



**Analyzing the Disease Burden of Florida
Medicaid Enrollees Using Clinical Risk Groups**

**Quarterly Statewide Medicaid
Managed Care Report**

Business Intelligence Unit
Medicaid Data Analytics



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Justin M. Senior, Secretary
Agency for Health Care Administration**

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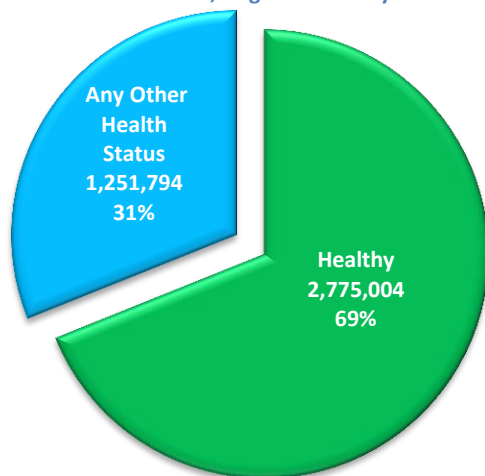
Executive Summary

Medicaid plays an important role in managing the health care of seniors, individuals with disabilities, and low-income individuals in Florida. According to the 2016 Kaiser Family Foundation State Health Facts, 18 percent of all Florida citizens were covered by Medicaid in 2015. The Agency for Health Care Administration administers the Statewide Medicaid Managed Care (SMMC) program which requires most Medicaid recipients in Florida to receive services through managed care. The SMMC Managed Medical Assistance (MMA) plans began rolling out in May 2014, and were fully implemented in August 2014. Most recipients eligible for Medicaid are required to enroll in an SMMC MMA plan to receive medical care. Managed care plans provide preventive health care and are required to enact procedures to promote disease management and report on quality metrics related to health outcomes.

Individuals with chronic disease or catastrophic illnesses present specific challenges to managing the health of a population in a managed care system. Because individuals with chronic illnesses generally use more health resources than healthy individuals, their care is more costly than that of healthy individuals. For that reason, payments in a managed care system are adjusted for the illness of enrollees. Understanding the burden of illness of the Medicaid population and its distribution geographically and across plans is crucial to effective health management in a managed care system.

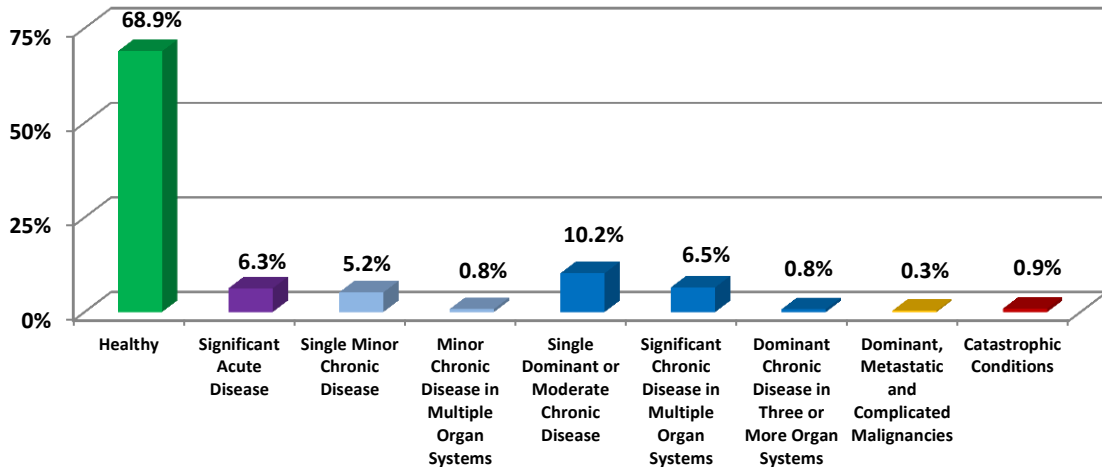
This report examines the health and illness of Medicaid recipients in Florida using data from August 2014 to July 2015. Clinical Risk Groups (CRGs) are used to classify recipients into one of 1,080 mutually exclusive clinical risk groups indicating the presence, extent, and severity of specific illnesses. CRGs are aggregated into nine broad health statuses that range from catastrophic to healthy. The distribution of illness across health plans, regions, and age, and sex, and eligibility groups is analyzed. The top ten illnesses in the eight non-healthy statuses are also analyzed. Results are descriptive. Results do not indicate that a particular plan, program, or region caused their recipients' health status. Methodological techniques used in this report do not test causal relationships between aspects of the Medicaid program and its recipients' health.

Percentage of Medicaid Recipients Categorized as Healthy Compared to Any of the Other Eight Health Statuses, August 2014-July 2015



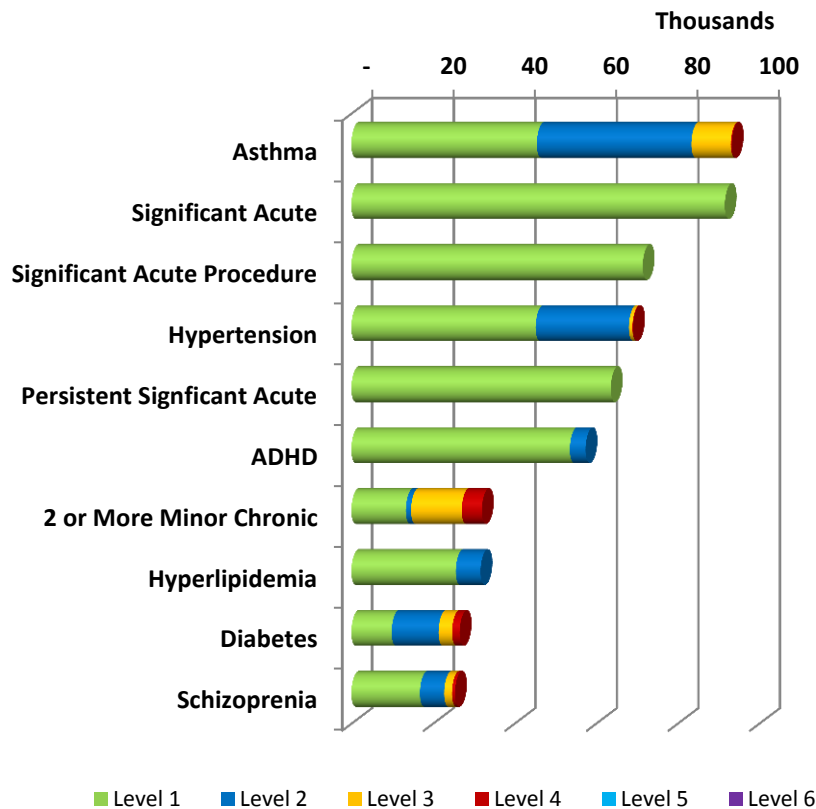
- There were 4,026,798 recipients enrolled in Medicaid for at least 3 months at some point between August 1, 2014 and July 31, 2015.
- Recipients whose medical billing data is not received by the Florida Medicaid Managed Information System (FLMMIS) are excluded from analyses.
- Nearly 70 percent (69%) of recipients were classified as healthy based on their medical data for the study period.
- 1,251,794 recipients (31%) were classified in one of eight health statuses not considered healthy.

Percentage of Medicaid Population by Health Status, August 2014-July 2015



- The three most common health statuses after healthy are Single Dominant or Moderate Chronic Disease (10.2% of recipients), Significant Chronic Disease in Multiple Organ Systems (6.5% of recipients), and Significant Acute Illness (6.3% of recipients).
- Slightly less than one percent of Medicaid recipients had a Catastrophic Condition.

Top 10 Illnesses of Medicaid Population, August 2014-July 2015

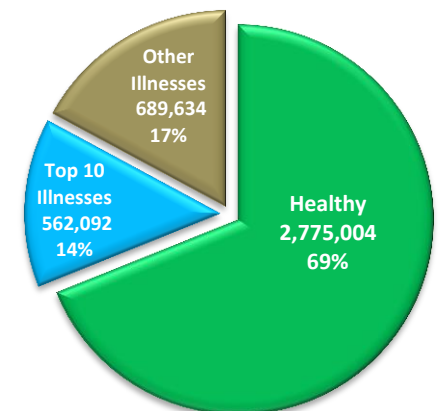


Level 1 Level 2 Level 3 Level 4 Level 5 Level 6

Higher levels of severity indicate a greater extent and progression of the chronic disease.

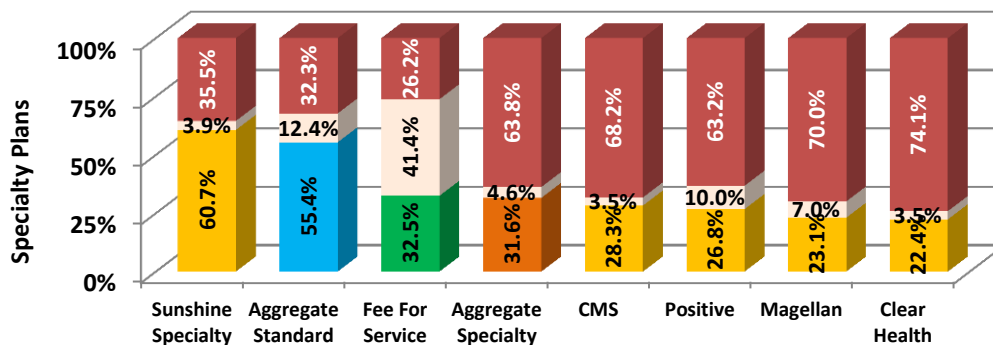
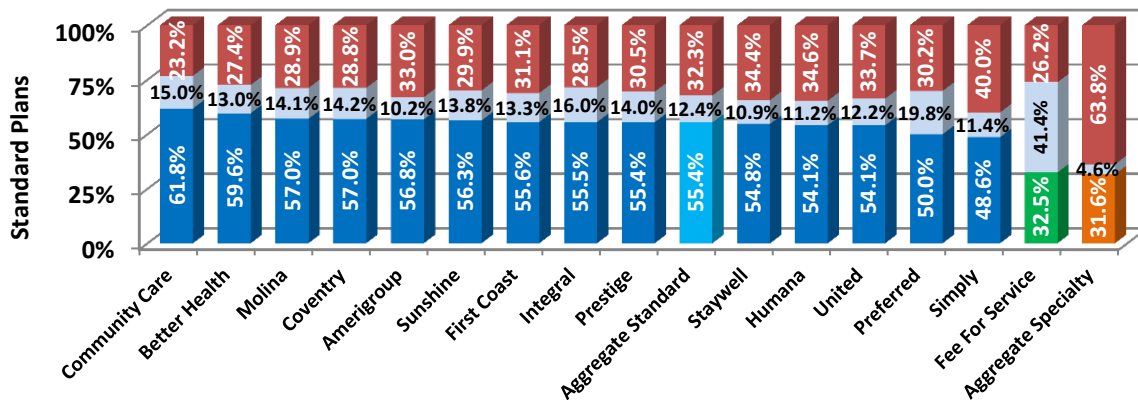
- The most common illnesses among Medicaid recipients include asthma, significant acute illnesses, hypertension, and attention deficit/hyperactivity disorder (ADHD).

Percentage of Medicaid Recipients Categorized as Healthy, Having a Top Ten Illness, or Having an Illness Not in the Top Ten, August 2014-July 2015



- Some recipients are categorized as healthy because they received no services through Medicaid. Over a third (41%) of FFS recipients are non-users of Medicaid services. The largest portion of these non-users (69%) are eligible as Qualified Medicare Beneficiaries or SSI recipients for whom Medicaid receives Medicare claim information but no prescribed drug information likely due to their Medicare Part D drug coverage. It is possible that if Medicaid received the drug information, these recipients could be assigned a status other than healthy.
- The percentage of each Standard Plan’s enrollees who are classified as healthy varies from 60 percent for Simply to 76.8 percent for Community Care.
- The percentage of each Specialty Plan’s enrollees who are classified as healthy varies from a low of 26 percent for Clear Health to a high of 65 percent for Sunshine Specialty.
- Some enrollees in Specialty Plans were classified as healthy because there is insufficient information in the data related to their illness. Some enrollees’ drug prescriptions were covered by Medicare Part D. Some enrollees lack hospital or outpatient services that meet the clinical criteria needed for classification, or lack recent treatment during the study period. During the analysis period, siblings of enrollees in Children’s Medical Services (CMS) were allowed to enroll in the plan if the sibling did not meet eligibility criteria for the plan. Magellan enrollees may be classified as healthy during periods when their illness is in remission.

Percentage of Enrollee Months Classified as Healthy Versus Any Other Health Status
August 2014 - July 2015



- Healthy Determined by Services-All Standard Plans
- Healthy Determined by Services-All Specialty Plans
- Healthy Determined by Services-Standard Plans
- Healthy Determined by Services-Specialty Plans
- Healthy Determined by Services-Fee For Service
- Healthy No Services (Standard Chart)
- Healthy No Services (Specialty Chart)
- Status Other than Healthy

Note: See page one for a description of specialty plan populations.

Introduction

Florida Medicaid pays for medical services for low-income individuals, seniors, and individuals with disabilities who have limited or no health insurance. In response to legislation mandating that most Medicaid recipients receive services through a managed care program, the Agency for Health Care Administration has been providing medical services through the Statewide Medicaid Managed Care Program since August 2014. Under managed care, health care plans receive capitation payments for enrollees and contract with health care providers for the provision of medical services to enrollees in exchange for payment.

Medicaid's managed care plans are classified as Standard Plans or Specialty Plans. Standard Plans serve the majority of Medicaid recipients and provide an array of covered medical services. They are Staywell, Sunshine, Amerigroup, Humana, Prestige, United, Molina, Integral, Better Health, Simply, Coventry, Community Care, Preferred and First Coast.

Specialty plans serve recipients with a chronic medical condition, specific diagnosis, or specific age group and are tailored to meet the specific needs of the specialty population. Specialty Plans include Sunshine Specialty who serves recipients under the age of 21 with an open case for child welfare services; Magellan who serves recipients diagnosed with a serious mental illness; CMS who serves recipients under the age of 21 with a serious and chronic condition; and Clear Health Alliance and Positive Health Care, who serve recipients diagnosed with HIV or AIDS.

In a managed care system, health plans face the challenge of covering the payment for services to enrollees with the amount received in capitation payments. To ensure that plans can cover the cost of services for individuals with serious health problems, capitation payments must be adjusted for the health of each enrollee.

Providing healthcare to individuals who are ill, especially those with serious chronic illness, is more costly than providing healthcare to healthy individuals. Understanding the disease burden of the Medicaid population and the distribution of healthy and sick enrollees across health plans and regions is essential to an efficient and well-functioning managed care system. Health plans with a larger percentage of individuals with more complex illnesses will have larger medical service expenses per enrollee than plans with a smaller percentage of enrollees with complex illnesses. Therefore, capitation rates are adjusted for the burden of illness of each plan's enrollees to reflect this differential in cost.

This report examines the health status of the Florida Medicaid population. Clinical Risk Groups (CRGs) are used to categorize enrollees into one of 1,080 clinical risk groups that are aggregated into nine health statuses that range from catastrophic to healthy. The distribution of health statuses and most frequent illnesses by health plan, region, sex, age group, and eligibility group is examined. For each of the eight non-healthy statuses, the top ten illnesses are shown. Results are descriptive. Results do not indicate that a particular plan, program, or region caused their recipients' health status. Methodological techniques used in this report do not test causal relationships between aspects of the Medicaid program and its recipients' health.

Data Sources

The results in this report are based on analyses of data from sources detailed in the table below and cited with relevant tables and figures.

Table 1: Data Sources

| Data | Period | Source |
|---|---|---|
| Enrollment Information | August 1, 2014-July 31, 2015 as of September 21, 2016 | Florida Medicaid Managed Information System (FLMMIS) Eligibility Information |
| MMA Encounter and Claims Information | August 1, 2014-July 31, 2015 as of April 21, 2016 | Florida Medicaid Managed Information System (FLMMIS) Claims and Encounter Information |

Recipients whose medical billing data is not received by the Florida Medicaid Managed Information System (FLMMIS) are excluded from analyses. This includes recipients who are dually eligible for Medicaid and Medicare for whom Medicaid does not receive medical billing information, women who were enrolled only for Family Planning services, recipients who did not have full Medicaid coverage and recipients enrolled in Medicaid for less than 3 months in the period from August 1, 2014 through July 31, 2015.

Demographic and medical information present in claims and encounter data for the analysis year is used to classify each enrollee into a clinical risk group (CRG). Clinical risk groups are a classification system for describing the health of individuals. Each enrollee is categorized into one of 1,080 CRG codes. CRGs are assigned using 3M's CRG grouping software (*3M™ Clinical Risk Grouping Software (Version 1.12)* [Software]). The CRG grouping software uses diagnosis codes, procedure codes, and national drug codes, singularly or in combination, to build a disease profile for each person. It also uses other information such as the place of service, recency of the service, persistence of the illness, and demographic characteristics of the individual. The presence or absence of this information can change the assignment of a health status significantly. For example, some enrollees in illness-based Specialty Plans are classified as "healthy." While these individuals would not normally be categorized as healthy, the claims/encounter data submitted during the study period did not contain information relating to the illness.

The disease profile is used by the software to group clinical information into 37 major diagnostic categories based on the organ system involved or the disease etiology. The CRG software uses a set of detailed clinical criteria to assign a primary chronic disease with corresponding severity level to each major diagnostic category if any illness is present. Table 2 lists the major diagnostic categories in hierarchal order beginning with the most severe.

Table 2: Major Diagnostic Category Description

| Rank | Major Diagnostic Category (MDC) Description |
|------|---|
| 1 | Catastrophic Respiratory Conditions |
| 2 | Catastrophic Neurological Conditions |
| 3 | Heart Transplant Status |
| 4 | Liver or Pancreas Transplant Status |
| 5 | Bone Marrow Transplant Status |
| 6 | HIV Infection |
| 7 | Secondary Malignancy |
| 8 | Malignancies |
| 9 | Diseases and Disorders of the Nervous System |
| 10 | Diseases and Disorders of the Cardiovascular System |
| 11 | Diseases and Disorders of the Respiratory System |
| 12 | Diabetes Mellitus |
| 13 | Diseases and Disorders of the Digestive System |
| 14 | Diseases and Disorders of the Hepatobiliary System and Pancreas |
| 15 | Diseases and Disorders of the Kidney and Urinary Tract |
| 16 | Disease and Disorders of the Blood and Blood Forming Organs |
| 17 | Infectious and Parasitic Diseases |
| 18 | Diseases and Disorders of the Eye |
| 19 | Diseases and Disorders of the Ear, Nose, Mouth and Throat |
| 20 | Peripheral Vascular Disease and Other Non-Cardiac Vascular Diseases |
| 21 | Diseases and Disorders of the Musculoskeletal System |
| 22 | Connective Tissue Diseases |
| 23 | Other Endocrine, Metabolic and Thyroid Disorders |
| 24 | Diseases and Disorders of the Male Reproductive System |
| 25 | Diseases and Disorders of the Female Reproductive System |
| 26 | Newborns and Other Neonates |
| 27 | Diseases and Disorders of the Skin, Subcutaneous Tissue, and Breast |
| 28 | Mental Diseases and Disorders |
| 29 | Substance Abuse |
| 30 | Burns |
| 31 | Factors Influencing Health Status and Other Contacts with Health Services |
| 32 | Pregnancy, Childbirth and the Puerperium |
| 33 | Other Trauma |
| 34 | Injuries, Poisoning and Toxic Effects of Drugs |
| 35 | Neoplasms of Uncertain Behavior |
| 36 | Chromosomal Anomalies, Mental Retardation and Other Developmental / Cognitive Diagnoses |
| 37 | Craniofacial Anomalies |

Once the primary chronic illnesses are assigned to each of the major diagnostic categories, the CRG software applies additional detailed clinical criteria to categorize each person into one of 1,080 detailed CRG categories. The CRG categories indicate the presence or absence of specific acute and chronic illnesses, the severity level of illnesses, and the presence of multiple illnesses. Detailed CRG categories can be used to examine the prevalence of specific illnesses in a population and identify the most frequent illnesses experienced by groups within the population. Detailed CRG categories are also aggregated into the following nine health statuses which range from catastrophic to healthy and are used to more broadly summarize the health of a population.

Table 3: Health Status Categories

| Health Status | Title | Description |
|---------------|---|---|
| 9 | Catastrophic Conditions | Includes long term dependency on a medical technology such as dialysis, respirator, or total parenteral nutrition (TPN), and life-defining chronic diseases or conditions that dominate the medical care required such as persistent vegetative state, cystic fibrosis, AIDS, or a history of heart transplant. |
| 8 | Dominant, Metastatic or Complicated Malignancies | Identified by a malignancy that dominates the medical care required such as brain malignancy, or a non-dominant malignancy such as prostate malignancy that is metastatic or complicated (requiring a bone marrow transplant). |
| 7 | Dominant Chronic Disease in Three or More Organ Systems | Identified by the presence of three or more dominant chronic diseases, or two dominant and a selected moderate chronic disease. An example is the presence of congestive heart failure, diabetes, and chronic obstructive pulmonary disease. |
| 6 | Significant Chronic Disease in Multiple Organ Systems | Identified by the presence of two or more chronic diseases of which at least one is a dominant or moderate chronic disease such as diabetes and hypertension or asthma and hypertension. |
| 5 | Single Dominant or Moderate Chronic Disease | Identified by the presence of a single dominant or moderate chronic disease such as asthma, epilepsy, or cerebral palsy. |
| 4 | Minor Chronic Disease in Multiple Organ Systems | Identified by the presence of two or more minor chronic diseases such as migraines and depression, or migraines and hyperlipidemia. |
| 3 | Single Minor Chronic Disease | Identified by the presence of a single minor chronic disease such as migraines, depression, or hyperlipidemia. |
| 2 | Recent History of Significant Acute Disease | Identified by the presence within the most recent six month period of one or more significant acute diseases or procedures. No chronic diseases are present. Examples are: pneumonia, blood transfusion, or bacterial infections. |
| 1 | Healthy | Identified by the absence of any chronic disease or significant acute disease or procedures. Minor acute disease may be present such as upper respiratory infection, appendicitis, or ear infection. |

Disease Classifications

The following classifications are used throughout this report to describe a specific type of medical condition. They are based on the terminology and definitions used to define a CRG.

A Dominant Chronic (DC) disease is a serious lifelong chronic disease which usually leads to the progressive deterioration of health.

A Moderate Chronic (MC) disease is a serious chronic disease which does not typically lead to the deterioration of health but does contribute to the individual's overall health and future need for medical care.

A Minor Chronic (MinC) disease is a chronic disease that can be managed successfully and has limited effect on the need for future care.

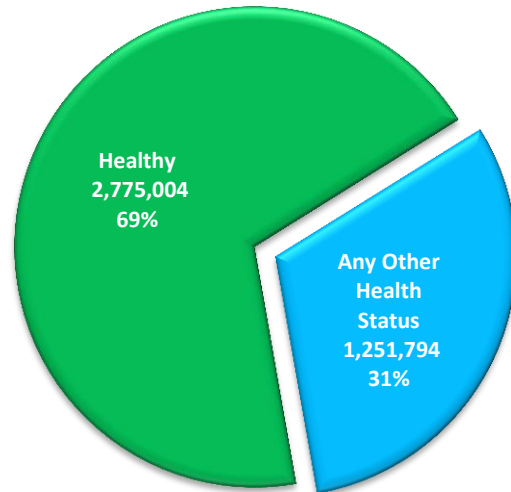
A Significant Acute Illness (SA) can be a precursor to, or place the individual at risk for, the development of chronic illness.

A Minor Acute (A) illness is limited in duration and does not increase the risk of developing a chronic disease.

Health of the Medicaid Population

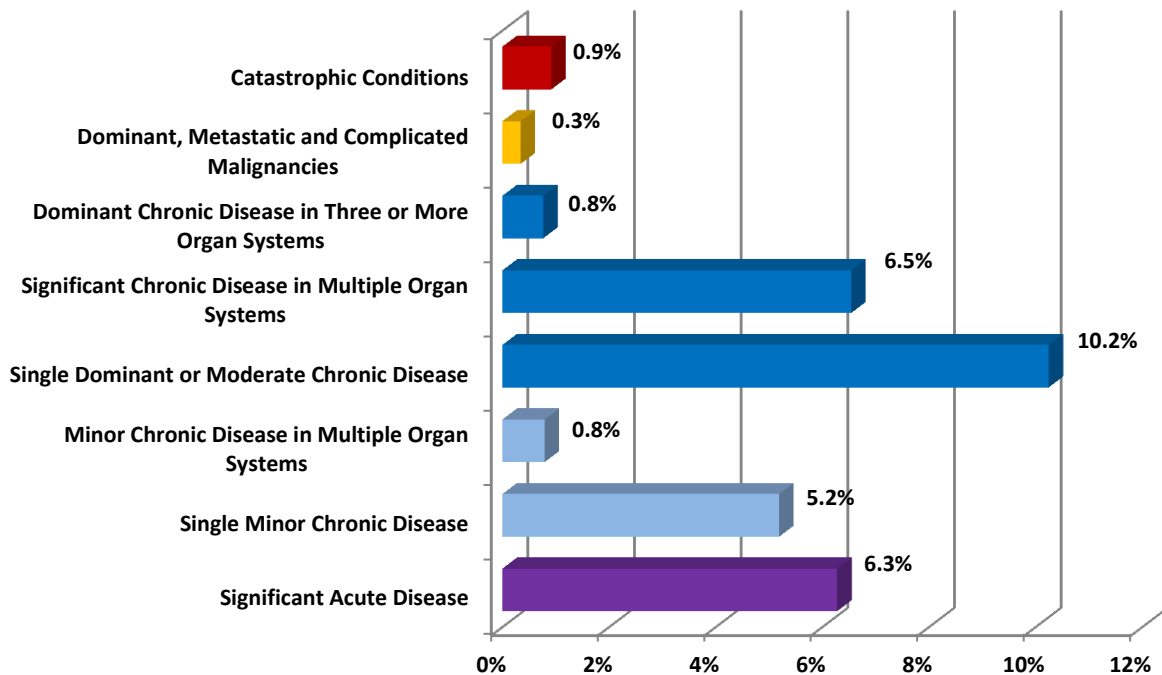
Overall, 69 percent of the Medicaid population is classified as healthy. A healthy status is assigned to all individuals in the population with Medicaid services that do not meet the clinical criteria indicating the presence of a significant acute illness or chronic disease during the study period as well as those individuals who have not received any service.

Figure 1: Percentage of Medicaid Recipients Categorized as Healthy Compared to Any of the Other Eight Health Statuses, August 2014-July 2015



Thirty-one percent of Medicaid’s total population is categorized as other than healthy. The largest portion of this group (10%) is in the Single Dominant or Moderate Chronic Disease health status.

Figure 2: Percentage of Medicaid Population Classified in a Non-Healthy Status by Health Status, August 2014-July 2015



The demographic composition of the Medicaid population plays a role in the health of the population. The Medicaid population is divided into two main eligibility groups. The SSI-Related eligibility group consists of individuals who meet the age or disability standards for Supplemental Security Income (SSI). The Family-Related eligibility group consists of children and families who meet Medicaid eligibility standards. The largest number of Medicaid recipients (75%) is in the children and families group.

Figure 3: Percentage of Medicaid Population in the Family-Related Eligibility Group as Compared to the SSI-Related Eligibility Group, August 2014-July 2015

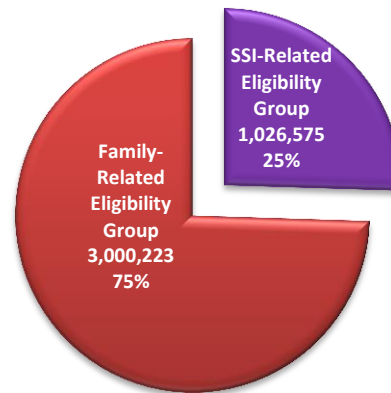
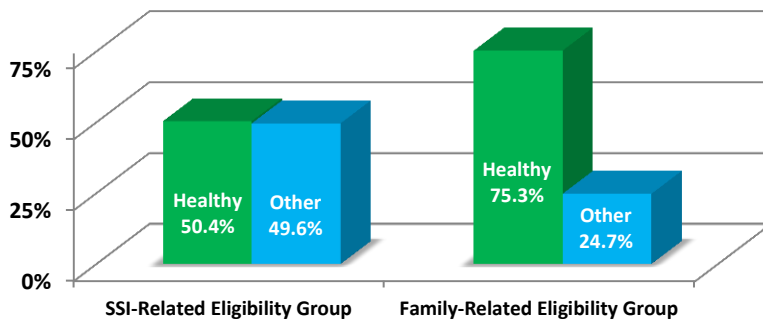


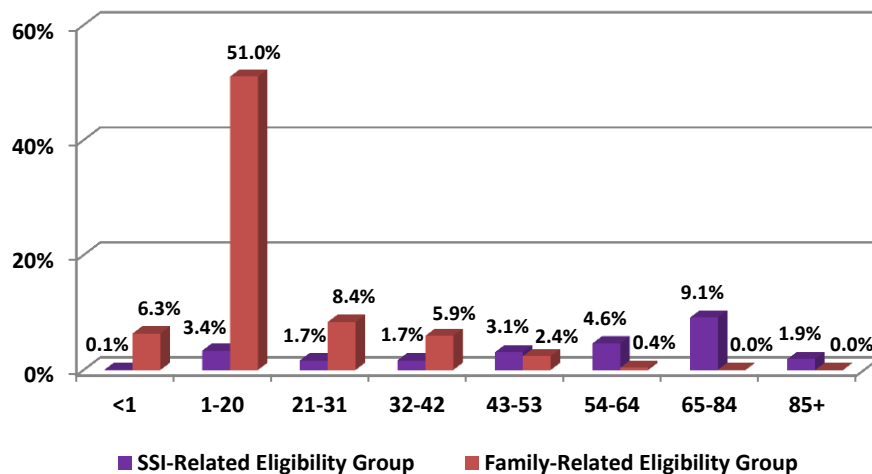
Figure 4: Percentage of SSI-Related Eligibility Group and Family-Related Eligibility Group in the Healthy Category as Compared to One of the Other Eight Health Statuses, August 2014-July 2015



The Family-Related eligibility group is typically younger and healthier as their eligibility is based either on age for the under 21 population or the existence of dependent children for the over 21 population.

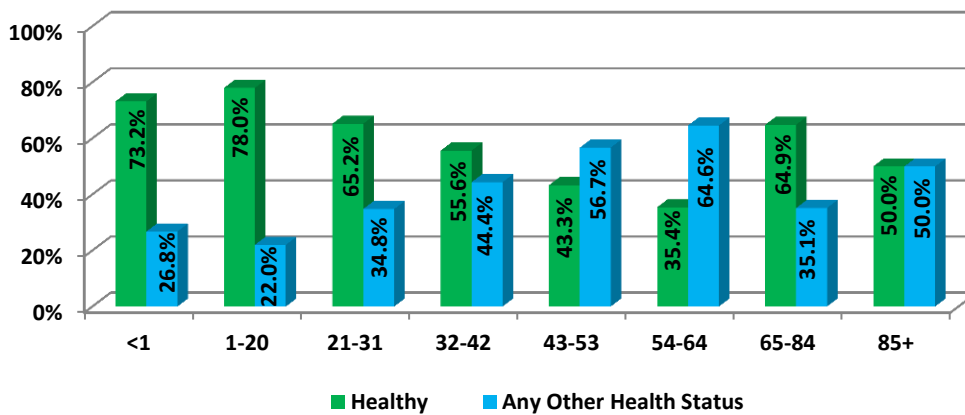
By definition, the aged and disabled population is older or has a disability. They comprise 25 percent of the Medicaid population. Overall, Medicaid's population is largely comprised of children less than 21 years of age.

Figure 5: Distribution of Medicaid Population by Age and Eligibility Group, August 2014-July 2015



Typically, the burden of illness increases as the population ages. In Medicaid, the percentage of non-healthy individuals follows this pattern beginning with the 21-31 age group until it reaches the 65-84 age group when the burden of illness declines. The decline may be attributed to an increase in number of individuals in the 65 and older group who, because of age and income, are now eligible to receive both Medicaid and Medicare. Once that occurs, Medicaid no longer receives pharmacy claims and encounter data for Medicare Part D recipients, a key component in determining health status. Thus, the CRG assignments for the 65 and older age groups likely underestimate the true burden of illness for these age groups. In addition, new entrants to Medicaid who are eligible solely due to age and income rather than disability status change the composition of the 65 and older group making it relatively healthier.

Figure 6: Percentage of Age Groups Classified as Healthy, August 2014-July 2015



The increase in the percentage of healthy recipients among 65 to 84 year olds is observed only for recipients in the SSI-Related eligibility group, suggesting the loss of pharmacy data and the change in the population’s composition are the likely explanations for the increase in the percentage of healthy recipients among those 65 and older.

Figure 7: Percentage of Age and Eligibility Groups Classified as Healthy, August 2014-July 2015

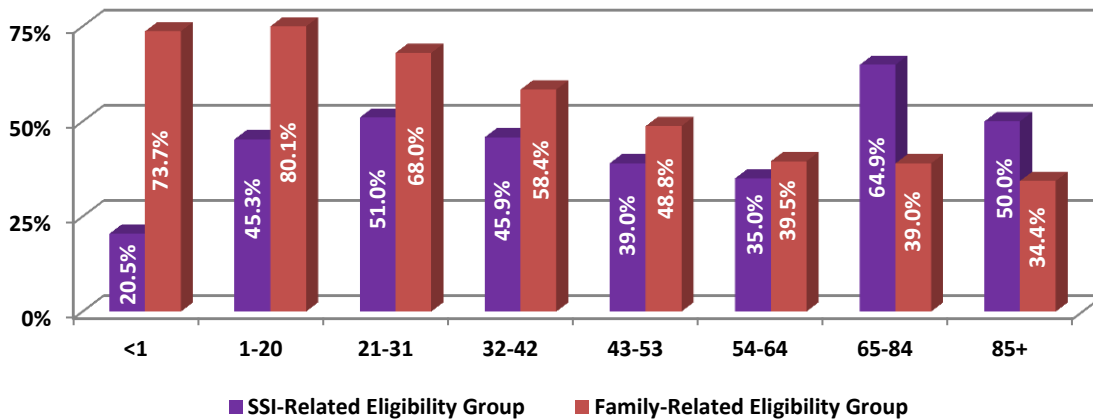
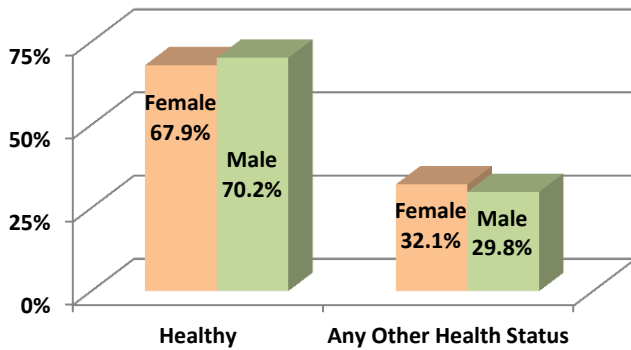


Figure 8: Percentage of Females and Males Classified as Healthy, August 2014-July 2015



The health status of the Medicaid population varies only slightly by gender. About 56 percent of the Medicaid population is female.

Figure 9: Percentage of Medicaid Population by Gender, August 2014 -July 2015

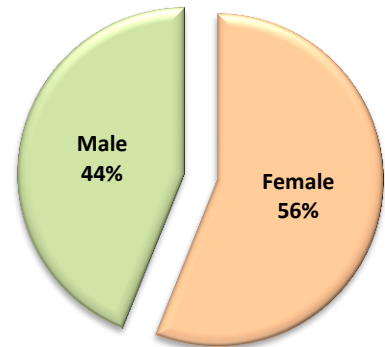
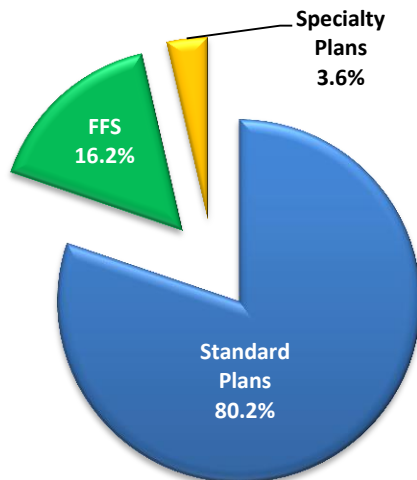


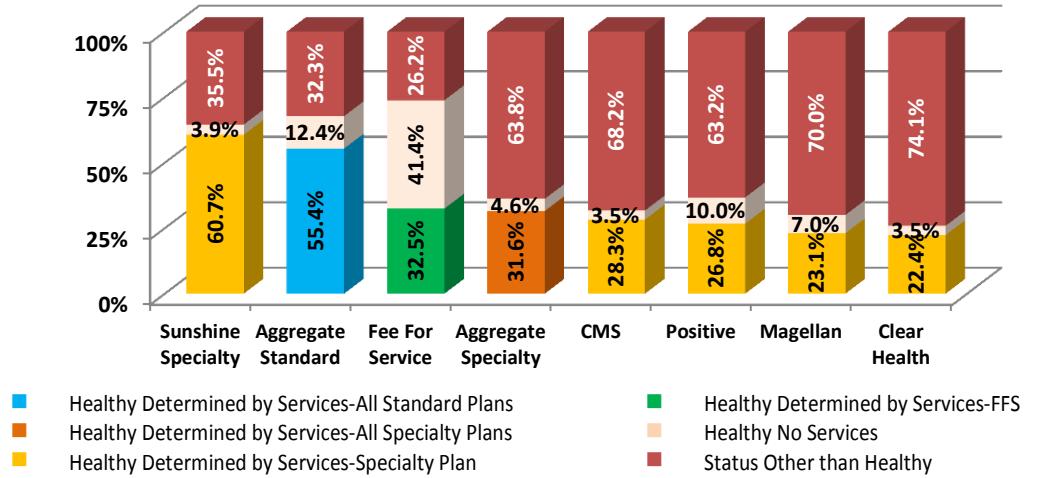
Figure 10: Percentage of Medicaid Population in Standard Plan, Specialty Plan, and FFS, August 2014-July 2015



The majority of Medicaid recipients were in enrolled in the managed care program during the study period. Only 16 percent of the Medicaid population was in the fee-for-service program. Medicaid enrollees were unevenly distributed across MMA health plans. Eighty percent of the Medicaid population was enrolled in a Standard Plan and 3.6 percent was enrolled in a Specialty Plan.

Healthy and ill enrollees are unevenly distributed across health plans. With the exception of Sunshine Specialty, Specialty Plans are designed to serve enrollees with a serious illness and have a larger percentage of enrollees with serious illnesses.

Figure 11: Percentage of Specialty Plan Enrollees Classified as Healthy, August 2014-July 2015

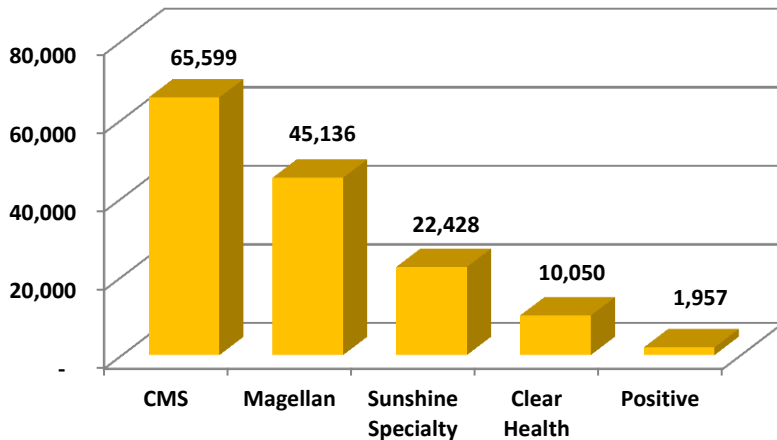


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Note: See page one for a description of specialty plan populations.

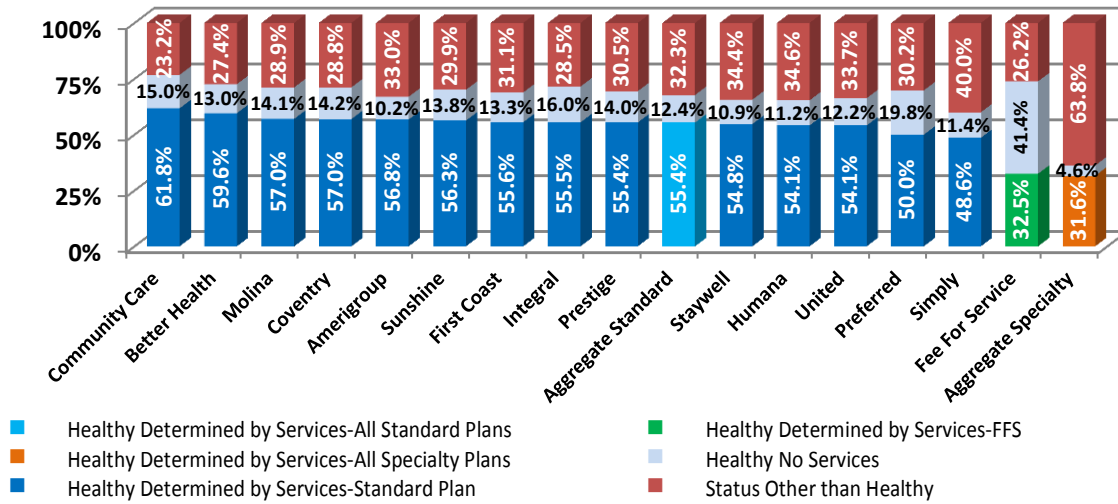
Some enrollees in Positive and Clear Health were classified as healthy because they did not have any HIV or AIDS related hospital or outpatient medical services, and in some instances, their drug prescriptions were covered by Medicare Part D and thus were not present in Medicaid encounter data. Information necessary for a health status determination was thus lacking in the data. The 32 percent of CMS enrollees who are healthy likely results from the policy in place at the time allowing siblings who did not meet the CMS criteria to also enroll in CMS plan. Given that mental illness can fluctuate in its severity and expression, some Magellan enrollees may be classified as healthy during periods when their mental illness is in remission or is being controlled.

Figure 12: Number of Enrollees in a Specialty Plan, August 2014-July 2015



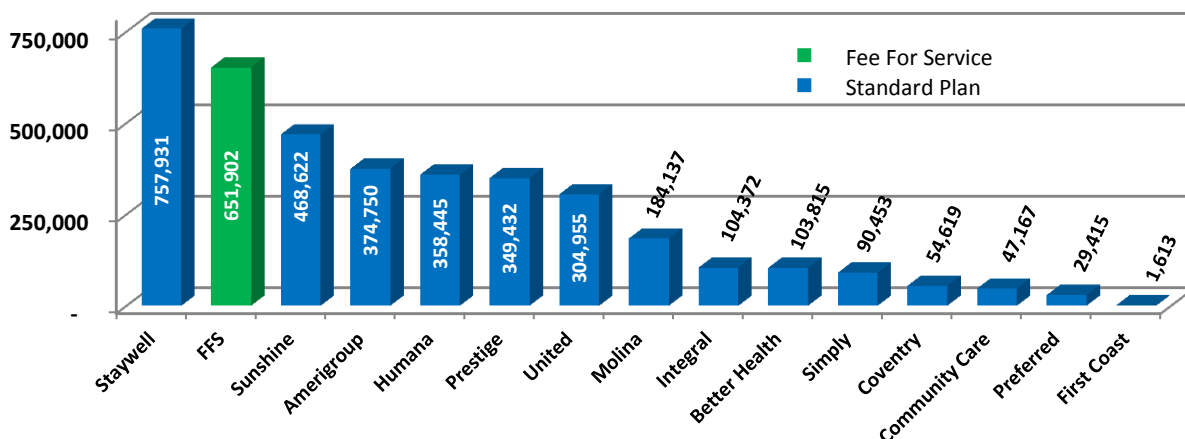
The two HIV/AIDS Specialty plans have the smallest number of enrollees among Specialty plans. Together, they account for less than nine percent of all Specialty plan enrollees.

Figure 13: Percentage of Standard Plan Enrollees Classified as Healthy, August 2014-July 2015



Community Care has the largest percentage of healthy enrollees of any Standard plan. The fee-for-service program has the second largest percentage of healthy recipients. The percentage of healthy enrollees in a Standard plan ranges from a low of 60 percent for Simply to a high of 77 percent for Community Care. Some recipients are categorized as healthy because they received no services through Medicaid. Over a third (41%) of FFS recipients are non-users of Medicaid services. The largest portion of these non-users (69%) are classified as Qualified Medicare Beneficiaries or SSI recipients for whom Medicaid receives Medicare claim information but no prescribed drug information likely due to their Medicare Part D drug coverage. It is possible that if Medicaid received the drug information, these recipients could be assigned a status other than healthy.

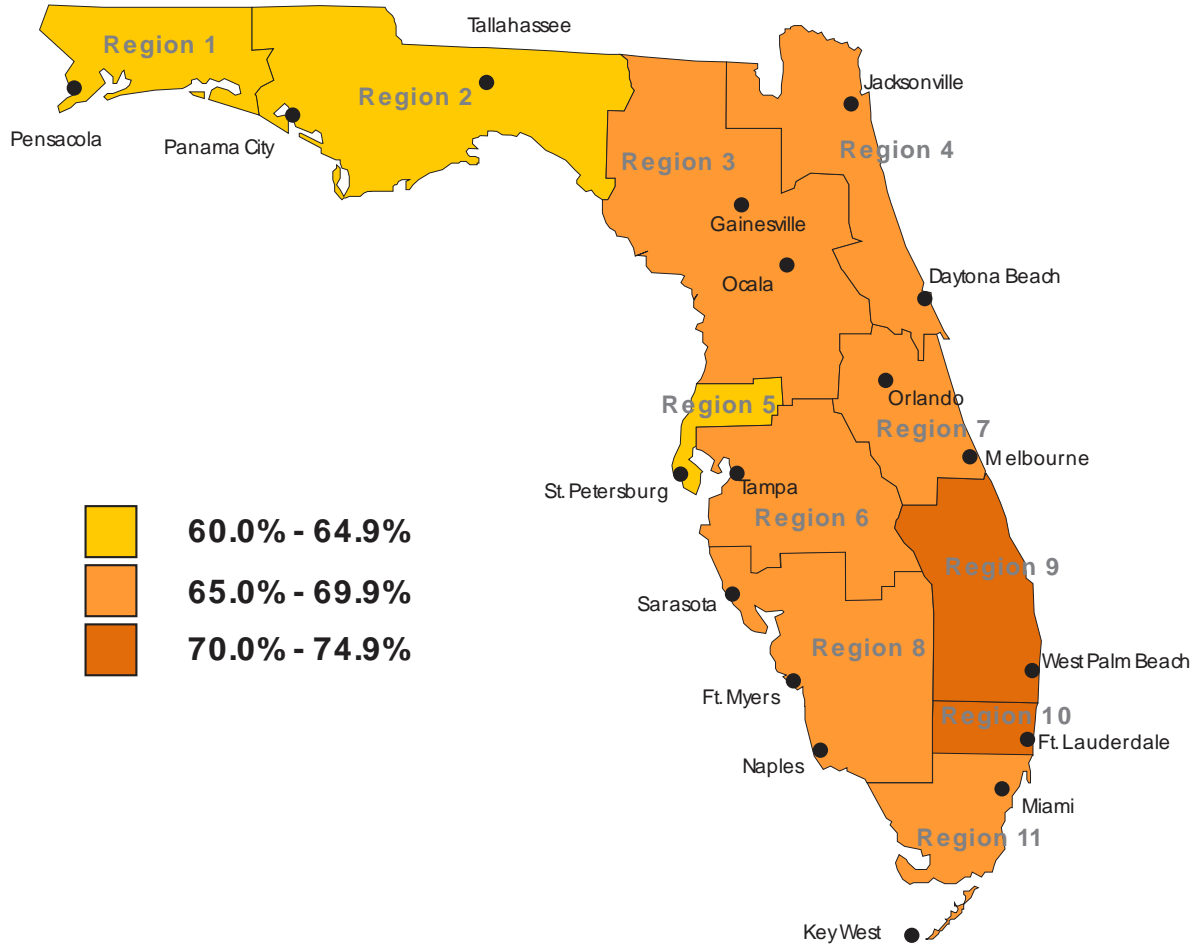
Figure 14: Number of Enrollees in a Standard Plan, August 2014-July 2015



Staywell is the largest Standard plan accounting for 23.5 percent of all Standard plan enrollees. In contrast, Community Care accounts for 1.5 percent of all Standard plan enrollees.

The map displays the percentage of Medicaid recipients in each region with a status of healthy. A larger percentage of Medicaid recipients in Regions 9 and 10 as compared to other regions are categorized as healthy. Regions 1, 2, and 5 have the smallest percentage of healthy recipients in the state.

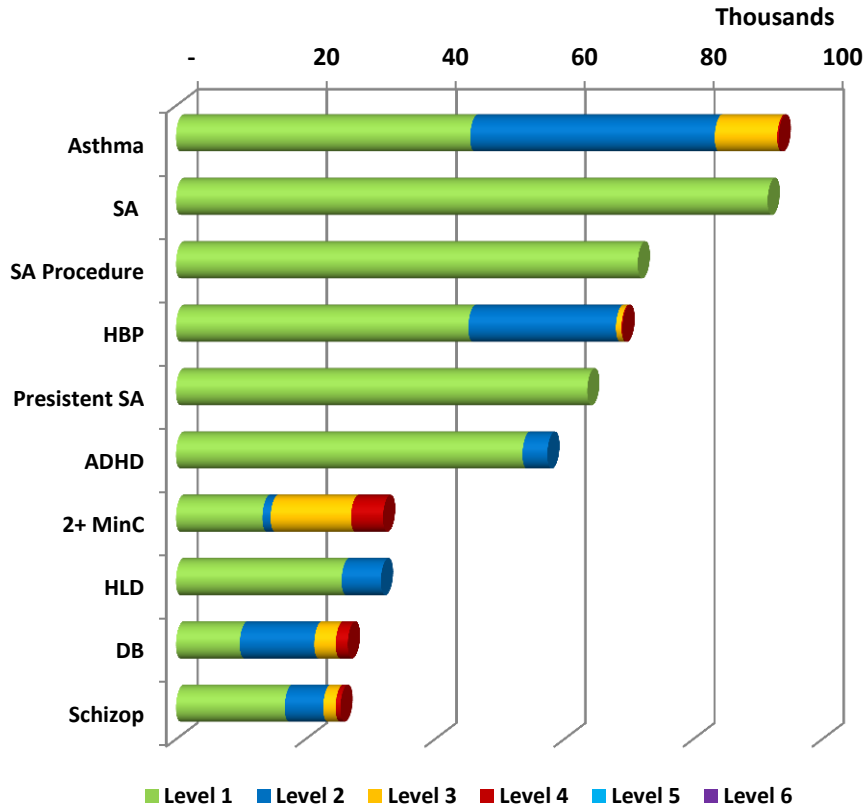
Figure 15: Percentage of Regions' Recipients with a Healthy Status, August 2014-July 2015



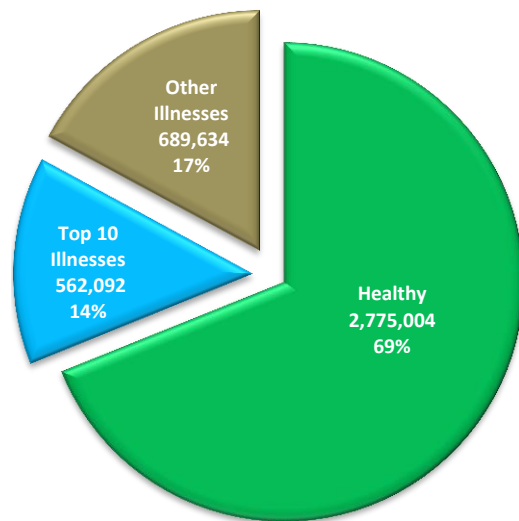
Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Top Illnesses of the Medicaid Population

Figure 16: Top 10 Non-Healthy CRGs for the Medicaid Population, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



| | | | |
|---------|--|------|---------------------------|
| ADHD | Attention Deficit / Hyperactivity Disorder | 2+ | Two or More |
| DB | Diabetes | MinC | Minor Chronic |
| HLD | Hyperlipidemia | SA | Significant Acute Disease |
| HBP | Hypertension | | |
| Schizop | Schizophrenia | | |

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Overall

Detailed clinical risk group categories are ranked in order of most to least frequent to identify the most common illnesses in the Medicaid population. Asthma is the most prevalent illness across all Medicaid recipients. Three of the top ten illnesses are acute rather than chronic.

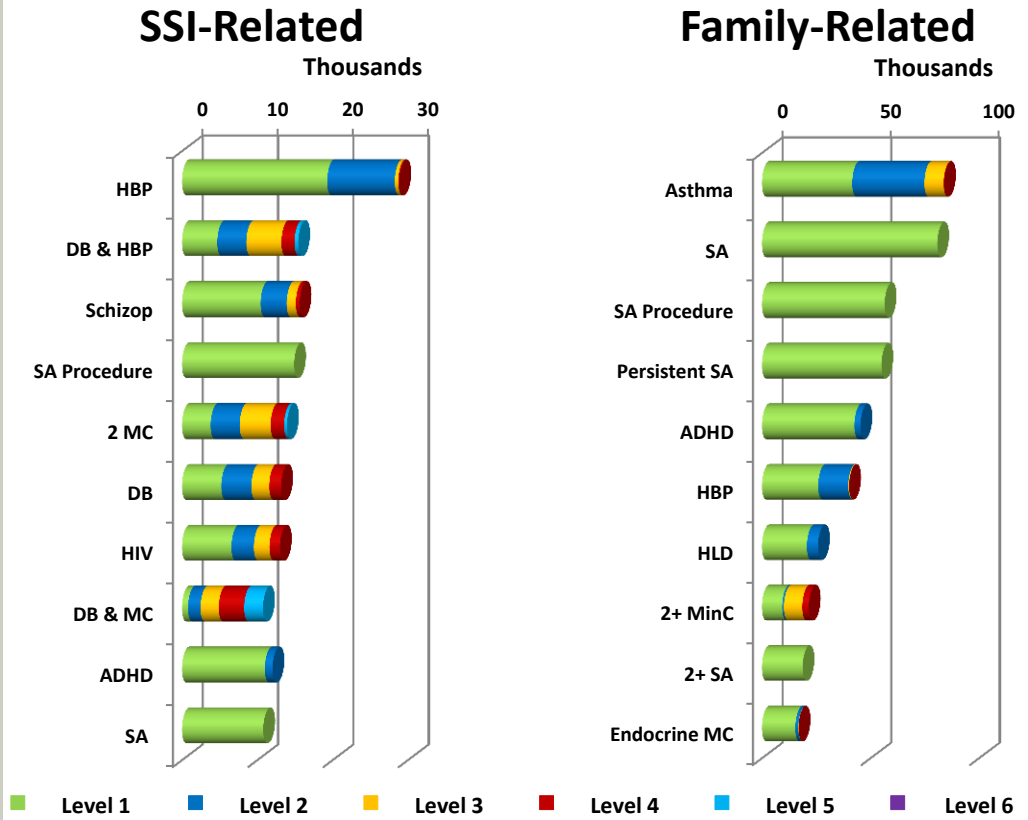
Asthma is a chronic disease affecting the lungs. It causes episodes of wheezing, breathlessness, chest tightness, and coughing which may limit a person's daily activities. However, it can be controlled by medication and environmental changes.

SSI and Family

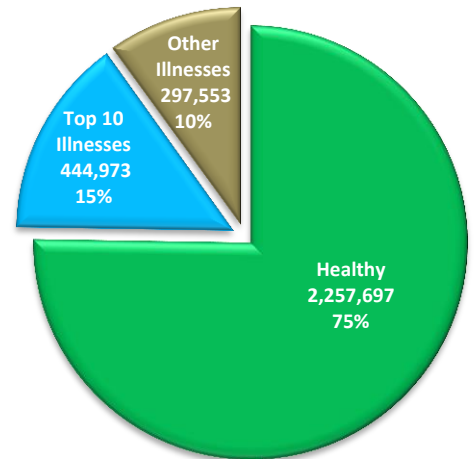
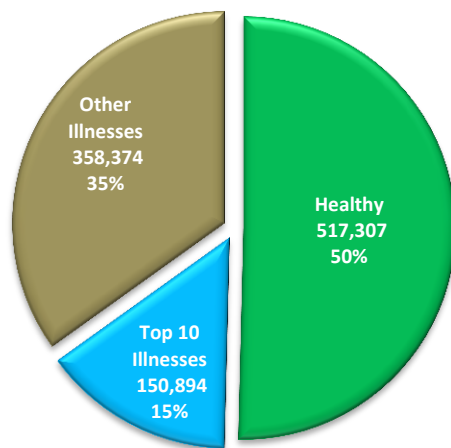
Among individuals in the SSI-Related eligibility group, hypertension is the leading illness and only one of the top five illnesses is acute. Among individuals in the Family-Related eligibility group asthma is the leading illness and three of the top five illnesses are acute.

Hypertension is high blood pressure, a common and potentially dangerous condition that increases the risk of heart attack and stroke. It occurs when the pressure of the blood in a person's blood vessels is higher than it should be. Hypertension can be managed to lower the risk of heart disease and stroke.

Figure 17: Top 10 Illnesses of the Medicaid Population by Eligibility Group, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.

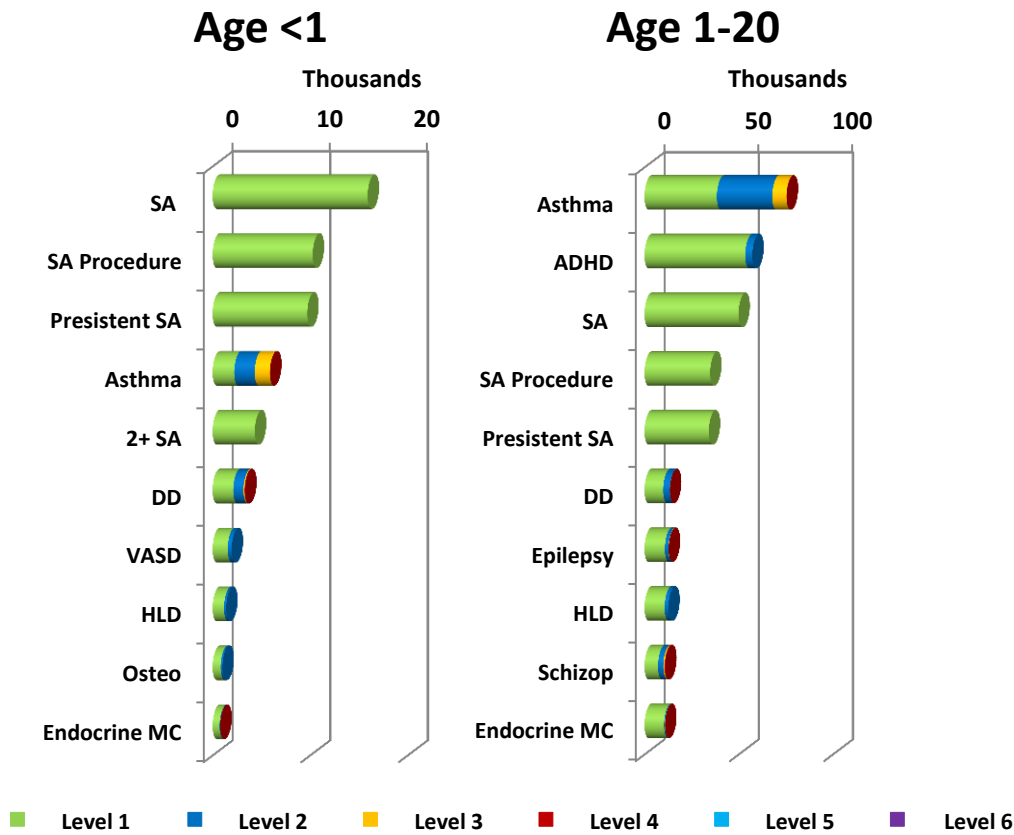


| | |
|---------|--|
| ADHD | Attention Deficit / Hyperactivity Disorder |
| DB | Diabetes |
| HLD | Hyperlipidemia |
| HBP | Hypertension |
| Schizop | Schizophrenia |

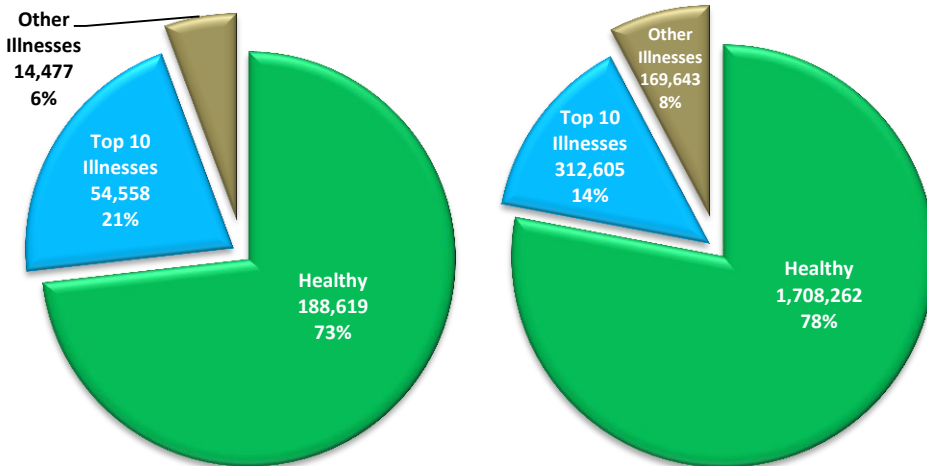
| | |
|------|---------------------------|
| 2+ | Two or More |
| MC | Moderate Chronic Disease |
| MinC | Minor Chronic |
| SA | Significant Acute Disease |

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 18: Top 10 Illnesses of the Medicaid Population from Birth to 20, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



| | | | |
|---------|--|----|---------------------------|
| ADHD | Attention Deficit / Hyperactivity Disorder | 2+ | Two or More |
| DD | Developmental Delay | DC | Dominant Chronic Disease |
| HLD | Hyperlipidemia | MC | Moderate Chronic Disease |
| Osteo | Osteoarthritis | SA | Significant Acute Disease |
| Schizop | Schizophrenia | | |
| VASD | Ventricular and Atrial Septal Defects | | |

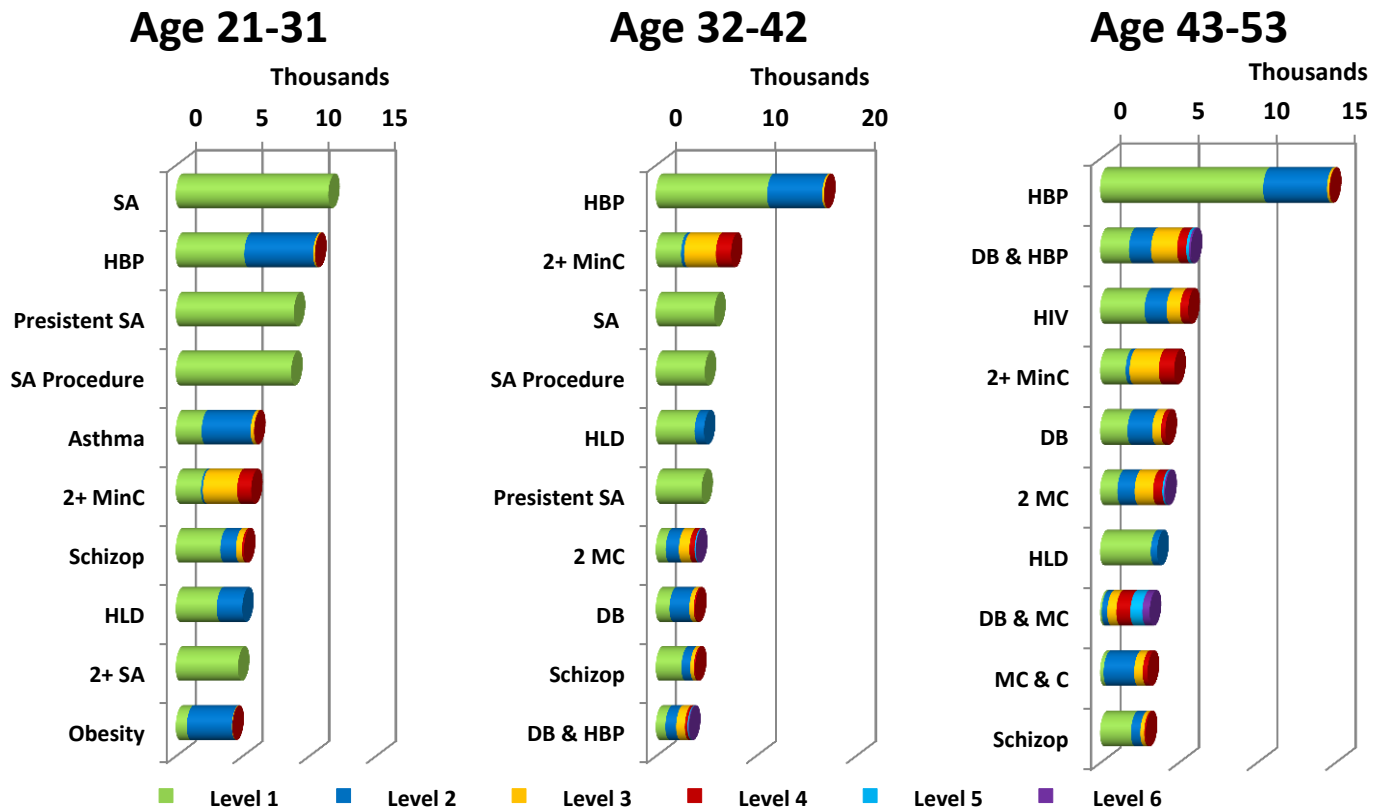
Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

By Age

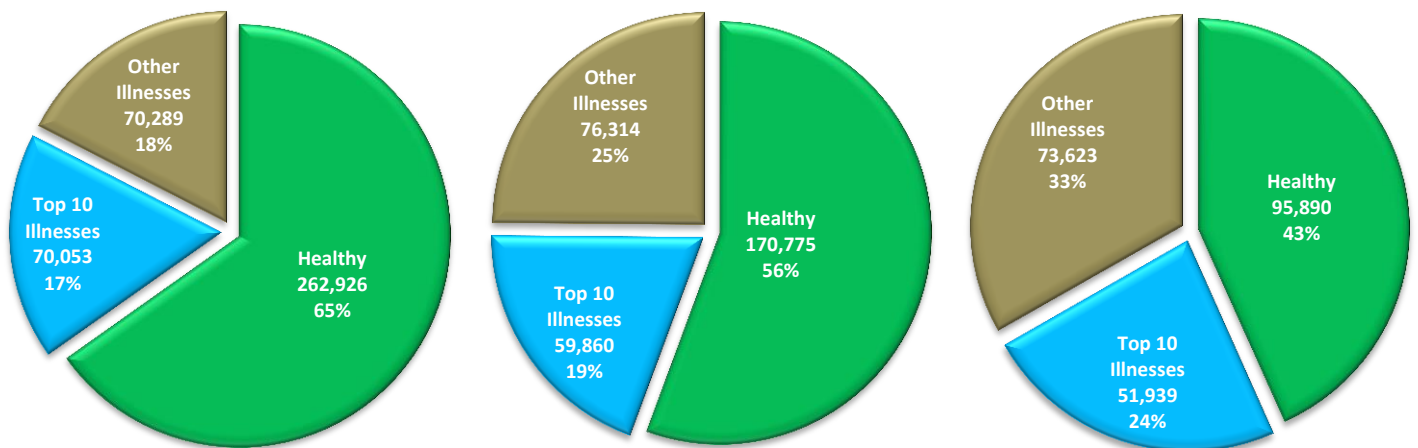
Acute illnesses and asthma dominate the top illnesses of newborns under the age of one. Asthma, attention deficit / hyperactivity disorder, and acute illnesses dominate the illnesses of children between the ages of one and twenty.

An acute illness is characterized by a rapid onset and time limited duration. It does not place the individual at risk for development of a chronic disease.

Figure 19: Top 10 Illnesses of the Medicaid Population Twenty-one Years of Age or Over, August 2014-July 2015

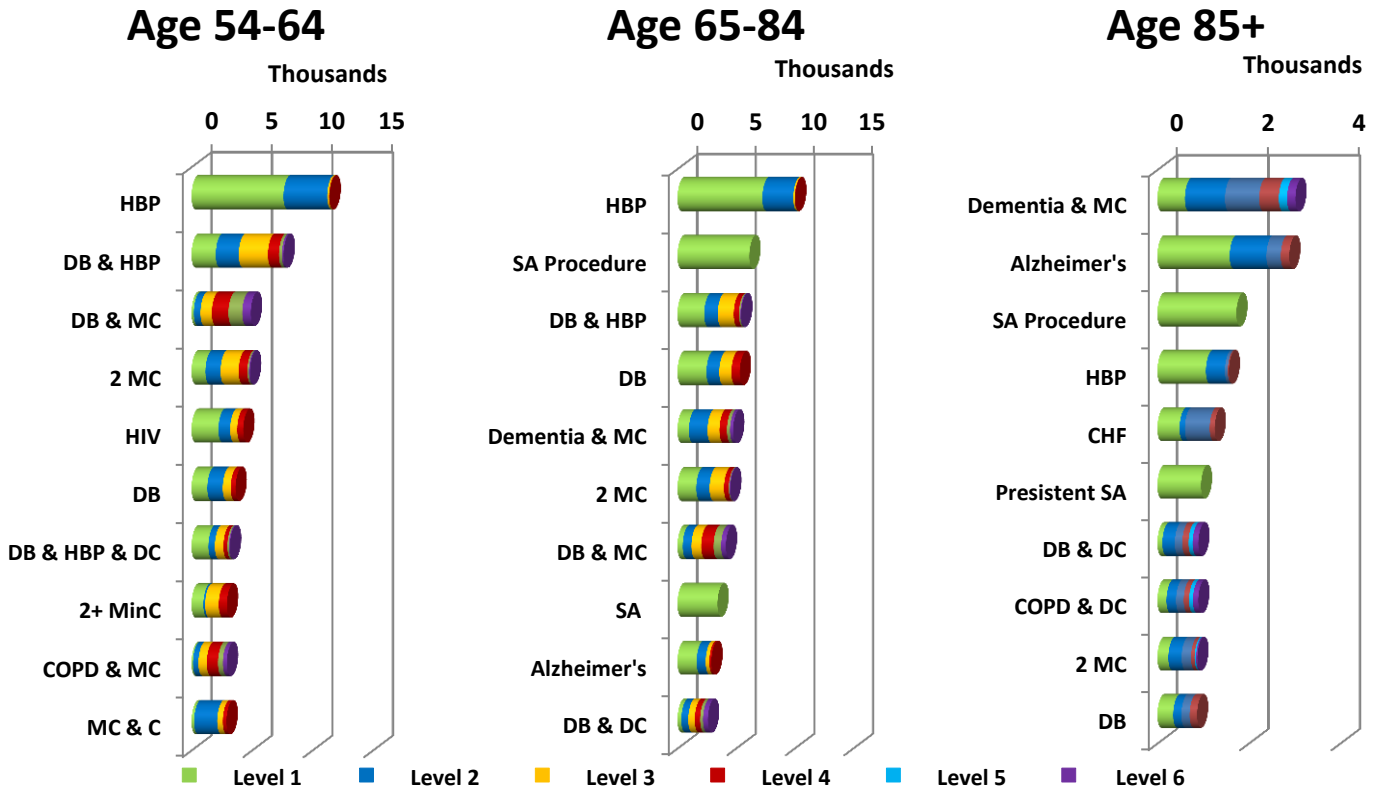


Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.

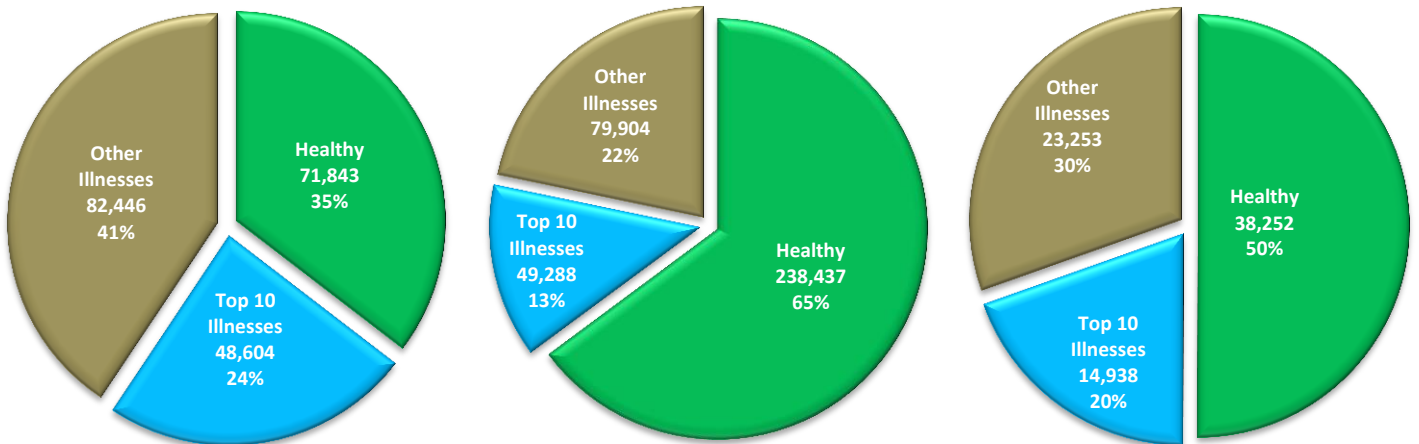


Among adults 21 years and older, acute illness becomes less prevalent as individuals age, and hypertension becomes more prevalent, dominating illnesses for adults in Medicaid through their 30s, 40s, 50s, 60s, 70s, and mid-80s. Chronic illnesses such as diabetes, HIV, and Chronic Obstructive Pulmonary Disease become more common for adults in their 40s and older. Dementing illnesses and Alzheimer’s become the dominant illnesses for adults 85 and over. Alzheimer’s disease involves parts of the brain that control thought, memory, and language and over time can seriously affect a person’s ability to carry out daily activities. Although the cause is still unknown, it is believed to be influenced by a mix of genetic, environmental, and lifestyle factors.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



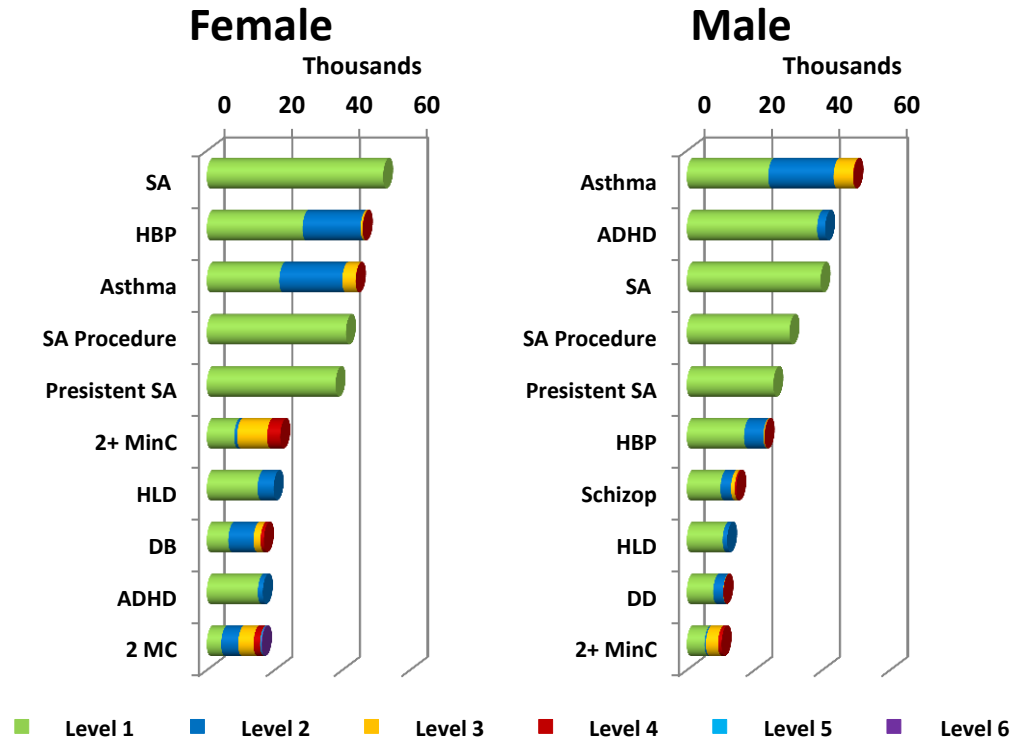
| | | | |
|---------|---------------------------------------|------|---------------------------|
| CHF | Congestive Heart Failure | 2+ | Two or More |
| COPD | Chronic Obstructive Pulmonary Disease | C | Chronic |
| DB | Diabetes | DC | Dominant Chronic Disease |
| HLD | Hyperlipidemia | MC | Moderate Chronic Disease |
| HBP | Hypertension | MinC | Minor Chronic |
| Schizop | Schizophrenia | SA | Significant Acute Disease |

By Sex

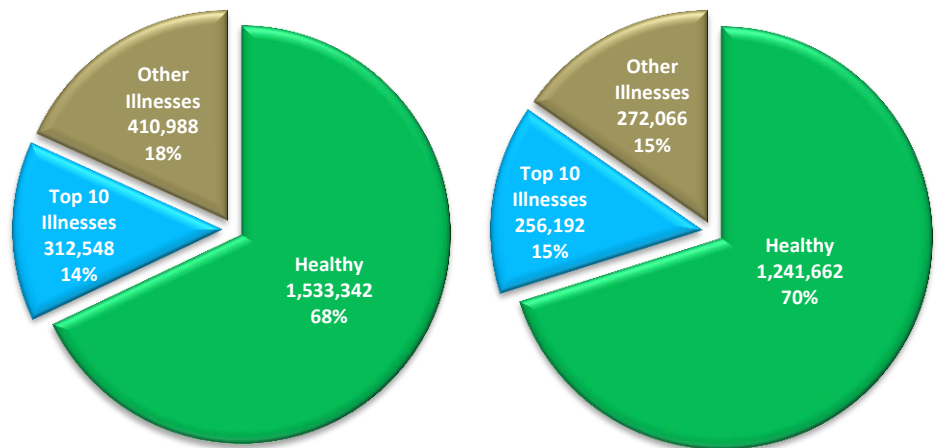
Acute illnesses, asthma, and hypertension are the most common illnesses for girls and women in Medicaid. Acute illnesses are also among the most common illnesses for boys and men in Medicaid, however asthma and attention deficit/hyperactivity disorder are the leading illnesses for boys and men.

ADHD is a chronic condition characterized by an inability to focus, over-activity, and/or an inability to control behavior which can interfere with normal functions and development. It can be treated with medications and therapies.

Figure 20: Top 10 Illnesses of the Medicaid Population by Sex, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.

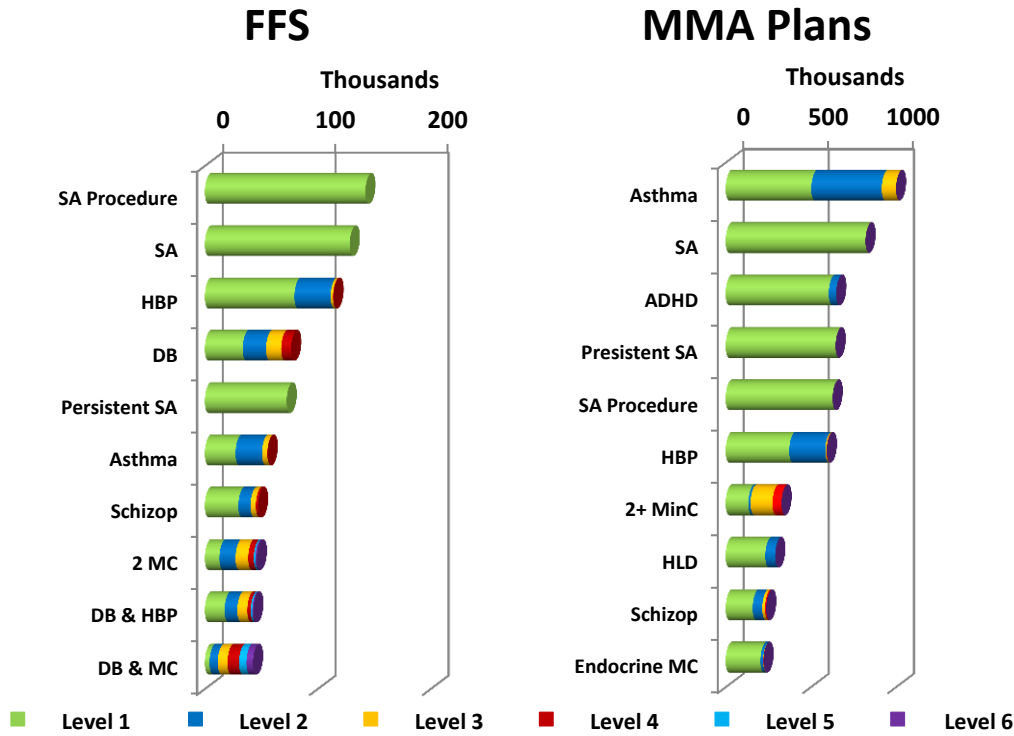


| | |
|---------|--|
| ADHD | Attention Deficit / Hyperactivity Disorder |
| DB | Diabetes |
| DD | Developmental Delay |
| HLD | Hyperlipidemia |
| HBP | Hypertension |
| Schizop | Schizophrenia |

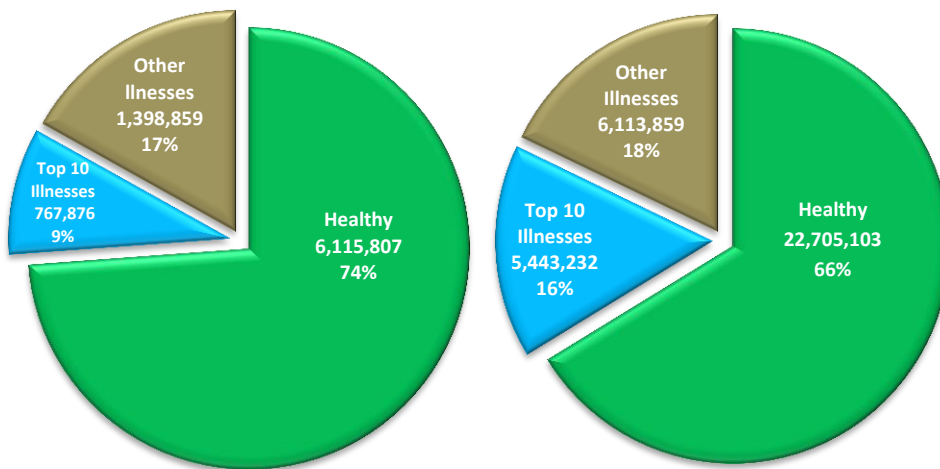
| | |
|------|---------------------------|
| 2+ | Two or More |
| MC | Moderate Chronic Disease |
| MinC | Minor Chronic |
| SA | Significant Acute Disease |

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 21: Top 10 Illnesses of the Fee-for-Service and MMA Populations, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



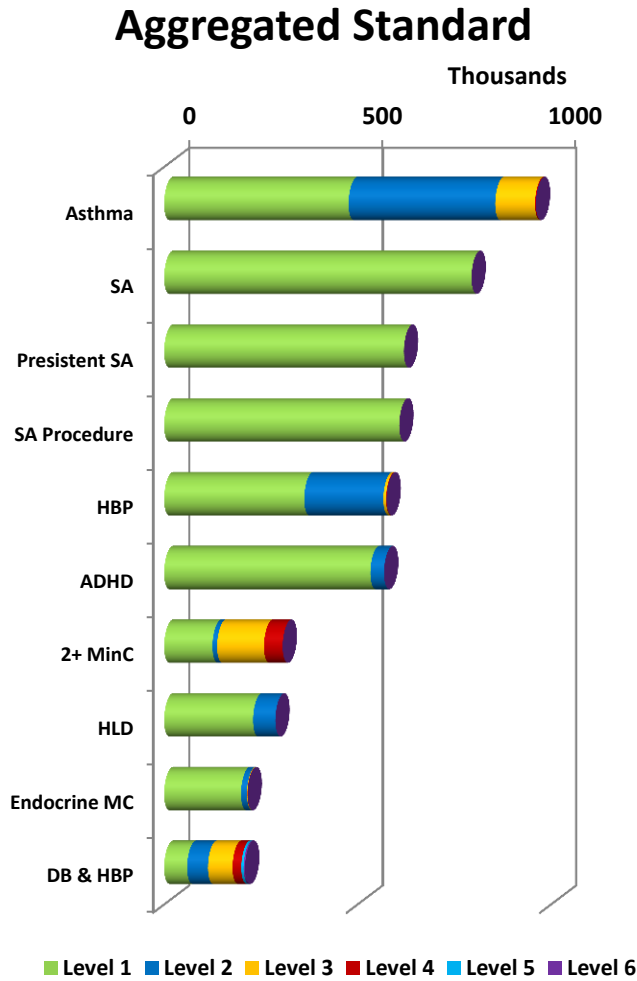
Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

| | | | |
|---------|--|------|---------------------------|
| ADHD | Attention Deficit / Hyperactivity Disorder | 2+ | Two or More |
| DB | Diabetes | MC | Moderate Chronic Disease |
| HLD | Hyperlipidemia | MinC | Minor Chronic |
| HBP | Hypertension | SA | Significant Acute Disease |
| Schizop | Schizophrenia | | |

By MMA Plan

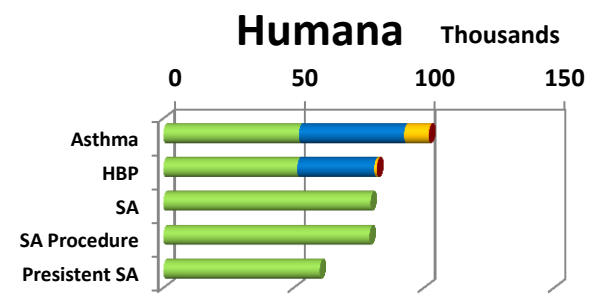
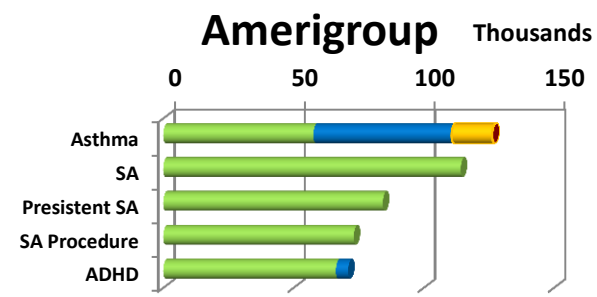
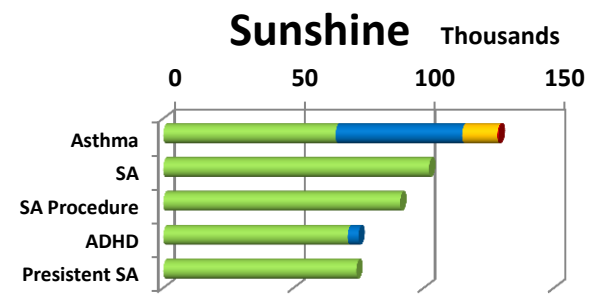
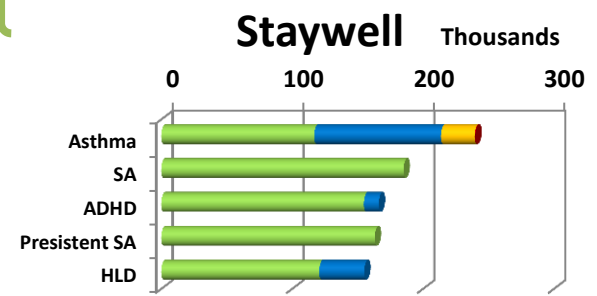
Asthma and attention deficit / hyperactivity disorder are the only non-acute illnesses among the top 5 illnesses for MMA Plans. In contrast, hypertension and diabetes are the only non-acute illnesses among the top 5 illnesses for the Fee-for-Service population.

Figure 22: Top 10 Illnesses of Standard Plan Enrollees, August 2014-July 2015

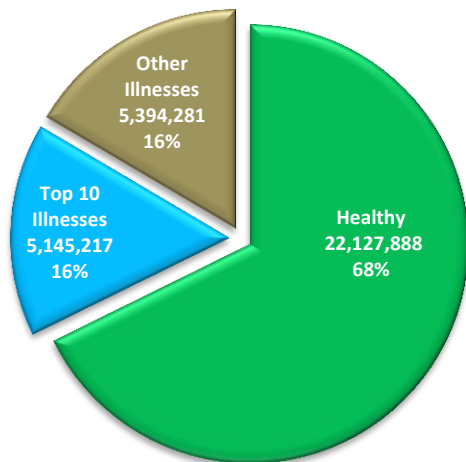


Asthma, acute illness, and hypertension are among the top illnesses for Standard plans although the order of prevalence varies from plan to plan.

Maximum axis values and population sizes vary between the MMA Plans.

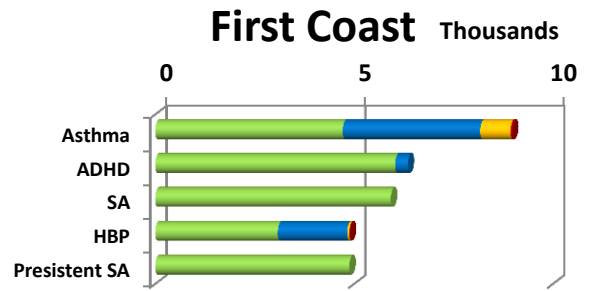
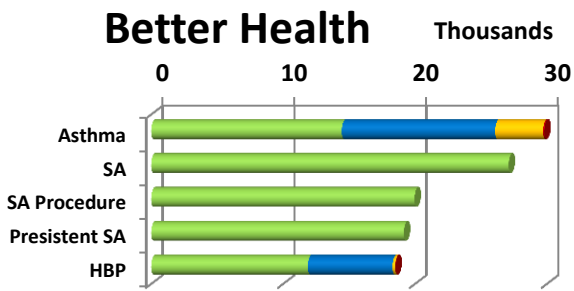
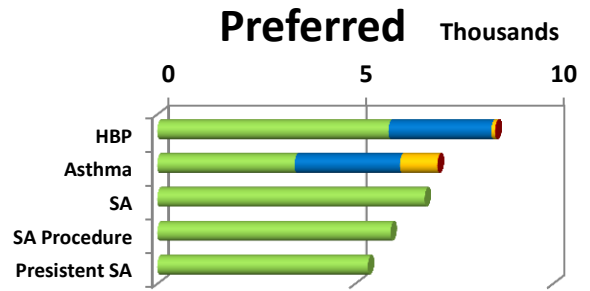
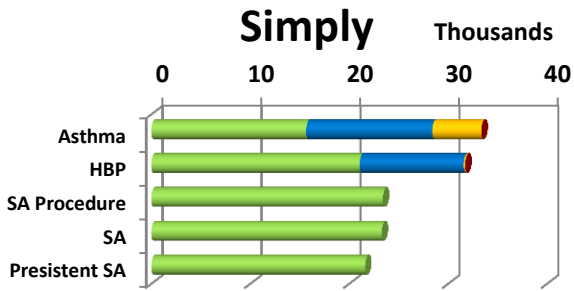
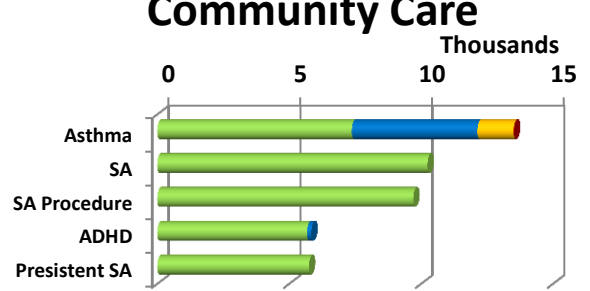
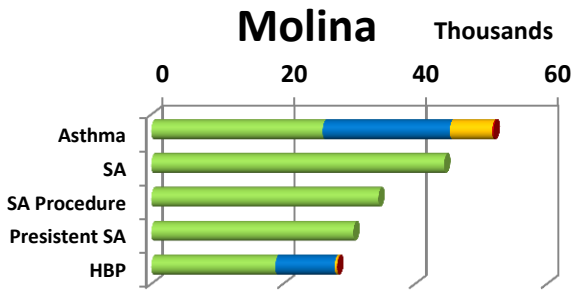
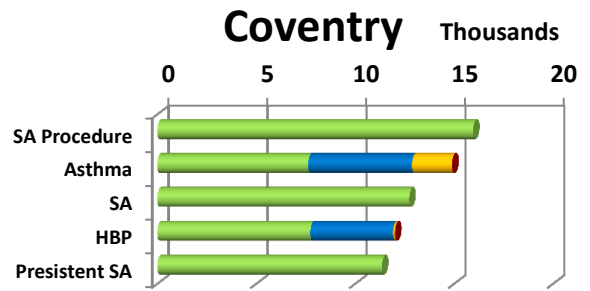
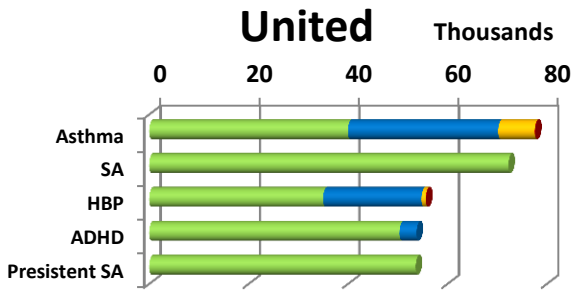
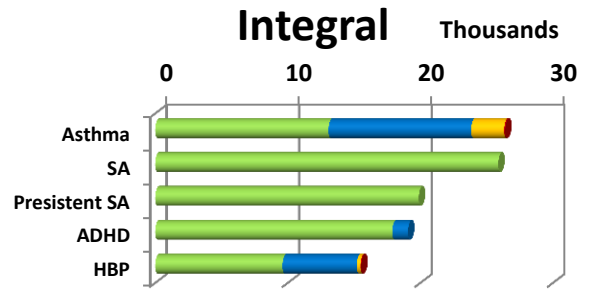
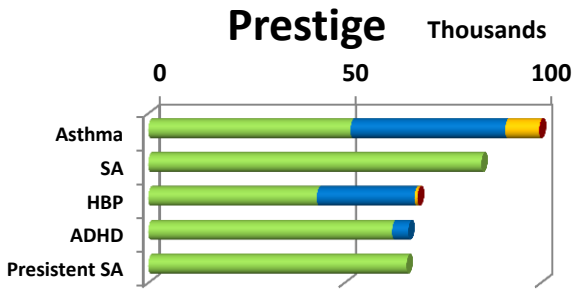


Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



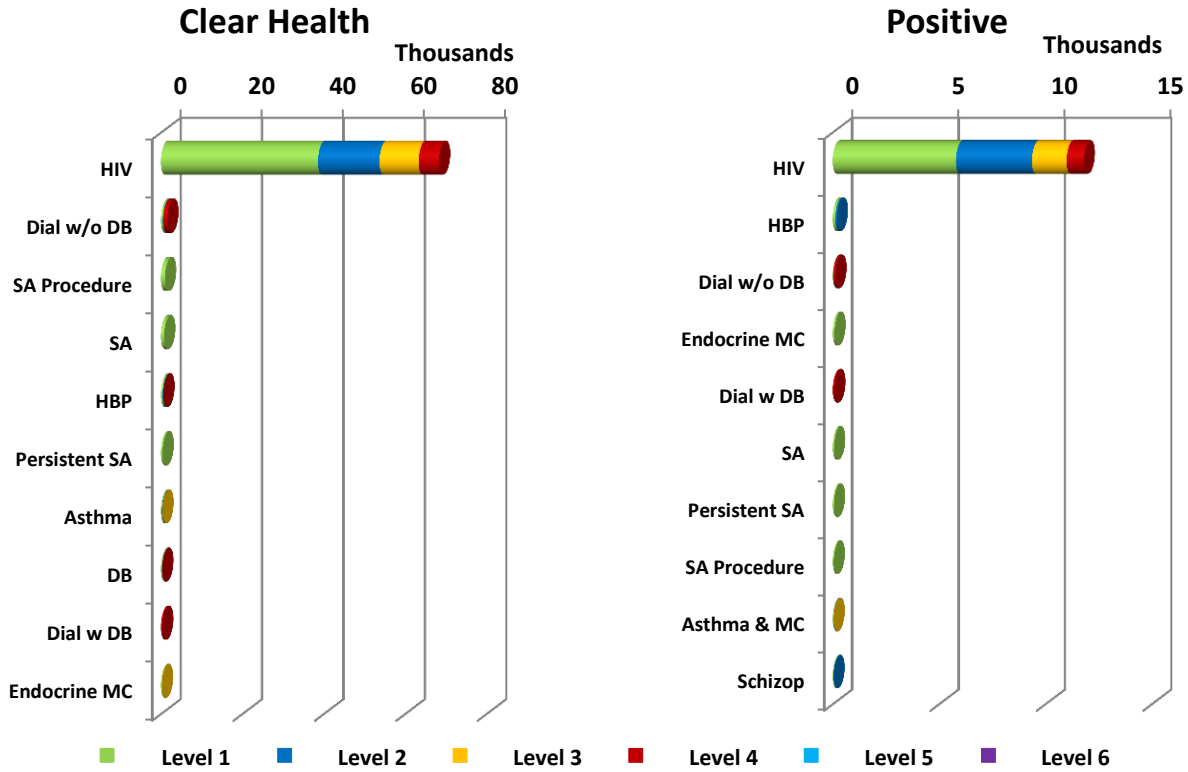
| | | | |
|------|--|------|---------------------------|
| ADHD | Attention Deficit / Hyperactivity Disorder | 2+ | Two or More |
| DB | Diabetes | MC | Moderate Chronic Disease |
| HLD | Hyperlipidemia | MinC | Minor Chronic |
| HBP | Hypertension | SA | Significant Acute Disease |

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

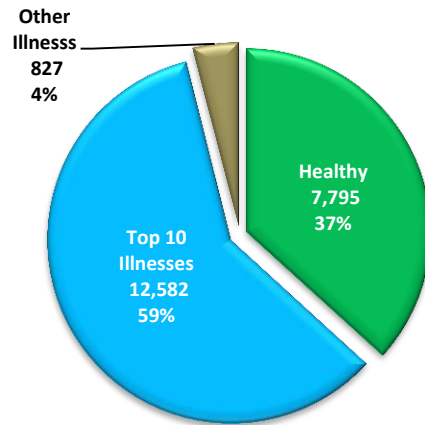
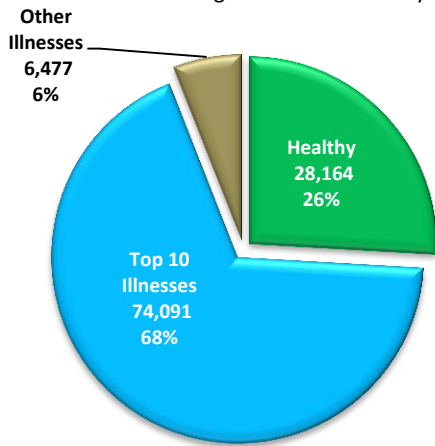


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person's CRG with the number of member months the person was enrolled in a plan or the FFS program.

Figure 23: Top 10 Illnesses of HIV/AIDS Specialty Plan Enrollees, August 2014-July 2015



Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.



HIV is the predominant disease among enrollees in Clear Health and Positive, the two HIV/AIDS Specialty Plans.

The population size is significantly higher in Clear Health than in Positive Health Care.

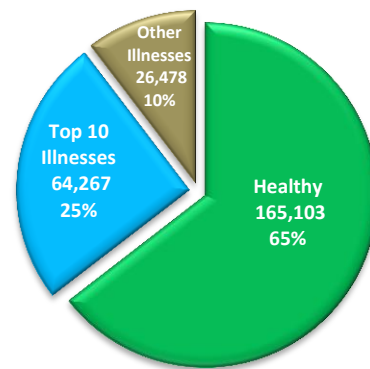
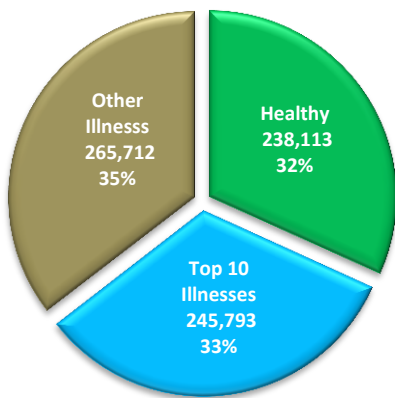
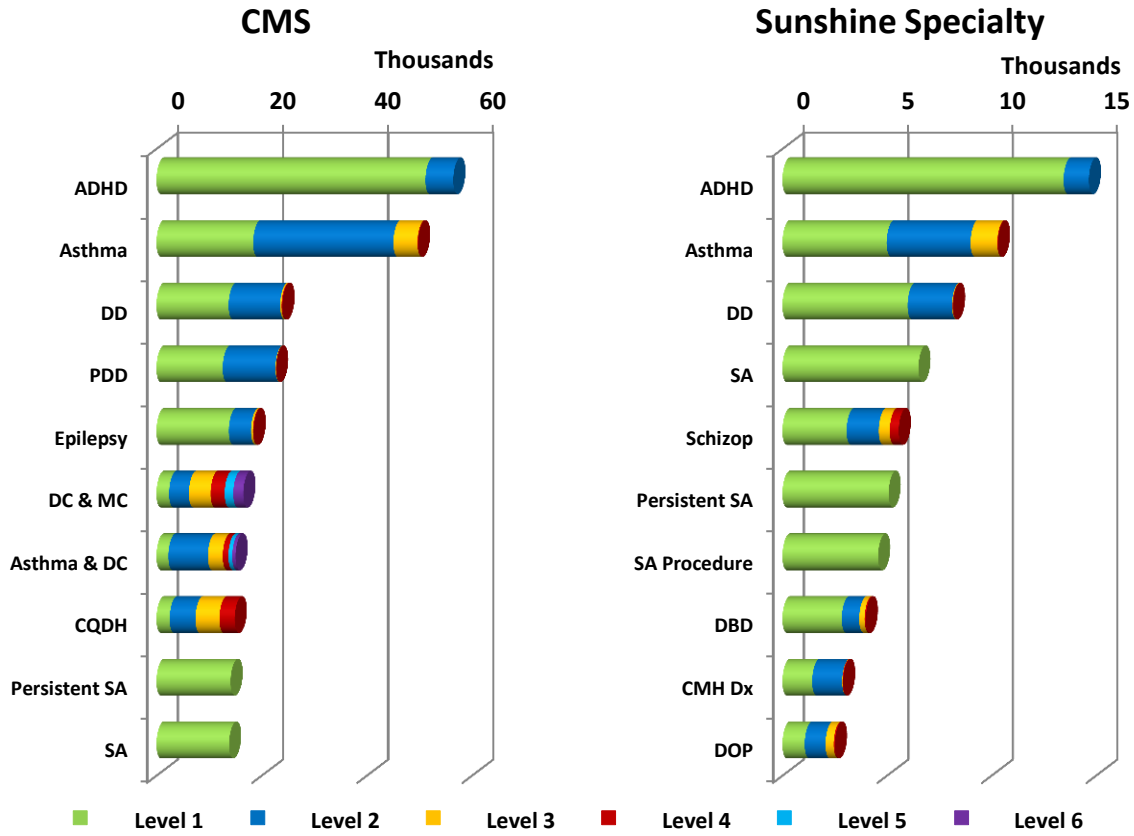
| | |
|---------|---------------|
| DB | Diabetes |
| Dial | Dialysis |
| HBP | Hypertension |
| Schizop | Schizophrenia |

| | |
|----|---------------------------|
| MC | Moderate Chronic Disease |
| SA | Significant Acute Disease |

Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person's CRG with the number of member months the person was enrolled in a plan or the FFS program.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 24: Top 10 Illnesses of Children’s Specialty Plan Enrollees, August 2014-July 2015



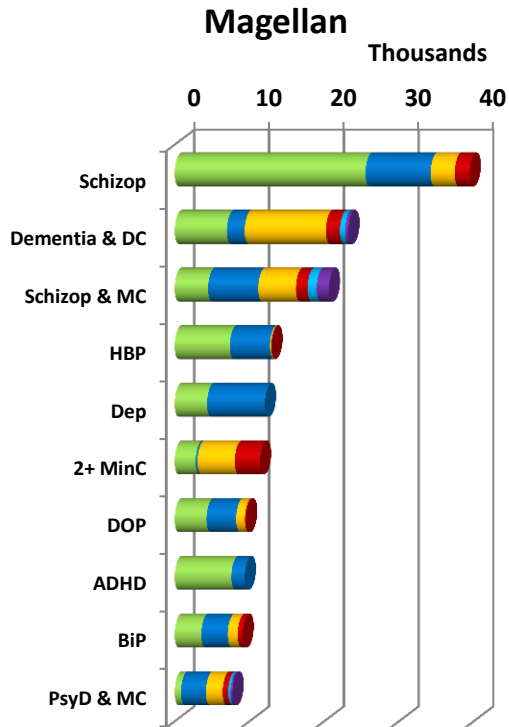
Attention deficit / hyperactivity disorder, asthma, and developmental delay are the predominant diseases among enrollees in CMS, the Specialty Plan for children with chronic conditions, and Sunshine Specialty, the Specialty Plan for Child Welfare.

| | |
|---------|---|
| CMH Dx | Chronic Mental Health Diagnoses - Moderate |
| CQDH | Congenital Quadriplegia, Diplegia or Hemiplegia |
| DOP | Depressive and Other Psychoses |
| DD | Developmental Delay |
| PDD | Pervasive Development Disorder |
| Schizop | Schizophrenia |

| | |
|----|---------------------------|
| DC | Dominant Chronic Disease |
| MC | Moderate Chronic Disease |
| SA | Significant Acute Disease |

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 25: Top 10 Illnesses of Severe Mental Illness Specialty Plan Enrollees, August 2014-July 2015

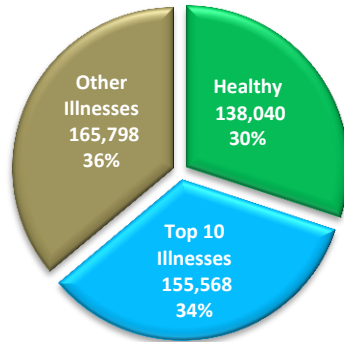


The most common diseases among enrollees in Magellan, the Specialty Plan for serious mental illness, are schizophrenia, dementia, hypertension, and depression.

Schizophrenia is a chronic severe mental disorder which requires lifelong treatment. It is characterized by abnormal behavior and an inability to understand what is real. Symptoms include hallucinations, delusions, and extremely disordered thinking and behavior.

■ Level 1 ■ Level 2 ■ Level 3 ■ Level 4 ■ Level 5 ■ Level 6

Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.

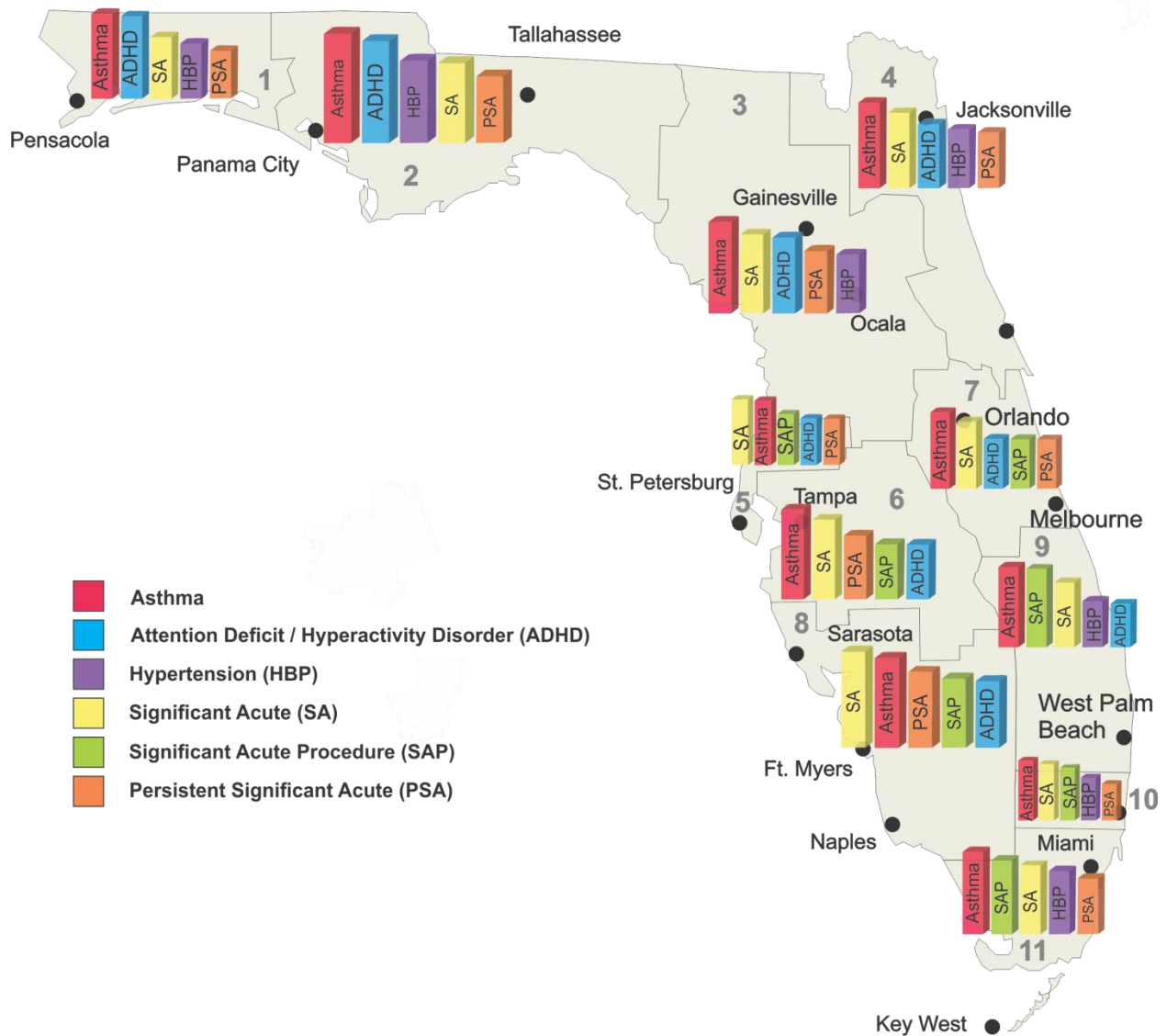


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

| | |
|---------|---|
| ADHD | Attention Deficit / Hyperactivity Disorder |
| BiP | Bi-Polar Disorder |
| Dep | Depression |
| DOP | Depressive and Other Psychoses |
| HBP | Hypertension |
| PsyD | Psychiatric Disease Excluding Schizophrenia |
| Schizop | Schizophrenia |

| | |
|------|--------------------------|
| 2+ | Two or More |
| DC | Dominant Chronic Disease |
| MC | Moderate Chronic Disease |
| MinC | Minor Chronic |

Figure 26: Top 5 Illnesses by Region, August 2014-July 2015



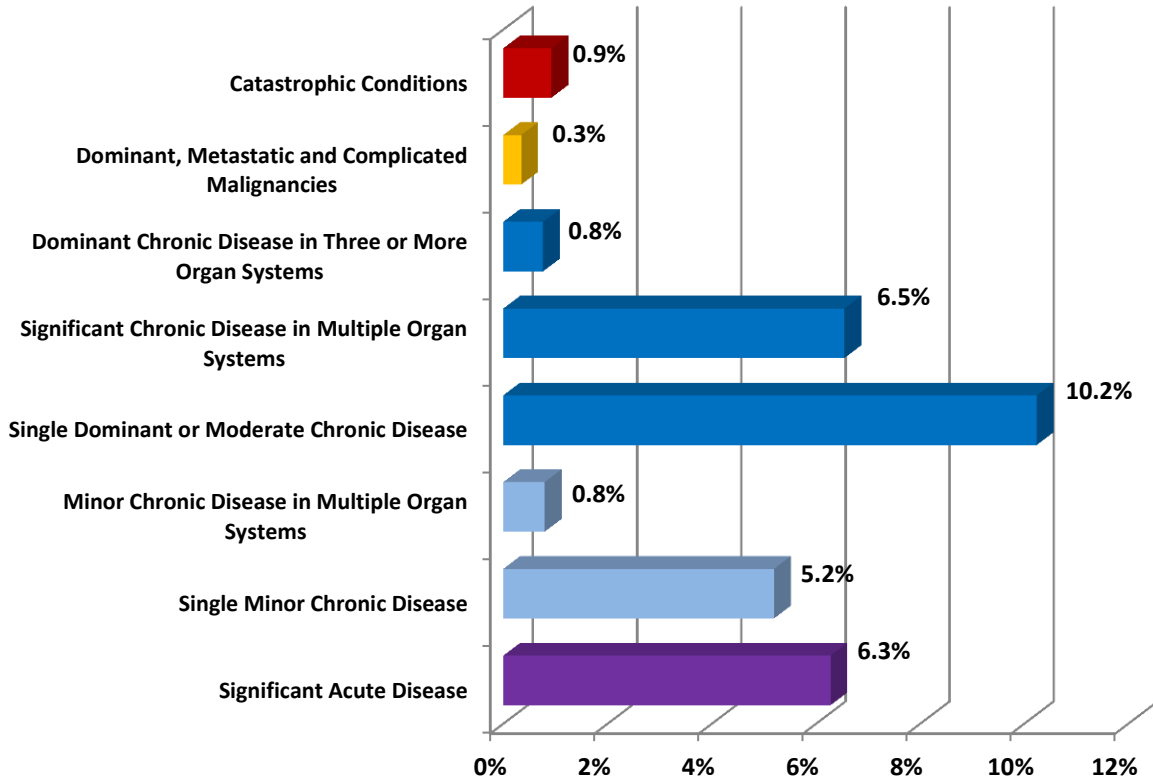
Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person’s CRG with the number of member months a person resided in a region.

Asthma, attention deficit / hyperactivity disorder, significant acute illness, and hypertension, are among the most common illnesses in most Florida regions. The order of prevalence varies slightly from region to region.

Top Illnesses by Health Status

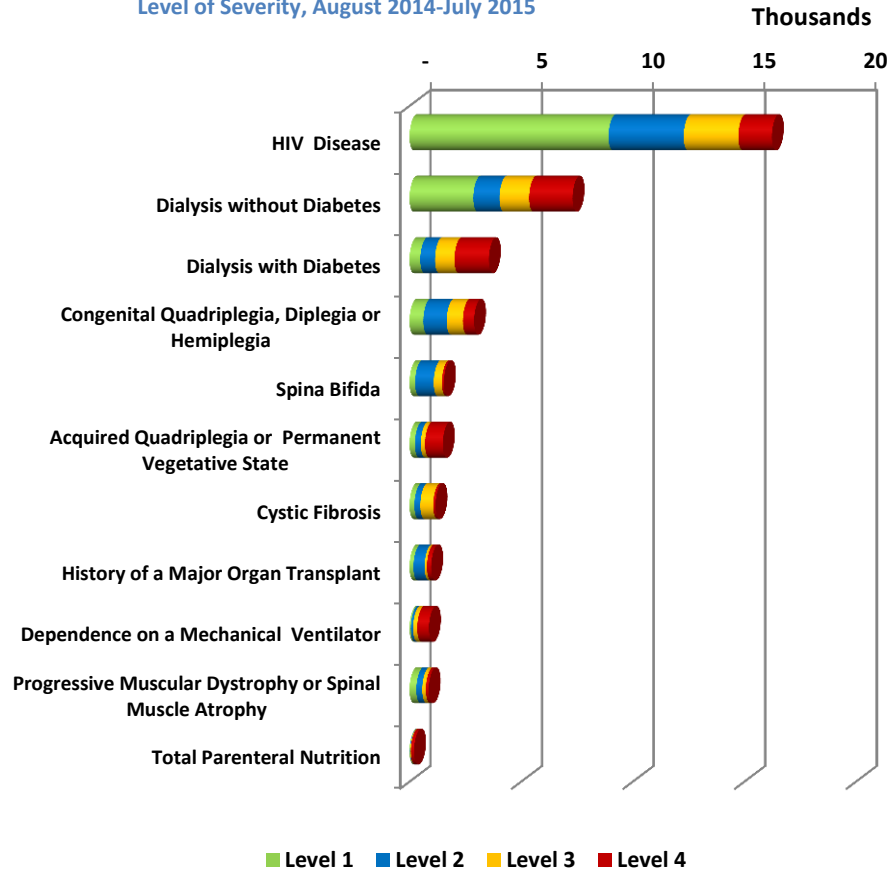
Each of the 8 non-healthy health statuses is defined by a specific set of illnesses. Within each health status, detailed CRG categories are ranked in order of most to least frequent to examine which illnesses dominates each health status. This allows us to see which illnesses are most common among Medicaid recipients with chronic illnesses.

Figure 27: Percentage of Medicaid Population Classified in a Non-Healthy Status by Health Status, August 2014-July 2015



Health Status 9-Catastrophic Conditions

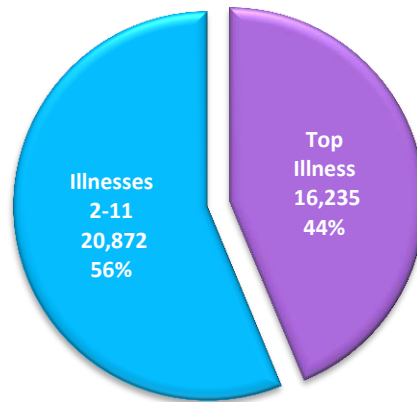
Figure 28: Number of Recipients with Health Status 9 by CRG and Level of Severity, August 2014-July 2015



A Catastrophic Conditions health status is assigned to an individual when one of eleven chronic illnesses is present. The chart to the left lists each of the illnesses and displays its prevalence across the population. It also displays the number of people within each severity level.

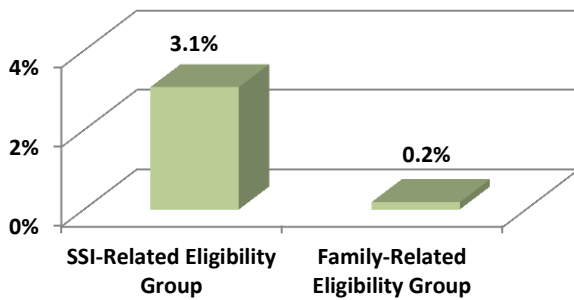
Note: Higher levels of severity indicate a greater extent and progression of the chronic disease.

Figure 29: Top Catastrophic Conditions Compared to All Other Conditions, August 2014-July 2015



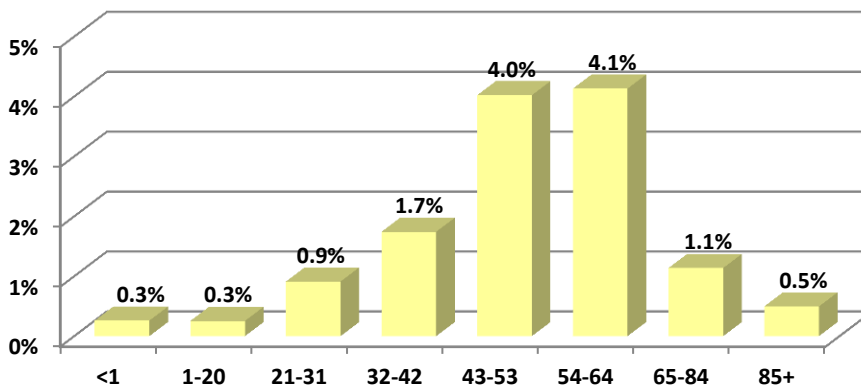
HIV is the most prevalent disease affecting 44 percent of those with a catastrophic condition. Fifty-six percent of people with HIV are categorized as severity level 1 or the least severe.

Figure 30: Percentage of Eligibility Groups with a Catastrophic Condition, August 2014-July 2015



A larger percentage of recipients that are eligible for Medicaid because they are aged or disabled have a catastrophic condition as compared to recipients in the Family-Related eligibility group.

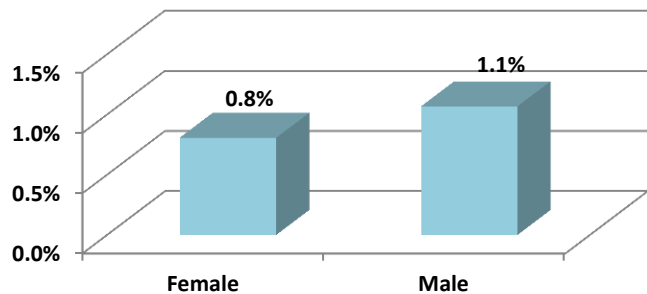
Figure 31: Percentage of Age Groups with a Catastrophic Condition, August 2014-July 2015



A larger percentage of recipients between the ages of 43 and 64 have a catastrophic condition compared to recipients in other age groups.

A slightly larger percentage of males than females have a catastrophic condition.

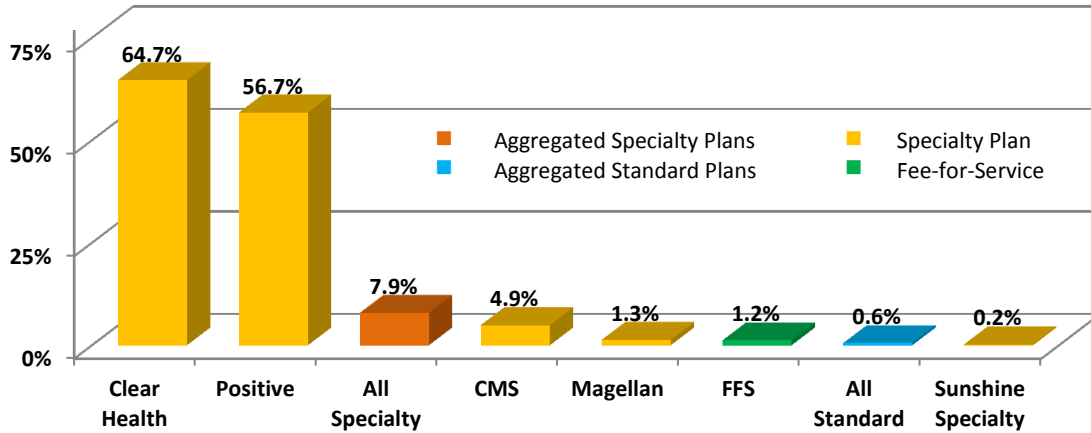
Figure 32: Percentage of Females and Males with a Catastrophic Condition, August 2014-July 2015



Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

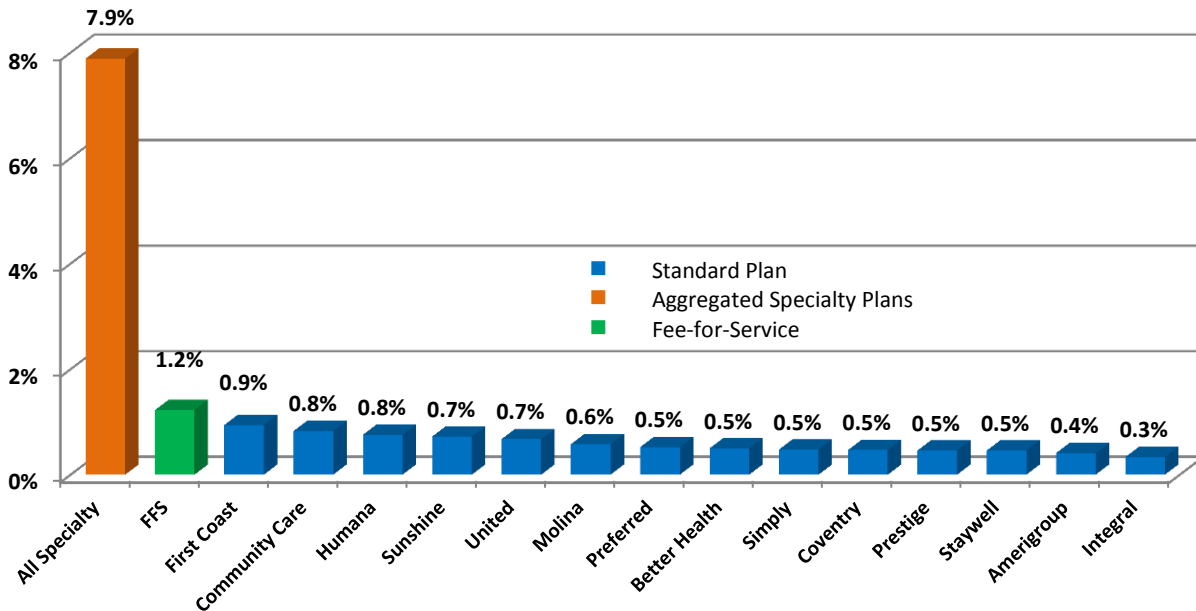
Only 0.9 percent of Medicaid recipients are classified in the Catastrophic Conditions health status. Almost eight percent of all Specialty Plans’ enrollees are classified with a Catastrophic Conditions health status. Sunshine Specialty Plan has the smallest percentage of enrollees with this health status category. Positive and Clear Health, the two HIV Specialty Plans, have the largest percentage of enrollees with a Catastrophic Conditions health status.

Figure 33: Percentage of Specialty Plan Enrollee Months with a Catastrophic Condition, August 2014-July 2015



A very small percentage of Standard Plans’ enrollees have a health status of Catastrophic Conditions. Overall, only 0.6 percent of the enrollees in a Standard plan are in this health status. A little over one percent of recipients in the fee-for-service program are classified in the Catastrophic Conditions category.

Figure 34: Percentage of Standard Plan Enrollee Months with a Catastrophic Condition, August 2014-July 2015

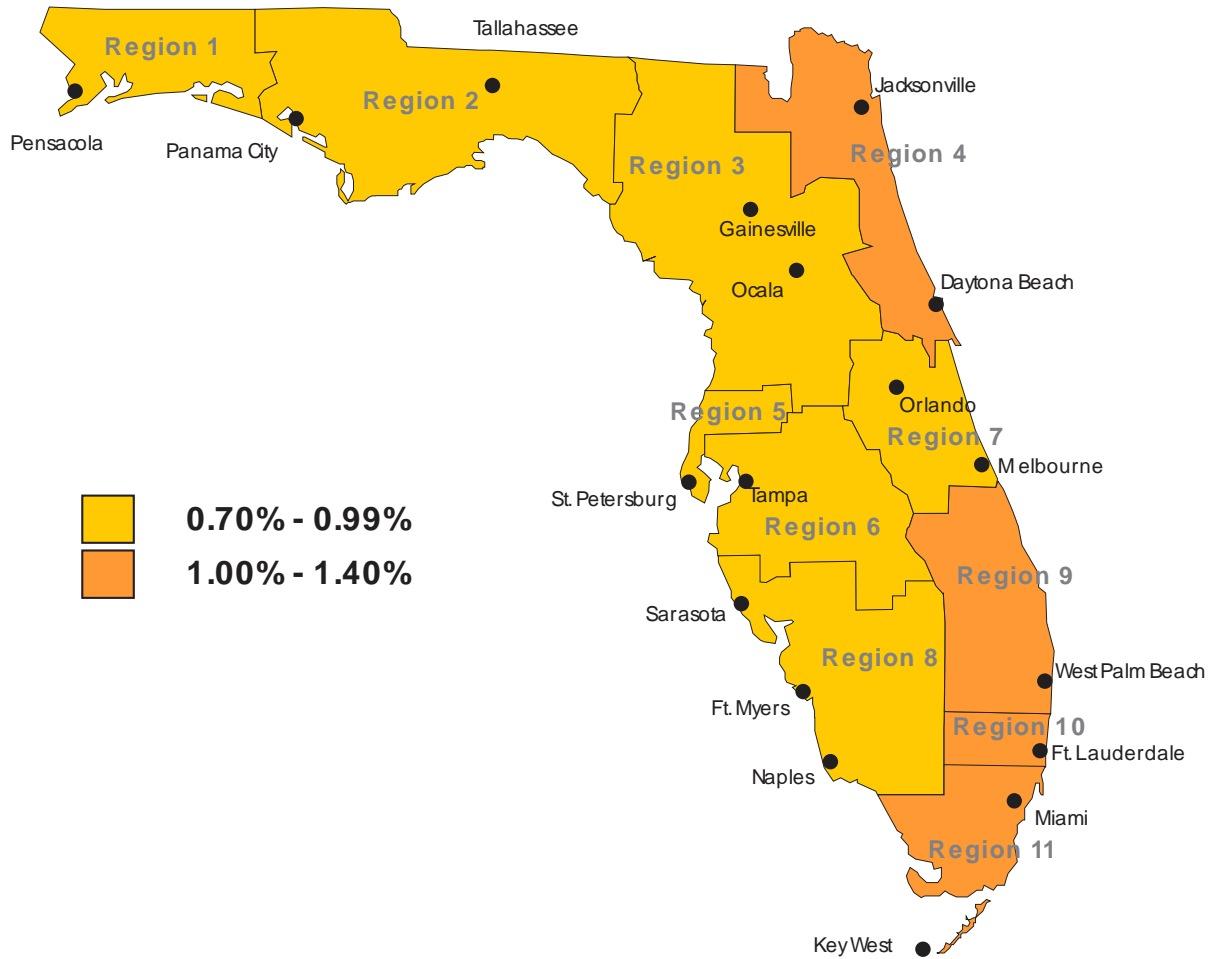


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Regions 4, 9, 10, and 11 are the only regions where more than 1 percent of the region’s recipients are classified with a catastrophic condition.

Figure 35: Percentage of Regions’ Recipients with a Catastrophic Condition, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person’s CRG with the number of member months a person resided in a region.

Health Status 8-Dominant, Metastatic or Complicated Malignancies

Figure 36: Number of Recipients with Health Status 8 by CRG and Level of Severity, August 2014-July 2015

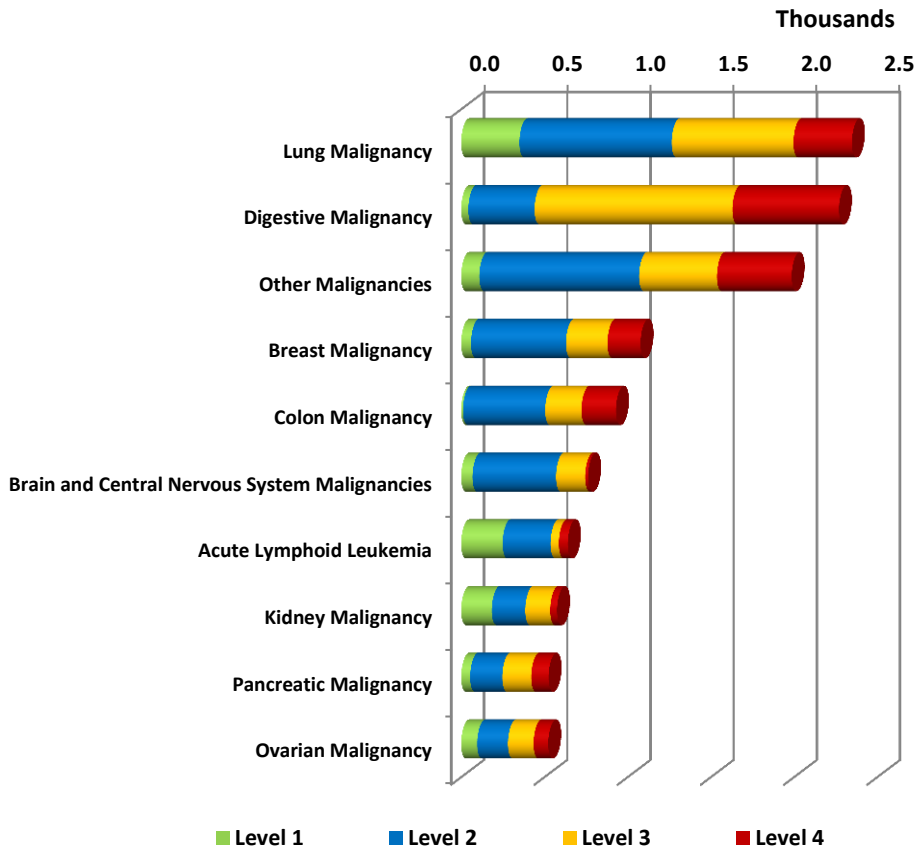
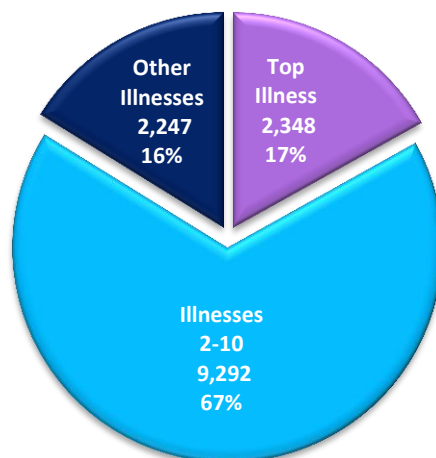


Figure 37: Top Malignancy Compared to All Other Illnesses, August 2014-July 2015



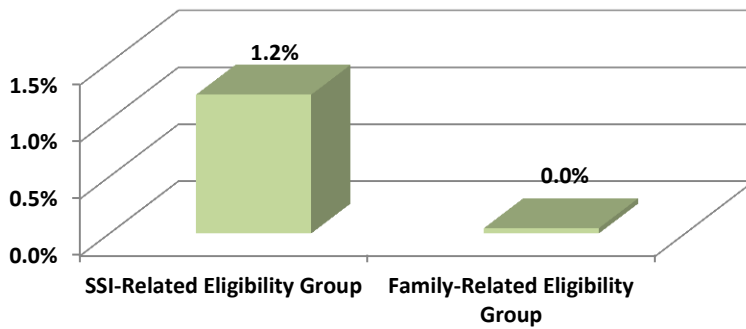
Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

A Dominant, Metastatic or Complicated Malignancies health status is assigned when an individual has one of 22 dominant or chronic malignancies. Each of the malignancies is divided into one of four severity levels.

The following chart depicts the ten most prevalent malignancies along with the severity levels of individuals in this health status. Most of the individuals in this health status are Severity Level 2 and 3. Digestive Malignancy has the largest number of individuals in Severity Level 4.

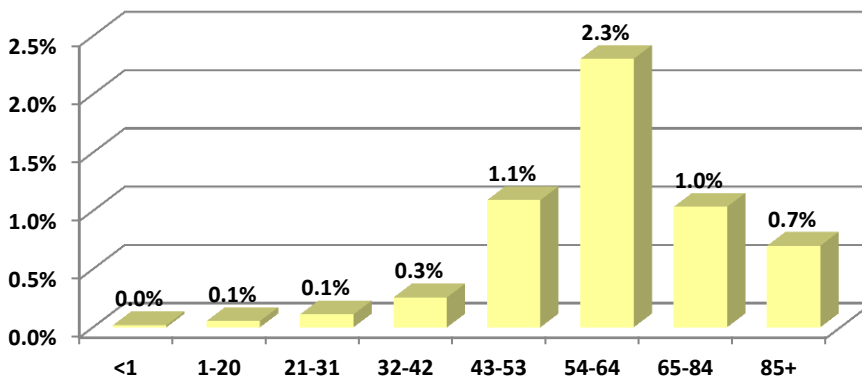
Lung malignancies are the top illness with 17 percent or nearly 3,000 individuals. Eighty-two percent of the individuals in this category have one of the top ten chronic illnesses.

Figure 38: Percentage of Eligibility Groups with a Malignancy, August 2014-July 2015



The percentage of recipients with a metastatic health status increases among 43 to 53 year olds and reaches its maximum among 54 to 64 year olds.

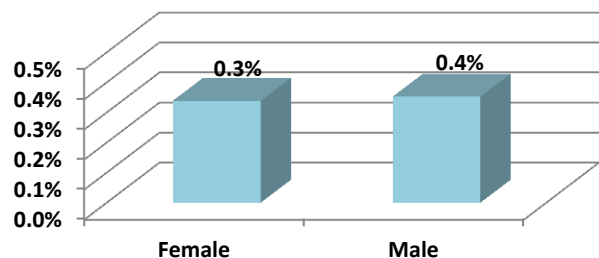
Figure 39: Percentage of Age Groups with a Malignancy, August 2014-July 2015



A larger percentage of recipients in the SSI-Related eligibility group than Family-Related eligibility group have a dominant, metastatic, or complicated malignancy. From Health Status 9 through Health Status 4, a larger percentage of recipients in the SSI-Related eligibility group have the health status than the Family-Related eligibility group.

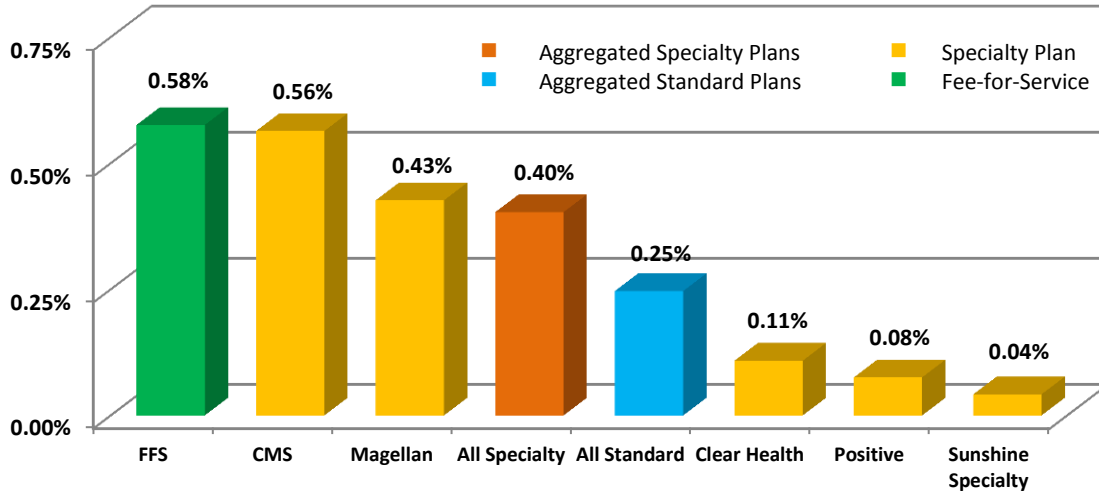
There is little difference by gender in the percentage of recipients in the metastatic health status.

Figure 40: Percentage of Females and Males with a Malignancy, August 2014-July 2015



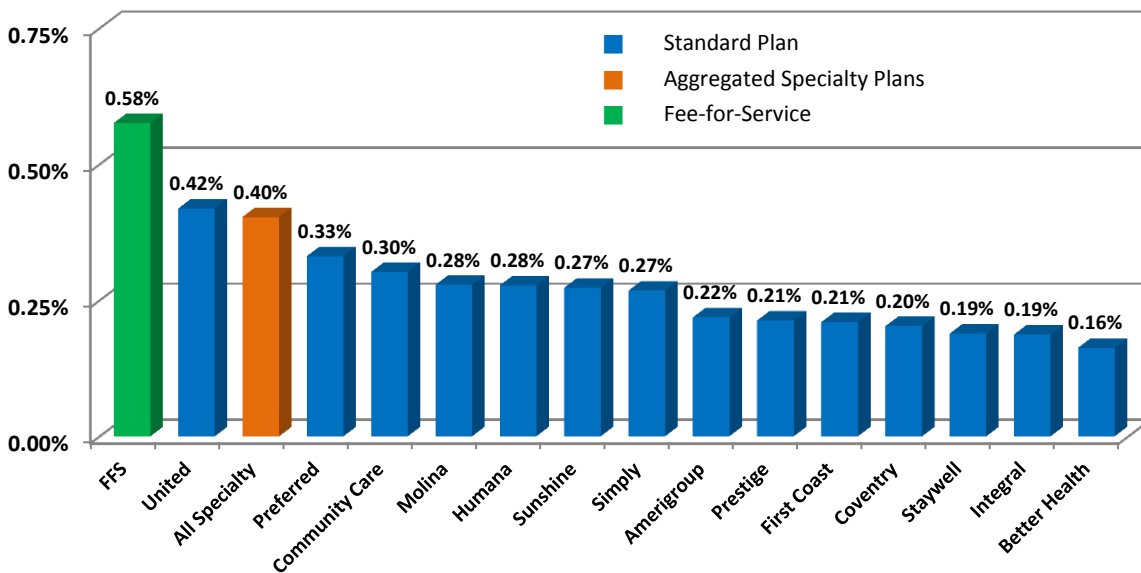
Only 0.3 percent of the Medicaid population is classified in Dominant, Metastatic, or Complicated Malignancies. On average, Specialty Plans had 0.4 percent of their enrollees in this health status. CMS had the largest percentage of enrollees of all the Specialty Plans. Fee-for-service has the largest percentage of recipients in this category.

Figure 41: Percentage of Specialty Plan Enrollee Months with a Malignancy, August 2014-July 2015



Overall, 0.3 percent of Standard Plans' enrollees are in this category. United has the largest percentage of Standard Plan enrollees in this health status with 0.42 percent.

Figure 42: Percentage of Standard Plan Enrollee Months with a Malignancy, August 2014-July 2015

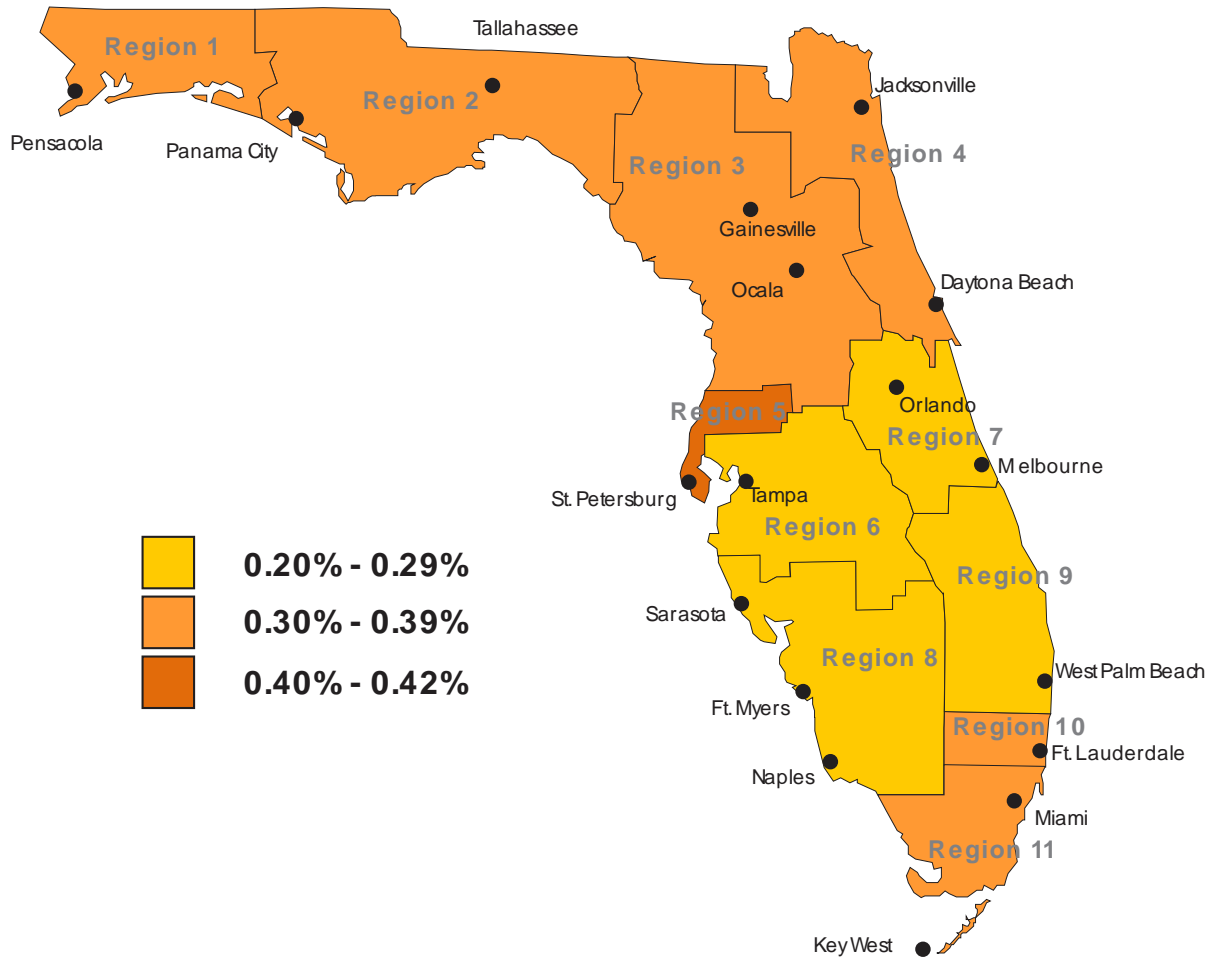


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person's CRG with the number of member months the person was enrolled in a plan or the FFS program.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

A larger percentage of recipients in Regions 5 than any other region are in the dominant metastatic health status. Regions 6, 7, 8, and 9 have the smallest percentage of recipients in this health status.

Figure 43: Percentage of Regions' Population with Malignancies, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Health Status 7-Dominant Chronic Disease in Three or More Organ Systems

Figure 44: Number of Recipients with Health Status 7 by CRG and Level of Severity, August 2014-July 2015

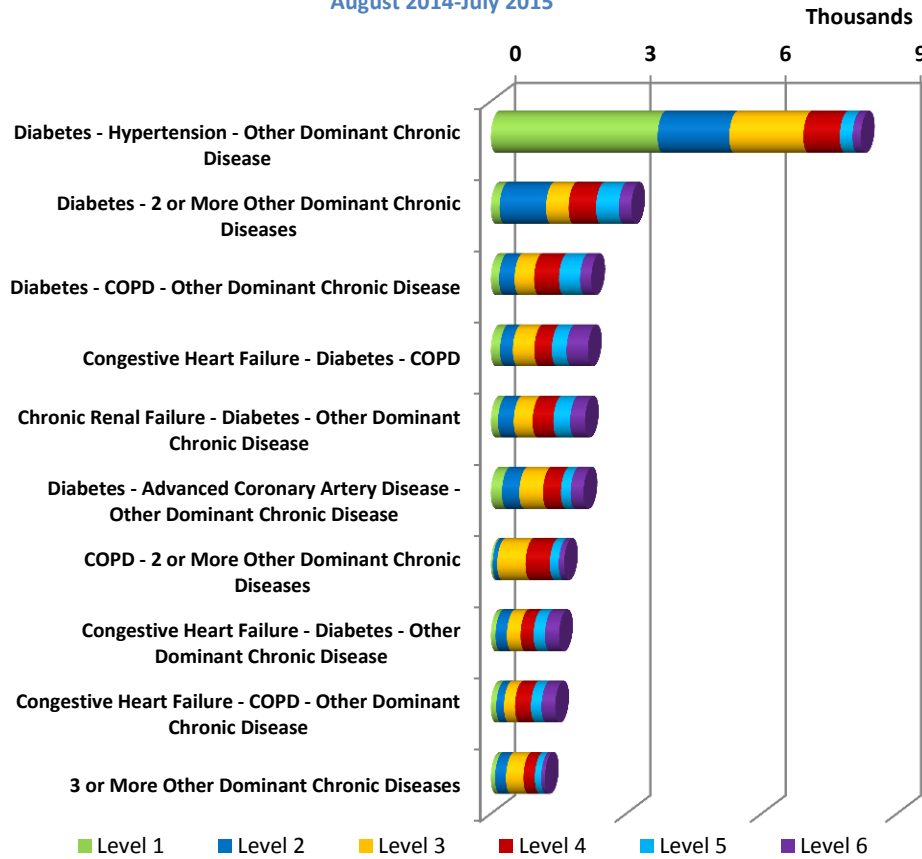
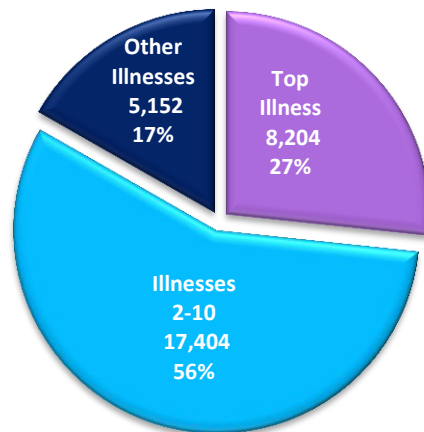


Figure 45: Top Dominant Chronic Disease in Three or More Organ Systems Compared to All Other Illnesses, August 2014-July 2015

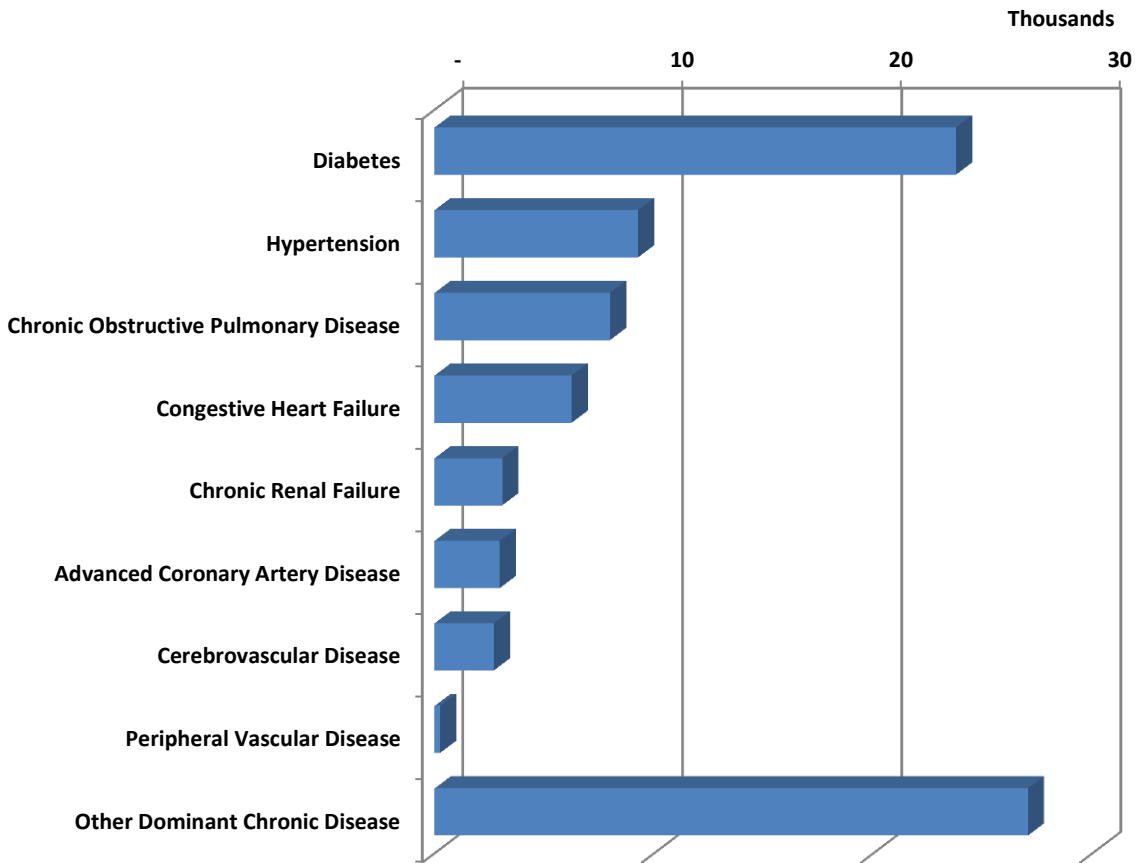


Dominant Chronic Disease in Three or More Organ Systems is assigned when an individual has one of 21 dominant or moderate chronic illnesses in three or more organ systems. The combination of illnesses is divided into one of six severity levels. The chart displays the top ten combinations of illnesses among this group along with severity levels. Diabetes and hypertension are the most common chronic illnesses in this health status. Diabetes has the most individuals classified as Severity Level 6, the most severe. Less than 1 percent of the Medicaid population is in this category.

The top ten illnesses are present in 83 percent of the individuals in this health status. Only 17 percent have a CRG below the top 10.

Individuals in this health status by definition have more than one disease. The most frequent individual illnesses among the combinations are shown in the following chart. Aside from the “other dominant disease” category, diabetes is the most prevalent disease affecting 22 percent of this group.

Figure 46: Top 10 Individual Diseases, August 2014-July 2015



Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 47: Percentage of Eligibility Groups with a Dominant Chronic Disease in 3 or More Organ Systems, August 2014-July 2015

A larger percentage of recipients in the SSI-Related eligibility group than Family-Related eligibility group are classified in this health status.

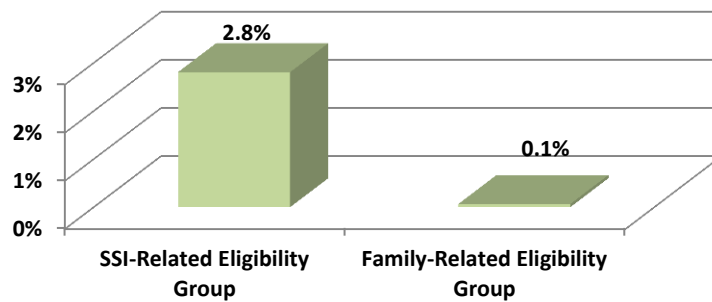


Figure 48: Percentage of Age Groups with a Dominant Chronic Disease in 3 or More Organ Systems, August 2014-July 2015

The percentage of recipients with a dominant chronic disease in three or more organ systems increases among 43 to 53 year olds and reaches its maximum among 54 to 64 year olds.

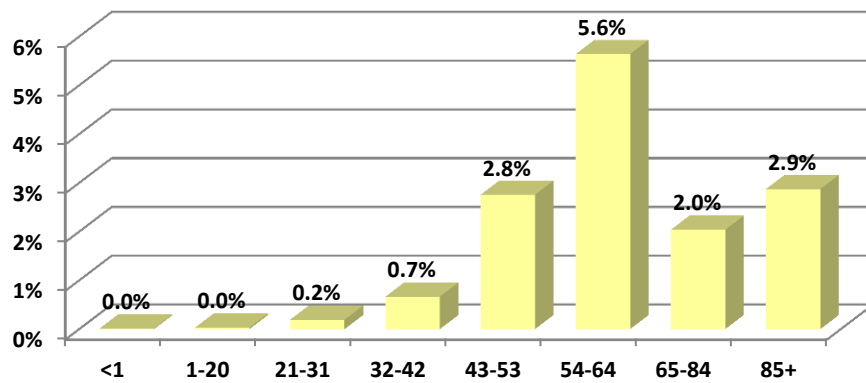
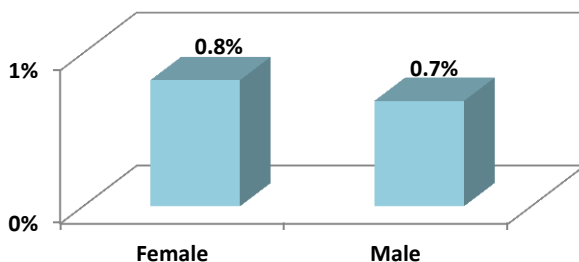


Figure 49: Percentage of Females and Males with a Dominant Chronic Disease in 3 or More Organ Systems, August 2014-July 2015

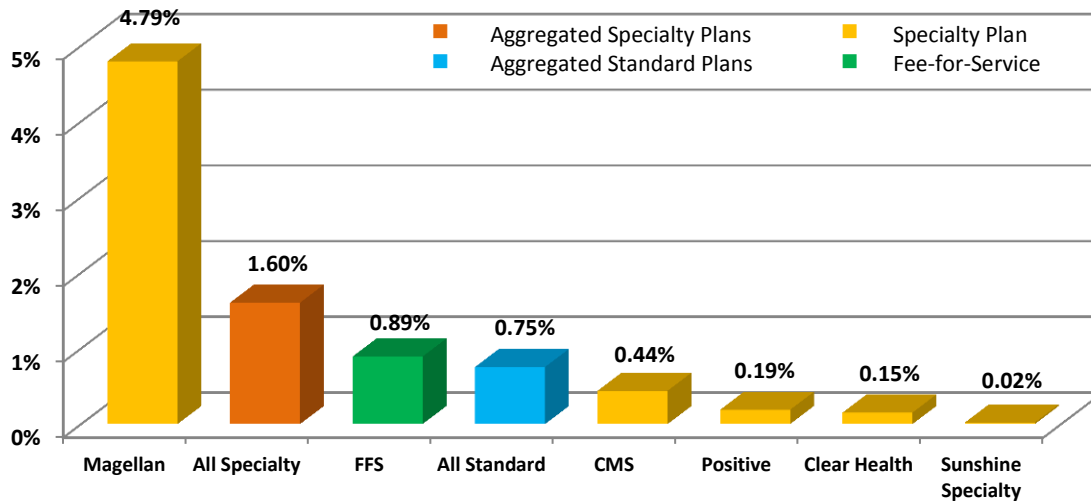


There is little difference by gender in the percentage of recipients with a dominant chronic disease in three or more organ systems.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

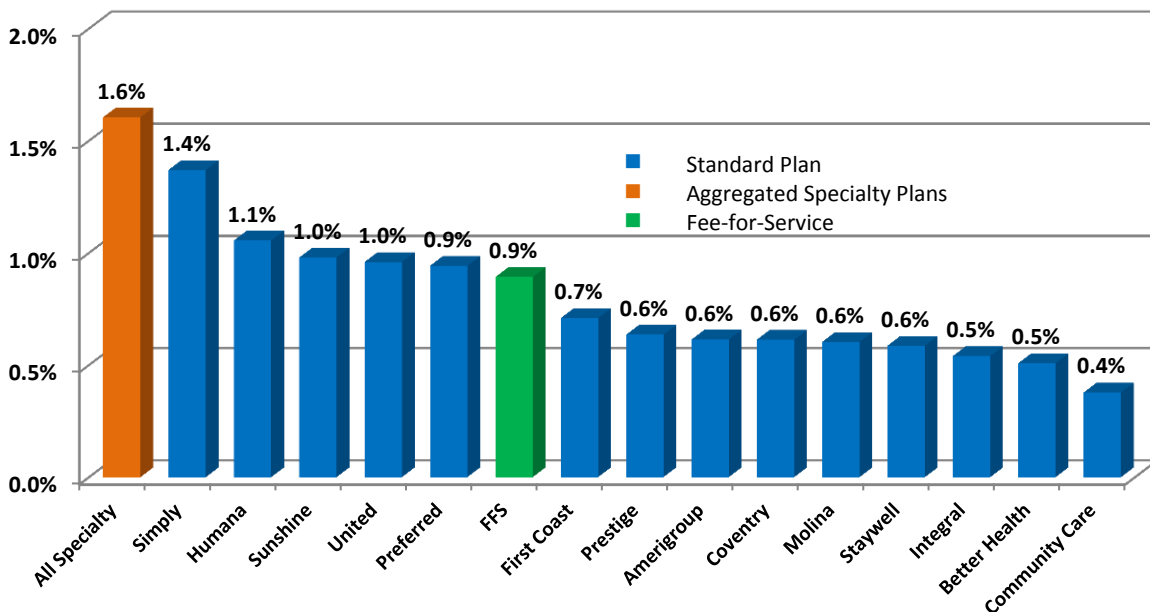
Only 0.8 percent of the Medicaid population is classified in this health status. Magellan, the serious mental illness (SMI) Specialty Plan, has the largest percentage of enrollees in this category among the Specialty Plans. Although mental health disease does not appear as one of the top ten illnesses, it is included in the “other dominant chronic disease category.”

Figure 50: Percentage of Specialty Plan Enrollee Months with a Dominant Chronic Disease in 3 or More Organ Systems, August 2014-July 2015



Simply and Humana are the Standard Plans with the largest percentage of enrollees in this category.

Figure 51: Percentage of Standard Plan Enrollee Months with a Dominant Chronic Disease in 3 or More Organ Systems, August 2014-July 2015

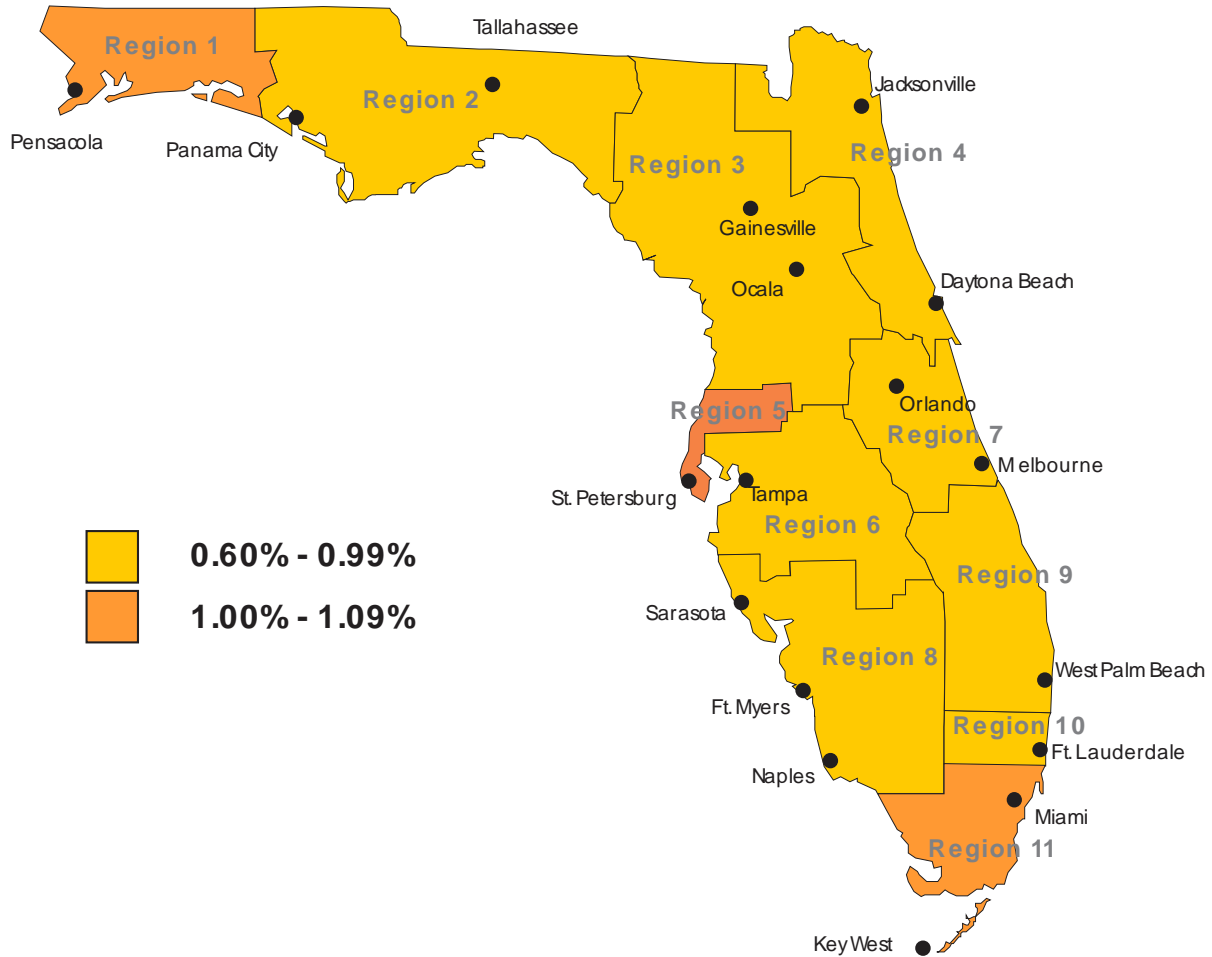


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Regions 1, 5, and 11 are the only regions where more than one percent of recipients are classified as Dominant Chronic Disease in Three or More Organ Systems.

Figure 52: Percentage of Regions' Population with a Dominant Chronic Disease in 3 or More Organ Systems Status, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Health Status 6-Significant Chronic Disease in Multiple Organ Systems

Significant Chronic Disease in Multiple Organ Systems is assigned when an individual has one of 22 combinations of dominant, moderate or minor chronic illnesses present in multiple organ systems. 6.5 percent of Medicaid recipients are in this Health Status. It is the third most prevalent Health Status.

The top ten conditions are present in 56 percent of the individuals in this Health Status. 44 percent have one of the other combinations of conditions.

Figure 53: Number of Recipients with Significant Chronic Disease in Multiple Organ Systems by CRG and Level of Severity, August 2014-July 2015

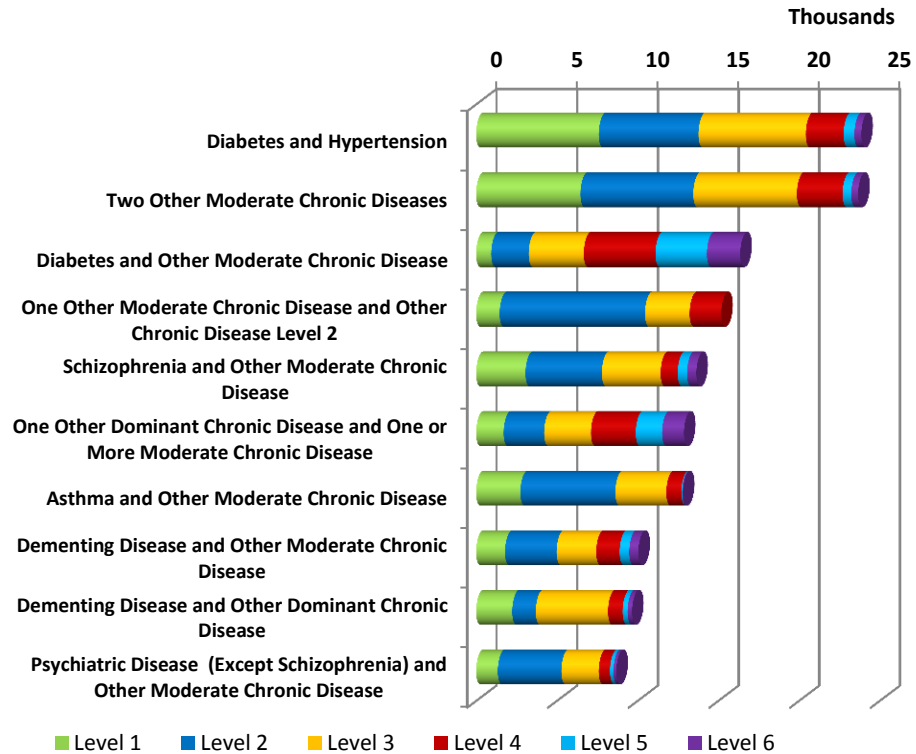
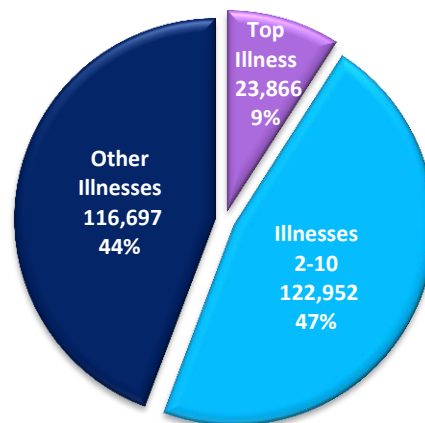


Figure 54: Top Significant Chronic Diseases in Multiple Organ Systems Compared to All Other Illnesses, August 2014-July 2015



Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Individuals in this health status by definition have more than one disease. The most frequent individual illnesses among the combinations are shown in the following chart. Diabetes is the most prevalent disease among Medicaid recipients in this category. Thirty-three percent of the individuals have diabetes in combination with another chronic disease. Diabetes was also prevalent among recipients in the previous Health Status 7. Mental illnesses are in the top ten illnesses in this health status but were not uniquely identified in Health Status 7.

Figure 55: Top 10 Individual Chronic Diseases, August 2014-July 2015

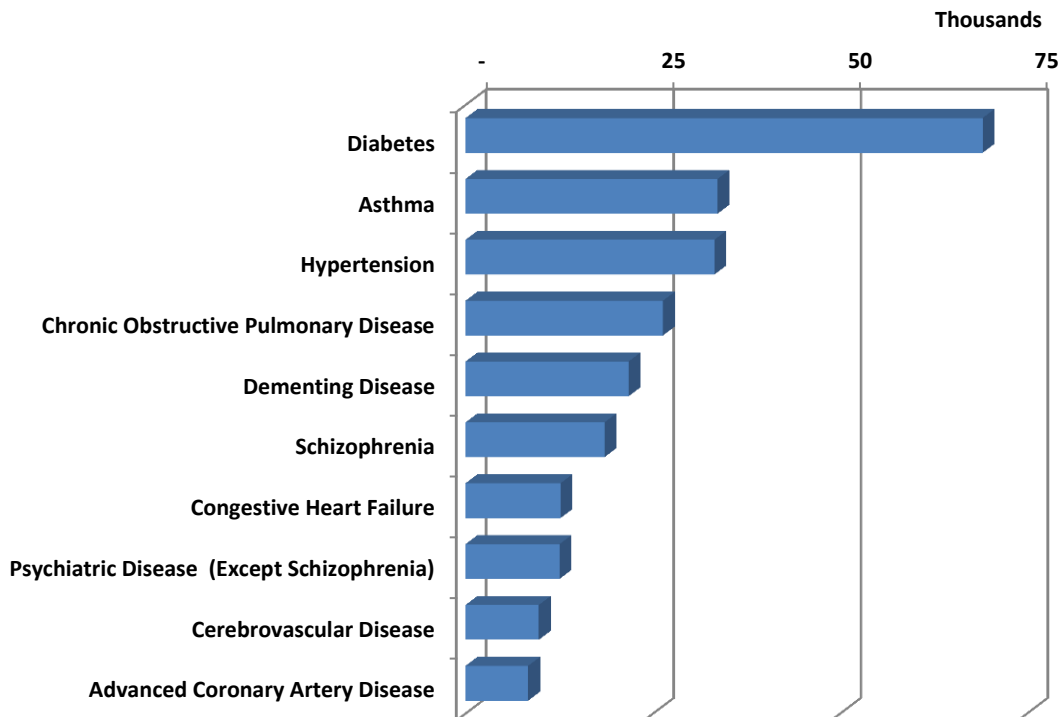
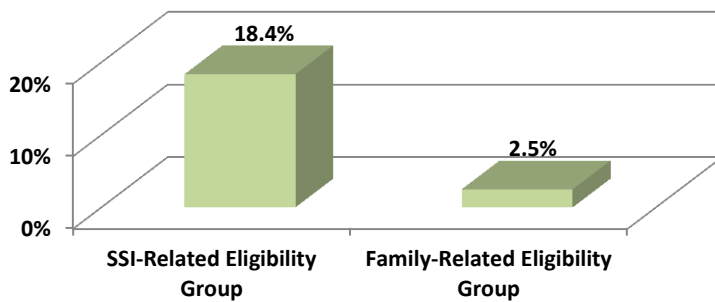
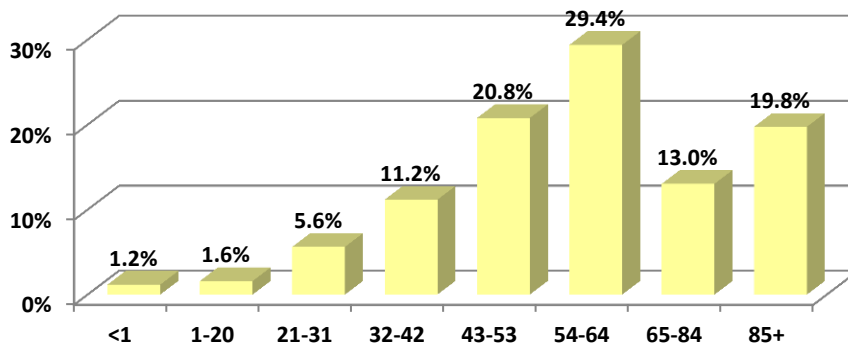


Figure 56: Percentage of Eligibility Groups with Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015



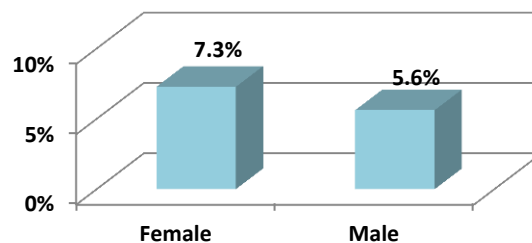
A larger percentage of recipients in the SSI-Related eligibility group than Family-Related eligibility group are classified in this health status.

Figure 57: Percentage of Age Groups with Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015



The percentage of recipients with a significant chronic disease in multiple organ systems increases with age reaching its maximum among 54 to 64 year olds.

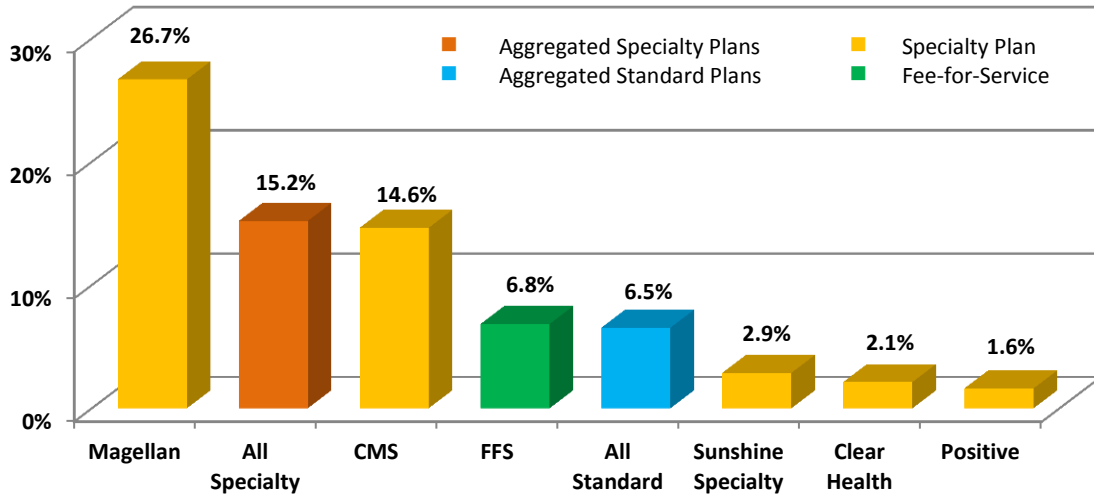
Figure 58: Percentage of Females and Males with Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015



A slightly larger percentage of females than males are classified with a significant chronic disease in multiple organ systems.

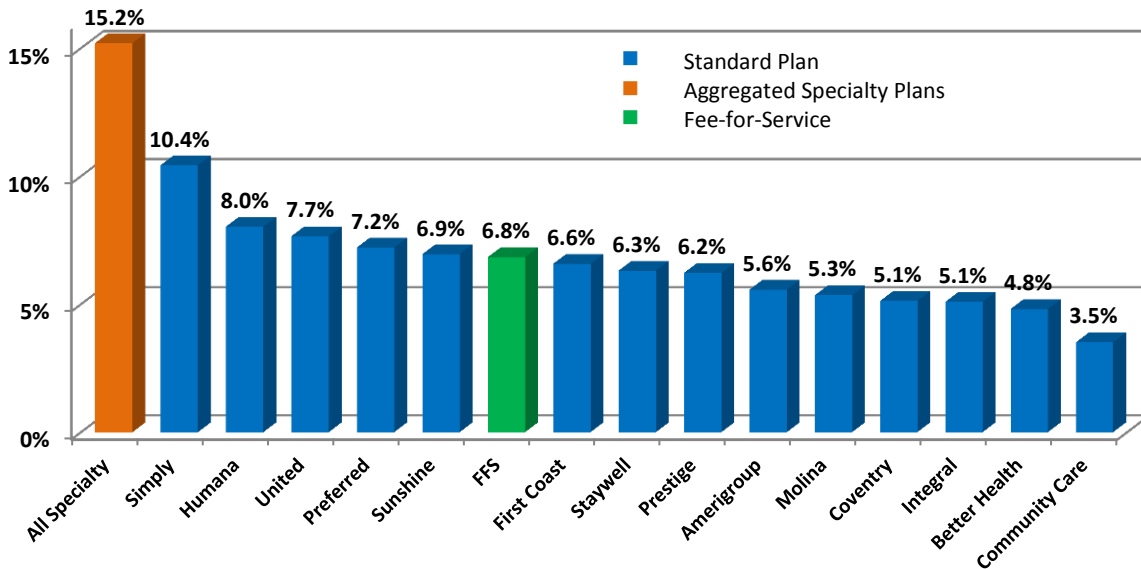
Magellan, the serious mental illness (SMI) Specialty Plan, has the largest percentage of enrollees with a significant chronic disease in multiple organ systems among the Specialty Plans with over a quarter of its enrollees classified in this health status.

Figure 59: Percentage of Specialty Plan Enrollee Months with Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015



Simply and Humana are the Standard Plans with the largest percentage of enrollees with a significant chronic disease in multiple organ systems. On average, 15 percent of Specialty Plan enrollees as compared to 6.5 percent of Standard Plan enrollees are classified in this health status.

Figure 60: Percentage of Standard Plan Enrollee Months with a Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015

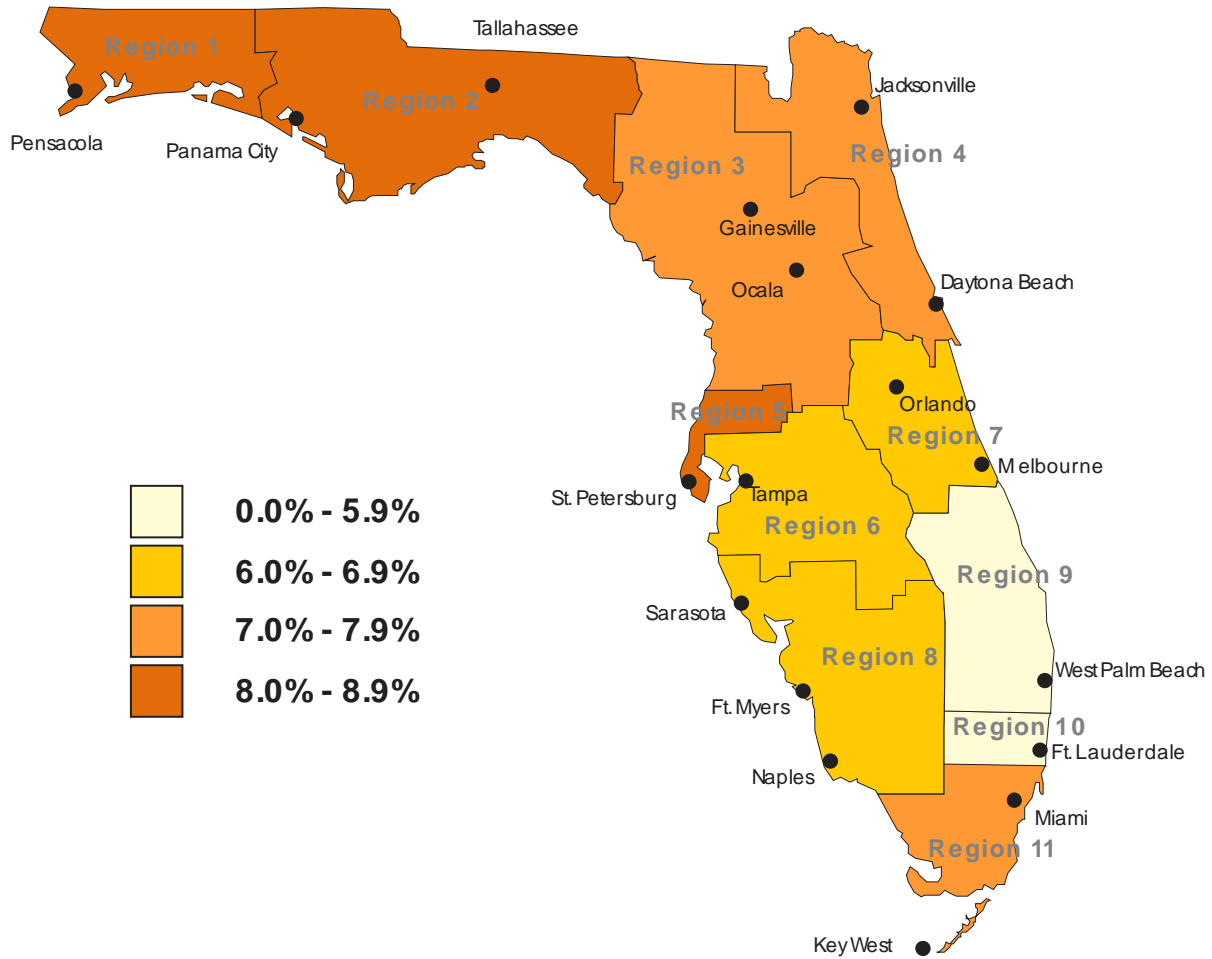


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Regions 1, 2 and 5 have the largest percentage of recipients classified with a Significant Chronic Disease in Multiple Organ Systems.

Figure 61: Percentage of Regions' Population with a Significant Chronic Disease in Multiple Organ Systems, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Health Status 5-Single Dominant or Moderate Chronic Disease

Figure 62: Number of Recipients with Health Status 5 by CRG and Level of Severity, August 2014-July 2015

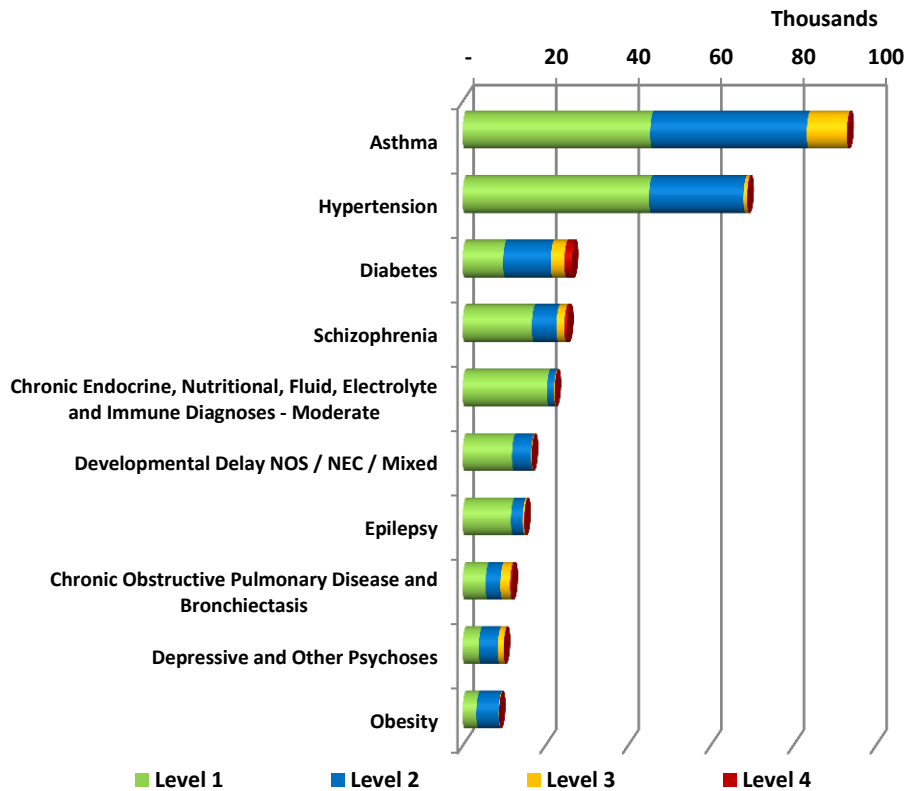
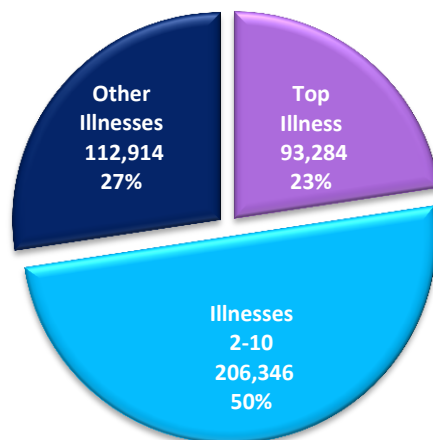


Figure 63: Top Dominant Chronic Disease Compared to All Other Illnesses, August 2014-July 2015



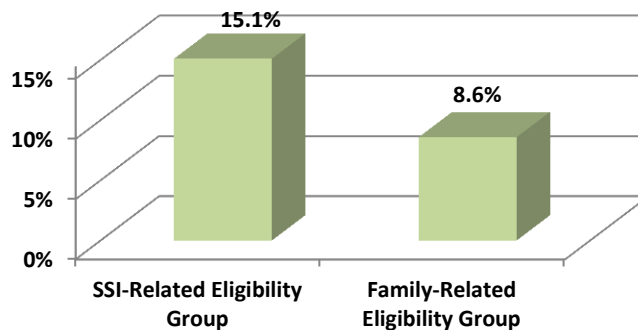
Single Dominant or Moderate Chronic Disease is assigned when an individual has one of 107 dominant or moderate chronic illnesses. 10.2 percent of Medicaid recipients are in this Health Status. It is the second most prevalent Health Status after healthy. Asthma and hypertension are the most common illnesses in this health status. There are slightly more individuals with asthma and hypertension than all the other eight illnesses combined. The largest number of individuals with a severity level two has asthma.

73 percent of the individuals in this health status had one of the top ten illnesses.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

A larger percentage of recipients in the SSI-Related eligibility group than Family-Related eligibility group are classified in this health status.

Figure 64: Percentage of Eligibility Groups with Single Dominant or Moderate Chronic Disease, August 2014-July 2015



The percentage of recipients with a single dominant or moderate chronic disease is largest among the 85 and older age group, although only by a small amount compared to 43 to 53 year olds.

Figure 65: Percentage of Age Groups with a Single Dominant or Moderate Chronic Disease, August 2014-July 2015

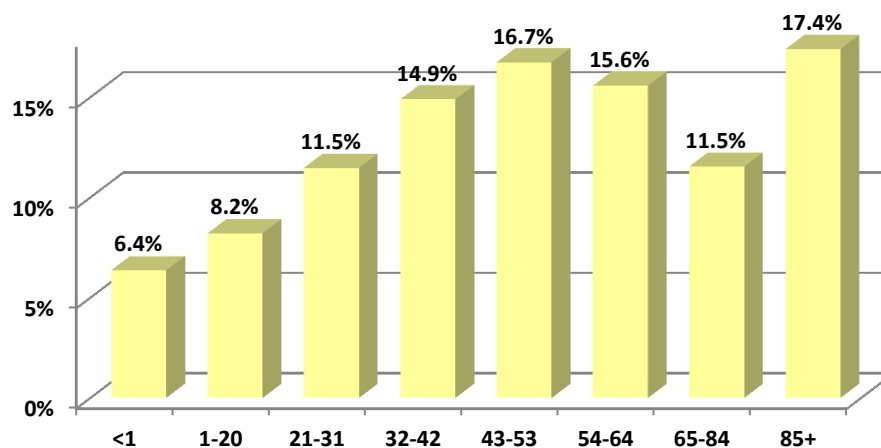
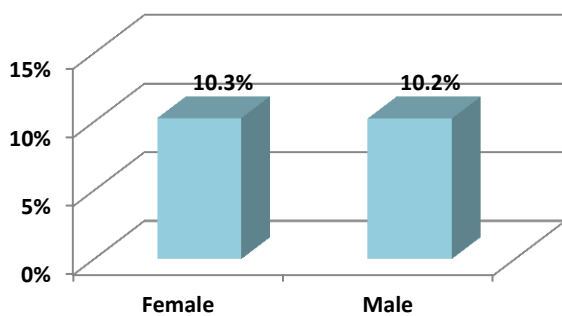


Figure 66: Percentage of Females and Males with a Single Dominant or Moderate Chronic Disease, August 2014-July 2015

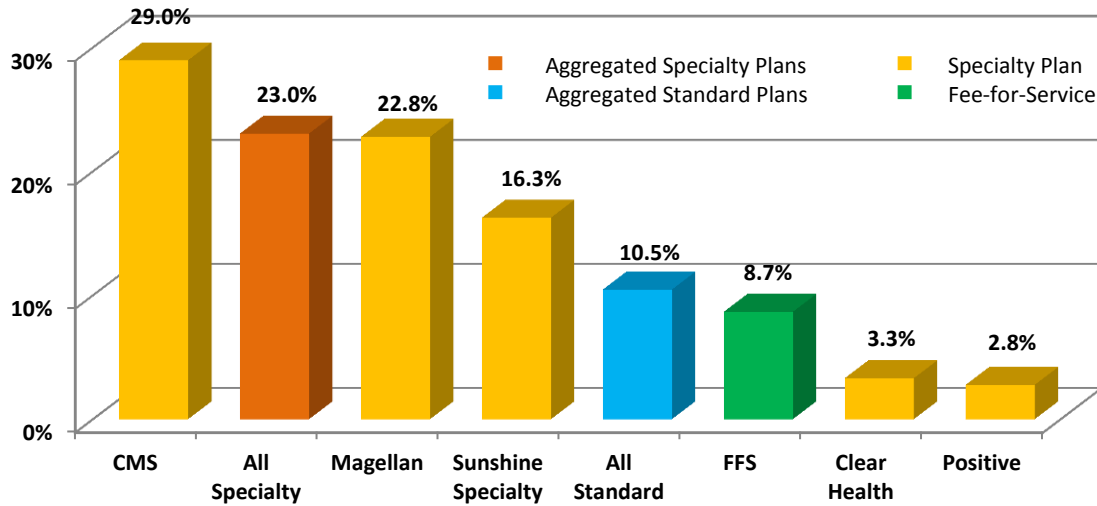


There is little difference by gender in the percentage of recipients with a single dominant or moderate chronic disease.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

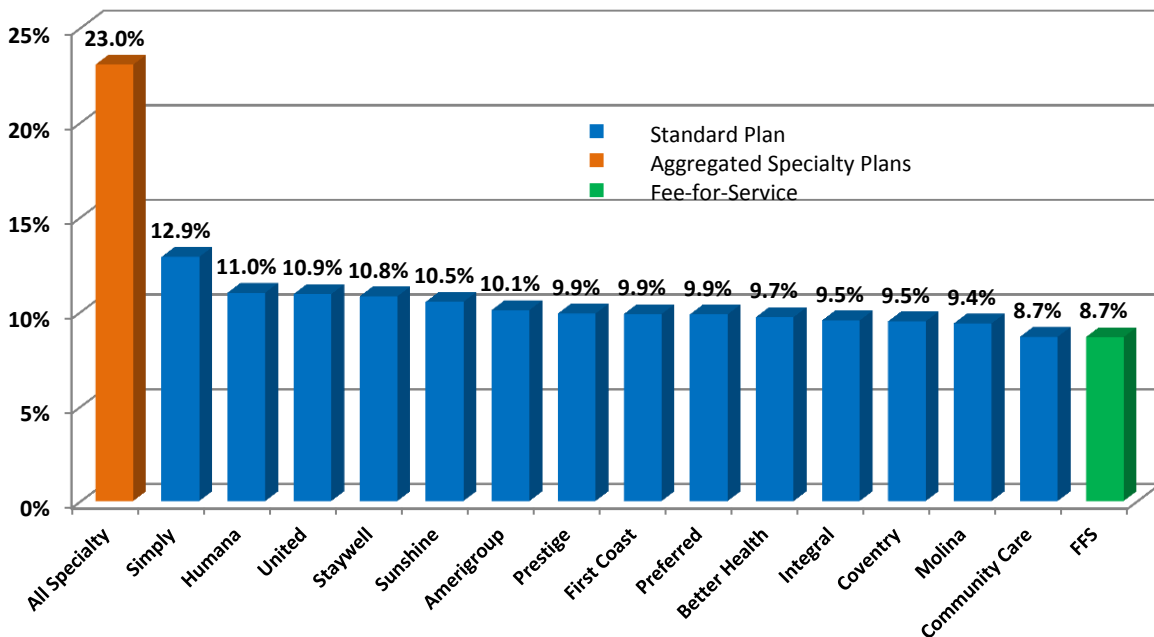
Among Specialty Plans, CMS has the largest percentage of enrollees with a Single Dominant or moderate chronic disease. Clear Health and Positive have the smallest percentage.

Figure 67: Percentage of Specialty Plan Enrollee Months with a Single Dominant or Moderate Chronic Disease, August 2014-July 2015



On average, 23 percent of Specialty Plan enrollees are classified in this health status as compared to 11 percent of Standard Plan enrollees. Simply and Humana are the Standard Plans with the largest percentage of enrollees classified in this health status.

Figure 68: Percentage of Standard Plan Enrollee Months with a Single Dominant or Moderate Chronic Disease, August 2014-July 2015

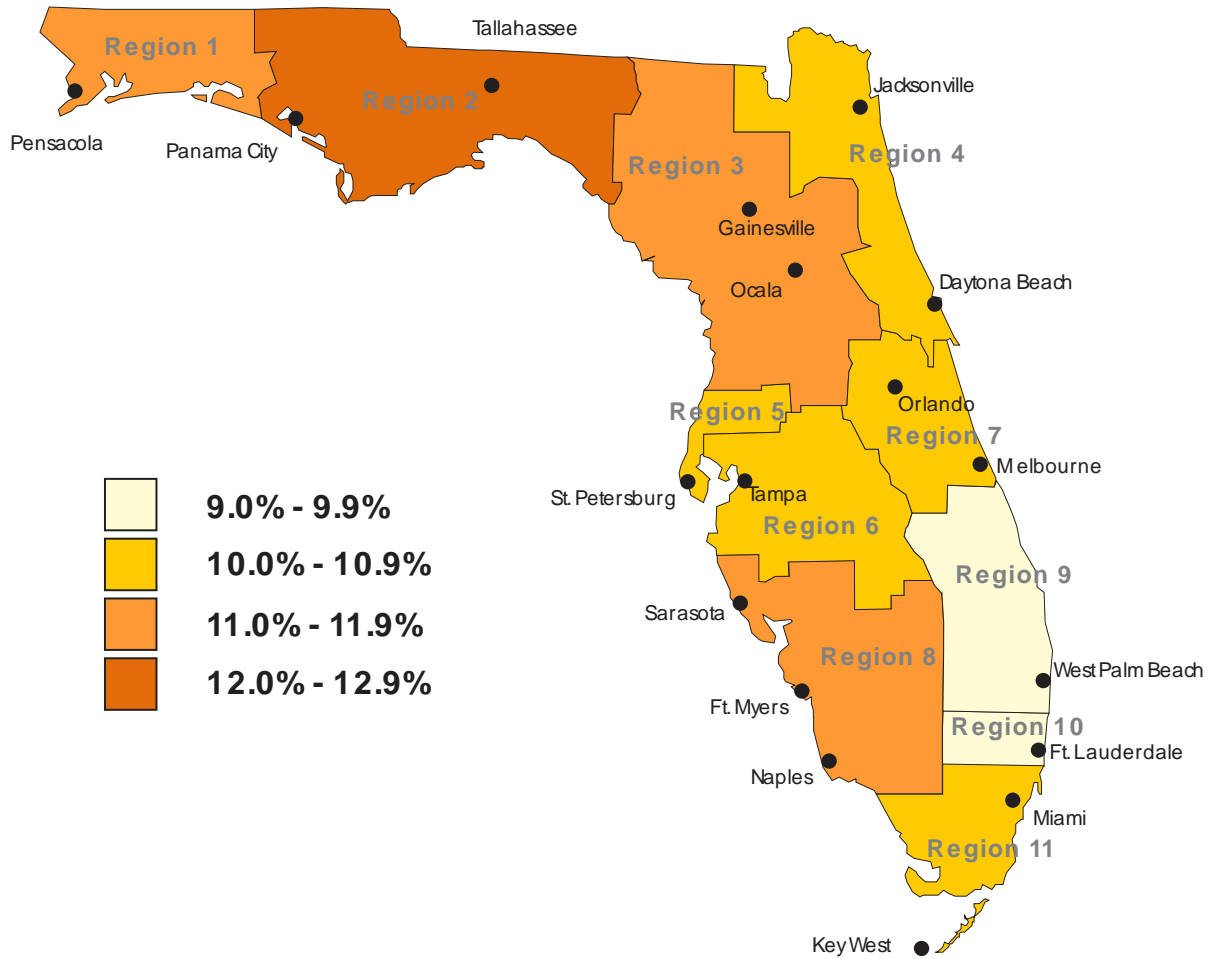


Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Region 2 has the largest percentage of recipients with a Single Dominant or moderate chronic disease. Regions 9 and 10 have the smallest percentage of recipients with this health status.

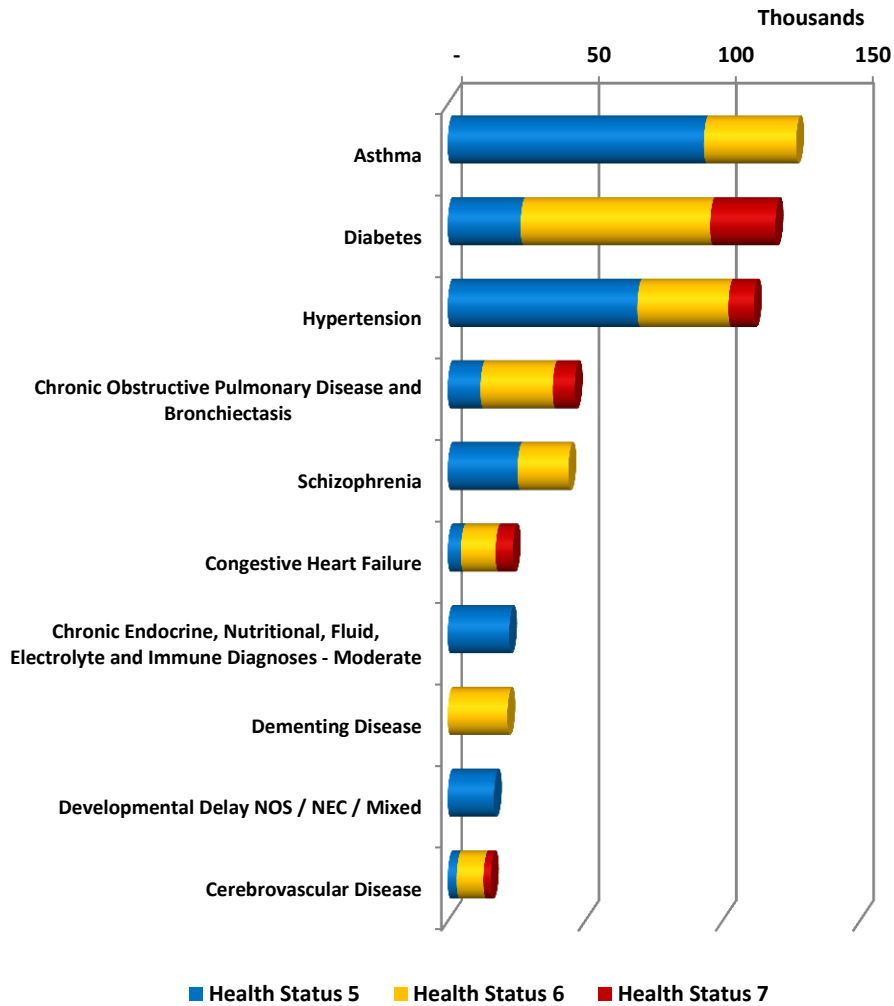
Figure 69: Percentage of Regions' Population with a Single Dominant or Moderate Chronic Disease, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Figure 70: Top 10 Chronic Diseases Across Health Statuses 5, 6, and 7, August 2014-July 2015



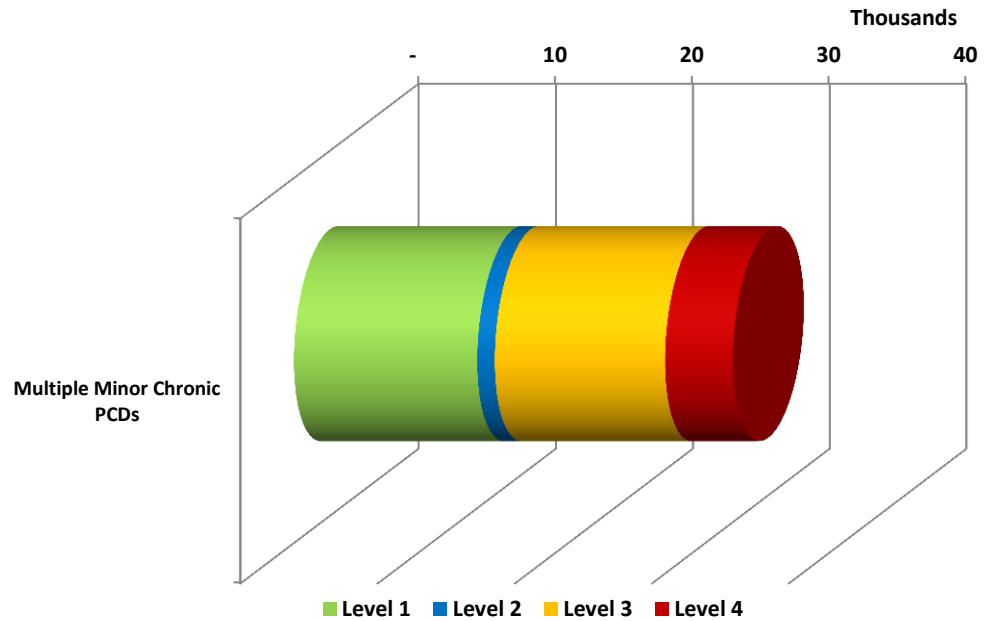
Comparing Health Status 5, 6, and 7

Health Status categories 5, 6, and 7 include individuals who have one or more dominant or moderate illnesses. 17.5 percent of the Medicaid population is categorized in the three health statuses combined. The top ten individual illnesses across all three health statuses are shown in the chart. Asthma, diabetes, and hypertension are the most prevalent illnesses among Medicaid recipients with a dominant or moderate chronic disease alone or in combination.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

Health Status 4-Minor Chronic Disease in Multiple Organ Systems

Figure 71: Number of Recipients with Health Status 4 by CRG and Level of Severity, August 2014-July 2015

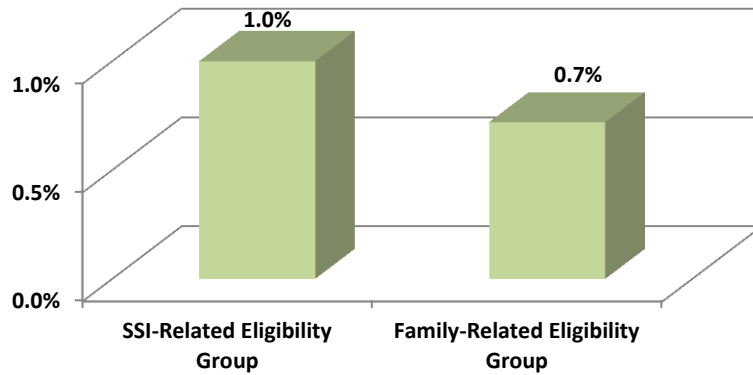


Note: The CRG software does not identify the specific illnesses associated with the individuals in this health status.

Minor Chronic Disease in Multiple Organ systems is assigned when an individual has two or more minor chronic illnesses such as attention deficit hyperactivity disorder, hyperlipidemia, or depression. The level of severity corresponds to the number of Minor Chronic illnesses present and their severity. Less than one percent of Medicaid recipients are classified in this Health Status.

A larger percentage of recipients in the SSI-Related eligibility group than Family-Related eligibility group are classified in this health status.

Figure 72: Percentage of Eligibility Groups with Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015



The percentage of recipients with a minor chronic disease in multiple organ systems is largest among 32 to 53 year olds.

Figure 73: Percentage of Age Groups with Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015

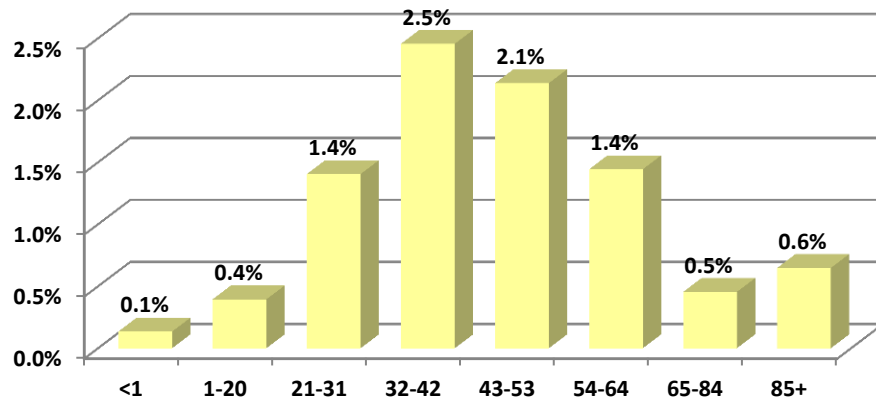
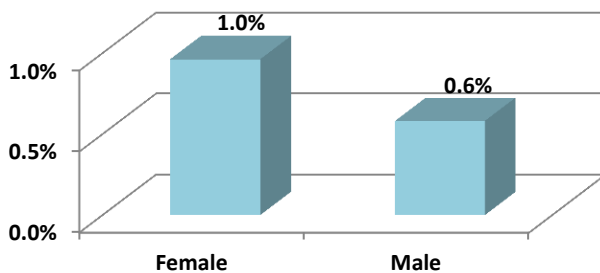


Figure 74: Percentage of Females and Males with a Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015

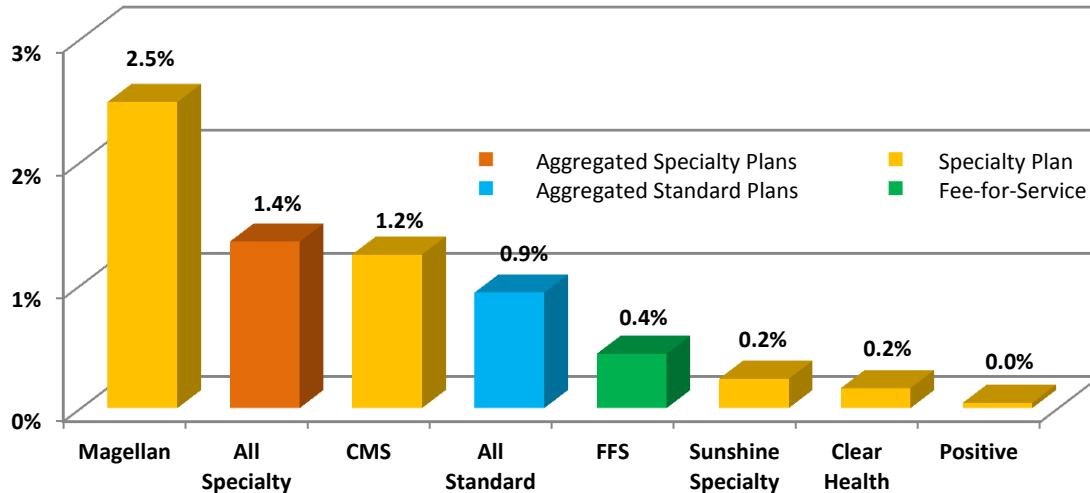


There is little difference by gender in the percentage of recipients with a minor chronic disease in multiple organ systems.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

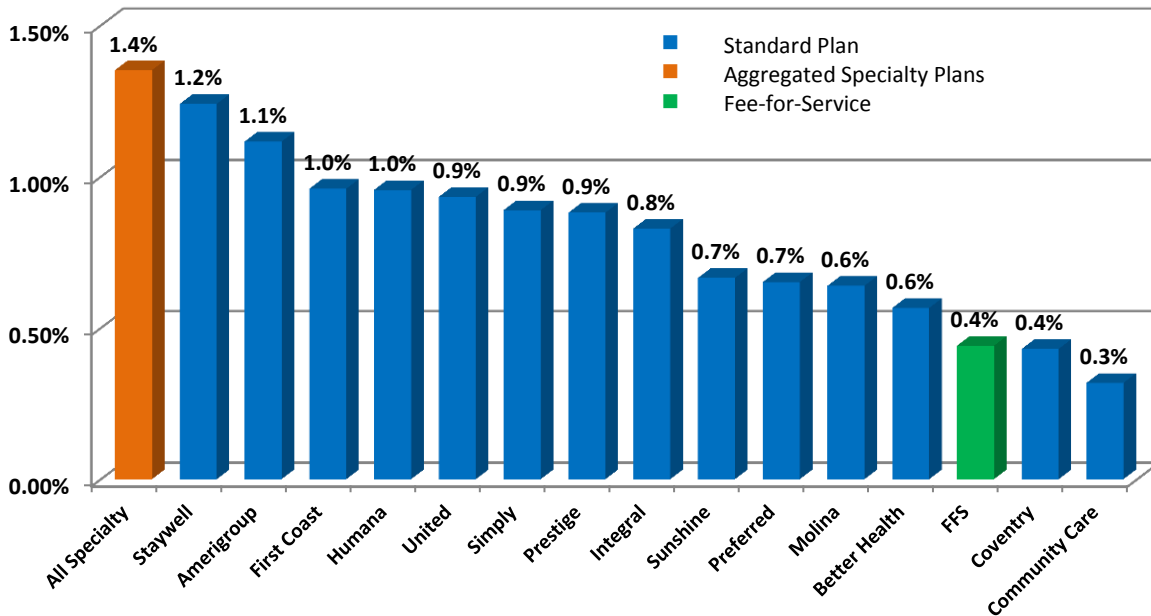
Magellan and CMS have a larger percentage of enrollees with minor chronic disease in multiple organ systems than other Specialty Plans at 2.5 percent and 1.2 percent respectively.

Figure 75: Percentage of Specialty Plan Enrollee Months with Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015



One percent or less of enrollees in each Standard Plan has a minor chronic disease in multiple organ systems.

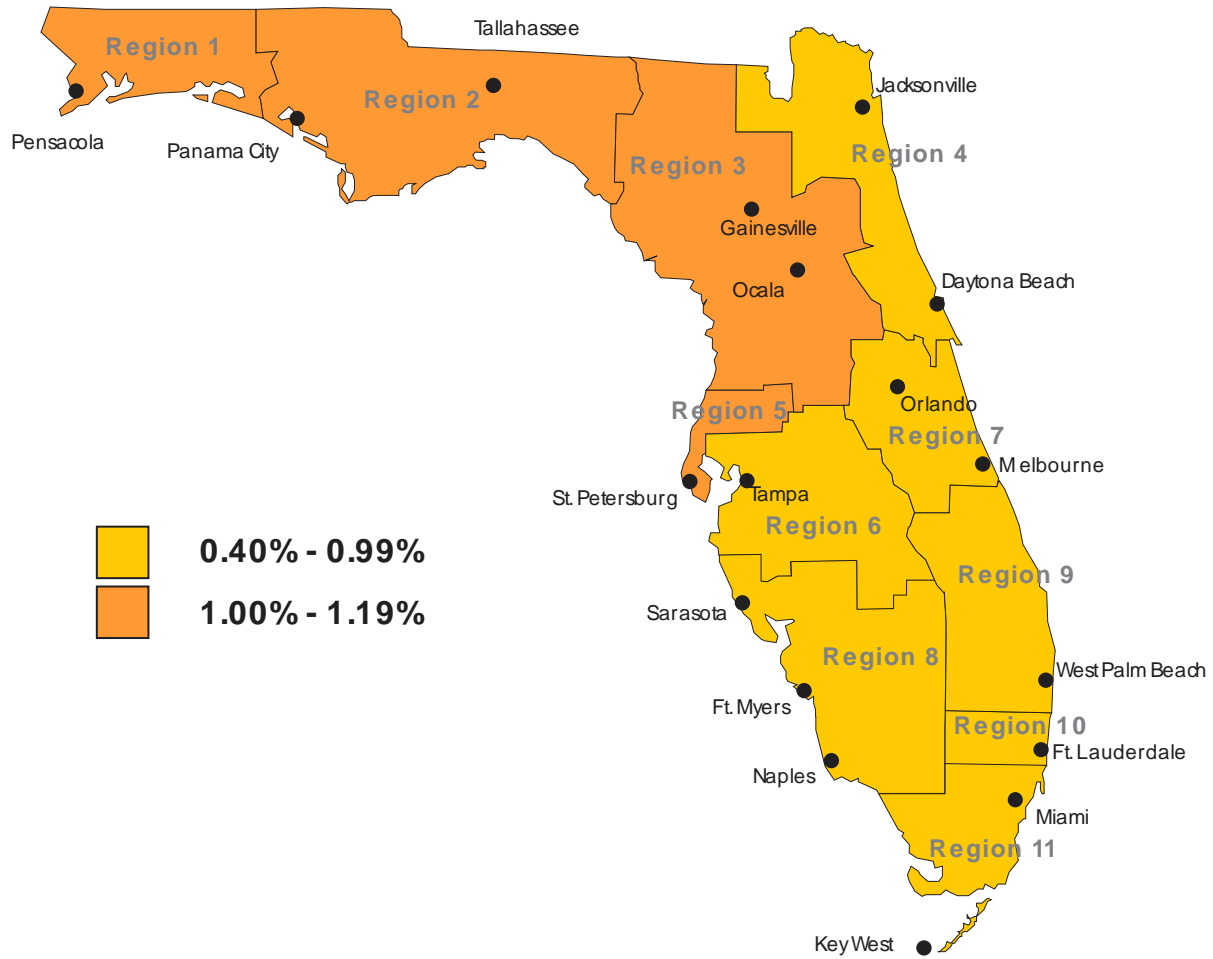
Figure 76: Percentage of Standard Plan Enrollee Months with a Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015



Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Regions 1, 2, 3, and 5 have 1 percent or more of recipients with a minor chronic disease in multiple organ systems. Less than 1 percent of recipients in other regions are in this health status.

Figure 77: Percentage of Regions' Population with a Minor Chronic Disease in Multiple Organ Systems, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Health Status 3-Single Minor Chronic Disease

Single Minor Chronic Disease is assigned when an individual has one of 41 minor chronic illnesses present. 5.2 percent of Medicaid recipients are in this Health Status. The most common single minor chronic disease is attention deficit / hyperactivity disorder. Depression is the only disease among the top ten with a larger percentage of individuals in severity level two than severity level one.

82 percent of recipients in this health status have one of the top ten illnesses.

Figure 78: Number of Recipients with Health Status 3 by CRG and Level of Severity, August 2014-July 2015

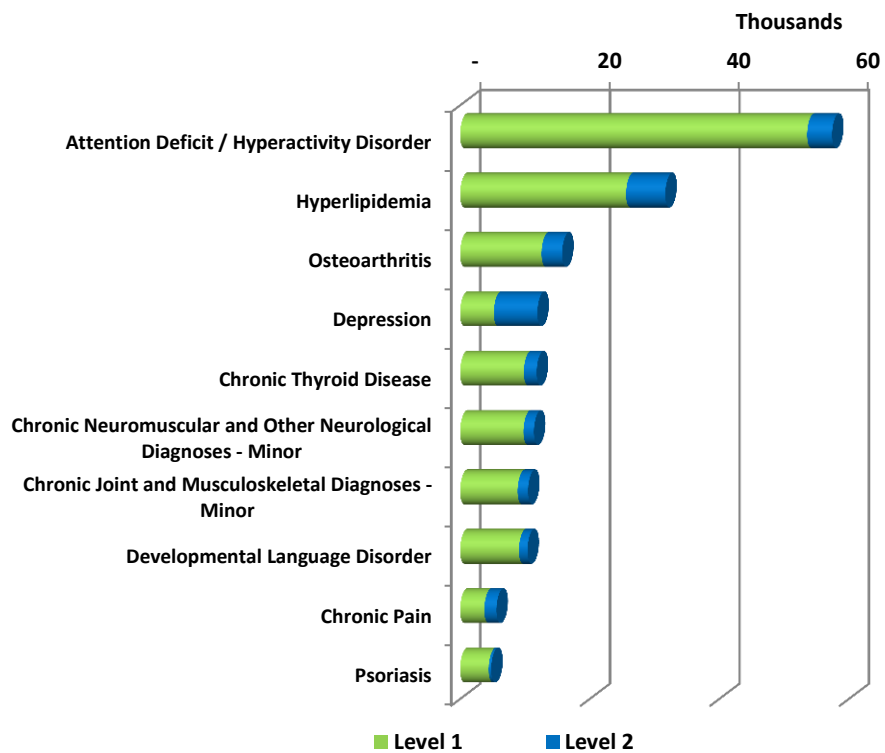
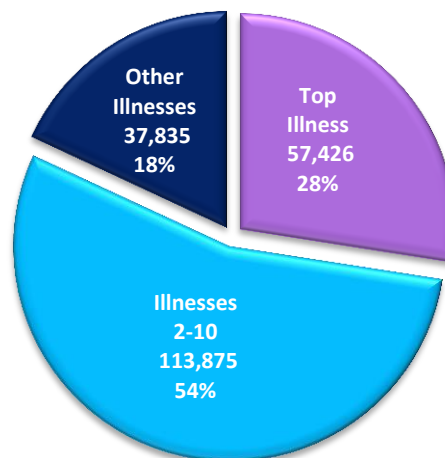


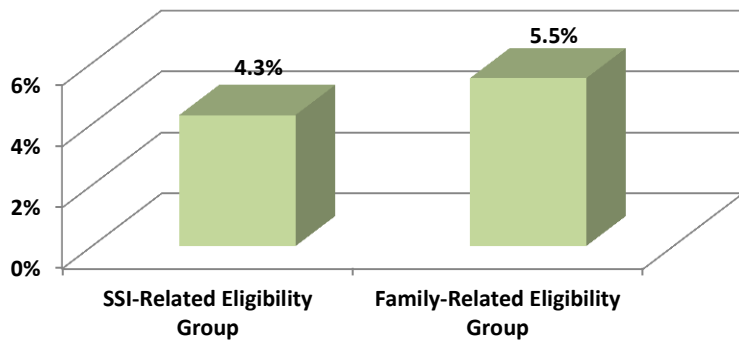
Figure 79: Top Single Minor Chronic Disease Compared to All Other Illnesses, August 2014-July 2015



Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

This is the first Health Status where a larger percentage of recipients in the Family-Related eligibility group than SSI-Related eligibility group are classified in the health status.

Figure 80: Percentage of Eligibility Groups with a Single Minor Chronic Disease, August 2014-July 2015



The percentage of recipients with a single minor chronic disease is largest among 1 to 53 year olds.

Figure 81: Percentage of Age Groups with a Single Minor Chronic Disease, August 2014-July 2015

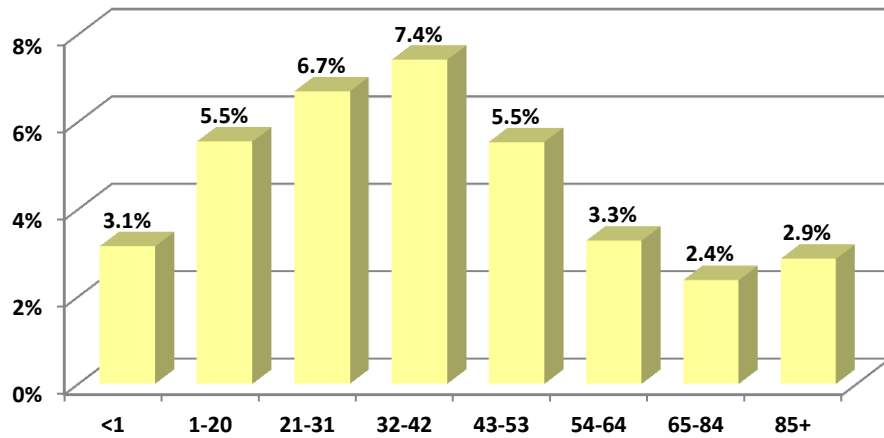
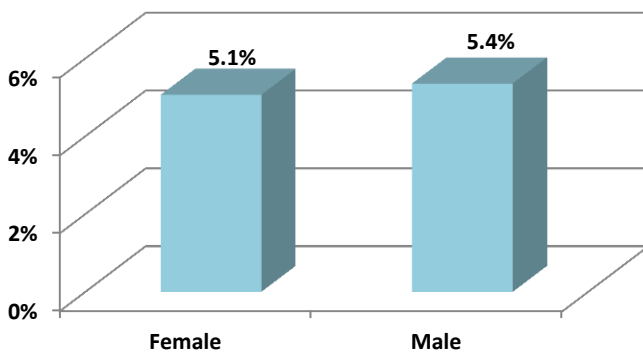


Figure 82: Percentage of Females and Males with a Single Minor Chronic Disease, August 2014-July 2015

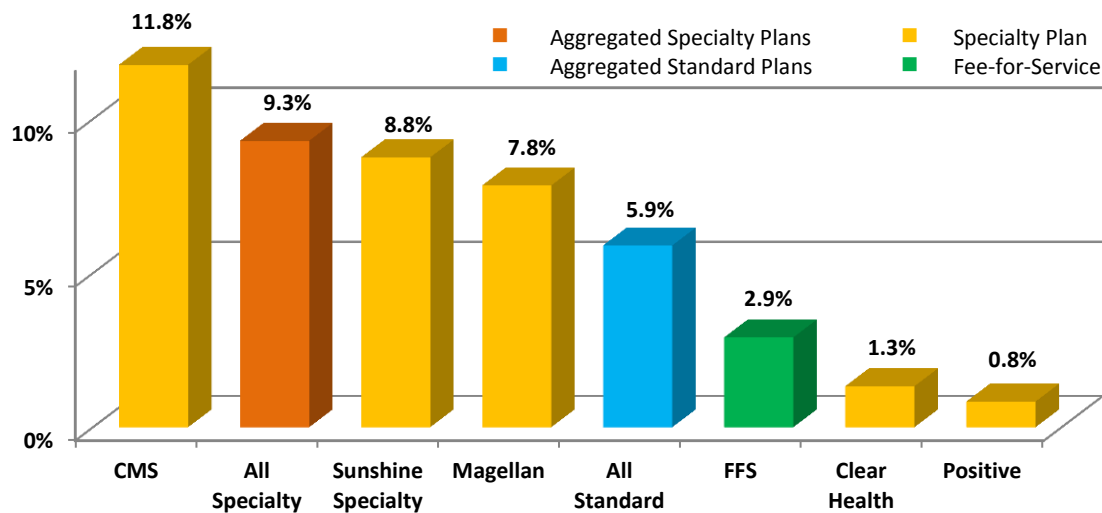


There is little difference by gender in the percentage of recipients with a single minor chronic disease.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

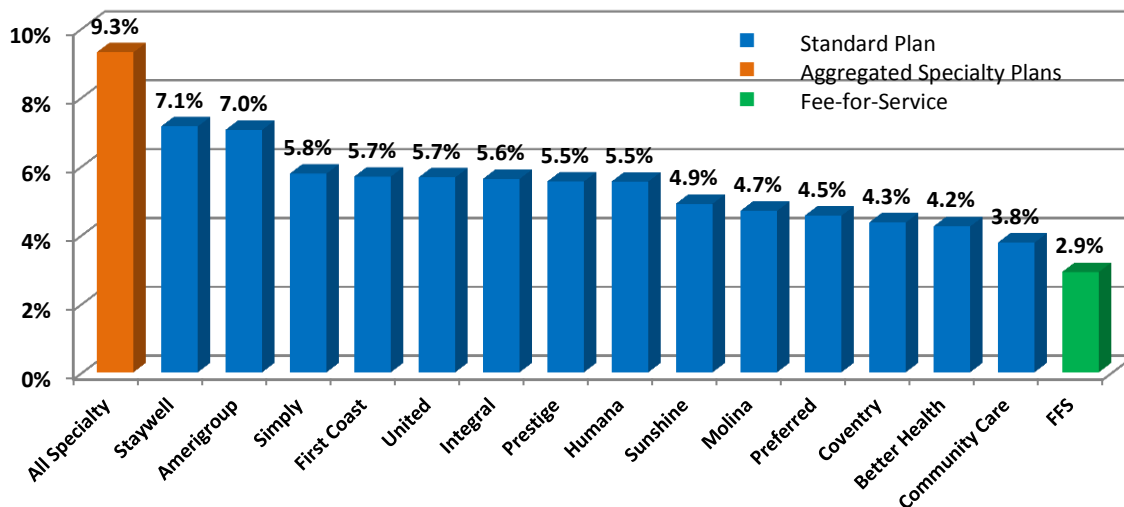
CMS has the largest percentage of enrollees with a single minor chronic disease. Twelve percent of CMS' enrollees are classified in this health status. On average, nine percent of Specialty as compared to six percent of Standard Plan enrollees is classified in this health status.

Figure 83: Percentage of Specialty Plan Enrollee Months with a Single Minor Chronic Disease, August 2014-July 2015



Staywell and Amerigroup are the Standard Plans with the largest percentage of enrollees with a single minor chronic disease.

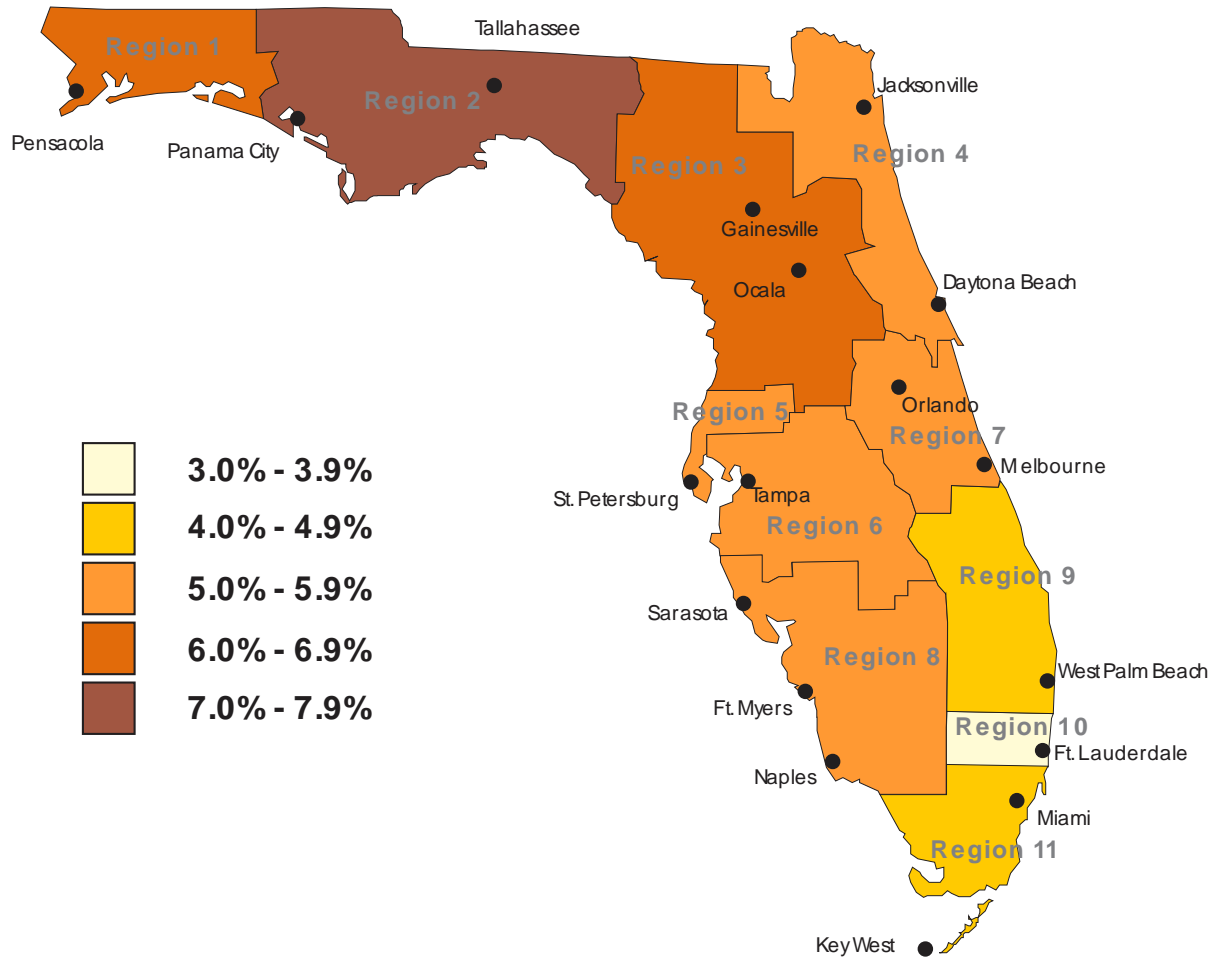
Figure 84: Percentage of Standard Plan Enrollee Months with a Single Minor Chronic Disease, August 2014-July 2015



Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person's CRG with the number of member months the person was enrolled in a plan or the FFS program.

Regions 1, 2, and 3 have a larger percentage of recipients than other regions classified in the single minor chronic disease health status.

Figure 85: Percentage of Regions' Population with a Single Minor Chronic Disease Status, August 2014-July 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Significant Acute Illness is assigned when an individual has a significant acute illness present.

Only 6 categories of acute illness are defined by the 3M grouper. 6.3 percent of Medicaid recipients are in this Health Status. It is the fourth most prevalent Health Status.

Examples of Significant Acute Illnesses include pneumonia, blood transfusions, and bacterial infections.

Health Status 2-Recent History of Significant Acute Illness

Figure 86: Number of Recipients with Health Status 2 by CRG and Level of Severity, August 2014-July 2015

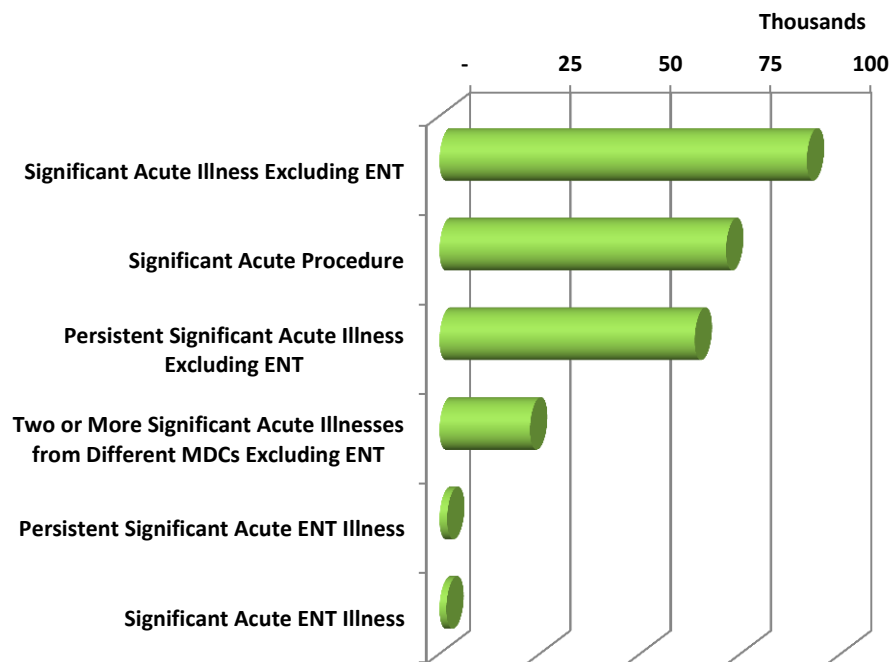


Figure 87: Percentage of Eligibility Groups with a Significant Acute Illness, August 2014-July 2015

A larger percentage of recipients in the Family-Related eligibility group than SSI-Related eligibility group are classified in this health status.

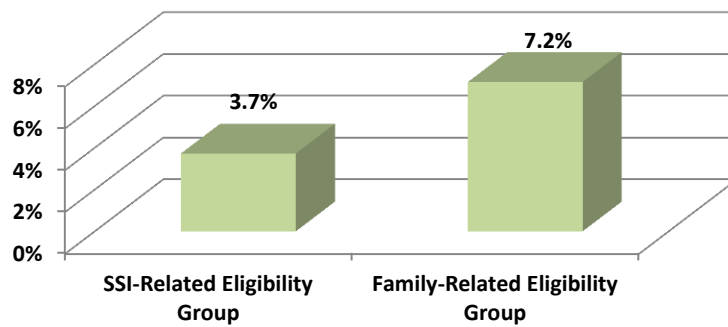


Figure 88: Percentage of Age Groups with a Significant Acute Illness, August 2014-July 2015

The percentage of recipients with a significant acute illness is largest among children under the age of one.

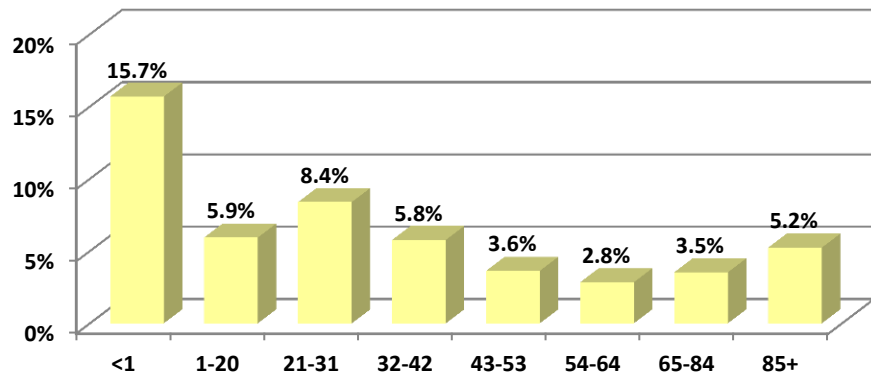
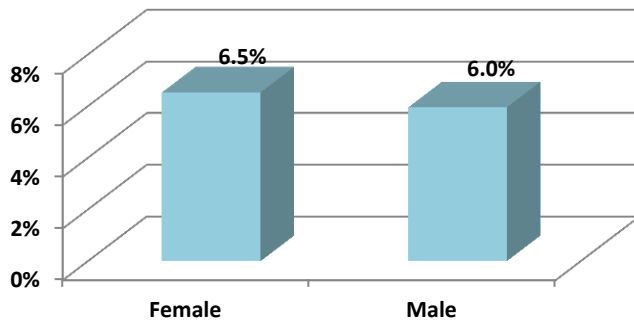


Figure 89: Percentage of Females and Males with a Significant Acute Illness, August 2014-July 2015

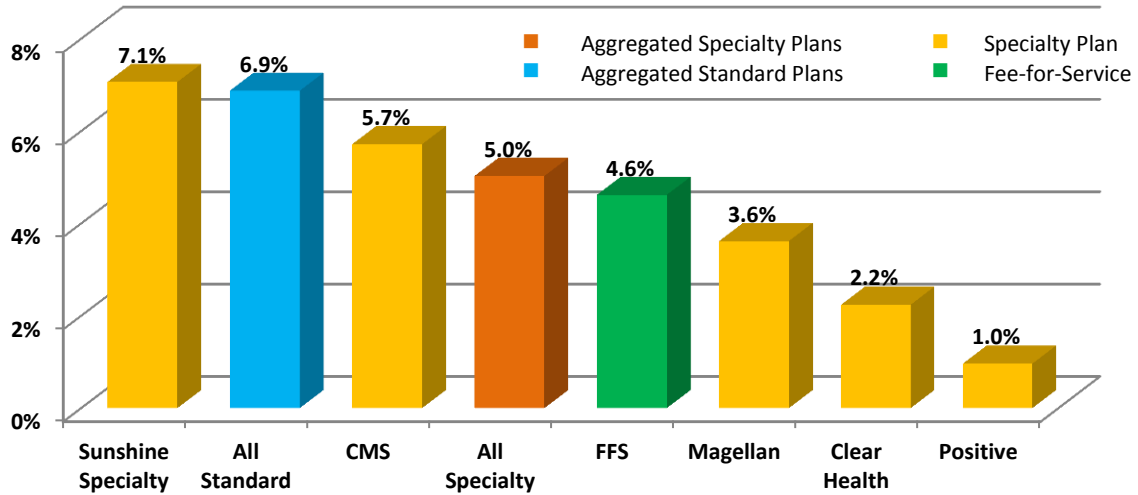


There is little difference by gender in the percentage of recipients with an acute illness.

Source: Florida Medicaid Managed Information System (FLMMIS) Eligibility, Encounter, and Claims Information, August 2014-July 2015.

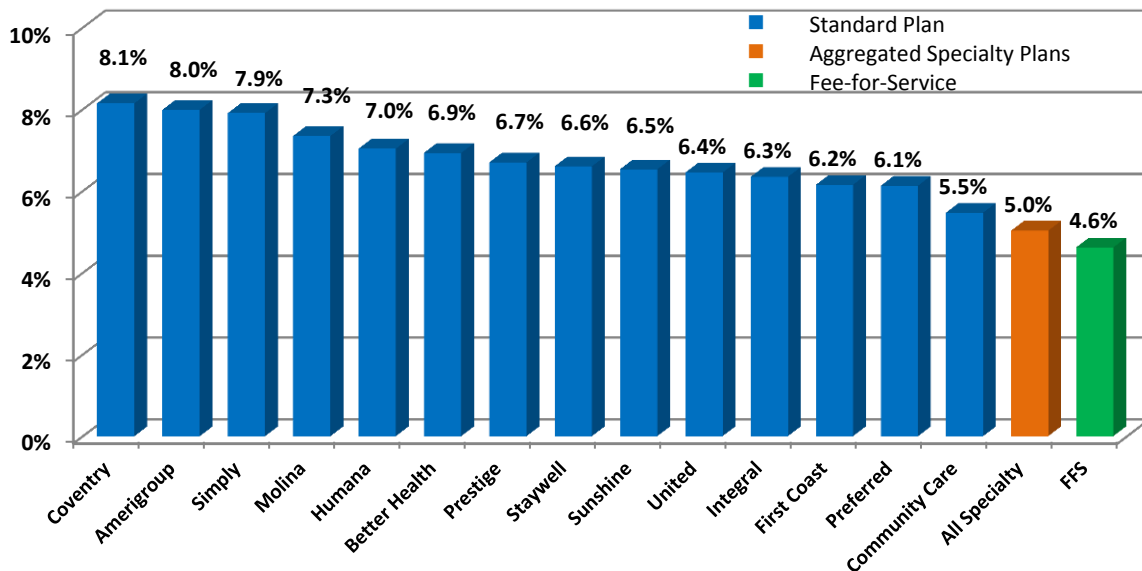
Sunshine Specialty is the specialty plan with the largest percentage of enrollees classified in the Acute Illness health status. On average, five percent of Specialty Plan enrollees are categorized in this health status.

Figure 90: Percentage of Specialty Plan Enrollee Months with a Significant Acute Illness, August 2014-July 2015



On average, seven percent of standard plan enrollees are categorized in this health status. Coventry, Amerigroup, and Simply Healthcare have the largest percentage of enrollees in this health status with about eight percent each.

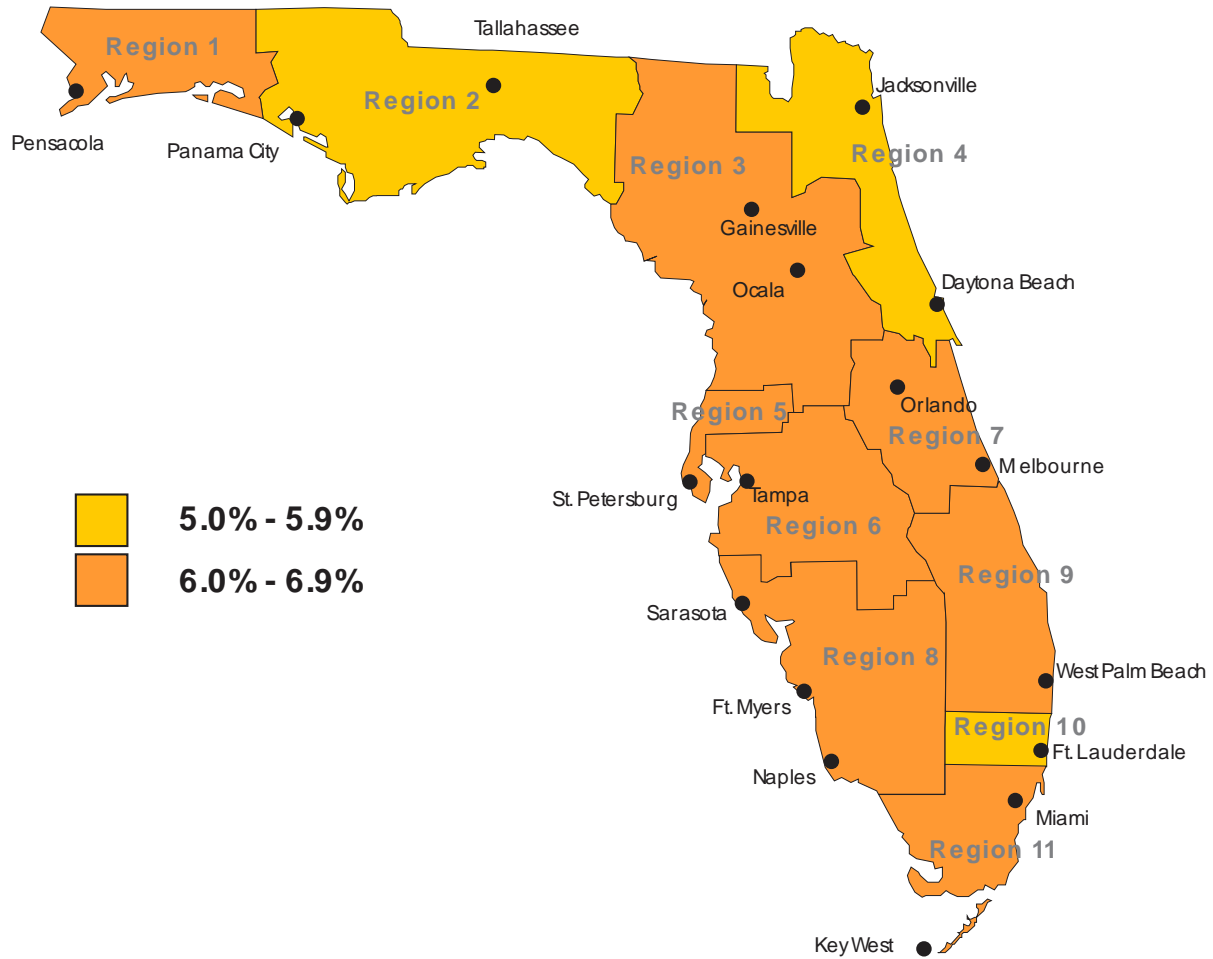
Figure 91: Percentage of Standard Plan Enrollee Months with a Significant Acute Illness, August 2014-July 2015



Note: Because enrollees may be in different programs or plans over the course of the study period, totals by plan or program associate a person’s CRG with the number of member months the person was enrolled in a plan or the FFS program.

Only 3 regions, Regions 2, 4, and 10, have less than 6 percent of recipients classified with a health status of Significant Acute Illness.

Figure 92: Percentage of Regions' Population with a Significant Acute Illness Status, August 1, 2014 - July 31, 2015



Note: Because enrollees may be in different regions over the course of the study period, these totals associate a person's CRG with the number of member months a person resided in a region.

Conclusions

Almost 70 percent of all Medicaid recipients are classified as healthy. However, a smaller percentage of recipients in an SSI-Related eligibility group as opposed to Family-Related eligibility group, adults as opposed to children, Specialty Plan enrollees as opposed to Standard Plan enrollees and recipients in the fee-for-service program, and recipients in more rural as opposed to urban regions of Florida are healthy. A larger percentage of recipients in the fee-for-service program are categorized as healthy than Standard Plan enrollees and Specialty Plan enrollees. Community Care is the only Standard Plan with a larger percentage of enrollees categorized as healthy as compared to recipients in the fee-for-service program. Among Specialty Plans, Sunshine Specialty has the largest percentage of enrollees categorized as healthy. These results are descriptive and are not indicative of causal relationship.

The most common illnesses among Medicaid recipients are asthma, acute illness, and hypertension. The prevalence of disease is highly related to age and eligibility group. Asthma and acute illness is common among recipients in a Family-Related eligibility group and children under the age of 21. Hypertension is common among recipients in an SSI-Related eligibility group and adults 21 and over. Attention deficit/hyperactivity disorder is also common among recipients in a Family-Related eligibility group and children under the age of 21. Other common illnesses among recipients in an SSI-Related eligibility group and adults include diabetes, schizophrenia, and hyperlipidemia. Dementing illnesses and Alzheimer's are the most common illnesses among recipients 85 and older. Asthma, acute illness, hypertension, attention deficit / hyperactivity disorder, and hyperlipidemia are among the top illnesses among Standard Plans although the order of prevalence shifts some among the plans. These are also the top illnesses in every region with the order of prevalence shifting slightly among the regions. Because the Specialty Plans, with the exception of Sunshine Specialty, are designed to serve populations with specific illnesses, the top illnesses vary among Specialty Plans. The most common disease among enrollees in Clear Health and Positive, the two HIV/AIDS Specialty Plans, is HIV. Schizophrenia is the most common disease among enrollees in Magellan, the Specialty Plan for serious mental illness. Enrollees in CMS, the Specialty Plan for children with chronic disease, and Sunshine specialty, the Specialty Plan for Child Welfare, share the same 3 most common illnesses – attention deficit/hyperactivity disorder, asthma, and developmental disability.

Thirty-one percent of the Medicaid population is categorized as other than healthy. Ten percent have a single dominant or moderate chronic disease, 6.5 percent have a chronic disease in multiple organ systems, 6.3 percent have a history of significant acute illness, and 5.2 percent have a single minor chronic disease. Less than a percent have a catastrophic illness. HIV/AIDS is the dominant disease among recipients with a catastrophic illness. Diabetes, hypertension, and asthma are the most frequent illnesses among dominant chronic illnesses. Attention deficit/hyperactivity disorder and hyperlipidemia are the most common illnesses among minor chronic illnesses.