

Discussion Points for Comments on Eliminating Retroactive Medicaid Eligibility (RME) in Florida

1. History

The 2018-2019 Florida budget as signed by Governor Scott requires AHCA to seek federal approval to allow the state to implement the elimination of RME for non-pregnant adults effective July 1, 2018.

AHCA is in the midst of a 30-day public comment period prior to its submission of a waiver amendment to CMS. Comments to AHCA should be directed at why it should not submit the amendment.

The Medicaid Act requires states to provide 3 months of retroactive Medicaid.

Section 1115 allows the Secretary of HHS to waive mandatory provisions of Medicaid (including RME) for experimental, pilot or demonstration projects that are likely to promote the objectives of the Medicaid Act.

2. Purpose of RME

Retroactive Medicaid Eligibility (RME) is only available to applicants who are otherwise eligible for Medicaid but did not file an application for benefits during the month that medical services were rendered. Congress intended the three-month retroactive period to protect those eligible for Medicaid but who haven't applied because they didn't know about the eligibility requirements, or because of the sudden nature of the illness prevented their applying. RME also encourages providers to furnish necessary medical care and ensures financial protections to otherwise eligible Floridians.

3. Elimination of RME is inconsistent with the objectives of Medicaid

Eliminating RME decreases the state's ability to furnish medical assistance to vulnerable populations. When frail seniors end up in nursing homes due to medical emergencies, families often do not have all the needed information or authority to file an application for Medicaid during the month of the crisis. No additional safeguards are being offered to offset the loss of benefits for otherwise eligible Floridians.

4. Florida's Medicaid population is especially vulnerable to the loss of RME

There are many senior Floridians with few if any family close enough to help when a medical crisis occurs. It can be extremely difficult for families to gather needed information in a matter of days or weeks. RME has been an important safeguard to allow families the time needed to gather information and make a timely application, and to give medical providers peace of mind that services will be paid for. Because of Florida's unique senior population, the loss of RME will be felt especially hard on the very people the Medicaid Act was intended to protect.

5. Elimination of RME is inconsistent with the 1115 Waiver Process

Section 1115 waivers are to be used by states for experimental projects designed to test out new ideas and ways of dealing with the problems of public benefit recipients. The proposed amendment is not an experimental project. Not paying for necessary medical care for an otherwise eligible individual of a mandatory coverage group solely because an application for benefits was not filed the first month services were provided is inconsistent with the Medicaid Act. The effect of the amendment is to eliminate medical assistance and create gaps in coverage, precisely what Medicaid is designed to prevent.

6. Elimination of RME will increase agency inefficiency and create inequality among beneficiaries

Due to the proposed elimination of RME, nursing facilities are already being encouraged to start the Medicaid application process early in the resident's stay, and to file applications even if all information isn't currently available. With RME, only those residents who are determined to need long term care and can't return to the community file applications for benefits. Without RME, applications will be filed earlier in the resident's stay, and applications for those that improve and return to the community will be abandoned.

Additionally, without RME, an applicant's time to apply for benefits is substantially reduced. For example, a 50 year who suffers a major stroke on June 2 has 28 days to file for Medicaid. If that same person had a stroke on June 21, he or she has only 9 days, or 1/3 of the time to gather information and file an application. There is no valid reason to provide some Floridians longer periods of time to apply for benefits than others solely based on when in a month a disabling condition occurs. RME is an important safeguard that provides the needed time to allow otherwise eligible applicants to apply for the benefits to which they are entitled.

The 30-day public comment period begins **March 21, 2018** through **April 19, 2018**.

Written comments on the waiver amendment can be submitted via mail or email with the subject "1115 MMA Amendment" during the public comment period.

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