

POLICY AND PROCEDURE

POLICY NAME: Medically Fragile Children	POLICY ID: FL.UM.82.00
BUSINESS UNIT: Sunshine Health Plan	FUNCTIONAL AREA: Utilization Management, Case Management
EFFECTIVE DATE: 10/01/2021	PRODUCT(S): Managed Medical Assistance (MMA), Serious Mental Illness (SMI), Children's Medical Services (FL CMS) and Child Welfare (CW)
REVIEWED/REVISED DATE: 10/2020, 03/21, 8/21, 9/22	
REGULATOR MOST RECENT APPROVAL DATE(S): 10/01/2021	

POLICY STATEMENT: It is the policy of Sunshine Health to cover Agency for Health Care Administration (AHCA) approved expanded benefit 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.

PURPOSE: To establish medical necessity requirements for services and supplies for medically needy children. The goal is to provide Medically Fragile Children services when medically necessary, as a covered benefit and to define criteria and limitations established for the use of these services.

SCOPE: Sunshine Health Utilization Department for Managed Medical Assistance (MMA), Serious Mental Illness (SMI), Children's Medical Services (FL CMS) and Child Welfare (CW) product lines. This policy applies to all directors, officers, and employees of Centene Corporation, its affiliates, health plans, and subsidiary companies (collectively, the "Company").

DEFINITIONS: The Medicaid Model Waiver provides services to eligible individuals 20 years of age or younger who are medically complex/medically fragile or diagnosed with degenerative spinocerebellar disease. The waiver is designed to delay or prevent institutionalization and allow waiver recipients to maintain stable health while living at home in their community. Waiver services include:

- Assistive Technology and service evaluation
- Case Management provided by the Department of Health, Children's Medical Services (CMS)
- Environmental Accessibility Adaptations
- Nursing Home Transition
- Respite Care

Services are also offered to those transitioning from the nursing home to their primary home of residence.

Children with medical complexity (CMC) have medical fragility and intensive care needs that are not easily met by existing health care models. CMC may have a congenital or acquired multisystem disease, a severe neurologic condition with marked functional impairment, and/or technology dependence for activities of daily living. While these children are at risk of poor health and family outcomes, clinical initiatives and research efforts are devoted to improving care. In the absence of a published universal definition for CMC, a framework was created consisting of four domains. Each domain incorporates recommendations from a review of chronic disease in children and encompass the core of CMC.

1. **Needs.** Centers on a family-centered system of care that provides accessible health care services as well as information to families and empowers families in self-management. Includes family-identified health care service needs (e.g., medical care, specialized therapy, educational needs). Type, intensity, and consistency of these manifestations may change depending on medical, psychosocial, and community factors.
2. **Chronic condition(s).** Sufficient knowledge, understanding, and decision-making support across the entire continuum of care including both the community and tertiary care levels. Ongoing education or support for Providers in turn better serves Members. Typically, these Members have 1 or more chronic clinical condition(s), either diagnosed or unknown that are severe and/or associated with medical fragility (e.g., high morbidity, mortality rates). The condition (and/or its sequelae) should be potentially lifelong but some Members may improve. Diagnoses also included are those that are unknown but suspected to be a complex and chronic condition (e.g., a child born with multiple congenital anomalies but lacking a unifying diagnosis).
3. **Functional limitations.** Includes ensuring the availability of supports for the family and community, including medical technology for maximization of functioning within the key dimensions of body structure and function, performance of activities, and participation in communal life. A Member's limitations are typically severe and may require assistance from technology such as a tracheostomy tube, feeding tube, or a wheelchair.
4. **Health care use.** Involves a care-delivery system that prioritizes high-quality and efficient care through enhanced care coordination and clearly defined provider roles across different settings. Members can have

high utilization of health resources (e.g., frequent or prolonged hospitalization, multiple surgeries, continued involvement of several subspecialty services and providers).

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PROCEDURE:

To assist in determining the medical necessity of an expanded benefit, the clinical criteria established in this policy will be applied. A request for medical necessity review is consistent with Sunshine Health medical policies:

- FL.UM.02.01 - Medical Necessity Review
- FL.UM.02 – Use of Clinical Criteria
- Any decision to deny, reduce, suspend or terminate services must be made by a Sunshine Health Medical Director as outlined in the policy Clinical Decision Criteria and Application FL.UM.02
- Determinations and provider notifications will be made according to the expediency of the case as described in the Timeliness of UM Decisions FL.UM.05

Specific Clinical Information/Criteria

- I. Services and supplies for medically fragile children include DME items directly related to their care such as, but not limited to, pulse oximetry, diapers, wipes, trach/ostomy supplies and manual wheelchairs. It is the policy of Sunshine Health Plan that services and supplies for medically fragile children are **medically necessary** when all of the following apply:
 - A. Member is enrolled in a Florida Medicaid Sunshine Health Plan
 - B. Member is under the age of 21 years old
 - C. Member is enrolled in complex case management OR is deemed as medically fragile/medically complex.
 - D. * There is a signed plan of care or order for the requested services.

- II. It is the policy of Sunshine Health Plan that services and supplies for medically fragile children require **mandatory secondary review** if any of the following apply:
 - A. High cost DME items
 - B. Out of state services
 - C. Experimental/Investigational procedures and services
 - D. Any item on Therapy Advisor Referral Workflow Process that requires secondary review.

REFERENCES:

1. Model Waiver. Agency for Health Care Administration Web site. http://ahca.myflorida.com/Medicaid/hcbs_waivers/model.shtml. Accessed March 31, 2020.
2. Children's Multidisciplinary Assessment Team (CMAT). Florida Department of Health Web site. <http://www.floridahealth.gov/programs-and-services/childrens-health/cms-specialty-programs/cmat/index.html>. Accessed March 31, 2020.
3. Cohen E, Kuo DZ, Agrawal R, et al. Children With Medical Complexity: An Emerging Population for Clinical and Research Initiatives. *Pediatrics*. 2011;127(3):529-538. doi:10.1542/peds.2010-0910. Accessed February 19, 2018.
4. Medicaid home health services. Agency for Health Care Administration (Florida) Web site. http://ahca.myflorida.com/Medicaid/home_health/services.shtml. Published 2018. Accessed March 31, 2020.
5. Private Duty Nursing Services Coverage Policy, Agency for Health Care Administration (Florida) Web site. https://ahca.myflorida.com/medicaid/review/Specific/59G-4-261_Private_Duty_Nursing_Services_Coverage_Policy.pdf. Published November 2016. Accessed March 31, 2020.
6. EPSDT – A guide for states: Coverage in the Medicaid benefit for children and adolescents. Department of Health and Human Services. https://www.medicaid.gov/medicaid/benefits/downloads/epsdt_coverage_guide.pdf. Published June 2014. Accessed March 31, 2020.

FL.UM.05 Timeliness of UM Decisions policy and procedure
FL.UM.02 Use of Clinical Criteria
FL.UM.02.02 Clinical Decision Criteria and Application
FL.UM.02.01 Medical Necessity Review

ATTACHMENTS:

ROLES & RESPONSIBILITIES: UM, CM

REGULATORY REPORTING REQUIREMENTS: N/A

REVISION LOG

REVISION TYPE	REVISION SUMMARY	DATE APPROVED & PUBLISHED
New Policy Document	Policy Created - Integration Update Transitioned policy from Wellcare HS-299 to Sunshine UM policy template design. Assigned new policy number FL.UM.82.00	10/01/2020
Update	Changed to new Sunshine policy format.	03/01/2021
AHCA Review	Updated according to AHCA Review	08/01/2021
Home Health Information Removed	Updated due to PDN Policy Created	09/06/2022

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 _____