Healthy Behaviors Programs

2025–2026 Effectiveness Report

Aetna Better Health of Florida

Measurement period: July 1, 2025–June 30, 2026

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Introduction

This report summarizes the structure, participation, outcomes, and improvement priorities of Aetna Better Health of Florida's Healthy Behaviors programs for the July 1, 2025–June 30, 2026, measurement period. It is designed to provide Medicaid members, providers, community partners, and state stakeholders with a clear overview of the support available through Tobacco Cessation, Weight Management, Substance Use, and Maternity Matters.

The report presents program eligibility and services, approved rewards, annual participation and completion results, barriers, improvement actions, and methodology notes. Detailed program-design information for Substance Use and Maternity Matters is included in the appendices.

About the Healthy Behaviors Programs

Aetna Better Health of Florida offers Healthy Behaviors programs to help eligible Medicaid members make achievable changes that support their health and well-being. Through education, coaching, care coordination, referrals, and approved incentives, the programs address tobacco use, weight management, substance use, and healthy pregnancy. Participation is voluntary, and members may decline services at any time.

At a Glance

Program	Eligible members or activity	Enrolled or participating	2025–2026 result
Tobacco Cessation	5,546	15	0.270% participation; 33% completion
Weight Management	19,668	25	0.127% participation; 48% completion
Substance Use	7,521	2	0.026% participation; 0% completion
Maternity Matters	12,567 identified members	5,039 member-quarters	40.1% activity ratio; quarterly completion ranged from 44.8% to 52.9%

Note: Maternity Matters enrollment is reported as member-quarters because members may remain enrolled across multiple quarters. Its activity ratio is shown separately and should not be combined with unique-member participation rates for the other programs.

Key findings. Tobacco Cessation enrollment increased from 12 to 15 participants, while Substance Use enrollment increased from 1 to 2. Weight Management enrollment decreased from 35 to 25, but its completion rate improved from 40% to 48%. Maternity Matters showed sustained quarterly enrollment growth, increasing from 1,073 member enrollments in Q1 to 1,440 in Q4.

Programs, Services, and Incentives

Program	Who may qualify	Support available	Maximum incentive value
Tobacco Cessation	Eligible members age 12 and older who use tobacco or nicotine and want to reduce or quit	Community Health Worker coaching, education, care coordination, community referrals, and nicotine-replacement support for eligible adults	Up to $40 in gift cards
Weight Management	Eligible members age 12 and older who are classified as overweight or obese	Coaching, individualized goals, education, provider coordination, and nutrition or community referrals	Fitness tracker valued at $20 and a $20 gift card
Substance Use	Eligible members age 12 and older with a qualifying diagnosis	Care management, treatment and recovery referrals, peer and community support, and coordination with providers	Up to $80 in gift cards
Maternity Matters	Eligible pregnant members generally age 13–55	Prenatal and postpartum care management, visit reminders, education, and coordination	Approved gift cards tied to prenatal and postpartum visits

2025–2026 Program Results

Tobacco Cessation

Fifteen of 5,546 identified eligible members enrolled, producing a 0.270% participation rate. Five enrolled members completed the program and received an incentive for a 33% completion rate. Enrollment increased 25% compared with the prior year, while the completion rate declined from 50% to 33%.

Weight Management

Twenty-five of 19,668 identified eligible members enrolled, producing a 0.127% participation rate. Twelve enrolled members completed the program and received an incentive, for a 48% completion rate. Enrollment decreased 29% compared with the prior year, while the completion rate improved from 40% to 48%.

Substance Use

Two of 7,521 identified eligible members enrolled, producing a 0.026% participation rate. No enrolled members completed the program during the measurement period. Enrollment increased by one participant in the prior year, but greater outreach and sustained engagement remain priorities.

Maternity Matters

Quarterly enrollment increased throughout 2026, from 1,073 in Q1 to 1,440 in Q4. Quarterly completions ranged from 510 to 666, with quarterly completion rates between 44.8% and 52.9%. Across the four quarters, the program recorded 5,039 member-quarters, 2,050 newly enrolled member activities, and 2,462 completions.

Quarter	Total enrolled	Newly enrolled	Completed	Completion rate
Q1 2026	1,073	456	510	47.5%
Q2 2026	1,211	460	641	52.9%
Q3 2026	1,315	539	666	50.6%
Q4 2026	1,440	595	645	44.8%

Barriers and Improvement Actions

Priority	Planned action	Owner	Time frame	Monitoring measure
Member contact information	Use current contact resources and alternate outreach channels to improve successful contact.	Care Management and Community Health Workers	Ongoing; reviewed quarterly	Successful contact and enrollment rates
Provider attestation	Increase provider education and targeted follow-up to support timely verbal or written approval when required.	Care Management and Provider Relations	Quarterly	Attestations obtained and average turnaround time
Substance Use engagement	Use motivational interviewing, peer support, and recovery-oriented outreach tailored to member readiness.	Behavioral Health Care Management	Ongoing	Enrollment, sustained engagement, and completion
Program completion	Strengthen milestone reminders, coaching, and timely incentive processing.	Program leadership and care teams	Monthly monitoring	Completion rate and incentive processing timeliness
Staff capability	Maintain Community Health Worker certification and	Care Management	Annual	Training completion and program

	tobacco cessation training.	leadership		outcomes

How Members and Providers Can Participate

- Members may ask their provider, Member Services representative, or care manager about available Healthy Behaviors programs.
- Providers and community organizations may refer potentially eligible members.
- Care teams explain program requirements, available supports, incentives, and the member's right to decline participation.
- When provider approval is required, the care team coordinates the verbal or written attestation process.

Methodology and Data Notes

Participation rates for Tobacco Cessation, Weight Management, and Substance Use are calculated as the number of identified eligible members who consented to participate divided by the number identified through claims or encounter data. Completion rates are calculated as members who completed program requirements and received an incentive divided by enrolled members. Members enrolling late in the measurement period may not have had enough time to complete a program that can extend beyond six months.

Maternity Matters is reported differently because quarterly enrollment may include the same member in more than one quarter. Accordingly, figures are labeled as member-quarters and are not combined with unique-member totals for the other programs. All figures should complete final quality assurance and state approval before website publication.

Next Steps

Aetna Better Health of Florida will continue to review participation, completion, member experience, and operational barriers. The goal for the 2026–2027 reporting year is to improve enrollment and completion through enhanced outreach, provider engagement, staff training, timely incentives, and routine performance monitoring.

Part I. Program Overview

Program: Substance Use Healthy Behaviors Program

The program supports eligible members age 12 and older through coordinated care management, validated screening, treatment and recovery referrals, coaching, provider collaboration, and community supports. Participation is voluntary and tailored to each member's assessed needs, readiness for change, and individualized care plan.

Part II. Interventions and Rewards

Intervention(s)	Age	Criteria	Partnering agencies	Reward value	Limitation
Care Management—Supportive Care Benefits education; community-resource referrals; therapist and agency information. **Care Management—Intensive Care Appointment and transportation coordination; individualized education; condition self-management support; nutrition and physical-activity education when applicable; testing and complication education; 24-hour nurse-line information; educational materials and web resources; and referrals to recovery supports and appropriate levels of treatment based on member needs and readiness for change.**	Members age 12 and older	Enroll in Care Management and maintain an active care plan addressing substance use. Complete four telephone or in-person coaching sessions during the first three months. Remain engaged for six months and complete four additional coaching sessions for the second reward.	N/A	$20 gift card after the first three-month component. $20 gift card after six months of continued engagement. $20 gift card for an initial goal-setting visit and $20 gift card for qualifying subsequent visits, when applicable. **Maximum potential value: $80.**	Participants are limited to one gift card every three months and must meet the applicable milestone requirements.

Part III. Evidence Base

Evidence supports coordinated, person-centered substance uses services that combine validated screening, clinically appropriate

treatment, recovery support, and ongoing care management.

Evidence area	How it supports the program
Recovery-oriented care	Recovery is supported by attention to health, stable living conditions, purpose, and community. Care management helps members connect with clinical, peer, family, faith-based, and community support based on individual needs and preferences.
Medication treatment	FDA-approved medications, used with counseling and other behavioral health services when clinically appropriate, are evidence-based options for opioid and alcohol use disorders and may support treatment retention and sustained recovery.
Validated screening	The Alcohol Use Disorders Identification Test supports early identification of risky or high-risk alcohol use. The Drug Abuse Screening Test–10 provides a brief screen for possible drug-related concerns. Screening results inform further assessment, referral, and care planning; they do not independently establish a diagnosis.
Peer recovery support	Peer-led mutual-help groups may complement professional treatment by offering accessible, voluntary social support and opportunities for ongoing recovery engagement.
Care coordination	A coordinated continuum of assessment, treatment, transitions, recovery support, and community services helps address the medical, behavioral, and social factors that affect recovery.

References

1. **SAMHSA. Recovery and Recovery Support. https://www.samhsa.gov/find-help/recovery**
2. **SAMHSA. Medications for Substance Use Disorders. https://www.samhsa.gov/substance-use/treatment/options**
3. **National Institute on Alcohol Abuse and Alcoholism. Alcohol Use Disorders Identification Test. https://pubs.niaaa.nih.gov/publications/audit.htm**
4. **National Institute on Drug Abuse. Drug Abuse Screening Test–10. https://cde.drugabuse.gov/instrument/e9053390-ee9c-9140-e040-bb89ad433d69**
5. **Alcoholics Anonymous. https://www.aa.org/**
6. **Narcotics Anonymous World Services. Public Relations Handbook. https://www.na.org/admin/include/spaw2/uploads/pdf/PR/PR_Handbook_2016.pdf**

Part IV. Definitions

Term	Definition
Healthy Behaviors	A program offered by the managed care plan in accordance with Section 409.973(3), Florida Statutes, that encourages and rewards behaviors designed to improve an enrollee's overall health.
Incentive	An item offered to encourage or motivate an enrollee to take eligible action. Incentives must be connected to an effective engagement strategy and an evidence-based program.
Reward	An item provided after an enrollee completes an eligible milestone or attains a goal linked to positive behavior change.
Value	The monetary value of the incentive or reward.
Criteria	The conditions an enrollee must meet to receive an incentive or reward.
Limitations	Restrictions that may prevent an enrollee from qualifying for or receiving an incentive or reward.

Part I. Program Overview

Program element	Description
Plan name	Aetna Better Health of Florida
Program name	Maternity Matters, powered by ProgenyHealth
Program purpose	The program supports healthier maternal and infant outcomes through early pregnancy identification, timely prenatal intervention, individualized maternity care management, and postpartum support for up to 12 months after delivery.
Eligible population	Eligible pregnant members generally age 13–55 across all assessed risk levels.
Partnering agency	ProgenyHealth supports program administration, maternity case management, member education, and digital engagement.
Core services	Whole-person assessment and care planning; prenatal and postpartum education; behavioral health screening; appointment, transportation, and community-resource coordination; support for food, safety, language, and other barriers to care; provider collaboration; transition support; and access to maternity mobile-app resources.
Engagement approach	Members may be engaged through telephone, text, digital outreach, welcome materials, newsletters, educational mailings, the member website, and the maternity mobile application.

Program goals	Increase timely prenatal, postpartum, and dental care; reduce preventable emergency department use and hospitalizations; identify and address postpartum depression and other behavioral health needs; reduce preterm births, primary cesarean deliveries, maternal complications, newborn costs, and neonatal intensive care length of stay; and improve birth weight, gestational age, breastfeeding, safe transitions, and member experience.
Care planning principles	Care plans are individualized, member-centered, culturally responsive, measurable, and coordinated with practitioners, family or legal guardians when appropriate, the health plan, and community resources.
Incentive purpose	Incentives encourage program engagement and completion of qualifying prenatal, postpartum, and dental visits. Incentives do not direct members to a specific provider.
Incentive limitations	Rewards may not be used for gambling, alcohol, tobacco, or drugs other than eligible over-the-counter items. Rewards are nontransferable between managed care plans or programs and may require 90–180 days or longer for processing. Access to earned rewards may end if a member voluntarily disenrolls or loses Medicaid eligibility for more than 180 days.

Part II. Interventions and Rewards

Intervention(s)	Age	Criteria	Partnering agencies	Reward value	Limitation
Maternity Initial Prenatal Visit Incentive	13–55	Enroll in the care management program and complete the initial prenatal visit.	ProgenyHealth supports program administration and maternity care management.	$20 gift card	The qualifying visit must occur during the first trimester.
Maternity Subsequent Prenatal Visit Incentive	13–55	Remain enrolled in care management and complete qualifying prenatal visits after the initial visit.	ProgenyHealth supports program administration and maternity care management.	$10 gift card per qualifying visit	Limited to 10 subsequent prenatal visits per pregnancy.
Maternity Postpartum Visit Incentive	13–55	Remain enrolled in care management and complete a qualifying postpartum visit.	ProgenyHealth supports program administration and maternity care management.	$20 gift card per qualifying visit	Limited to two postpartum visits per pregnancy completed 7–84 days after delivery.
Maternity Dental Incentive	13–55	Remain enrolled in care management and complete a	ProgenyHealth supports program administration and	$20 gift card per qualifying	Limited to two dental visits per pregnancy.

		qualifying dental visit during pregnancy.	maternity care management.	visit	

Part III. Evidence Base

The Maternity Matters program is aligned with established clinical guidance and quality frameworks supporting timely prenatal care, postpartum follow-up, oral health services, early risk identification, and member engagement.

Evidence source	Program relevance
Guidelines for Perinatal Care, 8th Edition	Provides clinical guidance for coordinated perinatal care, patient safety, quality improvement, maternal transport, neonatal levels of care, immunization, and nutrition.
Oral Health Care During Pregnancy and Through the Lifespan	Supports access to preventive and treatment-focused oral health services during pregnancy and the postpartum period.
Optimizing Postpartum Care	Supports an ongoing postpartum process tailored to the member's needs rather than relying on a single encounter.
NCQA Prenatal and Postpartum Care measure	Provides a standardized quality framework for assessing timely prenatal and postpartum care.
Healthy People 2030 Pregnancy and Childbirth Objectives	Supports measurable efforts to reduce pregnancy complications and maternal deaths and to improve health before, during, and after pregnancy.
Financial incentives for prenatal care	Provides research relevant to the use of incentives to encourage prenatal care participation and improve birth-related outcomes.

References

1. **American College of Obstetricians and Gynecologists and American Academy of Pediatrics. Guidelines for Perinatal Care.** https://www.acog.org/store/products/clinical-resources/guidelines-for-perinatal-care
2. **American College of Obstetricians and Gynecologists. Oral Health Care During Pregnancy and Through the Lifespan.** https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2013/08/oral-health-care-during-pregnancy-and-through-the-lifespan
3. **American College of Obstetricians and Gynecologists. Optimizing Postpartum Care.** https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2018/05/optimizing-postpartum-care

4. **National Committee for Quality Assurance. Prenatal and Postpartum Care.** https://www.ncqa.org/hedis/measures/prenatal-and-postpartum-care-ppc/

5. **Healthy People 2030. Pregnancy and Childbirth Objectives.** https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/pregnancy-and-childbirth

6. **Rosenthal, Li, Robertson, and Milstein. Impact of Financial Incentives for Prenatal Care on Birth Outcomes and Spending.** https://www.njhcqi.org/wp-content/uploads/2016/04/Impact-of-Financial-Incentives-for-Prenatal-Care-on-Birth-Outcomes.pdf

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