State Experiences and Responses
The ACA in Florida

Michael Ruppal
Executive Director
The AIDS Institute

October 2, 2014
Florida – Starting Point (2013)

• Conservative Republican led state House, Senate, and Administration
• Anti-”Obama Care” policies and decisions
  • Refuse to expand Medicaid
  • Refuse to set up State Insurance Marketplace automatically defaults to the Federal Marketplace
  • State offices, including Department of Health, prohibited from having market place navigators
  • No state employees, programs, or grants can participate in any ACA activities

The AIDS Institute
Florida – Starting Point (2013)

- Florida Department of Health: ADAP and AIDS Insurance Continuation Programs were restricted from “wrapping around” marketplace plans.
  - This also translated to no planning for a wrap around system.
- Clients encouraged NOT to apply for Marketplace plans IF they needed financial assistance.
- Legislators restricted the Office of Insurance Regulation (OIR) from regulating health plans that are subject to ACA requirements (i.e., non-grandfathered plans) until 2016
Florida – 2014

• Florida legislative session:
  • Advocates arguing benefits of Medicaid coverage expansion and the need for ACA education.
  • Expansion bills SB 710/HB 869 filed - neither were heard in a single committee, which meant the “discussion” ended before it even started.
  • The huge budget surplus pre-empted the threat of common cuts to health programs and services.
  • Election year: “Nothing will get done”
Florida – 2014

- Florida legislative session:
  - Health insurance issues were ignored.
  - Dozens of provisions remain in the State Insurance Code that conflict with the ACA
  - Weaker old state laws were made obsolete by the stronger ACA, assuming insurers are complying with all of them.
- Florida DOH gets approval to move small group of ADAP clients to Marketplace plans.
- Florida Expands Medicaid Managed Care to the entire state.
Florida Medicaid Managed Care

• Statewide Medicaid Managed Care (SMMC) is different from Federal Medicaid Expansion under Affordable Care Act (ACA).
• Most PLWH currently on Medicaid, or PAC waiver will need to choose an approved managed care plan.
• Enrollment in an HIV/AIDS specialty plan **is not mandatory**, but the time to choose was limited.
• 11 Regions to roll out
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 Managed Care

Roll out dates

May 2014 - Regions 2, 3, 4
June 2014 – Regions 5, 6, 8
July 2014 – Regions 10, 11
August 2014 – Regions 1, 7, 9
ACA + RW “Wrap Around”

- Florida DOH have identified clients to move or assist within the 2014 enrollment period.
- Florida is not the only state with complex wrap around and coverage completion issues.
- Estimated 7,700 ADAP clients are eligible for ACA
- ADAP and AICP programs are preparing to support specific Marketplace plans for the 11/15/14 enrollment period.
- Challenges with identifying gaps, cost, benefits comparisons and regional differences.
The AIDS Institute filed complaint with HHS Office for Civil Rights on May 29, 2014 against 4 plans

With National Health Law Program (NHeLP)
- NHeLP “protects and advances the health rights of low-income and underserved individuals.”

Asking OCR and Florida OIR to investigate and take corrective action
Discrimination Complaint - OIR

- OIR prevented from regulating health plans that are subject to ACA requirements (i.e., non-grandfathered plans) until 2016
- OIR cannot deny or approve any proposed rates for non-grandfathered plans
- Insurers are still required to file proposed rates with OIR
- OIR is not currently regulating rates YET federal HHS says Florida still has an “effective rate review”
- Insurers are still required to file all proposed rates with OIR and some with HHS
Next Steps

- Florida’s OIR hopefully files investigations of discriminatory plans.
- TAI is working with DOH, legislators, and other advocacy groups to educate clients and providers before the next enrollment period begins in Nov.
- Trying to get Insurance Commissioner to establish a review process of Florida’s Essential Health Benefits (EHB) package.
- Analysis of the 2015 plans as they are released
Upcoming Legislative Session

**HIV and HCV Testing**, expanding education and removing barriers to increased use of testing.

**Syringe Exchange Program**, support the creation of a pilot program in Miami/Dade.

**Increased State Funding for HIV & Hepatitis Programs**

**Medicaid Expansion** – ACA and Health Reform

**Medicaid Managed Care Expansion** – Analysis and gaps
Upcoming Legislative Session

Patient Protections for Insurance – Federal Marketplace and discriminatory practices and pricing.

Increased Access to Treatment – Removing barriers to treatment including “triage” treatment for Medicaid and Medicare patients.

Pharmacy Choice – Preventing “mail order only” programs and plans from eliminating choice for patients access to medications by accessing walk in pharmacies.

ADAP/AICP – Providing education about changes to the program and who will be impacted.

The AIDS Institute
THANK YOU

Michael Ruppal, MRuppal@theaidsinstitute.org