

# Medicare-Medicaid Plan Quality Withhold Analysis Results

Calendar Year 2023

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The Medicare-Medicaid Financial Alignment Initiative (FAI) seeks to better serve people who are dually eligible for Medicare and Medicaid by testing person-centered, integrated care models. In order to ensure that dually eligible individuals receive high quality care and to encourage quality improvement, both Medicare and Medicaid withheld a percentage of their respective components of the capitation rate paid to each Medicare-Medicaid Plan (MMP) participating in a capitated model demonstration under the FAI. MMPs are eligible for repayment of the withheld amounts subject to their performance on a combination of CMS Core and State-Specific quality withhold measures. For each measure, MMPs earn a “met” or “not met” designation depending on their achieved rate relative to the benchmark level, or where applicable, the gap closure target. Based on the percent of measures with a “met” designation, MMPs receive a quality withhold payment according to the following tiered scale:

Percent of Measures Met	Percent of Withhold MMP Receives
0-19%	0%
20-39%	25%
40-59%	50%
60-79%	75%
80-100%	100%

This report provides the results of the quality withhold analysis for MMPs in Calendar Year (CY) 2023. On the following pages, Table 1 provides summary results for the quality withhold analysis and Table 2 provides results for the additional CMS measure quality withhold analysis, as applicable.<sup>1</sup>

For more information about the quality withhold methodology, measures, and benchmarks, refer to the Medicare-Medicaid Capitated Financial Alignment Model CMS Core Quality Withhold Technical Notes and the State-Specific Quality Withhold Technical Notes for the corresponding state and demonstration year. These documents are available on the [MMP Quality Withhold Methodology & Technical Notes](#) webpage.

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<sup>1</sup> Additional details and results pertaining to the measures are available upon request. For certain states, CMS applies an additional 1% quality withhold to the Medicare rate component only. Repayment of the withheld amount is based on a single measure, referred to as the “additional CMS measure.”

**Table 1: Quality Withhold Analysis Summary Results****Illinois**

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Aetna Better Health, Inc.	8	6	75%	75%
Health Care Service Corporation	8	7	88%	100%
Humana Health Plan, Inc.	8	5	63%	75%
Meridian Health Plan of Illinois, Inc.	8	6	75%	75%
Molina Healthcare of Illinois, Inc.	8	5	63%	75%

**Massachusetts**

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Commonwealth Care Alliance, Inc.	10	9	90%	100%
Tufts Health Public Plans, Inc.	10	7	70%	75%
UnitedHealthcare Insurance Company	9	5	56%	50%

**Michigan**

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Aetna Better Health of Michigan, Inc.	13	8	62%	75%
AmeriHealth Michigan, Inc.	13	5	38%	25%
HAP CareSource	13	9	69%	75%
Meridian Health Plan of Michigan, Inc.	13	8	62%	75%
Molina Healthcare of Michigan, Inc.	13	12	92%	100%
Upper Peninsula Health Plan, LLC	13	11	85%	100%

**New York FIDA-IDD**

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Partners Health Plan, Inc.	9	9	100%	100%

## Ohio

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Aetna Better Health, Inc.	8	6	75%	75%
Buckeye Community Health Plan, Inc.	8	7	88%	100%
CareSource Ohio, Inc.	8	8	100%	100%
Molina Healthcare of Ohio, Inc.	8	7	88%	100%
UnitedHealthcare Community Plan of Ohio, Inc.	8	8	100%	100%

## Rhode Island

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Neighborhood Health Plan of Rhode Island	12	10	83%	100%

## South Carolina

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Absolute Total Care, Inc.	7	6	86%	100%
Molina Healthcare of South Carolina, Inc.	7	6	86%	100%
Select Health of South Carolina, Inc.	7	4	57%	50%

## Texas

Medicare-Medicaid Plan	Total Number of Measures in Analysis	Total Number of Measures Met	Percent of Measures Met	Percent of Withhold Received
Wellpoint Texas, Inc.	8	6	75%	75%
Molina Healthcare of Texas, Inc.	8	6	75%	75%
Superior Health Plan, Inc.	8	6	75%	75%
UnitedHealthcare Community Plan of Texas, LLC	8	7	88%	100%

**Table 2: Additional CMS Measure Quality Withhold Analysis**

**Ohio**

<b>Medicare-Medicaid Plan</b>	<b>Result on Additional CMS Measure</b>	<b>Percent of Withhold Received</b>
Aetna Better Health, Inc.	Met	100%
Buckeye Community Health Plan, Inc.	Met	100%
CareSource Ohio, Inc.	Met	100%
Molina Healthcare of Ohio, Inc.	Met	100%
UnitedHealthcare Community Plan of Ohio, Inc.	Met	100%

**South Carolina**

<b>Medicare-Medicaid Plan</b>	<b>Result on Additional CMS Measure</b>	<b>Percent of Withhold Received</b>
Absolute Total Care, Inc.	Met	100%
Molina Healthcare of South Carolina, Inc.	Met	100%
Select Health of South Carolina, Inc.	Not Met	0%