



RON DESANTIS
GOVERNOR

MARY C. MAYHEW
SECRETARY

October 29, 2019

Statewide Medicaid Managed Care (SMMC) Contract Interpretation: 2019-07

Applicable to the **2018-2023 SMMC contract benefits** for:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

Re: Requirements for Personal Care and Adult Companion Care Services

The managed care plan must provide covered services specified in s. 409.98, F.S., in accordance with Attachment II., Section VI., Coverage and Authorization of Services, the approved federal waivers for the Long-Term Care (LTC) program, and the applicable Medicaid rules and services listed on the associated fee schedules. (Attachment II, Exhibit II-B, Section VI.A.2.a.). Managed care plans are required to ensure its providers meet all applicable state and federal requirements in the LTC program. Managed care plans may enroll licensed home health agencies to provide personal care services and adult companion care services. The purpose of this contract interpretation is to provide clarification of requirements for the provision of personal care and adult companion care services in the LTC program.

Home health agency licensure Rule 59A-8.0215(2), Florida Administrative Code (F.A.C.), requires staff follow the physician, physician assistant, or advanced practice registered nurse's treatment orders that are contained in the plan of care. The 1915(c) waiver provides the LTC managed care plan with the maximum flexibility needed to ensure enrollees receive the long-term services and supports necessary to maintain health, safety, and welfare and to remain in a community setting. Therefore, LTC managed care plans have the authority to include personal care and adult companion care services in the enrollee's written plan of care without securing physician orders for these services.

Pursuant to Attachment II, Section XV.I.1. Disputes, the managed care plan must submit, within twenty-one (21) days after the interpretation of the contract, a written dispute of the contract interpretation directly to the Deputy Secretary; this submission shall include all arguments, materials, data, and information necessary to resolve the dispute (to include all evidence, documentation and exhibits). All other provisions in this section apply.

Please submit such written requests to the following address:

Attn: Ms. Beth Kidder
Deputy Secretary for Medicaid
Agency for Health Care Administration
Attn: Managed Care Appeals/Disputes, MS #70
2727 Mahan Drive
Tallahassee, FL 32308

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If you have questions or concerns, please contact your contract manager at (850) 412-4004.

Sincerely,

A handwritten signature in black ink that reads "Shevaun Harris". The signature is written in a cursive style with a prominent loop for the letter 'S'.

Shevaun Harris
Assistant Deputy Secretary for
Medicaid Policy and Quality

SH/dvp