

DY30 Q1 Report (January - March 2025)

Overall section 1115 demonstration	
State	Massachusetts
Demonstration name	11-W-00030/1 and 21-W-00071/1
Approval period for section 1115 demonstration	October 1, 2022 - December 31, 2027
Reporting period	Q1: January 1, 2025 – March 31, 2025
Demonstration goals and objectives	<ul style="list-style-type: none"><li>Continue the path of restructuring and reaffirm accountable, value-based care – increasing expectations for how ACOs improve care and trend management, and refining the model;</li><li>Make reforms and investments in primary care, behavioral health, and pediatric care that expand access and move the delivery system away from siloed, fee-for-service health care;</li><li>Continue to improve access to and quality and equity of care, with a focus on initiatives addressing health-related social needs and specific improvement areas relating to health quality and equity, including maternal health and health care for justice-involved individuals who are in the community;</li><li>Support the Commonwealth’s safety net, including ongoing, predictable funding for safety net providers, with a continued linkage to accountable care; and</li><li>Maintain near-universal coverage including updates to eligibility policies to support coverage and equity.</li></ul>

**Enrollment in Premium Assistance (STC 16.5.b.v.)**

During this reporting quarter (DY30, Q1), MassHealth provided premium assistance for 12,834 health insurance policies resulting in premium assistance to 25,157 MassHealth eligible members. The value of the third-party payments made by MassHealth during this reporting quarter was \$18,802,798.

<b>Premium Assistance Program: Employer Sponsored Insurance</b>	<b>Disabled Members</b>	<b>Non-Disabled Members</b>	<b>Total MassHealth Enrolled Members</b>
<i>Standard</i>	2,141	10,556	12,697
<i>CommonHealth</i>	4,583	0	4,583
<i>Family Assistance</i>	7	7,160	7,167
<i>CarePlus</i>	0	710	710
<b>Total for 1/1/25-3/31/25</b>	6731	18,426	25,157

Note: Non-zero numeric references less than 11 and related complimentary data fields have been masked (#) to protect confidentiality.

**Premium Assistance Disenrollment Rate**

During this reporting quarter, MassHealth provided premium assistance for 12,834 health insurance policies. Of these, 1233 policies disenrolled from Premium Assistance during this timeframe for a Premium Assistance disenrollment rate of 9.6%. Many of the policies that were disenrolled for failure to provide updated policy information when their plan year ends have their Premium Assistance reinstated once they do provide that information. Please note that losing Premium Assistance does not impact a member’s MassHealth eligibility status. Members disenrolled from Premium Assistance can continue to receive care from within the MassHealth network, assuming they remain eligible for MassHealth.

Premium Assistance Program: Employer Sponsored Insurance	Total Premium Assistance Policies	Total Policies Disenrolled from Premium Assistance	Premium Assistance Disenrollment Rate
Total for 1/1/25-3/31/25	12,834	1233	9.6%

**Waiver Evaluation (STC 16.5.d)**

Specific activities conducted by the Independent Evaluator during this quarter for the 2017-2022 and 2022-2027 1115 Demonstration evaluations are below.

**2017–2022 1115 Demonstration Evaluation Activities – Independent Evaluation Summative Report**

- Awaiting CMS feedback on the draft IESR which was submitted to CMS on 9/30/24;
- Discussed with MassHealth about preparing for dissemination activities of the summative report for lay audience;
- Continued preparation of dissemination products for submission to peer-reviewed journals and presentation at conferences.

**2017–2022 1115 Demonstration Evaluation – Publications and Presentations**

Abstracts accepted for presentation at AcademyHealth’s 2025 Annual Research Meeting (6/7-6/10/2025):

- Medicaid Housing-Related Supports Reduced Hospitalizations, Emergency Visits, and Costs for Adults with Behavioral Health Conditions in Massachusetts  
*Podium presentation; Lead author: Sabatino, Meagan*
- Massachusetts Delivery System Reform Incentive Payment Program and Supported Programs Produced a Positive Return on Investment Among Medicaid Accountable Care Organization Enrollees  
*Podium presentation; Lead author: Halasa-Rappel, Yara*
- Medicaid Flexible Services to Address Nutritional Needs: Impacts on Healthcare Utilization and Costs in Massachusetts  
*Podium presentation; Lead author: Hager, Kurt*
- The Impact of Risk-based Delivery System Transformation Initiatives on Quality Performance among Safety Net Hospitals in Massachusetts, 2017-2022  
*Poster presentation; Lead author: Wasserman, Eli*

**2022–2027 1115 Demonstration Evaluation Activities**

- Continued to refine the interim report evaluation timeline and workplan in consultation with MassHealth;

- Held meetings with MassHealth and external SMEs to coordinate evaluation activities;
- Continued to review MassHealth program information/policies and relevant literature to support the development of interview guides and surveys;
- Continued to develop Wave 1 draft interview guides (i.e., MassHealth Member, MCO, CBO) and related materials for Wave 1 primary data collection;
- Continued developing Wave 1 MassHealth program staff survey (open-ended questions);
- Completed fielding of Wave 1 BH Clinician Key Informant Interviews;
- Continued fielding Hospital Key Informant Interviews;
- Continued to develop the Wave 1 Practice Site Administrator and Workforce Initiatives Provider surveys;
- Continued coordination regarding data needs and data exchange with MassHealth;
- Continued compiling measure specifications and planning for quantitative analyses;
- Continued data cleaning and preparation, and began quantitative analyses.
- Continued to develop an abstract for Workforce Initiatives domain;
- Continued to manage project budgets and track spending ;
- Started developing outline of the interim report;
- Started analyses of qualitative interview data received to date.

For Reference: Specific activities conducted by the Independent Evaluator during this quarter for the 2017-2022 and 2022-2027 1115 Demonstration evaluations are below.

#### **2017-2022 1115 Demonstration Evaluation Activities – Independent Evaluation Summative Report**

- Awaiting CMS feedback on the draft IESR which was submitted to CMS on 9/30/24;
- Collaborated with MassHealth to develop a draft timeline for responding to CMS’ feedback on the IESR; and
- Continued preparation of dissemination products for submission to peer-reviewed journals and presentation at conferences.

#### **2017-2022 1115 Demonstration Evaluation – Publications and Presentations**

Sabatino, M. J., Sullivan, K., Alcusky, M. J., & Nicholson, J. (2024). Identifying and addressing health-related social needs: a Medicaid member perspective. *BMC health services research*, 24(1), 1203.

Jamakandi, S., Li, J., Chien, A. T., Alcusky, M., & Kerrissey, M. (2024). Pediatric Practices’ Experiences with Massachusetts’ Medicaid Accountable Care Organizations. *Academic Pediatrics*, 102601.

#### **2022-2027 1115 Demonstration Evaluation Activities**

- Began to draft evaluation timeline and workplan for the IEIR in consultation with MassHealth;
- Executed the minimum necessary documentation (MND) data request form for access to MassHealth data;

- Received MassHealth claims-related data extracts and began preparation of analytic datasets;
- Continued to review MassHealth program information/policies and relevant literature to support the development of interview guides and surveys;
- Continued the review process for programmatic documents shared by MassHealth;
- Completed fielding of Wave 1 ACO and CP Key Informant interviews;
- Began conducting Wave 1 BH Clinician and Hospital Key Informant interviews;
- Continued to develop Wave 1 draft interview guides (i.e., BH Clinician, Hospital, and MassHealth Member) and related materials for Wave 1 primary data collection;
- Continued to develop the Wave 1 Practice Site Administrator and Workforce Provider Preferences surveys;
- Started analyses of coverage & eligibility domain;
- Revised Evaluation Design Document, in consultation with MassHealth and SMEs, to incorporate amendments to the Waiver approved by CMS on 4/19/24; submitted revised EDD to CMS on 10/16/24; and
- Held meetings with MassHealth and external SMEs to coordinate evaluation activities.

#### **ACO and CP Delivery System Reform Incentive Payment (DSRIP) (STC 12.9)**

##### Flexible Services Program Updates

Please see below for **Flexible Services Program Quarterly Progress Report Summary of Services Provided** tables.

##### Health Related Social Needs Updates

- Health Related Social Needs Supplemental Services Updates
  - o In DY30 Q1, all ACOs launched HRSN Supplemental Services with a minimum of one housing and one nutrition service in partnership with a combined total of 42 organizations contracted to provide HRSN Supplemental Services. Approximately 65% of Social Services Organizations (SSOs) participating in Flexible Services became HRSN Providers. Some SSOs were not eligible to become HRSN Providers or chose not to become HRSN Providers in 2025, but may do so in the future.
  - o ACOs began screening, enrolling, and providing HRSN Supplemental Services to ACO Enrollees. ACOs navigated operations and implementation challenges while refining programs and engaging with MassHealth.
- Specialized Community Support Programs (CSP)
  - o Specialized CSP services provided to eligible members in fee for service and managed care plans went into effective in DY28 Q2, in April 2023. In the following months, MassHealth provided guidance and support to managed care plans and Specialized CSP providers to implement and operationalize these services.

### DSRIP Close-out

- MassHealth disbursed ~\$2.9M to one ACO in DSRIP at-risk payments based on the Budget Period 4 TCOC component and the Budget Period 5 Quality component of the DSRIP Accountability Scores.
- MassHealth also disbursed \$22.3M to all 27 Community Partners (CPs) in DSRIP at-risk payments and outcome-based payments based on Budget Period 5 DSRIP Accountability Scores, and \$30.5K to 18 Community Service Agencies (CSAs) in DSRIP at-risk payments based on Budget Period 5 DSRIP Accountability Scores.

### Enrollment Information

The enrollment activity below reflects enrollment counts for QE March 2025.

<u>Eligibility Group</u>	<u>Current Enrollees (to date)</u>
Base Families	911,483
Base Disabled	228,732
1902(r)(2) Children	9,931
1902(r)(2) Disabled	14,269
Base Childless Adults (19- 20)	32,615
Base Childless Adults (ABP1)	16,059
Base Childless Adults (CarePlus)	307,234
BCCTP	1,235

<u>Eligibility Group</u>	<u>Current Enrollees (to date)</u>
CommonHealth	15,356

e-Family Assistance	5,306
e-HIV/FA	477
SBE	N/A
Basic	N/A
DSHP- Health Connector Subsidies	N/A
Base Fam XXI RO	
1902(r)(2) XXI RO	
CommonHealth XXI	
Fam Assist XXI	
Asthma	N/A
TANF/EAEDC*	N/A
End of Month Coverage	N/A
<b>Total</b>	<b>1,542,697</b>

\* TANF is reported under Base Families

**Enrollment in Managed Care Entities and Primary Care Clinician Plan**

The enrollment activity below reflects the average monthly enrollment counts for the quarters ending December 31, 2024 and March 31, 2025.

Plan Type	QE 12/24	QE 3/25	Difference
MCO	179,284	176,261	(3,023)
PCC	49,984	44,722	(5,262)
MBHP*	388,774	369,645	(19,129)
FFS/PA**	688,015	679,860	(8,155)
ACO	1,148,590	1,129,199	(19,391)

\*MBHP enrollment does not represent members unique to the plan, as there is overlap with PCC and ACO Model B enrollment.

\*\*PA included in FFS and MBHP enrollment counts

**Member Month Reporting**

Enter the member months for each of the EGs for the quarter.

**A. For Use in Budget Neutrality Calculation**

<u>Expenditure and Eligibility Group (EG) Reporting</u>	<u>January 2025</u>	<u>February 2025</u>	<u>March 2025</u>	<u>Total for Quarter Ending 3/25</u>
Base Families	923,286	912,472	905,094	2,740,852
Base Disabled	230,952	229,918	227,911	688,781
1902(r)(2) Children	9,720	10,014	9,784	29,518
1902(r)(2) Disabled	14,129	14,161	14,300	42,590



<b>New Adult Group</b>	359,068	352,627	351,646	1,063,341
<b>BCCDP</b>	1,216	1,222	1,223	3,661
<b>CommonHealth</b>	15,240	15,365	15,357	45,962
<b>TANF/EAEDC*</b>	9,815	10,303	10,763	30,881

\*This line shows EAEDC member months. TANF member months are included with Base Families.

• **For Informational Purposes Only**

<b><u>Expenditure and Eligibility Group (EG) Reporting</u></b>	<b><u>Jan 2025</u></b>	<b><u>Feb 2025</u></b>	<b><u>March 2025</u></b>	<b><u>Total for Quarter Ending 3/25</u></b>
<b>e-HIV/FA</b>	472	466	469	1,407
<b>Small Business Employee Premium Assistance</b>	0	0	0	0
<b>DSHP- Health Connector Subsidies</b>	N/A	N/A	N/A	N/A

Base Fam XXI RO	0	0	0	0
1902(r)(2) RO	0	0	0	0
CommonHealth XXI	0	0	0	0
Fam Assist XXI	0	0	0	0

**Beneficiary Support System (STC 8.10)**

	2025			
	Q1			
AHS	January	February	March	Total
Eligibility	195,067	157,328	171,232	523,627
Health Plan	48,205	39,443	42,402	130,050
	243,272	196,771	213,634	653,677

Note: Combines agent and IVR contacts at AHS

**Flex Services Tables**

FS Program Quarterly Progress Report Summary of Services Provided*							
Q4 CY24**,†	Nutrition	Home Modifications	Tenancy Sustaining	Pre-Tenancy – Individual	Pre-Tenancy – Transitional	Total Unduplicated Members***	Total Spend (in millions)

<b>Atrius</b>	118	#	44	38	0	199	\$137K
<b>BACO</b>	1,117	#	109	279	78	1,338	\$1.270M
<b>BCH</b>	836	#	81	79	69	914	\$1.361
<b>Be Healthy Care Alliance</b>	219	57	0	0	0	268	\$429K
<b>Berkshire</b>	133	0	#	#	0	139	\$261K
<b>BILH</b>	520	21	144	166	46	588	\$808K
<b>CCC</b>	3,018	81	193	166	40	3,165	\$2.127M
<b>CHA</b>	535	#	13	82	#	596	\$261K
<b>East Boston</b>	284	0	16	29	13	305	\$277K
<b>Mercy</b>	382	33	75	47	#	446	\$412K
<b>MGB</b>	997	#	#	239	#	1,325	\$1.532M
<b>Reliant</b>	405	#	12	37	12	442	\$161K
<b>Signature</b>	165	#	47	63	#	223	\$251K
<b>Southcoast</b>	125	0	32	49	#	166	\$219K
<b>Revere</b>	490	32	#	727	110	891	\$824K
<b>Tufts Medicine</b>	443	12	85	130	18	531	\$579K
<b>UMass</b>	764	0	149	99	12	857	\$493K
<b>Total</b>	10,419	259	1,013	2,231	434	12,252	\$11.401M

\*All numbers are preliminary as MassHealth is still working on data clean up with ACOs. Adjustments may be made in future reports as data is verified.

\*\*Each service provided per ACO per category represents 1 member. Non-zero numeric references less than 11 and related complementary data fields have been masked (#) to protect confidentiality.

\*\*\*Members may receive services across multiple categories, in these cases, member may be included for the count of for multiple categories of services (e.g., Nutrition and Home Modification) but only count towards one in the “Total Members” column. This leads to the “Total Members” appearing to be smaller than the sum of the five category columns.

†Data from a given quarter is not due from ACOs until the last day of the following quarter, leading to a one-quarter lag in what MassHealth is able to report in this table.

FS Program Quarterly Progress Report Summary of Services Provided*					
	Q1 CY24	Q2 CY24	Q3 CY24	Q4 CY24	Overall CY24**

Flexible Services Categories	# of Services Provided in Each Category	Total Spend (in millions) in Each Category	# of Services Provided in Each Category	Total Spend (in millions) in Each Category	# of Services Provided in Each Category	Total Spend (in millions) in Each Category	# of Services Provided in Each Category	Total Spend (in millions) in Each Category	Overall # of Services Provided in Each Category	Overall Total Spend (in millions) in Each Category
Pre-Tenancy Individual	2,368	\$1.831M	2,621	\$1.671M	2,650	\$1.607M	2,231	\$1.608M	4,762	\$6.717M
Pre-Tenancy Transitional	593	\$745K	632	\$953K	486	\$826K	434	\$1.019M	1,095	\$3.543M
Tenancy Sustaining	1,635	\$1.280M	1,759	\$1.391M	1,858	\$1.386M	1,013	\$1.413M	2,900	\$5.470M
Home Modifications	594	\$363K	647	\$338K	631	\$205K	271	\$252K	975	\$1.158M
Nutrition	8,362	\$6.300M	9,464	\$6.130M	10,046	\$6.026M	10,554	\$7.109M	19,111	\$25.567M
# of Unique Members / \$ Spent	11,408	\$10.520M	12,746	\$10.484M	13,471	\$10.051M	12,396	\$11.401M	23,064	\$42.456M

\*All numbers are preliminary as MassHealth is still working on data clean up with ACOs. Adjustments may be made in future reports as data is verified.

\*\*Members may receive services across multiple quarters, in these cases, members may be included for the count of multiple quarters of services but only count towards one in the “# of Unique Members” row and in the “Overall # of Services Provided” column. This leads to those numbers appearing smaller than the sum of the individual service quarters.

**Health-Related Social Needs Services Tables**

	Percentage of Medicaid Renewals Completed Ex-Parte			
	Jan '25	Feb '25	Mar '25	Total Jan – March 2025
Number of Renewals Due	125,006	73,609	77,216	275,831
Number of Members renewed via Ex Parte	71,950	44,528	46,271	162,749
Percentage of Medicaid renewals completed Ex-Parte	58%	60%	60%	59%

	Percentage of Medicaid Beneficiaries Enrolled in SNAP		
	Jan '25	Feb '25	Mar '25
Number of Members Enrolled in SNAP	959,985	951,362	948,383
Percentage of Members Enrolled in SNAP	47%	47%	47%

	People newly enrolled in Medicaid as of CY24 Q4 that were also eligible for and enrolled in WIC by CY25 Q1
	Total Jan – March 2025
Number of people newly enrolled in Medicaid as of CY24 Q4 that were also eligible for and enrolled in WIC in CY25 Q1	5,355

Percentage of people newly enrolled in Medicaid as of CY24 Q4 that were also eligible for and enrolled in WIC in CY25 Q1	47%
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**CSP Tables**

	Member Count	Amount Paid
<b>Members receiving Specialized CSP Services 1/1/2025-3/31/2025</b>		
CSP-HI Fee For Service	15	\$10,644.48
CSP-HI MCE	390	\$463,764.55
CSP-HI non BH (for ACO only via Flexible Services authority )	0	\$0.00
CSP-TPP Fee For Service	1	\$22.81
CSP-TPP MCE	17	\$13,365.77
CSP-TPP non BH (for ACO only via Flexible Services authority )	0	\$0.00
CSP-JI Fee For Service	8	\$3,773.73
CSP-JI MCE	100	\$98,566.67

**Members receiving Homeless Medical Respite Services (HMRS) 1/1/2025-3/31/2025**

*5/30/25 Note: We are working to review this data and will include Q1 and Q2 numbers with the Q2 report.*

HMRS Pre Procedure Fee For Service		
HMRS Pre Procedure MCE		
HMRS Post Hospitalization Fee For Service		
HMRS Post Hospitalization MCE		
HMRS Post Hospitalization - Medical LOA - Fee For Service		
HMRS Post Hospitalization - Medical LOA - MCE		
HMRS Post Hospitalization - non medical LOA planned - Fee For Service		
HMRS Post Hospitalization - non medical LOA planned - MCE		

HMRS Post Hospitalization - non medical LOA unplanned - Fee For Service		
HMRS Post Hospitalization - non medical LOA unplanned - MCE		

**Members receiving HRSN Housing Services 1/1/2025-3/31/2025**

Housing Search - ACO only	61	\$55,900.00
Transitional Goods - ACO Only	1	\$75.14
Housing Navigation Services - ACO only	35	\$26,100.00
Housing Navigation Goods - ACO Only	0	\$0.00
Healthy Homes Services - purchase - ACO only	19	\$4,050.00
Healthy Homes Services - inhome assessment - ACO only	27	\$8,312.50
Healthy Homes Services - coordination - ACO only	4	\$1,000.00
Healthy Homes Goods - ACO only	22	\$9,490.87
Healthy Homes Remediation Services - ACO Only	1	\$1,522.85

**Members receiving HRSN Nutrition Services 1/1/2025-3/31/2025**

Medically Tailored Home Delivered Meals - ACO only	120	\$169,505.93
Nutritionally Appropriate Home Delivered Meals - ACO only	0	\$0.00
Medically Tailored Food Boxes - ACO only	160	\$73,665.16
Nutritionally Appropriate Food Boxes - ACO only	95	\$76,611.73
Medically Tailored Food Prescriptions and Vouchers - ACO only	31	\$8,911.75
Nutritionally Appropriate Food Prescriptions and Vouchers - ACO only	848	\$162,090.00
Nutrition Education - Classes - ACO only	1045	\$43,801.81
Nutrition Education - 1:1 Nutrition Education - ACO only	0	\$0.00
Nutrition Counseling - ACO only	184	\$9,043.49
Kitchen Supplies - ACO only	636	\$174,387.69