### A Snapshot of the Florida Medicaid Managed Medical Assistance Program

### Statewide Medicaid Managed Care (SMMC) Managed Medical Assistance Program (MMA)

- The Florida Medicaid program is implementing a new system through which Medicaid enrollees will receive services. This program is called the Statewide Medicaid Managed Care Managed Medical Assistance program.
- The Managed Medical Assistance program is comprised of several types of managed care plans
  - Health Maintenance Organizations
  - Provider Service Networks
  - Children's Medical Services Network
- Most Medicaid recipients must enroll in the MMA program.

#### Who is NOT required to participate?

- The following individuals are NOT required to enroll, although they may enroll if they choose to:
  - Medicaid recipients who have other creditable health care coverage, excluding Medicare
  - Persons eligible for refugee assistance
  - Medicaid recipients who are residents of a developmental disability center
  - Medicaid recipients enrolled in the developmental disabilities home and community based services waiver or Medicaid recipients waiting for waiver services

#### Who is NOT eligible to participate?

- The following individuals are NOT eligible to enroll:
  - Women who are eligible only for family planning services
  - Women who are eligible through the breast and cervical cancer services program
  - Persons who are eligible for emergency Medicaid for aliens
  - Children receiving services in a prescribed pediatric extended care center

# When will the Managed Medical Assistance program begin?

- The Managed Medical Assistance Program is expected to begin in May 2014.
- The rollout schedule is as follows:

Rollout Schedule						
Regions	Enrollment Date					
2, 3 and 4	May 1, 2014					
5, 6 and 8	June 1, 2014					
10 and 11	July 1, 2014					
1, 7 and 9	August 1, 2014					

#### What region am I in?

Region	Counties
1	Escambia, Okaloosa, Santa Rosa, and Walton
	Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson,
2	Jefferson, Leon, Liberty, Madison, Taylor, Wakulla, and Washington
	Alachua, Bradford, Citrus, Columbia, Dixie, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Putnam, Sumter,
3	Suwannee, and Union
4	Baker, Clay, Duval, Flagler, Nassau, St. Johns, and Volusia
5	Pasco and Pinellas
6	Hardee, Highlands, Hillsborough, Manatee, and Polk
7	Brevard, Orange, Osceola, and Seminole
8	Charlotte, Collier, DeSoto, Glades, Hendry, Lee, and Sarasota
9	Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie
10	Broward
11	Miami-Dade and Monroe

#### When will I be notified and be required to enroll?

- Approximately 60 days prior to each region's start date, eligible Medicaid recipients will receive a letter with information about the managed care plans in the region and information on how to enroll.
- Eligible recipients who must enroll will have a minimum of 30 days from the date they receive their welcome letter to choose from the plans available in their region.
- Enrollees will have 90 days after enrollment to change to a different plan if they so choose.

# What MMA Standard (Non-Specialty) plans are available in my region?

	1	2	3	4	5	6	7	8	9	10	11
Amerigroup					Х	Х	Х				Х
Better Health	x					x				x	
Coventry											Х
First Coast Advantage				x							
Humana	Х					Х			Х	Х	Х
Integral						Х		Х			
Molina							X		Х		Х
Preferred Medical											х
Prestige		Х	Х		Х	Х	Х	Х	Х		Х
SFCCN										Х	
Simply											Х
Sunshine			Х	Х	Х	Х	Х	Х	Х	Х	Х
United Health			x	x			x				x
Staywell		Х	Х	Х	Х	Х	X	Х			Х

Note: Formal protest pending in Region 11 for MMA Standard plans.

#### What are MMA Specialty plans?

- Five companies were selected to provide specialty plans that will serve populations with a distinct diagnosis or chronic condition. These plans are tailored to meet the specific needs of the specialty population.
- Information on each specialty plan will be available in the choice counseling information provided in each region that the specialty plans are available.

### What do I have to do to choose a Managed Medical Assistance plan?

- Choice counselors are available to assist recipients in selecting a plan that best meets their needs. This assistance will be provided by phone. In-person visits are also available by request for recipients with special needs.
- Recipients can also enroll online at: <u>www.flmedicaidmanagedcare.com</u>.





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### Can I change my MMA plan once I make a selection?

- Recipients are encouraged to work with a choice counselor to choose the managed care plan that best meets their needs.
- After joining a plan, the recipient has 90 days to change to another plan offered within their region.
- After the 90-day deadline, recipients may only change plans for good cause reasons.
- After the initial 12-month period, recipients may change plans during an open enrollment period.

# What Medicaid covered services are provided under the Managed Medical Assistance program?

Minimum Covered Services							
Advanced registered nurse practitioner services	Medical supply, equipment, prostheses and orthoses						
Ambulatory surgical treatment center services	Mental health services						
Birthing center services	Nursing care						
Chiropractic services	Optical services and supplies						
Dental services	Optometrist services						
Early periodic screening diagnosis and treatment services for recipients under age 21	Physical, occupational, respiratory, and speech therapy						
Emergency services	Podiatric services						
Family planning services and supplies (some exception)	Physician services, including physician assistant services						
Healthy Start Services (some exceptions)	Prescription drugs						
Hearing services	Renal dialysis services						
Home health agency services	Respiratory equipment and supplies						
Hospice services	Rural health clinic services						
Hospital inpatient services	Substance abuse treatment services						
Hospital outpatient services	Transportation to access covered services						
Laboratory and imaging services							

# What benefits not otherwise covered by Medicaid are available from MMA plans?

List of Expanded Benefits	Amerigroup	Better	Coventry	First Coast	Humana	Integral	Molina	Preferred	Prestige	SFCCN	Simply	Staywell	Sunshine	United
Adult dental services	Υ	Υ	Υ		Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Adult hearing services	Υ	Υ			Υ		Υ	Υ	Υ		Υ	Υ	Υ	Υ
Adult vision services	Υ	Υ		Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Art therapy	Υ				Υ		Υ					Υ	Υ	
Equine therapy												Υ		
Home health care for non-pregnant adults	Υ	Υ	Υ	Υ	Υ		Υ		Υ	Υ	Υ	Υ	Υ	Υ
Influenza vaccine	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ		Υ	Υ	Υ	Υ
Medically related lodging & food		Υ			Υ		Υ		Υ		Υ	Υ	Υ	
Newborn circumcisions	Υ	Υ	Υ	Υ	Υ	Υ	Υ		Υ	Υ	Υ	Υ	Υ	Υ
Nutritional counseling	Υ	Υ			Υ	Υ		Υ	Υ		Υ	Υ	Υ	
Outpatient hospital services	Υ	Υ			Υ		Υ	Υ	Υ		Υ	Υ	Υ	Υ
Over the counter medication and supplies	Υ	Υ	Υ		Υ	Υ	Υ	Υ	Υ		Υ	Υ	Υ	Υ
Pet therapy					Υ		Υ					Υ		
Physician home visits	Υ	Υ			Υ		Υ		Υ		Υ	Υ	Υ	Υ
Pneumonia vaccine	Υ	Υ	Υ		Υ	Υ	Υ	Υ	Υ		Υ	Υ	Υ	Υ
Post-discharge meals	Υ	Υ			Υ	Υ	Υ	Υ			Υ	Υ	Υ	Υ
Prenatal/Perinatal visits	Υ	Υ			Υ	Υ	Υ	Υ	Υ		Υ	Υ	Υ	Υ
Primary care visits for non-pregnant adults	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Shingles vaccine	Υ	Υ	Υ	Υ	Υ		Υ		Υ		Υ	Υ	Υ	Υ
Waived co-payments	Υ	Υ			Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ

NOTE: Details regarding scope of covered benefit may vary by managed care plan.

Will my MMA plan continue the services I am receiving now?

The new plan is required to continue existing services for up to 60 days, OR until the enrollee's primary care practitioner or behavioral health provider reviews the enrollee's treatment plan.

# What providers will be included in the Managed Medical Assistance plans?

Managed Medical Assistance plans may limit the providers in their networks based on credentials, quality indicators, and price but they must include the following statewide essential providers:

Statewide MMA Program Required Essential Network Providers								
Faculty Plans of Florida Medical Schools Regional Perinatal Intensive Care Centers (RPICCS)								
Specialty Children's Hospitals	Health Care Providers serving Medically Complex Children, as determined by the State.							

 Plans must have a sufficient provider network to serve the needs of their plan enrollees, as determined by the State.

Additional Qualified Providers Under the MMA Program Include:						
Anesthesiologists	Cardiologists					
Cardiovascular Surgeons	Chiropractors					
Dermatologists	Endocrinologists					
Gastroenterologists	General Dentists					
General Surgeons	Infectious Diseases					
Midwifes	Nephrologists					
Neurologists	Neurosurgeons					
Obstetrics/Gynecologists	Oncologists					
Ophthalmologists	Optometrists					
Oral Surgeons	Orthodontists					
Orthopedic Surgeons	Otolaryngologists					
Pathologists	Pediatric Primary Care Providers and Specialists					
Podiatrists	Pedodontists					
Pulmonologists	Rheumatologists					
Therapists	Urologists					
Pharmacies	Board Certified or Board Eligible Psychiatrists					
Licensed Practitioners of the Healing Arts	Inpatient Substance Abuse Detoxification Units					
Fully Accredited Psychiatric Community Hospitals or Crisis Stabilization Units (CSU)/ Freestanding Psychiatric Specialty Hospitals						

### Where can I find more information?

- Visit our SMMC website at: http://ahca.myflorida.com/SMMC
- Email questions about the program to: <u>FLMedicaidManagedCare@ahca.myflorida.com</u>
- Keep up to date by signing up to receive program updates at <u>http://ahca.myflorida.com/SMMC</u>. Click the red "Sign Up for Program Updates" box on the right hand side of the page.