Update on Florida Medicaid Dental Performance

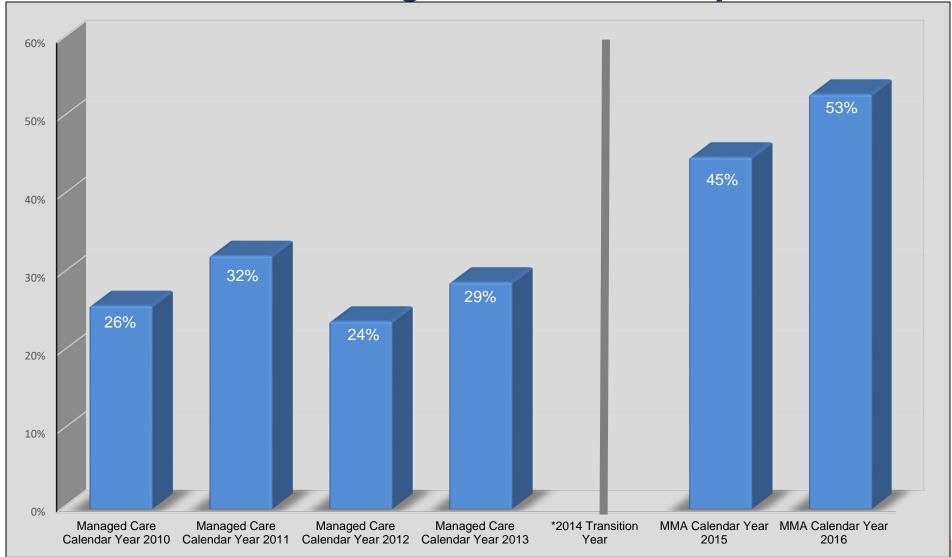
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Florida Medicaid Quality Scores Above the National Average Continue to Improve



*Note: Calendar Year 2014 was a transition year between Florida's prior managed care delivery system and the SMMC program implementation. Scores were high, but were based on a small number of recipients who had remained in the same health plan during the entire transition year. For Calendar Year 2014, 55% of measures were better than the National Average.

Two Key Dental Performance Measures

• The Agency uses two key measures to determine how the Statewide Medicaid Managed Care program is performing in the provision of dental services to children.

Annual Dental Visit

Preventive Dental Services



Medicaid Program Progress on Provision of Dental Services

- Health plans required to perform Performance Improvement Project to improve children's receipt of preventive dental services.
- Oral health social media campaign with community stakeholders to raise awareness of dental benefit and their importance.
- Consumer-friendly web page about benefits and how to find a provider.
- Participated in intensive technical assistance from federal CMS with other competitively selected states.

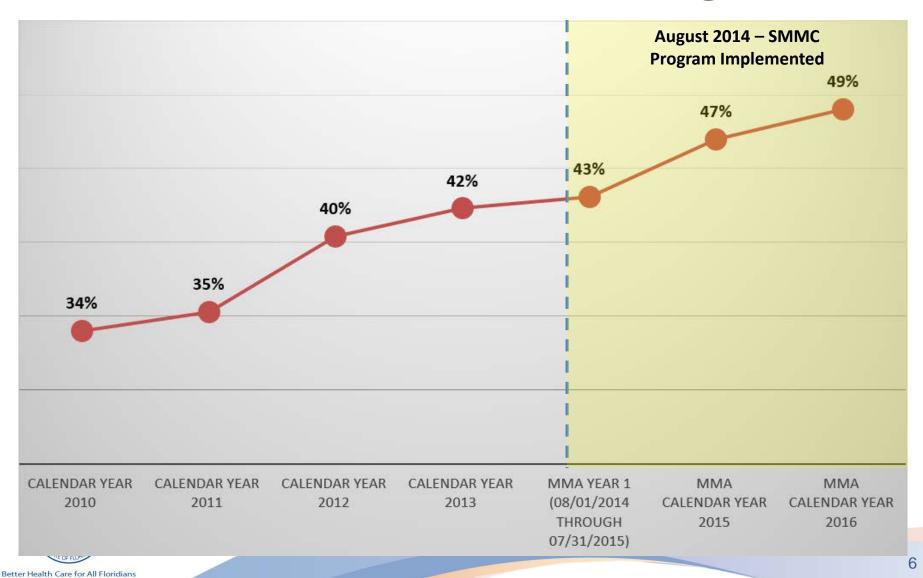


Measure: HEDIS Annual Dental Visit

- HEDIS: Healthcare Effectiveness Data and Information Set
 - Standardized set of performance measures.
 - Used by over 90% of health plans in the U.S.
 - Detailed technical specifications ensure that measures are calculated consistently.
 - Calculated by a certified auditor.
 - Allows "apples-to-apples" comparison of health plans.
- The key dental measure is "Annual Dental Visit":
 - Percent of children 2-20 years of age who had at least one dental visit with a dental practitioner during the year.



HEDIS Annual Dental Visit: Major Gains Under Statewide Medicaid Managed Care



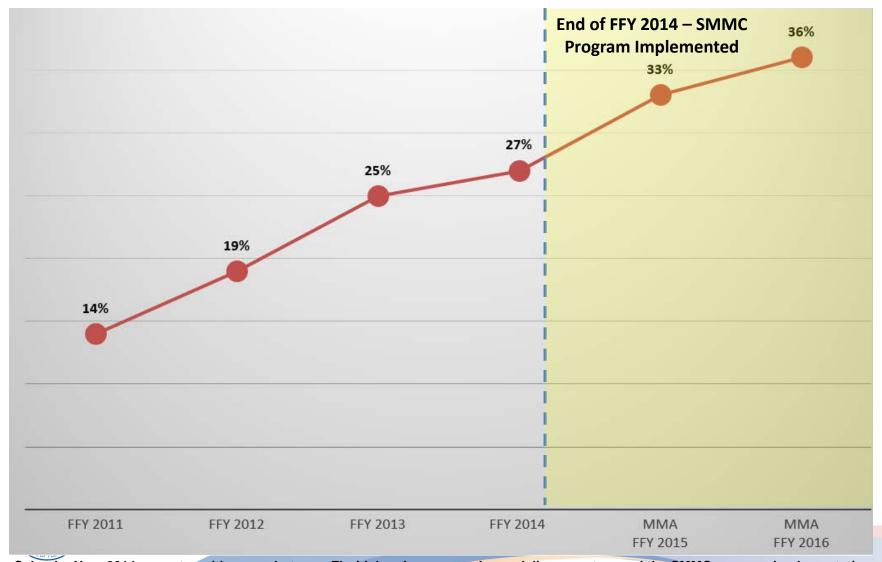
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Measure: Child Core Set Preventive Dental Services

- The Child Core Set is a range of 27 children's health care quality measures identified by the U.S. Department of Health & Human Services.
- States voluntarily report on the measures to federal CMS which compiles and reports the data annually.
- The key dental measure is "Preventive Dental Services" the percent of children ages 1 to 20 who:
 - Are enrolled in Medicaid or CHIP Medicaid Expansion programs for at least 90 continuous days.
 - Are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services, and
 - Received at least one preventive dental service during the year.

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Child Core Set Preventive Dental Services: Major Gains Under Statewide Medicaid Managed Care



Statewide Prepaid Dental Health Program

- In 2016, the Legislature directed the Agency to implement a statewide Medicaid prepaid dental program for children and adults.
- The prepaid dental program will be separate from the MMA integrated comprehensive care program.
- Implementation by March 1, 2019.
- Contracts must be competitively bid.

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 The new, statewide, dental-only providers must be prepaid limited health services organization or HMOs.

Statewide Prepaid Dental Health Program: Procurement

- October 16, 2017: Agency released an Invitation to Negotiate (ITN) to procure the Statewide Prepaid Dental Health Program.
- We are in the statutory blackout period where respondents to the ITN or individuals acting on their behalf cannot contact the Agency or any state official about the ITN.
 - Violation of this law could disqualify the bidder.



Statewide Prepaid Dental Health Program: Procurement Structure and Anticipated Dates

One statewide ITN.

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• The Agency intends to select up to four Prepaid Dental Health Plans to provide services statewide.

Activity	Date
ITN Posted	October 16
Vendor Responses Due	January 12, 2018
Posting of Notice of Intent to Award	April 16, 2018
Transition to New Dental Plans	Late 2018/Early 2019

Statewide Prepaid Dental Health Program: Key Areas of Focus

- Promote Agency Goals:
 - Reduce potentially preventable hospital admissions, readmissions, and emergency department use and use of unnecessary ancillary services.
 - Improve birth outcomes.
- Continued progress on improving dental performance measures.
- Continued coordination of services across service types, including those provided by MMA plans and Prepaid Dental Health Plans.



Questions?

