



RON DESANTIS
GOVERNOR

MARY C. MAYHEW
SECRETARY

August 31, 2020

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2020-48

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

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

Re: MMA Performance Measure and Survey Changes for July 1, 2021 Reporting

The Agency may add or remove performance measure requirements with sixty (60) days' advance notice. (Attachment II, Section IX. B.1.b.) The managed care plan must collect statewide data on enrollee performance measures, as defined by the Agency and as specified in the SMMC Performance Measure Tables in the applicable Exhibits, the Managed Care Report Guide, and Performance Measures Specifications Manual. (Attachment II, Section IX. B.2.a.) The purpose of this policy transmittal is to notify the managed care plan of changes in the MMA performance measure and survey requirements for the July 1, 2021 reporting.

Discontinued Performance Measures for July 1, 2021 Reporting

Beginning with July 1, 2021 reporting, for calendar/measurement year 2020 services, the managed care plan is no longer required to report on the following performance measures:

Healthcare Effectiveness Data and Information Set (HEDIS)	
1	Adolescent Well-Care Visits (AWC)
4	Adult BMI Assessment (ABA)
8*	Comprehensive Diabetes Care – Medical Attention for Nephropathy
15	Well-Child Visits in the First 15 Months of Life (W15)
16	Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life (W34)
17	Children and Adolescents' Access to Primary Care Practitioners (CAP)
30	Use of Opioids from Multiple Providers (UOP)
Agency-Defined	
32	Mental Health Readmission Rate (RER)

*Only the component listed for this measure is being discontinued. Plans are required to continue reporting on the other components of the Comprehensive Diabetes Care measure that are listed in the contract.

New Performance Measures for July 1, 2021 Reporting

Beginning with July 1, 2021 reporting for calendar/measurement year 2020, the managed care plan is required to report on the following performance measures:



HEDIS
Child and Adolescent Well-Care Visits (WCV)
Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications (SSD)
Well-Child Visits in the First 30 Months of Life (W30)
Child Core Set
Contraceptive Care – All Women Ages 15-20 (CCW-CH)
Adult Core Set
Contraceptive Care – All Women Ages 21-44 (CCW-AD)
Use of Pharmacotherapy for Opioid Use Disorder (OUD)

Modification to Enrollee Satisfaction Survey Requirement

Beginning with July 1, 2021 reporting for surveys conducted in 2021, the managed care plan must survey its child population using the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey 5.0H – Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items.

Regional Performance Measure Reporting

Beginning with July 1, 2021 reporting for calendar/measurement year 2020, the managed care plan is required to report on all contractually required performance measures by region in addition to the statewide level. The following measures are excluded from regional reporting but must still be reported at the statewide level:

- 35. Elective Delivery
- 36. Cesarean Section
- 37. HIV Viral Load Suppression
- 38. Medical Assistance with Smoking and Tobacco Use Cessation

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

Sincerely,



Shevaun Harris
Assistant Deputy Secretary for
Medicaid Policy and Quality

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