HEALTH MANAGEMENT ASSOCIATES



W W W . H E A L T H M A N A G E M E N T . C O M



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MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of June 1, 2024, there were **1,797,045 Medicaid beneficiaries, including 569,822 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 44,092** since May 1, 2024. The number of HMP beneficiaries enrolled in HMOs **decreased by 18,530** and the number of non-HMP beneficiaries **decreased by 25,562**.

The total number of Medicaid beneficiaries, including Healthy Michigan Plan (HMP) beneficiaries enrolled in the nine Michigan Medicaid Plans in June 2024 is 516,731 less than in June 2023. The count of HMP beneficiaries enrolled in the nine Michigan Medicaid Health Plans (HMOs) in June 2024 is 246,397 less than June 2023.

	June 2023	Aug 2023	Oct 2023	Dec 2023	Feb 2024	May 2024	June 2024
All Medicaid							
Beneficiaries Enrolled	2,313,776	2,265,773	2,147,630	2,051,444	1,965,154	1,841,137	1,797,045
Total HMP Enrollees	816,219	794,649	744,710	696,317	653,735	588,352	569,822
Total CSHCS/							
Medicaid Enrollees	28,698	28,699	27,857	27,397	27,220	27,124	26,792
Total Medicare/							
Medicaid Enrollees							
(Duals)	43,255	42,153	40,294	39,551	35,996	32,976	32,022
Total MIChild							
Enrollees	35,844	36,786	39,346	41,936	42,029	47,442	48,095

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 June 2024, the number of mandatory but not yet enrolled beneficiaries was 58,744, which is 1,259 more than May 2024.

As the enrollment reports for June (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 are three HMOs – McLaren Health Plan, Meridian Health Plan of Michigan, and Molina Healthcare of Michigan – authorized to serve all counties in the Lower Peninsula and a fourth – UnitedHealthcare Community Plan – authorized to serve all but three 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 plans with the highest total enrollment in June 2024 were Meridian Health Plan of Michigan with about 22 percent of the total (400,765 enrollees), Molina Healthcare of Michigan with about 18 percent



(319,015 enrollees), Blue Cross Complete of Michigan with about 16 percent of the total number of enrollees (284,055), and UnitedHealthcare Community Plan with 14 percent (251,657 enrollees).

Healthy Michigan Plan (HMP)

The total count of HMP enrollees in the Medicaid HMOs declined in June 2024 for the eleventh consecutive month, reflecting the impacts of restarting redeterminations, after increases for the first seven months of 2023. June's count was 569,822 which is a decrease of 18,530 from May 2024. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in June 2024 were Meridian Health Plan of Michigan with about 20 percent of the total, Blue Cross Complete with about 19 percent, and Molina Healthcare of Michigan with about 16 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 26,792 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in June 2024, a decrease of 332 since May 2024. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in June 2024 were Molina Healthcare of Michigan with about 22 percent, Blue Cross Complete, and Priority Health Choice each had about 17 percent of the total number of enrollees, while Meridian Health Plan of Michigan had about 16 percent.

MIChild

There were 48,095 MIChild beneficiaries enrolled in the Medicaid HMOs in June 2024, an increase of 653 since May 2024. All Medicaid HMOs have MIChild beneficiaries enrolled, although the numbers vary dramatically across plans. The plans with the highest enrollment in June were Meridian Health Plan of Michigan with about 24 percent of the total, Molina Healthcare of Michigan with about 16 percent, and Priority Health 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 32,022 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in June 2024 in Medicaid HMOs for their Medicaid benefits. The number of enrolled duals decreased by 954 between May 2024 and June 2024. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. Molina Healthcare of Michigan, and UnitedHealthCare Community Plan each had about 21 percent of the total number of enrollees, while Meridian Health Plan of Michigan had about 20 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 June 2024, the MI Health Link enrollment total was 33,904 a decrease of 1,335 enrollees since May 2024.

The tables below illustrate MI Health Link enrollment by month from 2022 to the most current data. Enrollment fluctuations are clear. June 2024 had the lowest enrollment over the past 30 months with 33,904 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

MICHIGAN





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

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		2,932	1,451	3,784	8,167
AmeriHealth Michigan			625	1,988	2,613
HAP CareSource			952	2,854	3,806
Meridian Health Plan of MI		2,779	796	2,192	5,767
Molina Healthcare of MI			1,774	7,708	9,482
Upper Peninsula Health Plan	4,069				4,069
Total	4,069	5,711	5,598	18,526	33,904

The plans with the highest enrollment in June 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 17 percent of the total number of enrollees.

During June 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 7 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 June 2024, about 27 percent of the demonstration's participants were voluntarily enrolled.

MDHHS also reports 66,589 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.





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:
 - o **HIDE-SNP:** highly integrated dual eligible SNP
 - o 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 May 2024	Total Enrollees June 2024
Humana Inc.	Humana Choice (PPO)	52,864	54,165
	Humana Choice (PPO)	,	,
	Humana Gold Plus (HMO)		
UnitedHealth Group, Inc.	UHC Dual Complete MI (PPO)	41,813	41,776
	UHC Dual Complete MI (HMO-POS)		
	UHC Dual Complete MI (HMO-POS)		
Centene Corporation	Wellcare Complete Dual Access (HMO)	12,234	12,540
	 Wellcare Dual Access Open (PPO) 		
	Wellcare Dual Access (HMO)		
	Wellcare All Dual Assure (HMO)		
Molina Healthcare, Inc.	Molina Medicare Complete Care (HMO)	12,123	12,065
	Molina Medicare Complete Care Select (HMO)		
Corewell Health (Priority Health	Priority Medicare D-SNP (HMO)	10,346	10,087
Choice, Inc)	Priority Medicare D-SNP Advantage (HMO)		
CVS Health Corporation	Aetna Medicare Assure Premier (HMO)	19,013	20,926
Henry Ford Health System (Health Alliance Plan)	HAP Medicare Complete Duals (HMO)	650	638
McLaren Health Care Corporation	McLaren Medicare Inspire Duals (HMO)	503	505
Commonwealth Care Alliance	CCA Medicare Maximum (HMO)	459	468
Zing Health Consolidator, Inc.	Zing Dual Complete Select MI (HMO)	414	431
	 Zing Dual Complete Open Choice MI (PPO) 		
	Total	150,419	153,601

Chronic Condition Special Needs Plan (C-SNP)

There are seven C-SNP plans in the Michigan market as of June 2024.

HumanaChoice – Diabetes and Heart has the highest number of enrollees (6,830), Zing Select Diabetes & Heart MI had 803 enrollees in June 2024.

			Total Enrollees	Total Enrollees
Parent Organization	Plan Name	Specialty Diseases	May 2024	June 2024
Humana Inc.	HumanaChoice – Diabetes and Heart (PPO)	Cardiovascular disordersChronic heart failureDiabetes	5,922	6,830
Zing Health Consolidator, Inc.	Zing Select Diabetes & Heart MI (HMO) Zing Open Choice Diabetes & Heart MI (PPO) Zing ESRD Select MI (HMO)	 Cardiovascular disorders Chronic heart failure Diabetes End Stage Renal Disease 	715	803



UnitedHealth Group, Inc. (Sierra Health and Life Insurance Company)	Erickson Advantage Champion (HMO – POS)	Cardiovascular disordersChronic Heart FailureDiabetes	294	285
Innovative Long Term Care Management, Inc. (Align Senior Care MI, LLC)	Memory Care (HMO) Align Kidney Care (HMO)	Dementia End Stage Renal Disease	107	104
		Total	7,038	8,022

Institutional Special Needs Plan (I-SNP)

There are three I-SNPs in Michigan with a total of 2,048 enrollees as of June 2024. This is an increase of 170 since May 2024. Senior Care has the most enrollees (962) compared to Longevity Health Plan (929) and Erickson Advantage Guardian (157).

		Total Enrollees	Total Enrollees
Parent Organization	Plan Name	May 2024	June 2024
Innovative Long Term Care Management, Inc. (Align Senior Care MI, LLC)	Senior Care (HMO)	855	962
Longevity Health Founders, LLC.	Longevity Health Plan (HMO)	870	929
UnitedHealth Group (Sierra Health and Life Insurance Company)	Erickson Advantage Guardian (HMO – POS)	153	157
	Total	1,878	2,048

HEALTHY MICHIGAN PLAN ENROLLMENT

The Michigan Department of Health and Human Services (MDHHS) reports enrollment counts for the Healthy Michigan Plan (HMP), its Medicaid expansion program for low-income non-elderly adults who do not meet eligibility criteria for traditional program coverage, at the beginning of each week on its website. The enrollment number includes beneficiaries enrolled in health plans and beneficiaries not required to enroll in a health plan. Enrollment stood at 733,484 as of June 24, 2024, the last counting day of the month. This is a decrease of 33,273 since May 28, 2024, and a decrease of 145,506 since January 2, 2024.

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 <u>website</u> shows no new policies issued in June:

The website shows two proposed policies for which the public comment period is still open.

- 2418-NF, Cost Report Late File Penalty
- 2422-TCM-RC, Targeted Case Management Recuperative Care







MDHSHS released four Medicaid Provider L-letters of potential interest since our last newsletter, per their <u>website</u>.

- <u>L 24-27</u>, Principal Balance Payment Requirement
- <u>L 24-31</u>, Disproportionate Share Hospital (DSH) Pools
- <u>L 24-35</u>, Invoice Numbers and Expense Descriptions in the General Ledger
- <u>L 24-37</u>, Notice of Intent to Submit a New Section 1115 Reentry Services Demonstration

For additional information, contact **Cammie Cantrell**.





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