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	April 1, 2023 – June 30, 2023			
Demonstration goals and objectives	 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; and Maintain 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, MassHealth provided premium assistance for 12,388 health insurance policies resulting in premium assistance to 25,916 MassHealth eligible members. The value of the third-party payments made by MassHealth during this reporting quarter was \$18,276,610.

Premium Assistance Program: Employer Sponsored Insurance	Disabled Members	Non-Disabled Members	Total MassHealth Enrolled Members	
Standard	2,003	13,372	15,375	
CommonHealth	3,598	0	3,598	
Family Assistance	10	6,190	6,200	
CarePlus	0	743	743	

Total for 4/1/23-6/30/23	5,611	20,305	25,916
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Premium Assistance Disenrollment Rate

During this reporting quarter, MassHealth provided premium assistance for 12,388 health insurance policies. Of these, 1,578 policies disenrolled from Premium Assistance during this timeframe for a Premium Assistance disenrollment rate of 12.7%. 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. Many of the policies who are disenrolled for failure to provide updated policy information when their plan year ends have their Premium Assistance reinstated once they do provide that information.

Premium Assistance Program: Employer Sponsored Insurance	Assistance Policies		Premium Assistance Disenrollment Rate
Total for 4/1/23-6/30/23	12,388	1,578	12.7%

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
- Continued data acquisition from MassHealth SWI Vendors to obtain information for cost analyses and completed costing analyses for eight of the 15 SWI programs
- Continued preparation of manuscripts for submission to peer-reviewed journals

Qualitative Activities

- Completed analysis of ACO, MCO, CP wave two KII data
- Completed analysis of member interviews wave two data
- Began analysis of SSO case study wave two interview data

- Planning analysis of ACO & CP case study wave two interview data
- Planning analysis of the MassHealth staff wave two interview data
- Continued review of ACO and CP program documents
- Continued integration and synthesis of data, over time and cross-site
- Planning Summative Report writing, including code mapping to Research Questions, development of a writing timeline, and establishing writing teams
- Continued preparation of manuscripts for submission to peer-reviewed journals

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
- Continued communicating with data system teams about compiling and transferring MH data to the Independent Evaluator for Goal 7
- Continued reviewing and comparing data from two sources (DDE and MMIS) for Goal 7 analyses to determine the best source
- Preparing a PowerPoint slide set to share the results of analysis comparing the two data sources for Goal 7 with MassHealth
- 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
- Began preparation of a manuscript for submission to a peer-reviewed journal

2017-2022 Waiver Evaluation Activities - Goal 5

- Obtained updated MA death data
- Obtaining updated CDC WONDER data
- Continued to update measures for 2020 for Goal 5
- Continued to meet with MassHealth SUD program contacts to ensure the objectives of the evaluation are being met

2022-2027 Waiver Evaluation Activities

MassHealth submitted the 2022-2027 Independent Evaluation Design on April 14, 2023. Also, during this quarter, the Independent Evaluator (IE) continued planning and organizing team activities for the new waiver period, formalizing the project governance structure, reviewing lessons learned from the previous 2017-2022 1115 Demonstration Independent Evaluation, and preparing the minimum necessary documentation form for data access to be submitted to MassHealth. In addition, the IE continued to review updated policies being developed by MassHealth and relevant literature. The IE has also been

reviewing the literature to support the development of interview guides and surveys. The IE continues to await CMS comments on the 2022-2027 Waiver Evaluation Design Document.

Beneficiary Support System (STC 8.10)

Call Center	Skill/Call Type	Calls Offered			
	Simil Cum Type	Apr-23	May-23	Jun-23	
Total MassHealth Enrollment Center Calls Offered		41,118	46,113	48,084	
	Applications	6,831	6,119	6,452	
	Assister	0	0	0	
	Eligibility	23,996	24,099	29,345	
Automated Health Systems	Health Plan	31,722	36,603	28,822	
Automated Health Systems	Language	3,878	3,853	3,768	
	OneCare/HSN	634	775	662	
	Replacement Card	823	436	536	
	Tax Form	3,653	911	477	
Total Automated Health Syste	ems Calls Offered	71,537	72,796	70,062	
	Eligibility	46,283	44,200	37,419	
Maximus	Health Plan	5,436	4,307	3,595	
	Specialty	12,305	12,232	10,238	
Total Maximus Calls Offered		64,024	60,739	51,252	

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

The DSRIP program ended on 3/31/2023, but MassHealth continued to engage in DSRIP close-out activities during Q2. MassHealth completed the review and scoring of CP Performance Remediation Plans. Also, during this quarter, MassHealth collected ACOs and CPs final deliverables for DSRIP Budget Period 5 (1/1/2022-3/31/2023), including budgets, budget narratives, and annual progress reports.

Flexible Services Program

During DY28 Q2, MassHealth supported ACOs wrapping up DSRIP Flexible Services Program activities and transitioning programs, as needed into the new contract years. In April, MassHealth began review of ACO PY5 Q4 (October – December 2022) Quarterly Tracking Reports and provided feedback to ACOs as needed. In May, those ACOs resubmitted their QTR reports and MassHealth began review of the PY5 Q4 Quarterly Tracking Report data. Additionally, MassHealth released guidance for the PY5 Flexible Services Annual Progress Reports. In June, ACOs submitted their PY5 Q5 Quarterly Tracking Reports (January – March 2023) and their PY5 Annual Progress Reports (January 2022 – March 2023).

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

Health Related Social Needs Updates

- Non-DSRIP Flexible Services Program Updates
 - In DY28 Q2, all ACOs were approved to begin providing Flexible Services via 112 approved Flexible Services Programs
 - As ACOs ramped up, several submitted modification requests to MassHealth that included increasing and decreasing individual program budgets, adding additional services, and expanding their target population.
- Specialized CSP
 - Specialized CSP services went into effective in DY28Q2, 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.

Enrollment Information

The enrollment activity below reflects enrollment counts for CY 2023 Quarter 2, as of June 30, 2023.

Eligibility Group	Current Enrollees (to date)
Base Families	1,079,224
Base Disabled	232,499
1902(r)(2) Children	35,600
1902(r)(2) Disabled	21,053
Base Childless Adults (19- 20)	24,047

Base Childless Adults (ABP1)	58,925
Base Childless Adults (CarePlus)	423,525
ВССТР	1,388

Eligibility Group	Current Enrollees (to date)
CommonHealth	33,717
e-Family Assistance	6,494
e-HIV/FA	729
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 Demonstration	1,917,201

^{*} 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 March 31, 2023 and June 30, 2023.

Plan Type	QE 3/23	QE 6/23	Difference
MCO	239,325	200,890	(38,435)

PCC	133,310	68,856	(64,454)
MBHP*	693,052	497,372	(195,680)
FFS/PA**	805,655	817,317	11,662
ACO	1,218,016	1,348,850	130,834

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

Member Month Reporting

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

A. For Use in Budget Neutrality Calculations

Expenditure and Eligibility Group (EG) Reporting	Apr 2023	May 2023	Jun 2023	Total for Quarter Ending 6/23
Base Families	1,081,235	1,084,813	1,073,145	3,239,193
Base Disabled	232,649	233,384	233,047	699,080
1902(r)(2) Children	35,559	35,037	34,139	104,735
1902(r)(2) Disabled	20,485	18,036	16,256	54,777
New Adult Group	505,027	494,435	463,381	1,462,843
BCCDP	1,372	1,321	1,271	3,694
CommonHealth	33,806	34,295	34,417	102,518
TANF/EAEDC	440	412	412	1,264

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

• For Informational Purposes Only

Expenditure and Eligibility Group (EG) Reporting	Apr 2023	May 2023	_	Total for Quarter Ending 6/23
e-HIV/FA	717	694	632	2,043
Small Business Employee Premium Assistance	0	0	0	0

^{**}PA included in FFS and MBHP enrollment counts

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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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FS Program Quarterly Progress Report Summary of Services Provided*										
Budget Period 5, Q5	Nutrition	Home Modifications			Pre-Tenancy – Transitional	Total Unduplicated Members***	Total Spend			
AHP - MVACO	475	#	170	19	#	555	\$418K			
ВМСНР - ВАСО	1,220	#	176	177	65	#	\$1.777M			
BMCHP - Mercy	65	0	21	12	#	#	\$95K			
BMCHP - Signature	44	0	0	0	0	44	\$61K			
BMCHP - Southcoast	118	0	0	0	0	118	\$388K			
С3	2,705	93	238	200	72	2,911	\$2.415M			
FLN - Berkshire	146	0	#	#	0	149	\$199K			
FLN - Reliant	27	0	#	35	0	#	\$108K			
FLN - Wellforce	77	#	18	75	29	#	\$186K			
HNE - Baystate	109	45	0	17	#	#	\$530K			
Lahey	29	0	11	#	#	46	\$51K			
MGB	229	#	#	42	#	283	\$2.044M			
SMCN	239	59	51	78	14	327	\$1.323M			
Tufts - Atrius	92	#	00	41	0	#	\$172K			
Tufts - BCACO	831	#	59	#	#	878	\$1.443M			
Tufts - BIDCO	104	#	40	58	15	#	\$269K			
Tufts - CHA	1,378	#	32	148	11	#	\$564K			
Total	7,866	225	835	921	226	9,119	\$12M			

*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		# of Services Provided in Each Category															
	Budget Period 3 (1/1/20 to 12/31/20)					Ви	Budget Period 4 (1/1/21 to 12/31/21)					Budget Period 5 (1/1/22 to 3/31/23)					
	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Q5	Total	
Pre-Tenancy Individual	17	61	225	377	480	583	821	860	894	2,209	1,021	1,222	1,001	909	921	3,201/ \$7M	
Pre-Tenancy Transitional	0	6	66	62	104	123	123	197	161	527	155	209	273	206	226	872/ \$3.6M	
Tenancy Sustaining	10	79	293	378	584	387	481	642	679	1,286	869	1,007	1,068	910	835	2,630/ \$6.1M	
Home Modificatio ns	0	3	68	109	176	103	96	172	145	495	190	220	374	210	225	1,084/ \$1.5M	
Nutrition	29	1,228	2,683	3,980	5,450	2,453	2,962	3,913	5,053	8,075	6,111	7,399	7,864	8,146	7,886	16,613/ \$34.5M	
# of Unique Members / \$ Spent		1,310 / \$949K	3,040 / \$2.5M	4,533 / \$3.1M	6,134 / \$6.7M	3,275 / \$3.4M	3,915 / \$4.8M	4,995 / \$7.3M	6,148/ \$7.1M	10,466 / \$22.6M	8,346 / \$7.5M	8,968/ \$10.3M	9,513/ \$11.4M	9,381/ \$11.1M	9,119/ \$12M	20,382/ \$52.6M	
# of Unique Members / \$ Spent Across All Quarters	29,192 / \$82M																

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*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.