



# **MIHealthyLife: An Update on the Comprehensive Health Care Program**

**Meghan Groen, Senior Deputy Director  
Behavioral and Physical Health and Aging Services**

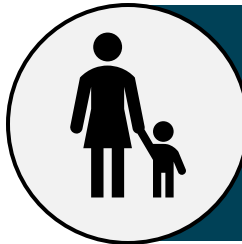
**November 2023**

**Note: This overview provides a preview of anticipated program changes. MDHHS reserves the right to change any requirements, dates or any other information deemed necessary. Some program changes may be subject to legislative approval and/or budget allocations.**

# MIHealthyLife and CHCP Medicaid Health Plan Procurement



**MDHHS' vision** is to deliver health and opportunity to all Michiganders, reduce intergenerational poverty and promote health equity. MDHHS seeks to achieve this vision in all its initiatives, including MIHealthyLife



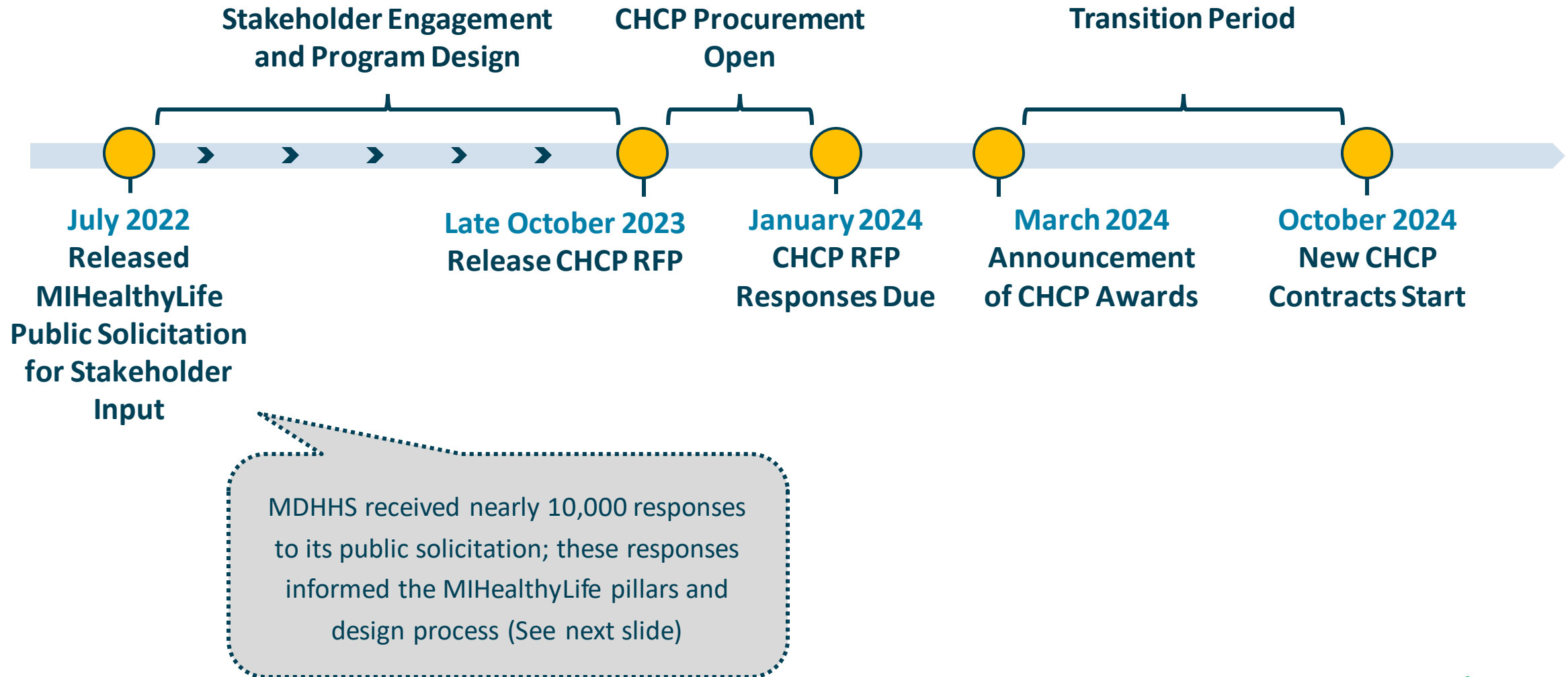
**Through MIHealthyLife** MDHHS brought together the investment, creativity and input from its partners – including health plans, providers, members, families and communities – to create a more equitable, coordinated and person-centered system of care dedicated to ensuring Michiganders a healthier future



**Through the CHCP Medicaid Health Plan Procurement** MDHHS will rebid contracts for Medicaid Health Plans (MHPs). The procurement will include release of the Fiscal Year 2025 model contract, which incorporates program changes developed through MIHealthyLife

# MIHealthyLife Milestones

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Timeline subject to change

## 9,818 Survey Responses Received\*

- **85% (8,381) of respondents were Medicaid members or their family members**
- **15% of respondents came from other groups:**
  - Consumer advocacy group
  - Community-based organization (CBO)
  - Hospital or health system
  - Primary care provider (PCP)
  - Behavioral health provider
  - Provider serving federally recognized Michigan Indian tribes
  - Other Provider
  - Health plan
  - Partner Association
  - Local health department
  - Other
- **Nearly 5,000 responses included open-ended comments**, resulting in 15,739 substantive comments

## Approach to Review of Feedback

### Solicitation

- Public solicitation was active from July 29 through August 26, 2022

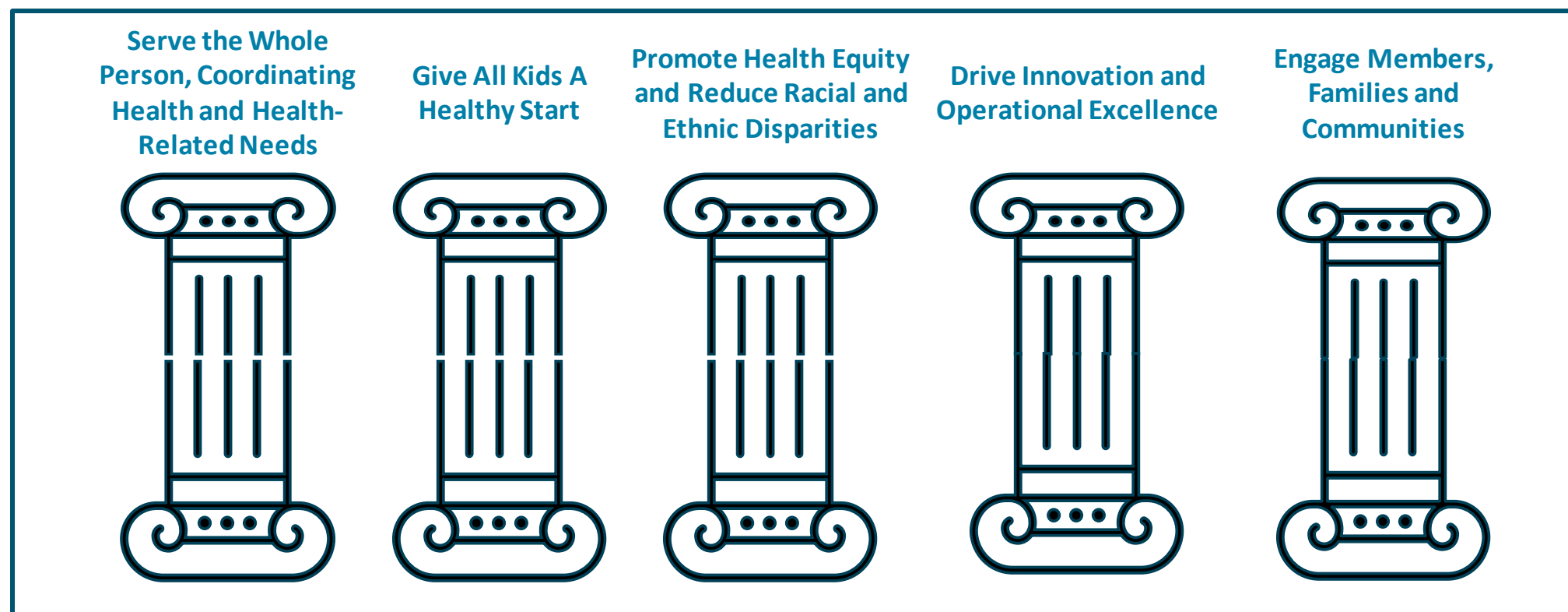
### Analysis

- Assessed the level of support for pillars and program changes

### Closer Review

- Reviewed written responses to open-ended questions to better understand emerging themes

The MIHealthyLife strategic pillars are cross-cutting principles that guide the State's policy and program design related to MHP procurement and contracting.



# Overview of Upcoming CHCP Program Changes



# CHCP Procurement and Associated Model Contract Will Incorporate MIHealthyLife Program Changes, Including Efforts to:

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**Prioritize health equity by requiring MHPs to achieve the NCQA's Health Equity Accreditation**



**Address social determinants of health through investment in and engagement with community-based organizations**



**Increase childhood immunization rates, including increasing provider participation in the Vaccines for Children program**



**Adopt a more person-centered approach to mental health coverage**



**Ensure access to health providers by strengthening network requirements**



**Increase MHP accountability and clarify expectations to advance State priorities**



**People of color and other marginalized groups experience significant healthcare disparities. MDHHS aims to reduce healthcare disparities and advance health equity to improve health outcomes as well as lower costs.**

- MDHHS has a longstanding commitment to reducing racial and ethnic health disparities and continues this commitment under MIHealthyLife
- MHPs will be required to meet national health plan standards on health equity under the National Committee for Quality Assurance's (NCQA) Health Equity Accreditation
- The NCQA Health Equity Accreditation is a new, national framework under which MHPs will be required to:
  - Strengthen health plan member demographic data for identification and analysis of disparities
  - Develop a cohesive, data-driven plan and implement interventions to advance health equity



**A person's social needs can drive 80% of their health outcomes. MDHHS continues to prioritize addressing SDOH to improve health outcomes for Medicaid members.**

The new MHP contract will:

- Encourage MHPs to offer “in lieu of services” (ILOS) to **pay for services that address members' health-related social needs**
  - Federal regulatory flexibilities can allow MHPs to pay for a limited list of state-approved services to address members' health-related social needs when medically appropriate and cost-effective
  - Members do not have to accept ILOS if they do not want them
- **Support community capacity** to provide ILOS
  - MDHHS will require reinvestment into community organizations

## Priority SDOH Domain



### *Food and Nutrition*

## Food Insecurity in MI is Rising

In 2020, food insecurity increased to approximately 1.9 million people in Michigan. 1 in 7 children in Michigan were estimated to be food insecure.

## Related Service (ILOS) Example

**Example Service:** Home-delivered meals that meet members' dietary needs (up to 2 meals per day)

**Example Eligible Population:** Individuals being discharged or at high risk of hospitalization



Across the country and in Michigan, the rates of childhood immunizations have been on the decline. MDHHS seeks to reverse this trend in Michigan.

- MDHHS aims to increase childhood immunization rates by:
  - **Incentivizing provider participation** in the Vaccines For Children (VFC) program, which is a federal program that provides free vaccines to providers for immunization of Medicaid eligible children
  - Strengthening related **network adequacy** and **reporting** requirements

# Adopt a More Person-Centered Approach to Mental Health Coverage

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Today, members must navigate two separate systems for their mental health care coverage. MDHHS seeks to develop and implement a new approach that improves continuity of care for members and more clearly delineates coverage responsibility.

- MDHHS intends to **center payer responsibility on the person**, rather than on a specific service or care setting. Under the revised approach:
  - If an individual has serious mental illness (SMI) or serious emotional disturbance (SED), a Prepaid Independent Health Plan (PIHP) would be responsible for all their mental health care services
  - If an individual does not have SMI or SED, their MHP would be responsible for all their mental health care services
- This change will require a **collaborative implementation process**



**Michigan requires MHPs to have provider networks that meet network adequacy and timely access standards. MDHHS aims to strengthen those standards in the upcoming CHCP contract in several ways, including:**

- **Revising existing network adequacy and access standards** by reducing the maximum time and distance a member must travel to hospitals, primary care providers and other providers, and creating distinct standards for children and adults for certain provider types (e.g., behavioral health providers)
- **Add new time and distance standards for physical, occupational and speech therapists, psychiatrists, and other specialty providers**
- **Add new appointment and timely access standards for prenatal care** that factor in pregnancy risk and trimester
- **Promote member choice of providers** by requiring at least *two* of certain provider types within time and distance maximums in more urban counties
- **Adopt new geographic designations** for time and distance standards, aligning with those used in federal standards



To support a high performing Medicaid program, MDHHS seeks to increase accountability and standardization among MHPs.

- Double the size of the quality withhold and revise its elements to **more effectively reward MHP performance and advance State priorities**
- **Strengthen enforcement** of existing compliance mechanisms
- **Increase oversight** of MHP processes for assigning members to primary care providers (PCPs)

# Thank you!

Please visit [Michigan.gov/MDHHS/MIHealthyLife](https://Michigan.gov/MDHHS/MIHealthyLife) for more information.