




Caring for Florida's Children with Serious & Chronic Medical Conditions


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Objectives




- Review the context of health programs for children
- Describe the statutory basis for the Children's Medical Services (CMS) network
- Discuss the framework for the CMS Managed Care Plan

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There can be no keener
revelation of a society's soul
than the way in which it
treats its children.

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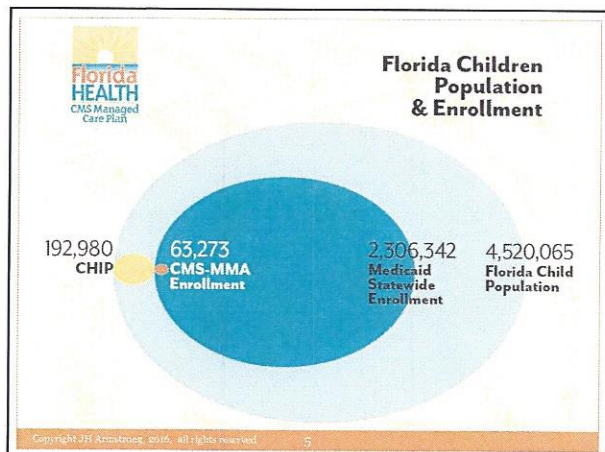


Health programs for children



- Bright Expectations
- Newborn screening
- Early Steps
- Child Protection Teams
- Women, Infants, and Children (WIC) nutrition
- Healthy Start
- Childcare food
- School health
- Injury prevention
- Tobacco prevention
- **Children's Medical Services Managed Care Plan**

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CMS Managed Care Plan Statutes

- Section 409.974(4): CMS network participation
 - Single statewide contract
 - Exempt from competitive procurement
 - Must meet all other managed medical assistance (MMA) program requirements
- Section 409.974(3)
 - Aggregate enrollment of specialty plans per MMA region \leq 10% of total enrollees

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CMS Managed Care Plan Statutes

- Section 391.021(1), 2012
CMS network" means a statewide managed care service system
- "Children with special health care needs"
 - Children < 21 years old
 - Chronic and serious physical, developmental, behavioral, or emotional conditions
 - Require health care & related services of a type or amount beyond that which is generally required by children
- Section 391.025(2), 2012
CMS program is not an insurer, not subject to OIR

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Additional requirements

- Federal CMS
 - Medicaid waiver: plan identified as no risk
 - No risk plans must use fee-for-service schedule
- AHCA contract
 - Policy on redetermination of clinical eligibility
 - DOH: annual rescreening

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CMS Managed Care Plan

- DOH responsibilities
 - Plan management
 - Case management
 - Quality assurance
- Integrated care system (ICS) responsibilities
 - Family outreach
 - Health professional networks
 - Utilization management
- MED3000: 3rd-party administrator

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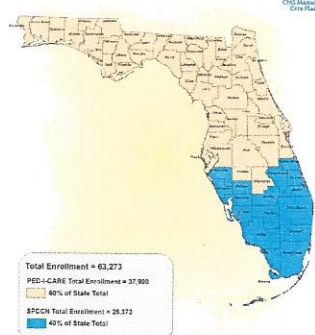
CMS MMA enrollment

- Medicaid 53,600
 - Title XIX
 - Birth to 18
 - CHIP 9,533
 - Title XXI
 - Birth to 20
 - MCH block grant 140
 - Title V
- 63,273**

As of January 11, 2016

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CMS Plan Enrollment Totals by ICS
January 2016



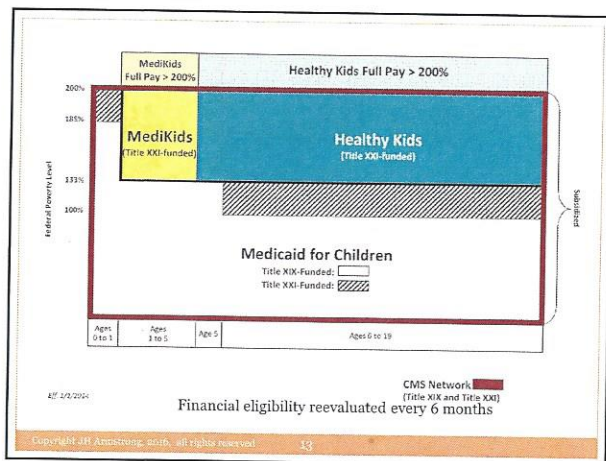
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Screening

- Clinical eligibility: one of two
 - Parent-based CAHMI survey
 - Treatment dependency
 - Service usage
 - Functional status
 - Physician-based attestation: > 100 diagnoses
- Financial eligibility (DCF)

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Outreach

- Screening hotline: 1-855-901-5390
- CMS Managed Care Plan Technical Advisory Panel
- Accredited by the Accreditation Association for Ambulatory Health Care

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Annual rescreening


- 45,210 met clinical eligibility
 - Top diagnoses: developmental delays, ADD
- 13,074 transitions
 - Top diagnoses: ADD, asthma
 - 12,102 Medicaid children transitioned to other managed care plans with same coordination & access to care
 - 972 children transitioned to Florida Health Kids
- 121 rescreening complaints, resolved

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Goal

- Health opens opportunity for full potential
 - Access to patient-centered care
 - High quality, comprehensive care
 - Actuarially sound plan

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... anyone who does
anything to help a child in life
is a hero to me.

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Summary

- DOH cares about every child in Florida
- Florida statute shows commitment to caring for children with chronic & serious medical conditions
- CMS Managed Care Plan is fulfilling this commitment

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