



## Weekly Bulletin – October 25, 2024

This Weekly Bulletin is a benefit of your organization's Employer Membership in the Florida Alliance and is meant to ONLY be shared within Employer Member organizations unless approval has been given by the Florida Alliance CEO.



### ACTION ITEMS

#### **Confirm Your Seat at our 29<sup>th</sup> Annual "Best of the Best" – Register today!**

The Florida Alliance Annual "Best of the Best" event showcases high-value healthcare programs initiated by employers. As always, we invite leading-edge employers from across the U.S. who have been innovative in their benefit design and contracting to present their successful programs. **All Florida Alliance Employer Members receive complimentary registration! See your code below.**



The session titles are:

- Leveraging the Impact of Innovative Technology in Disease Management
- Employer Insights for Oncology Management
- Vaccine Misinformation and Vaccine Hesitancy
- Increasing Benefits While Reducing Cost – A Counterintuitive Approach
- How Your Company Can Regain Control of Your Healthcare Program

Click [HERE](#) to see the full agenda.

#### **Details of the event:**

- **Date:** Tuesday, December 10, 2024
- **Registration:** 8:30AM – 9:00AM
- **Program Time:** 9:00AM – 4:00PM ET
- **Location:** GuideWell Innovation Center, 6555 Sanger Road, Orlando, FL 32827
- **Your Member Promo code:** EMPLOYERGUEST24BOTB (Please do not share this code outside your organization. If you have a colleague at an organization that is not a member of the Florida Alliance, please reach out to [Karen@flhealthvalue.org](mailto:Karen@flhealthvalue.org) for a guest code and flyer that you can share with them.)
- **Register** [HERE](#)

Thank you to **Healthcare Advisory Council member Florida Blue** for hosting this event again.



**Thank you to our generous sponsors!**



If your organization would like to be a sponsor, if you have any questions, and/or need assistance with your registration, please contact Lisa Hain at [lisa@flhealthvalue.org](mailto:lisa@flhealthvalue.org)



## WHAT'S NEW THIS WEEK?

### **OBJ Article – Advanced Birthing Centers are Now Allowed in Florida**

Florida is the first state in the country that has passed a law that will allow cesarean sections (C-sections) to be performed outside of hospitals, allowing doctors to perform C-sections in “advanced birthing centers.” The benefits of having advanced birthing centers are potentially providing lower-cost alternatives to traditional hospital deliveries and filling maternity care gaps in areas where there is less access to other medical facilities. In Florida, 19% of the counties have little or no access to pregnancy and postpartum care. In addition, there have been 17 hospitals in Florida that have closed their maternity wards since 2019.



**Karen van Caulil**

**Florida Alliance President and CEO Karen van Caulil was interviewed for an *Orlando Business Journal* article that was also published statewide in the regional business journals.**

According to the legislation, advanced birthing centers must remain staffed 24 hours a day with a minimum of one board-certified obstetrician and one anesthesiologist as medical directors. Additionally, they must always staff at least one registered nurse. The facility must also have an agreement with a blood bank for emergencies, a C-section surgical suite, written protocols for the management of obstetrical hemorrhage, and a transfer agreement with a hospital. Medical providers and

hospital groups remain concerned that there could be dangerous complications that the facility and staff would be unable to address in a timely manner.

Karen was quoted in the article as saying: “While these centers aim to reduce costs and provide a more comfortable environment for childbirth, many in the medical community worry about increased risks for both mothers and babies, particularly in emergency situations where rapid interventions are crucial...Many experts warn that even low-risk pregnancies can quickly become high risk, potentially requiring immediate hospital-level care.”

We will be tracking the draft regulations for this new law as they are made public and will be weighing in where needed. We have formed a health policy committee. If you are interested in being on this committee, please let Karen know.

Click [HERE](#) to read the article.

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions or concerns.

### **Roche Hispanic Women's Health Days in Miami**



***Pictured left to right: Karen van Caulil, Jane Lutz, Rosa Novo, and Jair Espinoza***

The Florida Alliance was well-represented at the Roche Hispanic Women’s Health Days held in Miami. Affiliate Member Genentech is a Roche company and Jane Lutz of Genentech invited Florida Alliance President and CEO Karen van Caulil to attend as well as Florida Alliance Board Chair Rosa Novo from Miami-Dade County Public Schools and Board Member Jair Espinoza from the City of Miami.

The event was filled with data and information sharing on the healthcare challenges that women face, but especially Hispanic women. Karen, Rosa, Jair, and Jane were able to meet with the Roche team to talk about holding a Women’s Health Employer Learning Collaborative for the Florida Alliance where we would be able to share our learnings from the event and bring in other experts to talk about employer best practices.

One of the presentations was on the “pink tax.” A new report from Deloitte highlights the pricing mark up of healthcare products and services geared specifically toward women and girls. Additionally, Deloitte reported that women have significantly higher out-of-pocket healthcare costs than men.

Click [HERE](#) to read the report.

Also, this past month has been Hispanic Heritage Month. Click [HERE](#) to view a short but wonderful video from the City of Miami about Jair!

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions.



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## **Value-Based Purchasing of Healthcare – A Practical Course for Employers Seeking Greater Value from their Healthcare Benefit Spending**

In collaboration with the Florida Alliance, the Greater Philadelphia Business Coalition on Health, HealthcareTN, the University of Central Florida (UCF) Continuing Education Department, and the UCF School of Global Health Management and Informatics, this new course is available as a **virtual learning program starting in January 2025**. Registration is open now! **President and CEO Karen van Caulil is one of the instructors and is teaching the session on how transparency and primary care drive value in health care and the session on advancing payment reform. Kenneth Aldridge, Director of Health Services at Rosen Hotels and Resort, and a Florida Alliance Board member, will be sharing their advanced primary care model during the primary care session.**

The course is tailored for benefits professionals aiming to enhance their expertise in crafting a comprehensive benefits strategy. Through value-based purchasing of health benefits for a defined population, participants will learn to optimize health outcomes, promote health equity, and manage costs effectively.

Click [HERE](#) to read the course brochure to see the topics covered.

Click [HERE](#) to register for the course. Seats are limited! Register today!

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions.





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## EMPLOYER MEMBER EDUCATIONAL PROGRAMS, REPORTS, RESOURCES AND EMPLOYER LEARNING COLLABORATIVES (ELC)

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### **Employer Member Benefit: Resource – Supporting Women’s Health in the Workplace: Helping Women with Breast Cancer Choose Between Surgical Treatment Options**

The National Alliance in collaboration with Patient-Centered Outcomes Research Institute (PCORI®) has developed and shared a way to support women diagnosed with breast cancer in ensuring they have accurate resources so they can make an informed decision on choosing the right treatment for them. It is imperative to make sure women understand their options clearly in the early stages of breast cancer. **A video was produced to explain these resources and their importance. Karen van Caulil was interviewed for this video along with the PCORI researcher and the CEO of the Northeast Business Group on Health, Kim Thiboldeaux.**



Breast Cancer has the highest cost treatment over other types of cancer, accounting for 14% of the costs. In the U.S., breast cancer is the most common cancer in women, aside from some types of skin cancer. Women tend to live five or more years longer when diagnosed in the earliest of stages with breast cancer over those who are diagnosed at the most advanced stages

Karen referenced our Employer Guide and Insights to Oncology Management during the video. To see the Employer Guide click [HERE](#).

To view the video click [HERE](#).

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions.

### **Employer Member Benefit: Mental Health Parity Compliance – New Guidelines and Reminder about Upcoming Webinar**



Are you certain that your mental health and substance use disorder benefits are “on par” with your medical/surgical benefits as per the Mental Health Parity law?

We are working with Mental Health Parity experts Henry Harbin, M.D. and Beth Ann Middlebrooks and the Bowman Family Foundation to develop checklists and a toolkit that you can use to conduct the needed analysis to achieve Mental Health Parity Law compliance. The two-part compliance series will include review and sharing of the tools we develop. Thanks to Orange County Government for funding our time on this initiative!

As a reminder you have already received invitations to these webinars from [info@flhealthvalue.org](mailto:info@flhealthvalue.org) for the **Mental Health Parity Compliance Webinar – Part 1, coming up on Wednesday, October 30, 10:00AM – 11:00AM ET.** Part 2 will be held on Thursday, December 12, 3:00PM – 4:00PM.

If you have not yet received the invitation to the webinar, please contact Lisa Hain at [lisa@flhealthvalue.org](mailto:lisa@flhealthvalue.org).

For more information, please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org)



## IN CASE YOU MISSED IT

### Study: PGx+CMM Reduces Utilization and Saves Employers Money



Over a 26-month span, a study in *The Pharmacogenomics Journal* found that pharmacogenomics-enriched comprehensive medication management (PGx+CMM) can reduce healthcare utilization and offer cost savings for self-insured employers. **The results show that this approach can reduce emergency department visits and inpatient visits by 39%, increasing outpatient visits by 21%, producing potential cost savings.**

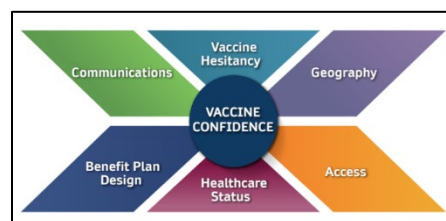
Implementing PGx+CMM could have a beneficial impact for healthcare utilization in a self-insured employer population with offering a reduction in emergency department and inpatient visits, which will offer potential cost savings. During the 13-month follow-up period, it was found that program participation significantly decreased inpatient and emergency department visits compared to the control group. Additionally, the program showed potential economic benefits as measured by healthcare resource utilization and costs in medical claims.

To view the full article, click [HERE](#).

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions.

### Employer Member Benefit: Employers Can Improve Vaccine Confidence and Adoption with Simple Action Steps

Now is the time to educate employees on the importance of vaccinations! Overcoming challenges engaging employees on the importance of vaccinations is imperative. Some of those challenges consist of vaccine hesitancy, geography and access, and healthcare status.



At “Best of the Best” we will have a special session on vaccine hesitancy and misinformation that you do not want to miss!



Vaccination rates continue to drop, Florida being one of the worst rated. There are ways to overcome these barriers. Putting vaccinations at the forefront year-round and not just once a year, will help vaccination awareness. **Educating, supplying benefits, holding vaccine fairs, resources and services will help engage employees with wanting to receive vaccinations and stay up to date.** Sending out reminders for employees and their dependents, such as social media that links your organization partnering with local pharmacies/clinics, communication that vaccines such as COVID-19, HPV (human papillomavirus), Tdap (tetanus, diphtheria, pertussis), MMR (measles, mumps, rubella), Hepatitis A and B, Meningococcal, Zoster (shingles), Polio, Varicella (chickenpox), Pneumococcal, and Influenza (flu) vaccines are given at no cost, and educate on how vaccines help the spread of diseases.

Sister coalition, the Midwest Business Group on Health, has developed a two-page guide for employers that they call an Employer Snapshot. To view the Snapshot, click [HERE](#).

To read more on vaccine and immunization recommendations and communications from the CDC click [HERE](#).

Please contact Karen van Caulil at [karen@flhealthvalue.org](mailto:karen@flhealthvalue.org) if you have any questions.

### **Last call! Short Survey: Medical and Pharmacy Claims Review/Audit**



At our recent educational events regarding fiduciary duty, high-cost claims, and transparency, several of the healthcare experts we have engaged emphasized the importance of employers having a third-party evaluation of their claims.

**If your organization has performed either a 100% review of claims or an audit on a selection of claims from your medical and/or pharmacy plans, would you please take 5 minutes to respond to the questions in the survey below? We will share the findings in an upcoming Bulletin. Please respond by Monday, October 28. Thank you!**

Click [HERE](#) to view/print a PDF of the questions. Click [HERE](#) to respond to the survey.

If you have any questions, please contact Ashley Tait-Dinger at [ashley@flhealthvalue.org](mailto:ashley@flhealthvalue.org)

[Law could bring new player to C-section business](#)

**FOR THE EXCLUSIVE USE OF** [REDACTED]

From the Orlando Business Journal:

<https://www.bizjournals.com/orlando/news/2024/10/17/law-could-bring-new-players-to-c-section-business.html>

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Health Care

# **Law could bring new players to C-section business**




Recent Florida law could bring new players to the C-section business.

IAN WALDIE





By Ashley Portero – Senior Reporter, South Florida Business Journal  
Oct 17, 2024

 Listen to this article 9 min



Florida has a maternity care problem.

But a new law could pave the way for businesses to offer a solution.

This year, Florida passed a law that will allow doctors to perform cesarean sections outside of hospitals in so-called “advanced birth centers,” the first state in the country to permit the practice. Supporters say establishing the private outpatient centers could provide lower-cost alternatives to traditional hospital deliveries and help fill maternity care gaps in areas without easy access to other medical facilities.

Hospitals, community health organizations and traditional midwife-led birth centers are among the businesses that could consider establishing advanced birth centers, said state Sen. Gayle Harrell, who sponsored the birth center bill.

While the proposed centers are intended to serve low-risk births, some medical providers expressed concern that performing a major surgery like a cesarean section outside of fully equipped hospitals could be risky for women and babies.

"We believe that C-sections should be performed in the hospital setting, where doctors, specialists, sophisticated equipment and other critical resources are immediately available should complications arise," said Mary Mayhew, president and CEO of the Florida Hospital Association, an advocacy group that opposed the advanced birth center law.

## **DELIVERING AN OPTION**

The advanced birth centers bill was approved in March as part of the "Live Healthy" legislation package, which appropriates about \$717 million over 10 years for a myriad of

health items, including dental student loan repayments and training for certain psychiatric nurses.

And the law comes at a time when more hospitals across the nation are shuttering maternity wards and obstetrics units due to staffing shortages, declining birth rates and financial losses.

In Florida, 17 hospitals have closed their maternity wards since 2019. The South Florida region was impacted in February, when North Shore Medical Center in Miami announced it would no longer provide delivery and neonatal services.

Additionally, 19% of the Sunshine State's counties are considered maternity deserts, or areas with little or no access to pregnancy and postpartum care, according to the March of Dimes. Women in those counties may need to travel for 30 minutes or longer to access prenatal or delivery care. The report also links living in maternity care deserts with poorer health outcomes for mothers and babies.

Florida's advanced birth center law aims to fill those gaps by making it easier for private businesses to set up outpatient birthing centers for low-risk pregnancies, Harrell said. It could be a cheaper alternative for hospitals that lack the budget or demand for full maternity care units, as well.

“I’d love to see hospitals open stand-alone advanced birth centers on- or off-campus,” said Harrell, who compared the facilities to ambulatory surgery centers already operated by physician and hospital groups.

Federally qualified community health centers, which often provide health care services in rural or low-income communities, could also be among the enterprises to establish advanced birth centers, she said. Traditional birth centers could potentially participate if they make the necessary upgrades - like the addition of a surgical facility - to qualify.

Harrell said the centers will have a homier environment than a hospital to make it more comfortable for families. That could be a draw for women and couples seeking a more holistic birthing experience, she added.

“Not every woman wants to deliver in the hospital,” she said. “This is about giving them a choice.”

Rachel Coughlin, co-founder of the Doula Hive Collective in Tampa Bay, agrees that not every woman wants a hospital birth. But in the event of a C-section, she believes patients want to be in a hospital to have immediate access to a neonatal intensive care unit and other resources, should a complication arise.

A hospital-affiliated advanced birth center located on a hospital campus or adjacent to one could potentially offer the best of both worlds: a more comfortable environment for labor and recovery with immediate access to emergency medical services, she added.

“That is the opportunity to create businesses that provide that kind of experience,” Coughlin said. “How do we use it as a bridge, versus putting people at risk on a lonely island?”

## **QUALITY OF CARE CONCERNS**

Harrell said she was surprised by the reaction to the passage of the advanced birth center law.

In June, KFF Health News reported that Women’s Care Enterprises, a physician group owned by private equity firm BC Partners, lobbied for the legislation. That sparked concerns that advanced birth centers with private equity ownership could provide poorer services or even overperform cesarean sections for profit.

“I have never spoken to anyone from private equity about this,” said Harrell, who denied Women’s Care Enterprises was involved with the legislation.

Women’s Care Enterprises could not be reached for comment.

Quality of care is a major concern in the U.S., which has one of the highest maternal mortality rates in the developed world.

According to the legislation, advanced birth centers must be operated and staffed 24 hours a day and employ one board-certified obstetrician and one anesthesiologist as medical directors. At least one registered nurse must be present in the center at all times.

In addition, the facilities must have at least one surgical suite for C-section deliveries, have an agreement with a blood bank for emergency services, written protocols for the management of obstetrical hemorrhage, and a transfer agreement with a hospital. The law does not define what qualifies as a low-risk cesarean section.

The Florida Agency for Health Care Administration is still finalizing the full rules governing advanced birth centers.

Hospital groups and medical providers remain concerned, arguing that dangerous complications are always a possibility when surgeries are involved.

While Harrell said advanced birth centers are comparable to outpatient surgery centers, some physicians disagree.

For one thing, an average of one liter of blood is usually lost during a cesarean section, far more than the blood loss experienced during most outpatient surgeries, said Dr. Katherine Apostolakis-Kyrus, a maternal-fetal medicine specialist at the Johns Hopkins All Children's Maternal, Fetal and Neonatal Institute.

"If you look at surgery centers, they're doing surgeries like a gallbladder removal, where blood loss is 20 to 200 milliliters, or they are doing cataract surgeries, where you barely have any blood [loss] at all," she said.

Karen Van Caulil, president and CEO of the nonprofit Florida Alliance for Healthcare Value, said the success of advanced birth centers will depend on the regulatory framework and quality standards imposed by Florida lawmakers. To avoid more adverse outcomes, the centers will need the medical staff, technology and protocols able to handle emergency situations at the same level of care as a hospital.

"While these centers aim to reduce costs and provide a more comfortable environment for childbirth, many in the medical community worry about increased risks for both mothers and babies, particularly in emergency situations where rapid interventions are crucial," Van Caulil said. "Many experts warn that even low-risk pregnancies quickly can become high risk, potentially requiring immediate hospital-level care."

## **QUESTIONS REMAIN**

For now, health care providers say the advanced birth center law leaves too many questions unanswered.

For example, while the legislation says an advanced birth center must have a transfer agreement with a hospital, it does not say how many miles away the hospital must be, Apostolakis-Kyrus said.

Then there is the question of who will perform deliveries at advanced birth centers. According to the American College of Obstetricians and Gynecologists, the U.S. has a shortage of obstetrician-gynecologists that is only expected to worsen by the end of the decade as more physicians hit retirement age. Older doctors are leaving the workforce faster than younger physicians can replace them, which will make it even more challenging for some women to find maternity care.

That means hospitals and advanced birth centers could end up competing for the same limited pool of practicing OB-GYNs. Apostolakis-Kyrus isn't convinced those physicians would choose an advanced birth center over a better-equipped hospital.

“There are hospitals in rural areas that had to close down because they didn't have enough OB-GYNs,” she said. “If you instead build an advanced birthing center there, I think an OB-GYN would be even less likely to apply to that job because now you're taking the same patients that live there, and you're unable to access everything you need to give optimal care.”

It remains to be seen whether advanced birth centers can improve women's health and reproductive care in Florida.

A recent study from The Commonwealth Fund ranked Florida 48th out of the 50 states for health care access and affordability for women, noting that 1 in 7 working-age women in the state do not have health insurance. That makes it more difficult for low-income women to obtain prenatal care during their pregnancies.

Advanced birth centers could be beneficial if they can provide a more affordable option for prenatal care and cesarean deliveries, and develop partnerships with hospital systems to ensure safety, Commonwealth Fund Senior VP Dr. Laurie Zephyrin said.

“There’s evidence that shows having a wide range of birthing centers, midwifery care and other options can improve maternal outcomes,” she said. “The question is: How will advanced birth centers fit into the broader ecosystem of health care services?”

*Ryan Lynch and Alexis Muellner contributed to this report.*

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**T H E L I S T**

## Hospitals

Current acute-care beds

Rank	Prior Rank	Hospital
1	1	AdventHealth Orlando
2	2	Orlando Health Orlando Regional Medical Center
3	3	AdventHealth Altamonte Springs

[View This List](#)