

Dec. 7, 2015

SETTING THE RECORD STRAIGHT

DOH is committed to serving Florida's children



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Tallahassee, Fla. — Yesterday, the Miami Herald published an inaccurate article regarding the Florida Department of Health Children's Medical Services (CMS) Managed Care Plan. The department is committed to ensuring that children with serious and chronic medical conditions in need of health care services receive them.

"We care about all of Florida's children, particularly children and families dealing with serious and chronic medical conditions," said State Surgeon General and Secretary of Health Dr. John Armstrong. "Every child is precious, and we work every day to help children reach their full potentials through health. Our Children's Medical Services Managed Care Plan ensures that Florida's medically fragile children receive the health and developmental services that they need to fulfill their unique abilities."

CLAIM: "...the health department has drained even more money from the CMS safety net program."

FACTS:

- This is false. There is no budget "cap" for the CMS Plan.
- The CMS Managed Care Plan is focused on ensuring children enrolled in the plan receive all medically necessary services.
- The CMS Managed Care cannot make a profit or operate in a deficit. The Legislature has guaranteed that funding for all services determined medically necessary by a physician are available to the state's most medically fragile children.

Fiscal Year	Children's Medical Services Appropriation
2011-2012	\$324,250,128
2012-2013	\$323,538,453
2013-2014	\$331,100,483
2014-2015	\$330,861,406
2015-2016	\$341,917,163

CLAIM: "The spending plan would eliminate an additional 718 health department positions."

FACTS:

- Nearly two thirds of the proposed staff reductions are vacant and will not impact daily department operations or result in any interruption in services.
- The staff changes at department reflect the continued conversion of Children’s Medical Services from a direct service network to a managed care plan.
- The streamlined managed care model is better equipped to partner and invest in improved health care options and outcomes for the children it serves.

CLAIM: “...administrators had placed a “moratorium” on all new enrollments, making frail and disabled children wait months until the state had first rescreened about 70,000 children who were already enrolled.”

FACTS:

- This is false.
- There was no moratorium on new admissions to the CMS Plan.
- New enrollees have been added to the CMS Plan every month in 2015.
- There has been no barrier to access to services for children with special health care needs.

CMS Total and New Enrollment Jan. 1 – Nov. 30, 2015		
	Total Enrollment	New Enrollments
January	77,643	2,621
February	78,132	2,476
March	77,835	2,282
April	77,761	1,939
May	77,990	1,980
June	77,203	1,369
July	74,508	940
August	72,027	1,591
September	66,935	1,864
October	64,668	1,418
November	64,295	1,413

CLAIM: “...Florida saw the screening tool instead as a mechanism for reducing services.”

FACTS:

- This is false.

- All children in the Plan are entitled to all medically necessary services, as is true for all children enrolled in Medicaid.
- The department took special care to ensure that any children identified as being better served by another Medicaid Managed Medical Assistance plan was supported through their transition.

CLAIM: "...a "screening tool" that one judge declared invalid in September, but the Department of Health is fighting to reinstate."

"...health administrators deliberately misused her creation for the purpose of shedding enrollment."

FACTS:

- No judge has declared the parent-based screening tool invalid; the September ruling simply required the department to follow the rulemaking process prior to implementation.
- The department, in partnership with the CMS regional medical directors, released a [proposed rule](#), which includes a two-part approach to clinical eligibility screening – a physician-based, auto-eligibility process using diagnostic codes for chronic and serious conditions and a parent-based survey to ensure that all financially eligible children with special health care needs are given the option to enroll in the CMS Plan.
- The department has committed to working with Dr. Christina Bethell, the principal author of the national screener, as we continue to refine the clinical eligibility screening process.

CLAIM: "Medicaid doesn't do much of what CMS offers, such as providing care coordinators to help parents access therapy and medication..."

FACTS:

- All Medicaid Managed Medical Assistance plans are required to provide the same level of care coordination and access to all necessary primary and specialty care services.
- Children identified as being better served in another plan, other than the CMS Plan, are receiving care coordination and services through a managed care plan.

CLAIM: "...pediatricians, dentists, orthodontists and highly trained craniofacial surgeons have bolted from Florida's Medicaid insurance program for the needy – and from Children's Medical Services, created to treat the sickest and most disabled among them – because reimbursement rates were so low..."

"CMS will pay Stelnicki \$300 for every cleft lip he repairs, a procedure that takes several hours to complete. In contrast he can perform a cosmetic breast augmentation for \$6,000..."

FACTS:

- The CMS Managed Care Plan provider network consists of over 2,200 primary care physicians and 16,000 specialty health care professionals.
- There is a difference between what a service or procedure actually costs versus what providers charge private insurance.
- The department is grateful for the more than 18,000 dedicated health care professionals who provide vital services to children with special health care needs through the CMS Managed Care Plan.

CLAIM: “The directors claimed that administrators had placed a “moratorium” on all new enrollments, making frail and disabled children wait months until the state had first rescreened about 70,000 children who already were enrolled.”

FACTS:

- In 2011 pursuant to legislative direction, Florida as a whole began transitioning the Medicaid program to a Managed Care Plan model. The Children’s Medical Services specialty plan specifically began operations in August 2014.
- The department was required to rescreen to ensure the CMS Plan was being administered pursuant to statutory obligations.
- During the rescreening process, new enrollments were continuing.

About the Florida Department of Health

The department works to protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

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