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MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of September 1, 2024, there were **1,783,527 Medicaid beneficiaries, including 561,835 Healthy Michigan Plan (HMP) beneficiaries**, enrolled in the nine Michigan Medicaid Health Plans (HMOs). As the table below shows, this is an overall **increase of 5,901** since August 1, 2024. The number of HMP beneficiaries enrolled in HMOs **increased by 1,994** and the number of non-HMP beneficiaries **increased by 3,907**.

The total number of Medicaid beneficiaries, including Healthy Michigan Plan (HMP) beneficiaries enrolled in the nine Michigan Medicaid Plans in September 2024 is 426,268 less than in September 2023. The count of HMP beneficiaries enrolled in the nine Michigan Medicaid Health Plans (HMOs) in September 2024 is 207,401 less than September 2023.

| | Sept 2023 | Nov 2023 | Jan 2024 | Mar 2024 | May 2024 | Aug 2024 | Sept 2024 |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| All Medicaid Beneficiaries Enrolled | 2,209,795 | 2,092,146 | 2,008,408 | 1,927,334 | 1,841,137 | 1,777,626 | 1,783,527 |
| • Total HMP Enrollees | 769,236 | 718,242 | 674,698 | 635,140 | 588,352 | 559,841 | 561,835 |
| • Total CSHCS/ Medicaid Enrollees | 28,574 | 27,505 | 26,983 | 27,063 | 27,124 | 27,294 | 27,428 |
| • Total Medicare/ Medicaid Enrollees (Duals) | 41,141 | 39,828 | 36,828 | 34,446 | 32,976 | 33,840 | 33,656 |
| • Total MICHild Enrollees | 38,127 | 41,831 | 41,411 | 43,610 | 47,442 | 50,674 | 55,477 |

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 September 2024, the number of mandatory but not yet enrolled beneficiaries was 59,771, which is 3,262 less than August 2024.**

As the enrollment reports for September ([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 plan service areas will change effective October 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 September 2024 were Meridian Health Plan of Michigan with about 22 percent of the total (394,172 enrollees), Molina Healthcare of Michigan with about 18 percent (315,417 enrollees), Blue Cross Complete of Michigan with about 16 percent of the total number of enrollees (285,753), and UnitedHealthcare Community Plan with 14 percent (41,239 enrollees).

Healthy Michigan Plan (HMP)

The **total count of HMP enrollees in the Medicaid HMOs increased in September 2024 by 1,994 August 2024 to 561,835**. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in September 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 **27,428 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in September 2024**, an increase of 134 since August 2024. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in September 2024 were Molina Healthcare of Michigan with about 22 percent, Priority Health Choice had about 18 percent of the total number of enrollees, Blue Cross Complete had about 17 percent, and Meridian Health Plan of Michigan had about 16 percent.

MiChild

There were **55,477 MiChild beneficiaries enrolled in the Medicaid HMOs in September 2024**, an increase of 4,803 since August 2024. All Medicaid HMOs have MiChild beneficiaries enrolled, although the numbers vary dramatically across plans. The plans with the highest enrollment in July 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 **33,656 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in September 2024 in Medicaid HMOs** for their Medicaid benefits. The number of enrolled duals **decreased by 184** between August 2024 and September 2024. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. UnitedHealthCare Community Plan had about 23 percent of the



total number enrollees, while Molina Healthcare of Michigan had about 20 percent of the total number of enrollees, while Meridian Health Plan of Michigan had about 18 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 September 2024, the MI Health Link enrollment total was 32,243** a decrease of **310 enrollees** since August 2024.

The tables below illustrate MI Health Link enrollment by month from 2022 to the most current data. Enrollment fluctuations are clear. September 2024 had the lowest enrollment over the past 30 months with 32,243 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 | | | |
| 33,098 | 32,553 | 32,243 | | | |



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

| MI Health Link Enrollment | Upper Peninsula Region | SW MI Region | Macomb Region | Wayne Region | Total |
|-----------------------------|------------------------|--------------|---------------|--------------|--------|
| Aetna Better Health of MI | | 2,751 | 1,374 | 3,605 | 7,730 |
| AmeriHealth Michigan | | | 604 | 1,909 | 2,513 |
| HAP CareSource | | | 913 | 2,725 | 3,638 |
| Meridian Health Plan of MI | | 2,560 | 777 | 1,987 | 5,324 |
| Molina Healthcare of MI | | | 1,730 | 7,306 | 9,036 |
| Upper Peninsula Health Plan | 4,002 | | | | 4,002 |
| Total | 4,002 | 5,311 | 5,398 | 17,532 | 32,243 |

The plans with the highest enrollment in September 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 September 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 September 2024, about 27 percent of the demonstration’s participants were voluntarily enrolled.

MDHHS also reports 67,506 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.





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 August 2024 | Total Enrollees Sept 2024 |
|---|--|-----------------------------|---------------------------|
| Humana Inc. | <ul style="list-style-type: none"> Humana Choice (PPO) Humana Choice (PPO) Humana Gold Plus (HMO) | 55,344 | 52,799 |
| 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) | 41,179 | 40,074 |
| CVS Health Corporation | Aetna Medicare Assure Premier (HMO) | 22,609 | 23,937 |
| 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) | 12,486 | 12,530 |
| Molina Healthcare, Inc. | <ul style="list-style-type: none"> Molina Medicare Complete Care (HMO) Molina Medicare Complete Care Select (HMO) | 11,643 | 11,442 |
| Corewell Health (Priority Health Choice, Inc) | <ul style="list-style-type: none"> Priority Medicare D-SNP (HMO) Priority Medicare D-SNP Advantage (HMO) | 9,567 | 9,350 |
| Henry Ford Health System (Health Alliance Plan) | HAP Medicare Complete Duals (HMO) | 645 | 674 |
| McLaren Health Care Corporation | McLaren Medicare Inspire Duals (HMO) | 510 | 512 |
| Commonwealth Care Alliance | CCA Medicare Maximum (HMO) | 466 | 454 |
| Zing Health Consolidator, Inc. | <ul style="list-style-type: none"> Zing Dual Complete Select MI (HMO) Zing Dual Complete Open Choice MI (PPO) | 374 | 372 |
| | Total | 154,823 | 152,144 |



Chronic Condition Special Needs Plan (C-SNP)

There are seven C-SNP plans in the Michigan market as of September 2024. HumanaChoice – Diabetes and Heart has the highest number of enrollees (9,144) in September 2024.

| Parent Organization | Plan Name | Specialty Diseases | Total Enrollees Aug 2024 | Total Enrollees Sept 2024 |
|--|--|--|--------------------------|---------------------------|
| Humana Inc. | HumanaChoice – Diabetes and Heart (PPO) | <ul style="list-style-type: none"> • Cardiovascular disorders • Chronic heart failure • Diabetes | 8,142 | 9,144 |
| 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 | 922 | 1,034 |
| 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 | 260 | 253 |
| 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 | 108 | 111 |
| | | Total | 9,432 | 10,542 |

Institutional Special Needs Plan (I-SNP)

There are three I-SNPs in Michigan with a total of 2,247 enrollees as of September 2024. This is an increase of 51 since August 2024. Senior Care has the most enrollees (1,060) compared to Longevity Health Plan (1,034) and Erickson Advantage Guardian (153).

| Parent Organization | Plan Name | Total Enrollees Aug 2024 | Total Enrollees Sept 2024 |
|--|---|--------------------------|---------------------------|
| Innovative Long Term Care Management, Inc. (Align Senior Care MI, LLC) | Senior Care (HMO) | 1,056 | 1,060 |
| Longevity Health Founders, LLC. | Longevity Health Plan (HMO) | 990 | 1,034 |
| UnitedHealth Group (Sierra Health and Life Insurance Company) | Erickson Advantage Guardian (HMO – POS) | 150 | 153 |
| | Total | 2,196 | 2,247 |



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 nine new policies issued since our last newsletter:

- [MMP 24-26](#) Substance Use Disorder Health Home
- [MMP 24-29](#) Update to Bulletin MMP 23-74 - Medicaid Coverage of Community Health Worker (CHW)/Community Health Representative (CHR) Services
- [MMP 24-34](#), Electronic Visit Verification (EVV) Personal Care Services Updates
- [MMP 24-36](#) Medicaid Coverage of Maternal and Infant Health Services
- [MMP 24-40](#) Update to Medicaid Coverage of Doula Services
- [MMP 24-42](#) Updates to Speech-Language Pathologist Enrollment
- [MMP 24-43](#) End of the Federal Public Health Emergency (PHE) and Final Unwinding of Pharmacy COVID-19 Response Policies
- [MMP 24-44](#) Principal Balance Payment Requirement
- [MMP 24-45](#) Medicaid Coverage of Group Prenatal Care Services
- [MMP 24-46](#) Medicaid Interim Payment (MIP) Program Termination
- [MMP 24-47](#) Pharmacy Secondary Payer Coverage of Select Continuous Glucose Monitoring Systems (CGMS), Disposable Insulin Pumps, and Related Supplies
- [MMP 24-48](#), Direct Care Worker Wage Increase

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

- [2438-EVV](#), Electronic Visit Verification (EVV) Personal Care Services Updates
- [2413-PRTF](#) Update to Psychiatric Residential Treatment Facilities (PRTF) Policy
- [2436-MIHP](#) Medicaid Coverage of Maternal and Infant Health Services
- [2431-NF](#) Discontinuation of the Rate Relief Program
- [2432-Hospital](#) Disproportionate Share Hospital (DSH) Program
- [2430-CHW](#) Update to Bulletin MMP 23-74 - Medicaid Coverage of Community Health Worker (CHW)/Community Health Representative (CHR) Services
- [2437-Doula](#) Update to Medicaid Coverage of Doula Services





- [2439-Pharmacy](#) Pharmacy Secondary Payer Coverage of Select Continuous Glucose Monitoring Systems (CGMS), Disposable Insulin Pumps, and Related Supplies
- [2442-NF](#) Direct Care Worker Wage Increase

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

- [L 24-44](#), Discontinuation of the Rate Relief Program
- [L 24-49](#) Guide to Coordinate Services for Medicaid Behavioral Health and MI Choice
- [L 24-51](#), Child & Adult Core Set Measures State Plan Amendment Request
- [L 24-52](#) Notice of Intent to Submit Several State Plan Amendment Requests to Address the Requirements of the Consolidated Appropriations Act and a Subsequent Update of the Current Targeted Case Management Services for Recently Incarcerated Beneficiaries
- [L 24-55](#) Direct Care Workers
- [L 24-56](#) Notice of Intent to Submit a Section 1915(b) Waiver Renewal Application for the Healthy Kids Dental (HKD) Program
- [L 24-57](#) Notice of October 16, 2024, Prosthetic and Orthotic Medicaid Provider Liaison Meeting
- [L 24-59](#) Direct Care Worker Wage Increase

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





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