

2001 ANNUAL REPORT



# Coming of Age

Healthy **kids**™



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## Florida Healthy Kids Corporation—2000/2001

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*Pictured at Left: Arriston N.P. Thomas, Brenna Naff, Margie Vizcarra, Will Grimsley, Khari Fischer, Chaney Naff, Michelle T. Ward*

## Letter From The Executive Director

Dear Friends,

I am pleased to present the 2001 Florida Healthy Kids Corporation's annual report. This report, entitled "Coming of Age," will track the accomplishments of the Healthy Kids program. My own children inspired the title of this report. Having said that, I owe you an explanation.

My daughter, Brenna, was just three years old when Healthy Kids was launched in November 1990. Now, she is counting the months, weeks and days until she will be eligible for her driver's license. Soon after, she will be old enough to vote – I am certain someone will make a joke about voting and Florida here –.

Chaney, my son, was born when the Healthy Kids program was in its own developmental and implementation phase. At the tender age of three months, Chaney was on hand in Daytona Beach to watch an interview of his mom for a segment on ABC's World News Tonight as the very first Healthy Kids application was handed out to a third grade class in Volusia County. Now he is nine, attending third grade himself, and mastering his multiplication tables.

As I watch my children quickly "coming of age," the question for me, as a parent, is whether I am adequately preparing them for the future, their adulthood. Will they be prepared for all the challenges they will face? Will they possess the knowledge and skills they need to achieve their goals and dreams? I certainly hope so.

I ask the same questions about Healthy Kids: Will the program mature in such a way that it is self-reliant and productive—prepared for the future and whatever challenges and changes may be in store for it? Have the leaders of Healthy Kids, past and present, sufficiently prepared the program to be successful in its own right? Again, I certainly hope so. If, like Chaney, Healthy Kids is in the third grade, it still has a long way to go in preparing for its own adulthood.

At Healthy Kids, our emphasis is on children and "their doctor." The importance of a medical home is well documented. The program must do its part to ensure that children continue to have access to the quality health care they need so they can be ready to meet new challenges as they, themselves, come of age.

Sincerely,



Rose M. Naff, Executive Director  
Florida Healthy Kids Corporation



Rose M. Naff, Executive Director



# Coming of Age

Families have traditionally acquired health care coverage for their children in one of three ways. A small number of families pay directly for their plans on an individual basis. Others find insurance through public assistance programs like Medicaid. And then there are those who make up the largest group, families who receive coverage under group insurance programs provided through the employer of the working parent. The reason: insurance programs for members of large employer groups traditionally have had the lowest prices.

Florida was one of the first states to design and deliver a successful solution to the challenge of providing health care to its youngest citizens.

On March 31, 1988, the *New England Journal of Medicine* published an article written by Dr. Steve A. Freedman entitled "Coverage of the Uninsured and Underinsured: A Proposal for School Enrollment-Based Family Health Insurance." This essay,

which encouraged using school districts as "insurance risk pools" for covering children, would serve as the foundation for the establishment of the Florida Healthy Kids Corporation, a non-profit organization devoted to providing health insurance to uninsured school age children.

In 1990, Florida leaders launched an ambitious experiment when then-Governor Bob Martinez bound his signature to "The Florida Healthy Kids Corporation Act."

It was a simple notion. School systems would be used as the mechanism for creating large risk pools to cover participants the way businesses did. Coverage would be offered to families with children enrolled in school, and benefits would be designed specifically for kids. This idea was identical to what employment-based insurance had been doing for decades. The only difference was that school children would be the "employees" of a system, thus qualifying themselves for coverage.

Due to its success in establishing the program, the Robert Wood Johnson Foundation selected Healthy Kids in 1996 as the National Program Office for the Foundation's Healthy Kids initiative. Healthy Kids would serve as a model for a number of other states as they sought to replicate this successful program.

Healthy Kids was also named the winner of the 1996 Innovations in American Government award by the Ford Foundation and the Kennedy School of Government at Harvard University. The Innovations Award recognizes governmental initiatives that provide creative solutions to pressing social and economic problems.

## Coming of Age (continued)



The corporation has evolved as the political and social environment surrounding it has continued to develop. In 1997, then-President Clinton proposed the creation of the State Children's Health Insurance Program (SCHIP), the largest expansion of health care since the Medicaid program was implemented in 1970. The purpose: to identify children who were uninsured and get them enrolled in a program that would meet their health care needs. SCHIP unloaded billions of dollars into a pool for states to use to provide health services to uninsured children.

For Florida, SCHIP allowed for a significant expansion of Healthy Kids. The program's benefit package was grandfathered into federal law and deemed in the federal statute to be compliant with federal guidelines. At that point, the original theory of school-based enrollment was abandoned and the Florida KidCare program was created soon thereafter.

Healthy Kids was able to act as a foundation from which the Florida KidCare program could develop.

Today, Florida Healthy Kids serves more than 180,000 children in all of Florida's sixty-seven counties. Also, the program holds contracts with thirteen health plans and three dental insurers to administer services to all of its participants.

Healthy Kids realizes its success is dependent on families' enrollment feedback. According to reports, families are happy with the benefits they are receiving. A recent Florida KidCare Evaluation Report noted that over 98% of Healthy Kids enrollees were satisfied with the benefits they receive through the program.

The Florida Healthy Kids Corporation realizes the need to continue its hard work. As we meet new challenges, demands and changes, the corporation must remain focused on the goal of ensuring that Florida's youngest citizens have access to affordable, quality health care.

# Timeline

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<b>1990</b>	Introduction of Healthy Kids legislation Governor Martinez signs the "Florida Healthy Kids Corporation Act" Applied for Medicaid demonstration grant Healthy Kids Board appointed to oversee corporation Corporate office opens in Tallahassee, FL	<b>1993</b>	2nd premium reduction Local match requirement begins in effort to enroll additional children Highlands County selected as rural site to implement Healthy Kids program	<b>1996 (cont.)</b>	Program receives Innovations in American Government award from the Ford Foundation and Kennedy School of Government	<b>1999 (cont.)</b>	KidCare team receives Davis Productivity award for the implementation of KidCare 58 counties have established Healthy Kids program
<b>1991</b>	Benefit design completed Awarded Medicaid demonstration grant Volusia County selected as pilot site to implement Healthy Kids program Eligibility system designed and tested First health plan selected Marketing for program begins	<b>1994</b>	Broward County chosen as first urban site to deliver Healthy Kids benefits Healthy Kids contracting with five different health plans to provide services to children 10,000 kids covered	<b>1997</b>	Congress creates Title XXI SCHIP Florida submits its 1st SCHIP plan Healthy Kids contracting with 8 health plans. 19 counties have established Healthy Kids program Enrollment reaches 47,000	<b>2000</b>	13 health plans contracting with Healthy Kids program Program achieves statewide expansion Healthy Kids celebrates 10th Birthday Florida legislature expands the Healthy Kids benefits Over 168,000 children enrolled
<b>1992</b>	Volusia County opens doors to enroll children Eligibility system revisions made 1st premium reduction occurs 5,000 children covered in first year of program	<b>1995</b>	Medicaid Demonstration completed—Final report made Eight counties have established Healthy Kids programs 15,000 kids covered	<b>1998</b>	SCHIP Phase One is executed 62,000 kids covered SCHIP Phase Two: KidCare begins Base enrollment allocated to counties 1st multi-plan offering in Broward County	<b>2001</b>	Dental benefits are included as part of Healthy Kids benefit package Healthy Kids contracting with three dental insurers statewide Staggered dental benefit roll out begins throughout the state
<b>1996</b>	Robert Wood Johnson Foundation chooses Healthy Kids as National Program Office for Healthy Kids replication initiative	<b>1999</b>	Healthy Kids offers multi-plans in two additional counties Enrollment reaches 91,000 mid-year 1st EPO health plan joins	<b>2001 PROJECTED</b>	Grant for National Program Office through Robert Wood Johnson Foundation ends Healthy Kids enrollment to reach 250,000		

# KidCare: Partnership for Excellence

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## KidCare: Partnership for Excellence

The State of Florida has enjoyed the advantage of years of experience in developing and running a variety of children's health related programs. The Children's Medical Services Network was created in 1929, Medicaid was created in 1970 and Healthy Kids was created in 1990. When Congress adopted Title XXI in 1997, the State was afforded a unique opportunity to utilize these early efforts to reach more children, provide better care and leverage federal funds to do it.

In 1998, the Florida Legislature created KidCare, the cognomen given to four programs offering health care coverage to previously uninsured children: Healthy Kids, for children ages 5 to 19; MediKids, for children ages 1 to 5; Children's Medical Services Network, for children 0 to 19 with special behavioral or chronic medical conditions; and KidCare

### KIDCARE MISSION STATEMENT

The KidCare partners embrace one shared focus: health care coverage for Florida's uninsured children. To achieve this goal, we continually strive for consistency in message, simplicity in process, and excellence in product.

Medicaid, for teens age 16 to 19 and infants from birth through age 1. These four components of KidCare work in partnership to ensure that Florida's children have the chance they need to grow healthy.

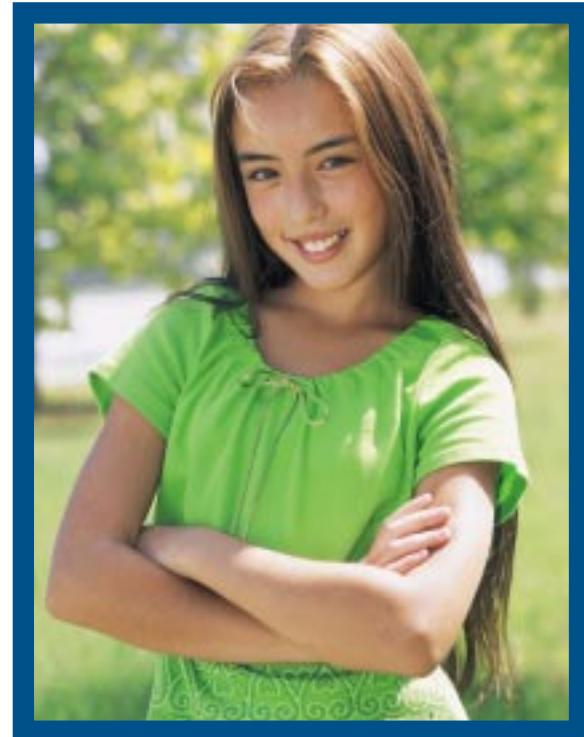
Currently, there are over 200,000 children in the state of Florida enrolled in the Florida KidCare program. These families are enjoying peace of mind in knowing that they have continuous health care from the best health care plans, the best doctors and the best hospitals/medical centers available.

Many challenges occurred while instituting KidCare, a Title XXI funded program. This implementation required coordination between multiple state and private agencies, and included a retooling of eligibility systems, an expansion of delivery systems and benefits, and a reexamination of state and federal policies related to children's health care programs. The interagency team responsible for the implementation of KidCare won the celebrated Davis Productivity Award.

While KidCare is proud of its many achievements, the Florida Health Insurance Study released in 2000 reported that there were still over 500,000 Florida children uninsured. Also, the federal SCHIP funding cannot be used to provide coverage to all uninsured children, as there are restrictions imposed on certain groups such as non-citizens. The Florida Health Insurance Survey indicates that over 150,000 uninsured children were over the eligibility limits established by SCHIP and KidCare; 230,000 were eligible for Medicaid but still not

enrolled, and about 140,000 were believed eligible for one of the KidCare programs.

Due to the effective collaboration of all the partners involved in KidCare, the program has achieved many successes. These successes prove that Florida KidCare is on the right path as it strives to reach its goal of ensuring quality health care to Florida's youngest and most vulnerable citizens.



### KIDCARE ENROLLMENT: MARCH 2001

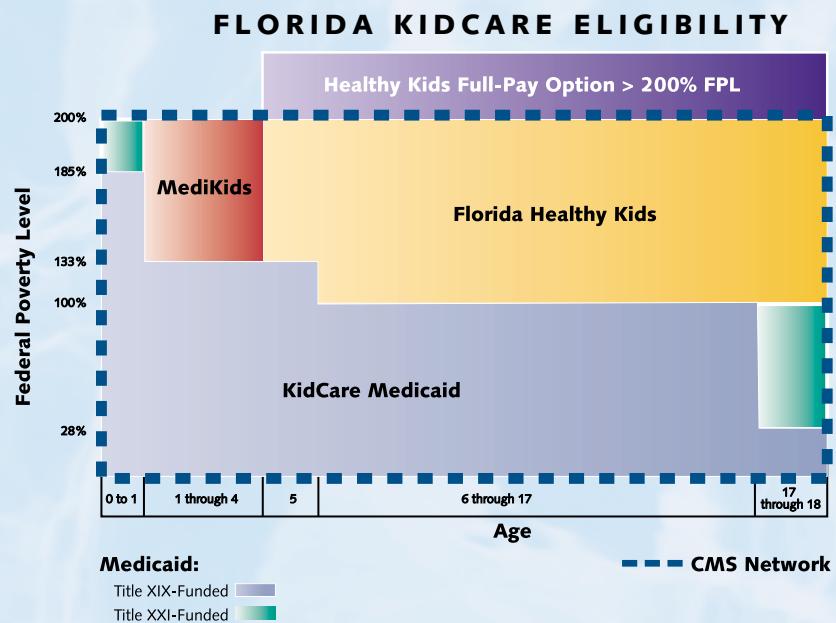
Healthy Kids: 182,067

MediKids: 23,595

Children's Medical Services Network: 5,724

Medicaid: 962,451

Medicaid for Teens: 14,519



# *Outreach: Through the Schools*

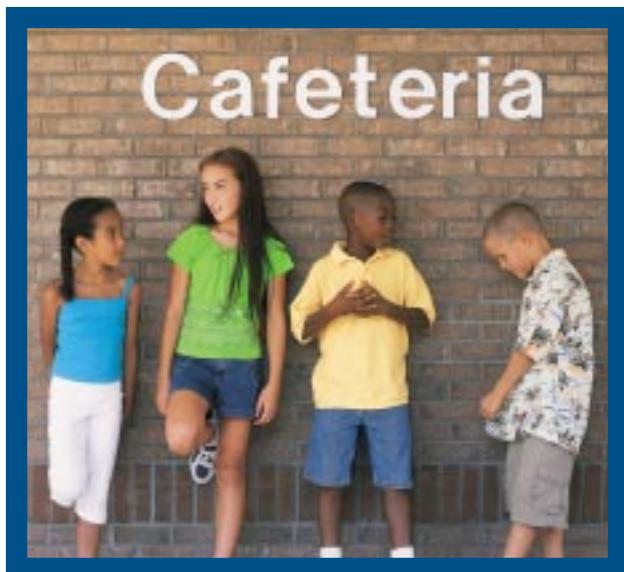
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peers. For this reason, Healthy Kids and Florida school districts have coordinated their efforts to educate and support families in seeking health care.

In a recent publication, Healthy Kids was credited with inventing the concept of school-based outreach, a technique the nation is embracing in its SCHIP outreach efforts. Since the beginning, Florida's schools have maintained a critical role in helping families obtain health coverage. One of the most innovative means of using the school districts to enroll children occurred in Volusia County in 1993 with the use of the school's dial up system. This computer/phone system telephoned the homes of families who indicated their children were uninsured with a pre-recorded message about the Healthy Kids program.

Years later, school systems are still the primary avenue for outreach in the communities. Applications are distributed throughout the schools in an effort to make parents aware of the availability of affordable health insurance for their children. During the fall of 2000, more than 2.3 million applications were distributed by Healthy Kids school partners. This effort by the schools contributed significantly to the increase of children currently being served.

Typically, applications are distributed to each child in elementary, middle, and high schools at the beginning of the school year. This effort assures that each child who attends school will receive information on the program and an application to bring home to their parents. Applications are also



Education has been, and will continue to be, the primary role of schools. In addition to learning reading and arithmetic through the state's educational system, Florida's children are given the opportunity to learn of another critical topic: the importance of quality health care. Studies prove that children without health insurance tend to be more sickly and, consequently, absent from school more often than their insured



available at the front desk, school nurse's office and guidance counselor's office for those parents who may inquire about the program through the school or for new students on their first day of class. Throughout the year, Healthy Kids provides schools with outreach and enrollment materials to be distributed. All of these materials inform parents of a toll-free number they can call with questions regarding the program, requests for applications, or questions they may have while completing an application.

"The Florida KidCare Evaluation Year 2 Report" prepared by the Institute for Child Health Policy (ICH) stated that about 45% of

those with children in Healthy Kids learned about the program through their school. This statistic shows that using the school system as a means of outreach is an important component of the success of the Healthy Kids program. Moreover, it is the number one way families are finding out about the program.

Florida's school districts play a vital role in the effort to educate families on the Healthy Kids program. Without their dedication for the past decade, the accomplishments Healthy Kids has made in enrolling children would not be as significant. The collaboration with the schools is sure to continue.

# *Health Services: Broadening, Strengthening*

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Many of Florida's children faced the year 2000 healthier and happier as they received health care coverage for the first time through the Florida Healthy Kids program. This past year, Healthy Kids was given the opportunity to extend its insurance benefit package to include comprehensive dental services. Additionally, as enrollment rose, the need to expand the service area and increase provider choice became essential.

## **BENEFITS**

Healthy Kids created one of the first children-only insurance products offered in the nation. The corporation recognized the need to offer health benefits that were appropriate to the lifestyle and age of kids. By discarding the traditional type of health care coverage, which is primarily for employer groups and adults, Healthy Kids was able to create a package that focused on preventive services that promote learning.

In 1991, when the comprehensive benefit package was created, it included services such as: well child care, office visits, immunizations, prescriptions, primary and specialty physician

office visits, inpatient hospital care, vision and hearing care, physical therapy, substance abuse and drug rehabilitation services and behavioral health services to name only a few.

The Healthy Kids benefit package received minor modifications in 1998 as required by the Florida Legislature. Benefit enhancements were made, including an expanded substance abuse benefit, enhanced inpatient and outpatient days for behavioral health services and twice the number of chiropractic visits previously covered under the original benefit package. Existing health plan contracts were grandfathered-in until the year 2000.

There are no deductibles and only small co-payments required for some services. Co-payments range from \$3 to \$10. There are no co-payments for well childcare visits or preventive dental services.

A family satisfaction report released in October 2000 noted that 95% of families participating in the Healthy Kids program are either satisfied or very satisfied with the benefits they receive and are equally as satisfied with their children's doctors. Ninety-seven percent of Healthy Kids families surveyed reported they didn't experience any problems while obtaining needed health care for their children.

## **DENTAL BENEFITS**

In May of 2000, the first-ever U.S. Surgeon General's report on oral health was released. The report found that the "social impact of oral diseases in children is substantial. More than 51

## **BENEFITS**

- Well Child Care
- Immunizations
- Primary & Specialty Physician Office Visits
- Lab Tests
- Inpatient Hospital Care
- Surgical Procedures
- Emergency Services & Transportation
- Prescriptions
- Vision and Hearing Screening & Glasses/Hearing Aids
- Physical Therapy
- Pre-Natal Care and Delivery
- Transplants
- Chiropractic Services
- Substance Abuse & Drug Rehabilitation Services
- Behavioral Health Services
- No Limitation On Pre-existing Conditions
- One Million Dollar Lifetime Maximum

## **1999-2000 CO-PAYMENTS**

Office Visits \$3  
Prescriptions \$3  
Outpatient Behavioral Health \$3  
Glasses \$10  
Emergency Room \$10



# *Health Services: Broadening, Strengthening*

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million school hours are lost each year to dental-related illnesses. Pain and suffering due to untreated diseases can lead to problems in eating, speaking, and attending to learning." Dental care is essential to the health of school age kids.

During the 2000 legislative session, the Florida Healthy Kids Corporation received funding from the Florida Legislature to add dental services to the already existing medical benefits package. The dental services include full diagnostic and preventive services, basic and restorative care, as well as major restorative treatment.

At the October 2000 Healthy Kids Board of Directors meeting, members of the board elected to implement a dental plan in which three dental insurance providers would contract with the corporation statewide to provide services to program

## **Health Services: Broadening, Strengthening (continued)**

participants. Counties who pay at least \$4000 in local match are eligible to receive the dental benefit enhancement.

On February 1, 2001, Atlantic Dental, Inc., CompDent Corporation and Delta Dental Insurance Company began providing services to children residing in four of Florida's counties. This began the two year staggered roll-out of the dental services throughout the state, which is planned for completion May 1, 2002.

### **EPO: NEW INSURANCE PRODUCT**

Healthy Kids can only be as good as the service it provides. For this reason, the corporation strives to make sure that participants on the program are receiving their health care from quality health care providers and their networks.

For some areas of the state, Healthy Kids chose to contract with an Exclusive Provider Organization (EPO). Due to the challenges of finding adequate providers in rural areas, EPOs created new opportunities, a solution to develop a network in rural and secondary areas of the state.

An EPO is very similar to an HMO in that both plans use a designated set of providers. One major difference which affects families: HMOs require participants to pick a primary care physician (PCP) and seek referrals through that PCP, while an EPO only requires members to use a participating doctor in the network.

Currently, Clarendon is the EPO which serves Healthy Kids participants in nineteen of Florida's rural counties.



## STATEWIDE EXPANSION

Through the efforts of federal, state and local county partnerships, the Florida Healthy Kids program is now available in each of Florida's 67 counties. The corporation worked to establish contracts with insurers throughout the entire state of Florida. In six months, Healthy Kids added 18 additional counties to its program, thus completing its statewide expansion effective August 2000. Families all over Florida now have access to quality health care for their children through Healthy Kids.

## MULTIPLAN OFFERINGS

The Board of Directors developed a criterion that allows the corporation to contract with more than one insurer in certain program sites.

Multiple health plans give families access to more doctors. With more than one health plan being offered, there is a greater chance that a family's personal doctor participates with one of the health plans.

In 1998, beginning with Broward County, Healthy Kid chose to consider more than one health plan for that area due to enrollment exceeding 10,000 children. Broward County families were given the opportunity to choose between two health insurers. In 1999, the Dade and Palm Beach county areas were chosen for an expanded number of health plans. In fact, Palm Beach County has three insurers for families to choose from. Hillsborough, Orange, Osceola and Seminole counties are currently considering adding a second health plan choice.

# *Eligibility: Faster! and Easier*

## **Eligibility: Faster and Easier**

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Beginning with the implementation of SCHIP in 1997, Healthy Kids evolved to fit into a new role. The program fell into a position of leadership because it had built a strong foundation in its seven years prior to the start of the federal children's health insurance program. That role continues to take shape.

The eligibility process is a critical and continually developing piece of the program. One of the main goals of Healthy Kids and the other KidCare components is to make sure the enrollment process is as easy as possible for families and thus results in increased enrollment for all programs.

The past year has been filled with a number of changes and new projects. This section examines these modifications and describes their impact on the Healthy Kids program.

### **CHANGING PROGRAM ELIGIBILITY**

Prior to July 1, 2000, Healthy Kids enrolled non-citizen children and children of state employees with the use of state and local dollars and family payments. The 2000 Florida Legislature, however, through budget proviso language, limited the amount of state dollars which could be spent on children who were not Title XXI eligible. For this reason,

Healthy Kids was required to close enrollment to these children and put certain non-citizen children and children of state employees on a waiting list. The number of enrolled children in these categories is shrinking, however an ever-growing waiting list has developed.

Eligibility review staff was established to correspond to and call parents of non-citizen children in an effort to collect documentation from families to see if the child might meet guidelines established that would make them eligible to receive Title XXI funding. This project began July 1, 2000. As of January 2001, 12,000 children have been converted and are currently funded through federal dollars.

### **ONLINE APPLICATION**

Filling out an application for KidCare is the first step towards getting children enrolled. For this reason, Healthy Kids wants to make this process easy.

The corporation is currently pursuing an online application process which will allow families, with the help of trained professionals, to apply for the KidCare program online. This will ultimately reduce the amount of time it takes to process an application, since information entered will be electronically transferred to the processing center. Then, families can sign the printed application and send it in.

This is sure to be an important step as the corporation moves forward in the new millennium.



## DETERMINING ELIGIBILITY

Once an application is received, it is reviewed to see if the children are eligible for KidCare. The Florida Healthy Kids Corporation holds a contract with a third party administrator that manages all the children's accounts, thus serving as the central point for the eligibility review of all KidCare programs, including KidCare Medicaid.

The corporation developed an electronic tool which reviews household size and gross monthly income and assumes certain income disregards. Those children who appear likely candidates for the Medicaid program are referred to the Department of Children and Families for a full Medicaid determination. If the children do not seem eligible for the Medicaid program, they are reviewed immediately for the other KidCare programs. Recent changes in federal law may make this part of the process even easier.

## CORRESPONDENCE TASK FORCE

An important project spearheaded by Healthy Kids included the 2000 Correspondence Task Force made up of all the different KidCare partners. The goal of the task force was to review all correspondence sent out by the KidCare program with the purpose of making it uniform, family friendly and easy to read. A number of principles were implemented to ensure the success of this project. Some of the standards included: the letters should be one page as often as possible, easy to understand, and consist of only one phone number. Over 80 letters were reviewed and modifications were made to each letter.

The staff members who dedicated themselves to these lengthy and sometimes tedious projects are deserving of much recognition.

# Enrollment Trends

## Enrollment Trends

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This past year, the Florida Healthy Kids Corporation continued its dedication to retaining high enrollment in the program and assuring continued growth for the future. Committed to providing Florida's children with health care, Healthy Kids maintains the objective of insuring as many children as fiscally possible.

Beginning in 1998 with the availability of Title XXI funding, Healthy Kids was able to begin a major expansion effort. Within months, thousands of new children became enrolled in the quickly expanding program.

### **INELIGIBLE FOR SCHIP**

Those children not eligible for SCHIP funding include kids over the age of 18, ineligible non-citizens, children of state employees or kids of over-income families. They were, however, still able to enroll in Healthy Kids because they were funded through other sources, or in the case of over-income families, the child was not subsidized.

The 2000 Florida Legislature chose to limit funding for these groups by placing restrictions on the dollar amount that could be spent on those who were not SCHIP eligible. A number of these kids are slowly being attritioned off the program due to

the funding limitations. Today, there are 23,000 children on Healthy Kids who are receiving Healthy Kids benefits without SCHIP funding.

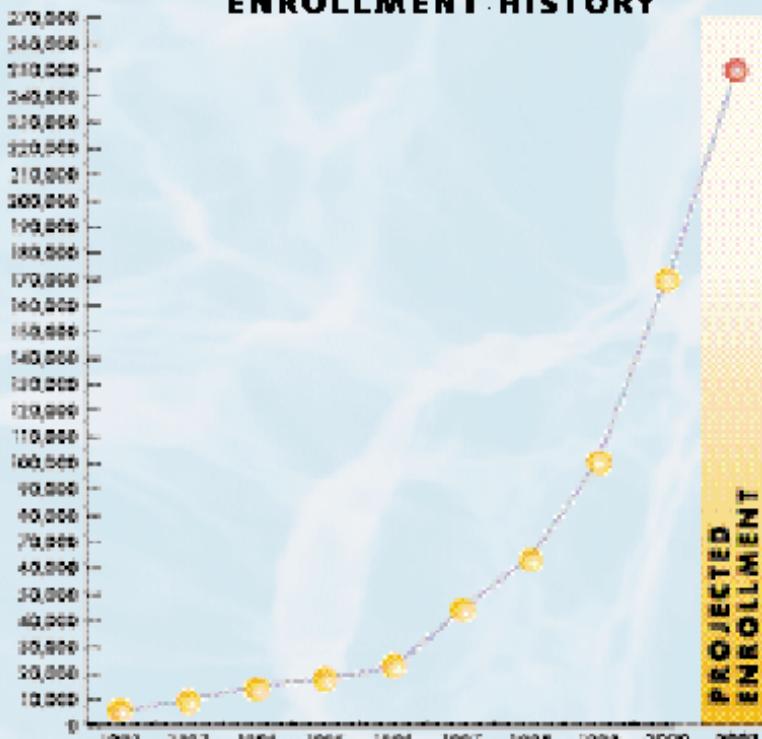
Since October 2000, Healthy Kids staff has been involved in the tedious process of identifying children who are not Title XXI eligible, specifically non-citizens, and collecting their documentation to determine if their legal status has changed. (For more information on determining eligibility, see page 16, "Eligibility.") Currently, less than 9% of Healthy Kids enrollees are non-citizens.

Healthy Kids staff just completed a study for another group of Title XXI eligibles, children of state employees. The study, which was submitted to the governor and legislature, states there is an estimated direct program cost to the Healthy Kids program of approximately \$1.2 million in state funds per year for serving the 1,300 eligible state employee's children. This cost is dramatically less than the other plans considered, including the state employee plan. There are fewer than one thousand children on the program who make up this particular group.

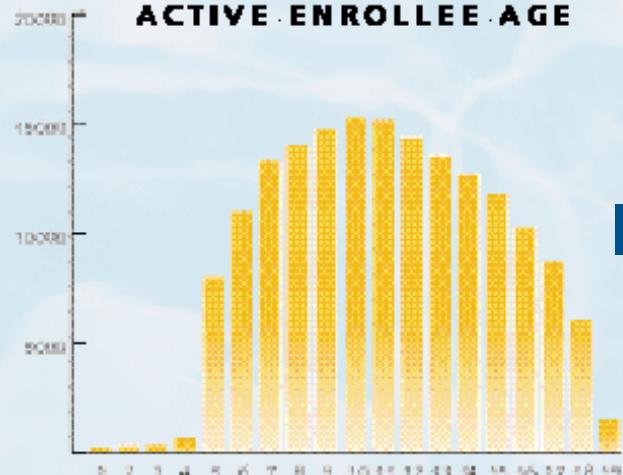
### **PARTICIPANT RETENTION**

Healthy Kids realizes that its population needs a variety of methods through which it receives information about the program. Therefore, the corporation has decided to "pilot" a campaign of introducing families to the program through means other than correspondence.

## ENROLLMENT HISTORY



## FLORIDA HEALTHY KIDS ACTIVE ENROLLEE AGE



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The participant retention project began on November 1, 2000. Staff dedicated one half of each day to this project.

Two types of subjects have been selected for evaluation so far:

- A random group of enrollees, with various spans of enrollment, who will be evaluated against a control group. The evaluation will look at variables such as, change in use of medical services, decrease in late payment/cancellation letters sent, and the length of stay on the program.
- New enrollees who have been on the program for less than two months. This group will be evaluated longitudinally to determine if the initial intervention through non-written means improved the enrollee's experience on the program and the likelihood of accessing services.

### ENROLLMENT FACTS

At the release of the 2000 annual report, over 115,000 children were receiving Healthy Kids benefits. Today, the enrollment exceeds 180,000 and is expected to grow in the months to follow as applications continue to arrive by the

hundreds each day. In terms of demographics, the average age of a participant in the program is 10 years old. Forty-nine percent of enrollees are female, while 51% are male.

As we continue to focus our efforts on increasing enrollment and retention in the year 2001, we remain very optimistic that our enrollment goal of 249,334 will be reached.

### TOTAL ENROLLMENT:

SCHIP enrollment: 86.62%

Children of Public Employees: .42%

Children Over the Age of 18: .87%

Non-Citizen Children: 8.98%

Children in Over-Income Families: 3.11%

# Financing

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When the program began in 1990 with an initial investment of \$83,500 from the State, Florida hoped to secure enough grant funding from other sources to launch the first children's health insurance program of its kind. Ten years later, the corporation's budget has evolved to more than \$250 million annually.

Healthy Kids finances medical care through a combined approach: aggregating family contributions, state and local government funding and federal funds made available through Title XXI of the Social Security Act—for the purchasing of health insurance for uninsured children.

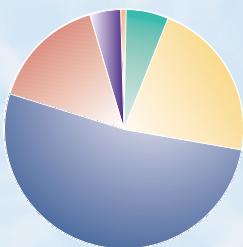
## FEDERAL FUNDS

In 1990, a Medicaid demonstration grant provided federal Medicaid funding (1115 Waiver) to launch the first program pilot project in the State of Florida. Federal funds were utilized in Volusia County from 1991 through early 1995 when federal involvement ended as scheduled. The demonstration was a success and led to the implementation of additional county sites without the benefit of federal funds.

Later, with the passage of the Balanced Budget Act of 1997, Title XXI was established and made \$24 billion in new federal funds available to states to bridge the gap for uninsured children of working families. Florida was well positioned to take advantage of the new funding source and did so. By April 1998, the Florida Healthy Kids Corporation gained approval to utilize these new federal funds to cover more uninsured children.

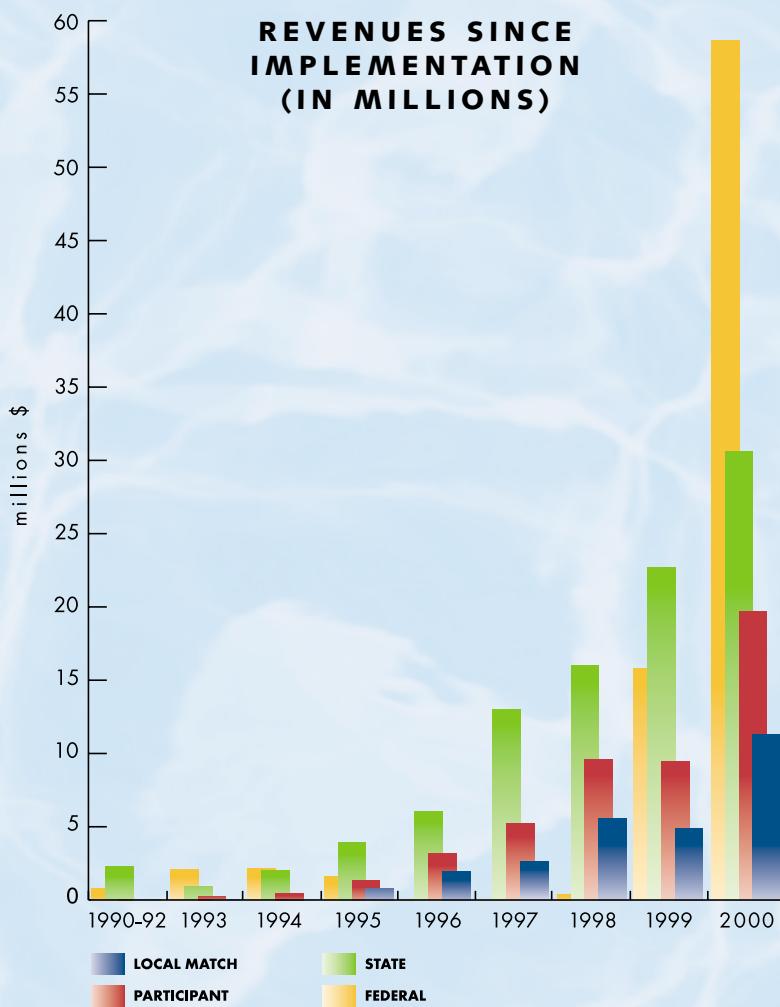
## STATE OF FLORIDA

From 1992 through 1997, Healthy Kids secured incremental increases to its State General Revenue funding and the program continued to grow and expand each year. By 1997, the State's contribution to the corporation's activities reached \$16 million annually and continues at that amount today. In 1998, the landmark case against "Big Tobacco" was settled and a certain amount was allocated by the Florida Legislature to establish new or to expand existing children's health programs. Of that allocation, \$57 million is currently directed to the Florida Healthy Kids Corporation bringing the total level of state funding to \$73 million.



### CURRENT FUNDING 2000-2001

GENERAL REVENUE	\$16,018,852
TOBACCO FUNDS	\$57,706,367
FEDERAL SCHIP FUNDS	\$138,332,830
FAMILY	\$41,456,101
LOCAL	\$11,598,261
OTHER	\$660,788



### LOCAL FUNDS

In order to begin new program project sites throughout Florida without federal assistance from the years 1993 through 1998, the corporation developed a participation requirement for county governments that desired to participate in the Healthy Kids program. Beginning in 1993, counties contributed local funds to support enrolled children.

During the 1999–2000 fiscal year, local governments voluntarily committed more than \$11 million to the program. These funds allowed Healthy Kids to serve 50,000 additional children and draw down \$59 million in federal matching funds.

The 2000 Florida Legislature froze the local match levels at the 1999–2000 level and asked Healthy Kids to present a multi-year proposal for the reduction of local match. (For more information on Local Funds, see page 22, "Local Match Revisited.")

### FAMILY CONTRIBUTION

Healthy Kids encourages parental responsibility in the medical system which serves their children by charging families a share of the insurance premium. Initially, a sliding scale of costs was available in each project and varied at county option. This scale charged families on a per-child basis an amount which varied from \$5 to \$65 per month. In response to limits placed on family cost sharing which were imposed by Title XXI as a condition of receiving federal funds under the Act, the corporation adopted "family" share of cost premiums for families under 200% federal poverty level. Today, 95% of enrolled families pay a single monthly amount of \$15 to cover all eligible children in the family. This change resulted in an overall percentage reduction in the amount of contributions being received from families. During the current year, the corporation will receive almost \$40 million from families under the new cost sharing arrangement.

# *Local Match Revisited*

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In 1992, prior to Healthy Kids opening its doors in Volusia County, the program communicated to the county that it would need to replace the federal funds used to subsidize its children due to the three year limitation of the federal Medicaid demonstration grant. Furthermore, the county would gradually have to increase its contribution if it wanted to maintain its program after the federal funds were no longer available. Volusia County agreed to provide the local funds necessary to bring the Healthy Kids program to their area.

The success of the program was witnessed immediately. Communities interested in acquiring the program were made

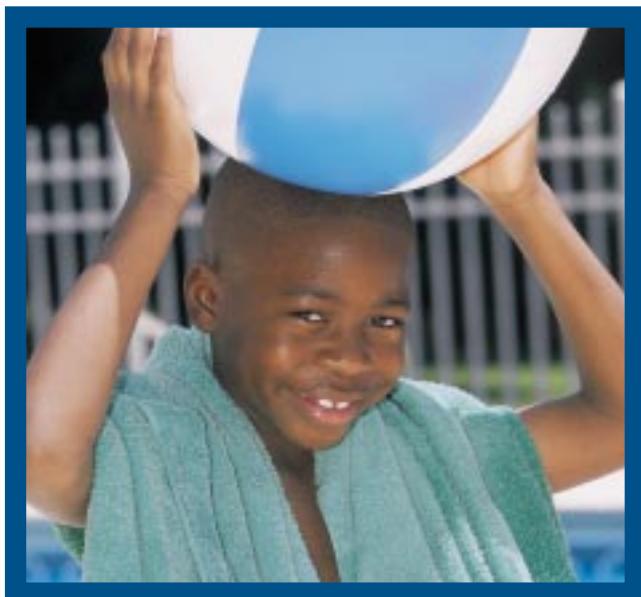
## Local Match Revisited

aware that a commitment of dollars and community resources was a necessity for approved expansion of the program for each location interested. Thus, a state-local partnership was formed with many counties in Florida as Healthy Kids worked to develop its program across the state.

Local match became a very important part of the Healthy Kids program beginning in 1993. It served as a mechanism for stretching limited state dollars, thus maximizing the number of uninsured children who could receive benefits from the program. Counties contributed local match based upon the number of children they wished to enroll.

In 1998, the Florida Legislature directed the corporation to become available statewide. This directive led Healthy Kids to create "base slots" for counties. These slots are completely subsidized through state and federal funding, no local match. If counties wished to enroll above their base allocation, they could do so only by providing local matching funds. The match rates ranged from 5% to 20% of the cost of the health care coverage. These funds provide some of the non-federal share of Florida's Title XXI expenditures.

In May 2000, the Florida Legislature asked the Florida Healthy Kids Corporation to study local match and present to them a multi-year proposal for the reduction of local match levels. Currently, Healthy Kids collects over \$11 million from 35 counties in local matching funds. The state legislature froze these commitments at the 1999-2000 commitment levels while the corporation conducted its study.





Healthy Kids sought public input while it conducted this study by holding a public forum, accepting written comments and interviewing various stakeholders. Guiding principles were developed by the Healthy Kids board of directors to make sure that the recommendation would be fair to all parties involved. These recommendations included:

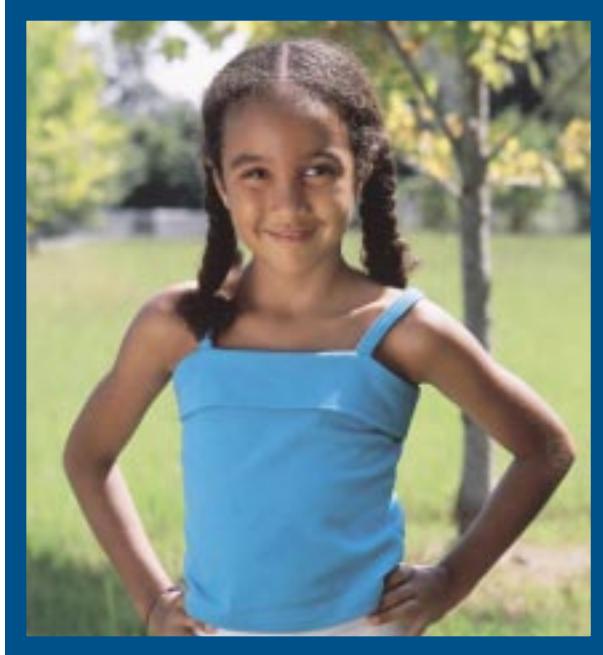
- As many children as possible should be covered;
- Children should be treated equitably;
- Inequities among county contributions should be corrected in a consistent and logical manner;
- To ensure long term survival of the program, broad based political and economic support must be maintained;
- Opportunities to secure federal matching funds should be maximized;
- Healthy Kids should continue as a federal/state/local partnership;
- The program should continue to allow for local enhancements in benefits, and

- No local community should pay more than 50% of the state's share of coverage costs.

The final report sent to the governor and legislature recommends the local match shares be reduced over a three year time period. Under this proposal, by year three, no county would pay more than 10% of the county's health care costs for its enrollees above a base allocation. Counties would receive their allocation based on the number of children under the age of 19. For example, smaller counties might receive 500 slots, medium-sized counties 750 slots and larger counties might receive 1,000 slots. Then, match would be applied for additional enrollment according to one of three schedules. The three schedules would be based on the county's economic base or some other indicator of county wealth. If the legislature adopts this recommendation, a more equitable policy of providing local matching funds can be achieved.

# Delivery System

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When selecting an insurer for Healthy Kids sites or rebidding an existing contract, the corporation considers five main areas: price, benefits, provider network, reporting capabilities and general criteria such as accreditation and solvency. A selection committee, which includes representatives from the Healthy Kids Board of Directors, Department of Insurance, the Agency for Health Care Administration, Medimetric Group and local stakeholders, analyzes each proposal and makes a recommendation to the board for an insurer. Each insurer under contract with Healthy Kids must meet exact requirements as to credentialing of providers, appointment and standards, and their geographic access. The following health plans serve Healthy Kids participants:



**BEACON HEALTH PLAN** is a Florida Licensed Independent Practice Association model HMO headquartered in Coral Gables, Florida. The Accreditation Association for Ambulatory Health Care, Inc., recertified Beacon through August, 2003. Beacon's Healthy Kids participants enjoy a large network of contracted providers and hospitals, comprehensive benefits and preventive services in Broward and Martin Counties.



**Capital Health**  
PLAN

**CAPITAL HEALTH PLAN (CHP)** of Tallahassee, Florida, was established in 1982 and is a local, not-for-profit, community-based health maintenance organization. CHP is unique among health plans for its strong history of customer satisfaction and its physician-directed care approach. Members have rated the plan among the top 10 in the nation and first in Florida for member satisfaction in national and state surveys conducted and published over the last four years. CHP currently serves Healthy Kids members in Leon County.



**CLARENDON NATIONAL INSURANCE COMPANY**, located in New York and a member of the Hannover Re Group, maintains an administrative office in St. Petersburg, Florida. Clarendon has achieved an A.M. Best rating of "A" and currently writes a significant volume of business in the State of Florida. Clarendon has been approved by the Agency for Health Care Administration to develop an Exclusive Provider Network in certain rural and secondary areas of Florida where there are no

HMO programs. Clarendon is committed to providing quality health care to the children of Baker, Citrus, Clay, Glades, Hardee, Hendry, Highlands, Holmes, Indian River, Jackson, Monroe, Nassau, Okaloosa, Okeechobee, Putnam, St. Lucie, Sumter, Walton and Washington counties.



**FLORIDA 1ST HEALTH PLANS, INC.**, based in Winter Haven, Florida, has obtained a three year accreditation by the Accreditation Association for Ambulatory Health Care, Inc. Originally formed in 1985 with the goal of being more than a typical health plan, Florida 1st manages the care of members to ensure quality and effective utilization along with a strong emphasis on preventive care and member education. Florida 1st believes health care issues should be met at a local level. With this in mind, Florida 1st and Community Health Partners, a local physician hospital organization in Collier County, have formed a partnership to meet the provider access and HMO administration functions for Collier County's Healthy Kids membership.



**FLORIDA HEALTH CARE PLANS, INC. (FHCP)**, headquartered in Holly Hill, Florida, recently celebrated its 25th anniversary and is the oldest community-model HMO in the State of Florida. FHCP provides for its membership through an affiliation with Halifax Fish Community Health. In 1998, FHCP merited a three-year "Network Accreditation," scoring 99 out of a possible 100, by the Joint Commission on Accreditation of Health Care Organizations. FHCP has been a provider for Healthy Kids in Volusia County since 1992 and Flagler County since 1996 and currently provides health care coverage to more than 9,000 Healthy Kids members. In 1998, National Research Corporation statistics indicated that FHCP was the highest rated HMO in the State of Florida for member satisfaction.



**HEALTH FIRST HEALTH PLANS, INC. (HFHP)** is a subsidiary of the parent company Health First, Inc., a 1995 merger of local hospitals representing over 100 years in the community. The health plan was approved by the state in January 1996 and is headquartered in Melbourne, Florida. HFHP has been serving Florida Healthy Kids throughout Brevard County since June 1998, and currently has more than 4,000 members. The health plan received a commendable accreditation from the National Committee for Quality Assurance (NCQA). Health First's purpose is to improve the health of the communities it serves by providing quality health services, responding to community needs, demonstrating accountability to the community, serving the needs of individuals regardless of income, and holding a strong commitment to putting children's health first.



**BlueCross BlueShield  
of Florida  
Health Options®**

Independent Licensees of the  
Blue Cross and Blue Shield Association

**HEALTH OPTIONS, INC. (HOI)**, headquartered in Jacksonville, Florida, received a commendable accreditation status for its north Florida operations and an accredited status for its south Florida operations from the National Committee for Quality Assurance. HOI is a wholly-owned subsidiary of Blue Cross and Blue Shield of Florida, an independent mutual insurance company and independent licensee of the Blue Cross and Blue Shield Association. Committed to providing Floridians with affordable health care choices, HOI also serves the Healthy Kids program in Charlotte, DeSoto, Duval, Escambia, Lee, Manatee, Santa Rosa and Sarasota counties. HOI conducts a tele-orientation program calling to introduce new members to the benefits of Healthy Kids and to answer questions they may have concerning coverage.

## Delivery System (continued)

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**HEALTHPLAN SOUTHEAST (HPSE)** is a Tallahassee, Florida-based HMO with a commendable accreditation from the National Committee for Quality Assurance. Over the past 14 years, HPSE's membership has grown to more than 70,000 members throughout north Florida. HPSE is an independent practice association model HMO with a network that includes County Public Health Units to reach rural counties. HPSE has the distinction of covering Healthy Kids in the largest number of counties and is doing so in Alachua, Bay, Bradford, Calhoun, Columbia, Dixie, Franklin, Gadsden, Gilchrist, Gulf, Hamilton, Jefferson, Lafayette, Levy, Liberty, Madison, Marion, Suwannee, Taylor, Union and Wakulla counties.



**Healthy Palm Beaches, Inc.**

**HEALTHY PALM BEACHES, INC.**, of Palm Beach County, Florida, has received a three-year accreditation from the Accreditation Association for Ambulatory Health Care, Inc. Healthy Palm Beaches, Inc., is a public, not-for-profit HMO focused on delivering high quality, comprehensive health care services to Palm Beach County residents. Its provider network includes top quality physicians located throughout Palm Beach County and 13 area hospitals. In addition, relationships exist with the school nurse in the public schools, the trauma system, and both community and public providers.



**HIP HEALTH PLAN OF FLORIDA**, based in Hollywood, Florida, received a commendable accreditation from the National Committee for Quality Assurance and has been rated one of the top HMOs in Florida by *US News & World Report* and *Newsweek*. HIP Health Plan of Florida serves Healthy Kids participants in Dade, Broward, Palm Beach, and Hernando counties.



**JMH HEALTH PLAN** of Miami, Florida, joined Healthy Kids as a provider when it began serving participants in Dade County in November 1996. Founded in 1985 as a pilot project, the JMH Health Plan was created to determine if managed care was a viable alternative for the medically underserved. The JMH Health Plan received the "1997 New Provider Quality Award" and received the highest rating among the state's HMOs according to the State of Florida Agency for Healthy Care Administration. The JMH Health Plan earned a three-year accreditation from the Accreditation Association for Ambulatory Health Care.



### **PHYSICIANS HEALTH CARE PLANS,**

**INC. (PHP)**, is a Florida-based HMO with offices located in Coral Gables, Ft. Lauderdale, Tampa and Orlando. Consecutively, PHP was awarded an unconditional three year accreditation by the Accreditation Association for Ambulatory Health Care, Inc. PHP provides services to Healthy Kids members in Hillsborough, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk and Seminole counties. Recently PHP was ranked one of the highest rated HMOs based on the percentage of members rating their health plan the very best during a survey conducted by the Agency for Health Care Administration.



### **UNITEDHEALTH CARE PLANS OF FLORIDA, INC.**,

a subsidiary of UnitedHealth Group of Minneapolis, serves Healthy Kids participants in Lake and St. Johns counties. UnitedHealth Care is a health benefits management company serving more than one million members throughout Florida. UnitedHealth Care of Florida's extensive network consists of more than 18,900 physicians, 150 hospitals and 2,500 pharmacies throughout the State of Florida. UnitedHealth care is continually recognized as a leader in health care quality and affordability.



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**ATLANTIC DENTAL, INC. (ADI)**, located in Coral Gables, Florida, was established in 1997 by a management team of health care and dental professionals who set out to establish a means of providing affordable dental care. ADI organized a network of more than 1200 dentists and dental specialists who are licensed by the State of Florida and the Department of Professional Regulation. ADI follows strict national credentialing standards to ensure quality dental care. ADI developed the Tooth Fairy Club for Healthy Kids members, providing educational information, activities and products focused on promoting good dental health and a lifetime of healthy smiles.



**DELTA DENTAL INSURANCE COMPANY** provides dental coverage for one million people. Part of the nation's largest dental benefits delivery system, it is also a member of the national Delta Dental Plans Association, which collectively covers over 35 million enrollees and includes the participation of three out of four dentists nationwide. Since 1955, Delta Dental has led the industry in offering innovative programs designed to control costs and ensure quality care. Serving Healthy Kids throughout Florida, Delta Dental is committed to providing quality dental service through its statewide network of professional dentists and dedicated Delta Dental-Healthy Kids staff.



**COMPONENT** is the dental division of CompBenefits, based in Atlanta, Georgia. CompBenefits, a nationally recognized leader in the development and administration of dental and vision plan benefits, provides affordable plans to over 4.5 million members in the south and midwest United States. This national scope, with a local focus on service, continues to be one of their strengths. CompDent has consistently and systematically grown its operations to meet customer needs, expectations and market potential since 1978. CompDent established an expertise in managing networks and provider practice management to enhance our administration of benefit plans.

# Standards and Quality. Rising to the Top

## Standards and Quality: Rising to the Top

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Since the inception of the program, the Florida Healthy Kids Corporation has worked hard to provide health, happiness, and a brighter future to Florida's children. The main goal of the corporation: to provide affordable, quality health insurance to enrolled children. The results of our efforts are quite encouraging. Today, more than 180,000 of Florida's children receive benefits through the Healthy Kids program, and their parents receive peace of mind in knowing their children have quality health care coverage.

Children undoubtedly deserve the best, and for this reason Healthy Kids puts great time and effort into providing them with the best providers and the best services possible. Each insurer that contracts with the program must develop a highly credentialed provider network which has great proficiency in the diagnosis and treatment of children's health care needs.

One means of establishing high quality and excellence in the Healthy Kids program was by creating and establishing standards of care. These standards of care include ensuring that providers give timely treatment to participants, and seeing to it that families are within reasonable driving time from their residence to their provider.

### 2000 SUBCOMMITTEE REVIEWS

The Standards Subcommittee of the Florida Healthy Kids Board of Directors is responsible for oversight of quality review. In fiscal year 2000–01, Healthy Kids continued the same review process and criteria used in previous years, allowing for comparison in performance over time. The corporation continues to stress health plan accountability for review results, requesting corrective action as needed to address identified problems or to improve care provided to participants.

In 2000, there were six health plans involved in the seven reviews, with the total number of active members in each county at review ranging from 187 to 9009. The number of primary care providers (PCPs) supplying care to these members ranged from 13 to 58 per county. The percent of PCPs reviewed by county averaged 39.1%.

As in previous years, Healthy Kids members predominately received care from board certified pediatricians and family practice physicians, with a small number of credential exceptions granted to internal medicine and general practice physicians providing care in under-served areas.



## REVIEW RESULTS

The three major components of the quality review are site review, access review, and medical record review. Site review determines physician office compliance with basic safety and infection control practices, as well as assesses certain other office practices such as processing lab reports. Access review involves obtaining information about member access to the PCP's services, as well as collecting data on visit patterns. Medical record review assesses compliance with basic documentation requirements and evaluates appropriateness of care.

*Site reviews* were conducted at 97 sites during fiscal year 2000. The number of sites visited in each county or county group ranged from 4 to 24. All sites reviewed achieved 100% on site review elements.

*Access review* was also conducted at all sites reviewed. In all county groups, access to physicians after hours is available and urgent care is provided within 24 hours. All county groups averaged

two weeks or less for access to routine physicals for both new and established patients.

*Medical record reviews* were conducted for 653 members statewide, or 4.6% of active Healthy Kids members in the county groups reviewed. The overall compliance rate with all medical record elements was 97.3%.

## CONCLUSION

Florida Healthy Kids strives to maintain a high level of care for its participants. It is paying off. In a recent survey conducted by the Institute for Child Health Policy, "The Florida KidCare Evaluation Year 2 Report," more than 90% of families reported their child having a "usual source of care" and the same percentage felt they were treated with courtesy and respect and received the help they needed from their doctor.

The corporation's focus on high quality will continue to be a priority throughout the year 2001 and for many years to come.

# National Program Office

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In September 1996, Healthy Kids received the opportunity through the Robert Wood Johnson Foundation to make a national impact on the issue of children's health care. Healthy Kids was awarded a \$3 million grant for the planning and development activities of a Healthy Kids Replication Program. Five grants were awarded to other states interested in replicating what the Healthy Kids program did in the state of Florida. Colorado, Georgia and Iowa received planning grants, and New Hampshire and Texas received implementation grants.

The main objective of the National Program Office: to provide technical assistance and direction to this grant initiative.

Although some of the goals of the National Program Office changed due to the federal State Children's Health Insurance Program (SCHIP) creation, a number of successes were realized.

Through the generous support of the Robert Wood Johnson Foundation, Medimetric Consulting and the Florida Healthy Kids Corporation developed a paper entitled "Raising the Bar for Quality and Access in Pediatric Delivery Systems." This technical assistance document describes the Healthy Kids experience in an effort to inform and guide other states as they pursue the development of cost-effective child health programs. The purpose of this paper is to help others in their efforts to raise the standards for pediatric provider quality and access under the child health programs.

Another technical assistance document created through the help of the Robert Wood Johnson Foundation, the Institute for Child Health Policy and the Florida Healthy Kids Corporation is entitled "Evaluating State Children's Health Insurance Initiatives." This document serves as a guidebook for building evaluation programs. The Florida Healthy Kids Corporation is committed to conducting proactive evaluation to not only assess, but maintain and improve the care given to participants of Healthy Kids. Specific evaluations include: comparison of actual versus expected health care use; analysis of child health status; evaluation of potential crowd-out; determination of out-of-pocket expenses; and comparisons to other programs, such as Medicaid and commercial product lines.



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Our final technical assistance document is currently being created and will be ready for distribution by spring 2001. This document has the support of the Robert Wood Johnson Foundation, the Florida Healthy Kids Corporation and all those that have contributed to its content. "Florida Healthy Kids: Blueprint for a National Model" will be the final document released through the National Program Office. This book will give a brief overview and history of the Florida Healthy Kids Corporation and the National Program Office. Included with the book is a CD ROM that will house all of the evaluations completed on the Florida program.

The National Program Office has been involved in a number of other projects through its five year history which include site visits to the grantee states and conferences held to provide technical assistance.

The Florida Healthy Kids Corporation believes it has truly been a privilege to have the opportunity to help many other states in their effort to ensure that all children have access to quality health care.

The Florida Healthy Kids Corporation will end its role as the National Program Office for the Healthy Kids Replication Grant on February 28, 2001.

# Other Readings

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