Florida

2021 Healthcare Affordability Policy Checklist

KEY

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= implemented by state



the state has implemented policies, but could improve



= not implemented by state

Polling data repeatedly shows that healthcare affordability is the number one issue that state residents, on both sides of the political aisle, want their policymakers to work on. This checklist identifies areas where Florida is doing well and areas where it can improve.

1. CURB EXCESS HEALTHCARE PRICES:

• Implement free, public-facing healthcare price transparency that reflects negotiated rates and features treatment- and provider-specific prices.



• Create an all-payer or multi-payer claims database to analyze healthcare price inflation, price variation and utilization.



• Create a permanently convened health spending oversight entity.



• Create all-payer healthcare spending and quality benchmarks for the state.

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2. REDUCE LOW-VALUE CARE:

• Require validated patient-safety reporting for hospitals.1



Universally implement antibiotic stewardship programs using CDC's 7 Core Elements.²



• Analyze claims and EHR data to understand how much is spent on low- and no-value services.



3. Extend Coverage to All Residents:

Expand Medicaid to cover adults up to 138% of the federal poverty level.^{3,4}



• Provide high-quality, affordable coverage options for people whose incomes are too high to qualify for Medicaid, e.g., Basic Health Plan, reinsurance or augmented premium subsidies.



• Provide options for immigrants that don't qualify for the coverage above.⁵



Conduct strong rate review of fully insured, private market options.⁶

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4. Make Out-of-Pocket Costs Affordable:

• Protect patients from inadvertent surprise out-of-network medical bills.



• Limit the availability of short-term, limited-duration health plans.



• Waive or reduce cost-sharing for high-value services.



• Require insurers in a state-based exchange to offer evidence-based standard plan designs.

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NOTES

- Central line-associated bloodstream infections (CLABSI) and catheter-associated urinary tract infections (CAUTI)
 are two common forms of hospital-acquired infections. In FL, reporting of CLABSI and CAUTI is voluntary,
 but validation is required if there is a report. For more information, see: https://www.cdc.gov/hai/data/portal/
 progress-report.html#Data_tables.
- 2. 96% of FL hospitals have adopted antibiotic stewardship. For more information, see: https://www.cdc.gov/antibiotic-use/stewardship-report/current.html.
- An effort to put Medicaid expansion on the 2020 ballot was postponed by its organizing committee until 2022. FL
 legislators introduced five bills focused on Medicaid expansion during the 2021 legislative session; however, none
 passed.
- 4. In 2021, FL extended postpartum Medicaid coverage to a full year for women with incomes at or below 185% of FPL.
- 5. FL offers Medicaid coverage to lawfully residing immigrant children without a 5-year wait. FL does not offer coverage options for legally residing immigrant pregnant people or undocumented children/pregnant people/adults.
- 6. FL has effective rate review as classified by CMS but does not incorporate affordability criteria into rate review.











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