

HEALTH MANAGEMENT ASSOCIATES

THE
**MICHIGAN
UPDATE**
2025 ➤

JULY



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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MDHHS RELEASES BEHAVIORAL HEALTH PIHP RFP

On August 5, 2025, the Michigan Department of Health and Human Services (MDHHS) [released](#) an RFP seeking proposals from entities to serve as Prepaid Inpatient Health Plans (PIHPs) to manage Medicaid-funded specialty behavioral health services. The state currently contracts with **ten** regional PIHPs to deliver these services to communities across the state **with the intent of consolidating to three**. PIHPs cover approximately 300,000 individuals with serious mental illness, substance use disorders, and developmental disabilities. The competitive procurement is guided by stakeholder feedback and structured around four key goals: providing high quality, timely services; improving choice and consistency across regions; enhancing accountability and transparency; and simplifying the system with reduced bureaucracy. Additional information is available [here](#). Proposals are due September 29, 2025.

HMA CONFERENCE

[Register today for the HMA 2025 Conference](#): October 15, 2025

Where Healthcare's Next Chapter Takes Shape. At a time of sweeping policy change and system-level transformation, the HMA Conference brings together the leaders who are making it happen. From federal and state government officials to executives from provider organizations, payers, and community-based groups—you'll be in the room with decision-makers who are actively designing, influencing, and implementing the future of care. Whether you work in policy, strategy, operations, payment/finance, or care delivery, this event is designed to give you a clearer picture of what's coming—and connect you with others navigating the same complexities.

MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of July 1, 2025, there were **1,749,270 Medicaid beneficiaries, including 548,942 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 23,267** since June 1, 2025. The number of HMP beneficiaries enrolled in HMOs **increased by 10,020** and the number of non-HMP beneficiaries **increased by 13,247**.

The total number of Medicaid beneficiaries, including Healthy Michigan Plan (HMP) beneficiaries enrolled in the nine Michigan Medicaid Plans in July 2025 is 22,795 less than in July 2024. The count of HMP beneficiaries enrolled in the nine Michigan Medicaid Health Plans (HMOs) in July 2025 is 9,772 less than July 2024. The drop in Medicaid enrollment may be from continued impacts of the PHE unwind as well as a stronger state economy, steady job growth, and low unemployment according to University of Michigan economists.



	July 2024	Sept 2024	Nov 2024	Jan 2025	Mar 2025	June 2025	July 2025
All Medicaid Beneficiaries Enrolled	1,772,065	1,777,626	1,770,654	1,763,148	1,766,574	1,726,003	1,749,270
• Total HMP Enrollees	558,714	559,841	557,618	555,626	560,466	538,922	548,942
• Total CSHCS/ Medicaid Enrollees	26,644	27,294	26,517	27,816	28,100	29,131	30,102
• Total Medicare/ Medicaid Enrollees (Duals)	31,410	33,840	30,546	30,555	28,863	28,345	29,704
• Total MICHILD Enrollees	49,179	50,674	57,668	60,432	62,340	63,246	63,457

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 July 2025, the number of mandatory but not yet enrolled beneficiaries was 85,835, which is 367 less than June 2025.**

As the enrollment reports for July ([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 plans with the highest total enrollment in July 2025 were Meridian Health Plan of Michigan with about 20 percent of the total (347,815 enrollees), Molina Healthcare of Michigan with about 17 percent (288,885 enrollees), Blue Cross Complete of Michigan with about 17 percent of the total number of enrollees (291,010), and UnitedHealthcare Community Plan with 15 percent (258,380 enrollees).

Healthy Michigan Plan (HMP)

The **total count of HMP enrollees in the Medicaid HMOs increased in July 2025 by 10,020 from June 2025 to 548,942.** All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in July 2025 were Blue Cross Complete with about 20 percent of the total, Meridian Health Plan of Michigan with about 18 percent, and Molina Healthcare of Michigan with about 14 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 **30,102 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in July 2025**, an increase of 971 since June 2025. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in July 2025 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 and Meridian Health Plan of Michigan each had about 16 percent.

MIChild

There were **63,457 MIChild beneficiaries enrolled in the Medicaid HMOs in July 2025**, an increase of 211 since June 2025. 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 20 percent of the total, Priority Health with about 16 percent, and Molina Healthcare of Michigan 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 **29,704 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in July 2025 in Medicaid HMOs** for their Medicaid benefits. The number of enrolled duals **increased by 1,359** between June 2025 and July 2025. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. Molina Healthcare of Michigan, and UnitedHealthCare Community Plan each had about 20 percent of the total number of enrollees, while Meridian Health Plan of Michigan had about 15 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 July 2025, the MI Health Link enrollment total was 30,932**, a decrease of **630** enrollees since June 2025.



The tables below illustrate MI Health Link enrollment by month from 2023 to the most current data. Enrollment fluctuations are clear. January 2025 had the lowest enrollment over the past 30 months with 30,850 enrollees; May 2023 saw the highest enrollment with 44,216 enrollees.

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

Jan. 2025	Feb. 2025	Mar. 2025	Apr. 2025	May 2025	June 2025
30,850	32,006	31,298	32,315	31,925	31,562
July 2025					
30,932					

There are six ICOs serving one or more of the demonstration regions. The table below provides enrollment information by region for each ICO for **July 2025**.

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		2,808	1,312	3,412	7,532
AmeriHealth Michigan			637	2,008	2,645
HAP CareSource			929	2,597	3,526
Meridian Health Plan of MI		2,200	711	1,743	4,654
Molina Healthcare of MI			1,698	6,853	8,551
Upper Peninsula Health Plan	4,024				4,024
Total	4,024	5,008	5,287	16,613	30,932

The plans with the highest enrollment in July 2025 were Molina Healthcare of Michigan with about 28 percent of the total, Aetna Better Health of Michigan with about 25 percent, and Meridian Health Plan of Michigan with about 15 percent of the total number of enrollees.

During July 2025, about 92 percent of the MI Health Link enrollees were living in a community setting, and the remaining 8 percent of enrollees resided in a facility. About 9 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 support 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 July 2025, about 29 percent of the demonstration's participants were voluntarily enrolled.

MDHHS also reports that 68,502 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.

MEDICARE ADVANTAGE SPECIAL NEEDS PLANS

Medicare Advantage Special Needs Plans (SNPs) are a type of Medicare Advantage plan that provide care coordination services under an NCQA-approved Model of Care. They can be HMO or PPO plan types and deliver tailored benefits to the groups they serve. To enroll in a SNP, enrollees must meet special eligibility criteria.

There are three types of SNPs, each serving a different population:

- **Dual Eligible Special Needs Plan (D-SNP)** – D-SNPs serve individuals dually eligible for Medicare and Medicaid and must hold a contract with the state Medicaid agency. D-SNPs are designated by CMS as Coordination Only (CO D-SNP), Highly Integrated (HIDE D-SNP), or Fully Integrated (FIDE D-SNP) according to the level of coordination and integration between Medicare and Medicaid.
- **Chronic Condition SNP (C-SNP)** – C-SNPs serve individuals with specific severe or disabling chronic conditions such as cardiovascular disorders or diabetes.
- **Institutional Special Needs Plan (I-SNP)** – I-SNPs limit enrollment to individuals requiring an institutional level of care, including those living in the community.

As of July 2025, there are a total of **170,021 individuals** enrolled in SNPs in Michigan.

Dual Eligible Special Needs Plans (D-SNP)

In 2025, there are 20 D-SNPs in Michigan offered by seven parent organizations. In July 2025, a total of 147,233 individuals are enrolled. UnitedHealth Group, Inc. currently has the largest D-SNP market share (47,582 enrollees), followed by Humana (44,666 enrollees) and CVS Health/Aetna (24,311 enrollees).

Only CO D-SNPs operate in Michigan. This will change when Michigan transitions MI Health Link to a HIDE SNP + Managed Long-term Services and Supports (MLTSS) program on January 1, 2026.

No new parent organizations entered Michigan's D-SNP market in 2025, but McLaren Health Care and Commonwealth Care Alliance closed their D-SNP plans.

Parent Organization	D-SNP Plan Name	Integration Status	June 2025 Enrollment	July 2025 Enrollment
Centene Corporation	Wellcare Dual Access Open (PPO D-SNP)	CO D-SNP	3,731	3,690
	Wellcare Dual Access (HMO-POS D-SNP)	CO D-SNP	5,410	5,336
	Wellcare Dual Reserve (HMO-POS D-SNP) – <i>Partial Duals Only</i>	CO D-SNP	129	124
	Total		9,270	9,150
Corewell Health	PriorityMedicare D-SNP (HMO D-SNP)	CO D-SNP	8,639	8,581
	Total		8,639	8,581
CVS Health Corporation	Aetna Medicare Assure Premier (HMO D-SNP)	CO D-SNP	22,221	22,450
	Aetna Medicare Assure Premier (PPO D-SNP)	CO D-SNP	1,772	1,861
	Total		23,993	24,311
Henry Ford Health System	HAP Medicare Complete Assist (PPO D-SNP)	CO D-SNP	698	703
	HAP Medicare Complete Duals (HMO D-SNP)	CO D-SNP	1,881	1,896
	Total		2,579	2,599
Humana, Inc.	Humana Dual Select H5216-385 (PPO D-SNP)	CO D-SNP	9,586	9,306
	HumanaChoice SNP-DE H5216-388 (PPO D-SNP)	CO D-SNP	13,951	13,930
	Humana Gold Plus SNP-DE H8908-005 (HMO D-SNP)	CO D-SNP	18,683	18,732
	Humana Gold Plus SNP-DE H8908-007 (HMO D-SNP)	CO D-SNP	2,615	2,698
	Total		44,835	44,666
Molina Healthcare, Inc.	Molina Medicare Complete Care (HMO D-SNP)	CO D-SNP	8,243	8,303
	Molina Medicare Complete Care Select (HMO D-SNP) – <i>Partial Duals Only</i>	CO D-SNP	1,685	1,677
	Total		9,928	9,980
UnitedHealth Group, Inc.	UHC Dual Complete MI-S001 (PPO D-SNP)	CO D-SNP	8,125	8,047
	UHC Dual Complete MI-S002 (HMO-POS D-SNP)	CO D-SNP	24,907	24,595
	UHC Dual Complete MI-V001 (HMO-POS D-SNP)	CO D-SNP	6,232	6,355
	UHC Dual Complete MI-S3 (HMO D-SNP)	CO D-SNP	8,062	8,585
	Total		47,326	47,582
Zing Health Consolidator, Inc.	Zing Dual Complete Select MI (HMO D-SNP)	CO D-SNP	242	246
	Zing Dual Complete Open Choice MI (PPO D-SNP)	CO D-SNP	120	118
	Total		362	364
D-SNP MARKET TOTAL			146,932	147,233

Source: CMS SNP Comprehensive Report –June 2025 and July 2025

Chronic Condition Special Needs Plan (C-SNP)

There are nine C-SNP plans in the Michigan market, offered by four parent organizations. **About 20,000 individuals are enrolled in Michigan's C-SNPs, a significant increase compared to the 8,713 enrolled in July 2024. HumanaChoice – Diabetes and Heart PPO has the highest number of enrollees (12,769).**

Parent Organization	C-SNP Plan Name	Specialty Diseases	June 2025 Enrollment	July 2025 Enrollment
Curana Health Holdings, LLC (Align Senior Care)	Align Kidney Care (HMO-POS)	ERSD	44	43
		Total	44	43
Humana Inc.	Humana Choice – Diabetes and Heart (PPO C-SNP)	Cardio Dis, CHF, Diabetes	12,272	12,529
	Humana Gold Plus – End Stage Renal Disease (HMO)	ERSD	231	240
		Total	12,503	12,769
UnitedHealth Group, Inc.	UHC Complete Care MI-3 (PPO)	Cardio Dis, CHF, Diabetes	2,282	2,488
	Erickson Advantage Champion (HMO-POS)	Cardio Dis, CHF, Diabetes	200	195
		Total	2,482	2,683
Zing Health Consolidator, Inc.	Zing Select Diabetes & Heart MI (HMO)	Cardio Dis, CHF, Diabetes	1,286	1,367
	Zing ERSD Select MI (HMO)	ERSD	82	90
	Zing Elite Diabetes & Heart MI (HMO)	Cardio Dis, CHF, Diabetes	1,005	1,070
	Zing Open Choice Diabetes & Heart MI (PPO)	Cardio Dis, CHF, Diabetes	2,254	2,356
		Total	4,627	4,883
C-SNP MARKET TOTAL			19,656	20,378

Source: CMS SNP Comprehensive Report – June 2025 and July 2025.

Institutional Special Needs Plan (I-SNP)

There are three parent organizations offering I-SNPs in Michigan with a total of 2,410 enrollees as of July 2025. This is an increase of 249 enrollees since July 2024. Longevity Health Plan has the most enrollees (1,304), followed by Senior Care (933).

Parent Organization	I-SNP Plan Name	June 2025 Enrollment	July 2025 Enrollment
Curana Health Holdings, LLC	Senior Care (HMO)	900	933
	Premier Care (HMO-POS)	16	16
	Total	916	949
Longevity Health Founders, LLC	Longevity Health Plan (HMO)	1,240	1,304
	Total	1,240	1,304
UnitedHealth Group, Inc.	Erickson Advantage Guardian (HMO-POS)	155	157
	Total	155	157
I-SNP MARKET TOTAL		2,311	2,410

Source: CMS SNP Comprehensive Report –June 2025 and July 2025

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 six new policies issued in July:

- [MMP 25-21](#), Graduate Medical Education (GME) Innovations Agreement Increases
- [MMP 25-22](#), Targeted Case Management- Recuperative Care - Updating Covered Plans,
- [MMP 25-23](#), Electronic Visit Verification (EVV) Requirements for Services Provided Outside the Home Help Client's Home
- [MMP 25-24](#), Clarification on Electronic Visit Verification (EVV) Home Health Care Service Visits
- [MMP 25-25](#), Allowable Costs
- [MMP 25-26](#), Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) Code Updates

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

- [2503-DMEPOS](#), Revisions to Blood Pressure Monitoring Policy
- [2520-MICH](#), New Medicaid Provider Manual Chapter for the MI Coordinated Health (MICH) Program

- [2521-LTC](#), Nursing Facility Ventilator-Dependent Care Unit (VDCU) Enrollment
- [2525-BCCHPS](#), Waiver for Children with Serious Emotional Disturbance Policy Updates
- [2528-Lab](#), Billing for Services Performed by Reference Laboratories Under Arrangement with Enrolled Independent Clinical Laboratories
- [2529-BH](#), Home and Community-Based Services (HCBS) Final Rule - Behavioral Health
- [2530-Hearing](#), Updates to Conventional Hearing Aid Battery Coverage and Reimbursement Rates
- [2531-BH](#), Behavioral Health Home Expansion and Authorization of Additional Staff
- [2534-Pharmacy](#), Removal of Pharmacy Copayment for Drugs Used to Prevent Human Immunodeficiency Virus (HIV) (Pre-Exposure Prophylaxis [PrEP] & Post-Exposure Prophylaxis [PEP])
- [2535-LTC](#), Nursing Facility Non-Available Bed Plan (NABP) Interim Policy
- [2539-Eligibility](#), Flint Water Group Eligibility Criteria Update

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

- [L 25-35](#), Expanded Coverage of Maternal Depression and/or Mental Health Screenings
- [L 25-37](#), Coverage of Licensed Midwifery Services
- [L 25-38](#), Substance Use Disorder Health Home
- [L 25-40](#), Clinic Services Benefit State Plan Amendment Template
- [L 25-41](#), Notice of Intent to Submit a Section 1915(b) Waiver Amendment Request for the Healthy Kids Dental (HKD) Program
- [L 25-42](#), Notice of Intent to Submit a Section 1915(b) Waiver Amendment Request for the Comprehensive Health Care Program (CHCP)
- [L 25-43](#), Notice of Intent to Submit a Section 1915(b) Waiver Amendment Request for the Healthy Kids Dental (HKD) Program
- [L 25-44](#), Notice of Intent to Submit a Section 1915(b) Waiver Amendment Request for the Comprehensive Health Care Program (CHCP)

HMA

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