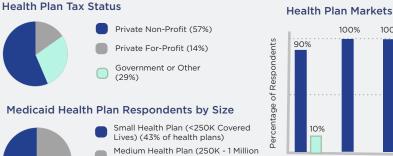


2022 Annual Medicaid MCO Survey **Value-Based Purchasing**

Note: VBP - Value-Based Purchasing, APM - Alternative Payment Model

Methods and Overview

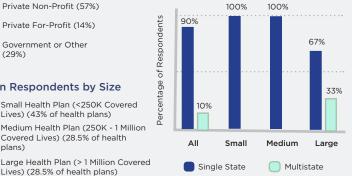
In its fifth year, the 2022 survey findings represent health plan data from almost every state with Medicaid managed care. The annual surveys collected information at the parent company/corporate levels and are intended to equip Medicaid stakeholders with the information needed to accurately articulate the national narrative about Medicaid managed care.



plans)

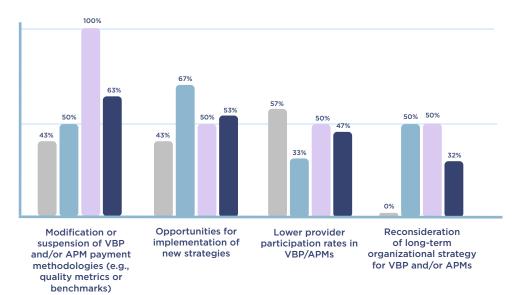
Covered Lives) (28.5% of health

Lives) (28.5% of health plans)



Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."

Impact of the COVID-19 Pandemic on VBP and APM Strategies



Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."

Percentage of Medicaid Health Plans Completing Survey in 2022 that Used VBP or APM

Small: <250,000 covered lives 78%

Medium: 250,001 -1 million covered lives

100%

Large: > 1.000.000 covered lives

100%

All Medicaid health plan respondents

90%

Payment Strategies used by **Medicaid Health Plans**

Payment incentives based on performance measures related to access to care

74%



Enhanced payment rates for providers financially impacted by the COVID-19 pandemic

58%



Enhanced payment rates for hard-to-recruit provider types

47%



Enhanced payment rates for providers in rural or frontier areas

42%



Payment incentives for availability of same-day or after-hours appointments

37%



Incentive payments for addressing health disparities

32%



Incentive payments for addressing health inequities

32%

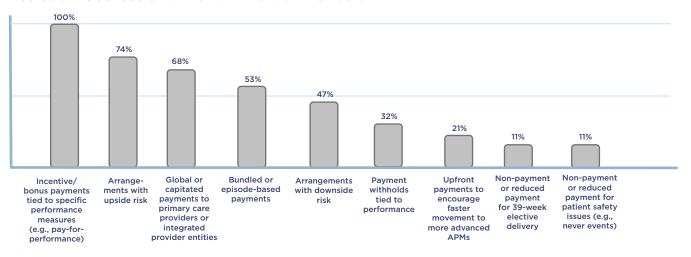
Source: Institute for Medicaid Innovation, "2022 Annual Medicaid Health Plan Survey.





IMI 2022 Annual Medicaid MCO Survey | Value-Based Purchasing

Medicaid MCOs' Use of VBP and APMs with Providers



Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."

Changes to State Requirements and Guidance That Would Assist Medicaid Health Plans to Effectively Implement VBP and/or APMs

Changes	Percentage of Health Plans			
Better education for providers on state and health plan expectations	79%			
Reporting of consistent metrics	68%			
More flexibility in the design of VBP components (e.g., member attribution, benchmarking)	47%			
Removal of data sharing restrictions	47%			
Provision of additional policy and/or fiscal levers for MCOs to ensure provider engagement in VBP models	42%			
Policies to facilitate data sharing between payers and providers	42%			
Streamlined VBP design across payers, including aligned performance measures	42%			
Better education for health plans on state expectations for VBP	37%			
Removal of requirements that limit VBP and APM model development	37%			
Development of a multi-year proposed VBP strategy to allow for longer term contracts with Medicaid	32%			
Multi-payer alignment in VBP strategies	32%			

Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."





IMI 2022 Annual Medicaid MCO Survey | Value-Based Purchasing

Percentage of Medicaid Health Plans Completing Survey that Used VBP or APM, by Year

	2017	2018	2019	2020	2021
All Health Plans	92%	95%	93%	90%*	90%
Small Health Plans	100%	86%	80%	70%	78%
Medium Health Plans	86%	100%	100%	100%	100%
Large Health Plans	100%	100%	100%	71%	100%

Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."

Operational Barriers Experienced and Addressed by Medicaid Health Plans

Operational Barrier	2017	2018	2019	2020	2021
Data reporting to providers	92%	53%	86%	83%	63%
IT system preparedness	92%	47%	71%	50%	47%
Support to providers to make determinations on VBP/APM	92%	41%	71%	39%	37%
Pricing VBP/APM	77%	41%	43%	39%	47%
Tracking quality and reporting within new structure	85%	35%	71%	50%	53%
Contract requirements on VBP/APM approaches	85%	24%	50%	44%	47%
Human resources	-	-	-	-	21%

Note: Response options not included in prior years are noted with a dash (-).

Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."

External Barriers Influencing Medicaid Health Plans' Adoption and Innovation in VBP and/or APMs

External Barrier	2017	2018	2019	2020	2021
Provider readiness and willingness	100%	88%	100%	94%	89%
State requirements limiting VBP/APM models	85%	41%	14%	39%	26%
Medicaid payment rates	92%	65%	57%	67%	58%
Impact of 42 CFR on limiting access to behavioral health data	100%	24%	21%	17%	37%
Uncertain or shifting federal policy requirements/priorities	85%	29%	29%	11%	5%
Uncertain or shifting state policy requirements/priorities	92%	35%	43%	22%	32%
Health plan provider data sharing capabilities	-	-	-	-	58%
Variation in payment models across payers	-	-	-	-	32%
COVID-19 pandemic	-	-	-	-	84%
Lack of consistent evidence of efficacy of VBP and/or APM models	-	-	-	-	26%

Note: Response options not included in prior years are noted with a dash (-).

Source: Institute for Medicaid Innovation. "2022 Annual Medicaid Health Plan Survey."



^{*} Note: Updated February 24th, 2023.