

HEALTH MANAGEMENT ASSOCIATES

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MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of December 1, 2020, there were **2,042,684 Medicaid beneficiaries, including 688,468 Healthy Michigan Plan (HMP) beneficiaries**, enrolled in the 10 Michigan Medicaid Health Plans (HMOs). As the table below shows, this is an overall **increase of 12,665** since November 1, 2020. The number of HMP beneficiaries enrolled in HMOs increased by 7,815 and the number of non-HMP beneficiaries increased by 4,850.

As the table below illustrates, **managed care enrollment has grown significantly** over the last several months and is about **289,000 higher in December 2020 than in February 2020**. Managed care enrollment in December 2020 is nearly 299,000 higher than in December 2019.

More than half of the growth can be seen in the Healthy Michigan Plan (HMP) enrollment figures; the count of HMP beneficiaries enrolled in the 10 Michigan Medicaid Health Plans (HMOs) in December 2020 is almost 153,000 higher than in February 2020, and about 160,000 higher than a year ago, in December 2019. The count of non-HMP enrollees has also increased during the same period.

Some of this growth can surely be attributed to the COVID-19 pandemic and the loss of income and health insurance by many in Michigan’s population, but a contributing factor as well was the decision in April 2020 by the Michigan Department of Health and Human Services (MDHHS) to temporarily discontinue annual eligibility redeterminations and case closures.

	Dec. 2019	Feb 2020	Apr 2020	June 2020	Aug. 2020	Oct. 2020	Dec. 2020
All Medicaid Beneficiaries Enrolled	1,743,905	1,753,850	1,769,106	1,880,759	1,953,437	2,004,711	2,042,684
• Total HMP Enrollees	528,713	535,525	538,346	596,382	637,696	664,879	688,468
• Total CSHCS/ Medicaid Enrollees	23,944	23,929	24,213	25,750	25,233	26,636	26,469
• Total Medicare/Medicaid Enrollees (Duals)	39,569	39,199	38,934	40,724	41,427	44,483	45,244
• Total MICHild Enrollees	38,618	38,716	38,549	35,351	35,764	35,759	35,747

The number of beneficiaries identified as mandatory managed care enrollees but not yet enrolled in a Medicaid HMO has varied dramatically over the last two and a half years, from a low of 45,305 in July 2018 to a high of 149,746 in May 2020. In December 2020, the number of mandatory but not yet enrolled beneficiaries was 70,667, up from 63,997 in November 2020.

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 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 December 2020 were Meridian Health Plan of Michigan with about 27 percent of the total, Molina Healthcare of Michigan with about 18 percent, and Blue Cross Complete of Michigan with about 14 percent of the total number of enrollees.

Healthy Michigan Plan (HMP)

The **total count of HMP enrollees in the Medicaid HMOs in December 2020 was 688,468, an increase of 7,815** over the count for November 2020. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in December 2020 were Meridian Health Plan of Michigan with about 25 percent of the total, Blue Cross Complete with almost 18 percent, and Molina Healthcare of Michigan with about 15 percent of the total number of enrollees.

CSHCS/Medicaid

The 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 **26,469 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in December 2020, an increase of 124** since November 2020. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in December 2020 were Meridian Health Plan of Michigan with about 23 percent of the total, Molina Healthcare of Michigan with about 21 percent, and Blue Cross Complete with about 15 percent of the total number of enrollees.

MiChild

There were **35,747 MiChild beneficiaries enrolled in the Medicaid HMOs in December 2020, a decrease of 38** since November 2020. 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 28 percent of the total, Molina Healthcare of Michigan with about 15 percent, and Blue Cross Complete with about 13 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 45,244 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in December 2020 in Medicaid HMOs** for their acute care Medicaid benefits. As the table above reflects, the number of enrolled duals **increased by 223** between November and December 2020. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. The plans with the highest enrollment in December 2020 were Meridian Health Plan of Michigan with about 29 percent of the total,



Molina Healthcare of Michigan with about 23 percent, and McLaren Health Plan with about 13 percent of the total number of enrollees

For additional information, contact [Cammie Cantrell](#), at 517-482-9236.

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 2020, the MI Health Link enrollment total was 39,799, a decrease of 90 enrollees** since November 2020.

The tables below illustrate MI Health Link enrollment by month during 2018, 2019, and 2020. Enrollment fluctuations are clear. The lowest enrollment count on the tables was in May 2019 when there were 33,095 enrollees; and the highest enrollment count was in November 2020 when there were 39,889 enrollees.

Jan. 2018	Feb. 2018	March 2018	April 2018	May 2018	June 2018
38,045	38,571	38,562	37,798	39,021	38,327
July 2018	August 2018	Sept. 2018	Oct. 2018	Nov. 2018	Dec. 2018
37,518	37,103	36,394	35,651	34,827	34,655

Jan. 2019	Feb. 2019	March 2019	April 2019	May 2019	June 2019
34,367	34,444	33,672	33,145	33,095	35,612
July 2019	August 2019	Sept. 2019	Oct. 2019	Nov. 2019	Dec. 2019
34,771	36,621	37,295	37,018	37,377	37,321

Jan. 2020	Feb. 2020	March 2020	April 2020	May 2020	June 2020
36,647	37,575	37,006	36,864	37,675	37,898
July 2020	August 2020	Sept. 2020	Oct. 2020	Nov. 2020	Dec. 2020
38,473	39,206	39,055	39,269	39,889	39,799





There are seven ICOs serving one or more of the demonstration regions. The table below provides enrollment information by region for each ICO for December 2020.

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		3,205	972	3,507	7,684
AmeriHealth Michigan			688	2,288	2,976
HAP Empowered Health Plan			1,012	3,544	4,456
Meridian Health Plan of MI		5,127			5,127
MI Complete Health			688	2,239	2,927
Molina Healthcare of MI			2,174	10,176	12,350
Upper Peninsula Health Plan	4,179				4,179
Total	4,179	8,332	5,534	21,754	39,799

The plans with the highest enrollment in December 2020 were Molina Healthcare of Michigan with 31 percent of the total, Aetna Better Health of Michigan with about 19 percent, and Meridian Health Plan of Michigan with about 13 percent of the total number of enrollees.

During December 2020, about 95 percent of the MI Health Link enrollees were living in a community setting, and the remaining five percent of enrollees resided in a nursing facility. Almost six 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 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.

While all plans have enrollees receiving care in nursing facilities, Aetna Better Health of Michigan had the largest share during December 2020; more than 21 percent of the total enrollees residing in nursing facilities were part of Aetna. Upper Peninsula Health Plan and Molina Healthcare of Michigan each had 18 percent of total enrollees residing in nursing facilities during December.

The majority of MI Health Link enrollees are passively enrolled; they are auto-assigned to a health plan based on their eligibility but are able to opt out of the demonstration at any time. Beneficiaries may also voluntarily enroll in the demonstration; and during December 2020, more than 20 percent of the demonstration’s participants were voluntarily enrolled.

MDHHS also reports that about 61,700 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.





For additional information, contact [Cammie Cantrell](#), at 517-482-9236.

MICHIGAN MEDICARE ADVANTAGE PLANS

There are multiple types of Medicare Advantage Special Needs Plans (SNPs). Some plans focus on Medicare beneficiaries with certain chronic medical conditions; these are called C-SNPs. Other plans focus on Medicare beneficiaries residing in institutions; these are I-SNPs. Plans that focus on Medicare beneficiaries dually eligible for Medicaid (duals) are called D-SNPs. All three types of plans provide Medicare benefits, and 2020 is the first year they are all available in Michigan.

Meridian Health Plan of Michigan is offering a C-SNP focused on Medicare beneficiaries with diabetes and had 62 enrollees in December 2020. Align Senior Care Michigan is offering a C-SNP focused on beneficiaries with diabetes or cardiac issues and had 11 enrollees in December. Align is also offering an I-SNP and had 141 enrollees in December 2020.

Four of the 10 Medicaid HMOs in Michigan are also federally contracted as D-SNPs: Meridian Health Plan of Michigan, Molina Healthcare of Michigan, Priority Health Choice, and UnitedHealthcare Community Plan. As of December 1, 2020, these four D-SNPs had a combined enrollment of 34,625 duals for whom they provide Medicare services.

About 41 percent of the duals enrolled in a Michigan D-SNP (14,101 individuals) in December 2020 were enrolled with Molina; about 32 percent (10,923 individuals) were enrolled with Meridian; about 18 percent (6,051 individuals) were enrolled with UnitedHealthcare; and about 10 percent (3,550 individuals) were enrolled with Priority. None of these duals are participating in the MI Health Link demonstration, but some may also be enrolled in these same plans to receive their Medicaid services.

In addition to these four health plans, two additional D-SNPs serve Michigan – Humana Medical/Dental Plan and Health Alliance Plan (HAP) of Michigan. Humana had 11,057 enrollees in December 2020 and HAP had 103 enrollees. These enrollment totals are not counted in the aforementioned statistics. HAP is the parent organization for HAP Empowered Health Plan, which is both a Medicaid HMO and one of the ICOs participating in MI Health Link.

Not all duals enrolled in the D-SNPs are eligible to receive full Medicaid benefits. Some only receive assistance from the Medicaid program with their Medicare coinsurance and deductible payments and/or monthly Medicare premiums.

For additional information, contact [Cammie Cantrell](#), at 517-482-9236.

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. Enrollment stood at **854,978 as of December 21, 2020. This is an increase of 17,861 since November 30,**



2020, the last counting day in November 2020. The enrollment count for December 21, 2020 is the highest ever enrollment count for the program and nearly 181,000 higher than one year ago. Enrollment numbers for December 28, 2020 were unavailable for this newsletter.

Normally, the enrollment count drops on the first counting day of each month due to case closures resulting from annual eligibility redeterminations, then grows again by the end of the month as new applications and redeterminations are processed. However, as reported in the April edition of The Michigan Update, MDHHS released a program bulletin on April 6, 2020 (MSA 20-19) announcing that virtually all case closures – for both the HMP and traditional Medicaid eligibility categories – have been temporarily suspended due to the COVID-19 pandemic. This temporary suspension as well as an assumed increase in new enrollment requests over the last few months due to the number of newly unemployed individuals losing health care benefits likely explains the dramatic rise in enrollment.

For additional information, contact [Cammie Cantrell](#), at 517-482-9236.

MEDICAID POLICIES

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

The website shows 10 final policies issued in December, some of which were simultaneously released for public comment.

- MSA 20-78, issued November 30, 2020: COVID-19 Response: Update to Bulletin MSA 20-73
- MSA 20-55, issued December 1, 2020: Medicaid Provider Manual Chapter for Brain Injury Services
- MSA 20-69, issued December 1, 2020: Enrolling Agency Caregivers in the Community Health Automated Medicaid Processing System (CHAMPS) in their Absence
- MSA 20-70, issued December 1, 2020: Nursing Facility Minimum Data Set (MDS) Submission
- MSA 20-71, issued December 1, 2020: Updates to the Medicaid Provider Manual; Disposable Hearing Aid Battery Prescription Clarification
- MSA 20-76, issued December 1, 2020: COVID-19 Response: Care and Recovery Centers and COVID Relief Facilities 85% Occupancy Limitation Exemption
- MSA 20-74, issued December 4, 2020: COVID-19 Response: Tribal Health Centers and Tribal Federally Qualified Health Centers COVID-19 Specimen Collection; Clarification to MSA 20-57: COVID-19 Specimen Collection
- MSA 20-79, issued December 22, 2020: COVID-19 Response: Policy for Care and Recovery Center (CRC) Bed Capacity Changes
- MSA 20-75, issued December 23, 2020: COVID-19 Response: Coverage of COVID-19 Vaccine Services
- MSA 20-30, issued December 30, 2020: Updates to Genetic and Molecular Testing Authorization Requirements and New Authorization Request Form



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

- 2073-Vaccine: COVID-19 Response: Coverage of COVID-19 Vaccine Services
- 2078-NF: COVID-19 Response: Policy for Care and Recovery Center (CRC) Bed Capacity Changes
- 2074-NF: COVID-19 Response: Care and Recovery Centers (CRCs) and COVID Relief Facilities 85% Occupancy Limitation Exemption
- 2072-Lab: COVID-19 Response: Tribal Health Centers and Tribal Federally Qualified Health Center COVID-19 Specimen Collection; Clarification to MSA 20-57: COVID-19 Specimen Collection
- 2061-NF: Nursing Facility Minimum Data Set (MDS) Submission
- 2076-NF: COVID-19 Response: Update to Bulletin MSA 20-73

In addition, MDHHS has released one L-letter of potential interest, which is available for review on the same website.

- L 20-68 – issued November 30, 2020 – Private Duty Nursing Reimbursement Change

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