Massachusetts

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1. MANAGED CARE OPPORTUNITY ASSESSMENT (UPDATED 08-23-23)

MassHealth, Massachusetts' Medicaid program, transitioned 900,000 members into Accountable Care Organizations (ACOs) in 2018. In its most recent procurement, effective April 2023, the state selected 17 ACOs to participate in the program.

The program is made up of two models: Medicaid Accountable Care Partnership Plans (ACPPs) and Primary Care ACOs (PCACOs). ACPPs, also known as Model A, an integrated ACO/MCO Model, in which the ACO and MCO form a jointly owned entity that takes on full risk through risk-adjusted, prospective capitated rates and provides a full range of services to members. PCACOs, also known as Model B, are direct to ACO Model, in which the ACO contracts directly with MassHealth, doesn't take insurance risk, but does participate in upside and downside performance incentives. Model C, which was discontinued, was an MCO-Administered ACO.

In January 2023, the state also selected 20 organizations to participate in its community partners program, which works with MassHealth Medicaid ACOs to provide behavioral health and long-term services and supports.

Massachusetts is expected to release a request for responses (RFR) in late 2023 for One Care and Senior Care Options (SCO), serving dual eligibles. One Care will shift from a Medicare-Medicaid Plan to a Medicare Fully Integrated Dual Eligible Special Needs Plan (FIDE SNPs) with a companion Medicaid managed care plan. SCO already consists of Medicare FIDE SNPs with companion Medicaid managed care plans. The state is expected to include a preference for organizations that will operate both One Care and SCO plans. The contracts are expected to be effective on January 1, 2026. The state signed three-way One Care Financial Alignment Initiative (FAI) Dual Demonstration contracts with the Centers for Medicare & Medicaid Services and the three SCO incumbents in October 2021. Boston Medical Center HealthNet Plan and Fallon Community Health Plan were both also awarded contracts but withdrew in February 2020. Those contracts will be effective through December 1, 2025.

HMA Managed Medicaid Opportunity Assessment for Massachusetts						
Positive Metrics	Strong Indicators					
• Massachusetts is an expansion state.	•MassHealth announced the signing of three-way One Care Financial Alignment Initiative (FAI) Dual Demonstration contracts that began in January 2022 with health plans Commonwealth Care Alliance, Tufts Health Unify, and UnitedHealthcare Connected, as well as with the Centers for Medicare & Medicaid Services.					
Negative Metrics	Weak Indicators					
 Negative Metrics Average MLR among Massachusetts Medicaid plans was 92.8% in 2021. 	 Weak Indicators The Massachusetts managed Medicaid market has historically been dominated by not-for-profit plans. Rate increases in the state have been fairly modest. 					

Massachusetts received federal approval to extend its MassHealth Section 1115 Waiver in September 2022 through 2027. Among the goals of the extension: increase care and cost expectations for invest in primary care, behavioral health, and pediatric care; advance health equity, with a focus on health-related social needs and specific disparities; support safety net providers; and maintain near-universal coverage including updates to eligibility policies.

	Massachusetts Medicaid Managed Care Programs						
		Carved In (Y/N)					
Program	Population	Behavioral	LTSS	Pharmacy			
MassHealth	Medicaid (or CHIP) coverage for individuals and families including people with disabilities. Coverage types offered are: Standard, CommonHealth, CarePlus (ACA population), Family Assistance, Premium Assistance, and Limited. Eligibility for coverage type depends on income, citizenship or immigration status, age, and other circumstances.	Y	N	Y			
Senior Care Options	Fully Integrated Dual Eligible Special Needs Plans (FIDE- SNPs) that provide integrated Medicare and Medicaid services to MassHealth Standard eligible members aged 65 and older at all functional levels.	Y	Y	Y			
One Care	Integrated care option for adults with disabilities ages 21- 64 at the time of enrollment who are eligible for both MassHealth and Medicare.	Y	Y	Y			

2. MANAGED MEDICAID PLAN FINANCIALS

Average medical loss ratio among Massachusetts Medicaid plans was 90.4% in 2022. Per member per month premiums among the five plans averaged \$591.13.

(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.)

Massachusetts Medicaid Plan Financials, 2022									
Plan	Publicly Traded	Enrollment	Member Months	PMPM	Premiums Earned (000)	Medical Costs (000)	MLR ⁽¹⁾		
Baystate Health/Health New England	Y	50,274	575,804	\$615.48	\$354,397	\$321,211	90.4%		
Boston Medical Center Health Plan	Ν	282,674	3,311,118	\$654.61	\$2,167,493	\$1,964,380	90.1%		
Fallon Community Health Plan Inc.	Ν	125,378	1,483,392	\$571.50	\$847,760	\$766,795	90.4%		
Mass General/AllWays Health Partners	Ν	45,893	526,606	\$467.79	\$246 <i>,</i> 339	\$230,628	92.1%		
Tufts/Point32Health	Ν	354,214	4,122,459	\$559.56	\$2,306,744	\$2,122,496	91.6%		
Total, MA plans		858,433	10,019,379	\$591.13	\$5,922,734	\$5,405,510	90.4%		

(1) After reinsurance recoveries. (2) Before reinsurance recoveries.

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

Massachusetts Medicaid Plan Financials, 2021								
Plan	Publicly Traded	Enrollment	Member Months	PMPM	Premiums Earned (000)	Medical Costs (000)	MLR ⁽¹⁾	
Baystate Health/Health New England	Y	45,720	531,011	\$599.24	\$318,203	\$286,028	89.8%	
Boston Medical Center Health Plan	Ν	266,918	3,106,040	\$644.45	\$2,001,698	\$1,859,706	92.9% ⁽²⁾	
Fallon Community Health Plan Inc.	Ν	122,850	1,445,165	\$536.55	\$775 <i>,</i> 409	\$731,972	94.4%	
Mass General/AllWays Health Partners	Ν	42,209	485,633	\$471.01	\$228,736	\$204,760	89.4%	
Tufts/Point32Health	Ν	329,425	3,828,554	\$533.15	\$2,041,194	\$1,908,237	93.5% ⁽²⁾	
Total, MA plans		807,122	9,396,403	\$570.99	\$5,365,241	\$4,990,704	92.8%	

(1) After reinsurance recoveries. (2) Before reinsurance recoveries. Source: S&P Global Market Intelligence, NAIC, HMA

3. RFP DEVELOPMENTS AND ANALYSIS (UPDATED 08-23-23)

Massachusetts released a request for responses (RFR) for a vendor to support training and quality efforts in the MassHealth Children's Behavioral Health Initiative (CBHI). Responses are due August 11. CBHI covers an enhanced continuum of home and community-based behavioral health services, requires primary care physicians to screen children for behavioral health conditions, and standardizes behavioral health assessments.

Massachusetts procured ACOs, with contract effective from April 1, 2023, through December 31, 2027, with options up to December 31, 2032. Current ACPP incumbents are Be Healthy Partnership, Berkshire Fallon Health Collaborative, BMC HealthNet Plan, Fallon 365 Care, My Care Family, Tufts Health Plan, and Wellforce Care Plan, Fallon Community Health Plan, Health New England, Allways Health Partners, Atrius Health, BIDCO, Community Health Alliance, Boston Childrens. Current PCACO incumbents are Community Care Cooperative, Mass General Brigham, and Steward Health Choice.

The larger ACO roll out was preceded by a one-year ACO pilot that began in December 2016 and covered approximately 160,000. The pilot involved some of the largest hospitals and health systems in the state, including Partners HealthCare, Steward Health Care System, UMass Memorial Health Care, Boston Medical Center, and Boston Children's Hospital. Community Care Cooperative, a newly formed network of community health centers also participated in the ACO pilot.

The state released an RFR for its Behavioral Health (BH) and Long-Term Services and Supports (LTSS) Community Partners program in July 2022. Contracts will run from April 1, 2023, through 2027, with five additional option years. Under the program, Medicaid Accountable Care Organizations and Medicaid managed care plans will be required to contract with community partners selected by the state for care coordination for beneficiaries that have predominant BH and/or LTSS needs.

On October 19, 2021, Massachusetts' announced the signing of three-way One Care Financial Alignment Initiative (FAI) Dual Demonstration contracts with health plans Commonwealth Care Alliance, Tufts Health Unify, and UnitedHealthcare Connected, as well as with the Centers for Medicare & Medicaid Services. Awards were announced a year ago with five winners; however, Boston Medical Center HealthNet Plan and Fallon Community Health Plan withdrew in February 2020. Implementation began January 1, 2022, with contracts running through December 31, 2025. One Care incumbents are Commonwealth Care Alliance, Tufts Health Unify, and UnitedHealthcare Connected. SCO incumbents are Boston Medical Center HealthNet Plan Senior Care Options, Commonwealth Care Alliance, NaviCare, Molina/Senior Whole Health, Tufts Health Plan Senior Care Options, and UnitedHealthcare.

In October 2017, the state also awarded Boston Medical Center Health Plan and Tufts Health Public Plans Medicaid managed care contracts to carve in long-term services and supports. The plans will serve approximately 150,000 to 200,000 MassHealth members.

N	Nassachusetts Medicaid RFP, RFA Calendar			
<u>Contract</u>	Key Dates	<u># of Beneficiaries</u>		
	Letters of Intent Due: Oct-16			
	RFR Released: Dec-16			
MCOs	Proposals Due: Mar-17	~150,000-200,000		
	Award: Oct-17			
	Implementation: Mar-18			
	Applications Opened: May-16			
ACO Pilot	ACO Selections Announced: Nov-16	~160,000		
	Launch: Dec-16			
ACOs	RFR Released: April 13, 2022			
	Responses Due: July 15, 2022			
	Award: November 4, 2022	~900,000		
	Implementation: April 1, 2023			
DSRIP	Phased Application Selection: Sep-16 – Mar-17			
	DSRIP Starts: Jul-17			
	RFR Released: July 18, 2022			
Community Partners (ACO BH/ LTSS	Responses Due: September 16, 2022			
integration and linkages to social services)	Award: January 3, 2023			
	Implementation: April 1, 2023			
	LOI: Jul-16			
	RFR Released: February 2019			
One Care (Duals Demo)	Responses Due: Extended to June 7	~150,000		
	Award Date: January 7, 2020			
	Implementation: January 1, 2022			
Senior Care Options (SCO)	LOI: January 1, 2021, after completion of current contract			

Source: MassHealth, Health and Human Services, HMA

Massachusetts Medicaid Behavioral Managed Care Contract, March 2015						
Region/County	Carve-out Vendors	Contract Terms				
		Risk;				
		5 years ending 9-30-17;				
Statewide	ValueOptions	Covers 400,000 people enrolled in				
		MassHealth Primary Care Clinician Plan				
		at \$525 million annually				
Source: ValueOptions, HN	MA					

4. MANAGED CARE ENROLLMENT UPDATE

Total Medicaid managed care enrollment in Massachusetts was up 5.8% to 1,076,138 in year end 2020 compared to 2019. Enrollment declined by 10.4% in 2017, after declining 2.5% in 2016 and rising 8.7% in 2015. In October 2017, the state awarded Medicaid managed care contracts serving to Boston Medical Center Health Plan and Tufts Health Public Plans to serve 150,000 to 200,000 members beginning at the end of 2017.

Model	2019 ⁽⁴⁾	2020	2021	2022
ACO Model A ⁽¹⁾	550,922	639,741	681,846	731,173
+/- between reporting periods	NA	88,819	42,105	49,327
% chg. between reporting periods	NA	16.1%	6.6%	7.2%
% of total	54.2%	59.4%	59.4%	59.6%
ACO Model B ⁽²⁾	359,188	425,518	466,563	496,223
+/- between reporting periods	NA	66,330	41,045	29,660
% chg. between reporting periods	NA	18.5%	9.6%	6.4%
% of total	35.3%	39.5%	40.6%	40.4%
MCO Model C ⁽³⁾	107,047	10,879	0	0
+/- between reporting periods	NA	(96,168)	(10,879)	NM
% chg. between reporting periods	NA	-89.8%	-100.0%	NM
% of total	10.5%	1.0%	0.0%	0.0%
* Total Massachusetts	1,017,157	1,076,138	1,148,409	1,227,396
+/- between reporting periods	NA	58,981	72,271	78,987
% chg. between reporting periods	NA	5.8%	6.7%	6.9%

Enrollment in Massachusetts Managed Care by Plan, 2019-22

Plan	2019 ⁽⁴⁾	2020	2021	2022
ACO Model A ¹	550,922	639,741	681,846	731,173
Fallon Community Health Plan	100,359	116,883	122,832	125,703
Berkshire Fallon Health Collaborative	15,945	18,829	20,309	21,636
Fallon 365 CARE	33,228	39,333	40,336	41,540
Wellforce Care Plan	51,186	58,721	62,187	62,527
+/- between reporting periods	NA	88,819	42,105	49,327
% chg. between reporting periods	NA	16.1%	6.6%	7.2%
% of total	9.9%	10.9%	10.7%	10.2%
Health New England	38,999	43,419	45,644	50,246
BeHealthy Partnership	38,999	43,419	45,644	50,246
+/- between reporting periods	NA	4,420	2,225	4,602
% chg. between reporting periods	NA	11.3%	5.1%	10.1%
% of total	3.8%	4.0%	4.0%	4.1%
AllWays Health Partners	33,455	38,696	42,125	45,892
My Care Family	33,455	38,696	42,125	45,892

+/- between reporting periods	NA	5,241	3,429	3,767
% chg. between reporting periods	NA	15.7%	8.9%	8.9%
% of total	3.3%	3.6%	3.7%	3.7%
Tufts Health Plan	196,936	231,455	248,379	270,099
Atrius Health	32,159	38,116	, 41,698	, 45,127
BIDCO	36,380	41,504	45,253	48,630
СНА	28,417	32,513	35,962	40,164
Boston Children's ACO	99,980	119,322	125,466	136,178
+/- between reporting periods	NA	34,519	16,924	21,720
% chg. between reporting periods	NA	17.5%	7.3%	8.7%
% of total	19.4%	21.5%	21.6%	22.0%
Boston Medical Center HealthNet Plan	181,173	209,288	222,866	239,233
Community Alliance	117,388	136,817	146,107	157,884
Mercy Alliance	28,534	31,505	33,074	34,455
Signature Alliance	18,323	21,536	23,286	25,164
Southcoast Alliance	16,928	19,430	20,399	21,730
+/- between reporting periods	NA	28,115	13,578	16,367
% chg. between reporting periods	NA	15.5%	6.5%	7.3%
% of total	17.8%	19.4%	19.4%	19.5%
ACO Model B ²	359,188	425,518	466,563	496,223
Community Care Cooperative	125,862	150,421	165,812	182,275
+/- between reporting periods	NA	24,559	15,391	16,463
% chg. between reporting periods	NA	19.5%	10.2%	9.9%
% of total	12.4%	14.0%	14.4%	14.9%
Partners Healthcare Choice	109,693	135,245	0	0
+/- between reporting periods	NA	25,552	(135,245)	NA
% chg. between reporting periods	NA	23.3%	-100.0%	NA
% of total	10.8%	12.6%	0.0%	0.0%
Steward Health Choice	123,633	139,852	152,568	154,170
+/- between reporting periods	NA	16,219	12,716	1,602
% chg. between reporting periods	NA	13.1%	9.1%	1.1%
% of total	12.2%	13.0%	13.3%	12.6%
Mass General Brigham	NA	NA	148,183	159,778
+/- between reporting periods	NA	NA	NA	11,595
% chg. between reporting periods	NA	NA	NA	7.8%
% of total	NA	NA	12.9%	13.0%
MCO Model C ³	107,047	10,879	0	0
Boston Medical Center HealthNet Plan	45,605	3,651	0	0
+/- between reporting periods	NA	(41,954)	(3,651)	(3,651)
% chg. between reporting periods	NA	-92.0%	-100.0%	-100.0%
% of total	4.5%	0.3%	0.0%	0.0%
Tufts Health Together	61,442	7,228	0	0
+/- between reporting periods	NA	(54,214)	(7,228)	0
% chg. between reporting periods	NA	-88.2%	-100.0%	NA
% of total	6.0%	0.7%	0.0%	NA
*Total Massachusetts	1,017,157	1,076,138	1,148,409	1,227,39
				-
+/- between reporting periods	NA	58,981	72,271	78,987

¹ *Model A:* Integrated ACO/MCO Model, in which the ACO and MCO form a jointly owned entity that takes on full risk through risk-adjusted, prospective capitated rates and

provides a full range of services to members;

² Model B: Direct to ACO Model, in which the ACO contracts

directly with MassHealth, doesn't take insurance risk, but does participate in upside and downside performance incentives;

³ Model C: MCO-Administered ACO, in which the ACO contracts and works with MCOs and has upside and downside performance incentives.

⁴ Enrollment data as of November 2019.

*Total reported data is lower than actual state enrollment because county enrollment by plan with less than 11 members was masked to protect member

confidentiality

Source: State of Massachusetts, MassHealth.

Note: 2019 and 2020 enrollment data were obtained through a FOIA request.

5. MEDICAID FEE FOR SERVICE VS. MANAGED CARE PENETRATION

Total Medicaid enrollment in Massachusetts was nearly 1.9 million in 2021. About 57.9% of Medicaid beneficiaries were enrolled in a managed care plan. The remainder are in fee-for-service Medicaid. Total Medicaid expenditures in Massachusetts were \$19.4 billion in 2021, with about 44% through managed care and the rest through fee-for-service.

Year	Total Medicaid Expenditures	Medicaid Managed Care Expenditures ⁽¹⁾	Medicaid Managed Care Expenditures as % of Total	Total Medicaid/CHIP Enrollment	Medicaid MCO Enrollment	Medicaid MC Enrollment as of Total
2022	\$20,864,779,727	\$9,236,091,911	44.3%	1,977,039	1,257,068	63.6%
2021	\$19,422,170,735	\$8,493,125,121	43.7%	1,859,007	1,076,138	57.9%
2020	\$17,967,352,114	\$7,659,433,312	42.6%	1,720,365	1,076,138	62.6%
2019 ⁽²⁾	\$17,412,670,180	\$7,105,177,650	40.8%	1,547,352	1,017,157	65.7%
2018	\$17,655,414,020	\$6,787,628,680	38.4%	1,578,119	996,847	63.2%
2017	\$17,120,855,005	\$6,780,268,679	39.6%	1,668,763	861,523	51.6%
2016	\$16,990,908,511	\$6,428,905,806	37.8%	1,702,946	852,588	50.1%
2015	\$15,378,247,995	\$5,886,148,176	38.3%	1,677,249	784,172	46.8%
2014	\$14,250,839,665	\$5,311,119,206	37.3%	1,619,824	784,172	48.4%

(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.
 (2) MCO Enrollment as of November 2019

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

6. SNPs and Dual Eligibles

Massachusetts SNP Enrollment by Plan, March 2023							
Plan	Total SNPs	DSNPs	CSNPs	ISNPs	Share		
UnitedHealthcare	22,356	22,356	0	0	32.9%		
Molina Healthcare/Magellan/Senior Whole Health	11,975	11,975	0	0	17.6%		
Commonwealth Care Alliance	13,742	13,742	0	0	20.2%		
Fallon Community Health Plan	9,254	9,254	0	0	13.6%		
Tufts Associated HMO	8,810	8,810	0	0	13.0%		
Boston Medical Center	1,776	1,776	0	0	2.6%		
Align Senior Care	54	0	19	35	0.1%		
Totals, 6 Plans	67,967	67,913	19	35	100%		
Source: CMS, HMA							

Massachusetts has a fairly sizable SNP population, with 63,799 members in DSNPs.

Enrollment in Massachusetts' dual eligible demonstration, One Care, is up 12.3% to 25,235 as of 2019, compared to year-end 2018. The state was the first to win approval for a dual eligibles demonstration with CMS. On July 16, 2013, MassHealth and CMS announced signed contracts with three health plans to participate in the One Care: Commonwealth Care Alliance (CCA), Fallon Total Care (FTC), and Network Health. Fallon announced in September 2015 that it would exit the market. There are no national, for-profit plans in the demonstration. In July 2016, the state issued a call for letters of intent (LOIs) for organizations interested in serving as OneCare plans. The One Care Dual Demonstration 2.0 request for responses (RFR) was released on February 2019. Implementation will begin January 1, 2022, with contracts effective for five years through December 31, 2025.

Massachusetts Dual Eligible Enrollment by Plan, 2015-19							
	2015	2016	2017	2018	2019		
Commonwealth Care Alliance	10,216	11,771	15,506	19,497	22,488		
+/- between reporting periods		1,555	3,735	3,991	2,991		
% chg. between reporting periods		15.2%	31.7%	25.7%	15.3%		
% of total	83.2%	82.1%	83.8%	86.8%	89.1%		
Network Health (Tufts Health Plan)	2,069	2,560	2,996	2,971	2,747		
+/- between reporting periods		491	436	(25)	(224)		
% chg. between reporting periods		23.7%	17.0%	-0.8%	-7.5%		
% of total	16.8%	8.1%	8.6%	13.2%	10.9%		
Total Enrollment	12,285	14,331	18,502	22,468	25,235		
+/- between reporting periods		2,046	4,171	3,966	2,767		
% chg. between reporting periods		16.7%	29.1%	21.4%	12.3%		
Total Eligible	100,293	104,415	101,980	99,843	110,814		
Opt-Outs	28,747	31,589	34,731	37,068	39,676		
% of Total Eligible	28.7%	30.3%	34.1%	37.1%	35.8%		
Source: MassHealth, HMA							