

The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA
APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND
HUMAN SERVICES
Senator Flores, Chair
Senator Stargel, Vice Chair

MEETING DATE: Wednesday, December 14, 2016
TIME: 2:00—4:00 p.m.
PLACE: *James E. "Jim" King, Jr. Committee Room, 401 Senate Office Building*

MEMBERS: Senator Flores, Chair; Senator Stargel, Vice Chair; Senators Artilles, Baxley, Book, Passidomo, Powell, and Rader

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Introduction of Members and Staff		Presented
2	Subcommittee Jurisdiction Overview		Presented
3	Overview and Update Regarding the Long-Term Care Component of Statewide Medicaid Managed Care		Presented
Other Related Meeting Documents			

No material available

Appropriations Subcommittee on Health and Human Services Budget Overview

Phil Williams

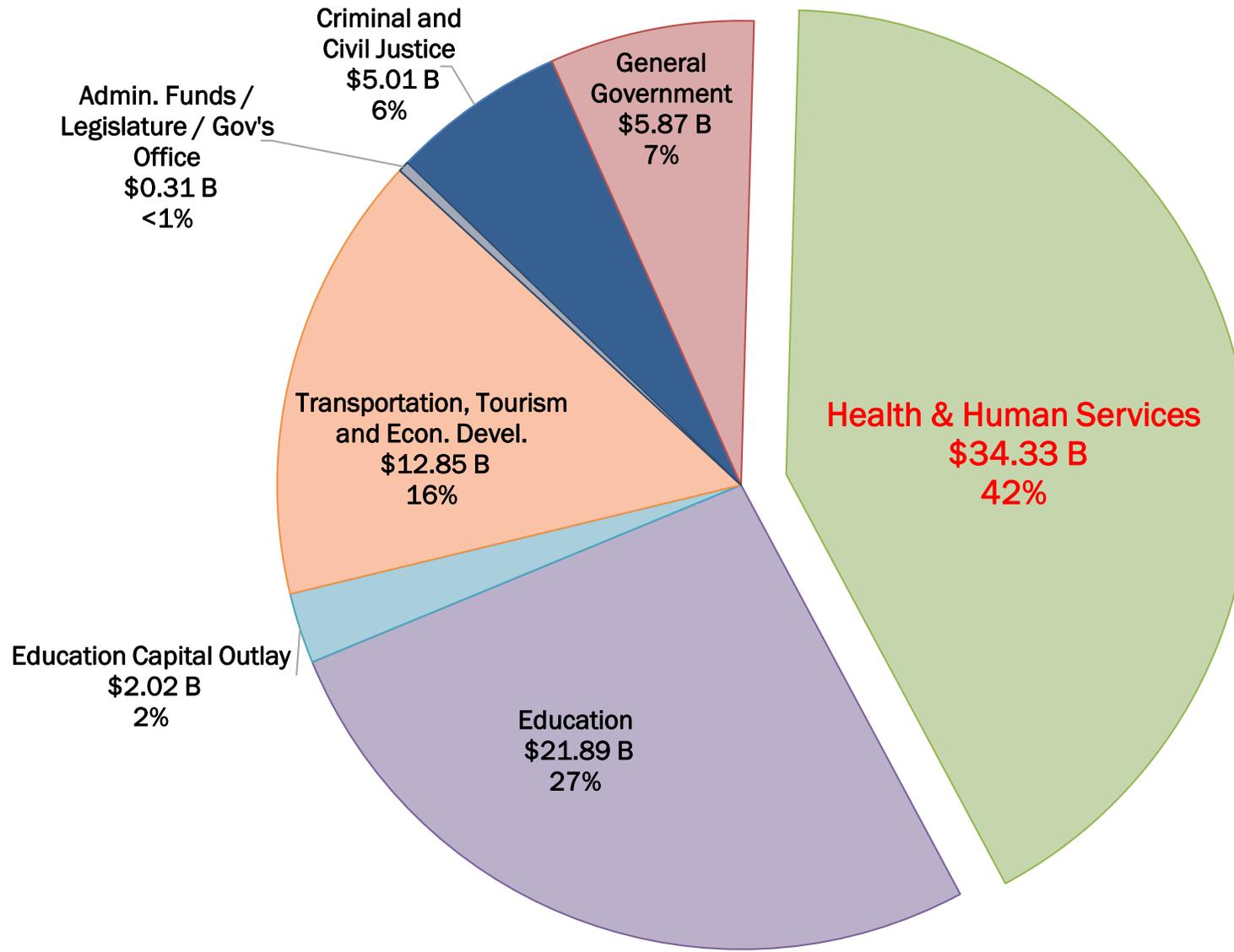
Staff Director

Appropriations Subcommittee on

Health and Human Services

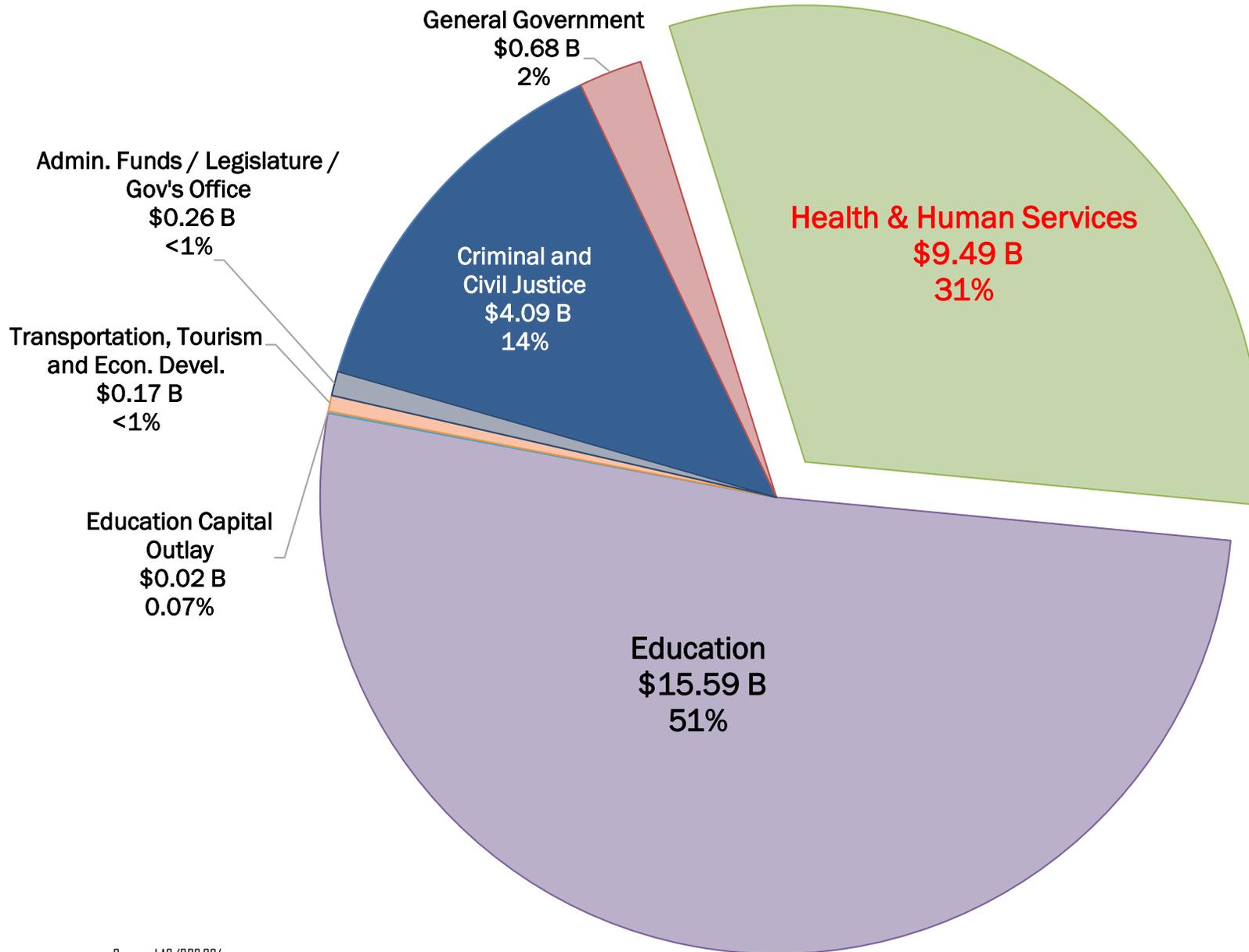
December 14, 2016

HHS Budget Compared to Total State Budget, \$82.3 Billion FY 2016-17



Source: LAS/PBS 664

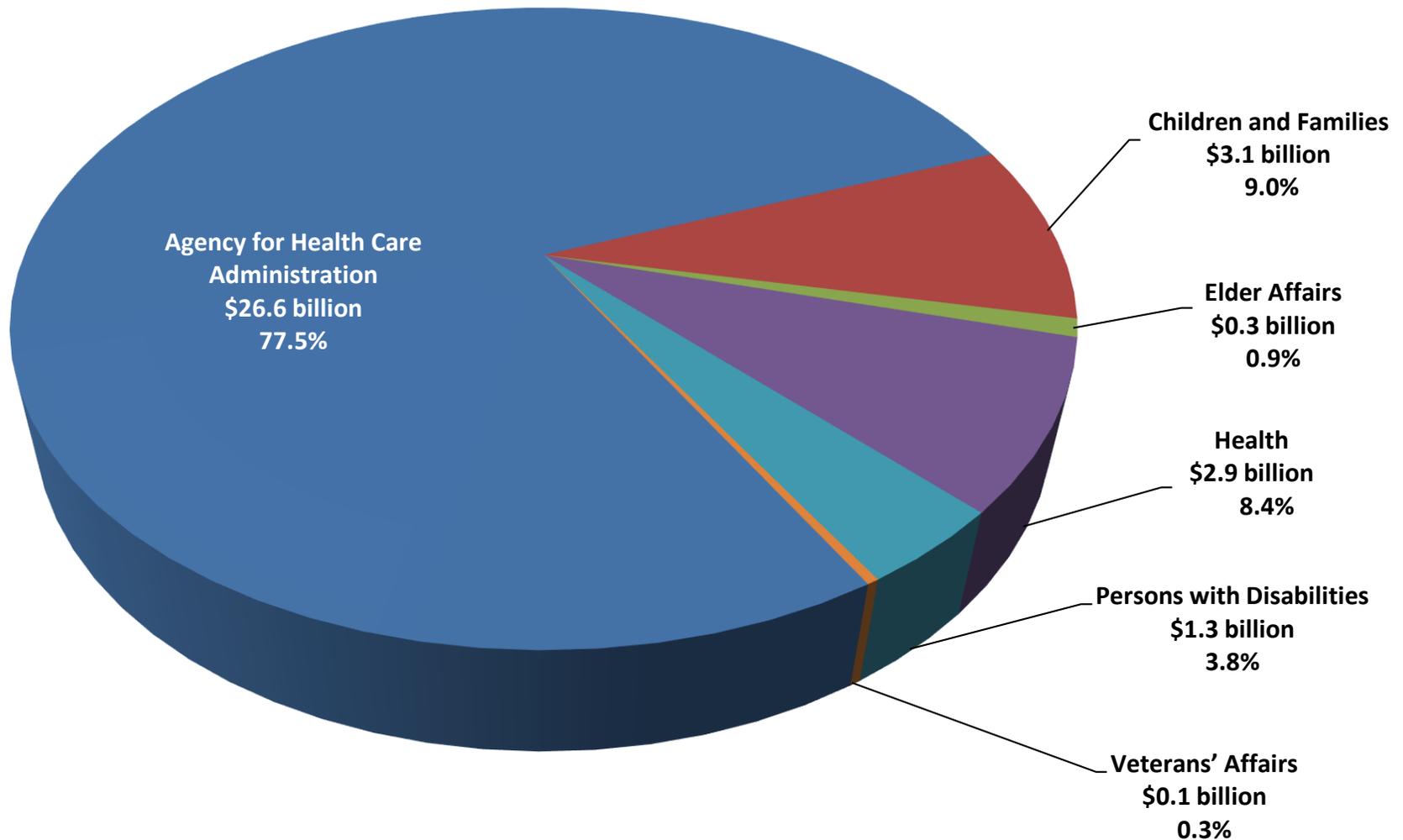
HHS General Revenue Budget Compared to Total State General Revenue Budget, \$30.3 Billion FY 2016-17



FY 2016-17 Health and Human Services Appropriations By Agency

\$34.3 Billion

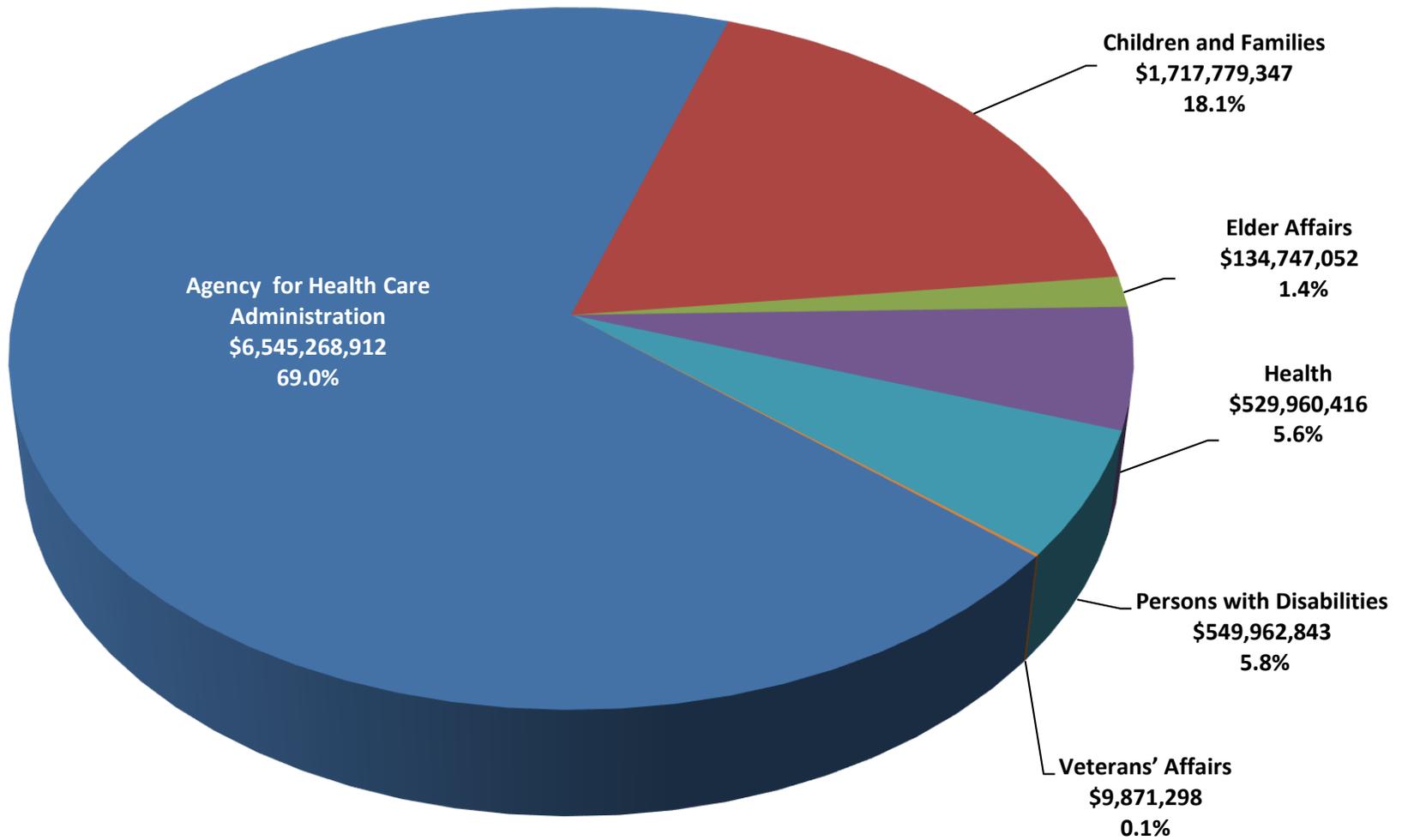
Includes \$274.7 million in nonrecurring funding



FY 2016-17 HHS General Revenue Appropriations By Agency

\$9.5 Billion

Includes \$110.3 million in nonrecurring funding

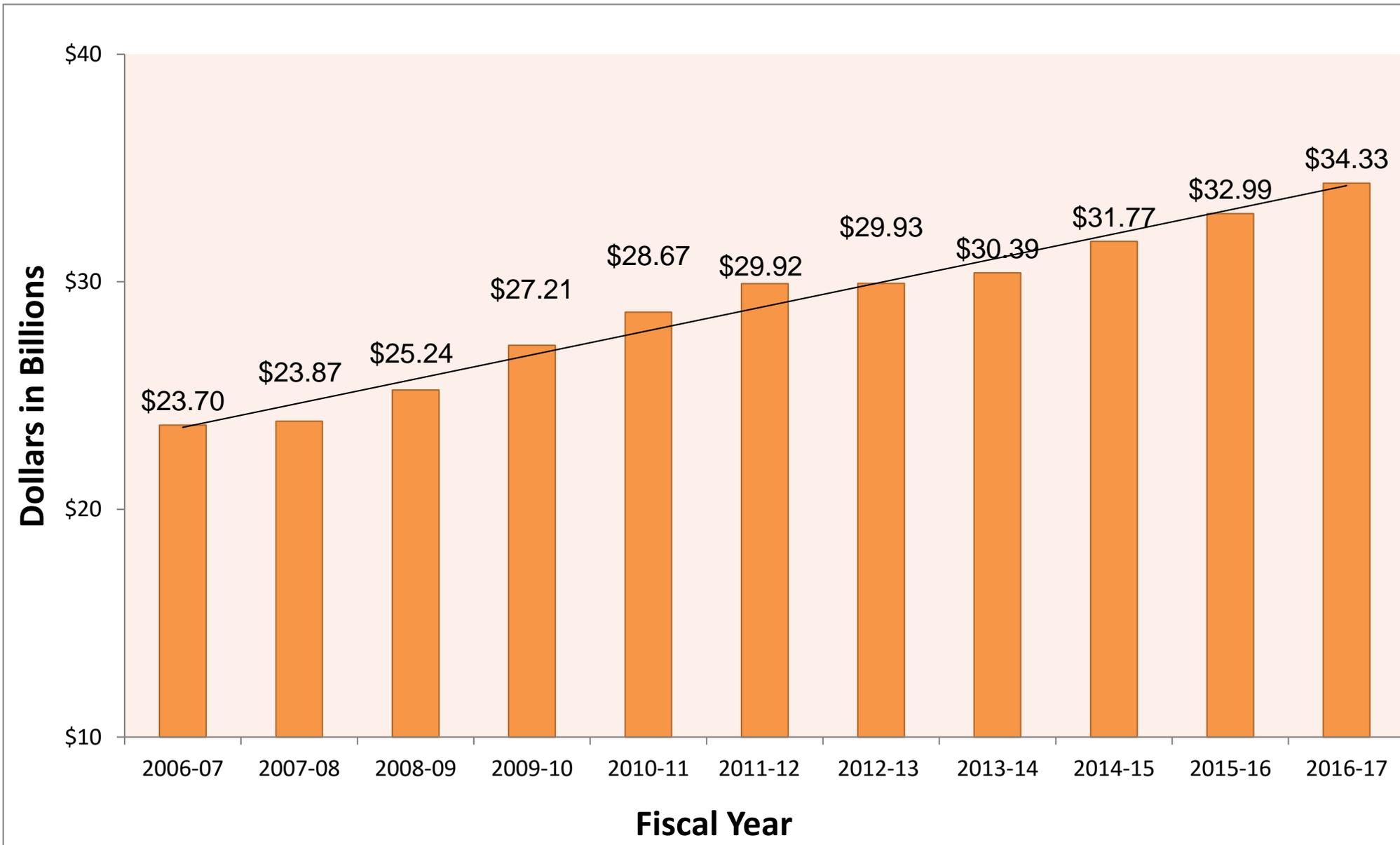


Health & Human Services Appropriations

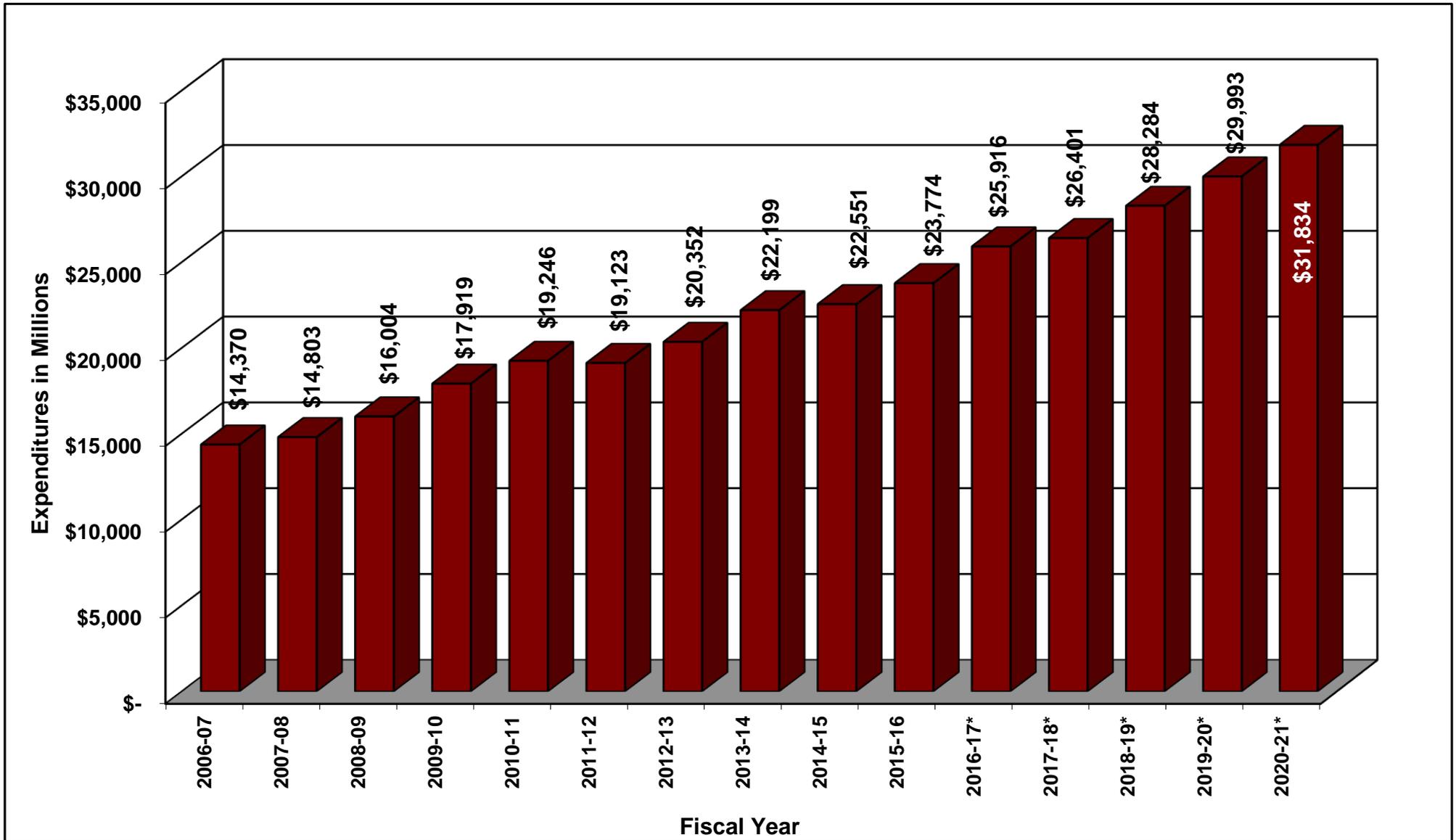
Fiscal Year 2016-2017 – Funding by Agency

Agency	FTE	General Revenue	State Trust Funds	Federal Trust Funds	All Funds
Agency for Health Care Administration (AHCA)	1,547.50	\$6,545,268,912	\$4,170,148,532	\$15,889,179,158	\$26,604,596,602
Agency for Persons with Disabilities (APD)	2,711.50	\$549,962,843	\$4,650,728	\$756,593,573	\$1,311,207,144
Department of Children and Families (DCF)	11,909.50	\$1,717,779,347	\$60,518,871	\$1,318,820,864	\$3,097,119,082
Department of Elder Affairs (DOEA)	439.50	\$134,747,052	\$721,489	\$176,012,411	\$311,480,952
Department of Health (DOH)	14,065.57	\$529,960,416	\$997,331,310	\$1,372,674,718	\$2,899,966,444
Department of Veterans' Affairs (DVA)	1,106.50	\$9,871,298	\$66,648,080	\$29,351,917	\$105,871,295
Total: Health and Human Services Agencies	31,780.07	\$9,487,589,868	\$5,300,019,010	\$19,542,632,641	\$34,330,241,519

History of HHS Appropriations

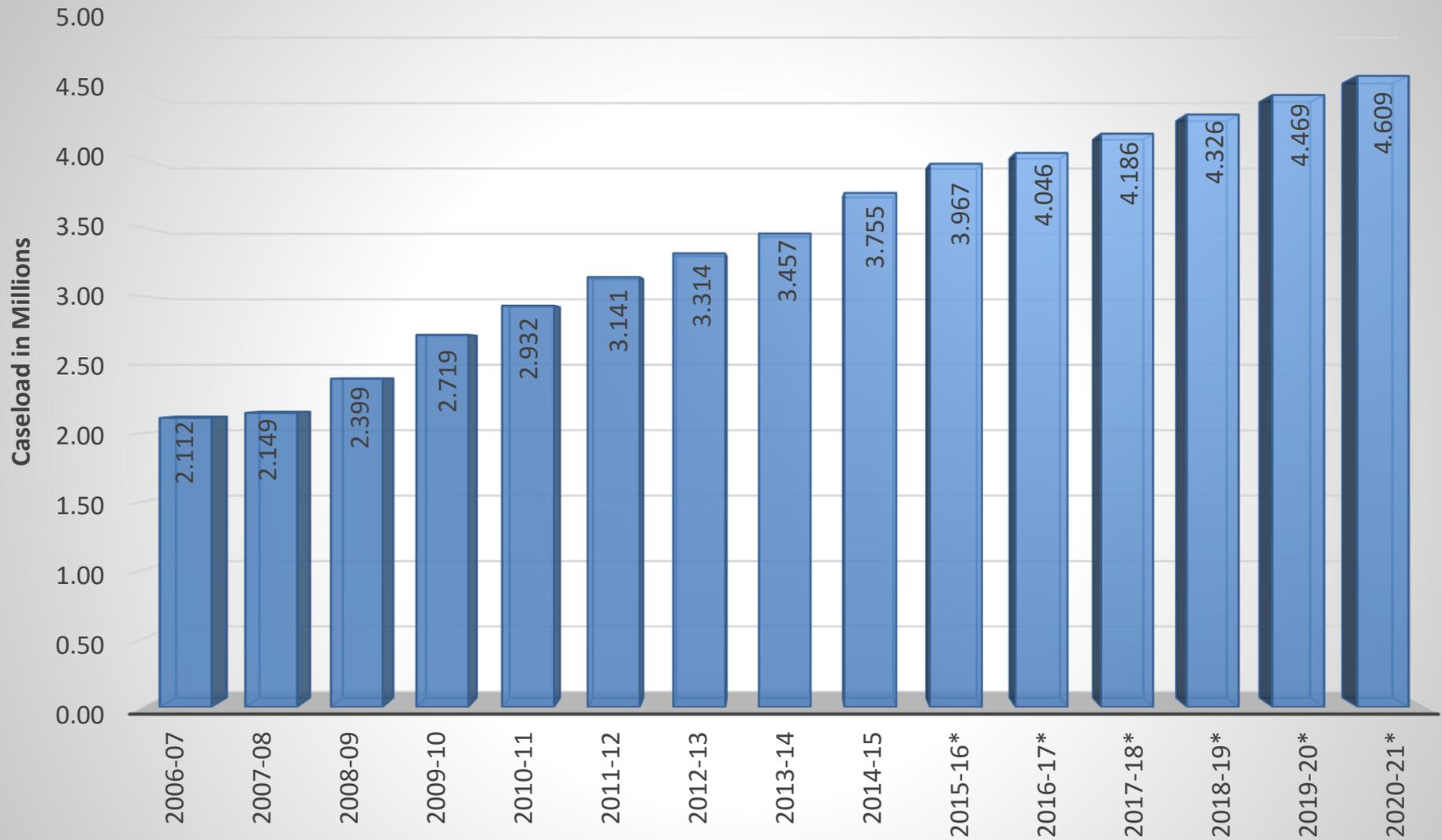


Growth In Medicaid Expenditures



*December 2016 Social Services Estimating Conference

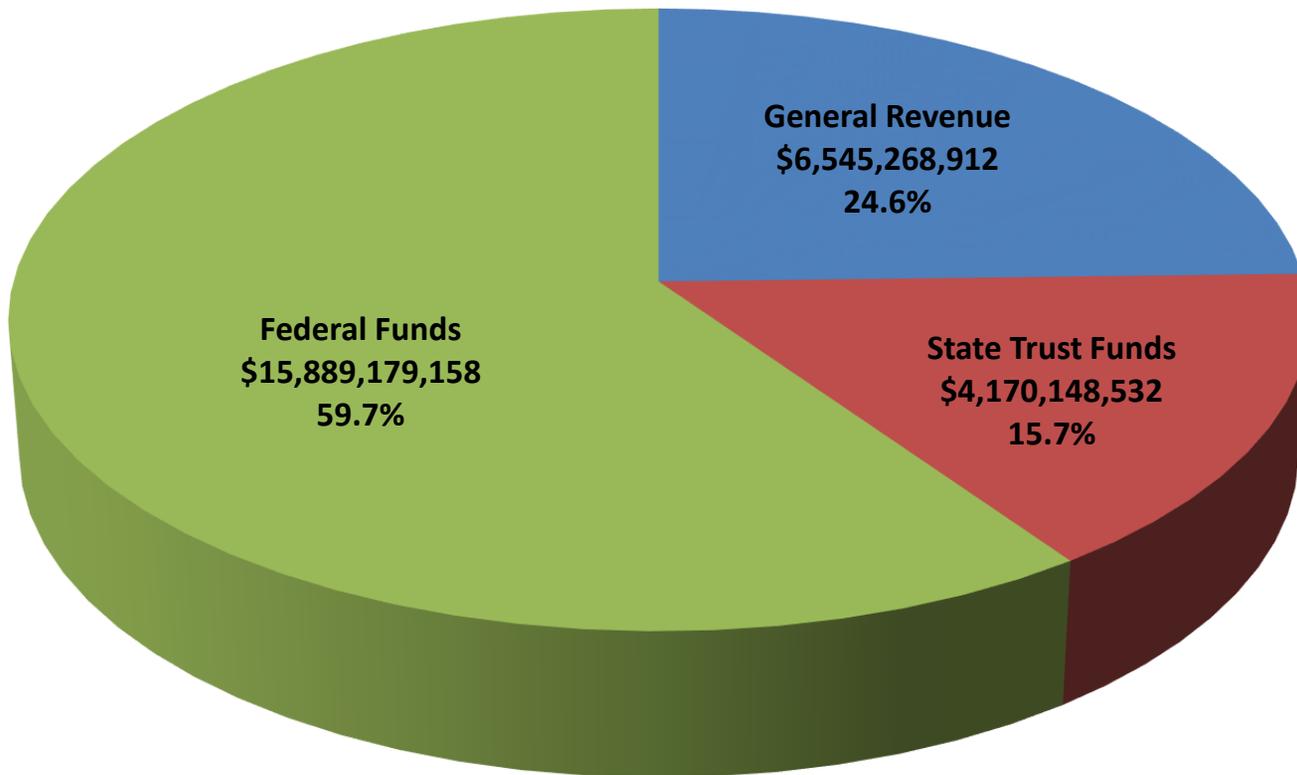
Growth in Medicaid Average Annual Caseload



*November 2016 Social Services Estimating Conference

Agency for Health Care Administration Fiscal Year 2016-17 Appropriations \$26.6 Billion

Appropriations by Fund Type

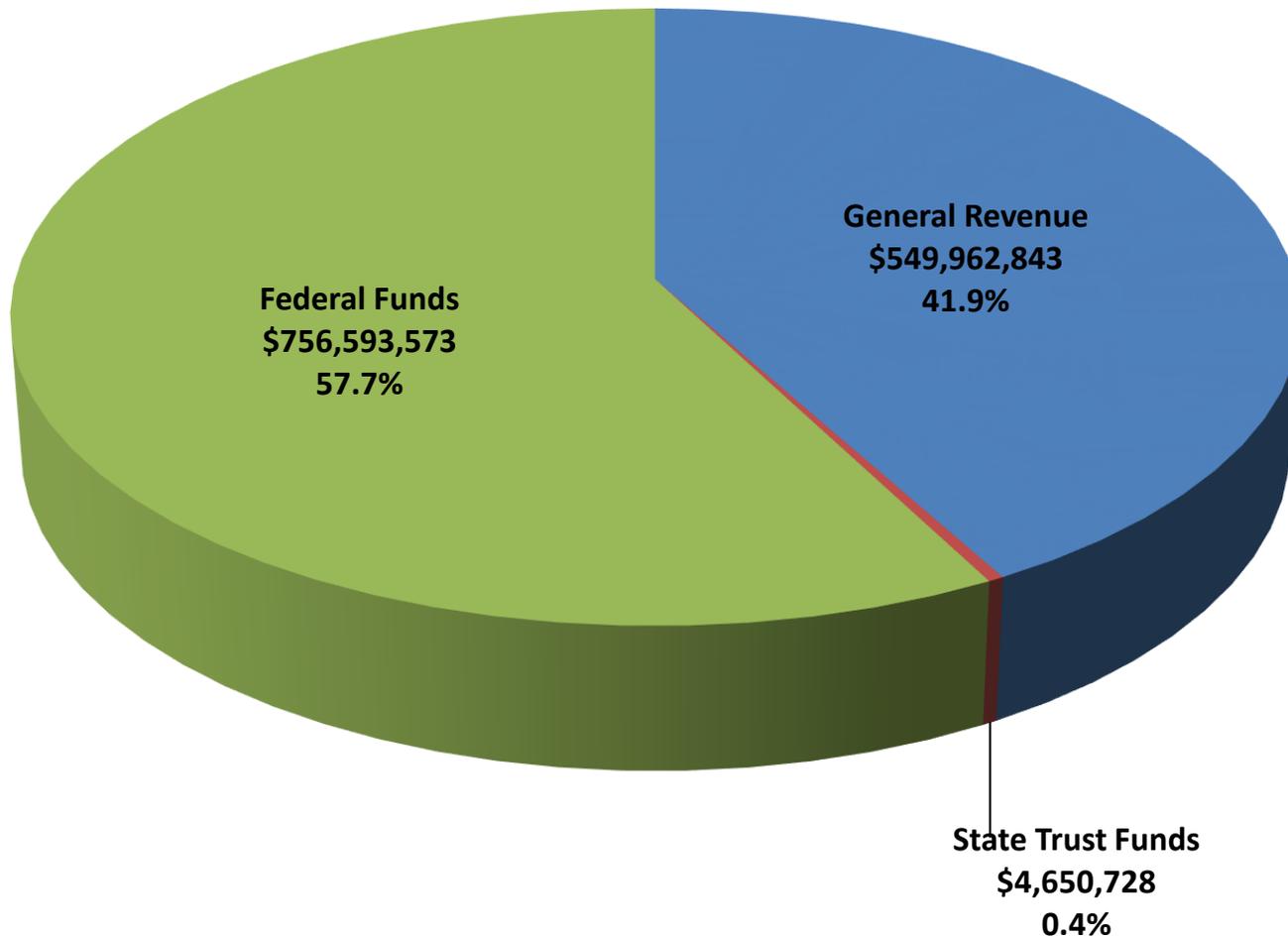


Major Programs:

- Medicaid – \$25,757.6 million
- KidCare – \$394.8 million
- Health Regulation – \$172.2 million

Agency for Persons With Disabilities Fiscal Year 2016-17 Appropriations \$1.3 Billion

Appropriations by Fund Type

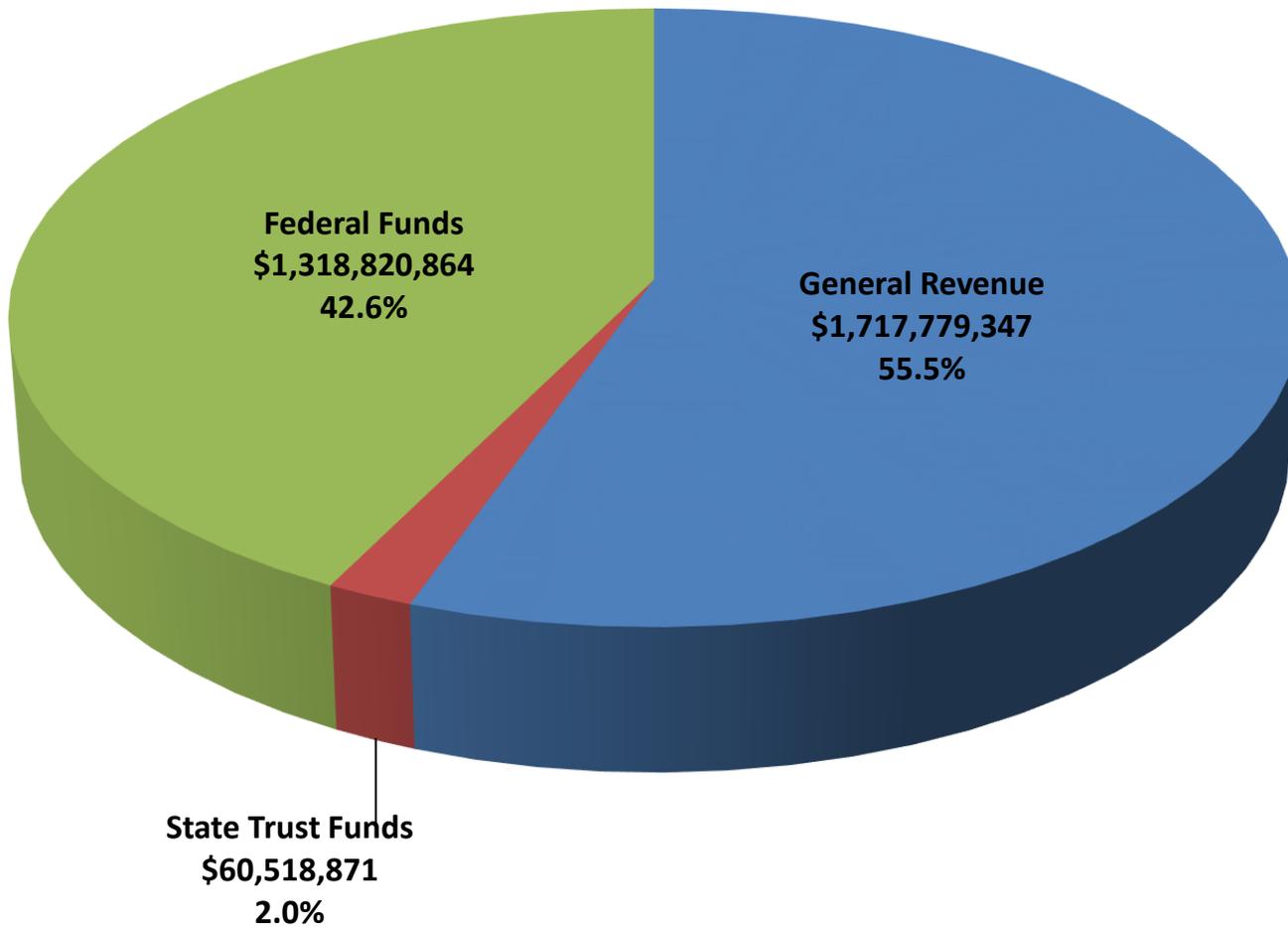


Major Programs:

- iBudget Waiver – \$1,097.2 million
- Developmental Disability Centers (Civil) – \$95.4 million
- Developmental Disability Centers (Forensic) – \$28.7 million

Department of Children and Families Fiscal Year 2016-17 Appropriations \$3.1 Billion

Appropriations by Fund Type

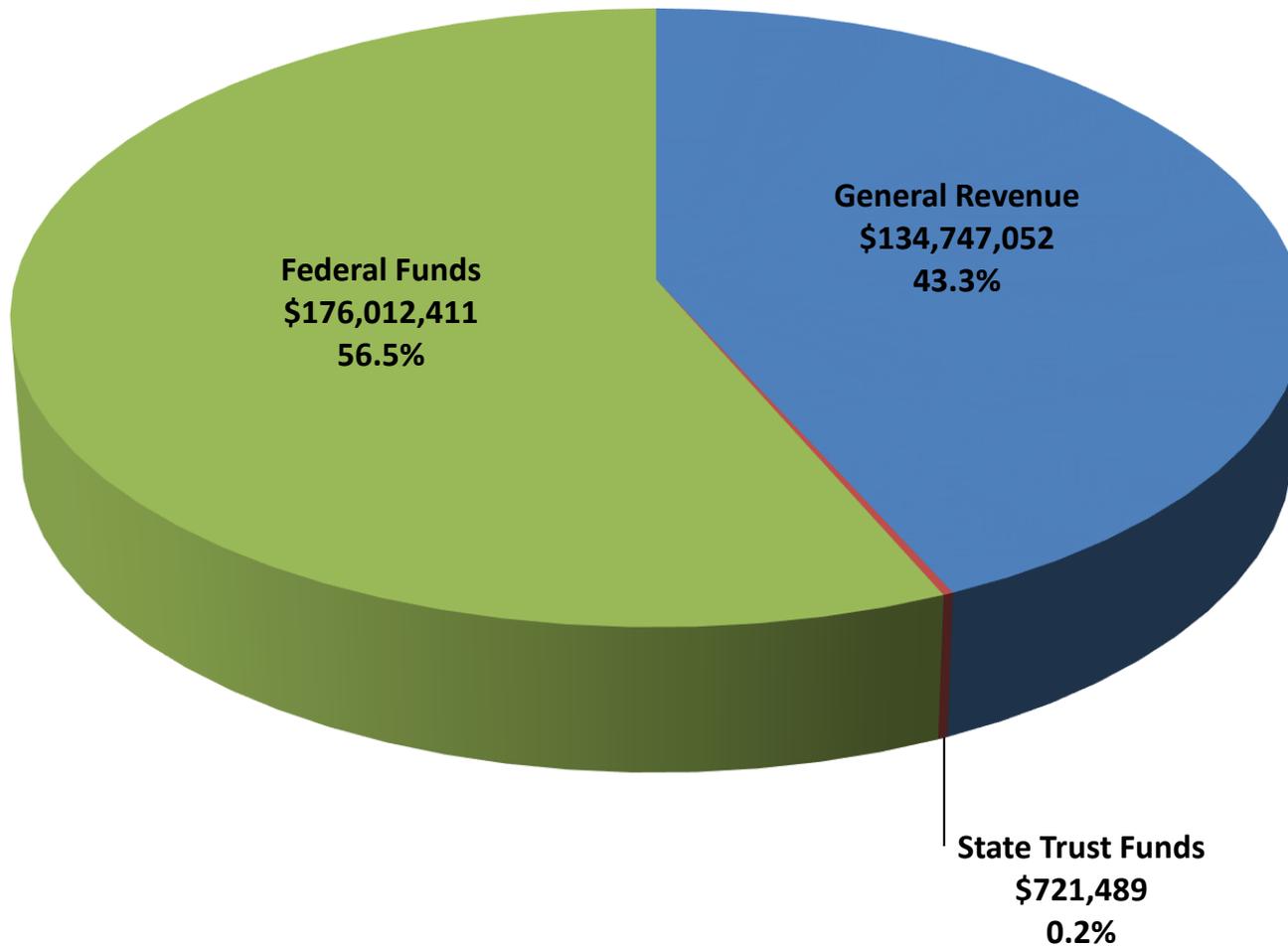


Major Programs:

- Family Safety/Preservation – \$1,321.2 million
- Community Substance Abuse and Mental Health Services – \$707.1 million
- Economic Self-Sufficiency – \$583.6 million
- Mental Health Services – \$353.7 million

Department of Elder Affairs Fiscal Year 2016-17 Appropriations \$311.5 Million

Appropriations by Fund Type

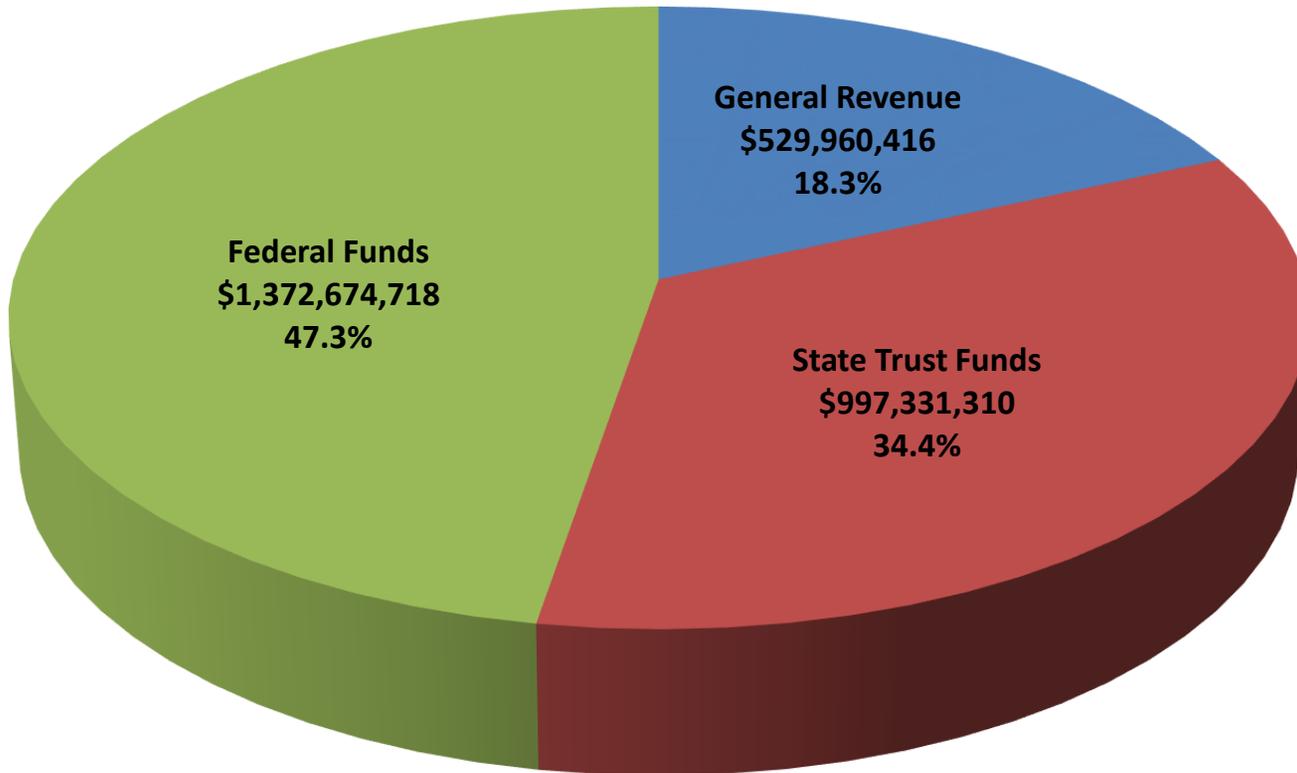


Major Programs:

- Older American's Act (OAA) – \$96.7 million
- Community Care for the Elderly (CCE) – \$66.4 million
- Program of All-Inclusive Care for the Elderly (PACE) – \$50.3 million
- Alzheimer's Respite – \$22.1 million

Department of Health Fiscal Year 2016-17 Appropriations \$2.9 Billion

Appropriations by Fund Type

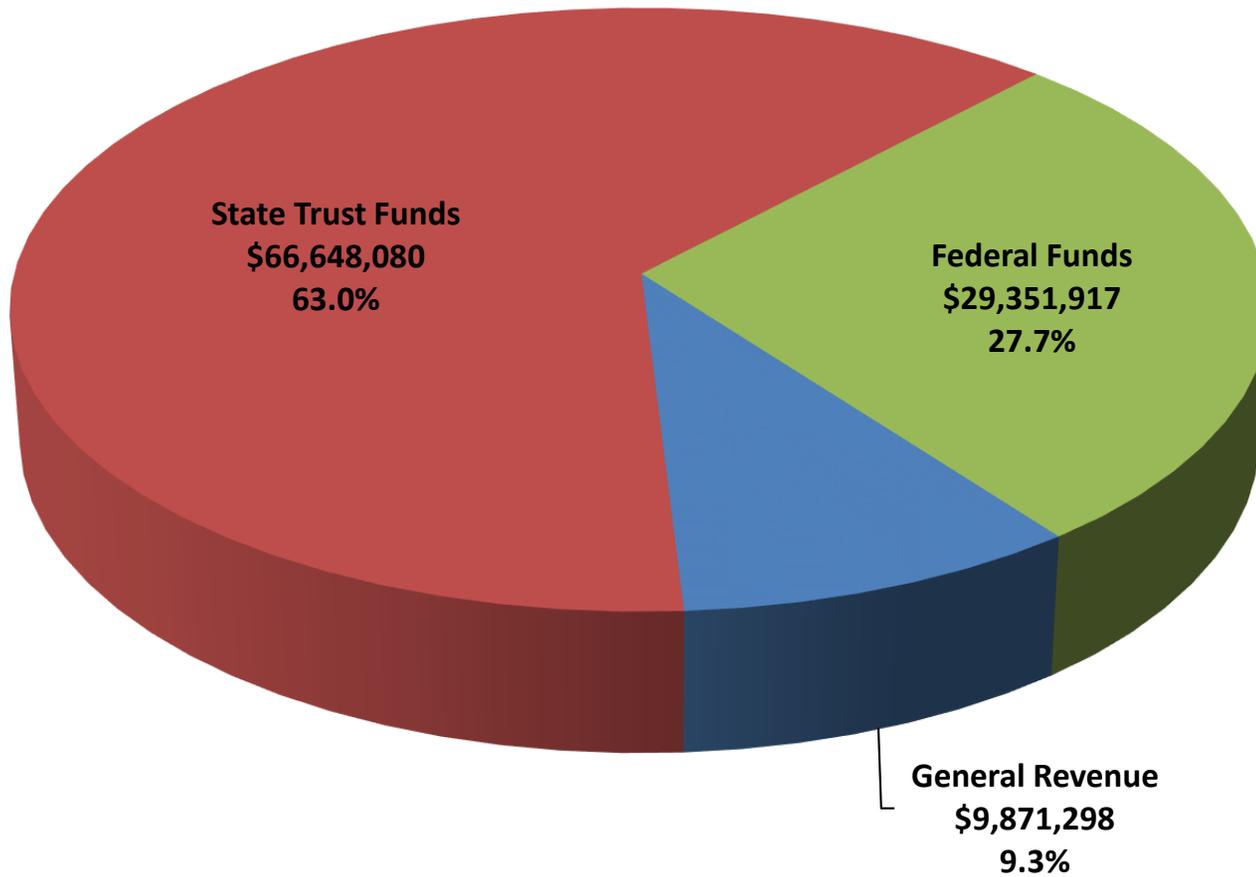


Major Programs:

- County Health Departments – \$945.4 million
- Federal Nutrition Programs (WIC & Child Care) – \$522.6 million
- Children’s Medical Services Network – \$198.8 million
- Disability Benefits Determination – \$170.7 million
- Central Pharmacy – \$164.4 million
- Biomedical Research – \$92.6 million
- Tobacco Free Florida – \$67.8 million
- Medical Quality Assurance – \$60.7 million

Department of Veterans' Affairs Fiscal Year 2016-17 Appropriations \$105.9 Million

Appropriations by Fund Type



Major Programs:

- Veterans' Homes – \$92.9 million
- Veterans' Benefits and Assistance – \$6.8 million
- Veterans' Training Services – \$1.8 million

Overview of Statewide Medicaid Managed Care

Phil Williams
Staff Director

Appropriations Subcommittee on Health and Human Services
December 14, 2016

The Statewide Medicaid Managed Care Program

In 2011, the Florida Legislature required the Agency for Health Care Administration (AHCA) to expand managed care statewide for most Medicaid recipients.

- Part IV of Chapter 409, Florida Statutes

AHCA implemented the Statewide Medicaid Managed Care (SMMC) program between August 1, 2013, through August 1, 2014.

The program has two components: the Long-Term Care (LTC) program and the Managed Medical Assistance (MMA) program.

- LTC covers most recipients 18 years of age or older who need nursing facility level of care.
- MMA covers most recipients of any age who are eligible to receive full Medicaid benefits.

Federal Authority

In order to implement the MMA component of the SMMC program, AHCA amended the 1115 Medicaid Reform Demonstration Waiver that initially operated in Baker, Broward, Clay, Duval, and Nassau counties:

- To mandatorily enroll certain previously voluntary populations in the Statewide Medicaid Managed Care MMA plans.
- To geographically expand the program statewide.
- To update programmatic operations and safeguards.
- To change the name of the demonstration to the Managed Medical Assistance program.

Separately, AHCA received federal approval of the 1915b/c waiver needed to implement the LTC component of the SMMC program.

SMMC Program Goals

The goals of the Statewide Medicaid Managed Care Program are:

- To improve coordination of care
- Improve the health of recipients - not just paying claims when people are sick
- Enhance accountability
- Allow recipients a choice of plans and benefit packages
- Allow plans the flexibility to offer services not otherwise covered
- Enhance prevention of fraud and abuse through contract requirements.

Statewide Medicaid Managed Care Rollout

AHCA put into place several provisions to ensure a smooth transition to the SMMC program:

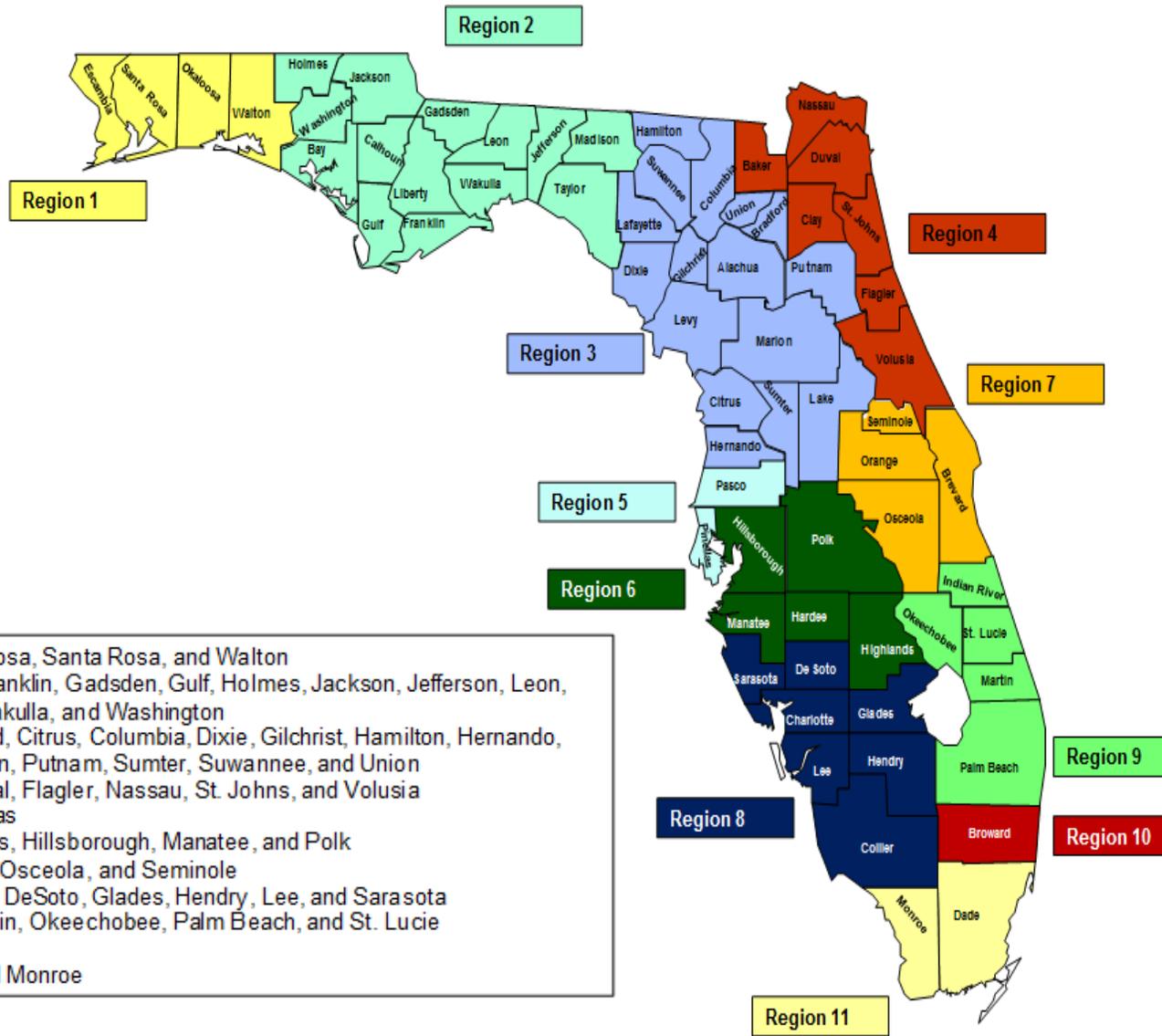
- Regional rollout
- Choice counseling
- Continuity of care
- Centralized issues hub
- Comprehensive outreach approach

MMA Program Elements

- Plan Choice
- HMOs and PSNs (provider service networks)
- Specialty Plans in MMA
- Choice of Benefit Package
- Choice Counseling
- Risk Adjusted Rates

MMA Program Enhancements

- Expanded Benefits
- Plan Accreditation
- Network Adequacy Standards
- Competitive Rates
- Risk-Adjusted Rates
- Enhanced Accountability



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

Florida Medicaid: Long-term Care Program

Justin M. Senior
Interim Secretary

Agency for Health Care Administration

Senate Health and Human Services
Appropriations Subcommittee

December 14, 2016



Introduction



Statewide Medicaid Managed Care Program (SMMC)

- Currently, Florida Medicaid has approximately four million enrollees.
- In 2011, the Florida Legislature directed the Agency for Health Care Administration to implement the SMMC program.
- Most of our Medicaid recipients are now enrolled in one or both components of SMMC *(November 2016 Data)*
 - Long-term Care: 94,077
 - Managed Medical Assistance: 3,227,513
- A small percentage of recipients receive their services through the fee-for-service delivery system.
 - Most of these recipients have access to a limited benefit package (ex. dual eligibles)



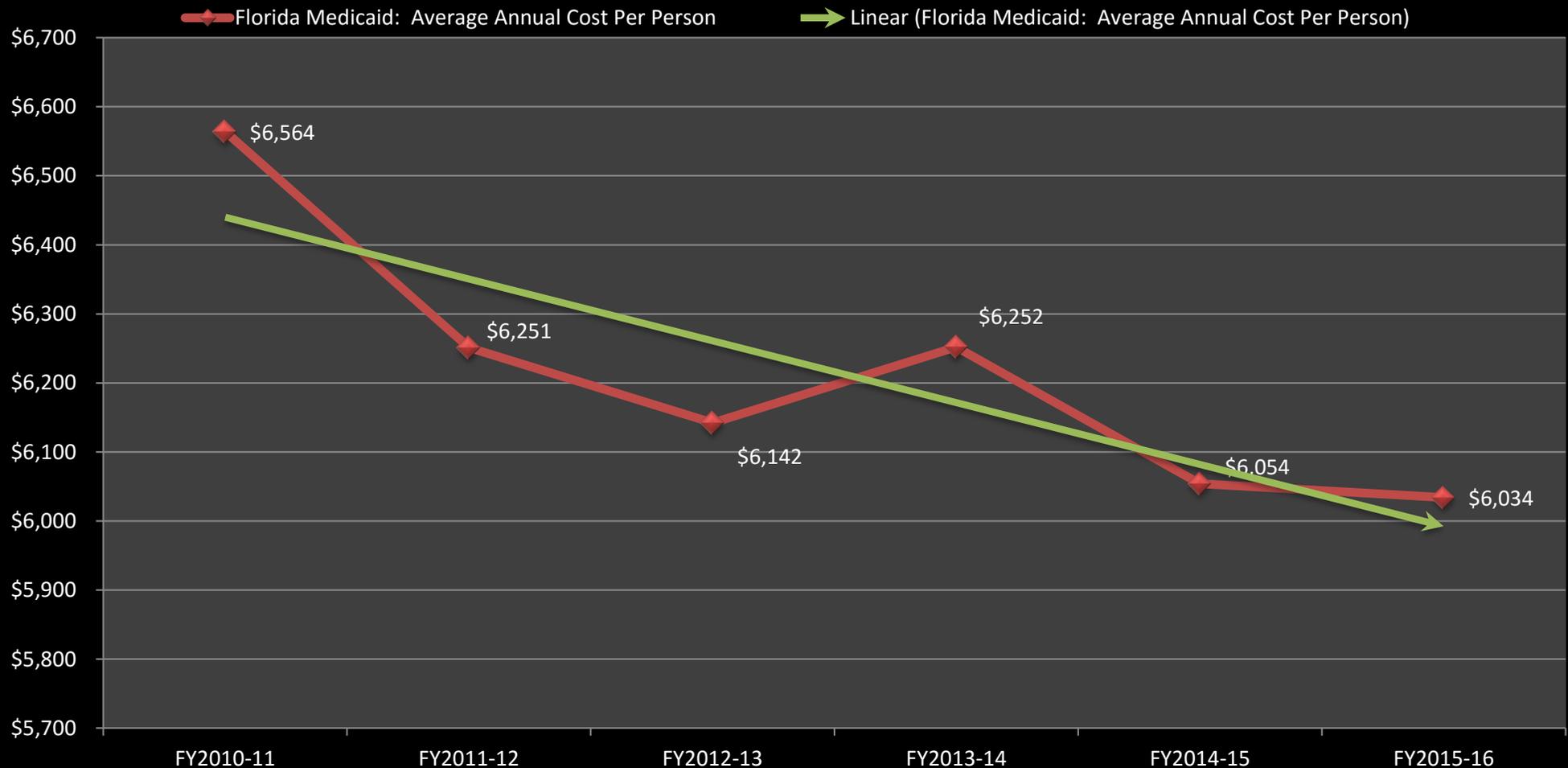
SMMC Program Goals

- Enhance fiscal predictability and financial management by converting the purchase of Florida Medicaid services to capitated, risk-adjusted, payment systems.
- Transition LTC individuals who wish to go home from institutional care to the community.
- Improve patient centered care, personal responsibility and active patient participation
- Improve the health of recipients, not just paying claims when people are sick
- Allow recipients a choice of plans and benefit packages
- Increased accountability and transparency.
- Promote an integrated health care delivery model that incentivizes quality and efficiency.



Per Member Per Year Cost Declines with SMMC Implementation

Florida Medicaid: Average Annual Cost Per Person

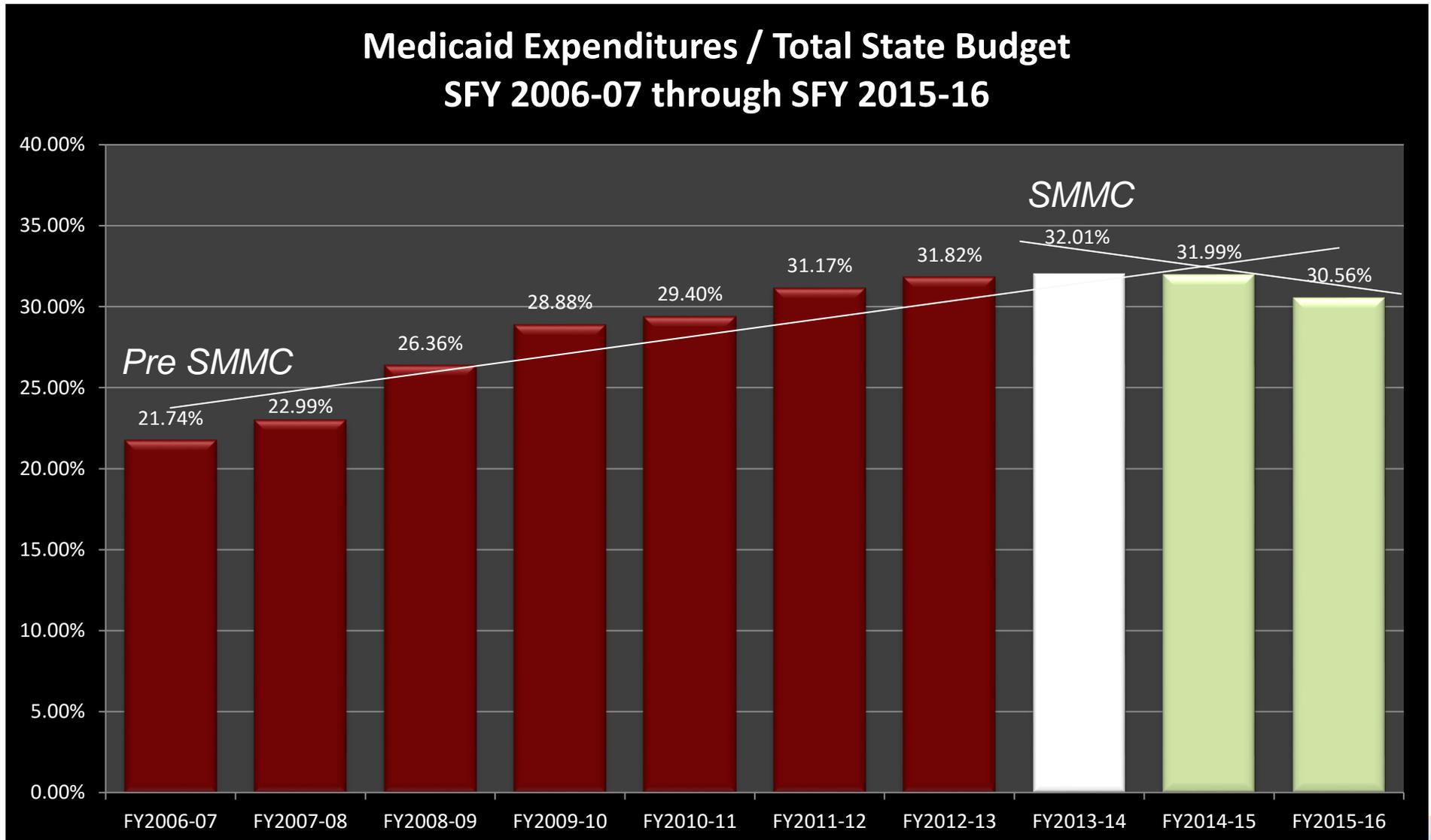


FY 2014-15 and prior data is from the final year end budgets.

FY 15-16 expenditures based on January 2016 Social Services Estimating Conference adjusted to include TANF/SSI rate cell.

FY 15-16 caseload based on July 6, 2016 Medicaid Caseload SSEC.

Medicaid Expenditures as a Percent of Total State Budget Declines with SMMC Implementation



Medicaid Expenditures are from the final year end budgets reports for FY 2014-15 and prior. Medicaid Expenditures for FY 2015-16 are from the January 7, 2016 Medicaid Expenditure SSEC. Florida Budget for FY 06-07 through FY 2014-15 is from the Final Budget Reports posted on the Florida Fiscal Portal. Florida Budget for FY 2015-16 (estimated) are the expenditures from the Final Budget Report posted on the Florida Fiscal Portal.

Medicaid Long-term Care Services



What types of long-term care services are available through Medicaid?

- Institutional Services:
 - Nursing facility: furnishes medical or allied inpatient care
 - More restrictive, generally more costly setting
- Home and Community Based Services:
 - Includes: Assisted living facility, companion care, assistive care, respite care, home delivered meals, etc.
 - Designed to prevent or delay facility placement
 - Less restrictive, generally less costly



Florida Medicaid Programs Prior to Statewide Medicaid Managed Care LTC Program

	Fee-For-Service or Capitated	Home and Community Based	Nursing Home
Adult Day Health Care Waiver	Fee-For-Service	X	
Aged and Disabled Adult Waiver*	Fee-For-Service	X	
Assisted Living Waiver*	Fee-For-Service	X	
Channeling Services Waiver*	Fee-For-Service	X	
Fee-For-Service	Fee-For-Service		X
Frail and Elder Program*	Capitated	HCB-like	X
Nursing Home Diversion*	Capitated	X	X

*Program phased out prior to or with implementation of the LTC program.



Statewide Medicaid Managed Care Long-term Care Program



Statewide Medicaid Managed Care Long-term Care Program

- SMMC LTC program is a comprehensive benefit program that includes both institutional and home and community based services:
 - Cost savings
 - Incentive for transition from a nursing facility to the home and community based setting



Statewide Medicaid Managed Care Long-term Care Program Financing and Plan/Provider Payment

- SFY 16-17 total LTC program budget is \$3.97 billion
- The Agency pays LTC plans a monthly capitation payment to provide services to their enrollees.
- Plans must pay for all covered services for their enrollees, regardless of whether the cost of those services exceeds the capitation rate received from the Agency.
- Plans are required to pay nursing facilities and hospice providers the rate set by the Agency, but it is not a pass-through.



Who is eligible for the SMMC LTC program?

- Recipients are mandatory for enrollment in the SMMC LTC program if they are:
 - 65 years of age or older AND need nursing facility level of care.
 - 18 years of age or older AND are eligible for Medicaid by reason of a disability, AND need nursing facility level of care.

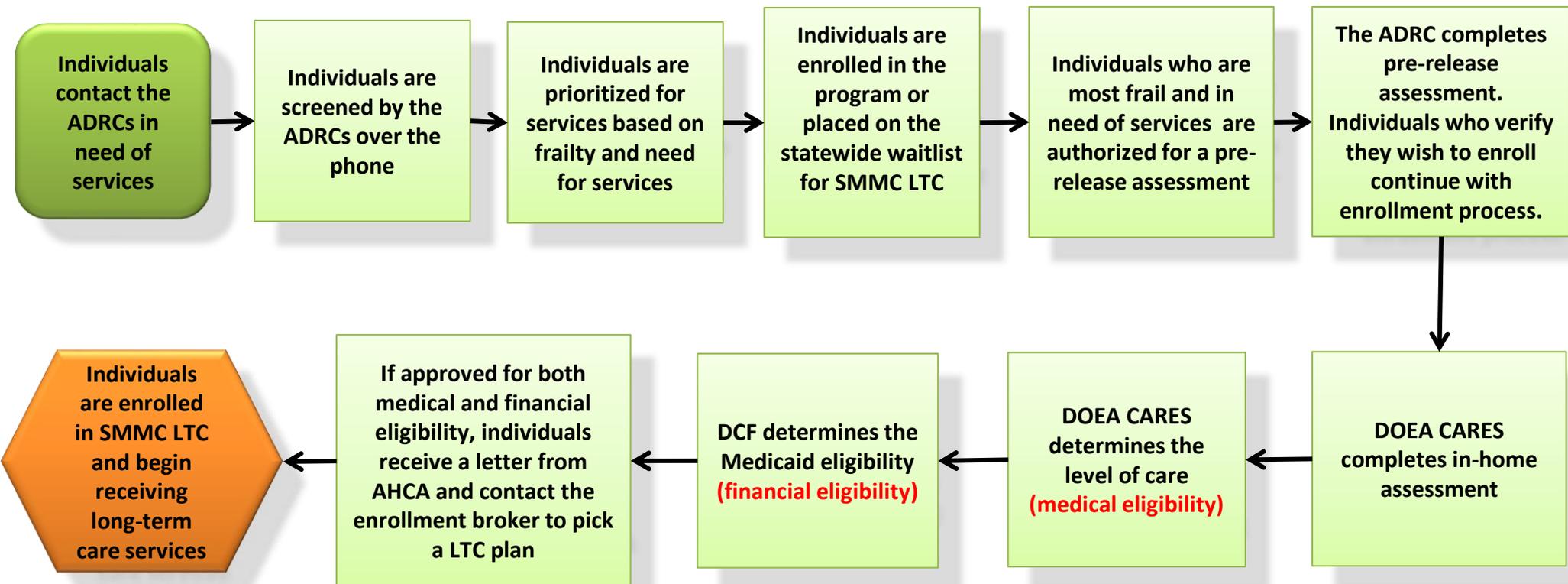


How are individuals enrolled in the SMMC LTC program?

- Individuals are initially screened by an Aging and Disability Resource Center:
 - Given a priority rank and score and:
 - Enrolled in the SMMC LTC program immediately, or
 - Placed on the SMMC LTC waitlist.
 - Screens for additional services that may be available.



How are individuals enrolled in the SMMC LTC program?



Long-term Care Program Enhancements



LTC Program Enhancements

- Incentives for Transition from Nursing facility to Home or Community Living
- Increased Enrollee Participation
- Enrollee Satisfaction
- Expanded Benefits
- Provider Network Standards
- Enhanced Transparency



SMMC LTC HCBS Transition Incentive is a Success

- The LTC program was designed with incentives to ensure:
 - Patients are able to reside in the least restrictive setting possible.
 - Have access to home and community based providers and services that meet their needs.

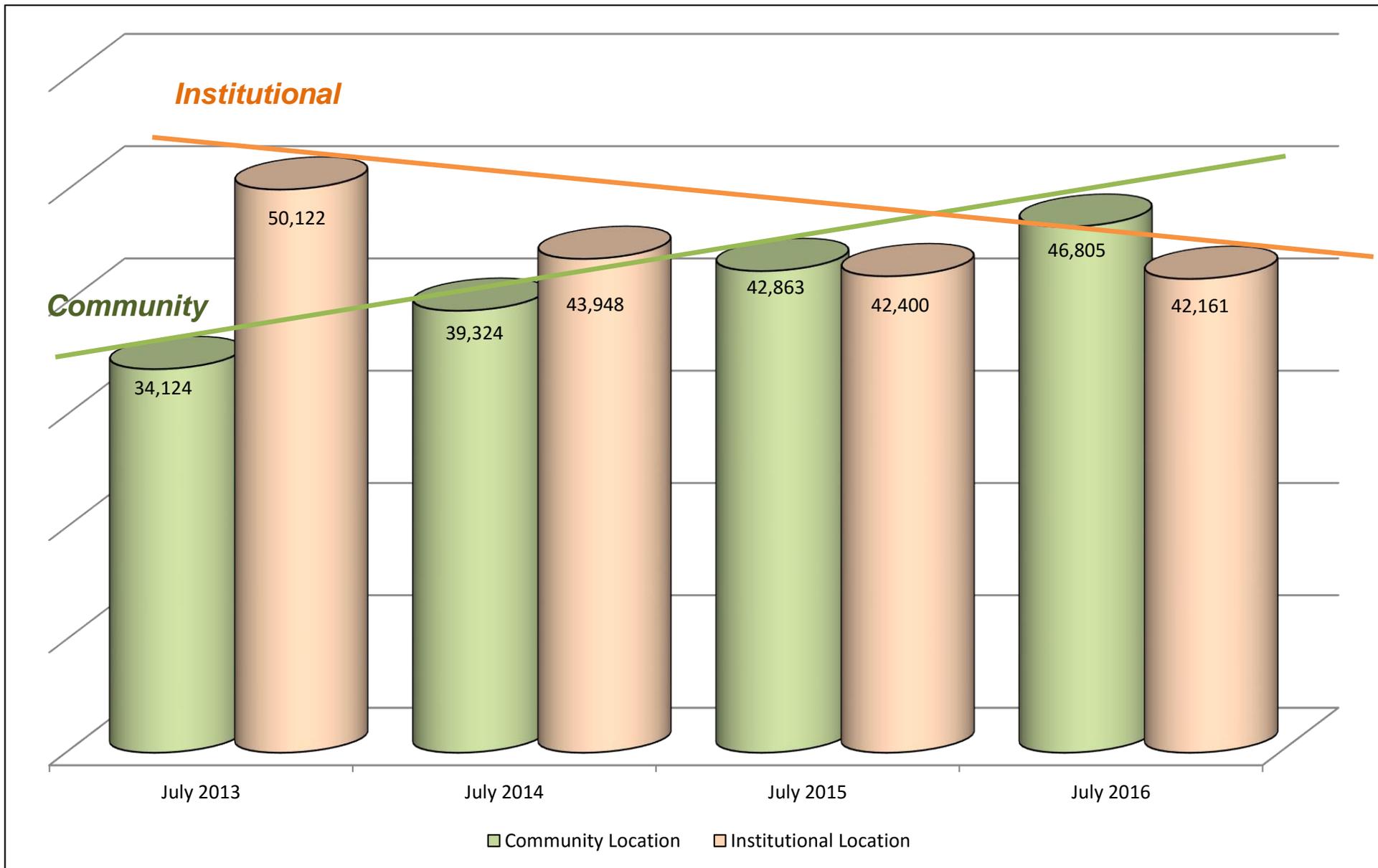


SMMC LTC HCBS Transition Incentive is a Success

- Goal: No more than 35% of the state’s Medicaid long-term care recipients are in nursing facilities.
- Incentive is in line with federal goals to promote services in the least restrictive service setting.
- Rates are adjusted to provide an incentive to shift services from nursing facilities to community based care.
 - A two percentage point shift in the first and second rate-setting period;
 - A three percentage point shift in the third rate-setting period, and in each subsequent rate-setting period
- Plans “win” financially if they beat the transition target, “lose” if they do not meet the target.



SMMC LTC HCBS Transition Incentive is a Success

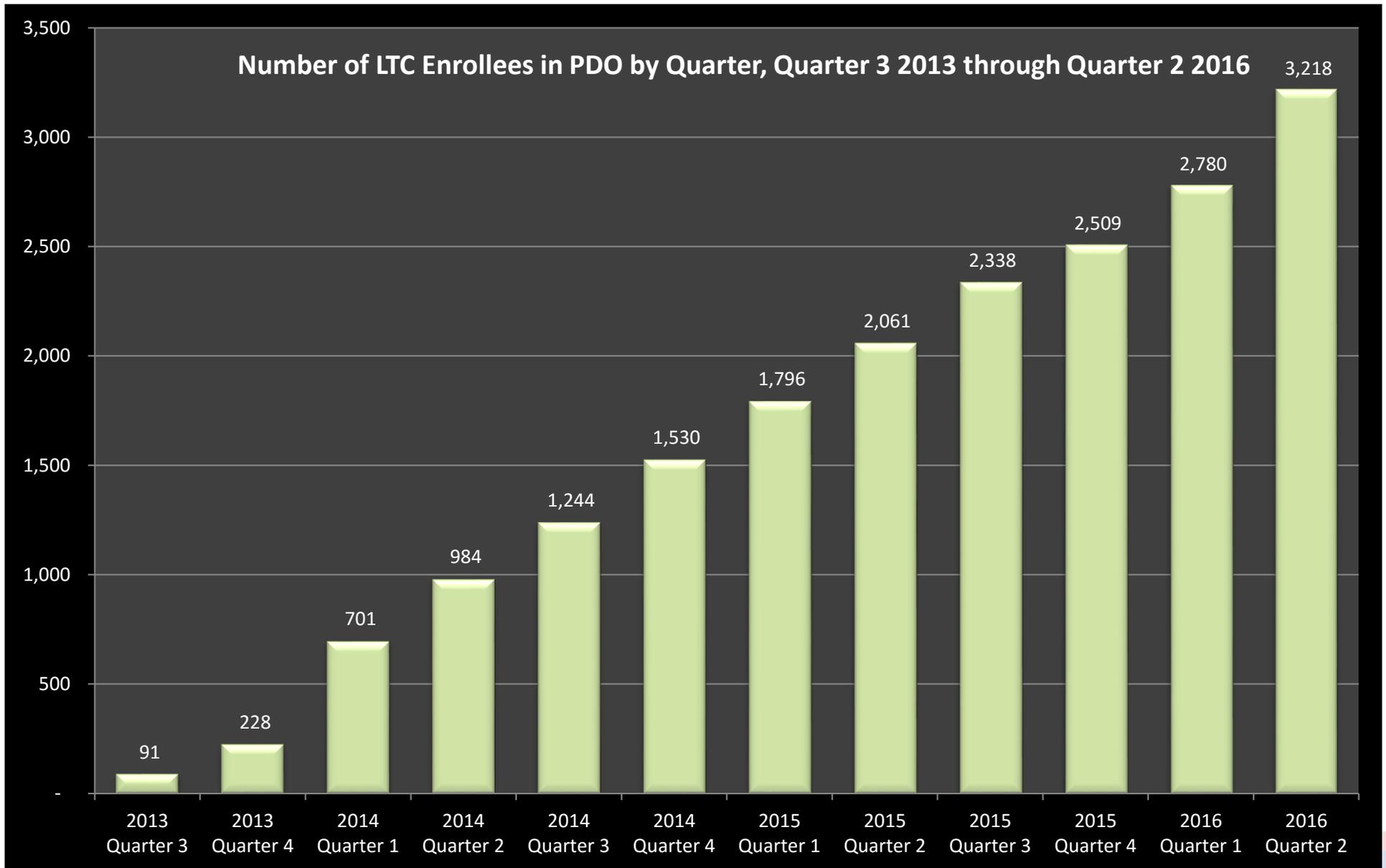


Number of Enrollees Using the Participant Directed Option Continues to Grow

- A program that allows enrollees to hire, train, supervise, and dismiss their direct service workers (ex. family members, friends, neighbors).
- Available to enrollees who live at home or in a family home and receive certain home based services.



Number of Enrollees Using the Participant Directed Option (PDO) Continues to Grow



Note: LTC program was not fully implemented statewide until March 1, 2014.

Source: Numbers include enrollees reported in the PDO Report submitted by plans. Based on calendar year quarters.

2016 SMMC LTC Enrollee Satisfaction Survey Results are High

Comment	2016 Survey Percentage Results
Respondents who rated their LTC case manager an 8, 9, or 10 out of 10.	80%
Respondents who rated their LTC services an 8, 9, or 10 out of 10.	80%
Respondents who rated their LTC plan an 8, 9, or 10 out of 10.	78%
Respondents who stated their quality of life has improved since enrolling in their LTC plan.	76%



SMMC LTC Expanded Benefits: No Cost to the State

- All LTC plans offer expanded benefits at no cost to the state including:
 - Support for Transition out of a Nursing Facility
 - Over the Counter Medications/Supplies
 - Expanded Adult Dental Services
- Other popular benefits include:
 - Vision Services
 - Cellular Phone Service
 - Non-Medical Transportation



SMMC LTC Expanded Benefits: No Cost to the State

List of Expanded Benefits	Amerigroup	Coventry	Humana	Molina	Sunshine	United
ALF/Adult Family Care Home Bed Hold	Y	Y	Y	Y	Y	
Cellular Phone Service	Y	Y	Y		Y	
Dental Services	Y	Y	Y	Y	Y	Y
Emergency Financial Assistance		Y				
Hearing Evaluation		Y	Y		Y	
Mobile Personal Emergency Response System					Y	
Non-Medical Transportation			Y		Y	Y
Over-The-Counter (OTC) Medications/Supplies	Y	Y	Y	Y	Y	Y
Support to Transition Out of a Nursing Facility	Y	Y	Y	Y	Y	Y
Vision Services	Y	Y	Y	Y	Y	
Additional LTC Expanded Benefits Not in Choice Counseling Materials	Amerigroup	Coventry	Humana	Molina	Sunshine	United
Box Fan					Y	
Caregiver Information/Support			Y		Y	
Document Keeper			Y		Y	
Household Set-Up Kit						Y
Welcome Home Basket						Y
Nurse Helpline Services	Y					Y
Pill Organizer		Y	Y			
Emergency Meal Supply		Y	Y			

SMMC LTC Provider Network Standards

- For the first contract year, plans were required to offer contracts to:
 - Nursing Facilities
 - Hospices
 - Aging Network Service providers
- Plans could exclude providers after 12 months:
 - If a provider failed to meet quality standards or meet performance criteria.



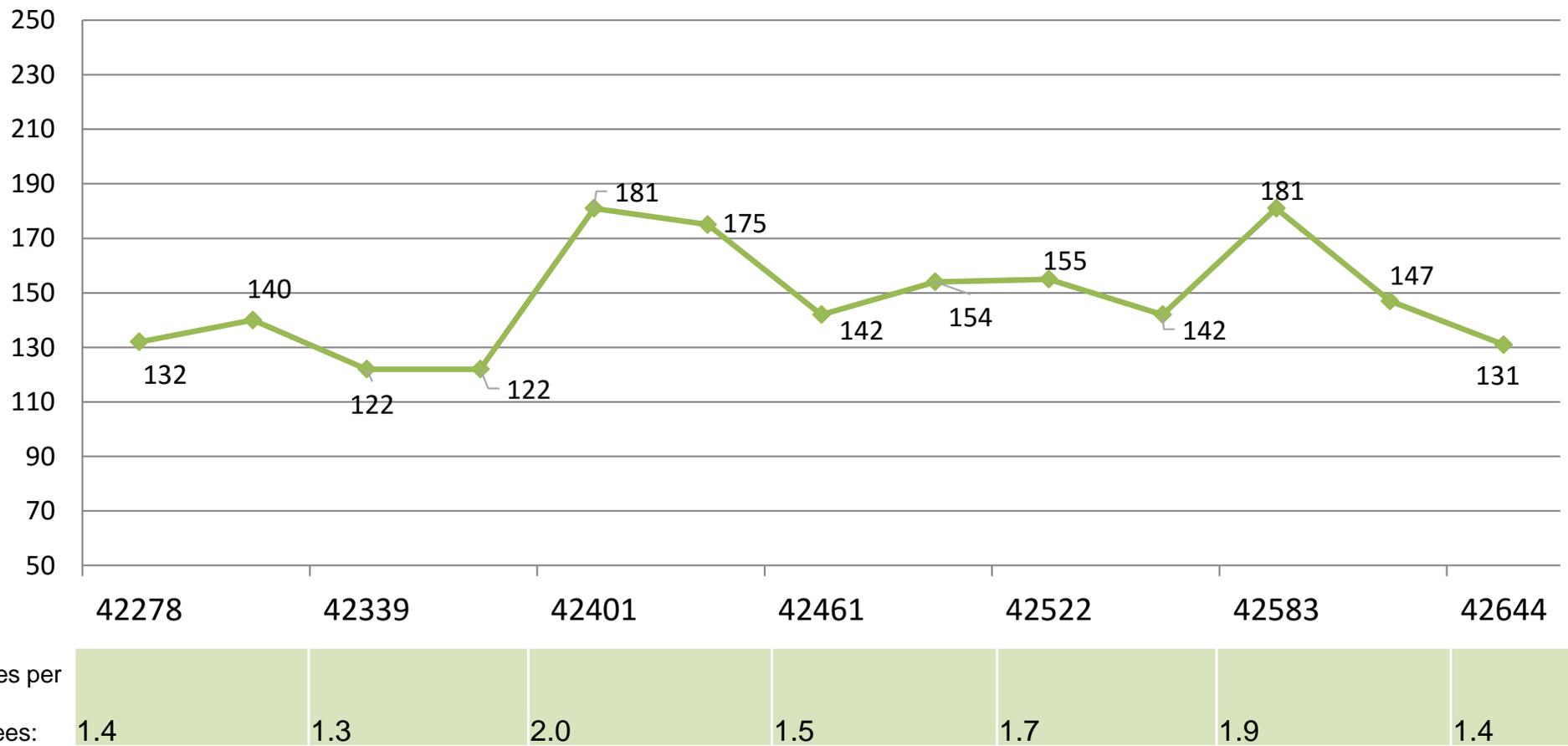
SMMC LTC Provider Network Standards

- The Agency has minimum network adequacy standards for more than 40 LTC provider types.
- Requirements include:
 - Minimum number of providers serving each county.
 - Where appropriate, time and distance standards.
 - Where appropriate, number of licensed bed requirements.



Long-term Care (LTC) Complaints reported since October 1, 2015

Statewide Medicaid Managed Care



Statewide Provider and Health Plan Claim Dispute Resolution Program

- The Agency is required to contract with an organization to provide assistance with the resolution of claim disputes that are not resolved by providers and health plans.
 - The Agency currently contracts with Maximus, an independent dispute resolution organization.
- All providers who provide services to recipients in licensed HMOs (including Medicaid and commercial HMOs) can utilize the Agency's Maximus Contract to file a dispute.
- LTC plan participation in the Maximus dispute process is voluntary.
- LTC plans are required to have an internal provider payment appeal process.



Enhanced Transparency: Independent Assessment of the LTC Program

- Preliminary study on the LTC program conducted by Florida State University for SFY 13-14.
- Access to Care findings included:
 - Diligent outreach was conducted prior to and during program implementation
 - Complex program implementation effort was coordinated successfully with no large scale access to care failures
 - Complaints related to access to care were fairly uncommon
 - Network of LTC providers appears to be robust
- LTC program resulted in less falls than prior to SMMC program.



Overall, quality levels remained the same or improved

Questions?



THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

12/14/16

Meeting Date

Bill Number (if applicable)

Topic Long-term Care Overview

Amendment Barcode (if applicable)

Name Justin M. Senior

Job Title Interim Secretary

Address 2626 Mahan Drive

Phone 850-412-3612

Street

Tallahassee

City

FL

State

32308

Zip

Email

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Agency for Health Care Administration

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
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12-14-16
Meeting Date

Bill Number (if applicable)

Topic Managed Care

Amendment Barcode (if applicable)

Name Angel Pardo

Job Title President of DMR

Address 10418 NW 33 Terr

Phone 305-666-9911

Doral FL 33172

City State Zip

Email ap@dmrcorp.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing _____

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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12/14/16
Meeting Date

Bill Number (if applicable)

Topic SMMC LTC

Amendment Barcode (if applicable)

Name Audrey Brown

Job Title President + C.E.O

Address 200 W. College ave suite 104
Street

Phone 850-386-2904

Tallahassee FL 32301
City State Zip

Email Audrey@FAHA.net

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Association of Health Plans

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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THE FLORIDA SENATE
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(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

12-14-16

Meeting Date

Bill Number (if applicable)

Topic Nursing Home Managed Care

Amendment Barcode (if applicable)

Name Deborah Franklin

Job Title Director of Operations

Address 2806 Fntzke Rd

Phone 813 679 7533

Street

Dover

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State

33527

Zip

Email debkfranklin@aol.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Healthcare Association

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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S-001 (10/14/14)

THE FLORIDA SENATE

APPEARANCE RECORD

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12/14/2016
Meeting Date

Bill Number (if applicable)

Topic Nursing Home Managed Care

Amendment Barcode (if applicable)

Name Julie Kemman

Job Title CEO

Address PO Box 780334

Phone 561-262-7534

Sebastian FL 32976
City State Zip

Email jkemman@hpcpsconsulting.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Health Care Assn

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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12/14/16
Meeting Date

Bill Number (if applicable)

Topic Long Term Care

Amendment Barcode (if applicable)

Name Tammy Perdue

Job Title Sr. Vice President Gov't Affairs

Address 301 S. Bronough St

Phone 850-483-8385

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City State Zip

Email tamela.i.perdue@centene.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Sunshine Health

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

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THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

12.14.16

Meeting Date

Bill Number (if applicable)

Topic Med Managed Care

Amendment Barcode (if applicable)

Name Jessica Hughes

Job Title COO

Address 2000 Ap Pkwy

Phone 850.878.2632

Street

Tallah

City

State

32301

Zip

Email

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing FL Hospice & Pall Care

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE
APPEARANCE RECORD

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12/14/16

Meeting Date

Bill Number (if applicable)

Topic Medicaid Managed LTC

Amendment Barcode (if applicable)

Name Robert Beck

Job Title PARTNER / consultant

Address 205 S. Adams St

Phone 850 766 1410

Street

Tallahassee

City

FL

State

32301

Zip

Email Robert@adamsstadvocates.com

com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing FL Association of Aging & Disability Resource Centers (A.K.A. - area Agencies on Aging)

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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S-001 (10/14/14)

THE FLORIDA SENATE

APPEARANCE RECORD

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12/14/16
Meeting Date

Bill Number (if applicable)

Topic Medicaid Long Term Care

Amendment Barcode (if applicable)

Name Tom Parker

Job Title Director of Reimbursement

Address 307 W. Park Ave

Phone 224-3907

Tallahassee FL 32301

Email T.parker@FMCA.org

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Florida Health Care Association

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE

APPEARANCE RECORD

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12/14/16

Meeting Date

Bill Number (if applicable)

Topic Medicaid Managed Care

Amendment Barcode (if applicable)

Name Cathy Adkison

Job Title CEO

Address 11071 Bexhill LN

Phone 850 878 5310

Tall FL 32317

Email cathy.a@bugbendhospital.com

Speaking: [X] For [] Against [] Information

Waive Speaking: [] In Support [] Against (The Chair will read this information into the record.)

Representing FHPCA

Appearing at request of Chair: [X] Yes [] No

Lobbyist registered with Legislature: [] Yes [X] No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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CourtSmart Tag Report

Room: SB 401

Case No.:

Type:

Caption: Senate Appropriations Subcommittee on Health and Human Services

Judge:

Started: 12/14/2016 2:04:15 PM

Ends: 12/14/2016 3:55:40 PM

Length: 01:51:26

2:04:18 PM Meeting called to order
2:04:29 PM
2:04:49 PM Roll call
2:04:56 PM Opening remarks by the Chair - Senator Flores
2:05:17 PM Tab 1 - Introduction of Members and Staff
2:05:56 PM Senator Powell
2:06:20 PM Senator Artilles
2:06:37 PM Senator Rader
2:07:07 PM Senator Book
2:07:18 PM Senator Flores
2:07:41 PM Senator Stargel
2:08:05 PM Senator Baxley
2:08:35 PM Senator Passidomo
2:11:41 PM Tab 2 - Subcommittee Jurisdiction Overview
2:12:07 PM Phil Williams, Staff Director, Appropriations Subcommittee on Health and Human Services
2:17:07 PM Tab 3 - Overview of Statewide Medicaid Managed Care
2:18:09 PM Phil Williams, Staff Director, Appropriations Subcommittee on Health and Human Services
2:23:21 PM Tab 3 - Update of the Statewide Medicaid Managed Care Program
2:24:00 PM Justin Senior, Interim Secretary, Agency for Health Care Administration
3:15:54 PM Public Testimonies:
3:17:03 PM Angel Pardo, President of DMR
3:22:31 PM Audrey Brown, President & CEO, Florida Association of Health Plans
3:28:42 PM Deborah Franklin, Director of Operations, Florida Healthcare Association
3:38:39 PM Julie Kemman, CEO, Florida Healthcare Association
3:44:24 PM Tammy Perdue, Senior Vice President of Government Affairs, Sunshine Health
3:49:13 PM Jessica Hughes, CEO, Florida Hospice & Pall Care (Waived)
3:50:00 PM Robert Beck, Partner/Consultant, Florida Association of Aging & Disability Resource Cntrs
3:53:14 PM Tom Parker, Director of Reimbursement, Florida Health Care Association (Waived)
3:53:43 PM Cathy Adkison, CEO, FHPCA
3:54:27 PM Closing Remarks by Chair
3:54:40 PM Meeting adjourned