Georgia

- 1. HMA Managed Medicaid Opportunity Assessment for Georgia
- 2. Medicaid Plan Financials
 - a. Georgia Health Plan Financials, 3 Plans, 2023
 - b. Georgia Health Plan Financials, 3 Plans, 2022
- 3. RFP Developments and Analysis
 - a. Georgia Medicaid RFP Calendar
- 4. Medicaid Plan Enrollment Update
 - a. Georgia Managed Medicaid Enrollment by Plan, 2017-23, July 2024
 - b. Georgia Managed Medicaid Market Share by Enrollment, July 2024
- 5. Medicaid Fee For Service vs. Managed Care Penetration
 - a. Georgia Expenditure and Enrollment, 2014-23
- 6. SNPs and Dual Eligibles
 - a. Georgia SNP Enrollment by Plan, March 2024

1. MANAGED CARE OPPORTUNITY ASSESSMENT (UPDATED 12-3-24)

Georgia released on December 2, 2024, award recommendations to four health plans for the Georgia Families and Families 360° program, covering approximately 1.5 million beneficiaries. Georgia Families is the state's managed care program for Medicaid, PeachCare for Kids® Members and Planning for Healthy Babies (P4HB) participants. Of the four plans, CareSource, which currently has under 377,000 lives, was the sole incumbent awarded. New plans Humana, Molina, and UnitedHealthcare will serve the remaining 1.1 million lives. UnitedHealthcare was also awarded a contract for the Georgia Families 360° program which covers 27,000 children in foster care, adoption assistance, and certain juvenile justice programs. This procurement is the state's first opportunity since 2015 to make substantive changes to the programs. Planned changes include carving in the aged, blind, and disabled (ABD) non-dual and non-home and community-based services population into managed care. However, only a subset of the ABD population will be included in the initial phase of the transition. Additional ABD categories are expected to transition in later years.

Georgia's Pathways to Coverage program extends Medicaid coverage to a subset of low-income adults who meet specific work or qualifying activity requirements. To be eligible, they must work, attend school, volunteer or complete another qualifying activity at least 80 hours per month. The program covers the cost of many of the same medical services as traditional Medicaid, including doctor visits, hospital stays and prescriptions.

Georgia reinstated Medicaid work requirements for new Medicaid enrollees under its expansion demonstration, which some analyses show may be limiting enrollment compared to other expansion approaches. Pathways to Coverage is a time-limited Section 1115 demonstration approved by the federal government. The state designed the Pathways to Coverage program with the aims of increasing access to affordable health care, lowering the uninsured rate, supporting financial independence and promoting enrollees' eventual transition to private health insurance coverage. The Pathways to Coverage program was approved in 2020 for an initial five-year period.

Georgia has an 85 percent minimum medical loss ratio (MLR) requirement for Medicaid plans.

	Georgia Medicaid Managed Care Programs								
	Carved In (Y/N)								
Program	Population	Behavioral	LTSS	Pharmacy	SUD	Dental			
Georgia Families	Traditional Medicaid	Υ	N	Y	Υ	Y			
Georgia Families 360	Children, youth, and young adults in foster care, children and youth receiving adoption assistance, and select youth involved in the juvenile justice system.	Y	N	Υ	Υ	Υ			
Pathways to Coverage	Expansion Population - Individuals who are between the age of 19 through 64, with income up to and including 100 percent of the federal poverty level (FPL).	Y	N	Y	Y	Z			

Hot Topics

In July 2023, the state launched a partial Medicaid expansion program, Pathways to Coverage, for individuals aged 19 to 64 who earn up to 100 percent of the federal poverty level. The program includes a work requirement, mandating 80 hours of work or volunteering per month to qualify for coverage. The Centers for Medicare & Medicaid Services has twice rejected Georgia's request to extend its Pathways to Coverage existing agreement. The program is slated to expire at the end of September 2025, which prompted the state to sue CMS. In July 2024, a federal judge ruled that CMS followed federal rules when it declined Georgia's request to extend the state's Pathways to Coverage program until 2028. The judge directed the state to seek an extension through the normal federal regulatory process.

In 2024, Georgia lawmakers agreed to establish the Comprehensive Health Coverage Commission to revisit approaches to Medicaid expansion. The Commission will study the Arkansas Medicaid "private option" program which allows that state to purchase private insurance for uninsured individuals.

Georgia has submitted an amendment for the Planning for Healthy Babies Medicaid Section 1115 demonstration waiver which would allow individuals to be reimbursed for medically necessary personal care services. Services must be rendered to medically fragile members under age 21 enrolled in the Georgia Pediatric Program.

HMA Georgia Medicaid Program Snapshot

Medicaid Indicators:

- Expansion status: Adopted
- Total Medicaid enrollment: Over 2.6 million to date
- Medicaid Delivery System: MCO, FFS
- Number of Managed Care Plans: 3 Plans
- Managed Care Procurement: Competitive
- Total Medicaid Spending: \$15.9 billion in 2023

State Program Authorities:

- MCOs Operate Statewide
- MLTSS State: No
- Bid Separate MLTSS Contract: No
- HCBS Services for Persons with IDD via capitation: No
- Medicare Advantage Dual Eligible Special Needs Plan Type: D-SNP

2. MANAGED MEDICAID PLAN FINANCIALS

Medicaid plans in Georgia reported relatively strong financial results in 2023, with a combined medical loss ratio among plans of 81.0%. PMPM premiums in the state averaged \$249.86 among the plans.

(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.)

Georgia Medicaid Health Plan Financials, 2023									
Premiums Cost after Publicly Member Earned Medical Reinsurance Plan Traded Enrollment Months PMPM (000) Costs (000) (000) Miles									
Anthem/AMGP Georgia	Υ	483,870	6,667,968	\$263.07	\$1,754,109	\$1,413,267	\$1,390,329	79.3%	
CareSource	Υ	412,087	5,573,358	\$263.17	\$1,466,742	\$1,199,228	\$1,182,604	80.6%	
Centene/Peach State/WellCare	Υ	752,406	10,705,453	\$234.70	\$2,512,565	\$2,132,548	\$2,070,982	82.4%	
Totals		1,648,363	22,946,779	\$249.86	\$5,733,416	\$4,745,043	\$4,643,915	81.0%	

(1) After reinsurance recoveries.

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

Georgia Medicaid Health Plan Financials, 2022								
Plan	Publicly Traded	Enrollment	Member Months	PMPM	Premiums Earned (000)	Medical Costs (000)	MLR ⁽¹⁾	
Elevance/Anthem/AMGP Georgia	Υ	572,293	6,523,010	\$265.68	\$1,733,001	\$1,379,733	79.6%	
CareSource	N	470,413	5,350,521	\$261.77	\$1,400,626	\$1,161,074	82.8%	
Centene/Peach State/WellCare	Υ	946,120	11,128,489	\$251.37	\$2,797,388	\$2,107,625	75.3%	
Totals		1,988,826	23,002,020	\$257.85	\$5,931,016	\$4,648,431	78.4%	

(1) After reinsurance recoveries.

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

3. RFP DEVELOPMENTS AND ANALYSIS (UPDATED 12-3-2024)

Georgia Medicaid RFP Calendar							
Contract	Key Dates	# of Beneficiaries					
Georgia Families/Georgia Families 360	RFP Release Date: September 22, 2023 Proposals Due Date: December 1, 2023 Award Date: December 2, 2024 Current Contract End Date: June 30, 2025	1.5 million					
Source: GA Dept. of Community Health, HMA							

Georgia released in December 2024 award recommendations to four health plans for the Georgia Families and Families 360° program, covering approximately 1.5 million beneficiaries. The state last awarded contracts to plans in September 2015.

Of the four plans, CareSource, which currently has under 377,000 lives, was the sole incumbent awarded. New plans Humana, Molina, and UnitedHealthcare will serve the remaining 1.1 million lives. UnitedHealthcare was also awarded a contract for the Georgia Families 360° program which covers 27,000 children in foster care, adoption assistance, and certain juvenile justice programs. Incumbent Centene/Peach State Health Plan, Sentara, CVS/Aetna, Elevance/Amerigroup, and Roland Behm have filed protests over the contract awards.

Under the procurement, Georgia intends to carve in select ABD populations into managed care through a phased approach. However, only a subset of the ABD population will be included in the initial phase of the transition, beginning with SSI non-dual and non-home and community-based services members as of the effective date, and rolling in nursing home, non-SSI, and two HCBS waiver programs (elderly and physically disabled) in year three. Current incumbent contracts go through June 2025 but pending any extended protest period, current contracts could be extended further. Incumbents that were not awarded a contract are Elevance and Centene

The RFP describes DCH's Value-Based Purchasing (VBP) Withhold Arrangement and its Value-Based Rebate Program (VBR). DCH may withhold up to five percent of the health plan capitation rate for a specified period of time. Health plans may earn a maximum five percent incentive payment for meeting the VBP Performance Targets. DCH will assess a performance rebate on any underwriting gain above the actuarially sound capitate rates. DCH will determine the VBP and VBR Performance Targets.

The state agency also intends to require that by 18 months after the Operational Start Date, the Contractor must achieve NCQA Health Equity Plus Accreditation Status. The CMOs will be required to support Care Managers to directly provide and / or partner with Community-Based Organizations (CBOs) to address social determinants of health (SDOH)-related needs. CMOs will need to ensure the active referral to and follow-up on identified needs related to SDOH and report on performance of closed loop referral management.

Plan Name	Bid MMC	Awarded Georgia Families	Bid on Foster Care	Awarded Foster Care
CareSource	X	X	X	
Humana	X	Х		
Molina	Х	Х	Х	
UnitedHealthcare	Х	Х	X	Х
CVS/Aetna	Х			
Elevance/Amerigroup	Х			
AmeriHealth Caritas	Х		Al .	
Kaiser Foundation Health Plan	Х			
Centene/Peach State	Х			
Sentara Healthcare	Х			

4. MANAGED CARE ENROLLMENT UPDATE

Georgia Medicaid managed care enrollment in Georgia was down 7.2% in July 2024, compared to year-end 2023, after decreasing 17.2% in 2023, and increasing 8.3% in 2022, 12.2% in 2021, 22.7% in 2020 and 1.3% in 2019. CareSource entered the market in July 2017, reducing incumbents' market share in the state. [Note: enrollment figures do not include the Georgia Families 360 program, which, as of August 2021, served 29,699 children in foster care, adoption assistance and certain juvenile justice programs. The contract was awarded to

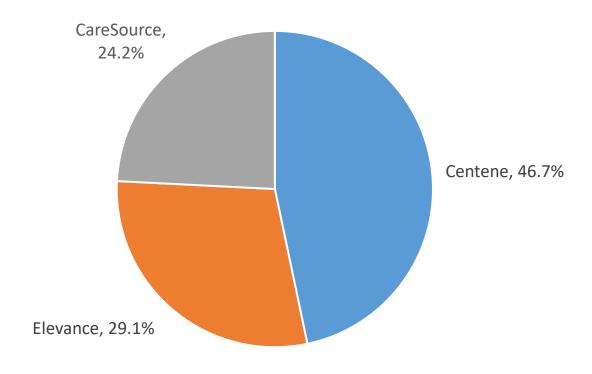
Plan	2020	2021	2022	2023	Jul-24
Centene ¹					
Peach State	429,801	966,146	1,011,388	812,349	729,951
+/- between reporting periods	86,502	536,345	45,242	811,430	728,304
% chg. between reporting	25.2%	124.8%	4.7%	-19.7%	-10.1%
periods					
% of total	25.7%	51.4%	49.7%	48.2%	46.7%
WellCare	510,699	0	0	0	0
+/- between reporting periods	510,699	(510,699)	0	0	0
% chg. between reporting periods	N/A	-100.00%	0.0%	0.0%	0.0%
% of total	30.5%	0.0%	0.0%	0.0%	0.0%
Total Centene	940,500	966,146	1,011,388	812,349	729,951
+/- between reporting periods	940,500	25,646	45,242	(199,039)	(82,398)
% chg. between reporting	•	23,040	43,242	(155,055)	
periods	N/A	2.7%	4.7%	-19.7%	-10.1%
% of total	56.2%	51.4%	49.7%	48.2%	46.7%
Elevance/Anthem/Amerigroup	430,266	519,001	573,961	483,216	455,415
+/- between reporting periods	90,772	88,735	54,960	482,519	454,030
% chg. between reporting	26.70/	20.60/	40.00/	45.00/	5.00/
periods	26.7%	20.6%	10.6%	-15.8%	-5.8%
% of total	25.7%	27.6%	28.2%	28.7%	29.1%
CareSource	303,708	393,724	450,324	388,978	378,096
+/- between reporting periods	81,600	90,016	56,600	388,258	376,680
% chg. between reporting	26.70/		•	·	·
periods	36.7%	29.6%	14.4%	-13.6%	-2.8%
% of total	18.1%	21.0%	22.1%	23.1%	24.2%
WellCare	0	0	0	0	0
+/- between reporting periods	(459,738)	0	0	0	0
% chg. between reporting					
periods	-100.0%	N/A	N/A	N/A	N/A
% of total	0.0%	N/A	N/A	N/A	N/A
Total Georgia	1,674,474	1,878,871	2,035,673	1,684,543	1,563,462
+/- between reporting periods	309,835	204,397	156,802	(351,130)	(121,081)
% chg. between reporting periods	22.7%	12.2%	8.3%	-17.2%	-7.2%

⁽¹⁾ Centene acquired WellCare in January 2020. In May 2021, WellCare merged with Peach State.

Note: Chart does not include Georgia Families 360 foster care enrollment; 29,699 Georgia Families 360 members were enrolled in the program in August 2021. Anthem/Amerigroup holds the contract.

Source: GA Dept. of Community Health, HMA





Source: GA Dept. of Community Health, HMA

5. MEDICAID FEE FOR SERVICE VS. MANAGED CARE PENETRATION

Total Medicaid enrollment in Georgia was approximately 2.2 million in 2023. About 78.3% of Medicaid beneficiaries were enrolled in a managed care plan. The remainder are in fee-for-service Medicaid. Total Medicaid expenditures in Georgia was \$15.9 billion in 2023, with about 46.5% through managed care and the rest through fee-for-service.

Georgia Expenditures and Enrollment for Total Medicaid vs. Medicaid Managed Care, 2014-23								
Year	Total Medicaid Expenditures	Medicaid Managed Care Expenditures ⁽¹⁾	Medicaid Managed Care Expenditures as % of Total	Total Medicaid/CHIP Enrollment	Medicaid MCO Enrollment	Medicaid MCO Enrollment as % of Total		
2023	\$15,936,633,577	\$7,407,914,562	46.5%	2,151,282	1,684,543	78.3%		
2022	\$14,339,599,611	\$5,727,136,419	39.9%	2,485,394	2,035,673	81.9%		
2021	\$12,210,335,666	\$4,765,023,101	39.0%	2,305,389	1,878,871	81.5%		
2020	\$11,298,595,472	\$4,063,111,528	36.0%	2,093,853	1,674,474	80.0%		
2019	\$10,851,623,393	\$3,212,642,314	29.6%	1,777,011	1,364,639	76.8%		
2018	\$10,839,404,783	\$3,225,594,400	29.8%	1,775,639	1,375,317	77.5%		
2017	\$10,105,996,059	\$3,893,097,384	38.5%	1,769,234	1,371,031	77.5%		
2016	\$9,723,814,007	\$3,798,735,856	39.1%	1,765,336	1,317,071	74.6%		
2015	\$9,664,791,833	\$3,437,295,784	35.6%	1,736,302	1,307,161	75.3%		
2014	\$9,396,958,654	\$3,307,726,245	35.2%	1,724,033	1,294,786	75.1%		

⁽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 Eligible

Georgia had a total of 302,225 special needs plan lives as of March 2024.

Georgia SNP Enrollment by Plan, March 2024									
Plan	Total SNPs	DSNPs	CSNPs	ISNPs	Share				
UnitedHealthcare ¹	135,304	95,164	39,003	1,137	44.8%				
Humana	106,120	90,174	15,946	0	35.1%				
CVS Health	27,476	27,476	0	0	9.1%				
Centene	13,849	13,849	0	0	4.6%				
Elevance	8,836	8,646	190	0	2.9%				
Cigna	5,565	5,565	0	0	1.8%				
PruittHealth Premier	1,659	31	0	1,628	0.5%				
Georgia Assurance	1,529	0	0	1,529	0.5%				
Kaiser	1,290	1,290	0	0	0.4%				
Sonder Health Plan	487	123	364	0	0.2%				
Clear Spring Health	110	42	68	0	0.04%				
Total	302,225	242,360	55,571	4,294	100%				

¹ UnitedHealthcare CSNP enrollment includes members from South Carolina

Source: CMS, HMA