

HEALTH MANAGEMENT ASSOCIATES

THE **MICHIGAN UPDATE** 2021



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MEDICAID MANAGED CARE ENROLLMENT ACTIVITY

As of December 1, 2021, there were **2,186,670 Medicaid beneficiaries, including 762,001 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 9,037** since November 1, 2021. The number of HMP beneficiaries enrolled in HMOs increased by 2,114 and the number of non-HMP beneficiaries increased by 6,923. As the table below illustrates, **managed care enrollment has grown significantly** over the last year and is **143,986 higher in December 2021 than in December 2020**.

The count of HMP beneficiaries enrolled in the nine Michigan Medicaid Health Plans (HMOs) in December 2021 is **73,533 higher** than in December 2020. 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 requirement that the Michigan Department of Health and Human Services (MDHHS) to temporarily discontinue annual eligibility redeterminations and case closures.

	Dec. 2020	Feb. 2021	Apr. 2021	June 2021	Aug 2021	Nov. 2021	Dec. 2021
All Medicaid Beneficiaries Enrolled	2,042,684	2,084,595	2,118,939	2,145,957	2,173,539	2,177,633	2,186,670
• Total HMP Enrollees	688,468	718,103	735,650	750,313	762,608	759,887	762,001
• Total CSHCS/ Medicaid Enrollees	26,469	26,851	26,741	26,600	26,125	26,134	26,233
• Total Medicare/ Medicaid Enrollees (Duals)	45,244	45,642	46,327	47,199	47,837	48,508	48,638
• Total MIChild Enrollees	35,747	35,052	35,421	35,725	36,807	36,211	36,103

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 45,305 in July 2018 to a high of 149,746 in May 2020. **In December 2021 the number of mandatory but not yet enrolled beneficiaries was 52,911** up from 49,641 in November 2021.

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 2021 were Meridian Health Plan of Michigan with about 25 percent of the total, Molina Healthcare of Michigan with about 18 percent, Blue Cross Complete of Michigan with about 15 percent of the total number of enrollees, and UnitedHealthcare Community Plan with about 14 percent.

Healthy Michigan Plan (HMP)

The **total count of HMP enrollees in the Medicaid HMOs in December 2021 was 762,001 an increase of 2,114** over the count for November 2021. All Medicaid HMOs have HMP beneficiaries enrolled, although the numbers vary across plans. The plans with the highest HMP enrollment in December 2021 were Meridian Health Plan of Michigan with about 24 percent of the total, Blue Cross Complete with about 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 **26,233 joint CSHCS/Medicaid beneficiaries enrolled in the Medicaid HMOs in December 2021**, an increase of **99** since November 2021. All Medicaid HMOs have CSHCS/Medicaid enrollees, although the numbers vary across plans. The plans with the highest enrollment in December 2021 were Meridian Health Plan of Michigan with about 22 percent of the total, Molina Healthcare of Michigan with about 20 percent, and Blue Cross Complete with about 16 percent of the total number of enrollees.

MiChild

There were **36,103 MiChild beneficiaries enrolled in the Medicaid HMOs in December 2021**, a decrease of 108 since November 2021. 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 26 percent of the total, Molina Healthcare of Michigan with about 15 percent, and Blue Cross Complete with about 14 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 **48,638 Medicaid beneficiaries dually eligible for Medicare (duals) enrolled in December 2021 in Medicaid HMOs** for their acute care Medicaid benefits. The number of enrolled duals **increased by 130** between November 2021 and December 2021. All Medicaid HMOs have duals enrolled, although





the numbers vary significantly across plans. The plans with the highest enrollment in December 2021 were Meridian Health Plan of Michigan with about 30 percent of the total, Molina Healthcare of Michigan with about 21 percent, and UnitedHealthCare Community Plan with about 15 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 2021, the MI Health Link enrollment total was 41, 250**, a decrease of **262** enrollees since November 2021.

The tables below illustrate MI Health Link enrollment by month from 2019 to the most current data. Enrollment fluctuations are clear although there is a consistent upward trend. The lowest enrollment count on the tables was in May 2019 when there were 33,095 enrollees; and the highest enrollment was in September 2021 with 41,941 enrollees.

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

Jan. 2021	Feb. 2021	March 2021	April 2021	May 2021	June 2021
39,250	39,374	39,150	39,934	39,958	40,015
July 2021	Aug. 2021	Sept. 2021	Oct. 2021	Nov. 2021	Dec. 2021
40,260	40,294	41,941	41,317	41,512	41,250





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 2021**.

MI Health Link Enrollment	Upper Peninsula Region	SW MI Region	Macomb Region	Wayne Region	Total
Aetna Better Health of MI		3,256	1,041	3,696	7,993
AmeriHealth Michigan			702	2,355	3,057
HAP Empowered, Inc.			1,058	3,366	4,424
Meridian Health Plan of MI		5,102			5,102
MI Complete Health			958	2,588	3,546
Molina Healthcare of MI			2,251	10,447	12,698
Upper Peninsula Health Plan	4,430				4,430
Total	4,430	8,358	6,010	22,452	41,250

The plans with the highest enrollment in December 2021 were Molina Healthcare of Michigan with about 31 percent of the total, Aetna Better Health of Michigan with about 19 percent, and Meridian Health Plan of Michigan with about 12 percent of the total number of enrollees.

During December 2021, about 95 percent of the MI Health Link enrollees were living in a community setting, and the remaining 5 percent of enrollees resided in a facility. About 6 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 facilities, including nursing facilities, Aetna Better Health of Michigan had the largest share during December 2021; about 23 percent of those enrollees in a facility residing in facilities were part of Aetna. Molina Healthcare of Michigan had about 19 percent of those enrollees in a facility during November 2021, and Upper Peninsula Health Plan had about 17 percent.

Most 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 2021, about 19 percent of the demonstration’s participants were voluntarily enrolled.

MDHHS also reports that 54,699 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 all are available in Michigan.

Meridian Health Plan of Michigan is offering a C-SNP focused on Medicare beneficiaries with diabetes and had 84 Medicare enrollees in December 2021. Align Senior Care Michigan is offering a C-SNP focused on beneficiaries with dementia and had 14 enrollees in December 2021. Zing Health of Michigan began offering a C-SNP in January 2021 focused on beneficiaries with Cardiovascular Disorders, Chronic Heart Failure, and/or Diabetes and had 67 enrollees in December 2021. Align is also offering an I-SNP and had 103 enrollees in December 2021. Longevity Health Plan of Michigan is also offering an I-SNP and had 220 enrollees in December 2021.

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, 2021, these four D-SNPs had a combined enrollment of 48,804 duals** for whom they provide Medicare services.

About 32 percent of the duals enrolled in a Michigan D-SNP (15,582 individuals) in December 2021 were enrolled with Meridian; about 30 percent (14,737 individuals) were enrolled with Molina; about 24 percent (11,878 individuals) were enrolled with UnitedHealthcare; and about 14 percent (6,607 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, four additional D-SNPs serve Michigan. Humana Medical/Dental Plan and Health Alliance Plan (HAP) of Michigan were serving enrollees in 2020; and Aetna Health of Michigan, and Reliance Medicare Advantage were new to Michigan in January 2021. Humana had 21,732 enrollees in December 2021, Aetna had 1,874 enrollees, HAP had 422 enrollees, and Reliance had 180 enrollees. These enrollment totals are not counted in the aforementioned statistics because they are not Medicaid-contracted health plans. HAP is the parent organization for HAP Empowered Health Plan and Aetna Health of Michigan is the parent organization for Aetna Better Health of Michigan, both of which are Michigan Medicaid HMOs and 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 **970,372 as of December 27, 2021**, the last counting day of the month. **This is an increase of 9,083 since November 29, 2021. The enrollment count for December 27, 2021 is the highest ever for the program.**

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 seven final policies issued since our last newsletter.

- MSA 21-53 issued December 17, 2021: Program of All-inclusive Care for the Elderly (PACE) Encounters and Provider Enrollment
- MSA 21-48 issued December 2, 2021: Revisions to the MI Choice Waiver Chapter of the Medicaid Provider Manual
- MSA 21-49 issued December 1, 2021: Pharmacy Coverage of Anti-obesity Drug Products
- MSA 21-47 issued December 1, 2021: Clinic Attending Provider Update
- MSA 21-46 issued December 1, 2021: Addition of a Hepatitis C Virus (HCV) Infection Screening Recommendation per the 2021 American Academy of Pediatrics (AAP) Periodicity Schedule
- MSA 21-45 issued December 1, 2021: Updates to the Medicaid Provider Manual; Change to Attending/Ordering/Referring Claim Editing; Changes to the MDHHS Medical Services Administration
- MSA 21-44 issued December 1, 2021: Removal of Radiograph Requirement for Partial Dentures

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

- 2149-HH Electronic Service Verification Changes Affecting Payment
- 2130-CSHCS Children's Special Health Care Services (CSHCS) Non-Emergency Medical Transportation (NEMT)
- 2146-Pharmacy Pharmacy Coverage of Anti-obesity Drug Products
- 2143-Lab COVID-19 Response: Updates to COVID-19 Testing Coverage



In addition, MDHHS released four L-letters of potential interest, which are available for review on the same [website](#).

- L 21-85, Issued December 15, 2021 COVID-19 Response: Policy for COVID-Relief Facilities (CRFs) to Treat COVID-19 Residents Requiring Nursing Facility (NF) Care in Limited Circumstances Nursing Facilities
- L 21-79, Issued December 7, 2021 Private Duty Nursing (PDN) Reimbursement Change Private Duty Nursing
- L 21-83, Issued December 2, 2021 Michigan Department of Health and Human Services (MDHHS) Response to Address the COVID-19 Public Health Emergency - October and November 2021 Tribal Chairs and Health Directors
- L 21-80, Issued December 2, 2021 Medicaid Response to the Medicare Part B Home Infusion Therapy Benefit Hospitals, Home Health, DME Providers, Pharmacy, Practitioners, Medicaid Health Plans

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