

DY29 Q1 Report (Jan – Mar 2024)

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	January 1, 2024 – March 31, 2024
Demonstration goals and objectives	<ul style="list-style-type: none">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;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;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;Support the Commonwealth’s safety net, including ongoing, predictable funding for safety net providers, with a continued linkage to accountable care; andMaintain near-universal coverage including updates to eligibility policies to support coverage and equity.

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

During this reporting quarter (DY29, Q1), MassHealth provided premium assistance for 10,164 health insurance policies resulting in premium assistance to # MassHealth eligible members. The value of the third-party payments made by MassHealth during this reporting quarter was \$16,605,223.

Premium Assistance Program: Employer Sponsored Insurance	Disabled Members	Non-Disabled Members	Total MassHealth Enrolled Members
<i>Standard</i>	1,826	7,895	9,721
<i>CommonHealth</i>	3,715	0	3,715
<i>Family Assistance</i>	#	5,676	5,681
<i>CarePlus</i>	0	604	604
Total for 1/1/24-3/31/24	#	14,175	#

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 10,164 health insurance policies. Of these, 737 policies disenrolled from Premium Assistance during this timeframe for a Premium Assistance disenrollment rate of 7.3%. 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 1/1/24-3/31/24	10,164	737	7.3%

Impact of Beneficiaries Outcomes of Care, Quality and cost of care, access to care, results of beneficiary satisfaction surveys (STC. 16.5.b)

During Q1, MassHealth conducted several activities focused on assessing beneficiary outcomes, quality, and experience of care. Much of this work focused on the preparation for survey, measurement, and analysis activities that will begin in Q2 of 2024.

- Worked with Member Experience Survey vendor, MHQP, on updating the survey and the member sample frame in preparation for CG CAHPS survey implementation in Q2.
- Worked with Comprehensive Quality Measure vendor, Telligen, to modify performance measure specifications and update supplemental data reporting template in preparation for measurement year (MY) 2023 ACO measurement.
- Reviewed prior year performance measure data and trended past performance at the contract, program, and MassHealth levels to identify quality priorities for Calendar Year (CY) 24.
- Initiated preparation for CY 2024 network adequacy reviews which will include geomapping of time and distance standards, provider directory validation, and secret shopper appointment access assessment.

Updated quality and outcome data will not be available until Q3 of 2024.

Waiver Evaluation (STC 16.5.d)

2017-2022 Waiver Evaluation Activities – DSRIP Goals 1&2

Quantitative Activities

- Continued secondary data acquisition
- Continued data preparation and analyses of MassHealth administrative claims and encounter data, hybrid quality measures, member experience surveys, Flexible Services data, MassHealth and other program data, ACO financial reconciliation data, and CP staff and ACO provider surveys
- Completed cost analyses for DSRIP ACO investments, DSRIP CP investments, DSRIP SWI, and DSRIP FS investments
- Completed the cost analysis of DSRIP State Operations and Implementation Funding
- Began preparing content for the Independent Evaluation Summative Report (IESR)
- Continued preparation of manuscripts for submission to peer-reviewed journals

Qualitative Activities

- Synthesized data over time and across and within sites as needed for the purposes of the IESR
- Continued document review of key program documents for DSRIP (e.g., ACO, CP, SSO, SWI) for the purposes of the IESR
- Continued writing, editing, and synthesizing content for the IESR
- Continued preparation of manuscripts for submission to peer-reviewed journals and conferences

2017-2022 Waiver Evaluation Activities - Goals 3, 4, 6, 7

- Continued updating descriptive statistics of program data and updating coding for claims data analysis for Goal 3
- Continued reviewing and analyzing data for HEDIS-based quality measures and reviewing the results for fee-for-service population analyses for Goal 4
- Continued updating analyses for Goal 6
- Completed review and comparison of data from two sources (DDE and MMIS) for Goal 7 analyses to validate the accuracy of data and to determine the choice of data sources.
- Continued developing data algorithm to identify members on Provisional Eligibility.
- Continued regular monthly meetings with MassHealth to ensure tasks are on track and to discuss issues as they arise.
- Continued research of policy developments relevant to each goal

2017-2022 Waiver Evaluation Activities – Goal 5

- Completed CDC WONDER data analysis
- Conducted interrupted time series analysis
- Continued to meet with MassHealth SUD program contacts to ensure the objectives of the evaluation are being met

- Began return on investment analysis

2017-2022 Waiver Evaluation Activities – Publications and Presentations

Dyer Z, Alcusky M, Himmelstein J, Ash A, Kerrissey M. Practice Site Heterogeneity in Massachusetts Medicaid ACOs. Healthcare. Healthcare (Basel). 2024 Jan 20;12(2):266. PMID: 38275548; PMCID: PMC10815263.

Abstracts Accepted for Presentation at the 2024 AcademyHealth Annual Research Meeting

- Housing and Nutritional Supports for Medicaid ACO Enrollees: Implementation Experiences and Utilization Trends in Massachusetts
Authors: Meagan Sabatino, Kurt Hager, PhD, Joanne Nicholson, PhD, Kate Sullivan, Margaret Tiedemann, Matthew Alcusky, PharmD, PhD
- Health-Related Social Needs Screening Among Medicaid ACO Members: Stakeholder Perspectives and Changes in Screening Rates Over Time
Authors: Meagan Sabatino, Kate Sullivan, Joanne Nicholson, PhD, Matthew Alcusky, PharmD, PhD
- Massachusetts Medicaid’s Health Information Technology Investments: Facilitation of Improved Organizational Partnerships and Streamlined Data-Sharing Processes
Authors: Cheyanne Zappala, Meagan Sabatino, Joanne Nicholson, Laura Sefton

2022-2027 Waiver Evaluation Activities

- Continued planning and organizing efforts for the 2022-2027 waiver evaluation. Specific activities included:
 - Revising the minimum necessary documentation (MND) form for access to MassHealth data;
 - Assigning staff allocations and resources;
 - Mapping out tasks, workplans, and timelines for qualitative and quantitative activities in Year 1.
- Began developing protocols and related materials for the first wave of primary data collection.
- Continued to review lessons learned from the previous waiver evaluation, as well as updated policies as developed by MassHealth and relevant literature to support the development of interview guides and surveys.

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

Health Related Social Needs Updates

- Non-DSRIP Flexible Services Program Updates
 - In DY29 Q1, all ACOs continued providing Flexible Services totaling 105 approved Flexible Services programs.
 - MassHealth updated its DY28 (i.e., CY23) Annual Progress Report form and released it to ACOs in Q1 DY29.
 - ACOs prepared to submit their Annual Progress Reports for DY28, which MassHealth is scheduled to review and approve over the course of Q2.

- Specialized CSP
 - MassHealth continued to provide guidance and support to managed care plans and Specialized CSP providers to implement and operationalize these services, which went into effect in DY28 Q2, in April 2023.
- DSRIP Close-out
 - While DSRIP program ended on 3/31/23, MassHealth continued to engage in DSRIP close-out activities in DY29 Q1.
 - MassHealth reissued \$205K in at-risk Infrastructure and Capacity Building funding to one CP that was unable to process the payment in the preceding payment cycle.

Enrollment Information

The enrollment activity below reflects enrollment counts for QE March 2024.

<u>Eligibility Group</u>	<u>Current Enrollees (to date)</u>
Base Families	959,342
Base Disabled	231,909
1902(r)(2) Children	20,928
1902(r)(2) Disabled	12,826
Base Childless Adults (19- 20)	28,434
Base Childless Adults (ABP1)	29,817
Base Childless Adults (CarePlus)	338,095
BCCTP	1,161

<u>Eligibility Group</u>	<u>Current Enrollees (to date)</u>
CommonHealth	21,859
e-Family Assistance	3,327
e-HIV/FA	479
SBE	0
Basic	N/A
DSHP- Health Connector Subsidies	N/A
Base Fam XXI RO	0
1902(r)(2) XXI RO	0
CommonHealth XXI	0
Fam Assist XXI	0
Asthma	N/A
TANF/EAEDC*	N/A
End of Month Coverage	N/A
Total	1,648,177

* 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, 2023 and March 31, 2024.

Plan Type	QE 12/23	QE 3/24	Difference
MCO	192,947	187,465	(5,482)
PCC	61,968	55,922	(6,046)
MBHP*	455,087	414,883	(40,204)
FFS/PA**	747,190	684,137	(63,053)
ACO	1,255,927	1,183,449	(72,478)

*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>Jan 2024</u>	<u>Feb 2024</u>	<u>Mar 2024</u>	<u>Total for Quarter Ending 3/24</u>
Base Families	972,731	959,896	948,153	2,880,780
Base Disabled	231,622	234,084	231,580	697,286
1902(r)(2) Children	20,909	18,590	15,334	54,833
1902(r)(2) Disabled	13,793	12,976	12,718	39,487

New Adult Group	409,871	398,380	383,583	1,191,834
BCCDP	1,150	1,138	1,142	3,430
CommonHealth	29,732	22,841	18,237	70,810
TANF/EAEDC	1,946	2,001	2,043	5,990

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

- For Informational Purposes Only**

<u>Expenditure and Eligibility Group (EG) Reporting</u>	<u>Jan 2024</u>	<u>Feb 2024</u>	<u>Mar 2024</u>	<u>Total for Quarter Ending 3/24</u>
e-HIV/FA	589	539	524	1,652
Small Business Employee Premium Assistance	0	0	0	0
DSHP- Health Connector Subsidies	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
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Beneficiary Support System (STC 8.10)

	2024			
	Q1			
AHS	January	February	March	Total
Eligibility	196,884	186,365	189,087	572,336
Health Plan	57,546	49,464	53,105	160,115
Grand Total	254,430	235,829	242,192	732,451

Flex Services Tables

FS Program Quarterly Progress Report Summary of Services Provided*							
Q4 CY23**	Nutrition	Home Modifications	Tenancy Sustaining	Pre-Tenancy – Individual	Pre-Tenancy – Transitional	Total Unduplicated Members***	Total Spend (in millions)
Atrius	179	35	86	17	#	324	\$324K
BACO	1,164	15	195	270	55	1,434	\$1.216M
BCH	671	#	37	15	#	712	\$1.210M
Be Healthy Care Alliance	184	113	0	0	0	287	\$358K
Berkshire	116	0	#	#	0	132	\$134K
BILH	367	#	126	112	31	431	\$379K
CCC	2,182	171	349	333	87	2,514	\$1.979M

CHA	334	#	29	111	#	439	\$225K
East Boston	247	0	28	37	#	284	\$245K
Mercy	163	#	45	41	12	205	\$230K
MGB	822	#	15	284	#	1,117	\$1.071M
Reliant	304	0	33	52	16	373	\$187K
Signature	120	#	46	58	#	190	\$135K
Southcoast	30	0	30	44	#	90	\$67K
Steward	246	17	45	371	202	560	\$852K
Tufts Medicine	235	#	84	110	12	344	\$325K
UMass	564	#	87	111	#	659	\$357K
Total	7,928	30	1,242	1,974	468	10,093	\$9.293M

***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 complimentary 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.**

FS Program Quarterly Progress Report Summary of Services Provided*								
Flexible Services Categories	Q2 CY23		Q3 CY23		Q4 CY23		CY23 Overall	
	# 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
Pre-Tenancy Individual	1,440	\$1.3M	1,788	\$1.560M	1,974	\$1.690M	3,009	\$4.550M
Pre-Tenancy Transitional	419	\$681K	443	\$701K	468	\$747K	783	\$2.130M
Tenancy Sustaining	858	\$799K	1,101	\$1.605M	1,242	\$1.240M	2,053	\$3.644M
Home Modifications	148	\$68K	254	\$174K	380	\$148K	533	\$391K
Nutrition	8,844	\$4.953M	9,061	\$6.142M	7,928	\$5.468M	14,526	\$16.564M
# of Unique Members / \$ Spent	10,393	\$7.803M	10,993	\$10.183M	10,093	\$9.293M	17,748	\$27.279
*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.								