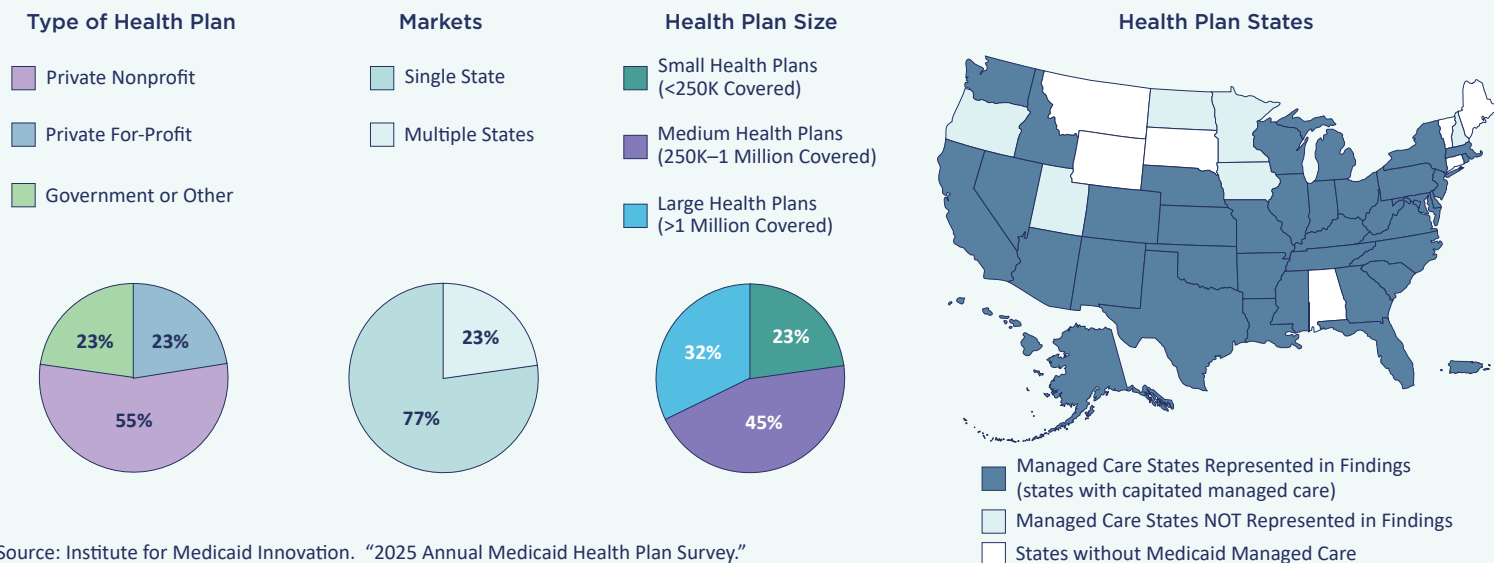




Annual Medicaid Managed Care Organization Survey High-Risk Care Coordination

Demographics

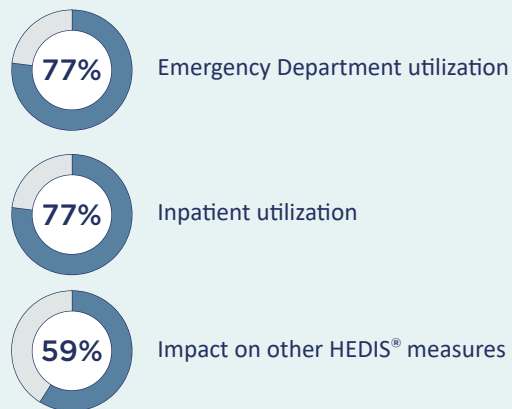
In its eighth year, the 2025 survey findings represent health plan data from almost every state with Medicaid managed care. The annual survey collected information at the parent company and corporate levels and is intended to equip Medicaid stakeholders with the information needed to accurately articulate 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. “2025 Annual Medicaid Health Plan Survey.”

High-risk care coordination (also referred to as care management and case management) involves intensive, one-on-one services, provided by a nurse or other health worker, to individuals with complex health and social needs.

HEDIS® Measures That Medicaid Health Plans Currently Use to Track Effectiveness



Source: Institute for Medicaid Innovation. “2025 Annual Medicaid Health Plan Survey.”

Notes: **HEDIS® is Healthcare Effectiveness Data and Information Set.** Other HEDIS Measures responses included: AAB, AAP, AIS-E, AMR, APM, AXR, BCS, BPD, CBP, CCS-E, CHL, CIS, COA, COL, COU, CWP, DSF-E, EDU, EED, FMC, FUA, FUH, FUI, FUM, GSD, HBD, HDO, IET, IMA-E, KED, LBP, LSC, MPM, OED, OMW, OSW, PBH, PCE, PCR, PDS-E, PND-E, POD, PPC, PRS-E, RDM, SAA, SMC, SMD, SNS-E, SPC, SPD, SSD, TRC, UOP, URI, W30, WCC, WCV.

Non-HEDIS® Measures Medicaid Health Plans Currently Use to Track Effectiveness in High-Risk Care Coordination

	All Health Plans
Emergency Department utilization (unrelated to HEDIS® measure)	91%
Inpatient utilization (unrelated to HEDIS® measure)	91%
Members’ experience survey results (e.g., Consumer Assessment of Healthcare Providers and Systems® survey)	91%
Outpatient primary care utilization	86%
Complaints and grievances	82%
Preventive care utilization	77%
Total spending	77%
Provider experience survey results	64%
Other	9%

Source: Institute for Medicaid Innovation. “2025 Annual Medicaid Health Plan Survey.”

Notes: **HEDIS® is Healthcare Effectiveness Data and Information Set.** Other includes readmission within 30 days after integrated physical and mental health discharge, National Committee for Quality Assurance audits, and medication reconciliation and adherence. No health plans selected “Our health plan does not track the effectiveness.”



Support for this project is provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

Barriers Medicaid Health Plans Experience When Providing Effective High-Risk Care Coordination


























All Health Plans

Members' unmet social determinants of health	100%
Members' access to specialty care	95%
Members' access to behavioral and mental health care	91%
Ability to contact member	91%
Provider willingness to engage with high-risk care coordination	86%
Members' willingness to engage with high-risk care coordination	82%
Availability of social supports	82%
Access to information from previous providers (e.g., mental health)	77%
Ability to connect individuals to necessary nonclinical social supports	77%
Churn (member- or eligibility-related)	73%
Members' knowledge of managed care	73%
Members' ability to navigate multiple care coordinators from health systems, provider practices, clinics, etc.	68%
Ability to share information with service providers	64%
Language barriers	64%
Members' access to primary care	59%
Other	23%

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes technology, data exchange between the state and managed care organizations, cultural and mental health barriers, substance use and HIV, and challenges with primary care providers and specialists aligning on the care plan. No health plans selected "None."

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

General Background Data	Medical Systems Data	Social Determinants of Health Data
<p>95% Contact data (e.g., phone numbers, email addresses) </p>	<p>95% Chronic medical conditions or diagnoses (e.g., sickle cell disease, HIV/AIDS) </p>	<p>100% Housing situation or stability (e.g., unhoused) </p>
<p>86% Demographic data (e.g., age, sex, education level) </p>	<p>95% Health status indicators </p>	<p>100% Participation in other state programs (e.g., Special Supplemental Nutrition Program for Women, Infants, and Children) </p>
<p>86% Household data (e.g., power of attorney, guardian, head of household information, or household composition) </p>	<p>95% Historical claims data and clinical encounters </p>	<p>95% Child welfare involvement </p>
<p>86% Language </p>	<p>91% Behavioral health diagnoses, treatment, or providers (including mental health and substance use disorder) </p>	<p>86% Criminal justice system involvement </p>
<p>82% Ethnicity </p>	<p>91% Special health care needs indicators </p>	<p>86% Juvenile justice system involvement </p>
<p>82% Race </p>	<p>86% Case management or social work encounters </p>	<p>86% School enrollment </p>
<p>73% Pronouns </p>	<p>77% Smoking, vaping, or nicotine or tobacco use </p>	<p>14% Other </p>
<p>68% Gender identity </p>	<p>9% Other </p>	
<p>64% Sexual orientation </p>		
<p>18% Other </p>		

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes "Engagement in other care management programs, written vs. spoken language, SMS enabled phone, and preference for communication (e.g., phone, text)." No health plan selected "None."

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes pharmacy and medical claims, and social determinants of health and medical needs of members. Five percent (5%) of health plans selected "None."

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes engagement in the Special Supplemental Nutrition Program for Women, Infants and Children; cash assistance; utility assistance; and accurate information about the services that were active in the past and/or are currently active. Five percent (5%) of health plans selected "None."