

## New York

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## 1. MANAGED CARE OPPORTUNITY ASSESSMENT (8-22-24)

New York is one of the nation's largest and most complex Medicaid markets, with about 7.1 million members enrolled across five distinct programs as of January 2024. The state does not have a competitive procurement process for its comprehensive Medicaid managed care program, enabling all eligible plans to participate. While mandatory managed care has been a part of the New York Medicaid landscape for years, it was not until 2011 that the state decided to transition its remaining fee-for-service members into health plans. Across all programs, there are currently 38 plans in the Medicaid managed care market.

Separately, in 2016 the state launched a Basic Health Program (BHP) through the New York State Department of Health. The BHP provides affordable health insurance to low-income individuals who earn too much to qualify for Medicaid but not enough to afford private insurance plans through the marketplace. This helps bridge the coverage gap for those who are often left without adequate options.

Regarding the managed care plan landscape, in January 2020, Centene completed the acquisition of WellCare, which has previously expanded its Medicaid managed care, Child Health Plus, and Essential Plan coverage into three more counties – Broome, Richmond, and Suffolk – in April 2019. Centene completed its acquisition of not-for-profit Fidelis Care for \$3.75 billion in July 2018. Fidelis Care is the largest Medicaid managed care plan in New York, with 1.7 million lives as of January 2024. The transition marked a significant shift in New York to for-profit Medicaid managed care.

Crystal Run exited the Medicaid market in New York in March 2019. Organizations exiting the managed long-term care (MLTC) program since 2016 have included North Shore LIJ, GuildNet and Independence Care System, and Fallon Health Weinberg. Elevance Health is expected to purchase MLTC Centers Plan for Health Living, and affiliate Centers for Specialty Care Group in the third quarter of 2024.

*Section 1115 Demonstration:* In January 2024, New York received federal approval for its Medicaid Redesign Team (MRT) Section 1115 demonstration amendment which aims to support health equity measures, address health-related social needs, and strengthen access to primary and behavioral health care. New York's Medicaid Redesign Team Section 1115 pilot program took effect in August 2024. Federal officials declined to renew the state's prior iteration of the 1115 demonstration, the Delivery System Reform Incentive Payment (DSRIP) program, and DSRIP expired in March 2020.

Nine social care networks administering the MRT pilot program are receiving \$500 million in contracts from the state. The three-year, \$7.5 billion demonstration, which runs through March 2027, is expected to screen the state's 7 million Medicaid members for social determinants of health and provide services to address their housing, nutrition and transportation needs.

The MRT demonstration program offers significant opportunities for managed care plans because of the investments permitted while also strengthening federal expectations impacting the state and plans. The state will require managed care plans to have made significant movement towards value-based payment (VBP) strategies, multi-payor alignment, and improved care coordination. The waiver also permits dual eligibles who enroll in a Medicare Advantage Dual Eligible Special Needs Plan (D-SNP) to stay enrolled in a mainstream Medicaid managed care plan in certain situations.

*New York has several behavioral health initiatives:* A Health and Recovery Plan (HARP) product for people with serious mental illness and/or substance use disorder and a separate managed mental health carve-in began in New York City in October 2015 and was rolled out statewide July 1, 2016, with a total of 13 HARP plans serving the market. In July 2016, behavioral health services for children, children's home and community-based services, and children in Voluntary Foster Care Agencies were carved into Medicaid managed care in New York City and Long Island, and the transition for the rest of the state was delayed to July 2021. In December 2016, New York included health home payments for both children and adults in MCO capitation rates. In 2017, the state launched the Critical Intervention Teams, a program that aims to reduce hospital admissions, visits to emergency rooms,

and standardize behavioral health hospitalizations.

New York released in March 2024, a request for information (RFI) seeking interest from vendors to operate a Self-directed Care program providing support broker and fiscal intermediary services to Health and Recovery Plan (HARP) enrollees and HARP-eligible HIV Special Needs Plan enrollees. Interested vendors would be required to recruit HARP members to participate in a pilot program, hire and train support brokers, support program participants in reaching their recovery goals, designate a fiscal intermediary to manage funds, and provide self-directed care to a minimum of 100 individuals in the specified geographic region.

In March 2024, the state released a request for proposals (RFP) for the development of 13 new Certified Community Behavioral Health Clinics (CCBHCs) to operate within ten economic development regions to further develop an integrated behavioral health treatment system. Each awardee will implement the full CCBHC model, including all nine required behavioral health services. The state currently has 13 CCBHCs and plans to have 39 by 2025. Awarded agencies will receive one-time startup funds in the amount of \$265,000 which must be spent by June 30, 2026. Awards are expected August 7. The contract start date is October 1, 2024, with CCBHCs to be operational July 1, 2025.

*Medicare-Medicaid Dually Eligible and LTSS Populations:* New York phased out its Medicaid Advantage program in December 2021 and its Fully Integrated Duals Advantage (FIDA) Demonstration in December 2019. New York moved all FIDA enrollees into Medicaid Advantage Plus (MAP) plans. The FIDA-IDD program, which began on April 2016, expanded on the FIDA demonstration and provides more coordinated care for people with intellectual and developmental disabilities. As of January 2023, the state carved in behavioral health services into the Medicaid Advantage Plus (MAP) Plan benefit package.

New York released in June 2024, a request for proposals (RFP) seeking a single statewide fiscal intermediary services vendor for the Consumer Directed Personal Assistance Program (CDPAP), which provides daily living or skilled nursing services to chronically ill or physically disabled individuals with a medical need. Currently, the state has more than 600 fiscal intermediaries that handle billing and human resource concerns. Following the release, several companies have filed a lawsuit against the New York State Department of Health and its Commissioner to block the procurement. The lawsuits claims that the requirements for an incoming administrator are designed to exclude all qualified vendors in New York and will jeopardize services for individuals enrolled in the program.

New York implemented health homes for individuals with intellectual and developmental disabilities (IDD), known as People First Care Coordination Organization Health Homes (CCO/HHs) in July 2018. The program is the foundation for the transition to managed care for this population. The state transitioned individuals in the Nursing Home Transition and Diversion and the Traumatic Brain Injury waiver programs into Medicaid managed care in January 1, 2018. The New York legislature is currently considering a bill that would remove home care services from Medicaid managed care and transition payments to a fee-for-service model, shifting home care management from the state's 24 managed care plans to Health Homes.

## HMA Managed Medicaid Opportunity Assessment for New York

HMA Managed Medicaid Opportunity Assessment for New York	
Positive Metrics	Strong Indicators
<ul style="list-style-type: none"> <li>New York contracts with 38 Medicaid managed care plans.</li> </ul>	<ul style="list-style-type: none"> <li>New York's Section 1115 MRT Demonstration includes four initiatives with a total of up to \$6.69 billion in federal funding. The initiatives include HRSN, HERO, Medicaid Hospital Global Budgets, and Strengthen the Workforce.</li> </ul>
Negative Metrics	Weak Indicators
<ul style="list-style-type: none"> <li>New York disenrolled approximately 1.4 million Medicaid enrollees from June 2023 through February 2024.</li> </ul>	<ul style="list-style-type: none"> <li>Governor Kathy Hochul proposed that the state institute a competitive bidding process for Medicaid managed care contracts and limit the number of plans permitted to operate per geographic region.</li> </ul>
<p><i>Source: HMA</i></p>	

### Hot Topics:

Governor Kathy Hochul proposed that the state institute a competitive bidding process for Medicaid managed care contracts and limit the number of plans permitted to operate per geographic region in her fiscal 2025 budget proposal.

New York State submitted to the Centers for Medicare & Medicaid Services an updated application for a Section 1332 Innovation Waiver for the state's Essential Plan to provide coverage to residents with income between 200 and 250 percent of the federal poverty level. The state proposes to revise the Essential Plan start date to April 1, 2024, at the earliest. The updated application also would eliminate the earlier proposal for a \$15 monthly member premium for the Essential Plan expansion group.

New York legislators are proposing a Medicaid managed care organization (MCO) tax that would generate additional federal matching dollars for the state's Medicaid program. Specifically, the proposal would require MCOs to pay a tax to the state, which the state would use to draw down federal funds, a portion of which would be used to increase rates

## New York Medicaid Managed Care Programs

Carved In (Y/N)

Program	Population	Behavioral	LTSS	Pharmacy
NY Medicaid Managed Care	<ul style="list-style-type: none"> <li>• Most Medicaid covered adults, children, and pregnant women</li> </ul>	Y	N	N
Managed Long Term Care	<ul style="list-style-type: none"> <li>• Medicaid recipients who are eligible for admission to nursing homes</li> </ul>	N	Y	Y
Medicaid Advantage Plus	<ul style="list-style-type: none"> <li>• Dual eligibles who need health services and community-based long-term services and supports</li> </ul>	Y	Y	Y
Health and Recovery Plan (HARP)	<ul style="list-style-type: none"> <li>• Individuals with serious mental illness and/or substance use disorders</li> </ul>	Y	Y	N
Fully Integrated Duals Advantage - Intellectual and Developmental Disabilities (FIDA-IDD)	<ul style="list-style-type: none"> <li>• Medicare and Medicaid program for adults with intellectual and developmental disabilities</li> </ul>	Y	Y	N
CHIP	<ul style="list-style-type: none"> <li>• Eligible Children under the age of 19</li> </ul>	Y	N	Y

## 2. MEDICAID MANAGED CARE PLAN FINANCIALS

Average medical loss ratio among ten New York Medicaid plans was 88.7% in 2022. Per member per month premiums were \$644.

(Note: Financial metrics and comparisons presented in this overview are based on health plan NAIC filings in the state. Measures like per member per month premiums and medical loss ratios may vary greatly by plan and by state depending on the mix of business (e.g., TANF, ABD, etc.), scope of the state's Medicaid benefit package, geographic variations in the cost of care, and other factors. Furthermore, New York's three largest Medicaid plans – Fidelis Care/Centene, HealthFirst and MetroPlus – aren't required to file financials with NAIC. These three plans combined account for about half of Medicaid managed care membership in the state. Thus, the financials presented here only provide a limited view of the New York Medicaid market).

### New York Medicaid Managed Care Plan Financials,<sup>(1)</sup> 2022

Plan	Publicly Traded	Enrollment	Member Months	PMPM	Premiums Earned (000)	Medical Costs (000)	MLR <sup>(3)</sup>
<b>Mainstream Medicaid Managed Care</b>							
CDPHP	N	129,514	1,503,939	\$518.03	\$779,087	\$744,979	95.1%
EmblemHealth/HIP of Greater NY <sup>(2)</sup>	N	249,584	2,844,982	\$580.69	\$1,652,054	\$1,435,513	86.9%
Excellus Health Plan Inc.	N	245,688	2,874,612	\$495.63	\$1,424,748	\$1,284,544	89.7%
Highmark/HealthNow New York Inc.	N	57,661	664,257	\$532.65	\$353,816	\$333,890	94.4%
Independent Health Assn. <sup>(2)</sup>	N	80,665	941,225	\$558.20	\$525,388	\$464,994	89.1%
MVP Health Care Inc.	N	245,957	2,885,310	\$570.00	\$1,644,613	\$1,481,520	90.1%
UnitedHealth Group Inc. <sup>(2)</sup>	Y	382,838	4,610,144	\$504.27	\$2,324,755	\$2,013,575	86.6%
<b>Managed Long-Term Care</b>							
Elderplan	N	19,880	213,896	\$4,732.50	\$1,012,264	\$846,426	83.1%
iCircle <sup>(4)</sup>	N	3,488	42,248	\$3,308.72	\$139,787	\$120,509	84.0%
Molina/Senior Whole Health	Y	26,112	201,638	\$4,758.82	\$959,559	\$880,630	91.8%
<b>Total, NY plans</b>		<b>1,441,387</b>	<b>16,782,251</b>	<b>\$644.49</b>	<b>\$10,816,070</b>	<b>\$9,606,579</b>	<b>88.7%</b>

(1) New York's three largest Medicaid plans – Fidelis Care/NY Catholic Health Plan, HealthFirst and MetroPlus – are not required to file financials with NAIC. These three plans combined account for more than half of Medicaid managed care membership in the state. Thus, the financials presented here only provide a limited view of the New York Medicaid market.

(2) Includes both mainstream Medicaid managed care and managed long-term care product.

(3) After reinsurance recoveries.

(4) Premiums reflect premiums written

Source: S&P Global Market Intelligence, NAIC, HMA

## New York Medicaid Managed Care Plan Financials,<sup>(1)</sup> 2021

Plan	Publicly Traded	Enrollment	Member Months	PMPM	Premiums Earned (000)	Medical Costs (000)	MLR <sup>(3)</sup>
<b>Mainstream Medicaid Managed Care</b>							
CDPHP	N	118,892	1,374,211	\$499.73	\$686,732	\$660,354	95.4%
EmblemHealth/HIP of Greater NY <sup>(2)</sup>	N	221,690	2,503,939	\$559.17	\$1,400,117	\$1,290,875	92.2%
Excelsus Health Plan Inc.	N	232,018	2,694,626	\$473.31	\$1,275,390	\$1,193,420	93.0%
Highmark/HealthNow New York Inc.	N	52,345	583,280	\$522.78	\$304,925	\$286,127	93.8%
Independent Health Assn. <sup>(2)</sup>	N	75,507	888,634	\$517.84	\$460,167	\$426,234	92.0%
MVP Health Care Inc.	N	233,403	2,724,324	\$541.55	\$1,475,367	\$1,391,546	94.3%
UnitedHealth Group Inc. <sup>(2)</sup>	Y	408,136	4,789,801	\$499.85	\$2,394,188	\$2,150,800	89.8%
<b>Managed Long-Term Care</b>							
Elderplan	N	16,493	197,390	\$4,630.53	\$914,021	\$738,691	80.4%
iCircle <sup>(4)</sup>	N	3,594	44,458	\$3,332.40	\$148,152	\$103,666	67.7%
Molina/Senior Whole Health	Y	13,490	161,462	\$4,429.71	\$715,230	\$614,058	85.9%
<b>Total, NY plans</b>		<b>1,375,568</b>	<b>15,962,125</b>	<b>\$612.34</b>	<b>\$9,774,289</b>	<b>\$8,855,772</b>	<b>90.3%</b>

(1) New York's three largest Medicaid plans – Fidelis Care/NY Catholic Health Plan, HealthFirst and MetroPlus – are not required to file financials with NAIC. These three plans combined account for more than half of Medicaid managed care membership in the state. Thus, the financials presented here only provide a limited view of the New York Medicaid market.

(2) Includes both mainstream Medicaid managed care and managed long-term care product.

(3) After reinsurance recoveries.

(4) Premiums reflect premiums written

Source: S&P Global Market Intelligence, NAIC, HMA

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### 3. RFP DEVELOPMENTS AND ANALYSIS

New York released in June 2024, a request for proposals (RFP) seeking a single statewide fiscal intermediary services vendor for the Consumer Directed Personal Assistance Program (CDPAP), which provides daily living or skilled nursing services to chronically ill or physically disabled individuals with a medical need. Currently, the state has more than 600 fiscal intermediaries that handle billing and human resource concerns. Proposals are due August 2, 2024. The contract is anticipated to begin October 1, 2024, and will run for five years

While New York does not undergo a competitive bidding process for its comprehensive managed care program, the state’s Section 1115 MRT Demonstration includes contractual requirements for MCOs to address SDOH. MCOs must implement strategies that promote health equity and reduce disparities in care, including housing, food insecurity, and access to transportation.

New York Medicaid Application Calendar		
Contract	Key Deadlines	# of Beneficiaries
Statewide fiscal intermediary services vendor for the Consumer Directed Personal Assistance Program (CDPAP)	RFP Released: June 17, 2024 Proposals Due: August 2, 2024 Implementation: October 1, 2024	~250,000

*Source: NY State Department of Health, HMA*



## 4. MEDICAID MANAGED CARE ENROLLMENT UPDATE

New York Medicaid managed care enrollment – including mainstream MCOs, MLTC, Medicaid Advantage Plus, HARP, and FIDA-IDD – was down 1.8% at 5.5 million in January 2024 compared to year-end 2023, after a 6.5% decrease in 2023, a 4.6% increase in 2022, a 6% increase in 2021, a 16.3% increase in 2020.

Anthem acquired Integra in May 2022. Molina Healthcare acquired AgeWell’s MLTC business in 2022 and Affinity Health Plan in October 2021. In January 2020, Centene acquired WellCare after previously acquiring Fidelis Care in July 2018. WellCare had previously expanded Medicaid managed care, Child Health Plus, and Essential Plan coverage into three more counties – Broome, Richmond, and Suffolk – in 2019. Fidelis Care is the largest Medicaid managed care plan in New York, with 1.7 million lives. Crystal Run announced in March 2019, that they would exit the managed care market due to the ACA’s faulty risk-adjustment methodology. In August 2016, Molina acquired Universal American’s Total Care Medicaid plan. In November 2015, Independent Health announced that it would exit the Medicaid program in Niagara County, citing \$18 million in losses during the prior three years.

New York Child Health Plus (CHIP) managed care enrollment was up 2.8% in January 2024 compared to year-end 2023, after increasing 19% in 2022; decreasing 4.1% in 2022, 3% in 2021, and 4.5% in 2020; and increasing 9.4% in 2019, 8.1% in 2018, 12.9% in 2017, and 15.7% in 2016.

North Shore LIJ closed its Medicaid managed long term care (MLTC) plan at the end of 2017. In January 2016, EmblemHealth exited the state’s MLTC program. GuildNet took on EmblemHealth’s 1,300 MLTC members but notified its members in March 2017 that it would no longer offer MLTC services in Nassau, Suffolk, and Westchester counties.

### Enrollment in New York Medicaid Managed Care, 2012-23, January 2024

Plan Name	2020	2021	2022	2023	Jan-24
<b>Total New York</b>	<b>5,378,218</b>	<b>5,700,708</b>	<b>5,961,782</b>	<b>5,575,661</b>	<b>5,476,952</b>
<i>+/- between reporting periods</i>	754,262	322,490	261,074	(386,121)	(98,709)
<i>% chg. between reporting periods</i>	16.3%	6.0%	4.6%	-6.5%	-1.8%
<b>Totals by Program</b>					
Mainstream MCOs	4,947,832	5,252,419	5,494,358	5,080,545	4,980,950
Family Health Plus	0	0	0	0	0
Managed LTC	249,754	251,411	264,965	290,808	291,941
Medicaid Advantage	3,481	2,899	0	0	0
Medicaid Advantage Plus	22,978	30,256	35,061	42,252	43,617
HARP	152,416	162,006	165,713	160,353	158,754
FIDA (Duals/IDD Demos)*	1,757	1,717	1,685	1,703	1,690

\* The Duals Demonstration ended in December 2019.

Source: NY Dept. of Health, HMA

## New York Managed Medicaid Enrollment by Plan, January 2024

Plan Name	Total	Medicaid Managed Care	Medicaid Adv. Plus	MLTC Partial Capitation	MLTC PACE	HARP	FIDA IDD <sup>1</sup>
Centene/Fidelis Care/WellCare <sup>2</sup>	1,701,901	1,628,652	1,152	17,800		54,297	
HealthFirst/Senior Health Partners/Neighborhood HP	1,244,766	1,174,882	28,341	9,157		32,386	
MetroPlus Health Plan	463,666	448,828	172	1,652		13,014	
Anthem/HealthPlus	439,934	375,491	121	56,466		7,856	
UnitedHealthCare	316,351	306,363				9,988	
Molina Healthcare <sup>3</sup>	283,273	273,868				9,405	
Excellus Health Plan (BCBS)	222,096	210,621				11,475	
MVP Health Plan/Hudson Health Plan	194,073	186,391				7,682	
HIP of Greater New York	156,414	150,992				5,422	
Capital District Physician's Health Plan	99,407	94,984				4,423	
Independent Health Association	67,890	65,084				2,806	
Centers Plan for Healthy Living/FIDA Care Complete	54,410		1,698	52,712			
HealthNow	52,704	52,704					
VNS Choice	31,130	3,390	4,172	23,568			
Senior Whole Health	27,924		252	27,672			
ElderPlan	25,713		3,795	21,918			
Village Care	23,583		2,787	20,796			
Elderserve/Riverspring Health	18,645		278	18,367			
Amida Care	8,700	8,700					
Hamaspik Choice	8,555		849	7,706			
ArchCare	6,637			5,830	807		
Comprehensive Care Mgmt	6,331				6,331		
CVS/Aetna Better Health	6,089			6,089			
VNA Homecare Options	5,199			5,199			
iCircle Care	3,682			3,682			
Partners Health Plan (FIDA-IDD)	1,690						1,690
Elderwood	1,248			1,248			
Kalos Health	938			938			
EverCare (Elant)	762			762			
Independent Living for Seniors	748				748		
Prime Health Choice	575			575			
PACE CNY	551				551		
Eddy Senior Care	360				360		
Senior Network Health	343			343			
CHS Buffalo Life (Catholic Health Buffalo)	229				229		
Fallon Health Weinberg	168				168		
Complete Senior Care	136				136		
Total Senior Care	131				131		
<b>Total All Health Plans<sup>4</sup></b>	<b>5,476,952</b>	<b>4,980,950</b>	<b>43,617</b>	<b>282,480</b>	<b>9,461</b>	<b>158,754</b>	<b>1,690</b>
<b>Total All Health Plans, Excluding PACE Enrollment</b>	<b>5,467,491</b>						

1. In previous charts, this column included the Duals Demonstration which ended in December 2019.

2. Centene acquired WellCare in January 2020.

3. Molina acquired YourCare Health Plan's members in July 2020.

4. Medicaid Advantage Plan contracts ended in December 2021.

Source: NY State Dept. of Health

% Market Share by Enrollment, 15 New York Medicaid Plans, 2016-23, January 2024

Plan Name	2022 Members	2022 Share	2023 Members	2023 Share	Jan-24 Members	Jan-24 Share	% Chg. Jan-24
Centene/Fidelis Care/WellCare <sup>1</sup>	1,857,098	31.2%	1,736,054	31.1%	1,701,901	31.1%	-2.0%
HealthFirst/Senior Health Partners	1,326,280	22.2%	1,260,577	22.6%	1,244,766	22.7%	-1.3%
MetroPlus Health Plan	506,016	8.5%	473,500	8.5%	463,666	8.5%	-2.1%
Anthem/HealthPlus <sup>2</sup>	460,020	7.7%	446,386	8.0%	439,934	8.0%	-1.4%
UnitedHealthcare	384,720	6.5%	325,411	5.8%	316,351	5.8%	-2.8%
Molina Healthcare <sup>3</sup>	323,364	5.4%	290,791	5.2%	283,273	5.2%	-2.6%
Excellus Health Plan (BCBS)	246,525	4.1%	226,508	4.1%	222,096	4.1%	-1.9%
MVP Health Plan/Hudson Health Plan	221,896	3.7%	198,803	3.6%	194,073	3.5%	-2.4%
HIP of Greater New York	173,294	2.9%	160,219	2.9%	156,414	2.9%	-2.4%
Capital District Physicians Health Plan	119,804	2.0%	101,796	1.8%	99,407	1.8%	-2.3%
Independent Health Association	74,023	1.2%	69,052	1.2%	67,890	1.2%	-1.7%
Centers Plan for Healthy Living/FIDA Care Complete	49,912	0.8%	53,971	1.0%	54,410	1.0%	0.8%
HealthNow	57,578	1.0%	53,722	1.0%	52,704	1.0%	-1.9%
VNS Choice	29,452	0.5%	31,039	0.6%	31,130	0.6%	0.3%
Integra <sup>2</sup>	0	0.0%					
<b>Total, 15 NY Plans</b>	<b>5,829,982</b>	<b>97.8%</b>	<b>5,427,829</b>	<b>97.3%</b>	<b>5,328,015</b>	<b>97.3%</b>	<b>-1.8%</b>
<b>All Other Plans</b>	<b>131,800</b>	<b>2.2%</b>	<b>147,832</b>	<b>2.7%</b>	<b>148,937</b>	<b>2.7%</b>	<b>0.7%</b>
<b>Total</b>	<b>5,961,782</b>	<b>100.0%</b>	<b>5,575,661</b>	<b>100.0%</b>	<b>5,476,952</b>	<b>100.0%</b>	<b>-1.8%</b>

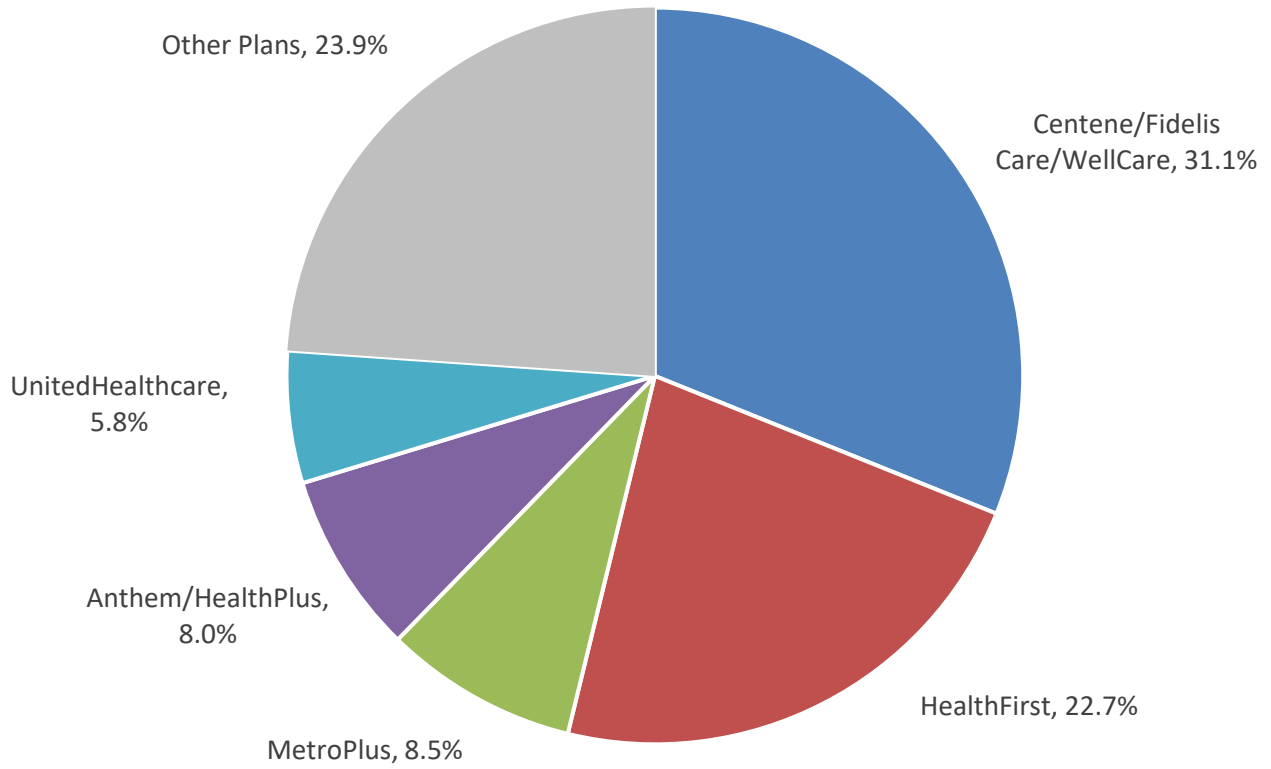
1. Centene acquired WellCare in January 2020.

2. Anthem acquired Integra in May 2022.

3. Molina acquired YourCare Health Plan's members in July 2020.

Source: NY Dept. of Health, HMA

New York Managed Medicaid Market Share by Enrollment,  
January 2024



Source: NY Dept. of Health, HMA

Enrollment in New York Child Health Plus (CHIP) Managed Care, 2015-23, January 2024

Plan Name	2020	2021	2022	2023	Jan-24
<b>Total New York</b>	<b>403,794</b>	<b>391,615</b>	<b>375,572</b>	<b>446,935</b>	<b>459,482</b>
<i>+/- between reporting periods</i>	<i>(19,241)</i>	<i>(12,179)</i>	<i>(16,043)</i>	71,363	12,547
<i>% chg. between reporting periods</i>	<i>-4.5%</i>	<i>-3.0%</i>	<i>-4.1%</i>	19.0%	2.8%

Source: NY Dept. of Health, HMA

Enrollment in New York Child Health Plus (CHIP) Managed Care, 2015-23, January 2024

Plan Name	2020	2021	2022	2023	Jan-24
<b>Centene Total*</b>	<b>138,163</b>	<b>132,167</b>	<b>126,078</b>	<b>151,102</b>	<b>155,741</b>
<i>+/- between reporting periods</i>	452	<i>(5,996)</i>	<i>(6,089)</i>	25,024	4,639
<i>% chg. between reporting periods</i>	0.3%	-4.3%	-4.6%	19.8%	3.1%
<i>% of total</i>	34.2%	33.7%	33.6%	33.8%	33.9%
Fidelis Care/Centene	138,163	132,167	126,078	151,102	155,741
<i>+/- between reporting periods</i>	452	<i>(5,996)</i>	<i>(6,089)</i>	25,024	4,639
<i>% chg. between reporting periods</i>	0.3%	-4.3%	-4.6%	19.8%	3.1%
<i>% of total</i>	34.2%	33.7%	33.6%	33.8%	33.9%
WellCare	0	0	0	0	0
<i>+/- between reporting periods</i>	<i>(6,822)</i>	0	0	0	0
<i>% chg. between reporting periods</i>	-100.0%	NA	NA	NA	NA
<i>% of total</i>	0.0%	NA	NA	NA	NA
<b>HealthFirst</b>	<b>64,849</b>	<b>65,338</b>	<b>67,572</b>	<b>85,809</b>	<b>89,708</b>
<i>+/- between reporting periods</i>	2,179	489	2,234	18,237	3,899
<i>% chg. between reporting periods</i>	3.5%	0.8%	3.4%	27.0%	4.5%
<i>% of total</i>	16.1%	16.7%	18.0%	19.2%	19.5%
<b>UnitedHealthcare</b>	<b>35,690</b>	<b>29,608</b>	<b>22,620</b>	<b>21,209</b>	<b>20,980</b>
<i>+/- between reporting periods</i>	<i>(9,878)</i>	<i>(6,082)</i>	<i>(6,988)</i>	<i>(1,411)</i>	<i>(229)</i>
<i>% chg. between reporting periods</i>	-21.7%	-17.0%	-23.6%	-6.2%	-1.1%
<i>% of total</i>	8.8%	7.6%	6.0%	4.7%	4.6%
<b>Amerigroup/Anthem</b>	<b>38,179</b>	<b>36,035</b>	<b>34,877</b>	<b>38,297</b>	<b>38,944</b>
<i>+/- between reporting periods</i>	<i>(3,731)</i>	<i>(2,144)</i>	<i>(1,158)</i>	3,420	647
<i>% chg. between reporting periods</i>	-8.9%	-5.6%	-3.2%	9.8%	1.7%
<i>% of total</i>	9.5%	9.2%	9.3%	8.6%	8.5%
<b>BCBS of Rochester/Excelsus</b>	<b>32,194</b>	<b>31,239</b>	<b>29,607</b>	<b>33,618</b>	<b>33,935</b>
<i>+/- between reporting periods</i>	871	<i>(955)</i>	<i>(1,632)</i>	4,011	317
<i>% chg. between reporting periods</i>	2.8%	-3.0%	-5.2%	13.5%	0.9%
<i>% of total</i>	8.0%	8.0%	7.9%	7.5%	7.4%
<b>MVP Health Care/Hudson Health Plan</b>	<b>21,012</b>	<b>21,211</b>	<b>19,062</b>	<b>24,977</b>	<b>24,238</b>
<i>+/- between reporting periods</i>	<i>(1,110)</i>	199	<i>(2,149)</i>	5,915	<i>(739)</i>
<i>% chg. between reporting periods</i>	-5.0%	0.9%	-10.1%	31.0%	-3.0%
<i>% of total</i>	5.2%	5.4%	5.1%	5.6%	5.3%
<b>MetroPlus</b>	<b>21,037</b>	<b>25,207</b>	<b>27,839</b>	<b>36,529</b>	<b>39,401</b>
<i>+/- between reporting periods</i>	<i>(993)</i>	4,170	2,632	8,690	2,872
<i>% chg. between reporting periods</i>	-4.5%	19.8%	10.4%	31.2%	7.9%
<i>% of total</i>	5.2%	6.4%	7.4%	8.2%	8.6%
<b>Capital District Physicians Health Plan</b>	<b>14,411</b>	<b>13,786</b>	<b>13,293</b>	<b>13,813</b>	<b>14,089</b>

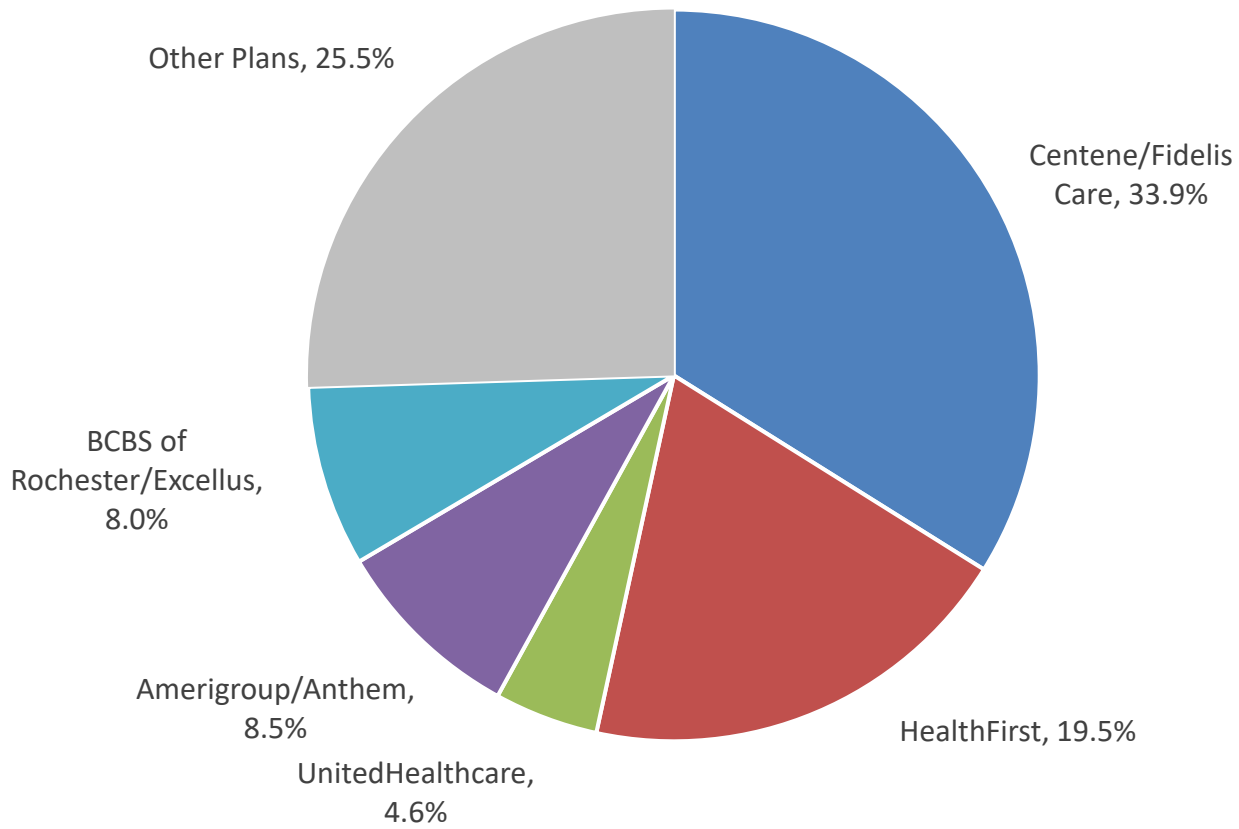
<i>+/- between reporting periods</i>	942	(625)	(493)	520	276
<i>% chg. between reporting periods</i>	7.0%	-4.3%	-3.6%	3.9%	2.0%
<i>% of total</i>	3.6%	3.5%	3.5%	3.1%	3.1%
<b>Affinity Health Plan**</b>	<b>15,193</b>	<b>13</b>	<b>0</b>	<b>0</b>	<b>0</b>
<i>+/- between reporting periods</i>	9	(15,180)	(13)	0	0
<i>% chg. between reporting periods</i>	0.1%	-99.9%	-100.0%	NA	NA
<i>% of total</i>	3.8%	0.0%	0.0%	NA	NA
<b>HIP of Greater New York/Emblem Health</b>	<b>10,472</b>	<b>9,951</b>	<b>9,487</b>	<b>10,853</b>	<b>11,161</b>
<i>+/- between reporting periods</i>	(464)	(521)	(464)	1,366	308
<i>% chg. between reporting periods</i>	-4.2%	-5.0%	-4.7%	14.4%	2.8%
<i>% of total</i>	2.6%	2.5%	2.5%	2.4%	2.4%
<b>Independent Health Association</b>	<b>5,787</b>	<b>5,310</b>	<b>5,311</b>	<b>7,027</b>	<b>7,265</b>
<i>+/- between reporting periods</i>	(446)	(477)	1	1,716	238
<i>% chg. between reporting periods</i>	-7.2%	-8.2%	0.0%	32.3%	3.4%
<i>% of total</i>	1.4%	1.4%	1.4%	1.6%	1.6%
<b>Highmark/HealthNow</b>	<b>3,534</b>	<b>3,829</b>	<b>3,676</b>	<b>4,560</b>	<b>4,689</b>
<i>+/- between reporting periods</i>	136	295	(153)	884	129
<i>% chg. between reporting periods</i>	4.0%	8.3%	-4.0%	24.0%	2.8%
<i>% of total</i>	0.9%	1.0%	1.0%	1.0%	1.0%
<b>Molina**</b>	<b>3,272</b>	<b>17,921</b>	<b>16,150</b>	<b>19,141</b>	<b>19,331</b>
<i>+/- between reporting periods</i>	2,371	14,649	(1,771)	2,991	190
<i>% chg. between reporting periods</i>	263.2%	447.7%	-9.9%	18.5%	1.0%
<i>% of total</i>	0.8%	4.6%	4.3%	4.3%	4.2%
<b>Univera/YourCare**</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<i>+/- between reporting periods</i>	(2,757)	(1)	0	0	0
<i>% chg. between reporting periods</i>	-100.0%	-100.0%	NA	NA	NA
<i>% of total</i>	0.0%	0.0%	NA	NA	NA
<b>WellCare*</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<i>+/- between reporting periods</i>	(6,822)	0	0	0	0
<i>% chg. between reporting periods</i>	-100.0%	NA	NA	NA	NA
<i>% of total</i>	0.0%	NA	NA	NA	NA
<b>Total New York</b>	<b>403,794</b>	<b>391,615</b>	<b>375,572</b>	<b>446,935</b>	<b>459,482</b>
<i>+/- between reporting periods</i>	(19,241)	(12,179)	(16,043)	71,363	12,547
<i>% chg. between reporting periods</i>	-4.5%	-3.0%	-4.1%	19.0%	2.8%

\* Centene acquired WellCare in January 2020.

\*\* YourCare members began the process to fully transition to Molina in July 2020. Molina also acquired Affinity in 2021.

Source: NY Dept. of Health, HMA

## New York Managed CHIP Market Share by Enrollment, January 2024



Source: NY Dept. of Health, HMA

## 5. MEDICAID FEE FOR SERVICE VS. MANAGED CARE PENETRATION

Total Medicaid enrollment in New York was 7.2 million in 2023. About 77.7% of Medicaid beneficiaries were enrolled in a managed care plan. The remainder are in fee-for-service Medicaid. Total Medicaid expenditures were \$91.1 billion in 2023, with about 62.2% through managed care and the rest through fee-for-service.

New York Expenditures and Enrollment for Total Medicaid vs. Medicaid Managed Care, 2014-23

Year	Total Medicaid Expenditures	Medicaid Managed Care Expenditures <sup>(1)</sup>	Medicaid Managed Care Expenditures as % of Total	Total Medicaid/CHIP Enrollment	Medicaid MCO Enrollment	Medicaid MCO Enrollment as % of Total
2023	\$91,143,451,772	\$56,710,257,174	62.2%	7,176,273	5,575,661	77.7%
2022	\$80,518,406,335	\$50,804,341,351	63.1%	7,408,878	5,961,782	80.5%
2021	\$72,642,382,334	\$47,745,904,165	65.7%	7,078,662	5,700,708	80.5%
2020	\$70,674,153,157	\$42,612,090,553	60.3%	6,686,686	5,378,218	80.4%
2019	\$58,094,211,692	\$34,598,142,618	59.6%	6,070,984	4,618,222	76.1%
2018	\$73,030,082,745	\$43,698,033,188	59.8%	6,522,131	4,732,081	72.6%
2017	\$76,398,082,879	\$45,530,784,695	59.6%	6,472,095	4,710,489	72.8%
2016	\$60,995,857,591	\$32,171,587,918	52.7%	6,423,107	4,651,985	72.4%
2015	\$57,896,956,615	\$28,211,879,611	48.7%	6,554,908	4,836,423	73.8%
2014	\$53,021,111,200	\$24,508,293,077	46.2%	6,247,440	4,573,359	73.2%

(1) Includes evaluation and management, vaccine codes, Community First Choice, and preventive services Grade A or B, ACIP vaccines and their administration, Prepaid Ambulatory Health Plans, and Prepaid Inpatient Health Plans.

Sources: CMS64 for expenditures. CMS for total Medicaid/CHIP enrollment. States, NAIC for Medicaid managed care enrollment.



## 6. SNPs AND DUAL ELIGIBLES

New York has a robust Medicare Advantage special needs plans (SNP) market, with total enrollment of 662,031 as of March 2024. The state’s dual eligibles demonstration began January 1, 2015, and ended in December 2019. Approximately 7,000 of the 120,000 individuals who were initially eligible for the demonstration enrolled as of September 2015, and enrollment dropped to 2,320 as of year-end 2019.

In December 2019, New York transitioned its Fully Integrated Dual Advantage (FIDA) program to a Medicaid Advantage Plus (MAP) plans fully aligned with Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs). All FIDA plans offered a D-SNP aligned with a MAP plan owned by the same Medicare Advantage (MA) parent company, which beneficiaries were subsequently enrolled in.

New York SNP Enrollment by Plan, March 2024

Plan	Total SNPs	DSNPs	CSNPs	ISNPs	Share
Healthfirst	208,421	208,421			31.5%
UnitedHealthcare	175,004	165,232		9,772	26.4%
Centene	116,165	116,165			17.5%
Humana	50,745	50,745			7.7%
CVS Health	41,679	40,739		940	6.3%
Elevance	24,505	24,505			3.7%
Elderplan	10,638	9,341		1,297	1.6%
MetroPlus Health Plan	10,042	10,042			1.5%
VNS Choice	8,836	8,836			1.3%
Village Senior Services	4,031	4,031			0.6%
Centers Plan for Healthy Living	2,408	2,300		108	0.4%
Emblem	2,307	2,307			0.3%
Independent Health Association	1,952		946	1,006	0.3%
MVP Health Plan	1,656	1,656			0.3%
Hamaspik	1,388	1,388			0.2%
Longevity Health Plan	849			849	0.1%
Visiting Nurse Association of Central NY	507	261		246	0.1%
Elderserve	407	273		134	0.1%
Molina	388	388			0.1%
Excellus	55	55			0.0%
Capital District Physicians Health Plan	48		48		0.0%
<b>Total</b>	<b>662,031</b>	<b>646,685</b>	<b>994</b>	<b>14,352</b>	<b>100.0%</b>

Source: CMS, HMA