



RON DESANTIS  
GOVERNOR

SHEVAUN L. HARRIS  
ACTING SECRETARY

February 15, 2021

## Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2021-05

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

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

### Re: Capitation Adjustments for Unauthorized Programs or Activities

Under section 1903(m)(2)(A) of the Social Security Act and Title 42 of the Code of Federal Regulations, section 438.806, Centers for Medicare & Medicaid Services' (CMS) approval of managed care plan contracts is a precondition for capitation payments under the contract to be eligible for federal financial participation. The purpose of this policy transmittal is to notify the managed care plan and the dental plan of an additional contract provision required for managed care contract approval by CMS.

The Agency contracts with managed care plans and the dental plans in compliance with the provisions of the contract and the terms and conditions of the applicable federal waivers. The Agency must adjust capitation rates to remove costs associated with programs or activities that are no longer authorized by law provided by the managed care plan after the effective date of the loss of legal authority for the program or activities. The managed care plan and the dental plan must return any payments for work on no-longer-authorized programs or activities performed after the date the legal authority ended to the Agency.

If you have questions or concerns, please contact your contract manager.

Sincerely,

A handwritten signature in black ink, appearing to read "Beth Kidder".

Beth Kidder  
Deputy Secretary for Medicaid

BK/dvp

