

STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

ELIZABETH HERTEL DIRECTOR

December 14, 2023

Keri Toback
Division of Program Operations – East Branch
Medicaid & CHIP Operations Group
Centers for Medicare & Medicaid Services
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519

Dear Ms. Toback,

Re: Project Number 11-W-00302/5 – Flint Michigan Section 1115 Demonstration

Enclosed is the annual report for the Flint Michigan Section 1115 Demonstration. It covers the seventh year of the demonstration. The report provides operational information, program enrollment, and policy changes related to the waiver as specified in the Special Terms and Conditions.

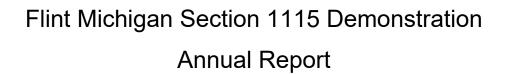
Should you have any questions related to the information contained in this report, please contact Jacqueline Coleman. She may be reached by e-mail at colemanj@michigan.gov.

Sincerely,

Keith White, Director Actuarial Division

cc: Christine Davidson Stephen Esquivel-Pickett Kamia Rathore April Wiley SiQing Xu

Enclosure (16)



Demonstration Year: 7 (10/01/2022 – 09/30/2023)

Table of Contents

Introduction	3
Enrollment and Benefits Information	3
Table 1: DY 7 Flint Demonstration Enrollment by Month	3
Table 2: DY 7 Flint Demonstration New Enrollment by Month	4
Table 3: DY 7 Flint Demonstration Re-Enrollment by Month	4
Table 4: DY 7 Flint Demonstration Disenrollment by Month	5
Table 5: DY 7 Cumulative Flint Demonstration PCP Utilization	5
Table 6: DY 7 Monthly Flint Demonstration PCP Visits	6
Table 7: DY 7 Genesee Health System Targeted Case Management Activity	6
Outreach/Innovation Activities to Assure Access	7
Operational and Policy Development	7
Consumer Issues	7
Table 8: DY 7 Flint Demonstration Customer Service Requests	7
Demonstration Evaluation	8
Enclosures/Attachments	13
State Contacts	13
Date Submitted to CMS	14

Introduction

On March 3, 2016, the Centers for Medicare and Medicaid Services (CMS) approved the Michigan Department of Health and Human Services' (MDHHS) application to expand Medicaid coverage for individuals impacted by lead exposure in the Flint water system. Through the demonstration, entitled "Flint Michigan Section 1115 Demonstration" and the associated state plan amendments, State Medicaid eligibility expanded to low-income children and pregnant women who were served by the Flint water system during a specified period of time and who would not otherwise be eligible for Medicaid. This population consists of children in households with incomes from 212 percent of the federal poverty level (FPL) up to and including 400 percent of the FPL and pregnant women in households with incomes from 195 percent up to and including 400 percent of the FPL.

The demonstration population receives care primarily through Medicaid managed care plans and receives all state plan benefits including, for children, Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Individuals receiving benefits under the demonstration are exempt from cost sharing and premiums. Targeted Case Management and home lead investigation services are available to children and pregnant women served by the Flint water system during the defined period who have been determined eligible for Medicaid. The provision of specialized services are limited to certain providers as allowable under the approved demonstration.

Enrollment and Benefits Information

Enrollment into the Flint Medicaid waiver program began May 9, 2016. Beneficiaries already eligible for Medicaid were contacted by mail with information on expanded services provided by the waiver. Potential enrollees can apply for the program via the MDHHS website, by calling a toll-free number or by visiting any MDHHS County office or an area navigator site. Healthcare coverage and application information for people impacted by the Flint water system can be found on the MDHHS website.¹

Demonstration enrollment activity is detailed in this section of the report. For reporting purposes, the Children enrollment group is defined as demonstration enrollees under the age of 21. Pregnant women are identified using pregnancy indicators in the MDHHS data warehouse. To avoid duplication, pregnant women are excluded from the Children enrollment group. The following table shows enrollment in the demonstration by month.

Table 1: DY 7 Flint Demonstration Enrollment by Month					
Month	Pregnant Women	Children	Total		
October 2022	341	26,277	26,618		
November 2022	338	26,260	26,598		
December 2022	334	26,262	26,594		
January 2023	358	26,285	26,643		
February 2023	338	25,978	26,316		
March 2023	339	26,333	26,672		

¹ http://www.michigan.gov/mdhhs/0,5885,7-339-71547-384168--,00.html

DY 7 Flint Demonstration Enrollment by Month Continued					
Month	Pregnant Women	Children	Total		
April 2023	304	26,310	26,614		
May 2023	308	26,337	26,645		
June 2023	318	26,332	26,650		
July 2023	312	26,412	26,724		
August 2023	337	26,148	26,485		
September 2023	323	25,671	25,994		

Table 2 displays Flint demonstration new enrollment by month. This includes individuals who may have previously been enrolled in other Medicaid programs but are new to the Flint demonstration.

Table 2: D	Table 2: DY 7 Flint Demonstration New Enrollment by Month				
Month	Pregnant Women	Children	Total		
October 2022	44	93	137		
November 2022	40	103	143		
December 2022	38	108	146		
January 2023	68	108	176		
February 2023	30	94	124		
March 2023	51	109	160		
April 2023	32	72	104		
May 2023	45	94	139		
June 2023	48	96	144		
July 2023	45	138	183		
August 2023	68	148	216		
September 2023	48	136	184		
DY 7 Total	557	1,299	1,856		

Table 3 shows Flint demonstration re-enrollments by month. Re-enrollments include individuals who have disenrolled and re-enrolled in the Flint demonstration. Individuals under the re-enrollment category also include individuals that may have previously been enrolled in other Medicaid programs.

Table 3:	Table 3: DY 7 Flint Demonstration Re-Enrollment by Month					
Month	Pregnant Women	Children	Total			
October 2022	22	104	126			
November 2022	13	82	95			
December 2022	17	88	105			
January 2023	27	86	113			
February 2023	10	93	103			
March 2023	21	416	437			
April 2023	11	80	91			
May 2023	15	118	133			
June 2023	18	87	105			
July 2023	16	109	125			
August 2023	35	131	166			
September 2023	24	149	173			
DY 7 Total	229	1,543	1,772			

Table 4 contains Flint demonstration disenrollment by month. Disenrollment for a reporting month contains individuals with program enrollment in the prior reporting month that do not have program enrollment for the current reporting month. For example, individuals defined as disenrolled in October 2022 were enrolled in the demonstration in September 2022 but were not enrolled in October 2022. Demonstration disenrollment is often the result of transferring to another Medicaid program.

Table 4: DY 7 Flint Demonstration Disenrollment by Month					
Month	Pregnant Women	Children	Total		
October 2022	33	233	266		
November 2022	43	236	279		
December 2022	42	244	286		
January 2023	44	230	274		
February 2023	50	527	577		
March 2023	50	215	265		
April 2023	67	228	295		
May 2023	44	210	254		
June 2023	38	232	270		
July 2023	51	221	272		
August 2023	43	487	530		
September 2023	62	696	758		
DY 7 Total	567	3,759	4,326		

Additional demonstration disenrollment reports by month have been included as attachments. Enrollment maps depicting the geographic distribution of demonstration enrollees for the year have also been included as attachments to this report. The attached reports will not necessarily align numerically with the figures reported in the annual report tables due to differences in the timing of data retrieval and specifications.

MDHHS monitors the Flint demonstration population's usage of Medicaid benefits to assure access to care. The following access to care metrics utilize the same enrollment group definitions for children and pregnant women as described for tables 1 – 3. It should be noted that the Children Under 6 category below is a subgroup of the Children category. The following table lists the cumulative, unduplicated count of Flint demonstration enrollees since the waiver begin date of May 9, 2016 through the end of the reporting year, September 30, 2023. The table displays the total number of those enrolled with a visit to a provider with a primary care associated specialty. This includes practitioners with a specialty of family medicine, general medicine, internal medicine or pediatrics. This metric includes any procedure rendered by a primary care provider (PCP).

Table 5: DY 7 Cumulative Flint Demonstration PCP Utilization					
May 2016 – September 2023					
Enrollment Croup	Cumulative Enrollment	Cumulative Count of	Cumulative Percentage of		
Enrollment Group	Cumulative Emoliment	Enrollees with PCP Visit(s)	Enrollees with PCP Visit(s)		
Children	44,261	41,722	94%		
Children Under 6	18,743	18,251	97%		
Pregnant Women	5,538	5,316	96%		
Total	49,799	47,038	94%		

Table 6 indicates the monthly count of PCP visits for the Flint demonstration population.

Tabl	Table 6: DY 7 Monthly Flint Demonstration PCP Visits					
Month	Pregnant Women Visits	Children Visits	Total			
October 2022	121	12,662	12,783			
November 2022	101	12,196	12,297			
December 2022	83	9,570	9,653			
January 2023	127	12,336	12,463			
February 2023	70	10,669	10,739			
March 2023	116	10,649	10,765			
April 2023	140	12,161	12,301			
May 2023	148	12,875	13,023			
June 2023	96	10,203	10,299			
July 2023	156	10,961	11,117			
August 2023	137	12,649	12,786			
September 2023	132	11,099	11,231			
DY 7 Total	1,427	138,030	139,457			

Targeted Case Management services are provided by Genesee Health System and include the following assistance:

- · Comprehensive assessment and periodic reassessment of individual needs;
- Development of a specific care plan;
- Referrals and related activities to help obtain needed services;
- Monitoring and follow-up activities.

The following table includes Targeted Case Management service activity as provided by Genesee Health System. Individuals counted as those with ongoing services are defined as individuals receiving a Targeted Case Management-related service other than assessment during the month, including unbilled face-to-face and phone contacts.

Table 7: DY 7 Genese	Table 7: DY 7 Genesee Health System Targeted Case Management Activity					
Month	Count of Assessments	Count of Enrollees with Ongoing Targeted Case Management				
October 2022	4	16				
November 2022	3	4				
December 2022	2	0				
January 2023	0	0				
February 2023	0	0				
March 2023	0	0				
April 2023	0	0				
May 2023	2	0				
June 2023	2	0				
July 2023	0	0				
August 2023	0	0				
September 2023	1	0				
DY 7 Total	827	1,319				

Outreach/Innovation Activities to Assure Access

MDHHS and community partners work together to coordinate and implement outreach for those affected by the Flint water system. Activities have included press conferences, public service announcements, community events, advertisements on radio and television, social media posts, and letters to providers and potential enrollees. The public can access waiver specific information, including weekly enrollment reports, on the department's website.² A variety of expenditure data and resources for Flint families are available on the State's Flint water website.³ MDHHS has prominently displayed links to both Flint websites on the MDHHS homepage.⁴

Operational and Policy Development

MDHHS regularly meets with Medicaid Health Plans and provider groups to address operational issues, programmatic issues, and policy updates and clarifications. Additionally, MDHHS provides updates to the Medical Care Advisory Council (MCAC) at regularly scheduled quarterly meetings. Enrollment in the Flint demonstration remains stable and the demonstration population continues to consistently access services. This year the CMS approved the extension of the Flint Michigan 1115 Demonstration until September 30, 2026.

Consumer Issues

MDHHS utilizes the Beneficiary Helpline as a central point of contact for members to ask questions, report complaints and resolve issues. Information on beneficiary complaints and health plan grievances and appeals are currently collected for other Medicaid programs. In the following table, MDHHS has refined existing reporting mechanisms to measure Flint demonstration member telephone contacts with the department.

Table 8: DY 7 Flint Demonstration Customer Service Requests				
October 2022 – September 2023				
Category	Number of Contacts			
Obtaining Prescriptions	30			
Eligibility Not Recognized	9			
Flint Attested	8			
Covered Services Issue	4			
COVID Medicaid Reopen	4			
Enrollment Issues	4			
Newborn Enrollment	3			
Other	3			
Medicare Issues	2			
Duplicate ID	2			
Total	69			

² http://www.michigan.gov/mdhhs/0,5885,7-339-71547-376862--,00.html

³ http://www.michigan.gov/flintwater

⁴ http://www.michigan.gov/mdhhs/

Demonstration Evaluation

MDHHS has commissioned the Michigan State University Institute for Health Policy (MSU-IHP) to serve as the Flint demonstration independent evaluator. MSU-IHP continues to meet with MDHHS to discuss project progress.

Review of Domain Hypotheses and Planned Analyses:

Quarter 1

CMS' approval of the evaluation plan was pending as of 12/31/2022. In the interest of timeliness, the evaluation team moved forward with activities as described in the application.

Domain I: Access to Services

Domain I will examine the hypothesis that demonstration enrollees will access services to identify and address physical or behavioral health issues associated with lead exposure at a rate higher than others with similar levels of lead exposure. This quarter, all relevant Domain I hypotheses were reviewed and utilized to update the enrollee surveys as well as write the Second Demonstration workplan.

Domain II: Access to Targeted Case Management

Domain II will assess if demonstration enrollees who access Targeted Case Management services will access needed medical, social, educational, and other services at a rate higher than others with similar levels of lead exposure. This quarter, all relevant Domain II hypotheses were reviewed and utilized to update the enrollee surveys as well as write the Second Demonstration workplan.

Domain III: Improved Health Outcomes

Domain III will evaluate the hypothesis that demonstration enrollees will have improved health outcomes compared to others with similar levels of lead exposure. This quarter, all relevant Domain III hypotheses were reviewed and utilized to update the enrollee surveys as well as write the Second Demonstration workplan.

Domain IV: Lead Hazard Investigation

Domain IV will examine if the lead hazard investigation program reduces estimated expected ongoing or re-exposure to lead hazards in the absence of this program. This quarter, all relevant Domain IV hypotheses were reviewed and utilized to update the enrollee surveys as well as write the Second Demonstration workplan.

Quarter 2

This quarter's administrative activities included ongoing workgroup meetings to monitor activities and produce deliverables. The full workgroup met bi-weekly to discuss current activities related to evaluation operations and analytics, 2023 (Demonstration 2, Wave 1)

Enrollee Survey design and implementation and preparing the 2022 Annual Report. MSU-IHP met with MDHHS monthly to discuss project progress, obtain clarifications (i.e. enrollment data), and address operational questions.

Additional administrative activities this quarter including the following:

- 2022 Annual Report delivered 03/02/2023.
- Updated and submitted drafts of 2023 adult and child enrollee surveys and cover letters to MDHHS.
- Reviewed warehouse data acquisition process and updated queries.
- Finalized plan for survey sampling (i.e. target population, incentive, etc.).
- Finalized plan for data analyses (i.e. comparison group, data stratification, etc.).
- Pulled and delivered necessary 2023 enrollee survey sample contact information to the Office of Survey Research in preparation for survey dissemination.
- Began designing community partner focus group interview guides and surveys that will be conducted in Quarter 2.

Domain I: Access to Services

Domain I will examine the hypothesis that demonstration enrollees will access services to identify and address physical or behavioral health issues associated with lead exposure at a rate higher than others with similar levels of lead exposure. This quarter, MSU-IHP reviewed to prepare/refine enrollee survey questions related to Targeted Case Management, physical health, and behavioral health services. Additionally, MSU-IHP reviewed and updated eligibility, enrollment, and utilization data warehouse queries to reflect criteria associated with Domain 1 hypotheses.

Domain II: Expand Medicaid Eligibility

Domain II will assess if demonstration enrollees who access Targeted Case Management services will access needed medical, social, educational, and other services at a rate higher than others with similar levels of lead exposure. This quarter, MSU-IHP reviewed to prepare and refine enrollee survey questions related to health care knowledge and coverage. Hypotheses 2.2 and 2.3 have been reviewed and will be utilized during the preparation of questions for community partner focus groups and surveys.

Domain III: Improved Health Outcomes

Domain III will evaluate the hypothesis that demonstration enrollees will have improved health outcomes compared to others with similar levels of lead exposure. This quarter, MSU-IHP reviewed to prepare and refine enrollee survey questions. Additionally, MSU-IHP reviewed and updated utilization data warehouse queries to reflect criteria associated with Domain 3 hypotheses.

Quarter 3

This quarter's administrative actions included ongoing workgroup meetings to monitor activities and produce deliverables. The full workgroup met bi-weekly to discuss activities related to evaluation operations and analytics as well as the 2023 (Demonstration 2, Wave 1) Enrollee Survey design and implementation. MSU-IHP met with MDHHS to discuss project progress and address questions related to Flint Medicaid Expansion (FME) Waiver operations.

Domain I: Access to Services

Domain I will examine the hypothesis that demonstration enrollees will access services to identify and address physical or behavioral health issues associated with lead exposure at a rate higher than others with similar levels of lead exposure. This quarter, MSU-IHP compared enrollee survey questions related to accessing TCM, physical health, and behavioral health services against the Domain I Hypotheses, to ensure all evaluation plans for Domain I were met. Additionally, MSU-IHP reviewed Domain I Hypotheses and updated eligibility, enrollment, and utilization data warehouse queries to reflect criteria associated with Domain I hypotheses. MSU-IHP composed a list of developmental ICD-10 codes to identify enrollees' rates of accessing developmental screenings.

Domain II: Expand Medicaid Eligibility

Domain II will assess if demonstration enrollees who access Targeted Case Management services will access needed medical, social, educational, and other services at a rate higher than others with similar levels of lead exposure. This quarter, MSU-IHP compared Domain II Hypotheses to enrollee survey questions related to health care knowledge and coverage, to ensure all evaluation plans were met. Domain II Hypotheses were reviewed to prepare questions related to FME Waiver eligibility and processes for community partner focus groups. Additionally, MSU-IHP designed and submitted the community focus group discussion guide and invitee list to MDHHS for review and feedback.

Domain III: Improved Health Outcomes

Domain III will evaluate the hypothesis that demonstration enrollees will have improved health outcomes compared to others with similar levels of lead exposure. This quarter, MSU-IHP compared Domain III Hypotheses to enrollee survey questions related to self-reported health and education outcomes, to ensure all evaluation plans were met. Additionally, Domain III Hypotheses were reviewed and updated health outcomes and utilization data warehouse queries accordingly to reflect criteria associated with Domain III hypotheses. MSU-IHP researched diagnostic reporting options that would be available through administrative health care data to identify educational measures in lieu of FERPA protected individual level education data.

Additional domain-led activities as reported by MSU-IHP are as follows:

Domain I & Domain III:

- Enrollment, utilization, census tract, lead screening, and MCIR data for SFY22 (10/01/2021 09/30/2022) pulled for Genesee County, FME enrollees, and for control counties (Calhoun, Muskegon, and Saginaw).
- Historical (05/01/2013 09/30/2021) enrollment, utilization, census tract, lead screening, and MCIR data, related to Domains I and II, pulled for new comparison counties (Muskegon and Calhoun).
- Compared the 2022 HEDIS technical specifications with the 2023 HEDIS technical specifications to identify coding variations for targeted outcome measures related to Domains I and II.

Domain I, Domain II & Domain III:

- Updated and submitted drafts of the 2023 adult and child enrollee surveys and cover letters to MDHHS for review and feedback.
- Implemented a Spanish version of the 2023 adult and child enrollee surveys and cover letters and submitted these to MDHHS.
- Selected survey sample and acquired contact information to disseminate 2023 adult and child enrollee surveys and cover letters.

Quarter 4

This quarter's administrative actions included ongoing workgroup meetings to monitor activities and produce deliverables. The full workgroup met bi-weekly to discuss current activities related to evaluation operations and analytics. MSU-IHP met monthly with MDHHS to address project progress and address questions related to waiver operations. This quarter, MSU-IHP updated the First Demonstration Period Summative Report, based on feedback provided by CMS and MDHHS.

Domain II:

- MSU-IHP met with MDHHS to discuss the focus group questionnaire and identify
 opportunities to connect with FME specialists in Flint that interact with enrollees and
 have knowledge of ground-level enrollment processes. The information gathered during
 conversations with MDHHS and FME specialists will be used as supplemental
 information in future reports.
- The community focus group discussion guide and invitee list were approved by MDHHS and finalized by evaluators.
- Individuals on the invitee list were contacted to determine if they were interested in participating in the focus group. Invitations were sent out to those that showed interest in participating.

Domain I & Domain II:

- MSU-IHP met with Genesee Health System (GHS) to discuss their experiences with the waiver, client interactions, TCM utilization rates, and telehealth billing.
- MSU-IHP continued conversations with GHS regarding how they bill services.

Domain I & Domain III:

- MSU-IHP compared the 2022 HEDIS technical specifications with the 2023 HEDIS technical specifications to identify coding variations for targeted outcome measures related to Domains I and III. MSU-IHP noted identified variations and will include a discussion in future reports.
- MSU-IHP reviewed recent literature on difference-in-difference methods and other statistical models to ensure the best statistical methods are used to analyze data.
- MSU-IHP reviewed updates to the Neighborhood Atlas Index and CDC Social Vulnerability Index (SVI) to ensure all measures are up to date.
- MSU-IHP identified MAGI (Modified Adjusted Gross Income) codes that were updated and assessed the impact this had on findings. A note in the 2023 Annual Report will be made to demonstrate that the number of individuals with MAGI codes changed due to a change in State-level coding.
- Claims data were analyzed and MSU-IHP began to create tables based on findings.

Domain I, Domain II, & Domain III:

- MSU-IHP distributed adult and child enrollee surveys to selected survey sample.
- MSU-IHP collected completed surveys and entered information into a database for future analysis.
- Based on the response rate, MSU-IHP determined whether or not a new survey replicate should be included. Evaluators decided the responses were sufficient to not require an additional sample replicate. Opportunities to use test or post-card reminders in subsequent survey waves was discussed with MDHHS to maximize survey responses. Discussions are ongoing.
- An increased proportion of undeliverable surveys were returned to the original Flint Waiver Survey experience. Current mapping efforts are exploring the degree to which the undeliverable addresses are clustered.

Enclosures/Attachments

- 1. October 2022 Flint Demonstration Disenrollment Report (CM-100)
- 2. November 2022 Flint Demonstration Disenrollment Report (CM-100)
- 3. December 2022 Flint Demonstration Disenrollment Report (CM-100)
- 4. January 2023 Flint Demonstration Disenrollment Report (CM-100)
- 5. February 2023 Flint Demonstration Disenrollment Report (CM-100)
- 6. March 2023 Flint Demonstration Disenrollment Report (CM-100)
- 7. April 2023 Flint Demonstration Disenrollment Report (CM-100)
- 8. May 2023 Flint Demonstration Disenrollment Report (CM-100)
- 9. June 2023 Flint Demonstration Disenrollment Report (CM-100)
- 10. July 2023 Flint Demonstration Disenrollment Report (CM-100)
- 11. August 2023 Flint Demonstration Disenrollment Report (CM-100)
- 12. September 2023 Flint Demonstration Disenrollment Report (CM-100)
- 13. Demonstration Year 7 Q4 Geographic Distribution Enrollment Map: Pregnant Women
- 14. Demonstration Year 7 Q4 Geographic Distribution Enrollment Map: Children
- 15. Demonstration Year 7 Q4 Geographic Distribution Enrollment Map: Children Under 6

State Contacts

If there are any questions about the contents of this report, please contact one of the following people listed below.

Jacqueline Coleman, Waiver Specialist

Phone: (517) 284-1190

Carly Todd, Specialist

Phone: (517) 284-1196

Approval Period: March 3, 2016 through September 30, 2026

Paul Abid, Hospital Reimbursement and Special Financing

Phone: (517) 284-1195

Keith White, Actuarial Division Director

Phone: (517) 284-1191

Actuarial Division

Behavioral and Physical Health and Aging Services Administration

BPHASA, MDHHS, P.O. Box 30479

Lansing, MI 48909-7979

Fax: (517) 241-5112

Date Submitted to CMS

December 14, 2023

Report ID: CM-100

Report Period: 10/01/2022 Run Time: 2:03:54PM

1. Monthly count of disenr	ollment because o	f transfer to an	other eligibility gro	oup: 117
2. Monthly count of disenr	ollment other tha	n transfer to an	other Medicaid group	: 45
3. Monthly count of benefi 4. Number of beneficiaries 5. Number of beneficiaries	due for renewal	who did not rene		5
6. Enrollment continuity i	n weeks for all i	ndividuals enrol	lad during the reper	ring month:
			red during the repor	indirent.
05/0	7/2016 Thru	08/31/2022	Count: 76,584	
	07/2016 Thru 01/2022 Thru			ı
09/0		08/31/2022	Count: 76,584	1 3
09/0 09/0	1/2022 Thru	08/31/2022 09/03/2022	Count: 76,584 Count: 88	
09/0 09/0 09/1	1/2022 Thru 4/2022 Thru	08/31/2022 09/03/2022 09/10/2022	Count: 76,584 Count: 88 Count: 29	1 3 0

Run Date: 02/03/2023

Report ID: CM-100

Report Period: 11/01/2022 Run Time: 2:06:23PM

1. Monthly count of d	isenrollment b	ecause o	f transfer to a	another elig	bility group:	117
2. Monthly count of d ⁻	isenrollment c	other tha	n transfer to a	another Medio	caid group:	64
3. Monthly count of be 4. Number of beneficia 5. Number of beneficia	aries due for	renewal	who did not ren		504 504 0	
6. Enrollment continu	ity in weeks f	or all i	ndividuals enro	olled during	the reporting mon	th:
	05/07/2016	Thru	10/31/2022	Count:	77,028	
	11/01/2022	Thru Thru	11/05/2022	Count:		
	11/01/2022 11/06/2022				77,028	
	11/01/2022	Thru	11/05/2022	Count:	77,028 100	
	11/01/2022 11/06/2022	Thru Thru	11/05/2022 11/12/2022	Count: Count:	77,028 100 15	

Run Date: 02/03/2023

Report ID: CM-100

Report Period: 12/01/2022 Run Time: 2:10:30PM

1. Monthly count of disenrollm	nent because	of transfer to	another elig	ibility group:	82
2. Monthly count of disenrollm	ment other th	nan transfer to	another Medi	caid group:	27
 Monthly count of benefician Number of beneficiaries due Number of beneficiaries due 	e for renewal	who did not re		514 514 1	
6. Enrollment continuity in we	eeks for all	individuals enr	olled during	the reporting mon	th:
05/07/20)16 Thru	11/30/2022	Count:	77,251	
05/07/20 12/01/20		11/30/2022 12/03/2022	Count:	77,251 87	
)22 Thru				
12/01/20)22 Thru)22 Thru	12/03/2022	Count:	87	
12/01/20 12/04/20	022 Thru 022 Thru 022 Thru	12/03/2022 12/10/2022	Count: Count:	87 35	

Run Date: 02/03/2023

Report ID: CM-100

Run Date: 04/26/2023 Report Period: 01/01/2023 Run Time: 7:44:44PM

1. Monthly count of disenrollment	because	of transfer to	another elig	ibility group:	93
2. Monthly count of disenrollment	: other th	an transfer to	another Medi	caid group:	58
3. Monthly count of beneficiaries	due for	renewal:		573	
4. Number of beneficiaries due fo	r renewal	who did not re	new:	573	
5. Number of beneficiaries due fo	r renewal	who lost eliai	hilitv:	0	
51 Name of Senerician 100 and 10			~	·	
6. Enrollment continuity in weeks					th:
05/07/2016	Thru	12/31/2022	Count:	77,447	
01/01/2023	Thru	01/07/2023	Count:	118	
01/08/2023	Thru	01/14/2023	Count:	39	
01/15/2023	Thru	01/21/2023	Count:	29	
01/22/2023	Thru	01/28/2023	Count:	41	
		/ /			
01/29/2023	Thru	01/31/2023	Count:	23	

Report ID: CM-100

Run Date: 04/26/2023 Report Period: 02/01/2023 Run Time: 8:03:41PM

1. Monthly count of disenrollment	because o	f transfer to a	another eligi	ibility group:	112
2. Monthly count of disenrollment	other tha	n transfer to a	another Medic	caid group:	51
 Monthly count of beneficiaries Number of beneficiaries due for Number of beneficiaries due for 	renewal	who did not re		509 509 0	
6. Enrollment continuity in weeks	for all i	ndividuals enro	olled during	the reporting mo	onth:
05/07/2016 02/01/2023 02/05/2023 02/12/2023 02/19/2023	Thru Thru Thru Thru Thru	01/31/2023 02/04/2023 02/11/2023 02/18/2023 02/25/2023	Count: Count: Count: Count: Count:	77,697 111 23 33 34	

Report ID: CM-100

Run Date: 04/26/2023 Report Period: 03/01/2023 Run Time: 8:08:29PM

1. Monthly count of disenrollment becau	se of transfer to a	nother eligibility grou	p: 107
2. Monthly count of disenrollment other	than transfer to a	nother Medicaid group:	65
3. Monthly count of beneficiaries due f	or renewal:	524	
4. Number of beneficiaries due for rene	wal who did not ren	ew: 524	
5. Number of beneficiaries due for rene	wal who lost eligib	ility: 0	
6. Enrollment continuity in weeks for a 05/07/2016 Thr			ng month:
	, ,	Count: 77,917	
03/01/2023 Thr		Count: 86	
03/05/2023 Thr	, ,	Count: 33	
03/12/2023 Thr 03/19/2023 Thr	, ,	Count: 32	
, ,	, ,	Count: 39 Count: 38	
03/26/2023 Thr	u 03/31/2023	Count: 38	

Report ID: CM-100

Report Period: 04/01/2023 Run Time: 8:29:26AM

1. MC	onthly count of disenrollment	because	of transfer to	another elig	ibility group:	118
2. мс	onthly count of disenrollment	other th	an transfer to	another Medi	caid group:	59
4. Nu	onthly count of beneficiaries umber of beneficiaries due for umber of beneficiaries due for	renewal	who did not re		1850 1850 0	
6. Er	nrollment continuity in weeks	for all	individuals enr	olled during	the reporting mor	th:
	05/07/2016	Thru	03/31/2023	Count:	78,128	
	04/01/2023	Thru	04/01/2023	Count:	86	
	04/02/2023	Thru	04/08/2023	Count:	30	
	04/02/2023 04/09/2023	Thru Thru	04/08/2023 04/15/2023	Count: Count:	30 27	
	04/09/2023	Thru	04/15/2023	Count:	27	

Run Date: 07/06/2023

Report ID: CM-100

Run Date: 07/06/2023 Report Period: 05/01/2023 Run Time: 8:31:52AM

1. Monthly count of di	senrollment becau	se of transfer to	another eligib	ility group:	117
2. Monthly count of di	senrollment other	than transfer to	another Medica	id group:	71
 Monthly count of be Number of beneficia Number of beneficia 	ries due for rene	wal who did not re		1944 1944 1	
6. Enrollment continui	ty in weeks for a	ll individuals enr	olled during t	he reportina mon	th:
				търстътију	
	05/07/2016 Thr	u 04/30/2023	Count:	78,330	
	05/07/2016 Thro 05/01/2023 Thro	•	Count:		
		u 05/06/2023		78,330	
	05/01/2023 Thr	u 05/06/2023 u 05/13/2023	Count:	78,330 124	
	05/01/2023 Thro	u 05/06/2023 u 05/13/2023 u 05/20/2023	Count: Count:	78,330 124 27	

Report ID: CM-100

Run Date: 07/06/2023 Report Period: 06/01/2023 Run Time: 8:33:48AM

	1. Monthly count of disenrollment b	ecause o	of transfer to a	another elig	ibility group:	103
	2. Monthly count of disenrollment o	other tha	an transfer to a	another Medi	caid group:	78
					4256	
	Monthly count of beneficiaries d	lue for i	renewal:		1356	
	4. Number of beneficiaries due for	renewal	who did not re	new:	1177	
	5. Number of beneficiaries due for	renewal	who lost eligil	bility:	1	
	6. Enrollment continuity in weeks f	or all i	individuals enro	olled during	the reporting mor	nth:
	05/07/2016	Thru	05 /21 /2022	Count	70 501	
	05/07/2016		05/31/2023	Count:	78,581	
	06/01/2023	Thru	06/03/2023	Count:	98	
	06/04/2023	Thru	06/10/2023	Count:	42	
	06/11/2023	Thru	06/17/2023	Count:	44	
	06/18/2023	Thru	06/24/2023	Count:	54	
	06/25/2023	Thru	06/30/2023	Count:	47	
l .						

Report ID: CM-100

Run Date: 10/05/2023 Report Period: 07/01/2023 Run Time: 2:49:49PM

1. Monthly	count of disenrollment b	ecause	of transfer to	another elig	ibility group:	98
2. Monthly	count of disenrollment o	other th	an transfer to	another Medi	caid group:	415
4. Number o	count of beneficiaries of beneficiaries due for for beneficiaries due for	renewal	who did not re		1275 1143 662	
6. Enrollme	nt continuity in weeks f	for all	individuals enr	olled during	the reporting mo	nth:
	05/07/2016	Thru	06/30/2023	Count:	78,830	
	07/01/2023	Thru	07/01/2023	Count:	88	
	07/02/2023	Thru	07/08/2023	Count:	31	
	07/09/2023	Thru	07/15/2023	Count:	65	
	07/16/2023	Thru	07/22/2023	Count:	63	
	07/23/2023	Thru	07/29/2023	Count:	71	

****** END OF THE REPORT *******

Report ID: CM-100

Report Period: 08/01/2023 Run Time: 3:27:36PM

	1. Monthly count of disenrollment because	of transfer to another eli	gibility group:	96
	2. Monthly count of disenrollment other th	an transfer to another Mec	icaid group:	627
	 Monthly count of beneficiaries due for Number of beneficiaries due for renewal Number of beneficiaries due for renewal 	who did not renew:	1490 1244 728	
	6. Enrollment continuity in weeks for all	individuals enrolled durir	g the reporting month:	
	05/07/2016 Thru	07/31/2023 Count:	79,177	
	08/01/2023 Thru	08/05/2023 Count:	109	
	08/06/2023 Thru	08/12/2023 Count:	49	
	08/13/2023 Thru	08/19/2023 Count:	70	
	08/20/2023 Thru	08/26/2023 Count:	70	
	08/27/2023 Thru	08/31/2023 Count:	53	
I				

Run Date: 10/05/2023

Report ID: CM-100

Report Period: 09/01/2023 Run Time: 3:32:13PM

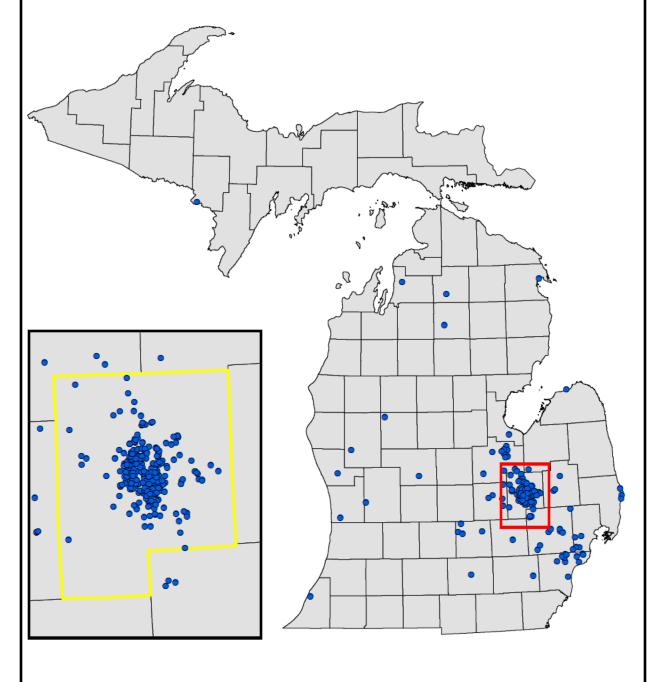
	1. Monthly count of disenrollment because of transfer to another eligibility group: 150
	2. Monthly count of disenrollment other than transfer to another Medicaid group: 950
	3. Monthly count of beneficiaries due for renewal: 1491 4. Number of beneficiaries due for renewal who did not renew: 1219 5. Number of beneficiaries due for renewal who lost eligibility: 4
	6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
	05/07/2016 Thru 08/31/2023 Count: 79,528
	09/01/2023 Thru 09/02/2023 Count: 85
	09/03/2023 Thru 09/09/2023 Count: 75
	09/10/2023 Thru 09/16/2023 Count: 75
	09/17/2023 Thru 09/23/2023 Count: 50
	09/24/2023 Thru 09/30/2023 Count: 64
I	

Run Date: 10/05/2023

Flint Demonstration Waiver Enrollees

Pregnant July - September 2023

Genesee: 328 All Other Counties: 86



Source: MDHHS Data Warehouse Retrieved on October 31, 2023

MDHHS - Actuarial Division October 31, 2023

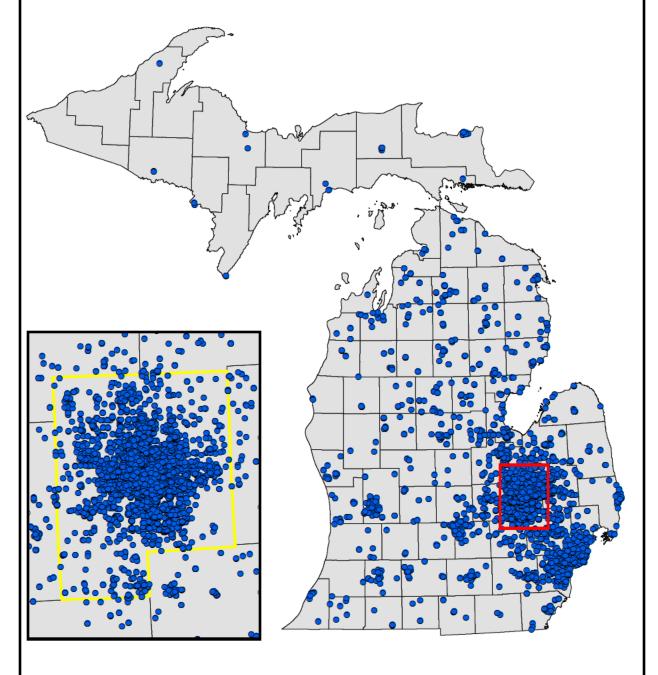
Flint Demonstration Waiver Enrollees

0-20 Years Old

July - September 2023

Genesee: 21,284

All Other Counties: 3,592



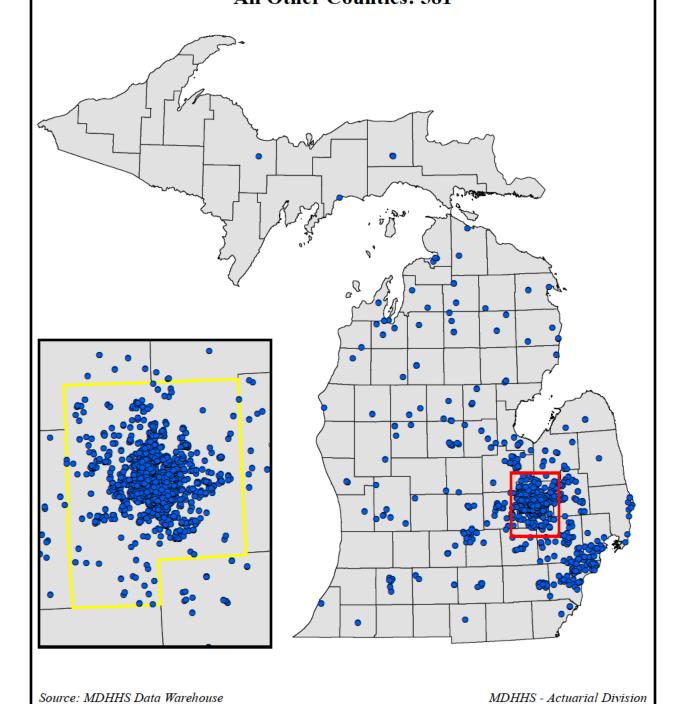
Source: MDHHS Data Warehouse Retrieved on October 31, 2023 MDHHS - Actuarial Division October 31, 2023

Flint Demonstration Waiver Enrollees

0-5 Years Old

July - September 2023

Genesee: 3,020 All Other Counties: 581



October 31, 2023

Retrieved on October 31, 2023