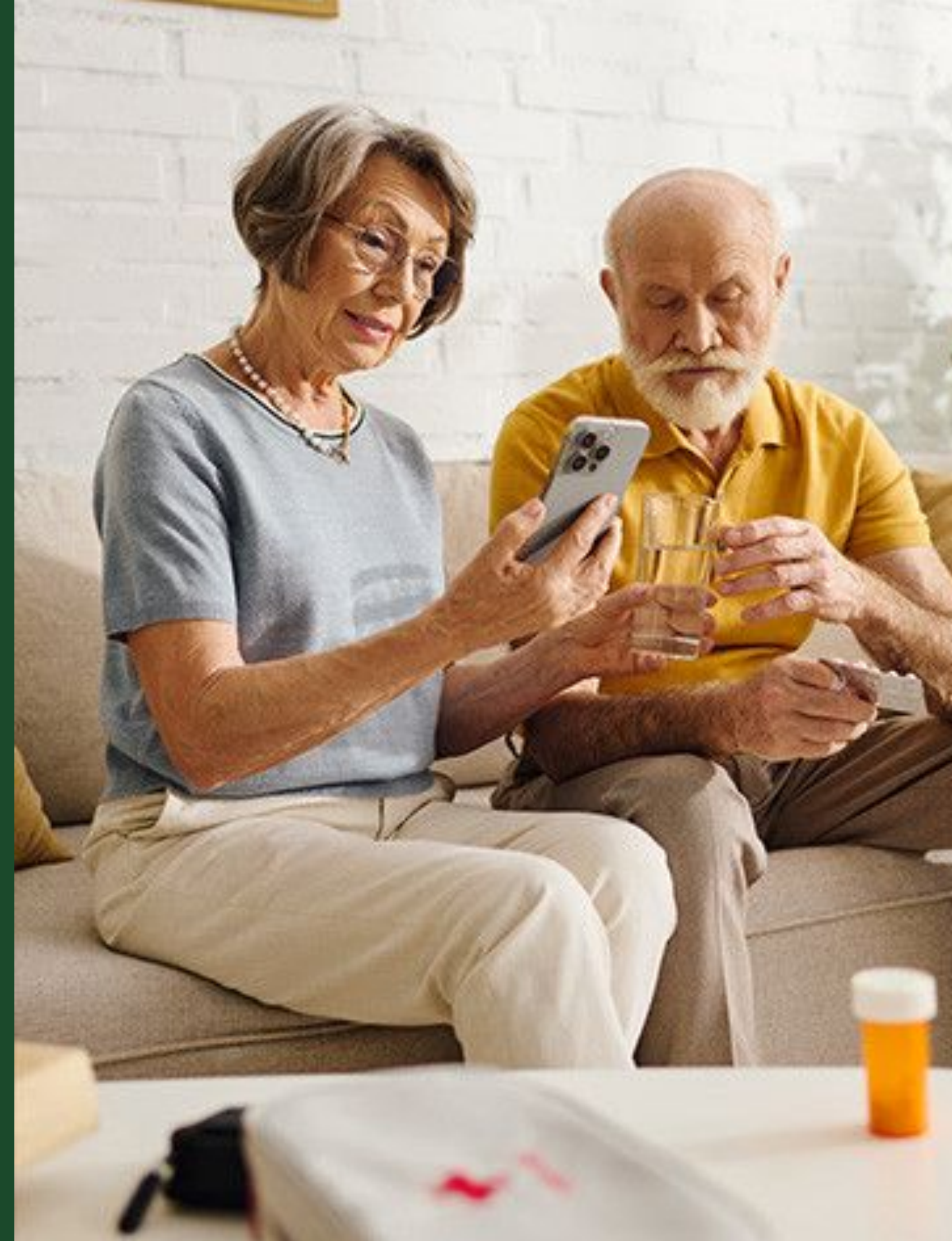


A Florida D-SNP Strategy for 2027 and Beyond

How a daily, trusted relationship improves Stars and lowers total cost of care for the hardest-to-reach members.



Author

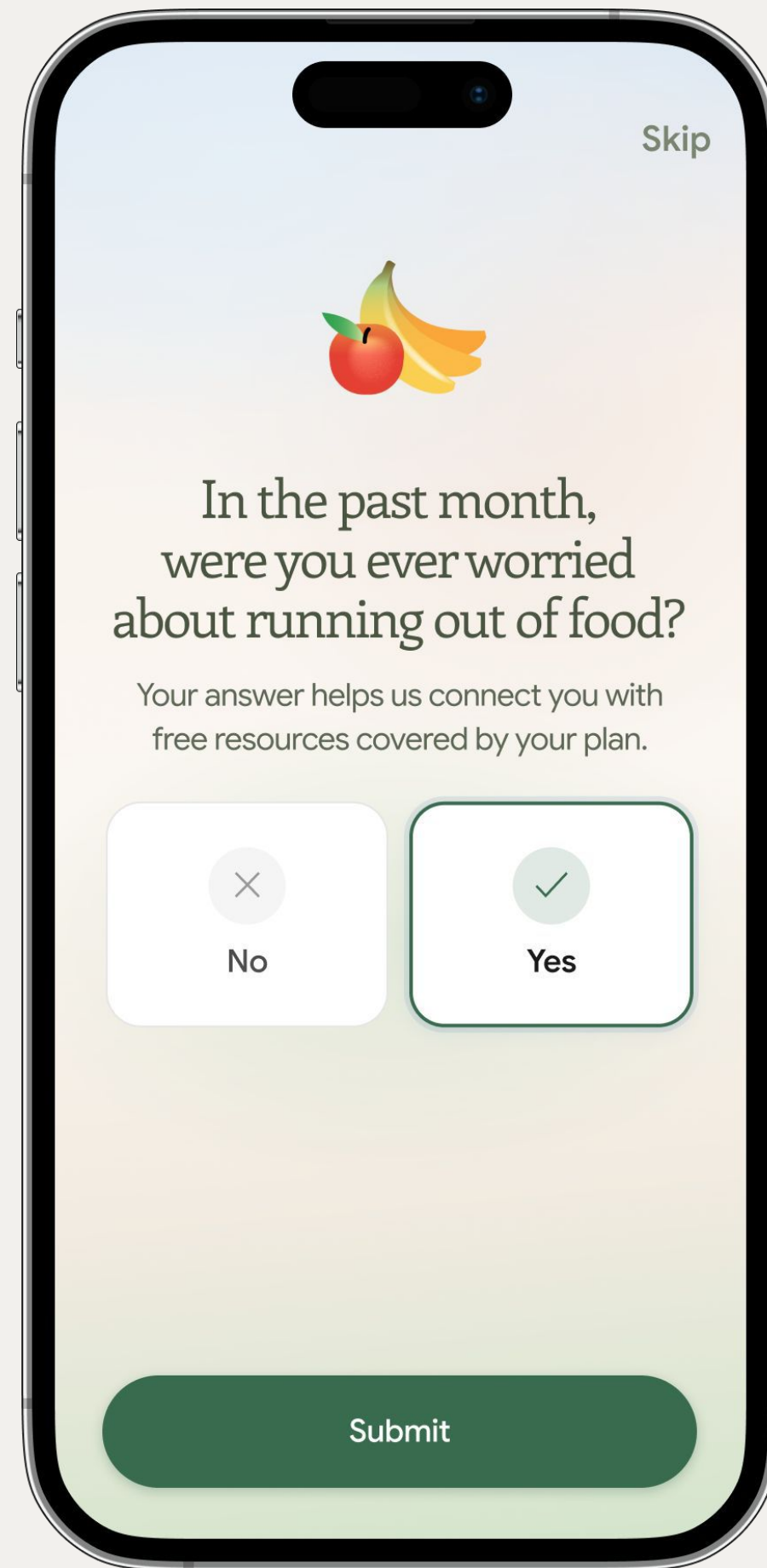


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VP Quality and former health plan quality executive



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Skip

🍎🍌🍊

In the past month,
were you ever worried
about running out of food?

Your answer helps us connect you with
free resources covered by your plan.

No Yes

Submit

WHY THIS MATTERS

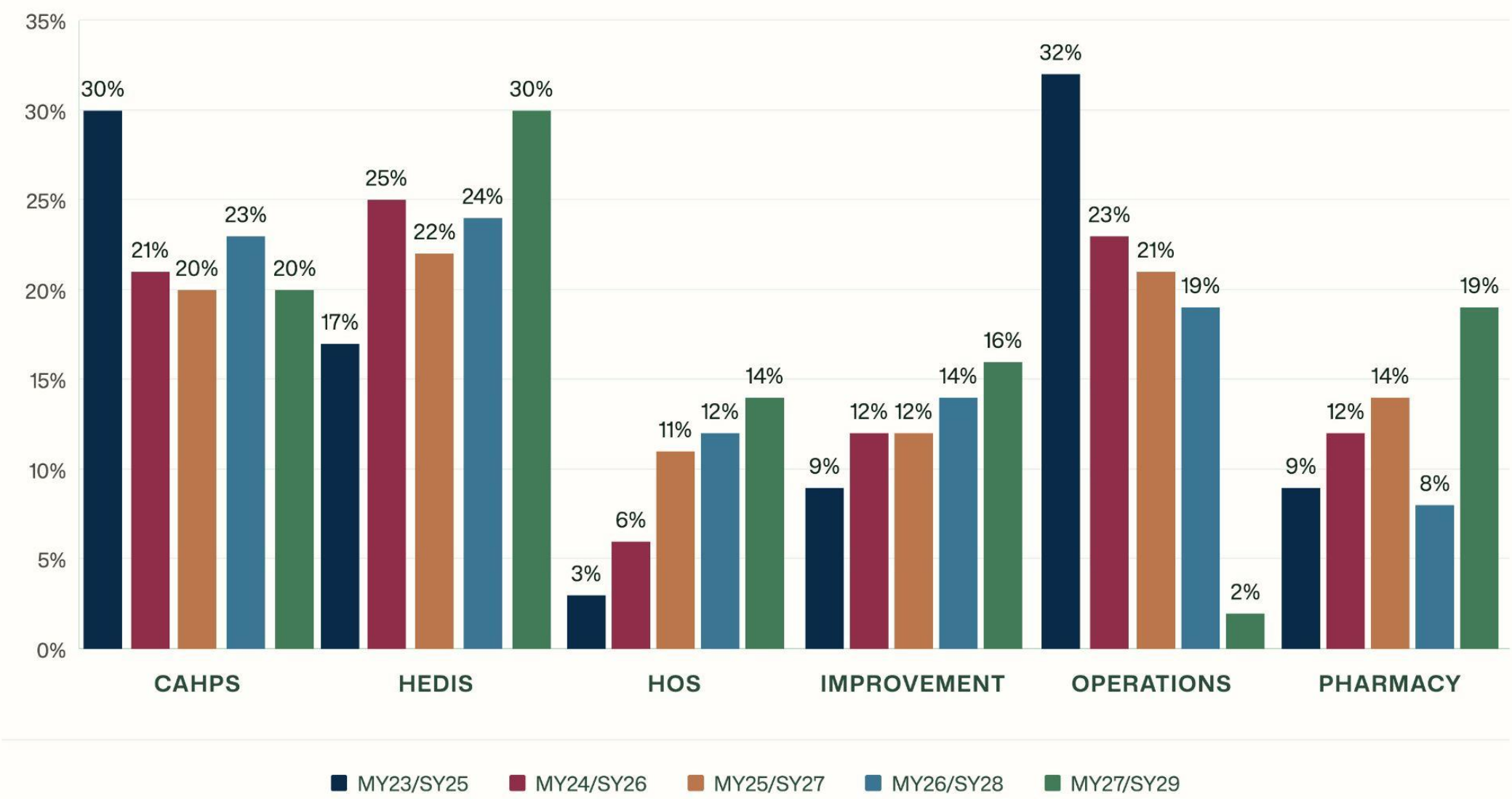
Florida serves one of the nation's largest dual-eligible populations.

Florida's dual population **costs 28%** more than the national average.

Solutions that engage members daily to build and maintain daily healthy behaviors are increasingly being implemented by large national payers to improve clinical, cost, and quality outcomes.

[Source](#)

Star Ratings just became almost entirely a question of member behavior.



NOW CARRYING THE WEIGHT

Part C / HEDIS (inc. 3x weighted CBP & GSD)

CAHPS

HOS

Part D medication adherence

Every one of these is decided by what a member does at home day to day.

The old playbook won't work anymore.

Med adherence vendor

Refill reminder calls, quarterly campaigns

Gap-closure vendor

Mailers and in-home visits at year end

SDOH / benefits vendor

Screening survey, referral, silence

CAHPS improvement vendor

Pre-survey outreach in the spring

No shared relationship.

Every vendor starts at zero trust, every time.

No shared, regular touchpoint.

Contact is episodic, so behavior never becomes habit.

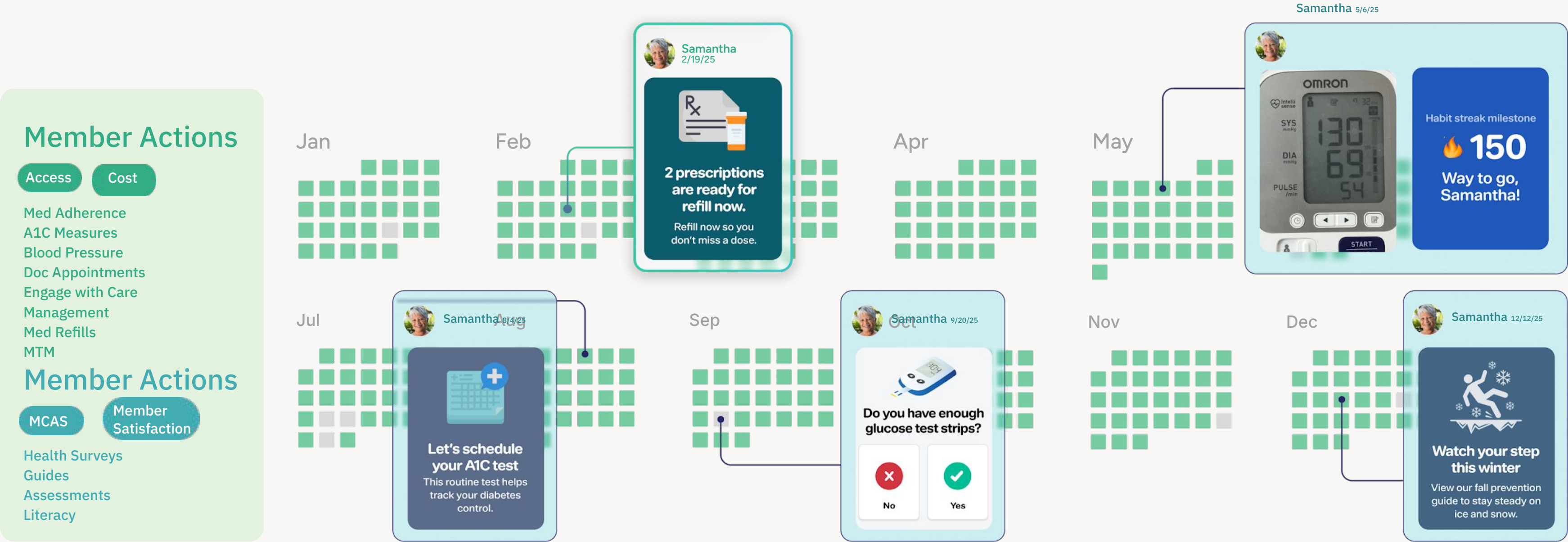
No shared signal.

You need to understand the member holistically across their care and SDoH needs.

You cannot buy a relationship through quarterly outreach.

To move quality measures now, plans need more than fragmented outreach.

It takes 1,100+ average touchpoints to consistently influence member behavior.



The plans that win Stars and control cost will be the ones that earn a daily, trusted relationship with their hardest-to-reach members.

Daily, not episodic

Habits form on a daily cadence.
Quarterly campaigns cannot build one.

Trusted, not transactional

A member who answers you every day will also tell you what's wrong.

One layer, not ten tools

The same daily channel can be utilized to close multiple care gaps and impact all Stars domains.

WHAT "DAILY" LOOKS LIKE TO A MEMBER

A daily relationship surfaces members' needs and improves outcomes



Most engagement programs are sending ad hoc texts or calls and are reacting to signals rather than proactively keeping members healthy with daily actions like attending care appointments, testing A1C, or checking blood pressure.

What the daily Wellth relationship produced for a large national payer

91%

Average daily engagement

Across the enrolled D-SNP cohort

2.2 Avg. # of Gaps Closed

Care gaps closed

Members in Wellth improved their adherence compared to non-members

16%

PDC improvement

Average YoY improvement in PDC in previously non-adherent members.

\$138

PMPM cost avoided

Driven by admissions and ED avoidance



"My A1C has been normal since I've been with Wellth. Blood pressure's under control and my glucose is under control. **I'm not afraid to see my doctor anymore.**"



"I lost a lot of weight. My A1C, my cholesterol, everything's looking good. The best thing with this program is it **helps you communicate between you and your doctor.**"



"They have helped me prevent renal dialysis. My A1C is down to 5.6; it used to be 12. **In many ways it has saved my life.**"

Four decisions, not four more pilots.

01 Re-baseline your Stars model on behavior measures only

Recut last year without the retired measures. That gap is your exposure.

02 Count how many vendors touch one dual member

Then count how many the member could name. That difference is your CAHPS problem.

03 Prioritize a daily engagement layer, not another ad hoc campaign

One standard: what share of hard-to-reach members respond every day?

04 Measure quality and total cost on the same cohort

If Stars and finance read different populations, neither number holds up.

Learn more at
wellthapp.com

