

Senior Health Choices: A Managed, Integrated Long Term Care Plan



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The Legislation

HB 1835, as amended by HB 1837, states that AHCA, with DOEA, must:

- ❖ “develop a plan...for an integrated, long-term care, fixed payment, delivery system for Medicaid beneficiaries age 65 and older.”
- ❖ Plan submitted to Legislative Budget Commission December 31st

Goals of Pilot Project

Legislation states the goals of the pilot are to:

- ❖ “...provide for the transition of all Medicaid services for eligible elderly individuals into an integrated care management model designed to serve consumers in their community.”
- ❖ “...provide quality care in the least restrictive setting.”



Eligibility

- ❖ All Medicaid recipients age 65+
- ❖ Proposed exceptions:
 - Developmental Disabilities waiver
 - Family & Supported Living waiver
 - Institutional Care Facilities for the Developmentally Disabled
 - Project AIDS Care waiver
 - Consumer Directed Care waiver
 - Traumatic Brain/Spinal Cord Injury waiver
 - Program of All Inclusive Care for the Elderly (PACE)

Covered Services

All Medicaid benefits including:

- Primary and acute care
- Prescribed drugs
- Mental health services
- Long term care (nursing facility and home and community based services)
- Medicare crossover payments for dual eligibles

Funding

- ❖ Capitated monthly payments
 - Legislation calls for “fixed payment” and actuarially sound rates
- ❖ Integrates all Medicaid service line items
 - Allows for flexibility in provision of services to consumers



Provider Qualifications and Selection

- ❖ Plan states that providers must be managed care organizations licensed under Ch. 641, F.S.; AHCA and DOEA are revising these qualifications to include non-licensed entities
- ❖ Minimum of 2 plans per pilot area
- ❖ Will be chosen through competitive procurement
- ❖ Evaluation of plans will include assessment of their networks of providers for:
 - Quality
 - Accessibility
 - Geographic access

Nursing Facilities

- ❖ Plans must contract with all Gold Seal nursing facilities (NFs) & exclude, where feasible, chronic poor performers
- ❖ Plan must pay Medicaid NF rate in the absence of a contract
- ❖ “Grandfathering” of NF residents in non-contracted facilities for the life of the enrollee

Medicaid Waiver

Requires a 1115 Research and Demonstration waiver

- Allows Medicaid eligibles with Medicare to be required to participate in the plan
- No time frames for federal approval of 1115 waivers

Consumer Protections

- ❖ Choice between at least two plans
- ❖ Consumers may select primary care providers (PCPs) from within the network and are allowed to switch PCPs at any time
- ❖ A care manager will coordinate services and navigate enrollees through the system
- ❖ Enrollees will play an active role in directing their care needs (e.g., the development of a care plan)
- ❖ Grievance, appeal, and Fair Hearing rights

Pilot Areas

- ❖ Plan suggests choosing 2 sites
- ❖ Proposed criteria for choosing pilot sites:
 - Urban and rural areas
 - Areas with fewer home and community based services pilot projects
 - Whole AHCA/ DOEA geographic areas



Next Steps



For More Information

- ❖ “Senior Health Choices: A Managed, Integrated Long Term Care Plan”

<http://ahca.myflorida.com>

Click on Medicaid, then “Recent Medicaid Presentations”; report was released 12/31/04

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