

EIP Monthly One Care Enrollment Data Report—May 2014

Introduction

The data in this report reflects One Care activity as of May 1, 2014. MassHealth takes a snapshot of enrollments and opt-outs shortly after the beginning of the month to allow time for resolution of a small number of delayed successful enrollments at the beginning of each month.

1. May Enrollment Summary

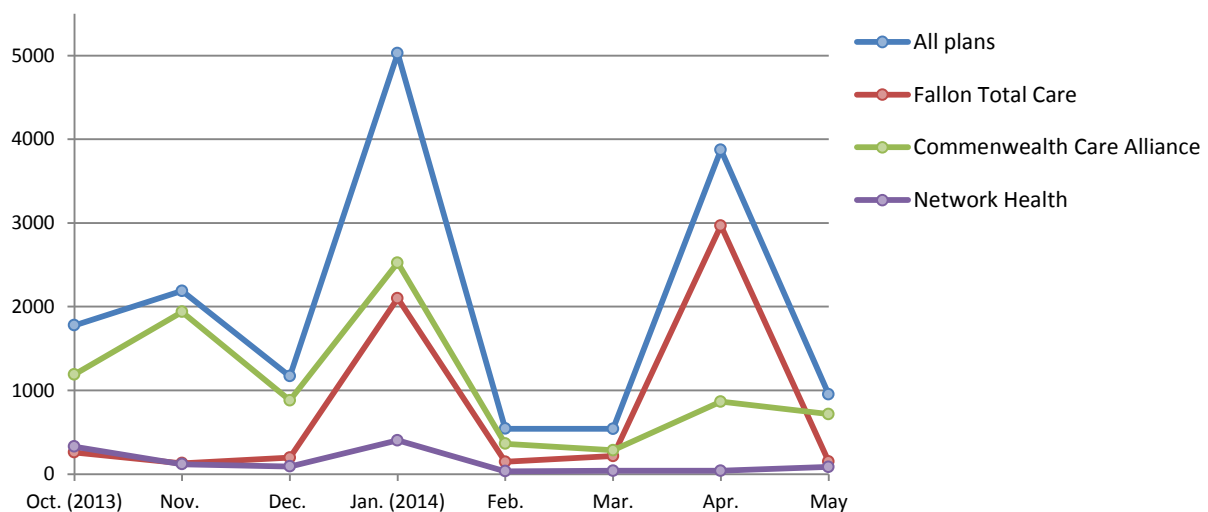
Since April 1st, there have been 951 new enrollments in One Care with an effective coverage date of May 1, 2014. As of May 1, 2014, total enrollment in One Care across all three plans was 13,274.

| Plan | New enrollments for May 2014 | Total enrollment |
|----------------------------------|------------------------------|----------------------|
| Commonwealth Care Alliance (CCA) | 717 (75%) | 7,621 (57%) |
| Fallon Total Care (FTC) | 149 (16%) | 4,787 (36%) |
| Network Health (NH) | 85 (9%) | 866 (7%) |
| All Plans | 951 (100%) | 13,274 (100%) |

N = approx. 93,723 (number of eligible MassHealth members as of 5/1/14)

Why was One Care enrollment in January and April so much higher than other months? The spikes in enrollment for January and April 2014 reflect the first two groups of passive enrollments, on top of a regular volume of self-enrollments in those months. Passive enrollment is MassHealth's process of assigning, notifying, and automatically enrolling someone in a One Care plan (also referred to as "auto-assignment"). Passive enrollment currently happens at specific points in time for large groups, rather than on a rolling basis.

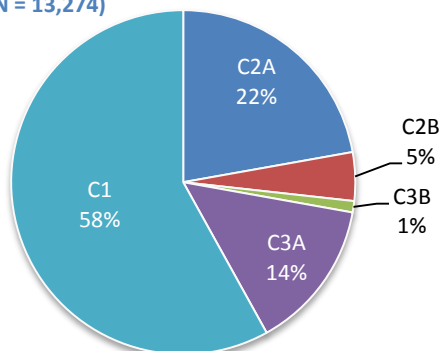
Figure 1. Monthly One Care enrollments, October 2013 – May 2014



2. Rating Category Data. One Care enrollees are categorized based on anticipated or actual service needs as follows:

- **F1:** Residing in an institutional setting
- **C3B:** Very high community long term services and supports needs
- **C3A:** High community long term services and supports needs
- **C2B:** Very high community behavioral health services needs
- **C2A:** High community behavioral health services needs
- **C1:** Other individuals living in the community

Figure 2. Total One Care enrollment by rating category
(N = 13,274)



Note: The F1 rating category represents <1% of all enrollments, and therefore does not appear in this chart.

Why is One Care enrollment mostly in the C1 rating category? Individuals in the C1 rating category represent a majority of MassHealth members who are eligible for One Care. Currently, MassHealth estimates that 63.8% of eligible members are in the C1 rating category.

As members enroll in One Care and their assessments are completed, more specific information about their needs may indicate some should be in a different rating category.

Enrollment penetration refers to the percent of individuals who are enrolled out of the total number eligible in a given group. In the different rating categories, enrollment penetration is currently highest in C2A (18%) and lowest in F1 (1.8%). (Figure 3)

Figure 3. Rating category enrollment penetration

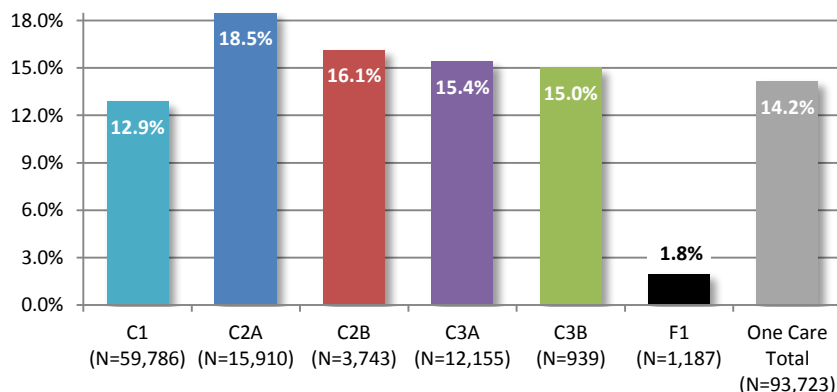
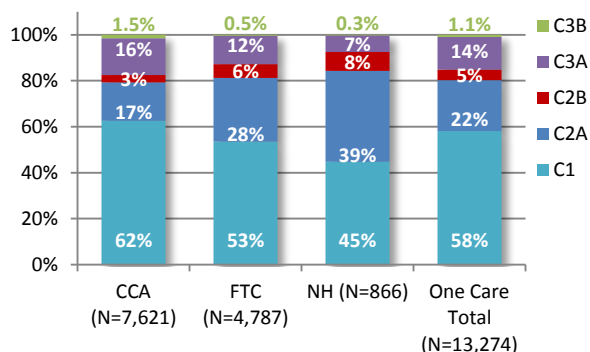


Figure 4. One Care plans' rating category enrollment



Note: The F1 rating category represents <1% of enrollments in each plan, and therefore does not appear in this chart.

Within each plan, what is the distribution of enrollees in each rating category? The three One Care plans' rating category enrollment distribution fluctuates month-to-month. New enrollments drive most of these changes. In addition, as plans complete the assessment process for new enrollees, some individuals move to a different rating category.

MassHealth anticipates that the next round of passive enrollment, in July, will result in additional shifts in the percentage of enrollees in the various rating categories.

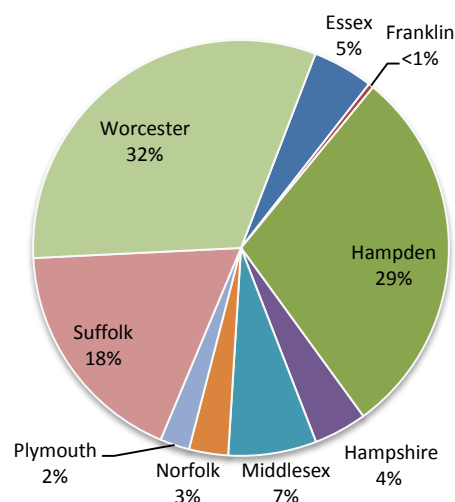
3. County-Specific Data

One Care is available in nine Massachusetts counties. The three One Care plans each serve a different number of counties. One Care enrollments by county are geographically distributed as follows:

| One Care County | New One Care enrollments for May 1, 2014 | Total enrollment [N = 93,723] |
|-----------------------------|--|-------------------------------|
| Essex (CCA only) | 133 | 735 |
| Franklin (CCA only) | 16 | 69* |
| Hampden | 155 | 3,596* |
| CCA | 105 (68%) | 1,656 (46%) |
| FTC | 49 (32%) | 1,939 (54%) |
| Hampshire | 27 | 494 |
| CCA | 14 (52%) | 152 (31%) |
| FTC | 13 (48%) | 342 (69%) |
| Middlesex (CCA only) | 156 | 1,037 |
| Norfolk (CCA only) | 68 | 459 |
| Plymouth (CCA only) | 65 | 358 |
| Suffolk | 131 | 2,406 |
| CCA | 98 (75%) | 2,053 (85%) |
| NH | 33 (25%) | 353 (15%) |
| Worcester | 200 | 4,120* |
| CCA | 62 (31%) | 1,108 (27%) |
| FTC | 87 (44%) | 2,498 (61%) |
| NH | 51 (26%) | 509 (12%) |
| All Counties | 951 | 13,274* |

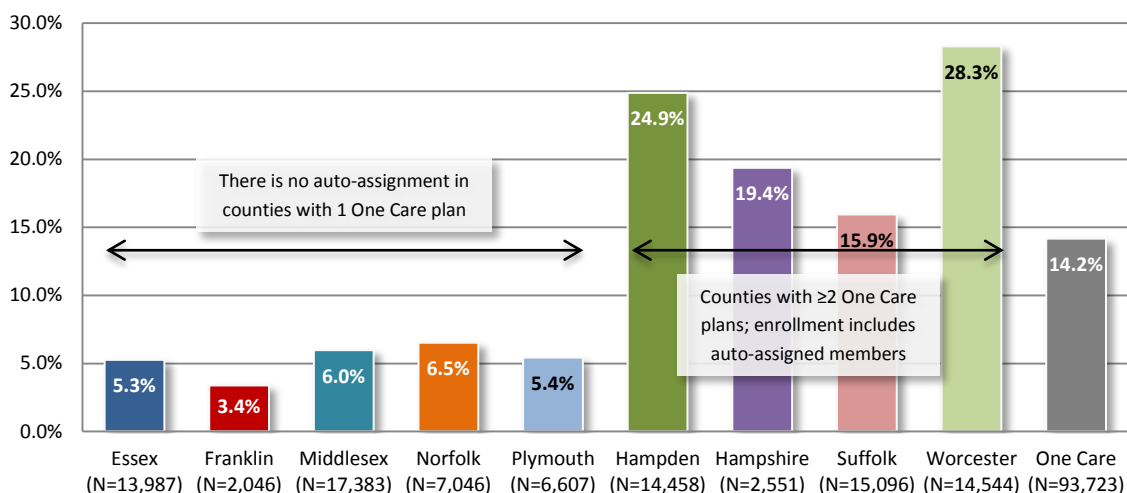
* Data point includes ≤5 potentially invalid enrollments that were unresolved at the time of reporting.

Figure 5. Total One Care enrollment (N=13,274)



Enrollment penetration refers to the percent of enrolled individuals out of the total number eligible in a given group. In the counties where One Care is available, between 3.4% and 28.3% of eligible MassHealth members were enrolled as of April 1. The greatest enrollment penetration rate is in Worcester County, where all three One Care plans are available.

Figure 6. County-level One Care enrollment penetration (N = 93,723)



4. Opt-outs

The table below shows the number of individuals who indicated to MassHealth in April 2014 that they do not want to participate in One Care (referred to as “opting out”), as well as total active opt-outs (individuals who opted out, remain eligible, and have not subsequently enrolled). A MassHealth member need not be enrolled in One Care (voluntarily or through the auto-assignment process) to opt out. The numbers reported below include opt-outs by members who were not enrolled at the time they opted out *and* by members who were enrolled at the time they opted out.

MassHealth does not remove from the data individuals who have opted out, but who are not eligible for One Care. As a result, the number of opt-outs reported is higher than it would be if the data reflected only opt-outs by eligible members.

All counties show member-initiated enrollments (“self-selections”) by individuals who had previously opted out.

| County | April Opt-outs | Total Active Opt-outs | Total number of current enrollees who self-selected after previously opting out |
|---------------|----------------|-----------------------|---|
| Essex | 199 | 2,254 | 33 |
| Franklin | 32 | 368 | 1 |
| Hampden | 613 | 4,172 | 120 |
| Hampshire | 141 | 999 | 15 |
| Middlesex | 288 | 3,291 | 56 |
| Norfolk | 126 | 1,383 | 18 |
| Plymouth | 98 | 1,022 | 19 |
| Suffolk | 244 | 2,649 | 82 |
| Worcester | 510 | 4,817 | 202 |
| <i>Other*</i> | <i>2</i> | <i>88</i> | <i>2</i> |
| Total | 2,253 | 21,043 | 548 |

* Individuals in counties that do not have a One Care plan are ineligible for One Care.

N = 93,723

5. Monthly One Care Plan Transitions and Disenrollments

Figure 7 shows the percentage of One Care members who leave their One Care plan either to enroll in a different One Care plan or who disenroll from One Care altogether. In October, approximately ten percent of enrolled One Care members disenrolled; in March 2014, the rate had dropped to about four percent. An increase in the rate of disenrollments in April 2014 correlates to MassHealth’s second bulk mailing of One Care materials to approximately 13,000 newly eligible individuals at the end of March. (Approximately 85,000 individuals received One Care materials from MassHealth in the first bulk mailing in September-October 2013.) Since November, the rate of enrollees switching to a different One Care plan has been less than one percent.

Figure 7. Disenrollments from and plan transfers within One Care

