

HEALTH MANAGEMENT ASSOCIATES

THE
**MICHIGAN
UPDATE**
2024 

DECEMBER

WWW.HEALTHMANAGEMENT.COM



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MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of December 1, 2024, there were **1,763,148 Medicaid beneficiaries, including 555,626 Healthy Michigan Plan (HMP) beneficiaries**, enrolled in the nine Michigan Medicaid Health Plans (HMOs). As the table below shows, this is an overall **decrease of 7,506** since November 1, 2024. The number of HMP beneficiaries enrolled in HMOs **decreased by 1,992** and the number of non-HMP beneficiaries **decreased by 5,514**.

The total number of Medicaid beneficiaries, including Healthy Michigan Plan (HMP) beneficiaries enrolled in the nine Michigan Medicaid Plans in December 2024 is 329,726 less than in December 2023. The count of HMP beneficiaries enrolled in the nine Michigan Medicaid Health Plans (HMOs) in December 2024 is 140,691 less than December 2023.

	Dec 2023	Feb 2024	Apr 2024	June 2024	AUG 2024	Nov 2024	Dec 2024
All Medicaid Beneficiaries Enrolled	2,051,444	1,965,154	1,891,647	1,797,045	1,777,626	1,762,420	1,763,148
• Total HMP Enrollees	696,317	653,735	615,320	569,822	559,841	554,704	555,626
• Total CSHCS/Medicaid Enrollees	27,397	27,220	27,138	26,792	27,294	27,573	27,816
• Total Medicare/Medicaid Enrollees (Duals)	39,551	35,996	34,032	32,022	33,840	30,636	30,555
• Total MICHild Enrollees	41,936	42,029	46,305	48,095	50,674	59,379	60,432

The number of beneficiaries identified as mandatory managed care enrollees but not yet enrolled in a Medicaid HMO has varied dramatically over the last few years, from a low of 41,894 in June 2023 to a high of 149,746 in May 2020. **In December 2024, the number of mandatory but not yet enrolled beneficiaries was 82,288, which is 5,134 more than November 2024.**

As the enrollment reports for December ([pdf](#), [xls](#)) reflect, every county in the state is served by at least one Medicaid HMO. Auto-assignment of beneficiaries into the HMOs is available in every county. In addition to the HMOs with smaller service areas, there is one HMO – McLaren Health Plan – authorized to serve all counties in the Lower Peninsula, and Blue Cross Complete authorized to serve all but two of the Lower Peninsula counties. Beneficiaries in all 15 counties in the Upper Peninsula are auto assigned, through federal “Rural Exception” authority, to the one HMO serving these counties, Upper Peninsula Health Plan. The plan service areas changed effective December 1, 2024, with the initiation of new contracts after the state managed care procurement process was concluded in late Spring.

The plans with the highest total enrollment in December 2024 were Meridian Health Plan of Michigan with about 20 percent of the total (359,691 enrollees), Molina Healthcare of Michigan with about 17





percent (295,158 enrollees), Blue Cross Complete of Michigan with about 16 percent of the total number of enrollees (285,744), and UnitedHealthcare Community Plan with 14 percent (251,765 enrollees).

Healthy Michigan Plan (HMP)

The **total count of HMP enrollees in the Medicaid HMOs decreased in December 2024 by 1,992 from November 2024 to 555,626**. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in December 2024 were Blue Cross Complete with about 19 percent of the total, Meridian Health Plan of Michigan with about 18 percent, and Molina Healthcare of Michigan with about 15 percent of the total number of enrollees.

CSHCS/Medicaid

MDHHS requires children (and a few adults) receiving services from both the Children’s Special Health Care Services (CSHCS) program and the Medicaid program to enroll in Medicaid HMOs. There were **27,816 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in December 2024**, an increase of 1,299 since November 2024. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in December 2024 were Molina Healthcare of Michigan with about 21 percent, Priority Health Choice had about 18 percent of the total number of enrollees, Blue Cross Complete had about 16 percent, and Meridian Health Plan of Michigan had about 15 percent.

MiChild

There were **60,432 MiChild beneficiaries enrolled in the Medicaid HMOs in December 2024**, an increase of 2,764 since November 2024. All Medicaid HMOs have MiChild beneficiaries enrolled, although the numbers vary dramatically across plans. The plans with the highest enrollment in December were Meridian Health Plan of Michigan with about 21 percent of the total, and Molina Healthcare of Michigan and Priority Health each with about 15 percent of the total number of enrollees.

Medicare/Medicaid

Aside from Michigan’s Medicare/Medicaid financial alignment demonstration, MI Health Link, there were an additional **30,555 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in December 2024 in Medicaid HMOs** for their Medicaid benefits. The number of enrolled duals **increased by nine** between November 2024 and December 2024. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. Molina Healthcare of Michigan had about 21 percent of the total number of enrollees, while UnitedHealthCare Community Plan had about 20 percent of the total number enrollees, and Meridian Health Plan of Michigan had about 17 percent.





MI HEALTH LINK

In previous editions of *The Michigan Update* we have written about Michigan’s implementation of an integrated healthcare delivery system demonstration for adults dually eligible for Medicare and Medicaid (duals). The demonstration, called MI Health Link, operates in four regions of the state. The entire Upper Peninsula is one region; eight counties in the southwest corner of the state (Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren) form another region; and Macomb County and Wayne County are two single-county regions. Medicaid and Medicare physical healthcare services (including long-term services and supports) are provided by HMOs that have contracts as Integrated Care Organizations (ICOs) to serve the duals.

The number of MI Health Link enrollees continues to fluctuate, with increases in some months and decreases in others. The Michigan Department of Health and Human Services (MDHHS) reports that **in December 2024, the MI Health Link enrollment total was 31,718** an increase of **170 enrollees** since November 2024.

The tables below illustrate MI Health Link enrollment by month from 2022 to the most current data. Enrollment fluctuations are clear. November 2024 had the lowest enrollment over the past 30 months with 31,383 enrollees, November 2022 saw the highest enrollment with 45,188 enrollees.

Jan. 2022	Feb. 2022	March 2022	April 2022	May 2022	June 2022
39,362	38,905	38,588	40,481	40,453	40,350
July 2022	Aug. 2022	Sept. 2022	Oct. 2022	Nov. 2022	Dec. 2022
40,306	42,622	43,113	44,694	45,188	44,573

Jan. 2023	Feb. 2023	March 2023	April 2023	May 2023	June 23
42,501	42,066	41,319	44,033	44,216	43,399
July 2023	Aug. 2022	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023
42,410	41,434	40,210	38,796	37,645	37,305

Jan. 2024	Feb. 2024	Mar. 2024	Apr. 2024	May 2024	June 2024
37,657	36,491	34,935	36,305	35,239	33,904
July 2024	Aug. 2024	Sept. 2024	Oct. 2024	Nov. 2024	Dec. 2024
33,098	32,553	32,243	31,548	31,383	31,718



There are six ICOs serving one or more of the demonstration regions. The table below provides enrollment information by region for each ICO for **December 2024**.

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		2,747	1,356	3,532	7,635
AmeriHealth Michigan			595	1,882	2,477
HAP CareSource			911	2,681	3,592
Meridian Health Plan of MI		2,492	785	1,934	5,211
Molina Healthcare of MI			1,696	7,175	8,871
Upper Peninsula Health Plan	3,932				3,932
Total	3,932	5,239	5,343	17,204	31,718

The plans with the highest enrollment in December 2024 were Molina Healthcare of Michigan with about 28 percent of the total, Aetna Better Health of Michigan with about 24 percent, and Meridian Health Plan of Michigan with about 16 percent of the total number of enrollees.

During December 2024, about 93 percent of the MI Health Link enrollees were living in a community setting, and the remaining 7 percent of enrollees resided in a facility. About 8 percent of the total enrollees living in a community setting were receiving home and community-based long-term services and supports through the MI Health Link HCBS program waiver; however, a significant number of the other enrollees living in a community setting received in-home services and supports from the ICOs through the Medicaid State Plan personal care benefit called Home Help.

Most MI Health Link enrollees are passively enrolled; they are auto assigned to a health plan based on their eligibility but can opt out of the demonstration at any time. Beneficiaries may also voluntarily enroll in the demonstration; during December 2024, about 28 percent of the demonstration’s participants were voluntarily enrolled.

MDHHS also reports 64,609 duals eligible for participation in the demonstration have chosen to opt out. These individuals receive their Medicaid benefits on a fee-for-service basis but retain the option to voluntarily enroll, or re-enroll, in the demonstration at any time.

More than half of the MI Health Link enrollees are individuals under the age of 65. These younger individuals qualified for Medicare and Medicaid based on a disability.

MDHHS has decided to transition MI Health Link to a Highly Integrated Dual Eligible + Long Term Services and Supports Special Needs Plan (HIDE + LTSS SNP) model effective 1/1/2026. Awards were made in October 2024 to nine health plans to administer the new MI Coordinated Health program, based on the state’s ten prosperity regions for the 2026 launch before expanding statewide in 2027. In December those



awards were withdrawn, and plans were given a second opportunity to bid. Those bids were due on November 21st and a new round of awards is expected.

DUAL ELIGIBLE SPECIAL NEEDS PLANS (D-SNPS)

D-SNP Terminology

As the focus on dual eligible populations and programs continues to increase, terminology has evolved. The use of “CO D-SNP” is increasingly being used in the industry and CMS regulation

- **D-SNPs:** Dual eligible special needs plans. Represents the entire category of dual eligible SNPs in this presentation. Historically has been more narrowly used in reference to CO-D-SNPs
- **CO D-SNP:** Coordination only dual eligible SNP. Plan has at a minimum a D-SNP Medicare contract + State Medicaid Agency Contract outlining coordination requirements
- Other D-SNP types are further described in the presentation and include:
 - **HIDE-SNP:** highly integrated dual eligible SNP
 - **FIDE-SNP:** fully integrated dual eligible SNP

Dual Population Eligibility Categories

There are quite a few different Dual Eligibility categories CMS has created. These can be grouped into two main categories, which are full benefit dual eligibles and partial duals

- **FBDE:** Full benefit dual eligible. Population that qualifies for full state Medicaid benefits as well as Medicare
- **Partial dual:** Population that only qualifies for the Medicare Savings Program (MSP) that only covers certain Medicare costs, such as Part A & B premiums. Partial duals do not qualify for full Medicaid benefits

There are four main partial dual eligibility categories:

- Qualified Medicare Beneficiary (QMB)
- Specified Low Income Medicare Beneficiary (SLMB)
- Qualified Individual (QI)
- Qualified Disabled and Working Individual (QDWI)





Parent Organization	Plan Name	Total Enrollees Nov. 2024	Total Enrollees Dec. 2024
Humana Inc.	<ul style="list-style-type: none"> Humana Choice (PPO) Humana Choice (PPO) Humana Gold Plus (HMO) 	53,271	53,219
UnitedHealth Group, Inc.	<ul style="list-style-type: none"> UHC Dual Complete MI (PPO) UHC Dual Complete MI (HMO-POS) UHC Dual Complete MI (HMO-POS) 	39,729	39,822
CVS Health Corporation	Aetna Medicare Assure Premier (HMO)	25,473	25,351
Centene Corporation	<ul style="list-style-type: none"> Wellcare Complete Dual Access (HMO) Wellcare Dual Access Open (PPO) Wellcare Dual Access (HMO) Wellcare All Dual Assure (HMO) 	12,619	12,501
Molina Healthcare, Inc.	<ul style="list-style-type: none"> Molina Medicare Complete Care (HMO) Molina Medicare Complete Care Select (HMO) 	11,197	11,181
Corewell Health (Priority Health Choice, Inc)	<ul style="list-style-type: none"> Priority Medicare D-SNP (HMO) Priority Medicare D-SNP Advantage (HMO) 	8,957	8,789
Henry Ford Health System (Health Alliance Plan)	HAP Medicare Complete Duals (HMO)	791	802
McLaren Health Care Corporation	McLaren Medicare Inspire Duals (HMO)	523	521
Commonwealth Care Alliance	CCA Medicare Maximum (HMO)	436	432
Zing Health Consolidator, Inc.	<ul style="list-style-type: none"> Zing Dual Complete Select MI (HMO) Zing Dual Complete Open Choice MI (PPO) 	397	396
	Total	153,393	153,014

Chronic Condition Special Needs Plan (C-SNP)

There are seven C-SNP plans in the Michigan market as of December 2024. HumanaChoice – Diabetes and Heart PPO has the highest number of enrollees (10,975) in December 2024.

Parent Organization	Plan Name	Specialty Diseases	Total Enrollees Nov 2024	Total Enrollees Dec 2024
Humana Inc.	HumanaChoice – Diabetes and Heart (PPO)	<ul style="list-style-type: none"> • Cardiovascular disorders • Chronic heart failure • Diabetes 	10,683	10,975
Zing Health Consolidator, Inc.	<ul style="list-style-type: none"> • Zing Select Diabetes & Heart MI (HMO) • Zing Open Choice Diabetes & Heart MI (PPO) • Zing ESRD Select MI (HMO) 	<ul style="list-style-type: none"> • Cardiovascular disorders • Chronic heart failure • Diabetes • End Stage Renal Disease 	1,188	1,251
UnitedHealth Group, Inc. (Sierra Health and Life Insurance Company)	Erickson Advantage Champion (HMO – POS)	<ul style="list-style-type: none"> • Cardiovascular disorders • Chronic Heart Failure • Diabetes 	236	227
Innovative Long Term Care Management, Inc. (Align Senior Care MI, LLC)	<ul style="list-style-type: none"> • Memory Care (HMO) • Align Kidney Care (HMO) 	<ul style="list-style-type: none"> • Dementia • End Stage Renal Disease 	121	105
		Total	12,228	12,378

Institutional Special Needs Plan (I-SNP)

There are three I-SNPs in Michigan with a total of 2,192 enrollees as of December 2024. This is an increase of 30 since November 2024. Longevity Health Plan has the most enrollees (1,136) compared to Senior Care (896) and Erickson Advantage Guardian (159).

Parent Organization	Plan Name	Total Enrollees Nov 2024	Total Enrollees Dec 2024
Longevity Health Founders, LLC.	Longevity Health Plan (HMO)	1,108	1,136
Innovative Long Term Care Management, Inc. (Align Senior Care MI, LLC)	Senior Care (HMO)	1,038	896
UnitedHealth Group (Sierra Health and Life Insurance Company)	Erickson Advantage Guardian (HMO – POS)	158	159
	Total	2,304	2,192



MEDICAID POLICIES

The Michigan Department of Health and Human Services (MDHHS) issued several publications that are available for review on the department's [website](#).

The department's [website](#) shows one new policy issued in December:

- [MMP 24-61](#), Targeted Case Management Services for Children with Medical Complexity

The [website](#) shows two proposed policies for which the public comment period is still open.

- [2454-ESO](#), Emergency Services Only Ventilator Services
- [2450-Hearing](#), Bone Anchored Hearing Device Policy Update

MDHHS released three Medicaid Provider L-letters of potential interest in December, per their [website](#).

- [L 24-70](#), Ventilator-Dependent Care Unit (VDCU) Coverage
- [L 24-72](#), Increase to the Medicaid Resource Standards
- [L 24-80](#), Graduate Medical Education (GME) Innovations Pool

For additional information, contact [Cammie Cantrell](#).





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