

LANSING

# STATE OF MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

ELIZABETH HERTEL DIRECTOR

GRETCHEN WHITMER
GOVERNOR

May 16, 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-00245/5 - Healthy Michigan Plan

Enclosed is the quarterly report for the Healthy Michigan Plan. It covers the first quarter of calendar year 2023. 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 by e-mail at colemanj@michigan.gov.

Sincerely.

Keith White, Director Actuarial Division

cc: Angela Garner Nicole McKnight

Enclosure (3)

# 1. Title page for the state's eligibility and coverage policies demonstration or eligibility and coverage policies components of the broader demonstration

State	Michigan
Demonstration name	Healthy Michigan Plan (HMP) Project No. 11-W-00245/5
Approval date	December 21, 2018
Approval period	January 1, 2019 through December 31, 2023
Implementation date	January 1, 2020

#### 2. Executive summary

On April 1, 2014, Michigan expanded its Medicaid program to include adults with income up to 133 percent of the FPL. To accompany this expansion, the Michigan "Adult Benefits Waiver" was amended and transformed to establish the HMP, through which the state intended to test innovative approaches to beneficiary cost sharing and financial responsibility for care for the new adult eligibility group, which was authorized under section 1902(a)(10)(A)(i)(VIII) of the Act (the "adult group"). Beneficiaries receiving coverage under the sunsetting ABW program transitioned to the state plan and the Healthy Michigan Plan on April 1, 2014.

HMP beneficiaries receive a full health care benefit package as required under the Affordable Care Act, which includes all of the Essential Health Benefits and the requirements for an alternative benefit plan, as required by federal law and regulation, and there are no limits on the number of individuals who can enroll. Individuals in the new adult population with incomes above 100 percent of the FPL are required to make contributions equal to two percent of their family income toward the cost of their health care. In addition, all newly eligible adults with income from 0 to 133 percent of the FPL are required to pay copayments through an account operated in coordination with the Medicaid Health Plan (MHP). A MI Health Account was established for each enrolled individual to track beneficiaries' contributions and how they were expended. Beneficiaries receive quarterly statements that summarized the MI Health Account funds balance and flows of funds into and out of the account, and the use of funds for health care service copayments. Beneficiaries have opportunities to reduce their regular monthly contributions or average utilization based contributions by demonstrating achievement of recommended Healthy Behaviors.

In September 2015, the state sought the Centers for Medicare & Medicaid Services (CMS) approval of an amendment to HMP to implement additional directives contained in the state law (Public Act 107 of 2013). CMS approved the amendment on December 17, 2015, which effectuated the Marketplace Option, a premium assistance program for a subset of HMP eligible beneficiaries. However, the Marketplace Option was never implemented. In December 2017, the state submitted an application to extend the HMP demonstration. In September 2018, the state submitted an additional application to amend certain elements of the HMP to comply with new state law provisions, and changes to eligibility for health care coverage and cost-sharing requirements for certain beneficiaries. The state also requested to end the Marketplace Option program.

As approved, beneficiaries in the demonstration between 100 percent and 133 percent of the FPL who have had 48 months of cumulative eligibility for health care coverage through HMP will be required to pay premiums of five percent of income and have completed a health risk assessment (HRA) at their next redetermination or have engaged in specified healthy behaviors within the twelve- month period prior to the annual redetermination deadline as conditions of eligibility.

### 3. Operational Updates

The Michigan Department of Health and Human Services (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. Overall enrollment in the Healthy Michigan Plan demonstration this year showed significant growth. This is attributable to new enrollees due to the

department's suspension on certain Medicaid renewals and case closures. The department has suspended most Medicaid renewals and case closures due to the COVID-19 public health emergency.

Due to the COVID-19 public health emergency, beneficiaries will only lose eligibility for HMP at this time if they are deceased, move out-of-state, or request to opt out of the program. Additionally, MDHHS suspended the implementation of the requirement for beneficiaries who have incomes above 100% of the federal poverty level and have been enrolled in HMP for 48 cumulative months to pay 5% of their income toward cost-sharing as a condition of continued enrollment in the program.

#### 4. Performance Metrics

#### Enrollment

MDHHS began enrolling new beneficiaries into the program beginning April 1, 2014. Beneficiaries who were enrolled in the ABW were automatically transitioned into the Healthy Michigan Plan effective April 1, 2014. Potential enrollees can apply for the program via the MDHHS website, by calling a toll-free number or by visiting their local MDHHS office. At this time, MDHHS does not anticipate any changes in the population served or the benefits offered.

The following table shows this quarter's demonstration enrollment activity. Total enrollment includes the unduplicated number of beneficiaries enrolled in the demonstration at any time during the quarter. New Enrollment includes members that began a new enrollment spell during the quarter and have not had Medicaid coverage within the prior 3 months. 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. Re-enrollments include individuals who have disenrolled and re-enrolled in the demonstration. Individuals under the re-enrollment category also include individuals that may have previously been enrolled in other Medicaid programs.

Table 1: HMP Enrollment Activity						
January 2023 February 2023 March 2023						
Total Enrollment	1,071,407	1,075,485	1,080,454			
New Enrollment	15,612	11,605	12,732			
Re-enrollment	16,034	11,987	13,189			
Disenrollment	7,375	7,909	8,192			

The following table demonstrates demongraphic characteristics of this quarter's enrolled beneficiaries:

Table 2 : HMP Enrollment by Subgroup						
Subgroup	January 2023	February 2023	March 2023			
Income Group						
< 50% FPL	589,123	589,751	591,040			
50-100% FPL	249,257	251,152	253,130			
> 100% FPL	233,027	234,582	236,364			
Age						
19-26	234,467	234,269	234,422			
27-35	271,435	272,594	274,007			
36-45	213,233	214,545	215,994			
46-55	183,806	184,428	185,280			
56-64	168,466	169,649	170,831			
Sex						
Female	508,989	510,467	512,517			
Male	562,418	565,018	568,017			
Race						
White	667,979	670,244	673,037			
Black or African American	269,575	270,504	271,586			
Asian	7,730	7,741	7,733			
American Indian or Alaskan Native	16,592	16,676	16,764			
Other	1,774	1,782	1,794			
Unknown	107,757	108,538	109,620			
Ethnicity						
Hispanic	67,645	68,092	68,635			
Non-Hispanic	1,003,522	1,007,149	1,011,652			
Unknown	240	244	247			
Specific Eligibility Groups						
New Adult Group	1,006,666	1,011,106	1,016,909			
Not New Parent/Caretaker Relatives	1	1	1			
Not New Disabled Person Non-	19,343	18,749	18,124			
Institutionalized						
Not New Disabled Person	218	201	195			
Institutionalized						
Not New Children Age 19 to 20	45,179	45,428	45,305			
Total	1,071,407	1,075,485	1,080,534			

Table 3 represents the number of beneficiaries in the demonstration who began a new enrollment spell during the quarter and have not had Medicaid coverage within the prior 3 months.

Table 3: New HMP Enrollment by Subgroup						
Subgroup	January 2023	February 2023	March 2023			
Income Group						
< 50% FPL	9,277	6,544	7,098			
50-100% FPL	3,424	2,768	3,048			
> 100% FPL	2,911	2,293	2,586			
Age						
19-26	4,772	3,725	3,922			
27-35	3,840	2,796	3,127			
36-45	2,894	2,326	2,626			
46-55	2,280	1,542	1,728			
56-64	1,826	1,216	1,329			
Sex						
Female	7,764	5,978	6,606			
Male	7,848	5,627	6,126			
Race						
White	9,908	7,142	7,874			
Black or African American	3,274	2,765	2,824			
Asian	131	74	56			
American Indian or Alaskan Native	278	183	209			
Other	20	19	16			
Unknown	2,001	1,422	1,753			
Ethnicity						
Hispanic	1,376	991	1,117			
Non-Hispanic	14,232	10,608	11,611			
Unknown	4	6	4			
Specific Eligibility Groups						
New Adult Group	14,169	10,316	11,468			
Not New Parent/Caretaker Relatives	0	0	0			
Not New Disabled Person Non-	324	262	279			
Institutionalized						
Not New Disabled Person	2	1	1			
Institutionalized						
Not New Children Age 19 to 20	1,117	1,026	984			
Total	15,612	11,605	12,732			

The following table show the total number of beneficiaries enrolled in the demonstration who were due for renewal during the quarter. It should be noted that while member's still have renewal dates stored in the data warehouse, the department has suspended Medicaid renewals due to the COVID-19 public health emergency.

Table 4: HMP Renewals by Subgroup								
Subgroup	January 2023	February 2023	March 2023					
Income Group								
< 50% FPL	11,970	13,317	13,192					
50-100% FPL	3,844	4,204	4,467					
> 100% FPL	3,446	3,933	4,141					
Age								
19-26	4,496	4,826	5,023					
27-35	5,147	5,808	5,779					
36-45	3,595	4,097	4,274					
46-55	3,178	3,540	3,633					
56-64	2,844	3,183	3,091					
Sex								
Female	9,006	10,115	10,324					
Male	10,254	11,339	11,476					
Race								
White	11,524	12,872	12,844					
Black or African American	5,427	6,038	6,342					
Asian	105	113	131					
American Indian or Alaskan Native	309	303	341					
Other	36	27	32					
Unknown	1,859	2,101	2,110					
Ethnicity								
Hispanic	1,359	1,668	1,782					
Non-Hispanic	17,897	19,780	6					
Unknown	4	6	20,012					
Specific Eligibility Groups								
New Adult Group	17,938	20,144	20,527					
Not New Parent/Caretaker Relatives	0	1	0					
Not New Disabled Person Non-	412	400	358					
Institutionalized								
Not New Disabled Person	9	5	4					
Institutionalized								
Not New Children Age 19 to 20	901	904	911					
Total	19,260	21,454	21,800					

### Cost Sharing Limits

Table 5 contains the monthly count of beneficiaries who reached the 5% of income limit on cost sharing and premiums during the month. The cost sharing limits metric this quarter was consistent with previous reports. Typically, the state sees a larger number of beneficiaries reach their cost sharing limit in the first month of the quarter than the subsequent months.

Table 5: HMP Cost Sharing Limit by Subgroup								
Subgroup	January 2023	February 2023	March 2023					
Income Group								
< 50% FPL	170,411	51,358	45,689					
50-100% FPL	9,297	3,593	2,971					
> 100% FPL	9,552	3,242	2,660					
Age								
19-26	40,983	14,766	13,253					
27-35	44,057	15,211	13,403					
36-45	33,409	10,460	9,390					
46-55	38,170	9,422	8,105					
56-64	32,641	8,334	7,169					
Sex								
Female	87,161	23,560	20,615					
Male	102,099	34,633	30,705					
Race								
White	112,854	33,179	28,979					
Black or African American	53,707	17,784	15,489					
Asian	1,207	292	255					
American Indian or Alaskan Native	2,200	941	878					
Other	245	69	62					
Unknown	19,047	5,928	5,657					
Ethnicity								
Hispanic	10,478	3,895	3,521					
Non-Hispanic	178,758	54,285	47,782					
Unknown	24	13	17					
Specific Eligibility Groups								
New Adult Group	173,297	52,052	45,920					
Not New Parent/Caretaker Relatives	1	0	0					
Not New Disabled Person Non-	4,580	1,718	1,501					
Institutionalized								
Not New Disabled Person	53	18	21					
Institutionalized								
Not New Children Age 19 to 20	11,329	4,405	3,878					
Total	189,260	58,193	51,320					

#### Access to Care

The reported access to care metrics showed similar active provider participation as the previous quarter. Table 6 shows the number of primary care and specilaty providers enrolled to deliver Medicaid services at the end of the quarter. Active provider participation is defined as providers enrolled to deliver Medicaid services with service claims for 3 or more HMP beneficiaries during the quarter.

Table 6: HMP Access to Care January – March 2023				
Provider Type	Availability	Active Participation		
Primary Care Provider	56,970	18,880		
Specialist Provider	90,328	45,534		

#### Quality of Care and Health Outcomes

The following Quality of Care and Health Outcomes metrics reflect calendar year 2021 data. The state will review data trends on an annual basis as described in the technical specifications.

HMP population data on Medical Assistance with Smoking and Tobacco Use Cessation is illustrated in Table 7. This metric saw a decrease from 2020 to 2021. This metric consists of the following components: advising smokers and tobacco users to quit, discussing cessation medications, and discussing cessation strategies.

Table 7: Medical Assis	Table 7: Medical Assistance with Smoking and Tobacco Use Cessation						
Subgroup	Denominator	Numerator	Rate				
Income Group							
< 50% FPL	78,291	32,127	41.04				
50-100% FPL	30,994	12,971	41.85				
> 100% FPL	25,443	10,388	40.83				
Age							
19-26	16,064	4,325	26.92				
27-35	29,979	10,161	33.89				
36-45	32,526	13,652	41.97				
46-55	32,489	15,756	48.50				
56-64	23,670	11,592	48.97				
Sex							
Female	65,218	28,113	43.11				
Male	69,510	27,373	39.38				
Race							
White	89,563	38,210	42.66				
Black or African American	30,679	11,677	38.06				
Asian	901	406	45.06				
American Indian or Alaskan Native	2,333	853	36.56				

Table 7: Medical Assistance with Smoking and Tobacco Use Cessation (continued)							
Subgroup	Denominator Numerator Rate						
Race							
Other	3,858	1,350	34.99				
Unknown	7,394	2,990	40.44				
Total	134,728	55,486	41.18				

The percentage of Emergency Derpartment (ED) visits for beneficiaries age 18 and older who have a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, and who had a follow-up visit with a corresponding principal diagnosis for AOD in shown in Table 8. Two rates are reported including follow up within 7 and 30 days of the ED visit. These measures saw an increase from 2020 to 2021.

Table 8: Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence						
	Follov	w-up within 7 d	ays	Follow	w-up within 30	days
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate
Income Group						
< 50% FPL	10,713	1,690	15.78	10,647	2,684	25.20
50-100% FPL	1,533	247	16.11	1,591	406	25.52
> 100% FPL	1,055	170	16.11	1,064	258	24.25
Age						
19-26	1,672	152	9.09	1,672	247	14.77
27-35	4,065	661	16.26	4,066	1,091	26.83
36-45	3,598	641	17.82	3,598	1,015	28.21
46-55	2,527	436	17.25	2,527	674	26.67
56-64	1,439	217	15.08	1,439	321	22.30
Sex						
Female	3,654	561	15.35	3,654	893	24.44
Male	9,647	1,546	16.03	9,648	2,455	25.45
Race						
White	8,589	1,557	18.13	8,559	2,496	29.16
Black or African	2,981	316	10.60	2,976	467	15.69
American						
Asian	32	2	6.25	31	5	16.13
American Indian or	297	42	14.14	296	75	25.34
Alaskan Native	297	42	14.14	290	/3	23.34
Other	551	73	13.25	550	120	21.81
Unknown	851	117	13.75	890	185	20.79
Total	13,301	2,107	15.84	13,302	3,348	25.17

The percentage of ED visits for beneficiaries age 18 and older who have a principal diagnosis of mental illness or intentional self-harm, and who had a follow-up visit with a corresponding principal diagnosis for mental illness is shown in Table 9. Two rates are reported including the percentage of ED visits for

mental illness or intentional self-harm for which the beneficiary received follow-up within 7 and 30 days of the ED visit. This measure remained approximately the same from 2020 to 2021.

Table 9: Follow-Up After Emergency Department Visit for Mental Illness									
	Follow-up within 7 days			Follov	w-up within 30	days			
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate			
Income Group	Income Group								
< 50% FPL	5,625	2,041	36.28	5,625	2,787	49.54			
50-100% FPL	995	427	42.91	995	582	58.49			
> 100% FPL	723	326	45.09	723	429	59.34			
Age									
19-26	2,041	872	42.72	2,041	1,143	56.00			
27-35	2,460	932	37.89	2,460	1,256	51.06			
36-45	1,570	516	32.87	1,570	741	47.20			
46-55	894	334	37.36	894	463	51.79			
56-64	378	140	37.04	378	195	51.59			
Sex									
Female	2,817	1,207	42.85	2,817	1,622	57.58			
Male	4,526	1,587	35.06	4,526	2,176	48.08			
Race									
White	4,375	1,851	42.31	4,375	2,457	56.16			
Black or African American	1,986	593	29.86	1,986	851	42.85			
Asian	33	14	42.42	33	19	57.58			
American Indian or	168	46	27.38	168	73	43.45			
Alaskan Native			27.55	100					
Other	482	165	34.23	482	169	35.06			
Unknown	478	164	34.31	478	229	47.91			
Total	7,343	2,794	38.05	7,343	3,798	51.72			

The percentage of beneficiaries age 18 and older with a new episode of AOD abuse or dependence who received the Initiation of AOD Treatment and Engagement of AOD Treatment is shown in tables 10-13. The following diagnosis cohorts are reported for each rate: (1) Alcohol abuse or dependence, (2) Opioid abuse or dependence, (3) Other drug abuse or dependence, and (4) Total AOD abuse or dependence. A total of 8 separate rates are reported for this measure.

Table 10: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment							
Alcohol abuse or dependence							
	Initiatio	n of AOD Trea	tment	Engagem	ent of AOD Tr	eatment	
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate	
Income Group							
< 50% FPL	16,004	6,486	40.52	16,004	1,484	9.27	
50-100% FPL	3,841	1,510	39.31	3,841	3,841	433	
> 100% FPL	2,974	1,077	36.21	2,974	299	10.05	
Age							
19-26	2,304	660	28.65	2,304	194	8.42	
27-35	5,179	1,930	37.27	5,179	586	11.31	
36-45	5,622	2,319	41.25	5,622	567	10.09	
46-55	5,775	2,504	43.36	5,775	547	9.47	
56-64	3,939	1,660	42.14	3,939	322	8.17	
Sex							
Female	6,823	2,610	38.25	6,823	709	10.39	
Male	15,996	6,463	40.40	15,996	1,507	9.42	
Race							
White	13,198	5,392	40.85	13,198	1,521	11.52	
Black or African	6,797	2,546	37.46	6,797	436	6.41	
American							
Asian	92	37	40.22	92	4	4.35	
American Indian or	406	149	36.70	406	45	11.08	
Alaskan Native							
Other	807	332	41.14	807	93	11.52	
Unknown	1,519	617	40.62	1,519	117	7.70	
Total	22,819	9,073	39.76	22,819	2,216	9.71	

Table 11: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment							
	Opioid abuse or dependence						
	Initiatio	n of AOD Trea	tment	Engagem	ent of AOD Tr	eatment	
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate	
Income Group							
< 50% FPL	5,415	2,846	52.55	5,415	1,452	26.81	
50-100% FPL	951	489	51.42	951	262	27.55	
> 100% FPL	626	331	52.88	626	177	28.27	
Age							
19-26	675	339	50.22	675	168	24.89	
27-35	2,553	1,414	55.39	2,553	781	30.59	
36-45	2,019	1,090	53.99	2,019	581	28.78	
46-55	1,169	574	49.10	1,169	268	22.93	
56-64	576	249	43.05	576	93	16.14	

Table 11: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment							
	Opioid abuse or dependence (continued)						
	Initiatio	n of AOD Trea	tment	Engagem	ent of AOD Tr	eatment	
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate	
Sex							
Female	2,612	1,261	48.28	2,612	645	24.69	
Male	4,380	2,405	54.91	4,380	1,246	28.45	
Race							
White	5,297	2,806	52.97	5,297	1,527	28.83	
Black or African	939	450	47.92	939	165	17.57	
American							
Asian	20	9	45.00	20	3	15.00	
American Indian or	152	85	55.92	152	46	30.26	
Alaskan Native							
Other	243	132	54.32	243	64	26.33	
Unknown	341	184	53.96	341	86	25.22	
Total	6,992	3,666	52.43	6,992	1,891	27.05	

Table 12: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment Other drug abuse or dependence						
	Initiatio	Initiation of AOD Treatment Engagement of AOD Treatment				
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate
Income Group						
< 50% FPL	12,274	4,405	35.88	12,274	890	7.25
50-100% FPL	2,650	791	29.85	2,650	170	6.42
> 100% FPL	1,844	579	31.40	1,844	129	7.00
Age						
19-26	3,707	1,148	30.97	3,707	236	6.37
27-35	5,178	1,767	34.13	5,178	424	8.19
36-45	3,932	1,371	34.87	3,932	286	7.27
46-55	2,724	1,008	37.00	2,724	173	6.35
56-64	1,227	481	39.20	1,227	70	5.70
Sex						
Female	6,148	1,959	31.86	6,148	355	5.77
Male	10,620	3,816	35.93	10,620	834	7.85
Race						
White	9,938	3,356	33.77	9,938	774	7.79
Black or African	4,872	1,762	36.17	4,872	288	5.91
American						
Asian	47	19	40.43	47	6	12.77
American Indian or	339	107	31.56	339	23	6.78
Alaskan Native						
Other	697	223	31.99	697	51	7.31
Unknown	875	308	35.20	875	47	5.37
Total	16,768	5,775	34.44	16,768	1,189	7.09

Table 13: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment  Total AOD abuse or dependence							
Initiation of AOD Treatment Engagement of AOD Treatment.							
Subgroup	Denominator	Numerator	Rate	Denominator	Numerator	Rate	
Income Group							
< 50% FPL	31,020	12,559	40.48	31,020	3,690	11.89	
50-100% FPL	6,968	2,589	37.16	6,968	827	11.87	
> 100% FPL	5,147	1,865	36.23	5,147	584	11.35	
Age							
19-26	6,241	1,980	31.73	6,241	576	9.23	
27-35	11,819	4,679	39.59	11,819	1,709	14.46	
36-45	10,604	4,357	41.09	10,604	1,379	13.00	
46-55	9,046	3,778	41.76	9,046	962	10.63	
56-64	5,425	2,219	40.90	5,425	475	8.75	
Sex							
Female	14,524	5,374	37.00	14,524	1,645	11.33	
Male	28,611	11,639	40.68	28,611	3,456	12.08	
Race							
White	26,337	10,680	40.55	26,337	3,676	13.96	
Black or African	11,704	4,322	36.93	11,704	855	7.31	
American	11,/04	4,322	30.93	11,/04			
Asian	146	61	41.78	146	13	8.90	
American Indian or	825	318	38.55	825	111	13.45	
Alaskan Native	823	316	36.33	623	111	13.43	
Other	1,603	629	39.23	1,603	203	12.66	
Unknown	2,520	1,003	39.80	2,520	243	9.64	
Total	43,135	17,013	39.44	43,135	5,101	11.83	

The number of inpatient hospital admissions for diabetes short-term complications per 100,000 beneficiary months for beneficiaries age 18 and older is shown in table 14. This measure saw a decrease from 2020 to 2021.

Table 14: Diabetes Short-Term Complications Admission Rate					
Subgroup	Denominator	Numerator	Rate		
Income Group					
< 50% FPL	5,157,647	1,483	28.75		
50-100% FPL	2,260,805	282	12.47		
> 100% FPL	1,947,308	256	13.15		
Age					
19-26	2,179,683	511	23.44		
27-35	2,366,412	566	23.92		
36-45	1,840,727	440	23.90		
46-55	1,672,046	342	20.45		
56-64	1,306,892	162	12.39		

Table 14: Diabetes Short-Term Complications Admission Rate (continued)				
Subgroup	Denominator	Numerator	Rate	
Sex				
Female	4,585,172	739	16.12	
Male	4,780,588	1,282	26.82	
Raace				
White	5,501,803	929	16.89	
Black or African American	2,402,783	828	34.46	
Asian	157,687	2	1.27	
American Indian or Alaskan Native	135,845	25	18.40	
Other	427,654	68	15.90	
Unknown	739,988	169	22.84	
Total	9,365,760	2,021	21.58	

The number of inpatient hospital admissions for chronic obstructive pulmonary disease (COPD) or asthma per 100,000 beneficiary months for beneficiaries age 40 and older is reported in table 15. This measure saw a decrease from 2020 to 2021.

Table 15: Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults				
	Admission Rate			
Subgroup	Denominator	Numerator	Rate	
Income Group				
< 50% FPL	2,206,487	621	28.14	
50-100% FPL	963,478	162	16.81	
> 100% FPL	862,565	138	16.00	
Age				
36-45	1,053,592	119	11.29	
46-55	1,672,046	324	19.38	
56-64	1,306,892	481	36.77	
Sex				
Female	2,020,592	488	24.15	
Male	2,011,938	436	21.67	
Race				
White	2,491,738	567	22.76	
Black or African American	935,308	267	28.55	
Asian	73,282	2	2.73	
American Indian or Alaskan Native	52,767	16	30.32	
Other	140,678	11	7.81	
Unknown	338,757	61	18.01	
Total	4,032,530	924	22.91	

The number of inpatient hospital admissions for heart failure per 100,000 beneficiary months for beneficiaries age 18 and older is shown in table 16. This measure saw an inicrease from 2020 to 2021.

Table 16: Heart Failure Admission Rate					
Subgroup	Denominator	Numerator	Rate		
Income Group					
< 50% FPL	5,157,647	1,393	27.01		
50-100% FPL	2,260,805	229	10.13		
> 100% FPL	1,947,308	249	12.79		
Age					
19-26	2,179,683	27	1.24		
27-35	2,366,412	135	5.70		
36-45	1,840,727	313	17.00		
46-55	1,672,046	711	42.52		
56-64	1,306,892	685	52.57		
Sex					
Female	4,585,172	593	12.93		
Male	4,780,588	1,278	26.73		
Race					
White	5,501,803	760	13.81		
Black or African American	2,402,783	864	35.96		
Asian	157,687	18	11.42		
American Indian or Alaskan Native	135,845	19	13.99		
Other	427,654	30	7.01		
Unknown	739,988	180	24.32		
Total	9,365,760	1,871	19.98		

The number of inpatient hospital admissions for asthma per 100,000 beneficiary months for beneficiaries aged 18 to 39 is shown in table 17. This measure decreased from 2020 to 2021.

Table 17: Asthma in Younger Adults Admission Rate					
Subgroup	Denominator	Numerator	Rate		
Income Group					
< 50% FPL	2,951,160	134	4.54		
50-100% FPL	1,297,327	58	4.47		
> 100% FPL	1,084,743	23	2.12		
Age					
19-26	2,179,683	70	3.21		
27-35	2,366,412	110	4.65		
36-45	787,135	35	4.45		
Sex					
Female	2,564,580	115	4.48		
Male	2,768,650	100	3.61		

Table 17: Asthma in Younger Adults Admission Rate (continued)					
Subgroup	Denominator	Numerator	Rate		
Race					
White	3,010,065	63	2.09		
Black or African American	1,467,475	125	8.52		
Asian	84,405	0	0.00		
American Indian or Alaskan Native	83,078	2	2.41		
Other	286,976	11	3.92		
Unknown	401,231	14	3.49		
Total	5,333,230	215	4.03		

#### Administrative costs

The following table shows administrative costs specific to the HMP demonstration. This includes cost of contracts or contract amendments and staff time equivalents required to administer demonstration policies, including premium collection, health behavior incentives, premium assistance, and/or retroactive eligibility waivers.

Table 18: HMP Demonstration Administrative Costs				
Current Quarter	Previous Quarter	Demonstration Year to Date		
CY 2023 Q1	CY 2022 Q4	CY 2023		
\$1,471,361	\$3,048,272	\$1,471,361		

#### 5. Budget Neutrality and Financial Reporting Requirements

CMS has determined that this demonstration is budget neutral based on CMS's assessment that the waiver authorities granted for the demonstration are unlikely to result in any increase in federal Medicaid expenditures for medical assistance. No expenditure authorities are associated with the demonstration. The state does not expect program changes with financial or budget neutrality impact.

#### 6. Evaluation Activities and Interim Findings

The MDHHS has arranged for the University of Michigan's Institute for Healthcare Policy & Innovation (IHPI) to serve as the Healthy Michigan Plan (HMP) independent evaluator. IHPI has developed a comprehensive plan to address the waiver objectives of the State and the CMS. In accordance with the HMP §1115 Demonstration Waiver Special Terms and Conditions, on December 16, 2019, the State submitted an initial version of IHPI's evaluation design for the demonstration period ending December 31, 2023. The evaluation design received final approval from CMS on July 15, 2021.

Demonstration evaluation activities for the Healthy Michigan Plan are conducted by an interdisciplinary team of researchers from the IHPI. Below is a summary of the key activities for the CY 2023 first quarterly report:

**Objective:** Assessment of beneficiary experiences with HMP coverage and policies through new beneficiary interviews and additional analyses of beneficiary surveys.

During this quarter, the IHPI evaluation team continued planning for the new beneficiary interviews and continued discussing longitudinal analyses of survey data to be included in the summative evaluation report.

**Objective:** Describe characteristics, utilization patterns, and payment behaviors of HMP beneficiaries for surveys and utilization analyses.

During this quarter, the IHPI evaluation team continued planning for the use of administrative claims data in longitudinal survey analyses.

**Objective:** Assess the impact of HMP on various outcomes through external data sources (credit data, BRFSS, ACS, HCUP, and Medicare cost report data).

The IHPI evaluation team continued working on credit data analyses.

**Objective:** Finalize interim evaluation report for CMS and prepare for final evaluation report.

The IHPI evaluation team began developing timelines for preparing the summative evaluation report.

#### 7. Enclosures/Attachments

- I. Performance Monitoring Report: Healthy Michigan Plan Measures, April 2023
- II. Performance Monitoring Report: MDHHS Dental Measures, April 2023

## Behavioral and Physical Health and Aging Services Bureau of Medicaid Care Management and Customer Service

### PERFORMANCE MONITORING REPORT

Healthy Michigan Plan Measures

**Composite – All Plans** 





**April 2023** 

Produced by: Quality Improvement and Program Development – Managed Care Plan Division

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### **Executive Summary**

This Performance Monitoring Report (PMR) is produced by the Quality Improvement and Program Development (QIPD) Section of the Managed Care Plan Division (MCPD) to track quality, access, and utilization in the Michigan Medicaid program to better support high quality care for beneficiaries.

The Michigan Department of Health and Human Services (MDHHS) monitors the performance of the State's Medicaid Health Plans (MHPs) through 34 key performance measures aimed at improving the quality and efficiency of health care services provided to the Michigan residents enrolled in a Medicaid program. These measures include Healthy Michigan Plan (HMP) Measures, MDHHS Dental Measure, CMS Core Set Measures, HEDIS Measures, Managed Care Quality Measures, Maternal Health Measures, and Chronic Conditions Measures. **This report focuses only on the following HMP Measures:** 

	Healthy Michigan Plan (HMP) Measures						
Adults' Generic	Completion of	Outreach & Engagement	Transition into	Transition out of			
Drug Utilization	Annual HRA	to Facilitate Entry to PCP	Consistently Fail to	Consistently Fail to			
			Pay (CFP) Status	Pay (CFP) Status			

Data for these measures are represented on a quarterly basis. The body of the report contains a cross-plan analysis of the most current data available for each of these measures. Measurement Periods may vary and are based on the specifications for that individual measure. Appendix A contains specific three letter codes identifying each of the MHPs. Appendix B contains the one-year plan specific analysis for each measure.

MHPs are contractually obligated to achieve specified standards for most measures. The following table displays the number of MHPs meeting or exceeding the standards for the performance measure versus total MHPs, as reported in the Performance Monitoring Report, during the listed quarter for fiscal year 2023 unless otherwise noted.

Table 1: Fiscal Year 2023<sup>1</sup>

Quarterly Reported Measures	Reported in 1 <sup>st</sup> Quarter		Reported in 2 <sup>nd</sup> Quarter		Reported in 3 <sup>rd</sup> Quarter		Reported in 4 <sup>th</sup> Quarter	
Adults' Generic Drug Utilization	9/9	)	9	/9				
Completion of Annual HRA	1/9	)	0	/9				
Outreach & Engagement to Facilitate Entry to PCP	N/A	N/A		N/A				
	> 100% FPL	≤100% FPL	> 100% FPL	≤100% FPL	> 100% FPL	≤100% FPL	> 100% FPL	≤100% FPL
Transition into CFP Status – Cohort 1	9/9	9/9	9/9	9/9				
Transition into CFP Status – Cohort 2	9/9	9/9	9/9	9/9				
Transition into CFP Status – Cohort 3	9/9	9/9	9/9	9/9				
Transition out of CFP Status – Cohort 1	9/9	8/9	8/8	8/9				
Transition out of CFP Status – Cohort 2	8/9	8/9	8/8	7/9				
Transition out of CFP Status – Cohort 3	9/9	9/9	6/9	5/9				

<sup>&</sup>lt;sup>1</sup> Results with a denominator less than 9 for the Transition into or out of CFP Status measure do not include those with a result of "N/A".

April 2023 HMP

-

### **Healthy Michigan Plan Enrollment**

Michigan Medicaid Managed Care (HMP-MC) enrollment has increased slightly over the past year. In March 2023, enrollment was 815,643, up 39,167 enrollees (5.0%) from April 2022. An increase of 15,284 enrollees (1.9%) was realized between February 2023 and March 2023.

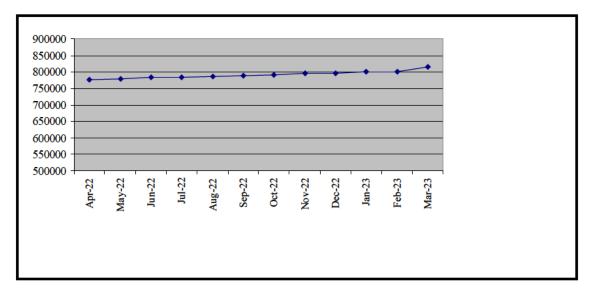
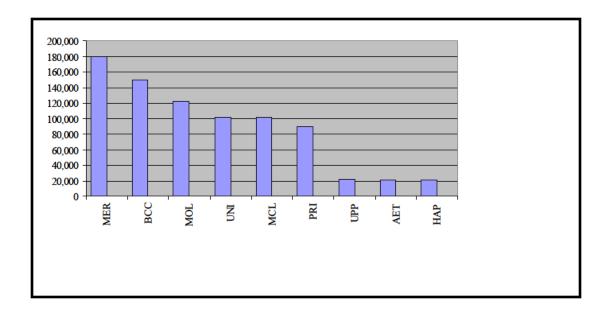


Figure 1: HMP-MC Enrollment, April 2022 – March 2023





### **Medicaid Health Plan News**

The Performance Monitoring Report contains data for all Michigan Medicaid Health Plans, where data is available. Ten Medicaid Health Plans are contracted with the State of Michigan to provide comprehensive health care services.

## **Cross-Plan Performance Monitoring Analyses**

The following section includes a cross-plan analysis for each performance measure. An analysis of the most current data available for each performance measure is included. For detailed questions regarding measurement periods or standards, see the Performance Monitoring Specifications.

## Adults' Generic Drug Utilization

#### Measure

The percentage of generic prescriptions filled for adult members of health plans during the measurement period.

Standard Measurement Period

At or above 80% (as shown on bar graph below) August 2022 – October 2022

Data Source Measurement Frequency

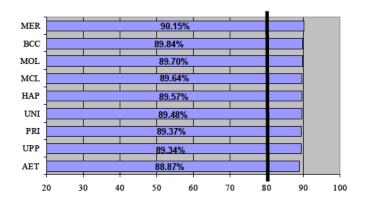
MDHHS Data Warehouse Quarterly

Summary: All plans met or exceeded the standard. Results ranged from 88.87% to 90.15%.

Table 2: Comparison across Medicaid Programs

Medicaid Program		Denominator	Percentage
Michigan Medicaid All	4,225,237	4,708,524	89.74%
Fee for Service (FFS) only	6,075	6,784	89.55%
Managed Care only	4,202,131	4,682,625	89.74%
MA-MC	1,932,798	2,150,660	89.87%
HMP-MC	2,245,802	2,506,132	89.61%

Figure 3: Adults' Generic Drug Utilization



Numerator/ Denominator\* 1,014,642 / 1,125,492 686,890 / 764,531 772,337 / 861,040 502,351 / 560,392 56,650 / 63,244 597,047 / 667,255 383,968 / 429,637 86,200 / 96,490 91,149 / 102,559

Adult's Generic Drug Utilization Percentages

<sup>\*</sup>Numerator depicts the number of eligible beneficiaries who had generic prescriptions filled. Denominator depicts the total number of eligible beneficiaries.

### Completion of Annual Health Risk Assessment (HRA)

#### Measure

The percentage of Healthy Michigan Plan members enrolled in a health plan who had an incentive eligible Health Risk Assessment (HRA) completed during the measurement period.

Standard Measurement Period

At or above 12% (as shown on bar graph below) October 2021 – September 2022

Data Source Measurement Frequency

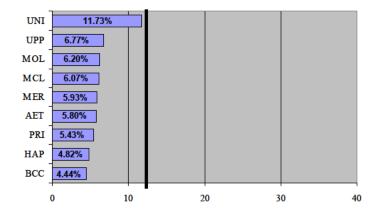
MDHHS Data Warehouse Quarterly

**Summary:** None of the plans met or exceeded the standard. Results ranged from 4.44% to 11.73%.

Table 3: Program Total

Medicaid Program	Numerator	Denominator	Percentage
HMP-MC	44,214	682,967	6.47%

Figure 4: Completion of Annual HRA



Numerator/ Denominator\* 9,068 / 77,301 1,112 / 16,422 6,045 / 97,489 4,881 / 80,413 8,983 / 151,383 1,006 / 17,341 3,435 / 63,260 597 / 12,389 5,084 / 114,558

Completion of Annual HRA Percentages

<sup>\*</sup>Numerator depicts the number of eligible beneficiaries who completed at least one incentive eligible HRA with an attestation date during the measurement period. Denominator depicts the total number of eligible beneficiaries.

### Outreach and Engagement to Facilitate Entry to Primary Care

#### Measure

The percentage of Healthy Michigan Plan members who have an ambulatory or preventive care visit within 150 days of enrollment into a health plan who had not previously had an ambulatory or preventive care visit since enrollment in Healthy Michigan Plan.

Standard Enrollment Dates

N/A – Informational Only N/A

Data Source Measurement Frequency

MDHHS Data Warehouse Quarterly

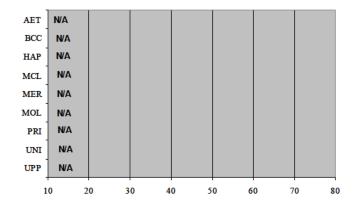
**Summary:** There is no data available for this measure at this time.

Table 4: Program Total<sup>2</sup>

Medicaid Program	Numerator	Denominator	Percentage
HMP-MC	N/A	N/A	N/A

Figure 5: Outreach & Engagement to Facilitate Entry to Primary Care

Numerator/ Denominator\*



Outreach & Engagement to Facilitate Entry to Primary Care Percentages

April 2023 HMP

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<sup>\*</sup>Numerator depicts the number of eligible beneficiaries who had an ambulatory or preventive care visit within 150 days of enrollment in a health plan. Denominator depicts the total number of eligible beneficiaries.

<sup>&</sup>lt;sup>2</sup> This includes visits during the HMP FFS period prior to enrollment in a Medicaid health plan.

### Transition into Consistently Fail to Pay (CFP) Status

#### Measure

The percentage of Healthy Michigan Plan members who transitioned from non-CFP status into CFP status during the last quarter of the measurement period.

Standard Measurement Period

Income level over 100% FPL – At or **below** 30% Income level up to 100% FPL – At or **below** 7%

February 2022 – March 2023

Data Source Measurement Frequency

MDHHS Data Warehouse Quarterly

\*\*This is a reverse measure. A lower rate indicates better performance.

#### **Summary:**

In *Cohort 1*, for income levels over 100% FPL, all plans met or exceeded the standard. Results ranged from 5.56% to 8.84%. For income levels up to 100% FPL, all plans met or exceeded the standard. Results ranged from 3.11% to 4.68%.

In *Cohort 2*, for income levels over 100% FPL, all plans met or exceeded the standard. Results ranged from 3.92% to 9.70%. For income levels up to 100% FPL, all plans met or exceeded the standard. Results ranged from 3.47% to 4.46%.

In *Cohort 3*, for income levels over 100% FPL, all plans met or exceeded the standard. Results ranged from 5.88% to 13.93%. For income levels up to 100% FPL, all plans met or exceeded the standard. Results ranged from 2.34% to 4.43%.

Table 5: Transition into CFP Status - Cohort 1

МНР	FPL over 100% (N)	FPL over 100% (D)	Rate	Standard Achieved	FPL up to 100% (N)	FPL up to 100% (D)	Rate	Standard Achieved
AET	7	126	5.56%	Yes	28	623	4.49%	Yes
BCC	189	2,310	8.18%	Yes	306	8,200	3.73%	Yes
HAP	16	181	8.84%	Yes	28	666	4.20%	Yes
MCL	111	1,748	6.35%	Yes	175	5,284	3.31%	Yes
MER	223	3,274	6.81%	Yes	350	9,739	3.59%	Yes
MOL	109	1,319	8.26%	Yes	156	4,372	3.57%	Yes
PRI	115	1,534	7.50%	Yes	123	3,949	3.11%	Yes
UNI	123	1,666	7.38%	Yes	215	4,963	4.33%	Yes
UPP	35	498	7.03%	Yes	56	1,196	4.68%	Yes

Table 6: Transition into CFP Status - Cohort 2

МНР	FPL over 100% (N)	FPL over 100% (D)	Rate	Standard Achieved	FPL up to 100% (N)	FPL up to 100% (D)	Rate	Standard Achieved
AET	4	102	3.92%	Yes	24	615	3.90%	Yes
BCC	155	2,237	6.93%	Yes	286	7,829	3.65%	Yes
HAP	13	134	9.70%	Yes	26	621	4.19%	Yes
MCL	110	1,783	6.17%	Yes	206	5,334	3.86%	Yes
MER	233	3,168	7.35%	Yes	403	9,846	4.09%	Yes
MOL	86	1,293	6.65%	Yes	195	4,371	4.46%	Yes
PRI	96	1,486	6.46%	Yes	157	4,009	3.92%	Yes
UNI	121	1,638	7.39%	Yes	196	4,939	3.97%	Yes
UPP	42	621	6.76%	Yes	41	1,180	3.47%	Yes

**Table 7: Transition into CFP Status - Cohort 3** 

MHP	FPL over	FPL over	Rate	Standard	FPL up to	FPL up to	Rate	Standard
	100% (N)	100% (D)		Achieved	100% (N)	100% (D)		Achieved
AET	17	122	13.93%	Yes	28	681	4.11%	Yes
BCC	159	2,052	7.06%	Yes	279	8,166	3.42%	Yes
HAP	8	129	6.20%	Yes	29	655	4.43%	Yes
MCL	109	1,692	6.44%	Yes	151	5,345	2.83%	Yes
MER	210	3,207	6.55%	Yes	354	10,315	3.43%	Yes
MOL	81	1,312	6.17%	Yes	182	4,701	3.87%	Yes
PRI	99	1,474	6.72%	Yes	154	4,341	3.55%	Yes
UNI	104	1,691	6.15%	Yes	203	5,054	4.02%	Yes
UPP	32	544	5.88%	Yes	28	1,199	2.34%	Yes

### Transition out of Consistently Fail to Pay (CFP) Status

#### Measure

The percentage of Healthy Michigan Plan members who transitioned from CFP status to non-CFP status during the last quarter of the measurement period.

Standard Measurement Period

Income level over 100% FPL – At or above 2%

Income level up to 100% FPL – At or above 2%

Measurement Frequency
Quarterly

February 2022 – March 2023

MDHHS Data Warehouse

**Summary:** 

**Data Source** 

In *Cohort 1*, for income levels over 100% FPL, all plans met or exceeded the standard. Results ranged from 2.33% to 4.21%. For income levels up to 100% FPL, eight plans (BCC, HAP, MCL, MER, MOL, PRI, UNI and UPP) met or exceeded the standard, while one plan (AET) did not. Results ranged from 1.73% to 3.54%.

In *Cohort 2*, for income levels over 100% FPL, all plans met or exceeded the standard. Results ranged from 2.25% to 4.64%. For income levels up to 100% FPL, seven plans (**BCC**, **HAP**, **MCL**, **MER**, **PRI**, **UNI** and **UPP**) met or exceeded the standard, while one plan (AET and MOL) did not. Results ranged from 1.50% to 3.58%.

In *Cohort 3*, for income levels over 100% FPL, six plans (BCC, HAP, MER, PRI, UNI and UPP) met or exceeded the standard, while three plans (AET, MCL and MOL) did not. Results ranged from 1.64% to 3.61%. For income levels up to 100% FPL, five plans (BCC, MER, PRI, UNI and UPP) met or exceeded the standard, while four plans (AET, HAP, MCL and MOL) did not. Results ranged from 1.49% to 3.34%.

Table 8: Transition out of CFP Status - Cohort 1

MHP	FPL over 100% (N)	FPL over 100% (D)	Rate	Standard Achieved	FPL up to 100% (N)	FPL up to 100% (D)	Rate	Standard Achieved
AET	2	274	N/A	N/A	8	463	1.73%	No
BCC	104	2,909	3.58%	Yes	169	5,291	3.19%	Yes
HAP	7	301	2.33%	Yes	12	456	2.63%	Yes
MCL	55	2,242	2.45%	Yes	86	3,705	2.32%	Yes
MER	140	4,731	2.96%	Yes	161	7,771	2.07%	Yes
MOL	53	2,003	2.65%	Yes	88	3,504	2.51%	Yes
PRI	63	1,714	3.68%	Yes	68	2,445	2.78%	Yes
UNI	66	2,207	2.99%	Yes	85	3,621	2.35%	Yes
UPP	22	523	4.21%	Yes	26	734	3.54%	Yes

Table 9: Transition out of CFP Status - Cohort 2

МНР	FPL over 100% (N)	FPL over 100% (D)	Rate	Standard Achieved	FPL up to 100% (N)	FPL up to 100% (D)	Rate	Standard Achieved
AET	2	276	N/A	N/A	7	466	1.50%	No
BCC	87	3,085	2.82%	Yes	152	5,475	2.78%	Yes
HAP	7	311	2.25%	Yes	11	533	2.06%	Yes
MCL	70	2,373	2.95%	Yes	84	3,801	2.21%	Yes
MER	121	4,776	2.53%	Yes	191	8,054	2.37%	Yes
MOL	48	2,120	2.26%	Yes	73	3,706	1.97%	No
PRI	70	1,838	3.81%	Yes	72	2,679	2.69%	Yes
UNI	67	2,153	3.11%	Yes	95	3,782	2.51%	Yes
UPP	25	539	4.64%	Yes	25	699	3.58%	Yes

Table 10: Transition out of CFP Status - Cohort 3

MHP	FPL over	FPL over	Rate	Standard	FPL up to	FPL up to	Rate	Standard
	100% (N)	100% (D)		Achieved	100% (N)	100% (D)		Achieved
AET	5	304	1.64%	No	10	545	1.83%	No
BCC	67	2,998	2.23%	Yes	125	5,589	2.24%	Yes
HAP	7	282	2.48%	Yes	7	471	1.49%	No
MCL	46	2,383	1.93%	No	67	3,739	1.79%	No
MER	115	4,891	2.35%	Yes	168	8,328	2.02%	Yes
MOL	40	2,321	1.72%	No	60	3,889	1.54%	No
PRI	66	1,867	3.54%	Yes	60	2,727	2.20%	Yes
UNI	81	2,242	3.61%	Yes	85	3,761	2.26%	Yes
UPP	18	531	3.39%	Yes	23	688	3.34%	Yes

## **Appendix A: Three Letter Medicaid Health Plan Codes**

Below is a list of three letter codes established by MDHHS identifying each Medicaid Health Plan.

AET	Aetna Better Health of Michigan
BCC	Blue Cross Complete of Michigan
HAP	HAP Empowered
MCL	McLaren Health Plan
MER	Meridian Health Plan of Michigan
MOL	Molina Healthcare of Michigan
PRI	Priority Health Choice
UNI	UnitedHealthcare Community Plan
UPP	Upper Peninsula Health Plan

## Appendix B: One Year Plan-Specific Analysis

## Aetna Better Health of Michigan - AET

### **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.22%	Yes
	Aug 22 – Oct 22	80%	88.87%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	6.07%	No
	Oct 21 – Sep 22	12%	5.80%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 - Dec 22]; [Feb 22 - Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≤</u> 30%	7.89%	Yes	8.85%	Yes	4.50%	Yes		
	5.56%	Yes	3.92%	Yes	13.93%	Yes		
Standard <100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≤</u> 7%	4.49%	Yes	4.12%	Yes	2.95%	Yes		
	4.49%	Yes	3.90%	Yes	4.11%	Yes		

<sup>\*</sup>This is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≥</u> 2%	2.70%	Yes	3.00%	Yes	3.69%	Yes		
	N/A	N/A	N/A	N/A	1.64%	No		
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≥</u> 2%	1.37%	No	2.40%	Yes	2.29%	Yes		
	1.73%	No	1.50%	No	1.83%	No		

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## Blue Cross Complete of Michigan - BCC

### **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	91.31%	Yes
	Aug 22 – Oct 22	80%	89.84%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	4.63%	No
	Oct 21 – Sep 22	12%	4.44%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≤</u> 30%	8.38%	Yes	8.05%	Yes	7.06%	Yes		
	8.18%	Yes	6.93%	Yes	7.06%	Yes		
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≤</u> 7%	4.19%	Yes	3.96%	Yes	3.72%	Yes		
	3.73%	Yes	3.65%	Yes	3.42%	Yes		

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
≥2%	3.90%	Yes	4.66%	Yes	4.06%	Yes		
	3.58%	Yes	2.82%	Yes	2.23%	Yes		
Standard <100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≥</u> 2%	3.24%	Yes	2.67%	Yes	2.60%	Yes		
	3.19%	Yes	2.78%	Yes	2.24%	Yes		

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## HAP Empowered - HAP

### **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.90%	Yes
	Aug 22 – Oct 22	80%	89.57%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	6.25%	Yes
	Oct 21 – Sep 22	12%	4.82%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 - Dec 22]; [Feb 22 - Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 30%	5.95%	Yes	10.37%	Yes	11.27%	Yes			
	8.84%	Yes	9.70%	Yes	6.20%	Yes			
Standard <100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 7%	5.01%	Yes	6.45%	Yes	4.21%	Yes			
	4.20%	Yes	4.19%	Yes	4.43%	Yes			

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
≥2%	4.35%	Yes	1.75%	No	2.53%	Yes			
	2.33%	Yes	2.25%	Yes	2.48%	Yes			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≥</u> 2%	2.01%	Yes	1.03%	No	2.09%	Yes			
	2.63%	Yes	2.06%	Yes	1.49%	No			

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### McLaren Health Plan - MCL

### **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.98%	Yes
	Aug 22 – Oct 22	80%	89.64%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	6.79%	No
	Oct 21 – Sep 22	12%	6.07%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 30%	6.78%	Yes	5.90%	Yes	5.40%	Yes			
	6.35%	Yes	6.17%	Yes	6.44%	Yes			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>&lt;</u> 7%	3.31%	Yes	3.74%	Yes	3.63%	Yes			
	3.31%	Yes	3.86%	Yes	2.83%	Yes			

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
≥2%	3.89%	Yes	3.18%	Yes	2.58%	Yes			
	2.45%	Yes	2.95%	Yes	1.93%	No			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≥</u> 2%	2.86%	Yes	2.11%	Yes	2.53%	Yes			
	2.32%	Yes	2.21%	Yes	1.79%	No			

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## Meridian Health Plan of Michigan - MER

### **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	91.25%	Yes
	Aug 22 – Oct 22	80%	90.15%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	6.38%	No
	Oct 21 – Sep 22	12%	5.93%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 30%	6.65%	Yes	7.04%	Yes	7.51%	Yes			
	6.81%	Yes	7.35%	Yes	6.55%	Yes			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 7%	3.92%	Yes	3.48%	Yes	3.89%	Yes			
	3.59%	Yes	4.09%	Yes	3.43%	Yes			

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];						
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved
≥2%	4.22%	Yes	3.92%	Yes	3.76%	Yes
	2.96%	Yes	2.53%	Yes	2.35%	Yes
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved
<u>≥</u> 2%	2.80%	Yes	2.19%	Yes	2.63%	Yes
	2.07%	Yes	2.37%	Yes	2.02%	Yes

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## Molina Healthcare of Michigan - MOL

## **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.85%	Yes
	Aug 22 – Oct 22	80%	89.70%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	6.76%	No
	Oct 21 – Sep 22	12%	6.20%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>&lt;</u> 30%	7.10%	Yes	7.34%	Yes	7.84%	Yes			
	8.26%	Yes	6.65%	Yes	6.17%	Yes			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>&lt;</u> 7%	4.48%	Yes	4.22%	Yes	3.54%	Yes			
	3.57%	Yes	4.46%	Yes	3.87%	Yes			

<sup>\*</sup>This is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≥</u> 2%	3.43%	Yes	3.57%	Yes	2.78%	Yes		
	2.65%	Yes	2.26%	Yes	1.72%	No		
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
≥2%	2.32%	Yes	2.47%	Yes	2.06%	Yes		
	2.51%	Yes	1.97%	No	1.54%	No		

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## Priority Health Choice - PRI

## **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.75%	Yes
	Aug 22 – Oct 22	80%	89.37%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	5.03%	No
	Oct 21 – Sep 22	12%	5.43%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];								
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 30%	6.76%	Yes	7.16%	Yes	9.04%	Yes			
	7.50%	Yes	6.46%	Yes	6.72%	Yes			
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved			
<u>≤</u> 7%	4.29%	Yes	4.46%	Yes	3.81%	Yes			
	3.11%	Yes	3.92%	Yes	3.55%	Yes			

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];							
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
≥2%	5.06%	Yes	4.59%	Yes	4.06%	Yes		
	3.68%	Yes	3.81%	Yes	3.54%	Yes		
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved		
<u>≥</u> 2%	3.02%	Yes	2.74%	Yes	2.24%	Yes		
	2.78%	Yes	2.69%	Yes	2.20%	Yes		

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## UnitedHealthcare Community Plan - UNI

## **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.55%	Yes
	Aug 22 – Oct 22	80%	89.48%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	12.52%	Yes
	Oct 21 – Sep 22	12%	11.73%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care.	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];						
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
≤30%	6.06%	Yes	7.66%	Yes	8.11%	Yes	
	7.38%	Yes	7.39%	Yes	6.15%	Yes	
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
<u>≤</u> 7%	4.10%	Yes	4.65%	Yes	4.25%	Yes	
	4.33%	Yes	3.97%	Yes	4.02%	Yes	

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];						
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
≥2%	4.87%	Yes	5.35%	Yes	4.06%	Yes	
	2.99%	Yes	3.11%	Yes	3.61%	Yes	
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
<u>≥</u> 2%	3.65%	Yes	3.30%	Yes	2.41%	Yes	
	2.35%	Yes	2.51%	Yes	2.26%	Yes	

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## Upper Peninsula Health Plan – UPP

## **HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	May 22- Jul 22	80%	90.37%	Yes
	Aug 22 – Oct 22	80%	89.34%	Yes

Completion of Annual HRA	Jul 21 – Jun 22	12%	5.69%	No
	Oct 21 – Sep 22	12%	6.77%	No

Outreach/Engagement to	N/A	Informational Only	N/A	N/A
Facilitate Entry to Primary Care	N/A	Informational Only	N/A	N/A

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];						
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
≤30%	7.34%	Yes	4.73%	Yes	4.40%	Yes	
	7.03%	Yes	6.76%	Yes	5.88%	Yes	
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
<u>≤</u> 7%	3.60%	Yes	2.87%	Yes	3.25%	Yes	
	4.68%	Yes	3.47%	Yes	2.34%	Yes	

 $<sup>{}^*</sup>This$  is a reverse measure. A lower rate indicates better performance.

	Transition out of CFP Status: [Nov 21 – Dec 22]; [Feb 22 – Mar 23];						
Standard >100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
≥2%	4.27%	Yes	4.57%	Yes	3.69%	Yes	
	4.21%	Yes	4.64%	Yes	3.39%	Yes	
Standard ≤100% FPL	Cohort 1 Result	Standard Achieved	Cohort 2 Result	Standard Achieved	Cohort 3 Result	Standard Achieved	
<u>≥</u> 2%	2.80%	Yes	3.53%	Yes	3.11%	Yes	
	3.54%	Yes	3.58%	Yes	3.34%	Yes	

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Behavioral and Physical Health and Aging Services Bureau of Medicaid Care Management and Customer Service

### PERFORMANCE MONITORING REPORT

## **MDHHS Dental Measures**

**Composite – All Plans** 



GRETCHEN WHITMER, GOVERNOR | ELIZABETH HERTEL, DIRECTOR

**April 2023** 

Produced by:

Quality Improvement and Program Development – Managed Care Plan Division

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## **Executive Summary**

This Dental Performance Monitoring Report (PMR) is produced by the Quality Improvement and Program Development (QIPD) Section of the Managed Care Plan Division (MCPD) to track quality, access, and utilization in the Michigan Medicaid program to better support high quality care for beneficiaries.

The Michigan Department of Health and Human Services (MDHHS) monitors the performance of the State's Medicaid Health Plans (MHPs) through 34 key performance measures aimed at improving the quality and efficiency of health care services provided to the Michigan residents enrolled in a Medicaid program. These measures include Healthy Michigan Plan (HMP) Measures, MDHHS Dental Measure, CMS Core Set Measures, HEDIS Measures, Managed Care Quality Measures, Maternal Health Measures, and Chronic Conditions Measures. This report focuses only on the following MDHHS Dental Measures:

MDHHS Dental Measures						
Diagnostic Dental Services	Preventive Dental Services	Restorative (Dental Filings) Dental Services				
Comprehensive Diabetes Care: Diagnostic Dental Exam	Comprehensive Diabetes Care: Preventive Dental Visit	Comprehensive Diabetes Care: Restorative Dental Visit				
Diagnostic Dental Visits in Pregnant Women	Preventive Dental Visits in Pregnant Women	Restorative Dental Visits in Pregnant Women				
Adults: Any Dental						

Data for these measures will be represented on a quarterly basis. The body of the report contains a cross-plan analysis of the most current data available for each of these measures. Measurement Periods may vary and are based on the specifications for that individual measure. Appendix A contains specific three letter codes identifying each of the MHPs. Appendix B contains the one-year plan specific analysis for each measure.

The following table displays the number of MHPs meeting or exceeding the standards for the performance measure versus total MHPs, as reported in the Performance Monitoring Report, during the listed quarter for fiscal year 2023 unless otherwise noted.

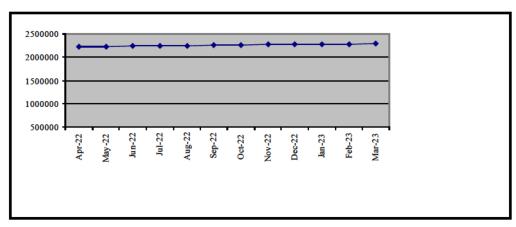
Table 1: Fiscal Year 20231

Quarterly Reported Measures	Reported in 1 <sup>st</sup> Quarter	Reported in 2 <sup>nd</sup> Quarter	Reported in 3 <sup>rd</sup> Quarter	Reported in 4 <sup>th</sup> Quarter
Diagnostic Dental Services	0/9	0/9		
Preventive Dental Services	1/9	1/9		
Restorative (Dental Fillings) Dental Services	0/9	0/9		
Comprehensive Diabetes Care: Diagnostic Dental Exam	N/A	N/A		
Comprehensive Diabetes Care: Preventive Dental Visit	2/9	2/9		
Comprehensive Diabetes Care: Restorative Dental Visit	N/A	N/A		
Diagnostic Dental Visits in Pregnant Women	2/10	1/9		
Preventive Dental Visits in Pregnant Women	N/A	N/A		
Restorative Dental Visits in Pregnant Women	N/A	N/A		
Adults: Any Dental Visit	N/A	N/A		

## **Managed Care Enrollment**

Michigan Medicaid Managed Care (MA-MC) enrollment has remained steady over the past year. In March 2023 enrollment was 2,290,075 up 71,188 enrollees (3.2%) from April 2022. An increase of 8,085 enrollees (0.4%) was realized between February 2023 and March 2023.

Figure 1: Medicaid Managed Care Enrollment, April 2022 - March 2023



<sup>&</sup>lt;sup>1</sup> N/A will be shown for measures where the standard is Informational Only. Also, measures with a denominator less than 10 do not include Total Health Care (THC).

600,000 500,000 400,000 100,000 HAP HAP

Figure 2: Medicaid Managed Care Enrollment by Health Plan, March 2023

#### **Medicaid Health Plan News**

The Performance Monitoring Report contains data for all Michigan Medicaid Health Plans, where data is available. Nine Medicaid Health Plans are contracted with the State of Michigan to provide comprehensive health care services.

As of October 1, 2021, Total Health Care (THC) is no longer an active Medicaid Health Plan. However, their information will continue to appear in the quarterly PMRs until such data is no longer available.

## **Cross-Plan Performance Monitoring Analyses**

The following section includes a cross-plan analysis for each performance measure. An analysis of the most current data available for each performance measure is included. For detailed questions regarding measurement periods or standards, see the Performance Monitoring Specifications.

## **Diagnostic Dental Services**

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 who received at least one diagnostic dental service within the measurement period.

Standard Measurement Period

At or above 30% (as shown on bar graph below) October 2021 – September 2022

Data Source Measurement Frequency

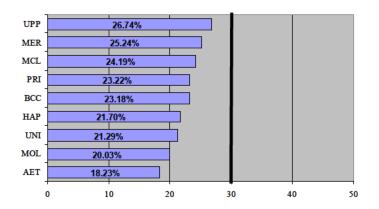
MDHHS Data Warehouse Quarterly

**Summary:** None of the health plans met or exceeded the standard. Results ranged from 18.23% to 26.74%.

Table 2: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS)	1,208	10,742	11.25%
Only			
HMP Managed Care (MC)	148,029	638,917	23.17%
Only		-	

Figure 3: Diagnostic Dental Services



Numerator/
Denominator\*

4,392 / 16,422

38,207 / 151,383

19,451 / 80,413

14,687 / 63,260

26,556 / 114,558

2,689 / 12,389

16,455 / 77,301

19,530 / 97,489

3,162 / 17,341

Diagnostic Dental Services Percentages

<sup>\*</sup>Numerator depicts the number of eligible beneficiaries between the ages of 19 and 64 who had at least one diagnostic dental service. Denominator depicts the total number of eligible beneficiaries.

#### **Preventive Dental Services**

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 who received at least one preventive dental service within the measurement period.

Standard Measurement Period

At or above 17% (as shown on bar graph below) October 2021 – September 2022

Data Source Measurement Frequency

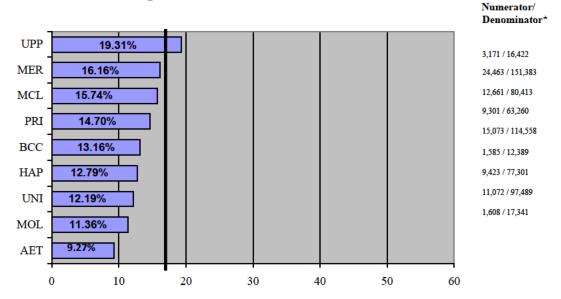
MDHHS Data Warehouse Quarterly

**Summary:** One plan (**UPP**) met or exceeded the standard, while eight plans (AET, BCC, HAP, MCL, MER, MOL, PRI, and UNI), did not. Results ranged from 9.27% to 19.31%.

Table 3: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS) Only	605	10,742	5.63%
HMP Managed Care (MC) Only	89,995	638,917	14.09%

Figure 4: Preventive Dental Services



Preventive Dental Services Percentages

<sup>\*</sup>Numerator depicts the number of eligible beneficiaries between the ages of 19 and 64 who had at least one preventive dental service. Denominator depicts the total number of eligible beneficiaries.

## Restorative (Dental Fillings) Services

#### Measure

The percentage of total eligible Healthy Michigan Plan members between the ages of 19 and 64 who received at least one restorative (dental fillings) dental service within the measurement period.

Standard Measurement Period

At or above 14% (as shown on bar graph below) October 2021 – September 2022

Data Source Measurement Frequency

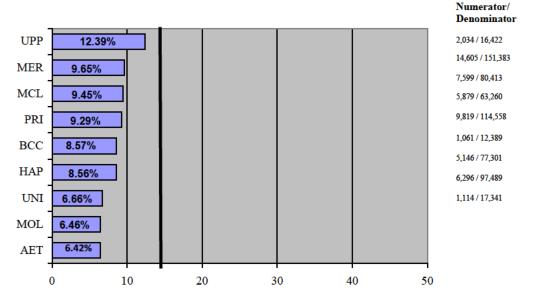
MDHHS Data Warehouse Quarterly

**Summary:** None of the plan met or exceeded the standard. Results ranged from 6.42% to 12.39%.

Table 4: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS)	394	10,742	3.67%
Only			
HMP Managed Care (MC)	54,639	638,917	8.55%
Only			

Figure 5: Restorative (Dental Fillings) Dental Services



Restorative (Dental Fillings) Dental Services Percentages

<sup>\*</sup>Numerator depicts the number of eligible beneficiaries between the ages of 19 and 64 who had at least one restorative dental service. Denominator depicts the total number of eligible beneficiaries.

## Comprehensive Diabetes Care: Diagnostic Dental Exam

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 with Type 1 or Type 2 Diabetes who received at least one diagnostic dental service within the measurement period.

Standard Measurement Period

N/A – Informational Only October 2021 – September 2022

Data Source Measurement Frequency

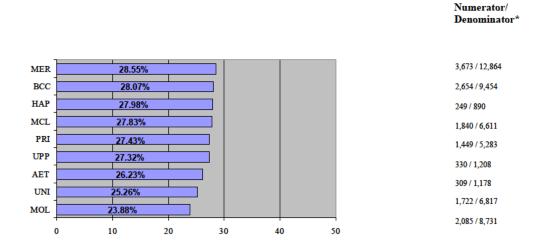
MDHHS Data Warehouse Quarterly

**Summary:** Results ranged from 23.88% to 28.55%

Table 5: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS) Only	177	748	23.66%
HMP Managed Care (MC) Only	14,635	53,913	27.15%

Figure 6: Comprehensive Diabetes Care: Diagnostic Dental Exam



Comprehensive Diabetes Care: Diagnostic Dental Exam Percentages

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible members with diabetes who received at least one diagnostic dental service. Denominator depicts the unduplicated number of all eligible members with diabetes.

### Comprehensive Diabetes Care: Preventive Dental Visit

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 with Type 1 or Type 2 Diabetes who received at least one preventive dental service within the measurement period.

Standard Measurement Period

At or above 17% (as shown on bar graph below). October 2021 – September 2022

Data Source Measurement Frequency

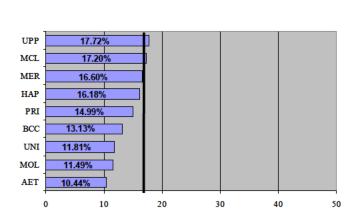
MDHHS Data Warehouse Quarterly

**Summary:** Two plans (MCL and UPP) met or exceeded the standard, while seven plans (AET, BCC, HAP, MER, MOL, PRI, and UNI). Results ranged from 10.44% to 17.72%

Table 6: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS)	75	748	10.03%
Only			
HMP Managed Care (MC)	7,754	53,913	14.38%
Only			

Figure 7: Comprehensive Diabetes Care: Preventive Dental Visit



Numerator/ Denominator\*

214 / 1,208

1,137 / 6,611

2,136 / 12,864

144 / 890

792 / 5,283

1,241 / 9,454

805 / 6,817

1,003 / 8,731

123 / 1,178

Comprehensive Diabetes Care: Preventive Dental Visit Percentages

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible members with diabetes who received at least one preventive dental service. Denominator depicts the unduplicated number of all eligible members with diabetes.

#### Comprehensive Diabetes Care: Restorative Dental Visit

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 with Type 1 or Type 2 Diabetes who received at least one restorative dental service within the measurement period.

Standard Measurement Period

N/A – Informational Only October 2021 – September 2022

Data Source Measurement Frequency

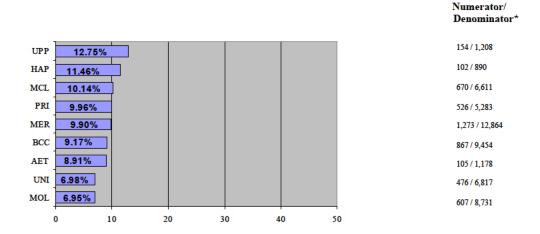
MDHHS Data Warehouse Quarterly

**Summary:** Results ranged from 6.95% to 12.75%

Table 7: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS) Only	36	748	4.81%
HMP Managed Care (MC)	4,882	53,913	9.06%
Only		1	

Figure 8: Comprehensive Diabetes Care: Restorative Dental Visit



Comprehensive Diabetes Care: Restorative Dental Visit Percentages

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible members with diabetes who received at least one restorative dental service. Denominator depicts the unduplicated number of all eligible members with diabetes.

## Diagnostic Dental Visits in Pregnant Women

#### Measure

The percentage of pregnant women who received at least one diagnostic dental service either during their pregnancy or 90 days postpartum.

Standard Measurement Period

At or above 30% (as shown on bar graph below) October 2021 – September 2022

Data Source Measurement Frequency

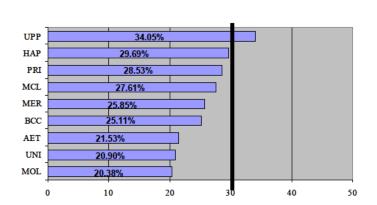
MDHHS Data Warehouse Quarterly

**Summary:** One plan (**UPP**) met or exceeded the standard, while eight plans (AET, BCC, HAP, MCL, MER, MOL, UNI and UPP), did not. Results ranged from 20.38% to 34.05%

**Table 8: Comparison across Medicaid Programs** 

Medicaid Program	Numerator	Denominator	Percentage
Michigan Medicaid All	7,399	33,135	22.33%
Fee for Service (FFS) only	76	380	20.00%
Managed Care only	6,266	25,582	24.49%
MA-MC	3,132	14,263	21.96%

Figure 9: Diagnostic Dental Visits in Pregnant Women



Numerator/ Denominator\* 174 / 511 76 / 256 547 / 1,917 750 / 2,716 1,769 / 6,844 886 / 3,529 121 / 562 668 / 3,197 924 / 4,533

Diagnostic Dental Visits in Pregnant Women

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible pregnant members who received at least one diagnostic dental service. Denominator depicts the unduplicated number of all eligible pregnant members.

## Preventive Dental Visits in Pregnant Women

#### Measure

The percentage of pregnant women who received at least one preventive dental service either during their pregnancy or 90 days postpartum.

#### Standard

N/A – Informational Only

#### **Measurement Period**

October 2021 – September 2022

#### **Data Source**

MDHHS Data Warehouse

### Measurement Frequency

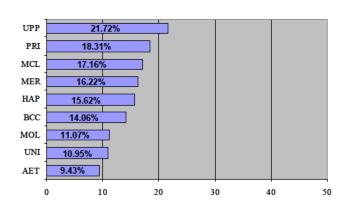
Quarterly

**Summary:** Results ranged from 9.43% to 21.72%

Table 9: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
Michigan Medicaid All	4,315	33,135	13.02%
Fee for Service (FFS) only	34	380	8.95%
Managed Care only	3,683	25,582	14.40%
MA-MC	1,669	14,263	11.70%

Figure 10: Preventive Dental Visits in Pregnant Women



Numerator/ Denominator\*

111 / 511 351 / 1,917 466 / 2,716 1,110 / 6,844 40 / 256 496 / 3,529 502 / 4,533 350 / 3,197 53 / 562

Preventive Dental Visits in Pregnant Women

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible pregnant members who received at least one preventive dental service. Denominator depicts the unduplicated number of all eligible pregnant members.

## Restorative Dental Visits in Pregnant Women

#### Measure

The percentage of pregnant women who received at least one restorative dental service either during their pregnancy or 90 days postpartum.

Standard

N/A – Informational Only

**Measurement Period** 

October 2021 – September 2022

**Data Source** 

MDHHS Data Warehouse

**Measurement Frequency** 

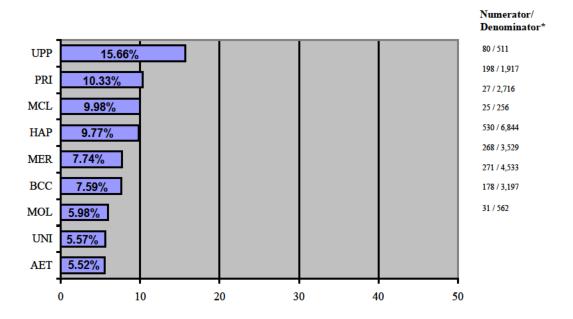
Quarterly

**Summary:** Results ranged from 5.52% to 15.66%

Table 10: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
Michigan Medicaid All	2,307	33,135	6.96%
Fee for Service (FFS) only	25	380	6.58%
Managed Care only	1,950	25,582	7.62%
MA-MC	918	14,263	6.44%

Figure 11: Restorative Dental Visits in Pregnant Women



Restorative Dental Visits in Pregnant Women

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible pregnant members who received at least one restorative dental service. Denominator depicts the unduplicated number of all eligible pregnant members.

## Adults: Any Dental Visit

#### Measure

The percentage of Healthy Michigan Plan members between the ages of 19 and 64 who received at least one dental service within the measurement period.

Standard

N/A – Informational Only

**Measurement Period** 

October 2021 – September 2022

**Data Source** 

MDHHS Data Warehouse

Measurement Frequency

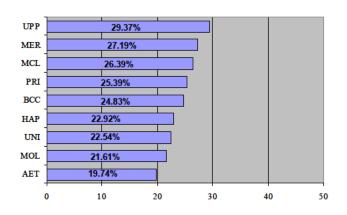
Quarterly

**Summary:** Results ranged from 19.74% to 29.37%

Table 11: Comparison across Medicaid Programs

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee for Service (FFS)	1,330	10,742	12.38%
Only			
HMP Managed Care (MC)	159,540	638,917	24.97%
Only			

Figure 12: Adults: Any Dental Visit



Numerator / Denominator\*

4,823 / 16,422

41,162 / 151,383

21,221 / 80,413

16,062 / 63,260

28,443 / 114,558

2,840 / 12,389

17,422 / 77,301

21,069 / 97,489

3,423 / 17,341

Adults: Any Dental Visit

<sup>\*</sup>Numerator depicts the unduplicated number of all eligible pregnant members who received at least one dental service. Denominator depicts the unduplicated number of all eligible members.

# Performance Monitoring Report **Appendix A: Three Letter Medicaid Health Plan Codes**

Below is a list of three letter codes established by MDHHS identifying each Medicaid Health Plan.

AET	Aetna Better Health of Michigan
BCC	Blue Cross Complete of Michigan
HAP	HAP Empowered
MCL	McLaren Health Plan
MER	Meridian Health Plan of Michigan
MOL	Molina Healthcare of Michigan
PRI	Priority Health Choice
THC	Total Health Care
UNI	UnitedHealthcare Community Plan
UPP	Upper Peninsula Health Plan

## Appendix B: One Year Plan-Specific Analysis

### Aetna Better Health of Michigan - AET

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	18.85%	No
	Oct 21 – Sep 22	30%	18.23%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	9.70%	No
	Oct 21 – Sep 22	17%	9.27%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	6.61%	No
Dental Services	Oct 21 – Sep 22	14%	6.42%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	26.73%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	26.23%	N/A
				_
Comprehensive Diabetes Care: Preventive Dental Visit	Jul 21 – Jun 22 Oct 21 – Sep 22	17% <b>17%</b>	11.42% <b>10.44%</b>	No No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	8.85%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	8.91%	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	20.57%	No
Pregnant Women	Oct 21 – Sep 22	30%	21.53%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	8.94%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	9.43%	N/A N/A
Restorative Dental Visits in Pregnant Women	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	3.76% <b>5.52%</b>	N/A N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	20.25%	N/A
	Oct 21 – Sep 22	Informational Only	19.74%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

## **Blue Cross Complete - BCC**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	23.70%	No
	Oct 21 – Sep 22	30%	23.18%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	13.45%	No
	Oct 21 – Sep 22	17%	13.16%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	8.81%	No
Dental Services	Oct 21 – Sep 22	14%	8.57%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	28.61%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	28.07%	N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	17%	13.33%	No
Preventive Dental Visit	Oct 21 – Sep 22	17%	13.13%	No
Comprehensive Diabetes Care: Restorative Dental Visit	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	9.51% <b>9.17%</b>	N/A N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	25.84%	No
Pregnant Women	Oct 21 – Sep 22	30%	25.11%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	14.46%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	14.06%	N/A
Restorative Dental Visits in	Jul 21 – Jun 22	Informational Only	8.20%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	7.59%	N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	25.49%	N/A
•	Oct 21 – Sep 22	Informational Only	24.83%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### **HAP Empowered - HAP**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	21.19%	No
	Oct 21 – Sep 22	30%	21.70%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	12.47%	No
	Oct 21 – Sep 22	17%	12.79%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	8.15%	No
Dental Services	Oct 21 – Sep 22	14%	8.56%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	27.96%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	27.98%	N/A
Comprehensive Diabetes Care: Preventive Dental Visit	Jul 21 – Jun 22 Oct 21 – Sep 22	17% <b>17%</b>	15.64% <b>16.18%</b>	No No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	9.85%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	11.46%	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	25.75%	No
Pregnant Women	Oct 21 – Sep 22	30%	29.69%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	14.16%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	15.62%	N/A
Restorative Dental Visits in	L-121 L 22	Informational Octo	0.010/	NT/A
Pregnant Women	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	9.01% <b>9.77%</b>	N/A N/A
			20.777	
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	22.57%	N/A
	Oct 21 – Sep 22	Informational Only	22.92%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

#### McLaren Health Plan - MCL

Preventive Dental Services  Preventive (Dental Fillings) Dental Services  Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Diagnostic Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Jun 22 - Sep 22  - Jun 22 - Sep 22	30% 30%  17% 17%  14% 14%  Informational Only Informational Only  17% 17%	24.42% 24.19%  15.86% 15.74%  9.74% 9.45%  28.38% 27.83%  17.25% 17.20%	No No No No No No No Yes Yes
Preventive Dental Services  Restorative (Dental Fillings) Dental Services  Oct 21  Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Diagnostic Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Jun 22 - Sep 22 - Jun 22 - Sep 22 - Jun 22 - Sep 22 - Jun 22 - Jun 22	17% 17%  14% 14%  Informational Only Informational Only  17%	15.86% 15.74% 9.74% 9.45% 28.38% 27.83%	No No No No No Yes
Restorative (Dental Fillings) Dental Services  Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Diagnostic Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Sep 22  - Jun 22  - Sep 22  - Jun 22  - Sep 22  - Jun 22  - Jun 22	17%  14%  14%  Informational Only  Informational Only  17%	9.74% 9.45% 28.38% 27.83%	No No No No Yes
Restorative (Dental Fillings) Dental Services  Oct 21  Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Diagnostic Dental Visits in Pregnant Women  Jul 21  Oct 21	- Jun 22 - Sep 22 - Jun 22 - Sep 22 - Jun 22	14% 14% Informational Only Informational Only 17%	9.74% 9.45% 28.38% 27.83%	No No No N/A N/A Yes
Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Sep 22  - Jun 22  - Sep 22  - Jun 22	14%  Informational Only  Informational Only  17%	9.45% 28.38% 27.83%	No N/A N/A Yes
Comprehensive Diabetes Care: Diagnostic Dental Exam  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Restorative Dental Visit  Diagnostic Dental Visits in Pregnant Women  Jul 21  Oct 21	- Jun 22 - Sep 22	Informational Only Informational Only  17%	28.38% 27.83% 17.25%	N/A N/A
Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Comprehensive Diabetes Care: Restorative Dental Visit  Oct 21  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Sep 22 - Jun 22	Informational Only 17%	27.83% 17.25%	N/A Yes
Comprehensive Diabetes Care: Preventive Dental Visit  Comprehensive Diabetes Care: Preventive Dental Visit  Oct 21  Comprehensive Diabetes Care: Restorative Dental Visit  Oct 21  Diagnostic Dental Visits in Pregnant Women  Oct 21	- Sep 22 - Jun 22	Informational Only 17%	27.83% 17.25%	N/A Yes
Preventive Dental Visit  Comprehensive Diabetes Care: Restorative Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21				
Preventive Dental Visit  Comprehensive Diabetes Care: Restorative Dental Visit  Oct 21  Diagnostic Dental Visits in Pregnant Women  Jul 21  Oct 21				
Restorative Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21				
Restorative Dental Visit  Diagnostic Dental Visits in Pregnant Women  Oct 21				
Diagnostic Dental Visits in Jul 21 Pregnant Women Oct 21	– Jun 22	Informational Only	10.29%	N/A
Pregnant Women Oct 21	. – Ѕер 22	Informational Only	10.14%	N/A
	– Jun 22	30%	27.66%	No
Preventive Dental Visits in Jul 21	. – Sep 22	30%	27.61%	No
	– Jun 22	Informational Only	17.29%	N/A
	- Sep 22	Informational Only	17.16%	N/A
Restorative Dental Visits in Jul 21	– Jun 22	Informational Only	10.15%	N/A
	- Sep 22	Informational Only	9.98%	N/A
Adults: Any Dental Visit Jul 21				
Adults: Any Dental Visit Jul 21 Oct 21	– Jun 22	Informational Only	26.74%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### Meridian Health Plan of Michigan - MER

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	25.28%	No
	Oct 21 – Sep 22	30%	25.24%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	16.22%	No
	Oct 21 – Sep 22	17%	16.16%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	9.82%	No
Dental Services	Oct 21 – Sep 22	14%	9.65%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	28.47%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	28.55%	N/A
Comprehensive Diabetes Care: Preventive Dental Visit	Jul 21 – Jun 22 Oct 21 – Sep 22	17% <b>17%</b>	16.34% <b>16.60%</b>	No No
	•			
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	10.03%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	9.90%	N/A
			24.004	
Diagnostic Dental Visits in Pregnant Women	Jul 21 – Jun 22	30%	26.00%	No
riegiant women	Oct 21 – Sep 22	30%	25.85%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	16.35%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	16.22%	N/A
Restorative Dental Visits in	Jul 21 – Jun 22	Informational Only	8.31%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	7.74%	N/A
Addison Assert State Sta	T-101 T 00	I I.S. 10.1	25.250/	37/4
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	27.37%	N/A
	Oct 21 – Sep 22	Informational Only	27.19%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### Molina Healthcare of Michigan - MOL

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	20.21%	No
	Oct 21 – Sep 22	30%	20.03%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	11.32%	No
	Oct 21 – Sep 22	17%	11.36%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	6.52%	No
Dental Services	Oct 21 – Sep 22	14%	6.46%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	24.14%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	23.88%	N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	17%	11.58%	N <sub>2</sub>
Preventive Dental Visit	Oct 21 – Sep 22	17%	11.38% 11.49%	No No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	7.03%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	6.95%	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	21.24%	No
Pregnant Women	Oct 21 – Sep 22	30%	20.38%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	11.16%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	11.07%	N/A
Restorative Dental Visits in	Jul 21 – Jun 22	Informational Only	6.20%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	5.98%	N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	21.73%	N/A
113313. This Domai visit	Oct 21 – Sep 22	Informational Only	21.61%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### Priority Health Choice - PRI

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	25.00%	No
	Oct 21 – Sep 22	30%	23.22%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	16.80%	No
	Oct 21 – Sep 22	17%	14.70%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	10.66%	No
Dental Services	Oct 21 – Sep 22	14%	9.29%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	27.22%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only  Informational Only	27.43%	N/A N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	17%	16.63%	No
Preventive Dental Visit	Oct 21 – Sep 22	17%	14.99%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	10.92%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	9.96%	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	30.54%	Yes
Pregnant Women	Oct 21 – Sep 22	30%	28.53%	No
D	7104 7 00		40.040/	1 27/4
Preventive Dental Visits in Pregnant Women	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	18.94% <b>18.31%</b>	N/A N/A
Restorative Dental Visits in Pregnant Women	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	11.55% 10.33%	N/A N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	27.82%	N/A
	Oct 21 – Sep 22	Informational Only	25.39%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

#### **Total Health Care - THC**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	N/A	N/A
	Oct 21 – Sep 22	30%	N/A	N/A
Preventive Dental Services	Jul 21 – Jun 22	17%	N/A	N/A
	Oct 21 – Sep 22	17%	N/A	N/A
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	N/A	N/A
Dental Services	Oct 21 – Sep 22	14%	N/A	N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	N/A	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	N/A	N/A
				_
Comprehensive Diabetes Care: Preventive Dental Visit	Jul 21 – Jun 22 Oct 21 – Sep 22	17% <b>17%</b>	N/A N/A	N/A N/A
Comprehensive Diabetes Care: Restorative Dental Visit	Jul 21 – Jun 22	Informational Only	N/A	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	N/A	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	20.86%	No
Pregnant Women	Oct 21 – Sep 22	30%	N/A	N/A
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	9.20%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	N/A	N/A
D. C. D. (1877)	T 101 T 00		2.070/	37/4
Restorative Dental Visits in Pregnant Women	Jul 21 – Jun 22 Oct 21 – Sep 22	Informational Only Informational Only	3.07% N/A	N/A N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	N/A	N/A
	Oct 21 – Sep 22	Informational Only	N/A	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### UnitedHealthcare Community Plan - UNI

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	21.45%	No
	Oct 21 – Sep 22	30%	21.29%	No
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Preventive Dental Services	Jul 21 – Jun 22	17%	12.22%	No
	Oct 21 – Sep 22	17%	12.19%	No
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	6.96%	No
Dental Services	Oct 21 – Sep 22	14%	6.66%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	25.33%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	25.26%	N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	17%	11.76%	No
Preventive Dental Visit	Oct 21 – Sep 22	17%	11.81%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	7.22%	N/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only	6.98%	N/A
Diagnostic Dental Visits in	Jul 21 – Jun 22	30%	21.72%	No
Pregnant Women	Oct 21 – Sep 22	30%	20.90%	No
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	11.36%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	10.95%	N/A
Restorative Dental Visits in	Jul 21 – Jun 22	Informational Only	5.99%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	5.57%	N/A
-				
4.1.1/ A D (177.5/				
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	22.75%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

## Appendix B: One Year Plan-Specific Analysis

### Upper Peninsula Health Plan – UPP

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Jul 21 – Jun 22	30%	26.96%	No
	Oct 21 – Sep 22	30%	26.74%	No
Preventive Dental Services	Jul 21 – Jun 22	17%	19.58%	Yes
	Oct 21 – Sep 22	17%	19.31%	Yes
Restorative (Dental Fillings)	Jul 21 – Jun 22	14%	12.62%	No
Dental Services	Oct 21 – Sep 22	14%	12.39%	No
Comprehensive Diabetes Care:	Jul 21 – Jun 22	Informational Only	28.29%	N/A
Diagnostic Dental Exam	Oct 21 – Sep 22	Informational Only	27.32%	N/A
Comprehensive Diabetes Care:	Jul 21 – Jun 22	17%	18.83%	Yes
Preventive Dental Visit	Oct 21 – Sep 22	17%	17.72%	Yes
Comprehensive Diabetes Care:	Jul 21 – Jun 22	I Informational Only	13.09%	I NI/A
Restorative Dental Visit	Oct 21 – Sep 22	Informational Only Informational Only	13.09% 12.75%	N/A N/A
Diagnostic Dental Visits in Pregnant Women	Jul 21 – Jun 22	30%	36.03%	Yes
riegnant women	Oct 21 – Sep 22	30%	34.05%	Yes
Preventive Dental Visits in	Jul 21 – Jun 22	Informational Only	23.70%	N/A
Pregnant Women	Oct 21 – Sep 22	Informational Only	21.72%	N/A
Restorative Dental Visits in Pregnant Women	Jul 21 – Jun 22	Informational Only	16.76%	N/A
riegnani women	Oct 21 – Sep 22	Informational Only	15.66%	N/A
Adults: Any Dental Visit	Jul 21 – Jun 22	Informational Only	29.79%	N/A
	Oct 21 – Sep 22	Informational Only	29.37%	N/A

<sup>-</sup> Shaded areas represent data that are newly reported this month.

<sup>-</sup> For questions regarding measurement periods or standards, see the Performance Monitoring Specifications