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Table of Contents

MEDICAID MANAGED CARE ENROLLMENT ACTIVITY 3

MI HEALTH LINK..... 5

MICOORDINATED HEALTH – MICHIGAN'S HIDE – SNP 6

MEDICARE ADVANTAGE SPECIAL NEEDS PLANS 8

MEDICAID POLICIES 10



MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of September 1, 2025, there were **1,740,250 Medicaid managed care beneficiaries, including 543,815 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 2,814** since August 1, 2025. The number of HMP beneficiaries enrolled in HMOs **increased by 131** and the number of non-HMP beneficiaries **increased by 2,683**.

The total number of Medicaid beneficiaries, including Healthy Michigan Plan (HMP) beneficiaries enrolled in the nine Michigan Medicaid Plans year to date change from Sept 2024 to Sept 2025 is down by 43,277 and for HMP beneficiaries is 18,020 less than last year this time. 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.

	Sept 2024	Nov 2024	Jan 2025	Mar 2025	May 2025	Aug 2025	Sept 2025
All Medicaid Beneficiaries Enrolled	1,783,527	1,762,420	1,762,537	1,772,250	1,739,415	1,737,436	1,740,250
• Total HMP Enrollees	561,835	554,704	557,036	564,635	546,584	543,684	543,815
• Total CSHCS/Medicaid Enrollees	27,428	27,573	27,713	28,324	28,971	29,737	29,852
• Total Medicare/Medicaid Enrollees (Duals)	33,656	30,636	29,087	28,767	28,351	29,783	29,865
• Total MIChild Enrollees	55,477	59,379	61,457	63,371	63,650	62,789	63,760

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 2025, the number of mandatory but not yet enrolled beneficiaries was 75,655, which is 3,164 more than August 2025.**

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 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 September 2025 were Meridian Health Plan of Michigan with about 20 percent of the total (343,221 enrollees), Blue Cross Complete of Michigan with about 17



percent of the total number of enrollees (296,182), Molina Healthcare of Michigan with about 16 percent (285,730 enrollees), and UnitedHealthcare Community Plan with 15 percent (256,520 enrollees).

Healthy Michigan Plan (HMP)

The **total number of HMP enrollees in the Medicaid HMOs increased in September 2025 by 131 from August 2025 to 543,815**. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in September 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 **29,852 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in September 2025**, an increase of 115 since August 2025. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in September 2025 were Molina Healthcare of Michigan with about 21 percent, Priority Health Choice had about 19 percent of the total number of enrollees, Blue Cross Complete and Meridian Health Plan of Michigan each had about 16 percent.

MiChild

There were **63,760 MiChild beneficiaries enrolled in the Medicaid HMOs in September 2025**, an increase of 971 since August 2025. All Medicaid HMOs have MiChild beneficiaries enrolled, although the numbers vary dramatically across plans. The plans with the highest enrollment in September 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 **29,865 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in September 2025 in Medicaid HMOs** for their Medicaid benefits. The number of enrolled duals **increased by 82** between August 2025 and September 2025. All Medicaid HMOs have duals enrolled, although the numbers vary significantly across plans. UnitedHealthCare Community Plan had about 20 percent of the total number of enrollees, while Molina Healthcare of Michigan had about 19% and 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 September 2025, the MI Health Link enrollment total was 29,790**, a decrease of **530 enrollees** since August 2025.

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	Aug. 2025	Sept. 2025			
30,932	30,320	29,790			

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 2025**.

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		2,673	1,261	3,274	7,208
AmeriHealth Michigan			603	1,889	2,492
HAP CareSource			892	2,524	3,416
Meridian Health Plan of MI		2,132	660	1,701	4,493
Molina Healthcare of MI			1,647	6,607	8,254
Upper Peninsula Health Plan	3,927				3,927
Total	3,927	4,805	5,063	15,995	29,790



The plans with the highest enrollment in September 2025 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 15 percent of the total number of enrollees.

During September 2025, about 93 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.

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.

MICOORDINATED HEALTH – MICHIGAN'S HIDE – SNP

Michigan's MI Health Link will be phased out in January 2026 and replaced with the MICOordinated Health program (also known as MICH), Michigan's HIDE-SNP (Highly Integrated Dual Eligible Special Needs Plan). MICH will be available to individuals enrolled in both Medicare and Medicaid in all MIHealth Link regions, including Oakland County. Statewide expansion is expected in January 2027. MICH will cover all Medicare and most Medicaid benefits, excluding certain behavioral health services and some community transition services, but including long-term care services and supports.

The following regions will be included in the Jan. 1, 2026, launch:

- **Region 1 – Upper Peninsula Prosperity Alliance:** Upper Peninsula Health Plan, LLC.
- **Region 8 – Southwest Prosperity Region:** Aetna Better Health of Michigan Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc, UnitedHealthcare Community Plan, Inc.
- **Region 10 – Detroit Metro Prosperity Region – Macomb:** Aetna Better Health of Michigan Inc., AmeriHealth Michigan, Inc., HAP CareSource, Humana Medical Plan of Michigan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc., UnitedHealthcare Community Plan, Inc.
- **Region 10 – Detroit Metro Prosperity Region – Wayne:** Aetna Better Health of Michigan Inc., AmeriHealth Michigan, Inc., HAP CareSource, Humana Medical Plan of Michigan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc., UnitedHealthcare Community Plan, Inc.





The following regions will be included in the Jan. 1, 2027, launch:

- **Region 2 – Northwest Prosperity Region:** Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 3 – Northeast Prosperity Region:** Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 4 – West Michigan Prosperity Alliance:** Aetna Better Health of Michigan Inc.; Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 5 – East Central Michigan Prosperity Region:** Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 6 – East Michigan Prosperity Region:** Aetna Better Health of Michigan Inc.; HAP CareSource; Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 7 – South Central Prosperity Region:** Aetna Better Health of Michigan Inc.; HAP CareSource; Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 9 – Southeast Prosperity Region:** Aetna Better Health of Michigan Inc.; HAP CareSource; Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.
- **Region 10 – Detroit Metro Prosperity Region – Oakland:** Aetna Better Health of Michigan Inc.; AmeriHealth Michigan, Inc.; HAP CareSource; Humana Medical Plan of Michigan, Inc.; Meridian Health Plan of Michigan, Inc.; Molina Healthcare of Michigan, Inc.; Priority Health Choice, Inc.; UnitedHealthcare Community Plan, Inc.

MI Coordinated Health is the result of information gathered from the MI Health Link program combined with a robust stakeholder feedback process going back to 2022, which included surveys and feedback from beneficiaries, advocates, providers and health plans.





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 September 2025, there are a total of **171,282 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 September 2025, a total of 146,983 individuals are enrolled. UnitedHealth Group, Inc. currently has the largest D-SNP market share (48,517 enrollees), followed by Humana (44,601 enrollees) and CVS Health/Aetna (23,542 enrollees).

Only CO D-SNPs operate in Michigan. As previously stated, 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.

Parent Organization	D-SNP Plan Name	Integration Status	Aug 2025 Enrollment	Sept 2025 Enrollment
Centene Corporation	Wellcare Dual Access Open (PPO D-SNP)	CO D-SNP	3,671	3,594
	Wellcare Dual Access (HMO-POS D-SNP)	CO D-SNP	5,269	5,167
	Wellcare Dual Reserve (HMO-POS D-SNP) – <i>Partial Duals Only</i>	CO D-SNP	124	126
	Total		9,064	8,887
Corewell Health	PriorityMedicare D-SNP (HMO D-SNP)	CO D-SNP	8,517	8,424
	Total		8,517	8,424
CVS Health Corporation	Aetna Medicare Assure Premier (HMO D-SNP)	CO D-SNP	22,655	21,531
	Aetna Medicare Assure Premier (PPO D-SNP)	CO D-SNP	1,924	2,011





Parent Organization	D-SNP Plan Name	Integration Status	Aug 2025 Enrollment	Sept 2025 Enrollment
		Total	24,579	23,542
Henry Ford Health System	HAP Medicare Complete Assist (PPO D-SNP)	CO D-SNP	710	723
	HAP Medicare Complete Duals (HMO D-SNP)	CO D-SNP	1,890	1,893
	Total		2,600	2,616
Humana, Inc.	Humana Dual Select H5216-385 (PPO D-SNP)	CO D-SNP	9,150	8,968
	HumanaChoice SNP-DE H5216-388 (PPO D-SNP)	CO D-SNP	13,904	13,872
	Humana Gold Plus SNP-DE H8908-005 (HMO D-SNP)	CO D-SNP	18,853	18,894
	Humana Gold Plus SNP-DE H8908-007 (HMO D-SNP)	CO D-SNP	2,799	2,867
	Total		44,706	44,601
Molina Healthcare, Inc.	Molina Medicare Complete Care (HMO D-SNP)	CO D-SNP	8,376	8,379
	Molina Medicare Complete Care Select (HMO D-SNP) – <i>Partial Duals Only</i>	CO D-SNP	1,666	1,651
	Total		10,042	10,030
UnitedHealth Group, Inc.	UHC Dual Complete MI-S001 (PPO D-SNP)	CO D-SNP	8,041	7,902
	UHC Dual Complete MI-S002 (HMO-POS D-SNP)	CO D-SNP	24,581	24,554
	UHC Dual Complete MI-V001 (HMO-POS D-SNP)	CO D-SNP	6,470	6,438
	UHC Dual Complete MI-S3 (HMO D-SNP)	CO D-SNP	9,005	9,623
	Total		48,097	48,517
Zing Health Consolidator, Inc.	Zing Dual Complete Select MI (HMO D-SNP)	CO D-SNP	248	254
	Zing Dual Complete Open Choice MI (PPO D-SNP)	CO D-SNP	115	112
	Total		363	366
D-SNP MARKET TOTAL			147,968	146,983

Source: CMS SNP Comprehensive Report –August 2025 and September 2025

Chronic Condition Special Needs Plan (C-SNP)

There are nine C-SNP plans in the Michigan market, offered by four parent organizations. **About 22,000 individuals are enrolled in Michigan’s C-SNPs. HumanaChoice – Diabetes and Heart PPO has the highest number of enrollees (13,124).**

Parent Organization	C-SNP Plan Name	Specialty Diseases	Aug 2025 Enrollment	Sept 2025 Enrollment
Curana Health Holdings, LLC (Align Senior Care)	Align Kidney Care (HMO-POS)	ERSD	42	39
	Total		42	39
Humana Inc.	Humana Choice – Diabetes and Heart (PPO C-SNP)	Cardio Dis, CHF, Diabetes	12,697	13,124
	Humana Gold Plus – End Stage Renal Disease (HMO)	ERSD	265	293
	Total		12,962	13,417
UnitedHealth Group, Inc.	UHC Complete Care MI-3 (PPO)	Cardio Dis, CHF, Diabetes	2,639	2,911





Parent Organization	C-SNP Plan Name	Specialty Diseases	Aug 2025 Enrollment	Sept 2025 Enrollment
	Erickson Advantage Champion (HMO-POS)	Cardio Dis, CHF, Diabetes	195	189
	Total		2,834	3,100
Zing Health Consolidator, Inc.	Zing Select Diabetes & Heart MI (HMO)	Cardio Dis, CHF, Diabetes	1,493	1,662
	Zing ERSD Select MI (HMO)	ERSD	91	111
	Zing Elite Diabetes & Heart MI (HMO)	Cardio Dis, CHF, Diabetes	1,184	1,324
	Zing Open Choice Diabetes & Heart MI (PPO)	Cardio Dis, CHF, Diabetes	2,269	2,205
	Total		5,037	5,302
C-SNP MARKET TOTAL			20,875	21,858

Source: CMS SNP Comprehensive Report –August 2025 and September 2025

Institutional Special Needs Plan (I-SNP)

There are three parent organizations offering I-SNPs in Michigan with a total of 2,441 enrollees as of September 2025. Longevity Health Plan has the most enrollees (1,270), followed by Senior Care (996).

Parent Organization	I-SNP Plan Name	Aug 2025 Enrollment	Sept 2025 Enrollment
Curana Health Holdings, LLC	Senior Care (HMO)	970	996
	Premier Care (HMO-POS)	14	17
	Total		984
Longevity Health Founders, LLC	Longevity Health Plan (HMO)	1,255	1,270
	Total		1,255
UnitedHealth Group, Inc.	Erickson Advantage Guardian (HMO-POS)	158	158
	Total		158
I-SNP MARKET TOTAL		2,397	2,441

Source: CMS SNP Comprehensive Report –August 2025 and September 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 18 new policies issued since our last newsletter.

- [MMP 25-28](#), Children’s Waiver Program
- [MMP 25-29](#), Nursing Facility Receivership





- [MMP 25-30](#), Timely Submission of Medicaid Cost Reports; Payment Suspension
- [MMP 25-31](#), Derek Waskul, et al. v. Washtenaw County Community Mental Health, et al. Settlement Agreement
- [MMP 25-32](#), Independent Clinical Laboratories, Medicaid Health Plans, Integrated Care Organizations
- [MMP 25-33](#), Flint Water Group Eligibility Criteria Update
- [MMP 25-34](#), Nursing Facility Ventilator-Dependent Care Unit (VDCU) Enrollment
- [MMP 25-35](#), Nursing Facility Non-Available Bed Plan (NABP) Interim Policy
- [MMP 25-36](#), Revision to Requirements for the Use of the Michigan Child and Adolescent Needs and Strengths (MichiCANS) Screener and Comprehensive
- [MMP 25-37](#), Waiver for Children with Serious Emotional Disturbance Policy Updates
- [MMP 25-38](#), Parent Support Partner
- [MMP 25-39](#), Behavioral Health Home Expansion and Authorization of Additional Staff
- [MMP 25-40](#), Updates to the MDHHS Medicaid Provider Manual; Behavioral and Physical Health and Aging Services Administration (BPHASA) Reorganized and Renamed Health Services
- [MMP 25-41](#), Policy Updates Related to Establishing Self-Directed Budgeting for Habilitation Supports Waiver (HSW) Self-Directed Service Arrangements for Community Living Supports (CLS)
- [MMP 25-42](#), Full Recission of Bulletin MMP 25-20 Intensive Crisis Stabilization Services
- [MMP 25-43](#), Updates to Conventional Hearing Aid Battery Coverage and Reimbursement Rates
- [MMP 25-44](#), Removal of Pharmacy Copayment for Drugs Used to Prevent Human Immunodeficiency Virus (HIV) (Pre-Exposure Prophylaxis [PrEP] & Post-Exposure Prophylaxis [PEP])
- [MMP 25-45](#), Updates to the Private Duty Nursing Benefit for Early and Periodic Screening, Diagnosis and Treatment

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

- [2537-BH](#), Policy Updates Related to Establishing Self-Directed Budgeting for Habilitation Supports Waiver (HSW) Self-Directed Service Arrangements for Community Living Supports (CLS)
- [2532-BH](#), Substance Use Disorder Health Home
- [2540-DMEPOS](#), Coverage Changes to Intermittent Urinary Catheters
- [2542-Maternal](#), Expanded Coverage of Maternal Depression and/or Mental Health Screenings





- [2541-Eligibility](#), Group Composition for Supplemental Security Income (SSI)-Related Medicaid Categories
- [2522-Hospital](#), Reimbursement to Hospitals Outside Michigan

MDHHS released 10 Medicaid Provider L-letters of potential interest in September, per their [website](#).

- [L 25-39](#), Submission of Amendment to the §1915(i) State Plan Amendment (SPA)
- [L 25-47](#), Reiterating the Calendar Year (CY) 2022 Changes to the Quality Assurance Supplemental (QAS) Calculation and Payment Methodology for MI Health Link (MHL)
- [L 25-49](#), State Plan Amendment (SPA) for Flint Water Settlements
- [L 25-50](#), Electronic Funds Transfer (EFT) Enrollment Requirement for Pharmacy Payments
- [L 25-51](#), Clarification on the Adoption of Level of Care Determinations
- [L 25-53](#), Reimbursement Methodology for Speech and Oral Function Therapy - Language Correction State Plan Amendment
- [L 25-54](#), Permanent Continuation of Medication Assisted Treatment (MAT) Coverage State Plan Amendment (SPA) Request
- [L 25-55](#), State Plan Amendment to Increase Incontinence Volume Purchase Contract Rates
- [L 25-56](#), Section 1115 Waiver Extension Request to Assist in Addressing Health Impacts from Potential Lead Exposure in Flint, Michigan
- [L 25-57](#), Ground Emergency Medical Transportation (GEMT) Reimbursement Methodology for Supplemental Payment





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