

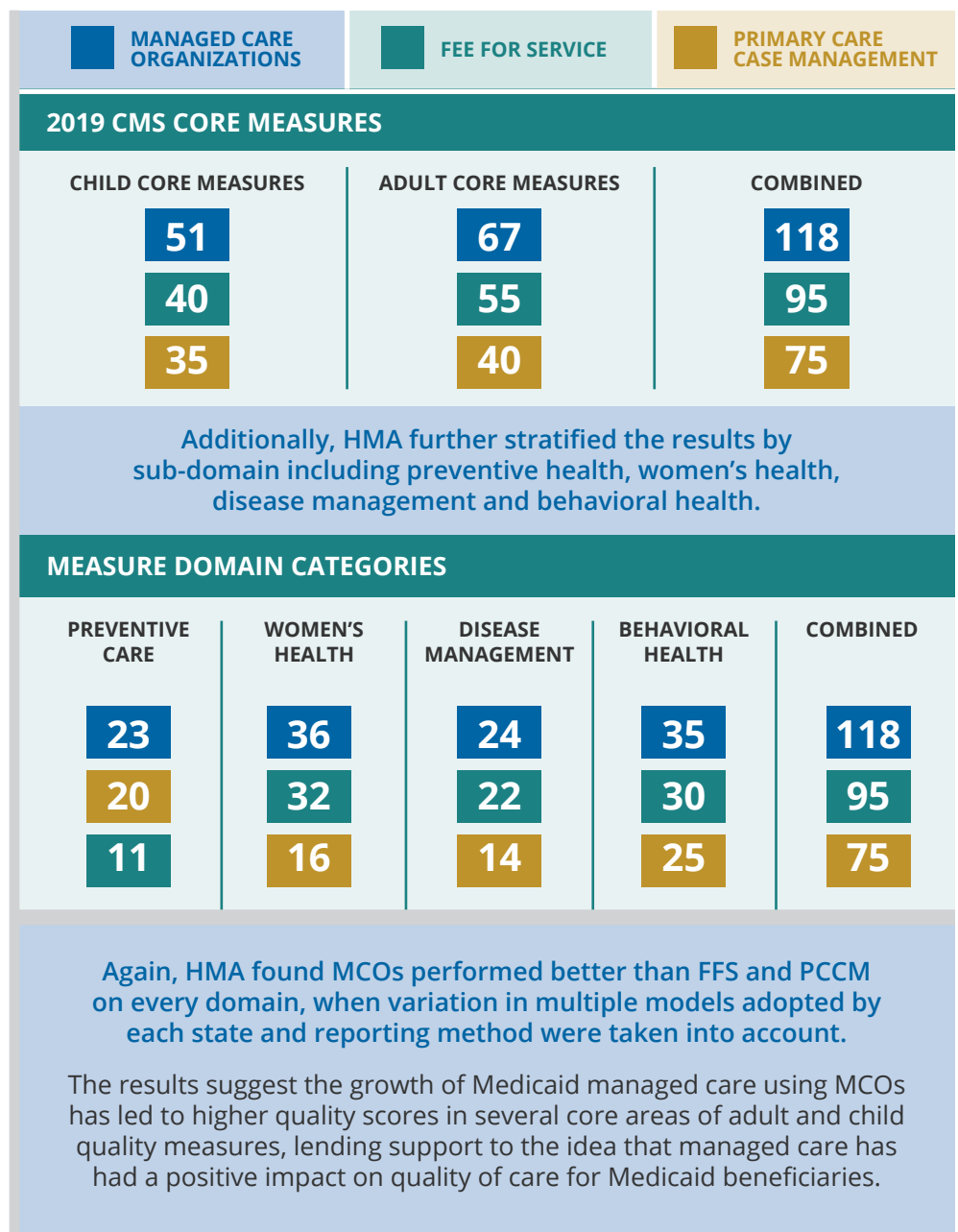
Report in Brief:

A Comparison of Quality Outcomes Across State Medicaid Program Delivery Models

November 2021

HMA used quality data reported by states to the federal government in the 2019 Adult and Child Medicaid Core Set to assess if there was a difference in outcomes between the three Medicaid delivery system models – fee for service, primary care case management, and managed care organizations. Since 2013, an increasing number of states have been reporting an increasing number of measures, allowing for a robust analysis of outcomes between the models that has never been possible before.

HMA found that managed care organizations (MCOs) performed better than fee-for-service (FFS) and primary care case management (PCCM) on the quality measures in reporting year 2019, regardless of how the data was stratified. When looking at both the Adult Core Set and Child Core Set, MCOs outperformed both FFS and PCCM.



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