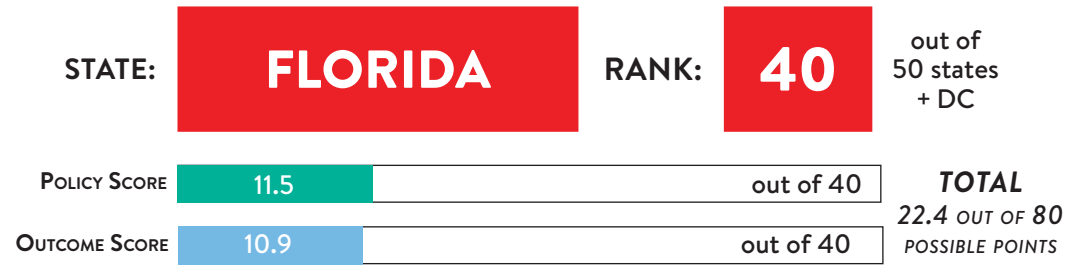
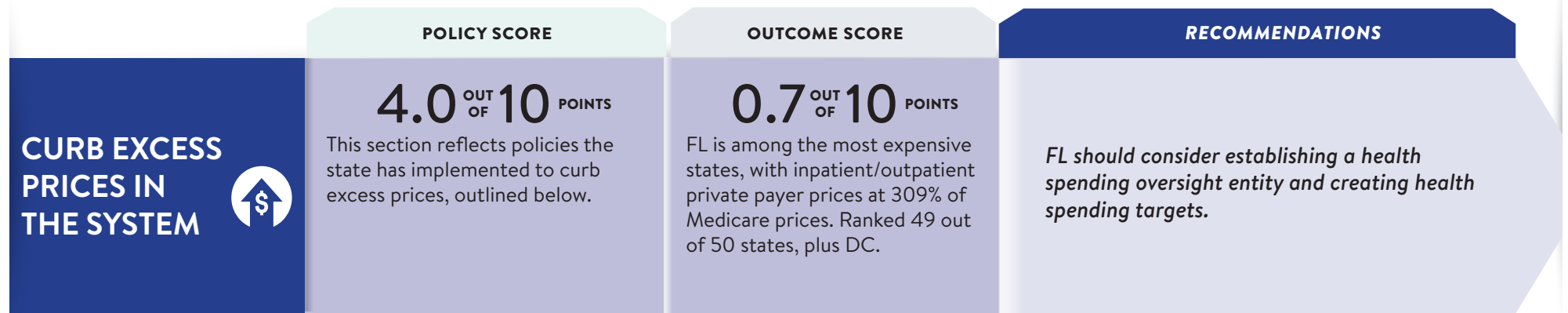


2022 Healthcare Affordability State Policy Scorecard

This Scorecard looks at both policies and related outcomes across four affordability-related areas that were implemented as of Dec. 31, 2021. Lawmakers, regulators, consumer advocates and the public can use the Scorecards to understand how their state performs when it comes to healthcare affordability policies and outcomes relative to other states and identify opportunities to improve.



Setting the Stage: According to the Healthcare Value Hub's 2019 CHES survey, 55% of Florida adults experienced healthcare affordability burdens. According to the Personal Consumption Expenditure, healthcare spending per person in Florida grew 33% between 2013 and 2021, totaling \$7,676 in 2021. Please note some of the outcome measures in this Scorecard include data from 2020, which may have been impacted by the COVID-19 pandemic.



THIS CHECKLIST IDENTIFIES THE POLICIES THAT WERE EVALUATED FOR THIS SECTION.

	Create an all-payer or multi-payer claims database to analyze healthcare price inflation, price variation and utilization Florida has an all-payer claims database (APCD) in partnership with the Health Care Cost Institute, covering 9 commercial payers. Service price estimates are available to the public through the Florida Health Price Finder tool. In 2021, HCCI used the data to identify high variation in commercial prices for services, as well as high price relative to Medicare rates. See YouTube Recording "2021-608 Leveraging APCDs for Cost Insight" from NAHDO for more details.
	Create a permanently convened health spending oversight entity Florida did not have a permanently convened health spending oversight entity as of Dec. 31, 2021.
	Create all-payer healthcare spending and quality benchmarks for the state Florida did not have active health spending benchmarks as of Dec. 31, 2021.
	Implement free, public-facing healthcare price transparency that reflects negotiated rates and features treatment- and provider-specific prices Florida's tool met the criteria to receive credit as of Dec. 31, 2021. To receive credit, a state's tool has to be public-facing, searchable by specific procedure and hospital and show the negotiated rate paid by insurance plans/patients (not chargemaster rate).

KEY: = implemented by state = not implemented by state = the state has implemented policies, but could be enhanced

Full report and additional details at www.HealthcareValueHub.org/Affordability-Scorecard/Florida

Healthcare Affordability State Policy Scorecard

STATE:

FLORIDA

RANK:

40

out of 50 states + DC

POLICY SCORE

1.9 OUT OF **10** POINTS

FL has not yet measured the extent of low-value care being provided. They require some forms of patient safety reporting. 96% of hospitals have adopted antibiotic stewardship.

OUTCOME SCORE

3.6 OUT OF **10** POINTS

18% of Florida residents have received at least one low-value care service, placing them in the middle range of states. Ranked 27 out of 50 states, plus DC.

RECOMMENDATIONS

FL should consider using claims and EHR data to identify unnecessary care and enact a multi-stakeholder effort to reduce it.

REDUCE LOW-VALUE CARE



THIS CHECKLIST IDENTIFIES THE POLICIES THAT WERE EVALUATED FOR THIS SECTION.

	Analyze claims and electronic health records data to understand how much is spent on low- and no-value services
	Florida did not measure the provision of low-value care as of Dec. 31, 2021.
	Require validated patient-safety reporting for hospitals
	Central line-associated bloodstream infections (CLABSI) and catheter-associated urinary tract infections (CAUTI) are two common forms of hospital-acquired infections. In Florida, reporting of CLABSI/CAUTI is voluntary, but validation is required if there is a report.
	Universally implement antibiotic stewardship programs using CDC's 7 Core Elements
	Improper use of antibiotics is another type of low-value care. Antibiotic stewardship is the effort to measure and improve how antibiotics are prescribed by clinicians and used by patients, and states were scored on what share of their hospitals follow the CDC's stewardship program. 96% of Florida hospitals have adopted antibiotic stewardship. States with 90% adoption or more get the most credit.

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STATE:

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40

out of 50 states + DC

POLICY SCORE

1.6 OUT OF **10** POINTS

Childless adults are not eligible for FL Medicaid, while parents are only eligible if their household incomes are less than 30% of FPL. Only some immigrants can access state coverage options (see below).

OUTCOME SCORE

3.2 OUT OF **10** POINTS

FL is among the states with the most uninsured people—13% of FL residents are uninsured. Ranked 48 out of 50 states, plus DC.

RECOMMENDATIONS

FL should consider expanding Medicaid to all low-income residents and consider options for residents earning too much to qualify for Medicaid, like a Basic Health plan, premium subsidies, Medicaid buy-in and a Public Option. Consider offering coverage options for legally residing immigrant pregnant people; undocumented children, pregnant people, adults. Also consider adding affordability criteria to rate review.

EXTEND COVERAGE TO ALL RESIDENTS



THIS CHECKLIST IDENTIFIES THE POLICIES THAT WERE EVALUATED FOR THIS SECTION.



Expand Medicaid to cover adults up to 138% of the federal poverty level

Florida has not expanded Medicaid—parents are eligible up to 30% FPL and childless adults are not eligible. An effort to put Medicaid expansion on the 2020 ballot was postponed by its organizing committee until 2022. Florida legislators introduced five bills focused on Medicaid expansion during the 2021 legislative session; however, none passed. In 2021, Florida extended postpartum Medicaid coverage to a full year for women with incomes at or below 185% of FPL.



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

Florida did not offer any additional coverage options for residents earning too much to qualify for Medicaid as of Dec. 31, 2021.



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

Florida offers Medicaid coverage to lawfully residing immigrant children without a 5-year wait but offers no coverage options for legally residing pregnant women without a 5-year wait or for undocumented immigrants.



Conduct strong rate review of fully insured, private market options

Florida has effective rate review as classified by CMS but does not incorporate affordability criteria into rate review.

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Healthcare Affordability State Policy Scorecard

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FLORIDA

RANK:

40

out of 50 states + DC

POLICY SCORE

4.0 OUT OF **10** POINTS

FL has comprehensive protections against surprise medical bills and No Surprises Act loopholes.

OUTCOME SCORE

3.4 OUT OF **10** POINTS

FL ranked 38 out of 50 states, plus DC on affordability burdens—25% of adults faced an affordability burden: not getting needed care due to cost (7%), delaying care due to cost (9%), changing medication due to cost (9%), problems paying medical bills (14%) or being uninsured due to cost (75% of uninsured population).

RECOMMENDATIONS

FL should consider a suite of measures to ease consumer burdens, such as protections against short-term, limited-duration health plans and waiving or reducing cost-sharing for high-value services. If FL wants to pursue standard plan design, they can establish a state-based exchange.

MAKE OUT-OF-POCKET COSTS AFFORDABLE



THIS CHECKLIST IDENTIFIES THE POLICIES THAT WERE EVALUATED FOR THIS SECTION.



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

Florida has no protections against short-term, limited duration health plans (STLDs) beyond federal regulations. Some people choose STLD health plans for their lower monthly premiums compared to ACA-compliant plans. However, they offer poor coverage, can discriminate against people with pre-existing conditions and pose financial risks for consumers. States received credit depending on how much they limit these plans.



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

Florida has comprehensive protections against surprise medical bills (SMBs), plus additional protections for ground ambulance bills not covered by the federal No Surprises Act. 'Comprehensive' protections include emergency departments and hospitals, apply to all insurance types, hold consumers harmless/prevent balance billing and adopt adequate payment standard or dispute resolution process. States with only some of these policies have 'partial' protections. The federal No Surprises Act prohibits SMBs in most plans effective January 2022. However, it does not cover ground ambulances. States can still implement protections in this area—71% of ground ambulance rides in FL charged to commercial insurance plans had the potential for SMBs (2021).



Waive or reduce cost-sharing for high-value services

Florida did not require waiving or reducing cost-sharing for high-value services as of Dec. 31, 2021.



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

Florida has an exclusively federally facilitated marketplace and cannot implement standardized plans unless they establish a state-based exchange. Standard plan design makes cost-sharing the same across plans within metal tiers, making it easier for consumers to compare plans. They also help regulators and exchanges negotiate or set rates with insurance carriers, which may translate to lower prices for consumers.

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