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# FLORIDA MEDICAID

*A Division of the Agency for Health Care Administration*

## Florida Medicaid Health Care Alert

July 18, 2017

Provider Type(s): ALL

### Project AIDS Care Upcoming Changes - Effective January 1, 2018

The purpose of this alert is to advise you of upcoming changes to the Project AIDS Care (PAC) Waiver that will take place on January 1, 2018. These changes will not reduce or affect recipients' access to Medicaid services.

The 2017 Legislature amended the law to allow individuals who are diagnosed with Acquired Immune Deficiency Syndrome (AIDS) to obtain and maintain Medicaid coverage without the need for enrollment in the PAC Waiver. In order to qualify, an individual must meet the criteria currently used for the PAC Waiver:

- Have an income at or below 222% of the federal poverty level (or 300% of the federal benefit rate), and
- Meet hospital level of care, as determined by the Department of Elder Affairs, Comprehensive Assessment and Review for Long-term Care Services (CARES)

Most recipients enrolled in the PAC Waiver currently receive their medical, prescribed drug, and acute care services from a Statewide Medicaid Managed Care - Managed Medical Assistance (MMA) health plan. There will be no change in how these individuals receive MMA services unless they choose to change plans. With the advances that have been made over the last decade in the treatment of HIV and AIDS, the majority of the people on the PAC Waiver do not use or need the home and community-based services offered through the waiver. As such, the recipients in the PAC Waiver who are only receiving case management services and do not need home and community-based services in order to safely remain in the community, will be dis-enrolled from the PAC Waiver, but will keep their Medicaid coverage. This means there will be no loss in services – they can continue to have access to their medications, see their doctors, and will receive case management from their current MMA plan.

The recipients in the PAC Waiver who have been receiving more than case management services through the PAC Waiver and who continue to need home and community-based services in order to live safely in the community will transition into the Statewide Medicaid Managed Care Long-term Care (LTC) program for their home and community-based service needs. These recipients will continue to maintain Medicaid eligibility and have access to their prescribed drugs and doctors through their current MMA plan. They will also continue to receive home and community-based services, which will be provided through an LTC plan. The Agency will provide these individuals with an opportunity to choose an LTC plan that can best meet their needs. The LTC program offers a more robust benefit package than the PAC Waiver, including enhanced case management standards and expanded benefits. The LTC program also

offers recipients an opportunity to receive care/services through a program with enhanced quality outcome measures.

Once this transition is complete in January 2018, the PAC Waiver will go away. After that, individuals diagnosed with AIDS who were not part of this transition, but who are seeking Medicaid coverage, can apply for Medicaid eligibility by contacting the Department of Children and Families ACCESS program, visit <https://dcf-access.dcf.state.fl.us/access/index.do> for additional information. They will be evaluated by DCF to see if they qualify for Medicaid under the revised eligibility criteria described above or through the LTC program.

The Agency will use a number of different methods to maintain open lines of communication throughout the transition. We have already begun to reach out to recipients by telephone to ensure they understand what this transition means for them. We are also talking with PAC case management agencies and other stakeholder groups. The Agency will be hosting monthly web-based meetings for interested stakeholders (PAC providers, recipients, etc.) to share information on the transition efforts. These webinars are scheduled for:

Date	Time
July 26, 2017	10:00 – 10:50 am, ET
August 15, 2017	2:30 - 3:30 pm, ET
September 19, 2017	2:30 - 3:30 pm, ET
October 17, 2017	2:30 - 3:30 pm, ET
November 14, 2017	2:30 - 3:30 pm, ET
December 12, 2017	2:30 - 3:30 pm, ET

Webinar login information and additional information related to this change will be available on our website, at:

[http://www.ahca.myflorida.com/Medicaid/Policy and Quality/Policy/federal authorities/federal waivers/index.shtml](http://www.ahca.myflorida.com/Medicaid/Policy%20and%20Quality/Policy/federal%20authorities/federal%20waivers/index.shtml).

Current waiver providers, including case management agencies, are encouraged to contact the health plans to engage in discussions about joining the plan's provider networks. Plan information is on the Agency's Website, at: [http://www.ahca.myflorida.com/Medicaid/statewide\\_mc/providers.shtml](http://www.ahca.myflorida.com/Medicaid/statewide_mc/providers.shtml).

*The Agency for Health Care Administration is committed to better health care for all Floridians. The Agency administers Florida's Medicaid program, licenses and regulates more than 45,000 health care facilities and 37 health maintenance organizations, and publishes health care data and statistics at [www.FloridaHealthFinder.gov](http://www.FloridaHealthFinder.gov). Additional information about Agency initiatives is available via Facebook (AHCAFlorida), Twitter (@AHCA\_FL) and YouTube (AHCAFlorida).*

QUESTIONS? [FLMedicaidManagedCare@ahca.myflorida.com](mailto:FLMedicaidManagedCare@ahca.myflorida.com)

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