity to provide meaningful input on the proposed five-year extension request. A full description of the public notice process can be found on page seven.

Goals and objectives

The primary objective of the Family Planning Waiver is to increase the number of women between the ages of 14 and 55 years receiving family planning services.

Family Planning Waiver goals:

- Increase access to family planning services.
- Increase child spacing intervals through effective contraceptive use.
- Reduce the number of unintended pregnancies in Florida.
- Reduce Florida Medicaid costs by reducing the number of unintended pregnancies by women who otherwise would be eligible for Florida Medicaid pregnancy-related services.

The State contracts with Florida State University (FSU) to conduct the evaluation of the family planning waiver.

Eligibility

Women must meet the following eligibility criteria to qualify for the Family Planning Waiver:

- Loss of Florida Medicaid eligibility.
- Between the ages of 14 and 55 years.
- Have family income at, or below, 191% of the federal poverty level.
- Are not otherwise eligible for Florida Medicaid, children's health insurance program, or health insurance coverage that provides family planning services.

Eligibility for the Family Planning Waiver is limited to two years and is subject to an annual eligibility redetermination.

Family Planning Waiver Services

Women enrolled in the Family Planning Waiver access services through Florida Medicaid's fee-for-service delivery system. Services provided under the Family Planning Waiver include, but are not limited to:

- Physical exams
- Family planning counseling and pregnancy tests
- Birth control supplies
- Colposcopies and treatment for sexually transmitted diseases
- Related pharmaceuticals and laboratory tests

A complete list of all reimbursable service codes for the Family Planning Waiver are posted on the Agency for Health Care Administrations (Agency's) Web site at:

http://ahca.myflorida.com/Medicaid/Family_Planning/reim_services.shtml.

Increasing Enrollment and Access to Services

The State increases access to family planning services by providing services to women who are not otherwise eligible for Florida Medicaid unless pregnant through the Family Planning Waiver.

The Family Planning Waiver provided services to over 42,000 women between 2011 and 2014 which resulted in an estimated 23 million dollars savings for Florida's Medicaid program. In Demonstration Year 16, the Family Planning Waiver increased the amount of women re-enrolling in the waiver for a second year by 65%.

Evaluation

The State is contracted with FSU to conduct the evaluation for the Family Planning Waiver. The current three-year contract will evaluate the following demonstration years:

- Demonstration Year 17: July 1, 2014 – June 30, 2015
- Demonstration Year 18: July 1, 2015 – June 30, 2016
- Demonstration Year 19: July 1, 2016 – June 30, 2017

Current Evaluation Design

The evaluation design focuses on the goals and primary objective of the Family Planning Waiver. FSU uses a combination of quantitative and qualitative methods to evaluate the program. The evaluation team tests four hypotheses regarding the waiver's objectives and reviews survey data to identify strategies that have been successful in achieving the waiver goals and objectives.

Florida State University tests the following hypothesis:

1. More eligible women will participate in the Family Planning Waiver program during the extension period than in previous waiver periods.
2. Family Planning Waiver participants will be more likely to increase their inter-birth interval to 24 months than non-participants.
3. Family Planning Waiver participants will be less likely to have unintended pregnancies than non-participants.
4. Florida Medicaid will achieve cost savings through the Family Planning Waiver program by averting unintended pregnancies and births.

The Family Planning Waiver goals and objectives can be found on page one.

Expenditure Authority

To effectively maintain the Family Planning Waiver, the State is seeking a five-year extension from CMS in order to waive statutory provisions under Section 1902 of the Social Security Act, and obtain expenditure authority that permits the State to provide maximum flexibility in administering the program.

The State is not requesting any changes to the expenditures authorities previously granted as specified in Appendix III.

Budget Neutrality Compliance

The budget neutrality and projected target per-member per-month (PMPMs) for the Family Planning Waiver extension period are provided in tables A-C of Appendix I.

Public Notice Process

Public Notice Process

The State will conduct the public comment period from May 1, 2017 through May 30, 2017 to solicit input on the waiver extension request.

The State notified stakeholders of the public comment period using the following methods:

- Published public notice on April 28, 2017 in the Florida Administrative Register (FAR) in compliance with Chapter 120, Florida Statutes
- Emailed information to individuals and organizations on its interested stakeholders list

Public Notice Materials

The State posted the dates, times, and locations of two public meetings and a link to this public notice document on the Agency's Web site at:

http://ahca.myflorida.com/Medicaid/Family_Planning/extension_2017-22.shtml

This link was also provided in the FAR notice and email to interested stakeholders.

Consultation with Indian Health Programs

The Agency sent written correspondence to the Indian Health Programs located in Florida to solicit input on the waiver extension request (Appendix II). The State of Florida does not have any Urban Indian Organizations, but has two federally recognized tribes: the Seminole Tribe and Miccosukee Tribe.

Public Meetings

The State will hold two public meetings during the public comment period. Individuals who are unable to attend the meetings in person may participate via conference call by using the toll-free number provided. During the meetings, the Agency will provide a brief overview of the Family Planning Waiver and allow time for public comment.

Family Planning Waiver Extension Public Meetings

Location	Date	Time
Orlando Agency for Health Care Administration Hurston Building – South Tower 400 W Robinson St, Suite S-309D Orlando, FL 32801 Conference Line: 1-888-268-4181 Participant Code: 477 371 96#	May 5, 2017	2:15 p.m. – 3:15 p.m.
Tallahassee Agency for Health Care Administration 2727 Mahan Drive, Building 3 Conference Room A Tallahassee, FL 32308 Conference Line: 1-800-219-3192 Participant Code: 114 686 31#	May 16, 2017	2:00 p.m. – 3:00 p.m.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least seven days before the workshop/meeting by contacting Heather Morrison at (850) 412-4034 or by email at Heather.Morrison@ahca.myflorida.com.

Individuals who are hearing or speech impaired, may contact the Agency using the Florida Relay Service, 1 (800) 955-8771 (TDD) or 1 (800) 955-8770 (Voice).

Submitting Written Comments

Written comments on the waiver extension may be submitted via mail or email with the subject “1115 Family Planning Waiver Extension Request” during the public comment period.

Mail: Bureau of Medicaid Policy
 Agency for Health Care Administration
 2727 Mahan Drive, MS #20
 Tallahassee, Florida 32308

Email: FLMedicaidWaivers@ahca.myflorida.com

Appendix I

Budget Neutrality Tables

Table A provides the historic information regarding waiver enrollment (member months) and expenditures for each of the demonstration years (DY). The waiver expenditures identified in this table are the same costs as reported in the State's CMS-64 report. The four most current complete years (DY15-18) were used to project the member months for the proposed extension years (DY20-24). Since DY19 is an incomplete year (July 2016-June 2017), and DY20 (July 2017- Dec 2017) projected PMPM's cost are approved in Special Terms and Condition #41, these years were not used for projection purposes. The resulting trend rate of 3.50% was applied to the member months experienced thus far in DY18 to project DY 20-24.

Table A						
Demonstration Historic Trend (DY1 -6)						
	DY 1	DY 2	DY 3	DY 4	DY 5	DY 6
	SFY98/99	SFY99/00	SFY00/01	SFY01/02	SFY02/03	SFY03/04
<i>FP Waiver Expenditures</i>	\$2,895,339	\$5,430,259	\$6,848,141	\$7,522,595	\$8,396,796	\$32,583
<i>Total Member Months</i>	284,617	985,801	1,379,504	1,289,973	1,310,518	314,472
<i>Average Monthly Members</i>	31,624	82,150	114,959	107,498	109,210	26,206
<i>Cost Per Member Per Month</i>	\$10.17	\$5.51	\$4.96	\$5.83	\$6.41	\$1.06

Table A							
Demonstration Historic Trend (DY7 -13)							
	DY 7	DY 8	DY 9	DY10	DY11	DY12*	DY13*
	SFY04/05	SFY05/06	SFY06/07	SFY07/08	SFY08/09	SFY09/10	SFY10/11
<i>FP Waiver Expenditures</i>	\$876,631	\$1,052,022	\$2,776,378	\$7,439,059	\$8,880,918	\$4,126,034	\$1,126,701
<i>Total Member Months</i>	32,447	37,740	87,633	574,162	705,308	313,166	42,687
<i>Average Monthly Members</i>	2,704	3,145	7,303	47,847	58,776	26,097	3,557
<i>Cost Per Member Per Month</i>	\$27.02	\$27.88	\$31.68	\$12.96	\$12.59	\$13.18	\$26.39

Table A								
Demonstration Historic Trend (DY14 -18)								
	DY14	DY15	DY16	DY17	DY18	DY19 (Through March '17)	DY20** (Through Dec. '17)	DY1-18
	SFY11/12	SFY12/13	SFY13/14	SFY14/15	SFY15/16	SFY16/17	SFY17/18	Total
<i>FP Waiver Expenditures</i>	\$5,705,901	\$3,785,274	\$6,841,890	\$5,046,139	\$4,358,723	\$364,213	\$4,230,452	\$83,441,383
<i>Total Member Months</i>	653,976	561,515	561,633	564,853	622,536	417,204	423,893	10,322,541
<i>Average Monthly Members</i>	54,498	46,793	46,803	47,071	51,878	69,534	70,649	
<i>Cost Per Member Per Month</i>	\$8.72	\$6.74	\$12.18	\$8.93	\$7.00	\$0.87	\$9.98	8.08

* During DYs 12 and 13, the demonstration program operation was disrupted due to a lapse in waiver authority, resulting in a temporary suspension of claim payments for this program. Thus, the member months and costs for these two years are not reflective of the actual utilization and cost trends for the current demonstration operation.

**Projected calculation approved December 2014.

Table B identifies the actual member months and PMPM costs experienced during the current approved waiver period (DY15-18). The PMPMs actually experienced in the waiver are compared to the waiver’s authorized PMPM target limits. The target PMPMs were applied to the actual member months experienced and then compared to the actual total waiver costs as reported in the CMS-64 report. The result demonstrates that the actual waiver costs did not exceed the waiver’s authorized budget limit for each of these years (DY15-18).

Table B Monitoring Budget Neutrality					
Budget Neutrality Annual Expenditure Limits:					
	President Trend	DY15	DY16	DY17	DY18
<i>Projected PMPM's</i>	4.42%	\$17.31	\$18.35	\$8.76	\$9.16
	DY15	DY16	DY17	DY18	
<i>Actual Annual Member Months</i>	561,515	561,633	564,853	622,536	
CALCULATION FOR DEMONSTRATION WAIVER'S BUDGET LIMIT CAP					
	DY15	DY16	DY17	DY18	
	SFY 12/13	SFY 13/14	SFY 14/15	SFY 15/16	Total
Application of the Budget Limit, Utilizing Projected PMPM Targets					
<i>Member Months</i>	561,515	561,633	564,853	622,536	2,310,537
<i>PMPM</i>	\$17.31	\$18.35	\$8.76	\$9.16	
<i>Budget Limit Cap</i>	\$9,719,828	\$10,305,962	\$4,948,111	\$5,702,430	\$30,676,330
Budget Limit Calculation Utilizing Actual PMPMs					
<i>Member Months</i>	561,515	561,633	564,853	622,536	2,310,537
<i>Actual PMPM</i>	\$6.74	\$12.18	\$8.93	\$7.00	
<i>Actual Costs</i>	\$3,785,274	\$6,841,890	\$5,046,139	\$4,358,723	\$20,032,026
<i>Actual Waiver costs are less than BN Expenditure Limit</i>	\$(5,934,554)	\$(3,464,072)	\$98,028	\$(1,343,707)	\$(10,644,304)

Table C identifies the member months and PMPM projections for the proposed extension years, DY 20 (January-June 2018), DY21, DY22, DY23 and DY24 (July-December 2022). The member month projections utilize DY18 member months with the application of the Table A trend rate. Each subsequent year utilizes the previous year’s total increased by the trend rate. The projected PMPMs utilize the actual PMPM experienced thus far in DY18. This DY18 PMPM is then projected forward utilizing the President’s trend rate of 4.42%. Each subsequent year utilizes the previous year’s PMPM increased by this trend rate.

Table C Extension DYs Projected PMPMs for BN Annual Cost Limits					
	DY20 (Jan – Jun '18)	DY21	DY22	DY23	DY24 (July – Dec '22)
	SFY 17/18	SFY 18/19	SFY 19/20	SFY 20/21	SFY 21/22
<i>Projected Annual Member Months</i>	322,162	666,876	690,217	714,374	369,689

<i>Projected Monthly Average</i>	53,693.73	55,573	57,518	59,531	61,615
Projected Per Member Per Month for Extension DYs (Total Computable)					
STC #41: President's Budget Trend Rate:			4.42%		
	DY20	DY21	DY22	DY23	DY24 (July – Dec '22)
	SFY 18/19	SFY 19/20	SFY 21/22	SFY 22/23	SFY 23/24
<i>Projected PMPM</i>	\$7.31	\$7.63	\$7.97	\$8.32	\$8.69

Appendix II Notice to Tribes

May 1, 2017

Pail Isaacs, MD, CHFP, CHC
Executive Director, Health and Human Service
Seminole Tribe of Florida
6365 Taft Street, Suite 2004
Hollywood, FL 33024

Dear Mr. Isaacs:

This letter is being sent to notify the Seminole Tribe of Florida that the State of Florida intends to submit a 5-year extension request (January 1, 2018 - December 31, 2022) to the Centers for Medicare and Medicaid Services for Florida's 1115 Family Planning Waiver (Project Number 11-W-00135/4). The Family Planning Waiver operates statewide and provides family planning services to women between the ages of 14 and 55 years who have lost Florida Medicaid eligibility and meet the financial eligibility criteria.

The State is conducting a 30-day public notice and comment period to solicit meaningful input from the public on the waiver extension request. The 30-day public comment period will be held from May 1, 2017 through May 30, 2017, during which the State will hold two public meetings. A full description of the extension request along with the dates, times, and locations of the two public meetings can be found on the Agency for Health Care Administrations Web site: http://ahca.myflorida.com/Medicaid/Family_Planning/extension_2017-22.shtml

If you have any questions about the extension request or would like to hold a call, please contact Chantelle Carter-Jones of my staff via email at Chatelle.Carter-Jones@ahca.myflorida.com, or by phone at (850) 412-4238.

Sincerely,

Beth Kidder
Deputy Secretary for Medicaid

BK/hrm

May 1, 2017

Ms. Cassandra Osceola
Health Director
Miccosukee Tribe of Florida
P.O. Box 440021, Tamiami Station
Miami, FL 33144

Dear Ms. Osceola:

This letter is being sent to notify the Miccosukee Tribe of Florida that the State of Florida intends to submit a 5-year extension request (January 1, 2018 - December 31, 2022) to the Centers for Medicare and Medicaid Services for Florida's 1115 Family Planning Waiver (Project Number 11-W-00135/4). The Family Planning Waiver operates statewide and provides family planning services to women between the ages of 14 and 55 years who have lost Florida Medicaid eligibility and meet the financial eligibility criteria.

The State is conducting a 30-day public notice and comment period to solicit meaningful input from the public on the waiver extension request. The 30-day public comment period will be held from May 1, 2017 through May 30, 2017, during which the State will hold two public meetings. A full description of the extension request along with the dates, times, and locations of the two public meetings can be found on the Agency for Health Care Administrations Web site: http://ahca.myflorida.com/Medicaid/Family_Planning/extension_2017-22.shtml

If you have any questions about the extension request or would like to hold a call, please contact Chantelle Carter-Jones of my staff via email at Chatelle.Carter-Jones@ahca.myflorida.com, or by phone at (850) 412-4238.

Sincerely,

Beth Kidder
Deputy Secretary for Medicaid

BK/hrm

Appendix III

Expenditure Authority

CENTERS FOR MEDICARE & MEDICAID SERVICES EXPENDITURE AUTHORITY

NUMBER: 11 -W-00 135/4

TITLE: Florida Medicaid Family Planning Waiver

AWARDEE: Florida Agency for Health Care Administration

Under the authority of section 1115(a)(2) of the Social Security Act (the Act), expenditures made by Florida for the items identified below, which are not otherwise included as expenditures under section 1903 of the Act shall, for the period of this demonstration extension, be regarded as expenditures under the state's Title XIX plan. All requirements of the Medicaid statute will be applicable to such expenditure authorities (including adherence to income and eligibility system verification requirements under section 1137(d) of the Act), except those specified below as not applicable to these expenditure authorities.

The following expenditure authorities and the provisions specified as "not applicable" enable Florida to operate its demonstration effective January 1, 2015 through December 31, 2017, unless otherwise stated.

Effective through December 31, 2017, expenditures for extending Medicaid eligibility for family planning and family planning-related services, subject to an annual redetermination, to women ages 14–55 with family incomes at or below 191 percent of the Federal Poverty Level (FPL) (post Modified Adjust Gross Income (MAGI) conversion) losing pregnancy coverage after 60 days postpartum and to women ages 14–55 with family incomes at or below 191 percent of the FPL (post MAGI conversion) for a period of two years after losing Medicaid coverage for reasons other than expiration of the 60-day postpartum period.

Medicaid Requirements Not Applicable to the Medicaid Expenditure Authorities:

All Medicaid requirements apply, except the following:

- 1. Methods of Administration: Transportation** **Section 1902(a)(4) insofar as it incorporates 42 CFR 431.53**
To the extent necessary to enable the state to not provide transportation to and from providers for the demonstration population.
- 2. Amount, Duration, and Scope of Services (Comparability)** **Section 1902(a)(10)(B)**
To the extent necessary to allow the state to offer the demonstration population a benefit package consisting only of family planning services and family planning-related services.

3. Retroactive Coverage **Section 1902(a)(34)**

To the extent necessary to enable the state to not provide medical assistance to the demonstration population for any time prior to when an application for the demonstration is made.

4. Early and Periodic Screening, Diagnostic, and Treatment **Section 1902(a)(43)(A)**
(EPSDT)

To the extent necessary to enable the state to not furnish or arrange for EPSDT services to the demonstration populations.

5. Prospective Payment for Federally Qualified Health Centers and Rural Health Centers and Rural Health Clinics **Section 1902(a)(15)**

To the extent necessary for the state to establish reimbursement levels to these clinics that will compensate them solely for family planning and family planning related services.

6. Eligibility Procedures **Section 1902(a)(17)**

To the extent necessary to allow the state not to include parental income when determining a minor's (under the age of 18) eligibility for the family planning demonstration.