

STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

ELIZABETH HERTEL
DIRECTOR

December 19, 2024

Christine Davidson
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. Davidson,

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 eighth 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,

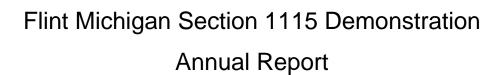
Keith White, Director Actuarial Division

cc: Keri Toback

Stephen Esquivel-Pickett

Kamia Rathore April Wiley SiQing Xu

Enclosure (16)



Demonstration Year: 8 (10/01/2023 - 09/30/2024)

Table of Contents

Introduction	3
Enrollment and Benefits Information	3
Table 1: DY 8 Flint Demonstration Enrollment by Month	3
Table 2: DY 8 Flint Demonstration New Enrollment by Month	4
Table 3: DY 8 Flint Demonstration Re-Enrollment by Month	4
Table 4: DY 8 Flint Demonstration Disenrollment by Month	5
Table 5: DY 8 Cumulative Flint Demonstration PCP Utilization	5
Table 6: DY 8 Monthly Flint Demonstration PCP Visits	6
Table 7: DY 8 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 8 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 8 Flint Demonstration Enrollment by Month					
Month	Pregnant Women Children Tota				
October 2023	335	24,987	25,322		
November 2023	333	24,630	24,963		
December 2023	346	24,285	24,631		
January 2024	361	24,137	24,498		
February 2024	360	23,998	24,358		
March 2024	348	23,783	24,131		

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

DY 8 Flint Demonstration Enrollment by Month Continued						
Month	Pregnant Women	Pregnant Women Children				
April 2024	363	23,266	23,629			
May 2024	373	23,256	23,629			
June 2024	378	22,932	23,310			
July 2024	386	22,745	23,131			
August 2024	371	22,797	23,168			
September 2024	378	22,832	23,210			

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: DY 8 Flint Demonstration New Enrollment by Month				
Month	Pregnant Women	Children	Total	
October 2023	33	167	200	
November 2023	36	190	226	
December 2023	41	182	223	
January 2024	53	171	224	
February 2024	45	191	236	
March 2024	36	194	230	
April 2024	46	182	228	
May 2024	44	178	222	
June 2024	47	169	216	
July 2024	51	196	247	
August 2024	33	182	215	
September 2024	43	169	212	
DY 8 Total	508	2,171	2,679	

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: DY 8 Flint Demonstration Re-Enrollment by Month				
Month	Pregnant Women	Children	Total	
October 2023	33	230	263	
November 2023	23	469	492	
December 2023	24	217	241	
January 2024	24	323	347	
February 2024	19	306	325	
March 2024	14	309	323	
April 2024	27	296	323	
May 2024	27	639	666	
June 2024	18	311	329	
July 2024	25	351	376	
August 2024	23	307	330	
September 2024	21	291	312	
DY 8 Total	278	4,049	4,327	

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 2023 were enrolled in the demonstration in September 2023 but were not enrolled in October 2023. Demonstration disenrollment is often the result of transferring to another Medicaid program.

Table 4: DY 8 Flint Demonstration Disenrollment by Month				
Month	Pregnant Women	Children	Total	
October 2023	55	936	991	
November 2023	61	826	887	
December 2023	52	743	795	
January 2024	62	642	704	
February 2024	65	636	701	
March 2024	62	718	780	
April 2024	58	995	1,053	
May 2024	61	827	888	
June 2024	60	804	864	
July 2024	68	734	802	
August 2024	71	437	508	
September 2024	57	425	482	
DY 8 Total	732	8,723	9,455	

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, 2024. 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 8 Cumulative Flint Demonstration PCP Utilization							
May 2016 – September 2024							
Enrollment Group	Cumulative Count of Cumulative Percentage of						
Enrollment Group	Cumulative Enrollment	Enrollees with PCP Visit(s)	Enrollees with PCP Visit(s)				
Children 47,543		45,071	95%				
Children Under 6	19,651	19,173	98%				
Pregnant Women	5,984	5,743	96%				
Total 53,527 50,814 95							

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

Table 6: DY 8 Monthly Flint Demonstration PCP Visits					
Month	Pregnant Women Visits	Children Visits	Total		
October 2023	151	10,263	10,414		
November 2023	130	10,257	10,387		
December 2023	153	8,738	8,891		
January 2024	179	9,290	9,469		
February 2024	182	10,109	10,291		
March 2024	158	9,574	9,732		
April 2024	192	9,694	9,886		
May 2024	171	9,274	9,445		
June 2024	168	7,664	7,832		
July 2024	197	8,173	8,370		
August 2024	208	9,040	9,248		
September 2024	186	9,280	9,466		
DY 8 Total	2,075	111,356	113,431		

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 8 Genesee Health System Targeted Case Management Activity				
Month	Count of Assessments	Count of Enrollees with Ongoing		
WOTHT	Count of Assessments	Targeted Case Management		
October 2023	0	0		
November 2023	0	1		
December 2023	0	0		
January 2024	0	0		
February 2024	0	0		
March 2024	0	0		
April 2024	0	0		
May 2024	0	0		
June 2024	0	0		
July 2024	0	0		
August 2024	0	0		
September 2024	0	0		
DY 8 Total	0	1		

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 8 Flint Demonstration Customer Service Requests					
October 2023 – September 2024					
Category Number of Contacts					
Obtaining Prescriptions	39				
Enrollment Issues	24				
Dental	22				
Enrollment/Eligibility Not Recognized	15				
Covered Services Issue	8				
1095B Issues	5				
Other	5				
Duplicate ID	3				
Covid Medicaid Reopen	2				
Newborn Enrollment	2				
Special Disenrollment Issue	2				
Total	127				

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. 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. 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. Domain III will evaluate the hypothesis that demonstration enrollees will have improved health outcomes compared to others with similar levels of lead exposure.

Review of Domain Hypotheses and Planned Analyses:

Quarter 1

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 including accessing administrative data, survey data, engage with key stakeholders. 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

This quarter, evaluators completed preliminary analyses of administrative data. MSU-IHP reviewed the MDHHS 2023 Healthcare Effectiveness Data and Information Set (HEDIS®) Aggregate Report and compared measures to preliminary analyses to ensure findings were statistically similar to MDHHS findings.

Domain II: Expand Medicaid Eligibility

This quarter, MSU-IHP met with MDHHS to discuss opportunities to connect with Flint-based FME specialists that interact with enrollees and have knowledge of ground-level enrollment processes. MSU-IHP contacted key stakeholders a second time and invitations were sent out to those that showed interest in participating and upcoming availability. An initial focus group was scheduled by MSU-IHP.

Domain III: Improved Health Outcomes

Updates specific to this domain are included in subsequent sections.

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

Domain I & Domain III:

 Comparison of 2018 and 2021 MAGI (Modified Adjusted Gross Income) code descriptions and identification of descriptions that were updated (F15, F16, and F19-

- F32). MSU-IHP assessed the impact this had on findings. Additionally, MSU-IHP initiated conversations with MDHHS to determine how updates to descriptions influence analyses.
- Comparison of TCMF enrollment, based on eligibility data, with the MDHHS Flint Waiver Progress Reports. Evaluators identified differences in the numbers of new and existing beneficiaries between eligibility data and progress reports. MSU-IHP held conversations with MDHHS to address discrepancies identified and determine how existing enrollees were identified in the MDHHS progress report.
- Identification of the number of beneficiaries with a benefit flag that resided in the 7 zip codes (48507, 48506, 48529, 48509, 48504, 48519, 48532, 48503, 48505, 48502) reported by MDHHS and observed how the number of enrollees changes as evaluators expanded analyses to 11 zip codes. MSU-IHP began conversations with MDHHS on which zip codes should be used as well as how to best identify potential TCMF-eligible beneficiaries who did not enroll.
- Continued analysis of claims data and creating tables based on findings.
- Review of census tract data. Beneficiaries with identified census tracts were matched to social vulnerability data. Evaluators identified that the percent of enrollees outside of Genesee County had increased from 9% to 16%. Comparison county data was combined to have 1 comparison group for analyses.

Domain I, Domain II, & Domain III:

- MSU-IHP finalized collection of completed surveys and entered information into a database for analysis.
- Conducted hotspot analyses to explore how undeliverable addresses from the Flint Waiver Survey were clustered. No hot or cold spots were identified for "undeliverable" and "no response" surveys, indicating that there was no systemic pattern in where these instances occurred.
- Evaluators prepared for analysis of survey data.

Quarter 2

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 including accessing administrative data, survey data, engage with key stakeholders. MSU-IHP met with MDHHS to discuss project progress and address questions related to FME Waiver operations. The 2023 Annual report was delivered to on March 1, 2024. Additionally, drafts of the child and adult 2024 Enrollee Surveys submitted to MDHHS this quarter for approval.

Domain I: Access to Services

Updates specific to this domain are included in subsequent sections.

Domain II: Expand Medicaid Eligibility

This quarter, MSU-IHP connected with MDHHS to discuss potential plans to design and deliver a survey to Flint-based FME specialists that interact with enrollees and have knowledge of ground-level enrollment processes. Due to schedule constraints, evaluators evolved the key stakeholder focus group discussion guide into a survey and disseminated to individuals that showed interest in participating in the focus groups.

Domain III: Improved Health Outcomes

Updates specific to this domain are included in subsequent sections.

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

Domain I & Domain III:

- State Fiscal Year 2023 administrative claims data were pulled from the Data Warehouse.
- Continued conversations with MDHHS to address discrepancies identified when comparing MDHHS progress reports with eligibility data and determine how existing enrollees were identified in the MDHHS progress report.
- Continued conversations with MDHHS on how to best identify potential TCMF-eligible beneficiaries who did not enroll.

Domain I, Domain II, & Domain III:

- Evaluators completed preliminary analyses of 2023 Enrollee Survey data.
- Domains 1-3 and the 2023 Enrollee surveys were reviewed and compared, to ensure all
 corresponding hypotheses were addressed in the adult and child surveys. Necessary
 adjustments were made for the 2024 surveys and drafts were sent to MDHHS for
 approval.

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 current activities related to evaluation operations and analytics including 2023 administrative data, 2024 Enrollee Survey implementation, and engagement with key stakeholders. MSU-IHP met with MDHHS to discuss project progress and address questions related to FME Waiver operations. The 2024 child and adult enrollee surveys (English, Spanish, and Arabic) were reviewed and approved by MDHHS on 04/23/2024. All final materials (surveys, mailers, and postcard reminders) were sent to MDHHS to archive.

Domain I: Access to Services

Updates specific to this domain are included in subsequent sections.

Domain II: Expand Medicaid Eligibility

This quarter, the stakeholder survey was closed. Data collected from the survey was analyzed and a summary report was written. After analyses were complete, evaluators talked to MDHHS about findings regarding participant's knowledge of the waiver and TCM services. Evaluators and MDHHS agreed that follow-up conversations were necessary from some participants to collect additional information about their experiences. Evaluators began connecting with participants and will continue work in the next quarter. MSU-IHP designed a survey for Flint-based FME specialists that interact with enrollees and have knowledge of ground-level enrollment processes. Evaluators are planning to submit this to MDHHS for approval next quarter.

Domain III: Improved Health Outcomes

Updates specific to this domain are included in subsequent sections.

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

Domain I & Domain III:

 Compared the 2023 HEDIS technical specifications with the 2024 HEDIS technical specifications to identify coding variations for targeted outcome measures related to analytics of administrative claims data.

Domain I, Domain II, & Domain III:

- Wrote a summary report on 2023 survey methods and findings.
- Established survey sampling criteria for the 2024 child and adult enrollee surveys.
- 2024 survey mailers were disseminated to the two survey replicates as well as postcard reminders to those that had not completed the survey online or by phone 2 weeks after the mailers were delivered.
- Discovered research demonstrating that demographics of survey participants differ based on survey formats (online, paper, phone).
 - To determine if paper surveys should be mailed out to all beneficiaries that did not respond to the mailer and postcard reminders, analytics of 2023 survey participant demographics commenced at the end of the quarter.

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 including 2023 administrative data, 2024 Enrollee Survey implementation, and engagement with key stakeholders. MSU-IHP met with MDHHS to discuss project progress and address questions related to FME Waiver operations. Additionally, evaluators submitted the updated date use agreement (DUA) to MDHHS for approval. MSU-IHP designed and presented two posters summarizing First Demonstration period findings, with MDHHS approval, at the Healthy Flint Research Coordinating Center's Research Symposium.

Domain I: Access to Services

Updates specific to this domain are included in subsequent sections.

Domain II: Expand Medicaid Eligibility

This quarter, follow-up questions for the stakeholder survey were designed and disseminated to Genesee Health System staff to collect additional information regarding their experiences working with FME beneficiaries and perception of the waiver. MSU-IHP continued conversations with MDHHS regarding community partner awareness of the waiver and potential educational endeavors. A draft survey was submitted for Flint-based FME specialists that interact with enrollees and have knowledge of ground-level enrollment processes to MDHHS for approval. Plans for survey distribution efforts were finalized.

Domain III: Improved Health Outcomes

Updates specific to this domain are included in subsequent sections.

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

Domain 1 & Domain 3:

- Compared the 2023 HEDIS technical specifications with the 2024 HEDIS technical specifications to identify coding variations for targeted outcome measures related to analytics of administrative claims data.
- Evaluators identified a low number of mothers in Genesee County that was not present in comparison counties. Administrative claims for this sub-population were re-pulled from the data warehouse and analyzed to assess if anything has changed.
- Concluded analyses of State Fiscal Year 2023 administrative claims data.
 - In Q4 of 2024, evaluators will integrate administrative claims findings into the 2024 Annual Report that will be submitted in Q1 of 2025.

Domain 1, Domain 2, & Domain 3:

- Paper copies of the 2024 Enrollee Survey were disseminated to those that had not participated in the survey online or by phone after receiving mailers and postcard reminders.
 - Plans for closing the 2024 survey were finalized and implemented at the beginning of Q4.

Enclosures/Attachments

- 1. October 2023 Flint Demonstration Disenrollment Report (CM-100)
- 2. November 2023 Flint Demonstration Disenrollment Report (CM-100)
- 3. December 2023 Flint Demonstration Disenrollment Report (CM-100)
- 4. January 2024 Flint Demonstration Disenrollment Report (CM-100)
- 5. February 2024 Flint Demonstration Disenrollment Report (CM-100)
- 6. March 2024 Flint Demonstration Disenrollment Report (CM-100)
- 7. April 2024 Flint Demonstration Disenrollment Report (CM-100)
- 8. May 2024 Flint Demonstration Disenrollment Report (CM-100)
- 9. June 2024 Flint Demonstration Disenrollment Report (CM-100)
- 10. July 2024 Flint Demonstration Disenrollment Report (CM-100)
- 11. August 2024 Flint Demonstration Disenrollment Report (CM-100)
- 12. September 2024 Flint Demonstration Disenrollment Report (CM-100)
- 13. Demonstration Year 8 Q4 Geographic Distribution Enrollment Map: Pregnant Women
- 14. Demonstration Year 8 Q4 Geographic Distribution Enrollment Map: Children
- 15. Demonstration Year 8 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

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 19, 2024

Report ID: CM-100

Run Date: 01/05/2024 Report Period: 10/01/2023 Run Time: 7:58:05AM

1. Monthly count of disenrollment because of transfer to another eligibility group: 140
2. Monthly count of disenrollment other than transfer to another Medicaid group: 625
3. Monthly count of beneficiaries due for renewal: 1274 4. Number of beneficiaries due for renewal who did not renew: 981
5. Number of beneficiaries due for renewal who lost eligibility: 532
6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
05/07/2016 Thru 09/30/2023 Count: 79,835
10/01/2023 Thru 10/07/2023 Count: 174
10/08/2023 Thru 10/14/2023 Count: 74
10/15/2023 Thru 10/21/2023 Count: 79
10/22/2023 Thru 10/28/2023 Count: 79
10/29/2023 Thru 10/31/2023 Count: 41

Report ID: CM-100

Run Date: 01/05/2024 Report Period: 11/01/2023 Run Time: 8:09:39AM

1	. Monthly count of disenrollment	because o	of transfer to a	nother elig	ibility group:	167
2. Monthly count of disenrollment other than transfer to another Medicaid group: 586						
4	3. Monthly count of beneficiaries 4. Number of beneficiaries due for 5. Number of beneficiaries due for	renewal	who did not rem		1131 875 461	
6	6. Enrollment continuity in weeks	for all i	ndividuals enro	olled during	the reporting mon	th:
	05/07/2016 11/01/2023	Thru Thru	10/31/2023 11/04/2023	Count:	80,282 102	
	11/05/2023	Thru	11/11/2023	Count:	96	
	11/12/2023	Thru	11/18/2023	Count:	69	
	11/19/2023	Thru	11/25/2023	Count:	42	
	11/26/2023	Thru	11/30/2023	Count:	79	

Report ID: CM-100

Run Date: 01/05/2024 Report Period: 12/01/2023 Run Time: 8:13:24AM

1. Monthly count of	f disenrollment	because (of transfer to	another elig	ibility group:	119
2. Monthly count of	f disenrollment o	other th	an transfer to	another Medi	caid group:	545
3. Monthly count of 4. Number of benef	iciaries due for	renewal	who did not re		1253 1093 1	
6. Enrollment cont	inuity in weeks	for all	individuals enr	olled during	the reporting mor	nth:
6. Enrollment cont	o5/07/2016	for all [.] Thru	individuals enr	olled during Count:	the reporting mor	nth:
6. Enrollment cont	·			·		nth:
6. Enrollment cont	05/07/2016	Thru	11/30/2023	Count:	80,670	nth:
6. Enrollment cont	05/07/2016 12/01/2023	Thru Thru	11/30/2023 12/02/2023	Count:	80,670 97	nth:
6. Enrollment cont	05/07/2016 12/01/2023 12/03/2023	Thru Thru Thru	11/30/2023 12/02/2023 12/09/2023	Count: Count: Count:	80,670 97 86	nth:
6. Enrollment cont	05/07/2016 12/01/2023 12/03/2023 12/10/2023	Thru Thru Thru Thru	11/30/2023 12/02/2023 12/09/2023 12/16/2023	Count: Count: Count: Count:	80,670 97 86 91	nth:

Report ID: CM-100

Report Period: 01/01/2024 Run Time: 10:03:15AM

1. Monthly count of disenrollment bec	cause of transfer to a	nother eligibility group:	127
2. Monthly count of disenrollment oth	ner than transfer to a	nother Medicaid group:	461
 Monthly count of beneficiaries due Number of beneficiaries due for re Number of beneficiaries due for re 	enewal who did not ren		
6. Enrollment continuity in weeks for	all individuals enro	lled during the reporting m	onth:
05/07/2016 т	hru 12/31/2023	Count: 81,033	
01/01/2024 T	hru 01/06/2024	Count: 184	
01/07/2024 T	hru 01/13/2024	Count: 102	
01/14/2024 T	hru 01/20/2024	Count: 56	
01/21/2024 T	hru 01/27/2024	Count: 83	
	hru 01/31/2024	Count: 56	

Run Date: 04/04/2024

Report ID: CM-100

Report Period: 02/01/2024 Run Time: 10:12:47AM

	1. Monthly count of disenrollment because of transfer to another eligibility group: 139
	2. Monthly count of disenrollment other than transfer to another Medicaid group: 563
	3. Monthly count of beneficiaries due for renewal: 1198 4. Number of beneficiaries due for renewal who did not renew: 969 5. Number of beneficiaries due for renewal who lost eligibility: 504
	6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
	05/07/2016 Thru 01/31/2024 Count: 81,514
	02/01/2024 Thru 02/03/2024 Count: 94
	02/04/2024 Thru 02/10/2024 Count: 89
	02/11/2024 Thru 02/17/2024 Count: 85
	02/18/2024 Thru 02/24/2024 Count: 92
	02/25/2024 Thru 02/29/2024 Count: 65
I	

Run Date: 04/04/2024

Report ID: CM-100

Report Period: 03/01/2024 Run Time: 10:16:36AM

	1. Monthly count of disenrollment because o	f transfer to another e	ligibility group:	169
	2. Monthly count of disenrollment other tha	n transfer to another Me	edicaid group:	635
	 Monthly count of beneficiaries due for r Number of beneficiaries due for renewal Number of beneficiaries due for renewal 	who did not renew:	1694 1387 1	
	6. Enrollment continuity in weeks for all i	ndividuals enrolled dur	ing the reporting month	:
	05/07/2016 Thru	02/29/2024 Count:	81,939	
	03/01/2024 Thru	03/02/2024 Count:	85	
	03/03/2024 Thru	03/09/2024 Count:	79	
	03/10/2024 Thru	03/16/2024 Count:	86	
	03/17/2024 Thru	03/23/2024 Count:	92	
	03/24/2024 Thru	03/30/2024 Count:	104	
	03/31/2024 Thru	03/31/2024 Count:	0	
1				

Run Date: 04/04/2024

Report ID: CM-100

Run Date: 07/03/2024 Report Period: 04/01/2024 Run Time: 11:49:10AM

	1. Monthly count of disenrollment because of transfer to another eligibility group: 124
	2. Monthly count of disenrollment other than transfer to another Medicaid group: 616
	3. Monthly count of beneficiaries due for renewal: 1586 4. Number of beneficiaries due for renewal who did not renew: 1327 5. Number of beneficiaries due for renewal who lost eligibility: 675
	6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
	05/07/2016 Thru 03/31/2024 Count: 82,345
	04/01/2024 Thru 04/06/2024 Count: 157
	04/07/2024 Thru 04/13/2024 Count: 74
	04/14/2024 Thru 04/20/2024 Count: 89
	04/21/2024 Thru 04/27/2024 Count: 96
	04/28/2024 Thru 04/30/2024 Count: 48
I .	

Report ID: CM-100

Report Period: 05/01/2024 Run Time: 11:57:06AM

	1. Monthly count of disenrollment because of transfer to another eligibility group: 174
	2. Monthly count of disenrollment other than transfer to another Medicaid group: 672
	3. Monthly count of beneficiaries due for renewal: 1891 4. Number of beneficiaries due for renewal who did not renew: 1659 5. Number of beneficiaries due for renewal who lost eligibility: 671
	6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
	05/07/2016 Thru 04/30/2024 Count: 82,809
	05/01/2024 Thru 05/04/2024 Count: 111
	05/05/2024 Thru 05/11/2024 Count: 65
	05/12/2024 Thru 05/18/2024 Count: 101
	05/19/2024 Thru 05/25/2024 Count: 99
	05/26/2024 Thru 05/31/2024 Count: 55
1	

Run Date: 07/03/2024

Report ID: CM-100

Report Period: 06/01/2024 Run Time: 12:04:26PM

1. Monthly count of disenrollment because of transfer to another eligibility group: 130
2. Monthly count of disenrollment other than transfer to another Medicaid group: 684
3. Monthly count of beneficiaries due for renewal: 4. Number of beneficiaries due for renewal who did not renew: 5. Number of beneficiaries due for renewal who lost eligibility: 1
6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
05/07/2016 Thru 05/31/2024 Count: 83,240
06/01/2024 Thru 06/01/2024 Count: 68
06/02/2024 Thru 06/08/2024 Count: 82
06/09/2024 Thru 06/15/2024 Count: 86
06/16/2024 Thru 06/22/2024 Count: 61
06/23/2024 Thru 06/29/2024 Count: 60
06/30/2024 Thru 06/30/2024 Count: 5

Run Date: 07/03/2024

Report ID: CM-100

Report Period: 07/01/2024 Run Time: 1:04:06PM

1. Monthly count of disenrollment because of transfer to another eligibilit	y group: 149
2. Monthly count of disenrollment other than transfer to another Medicaid g	roup: 239
3. Monthly count of beneficiaries due for renewal:4. Number of beneficiaries due for renewal who did not renew:5. Number of beneficiaries due for renewal who lost eligibility:	1110 1048 197
6. Enrollment continuity in weeks for all individuals enrolled during the r	eporting month:
05/07/2016 Thru 06/30/2024 Count: 8	3,558
07/01/2024 Thru 07/06/2024 Count:	148
07/07/2024 Thru 07/13/2024 Count:	88
07/14/2024 Thru 07/20/2024 Count:	99
07/21/2024 Thru 07/27/2024 Count:	98
07/28/2024 Thru 07/31/2024 Count:	60

Run Date: 10/03/2024

Report ID: CM-100

Report Period: 08/01/2024 Run Time: 1:24:09PM

1. Monthly count of d	isenrollment because	of transfer to	another eligil	oility group:	184
2. Monthly count of d	isenrollment other th	an transfer to	another Medica	aid group:	239
3. Monthly count of b 4. Number of benefici 5. Number of benefici	aries due for renewal	who did not re		1611 1515 232	
6. Enrollment continu	ity in weeks for all	individuals enro	olled during	the reporting mon	th:
	05/07/2016 Thru	07/31/2024	Count:	84,051	
	08/01/2024 Thru	08/03/2024	Count:	87	
	08/04/2024 Thru	08/10/2024	Count:	63	
	08/11/2024 Thru	08/17/2024	Count:	98	
	08/18/2024 Thru	08/24/2024	Count:	106	
	08/25/2024 Thru	08/31/2024	Count:	73	

Run Date: 10/03/2024

Report ID: CM-100

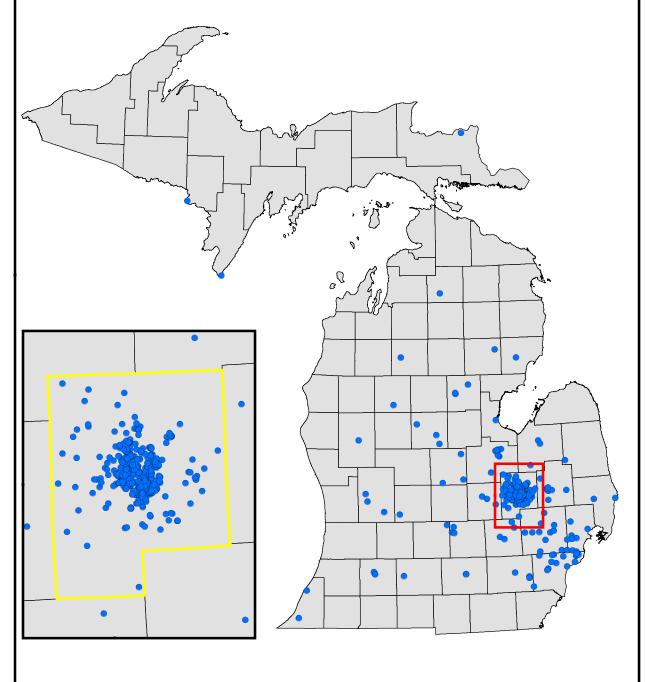
Report Period: 09/01/2024 Run Time: 1:29:11PM

	1. Monthly count of disenrollment because of transfer to another eligibility group: 143
	2. Monthly count of disenrollment other than transfer to another Medicaid group: 361
	3. Monthly count of beneficiaries due for renewal: 1552 4. Number of beneficiaries due for renewal who did not renew: 1449 5. Number of beneficiaries due for renewal who lost eligibility: 0
	6. Enrollment continuity in weeks for all individuals enrolled during the reporting month:
	05/07/2016 Thru 08/31/2024 Count: 84,478
	09/01/2024 Thru 09/07/2024 Count: 129
	09/08/2024 Thru 09/14/2024 Count: 94
	09/15/2024 Thru 09/21/2024 Count: 70
	09/22/2024 Thru 09/28/2024 Count: 76
	09/29/2024 Thru 09/30/2024 Count: 35
1	

Run Date: 10/03/2024

Flint Demonstration Waiver Enrollees Pregnant

July - September 2024 Genesee: 390 All Other Counties: 108



Source: MDHHS Data Warehouse Retrieved on December 5, 2024

MDHHS - Actuarial Division December 5, 2024

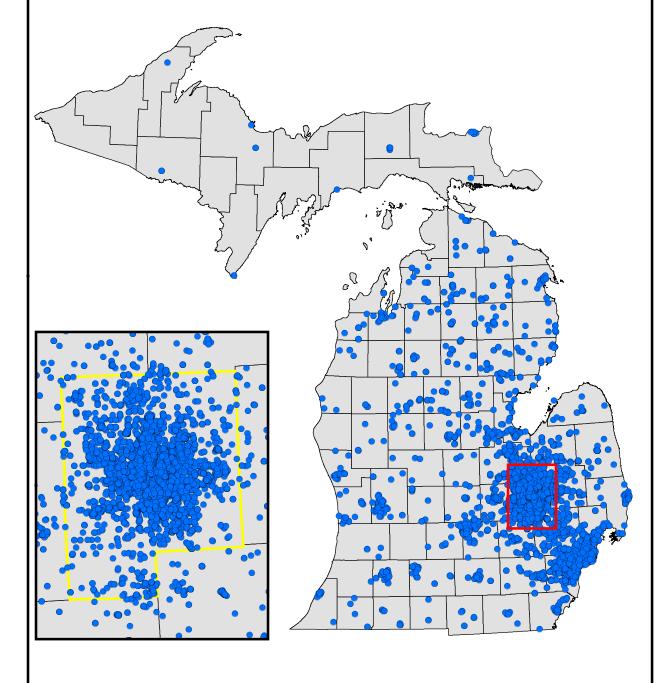
Flint Demonstration Waiver Enrollees

0-20 Years Old

July - September 2024

Genesee: 19,298

All Other Counties: 3,490



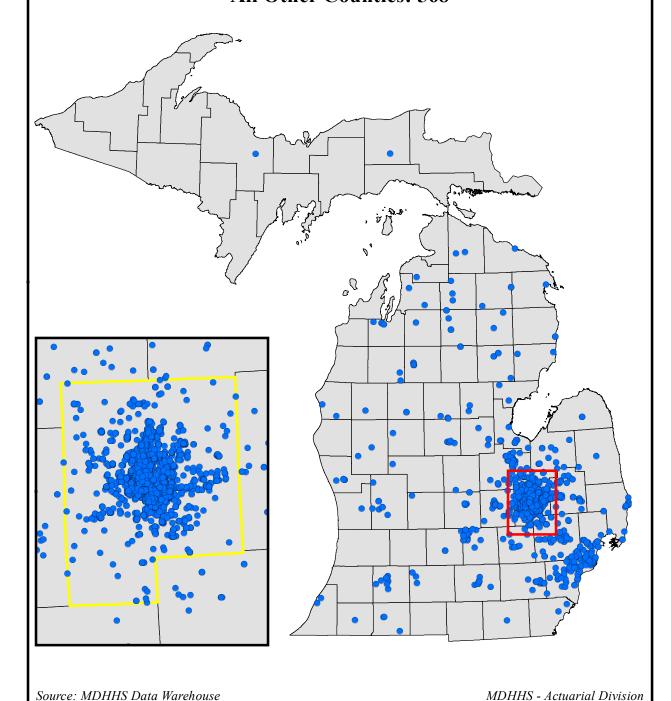
Source: MDHHS Data Warehouse Retrieved on December 5, 2024 MDHHS - Actuarial Division December 5, 2024

Flint Demonstration Waiver Enrollees

0-5 Years Old

July - September 2024

Genesee: 2,955 All Other Counties: 568



December 5, 2024

Retrieved on December 5, 2024