

# POLICY AND PROCEDURE

<b>POLICY NAME:</b> Swimming Lessons Expanded Benefit	<b>POLICY ID:</b> FL.UM.89.00
<b>BUSINESS UNIT:</b> Sunshine Health State Health Plan	<b>FUNCTIONAL AREA:</b> Utilization Management, Case Management, Customer Service, Strategic Initiatives
<b>EFFECTIVE DATE:</b> 10/1/2021	<b>PRODUCT(S):</b> Managed Medical Assistance (MMA), Children's Medical Services (CMS), Serious Mental Illness (SMI), Child Welfare (CW)
<b>REVIEWED/REVISED:</b> 04/2022, 4/2023	
<b>REGULATOR MOST RECENT APPROVAL DATE(S):</b> 04/2022	

**POLICY STATEMENT:** Sunshine will provide Managed Medical Assistance (MMA), Serious Mental Illness (SMI), and Children's Medical Services Health Plan (CMS Health Plan), and Child Welfare (CW) members with swimming lessons through a partnership with the YMCA for members under 21.

Annual benefits amounts:

- \$200

**PURPOSE:** To establish criteria to review requests for Swimming Lessons as an expanded benefit for Sunshine Health's Managed Medical Assistance (MMA), Serious Mental Illness (SMI), and Children's Medical Services Health Plan (CMS Health Plan), and Child Welfare (CW) products. The goal is to provide members with resources for swimming lessons.

**SCOPE:** Sunshine Health Customer Service for Managed Medical Assistance (MMA), Serious Mental Illness (SMI), and Children's Medical Services Health Plan (CMS Health Plan), and Child Welfare (CW) products.

This policy applies to all directors, officers, and employees of Centene Corporation, its affiliates, health plans, and subsidiary companies (collectively, the "Company").

## DEFINITIONS:

### POLICY:

It is the policy of Sunshine Health to cover Agency for Health Care Administration (AHCA) and/or Florida Department of Health approved expanded benefits when medically necessary, appropriate, and consistent with good medical practice, and after review on an individual basis, for the specific indications outlined in this policy.

### Eligibility and Criteria:

Must be an active MMA, SMI, CMS Health Plan, or Child Welfare member under the age of 21.

### YMCA Swimming Lessons Program

- Program provides swim lessons to the following ages:
  - Parent/Child 6mos-3yrs, (The parent/child classes require a parent to be in the water with their child)
  - Preschool 3-5yrs,
  - School Age 6-12yrs, and
  - Teen/Adult 13+ yrs.
- Swim lessons run in back-to-back sessions beginning early February thru the end of November each year. A limited number of lessons are available at select locations during the months of December and January.
- One session of swim lessons equals six, 40-minute classes.
- Sessions are offered one time a week for 6 weeks or two times a week for 3 weeks. During the summer months, the YMCA also offers lessons three times a week for 2 weeks.
- The YMCA Swim Lesson program is a progressive program. Participants will begin at a specific stage based on their current ability. As they complete the skills in that stage, they will progress to the next stage. With each stage, the skills become more challenging, and the distances required increase. Program starts at stage 1 and progresses to stage 6.
- Ratios (instructor per child):
  - Parent/Child 6mos-3yrs – 1:12

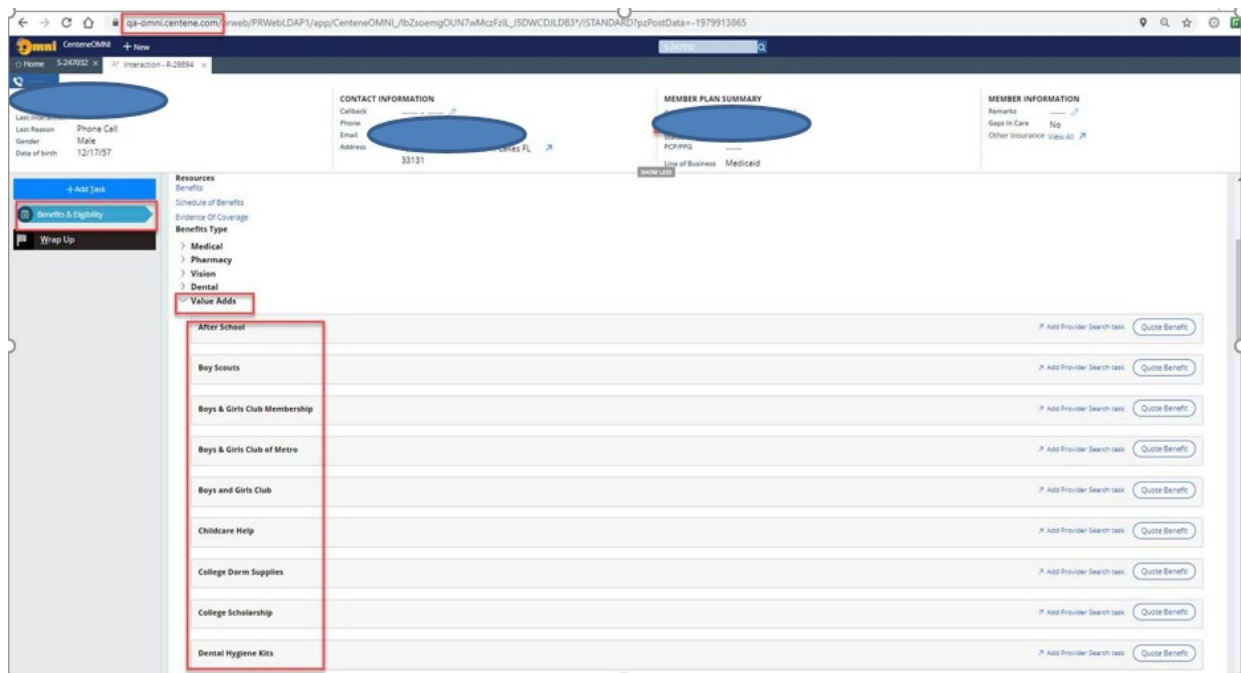
- Preschool 3-5yrs – 1:5
- School Age 6-12yrs – 1:7
- Teen/Adult 13+yrs – 1:8
- Days and times will vary by location.

**PROCEDURE:**

**Customer Service – Self-Referral Process:**

- Customer Service explains the swimming benefit available through the YMCA
- Customer Service confirms that the member is an active MMA, SMI, CMS, or CW Health Plan member
- Customer Service selects Omni Intent: Benefit & Eligibility
- Next Customer Service selects subcategory drop down list value added benefits; select Swimming Lessons
- Please advise the caller to allow 10-14 business days to receive the letter/voucher
- The caller should be advised that once the voucher is received, they should provide their YMCA Swimming Lesson Voucher to the YMCA location of their choice. The voucher will allow the YMCA to track the number of members who join and submit invoices for payment if needed.

Note: The Subcategory will be used to generate a report that can be used to create a file that is sent to the fulfillment vendor each week for processing. The fulfillment vendor will use the file to send a cover letter and voucher for mailing.



**Case Manager – Member Self-Referral Process:**

*Member may call customer service directly or the member may describe the request to their case manager.*

- If the member/parent/guardian/responsible party contacts their case manager, the case manager will transfer the member/parent/guardian/responsible party to the appropriate Customer Service Center to request their voucher

**Alternative Location Process:**

- If a member/parent/guardian/responsible party wants to go to a vendor other than the YMCA, the following must apply:
  - YMCA is not available in member's area
  - YMCA swim lesson slots are full
- The member/parent/guardian/responsible party must utilize the reimbursement process detailed below.

**Member Reimbursement Process (up to 60 calendar days):**

- If a member/parent/guardian/responsible party states that they already paid an outside vendor for swimming lessons, they can submit proof of payment along with a letter requesting to be reimbursed. They must submit a receipt that clearly shows the member/parent/guardian/responsible party already paid for the lessons.
- The member/parent/guardian/responsible party can submit their information to the email addresses listed below. Please provide members the correct email based on the member line of business (LOB).
  - [DirectMemberReimbursement\\_CMS@Sunshinehealth.com](mailto:DirectMemberReimbursement_CMS@Sunshinehealth.com)
  - [DirectMemberReimbursement\\_SMI@Sunshinehealth.com](mailto:DirectMemberReimbursement_SMI@Sunshinehealth.com)
  - [DirectMemberReimbursement\\_MMA@Sunshinehealth.com](mailto:DirectMemberReimbursement_MMA@Sunshinehealth.com)
  - [DirectMemberReimbursement\\_CW@Sunshinehealth.com](mailto:DirectMemberReimbursement_CW@Sunshinehealth.com)

**Process for Submission to Finance:**

Payments for approved direct reimbursement will be processed by manual check requests using the form included below. The request for the manual check is generated by a designated Sunshine Health staff member and submitted to the Finance Department within 7 business days of the approval.

- If the requesting party is the member/parent/guardian/responsible party, a W-9 form is necessary to process the payment. The check for payment will be issued as appropriate.
- Supporting documentation such as the request from the member/parent/guardian/responsible party, receipts, etc. should be included with the request form and W-9.
- The payment will be sent to the requesting party through standard U.S. mail within 45 calendar days of the check request submission.

**ATTACHMENTS:**

Manual Check Request Sunshine document



Manual Check  
Request Sunshine.doc

**ROLES & RESPONSIBILITIES:** Utilization Management, Case Management, Customer Service, Strategic Initiatives

**REGULATORY REPORTING REQUIREMENTS:** N/A

**REVISION LOG**

REVISION TYPE	REVISION SUMMARY	DATE APPROVED & PUBLISHED
New Policy Document	Policy Created	04/12/2022
Policy Update	Added CW where missing, removed 1,000 limit	4/3/2023

**POLICY AND PROCEDURE APPROVAL**

The electronic approval retained in RSA Archer, the Company's P&P management software, is considered equivalent to a signature.

SVP Compliance \_\_\_\_\_

Senior Dir. Compliance \_\_\_\_\_