

REVIEW OF HEALTHY START COALITION CORRESPONDENCE
BY CATEGORY

1. QA/QI Activities and Resources

Date of Letter	Content
<p>December 15, 1994</p> <p>SUBJECT: Healthy Start Quality Improvement Resource Guide</p>	<p>This letter states that HS Coalitions are to assure that a QA system is in operation within each contracted provider. Coalitions have asked for technical assistance and the SHO created the enclosed Quality Improvement Resource Guide.</p>
<p>August 5, 1997</p> <p>SUBJECT: Certify Healthy Start QI/QA Committee Reviewers as CHD Volunteers</p>	<p>This memorandum clarifies confidentiality issues surrounding HS auditing of the CHD's client records. If a coalition member wants to perform QA/QI activities through the review of client records, must become volunteers of the CHD. Each CHD will need to identify a volunteer coordinator; each coalition will need to contact this person to establish a process. Forms enclosed.</p>

2. Prenatal Care Assurance Role

<p>June 9, 1998</p> <p>SUBJECT: Responsibility for Assurance of Prenatal Care to Unfunded Pregnant Women</p>	<p>This memorandum states that questions have been raised concerning who has the ultimate responsibility for assuring that all pregnant women, including women without any form of health insurance, have access to prenatal care. As soon as the department approves the local service delivery plan, the coalition assumes responsibility for allocating local funding, of which one funding source is Improved Pregnancy Outcome (PNC) funds. At this time, assuring access to prenatal care for all pregnant women, including women without other sources of payment, becomes part of the coalition's assurance role.</p>
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3. Contracting Issues

<p>Year 1992</p> <p><u>SUBJECT: DHRS Official Responses To Questions Received on RFP 92/16VF</u></p>	<p>This is a listing of thirty-nine questions and answers that derived from the first RFP that went out soliciting the formation of coalitions.</p>
<p>Year 1992</p> <p><u>SUBJECT: DHRS Official Responses To Questions Received on RFP 92/16VF</u></p>	<p>This is a listing of eighty-eight additional questions and answers that derived from the first RFP that went out soliciting the formation of coalitions</p>
<p>April 19, 1993</p> <p><u>SUBJECT: Policy Statement on the Use of Match by the Healthy Start Coalitions</u></p>	<p>This memorandum defines the department's policy statement on the use of personnel and specific items that can and cannot be used as match by HS Coalitions.</p>
<p>October 27, 1993</p> <p><u>SUBJECT: Coalitions Following Procurement Procedures</u></p>	<p>This memorandum is to the Assistant Health officer for Family Health Services from one of the contract managers and is signed by the departments Contract Administrators at Headquarters. This memo states that coalitions are not considered state agencies and therefore HRS cannot make them follow procurement procedures. Coalitions do not need to follow state purchasing rules but need to follow a fair and equitable process whereby our office is apprised of decisions that will be made involving state money and prior approval must be given by us before any expenditure of funds occurs to another provider.</p>

<p>June 16, 1997</p> <p><u>SUBJECT: 1997/98 Legislative Healthy Start Increases</u></p>	<p>This letter outlines the 1997-1998 Legislative increases for the 0-3 population. Included in this increase are the MCH cash shortfall deduction and funds that were deducted for the creation of a certificate program from the total increase.</p>
<p>October 21, 1997</p> <p><u>SUBJECT: Changes in Contract Attachment I Deliverables</u></p>	<p>This letter provides coalitions with contract management guidance during the initial service delivery planning process. Included in this letter is the deletion of a six-month report, performing on-site monitoring, a four-hour training being presented during the upcoming FAHSC meeting in January, 1998.</p>
<p>January 15, 1999</p> <p><u>SUBJECT: Fixed Price Contract Information</u></p>	<p>This memorandum helps provide information to coalitions as we went from a cost-based reimbursement contract to a fixed-price contract effective January 1, 1999.</p>
<p>March, 2002</p> <p><u>SUBJECT: Questions For DOH Regarding the Medicaid Waiver Contract</u></p>	<p>During a Waiver presentation, several coalitions asked questions for answer by DOH. This document addresses these questions. The questions fall into three categories: Immediate Concerns Regarding Current Contract; Items to be Addressed in the Next Round of Contracts; and, AHCA-DOH 3/19/02 Meeting Outcomes.</p>
<p>November 5, 2002</p> <p><u>SUBJECT: Policy – Setting Aside HS Contract Service Dollars for</u></p>	<p>This interagency memorandum states that as earned Medicaid Waiver dollars fluctuate from month-to-month, coalitions may set aside 15% of earned Medicaid service dollars for emergency</p>

<p>Emergency Use</p>	<p>but these funds must be spent on HS direct services and must be spent during the contract year within 6 months of being set aside.</p>
<p>June 20, 2003</p> <p>SUBJECT: Policy – Setting Aside HS Contract Service Dollars for Emergency Use</p>	<p>This Interagency Memorandum states that the earned Healthy Start Medicaid Waiver and SOBRA dollars fluctuate from month-to-month, coalitions may set aside 15% of earned Medicaid service or SOBRA dollars for emergency but these funds must be spent or allocated on HS direct services or SOBRA and must be spent during the contract year within 6 months of being set aside.</p>
<p>July 14, 2003</p> <p>SUBJECT: Policy Revision – Setting Aside Healthy Start contract Service Dollars for Emergency Use</p>	<p>This memorandum is to revise the June 30, 2003 memorandum that deletes the SOBRA program because some communities are able to purchase SOBRA services for less than \$7.50. To include SOBRA in the policy makes those coalitions out of compliance.</p>
<p>June 9, 2004</p> <p>SUBJECT: Healthy Start Contract Non-Compliant Criteria Policy</p>	<p>This interoffice memorandum is in response to inquiries from contract managers and coalitions regarding the department’s minimum standards for Healthy Start coalition contract compliance. The document can also be used as an internal quality assurance and contract management tool in the oversight of contract monitoring.</p>

4. Service Delivery Planning

<p>March 11, 1994</p>	<p>This memorandum highlights twelve specific observations made by the department on their review of</p>
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<p>SUBJECT: Preliminary Observations on Submitted Service Delivery Plans</p>	<p>coalition's service delivery plans. The items are useful comments to help coalitions submit better service delivery plans updates.</p>
<p>August 25, 1994</p> <p>SUBJECT: Revised checklist and Process for Review of Service Delivery Plans</p>	<p>This letter states that the State Health Office has just completed a rigorous re-examination of the service delivery plan review process. Greater clarification is needed and a revision of the checklist items has been put in place. Also revised is the review process. A draft will be submitted followed by a meeting between the Executive Director, a Board member and Family Health Services to answer questions on the draft before a final is submitted. A district Health and Human Service Board member will be a reviewer of this plan.</p>
<p>May 9, 1996</p> <p>SUBJECT: Service Delivery Plan Update Components</p>	<p>This memorandum provides coalitions with the format and process for the review of service delivery plan updates: Who reviews the plans; how is the plan reviewed; where reviewed; when it should be submitted; and, what should be submitted. A copy of the review tool is enclosed.</p>
<p>January 19, 2006</p> <p>SUBJECT: Change of Service Delivery Plan Due Date</p>	<p>This interagency memorandum is in response to requests at the January 9, 2006 workshop to increase the time frame of submitting service delivery plans from three years to five years. This memorandum also requests that coalitions communicate with their contract managers when this change would go into effect.</p>

5. Collaborative Efforts

<p>July 13, 1995</p>	<p>This interoffice memorandum discusses the coordination that is needed between Healthy Start service</p>
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<p><u>SUBJECT: Coordination of EIP and Healthy Start Services</u></p>	<p>delivery and the Early Intervention Programs in Children’s Medical Services. This memo asks for copies of inter and intra-agency agreements and procedures that have been put into place to assure coordination of these programs.</p>
<p>November 8, 1995</p> <p><u>SUBJECT: Coordination of EIP and Healthy Start Services</u></p>	<p>This memorandum, related to the above memo, asks for copies of agreements and/or procedures related to the coordination between Healthy Start, EIP and NICU’s.</p>
<p>February 28, 2000</p> <p><u>SUBJECT: Healthy Start/Healthy Families Florida Prenatal Risk Screening and Referral</u></p>	<p>This interagency memorandum announces that the Healthy Start Prenatal Risk Screen has been revised to capture risk factors that meet the needs of both Healthy Start and the Healthy Families Florida programs. The revisions are outlined.</p>
<p>December 14, 2001</p> <p><u>SUBJECT: Healthy Start Waiver Coordination and Children’s Medical Services Targeted Case Management Billing</u></p>	<p>This interoffice memorandum, a follow-up to a memo distributed in September 2001, states that Healthy Start care coordination and services, in combination with CMS targeted case, can be complementary to meet all the services needs of our families. This memo further states that families can receive Healthy Start services served under CMS Targeted Case Management until the time that services are no longer needed, then the family can be transitioned into CMS.</p>
<p>April 7, 2003</p> <p><u>SUBJECT: Healthy Start and Healthy Families Florida: Differences and</u></p>	<p>This document provides a side by side listing that details the infrastructure and operation of the two programs by purpose, goals, target population, services, eligibility criteria and other</p>

Commonalities.	areas.
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6. Coalition Formation

<p>Year 2003</p> <p>SUBJECT: New Healthy Start Executive Director Checklist</p>	<p>This document was created by contract management provide new Executive directors with a checklist of activities that would fall under their responsibility as it relates to Healthy Start. This checklist is divided under Planning Contract Responsibilities and Healthy Start service contract responsibilities.</p>
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7. Healthy Start Coding

<p>September 30, 1994</p> <p>SUBJECT: Healthy Start Providers That Should code into CIS/HMC</p>	<p>This letter advises coalitions that non-CHD providers should be entering data for Healthy Start into CIS/HMC but that the system is not currently set up to accommodate this data. This letter also advises that guidance is forthcoming for establishing procedures for these new non-CHD providers.</p>
<p>November 26, 1996</p> <p>SUBJECT: Partnership for Accountability</p>	<p>This interoffice memorandum discusses the creation of a workgroup to look at a common sense approach to performance accountability. There is a call for a moratorium on any proposals to purchase new data management systems at the local level, including purchases of additional data using the service and planning dollars. In the meantime, DOH continues to make changes to their HMC system and have developed expanded reports on service delivery</p>

DATE N/A	
<u>SUBJECT: County Health Department Coding Tool</u>	This tool assists CHD employees in completing their EARS forms when the employee is a Healthy Start employee; and how a CHD employee captures work performed as a MomCare Advisor.

8. FIMR and PAMR ISSUES

June 29, 1995	
<u>SUBJECT: FIMR and Legal Immunity</u>	This interoffice memorandum seeks a legal opinion from our General Counsel's Office regarding liability for medical societies and other participating in FIMR projects. The letter concludes that there are adequate legal safeguards to protect the interests of participants in FIMR projects, including organizations sponsoring medical review committees.
December 5, 1996	
<u>SUBJECT: Appointment as Agent of the State for FIMR/PAMR Activities</u>	This interoffice memorandum advises coalitions that in August, 1995, HRS appointed each coalition involved in a FIMR project as an agent of the state. With the separation of HRS into DOH and DCF, the department is soliciting input on whether renewing the agent status is desired.
July 2, 1997	
<u>SUBJECT: Immunity and Confidentiality for FIMR and PAMR</u>	This memorandum discusses the department's success in the 1997 Legislative session in obtaining a long awaited immunity for quality assurance activities for FIMR and PAMR projects.

<p>Activities</p>	<p>Also protected are meetings, proceedings, reports and records of the department, CHD's, Healthy Start Coalitions, rural health Centers or a panel or committee of the above entities. There is no longer a need to require the auspices of the local medical society but encourage their continued participation.</p>
<p>May 5, 2003</p> <p>SUBJECT: HIPAA Rule and Association With PAMR Abstractors</p>	<p>This cover memo from the Director of Family Health Services presents the Department of Health's Secretary's correspondence that stresses the importance of the pregnancy-associated mortality review process and provides HIPAA compliance assurance.</p>
<p>May 5, 2003</p> <p>SUBJECT: HIPAA Rule and Association With FIMR Abstractors</p>	<p>This cover memo from the Director of Family Health Services presents the Department of Health's Secretary's correspondence that stresses the importance of the fetal and infant mortality review process and provides HIPAA compliance assurance.</p>

9. Sunshine Law Interpretation

<p>March 25, 1993</p> <p>SUBJECT: Coalition Following the Sunshine Laws</p>	<p>This memorandum states that the Sunshine Law applies to any gathering (formal or informal) of two or more members of the same board or commission to discuss some matter on which foreseeable action will be taken by a public board or commission. The Sunshine Law is also applicable to coalitions because coalitions affect HRS decision-making policies and have authority over certain HRS funds.</p>
<p>June 21, 1993</p>	<p>This memorandum is from HRS Legal Counsel to Dr. Leslie Beitsch, Assistant Health Officer. To summarize, this</p>

<p>SUBJECT: Healthy Start Coalitions; Corrected page 2 (This PDF document has been compressed due to its size. You may need a separate program to “unzip” it).</p>	<p>memo covers coalition board members making financial disclosures; how to deal with conflict of interest issues; when notices for meetings must be published; and, the Florida Administrative Procedures Act and its relationship to coalitions. Excerpts from the Government in the Sunshine manual are copied.</p>
<p>August 4, 1993</p> <p>SUBJECT: Further Clarification on the Sunshine Law</p> <p>(This PDF document has been compressed due to its size. You may need a separate program to “unzip” it).</p>	<p>This memorandum contains a number of questions that were posed to our Legal Counsel on Sunshine issues and their answers. Also enclosed are select pages from the Government-In-The Sunshine manual.</p>
<p>July 21, 1995</p> <p>SUBJECT: Healthy Start Coalitions and Public Records</p>	<p>This memorandum is to DOH’s Communications Office from DOH’s General Counsel. The question is asked if Healthy Start coalitions are subject to the provisions of Chapter 119, FS. A summary of the answer is explained in depth.</p>

10. Appropriate Use of Healthy Start Funding

<p>May 6, 1993</p> <p>SUBJECT: Review of the Friday Meeting to Review Fiscal Concerns</p>	<p>This interoffice memorandum covers a number of key points regarding fiscal matters. The memo states what the funds are that the coalition has authority over; the time frame of 45 days between the awarding of funds to a provider and the actual start date; the division of funding categories; a transition plan if funds are being removed from the CHD; and other pertinent issues.</p>
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<p>July 15, 1994</p> <p><u>SUBJECT: Clarification of Information on Funding for Care Coordination and Enhanced Services (ES)</u></p>	<p>This very important memo lists allowable expenditures for each of the funding categories that the Coalition has authority over: federal and state IPO funds, federal and state MCH Block Grant funds for infants up to the age of 1, and state enhanced services funding through Healthy Start legislation.</p>
<p>March 7, 1995</p> <p><u>SUBJECT: Appropriate Use of Healthy Start Funding</u></p>	<p>This memorandum affirms that the Healthy Start funding is to be used to assure that pregnant women and infants have access to services and is the express purpose of the Healthy Start legislation. This memo also outlines that serving populations outside of this scope will necessitate the coalition to obtain other funding. Also discussed are criteria to be met if coalitions desire to fund populations outside of the HS populations.</p>
<p>January 12, 1996</p> <p><u>SUBJECT: Use of Healthy Start Service Dollars for Administrative Costs</u></p>	<p>This memorandum advises that coalitions can use up to 10% of direct service dollars for administration and lists the uses that will be acceptable to the department. This memo also advises that the districts and CHD's cannot use 10% of the direct service dollars for contracts that may be developed by the district or the CHD.</p>
<p>June 25, 1996</p> <p><u>SUBJECT: Use of Healthy Start Service Dollars for Administrative Costs</u></p>	<p>This memorandum directly refers to the January 12, 1996 memo and rescinds the policy that CHD's cannot use up to 10%. This can now occur. All justifications must be submitted and prior approved granted by the SHO. Use of service dollars for administration should be the last resort.</p>

<p>July 31, 1997</p> <p><u>SUBJECT: Department Guidance for New HS Money Up to Age Three</u></p>	<p>This memorandum states that the 1997 Legislature increased Healthy Start by \$4 million and increased the age covered from 1 to 3. Coalitions are asked to serve this new target population by undertaking at least one intervention serving infants ages 1 to 3.</p>
<p>November 24, 1997</p> <p><u>SUBJECT: Guidance on HS and IPO Funding Categories Combining</u></p>	<p>This memorandum advises that in the 1997/98 FY, the HS and IPO dollars were consolidated into one funding source. With this combination, the memo states that the percentage going to care coordination versus clinical prenatal care is the decision of the coalition. Fundable allowable Healthy services are outlined.</p>
<p>May 14, 1998</p> <p><u>SUBJECT: Unexpended Healthy Start Service Delivery Dollars</u></p>	<p>This memorandum states DOH policy governing unexpended HS funds; that direct service dollars received by the coalition through our fixed-price contract and are unexpended during the fiscal year can be rolled forward into the next fiscal year and be obligated in Healthy Start for direct services. This memo further clarifies the control of these funds.</p>
<p>May 26, 1998</p> <p><u>SUBJECT: Use of Healthy Start Service Dollars for Administrative Costs</u></p>	<p>This memorandum is a follow-up to the June 25, 1996 memo detailed above. This memo states that prior approval for expending direct service funds for administration has not been followed and provides what must be included in the request for justification for approval.</p>

<p>May 29, 2001</p> <p><u>SUBJECT: Direct Service Contract Requirements</u></p>	<p>This interagency memorandum reviews a number of issues that have come to light. One is the use of direct service dollars for administrative functions and references the May 26, 1998 memo above. This memo also outlines the Allocation methodology plan and what the components are for submission.</p>
<p>August 10, 2001</p> <p><u>SUBJECT: Policy – Use of Service Dollars for Administrative Costs</u></p>	<p>This interagency memorandum discusses that since the general revenue dollars are being used to draw down Medicaid match, what service dollars can be appropriately used for and what functions are considered administrative, or direct service, depending who is performing the function.</p>
<p>October 3, 2001</p> <p><u>SUBJECT: Policy – Use of HS Dollars By CHD for Administrative Costs</u></p>	<p>This interagency memorandum once again discusses the use of Healthy Start service delivery dollars by CHD's for administrative costs. It summarizes the policy set in previous memos. There is no new additional policy put forth in this memorandum.</p>
<p>April 15, 2003</p> <p><u>SUBJECT: Direct Service Contracting Requirements</u></p>	<p>This interagency memorandum requests the coalition submit their allocation methodology plan for the upcoming 2003/04 fiscal year and outlines the different documents that are due such as requests to use direct service dollars for administration; allocation plan for use of direct service dollars and line item budget for the use of administrative planning dollars.</p>
<p>October 27, 2003</p>	<p>This interagency memorandum responds to a request from the Florida Association of Healthy Start coalitions</p>

<p>SUBJECT: Calculation of 46% Being Served by Healthy Start</p>	<p>(FAHSC) asking for information on the methodology used by the department to calculate that 46% of the need is being met by Healthy Start funding. This memo provides that methodology.</p>
<p>February 7, 2006</p> <p>SUBJECT: Allowable Expenditures by Contract Funds</p>	<p>This interagency memorandum reviews allowable expenditures for each of the three contracts that the department has with Healthy Start Coalitions – the Base, Waiver and SOBRA contracts - and can provide guidance for coalitions when preparing annual allocation methodology plans.</p>