

ANNUAL MONITORING REPORT
FLORIDA FAMILY PLANNING SECTION 1115 DEMONSTRATION

State: Florida

Demonstration Reporting Period: April 1, 2021 – June 30, 2021

Demonstration Year: 23

Approved start and end date of the Demonstration: March 8, 2019 – June 30, 2023

A. Executive Summary

1. The Family Planning Waiver provides family planning services to women ages 14 through 55 years with family income at or below 191 percent of the Federal Poverty Level who have lost or are losing Florida Medicaid State Plan eligibility and are not otherwise eligible for the Children’s Health Insurance Program or enrolled in health insurance coverage that provides family planning services. Eligibility is limited to a period of up to 24 months following the loss of Medicaid coverage, as authorized in section 409.904(5), Florida Statutes, to provide transitional coverage for those losing Medicaid eligibility.

The State is required to submit a combined fourth quarter (April 1, 2021 – June 30, 2021)/annual (July 1, 2020 – June 30, 2021) report summarizing the events that occurred during the reporting period or are anticipated to occur in the near future that affect health care delivery.

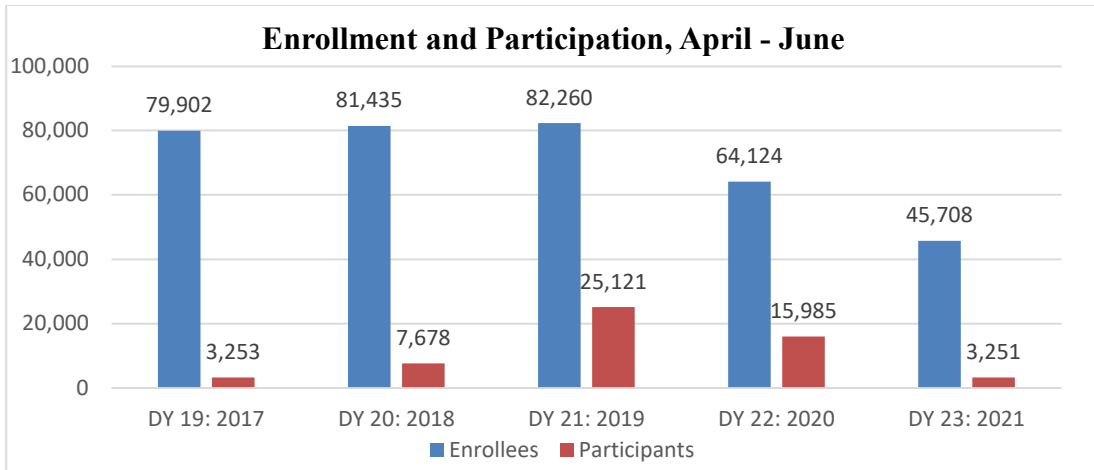
Beginning in demonstration year (DY) 22 and continuing through DY 23, Florida and the nation were affected by the COVID-19 public health emergency, which impacted both enrollment and outreach activities.

2. Program Updates

a. Current Trends and Significant Program Activity

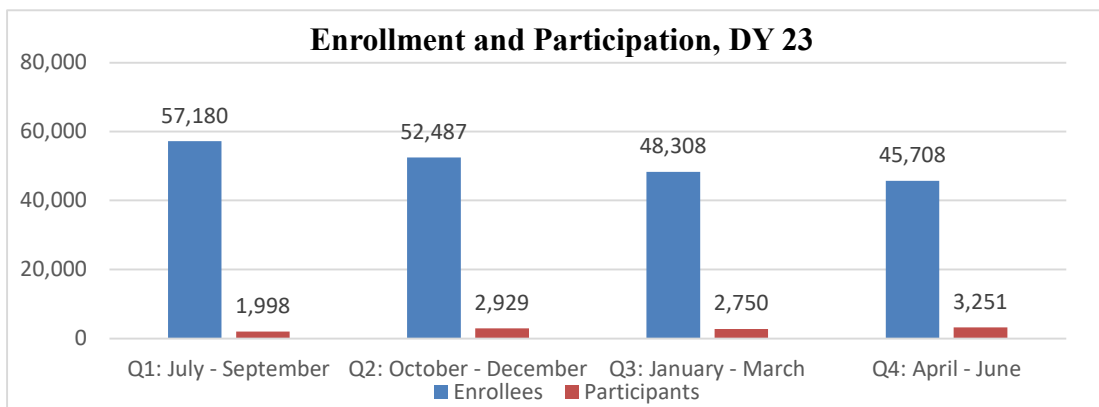
i. Quarter 4:

- (1) Enrollment numbers continued to decrease in the Family Planning Waiver during Quarter 4 of DY 23, which is due to the COVID-19 Maintenance of Effort requirements that allow for continuation of full Medicaid benefits during the public health emergency. Additionally, enrollment decreased by 18,416 from Quarter 4 of DY 22 (64,124) to Quarter 4 of DY 23 (45,708).
- (2) Participation within the waiver also decreased significantly in Quarter 4 of DY 23 (7%) as compared to Quarter 4 of DY 22 (25%).



b. DY 23

- i. Enrollment numbers decreased in the Family Planning Waiver during Quarter 4 of DY 23, which is due to the COVID-19 Maintenance of Effort requirements that allow for continuation of full Medicaid benefits during the public health emergency. Enrollment decreased by 2,600 from Quarter 3 of DY 23 (48,308) to Quarter 4 of DY 23 (45,708).
- ii. Participation within DY 23 increased slightly over the year, with 3% of enrollees participating in Quarter 1, 6% in Quarter 2, 6% in Quarter 3, and 7% in Quarter 4.



3. Policy Issues and Challenges

The Agency for Health Care Administration (Agency), in coordination with the Department of Children and Families (DCF) and the Department of Health (DOH), submitted to the Centers for Medicare & Medicaid Services (CMS) an updated implementation plan for integrating the Family Planning Waiver eligibility and application processes into the eligibility system operated by the State for Medicaid State Plan coverage in accordance with Section 1943 of the Social Security Act on August 4, 2020. The DOH has updated the Family Planning Waiver application to collect all information needed to determine eligibility using Modified Adjusted Gross Income (MAGI) and to align with federal conditions of eligibility, and the Agency has incorporated updates into the letters sent to individuals enrolling in the Family

Planning Waiver for their second twelve month period of eligibility following the loss of Medicaid coverage.

With funding from the 2021/2022 legislative session, DCF was able to begin making the systematic updates necessary to effectuate the eligibility transition. The Agency has been coordinating with DCF and DOH throughout the process to ensure a seamless transition.

Additionally, during DY 23, Florida and the nation continued to be affected by the COVID-19 public health emergency, which impacted both enrollment and outreach activities.

B. Participation Monitoring

A summary of activities and outcomes occurring from April 1, 2021 – June 30, 2021 that address improving demonstration participation and service utilization among demonstration enrollees is provided in the following table:

County	Call Type	Number of clients applied	Number of clients approved	Community Outreach
Broward	Follow-up	3	0	The Family Planning Waiver (FPW) is promoted with flyers throughout the clinic, by eligibility staff during the clinic visit, and via the website. Eligibility staff remind patients regarding second year enrollment by providing applications, encouraging reminders to be set up on personal phones, and staff reminder phone calls.
Bradford	Follow-up	0	0	Marketing materials and posters are utilized to promote the waiver program. Eligible clients are identified for the program by staff, and

				clerical staff network with Healthy Start.
Union	Follow-up	0	0	Marketing materials and posters are utilized to promote the waiver program. Eligible clients are identified for the program by staff, and clerical staff network with Healthy Start.
Clay	Follow-up	0	0	Staff work to distribute flyers at multiple locations, such as OB/GYN offices, the library, and community outreach events.
Hardee	Follow-up	0	0	Each client is asked about their insurance status when they call for an appointment or sign in for a clinic visit, and staff provide a FPW application if necessary.
Nassau	Follow-up	0	0	A new staff member has been assigned as lead for the FPW program. Currently, staff evaluate those that attend the clinic and assure they are on the FPW as applicable or assist to get them signed up.
Sumter	Follow-up	0	0	The FPW program is promoted by forms and poster display.
Bay	Desk Review	0	0	The FPW program is promoted by interview staff who freely offer information, applications, and

				brochures. These items are also distributed throughout the clinic, and information is provided to local OB/GYN offices regularly.
Glades	Desk Review	0	0	Staff search HMS to see if the client has lost Medicaid or just had a baby. They also provide fliers, pamphlets, and applications.
Hendry	Desk Review	0	0	Staff search HMS to see if the client has lost Medicaid or just had a baby. They also provide fliers, pamphlets, and applications.
Martin	Technical Assistance	0	0	
Desoto	Technical Assistance	0	0	Staff work closely with community partners, specifically Healthy Start, to promote the FPW program.
Franklin	Technical Assistance	0	0	Staff display informational posters in the clinical areas and provide information at all community outreach events.
Gulf	Technical Assistance	0	0	Staff display informational posters in the clinical areas and provide information at all community outreach events.
Charlotte	Technical Assistance	0	0	Staff distribute flyers at various community

				locations that advertise FPW services. Regarding presumptive eligibility for pregnant women, clients are asked to complete the eligibility process prior to seeing the nurse for a positive pregnancy.
St. Johns	Technical Assistance	0	0	The FPW program was recently promoted by mailing FPW applications to eligible clients in St. Johns County. The report was generated by DCF. DOH-St. Johns is co-located with other agencies and brochures are available throughout the building.
Duval	Technical Assistance	0	0	Some of the events to promote the FPW are DOH-Duval health fairs and community health fairs where flyers and information are provided. Also, staff provide flyers and education at community baby shower events.
Okeechobee	Technical Assistance	0	0	Posters are displayed in WIC and clinic exam rooms. Two staff will be specifically trained for FPW program.

Across DY 23, there were a total of 12 follow-up calls, 23 desk reviews, and 22 technical assistance calls. Additionally, there were a total of 232 clients that applied for Family

Planning Waiver coverage and 176 application approvals from the associated community outreach.

C. Utilization Monitoring

The state will summarize utilization through a review of claims/encounter data for the demonstration population in the subsequent tables. This includes the following:

Table 1. Utilization Monitoring Measures

Topic	Measure [reported for each month included in the report]
Utilization Monitoring	Unduplicated Number of Enrollees by Quarter
	Unduplicated Number of Beneficiaries with any Claim by Quarter (by key demographic characteristics such as age, gender, and income level)
	Utilization by Primary Method and Age Group
	Total number of beneficiaries tested for any sexually transmitted disease
	Total number of female beneficiaries who obtained a cervical cancer screening
	Total number of female beneficiaries who received a clinical breast exam

Table 2: Unduplicated Number of Enrollees by Quarter

	Number of Female Enrollees by Quarter				
	14 years old and under	15-20 years old	21-44 years old	45 years old and older	Total Unduplicated Female Enrollment*
Quarter 1	1	2,104	54,573	502	57,180
Quarter 2	1	1,550	50,391	545	52,487
Quarter 3	2	1,143	46,580	583	48,308
Quarter 4	1	900	44,186	621	45,708

*Total column is calculated by summing columns 2-5.

Table 3: Unduplicated Number of Beneficiaries with any Claim by Age Group per Quarter in the Demonstration Year (to date)

	Number of Females Who Utilize Services by Age and Quarter					
	14 years old and under	15-20 years old	21-44 years old	45 years old and older	Total Female Users *	Percentage of Total Unduplicated Female Enrollment
Quarter 1	0	252	1,736	10	1,998	3%
Quarter 2	0	344	2,568	17	2,929	6%
Quarter 3	1	292	2,438	19	2,750	6%
Quarter 4	1	317	2,911	22	3,251	7%

*Total column is calculated by summing columns 2-5.

Table 4: Contraception Utilization by Age Group per Demonstration Year (to date)**

Effectiveness	Users of Contraceptives					
		14 years old and under	15 – 20 years old	21 – 44 years old	45 years old and older	Total
Most and Moderately Effective*	Numerator	1	120	726	6	853
	Denominator	1	317	2,911	22	3,251
Long-acting reversible contraceptive (LARC)*	Numerator	0	19	136	1	156
	Denominator	1	317	2,911	22	3,251
Total	Numerator	1	139	862	7	1,009
	Denominator	1	317	2,911	22	3,251

*This measure is calculated as per the Medicaid and CHIP Child and Adult Core Set measure for contraceptive care for all women.

**Guidance for Reporting on page 42-44 of the Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid 2019 Technical Specifications and Resource Manual was used to calculate the measures for Table 4.

Table 5: Number Beneficiaries Tested for any STD by Demonstration Year

Test	Total Tests	
	Number	Percent of Total Enrolled Females
Unduplicated number of beneficiaries who obtained an STD test*	1,331	2.91%

*Used procedure codes:

'86592','86593','86689','86694','86695','86696','86701','86702','86703','86706','86707','86762','86803','87070','87075','87081','87086','87088','87110','87164','87205','87206','87210','87252','87270','87273','87274','87340','87341','87350','87390','87480','87481','87490','87491','87510','87511','87516','87520','87521','87522','87528','87529','87530','87534','87535','87590','87591','87592','87623','87624','87660','87661','87810','87850'

Table 6: Total Number of Female Beneficiaries who obtained a Cervical Cancer Screening

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries who obtained a cervical cancer screening*	779	1.70%

*Used procedure codes:

'88141','88142','88143','88150','88152','88153','88155','88164','88165','88166','88167','88174','88175',
Reported by quarter

Table 7: Breast Cancer Screening

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries who received a Breast Cancer Screening*	0	N/A

*Breast cancer screenings are done as part of a routine physical (evaluation and management), and as such are not able to be identified in this format.

Table 8: Post-Partum Contraceptive Care*

Screening Activity	Number	Percent of Total Enrolled Females
Among female beneficiaries between the ages of 15 to 20 who had a live birth, the percentage that was provided within 3 and 60 days of delivery, a most effective or moderately effective method of contraception.	0	0.00%
Among female beneficiaries between the ages of 15 to 20 who had a live birth, the percentage that was provided within 3 and 60 days of delivery, a long-acting reversible method of contraception (LARC).	0	0.00%
Among female beneficiaries between the ages of 21 to 44 who had a live birth, the percentage that was provided within 3 and 60 days of delivery, a most effective or moderately effective method of contraception.	0	0.00%
Among female beneficiaries between the ages of 21 to 44 who had a live birth, the percentage that was provided within 3 and 60 days of delivery, a long-acting reversible method of contraception (LARC).	0	0.00%

*Florida does not enroll individuals within 3 and 60 days of delivery into the Family Planning Waiver. These individuals still have access to full State Plan Medicaid coverage through 60 days postpartum.

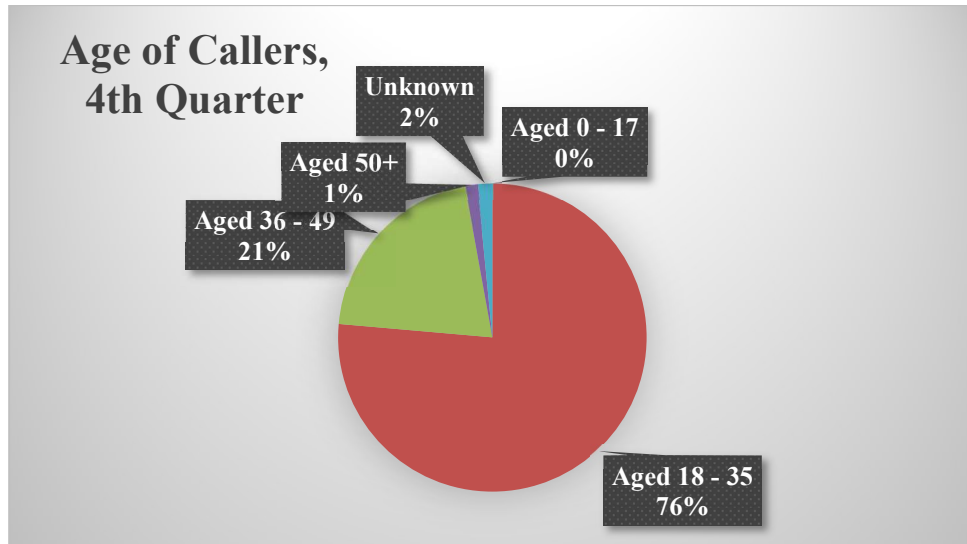
D. Program Outreach and Education

1. General Outreach and Awareness

- a.** Provide information on the public outreach and education activities conducted this demonstration quarter; and,
- b.** Provide a brief assessment on the effectiveness of these outreach and education activities.

During the fourth quarter of DY 23, Florida continued its efforts to overcome the impacts of the COVID-19 public health emergency. The Florida Family Health Line, a toll-free hotline, continued to operate throughout the COVID-19 public health emergency. It provided 385 callers with information about the Family Planning Waiver. This included

120 calls in April 2021, 112 calls in May 2021, and 153 calls in June 2021. For the entire demonstration year, the Florida Family Health Line provided 2,600 callers with information about the Family Planning Waiver.



Additionally, six counties were monitored during the demonstration year’s fourth quarter. Within these counties, all requirements were met on the monitoring tools. There were a total of five clients that applied for Family Planning Waiver coverage within these six counties during the associated community outreach and all five applications were approved. This coverage will begin after the Medicaid disenrollment freeze related to the COVID-19 public health emergency ends.

E. Program Integrity

Local county health departments assist individuals who may be eligible for Florida Medicaid due to pregnancy or the Family Planning Waiver program apply for the appropriate coverage. Currently, the DCF determines eligibility for Florida Medicaid due to pregnancy and the DOH determines eligibility for the Family Planning Waiver program. However, local county health departments are able to determine presumptive eligibility for either group and provide point of care services.

F. Grievances and Appeals

There were no grievance/appeal requests during the fourth quarter. There was a total of 10 grievance/appeal requests across DY 23.

G. Table 9: Unduplicated Number of Beneficiaries Losing Coverage after 2-year Period of Enrollment by Demonstration Year

Annual Population 58,927	Number of Female Enrollees Losing Coverage in Demonstration Year					
	14 years old and under	15-20 years old	21-44 years old	45 years old and older	Total Females Lost Enrollment*	Percent of Total Enrolled Females
DY 23	1	704	15,051	91	15,847	26.89%

*Total column is calculated by summing columns 1-4

H. Table 10: Unduplicated Number of Beneficiaries Re-enrolled in Demonstration Year for a Subsequent 2-year Period of Eligibility*

Annual Population 58,927	Number of Female Enrollees Re-enrolled for a Subsequent 2-year Period of Eligibility					
	14 years old and under	15-20 years old	21-44 years old	45 years old and older	Total Females Re-enrolled**	Percent of Total Enrolled Females
DY 23	0	112	593	2	669	1.14%

*Eligibility is limited to 24 months following the loss of Medicaid coverage, but women may become eligible for a new 2-year period of family planning coverage upon each subsequent loss of Medicaid eligibility. This chart captures those individuals that have enrolled for multiple 2-year periods.

**Total column is calculated by summing columns 1-4

I. Annual Post Award Public Forum

The annual post award public forum was held on January 25, 2021 during the Medical Care Advisory Committee meeting from 3:30 to 5:00 pm. The meeting was publicly noticed in the Florida Administrative Register. The Agency presented an overview of the Family Planning Waiver., including information regarding enrollment and key evaluation findings. There were no comments or questions during the meeting.

J. Budget Neutrality

The budget neutrality workbook for the period of April 1, 2021 through June 30, 2021 was submitted through the 1115 PMDA portal on August 24, 2021. Provided below is an overview.

	Budget	Actual
DY 23 Expenditures	\$4,357,752	\$1,498,473
Member Months	622,536	593,052

PMPM	\$ 7.00	\$ 2.53
Recipients enrolled during DY 23		60,186
Actual participants in FP during DY 23		10,928

18.16%

K. Demonstration Evaluation Activities and Interim Findings

The Agency contracts with Florida State University (FSU) to provide an independent evaluation of the Family Planning Waiver program. FSU submitted the DY 20/21 (state fiscal year (SFY) 17/18 - 18/19) Evaluation Report to the Agency and the report was finalized on February 15, 2021. This report includes descriptive and comparative analyses of the family planning population. Overall, there were several positive outcomes of the FPW program. The total number of women enrolled in the FPW program increased between DY 20 and DY 21. Women enrolled in the FPW program had lower rates of low birth weight and preterm birth compared to eligible women who did not enroll in the program. Reduced birth rates among FPW enrollees compared to eligible women who did not enroll generated over \$34 million in cost savings in DY 20. FSU submitted the draft DY 22 (SFY19/20) Evaluation Report to the Agency on May 14, 2021. The draft DY 22 Evaluation Report found that the total proportion of eligible women who enrolled in the FPW program increased in DY 22 as compared to DY 20 and DY 21 and among women who used FPW services, they were satisfied with the services and indicated the services were easy to access. The DY 22 Evaluation Report will be finalized in September 2021 following receipt of the data necessary to answer research questions two through five.