



# **Florida KidCare Program Evaluation Report Calendar Year 2023**

**Annual Report to the Florida Legislature  
2025**



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## Introduction to Florida KidCare

### Introduction

This report is produced in accordance with Section 409.8177, F.S., which requires the Agency for Health Care Administration (AHCA), in consultation with the Department of Health, the Department of Children and Families, and the Florida Healthy Kids Corporation, to submit a report evaluating the Florida KidCare program by January 1<sup>st</sup> of each year to the Governor, the President of the Senate, and the Speaker of the House of Representatives. The AHCA contracted with the University of Florida Institute for Child Health Policy to compile and analyze the data included in this report.

### KidCare Program Background

The Florida KidCare program was created in 1998 in response to Title XXI of the Social Security Act, facilitating the provision of quality health insurance coverage to children 18 years and younger enrolled in either Medicaid or the Children's Health Insurance Program (CHIP). Florida KidCare has provided doctor visits, shots, hospital stays, dental coverage, vision services, prescriptions, and behavioral health services for children for over two decades. At the end of Calendar Year (CY) 2023, 2.4 million children received care from Florida KidCare, with eligibility determined by age, medical necessity, and family income.

### Program Structure

Florida KidCare is the umbrella program for Florida's Medicaid and CHIP programs. Assignment to a particular program is determined by the child's age, health status, and family income. Florida KidCare is not an entitlement program except for Medicaid, which means enrollment can be limited based on available funding. With the exception of Native American enrollees, CHIP participants contribute to the costs of their monthly family premiums. Note that the income thresholds listed below consider Modified Adjusted Gross Income (MAGI), which is used to determine eligibility for federal health care programs (Centers for Medicare & Medicaid Services, n.d.). Florida KidCare consists of four program components, all of which operate statewide:

### Medicaid

Medicaid is the health care program for children from families whose incomes fall below the income thresholds for CHIP coverage (see **Table 2**). Florida KidCare Medicaid recipients must be under 19 years of age. Families eligible for Medicaid coverage do not pay a monthly family premium. Health services and benefits are provided through Medicaid Managed Medical Assistance (MMA) plans, dental plans, and Fee-For-Service (FFS) providers. As the information in the Program Administration section of this report applies to both the MMA and FFS populations, they are combined into an overall Medicaid program population for all analyses in that section.

### MediKids

MediKids is a Medicaid "look-alike" program for children 1-4 years of age with a family income above 133% up to 210% of the Federal Poverty Level (FPL) and are eligible for CHIP premium assistance. State law provides that children in MediKids must receive care through a managed care delivery system; thus, MediKids members are enrolled in the Medicaid MMA and dental plans. MediKids families receiving this subsidized coverage pay a monthly family premium of \$15 (for family income above 133% up to 158% FPL) or \$20 (for family income above 158% up to 210% FPL) with no co-payments.

## Florida Healthy Kids

Florida Healthy Kids is a program offering subsidized insurance for children ages 5-18 who are between 133% and 210% FPL and eligible for CHIP premium assistance. The Florida Healthy Kids Corporation determines eligibility for Florida's CHIP programs and administers the Florida Healthy Kids program with three health plans that offer medical coverage. In addition, three dental insurers provide the dental benefits available to members. The dental benefits mirror those offered by Medicaid. CHIP-subsidized enrollees do not pay additional monthly family premiums for this dental coverage. Florida Healthy Kids families pay a monthly family premium of \$15 (for family income above 133% up to 158% FPL) or \$20 (for family income above 158% up to 210% FPL) with co-payments for certain services.

## Children's Medical Services Health Plan

Children's Medical Services (CMS) Health Plan is Florida's Title V program for children with special health care needs. Children enrolled in CMS Health Plan have access to specialty providers, care coordination programs, early intervention services, and other medically necessary services. While operated by a managed care organization, the Florida Department of Health (DOH) administers the program, and it is open to Medicaid and CHIP-funded children who meet clinical eligibility requirements. CHIP CMS Health Plan enrollees receive premium assistance and are limited to ages 1-18 years. In contrast, enrollees in the Medicaid CMS Health Plan can range from birth through 20 years of age. Infants under 1 year of age with family incomes between 192-206% of the FPL are CHIP-funded but receive services through CMS Health Plan in the Medicaid managed care program. CMS Health Plan covers Medicaid state plan services for its Medicaid and CHIP-funded enrollees with no co-payments. Families with CHIP CMS Health Plan pay a monthly family premium of \$15 (for family income above 133% up to 158% FPL) or \$20 (for family income above 158% up to 210% FPL). The Medicaid CMS Health Plan is one of the Medicaid MMA plans with data included as part of the Medicaid MMA program. The CHIP CMS Health Plan is presented as a separate Florida KidCare program and is listed as part of the CHIP program. Liberty Dental Plan provides dental services for CHIP CMS Health Plan, and members in the Medicaid CMS Health Plan can select one of three dental plans offered through the Medicaid program.

## Behavioral Health Network

Within CHIP CMS Health Plan is the Behavioral Health Network (BNet). CHIP CMS Health Plan enrollees aged 5 to 18 who meet the Department of Children and Families' (DCF) clinical eligibility for serious behavioral or emotional conditions may be enrolled in BNet. The Florida Legislature created BNet by passing Florida Statute § 409.8135 in 1998 with program administration conducted by DCF (*Behavioral Health Services*, 1998). BNet aims to treat the spectrum of behavioral health conditions and supports children and families by offering treatment and management assistance.

## Full-Pay Program

Full-pay coverage options exist for families of children 1-18 who apply to Florida KidCare but have been determined to be ineligible for Medicaid or CHIP premium assistance. Families can enroll their children in Florida Healthy Kids or MediKids full-pay options if their income is over 210% FPL or if their income is under 210% FPL, but they are not eligible for CHIP premium assistance.

In 2023, Florida Healthy Kids full-pay coverage per member cost a monthly rate of \$259.50 with dental coverage or \$248.21 without dental coverage. MediKids full-pay members paid a monthly premium of \$210.18 per child, which included dental coverage. This report does not include data on full-pay members unless specified because the full-pay program is funded solely through family contributions (i.e., families do not receive subsidized coverage).

There is not a full-pay coverage option for the CHIP CMS Health Plan. Children with special health care needs who are not eligible for CHIP premium assistance may enroll in the full-pay options of MediKids or Florida Healthy Kids, depending on the child's age.

### Recent Program Changes

In 2022, legislation was signed into law to expand the income eligibility for Florida KidCare to 300% of the FPL (Florida Healthy Kids Corporation, 2023). The state submitted a Section 1115 waiver to request approval to implement this change (Agency for Health Care Administration, 2024).

With the end of the COVID-19 public health emergency in May 2023, so came the end of the eligibility hold that had been in place. During the public health emergency individuals were not disenrolled from Medicaid or CHIP except in limited circumstances. The process of reviewing eligibility for all individuals on Medicaid and CHIP is referred to as "unwinding." Preparing for the unwinding process began with reviews of each assistance eligibility group type in December 2022. This impacted Medicaid renewal totals, which are detailed in the next section.

### Eligibility Criteria

Eligibility criteria vary under the Medicaid and CHIP programs. However, for both programs, the child must be a U.S. citizen or a qualified non-citizen and must not be an inmate of a public institution or a patient in an institution for mental illnesses. In addition, eligibility also varies under the four program components of Florida KidCare, detailed on the next page in **Table 2**.

### Medicaid Eligibility

State and federal laws specify that a child must meet the following age and income requirements to be eligible for Medicaid assistance:

- Under 1 year of age must have a household income equal to or less than 206% FPL
  - Children with household income over 192% to 206% FPL are funded by CHIP
- Ages 1-5 years must have a household income equal to or less than 140% FPL
- Ages 6-18 years must have a household income equal to or less than 133% FPL
  - Children with household income between 112%-133% FPL are funded by CHIP

### CHIP Eligibility

To be eligible for CHIP assistance, state and federal laws specify that a child must:

- Be under 19 years of age
- Be uninsured
- Be ineligible for Medicaid
- Have a family income above 133% FPL but not exceeding 210% FPL

**Table 1** provides information from the past five years about the FPL for a family of four, as stated by the U.S. Department of Health and Human Services (Office of The Assistant Secretary for Planning and Evaluation, n.d.). To be eligible for Medicaid coverage in 2023, a family of four must have had an annual income equal to or less than \$39,900.

### **Table 1. Federal Poverty Level for a Family of Four**

Income as a % of FPL	2019	2020	2021	2022	2023
100%	\$25,750	\$26,200	\$26,500	\$27,750	\$30,000
133%	\$34,248	\$34,846	\$35,245	\$36,908	\$39,900
140%	\$36,050	\$36,680	\$37,100	\$38,850	\$42,000
206%	\$53,045	\$53,972	\$54,590	\$57,165	\$61,800
210%	\$52,710	\$54,075	\$55,020	\$58,275	\$63,000
300%	\$77,250	\$78,600	\$79,500	\$83,250	\$90,000

**Table 2. Florida KidCare Program Eligibility, CY 2023**

Agency Roles	Age	Eligibility	Monthly Premium	Plan / Dental Coverage
<b>Title XIX: Medicaid</b>				
Administration: AHCA Eligibility: DCF	>19	Infants: Up to 206% FPL 1-5: up to 140% FPL 6-18: up to 133% FPL <sup>a</sup>	No premiums	Medicaid health and dental plans
<b>Title XXI: CHIP</b>				
<b>MediKids</b>				
Administration: AHCA Eligibility: FHKC	1-4	Uninsured- Above 133% up to 210% FPL	\$15 or \$20/family	Medicaid health <sup>b</sup> and dental plans
<b>Florida Healthy Kids</b>				
Administration & Eligibility: FHKC	5-18	Uninsured- Above 133% up to 210% FPL	\$15 or \$20/family	Florida Healthy Kids health and dental plans
<b>Children’s Medical Services (CMS) Health Plan</b>				
Administration: DOH Eligibility: FHKC <sup>c</sup>	1- 18	Children with special health care needs; Uninsured- Above 133% up to 210% FPL	\$15 or \$20/family	CHIP CMS Health Plan, BNet <sup>d</sup> for children ages 5-18 with severe behavioral needs, and Liberty Dental Plan

**Note.** The Florida CHIP eligibility income limit is 210% of the FPL. For families who exceed the 210% limit, an additional 5% income deduction is applied, resulting in a 215% limit.

<sup>a</sup> CHIP funds Medicaid services for infants with family incomes between 192% and 206% FPL and children 6-18 years of age with family incomes above 112% up to 133% FPL. <sup>b</sup> Eligible MediKids members can qualify for the Medicaid health plans and the CHIP CMS Health Plan; enrollment in the CMS program disenrolls members from MediKids – dual enrollment is prohibited. <sup>c</sup> The DOH or DCF determines clinical eligibility for the CMS Health Plan by review of applications received by FHKC. <sup>d</sup> BNet is the Behavioral Health Network.

**Statutorily Required Information.**

Section 409.8177, F.S., requires that the state report on the progress made in reducing the number of uncovered low-income children. Data from the most recent estimates from the United States (U.S.) Census Bureau’s American Community Survey, which offers a more in-depth breakdown of topics not

covered by the decennial census, shows that the uninsured rate estimates are 7.5% for children in Florida (an increase of .1 percent from 2022 when the rate was 7.4%) and 5.4% for children nationwide (an increase of .3 percent from 2022 when the rate was 5.1%) (U.S. Census Bureau, 2024). Additional data from the Bureau's American Community Survey estimates that in 2023, 40% of Florida children under age 19 were insured through Medicaid or CHIP coverage, while 44% were covered through employee-sponsored insurance. The national rates for public insurance coverage (39%) nearly mirrored Florida, though employer-sponsored rates were higher at 52% (U.S. Census Bureau, 2024)

## Section 1: Program Administration

### Methodology

This section presents data detailing applications, enrollment, and renewals for each Florida KidCare program. At the end of this section is information about the administration, expenditures, and funding for the Children's Health Insurance Program (CHIP) portion of Florida KidCare. The following program administration areas in this evaluation include:

- Application volume and outcomes
- Enrollment totals and trends
- Renewal of coverage
- CHIP program financing data

By state law, the Florida Healthy Kids Corporation (FHKC) is responsible for processing applications for Florida KidCare coverage. A third-party vendor under contract with the FHKC processes the application, enrollment, and renewal data. The Department of Children and Families (DCF) determines eligibility for Medicaid. This section's data are from FHKC and DCF, except for CHIP financing data, courtesy of the Agency for Health Care Administration (AHCA). Funding for the Florida KidCare CHIP program comes from the federal government, state allocations, and member payments for premiums. Please note that the Medicaid data applies to the entire Medicaid program for this section.

### Applications

Families can apply for Florida KidCare coverage through FHKC via mail, telephone, fax, or internet. Medicaid applications are sent to DCF to determine eligibility, although applications for children can also be sent directly to DCF. Families can include more than one child on applications for Florida KidCare coverage. Only the most recent application is included for cases with duplicate or multiple applications. Thus, subsequent mentions of applications or applicants refer to the unduplicated amount.

In Calendar Year (CY) 2023, FHKC received a total of 278,544 applications, which contained processable information on 428,421 children, and DCF received a total of 1,444,344 applications, which contained processable information on 1,072,483 children.

For families applying for Florida KidCare coverage through FHKC in CY 2023, the average age of applicants was 9.7 years, the average monthly income was \$4,672, and the average household size was 3.58 persons. For families applying for Florida KidCare coverage through DCF, the average age of applicants was 9.7 years, the average monthly income of families applying for Florida KidCare coverage was \$4,127, and the average household size was 4.05 persons. **Table 3** presents the demographic data by month for the applications received for Florida KidCare coverage during CY 2023.

**Table 3. Applicant and Family Demographics Received by FHKC and DCF, CY 2023**

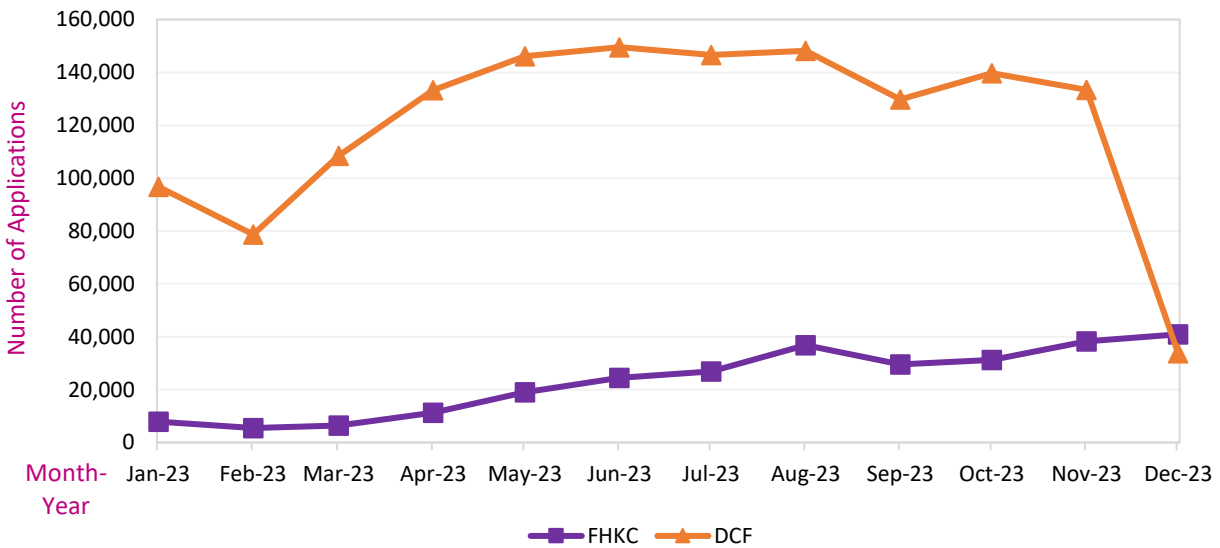
2023		Child age, mean years	Child age, std. dev.	Monthly family income, mean <sup>a</sup>	Monthly family income, std. dev.	Household size, mean <sup>b</sup>	Household size, std. dev.
January	FHKC	9.59	5.01	\$4,972	\$4,023	3.56	1.30
	DCF	9.08	5.23	\$3,965	\$4,571	4.02	1.22
February	FHKC	9.40	5.04	\$4,910	\$4,139	3.56	1.29
	DCF	8.92	5.24	\$3,785	\$3,775	4.04	1.16
March	FHKC	9.35	5.08	\$5,035	\$4,069	3.53	1.28
	DCF	9.00	5.30	\$3,774	\$4,355	4.01	1.10
April	FHKC	9.40	5.05	\$4,775	\$3,237	3.58	1.28
	DCF	9.40	5.26	\$4,051	\$3,523	4.06	1.10
May	FHKC	9.76	4.88	\$4,738	\$2,722	3.63	1.29
	DCF	9.75	5.08	\$4,245	\$3,425	4.12	1.13
June	FHKC	9.84	4.82	\$4,563	\$2,622	3.56	1.29
	DCF	9.74	5.04	\$4,172	\$3,076	4.04	1.12
July	FHKC	9.62	4.82	\$4,592	\$2,932	3.55	1.25
	DCF	9.63	4.95	\$4,210	\$3,224	4.02	1.06
August	FHKC	9.66	4.79	\$4,700	\$2,845	3.58	1.29
	DCF	9.65	4.94	\$4,290	\$3,292	4.04	1.10
September	FHKC	9.57	4.91	\$4,650	\$3,103	3.59	1.27
	DCF	9.66	5.03	\$4,102	\$3,121	4.06	1.09
October	FHKC	9.55	4.94	\$4,561	\$2,873	3.58	1.32
	DCF	9.76	5.02	\$4,063	\$3,166	4.06	1.16
November	FHKC	9.80	4.95	\$4,619	\$3,088	3.56	1.29
	DCF	9.97	5.02	\$3,985	\$3,365	4.02	1.08
December	FHKC	9.88	4.95	\$4,747	\$4,634	3.57	1.30
	DCF	10.04	5.02	\$4,100	\$5,835	4.01	1.09
Total	FHKC	9.68	4.91	\$4,672	\$3,263	3.58	1.29
	DCF	9.69	5.05	\$4,127	\$3,662	4.05	1.11



<sup>a</sup> Figures are rounded to the nearest dollar. Annual incomes above \$100,000 were considered out of range and were not used in the calculations. <sup>b</sup> Household sizes below 2 and above 21 were considered out of range and not used in the calculations.

**Figure 1** displays the number of Florida KidCare applications received monthly by the FHKC and DCF for CY 2023. The highest number of applications received in a single month was 149,555 in June for DCF and 40,920 applications by FHKC in December. Though the number of DCF applications fell dramatically in December, this is consistent with prior-year trends.

**Figure 1. Florida KidCare Monthly Applications Received by FHKC and DCF, CY 2023**



### Review and Outcomes of Applications

An application is considered reviewed if it was specifically approved or denied. For applications submitted directly to FHKC, application processing included internal review at FHKC and additional external review by DCF and/or Children’s Medical Services (CMS) Health Plan, including the Behavioral Health Network (BNet), for applications that met specific criteria. DCF assessed each child’s eligibility for Medicaid coverage, and CMS Health Plan assessed each child’s clinical eligibility for CMS Health Plan coverage. The third-party vendor who processes application information for the FHKC does not include account transfers from DCF or the Federally Facilitated Marketplace. The average processing time was 22 days for approved applicants referred to DCF and 38 days for applicants not referred to DCF and later enrolled in a different Florida KidCare program.

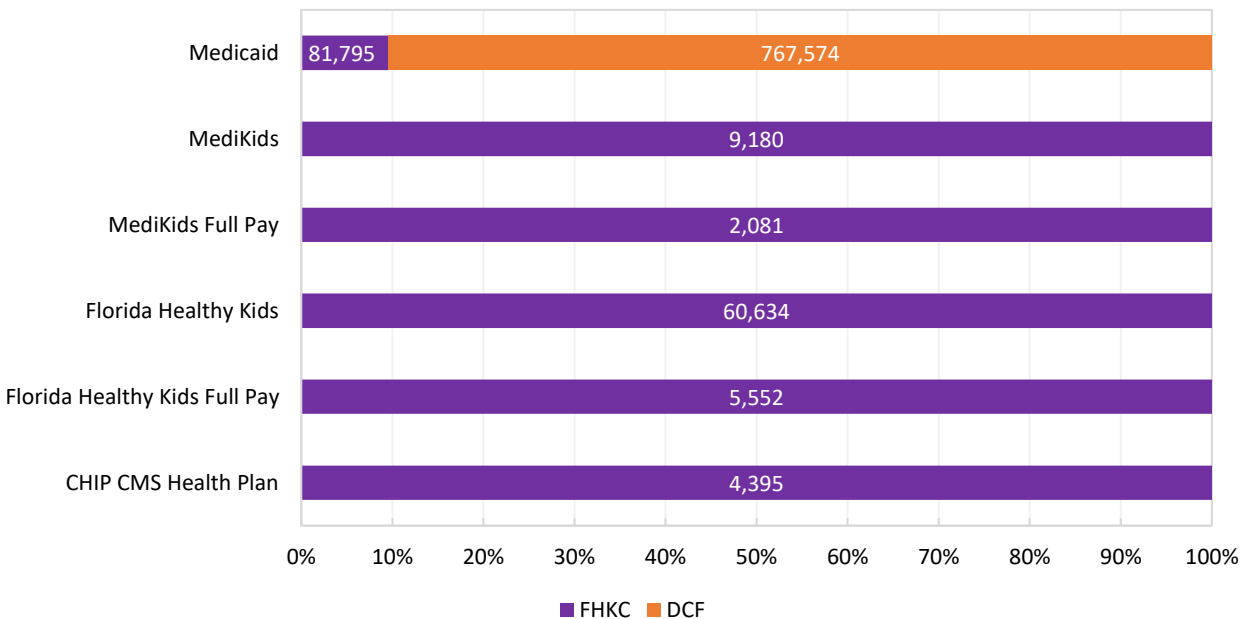
**Table 4** presents the number of applications for Florida KidCare during CY 2023 sent directly to either FHKC or DCF. FHKC and DCF processed 1,722,888 applications, which represented 1,500,904 applicants. Of the applicants processed, 931,211 children were approved, yielding a 62% approval rate.

**Table 4. Florida KidCare Applications Processed by FHKC and DCF, CY 2023**

Application Totals	FHKC Total	DCF Total	FHKC and DCF Total
Applications	278,544	1,444,344	1,722,888
Children on Applications	428,421	1,072,483	1,500,904
Approved Children: All Florida KidCare	163,637	767,574	931,211

**Figure 2** presents the distribution of approved applications by Florida KidCare program as submitted to FHKC and DCF. An approval indicates that the applicant has submitted all necessary documentation and was deemed eligible for Medicaid, CHIP, or full-pay coverage. Following approval, enrollment in CHIP or full-pay coverage is contingent upon the family paying the appropriate premium.

**Figure 2. Approved Children Processed by FHKC and DCF by Program, CY 2023**



**Table 5** displays the reasons why children were ineligible for Florida KidCare coverage. CHIP denial data comes from FHKC, and Medicaid denial data comes from DCF. The DCF data were sorted into 16 overall categorical themes. As several of these themes were closely related, they were blended into seven final categories. The data from FHKC fell within 10 themes, which were consolidated into five of the final categories.

Please note that the reasons for denial are not mutually exclusive. Therefore, applications could include more than one reason for lack of eligibility.

Reasons for ineligibility are summarized below:

- 211,390 were not in compliance, did not provide the required materials (including payment), or failed to complete one or more steps in the application process

- 173,996 were denied because one or more household members did not meet either the eligibility, disability, or Medicaid need requirements
- 165,336 were either enrolled in, eligible for, or referred to another insurance program
- 42,148 were ineligible due to age
- 33,558 were ineligible due to income
- 16,430 were not eligible because either the United States (U.S.) citizenship or Florida residency requirement was not met
- 11,114 were either incarcerated, involved in a legal matter, or had a law violation, including a parental custody issue

**Table 5. Reasons for Denial from Florida KidCare, CY 2023**

Reasons for Denial of Coverage	Medicaid Total	CHIP Total	Florida KidCare Total
Noncompliance or incomplete application/payment/requirements	30,859	180,531	211,390
Eligibility/Disability/Medicaid need unmet	173,996	N/A	173,996
Enrolled in/eligible for/referred to other insurance program	54,484	110,852	165,336
Age	26	42,122	42,148
Income	33,558	N/A	33,558
Citizenship or residency requirement not met	15,112	1,318	16,430
Law violation/legal matter	11,100	14	11,114
Other	1,276	N/A	1,276
Total	323,070	334,837	657,907

## Enrollment

In CY 2023, enrollment in Florida’s Medicaid program decreased from the prior year. Monthly enrollment data compiled from 2015 to 2023 showed enrollment increasing for CHIP program membership from 2016-2019 and mostly decreasing from 2020-2022 while Medicaid enrollment largely did the opposite. Florida Healthy Kids Full-Pay has steadily increased in enrollment since 2016, with a 104% increase in enrollment in CY 2023.

**Table 6** presents the point-in-time enrollment figures for the number of children enrolled on a specific date in CY 2022 and CY 2023 and the percent growth during those time frames. This table shows program-specific enrollment breakdowns and the overall program totals factored into the Florida KidCare Total rate.

- At the end of CY 2023, 2,415,918 children were enrolled in the Florida KidCare program, a decrease of 13% from the previous year.
- The overall increase in Florida KidCare enrollment was due to the decreases in both Medicaid and CHIP-funded Medicaid enrollment, with 14% and 17% increases, respectively.

- Subsidized CHIP programs increased from December 2022 to December 2023, with MediKids more than doubling from the prior year with an increase of 111%.

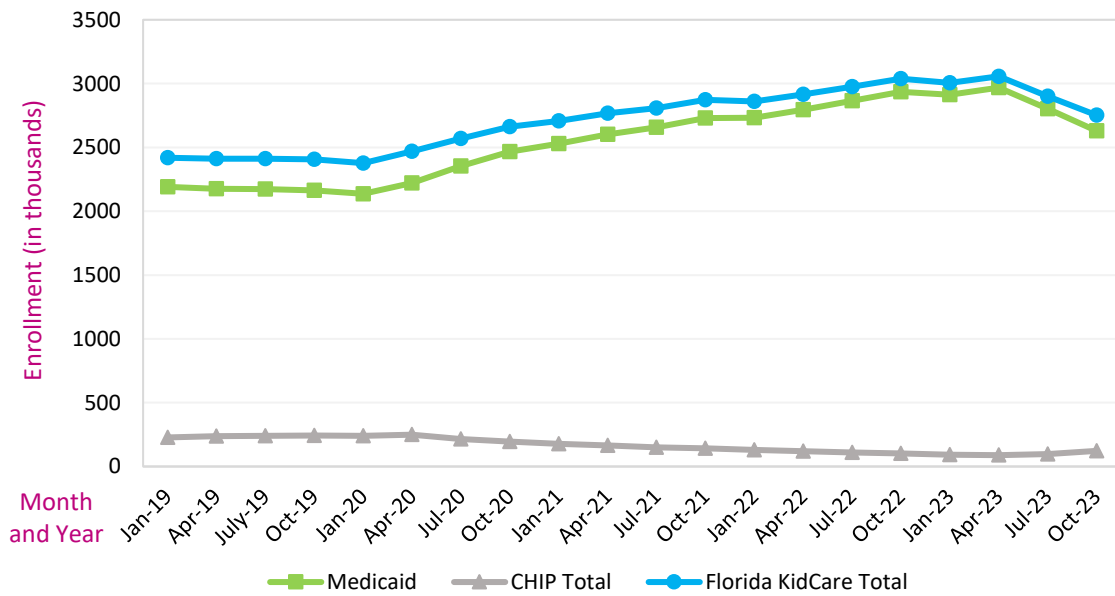
**Table 6. Point-in-time Enrollment Figures for the Last Day of CY 2022 and CY 2023**

<b>CY 2022- CY 2023 Enrollment</b>	<b>Dec. 31, 2022</b>	<b>Dec. 31, 2023</b>	<b>% Change</b>
Florida Healthy Kids	84,627	112,167	32.54%
MediKids	5,536	11,706	111.45%
CHIP CMS Health Plan	7,162	8,974	25.30%
<b>Total CHIP-funded enrollment CHIP</b>	<b>97,325</b>	<b>132,847</b>	<b>36.50%</b>
Florida Healthy Kids Full Pay	22,163	23,033	3.93%
MediKids Full Pay	3,492	3,482	-0.29%
Medicaid < Age 1	2,539	2,163	-14.81%
Medicaid Ages 6-18	189,275	156,345	-17.40%
<b>Total CHIP-funded Medicaid</b>	<b>289,139</b>	<b>291,355</b>	<b>0.77%</b>
Medicaid for Children	2,449,349	2,098,048	-14.34%
<b>Florida KidCare</b>	<b>2,764,143</b>	<b>2,415,918</b>	<b>-12.60%</b>

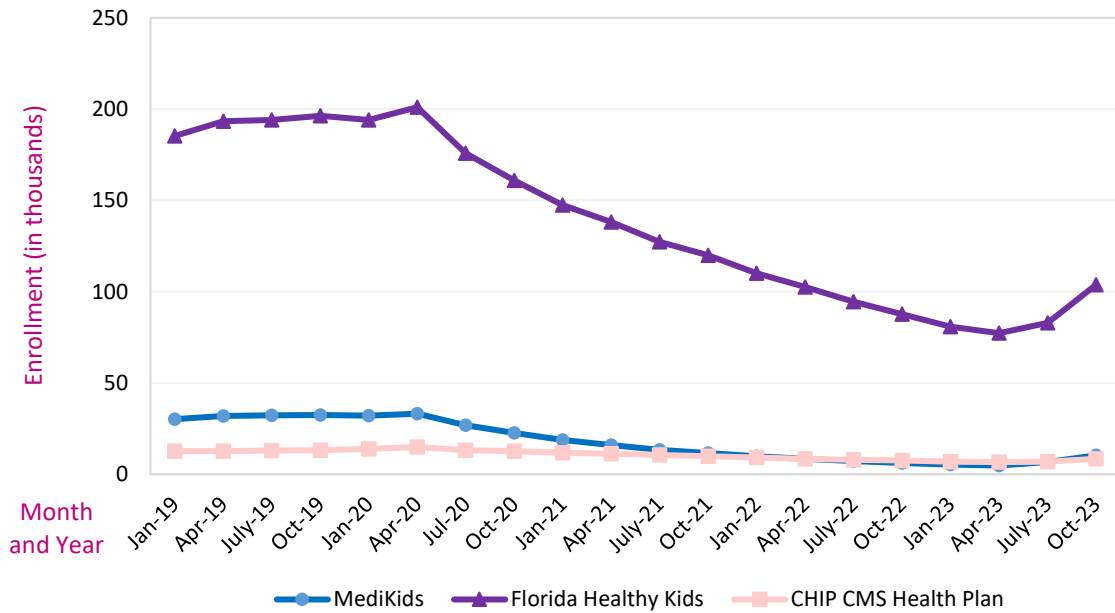
### Enrollment Trends

Figure 3 and **Figure 4** display the enrollment growth trends by program at the beginning of the quarter for the last five calendar years.

**Figure 3. Florida KidCare Enrollment for Medicaid, CHIP, and Florida KidCare, 5-Year Trend**



**Figure 4. Florida KidCare Enrollment for CHIP Programs, 5-Year Trend**



### Ever Enrolled and Newly Enrolled

**Table 7** provides another perspective on the number of children enrolled in Florida KidCare during CY 2023. Note that these figures represent enrollees as they enter each program. For example, a child who ages out of MediKids and is enrolled in Florida Healthy Kids in CY 2023 would be represented three times in this table: once as a MediKids “ever” enrollee, once as a Florida Healthy Kids “new” enrollee, and once as a Florida Healthy Kids “ever” enrollee.

- Medicaid served a total of 3,176,105 children in CY 2023. Of those children, 10% had not been served by Medicaid in the year prior to their enrollment in CY 2023.
- Of the 194,327 children served by the Florida KidCare CHIP program during CY 2023, 96,241 (50%) had not been covered by CHIP programs in the year prior to their enrollment in CY 2023.
- Across all subsidized programs, MediKids had the highest percentage of new enrollees, with 75% of members being new enrollees in CY 2023.
- When reviewing only full-pay members, these rates remain high: Half of all MediKids Full Pay members were new enrollees in CY 2023. For Florida Healthy Kids Full Pay, the rate was 39%.
- In CY 2023, each of the CHIP programs plus MediKids Full Pay saw the highest percentage of new enrollees over the past four years. Conversely, Medicaid had the lowest rate of new enrollees over the past four years in CY 2023 at 9.8%, down from the four-year high of 15.7% in CY 2020.

**Table 7. Children “Ever” and “Newly” Enrolled in Florida KidCare, CY 2023**

CY 2023	Ever Enrolled <sup>a</sup>	Newly Enrolled <sup>b</sup>	New Enrollees %
Florida KidCare Total	3,413,204	423,452	12.4%
Medicaid	3,176,105	309,721	9.8%

MediKids	20,963	15,675	74.8%
Florida Healthy Kids	160,818	75,244	46.8%
CHIP CMS Health Plan	12,546	5,322	42.4%
<b>Total CHIP</b>	<b>194,327</b>	<b>96,241</b>	<b>49.5%</b>
MediKids Full Pay	6,764	3,472	51.3%
Florida Healthy Kids Full Pay	36,008	14,018	38.9%
<b>Total Full Pay</b>	<b>42,772</b>	<b>17,490</b>	<b>40.9%</b>

<sup>a</sup> Ever Enrolled includes all children enrolled in a program during the specific period, which includes new and established enrollees. Thus, children in the Newly Enrolled column are also counted in the Ever Enrolled column.<sup>b</sup> New Enrollees are children who became covered during the specific period but had not been enrolled in that program during the previous 12 months.

## Renewals

Medicaid renewals are conducted by DCF annually, and recipients are classified into two main assistance groups: those whose eligibility is determined by modified adjusted gross income (MAGI) and those determined through federal CMS's Enrollment DataBase (EDB).

DCF attempts to automatically renew benefits for MAGI assistance groups through a passive redetermination process. The data sources used in this process can include state resources like the Florida Department of Economic Opportunity (DEO) or the State Wage Information Collection Agency and federal sources like the Social Security Administration. If the automated renewal is successful, the recipient is notified that their Medicaid benefits will continue for another 12 months. If the automated process is not successful, the recipient is notified that they must renew by the middle of the last month of eligibility if they want the coverage to continue. Once the member submits the necessary information, eligibility is redetermined. When an assistance group fails to either initiate or complete the renewal process, the group's eligibility is closed out at the end of the last month of eligibility. When this happens, the group is given three months to complete the process. Following successful completion, coverage is restored through the first month of ineligibility, a process known as gap coverage for Medicaid renewals. Recipients may complete their renewal for DCF review online, by phone, or through paper submission, with most renewals completed online.

In the case of EDB assistance groups, the group is notified in writing of the upcoming renewal date. The group must complete the renewal online, by phone, or by mail before the middle of the last month of eligibility if they wish for coverage to continue. Beyond initiating the renewal process, the steps are the same for EDB and MAGI assistance groups.

Families of children in CHIP CMS Health Plan, Florida Healthy Kids, and MediKids who receive CHIP premium assistance must participate in a coverage renewal process every 12 months, which includes confirmation of the child's continued eligibility for the program. As each family's renewal anniversary approaches, the FHKC third-party administrator sends parents detailed information about the renewal process and required documentation. If families do not respond or cannot confirm their child's continued eligibility, the child is disenrolled. The CHIP children enter a new 12-month period of continuous eligibility upon completing their renewal.

Families must provide annual proof of earned and unearned income to renew eligibility. Beginning in January 2010, federal CHIP Reauthorization Act legislation required families to provide proof of their children’s citizenship and identity. Similar to the Medicaid renewal process, an administrative renewal is first attempted. The administrative renewal is based on existing account information and electronic income matches received from the state’s Department of Revenue and DEO. If data matches are available, a family’s continued eligibility is determined, and a letter is sent to the family that explains how their continued eligibility was determined.

The letter informs the family of criteria found in the electronic system, such as the household income and members in the household. If the family agrees with the information, the renewal is complete. If the family disagrees or an administrative renewal is not possible, the family is sent a pre-populated renewal form to complete and provide income documentation. When the requested information is received, the renewal is completed, and a notice is sent to the family advising them of any changes and their monthly premium. A cancellation notice is sent to the family if the requested information is not received.

**Table 8** displays the CY 2023 Florida KidCare, CHIP, and Medicaid renewal rates. During this period, 94.1% and 74.5% of eligible children had CHIP or Medicaid coverage renewed, respectively, resulting in an overall Florida KidCare renewal rate of 75.5%.

**Table 8. Successful Renewal of Florida KidCare Coverage, CY 2023**

2023	# of children eligible for renewal		# of children whose renewals were processed successfully		% of eligible children whose coverage was successfully renewed <sup>a</sup>	
	Medicaid	CHIP	Medicaid	CHIP	Medicaid	CHIP
Month renewal was due						
January	52,688	6,537	52,508	6,170	99.7%	94.4%
February	53,289	6,791	53,140	6,452	99.7%	95.0%
March	41,589	6,091	41,442	5,737	99.6%	94.2%
April	215,603	6,242	170,317	5,816	79.0%	93.2%
May	140,792	4,837	125,892	4,457	89.4%	92.1%
June	119,159	4,712	107,420	4,434	90.1%	94.1%
July	179,643	4,384	152,588	4,196	84.9%	95.7%
August	103,942	4,532	59,713	4,275	57.4%	94.3%



<b>September</b>	73,310	5,458	47,604	5,004	64.9%	91.7%
<b>October</b>	122,683	4,376	48,226	4,172	39.3%	95.3%
<b>November</b>	64,449	4,703	29,568	4,462	45.9%	94.9%
<b>December</b>	69,253	4,009	33,301	3,784	48.1%	94.4%
<b>Totals</b>	1,236,400	62,672	921,719	58,959	74.5%	94.1%
<b>Total- All Florida KidCare</b>	1,299,072		980,678		75.5%	

<sup>a</sup> The renewal is successful if the member was enrolled in both the renewal month and the following month.

Although CHIP rates remain relatively steady, the May 2020 rate of 89.3% was the lowest renewal rate in the past five years. Medicaid renewals have decreased, with a five-year low of 39.3% in October 2023. The prior five-year low renewal rate was logged in October 2019 at 66.2%.

### CHIP Financing

This sub-section provides information on the funding of the Florida KidCare CHIP program. Data in these tables are first presented at a caseload conference where program enrollment is discussed and projected for future years. Approximately one month later, using totals from the caseload conference, an estimating conference is held to estimate program expenditures, costs, and budget surplus/deficit projections for the coming years. Estimating conferences take place multiple times each year and are crucial to state operations, as they help determine revenue and resource demand and ultimately help to ensure that Florida maintains a balanced state budget (Office of Economic and Development Research, 2024a). These conferences include data from AHCA (MediKids), FHKC (Florida Healthy Kids), and the Florida Department of Health (CMS Health Plan and BNet). In addition to representatives from those organizations, professional staff members, also called principals, from the Governor’s Office, Florida Senate, Florida House of Representatives, and the state Legislative Office of Economic and Demographic Research attend as well.

**Table 9** details the actual CHIP administrative costs for State Fiscal Year (SFY) 2023-2024 and budgeted costs for SFY 2024-2025. Please note that an SFY runs from July 1 to June 30. Administrative costs to the FHKC cover the costs of processing applications and determining eligibility for CHIP programs, among other possible costs associated with running portions of the administration of the Florida KidCare program. These costs are calculated per member per month, a commonly used metric for health plans to understand annual or monthly costs. This metric can also be used within subgroups of a population (e.g., specialty plans) to determine if a certain subgroup utilizes more expenditures than others. In 2023-2024, these costs were \$14.01 per CHIP member per month, with an expected decrease to \$11.46 for 2024-2025.

**Table 9. Florida KidCare CHIP Administration Costs, SFYs 2023-2025**

Program	SFY 2023-2024 Actuals	SFY 2024-2025 Budgeted
Average Monthly Caseload	134,771	161,023
Number of Case Months	1,617,249	1,932,276
Administration Cost per Member Per Month	\$14.01	\$11.46

**Note.** Data in this table are from the July 24, 2024, Florida KidCare Estimating Conference documents.

**Table 10** presents the per member per month premium rates for the Florida KidCare CHIP programs projected for SFY 2023-2024 and budgeted for 2024-2025. These figures are based on program enrollment projections and are used to determine program expenditures and revenue, a critical part of making budget forecasts and funding allocations. For 2023-2024, the per member per month average costs for Florida Healthy Kids medical coverage was \$171 with dental coverage costing \$14. Both costs rise the following year. In contrast, MediKids coverage was \$213 in SFY 2023-2024 with only a \$5 increase thereafter. The per member per month costs for the CMS Health Plan and BNet programs were higher, as these programs typically cover more medically complex members. Note that these totals are only for subsidized programs within CHIP; therefore, the MediKids and Florida Healthy Kids full-pay programs are not included.

**Table 10. Per Member Per Month Average Cost for CHIP Programs, SFYs 2023-2025**

Program	SFY 2023-2024 Projected	SFY 2024-2025 Budgeted
MediKids	\$212.93	\$218.46
Florida Healthy Kids- Medical	\$171.28	\$193.85
Florida Healthy Kids- Dental	\$14.28	\$15.48
CMS Health Plan	\$1,511.66	\$1,669.75
BNet	\$1,207.29	\$1,232.64
Medicaid Infants <1	-	-
Medicaid Children 6-18	\$267.43	\$320.47

**Note.** CHIP-funded Medicaid for Infants <Age 1 and Children Ages 6-18 data are from Social Services Estimating Conferences in January 2024 and July 2024; all other data are from the July 24, 2024, Florida KidCare Estimating Conference documents.

**Table 11** presents the actual totals for annual premium amounts collected from CHIP families for SFY 2023-2024 and the budgeted amount for SFY 2024-2025. The premium amounts collected from families are expected to increase across all CHIP programs in 2024-2025 for a net increase of four million based on enrollment projections.

**Table 11. Premiums Collected from CHIP Families, SFYs 2023-2025**

Program	SFY 2023-2024 Actuals	SFY 2024-2025 Budgeted
MediKids	\$1,279,178	\$1,992,004
Florida Healthy Kids	\$15,622,170	\$18,789,221
CMS Health Plan	\$1,284,822	\$1,814,934
<b>Total</b>	<b>\$18,186,170</b>	<b>\$22,596,159</b>

**Note.** Data in this table are from the July 24, 2024, Florida KidCare Estimating Conference documents.

Table 12 summarizes the total program costs alongside the federal and state shares for each Florida KidCare CHIP program for SFY 2023-2024 and budgeted for SFY 2024-2025. The BNet program and CHIP-funded Medicaid programs do not require a family contribution. The Florida Healthy Kids and MediKids full-pay programs do not receive federal or state funds as these programs are funded through family contributions (i.e., monthly premiums and co-payments). Those programs are listed for comparison alongside other CHIP programs. CHIP program expenditures for SFY 2024-2025 are forecasted to hit just over \$1.5 billion.

**Table 12. Florida KidCare CHIP Expenditures and Revenue Sources, SFYs 2023-2025**

Actual SFY 2023-2024 By Program	Expenditures	Family Contributions	Federal Funds	State Funds
<b>CHIP</b>				

MediKids	\$30,157,705	\$1,279,178	\$20,574,862	\$8,303,664
Florida Healthy Kids	\$249,763,956	\$15,622,170	\$167,238,777	\$66,903,009
CMS Health Plan	\$167,397,032	\$1,284,822	\$118,635,201	\$47,477,008
BNet	\$3,503,556	\$0	\$2,507,242	\$996,313
<b>Full-Pay Programs</b>				
MediKids Full Pay	\$22,491,727	\$10,105,326	\$0	\$0
Florida Healthy Kids Full Pay	\$65,820,411	\$65,820,411	\$0	\$0
<b>CHIP-Funded Medicaid</b>				
Medicaid Infants <1	\$0	\$0	\$0	\$0
Medicaid Children 6-18	\$349,232,958	\$0	\$250,182,633	\$99,050,324
<b>Total CHIP Services</b>	\$800,055,205	\$18,186,170	\$559,138,716	\$222,730,319
<b>Administration</b>	\$22,665,172	\$3,764,532	\$13,531,310	\$5,369,330
<b>Grand Total</b>	\$822,720,377	\$21,950,702	\$572,670,026	\$228,099,649
<b>Budgeted SFY 2024-2025 By Program</b>	<b>Expenditures</b>	<b>Family Contributions</b>	<b>Federal Funds</b>	<b>State Funds</b>
<b>CHIP</b>				
MediKids	\$48,405,576	\$1,992,004	\$32,559,487	\$13,854,085
Florida Healthy Kids	\$341,562,779	\$18,789,221	\$226,471,551	\$96,302,008
CMS Health Plan	\$259,898,610	\$1,814,934	\$181,029,110	\$77,054,565
BNet	\$4,361,118	\$0	\$3,059,361	\$1,301,757
<b>Full-Pay Programs</b>				
MediKids Full Pay	\$29,086,743	\$12,716,316	\$0	\$0
Florida Healthy Kids Full Pay	\$74,244,830	\$74,244,830	\$0	\$0
<b>CHIP-Funded Medicaid</b>				
Medicaid Infants <1	\$0	\$0	\$0	\$0
Medicaid Children 6-18	\$377,195,382	\$0	\$264,629,907	\$112,565,475
<b>Total CHIP Services</b>	\$1,031,423,466	\$22,596,159	\$707,749,416	\$301,077,890
<b>Administration</b>	\$22,143,883	\$3,453,815	\$13,111,948	\$5,578,120
<b>Grand Total</b>	\$1,053,567,349	\$26,049,974	\$720,861,365	\$306,656,010

**Note.** CHIP-funded Medicaid for Infants <Age 1 and Children Ages 6-18 data are from Social Services Estimating Conferences in January 2024 and July 2024; all other data are from the July 24, 2024, Florida KidCare Estimating Conference documents.

**Table 13** presents Florida KidCare CHIP SFY and Federal Fiscal Year (FFY) expenditures for the last five years, as well as the amounts budgeted for the current year. This data reflects totals reported to CMS and comprises state funds and expenditures that utilize federal CHIP award funding (using carry forward funds from the previous year). Carry forward funds are unobligated at the close of the FFY and, thus, may be carried over to the next year (National Institutes of Health, 2022). Note that an FFY runs from October 1 to September 30. Federal award dollars are expected to increase in the next SFY/FFY.

**Table 13. Florida KidCare CHIP Expenditures, SFYs and FFYs Five-Year Trend**

Year	Total	State Funds	Federal Funds
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<b>SFY</b>			
2019-2020	\$822,467,740	\$86,614,078	\$735,853,662
2020-2021	\$816,479,130	\$159,202,816	\$657,276,314
2021-2022	\$776,349,462	\$176,823,294	\$599,526,168
2022-2023	\$801,389,924	\$189,636,905	\$611,753,019
2023-2024	\$863,856,675	\$245,009,190	\$618,847,485
2024-2025	\$1,037,646,582	\$309,662,275	\$727,984,306
<b>FFY</b>			
2020 (2019-2020)	\$839,673,608	\$102,574,528	\$737,099,080
2021 (2020-2021)	\$772,393,175	\$172,150,991	\$600,242,184
2022 (2021-2022)	\$786,925,022	\$180,512,731	\$606,412,291
2023 (2022-2023)	\$797,853,948	\$195,334,593	\$602,519,355
2024 (2023-2024)	\$931,957,933	\$271,810,191	\$660,147,742
2025 (2024-2025)	\$1,057,660,254	\$317,097,121	\$740,563,133

**Note.** Data in this table are from the July 24, 2024, Florida KidCare Estimating Conference documents. Total amounts may not sum completely due to rounding.

**Table 14** presents the federal grant award and carry forward totals from each FFY for the last four years and amounts projected for FFYs 2024 and 2025. Note that these totals are based on the state allotment for CHIP funding, available only if the state contributes funding.

**Table 14. Federal Grant Award Balance and Carry Forward, FFYs 2020-2025**

<b>FFY</b>	<b>Federal Grant</b>	<b>Carry Forward Total</b>
2020 (2019-2020)	\$842,519,926	\$321,170,449
2021 (2020-2021)	\$780,820,674	\$501,748,939
2022 (2021-2022)	\$831,023,696	\$726,360,344
2023 (2022-2023)	\$671,582,970	\$795,423,959
2024 (2023-2024)	\$714,613,474	\$849,889,691
2025 (2024-2025)	\$714,613,474	\$823,940,031

**Note.** Data in this table are from the July 24, 2024, Florida KidCare Estimating Conference documents.

## Section 2: Family Experiences

### Background

To quantify and report the experiences of health plan enrollees, the National Committee for Quality Assurance (NCQA) utilizes the Consumer Assessment of Healthcare Providers and Systems (CAHPS®). CAHPS, launched by the Agency for Healthcare Research and Quality (AHRQ) in 1995, utilizes survey data to report health care consumer experiences and allows for direct comparison against other health plans (AHRQ, 2024a). Through the CAHPS questionnaire, plan members answer questions about topics important to health care consumers. The CAHPS surveys ask respondents to reflect on the care received in the months preceding the interview and vary by type of health plan (e.g., commercial or Medicaid) and location where care is provided, such as a nursing home or outpatient surgery (AHRQ, 2024b). For surveys examining care given to a minor, the respondent is the parent or guardian who knows most about the child’s health care.

The CAHPS survey measures patient experiences by presenting results of composite items, global rating questions, and stand-alone questions. Composites combine two or more related survey questions into one overall theme, whereas global rating questions ask that a respondent select a numerical value. Stand-alone questions from the standardized survey can also be included in reporting, as can NCQA-approved supplemental questions on topics like dental care or mental health services. While it utilizes the CAHPS survey as part of its quality measurements, NCQA maintains a version of the survey (designated by the use of the letter “H” after the survey number) that differs slightly from the AHRQ survey (AHRQ, 2020). These differences extend to topics such as criteria for completion status, sample sizes, and response rate calculation (AHRQ, 2020).

### Methodology

This section presents the results of surveys conducted in 2024 with caregivers of Florida KidCare members. A total of 7,787 telephone, internet, and mail surveys were conducted using the CAHPS child health plan 5.1H questionnaire. The University of Florida Institute for Child Health Policy (ICHP) utilized an NCQA-certified CAHPS survey vendor to conduct MediKids and Medicaid Fee-For-Service (FFS) surveys. Surveys for the Medicaid Managed Medical Assistance (MMA) plans, Florida Healthy Kids plans, and the Children’s Health Insurance Program (CHIP) Children’s Medical Services (CMS) Health Plan were collected by NCQA-certified CAHPS survey vendors contracted by the individual plans.

To be eligible for inclusion in the CAHPS survey, members must have been 17 or younger as of December 31 of the measurement year, been enrolled for the final six months of the measurement year with no more than a 45-day gap in coverage, and be currently enrolled at the time the sample was drawn.

NCQA guidelines state that health plans must achieve a denominator of at least 100 responses (NCQA, 2022b) for rates to be reportable. For a composite, an average of 100 responses across composite items is required to achieve the minimum denominator for reporting. This report indicates results below the small denominator threshold with the notation “N/A.” Note that when adding plans or programs together, the total may be more than 100 per item and, thus, be reportable.

Methodology for all ICHP-run surveys included a combination of telephone and mail methodology, while some plans utilized internet methodology in addition to telephone and mail. A timeline of the mixed

methodology for mail and telephone surveys is below. Note that with approval from NCQA, this timeline can be extended to account for barriers to timely responses.

Survey start: Initial survey mailed to the parents of randomly selected members.

- Day 4-10: A thank you/reminder postcard is mailed.
- Day 35: A replacement survey is mailed to non-respondents after 36 days.
- Day 39-45: A thank you/reminder postcard is mailed to non-respondents 10 days later.
- Days 56-70: Telephone interviews are conducted with members who have not responded to either survey mailing approximately 21 days after the replacement survey is mailed.

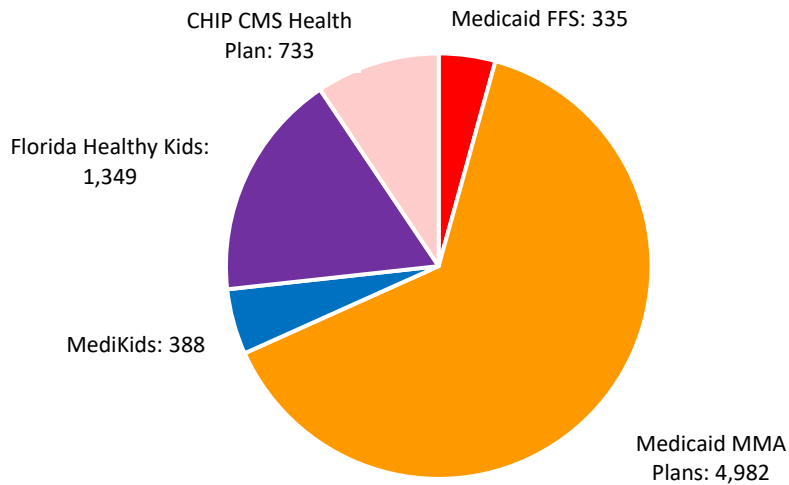
Florida KidCare rates are compared to national data through the Healthcare Effectiveness Data and Information Set (HEDIS®) submissions to NCQA for the same measurement year. As these benchmarks from Medicaid health maintenance organizations are not publicly available, only percentiles are offered here to depict where the rate falls compared to national data. Four percentile ranges are used in this report, and a legend details the range of each percentile. No benchmark data is available for that measure if no legend is presented, including instances where there are not enough national responses to generate a HEDIS benchmark. When this happens, the rates listed are not shaded.

The 12 Medicaid MMA plans that conducted a CAHPS survey, with specialty plan population noted, were Aetna, AmeriHealth, CMS Health Plan (children with chronic conditions), Community Care Plan, Humana, Molina Healthcare, Molina-SMI (children with serious mental illnesses), Simply, Sunshine Health Plan, Sunshine Health Plan-CW (children in the child welfare system), Sunshine Health Plan-SMI (children with serious mental illnesses), and United.

The three Florida Healthy Kids plans that conducted a CAHPS survey were Aetna, Community Care Plan, and Simply. Note that the Florida Healthy Kids plan data includes full-pay and subsidized members, whereas the MediKids data is subsidized only.

The data for the Medicaid MMA and Florida Healthy Kids plans are tallied into weighted program rates. Rates for Medicaid (FFS and MMA) and CHIP (MediKids, Florida Healthy Kids, and CHIP CMS Health Plan) were tabulated and weighted, as was an overall Florida KidCare rate. The sample totals by program are outlined in **Figure 5**, which displays the number of complete and eligible surveys completed for each Florida KidCare program.

**Figure 5. Number of Surveys Completed by Florida KidCare Program, 2024 Survey**



### Experience with Florida KidCare

Survey respondents answered demographic questions about their enrolled child. Options for race included White, Black, or African American, Asian, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, and Other, and respondents could select all applicable races. The majority of families enrolled in Florida KidCare (69%) selected enrollee race as White, while 21% of enrollees selected Black or African American. Over half of enrollees identified as Hispanic or Latino (55%), and 16% identified as Other. These demographics are consistent with families surveyed in prior years. A summary of the survey responses for Florida KidCare families is below with the sample noted for each type of CAHPS item.

- **Coordination of Care**
  - Eighty-one percent felt their child’s doctor seemed informed and up to date about coordinating the member’s health care between providers.
- **Composites**
  - Most (83%) felt it was easy to get needed care.
  - Eighty-seven percent stated they could get care as soon as needed.
  - Ninety-three percent felt that their child’s physician communicated well with them.
- **Global Rating Questions**
  - Three-quarters (78%) rated their personal doctor a “9” or “10”
  - Specialist ratings of “9” or “10” were given by 74%.
  - Seventy-one percent rated all their health care a “9” or “10.”
  - Nearly three out of four (71%) rated their health plan a “9” or “10.”

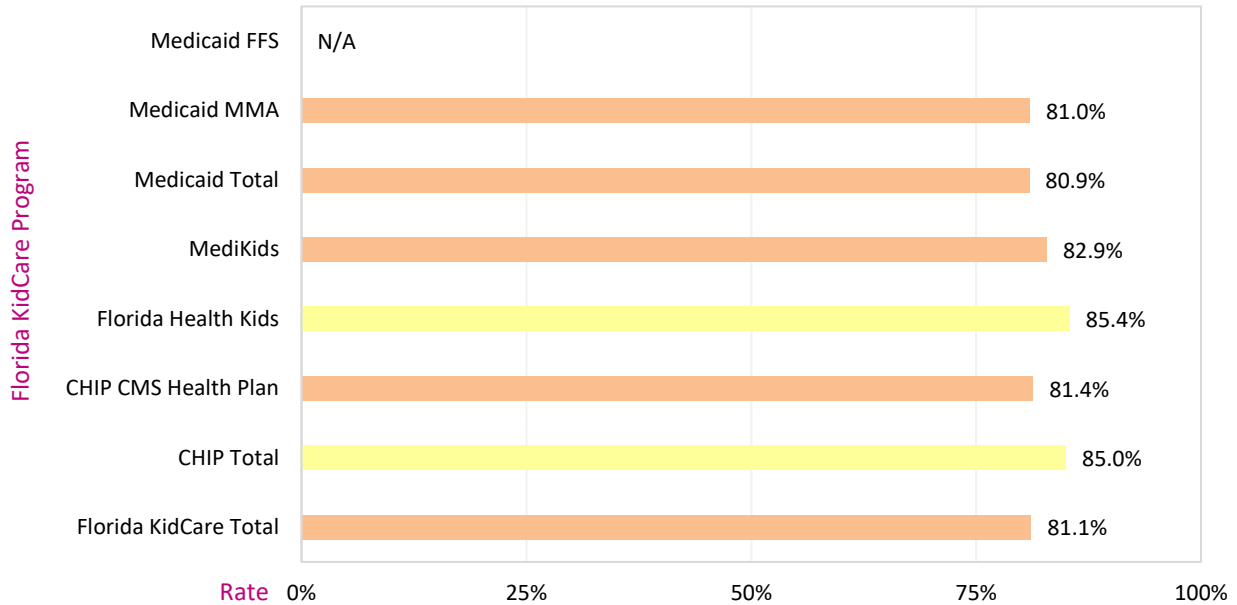
### Coordination of Care

The stand-alone Coordination of Care question investigates how often the member’s personal doctor seemed informed about care received from other doctors. The Florida KidCare rate this year was 81%.



Figure 6 displays the percentages of respondents who reported a positive experience with care coordination.

Figure 6. Coordination of Care Results by Florida KidCare Program, 2024 Survey



**HEDIS Benchmark Percentiles** – This legend applies to the chart above.



N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

### Composites

These survey items incorporate two or more questions into an overall theme, and each question within a composite contains the same response options. Composite responses were considered positive if the respondent answered “usually” or “always.” The totals for “usually” and “always” are added and divided by the total number of complete and eligible responses for the composite, which elicits the final rate. National benchmark percentiles are calculated using the same methodology. Composite scores are presented in this section

Questions included in each composite are below, and rates for the Florida KidCare program are listed for each composite in **Table 15**.

### Getting Needed Care

- In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?

- In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

**Getting Care Quickly**

- In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?
- In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as your child needed?

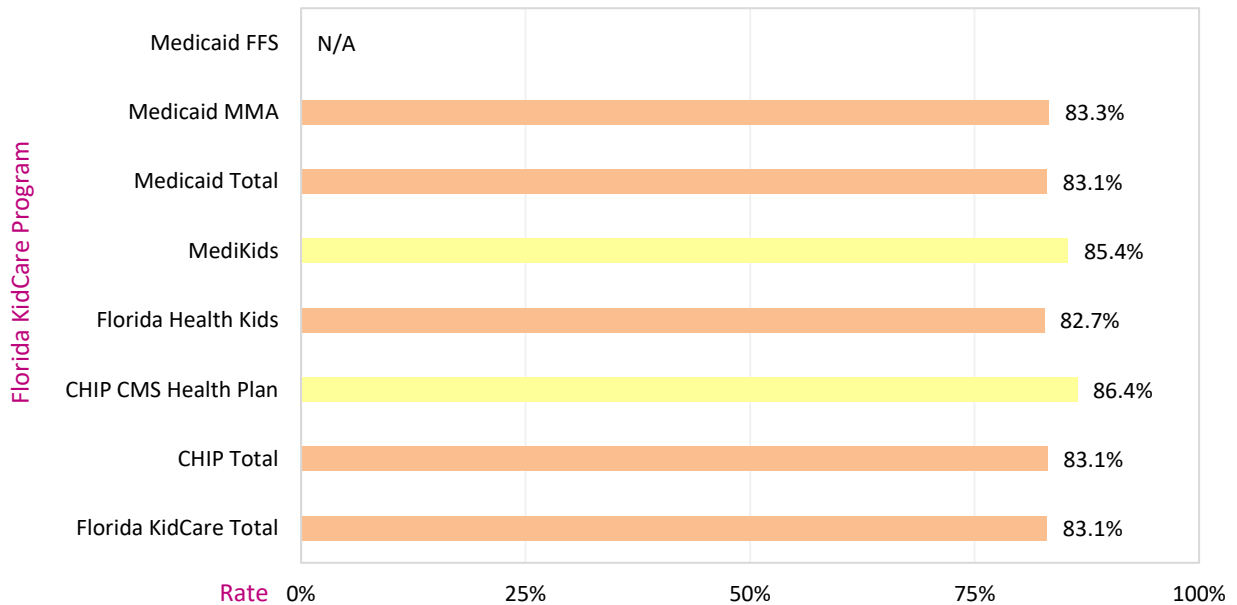
**Table 15. Florida KidCare Rates for CAHPS Composites, 2024 Survey**

Composite	Florida KidCare Rate
Getting Needed Care	83.1%
Getting Care Quickly	86.9%

**Getting Needed Care**

This composite comprises two questions that ask how often it was easy to obtain needed care like a test or treatment. Most (83%) of Florida KidCare families felt it was easy to get care. Two Medicaid MMA plans and one Florida Healthy Kids plan had higher rates than the Florida KidCare rate. The Florida Healthy Kids Simply plan had the highest rate at 86%. **Figure** displays respondents who reported a positive experience with getting needed care by Florida KidCare program.

**Figure 7. Getting Needed Care Results by Florida KidCare Program, 2024 Survey**



**HEDIS Benchmark Percentiles** – This legend applies to the figure above.

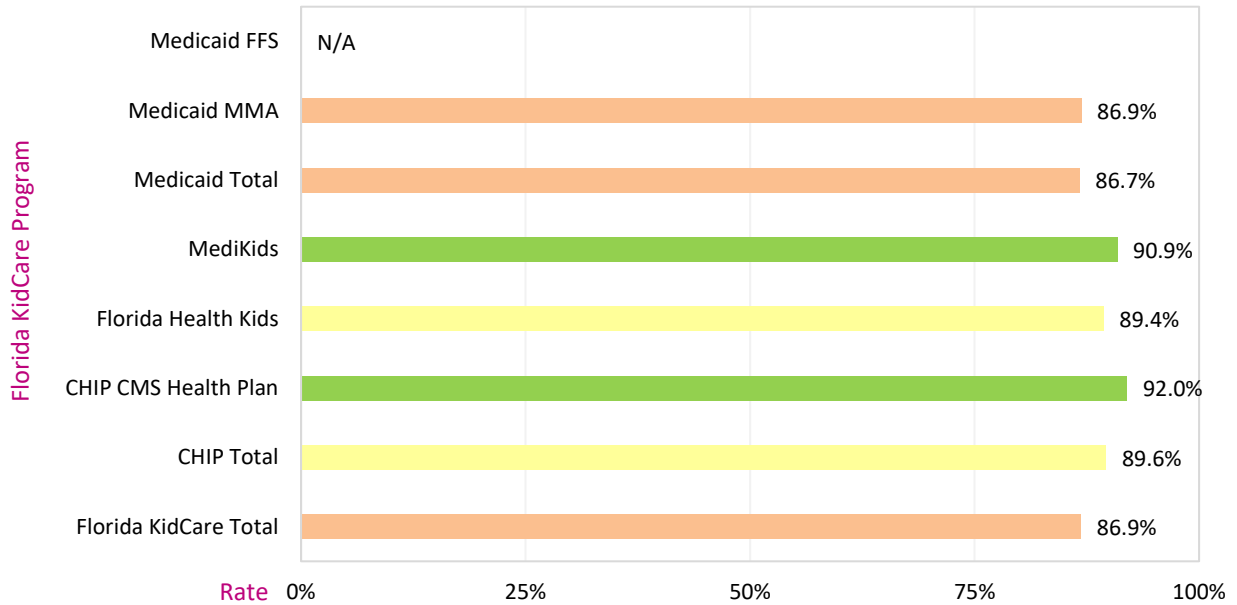


N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

### Getting Care Quickly

Closely related to the prior composite, the Getting Care Quickly composite is made up of two questions that ask how often care was obtained as soon as it was needed. The 2024 Florida KidCare rate was 87%. CHIP CMS Health Plan had the highest program-level rate at 92%. Sunshine-CW had the highest plan-level rate at 91%. **Figure 8** displays the percentages of respondents who reported a positive experience with getting care quickly by Florida KidCare program.

**Figure 8. Getting Care Quickly Results by Florida KidCare Program, 2024 Survey**



**HEDIS Benchmark Percentiles** – This legend applies to the figure above.



N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

## Global Rating Questions

In addition to the composites, Florida KidCare families were asked to provide specific ratings from 0 (worst) to 10 (best) regarding four topics: all health care, personal doctor, specialty care provider, and health plan. The charts presented in this section highlight the percentage of families who rated each item as a “9” or a “10.” As with the composites, the totals are added and then divided by the total number of complete and eligible responses for the question, resulting in the final rate. Though national benchmark percentiles are available for ratings of 8-10, the percentiles for ratings of “9” and “10” are utilized in this report to allow for a more direct comparison.

Items included in each rating question are below, and rates for the Florida KidCare program are listed for each composite in **Table 16**

### All Health Care

- Using any number from 0 to 10, where 0 is the worst health care possible, and 10 is the best health care possible, what number would you use to rate all your child’s health care in the last 6 months?

### Personal Doctor

- Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child’s personal doctor?

### Specialty Care Provider

- We want to know your rating of the specialist your child talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

### Health Plan

- Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child’s health plan?

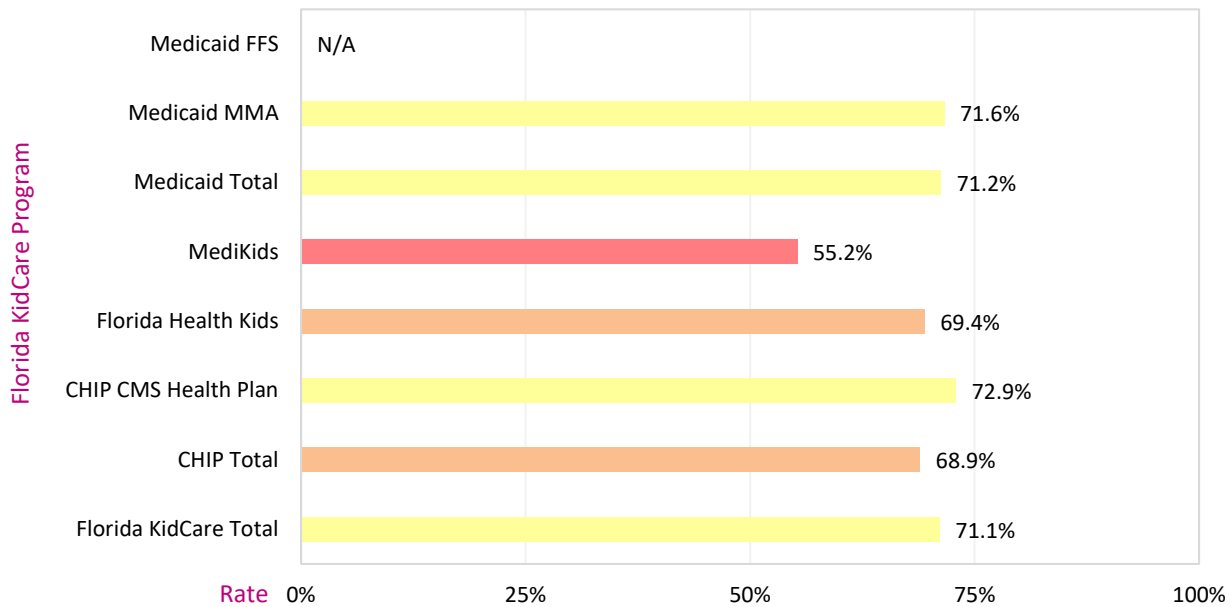
**Table 16. Florida KidCare Rates for CAHPS Rating Questions, 2024 Survey**

Rating Question	Florida KidCare Rate
All Health Care	71.1%
Personal Doctor	77.5%
Specialty Care Provider	74.1%
Health Plan	71.2%

## All Health Care

Families were asked to rate all the child’s health care over the past six months. All health care was rated a “9” or a “10” by seven out of ten Florida KidCare families. The MediKids rate of 55% was the lowest of all programs, while the Florida Healthy Kids Community Care Plan had the highest rate at 78%. **Figure 9** shows the percentage of respondents who reported a rating of “9” or “10” for this question by Florida KidCare program.

**Figure 9. All Health Care Rating of "9" or "10" Results by Florida KidCare Program, 2024 Survey**



**HEDIS Benchmark Percentiles** – This legend applies to the figure above.



N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

## Personal Doctor

When asked to rate the child’s personal doctor on a scale of 0-10, 78% of Florida KidCare families rated “9” or “10.” The highest rates were from Sunshine (Medicaid MMA) and Community Care Plan (Florida Healthy Kids), at 84% each. Program-level rates are shown in **Figure 10**.

**Figure 10. Personal Doctor Rating of "9" or "10" by Florida KidCare Program, 2024 Survey**



**HEDIS Benchmark Percentiles** – This legend applies to the figure above.

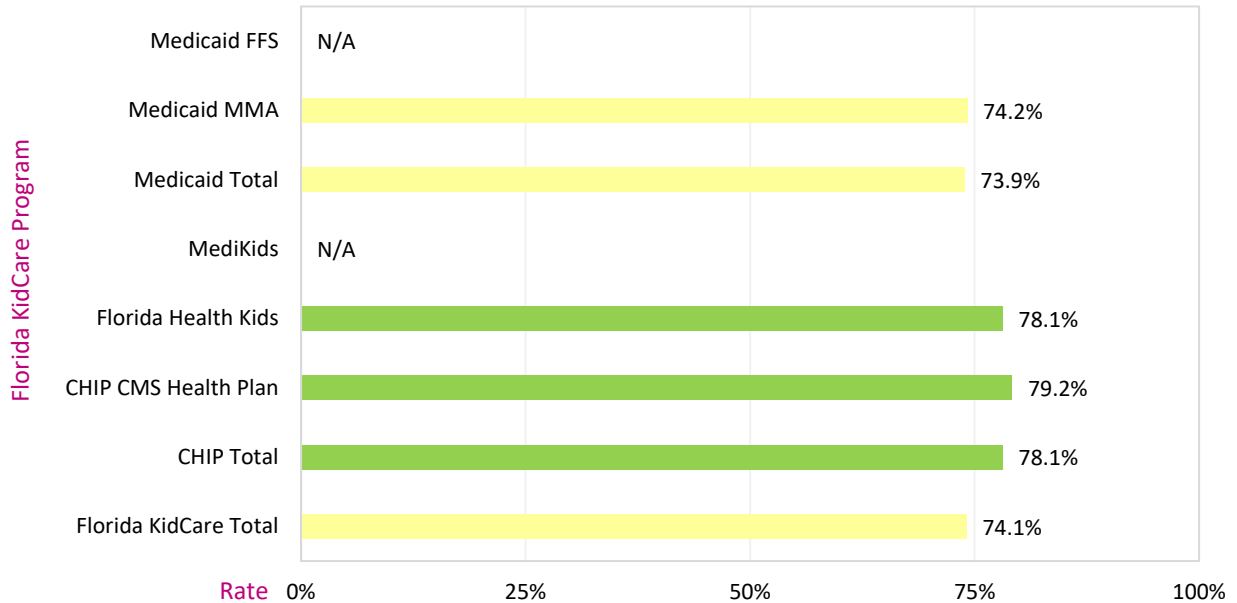


N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

### Specialty Care Provider

Nearly three-quarters (74%) of Florida KidCare families rated the specialist they see most often as a “9” or a “10”. Only three plans had reportable rates, ranging from 76%-79%. **Figure 11** shows the percentage of respondents who reported a rating of “9” or “10” by Florida KidCare program.

**Figure 11. Specialist Rating of "9" or "10" by Florida KidCare Program, 2024 Survey**



**HEDIS Benchmark Percentiles** – This legend applies to the figure above.



N/A denotes programs or plans with a response of less than 100. N/R denotes programs or plans for which the item does not apply or was not reported.

## Section 3: Dental and Oral Health Quality of Care

### Background

A common method of assessing the quality of a health plan or program is the calculation of performance measures. The Healthcare Effectiveness Data and Information Set (HEDIS®), developed by the National Committee for Quality Assurance (NCQA), offers a way to compare health plans as well as a way for health plans to identify potential areas for improvement.

### Methodology

Calculation of performance measures is done through methodologies specified by measure stewards, organizations tasked with maintaining technical specifications of a measure based on updates to clinical guidelines and best practices. Dental and oral health measures are calculated through the administrative methodology, which utilizes health plan enrollment data and claims and encounter data.

NCQA-certified software is used to calculate the measures according to either the HEDIS or Child Core Set specifications. In the case of measures in both specifications, ICHP and the Medicaid Managed Medical Assistance (MMA) used the Child Core Set specifications, while Florida Healthy Kids plans relied on HEDIS specifications for CY 2023 data. For most measures detailed in this report, member eligibility requires 12 months of enrollment in the health plan or program with no more than a 45-day gap. The anchor date for eligibility is usually December 31 of the measurement year, so a member must be actively enrolled on that date to be considered eligible for a measure. The measurement year for most measures was CY 2023, though some measures include previous years within the measurement period.

### Data Collection and Analysis

Florida Healthy Kids and Medicaid MMA each had three dental plans calculate data which was then had to pass an audit by an NCQA-certified audit firm. Florida Healthy Kids plan-level data mixes subsidized and full-pay members, while MediKids performance measure data is subsidized only.

Rates for Medicaid Fee-For-Service (FFS), MediKids, and CHIP Children's Medical Services (CMS) Health Plan were calculated by ICHP and reviewed by an NCQA-certified auditing firm. ICHP tallied data for the Medicaid MMA and Florida Healthy Kids plans into weighted program rates. Rates for Medicaid (FFS and MMA) and CHIP (MediKids, Florida Healthy Kids, and CHIP CMS Health Plan) were tabulated and weighted, as was an overall Florida KidCare rate. Note that for any sub-measure where most programs or plans have a rate below 40%, the figure's scale may be adjusted for readability. These instances are noted in each applicable figure's footnote.

### Trending Data

Rates and corresponding HEDIS benchmark percentiles are presented by Florida KidCare program from the previous three years to view each program's performance over time. Note that due to adjustments in methodology and data sources, comparisons should be made with caution.

### HEDIS Benchmark Percentiles

Comparisons of Florida KidCare rates are made to national data through the Medicaid health maintenance organization results reported to NCQA for the same measurement year. Note that as the benchmarks are not publicly available, only percentiles are offered here to depict where the rate falls compared to national data. Four percentile ranges are used in this report. There is a legend that shows these four percentile ranges. No benchmark data is available for that measure if no legend is presented.



**Table 17** outlines the dental and oral health measures evaluated in this report for CY 2023 performance, including data collection method by program. Measures are HEDIS measures unless specified otherwise, and the Medicaid FFS, MediKids, and CHIP CMS Health Plan rates were calculated entirely by ICHP.

**Table 17. Dental and Oral Health Measures and Methodology Evaluated by ICHP**

Measure	Medicaid FFS	Medicaid MMA	MediKids	Florida Healthy Kids	CHIP CMS Health Plan
<b>Dental and Oral Health Services</b>					
Oral Evaluation, Dental Services*	Admin	Admin <sup>a</sup>	Admin	Admin <sup>a</sup>	Admin
Topical Fluoride for Children*	Admin	Admin <sup>a</sup>	Admin	Admin <sup>a</sup>	Admin
Sealant Receipt on Permanent First Molars*	Admin	Admin <sup>a</sup>	Admin	Admin <sup>a</sup>	Admin

**Note.** Rates are calculated entirely or in part by ICHP unless noted otherwise. Measures shown with an asterisk designate that the measure belongs to the Child Core Set only.

<sup>a</sup>Calculated by individual plans.

### Dental and Oral Health Services

Note that in this section, data listed as “Medicaid MMA” utilizes plan-reported data through the state’s Medicaid dental health plans that serve all Medicaid members. The data listed for Medicaid FFS considers members not enrolled in a dental plan, whereas MediKids members were treated as an integral population, disregarding the dental plan they were assigned. As a result, the numbers for Medicaid FFS are low as most members were enrolled in a dental plan and are therefore included with the Medicaid MMA totals.

**Table 18** presents the Florida KidCare overall rates in CY 2023 for the measures presented in this section.

**Table 18. Florida KidCare Rates for Dental and Oral Health Services Measures in CY 2023**

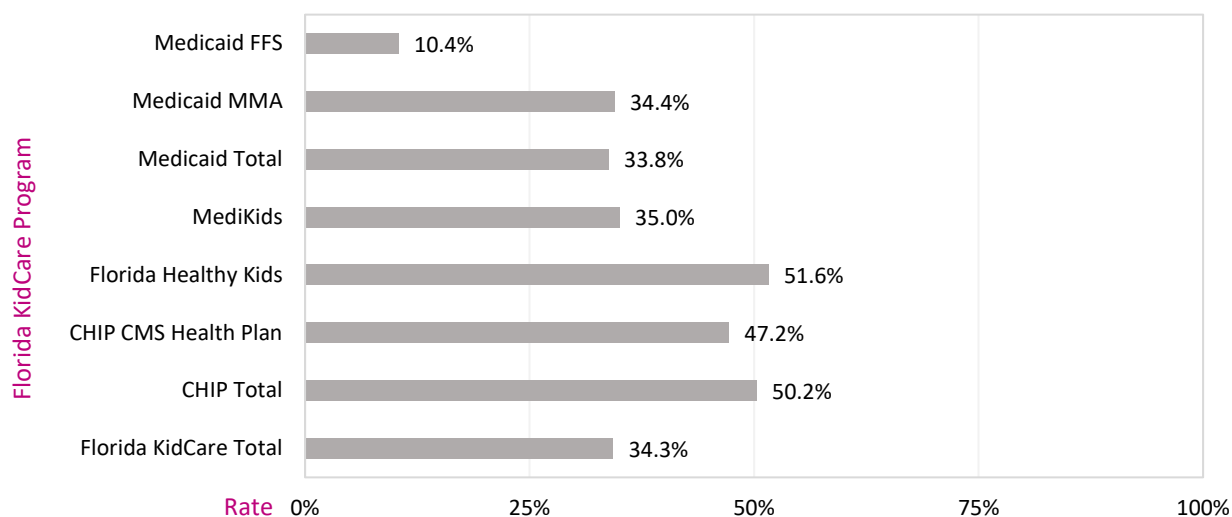
Measure	Florida KidCare Rate
Oral Evaluation, Dental Services (OEV): All Ages	34.3%
Topical Fluoride for Children (TFL): All Ages- Dental or Oral Health Services	13.0%
Sealant Receipt on Permanent First Molars (SFM): At Least One Sealant	49.0%
Sealant Receipt on Permanent First Molars (SFM): All Four Molars Sealed	35.6%

## Oral Evaluation, Dental Services (OEV)

The Child Core Set OEV measure considers the percentage of enrolled children up to 20 years of age who received a comprehensive or periodic oral evaluation within the reporting year (Center for Medicaid and CHIP Services & CMS, 2023). The measure specifications for OEV cover nine age stratifications, though only the all ages sub-measure is presented in this report. When considering all ages, 34% of Florida KidCare members received an oral evaluation in CY 2023.

Program-specific data are shown in **Figure 12**. Trending data for the all ages sub-measure is shown in **Table 19**.

**Figure 12. Florida KidCare Program Results for OEV: All Ages, CY 2023**



**Table 19. OEV: All Ages Results by Florida KidCare Program, Three-Year Trend**

Program	CY 2021	CY 2022	CY 2023
Medicaid FFS	8.7%	0.3%	10.4%
Medicaid MMA	35.7%	34.1%	34.4%
<b>Medicaid Total</b>	35.0%	34.0%	33.8%
MediKids	29.3%	35.7%	35.0%
Florida Healthy Kids	46.9%	48.7%	51.6%
CHIP CMS Health Plan	41.7%	30.5%	47.2%
<b>CHIP Total</b>	45.2%	46.8%	50.2%
<b>Florida KidCare Total</b>	35.6%	34.5%	34.3%

**Note.** Methodology and enrollment differ across measurement years, and this should be considered when reviewing trending data. 2021 was the first year this measure was calculated; thus, trending data from prior years are not available.

### Topical Fluoride for Children (TFL)

The Child Core Set TFL measure analyzes the percentage of children 1-20 years of age who received at least two topical fluoride applications on different dates of service (Center for Medicaid and CHIP Services & CMS, 2023). This application can be recorded as a dental or oral health service within the reporting year, the distinction being that a PCP can offer oral health services while dental services are administered by, or supervised under the provision of, a dentist. Services provided by a county health department’s dental clinic are considered dental services as well (Center for Medicaid and CHIP Services & CMS, 2023).

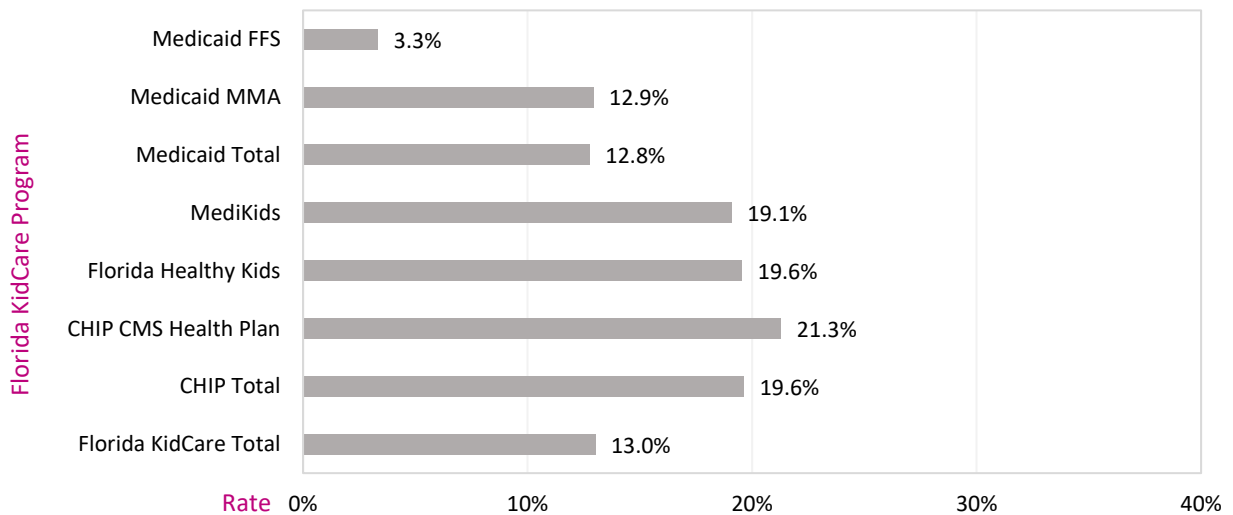
TFL assumes all modes of topical fluoride application share the same effectiveness. As such, fluoride varnish (comprised of sodium fluoride in an alcohol and resin-based solution) or non-varnish fluoride products such as gels are both acceptable (Center for Medicaid and CHIP Services & CMS, 2023).

Note that although the measure specifications offer three sub-measures, Dental or Oral Health Services, Dental Services, and Oral Health Services, this report presents only the Dental or Oral Health Services totals. TFL covers eight age stratifications and only the all ages sub-measure is presented in this report. Across all ages, 13% of Florida KidCare members received at least two topical fluoride applications in CY 2023.

These rates are depicted in **Figure 13**. Trending data for the all ages sub-measure is shown in

Table 20.

**Figure 13. Florida KidCare Program Results for TFL: All Ages, CY 2023**



**Note.** The x axis of this figure has been adapted to enhance readability and does not follow the same patterns as other figures in this report. Use caution when reviewing.

**Table 20. TFL: All Ages Results by Florida KidCare Program, Three-Year Trend**

Program	CY 2021	CY 2022	CY 2023
Medicaid FFS	2.5%	0.1%	3.3%
Medicaid MMA	23.6%	13.8%	12.9%
<b>Medicaid Total</b>	22.5%	13.8%	12.8%
MediKids	16.0%	17.7%	19.1%
Florida Healthy Kids	20.2%	23.6%	19.6%
CHIP CMS Health Plan	11.7%	10.7%	21.3%
<b>CHIP Total</b>	19.4%	22.3%	19.6%
<b>Florida KidCare Total</b>	22.1%	14.1%	13.0%

**Note.** Methodology and enrollment differ across measurement years, and this should be considered when reviewing trending data. 2021 was the first year this measure was calculated; thus, trending data from prior years are not available.

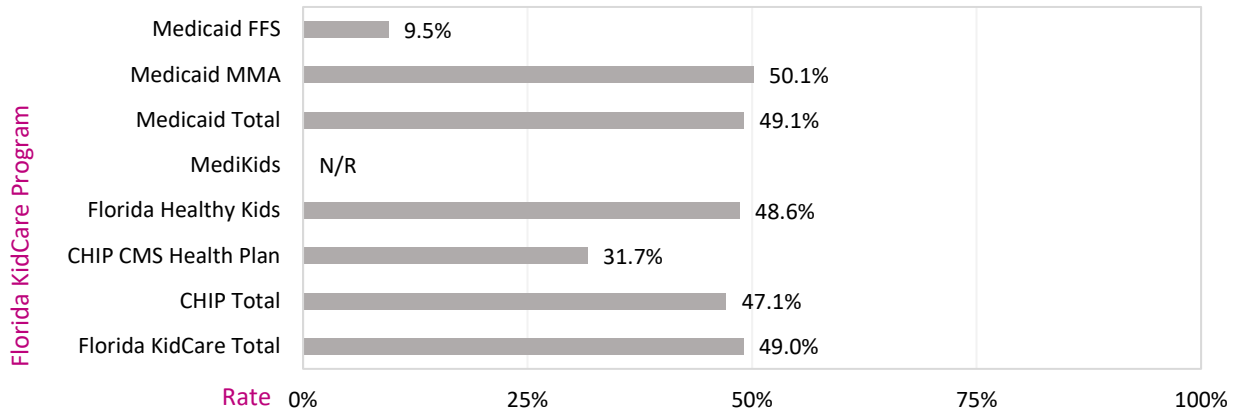
### Sealant Receipt on Permanent First Molars (SFM)

A Child Core Set measure, SFM, analyzes the percentage of enrolled children with a sealant applied on permanent first molar teeth by their 10<sup>th</sup> birthday. This measure is divided into two sub-measures: whether *any* sealant has been applied and whether all four molars (teeth 14, 3, 19, 30) have received a sealant (Center for Medicaid and CHIP Services & CMS, 2023). This measure considers only members turning 10 in the measurement year and has a look-back period of 48 months. Children receiving different treatments on all four of their permanent first molars are excluded from the numerator and denominator of this measure. These treatments include restorations, prosthodontic, extractions, and other dental treatments (Center for Medicaid and CHIP Services & CMS, 2023).

Close to 49% of Florida KidCare members who turned 10 in CY 2023 received a sealant on a permanent first molar, and 36% received a sealant on all four molars. The CY 2023 Florida KidCare program rates for both SFM sub-measures are shown in

Figure 14 and Figure 15. Trending data for at least one sealant and all four molars sealed are shown in **Table 21** and **Table 22**, respectively.

### Figure 14. Florida KidCare Program Results for SFM: At Least One Sealant, CY 2023



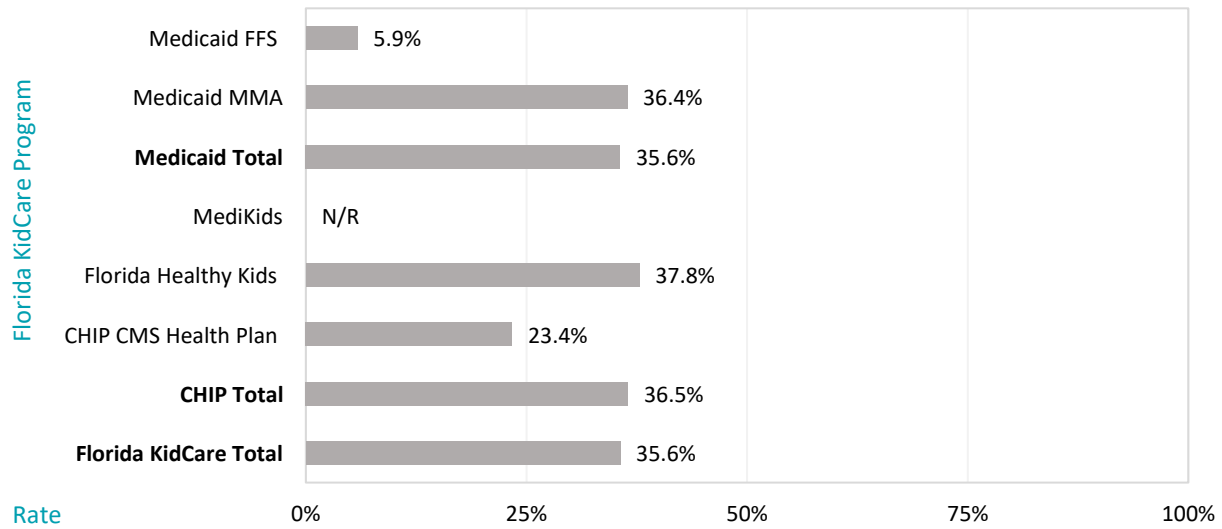
**Note.** N/R denotes programs or plans for which the measure does not apply or was not reported.

**Table 21. SFM: At Least One Sealant Results by Florida KidCare Program, Three-Year Trend**

Program	CY 2021	CY 2022	CY 2023
Medicaid FFS	5.1%	1.8%	9.5%
Medicaid MMA	37.8%	48.1%	50.1%
<b>Medicaid Total</b>	37.8%	48.0%	49.1%
MediKids	N/R	N/R	N/R
Florida Healthy Kids	46.1%	51.4%	48.6%
CHIP CMS Health Plan	32.0%	31.2%	31.7%
<b>CHIP Total</b>	45.2%	50.0%	47.1%
<b>Florida KidCare Total</b>	38.4%	48.1%	49.0%

**Note.** Methodology and enrollment differ across measurement years, and this should be considered when reviewing trending data. 2021 was the first year this measure was calculated; thus, trending data from prior years are not available. N/R denotes programs or plans for which the measure does not apply or was not reported.

**Figure 15. Florida KidCare Program Results for SFM: All Four Molars Sealed, CY 2023**



**Note.** N/R denotes programs or plans for which the measure does not apply or was not reported.

**Table 22. SFM: All Four Molars Sealed Results by Florida KidCare Program, Three-Year Trend**

Program	CY 2021	CY 2022	CY 2023
Medicaid FFS	0.0%	1.3%	5.9%
Medicaid MMA	24.4%	33.8%	36.4%
<b>Medicaid Total</b>	<b>24.4%</b>	<b>33.8%</b>	<b>35.6%</b>
MediKids	N/R	N/R	N/R
Florida Healthy Kids	33.2%	38.5%	37.8%
CHIP CMS Health Plan	21.1%	20.8%	23.4%
<b>CHIP Total</b>	<b>32.4%</b>	<b>37.3%</b>	<b>36.5%</b>
<b>Florida KidCare Total</b>	<b>25.0%</b>	<b>33.9%</b>	<b>35.6%</b>

**Note.** Methodology and enrollment differ across measurement years, and this should be considered when reviewing trending data. 2021 was the first year this measure was calculated; thus, trending data from prior years are not available. N/R denotes programs or plans for which the measure does not apply or was not reported.

## Recommendations

Florida KidCare family experience and quality of care rates for CY 2023 were largely comparable to prior-year performance, with high rates of overall family satisfaction with the program and care provided. This suggests that the program is providing stable levels and quality of care following the public health emergency when there were widespread disruptions in care. The Medicaid and CHIP programs should continue to require health and dental plans to conduct performance improvement projects to continue to raise rates of family satisfaction with care and rates of children accessing preventive care services.

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