Organization: Florida Health Network

Organization Description:

Florida Health Network (FHN) is an associated organization of Health Foundation of South Florida (HFSF). FHN represents the 11 Planning and Service Areas in the State of Florida and partners with the 11 Aging and Disability Resource Centers and their provider network. In collaboration with numerous partners, FHN delivers a diverse menu of evidence-based programs proven to improve health outcomes and to decrease health care cost. FHN has a total of eleven Health and Wellness Hubs with a grand total of 54 satellite hubs offering a menu of evidence-based programs and building sustainable partnerships in their communities.

History:

FHN menu of services includes three categories of programs: 1) Stanford self-management education programs in English, Spanish and Haitian Creole; 2) Falls prevention and balance/strength training including: Matter of Balance: A Lay Leader Model (English, Spanish); Tai Chi for Arthritis and Falls Prevention; EnhanceFitness and Walk with Ease (English, Spanish); and 3) Health coaching (one-on-one) self-management support including: EnhanceWellness and PEARLS HFSF began supporting a wide range of evidence-based programs in 2008. Its focus and partners were initially in South Florida and in 2014 became Florida Health Networks with statewide partnerships.

The decision was made based on the following factors:

• Epidemiological profile of older adults.

• Identified priority areas in epidemiological review: self-management; falls prevention and physical activation; and depression management.

• Gap analysis in the geographical area showed desert of evidence-based health and prevention programs in priority areas

• Explored evidence-based programs that would have the greatest impact in the health and wellbeing of older adults in the community

• Decided on a menu of evidence-based programs that were available, had robust replication manuals, trainings and support to take them to scale in the community.

Partners and Funders

The partnership with a network of community-based programs started in 2008 with Health Foundation’s nationally recognized Healthy Aging strategic initiative and the Foundation’s investment of $7.5 milli
from the Foundation’s Endowment. Since 2014 two ACL grants were awarded to build the statewide
capacity to deliver evidence-based CDSME and falls prevention programs. Presently FHN holds a
contract with a Medicare Advantage Group and have a second one under negotiation. FHN partners with
Aging and Disability provider networks and their network of community-based organizations.

**Successes:**

Health Foundation contracted with an external evaluation team to track the successes of HARC. The local
evaluation team used the Re-Aim framework and following are highlights from their six-year report: The
total number of workshop attendees from all programs over all six years was 40,365. Since individuals
could take and participate in multiple evidence-based programs yearly, a total participant (unduplicated)
count was 29,817. On average, 30% of participants participated in two or more programs yearly. HARC
programs have been offered in 420 unduplicated sites throughout Broward, Miami-Dade, and Monroe
Counties. When examining the number of sites, LHP/TCS and MOB/ADE were offered in the most sites
throughout South Florida with 266 and 258 sites. Additionally, the most common site used was a public
meeting space such as a community center, park, or library. Across all programs, over the seven-year
period of program implementation, participants reported an increase from pre-test to post-test healthy
behaviors and skills. Participants in the self-management programs, LHP/TCS, DSMP-E/DSMP-S,
reported significant increases in being able to use self-management techniques. In EF, there were
increases in participants’ strength and functional mobility as measured with chair stands, arm curls with
weights, and time to complete an eight-foot circuit. MOB/ADE programs showed improvements in
participants’ confidence to avoid fall-related injuries and exercise at least three times a week. For HI,
participants who received all components of the intervention showed decreased depressive symptoms.

**Lessons learned:**

In assessing ongoing barriers and challenges, FHN has developed the following key learnings:

- Health plans are very complex organizations with complex decision making, so when they see a
  proposal to deal with a chronic disease, they tend to fall back on their poor experience with disease
  management and, as a complex organization, it is hard to get a fair hearing. Medicare Advantage
  Plans (MAPs) understand they need to look for new models of service delivery in order to meet
  the CMS goals. This does not mean that MAPs are ready to fully sign on to this new process, but it
does mean that external factors are forcing them to begin looking for solutions.
- Properly organized and managed, community-based services have the potential to achieve what
  traditional medical providers have not been willing to achieve. Working as a network has enabled
  Florida to brand the work of ADRCs as Wellness Providers. Aging and Disability Resource
  Centers around the State have different histories adopting and implementing evidence-based
  programs. Working as a network has enabled us to move as a learning collaborative and given
each partner the opportunity to learn from each other and build their capacity.
- Aging and Disability Resource Centers have understood the urgent need of branding the work of
  ADRCs as Wellness Providers.

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