

THE STATE OF FLORIDA JUSTICE ADMINISTRATIVE COMMISSION

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MEMORANDUM HR19-2022

To: Agency Administrators

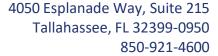
From: Carolyn Horwich, Esq., Director of Human Resources

Subject: Diabetes Management Pilot Program

Date: September 30, 2022

Please share the attached Management Advisory from the Division of State Group Insurance with all employees.

Thank you.





Ron DeSantis, Governor Pedro Allende, Secretary

Management Advisory #22-009

DATE: Sept. 30, 2022

TO: Agency and University Personnel Officers and Benefits Coordinators

FROM: Ryan Stokes, Director, Division of State Group Insurance

SUBJECT: Diabetes Management Pilot Program For Plan Year 2023

Please distribute this information to all employees

The Florida Department of Management Services' (Department) Division of State Group Insurance (DSGI) is continuing the Diabetes Management Pilot Program which will utilize a digital health platform for diabetes management within DSGI's participating health plans to monitor eligible diabetic enrollees' HbA1c and hypoglycemia levels.

Who is eligible?

The Program is limited to the first 2,000 participants covered under a participating State Group Insurance Program health plan who meet *ALL* of the following eligibility criteria:

- Enrolled in Aetna, AvMed, Florida Blue, or United Healthcare in the 2022 and 2023 plan years.
- Enrollees diagnosed with Diabetes Mellitus.
- Hemoglobin A1C (A1C) 6.5 percent or higher OR Fasting Plasma Glucose (FPG) ≥ 126 mg/dL or higher.
- Body Mass Index (BMI) of 25 or higher.
- Enrollees or dependents between the ages of 18 to 63 years.
- Not enrolled in Medicare.
- Consented to provide personal and medical information to the Department.
- Referred and supervised by an in-network licensed treating provider with the health plan during the 2022 plan year.
- Agreed to enroll in a Department-approved digital health platform for the Diabetes Management Pilot Program within the PPO plan or the self-insured HMO plans to monitor diabetes during the 2023 plan year.

Who is not eligible?

The following enrollees or their dependents covered under a participating State Group Insurance Program health plan are not eligible to participate in the Program:

- Enrollees and their dependents enrolled in Capital Health Plan during the 2022 and 2023 plan years.
- Enrollees or dependents under the age of 18 or over the age of 63.
- Enrollees in COBRA.
- Enrollees or dependent women who are pregnant, plan to become pregnant, or are nursing.

- Enrollees or dependents who do not meet **all** the Program's eligibility criteria.
- Enrollees in the following Medicare Advantage & Prescription Drug (MA-PD) Plans:
 - Humana MA-PD
 - UnitedHealthcare MA-PD
 - Capital Health Plan MA-PD

In the 2023 plan year, the program will provide coverage for all visits to a licensed in-network provider supervising a participant, as well as coverage for Federal Drug Administration-approved medications for diabetes management. Program participants will be responsible for all applicable medical and prescription drug copayments, coinsurance, deductibles, and out-of-pocket expenses.

The program application period begins on Monday, Oct. 3, 2022. The first step for those eligible and interested in participating in the Program is to download the <u>Provider Referral Form</u> from the <u>myBenefits</u> website and have it completed and signed by their healthcare provider. The second step is to apply online and submit a PDF or JPEG file of their completed <u>Provider Referral Form</u> with an application.

The window to apply opens Oct. 3, 2022 and closes on Nov. 14, 2022. The Department will not accept applications that are mailed or faxed or received after Nov. 14, 2022.

Applicants who meet the program eligibility criteria and who have submitted a completed application with a completed Provider Referral Form signed by their healthcare provider, will be selected on a first-come, first-served basis. Only one application will be considered per member.

Participants will be required to enroll and engage in a Department-approved diabetes management program and must submit a progress report in 2024. The specific diabetes management programs will vary based on the health plan. The progress report is due no later than Monday, Jan. 31, 2024. The progress report must be signed by the supervising healthcare provider and submitted online.

Applicant information will be kept confidential. The Department is required to report program information to the Florida Legislature. Only the combined results of all participants will be reported and shared. Information about individual participation will not be disclosed.

Please share the <u>FAQs</u> and encourage employees to visit the <u>myBenefits website</u> to see if they are eligible and when and how to apply. **Please do not direct employees to contact People First** as the Division of State Group Insurance is solely responsible for administering the program. If you or your employees have any questions about the Program, please email <u>diabetesmanagement@dms.fl.gov</u>.

Thank you in advance for your support of this program to help improve the long-term health and quality of life for employees enrolled in the State Group Insurance Program.