

Wellpoint Florida Essential Network update FAQ

1. Why is Simply Healthcare Plans, Inc., doing business as Wellpoint, building a network for individual businesses?

Individual and family health insurance coverage for more than 3.2 million Floridians was purchased through the Health Insurance Marketplace® (“exchange”) in 2023. Floridians enrolling in marketplace plans through [Healthcare.gov](#) increased by 28.4% in 2022 and 18.4% in 2023 (increases of ~603,000 and ~502,000 covered lives, respectively), or 52.1% over the same two-year period (~1.1 million additional covered lives).

Meanwhile, Medicaid redeterminations were paused nationwide during the COVID-19 public health emergency (PHE) from March 2020 through March 2023, causing Medicaid enrollment to grow significantly. During that time, Florida Medicaid enrollment grew 54%, adding more than two million covered lives. Florida Department of Children and Families (DCF) resumed the Medicaid redetermination process on April 1, 2023. Redeterminations for all Medicaid members are required to be initiated by the end of March 2024. During this process, it is estimated that 1.7 million Floridians will no longer be eligible for Medicaid; many of these people will choose to purchase Individual on-exchange plans. Wellpoint wants to offer our members a low-cost option to maintain their coverage and access to their providers.

Wellpoint is a brand trusted by our local communities, committed to whole person healthcare. Wellpoint is committed to supporting access and affordability to healthcare for all Floridians and wants to support those who are no longer eligible for Medicaid by offering similar products with similar provider networks for a more seamless experience.

2. What products will we offer?

Products offered will include On and Off Exchange plans in bronze, silver, and gold metal levels, and a Catastrophic plan.

3. Who will the new products be sold to?

The products will be sold on and off the exchange to Floridians enrolling in individual plans. The products will be especially attractive to consumers with income at or greater than 100% of the Federal Poverty Level (FPL), as they are eligible for Advanced payment tax credits (“subsidies”) to cover the cost of their premiums completely or partially (subsidies limit premiums to a maximum of 8.5% of income). People who earn less than 250% of the FPL also qualify for reduced cost share (in other words, lower copays, deductibles, and a percentage of the costs). This population is considered highly cost-sensitive.

4. Where will the network, Wellpoint Florida Essential, be available?

Wellpoint Florida Essential is available to consumers living in the following counties: Brevard, Broward, Collier, DeSoto, Hardee, Hendry, Hillsborough, Indian River, Lake, Lee, Manatee, Marion, Martin, Miami-Dade, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie, and Volusia.

Effective January 1, 2027, Wellpoint Florida Essential will be available to consumers living in the following counties: Alachua, Bay, Bradford, Charlotte, Citrus, Clay, Columbia, Duval, Escambia, Gadsden, Glades, Hernando, Leon, Okaloosa, Saint Johns, Santa Rosa, Sumter, and Walton.

5. Can a provider sign up for Wellpoint Florida Essential without participating in Medicaid and Medicare? Yes, providers may participate in the Wellpoint Florida Essential network without participating in our Medicaid and Medicare network. For providers not participating in other affiliated networks, credentialing and provider roster submission via Availity Essentials will be required. Log in to Availity Essentials at <https://Availity.com>.

6. Is it required for providers participating in our Medicaid and Medicare network to participate in the Wellpoint Florida Essential network?

No, participating in Wellpoint Florida Essential is optional. Providers can continue to participate in the Medicaid and Medicare networks without participating in the individual network.

7. What is the term for the Wellpoint Florida Essential contract?

Generally, the Provider Agreement will automatically renew unless otherwise concluded as provided in the Provider Agreement.

8. Is a separate credentialing process required for the new Individual network?

- a. If the provider is already fully credentialed under Wellpoint for Medicaid and Medicare, separate credentialing is not required.
- b. If the provider is not fully credentialed in other affiliated networks, credentialing and provider roster submission via Availity Essentials will be required. Log in to Availity Essentials at <https://Availity.com>. Wellpoint CAQH (Council for Affordable Quality Healthcare) ProView™ to collect and verify a healthcare professional's qualifications, including certification, training, licensure, and registration to practice. If you have a CAQH user ID, please ensure Wellpoint has authorization to view your CAQH credentialing information. If you need help with this, you can contact [CAQH online](#) or call CAQH at **888-599-1771**.

9. How can a provider communicate that they are not interested in participating in the new Wellpoint Florida Essential network?

Providers can opt out of participation in Wellpoint Florida Essential by informing us in writing within 30 days of receiving our Provider Agreement Amendment letter. To opt out, providers can email their notification to their provider network manager.

10. Will existing Wellpoint contracts for Medicaid and Medicare be terminated if the provider chooses not to participate in the Wellpoint Florida Essential network?

No, the provider's pre-existing Medicaid and Medicare contracts will not be concluded based on Wellpoint Florida Essential participation.

11. What if a provider misses the opt-out window but does not want to participate in the Wellpoint Florida Essential network?

Prior to January 1, 2027, if a provider misses the opt-out window and does not want to participate in the Wellpoint Florida Essential network, they can opt-out after providing at least ninety days written notice to Wellpoint. After January 1, 2027, if a provider misses the opt-out window and does not want to participate in the Wellpoint Florida Essential network, they can opt-out after providing a 60-day written notice to Wellpoint. Please note, providers are still obligated to provide care for the Wellpoint Florida Essential network during the 60-day notice period.

12. If a provider concludes their Medicaid and Medicare contract, will it also conclude their Wellpoint Florida Essential network contract?

No, participation in the Medicaid and Medicare network(s) is not mandatory to participate in the Wellpoint Florida Essential network. However, if your Medicaid and Medicare contract is concluded, a new agreement for the Wellpoint Florida Essential contract alone will be needed.