



STATE OF MICHIGAN  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

RICK SNYDER  
GOVERNOR

NICK LYON  
DIRECTOR

December 19, 2018

Shanna Janu, Project Officer  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard  
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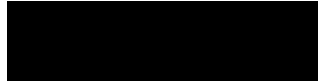
Dear Ms. Janu,

Re: Project Number 11-W-00245/5 – Healthy Michigan Plan

Enclosed is the quarterly report for Healthy Michigan Plan. It covers the fourth quarter of federal fiscal year 2018. 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 phone at (517) 284-1190, or by e-mail at [colemanj@michigan.gov](mailto:colemanj@michigan.gov).

Sincerely,



Penny Rutledge, Director  
Actuarial Division

cc: Ruth Hughes  
Angela Garner

Enclosure (5)

Michigan Adult Coverage Demonstration  
Section 1115 Quarterly Report

Demonstration Year: 9 (01/01/2018 – 12/31/2018)  
Federal Fiscal Quarter: 4 (07/01/2018 – 09/30/2018)

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## Introduction

On April 1, 2014, Michigan expanded its Medicaid program to include adults with income up to 133 percent of the Federal Poverty Level (FPL). To accompany this expansion, the Michigan Adult Benefits Waiver (ABW) was amended and transformed to establish the Healthy Michigan Plan, through which the Michigan Department of Health & Human Services (MDHHS) will test innovative approaches to beneficiary cost sharing and financial responsibility for health care for the new adult eligibility group. Organized service delivery systems will be utilized to improve coherence and overall program efficiency. The overarching themes used in the benefit design are increasing access to quality health care, encouraging the utilization of high-value services, and promoting beneficiary adoption of healthy behaviors and using evidence-based practice initiatives. The Healthy Michigan Plan provides a full health care benefit package as required under the Affordable Care Act including all of the Essential Health Benefits as required by federal law and regulation. The new adult population with incomes above 100 percent of the FPL are required to make contributions toward the cost of their health care. In addition, all newly eligible adults from 0 to 133 percent of the FPL are subject to copayments consistent with federal regulations.

State law requires MDHHS to partner with the Michigan Department of Treasury to garnish state tax returns and lottery winnings for members consistently failing to meet payment obligations associated with the Healthy Michigan Plan. Prior to the initiation of the garnishment process, members are notified in writing of payment obligations and rights to a review. Debts associated with the MI Health Account are not reported to credit reporting agencies. Members non-compliant with cost-sharing requirements do not face loss of eligibility, denial of enrollment in a health plan, or denial of services.

MDHHS's goals in the demonstration are to:

- Improve access to healthcare for uninsured or underinsured low-income Michigan citizens;
- Improve the quality of healthcare services delivered;
- Reduce uncompensated care;
- Strengthen beneficiary engagement and personal responsibility;
- Encourage individuals to seek preventive care and encourage the adoption of healthy behaviors;
- Support coordinated strategies to address social determinants of health in order to promote positive health outcomes, greater independence, and improved quality of life;
- Help uninsured or underinsured individuals manage their health care issues; and
- Encourage quality, continuity, and appropriate medical care.

## Enrollment and Benefits Information

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 tables display new enrollment and disenrollment by month:

<b>Table 1: Healthy Michigan Plan New Enrollments by Month</b>			
July 2018	August 2018	September 2018	Total
29,517	30,302	27,931	87,750

<b>Table 2: Healthy Michigan Plan Disenrollments by Month</b>			
July 2018	August 2018	September 2018	Total
33,063	33,854	30,365	97,282

Most Healthy Michigan Plan beneficiaries choose a health plan as opposed to automatic assignment to a health plan. As of September 2018, 327,854 or, 59 percent, of the State's 550,742 Healthy Michigan Plan health plan enrollees selected a health plan. The remaining managed care enrolled beneficiaries were automatically assigned to a health plan. All Medicaid Health Plan members have an opportunity to change their plan within 90 days of enrollment into the plan. Changes in the State's Medicaid enrollment system unexpectedly delayed the State's ability to report the number of automatically assigned Healthy Michigan Plan health plan beneficiaries with plan changes. This quarter, the automatic assignment data for 2018 was provided by the State's enrollment broker. The following table shows the number of beneficiaries that were automatically assigned to a health plan that voluntarily changed to another health plan:

<b>Table 3: 2018 Healthy Michigan Plan Automatic Assignment to Voluntary Health Plan Changes</b>		
January – March 2018	April – June 2018	July – September 2018
2,156	3,658	2,360
34%	40%	41%

Healthy Michigan Plan members have the opportunity to reduce cost-sharing requirements through the completion of Health Risk Assessments and engaging in healthy behaviors. MDHHS has developed a standard Health Risk Assessment form to be completed annually. Health Risk Assessment forms and reports are located on the [MDHHS website](#). The Health Risk Assessment document is completed in two parts. The member typically completes the first section of the form with the assistance of the Healthy Michigan Plan enrollment broker. Members that are automatically assigned to a health plan are not surveyed. The remainder of the form is completed at the member's initial primary care visit. Completion of the remaining Health Risk Assessment sections (beyond those completed through the State's enrollment broker) requires beneficiaries to schedule an annual appointment, select a Healthy Behavior, and have member results completed by their primary care provider. The primary care provider securely sends the completed Health Risk Assessment to the appropriate Medicaid Health Plan.

To improve the ability of individuals to participate in the Healthy Behaviors Incentives Program, additional mechanisms to document healthy behaviors were added April 1, 2018 for individuals who may have completed healthy behavior activities but do not have a submitted Health Risk

Assessment for documentation. The mechanisms include claims/encounters review for beneficiaries who utilize preventive and wellness services as well as documented participation in approved wellness and population health management programs.

Healthy Michigan Plan managed care members are rewarded for addressing behaviors necessary for improving health. All individuals who complete a healthy behavior are eligible for a 50 percent reduction in copays for the rest of the year once the Enrollee has paid 2 percent of their income in copays. Individuals who pay a contribution (those above 100 percent of the Federal Poverty Level) will also be eligible for a 50 percent reduction in their monthly contribution. To encourage consistent multi-year participation in the Healthy Behaviors Incentives Program, individuals who pay a contribution (those above 100 percent of the Federal Poverty Level) will have their monthly contribution waived in its entirety if they complete an annual Health Risk Assessment on time each year over 2 or more years. Individuals who do not pay a contribution (those below 100 percent of the Federal Poverty Level) are eligible for a gift card for completion of the Health Risk Assessment only, however this incentive is being retired October 1, 2018. Once retired, the incentives will then be consistent across all three healthy behavior options. Due to the recent Healthy Michigan Plan Health Risk Assessment changes, the Health Risk Assessment Report with enrollment broker data is not available this quarter. MDHHS will provide the updated and revised Health Risk Assessment Report when it is available.

The following table details Health Risk Assessment data collected by the Medicaid Health Plans for the quarter:

<b>Table 4: Health Risk Assessment Health Plan Data</b>				
	July 2018	August 2018	September 2018	Total
Health Risk Assessments Submitted	6,283	4,196	5,843	16,322
Wellness Programs Submitted	2,683	3,255	953	6891
Preventative Services Completed	51,723	54,538	46,497	152,758
Reductions Applied	1,853	680	492	3,025

## **Enrollment Counts for Quarter and Year to Date**

Healthy Michigan Plan enrollment in this quarter has remained consistent with previous quarters. In addition to stable Healthy Michigan Plan enrollment, MDHHS saw the typical number of disenrollments from the plan as reported in the Monthly Enrollment Reports to CMS. Healthy Michigan disenrollment reflects individuals who were disenrolled during a redetermination of eligibility or switched coverage due to eligibility for other Medicaid program benefits. In most cases beneficiaries disenrolled from the Healthy Michigan Plan due to eligibility for other Medicaid programs. Movement between Medicaid programs is not uncommon and MDHHS expects that beneficiaries will continue to shift between Healthy Michigan and other Medicaid programs as their eligibility changes. Enrollment counts in the table below are for unique members for identified time periods. The unique enrollee count will differ from the September 2018 count from the Beneficiary Month Reporting section as a result of disenrollment that occurred during the quarter.

**Table 5: Enrollment Counts for Quarter and Year to Date**

Demonstration Population	Total Number of Demonstration Beneficiaries Quarter Ending – 09/2018	Current Enrollees (year to date)	Disenrolled in Current Quarter
ABW Childless Adults	N/A	N/A	N/A
Healthy Michigan Adults	752,242	911,155	97,282

## Outreach/Innovation Activities to Assure Access

MDHHS utilizes the [Healthy Michigan Program website](#) to provide information to both beneficiaries and providers. The Healthy Michigan Plan website contains information on eligibility, how to apply, services covered, cost sharing requirements, frequently asked questions, Health Risk Assessment completion, and provider information. The site also provides a link for members to make MI Health Account payments. MDHHS also has a mailbox, [healthymichiganplan@michigan.gov](mailto:healthymichiganplan@michigan.gov), for questions or comments about the Healthy Michigan Plan.

MDHHS continues to work closely with provider groups through meetings, Medicaid provider policy bulletins, and various interactions with community partners and provider trade associations. Progress reports are provided by MDHHS to the Medical Care Advisory Council (MCAC) at regularly scheduled quarterly meetings. These meetings provide an opportunity for attendees to provide program comments or suggestions. The August 2018 MCAC meeting occurred during the quarter covered by this report. The minutes for this meeting have been attached as an enclosure. MCAC meeting agendas and minutes are also available on the [MDHHS website](#).

## Collection and Verification of Encounter Data and Enrollment Data

As a mature managed care state, all Medicaid Health Plans submit encounter data to MDHHS for the services provided to Healthy Michigan Plan beneficiaries following the existing MDHHS data submission requirements. MDHHS continues to utilize encounter data to prepare MI Health Account statements with a low volume of adjustments. MDHHS works closely with the plans in reviewing, monitoring and investigating encounter data anomalies. MDHHS and the Medicaid Health Plans work collaboratively to correct any issues discovered as part of the review process.

## Operational/Policy/Systems/Fiscal Developmental Issues

MDHHS regularly meets with the staff of Medicaid Health Plans to address operational issues, programmatic issues, and policy updates and clarifications. Updates and improvements to the Community Health Automated Medicaid Processing System (CHAMPS), the State's Medicaid Management Information System (MMIS) happen continually, and MDHHS strives to keep the health plans informed and functioning at the highest level. At these meetings, Medicaid policy bulletins and letters that impact the program are discussed, as are other operational issues. Additionally, these operational meetings include a segment of time dedicated to the oversight of the MI Health Account contactor. MDHHS and the health plans receive regular updates regarding MI Health Account activity and functionality. The following policies with Healthy Michigan Plan impact were issued by MDHHS during the quarter covered by this report:

**Table 6: Medicaid Policy Bulletins and Letters with Healthy Michigan Plan Impact**

Issue Date	Subject	Link
08/24/2018	Rate Update for Neonatal and Pediatric Critical Care and Intensive Care Services	<a href="#">MSA 18-26</a>
08/31/2018	Inpatient Long-Acting Reversible Contraception (LARC) Reimbursement	<a href="#">MSA 18-22</a>
08/31/2018	Opioid Health Home Pilot Program	<a href="#">MSA 18-27</a>
08/31/2018	Enrollment and Reimbursement Changes for Occupational Therapists, Physical Therapists, Speech-Language Pathologists, and Audiologists; New Medicaid Provider Manual Therapy Services Chapter; Revised Therapy Prior Authorization Form (MSA-115); Therapy Service Modifier Update	<a href="#">MSA 18-29</a>
08/31/2018	Labor for Repairs to Manual and Power Wheelchairs and Power Operated Vehicles (POVs)	<a href="#">MSA 18-30</a>
08/31/2018	Update to the Coverage of Physician Assistant Services	<a href="#">MSA 18-31</a>
08/31/2018	Updates to the Medicaid Provider Manual; Clarification to Bulletin MSA 17-21; Code Updates	<a href="#">MSA 18-32</a>
08/31/2018	Copayment Exemption for Drugs to Treat Mental Health Conditions and Substance Use Disorders	<a href="#">MSA 18-35</a>

## Financial/Budget Neutrality Development Issues

Healthy Michigan Plan expenditures for all plan eligible groups are included in the budget neutrality monitoring table below as reported in the CMS Medicaid and Children's Health Insurance Program Budget and Expenditure System. Expenditures include those that both occurred and were paid in the same quarter in addition to adjustments to expenditures paid in quarters after the quarter of service. The State will continue to update data for each demonstration quarter as it becomes available.

**Table 7: Healthy Michigan Plan Budget Neutrality Monitoring Table**

	Approved HMP PMPM	Actual HMP PMPM (YTD)	Total Expenditures (YTD)	Total Member Months (YTD)
DY 5 - PMPM	\$667.36	\$477.84	\$1,784,823,104.00	3,735,156
DY 6 - PMPM	\$602.21	\$475.68	\$3,457,285,998.00	7,268,145
DY 7 - PMPM	\$569.80	\$499.73	\$3,878,248,111.00	7,760,691
DY 8 - PMPM	\$598.86	\$470.75	\$3,922,597,629.00	8,332,603
DY 9 - PMPM	\$629.40	\$421.89	\$2,670,537,185.00	6,329,969

## Beneficiary Month Reporting

The beneficiary counts below include information for each of the designated months during the quarter, and include retroactive eligibility through September 30, 2018.

**Table 8: Healthy Michigan Plan Beneficiary Month Reporting**

Eligibility Group	July 2018	August 2018	September 2018	Total for Quarter Ending 09/18
Healthy Michigan Adults	696,140	692,588	690,154	2,078,882



## Consumer Issues

This quarter, the total number of Healthy Michigan Plan complaints reported to MDHHS was 55. Complaints reported to MDHHS are detailed by category in the table below. Overall, with over 2 million member months during the quarter, MDHHS is encouraged by its low rate of contacts related to Healthy Michigan Plan complaints. MDHHS will continue to monitor calls to the Beneficiary Helpline to identify issues and improve member experiences.

**Table 9: Healthy Michigan Plan Complaints Reported to MDHHS**

**July 2018 – September 2018**

	Obtaining Prescriptions	Other Covered Services	Transportation	Total
Count	41	8	6	55
Percent	75%	15%	10%	

## Quality Assurance/Monitoring Activity

MDHHS completes Performance Monitoring Reports (PMR) specific to the Medicaid Health Plans that are licensed and approved to provide coverage to Michigan's Medicaid beneficiaries. These reports are based on data submitted by the health plans. Information specific to the Healthy Michigan Plan are included in these reports. The measures for the Healthy Michigan Plan population mirrors those used for the traditional Medicaid population. MDHHS continues to collect data and assist health plans with deliverables for the purpose of PMR completion. The most recently published Bureau of Medicaid Program Operations & Quality Assurance quarterly PMR with Healthy Michigan Plan specific measures is included as an enclosure.

## Managed Care Reporting Requirements

MDHHS has established a variety of reporting requirements for the Medicaid Health Plans, many of which are compiled, analyzed and shared with the plans in the PMRs described in the Quality Assurance/Monitoring Activity section of this report. MDHHS and the Medicaid Health Plans continue to monitor MI Health Account call center and payment activity.

The MI Health Account Call Center handles questions regarding the MI Health Account welcome letters and MI Health Account quarterly statements. MDHHS' Beneficiary Help Line number is listed on all MI Health Account letters. Staff are cross trained to provide assistance on a variety of topics. Commonly asked questions by callers contacting the MI Health Account Call Center relate to general MI Health Account information and payment amounts. Members calling regarding the quarterly statements have asked about amounts owed, requested clarification on the contents of the statement, and reported an inability to pay amounts owed. During this quarter, Healthy Michigan Plan members continued making payments for contributions and copays to the MI Health Account. The September 2018 MI Health Account Executive Summary Report is included as an attachment to this report.

MDHHS has refined the Managed Care Organization grievance and appeal reporting process to collect Healthy Michigan Plan specific data. Grievances are defined in the MDHHS Medicaid Health Plan Grievance/Appeal Summary Reports as an expression of dissatisfaction about any

matter other than an action subject to appeal. Appeals are defined as a request for review of the Health Plan’s decision that results in any of the following actions:

- The denial or limited authorization of a requested service, including the type or level of service;
- The reduction, suspension, or termination of a previously authorized service;
- The denial, in whole or in part, of a payment for a properly authorized and covered service;
- The failure to provide services in a timely manner, as defined by the State; or
- The failure of the Health Plan to act within the established timeframes for grievance and appeal disposition.

From July 2018 to September 2018, there were 285 total appeals among all the Medicaid Health Plans. Medicaid Health Plan decisions were upheld in 38% percent of the appeals. From July 2018 to September 2018 there were a total of 1,626 grievances. The greatest number of grievances came from the access category. Access grievances can include a primary care physician not accepting new patients, limited specialist availability, the refusal of a primary care physician to complete a referral or write a prescription, a lack of services provided by the primary care physician, long wait times for appointments and denied services. Grievances related to quality of care pertain to the level of care issues experienced by beneficiaries. Administrative/Service grievances can range from issues with claims, enrollment, eligibility, out-of-network providers and benefits not covered. Issues reported under the Billing category pertain to billing issues. Transportation grievances relate to issues with the transportation benefit and often mirror the complaints members directly reported to MDHHS. MDHHS will continue to monitor the Medicaid Health Plans Grievance/Appeal Summary Reports to ensure levels of grievances remain low and resolution of grievances is completed in a timely manner. MDHHS has included grievance and appeals data reported by the Medicaid Health Plans from this quarter in the following tables:

<b>Table 10: Managed Care Organization Appeals</b>				
<b>July 2018 – September 2018</b>				
	Decision Upheld	Overtured	Undetermined/ Withdrawn	Total
Count	108	168	9	285
Percent	38%	59%	3%	

<b>Table 11: Managed Care Organization Grievances</b>		
<b>July 2018 – September 2018</b>		
Category	Count	Percent
Access	770	47%
Transportation	353	22%
Administrative/Service	300	18%
Billing	153	9%
Quality of Care	50	3%
Total	1,626	

## Lessons Learned

MDHHS continues to learn from the experience of launching a program the size and scope of the Healthy Michigan Plan. This quarter, MDHHS faced the challenge of submitting its demonstration waiver extension application amendment. Collaboration continued to be a key element to the demonstration's success as MDHHS worked with stakeholders to submit a comprehensive document. Working as a team made it possible to meet the objectives of Michigan's State law, Public Act 208 of 2018, in a short period of time. During the 30-day public comment process of the demonstration extension application amendment MDHHS received over 1,000 comments from organizations and individuals. MDHHS staff worked diligently to review, incorporate, and summarize all submitted comments. Stakeholder input continues to be valuable to implementing program changes. MDHHS will continue accept stakeholder input to achieve the best possible outcomes for Healthy Michigan Plan members.

## Demonstration Evaluation

MDHHS has commissioned the University of Michigan's Institute for Healthcare Policy and Innovation (IHPI) to serve as the Healthy Michigan Plan independent evaluator. The IHPI has developed a comprehensive plan to address the needs of the State and CMS. Demonstration evaluation activities for the Healthy Michigan Plan are utilizing an interdisciplinary team of researchers from the IHPI. The activities of the evaluation will carry in seven domains over the course of the five year evaluation period:

Demonstration evaluation activities for the Healthy Michigan Plan are utilizing an interdisciplinary team of researchers from the IHPI. The activities of the evaluation will be carried out in seven domains over the course of the 5-year evaluation period:

- I. An analysis of the impact the Healthy Michigan Plan on uncompensated care costs borne by Michigan hospitals;
- II. An analysis of the effect of Healthy Michigan Plan on the number of uninsured in Michigan;
- III. The impact of Healthy Michigan Plan on increasing healthy behaviors and improving health outcomes;
- IV. The viewpoints of beneficiaries and providers of the impact of Healthy Michigan Plan;
- V. The impact of Healthy Michigan Plan's contribution requirements on beneficiary utilization; and,
- VI. The impact of the MI Health Accounts on beneficiary healthcare utilization.

Below is a summary of the key activities for the Fiscal Year (FY) 2018 fourth quarterly report:

### Domain I

Domain I examines the impact of reducing the number of uninsured individuals on uncompensated care costs to hospitals in Michigan through Medicaid expansion. IHPI has engaged in activities to find and compare baseline uncompensated care results from hospital cost reports and the Internal Revenue Service (IRS) filings to understand the distribution of uncompensated care in Michigan. This quarter, IHPI continued to prepare updates to baseline, 2014, 2015 and 2015 results with 2016 data from hospital and cost reports and Internal Revenue Service filings from Michigan and other states. By December 2018, IHPI expects to have more than a full year of post-implementation data for all hospitals in Michigan and up to two years of post-implementation data for some other states. IHPI carried on creating an

uncompensated report to present a summary of findings on multiyear data on uncompensated care in Michigan and some other states for MDHHS review.

### **Domain II**

Domain II evaluates the insured/uninsured rates, in general and more specifically by select population groups (e.g., income levels, geographic areas, age, gender, and race/ethnicity). This quarter, IHPI continued to analyze data from Michigan and other selected states from two U.S. Census Bureau Surveys (American Community and the Current Population Surveys) to compare trends in uninsurance rates across time, within the state and across states. IHPI is awaiting the release of microdata for 2017 from the American Community Survey on October 18, 2018, after which they will update the analyses with the 2017 data.

### **Domain III**

Domain III assesses healthy behaviors, utilization and health outcomes for individuals enrolled in the Healthy Michigan Plan. This quarter, IHPI continued to calculate measures on emergency department utilization, healthy behaviors/preventive health services, and hospital admissions for final year of the demonstration project. IHPI continued to utilize the data warehouse to generate monthly samples of current enrollees of the Healthy Michigan Voices (HMV) Cohort 2 survey, and to update enrollment information for the HMV Cohort 1 Follow-up 2 survey. IHPI extracted and processed administrative data to produce an extensive array of measures to support the HMV Cohort 1 Follow-up 1 survey analysis. In this effort, IHPI strived for consistency of definitions with other elements of the evaluation. IHPI continued to monitor backfill of administrative data to update the data that will populate the revised Domain III report. As of September 24, 2018, it appears that the backfill has not been completed. As such, IHPI plan to refresh the data in October 2018 and update the Domain III report measures.

### **Domain IV**

Domain IV examines beneficiary and provider viewpoints of the Healthy Michigan Plan through survey data. IHPI carried on with conducting analyses on the remaining 2016 HMV subgroups and multivariate analyses. IHPI continued to focus on the analyses of the 2017 survey data and longitudinal analyses. IHPI continued to conduct analyses of the Eligible But Unenrolled (EBU) interviews, IHPI recruited and completed 15 interviews for the 2018 Eligible But Unenrolled report, and transcription and coding of those interviews are underway.

2017 HMV survey data and longitudinal analyses of the 2016 and 2017 HMV survey data for the 2017 HMV survey reports. IHPI completed the analyses of the for the 2017 New Enrollee survey and a report will be submitted to MDHHS for review, in early October 2018. Analyses and report preparation were in progress for the 2017 Current Enrollee Cohort 1 Follow-Up 1 survey which will include analyses using claims data and 2016 survey data for longitudinal analyses. IHPI prepared for and fielded the 2018 HMV surveys. Data collection continued for the following groups HMV Cohort 2 (1,816 complete as of September 20, 2018); HMV Cohort 1 Follow-Up 2 (1,497 complete as of September 20, 2018).

### **Domains V/VI**

Domains V and VI entail analyzing data to assess the impacts of contribution requirements and the MI Health Account statements on beneficiary utilization of health care services, respectively. This quarter, MDHHS approved the Domain /VI report in late July 2018 and the report was posted on the MDHHS website in mid-August 2018.

## **Domains VII**

Domain VII will evaluate the cost effectiveness of the HMP Marketplace Option (Marketplace Option). This quarter, IHPI participated in monthly calls with MDHHS to stay updated on the status of the Healthy Michigan Waiver Extension Amendment and new evaluation components.

## **Enclosures/Attachments**

1. August 2018 MCAC Minutes
2. October 2018 Performance Monitoring Report
3. October 2018 Performance Monitoring Report: Dental
4. September 2018 MI Health Account Report

## **State Contacts**

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

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## **Date Submitted to CMS**

December 19, 2018



Michigan Department of Health and Human Services  
Medical Services Administration

**Medical Care Advisory Council**

Meeting Minutes

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**Date:** Wednesday, August 8, 2018

**Time:** 1:00 p.m. – 4:30 p.m.

**Where:** Michigan Public Health Institute (MPHI)  
2436 Woodlake Circle, Suite 380  
Okemos, MI 48864

**Attendees:** **Council Members:** Emily Schwarzkopf, Dominick Pallone, Rod Auton, Elmer Cerano, Mark Klammer, Robert Sheehan, Amy Zaagman, April Stopzcynski, Mario Azzi, Rebecca Blake, Karlene Ketola, Jim Milanowski, Lisa Dedden Cooper, David Herbel, Debra Brinson, William Mayer, Marilyn Litka-Klein

**Staff:** Kathy Stiffler, Lynda Zeller, Erin Emerson, Brian Keisling, Jackie Prokop, Craig Boyce, Leslie Asman, Mary Beth Kern-Collins, Marie LaPres, Dave Schneider, Phil Kurdunowicz

**Other Attendees:** Salli Pung, Dan Wojciak, Joe Pawluszka, Kellie Bidelman

**Welcome, Introductions, Announcements**

Emily Schwarzkopf opened the meeting and introductions were made.

**Healthy Michigan Plan**

**Public Act 208 of 2018**

Kathy Stiffler provided an overview of Public Act 208 of 2018, which directs the Michigan Department of Health and Human Services (MDHHS) to (1) make changes to the Healthy Michigan Plan for beneficiaries who have been enrolled in the program for 48 cumulative months and have incomes above 100% of the Federal Poverty Level (FPL), and also (2) implement workforce engagement requirements for non-exempt beneficiaries. To implement these changes, MDHHS is working to submit an amendment to its Section 1115 Demonstration Waiver extension application for the Healthy Michigan Plan. The waiver application amendment is currently posted for public comment at [www.michigan.gov/healthymichiganplan](http://www.michigan.gov/healthymichiganplan), and Ms. Stiffler noted that while the formal public comment period officially ends on August 12, 2018, interested parties may continue to submit comments after that date. MDHHS will take comments submitted after August 12 into consideration for future changes to the Healthy Michigan Plan. In addition, public hearings were held to discuss the amendment on July 31, 2018 and August 1, 2018. The waiver application amendment must be submitted to the Centers for Medicare & Medicaid Services (CMS) by October 1, 2018 per the State statute, but the State plans to submit early.

## Medical Care Advisory Council

Meeting Minutes

August 8, 2018

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### Cumulative 48 months of coverage and over 100% of the federal poverty level (FPL)

PA 208 of 2018 requires that beneficiaries who have been enrolled in the Healthy Michigan Plan for 48 cumulative months and have incomes above 100% of the FPL must engage in a healthy behavior **and** contribute a 5% premium as a condition of continued coverage. Participation in a healthy behavior will no longer result in a reduction in premium obligations, but co-payments will no longer apply, as beneficiaries may not exceed 5% of their income toward total cost-sharing. The targeted implementation date of this change is July 1, 2019.

### Rescinds Marketplace Option

PA 208 of 2018 also rescinds the Marketplace Option for Healthy Michigan Plan for beneficiaries who choose not to engage in a healthy behavior. In February 2018, MDHHS notified approximately 15,000 beneficiaries who failed to complete a healthy behavior that they were at risk of transitioning to the Marketplace. At that time, approximately half of those individuals completed a Health Risk Assessment and chose to engage in a healthy behavior. MDHHS has since notified all individuals in this group that the Marketplace Option has been rescinded.

### Workforce Engagement Requirements

In addition to the 48 month cumulative enrollment changes and rescinding the Marketplace Option, PA 208 of 2018 requires MDHHS to implement workforce engagement requirements for all beneficiaries ages 19 to 62 as a condition of continued enrollment in the Healthy Michigan Plan. The legislation outlines 10 qualifying events under which individuals can meet workforce engagement requirements, as well as 12 exemption criteria, which were discussed in detail at the previous Medical Care Advisory Council (MCAC) meeting on June 18, 2018. Kathy Stiffler indicated that approximately 400,000 Healthy Michigan Plan beneficiaries may be impacted by the workforce engagement requirements, as this is the number of beneficiaries between the ages of 19-62 who have been identified as not meeting the requirements of current Supplemental Nutritional Assistance Program (SNAP) and Temporary Assistance for Needy Families (TANF) program workforce engagement requirements. This figure includes individuals who may meet exemption criteria, as some exemptions may require continued attestation.

MDHHS plans to begin the process of communicating the workforce engagement requirements with beneficiaries following approval of the waiver amendment by CMS. In response to an inquiry, Ms. Stiffler indicated that it is unknown at this time how many beneficiaries could potentially lose coverage as a result of the implementation of these requirements. MDHHS is also monitoring the implementation process for similar workforce engagement requirements in other states. MDHHS staff and meeting attendees discussed this issue at length, including details related to the exemption criteria and the implications of the federal court decision on Kentucky's waiver on the potential approval of workforce engagement requirements for other states. Meeting attendees also recommended that the state consider allocating resources for job training, transportation and child care for Healthy Michigan Plan beneficiaries to meet the workforce engagement requirements, and Emily Schwarzkopf offered to draft a letter on behalf of the MCAC to MDHHS leadership and the legislature to request these changes.



## **Medical Care Advisory Council**

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### **Healthy Michigan Waiver Renewal Update – Amendment**

#### Public Hearings

Jackie Prokop provided an overview of some of the comments that were shared at the public hearings held on July 31, 2018 and August 1, 2018. Most comments shared at the hearings reflected concern related to the workforce engagement requirements for Healthy Michigan Plan beneficiaries. Many commenters also requested information on exemption criteria and requested clarity on the criteria for an individual to be designated as “medically frail.” As a result of the feedback received at the hearings, MDHHS staff plan to meet to discuss the possible addition of certain diagnosis codes under which an individual may be deemed “medically frail.”

#### Impact if waiver extension amendment is not approved

As currently directed by PA 208 of 2018, the Healthy Michigan Plan must end if the Section 1115 Waiver Extension Amendment is not approved by CMS within a year of submission, though MDHHS staff indicated that members of the legislature have expressed a willingness to re-examine the legislation if this occurs.

#### Behavioral Health Updates

Lynda Zeller shared the following updates related to recent activities of the Behavioral Health and Developmental Disabilities Administration (BHDDA):

- MDHHS is working to implement an Opioid Health Home pilot program in Michigan’s Prepaid Inpatient Health Plan (PIHP) Region 2.
- The department is continuing efforts to increase beneficiary access to state psychiatric hospitals. The state convened the Michigan Inpatient Psychiatric Admissions Discussion (MIPAD) workgroup to discuss this issue, and it has now become a nationwide initiative coordinated by the National Association of State Mental Health Program Directors (NASMHPD) known as Beyond Beds. MDHHS staff and meeting attendees discussed this issue at length.

#### **Section 298 update**

A leadership group consisting of the Executive Directors of the four Community Mental Health Services Programs (CMHSP) as well as the CEOs of the seven partnering MHPs involved in the Section 298 initiative for the integration of physical health and behavioral health services has been meeting to discuss a financial model and managed care models for the pilot programs. In addition, several sub-groups have been formed to discuss various components of the pilot models, including technology needs, policy updates, reporting, and finance. MDHHS is also working with a team to evaluate the pilot models in order to move forward with the demonstration project, as well as moving forward with implementing the 76 policy recommendations contained in the final report that was submitted to the legislature in 2017. Additional information about this process is also available on the MDHHS website at [www.michigan.gov/stakeholder298](http://www.michigan.gov/stakeholder298).

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### **Pharmacy Benefits Manager**

MDHHS is in the process of reviewing bids for a new pharmacy benefits manager contract, which is currently held by Magellan. The department expects to announce the contract award winner in the near future. In response to an inquiry, Kathy Stiffler indicated that MDHHS does not currently require MHPs to return supplemental rebates that they receive to the State and will require the MHPs to deny pharmacy claims for non-enrolled providers. The department has no plans at this time to require MHPs to follow the State's formulary for prescription drugs. MDHHS continues to seek public comment on the current Medicaid Health Plan common formulary once per quarter and make changes based on stakeholder input.

### **Non-emergency Medical Transportation (NEMT)**

MDHHS also plans to submit a Request for Proposal (RFP) by October 1, 2018 for a new NEMT contractor to serve Medicaid Fee-for-Service (FFS) beneficiaries in Wayne, Oakland and Macomb counties. The new contract will take effect April 1, 2019. The current contract is held by Logisticare.

### **Provider Enrollment Requirements**

MDHHS currently requires providers billing Medicaid FFS to be enrolled with Medicaid to receive reimbursement for services. This requirement is not in place for MHPs at this time, but MDHHS will require the MHPs to begin denying claims from non-enrolled providers beginning January 1, 2019. MDHHS will also begin denying pharmacy claims from non-enrolled providers billing through Medicaid FFS and MHPs beginning July 1, 2019. In response to an inquiry regarding whether atypical providers will be required to enroll with Medicaid to receive payment for services, MDHHS staff indicated that discussions have taken place on this issue, but no date for implementation has been set.

### **Policy Updates**

A policy bulletin handout was distributed to attendees and the following updates were discussed:

- Bulletin MSA 18-24 – Reinstatement of Adult Hearing Aid Coverage; Update to Disposable Hearing Aid Batteries and Replacement Earmold Coverage
- Bulletin MSA 18-21 – Timely Hearing Requests
- Proposed Policy 1825-HKD – New Dental Health Plan Choice for Healthy Kids Dental Beneficiaries
- Proposed Policy 1822-Pharmacy – Copayment Exemption for Drugs to Treat Mental Health Conditions and Substance Use Disorders
- Proposed Policy 1821-Lab - Ordering of Genetic Laboratory Services by Physician Assistants (PAs), Registered Nurse Practitioners (NPs), and Certified Nurse Midwives (CNMs)

The meeting was adjourned at 3:00 p.m.

Medical Services Administration  
Bureau of Medicaid Care Management and Quality Assurance

***PERFORMANCE MONITORING REPORT***

**Composite – All Plans**



**October 2018**

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

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## Performance Monitoring Report

### 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 twenty-eight (28) 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 Medicaid Managed Care specific measures, Healthy Michigan Plan (HMP) measures, and HEDIS measures. **This report focuses only on the Healthy Michigan Plan (HMP) measures.** The following HMP measures will be included in this report:

<b>Healthy Michigan Plan</b>		
<i>Adults' Generic Drug Utilization</i>	<i>Timely Completion of Initial HRA</i>	<i>Completion of Annual HRA</i>
<i>Outreach &amp; Engagement to Facilitate Entry to PCP</i>	<i>Adults' Access to Ambulatory Health Services</i>	<i>Transition into Consistently Fail to Pay (CFP) Status</i>
<i>Transition out of Consistently Fail to Pay (CFP) Status</i>		

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 2018 unless otherwise noted.

**Table 1: Fiscal Year 2018<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	10/11	10/11	9/11	10/11
Timely Completion of Initial HRA	5/9	4/9	4/9	6/10
Completion of Annual HRA	N/A	N/A	N/A	N/A
Outreach & Engagement to Facilitate Entry to PCP	7/11	6/11	7/11	6/11
Adults' Access to Ambulatory Health Services	0/11	0/11	0/11	10/11
Transition into CFP Status	N/A	N/A	N/A	N/A
Transition out of CFP Status	N/A	N/A	N/A	N/A

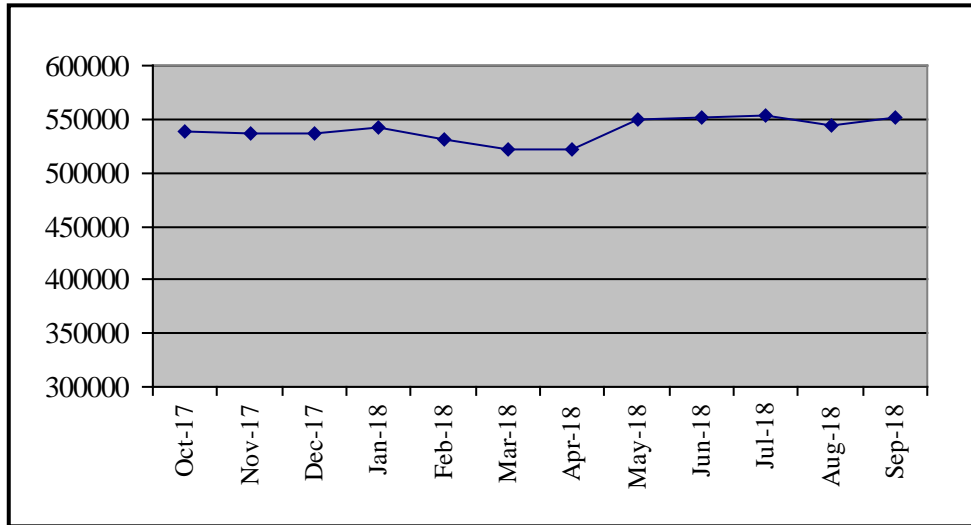
<sup>1</sup> N/A will be shown for measures where the standard is Informational Only.

## Healthy Michigan Plan Enrollment

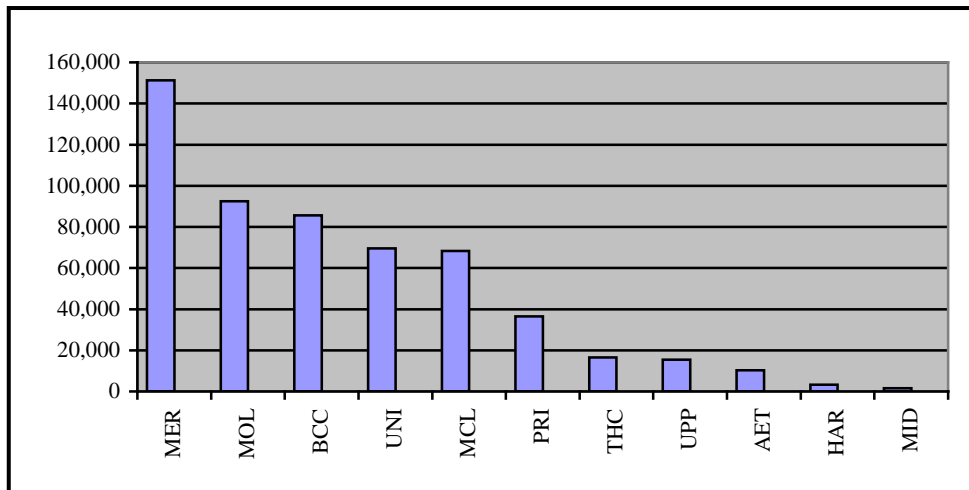
The Healthy Michigan Plan (HMP-MC) enrollment has remained steady over the past year. In September 2018, enrollment was 550,819, up 11,640 enrollees (2.16%) from October 2017. An increase of 6,574 enrollees (1.21%) was realized between August 2018 and September 2018.

Bereavement

**Figure 1: HMP-MC Enrollment, October 2017 – September 2018**



**Figure 2: HMP-MC Enrollment by Medicaid Health Plan, September 2018**



## **Medicaid Health Plan News**

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

Results for the Transition into Consistently Fail to Pay Status, Transition out of Consistently Fail to Pay Status and the Completion of Annual Health Risk Assessment measures will be reported as “Informational Only” until a standard has been set.

Due to a change in methodology the Plan All-Cause Acute 30-Day Readmission measure has been taken out of this report and will be put into a separate PMR.

## **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**

At or above 84% (as shown on bar graph below)

**Measurement Period**

January 2018 –March 2018

**Data Source**

MDHHS Data Warehouse

**Measurement Frequency**

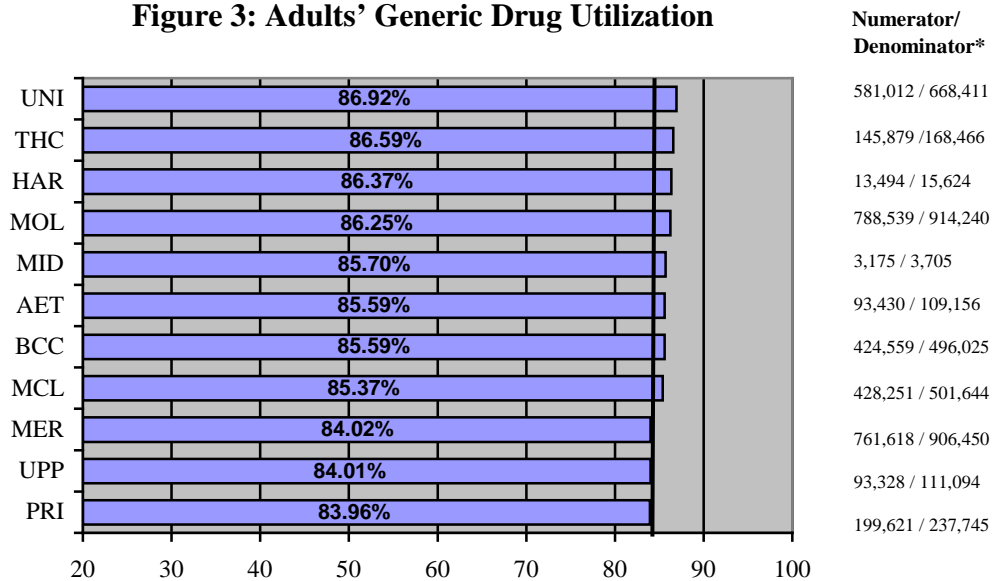
Quarterly

**Summary:** Ten plans met or exceeded the standard, while one plan (PRI) did not. Results ranged from 83.96% to 86.92%.

**Table 2: Comparison across Medicaid Programs**

Medicaid Program	Numerator	Denominator	Percentage
Michigan Medicaid All	3,598,377	4,246,838	84.73%
Fee For Service (FFS) only	23,287	60,730	38.35%
Managed Care only	3,550,673	4,154,320	85.47%
MA-MC	1,820,124	2,136,737	85.18%
HMP-MC	1,705,241	1,988,189	85.77%

**Figure 3: Adults' Generic Drug Utilization**



Adult's Generic Drug Utilization Percentages

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



**Timely Completion of Initial Health Risk Assessment (HRA)**

**Measure**

The percentage of Healthy Michigan Plan beneficiaries enrolled in a health plan who had a Health Risk Assessment (HRA) completed within 150 days of enrollment in a health plan.

**Standard**

At or above 9% (as shown on bar graph below)

**Enrollment Dates**

October 2017 – December 2017

**Data Source**

MDHHS Data Warehouse

**Measurement Frequency**

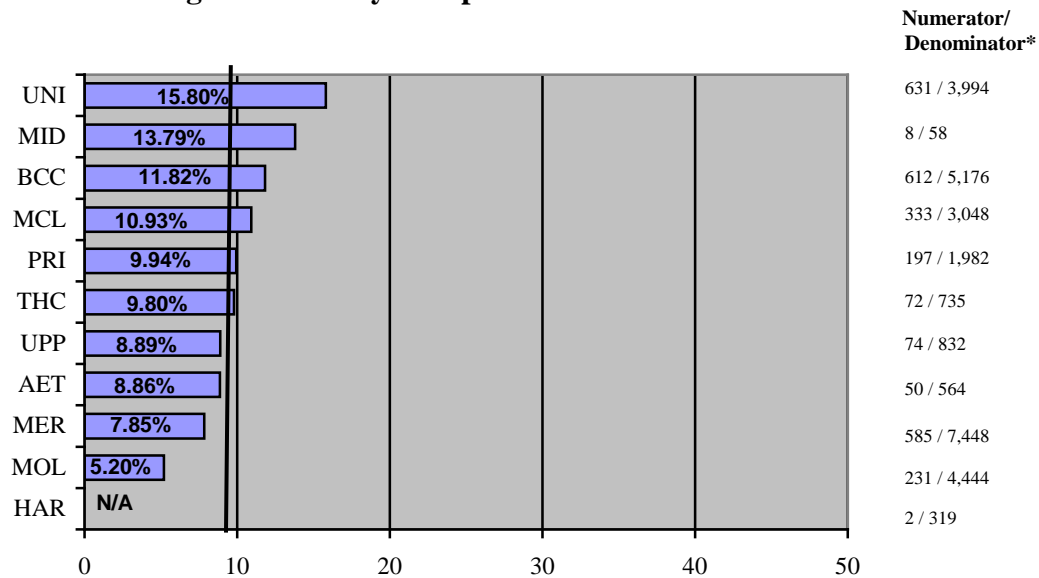
Quarterly

**Summary:** Six plans met or exceeded the standard, while four plans (AET, MER, MOL, and UPP) did not. Results ranged from 5.20% to 15.80%.

**Table 3: Program Total<sup>2</sup>**

Medicaid Program	Numerator	Denominator	Percentage
HMP-MC	2,795	28,600	9.77%

**Figure 4: Timely Completion of Initial HRA<sup>3</sup>**



**Timely Completion of Initial HRA Percentages**

\*Numerator depicts the number of eligible beneficiaries who completed an HRA within 150 days of enrollment in a health plan. Denominator depicts the total number of eligible beneficiaries.

<sup>2</sup> This includes HRAs completed during the HMP FFS period prior to enrollment in a Medicaid health plan.

<sup>3</sup> A rate was not calculated for plans with a numerator under 5 or a denominator under 30.

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

**Measure**

The percentage of new Healthy Michigan Plan beneficiaries enrolled in a health plan who had a second Health Risk Assessment (HRA) completed within one year (defined as 11-15 months) of their first HRA.

**Standard**

N/A – Informational Only

**First Attestation Dates**

April 2016 – March 2017

**Second Attestation Dates**

March 2017 – June 2018

**Data Source**

MDHHS Data Warehouse

**Measurement Frequency**

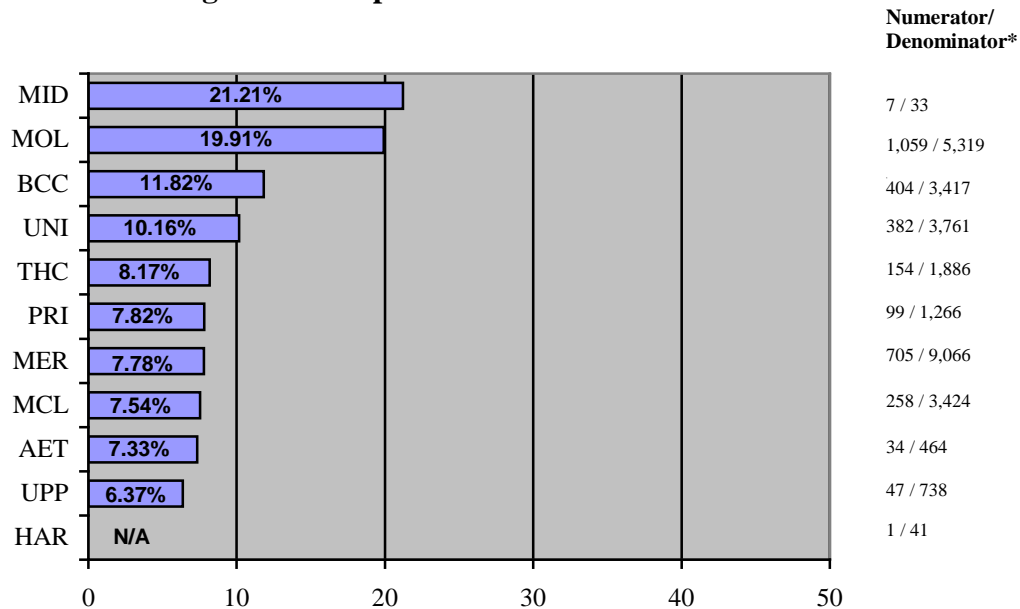
Quarterly

**Summary:** *Data for this measure will not be reported this year.*

**Table 4: Program Total**

Medicaid Program	Numerator	Denominator	Percentage
HMP-MC	3,198	30,814	10.38%

**Figure 5: Completion of Annual HRA<sup>4</sup>**



Completion of Annual HRA Percentages

\*Numerator depicts the number of eligible beneficiaries who completed a second HRA within one year (defined as 11-15 months) of their first HRA. Denominator depicts the total number of eligible beneficiaries.

<sup>4</sup> A rate was not calculated for plans with a numerator under 5 or a denominator under 30.

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

**Measure**

The percentage of Healthy Michigan Plan health plan enrollees 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**

At or above 50% (as shown on bar graph below)

**Enrollment Dates**

October 2017 – December 2017

**Data Source**

MDHHS Data Warehouse

**Measurement Frequency**

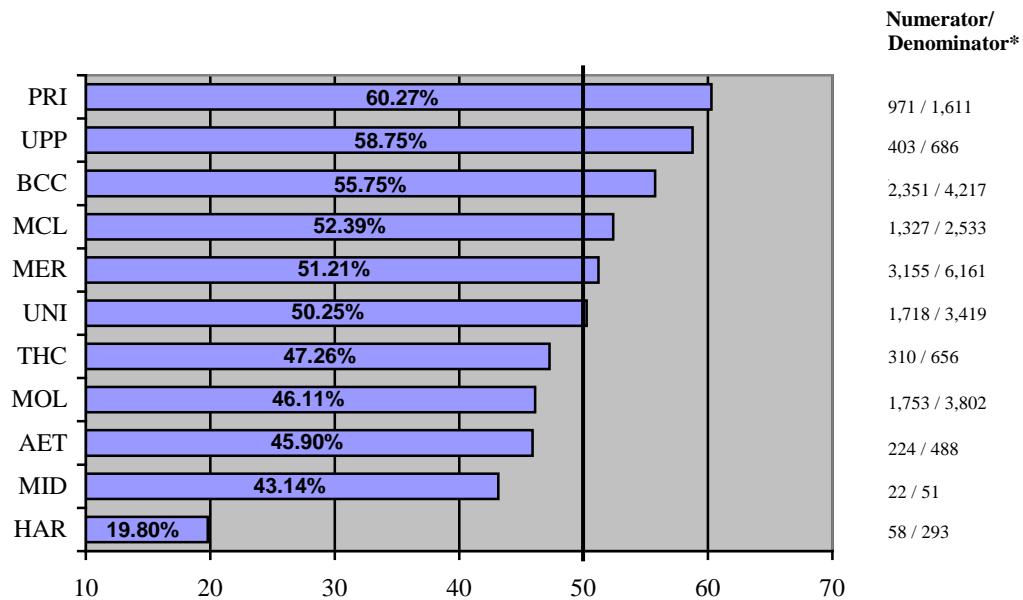
Quarterly

**Summary:** Six plans met or exceeded the standard, while five plans (AET, HAR, MID, MOL, and THC) did not. Results ranged from 19.80% to 60.27%.

**Table 5: Program Total<sup>5</sup>**

Medicaid Program	Numerator	Denominator	Percentage
HMP-MC	16,975	28,600	59.35%

**Figure 6: Outreach & Engagement to Facilitate Entry to Primary Care**



**Outreach & Engagement to Facilitate Entry to Primary Care Percentages**

\*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>5</sup> This includes visits during the HMP FFS period prior to enrollment in a Medicaid health plan.

**Adults' Access to Ambulatory Health Services**

**Measure**

The percentage of adults 19 to 64 years old who had an ambulatory or preventive care visit during the measurement period.

**Standard**

At or above 83% (as shown on bar graph below)

**Measurement Period**

April 2017 – March 2018

**Data Source**

MDHHS Data Warehouse

**Measurement Frequency**

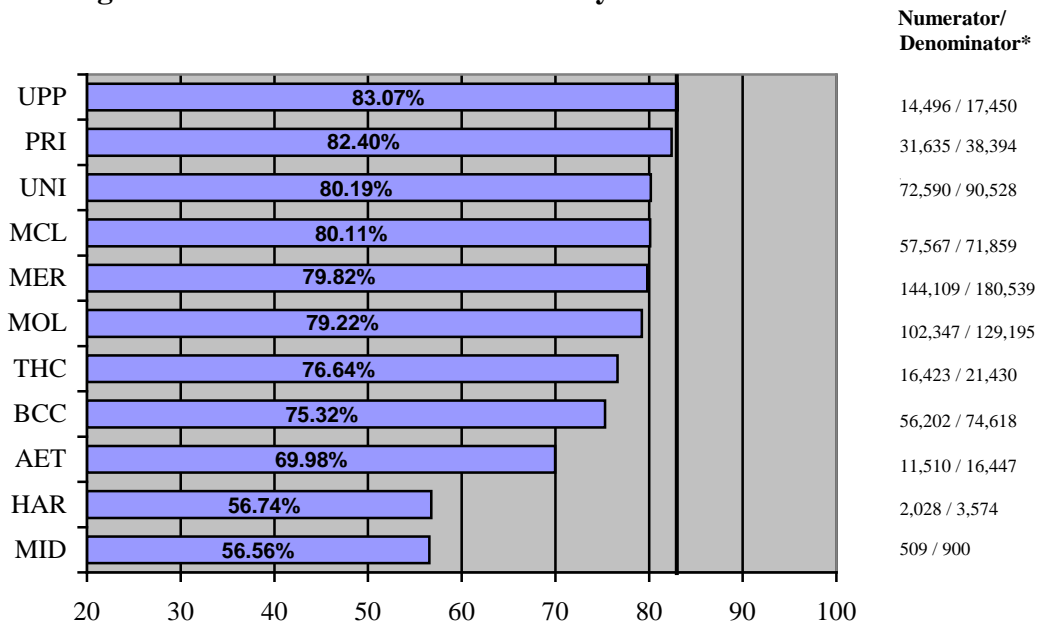
Quarterly

**Summary:** One plan met or exceeded the standard, while 10 plans (AET, BCC, HAR, MCL, MER, MID, MOL, PRI, THC, and UNI) did not. Results ranged from 56.56% to 83.07%.

**Table 6: Comparison across Medicaid Programs**

Medicaid Program	Numerator	Denominator	Percentage
Michigan Medicaid All	620,257	796,799	77.84%
Fee For Service (FFS) only	11,761	24,131	48.74%
Managed Care only	520,724	657,650	79.18%
MA-MC	227,785	277,097	82.20%
HMP-MC	243,899	321,630	75.83%

**Figure 7: Adults' Access to Ambulatory Health Services**



Adult's Access to Ambulatory Health Services Percentages

\*Numerator depicts the number of eligible beneficiaries who had an ambulatory or preventive care visit. Denominator depicts the total number of eligible beneficiaries.

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

**Measure**

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

**Standard**

N/A – Informational Only

**Measurement Period**

August 2017 –September 2018

**Data Source**

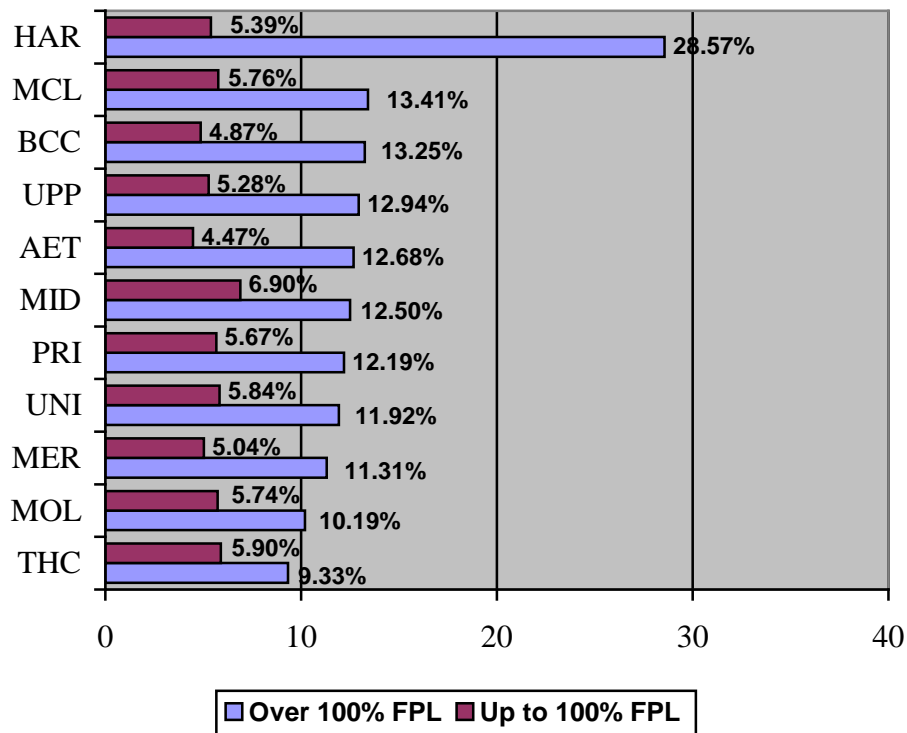
MDHHS Data Warehouse

**Measurement Frequency**

Quarterly

**Summary:** The results shown are informational only. In Cohort 1, the results ranged from 9.33% to 28.57% for beneficiaries with income over 100% FPL. The results ranged from 4.47% to 6.90% for beneficiaries with income that never exceeded 100% FPL. In Cohort 2, the results ranged from 7.55% to 36.36% for beneficiaries with income over 100% FPL. The results ranged from 4.75% to 12.50% for beneficiaries with income that never exceeded 100% FPL. In Cohort 3, the results ranged from 9.09% to 25.00% for beneficiaries with income over 100% FPL. The results ranged from 3.64% to 25.00% for beneficiaries with income that never exceeded 100% FPL.

**Figure 8: Transition into CFP Status - Cohort 1**

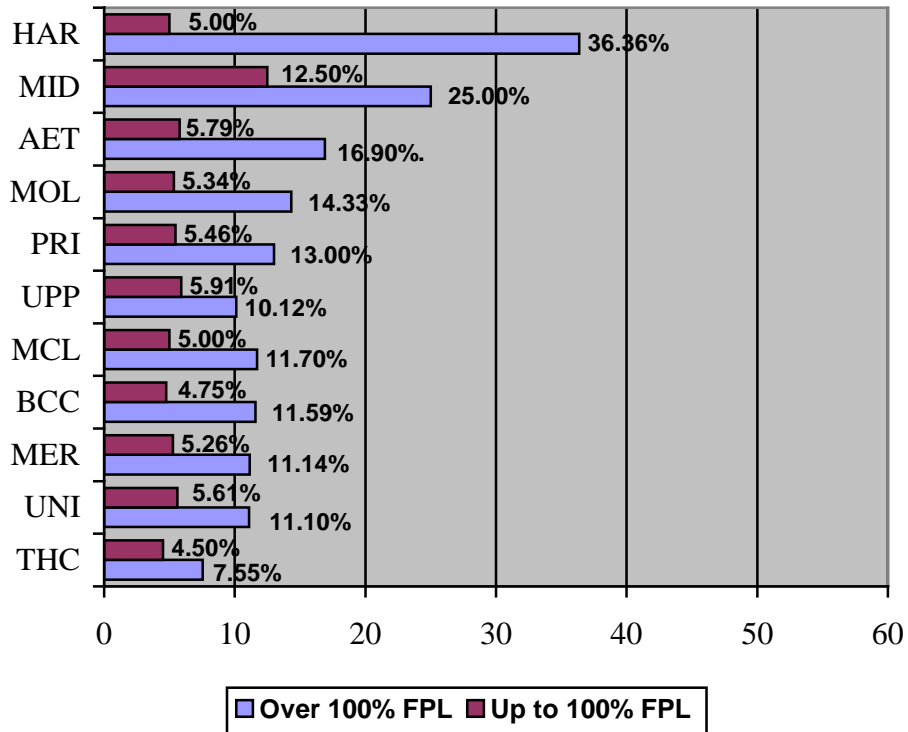


Transition in to CFP Status Percentages

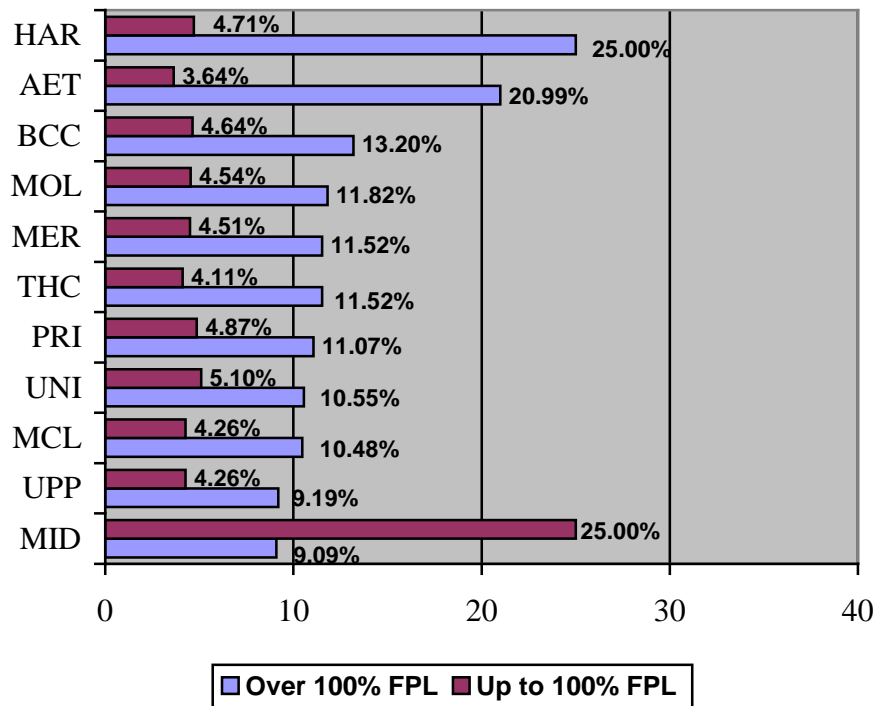
\*In the graphs represented for this measure, FPL represents the Federal Poverty Level.

Performance Monitoring Report

**Figure 9: Transition into CFP Status - Cohort 2**



**Figure 10: Transition into CFP Status - Cohort 3**



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

**Measure**

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

**Standard**

N/A – Informational Only

**Measurement Period**

August 2017 – September 2018

**Data Source**

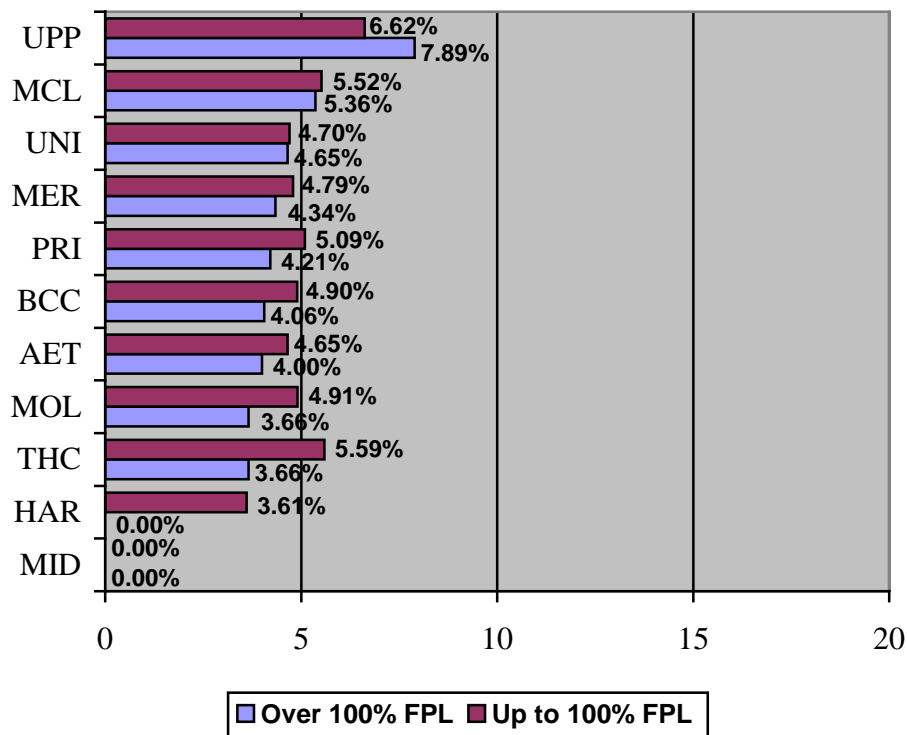
MDHHS Data Warehouse

**Measurement Frequency**

Quarterly

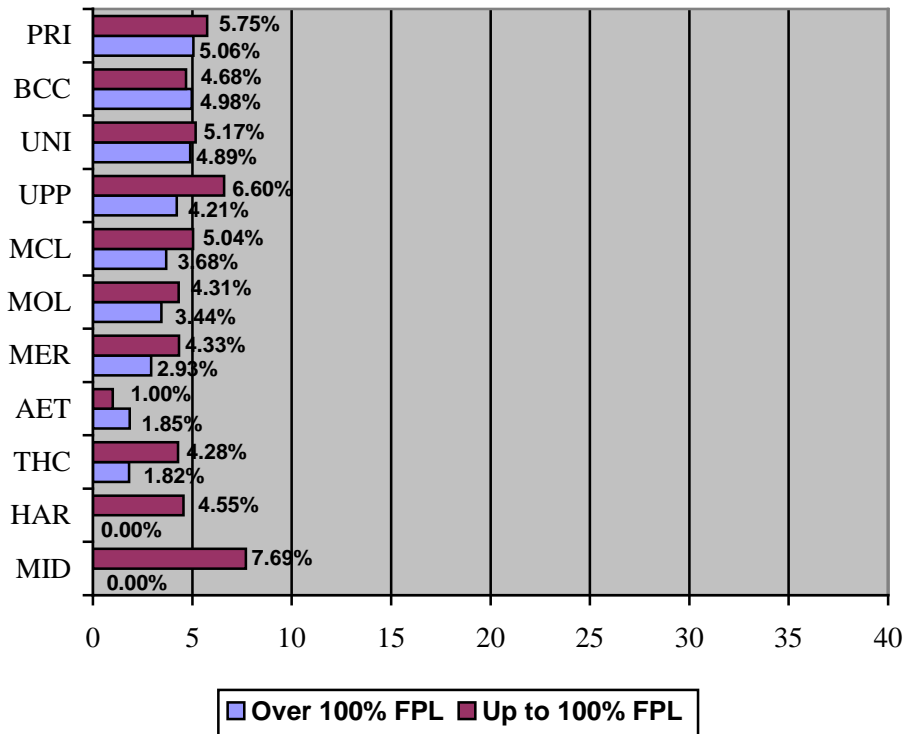
**Summary:** The results shown are informational only. In Cohort 1, the results ranged from 0.00% to 7.89% for beneficiaries with income over 100% FPL. The results ranged from 0.00% to 6.62% for beneficiaries with income that never exceeded 100% FPL. In Cohort 2, the results ranged from 0.00% to 5.06% for beneficiaries with income over 100% FPL. The results ranged from 1.00% to 7.69% for beneficiaries with income that never exceeded 100% FPL. In Cohort 3, the results ranged from 0.00% to 16.67% for beneficiaries with income over 100% FPL. The results ranged from 1.80% to 6.55% for beneficiaries with income that never exceeded 100% FPL.

**Figure 11: Transition out of CFP Status - Cohort 1**

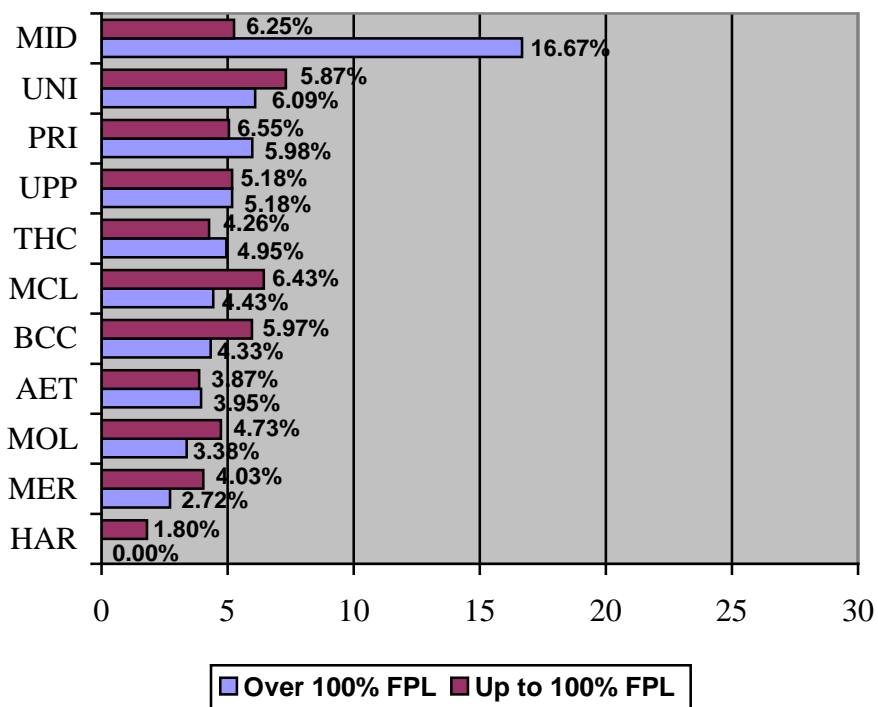


Transition out of CFP Status Percentages  
 \*In the graphs represented for this measure, FPL represents the Federal Poverty Level.

**Figure 12: Transition out of CFP Status - Cohort 2**



**Figure 13: Transition out of CFP Status - Cohort 3**





## 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
HAR	Harbor Health Plan
MCL	McLaren Health Plan
MER	Meridian Health Plan of Michigan
MID	HAP Midwest Health Plan
MOL	Molina Healthcare of Michigan
PRI	Priority Health Choice
THC	Total Health Care
UNI	UnitedHealthcare Community Plan
UPP	Upper Peninsula Health Plan

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	84.64%	Yes
	Jul 17 – Sep 17	84%	84.63%	Yes
	Oct 17 – Dec 17	84%	84.80%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>85.59%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	7.45%	No
	Apr 17 – Jun 17	9%	5.22%	No
	Jul 17 – Sep 17	9%	5.65%	No
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>8.86%</b>	<b>No</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	7.16%	N/A
	Sep 16 – Dec 17	Informational Only	6.61%	N/A
	Dec 16 – Mar 18	Informational Only	5.96%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>7.33%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	38.78%	No
	Apr 17 – Jun 17	50%	36.79%	No
	Jul 17 – Sep 17	50%	35.23%	No
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>45.90%</b>	<b>No</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	71.03%	No
	Oct 16 – Sep 17	83%	70.08%	No
	Jan 17 – Dec 17	83%	70.19%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>69.98%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	22.22%	3.80%	N/A	Info Only	16.92%	2.82%	N/A	Info Only	27.63%	4.11%	N/A
Info Only	13.85%	3.91%	N/A	Info Only	4.69%	3.01%	N/A	Info Only	16.92%	2.20%	N/A
Info Only	15.71%	2.32%	N/A	Info Only	8.70%	2.69%	N/A	Info Only	24.24%	1.18%	N/A
Info Only	17.72%	2.22%	N/A	Info Only	10.26%	2.08%	N/A	Info Only	12.86%	2.83%	N/A
Info Only	8.51%	2.60%	N/A	Info Only	21.52%	5.36%	N/A	Info Only	16.85%	4.70%	N/A
<b>Info Only</b>	<b>12.68%</b>	<b>4.47%</b>	<b>N/A</b>	<b>Info Only</b>	<b>16.90%</b>	<b>5.79%</b>	<b>N/A</b>	<b>Info Only</b>	<b>20.99%</b>	<b>3.64%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	1.89%	N/A	Info Only	0.00%	3.64%	N/A
Info Only	2.33%	5.30%	N/A	Info Only	2.56%	2.72%	N/A	Info Only	0.00%	3.57%	N/A
Info Only	6.82%	7.91%	N/A	Info Only	5.26%	8.57%	N/A	Info Only	2.52%	2.65%	N/A
Info Only	4.40%	4.19%	N/A	Info Only	6.76%	5.85%	N/A	Info Only	1.43%	4.48%	N/A
Info Only	0.74%	4.71%	N/A	Info Only	3.85%	3.91%	N/A	Info Only	2.20%	4.76%	N/A
<b>Info Only</b>	<b>4.00%</b>	<b>4.65%</b>	<b>N/A</b>	<b>Info Only</b>	<b>1.85%</b>	<b>1.00%</b>	<b>N/A</b>	<b>Info Only</b>	<b>3.95%</b>	<b>3.87%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	84.78%	Yes
	Jul 17 – Sep 17	84%	84.93%	Yes
	Oct 17 – Dec 17	84%	84.71%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>85.59%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	10.80%	Yes
	Apr 17 – Jun 17	9%	10.45%	Yes
	Jul 17 – Sep 17	9%	10.24%	Yes
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>11.82%</b>	<b>Yes</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	12.34%	N/A
	Sep 16 – Dec 17	Informational Only	11.78%	N/A
	Dec 16 – Mar 18	Informational Only	11.75%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>11.82%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	54.26%	Yes
	Apr 17 – Jun 17	50%	50.71%	Yes
	Jul 17 – Sep 17	50%	53.39%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>55.75%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	75.93%	No
	Oct 16 – Sep 17	83%	75.61%	No
	Jan 17 – Dec 17	83%	75.55%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>75.32%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	16.32%	3.70%	N/A	Info Only	19.88%	4.14%	N/A	Info Only	18.76%	4.16%	N/A
Info Only	15.69%	4.39%	N/A	Info Only	14.63%	3.09%	N/A	Info Only	19.13%	2.95%	N/A
Info Only	13.90	3.92%	N/A	Info Only	14.86%	2.92%	N/A	Info Only	11.44%	2.56%	N/A
Info Only	10.84%	3.17%	N/A	Info Only	13.32%	2.75%	N/A	Info Only	14.57%	2.63%	N/A
Info Only	10.70%	3.37%	N/A	Info Only	11.73%	4.93%	N/A	Info Only	13.21%	4.67%	N/A
<b>Info Only</b>	<b>13.25%</b>	<b>4.87%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.59%</b>	<b>4.75%</b>	<b>N/A</b>	<b>Info Only</b>	<b>13.20%</b>	<b>4.64%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	1.09%	2.63%	N/A	Info Only	1.15%	2.52%	N/A	Info Only	0.64%	2.80%	N/A
Info Only	1.08%	3.91%	N/A	Info Only	2.04%	3.16%	N/A	Info Only	5.71%	8.15%	N/A
Info Only	7.93%	12.13%	N/A	Info Only	6.70%	8.39%	N/A	Info Only	4.78%	7.38%	N/A
Info Only	5.49%	6.11%	N/A	Info Only	5.86%	6.64%	N/A	Info Only	4.95%	5.70%	N/A
Info Only	2.23%	5.76%	N/A	Info Only	3.42%	4.40%	N/A	Info Only	3.08%	4.90%	N/A
<b>Info Only</b>	<b>4.06%</b>	<b>4.90%</b>	<b>N/A</b>	<b>Info Only</b>	<b>4.98%</b>	<b>4.68%</b>	<b>N/A</b>	<b>Info Only</b>	<b>4.33%</b>	<b>5.97%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Harbor Health Plan – HAR**

**HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	Apr 17 – Jun 17	84%	85.45%	Yes
	Jul 17 – Sep 17	84%	85.77%	Yes
	Oct 17 – Dec 17	84%	84.06%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>86.37%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	N/A	N/A
	Apr 17 – Jun 17	9%	N/A	N/A
	Jul 17 – Sep 17	9%	N/A	N/A
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>N/A</b>	<b>N/A</b>

*N/A in the "Plan Result" column indicates that the plan had a numerator less than 5 or a denominator less than 30.*

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	N/A	N/A
	Sep 16 – Dec 17	Informational Only	N/A	N/A
	Dec 16 – Mar 18	Informational Only	N/A	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>N/A</b>	<b>N/A</b>

*N/A in the "Plan Result" column indicates that the plan had a numerator less than 5 or a denominator less than 30.*

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	27.02%	No
	Apr 17 – Jun 17	50%	29.20%	No
	Jul 17 – Sep 17	50%	36.36%	No
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>19.80%</b>	<b>No</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	59.35%	No
	Oct 16 – Sep 17	83%	59.04%	No
	Jan 17 – Dec 17	83%	57.36%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>56.74%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	12.50%	2.15%	N/A	Info Only	0.00%	2.17%	N/A	Info Only	28.00%	1.54%	N/A
Info Only	14.29%	2.24%	N/A	Info Only	12.50%	1.60%	N/A	Info Only	19.23%	1.46%	N/A
Info Only	25.00%	3.72%	N/A	Info Only	25.00%	1.36%	N/A	Info Only	11.11%	1.91%	N/A
Info Only	18.18%	2.82%	N/A	Info Only	10.00%	1.23%	N/A	Info Only	28.00%	2.11%	N/A
Info Only	18.75%	2.58%	N/A	Info Only	16.67%	2.90%	N/A	Info Only	17.39%	2.91%	N/A
<b>Info Only</b>	<b>28.57%</b>	<b>5.39%</b>	<b>N/A</b>	<b>Info Only</b>	<b>36.36%</b>	<b>5.00%</b>	<b>N/A</b>	<b>Info Only</b>	<b>25.00%</b>	<b>4.71%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Harbor Health Plan – HAR**

**HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
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Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	3.45%	N/A	Info Only	0.00%	0.00%	N/A
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	0.00%	N/A	Info Only	6.73%	9.57%	N/A
Info Only	0.00%	6.67%	N/A	Info Only	0.00%	2.22%	N/A	Info Only	0.00%	1.15%	N/A
Info Only	7.14%	6.82%	N/A	Info Only	0.00%	4.76%	N/A	Info Only	3.45%	5.05%	N/A
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	1.54%	N/A	Info Only	0.00%	4.88%	N/A
<b>Info Only</b>	<b>0.00%</b>	<b>3.61%</b>	<b>N/A</b>	<b>Info Only</b>	<b>0.00%</b>	<b>4.55%</b>	<b>N/A</b>	<b>Info Only</b>	<b>0.00%</b>	<b>1.80%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.
- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	84.43%	Yes
	Jul 17 – Sep 17	84%	84.59%	Yes
	Oct 17 – Dec 17	84%	84.83%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>85.37%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	10.83%	Yes
	Apr 17 – Jun 17	9%	11.88%	Yes
	Jul 17 – Sep 17	9%	12.46%	Yes
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>10.93%</b>	<b>Yes</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	5.65%	N/A
	Sep 16 – Dec 17	Informational Only	7.41%	N/A
	Dec 16 – Mar 18	Informational Only	7.15%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>7.54%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	54.59%	Yes
	Apr 17 – Jun 17	50%	48.62%	No
	Jul 17 – Sep 17	50%	51.19%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>52.39%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	81.11%	No
	Oct 16 – Sep 17	83%	80.87%	No
	Jan 17 – Dec 17	83%	80.52%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>80.11%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	13.91%	6.42%	N/A	Info Only	15.63%	5.88%	N/A	Info Only	18.73%	5.08%	N/A
Info Only	13.89%	5.14%	N/A	Info Only	10.57%	3.63%	N/A	Info Only	11.53%	2.78%	N/A
Info Only	10.29%	3.55%	N/A	Info Only	11.33%	3.17%	N/A	Info Only	9.86%	2.82%	N/A
Info Only	11.15%	3.96%	N/A	Info Only	8.50%	2.97%	N/A	Info Only	11.31%	3.45%	N/A
Info Only	10.39%	4.09%	N/A	Info Only	12.32%	4.87%	N/A	Info Only	12.50%	4.29%	N/A
<b>Info Only</b>	<b>13.41%</b>	<b>5.76%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.70%</b>	<b>5.00%</b>	<b>N/A</b>	<b>Info Only</b>	<b>10.48%</b>	<b>4.26%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications



Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**McLaren Health Plan – MCL**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	2.34%	3.25%	N/A	Info Only	2.18%	3.56%	N/A	Info Only	2.36%	3.05%	N/A
Info Only	3.32%	4.97%	N/A	Info Only	1.94%	5.77%	N/A	Info Only	5.13%	8.18%	N/A
Info Only	9.59%	12.58%	N/A	Info Only	6.52%	12.95%	N/A	Info Only	5.95%	7.16%	N/A
Info Only	5.50%	6.22%	N/A	Info Only	5.79%	7.54%	N/A	Info Only	2.37%	5.06%	N/A
Info Only	3.06%	4.14%	N/A	Info Only	4.21%	5.90%	N/A	Info Only	4.16%	5.05%	N/A
Info Only	5.36%	5.52%	N/A	Info Only	3.68%	5.04%	N/A	Info Only	4.43%	6.43%	N/A

- Shaded areas represent data that are newly reported this month.
- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	84.55%	Yes
	Jul 17 – Sep 17	84%	84.93%	Yes
	Oct 17 – Dec 17	84%	84.04%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>84.02%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	12.42%	Yes
	Apr 17 – Jun 17	9%	8.32%	No
	Jul 17 – Sep 17	9%	8.31%	No
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>7.85%</b>	<b>No</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	8.10%	N/A
	Sep 16 – Dec 17	Informational Only	8.22%	N/A
	Dec 16 – Mar 18	Informational Only	8.17%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>7.78%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	55.12%	Yes
	Apr 17 – Jun 17	50%	50.55%	Yes
	Jul 17 – Sep 17	50%	51.28%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>51.21%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	81.15%	No
	Oct 16 – Sep 17	83%	80.91%	No
	Jan 17 – Dec 17	83%	80.56%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>79.82%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	15.87%	4.94%	N/A	Info Only	13.34%	5.18%	N/A	Info Only	19.84%	4.28%	N/A
Info Only	14.52%	4.61%	N/A	Info Only	14.19%	4.26%	N/A	Info Only	14.73%	3.35%	N/A
Info Only	11.23%	3.63%	N/A	Info Only	12.25%	3.51%	N/A	Info Only	10.69%	3.20%	N/A
Info Only	12.82%	3.56%	N/A	Info Only	10.26%	3.08%	N/A	Info Only	11.53%	2.99%	N/A
Info Only	10.74%	3.66%	N/A	Info Only	12.29%	4.45%	N/A	Info Only	12.90%	4.28%	N/A
<b>Info Only</b>	<b>11.31%</b>	<b>5.04%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.14%</b>	<b>5.26%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.52%</b>	<b>4.51%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	0.94%	3.37%	N/A	Info Only	2.28%	3.03%	N/A	Info Only	1.80%	3.13%	N/A
Info Only	2.19%	4.75%	N/A	Info Only	2.11%	4.59%	N/A	Info Only	0.00%	0.00%	N/A
Info Only	7.72%	11.14%	N/A	Info Only	5.68%	10.61%	N/A	Info Only	5.68%	8.54%	N/A
Info Only	5.02%	8.17%	N/A	Info Only	4.42%	8.63%	N/A	Info Only	3.38%	6.24%	N/A
Info Only	3.15%	4.01%	N/A	Info Only	3.40%	4.56%	N/A	Info Only	3.33%	4.74%	N/A
Info Only	4.34%	4.79%	N/A	Info Only	2.93%	4.33%	N/A	Info Only	2.72%	4.03%	N/A

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**HAP Midwest Health Plan – MID**

**HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	Apr 17 – Jun 17	84%	84.73%	Yes
	Jul 17 – Sep 17	84%	85.13%	Yes
	Oct 17 – Dec 17	84%	85.90%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>85.70%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	N/A	N/A
	Apr 17 – Jun 17	9%	N/A	N/A
	Jul 17 – Sep 17	9%	N/A	N/A
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>13.79%</b>	<b>Yes</b>

*N/A in the "Plan Result" column indicates that the plan had a numerator less than 5 or a denominator less than 30.*

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	N/A	N/A
	Sep 16 – Dec 17	Informational Only	23.33%	N/A
	Dec 16 – Mar 18	Informational Only	N/A	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>21.21%</b>	<b>N/A</b>

*N/A in the "Plan Result" column indicates that the plan had a numerator less than 5 or a denominator less than 30.*

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	29.46%	No
	Apr 17 – Jun 17	50%	34.65%	No
	Jul 17 – Sep 17	50%	35.44%	No
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>43.14%</b>	<b>No</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	53.19%	No
	Oct 16 – Sep 17	83%	54.83%	No
	Jan 17 – Dec 17	83%	56.27%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>56.56%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	25.00%	3.33%	N/A	Info Only	25.00%	0.00%	N/A	Info Only	0.00%	0.00%	N/A
Info Only	10.00%	4.17%	N/A	Info Only	N/A	2.90%	N/A	Info Only	16.67%	2.99%	N/A
Info Only	18.18%	3.23%	N/A	Info Only	0.00	2.70%	N/A	Info Only	0.00%	1.35%	N/A
Info Only	25.00%	3.85%	N/A	Info Only	50.00%	3.41%	N/A	Info Only	28.57%	3.09%	N/A
Info Only	0.00%	3.53%	N/A	Info Only	16.67%	40.00%	N/A	Info Only	25.00%	28.57%	N/A
<b>Info Only</b>	<b>12.50%</b>	<b>6.90%</b>	<b>N/A</b>	<b>Info Only</b>	<b>25.00%</b>	<b>12.50%</b>	<b>N/A</b>	<b>Info Only</b>	<b>9.09%</b>	<b>25.00%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**HAP Midwest Health Plan – MID**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	11.11%	N/A	Info Only	0.00%	0.00%	N/A
Info Only	0.00%	0.00%	N/A	Info Only	0.00%	11.11%	N/A	Info Only	5.36%	8.62%	N/A
Info Only	14.29%	12.50%	N/A	Info Only	0.00%	7.14%	N/A	Info Only	0.00%	0.00%	N/A
Info Only	0.00%	11.11%	N/A	Info Only	16.67%	0.00%	N/A	Info Only	28.57%	0.00%	N/A
Info Only	0.00%	11.11%	N/A	Info Only	0.00%	4.17%	N/A	Info Only	12.50%	5.26%	N/A
<b>Info Only</b>	<b>0.00%</b>	<b>0.00%</b>	<b>N/A</b>	<b>Info Only</b>	<b>0.00%</b>	<b>7.69%</b>	<b>N/A</b>	<b>Info Only</b>	<b>16.67%</b>	<b>6.25%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	85.83%	Yes
	Jul 17 – Sep 17	84%	85.79%	Yes
	Oct 17 – Dec 17	84%	85.74%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>86.25%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	8.04%	No
	Apr 17 – Jun 17	9%	7.52%	No
	Jul 17 – Sep 17	9%	6.67%	No
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>5.20%</b>	<b>No</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	21.85%	N/A
	Sep 16 – Dec 17	Informational Only	20.99%	N/A
	Dec 16 – Mar 18	Informational Only	21.19%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>19.91%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	50.59%	Yes
	Apr 17 – Jun 17	50%	50.12%	Yes
	Jul 17 – Sep 17	50%	51.95%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>46.11%</b>	<b>No</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	80.15%	No
	Oct 16 – Sep 17	83%	79.87%	No
	Jan 17 – Dec 17	83%	79.53%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>79.22%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	16.04%	4.90%	N/A	Info Only	14.48%	4.99%	N/A	Info Only	20.16%	4.67%	N/A
Info Only	14.35%	4.91%	N/A	Info Only	13.00%	4.10%	N/A	Info Only	13.60%	3.00%	N/A
Info Only	12.21%	3.55%	N/A	Info Only	12.00%	2.89%	N/A	Info Only	10.66%	2.73%	N/A
Info Only	12.65%	3.44%	N/A	Info Only	10.56%	2.84%	N/A	Info Only	11.48%	2.90%	N/A
Info Only	11.79%	3.75%	N/A	Info Only	12.92%	5.15%	N/A	Info Only	13.46%	4.60%	N/A
<b>Info Only</b>	<b>10.19%</b>	<b>5.74%</b>	<b>N/A</b>	<b>Info Only</b>	<b>14.33%</b>	<b>5.34%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.82%</b>	<b>4.54%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Molina Healthcare of Michigan – MOL**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	1.20%	2.41%	N/A	Info Only	1.75%	2.66%	N/A	Info Only	1.30%	2.52%	N/A
Info Only	1.67%	2.82%	N/A	Info Only	2.35%	3.47%	N/A	Info Only	7.56%	11.04%	N/A
Info Only	7.06%	9.16%	N/A	Info Only	5.00%	9.34%	N/A	Info Only	4.72%	5.25%	N/A
Info Only	5.00%	5.34%	N/A	Info Only	4.45%	6.51%	N/A	Info Only	3.01%	4.36%	N/A
Info Only	2.95%	4.14%	N/A	Info Only	3.78%	4.43%	N/A	Info Only	2.37%	3.90%	N/A
Info Only	3.66%	4.91%	N/A	Info Only	3.44%	4.31%	N/A	Info Only	3.38%	4.73%	N/A

- Shaded areas represent data that are newly reported this month.
- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	84.09%	Yes
	Jul 17 – Sep 17	84%	84.03%	Yes
	Oct 17 – Dec 17	84%	83.32%	No
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>83.96%</b>	<b>No</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	11.97%	Yes
	Apr 17 – Jun 17	9%	7.54%	No
	Jul 17 – Sep 17	9%	9.52%	Yes
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>9.94%</b>	<b>Yes</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	7.89%	N/A
	Sep 16 – Dec 17	Informational Only	8.35%	N/A
	Dec 16 – Mar 18	Informational Only	8.02%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>7.82%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	59.94%	Yes
	Apr 17 – Jun 17	50%	56.45%	Yes
	Jul 17 – Sep 17	50%	58.18%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>60.27%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	82.59%	No
	Oct 16 – Sep 17	83%	82.39%	No
	Jan 17 – Dec 17	83%	82.32%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>82.40%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	11.93%	5.24%	N/A	Info Only	15.37%	4.87%	N/A	Info Only	14.40%	4.99%	N/A
Info Only	13.57%	6.90%	N/A	Info Only	13.01%	5.75%	N/A	Info Only	12.42%	4.90%	N/A
Info Only	11.36%	4.29%	N/A	Info Only	10.13%	3.37%	N/A	Info Only	8.18%	3.23%	N/A
Info Only	11.96%	4.14%	N/A	Info Only	9.96%	3.47%	N/A	Info Only	13.77%	3.58%	N/A
Info Only	10.34%	4.69%	N/A	Info Only	13.90%	5.56%	N/A	Info Only	10.74%	4.41%	N/A
<b>Info Only</b>	<b>12.19%</b>	<b>5.67%</b>	<b>N/A</b>	<b>Info Only</b>	<b>13.00%</b>	<b>5.46%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.07%</b>	<b>4.87%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications



Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Priority Health Choice – PRI**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	2.16%	2.53%	N/A	Info Only	2.68%	4.14%	N/A	Info Only	1.37%	3.41%	N/A
Info Only	1.15%	5.61%	N/A	Info Only	1.59%	7.66%	N/A	Info Only	6.79%	5.61%	N/A
Info Only	9.45%	12.48%	N/A	Info Only	8.03%	10.93%	N/A	Info Only	8.98%	10.49%	N/A
Info Only	8.67%	9.89%	N/A	Info Only	8.49%	9.71%	N/A	Info Only	3.88%	7.46%	N/A
Info Only	3.44%	5.07%	N/A	Info Only	2.98%	6.92%	N/A	Info Only	3.36%	3.85%	N/A
<b>Info Only</b>	<b>4.21%</b>	<b>5.09%</b>	<b>N/A</b>	<b>Info Only</b>	<b>5.06%</b>	<b>5.75%</b>	<b>N/A</b>	<b>Info Only</b>	<b>5.98%</b>	<b>6.55%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Total Health Care – THC**

**HEALTHY MICHIGAN PLAN:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Adults' Generic Drug Utilization	Apr 17 – Jun 17	84%	86.01%	Yes
	Jul 17 – Sep 17	84%	86.12%	Yes
	Oct 17 – Dec 17	84%	85.84%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>86.59%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	6.43%	No
	Apr 17 – Jun 17	9%	6.46%	No
	Jul 17 – Sep 17	9%	6.36%	No
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>9.80%</b>	<b>Yes</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	8.86%	N/A
	Sep 16 – Dec 17	Informational Only	8.56%	N/A
	Dec 16 – Mar 18	Informational Only	9.22%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>8.17%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	47.10%	No
	Apr 17 – Jun 17	50%	44.55%	No
	Jul 17 – Sep 17	50%	42.84%	No
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>47.26%</b>	<b>No</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	76.45%	No
	Oct 16 – Sep 17	83%	76.41%	No
	Jan 17 – Dec 17	83%	76.57%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>76.64%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	12.50%	3.80%	N/A	Info Only	19.70%	3.73%	N/A	Info Only	19.46%	3.02%	N/A
Info Only	16.92%	3.43%	N/A	Info Only	9.76%	3.55%	N/A	Info Only	15.11%	2.85%	N/A
Info Only	12.50%	2.87%	N/A	Info Only	11.76%	2.37%	N/A	Info Only	12.23%	2.37%	N/A
Info Only	14.48%	3.20%	N/A	Info Only	5.00%	2.20%	N/A	Info Only	16.85%	2.99%	N/A
Info Only	9.09%	3.59%	N/A	Info Only	15.00%	4.39%	N/A	Info Only	15.61%	4.44%	N/A
<b>Info Only</b>	<b>9.33%</b>	<b>5.90%</b>	<b>N/A</b>	<b>Info Only</b>	<b>7.55%</b>	<b>4.50%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.52%</b>	<b>4.11%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Total Health Care – THC**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	0.00%	2.60%	N/A	Info Only	1.71%	3.30%	N/A	Info Only	2.42%	2.71%	N/A
Info Only	2.10%	1.68%	N/A	Info Only	3.33%	3.13%	N/A	Info Only	7.79%	7.62%	N/A
Info Only	6.06%	12.24%	N/A	Info Only	3.03%	7.84%	N/A	Info Only	10.37%	5.66%	N/A
Info Only	5.26%	6.57%	N/A	Info Only	3.15%	4.92%	N/A	Info Only	1.26%	4.30%	N/A
Info Only	4.41%	3.66%	N/A	Info Only	3.07%	4.24%	N/A	Info Only	2.09%	4.43%	N/A
Info Only	3.66%	5.59%	N/A	Info Only	1.82%	4.28%	N/A	Info Only	4.95%	4.26%	N/A

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	86.38%	Yes
	Jul 17 – Sep 17	84%	86.52%	Yes
	Oct 17 – Dec 17	84%	86.28%	Yes
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>86.92%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	17.94%	Yes
	Apr 17 – Jun 17	9%	15.56%	Yes
	Jul 17 – Sep 17	9%	15.36%	Yes
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>15.80%</b>	<b>Yes</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	7.43%	N/A
	Sep 16 – Dec 17	Informational Only	9.38%	N/A
	Dec 16 – Mar 18	Informational Only	8.95%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>10.16%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	53.75%	Yes
	Apr 17 – Jun 17	50%	53.67%	Yes
	Jul 17 – Sep 17	50%	54.49%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>50.25%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	80.94%	No
	Oct 16 – Sep 17	83%	80.87%	No
	Jan 17 – Dec 17	83%	80.53%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>80.19%</b>	<b>No</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	13.25%	4.07%	N/A	Info Only	13.74%	3.83%	N/A	Info Only	17.84%	4.15%	N/A
Info Only	13.59%	4.44%	N/A	Info Only	12.04%	3.88%	N/A	Info Only	13.46%	4.93%	N/A
Info Only	14.35%	5.37%	N/A	Info Only	14.70%	4.98%	N/A	Info Only	10.85%	3.18%	N/A
Info Only	12.29%	4.09%	N/A	Info Only	10.38%	2.99%	N/A	Info Only	9.21%	3.08%	N/A
Info Only	11.17%	3.91%	N/A	Info Only	14.65%	4.97%	N/A	Info Only	12.25%	4.69%	N/A
<b>Info Only</b>	<b>11.92%</b>	<b>5.84%</b>	<b>N/A</b>	<b>Info Only</b>	<b>11.10%</b>	<b>5.61%</b>	<b>N/A</b>	<b>Info Only</b>	<b>10.55%</b>	<b>5.10%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**UnitedHealthcare Community Plan – UNI**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [ <b>May 17 – Jun 18</b> ]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	1.33%	3.05%	N/A	Info Only	1.83%	3.95%	N/A	Info Only	2.75%	3.61%	N/A
Info Only	3.14%	5.19%	N/A	Info Only	2.70%	5.62%	N/A	Info Only	7.66%	12.39%	N/A
Info Only	7.18%	12.86%	N/A	Info Only	7.09%	9.13%	N/A	Info Only	5.08%	7.77%	N/A
Info Only	4.44%	6.37%	N/A	Info Only	4.48%	7.74%	N/A	Info Only	3.80%	5.72%	N/A
Info Only	2.52%	5.53%	N/A	Info Only	3.86%	5.65%	N/A	Info Only	3.10%	5.12%	N/A
<b>Info Only</b>	<b>4.65%</b>	<b>4.70%</b>	<b>N/A</b>	<b>Info Only</b>	<b>4.89%</b>	<b>5.17%</b>	<b>N/A</b>	<b>Info Only</b>	<b>6.09%</b>	<b>5.87%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.
- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**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	Apr 17 – Jun 17	84%	83.22%	No
	Jul 17 – Sep 17	84%	83.30%	No
	Oct 17 – Dec 17	84%	83.61%	No
	<b>Jan 17 – Mar 18</b>	<b>84%</b>	<b>84.01%</b>	<b>Yes</b>

Timely Completion of HRA	Jan 17 – Mar 17	9%	8.41%	No
	Apr 17 – Jun 17	9%	10.23%	Yes
	Jul 17 – Sep 17	9%	7.22%	No
	<b>Oct 17 – Dec 17</b>	<b>9%</b>	<b>8.89%</b>	<b>No</b>

Completion of Annual HRA	Jun 16 – Sep 17	Informational Only	4.02%	N/A
	Sep 16 – Dec 17	Informational Only	4.94%	N/A
	Dec 16 – Mar 18	Informational Only	4.26%	N/A
	<b>Mar 17 – Jun 18</b>	<b>Informational Only</b>	<b>6.37%</b>	<b>N/A</b>

Outreach/Engagement to Facilitate Entry to Primary Care	Jan 17 – Mar 17	50%	55.06%	Yes
	Apr 17 – Jun 17	50%	58.01%	Yes
	Jul 17 – Sep 17	50%	54.03%	Yes
	<b>Oct 17 – Dec 17</b>	<b>50%</b>	<b>58.75%</b>	<b>Yes</b>

Adults' Access to Ambulatory Health Services	Jul 16 – Jun 17	83%	82.94%	No
	Oct 16 – Sep 17	83%	82.57%	No
	Jan 17 – Dec 17	83%	82.56%	No
	<b>Apr 17 – Mar 18</b>	<b>83%</b>	<b>83.07%</b>	<b>Yes</b>

Transition into CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	10.00%	6.90%	N/A	Info Only	13.95%	6.75%	N/A	Info Only	9.55%	5.92%	N/A
Info Only	11.70%	5.00%	N/A	Info Only	10.21%	4.41%	N/A	Info Only	9.15%	3.95%	N/A
Info Only	5.45%	3.41%	N/A	Info Only	7.48%	4.52%	N/A	Info Only	8.57%	2.62%	N/A
Info Only	9.02%	3.30%	N/A	Info Only	7.06%	2.72%	N/A	Info Only	10.50%	0.00%	N/A
Info Only	9.44%	3.85%	N/A	Info Only	10.81%	6.36%	N/A	Info Only	8.65%	5.45%	N/A
<b>Info Only</b>	<b>12.94%</b>	<b>5.28%</b>	<b>N/A</b>	<b>Info Only</b>	<b>10.12%</b>	<b>5.91%</b>	<b>N/A</b>	<b>Info Only</b>	<b>9.19%</b>	<b>4.26</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.

- For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Upper Peninsula Health Plan – UPP**

**HEALTHY MICHIGAN PLAN:**

Performance Measure		Measurement Period		Standard		Plan Result		Standard Achieved			
Transition out of CFP Status: [May 16 – Jun 17] [ Aug 16 – Sep 17] [ Nov 16 – Dec 17] [Feb 17 – Dec 18] [May 17 – Jun 18]											
Cohort 1 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 2 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved	Cohort 3 Standard	>100% FPL Result	≤100% FPL Result	Standard Achieved
Info Only	1.09%	2.25%	N/A	Info Only	4.32%	2.83%	N/A	Info Only	1.79%	3.74%	N/A
Info Only	2.28%	4.69%	N/A	Info Only	3.14%	5.21%	N/A	Info Only	2.70%	7.03%	N/A
Info Only	10.22%	12.30%	N/A	Info Only	7.38%	13.70%	N/A	Info Only	6.48%	9.79%	N/A
Info Only	6.13%	7.29%	N/A	Info Only	6.34%	100.00%	N/A	Info Only	8.40%	0.00%	N/A
Info Only	2.99%	4.65%	N/A	Info Only	5.25%	5.67%	N/A	Info Only	5.28%	7.31%	N/A
Info Only	7.89%	6.62%	N/A	Info Only	4.21%	6.60%	N/A	Info Only	5.18%	5.18%	N/A

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Medical Services Administration  
Bureau of Medicaid Care Management and Quality Assurance

***PERFORMANCE MONITORING REPORT***

***HEALTHY MICHIGAN PLAN – DENTAL MEASURES***

**Composite – All Plans**



**October 2018**

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



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## Performance Monitoring Report

### 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 three (3) key performance measures aimed at improving the quality and efficiency of dental services provided to the Michigan residents enrolled in the Healthy Michigan Plan. The following HMP-Dental measures will be included in this report:

<b>Healthy Michigan Plan</b>		
<i>Diagnostic Dental Services</i>	<i>Preventive Dental Services</i>	<i>Restorative (Dental Fillings) Dental Services</i>

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 2018 unless otherwise noted.

**Table 1: Fiscal Year 2018<sup>1</sup>**

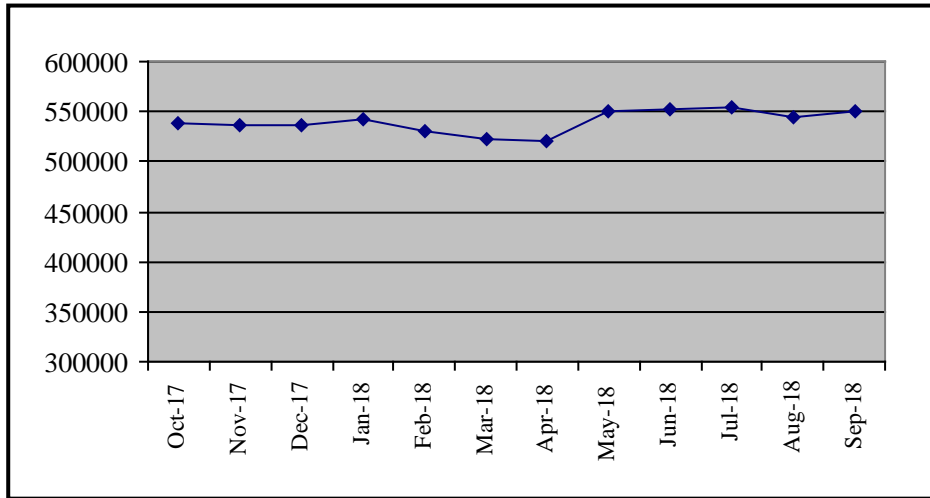
<b>Quarterly Reported Measures</b>	<b>Reported in 1<sup>st</sup> Quarter</b>	<b>Reported in 2<sup>nd</sup> Quarter</b>	<b>Reported in 3<sup>rd</sup> Quarter</b>	<b>Reported in 4<sup>th</sup> Quarter</b>
Diagnostic Dental Services	N/A	N/A	N/A	N/A
Preventive Dental Services	N/A	N/A	N/A	NA
Restorative (Dental Fillings) Dental Services	N/A	N/A	N/A	N/A

<sup>1</sup> N/A will be shown for measures where the standard is Informational Only.

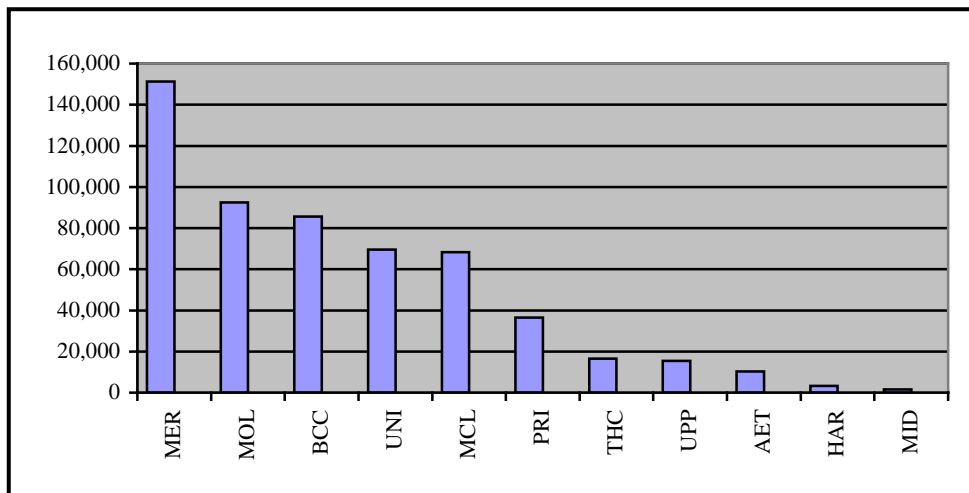
## Healthy Michigan Plan Enrollment

The Healthy Michigan Plan (HMP-MC) enrollment has remained steady over the past year. In September 2018, enrollment was 550,819, up 11,640 enrollees (2.16%) from October 2017. An increase of 6,574 enrollees (1.21%) was realized between August 2018 and September 2018.

**Figure 1: HMP-MC Enrollment, October 2017 – September 2018**



**Figure 2: HMP-MC Enrollment by Medicaid Health Plan, September 2018**



## **Medicaid Health Plan News**

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

**Diagnostic Dental Services**

**Measure**

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

**Standard**

N/A – Informational Only

**Measurement Period**

April 2017 –March 2018

**Data Source**

MDHHS Data Warehouse

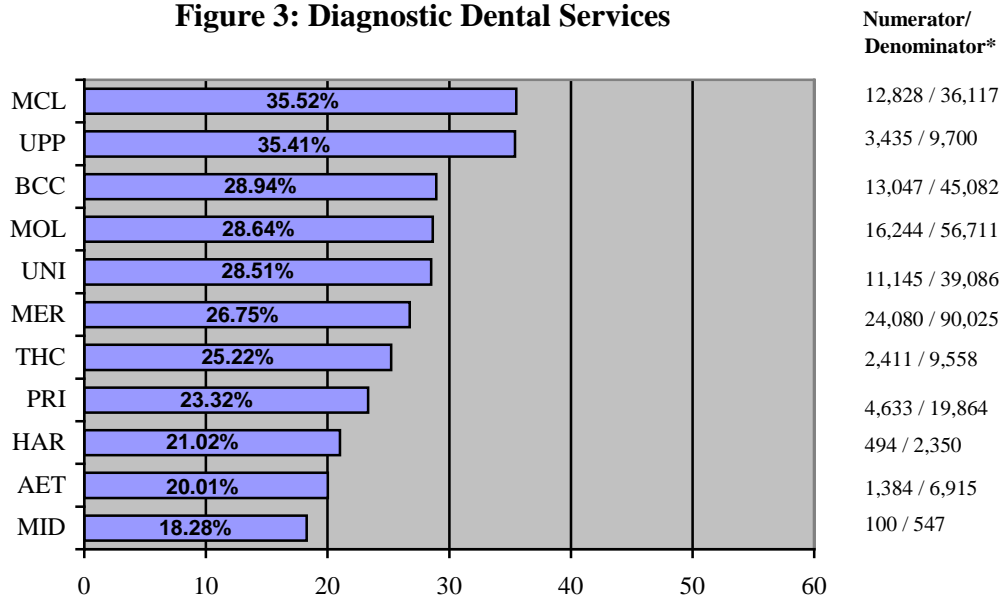
**Measurement Frequency**

Quarterly

**Table 2: Comparison across Medicaid Programs**

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee For Service (FFS) Only	1,247	12,700	9.82%
HMP Managed Care (MC) Only	92,092	321,830	28.63%

**Figure 3: Diagnostic Dental Services**



Diagnostic Dental Services Percentages

\*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 enrollees between the ages of 19 and 64 who received at least one preventive dental service within the measurement period.

**Standard**

N/A – Informational Only

**Measurement Period**

April 2017 –March 2018

**Data Source**

MDHHS Data Warehouse

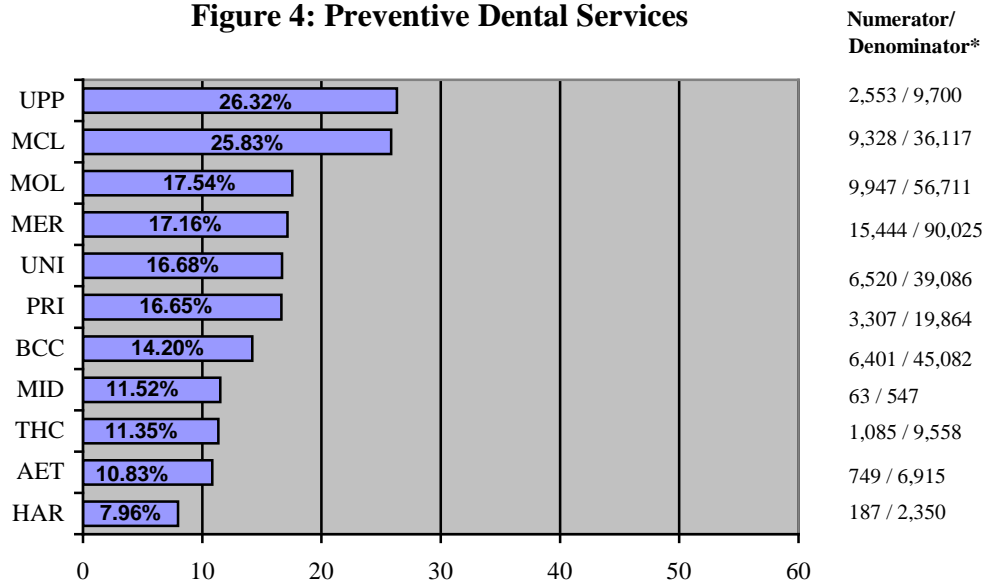
**Measurement Frequency**

Quarterly

**Table 3: Comparison across Medicaid Programs**

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee For Service (FFS) Only	650	12,700	5.12%
HMP Managed Care (MC) Only	56,950	321,630	17.71%

**Figure 4: Preventive Dental Services**



Preventive Dental Services Percentages

\*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 enrollees between the ages of 19 and 64 who received at least one restorative (dental fillings) dental service within the measurement period.

**Standard**

N/A – Informational Only

**Measurement Period**

April 2017 –March 2018

**Data Source**

MDHHS Data Warehouse

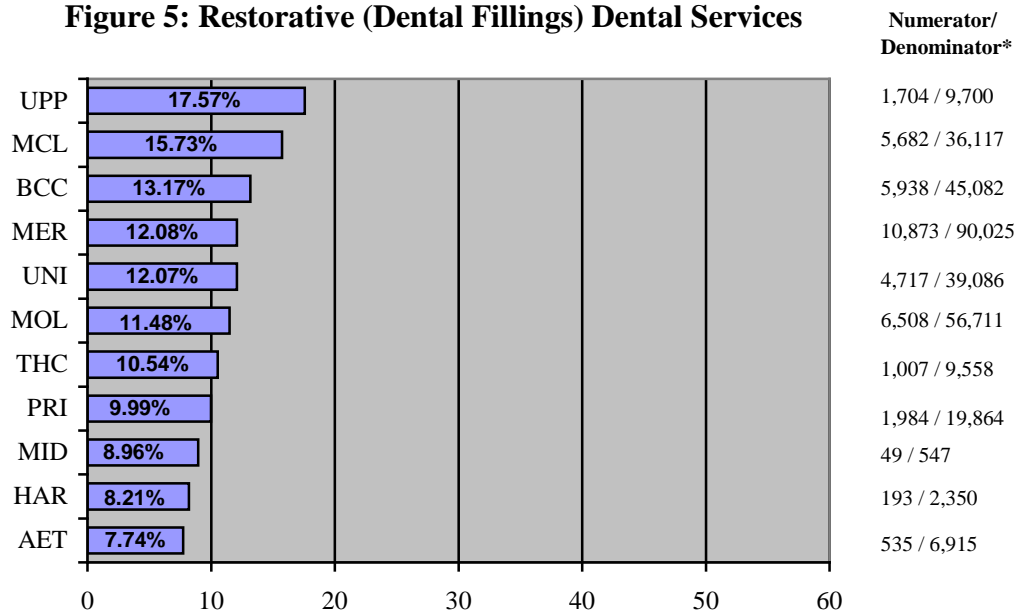
**Measurement Frequency**

Quarterly

**Table 4: Comparison across Medicaid Programs**

Medicaid Program	Numerator	Denominator	Percentage
HMP Fee For Service (FFS) Only	537	12,700	4.23%
HMP Managed Care (MC) Only	40,249	321,630	12.51%

**Figure 5: Restorative (Dental Fillings) Dental Services**



Restorative (Dental Fillings) Dental Services Percentages

\*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.

**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
HAR	Harbor Health Plan
MCL	McLaren Health Plan
MER	Meridian Health Plan of Michigan
MID	HAP Midwest Health Plan
MOL	Molina Healthcare of Michigan
PRI	Priority Health Choice
THC	Total Health Care
UNI	UnitedHealthcare Community Plan
UPP	Upper Peninsula Health Plan



Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Aetna Better Health of Michigan – AET**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	19.14%	N/A
	Jul 16 – June 17	Informational Only	18.47%	N/A
	Oct 16 – Sep 17	Informational Only	18.16%	N/A
	Jan 17 – Dec 17	Informational Only	20.62%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>20.01%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	19.45%	N/A
	Jul 16 – June 17	Informational Only	9.13%	N/A
	Oct 16 – Sep 17	Informational Only	9.62%	N/A
	Jan 17 – Dec 17	Informational Only	10.99%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>10.83%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	7.61%	N/A
	Jul 16 – June 17	Informational Only	7.38%	N/A
	Oct 16 – Sep 17	Informational Only	7.62%	N/A
	Jan 17 – Dec 17	Informational Only	8.41%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>7.74%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Blue Cross Complete – BCC**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	30.47%	N/A
	Jul 16 – June 17	Informational Only	29.69%	N/A
	Oct 16 – Sep 17	Informational Only	29.51%	N/A
	Jan 17 – Dec 17	Informational Only	29.41%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>28.94%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	30.97%	N/A
	Jul 16 – June 17	Informational Only	13.80%	N/A
	Oct 16 – Sep 17	Informational Only	14.15%	N/A
	Jan 17 – Dec 17	Informational Only	14.31%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>14.20%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	14.76%	N/A
	Jul 16 – June 17	Informational Only	14.35%	N/A
	Oct 16 – Sep 17	Informational Only	13.76%	N/A
	Jan 17 – Dec 17	Informational Only	13.79%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>13.17%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Harbor Health Plan – HAR**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	19.50%	N/A
	Jul 16 – June 17	Informational Only	21.64%	N/A
	Oct 16 – Sep 17	Informational Only	22.06%	N/A
	Jan 17 – Dec 17	Informational Only	20.11%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>21.02%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	19.96%	N/A
	Jul 16 – June 17	Informational Only	8.02%	N/A
	Oct 16 – Sep 17	Informational Only	8.02%	N/A
	Jan 17 – Dec 17	Informational Only	7.92%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>7.96%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	7.03%	N/A
	Jul 16 – June 17	Informational Only	8.29%	N/A
	Oct 16 – Sep 17	Informational Only	9.22%	N/A
	Jan 17 – Dec 17	Informational Only	8.73%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>8.21%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**McLaren Health Plan – MCL**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	40.09%	N/A
	Jul 16 – June 17	Informational Only	38.99%	N/A
	Oct 16 – Sep 17	Informational Only	38.42%	N/A
	Jan 17 – Dec 17	Informational Only	37.26%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>35.52%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	40.82%	N/A
	Jul 16 – June 17	Informational Only	28..27%	N/A
	Oct 16 – Sep 17	Informational Only	27.97%	N/A
	Jan 17 – Dec 17	Informational Only	27.15%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>25.83%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	19.46%	N/A
	Jul 16 – June 17	Informational Only	18.84%	N/A
	Oct 16 – Sep 17	Informational Only	18.38%	N/A
	Jan 17 – Dec 17	Informational Only	17.28%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>15.73%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Meridian Health Plan of Michigan – MER**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	34.65%	N/A
	Jul 16 – June 17	Informational Only	31.29%	N/A
	Oct 16 – Sep 17	Informational Only	28.24%	N/A
	Jan 17 – Dec 17	Informational Only	27.25%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>26.75%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	35.71%	N/A
	Jul 16 – June 17	Informational Only	20.41%	N/A
	Oct 16 – Sep 17	Informational Only	18.17%	N/A
	Jan 17 – Dec 17	Informational Only	17.47%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>17.16%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	15.99%	N/A
	Jul 16 – June 17	Informational Only	14.20%	N/A
	Oct 16 – Sep 17	Informational Only	12.85%	N/A
	Jan 17 – Dec 17	Informational Only	12.19%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>12.08%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**HAP Midwest Health Plan – MID**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	26.38%	N/A
	Jul 16 – June 17	Informational Only	24.62%	N/A
	Oct 16 – Sep 17	Informational Only	22.73%	N/A
	Jan 17 – Dec 17	Informational Only	23.50%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>18.28%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	26.38%	N/A
	Jul 16 – June 17	Informational Only	15.23%	N/A
	Oct 16 – Sep 17	Informational Only	14.32%	N/A
	Jan 17 – Dec 17	Informational Only	13.89%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>11.52%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	12.88%	N/A
	Jul 16 – June 17	Informational Only	12.44%	N/A
	Oct 16 – Sep 17	Informational Only	11.14%	N/A
	Jan 17 – Dec 17	Informational Only	12.18%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>8.96%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Molina Healthcare of Michigan – MOL**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	38.01%	N/A
	Jul 16 – June 17	Informational Only	37.26%	N/A
	Oct 16 – Sep 17	Informational Only	34.80%	N/A
	Jan 17 – Dec 17	Informational Only	32.36%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>28.64%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	38.59%	N/A
	Jul 16 – June 17	Informational Only	25.12%	N/A
	Oct 16 – Sep 17	Informational Only	23.24%	N/A
	Jan 17 – Dec 17	Informational Only	21.11%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>17.54%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	17.57%	N/A
	Jul 16 – June 17	Informational Only	17.15%	N/A
	Oct 16 – Sep 17	Informational Only	15.05%	N/A
	Jan 17 – Dec 17	Informational Only	13.10%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>11.48%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Priority Health Choice – PRI**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	36.31%	N/A
	Jul 16 – June 17	Informational Only	36.02%	N/A
	Oct 16 – Sep 17	Informational Only	35.50%	N/A
	Jan 17 – Dec 17	Informational Only	33.29%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>23.32%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	37.57%	N/A
	Jul 16 – June 17	Informational Only	25.78%	N/A
	Oct 16 – Sep 17	Informational Only	25.04%	N/A
	Jan 17 – Dec 17	Informational Only	23.75%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>16.65%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	17.37%	N/A
	Jul 16 – June 17	Informational Only	16.86%	N/A
	Oct 16 – Sep 17	Informational Only	16.03%	N/A
	Jan 17 – Dec 17	Informational Only	14.59%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>9.99%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications



Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Total Health Care – THC**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	24.91%	N/A
	Jul 16 – June 17	Informational Only	26.36%	N/A
	Oct 16 – Sep 17	Informational Only	26.36%	N/A
	Jan 17 – Dec 17	Informational Only	25.99%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>25.22%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	25.33%	N/A
	Jul 16 – June 17	Informational Only	11.83%	N/A
	Oct 16 – Sep 17	Informational Only	11.73%	N/A
	Jan 17 – Dec 17	Informational Only	11.68%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>11.35%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	11.09%	N/A
	Jul 16 – June 17	Informational Only	11.60%	N/A
	Oct 16 – Sep 17	Informational Only	11.04%	N/A
	Jan 17 – Dec 17	Informational Only	11.04%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>10.54%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**UnitedHealthcare Community Plan – UNI**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	28.29%	N/A
	Jul 16 – June 17	Informational Only	28.12%	N/A
	Oct 16 – Sep 17	Informational Only	28.54%	N/A
	Jan 17 – Dec 17	Informational Only	28.48%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>28.51%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	28.54%	N/A
	Jul 16 – June 17	Informational Only	16.12%	N/A
	Oct 16 – Sep 17	Informational Only	16.56%	N/A
	Jan 17 – Dec 17	Informational Only	16.50%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>16.68%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	12.13%	N/A
	Jul 16 – June 17	Informational Only	11.77%	N/A
	Oct 16 – Sep 17	Informational Only	11.92%	N/A
	Jan 17 – Dec 17	Informational Only	11.71%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>12.07%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

Performance Monitoring Report

**Appendix B: One Year Plan-Specific Analysis**

**Upper Peninsula Health Plan – UPP**

**HEALTHY MICHIGAN PLAN – DENTAL MEASURES:**

Performance Measure	Measurement Period	Standard	Plan Result	Standard Achieved
Diagnostic Dental Services	Apr 16 – Mar 17	Informational Only	34.08%	N/A
	Jul 16 – June 17	Informational Only	34.62%	N/A
	Oct 16 – Sep 17	Informational Only	34.79%	N/A
	Jan 17 – Dec 17	Informational Only	35.28%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>35.41%</b>	<b>N/A</b>

Preventive Dental Services	Apr 16 – Mar 17	Informational Only	34.67%	N/A
	Jul 16 – June 17	Informational Only	25.57%	N/A
	Oct 16 – Sep 17	Informational Only	25.91%	N/A
	Jan 17 – Dec 17	Informational Only	26.02%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>26.32%</b>	<b>N/A</b>

Restorative (Dental Fillings) Dental Services	Apr 16 – Mar 17	Informational Only	17.45%	N/A
	Jul 16 – June 17	Informational Only	17.51%	N/A
	Oct 16 – Sep 17	Informational Only	17.63%	N/A
	Jan 17 – Dec 17	Informational Only	17.84%	N/A
	<b>Apr 17 – Mar 18</b>	<b>Informational Only</b>	<b>17.57%</b>	<b>N/A</b>

- Shaded areas represent data that are newly reported this month.  
 - For questions regarding measurement periods or standards, see the Performance Monitoring Specifications

# MI HEALTH ACCOUNT



## EXECUTIVE SUMMARY REPORT

**SEPTEMBER 2018**



## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

MAXIMUS contracts with each Healthy Michigan Plan health plan to operate the MI Health Account (MIHA). The MIHA documents health care costs and payments for health plan members eligible for the Healthy Michigan Plan. Any amount the beneficiary owes to the MIHA is reflected in the quarterly statement that is mailed to the beneficiary. The MIHA quarterly statement shows the total amount owed for co-pays and/or contributions.

A co-pay is a fixed amount beneficiaries pay for a health care service. Before a beneficiary is enrolled in managed care, the beneficiary will pay any co-pays directly to their provider at the time of service. Once enrolled in managed care, co-pays for health plan covered services will be paid into the MIHA.

A contribution is the amount of money that is paid toward health care coverage. **Beneficiaries with incomes at or below 100% of the Federal Poverty Level (FPL) will NOT have a contribution.** Beneficiaries above 100% FPL are required to pay contributions that are based on income and family size. The quarterly statement informs beneficiaries what to pay for co-pays and contributions each month for the next three months, includes payment coupons with instructions on how to make a payment, as well as tips on how to reduce costs (Healthy Behavior incentives). The statement lists the services the beneficiary has received, the amount the beneficiary has paid, what amount they still need to pay, and the amount the health plan has paid.

### Quarterly Statement Mailing Guidelines

- The first quarterly statement is mailed six months after a beneficiary joins a health plan. After that, quarterly statements are sent every three months.
- A beneficiary follows his or her own enrollment quarter based on their enrollment effective date.
- Quarterly statements are mailed by the 15<sup>th</sup> calendar day of each month
- Statements are not mailed to beneficiaries if there are no health care services to display or payment due for a particular quarter.

Chart 1 displays the statement mailing activity for the past three months. It also displays the calendar year totals since January 2018 and the program totals from October 2014 to June 2018.

<b>Chart 1: Account Statement Mailing</b>					
Month Statement Mailed	Statements Mailed	Statements Requiring a Copay Only	Statements Requiring a Contribution Only	Statements Requiring a Copay and Contribution	Percentage of Statements Requiring Payment
<b>Apr-18</b>	129,675	23,005	12,220	13,154	37.31%
<b>May-18</b>	99,602	17,545	9,782	10,453	37.93%
<b>Jun-18</b>	107,068	18,859	9,254	10,854	36.39%
<b>Calendar YTD</b>	<b>677,036</b>	<b>120,942</b>	<b>62,315</b>	<b>69,746</b>	<b>37.37%</b>
<b>Program Total</b>	<b>3,930,066</b>	<b>816,640</b>	<b>347,613</b>	<b>424,440</b>	<b>40.42%</b>

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

Payments for the MIHA are due on the 15<sup>th</sup> of the month following the month they were billed.

Chart 2 displays a collection history of the number of beneficiaries that have paid co-pays and contributions. Completed quarterly payment cycles are explained and reflected in Chart 3. Calendar year totals are from January 2018. Program totals are from October 2014 through June 2018. Please note that beneficiaries that pay both co-pays and contributions will show in each chart.

<b>Chart 2: Copays &amp; Contributions Paid</b>					
<b>Copays</b>					
Statement Month	Amount of copays owed	Amount of copays paid	Percentage of copays paid	Number of beneficiaries who owed copays	Number of beneficiaries who paid copays
<b>Apr-18</b>	\$347,451.16	\$97,510.97	28%	36,159	13,285
<b>May-18</b>	\$262,946.87	\$86,913.66	33%	27,998	10,958
<b>Jun-18</b>	\$288,555.05	\$102,985.93	36%	29,713	12,631
<b>Calendar YTD</b>	<b>\$1,859,086.66</b>	<b>\$681,828.16</b>	<b>37%</b>	<b>190,688</b>	<b>82,215</b>
<b>Program Total</b>	<b>\$10,033,746.26</b>	<b>\$4,328,820.68</b>	<b>43%</b>	<b>1,241,080</b>	<b>592,232</b>
<b>Contributions</b>					
Statement Month	Amount of contributions owed	Amount of contributions paid	Percentage of contributions paid	Number of beneficiaries who owed contributions	Number of beneficiaries who paid contributions
<b>Apr-18</b>	\$1,626,144.26	\$303,125.10	19%	25,374	8,620
<b>May-18</b>	\$1,292,745.04	\$258,072.47	20%	20,235	7,386
<b>Jun-18</b>	\$1,286,953.27	\$250,364.98	19%	20,108	7,872
<b>Calendar YTD</b>	<b>\$8,426,427.29</b>	<b>\$2,169,253.50</b>	<b>26%</b>	<b>132,061</b>	<b>53,945</b>
<b>Program Total</b>	<b>\$46,182,902.57</b>	<b>\$15,671,144.10</b>	<b>34%</b>	<b>772,053</b>	<b>369,071</b>

# HEALTHY MICHIGAN PLAN



## MI HEALTH ACCOUNT: SEPTEMBER 2018

Chart 3 displays the total amount collected by completed quarter, by enrollment month. For example, beneficiaries who enrolled in May 2014 received their first quarterly statement in November 2014. These individuals had until February 2015 to pay in full, which constitutes a completed quarter. The Percentage Collected will change even in completed quarters because payments received are applied to the oldest invoice owed.

Chart 3: Quarterly Collection				
Enrollment Month	Quarterly Pay Cycles	Amount Owed	Amount Collected	Percentage Collected
'APR-14	Oct 2014 - Dec 2014	\$23,466.60	\$16,804.47	71.61%
'APR-14	Jan 2015 - Mar 2015	\$192,667.72	\$149,599.84	77.65%
'APR-14	Apr 2015 - Jun 2015	\$165,105.70	\$124,842.54	75.61%
'APR-14	Jul 2015 - Sep 2015	\$162,490.32	\$117,981.58	72.61%
'APR-14	Oct 2015 - Dec 2015	\$152,889.31	\$109,409.56	71.56%
'APR-14	Jan 2016 - Mar 2016	\$139,306.08	\$99,356.27	71.32%
'APR-14	Apr 2016 - Jun 2016	\$185,925.02	\$126,276.79	67.92%
'APR-14	Jul 2016 - Sep 2016	\$137,209.91	\$88,367.11	64.4%
'APR-14	Oct 2016 - Dec 2016	\$171,407.02	\$112,407.43	65.58%
'APR-14	Jan 2017 - Mar 2017	\$169,439.69	\$108,610.51	64.1%
'APR-14	Apr 2017 - Jun 2017	\$146,341.06	\$73,585.81	50.28%
'APR-14	Jul 2017 - Sep 2017	\$126,696.39	\$53,403.64	42.15%
'APR-14	Oct 2017 - Dec 2017	\$120,821.52	\$50,177.22	41.53%
'APR-14	Jan 2018 - Mar 2018	\$122,958.04	\$48,542.04	39.48%
'APR-14	Apr 2018 - Jun 2018	\$80,657.84	\$27,211.84	33.74%
'APR-14	Jul 2018 - Sep 2018	\$76,243.86	\$21,217.98	27.83%
'MAY-14	Nov 2014 - Jan 2015	\$35,655.43	\$28,220.21	79.15%
'MAY-14	Feb 2015 - Apr 2015	\$56,526.22	\$43,930.96	77.72%
'MAY-14	May 2015 - Jul 2015	\$45,782.47	\$35,336.98	77.18%
'MAY-14	Aug 2015 - Oct 2015	\$41,586.21	\$31,763.73	76.38%
'MAY-14	Nov 2015 - Jan 2016	\$39,437.66	\$30,083.31	76.28%
'MAY-14	Feb 2016 - Apr 2016	\$37,362.78	\$27,796.50	74.4%
'MAY-14	May 2016 - Jul 2016	\$44,794.49	\$31,828.12	71.05%
'MAY-14	Aug 2016 - Oct 2016	\$39,295.29	\$28,269.28	71.94%
'MAY-14	Nov 2016 - Jan 2017	\$44,701.12	\$32,116.70	71.85%
'MAY-14	Feb 2017 - Apr 2017	\$39,866.30	\$26,904.74	67.49%
'MAY-14	May 2017 - Jul 2017	\$35,101.38	\$19,016.45	54.18%
'MAY-14	Aug 2017 - Oct 2017	\$34,411.02	\$17,877.11	51.95%
'MAY-14	Nov 2017 - Jan 2018	\$31,232.56	\$16,523.27	52.9%
'MAY-14	Feb 2018 - Apr 2018	\$31,181.94	\$16,395.13	52.58%
'MAY-14	May 2018 - Jul 2018	\$21,654.95	\$9,431.18	43.55%
'JUN-14	Dec 2014 - Feb 2015	\$455,276.30	\$368,669.79	80.98%
'JUN-14	Mar 2015 - May 2015	\$347,530.32	\$281,064.74	80.87%
'JUN-14	Jun 2015 - Aug 2015	\$345,759.10	\$277,633.53	80.3%
'JUN-14	Sep 2015 - Nov 2015	\$326,572.87	\$255,925.14	78.37%
'JUN-14	Dec 2015 - Feb 2016	\$233,680.70	\$180,435.31	77.21%
'JUN-14	Mar 2016 - May 2016	\$262,841.97	\$201,050.53	76.49%
'JUN-14	Jun 2016 - Aug 2016	\$218,186.79	\$161,848.85	74.18%
'JUN-14	Sep 2016 - Nov 2016	\$303,178.72	\$235,463.14	77.66%
'JUN-14	Dec 2016 - Feb 2017	\$277,877.72	\$210,295.86	75.68%
'JUN-14	Mar 2017 - May 2017	\$245,185.41	\$167,061.59	68.14%
'JUN-14	Jun 2017 - Aug 2017	\$223,337.24	\$128,391.16	57.49%
'JUN-14	Sep 2017 - Nov 2017	\$217,524.08	\$122,767.21	56.44%
'JUN-14	Dec 2017 - Feb 2018	\$193,727.52	\$106,378.57	54.91%

**HEALTHY MICHIGAN PLAN  
MI HEALTH ACCOUNT: SEPTEMBER 2018**



**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'JUN-14	Mar 2018 - May 2018	\$188,055.09	\$98,239.12	52.24%
'JUN-14	Jun 2018 - Aug 2018	\$151,615.92	\$63,354.04	41.79%
'JUL-14	Jan 2015 - Mar 2015	\$339,240.00	\$262,279.70	77.31%
'JUL-14	Apr 2015 - Jun 2015	\$251,121.52	\$194,997.02	77.65%
'JUL-14	Jul 2015 - Sep 2015	\$241,129.12	\$184,725.38	76.61%
'JUL-14	Oct 2015 - Dec 2015	\$220,131.08	\$166,556.12	75.66%
'JUL-14	Jan 2016 - Mar 2016	\$194,158.09	\$146,049.58	75.22%
'JUL-14	Apr 2016 - Jun 2016	\$209,117.14	\$152,576.24	72.96%
'JUL-14	Jul 2016 - Sep 2016	\$162,266.23	\$115,473.27	71.16%
'JUL-14	Oct 2016 - Dec 2016	\$188,873.42	\$135,777.43	71.89%
'JUL-14	Jan 2017 - Mar 2017	\$179,895.07	\$124,820.19	69.38%
'JUL-14	Apr 2017 - Jun 2017	\$155,090.77	\$83,409.96	53.78%
'JUL-14	Jul 2017 - Sep 2017	\$137,055.85	\$64,337.63	46.94%
'JUL-14	Oct 2017 - Dec 2017	\$127,051.61	\$59,665.89	46.96%
'JUL-14	Jan 2018 - Mar 2018	\$125,322.53	\$55,617.61	44.38%
'JUL-14	Apr 2018 - Jun 2018	\$82,846.38	\$31,341.24	37.83%
'JUL-14	Jul 2018 - Sep 2018	\$77,809.51	\$24,046.54	30.9%
'AUG-14	Feb 2015 - Apr 2015	\$169,476.78	\$132,024.21	77.9%
'AUG-14	May 2015 - Jul 2015	\$121,394.66	\$91,372.16	75.27%
'AUG-14	Aug 2015 - Oct 2015	\$110,909.72	\$87,266.66	78.68%
'AUG-14	Nov 2015 - Jan 2016	\$103,044.07	\$79,875.32	77.52%
'AUG-14	Feb 2016 - Apr 2016	\$96,115.74	\$73,077.90	76.03%
'AUG-14	May 2016 - Jul 2016	\$103,687.65	\$73,953.68	71.32%
'AUG-14	Aug 2016 - Oct 2016	\$84,969.02	\$61,223.31	72.05%
'AUG-14	Nov 2016 - Jan 2017	\$99,617.32	\$71,995.38	72.27%
'AUG-14	Feb 2017 - Apr 2017	\$93,763.01	\$66,766.45	71.21%
'AUG-14	May 2017 - Jul 2017	\$77,442.69	\$38,451.15	49.65%
'AUG-14	Aug 2017 - Oct 2017	\$70,724.41	\$34,264.00	48.45%
'AUG-14	Nov 2017 - Jan 2018	\$65,893.39	\$32,955.11	50.01%
'AUG-14	Feb 2018 - Apr 2018	\$63,518.35	\$29,902.53	47.08%
'AUG-14	May 2018 - Jul 2018	\$50,323.49	\$18,414.50	36.59%
'SEP-14	Mar 2015 - May 2015	\$211,860.10	\$155,370.98	73.34%
'SEP-14	Jun 2015 - Aug 2015	\$147,107.56	\$108,566.61	73.8%
'SEP-14	Sep 2015 - Nov 2015	\$149,578.93	\$111,087.18	74.27%
'SEP-14	Dec 2015 - Feb 2016	\$120,277.14	\$88,624.68	73.68%
'SEP-14	Mar 2016 - May 2016	\$134,909.89	\$95,182.12	70.55%
'SEP-14	Jun 2016 - Aug 2016	\$95,799.21	\$62,069.43	64.79%
'SEP-14	Sep 2016 - Nov 2016	\$111,258.72	\$79,096.61	71.09%
'SEP-14	Dec 2016 - Feb 2017	\$109,931.26	\$77,096.76	70.13%
'SEP-14	Mar 2017 - May 2017	\$102,765.01	\$61,786.53	60.12%
'SEP-14	Jun 2017 - Aug 2017	\$85,983.31	\$40,919.41	47.59%
'SEP-14	Sep 2017 - Nov 2017	\$78,191.16	\$35,875.45	45.88%
'SEP-14	Dec 2017 - Feb 2018	\$75,228.79	\$33,951.50	45.13%
'SEP-14	Mar 2018 - May 2018	\$69,880.93	\$29,623.38	42.39%
'SEP-14	Jun 2018 - Aug 2018	\$57,296.08	\$18,888.24	32.97%
'OCT-14	Apr 2015 - Jun 2015	\$173,462.32	\$126,749.81	73.07%
'OCT-14	Jul 2015 - Sep 2015	\$125,145.83	\$94,922.56	75.85%
'OCT-14	Oct 2015 - Dec 2015	\$124,170.00	\$93,948.49	75.66%
'OCT-14	Jan 2016 - Mar 2016	\$118,739.94	\$89,270.15	75.18%
'OCT-14	Apr 2016 - Jun 2016	\$134,797.46	\$96,642.79	71.69%



**HEALTHY MICHIGAN PLAN  
MI HEALTH ACCOUNT: SEPTEMBER 2018**



**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'OCT-14	Jul 2016 - Sep 2016	\$99,337.02	\$67,523.86	67.97%
'OCT-14	Oct 2016 - Dec 2016	\$114,536.95	\$82,817.09	72.31%
'OCT-14	Jan 2017 - Mar 2017	\$111,235.57	\$78,690.52	70.74%
'OCT-14	Apr 2017 - Jun 2017	\$94,563.97	\$50,015.32	52.89%
'OCT-14	Jul 2017 - Sep 2017	\$79,597.41	\$36,589.18	45.97%
'OCT-14	Oct 2017 - Dec 2017	\$73,342.78	\$33,541.52	45.73%
'OCT-14	Jan 2018 - Mar 2018	\$71,648.22	\$31,950.58	44.59%
'OCT-14	Apr 2018 - Jun 2018	\$48,619.48	\$18,426.99	37.9%
'OCT-14	Jul 2018 - Sep 2018	\$43,366.75	\$12,182.65	28.09%
'NOV-14	May 2015 - Jul 2015	\$194,152.12	\$141,801.46	73.04%
'NOV-14	Aug 2015 - Oct 2015	\$125,654.45	\$93,616.48	74.5%
'NOV-14	Nov 2015 - Jan 2016	\$132,332.02	\$101,826.07	76.95%
'NOV-14	Feb 2016 - Apr 2016	\$133,058.25	\$99,115.39	74.49%
'NOV-14	May 2016 - Jul 2016	\$153,651.75	\$103,471.48	67.34%
'NOV-14	Aug 2016 - Oct 2016	\$116,661.31	\$77,608.07	66.52%
'NOV-14	Nov 2016 - Jan 2017	\$137,130.32	\$95,672.14	69.77%
'NOV-14	Feb 2017 - Apr 2017	\$131,898.40	\$87,556.18	66.38%
'NOV-14	May 2017 - Jul 2017	\$111,657.59	\$47,787.32	42.8%
'NOV-14	Aug 2017 - Oct 2017	\$88,834.85	\$37,595.44	42.32%
'NOV-14	Nov 2017 - Jan 2018	\$82,815.07	\$36,546.24	44.13%
'NOV-14	Feb 2018 - Apr 2018	\$82,183.16	\$33,624.36	40.91%
'NOV-14	May 2018 - Jul 2018	\$61,970.27	\$18,086.69	29.19%
'DEC-14	Jun 2015 - Aug 2015	\$104,848.89	\$78,825.27	75.18%
'DEC-14	Sep 2015 - Nov 2015	\$81,369.22	\$63,385.05	77.9%
'DEC-14	Dec 2015 - Feb 2016	\$67,139.11	\$52,829.19	78.69%
'DEC-14	Mar 2016 - May 2016	\$79,893.82	\$60,283.25	75.45%
'DEC-14	Jun 2016 - Aug 2016	\$67,467.36	\$45,969.41	68.14%
'DEC-14	Sep 2016 - Nov 2016	\$70,842.97	\$49,275.81	69.56%
'DEC-14	Dec 2016 - Feb 2017	\$69,241.73	\$48,037.38	69.38%
'DEC-14	Mar 2017 - May 2017	\$68,639.56	\$41,513.81	60.48%
'DEC-14	Jun 2017 - Aug 2017	\$57,581.91	\$25,232.17	43.82%
'DEC-14	Sep 2017 - Nov 2017	\$48,935.23	\$21,889.59	44.73%
'DEC-14	Dec 2017 - Feb 2018	\$46,650.48	\$21,145.29	45.33%
'DEC-14	Mar 2018 - May 2018	\$43,718.34	\$18,882.26	43.19%
'DEC-14	Jun 2018 - Aug 2018	\$35,477.29	\$11,549.77	32.56%
'JAN-15	Jul 2015 - Sep 2015	\$210,677.93	\$162,632.38	77.19%
'JAN-15	Oct 2015 - Dec 2015	\$169,628.60	\$130,359.72	76.85%
'JAN-15	Jan 2016 - Mar 2016	\$165,225.32	\$129,625.34	78.45%
'JAN-15	Apr 2016 - Jun 2016	\$189,831.40	\$139,851.08	73.67%
'JAN-15	Jul 2016 - Sep 2016	\$155,291.09	\$105,012.65	67.62%
'JAN-15	Oct 2016 - Dec 2016	\$160,983.05	\$114,024.39	70.83%
'JAN-15	Jan 2017 - Mar 2017	\$162,465.67	\$115,479.29	71.08%
'JAN-15	Apr 2017 - Jun 2017	\$141,838.73	\$77,210.13	54.44%
'JAN-15	Jul 2017 - Sep 2017	\$124,315.37	\$57,205.20	46.02%
'JAN-15	Oct 2017 - Dec 2017	\$111,197.43	\$50,071.69	45.03%
'JAN-15	Jan 2018 - Mar 2018	\$107,787.27	\$47,076.27	43.68%
'JAN-15	Apr 2018 - Jun 2018	\$70,164.67	\$25,860.59	36.86%
'JAN-15	Jul 2018 - Sep 2018	\$61,742.63	\$19,289.64	31.24%
'FEB-15	Aug 2015 - Oct 2015	\$205,448.19	\$158,159.33	76.98%
'FEB-15	Nov 2015 - Jan 2016	\$132,326.72	\$105,251.75	79.54%

**HEALTHY MICHIGAN PLAN  
MI HEALTH ACCOUNT: SEPTEMBER 2018**



**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'FEB-15	Feb 2016 - Apr 2016	\$146,711.13	\$118,667.90	80.89%
'FEB-15	May 2016 - Jul 2016	\$189,735.98	\$138,214.79	72.85%
'FEB-15	Aug 2016 - Oct 2016	\$151,495.77	\$107,965.08	71.27%
'FEB-15	Nov 2016 - Jan 2017	\$151,370.92	\$108,896.19	71.94%
'FEB-15	Feb 2017 - Apr 2017	\$150,614.45	\$106,349.87	70.61%
'FEB-15	May 2017 - Jul 2017	\$133,860.16	\$67,840.78	50.68%
'FEB-15	Aug 2017 - Oct 2017	\$117,905.97	\$58,817.34	49.88%
'FEB-15	Nov 2017 - Jan 2018	\$100,294.97	\$50,435.49	50.29%
'FEB-15	Feb 2018 - Apr 2018	\$96,331.24	\$45,817.56	47.56%
'FEB-15	May 2018 - Jul 2018	\$74,445.95	\$28,972.87	38.92%
'MAR-15	Sep 2015 - Nov 2015	\$220,936.51	\$159,845.09	72.35%
'MAR-15	Dec 2015 - Feb 2016	\$100,218.06	\$75,810.48	75.65%
'MAR-15	Mar 2016 - May 2016	\$109,518.25	\$85,732.68	78.28%
'MAR-15	Jun 2016 - Aug 2016	\$124,671.54	\$91,087.06	73.06%
'MAR-15	Sep 2016 - Nov 2016	\$128,902.59	\$94,577.45	73.37%
'MAR-15	Dec 2016 - Feb 2017	\$113,622.49	\$80,358.98	70.72%
'MAR-15	Mar 2017 - May 2017	\$114,774.36	\$71,101.98	61.95%
'MAR-15	Jun 2017 - Aug 2017	\$106,252.80	\$51,186.96	48.17%
'MAR-15	Sep 2017 - Nov 2017	\$95,262.51	\$44,084.72	46.28%
'MAR-15	Dec 2017 - Feb 2018	\$79,453.27	\$35,940.22	45.23%
'MAR-15	Mar 2018 - May 2018	\$75,980.67	\$34,227.08	45.05%
'MAR-15	Jun 2018 - Aug 2018	\$61,559.46	\$19,448.49	31.59%
'APR-15	Oct 2015 - Dec 2015	\$275,506.72	\$197,775.55	71.79%
'APR-15	Jan 2016 - Mar 2016	\$137,131.70	\$103,925.56	75.79%
'APR-15	Apr 2016 - Jun 2016	\$171,283.99	\$132,704.61	77.48%
'APR-15	Jul 2016 - Sep 2016	\$148,767.40	\$108,637.58	73.03%
'APR-15	Oct 2016 - Dec 2016	\$155,577.99	\$112,464.15	72.29%
'APR-15	Jan 2017 - Mar 2017	\$143,092.37	\$101,534.00	70.96%
'APR-15	Apr 2017 - Jun 2017	\$136,242.20	\$78,993.18	57.98%
'APR-15	Jul 2017 - Sep 2017	\$123,095.27	\$63,748.52	51.79%
'APR-15	Oct 2017 - Dec 2017	\$112,846.26	\$56,536.57	50.1%
'APR-15	Jan 2018 - Mar 2018	\$102,844.22	\$49,102.45	47.74%
'APR-15	Apr 2018 - Jun 2018	\$68,926.52	\$28,132.76	40.82%
'APR-15	Jul 2018 - Sep 2018	\$63,470.75	\$20,429.65	32.19%
'MAY-15	Nov 2015 - Jan 2016	\$189,579.44	\$138,352.23	72.98%
'MAY-15	Feb 2016 - Apr 2016	\$124,699.53	\$98,799.27	79.23%
'MAY-15	May 2016 - Jul 2016	\$166,421.74	\$126,821.45	76.2%
'MAY-15	Aug 2016 - Oct 2016	\$143,655.68	\$107,678.40	74.96%
'MAY-15	Nov 2016 - Jan 2017	\$140,367.50	\$101,715.18	72.46%
'MAY-15	Feb 2017 - Apr 2017	\$119,968.38	\$84,731.05	70.63%
'MAY-15	May 2017 - Jul 2017	\$117,033.12	\$63,282.72	54.07%
'MAY-15	Aug 2017 - Oct 2017	\$107,703.81	\$56,571.15	52.52%
'MAY-15	Nov 2017 - Jan 2018	\$96,678.41	\$50,209.25	51.93%
'MAY-15	Feb 2018 - Apr 2018	\$89,584.92	\$44,845.02	50.06%
'MAY-15	May 2018 - Jul 2018	\$68,364.84	\$28,212.24	41.27%
'JUN-15	Dec 2015 - Feb 2016	\$158,941.55	\$108,457.51	68.24%
'JUN-15	Mar 2016 - May 2016	\$105,883.81	\$76,918.66	72.64%
'JUN-15	Jun 2016 - Aug 2016	\$97,471.14	\$69,887.48	71.7%
'JUN-15	Sep 2016 - Nov 2016	\$109,770.22	\$78,180.57	71.22%
'JUN-15	Dec 2016 - Feb 2017	\$98,615.24	\$67,961.52	68.92%

**HEALTHY MICHIGAN PLAN  
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**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'JUN-15	Mar 2017 - May 2017	\$88,753.68	\$53,694.58	60.5%
'JUN-15	Jun 2017 - Aug 2017	\$81,607.09	\$40,571.94	49.72%
'JUN-15	Sep 2017 - Nov 2017	\$78,363.58	\$37,798.77	48.24%
'JUN-15	Dec 2017 - Feb 2018	\$69,763.46	\$32,359.15	46.38%
'JUN-15	Mar 2018 - May 2018	\$63,228.30	\$27,114.18	42.88%
'JUN-15	Jun 2018 - Aug 2018	\$52,297.41	\$17,210.41	32.91%
'JUL-15	Jan 2016 - Mar 2016	\$150,473.48	\$108,350.42	72.01%
'JUL-15	Apr 2016 - Jun 2016	\$110,622.07	\$79,800.31	72.14%
'JUL-15	Jul 2016 - Sep 2016	\$93,747.63	\$64,727.23	69.04%
'JUL-15	Oct 2016 - Dec 2016	\$96,950.37	\$65,929.19	68%
'JUL-15	Jan 2017 - Mar 2017	\$90,626.60	\$60,073.12	66.29%
'JUL-15	Apr 2017 - Jun 2017	\$77,774.39	\$39,125.40	50.31%
'JUL-15	Jul 2017 - Sep 2017	\$71,444.25	\$32,699.33	45.77%
'JUL-15	Oct 2017 - Dec 2017	\$66,359.44	\$28,760.24	43.34%
'JUL-15	Jan 2018 - Mar 2018	\$64,801.89	\$26,955.56	41.6%
'JUL-15	Apr 2018 - Jun 2018	\$42,640.66	\$15,482.13	36.31%
'JUL-15	Jul 2018 - Sep 2018	\$40,227.12	\$11,694.00	29.07%
'AUG-15	Feb 2016 - Apr 2016	\$157,305.67	\$104,229.47	66.26%
'AUG-15	May 2016 - Jul 2016	\$111,915.03	\$72,980.14	65.21%
'AUG-15	Aug 2016 - Oct 2016	\$94,322.11	\$64,333.84	68.21%
'AUG-15	Nov 2016 - Jan 2017	\$104,077.94	\$70,059.43	67.31%
'AUG-15	Feb 2017 - Apr 2017	\$92,959.15	\$58,828.00	63.28%
'AUG-15	May 2017 - Jul 2017	\$77,364.85	\$34,420.37	44.49%
'AUG-15	Aug 2017 - Oct 2017	\$72,194.00	\$31,718.11	43.93%
'AUG-15	Nov 2017 - Jan 2018	\$65,800.87	\$28,394.16	43.15%
'AUG-15	Feb 2018 - Apr 2018	\$63,488.38	\$26,220.43	41.3%
'AUG-15	May 2018 - Jul 2018	\$46,582.70	\$14,988.52	32.18%
'SEP-15	Mar 2016 - May 2016	\$125,614.62	\$83,851.13	66.75%
'SEP-15	Jun 2016 - Aug 2016	\$79,974.80	\$49,691.77	62.13%
'SEP-15	Sep 2016 - Nov 2016	\$74,051.97	\$51,092.43	69%
'SEP-15	Dec 2016 - Feb 2017	\$77,471.28	\$52,061.20	67.2%
'SEP-15	Mar 2017 - May 2017	\$74,496.26	\$43,324.55	58.16%
'SEP-15	Jun 2017 - Aug 2017	\$61,935.49	\$26,333.73	42.52%
'SEP-15	Sep 2017 - Nov 2017	\$56,680.31	\$24,261.99	42.8%
'SEP-15	Dec 2017 - Feb 2018	\$53,426.85	\$22,137.19	41.43%
'SEP-15	Mar 2018 - May 2018	\$49,414.25	\$19,073.24	38.6%
'SEP-15	Jun 2018 - Aug 2018	\$39,037.20	\$10,874.86	27.86%
'OCT-15	Apr 2016 - Jun 2016	\$144,847.96	\$87,411.96	60.35%
'OCT-15	Jul 2016 - Sep 2016	\$88,004.00	\$56,548.83	64.26%
'OCT-15	Oct 2016 - Dec 2016	\$95,077.55	\$64,199.53	67.52%
'OCT-15	Jan 2017 - Mar 2017	\$93,161.50	\$61,060.57	65.54%
'OCT-15	Apr 2017 - Jun 2017	\$85,376.41	\$40,796.09	47.78%
'OCT-15	Jul 2017 - Sep 2017	\$68,881.20	\$26,727.06	38.8%
'OCT-15	Oct 2017 - Dec 2017	\$64,795.91	\$26,857.16	41.45%
'OCT-15	Jan 2018 - Mar 2018	\$62,642.40	\$25,195.09	40.22%
'OCT-15	Apr 2018 - Jun 2018	\$41,229.71	\$13,153.50	31.9%
'OCT-15	Jul 2018 - Sep 2018	\$34,984.70	\$8,946.32	25.57%
'NOV-15	May 2016 - Jul 2016	\$171,584.00	\$103,876.91	60.54%
'NOV-15	Aug 2016 - Oct 2016	\$115,267.42	\$73,195.61	63.5%
'NOV-15	Nov 2016 - Jan 2017	\$127,646.85	\$81,995.63	64.24%

**HEALTHY MICHIGAN PLAN  
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**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'NOV-15	Feb 2017 - Apr 2017	\$120,842.94	\$72,345.77	59.87%
'NOV-15	May 2017 - Jul 2017	\$107,693.99	\$39,519.35	36.7%
'NOV-15	Aug 2017 - Oct 2017	\$75,769.78	\$29,426.54	38.84%
'NOV-15	Nov 2017 - Jan 2018	\$66,900.75	\$27,850.32	41.63%
'NOV-15	Feb 2018 - Apr 2018	\$67,197.19	\$26,281.86	39.11%
'NOV-15	May 2018 - Jul 2018	\$50,010.79	\$14,203.58	28.4%
'DEC-15	Jun 2016 - Aug 2016	\$157,160.97	\$96,041.47	61.11%
'DEC-15	Sep 2016 - Nov 2016	\$125,968.76	\$80,521.35	63.92%
'DEC-15	Dec 2016 - Feb 2017	\$128,194.10	\$82,464.93	64.33%
'DEC-15	Mar 2017 - May 2017	\$132,840.80	\$69,999.75	52.69%
'DEC-15	Jun 2017 - Aug 2017	\$112,981.08	\$43,452.83	38.46%
'DEC-15	Sep 2017 - Nov 2017	\$82,706.00	\$31,884.03	38.55%
'DEC-15	Dec 2017 - Feb 2018	\$78,018.13	\$30,433.47	39.01%
'DEC-15	Mar 2018 - May 2018	\$76,243.79	\$28,871.73	37.87%
'DEC-15	Jun 2018 - Aug 2018	\$58,991.98	\$16,708.74	28.32%
'JAN-16	Jul 2016 - Sep 2016	\$202,626.20	\$129,995.56	64.16%
'JAN-16	Oct 2016 - Dec 2016	\$160,180.95	\$103,984.93	64.92%
'JAN-16	Jan 2017 - Mar 2017	\$153,587.60	\$102,140.62	66.5%
'JAN-16	Apr 2017 - Jun 2017	\$143,954.19	\$72,412.24	50.3%
'JAN-16	Jul 2017 - Sep 2017	\$120,832.31	\$51,195.41	42.37%
'JAN-16	Oct 2017 - Dec 2017	\$97,992.62	\$41,926.29	42.79%
'JAN-16	Jan 2018 - Mar 2018	\$100,624.66	\$42,510.39	42.25%
'JAN-16	Apr 2018 - Jun 2018	\$66,769.78	\$23,950.34	35.87%
'JAN-16	Jul 2018 - Sep 2018	\$55,999.50	\$16,629.97	29.7%
'FEB-16	Aug 2016 - Oct 2016	\$274,172.88	\$186,659.94	68.08%
'FEB-16	Nov 2016 - Jan 2017	\$214,156.61	\$146,175.10	68.26%
'FEB-16	Feb 2017 - Apr 2017	\$195,120.68	\$130,256.57	66.76%
'FEB-16	May 2017 - Jul 2017	\$182,752.51	\$92,127.20	50.41%
'FEB-16	Aug 2017 - Oct 2017	\$152,981.64	\$74,755.76	48.87%
'FEB-16	Nov 2017 - Jan 2018	\$121,943.17	\$60,023.87	49.22%
'FEB-16	Feb 2018 - Apr 2018	\$117,000.56	\$56,064.66	47.92%
'FEB-16	May 2018 - Jul 2018	\$87,638.68	\$32,676.67	37.29%
'MAR-16	Sep 2016 - Nov 2016	\$246,860.90	\$163,570.20	66.26%
'MAR-16	Dec 2016 - Feb 2017	\$175,686.85	\$119,398.91	67.96%
'MAR-16	Mar 2017 - May 2017	\$170,642.04	\$97,416.83	57.09%
'MAR-16	Jun 2017 - Aug 2017	\$159,651.51	\$70,168.96	43.95%
'MAR-16	Sep 2017 - Nov 2017	\$137,963.99	\$57,818.57	41.91%
'MAR-16	Dec 2017 - Feb 2018	\$109,357.04	\$44,188.69	40.41%
'MAR-16	Mar 2018 - May 2018	\$103,863.69	\$41,416.68	39.88%
'MAR-16	Jun 2018 - Aug 2018	\$81,483.76	\$23,499.99	28.84%
'APR-16	Oct 2016 - Dec 2016	\$235,429.98	\$145,695.19	61.88%
'APR-16	Jan 2017 - Mar 2017	\$183,063.45	\$116,326.54	63.54%
'APR-16	Apr 2017 - Jun 2017	\$180,526.49	\$84,694.87	46.92%
'APR-16	Jul 2017 - Sep 2017	\$158,161.35	\$62,857.67	39.74%
'APR-16	Oct 2017 - Dec 2017	\$132,730.65	\$51,647.91	38.91%
'APR-16	Jan 2018 - Mar 2018	\$116,424.16	\$44,743.60	38.43%
'APR-16	Apr 2018 - Jun 2018	\$82,243.72	\$26,229.11	31.89%
'APR-16	Jul 2018 - Sep 2018	\$71,878.24	\$17,084.84	23.77%
'MAY-16	Nov 2016 - Jan 2017	\$239,327.02	\$145,378.51	60.74%
'MAY-16	Feb 2017 - Apr 2017	\$183,831.07	\$107,393.47	58.42%

**HEALTHY MICHIGAN PLAN  
MI HEALTH ACCOUNT: SEPTEMBER 2018**



**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'MAY-16	May 2017 - Jul 2017	\$173,134.85	\$68,046.30	39.3%
'MAY-16	Aug 2017 - Oct 2017	\$153,513.47	\$57,381.03	37.38%
'MAY-16	Nov 2017 - Jan 2018	\$125,764.99	\$47,192.56	37.52%
'MAY-16	Feb 2018 - Apr 2018	\$111,020.63	\$40,902.05	36.84%
'MAY-16	May 2018 - Jul 2018	\$82,678.02	\$23,644.70	28.6%
'JUN-16	Dec 2016 - Feb 2017	\$146,815.66	\$93,157.97	63.45%
'JUN-16	Mar 2017 - May 2017	\$123,038.15	\$64,446.59	52.38%
'JUN-16	Jun 2017 - Aug 2017	\$112,623.15	\$47,015.33	41.75%
'JUN-16	Sep 2017 - Nov 2017	\$105,845.61	\$42,943.28	40.57%
'JUN-16	Dec 2017 - Feb 2018	\$92,783.24	\$35,749.22	38.53%
'JUN-16	Mar 2018 - May 2018	\$80,540.39	\$28,298.97	35.14%
'JUN-16	Jun 2018 - Aug 2018	\$67,141.79	\$18,091.15	26.94%
'JUL-16	Jan 2017 - Mar 2017	\$172,377.92	\$105,275.52	61.07%
'JUL-16	Apr 2017 - Jun 2017	\$148,212.17	\$65,446.55	44.16%
'JUL-16	Jul 2017 - Sep 2017	\$131,841.94	\$48,024.46	36.43%
'JUL-16	Oct 2017 - Dec 2017	\$121,394.83	\$42,379.06	34.91%
'JUL-16	Jan 2018 - Mar 2018	\$114,424.43	\$39,862.95	34.84%
'JUL-16	Apr 2018 - Jun 2018	\$68,491.64	\$20,922.01	30.55%
'JUL-16	Jul 2018 - Sep 2018	\$65,497.70	\$15,776.71	24.09%
'AUG-16	Feb 2017 - Apr 2017	\$186,611.24	\$82,512.33	44.22%
'AUG-16	May 2017 - Jul 2017	\$159,845.33	\$62,305.56	38.98%
'AUG-16	Aug 2017 - Oct 2017	\$144,964.34	\$56,426.24	38.92%
'AUG-16	Nov 2017 - Jan 2018	\$130,755.64	\$47,944.76	36.67%
'AUG-16	Feb 2018 - Apr 2018	\$119,307.33	\$39,918.91	33.46%
'AUG-16	May 2018 - Jul 2018	\$82,774.06	\$21,041.41	25.42%
'SEP-16	Mar 2017 - May 2017	\$163,819.45	\$67,820.98	41.4%
'SEP-16	Jun 2017 - Aug 2017	\$126,172.32	\$47,284.07	37.48%
'SEP-16	Sep 2017 - Nov 2017	\$107,860.86	\$42,074.61	39.01%
'SEP-16	Dec 2017 - Feb 2018	\$100,603.49	\$36,919.18	36.7%
'SEP-16	Mar 2018 - May 2018	\$91,796.70	\$30,960.07	33.73%
'SEP-16	Jun 2018 - Aug 2018	\$67,879.93	\$16,686.57	24.58%
'OCT-16	Apr 2017 - Jun 2017	\$208,294.91	\$80,142.63	38.48%
'OCT-16	Jul 2017 - Sep 2017	\$161,151.22	\$57,048.05	35.4%
'OCT-16	Oct 2017 - Dec 2017	\$138,376.71	\$49,584.39	35.83%
'OCT-16	Jan 2018 - Mar 2018	\$130,556.80	\$45,238.62	34.65%
'OCT-16	Apr 2018 - Jun 2018	\$83,646.02	\$23,981.07	28.67%
'OCT-16	Jul 2018 - Sep 2018	\$70,393.74	\$14,737.48	20.94%
'NOV-16	May 2017 - Jul 2017	\$179,610.35	\$65,315.25	36.36%
'NOV-16	Aug 2017 - Oct 2017	\$121,970.20	\$41,823.31	34.29%
'NOV-16	Nov 2017 - Jan 2018	\$106,134.60	\$38,296.83	36.08%
'NOV-16	Feb 2018 - Apr 2018	\$103,550.22	\$34,682.98	33.49%
'NOV-16	May 2018 - Jul 2018	\$76,768.62	\$18,846.92	24.55%
'DEC-16	Jun 2017 - Aug 2017	\$170,317.67	\$58,660.98	34.44%
'DEC-16	Sep 2017 - Nov 2017	\$111,933.53	\$38,504.54	34.4%
'DEC-16	Dec 2017 - Feb 2018	\$99,865.15	\$33,950.22	34%
'DEC-16	Mar 2018 - May 2018	\$98,700.51	\$29,893.63	30.29%
'DEC-16	Jun 2018 - Aug 2018	\$79,676.54	\$17,921.57	22.49%
'JAN-17	Jul 2017 - Sep 2017	\$234,209.48	\$91,020.81	38.86%
'JAN-17	Oct 2017 - Dec 2017	\$161,897.96	\$61,127.73	37.76%
'JAN-17	Jan 2018 - Mar 2018	\$158,716.32	\$60,171.63	37.91%

**HEALTHY MICHIGAN PLAN  
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**Chart 3: Quarterly Collection**

<b>Enrollment Month</b>	<b>Quarterly Pay Cycles</b>	<b>Amount Owed</b>	<b>Amount Collected</b>	<b>Percentage Collected</b>
'JAN-17	Apr 2018 - Jun 2018	\$108,477.72	\$34,155.38	31.49%
'JAN-17	Jul 2018 - Sep 2018	\$94,791.77	\$21,525.47	22.71%
'FEB-17	Aug 2017 - Oct 2017	\$207,495.61	\$85,665.08	41.29%
'FEB-17	Nov 2017 - Jan 2018	\$147,035.12	\$59,678.15	40.59%
'FEB-17	Feb 2018 - Apr 2018	\$134,604.63	\$54,303.31	40.34%
'FEB-17	May 2018 - Jul 2018	\$102,565.24	\$31,553.62	30.76%
'MAR-17	Sep 2017 - Nov 2017	\$213,336.49	\$95,394.37	44.72%
'MAR-17	Dec 2017 - Feb 2018	\$154,721.22	\$65,167.30	42.12%
'MAR-17	Mar 2018 - May 2018	\$145,891.63	\$60,403.88	41.4%
'MAR-17	Jun 2018 - Aug 2018	\$116,634.32	\$36,202.75	31.04%
'APR-17	Oct 2017 - Dec 2017	\$290,560.11	\$108,143.35	37.22%
'APR-17	Jan 2018 - Mar 2018	\$222,146.48	\$81,136.05	36.52%
'APR-17	Apr 2018 - Jun 2018	\$147,573.74	\$48,185.25	32.65%
'APR-17	Jul 2018 - Sep 2018	\$129,498.14	\$30,754.71	23.75%
'MAY-17	Nov 2017 - Jan 2018	\$171,485.94	\$64,489.40	37.61%
'MAY-17	Feb 2018 - Apr 2018	\$135,297.12	\$48,314.16	35.71%
'MAY-17	May 2018 - Jul 2018	\$98,352.68	\$28,827.25	29.31%
'JUN-17	Dec 2017 - Feb 2018	\$157,852.01	\$59,370.43	37.61%
'JUN-17	Mar 2018 - May 2018	\$123,433.21	\$41,893.57	33.94%
'JUN-17	Jun 2018 - Aug 2018	\$95,880.68	\$25,425.35	26.52%
'JUL-17	Jan 2018 - Mar 2018	\$217,503.34	\$72,524.75	33.34%
'JUL-17	Apr 2018 - Jun 2018	\$97,122.63	\$28,572.04	29.42%
'JUL-17	Jul 2018 - Sep 2018	\$105,615.38	\$22,419.82	21.23%
'AUG-17	Feb 2018 - Apr 2018	\$137,380.97	\$45,602.62	33.19%
'AUG-17	May 2018 - Jul 2018	\$72,547.32	\$21,318.53	29.39%
'SEP-17	Mar 2018 - May 2018	\$158,805.66	\$46,330.91	29.17%
'SEP-17	Jun 2018 - Aug 2018	\$91,906.39	\$22,398.69	24.37%
'OCT-17	Apr 2018 - Jun 2018	\$119,968.18	\$33,287.37	27.75%
'OCT-17	Jul 2018 - Sep 2018	\$88,225.69	\$17,213.46	19.51%
'NOV-17	May 2018 - Jul 2018	\$121,534.12	\$31,512.80	25.93%
'DEC-17	Jun 2018 - Aug 2018	\$129,901.96	\$29,999.33	23.09%
'JAN-18	Jul 2018 - Sep 2018	\$130,388.50	\$33,280.18	25.52%

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

Payments for the MIHA can be made one of two ways. Beneficiaries can mail a check or money order to the MIHA payment address. The payment coupon is not required to send in a payment by mail. Beneficiaries also have the option to pay online using a bank account.

Chart 4 displays a three month history of the percentage of payments made into the MIHA.

<b>Chart 4: Methods of Payment</b>			
	<b>Apr-18</b>	<b>May-18</b>	<b>Jun-18</b>
<b>Percent Paid Online</b>	32.93%	34.88%	32.17%
<b>Percent Paid by Mail</b>	67.07%	65.12%	67.83%

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

### Adjustment Activities

Beneficiaries are not required to pay co-pays and/or contributions when specific criteria are met. In these cases, an adjustment is made to the beneficiary's quarterly statement.

This includes populations that are exempt; beneficiaries that are under age 21, pregnant, in hospice and Native American beneficiaries. It also includes beneficiaries who were not otherwise exempt, but have met their five percent maximum cost share and beneficiaries whose Federal Poverty Level is no longer in a range that requires a contribution.

Chart 5A shows the number of beneficiaries that met these adjustments for the specified month, calendar year since January 2018 and the cumulative total for the program from October 2014 through June 2018.

<b>Chart 5A: Adjustment Activities</b>						
	Apr-18		May-18		Jun-18	
	#	Total \$	#	Total \$	#	Total \$
<b>Beneficiary is under age 21</b>	624	\$38,477.00	576	\$36,528.00	580	\$36,084.00
<b>Pregnancy</b>	172	\$4,782.12	189	\$4,956.15	127	\$3,199.41
<b>Hospice</b>	0	\$0.00	0	\$0.00	0	\$0.00
<b>Native American</b>	17	\$1,582.33	8	\$1,491.00	22	\$2,404.00
<b>Five Percent Cost Share Limit Met</b>	39,525	\$346,584.49	28,782	\$293,413.78	34,154	\$397,185.89
<b>FPL No longer &gt;100% - Contribution</b>	0	\$0.00	0	\$0.00	0	\$0.00
<b>TOTAL</b>	<b>40,338</b>	<b>\$391,425.94</b>	<b>29,555</b>	<b>\$336,388.93</b>	<b>34,883</b>	<b>\$438,873.30</b>
	Apr-18 to Jun-18		Calendar YTD		Program YTD	
	#	Total \$	#	Total \$	#	Total \$
<b>Beneficiary is under age 21</b>	1,780	\$111,089.00	3,432	\$211,626.00	23,282	\$1,340,804.29
<b>Pregnancy</b>	488	\$12,937.68	720	\$19,871.62	10,134	\$245,370.74
<b>Hospice</b>	0	\$0.00	0	\$0.00	0	\$0.00
<b>Native American</b>	47	\$5,477.33	97	\$10,990.33	954	\$70,079.67
<b>Five Percent Cost Share Limit Met</b>	102,461	\$1,037,184.16	206,907	\$2,007,052.35	1,283,527	\$14,007,574.13
<b>FPL No longer &gt;100% - Contribution</b>	0	\$0.00	1	\$63.00	286	\$10,467.69
<b>TOTAL</b>	<b>104,776</b>	<b>\$1,166,688.17</b>	<b>211,157</b>	<b>\$2,249,603.30</b>	<b>1,318,183</b>	<b>\$15,674,296.52</b>



## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

### Healthy Behavior Incentives

Beneficiaries may qualify for reductions in co-pays and/or contributions due to Healthy Behavior incentives. All health plans offer enrolled beneficiaries financial incentives that reward healthy behaviors and personal responsibility. To be eligible for incentives a beneficiary must first complete a health risk assessment (HRA) with their primary care provider (PCP) and agree to address or maintain health behaviors.

*Co-pays* – Beneficiaries can receive a 50% reduction in co-pays once they have paid 2% of their income in co-pays AND agree to address or maintain healthy behaviors.

*Contributions* - Beneficiaries can receive a 50% reduction in contributions if they complete an HRA with a PCP attestation AND agree to address or maintain healthy behaviors.

*Gift Cards* – Beneficiaries at or below 100% FPL receive a \$50.00 gift card if they complete an HRA with a PCP attestation AND agree to address or maintain healthy behaviors.

Chart 5B shows the number of beneficiaries that qualified for a reduction in co-pays and/or contributions due to Healthy Behavior incentives for the specified month, calendar year since January 2018 and the cumulative total for the program from October 2014 through June 2018.

<b>Chart 5B: Healthy Behaviors</b>						
	Apr-18		May-18		Jun-18	
	#	Total \$	#	Total \$	#	Total \$
<b>Co-pay</b>	2,372	\$12,056.11	1,828	\$9,425.66	2,200	\$11,591.67
<b>Contribution</b>	7,292	\$235,614.00	6,224	\$201,991.00	6,949	\$226,753.50
<b>Gift Cards</b>	3,030	n/a	2,826	n/a	3,326	n/a
<b>TOTAL</b>	<b>12,694</b>	<b>\$247,670.11</b>	<b>10,878</b>	<b>\$211,416.66</b>	<b>12,475</b>	<b>\$238,345.17</b>
	Apr 18 to Jun-18		Calendar YTD		Program YTD	
	#	Total \$	#	Total \$	#	Total \$
<b>Co-pay</b>	6,400	\$33,073.44	9,429	\$49,786.18	48,766	\$274,730.30
<b>Contribution</b>	20,465	\$664,358.50	24,944	\$815,503.50	99,109	\$3,250,971.27
<b>Gift Cards</b>	9,182	n/a	17,644	n/a	149,593	n/a
<b>TOTAL</b>	<b>36,047</b>	<b>\$697,431.94</b>	<b>52,017</b>	<b>\$865,289.68</b>	<b>297,468</b>	<b>\$3,525,701.57</b>

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

Typically, beneficiaries will pay a co-pay for the following services:

- Some Physician Office Visits (including free standing Urgent Care Centers)
- Outpatient Hospital Clinic Visit
- Outpatient Non-Emergent ER Visit (co-pay not required for emergency services)
- Inpatient Hospital Stay (co-pay not required for emergency admissions)
- Pharmacy (brand name and generic)
- Vision Services
- Dental Visits
- Chiropractic Visits
- Hearing Aids
- Podiatric Visits

If a beneficiary receives any of the above services for a chronic condition, the co-pay will be waived and the beneficiary will not be billed. This promotes greater access to high value services that prevent the progression of and complications related to chronic disease.

Chart 6 shows the number of beneficiaries whose co-pays were waived and the dollar amount waived due to receiving services for chronic conditions. Co-pay adjustments for high value services are processed quarterly based on the beneficiaries' individual enrollment and statement cycles.

<b>Chart 6: Waived Copays for High Value Services</b>		
Month	# of Beneficiaries with Copays Waived	Total Dollar Amount Waived
<b>Apr-18</b>	68,740	\$676,890
<b>May-18</b>	50,906	\$477,013
<b>Jun-18</b>	59,257	\$577,854
<b>Calendar YTD</b>	<b>365,820</b>	<b>\$3,671,372</b>
<b>Program Total</b>	<b>1,204,084</b>	<b>\$11,326,672</b>

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

Beneficiaries who do not pay three consecutive months they have been billed co-pays or contributions or who have not paid at least 50% of the total billed amount in the past 12 months, are considered “consistently failing to pay (CFP)” status. Once a beneficiary is in CFP status, the following language is added to the quarterly statement: “If your account is overdue, you may have a penalty. For example, if you have a healthy behavior reduction, you could lose it. Your information may also be sent to the Michigan Department of Treasury. They can take your overdue amount from your tax refund or future lottery winnings. Your doctor cannot refuse to see you because of an overdue amount.” Beneficiaries that are in CFP status and have a total amount owed of at least \$50 can be referred to the Department of Treasury for collection.

Chart 7 displays the past due collection history and the number of beneficiaries that have past due balances that can be collected through the Department of Treasury. These numbers are cumulative from quarter to quarter.

<b>Chart 7: Past Due Collection Amounts</b>		
<b>Month</b>	<b># of Beneficiaries with Past Due Co-pays/Contributions</b>	<b># of Beneficiaries with Past Due Co-pays/Contributions that Can be Sent to Treasury</b>
<b>Apr-18</b>	208,946	91,247
<b>May-18</b>	213,500	92,258
<b>Jun-18</b>	217,203	93,978

Chart 8 displays the total amount of past due invoices according to the length of time the invoice has been outstanding. Each length of time displays the unique number of beneficiaries for that time period. The total number of delinquent beneficiaries is also listed along with the corresponding delinquent amount owed.

<b>Chart 8: Delinquent Copay and Contribution Amounts by Aging Category</b>						
<b>Days</b>	<b>0-30 Days</b>	<b>31-60 Days</b>	<b>61-90 Days</b>	<b>91-120 Days</b>	<b>&gt;120 Days</b>	<b>TOTAL</b>
<b>Amount Due</b>	\$881,592.37	\$866,863.66	\$839,375.17	\$806,739.11	\$16,640,424.70	<b>\$20,034,995.01</b>
<b>Number of Beneficiaries That Owe</b>	69,631	65,345	61,918	58,025	220,760	<b>251,443</b>

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

Beneficiaries are mailed a letter that informs them of the amount that could be collected by the Department of Treasury. This pre-offset notice is mailed each year in July. Beneficiaries are given 30 days from the date of the letter to make a payment or file a dispute with the Department of Health and Human Services (DHHS) for the amount owed.

Chart 9 displays the beneficiary payment activity as a result of the pre-offset notice.

<b>Chart 9: Pre-Offset Notices</b>				
Month/Year	# of Beneficiaries that Received an Offset Notice	Total Amount Owed	# of Beneficiaries that Paid Following Pre-Offset Notice	Total Amount Collected
<b>Jul-15</b>	5,893	\$589,770.20	2,981	\$78,670.02
<b>Jul-16</b>	41,460	\$5,108,153.13	3,832	\$404,921.47
<b>Jul-17</b>	68,201	\$10,049,454.41	19,071	\$2,339,095.79
<b>Jul-18</b>	90,926	\$15,763,446.50	7,189	\$854,961.00
<b>Calendar YTD</b>	<b>90,926</b>	<b>\$15,763,446.50</b>	<b>7,189</b>	<b>\$854,961.00</b>
<b>Program Total</b>	<b>206,480</b>	<b>\$31,510,824.24</b>	<b>33,073</b>	<b>\$3,677,648.28</b>

Beneficiaries are referred to the Department of Treasury each year in November for income tax refund or lottery winnings offset if they still owe at least \$50 following the pre-offset notice.

Chart 10 displays the number of beneficiaries that were referred to Treasury.

<b>Chart 10: Offsets Sent to Treasury</b>		
Month	# of Beneficiaries Sent to Treasury for Collection	Total Amount Sent to Treasury for Collection
<b>Nov-15</b>	4,635	\$460,231.19
<b>Nov-16</b>	31,932	\$3,946,091.28
<b>Nov-17</b>	49,857	\$7,178,042.86

## HEALTHY MICHIGAN PLAN MI HEALTH ACCOUNT: SEPTEMBER 2018

The Department of Treasury may offset tax refunds or lottery winnings up to the amount referred to them from the MI Health Account.

Chart 11 displays collection activities by the Department of Treasury.

<b>Chart 11: Collected by Treasury</b>						
Tax Year	Collected by Taxes		Collected by Lottery		Total Collected	
	#	Total	#	Total	#	Total
<b>2016</b>	2,151	\$207,873.10	7	\$485.67	2,158	\$208,358.77
<b>2017</b>	19,401	\$2,186,302.74	68	\$7,926.14	19,469	\$2,194,228.88
<b>2018</b>	26,264	\$3,257,217.32	86	\$13,038.91	26,350	\$3,270,256.23
<b>Calendar YTD</b>	<b>26,264</b>	<b>\$3,257,217.32</b>	<b>86</b>	<b>\$13,038.91</b>	<b>26,350</b>	<b>\$3,270,256.23</b>
<b>Program Total</b>	<b>47,816</b>	<b>\$5,651,393.16</b>	<b>161</b>	<b>\$21,450.72</b>	<b>47,977</b>	<b>\$5,672,843.88</b>