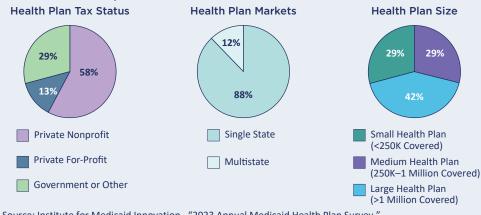


## **Annual Medicaid MCO Survey High-Risk Care Coordination**

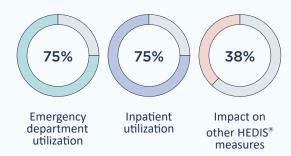
#### **Demographics**

In its sixth year, the 2023 survey findings represent health plan data from almost every state with Medicaid managed care. The annual survey collected information at the parent company/corporate levels and is intended to equip Medicaid stakeholders with the information needed to accurately articulate the national narrative about Medicaid managed care. The survey respondents are representative of the national demographics of all Medicaid health plans.



Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

### **HEDIS® Measures Health Plans Currently Use to Track Effectiveness**



Note: HEDIS® - Healthcare Effectiveness Data and Information Set.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Non-HEDIS® Measures Health Plans Currently Use to Track Effectiveness in High-Risk Care Coordination	All Health Plans
Emergency department utilization (unrelated to HEDIS® measure)	88%
Inpatient utilization (unrelated to HEDIS® measure)	88%
Patient experience survey results (e.g., CAHPS - Consumer Assessment of Healthcare Providers and Systems)	88%
Total spending	79%
Preventive care utilization	71%
Outpatient primary care utilization	71%
Complaints and grievances	67%
Provider experience survey results	63%
Other (includes member surveys, medication adherence, and enrollee advisory council)	25%

Note: HEDIS® - Healthcare Effectiveness Data and Information Set.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

### Medicaid Health Plan Staff Titles for **Nonclinical High-Risk Care Coordination** Team Members

realli Mellik	JC13	•			
Community hea	alth w	ork/	er	83%	
Health educato	r		63%		
Treatti educato	'		0370		
	38	%	Perinatal comm	nunity health	worker
3	3%	Pe	er support work	er	
25%	Dou	a			
25%	Othe	r*			

Note: Other\* includes case management assistant, community health navigator, case management outreach coordinator, member advocate, care coordinator, outreach coordinator, health care guide, wellness guide, social worker I/II. Four percent (4%) of health plans selected none.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

# Additional Information or Categories of Data That State Medicaid Agencies Could Provide to Help Health Plans Better Administer High-Risk Care Coordination

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	General Background Data		
<b>*</b>	Gender identity	92%	
•	Contact data (e.g., phone numbers, email addresses)	88%	
ä	Sexual orientation	83%	
(h)	Household data (e.g., power of attorney, guardian, head of household information, or household composition)	83%	
	Demographic data (e.g., age, gender, education level)	75%	
<b>(A)</b>	Pronouns	75%	
	Race	75%	
4	Ethnicity	75%	
製	Language	71%	

Medical Systems Data	
Behavioral health diagnoses/treatment/ providers (including mental health and SUD)	87%
Special health care needs indicators	87%
Historical claims data and clinical encounters	83%
Case management or social work encounters	78%
Health status indicators	74%
Smoking/vaping/ nicotine/tobacco use	74%

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Social Determinants of Health Da	ata
Engagement in other state programs (e.g., WIC)	96%
Housing situation/stability (e.g., unhoused)	96%
Criminal justice involvement	88%
School enrollment	79%
Foster care status	71%
Note: WIC - Special Supplemental Nutrition	

Program for Women, Infants, and Children

Source: Institute for Medicaid Innovation.

"2023 Annual Medicaid Health Plan Survey."

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Barriers Experienced by Medicaid Health Plans When Providing High-Risk Care Coordination	All Health Plans
Ability to contact member	100%
Member willingness to engage with high-risk care coordination	96%
Member unmet social determinants of health	92%
Member access to specialty care	71%
Availability of social supports	71%
Member's ability to navigate multiple care coordinators from health systems, provider practices, clinics, etc.	71%
Churn (member or eligibility related)	67%
Member access to primary care	63%
Access to information from previous providers (e.g., mental health)	54%
Provider willingness to engage with high-risk care coordinator	54%
Member's knowledge of managed care	54%
Ability to connect individuals to necessary nonclinical social supports	50%
Ability to share information with service providers	38%
Language barrier(s)	38%
Other (including health literacy, member cultural beliefs, member access to behavioral health care, member access to reproductive health care)	13%

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

