



Weekly Bulletin – June 26, 2025

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.



WHAT'S NEW THIS WEEK?

Targeted 340B Project in Florida

Florida has been identified as a high priority state for 340B drug pricing program legislation. **The Florida Alliance's strategic alliance organization, Floridians for Accountability in Health Care, is leading a coordinated initiative to address rising hospital and drug costs, with a particular focus on the 340B drug pricing program.** In Florida, the effort centers on rallying employer support through sign-on letters and gathering testimonials on the financial impact these costs have on employer-sponsored health plans. These insights will be shared during an in-person policy briefing in Tallahassee this fall. The initiative also includes drafting and introducing legislation to improve transparency. We will share more details as they come available.



This new initiative builds off a prior one also sponsored by the National Alliance. The output of this initiative was a one-page summary that shows how flaws in the 340B program may be contributing to a rise in healthcare costs for employers and working families. Click [HERE](#) to see the document along with the National Alliance dedicated webpage on the 340B drug program and its impact on employers. To reach this website, click [HERE](#).

Last year we shared a two-part *Relentless Health Value* podcast that National Alliance CEO Shawn Gremminger participated in. If you have not yet listened to it, it is an excellent "primer" on the program and its negative impact on employers. You can find the podcasts by clicking [HERE](#) to listen to Part 1 and click [HERE](#) to listen to Part 2.

Please contact Karen van Caulil at karen@flhealthvalue.org if you are interested in participating in the in-person briefing in Tallahassee or have any questions.

America's Health Insurance Plans (AHIP) Press Release: Health Plans Take Action to Simplify Prior Authorization



Health insurance plans across the U.S. have announced **new voluntary commitments to improve and simplify the prior authorization process**, aiming to reduce delays and administrative burdens while ensuring timely access to care for **257 million Americans** across Commercial, Medicare Advantage, and Medicaid Managed Care health plans.

Key Commitments Include:

1. Standardizing Electronic Prior Authorization

- Participating health plans will work toward implementing common, transparent submissions for electronic prior authorizations which will include the development of standardized data and submission requirements.

2. Reducing the Scope of Prior Authorization

- Each participating plan will commit to specific reductions to medical prior authorization as appropriate for the local market each plan serves.

3. Continuity of Care During Insurance Changes

- To help patients avoid delays and maintain continuity of care during insurance transitions, new insurers will honor prior authorizations for 90 days.

4. Improving Communication & Transparency

- Clearer explanations on prior authorization determinations and appeals support for patients will be implemented.

5. Real-Time Responses

- By 2027, at least 80% of electronic prior authorization approvals (with all needed clinical documentation) will be answered in real-time.

6. Medical Review of Denials

- All clinical denials will continue to be reviewed by medical professionals (already in effect).



Cigna, UnitedHealthcare, Guidewell, and several other healthcare organizations welcomed these steps as necessary reforms, emphasizing collaboration, patient-centered care, and the need for measurable impact.

Progress will be tracked and publicly reported. More details and participating plans are listed at [AHIP.org](https://www.ahip.org) and [BCBS.com](https://www.bcbs.com).

Click [HERE](#) to read the full press release.

Please contact Karen van Caulil at karen@flhealthvalue.org if you have any questions.



ACTION ITEMS

Sharing Requests for Proposals or Information

The Florida Alliance is proud to include several Affiliate Members who are eager to connect with you, our valued Employer Members. As a matter of policy, our team at Florida Alliance is highly protective of your contact information, and limits direct outreach from our Affiliate Members to you.

To help strike a balance between safeguarding your contact information and providing value to both you and our Affiliate Members, **we kindly ask that you consider sharing with us any Requests for Proposals (RFPs) or Requests for Information (RFIs) you issue or those that are issued on your behalf by a consultant.** Whether it is a document or a link to an online portal, the Florida Alliance staff will ensure that the relevant Affiliate Members receive the information and can respond appropriately if they are interested.

If you have any questions or to send the RFP/RFI, please contact Ashley Tait-Dinger at ashley@flhealthvalue.org.



Join the Pulse of the Purchaser Research Institute Panel



Launched at the National Alliance Summit in Dallas two weeks ago, the Pulse of the Purchaser Research Institute invites Florida Alliance Employer Members to join a national expert panel focused on shaping the future of healthcare policy and practice. Developed in partnership with the Health Analytics and Insights Group, this initiative offers our Employer Members the opportunity to contribute confidential insights through periodic research and advisory engagements such as surveys, interviews, and focus groups.

Florida Alliance Employer Members participating in the research will enable the Florida Alliance to receive a small stipend and access to the project's final research. The findings of the research will be shared with all Employer Members through the Weekly Bulletin.

To read the *Pulse of the Purchaser Research Institute Overview*, click [HERE](#).

Please contact Karen van Caulil at karen@flhealthvalue.org if you have any questions.



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

Registration is Open! 30th Annual “Best of the Best” Event – Thursday, December 11, 9:00AM – 1:30PM ET



Join the Florida Alliance for our 30th Annual “Best of the Best” event on Thursday, December 11, 2025, from 9:00AM to 1:30PM ET at the Center for Health and Wellbeing in Winter Park, Florida. Proudly hosted by Affiliate Member Winter Park Health Foundation, this special milestone event celebrates three decades of employer-led innovation in healthcare. “Best of the Best” highlights forward-thinking employers who are delivering high-value, person-centered care through real-world strategies and measurable results. Attendees will hear from leading employers and

industry experts, engage in dynamic discussions, and gain practical insights to improve employee health and drive meaningful change across the healthcare system. Registration is now open, do not miss the opportunity to be part of this landmark event.

Are you making a meaningful impact in health care? We would love to feature your work at our 30th Annual “Best of the Best” event! If you are interested in speaking and sharing your story with a powerful network of forward-thinking employers and industry leaders, please contact Karen van Caulil at karen@flhealthvalue.org as soon as possible.



Hotel Accommodations:

Hotel information is located on the event webpage on our website. Click [HERE](#) for more information.

Details of the event:

- **Date:** Thursday, December 11, 2025
- **Registration:** 8:30AM – 9:00AM EDT
- **Program Time:** 9:00AM – 1:30PM EDT
- **Location:** Center for Health and Wellbeing, 2005 Mizell Avenue, Winter Park, FL 32792
- **Your Complimentary Member Promo code:** **EMPLOYERBOTB122025** (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 van Caulil at karen@flhealthvalue.org for a guest code and flyer that you can share with them.)
- **Register** [HERE](#)

Thank You to Our Early Sponsors of “Best of the Best”!



Please contact Lisa Hain at lisa@flhealthvalue.org if you have any questions or need help registering.



IN CASE YOU MISSED IT

CDC: Measles Cases and Outbreaks Hit Florida

As of June 12, 2025, the U.S. Centers for Disease Control and Prevention (CDC) has reported 1,197 confirmed measles cases across 35 U.S. states, including Florida. **This report marks a sharp increase in national measles activity, with Florida among the states contributing significantly to this year's total. So far, 21 outbreaks have been reported in 2025, with 90% of confirmed cases (1,072 of 1,197) linked to these outbreaks.** By comparison, 2024 saw 16 outbreaks and 69% of cases (198 of 285) tied to outbreak clusters. While the CDC tracks only confirmed cases on its site, individual states such as [Florida maintain the most up-to-date information on local cases and outbreaks.](#) The estimated percent of vaccinated kindergarten students in Florida for the school year 2023-24 was 88.1%.



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

Click [HERE](#) to access the **Vaccination Guide for Employers** developed by our sister coalition, the Northeast Business Group on Health, with support from the Florida Alliance.

Please contact Hannah McChesney at hannah@flhealthvalue.org if you have any questions.

Becker's Payer Issues Article – 7 Payers Recently Fined by States

Several major health insurers were recently fined by state regulators for a range of violations, including improper cost-sharing, delayed reimbursements, and mental health parity issues.

UnitedHealthcare was fined \$1 million in Rhode Island for applying cost-sharing to COVID-19 services and \$3.4 million in North Carolina after a lengthy investigation into balance billing practices. Blue Cross Blue Shield of Rhode Island and Aetna each received smaller fines for similar COVID-related cost-sharing violations. In California, Blue Shield was fined \$300,000 for claims processing errors involving a minor, while Anthem Blue Cross faced over \$1.3 million in fines for misleading communication and delayed service implementation. **Cigna was also fined over \$500,000 in Virginia for violations related to mental health parity and claims handling.** These enforcement actions highlight growing state-level oversight of insurer practices affecting patient access and plan compliance.

While the fines noted above were directed to the health insurers, the plan sponsors are responsible for mental health parity compliance.

To help plan sponsors document compliance, the Florida Alliance developed with the National Alliance the *Employer/Healthcare Purchaser Mental Health Parity Toolkit*. The toolkit was intentionally designed to exclude reliance on any new provisions introduced in the 2024 Final Rule, in consideration of ongoing litigation (e.g., the ERISA Research Industry Committee lawsuit) and the possibility of a stay or rollback. As such, the Toolkit remains a valid and reliable resource for compliance and enforcement purposes.

To view the recording, slides, and updated resources, click [HERE](#).

To view the *Becker's Payer Issues* article, click [HERE](#).

Please contact Hannah McChesney at hannah@flhealthvalue.org if you have any questions.



Please Note: We will not be sending out our Weekly Bulletin on Thursday, July 3rd in observance of the Fourth of July holiday. Regular distribution will resume on Thursday, July 10th.

Wishing you a safe and joyful holiday weekend!



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