



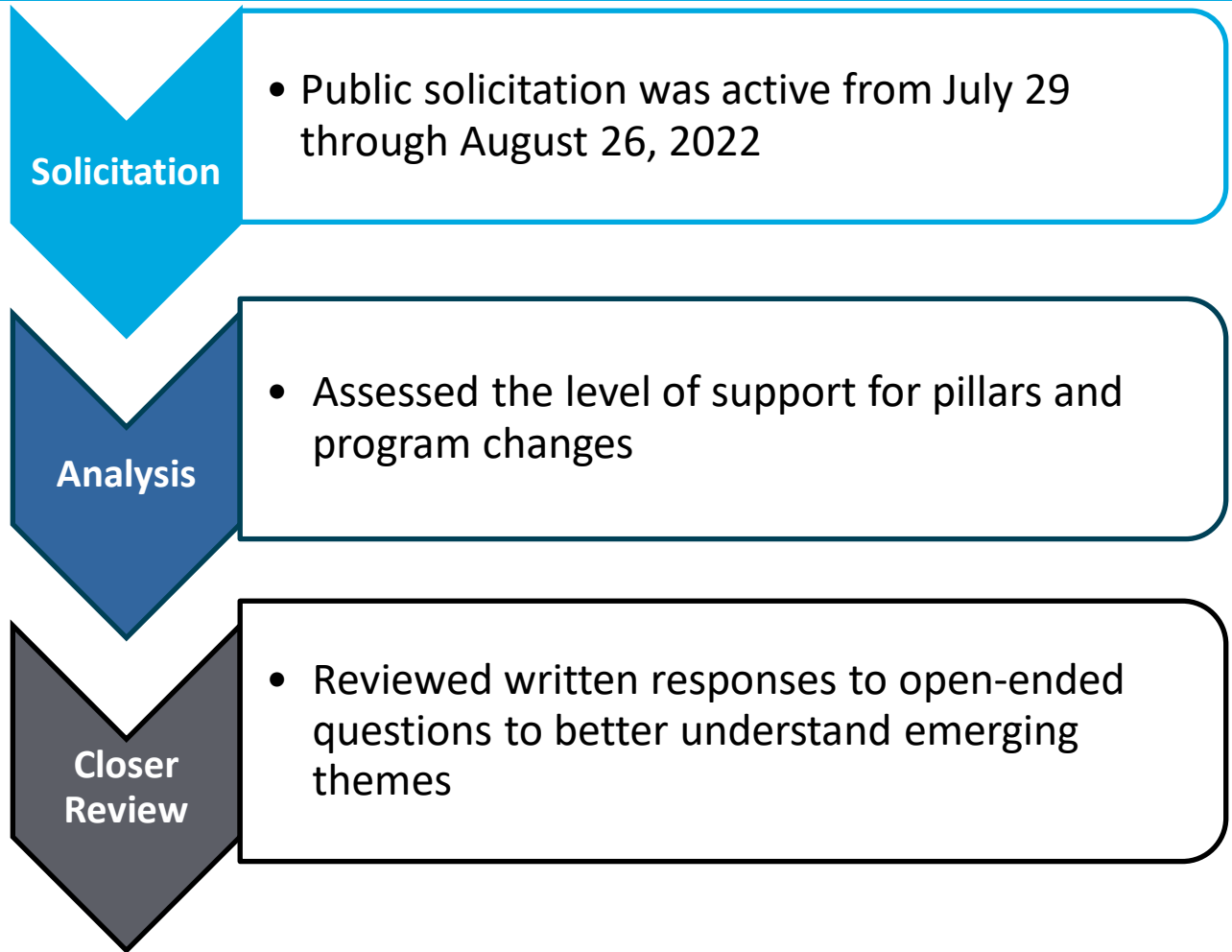
MIHealthyLife Public Solicitation Results

Input from MIHealthyLife Public Solicitation

9,818 Survey Responses Received*

- **85% (8,381) of respondents were consumers**, i.e., people enrolled in Medicaid or a family member
- **15% of respondents came from other groups:**
 - Consumer advocacy group: 15 (<1%)
 - Community-based organization (CBO): 75 (1%)
 - Hospital or health system: 101 (1%)
 - Primary care provider (PCP): 211 (2%)
 - Behavioral health provider: 103 (1%)
 - Provider serving federally recognized Michigan Indian tribes: 2 (<1%)
 - Other provider: 168 (1%)
 - Health plan: 317 (3%)
 - Association: 29 (<1%)
 - Local health department: 64 (1%)
 - Other: 352 (4%)
- **Nearly 5,000 responses included open-ended comments**, resulting in 15,739 substantive comments

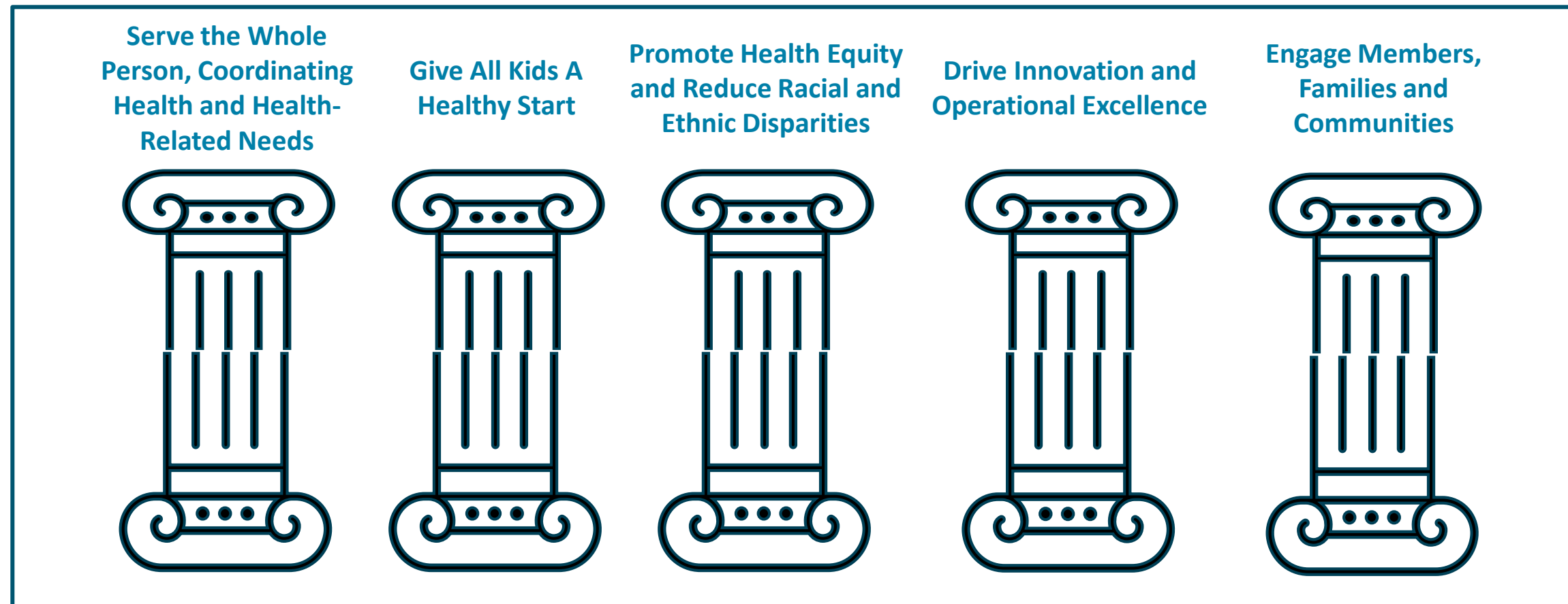
Approach to Review of Feedback



*Approximately 85% unique IP addresses; two identical responses deleted from the count

MIHealthyLife Strategic Pillars

The MIHealthyLife strategic pillars are cross-cutting principles that will guide the State's policy and program work related to Medicaid Health Plan procurement and contracting.



Example Stakeholder Input by MIHealthyLife Strategic Pillar

Serve the Whole Person, Coordinating Health and Health-Related Needs

“Things seem to fall through the cracks once people have to go to 10-15 different places to get all of their needs met”

“Provide meaningful financial support for integrated physical, behavioral, and oral health alongside SDoH supports ... (e.g., seamless information sharing, aligning focus of initiatives, and providing value-based incentives for providers sufficient to support change)”

“Mental health services and nutrition services are really important and can go hand-in-hand with one another. [It] comes down to access to education on these topics and how/where to find services”

Give All Kids A Healthy Start

“Make sure all kids and their families have access to quality healthcare regardless of financial status”

“Healthier children will lead to less health care cost, in theory, in tandem with other environmental and socioeconomic drivers [advancing] toward better health”

“Early childhood trauma or gaps in needs [being met] creates ongoing life-long health issues”

Promote Health Equity and Reduce Racial and Ethnic Disparities

“Racism is a public health crisis”

“Empower and incentivize communities to work on disparities”

Example Stakeholder Input by MIHealthyLife Strategic Pillar

Drive Innovation and Operational Excellence

“Focused measures of quality, outcomes, and/or disparities that are common across Plans are key to achieving valuable improvement and change (even if the underlying intervention or payment approach differs)”

“Consistency, transparency, data driven decisions, pay for performance, less red tape”

“Hard to find providers that are covered in some areas of the State for medical and dental. Could try to make it easier and more enticing for providers to accept Medicaid”

Engage Members, Families and Communities

“Community partnerships, coordination and collaboration”

“Talk to clients”

“Incorporate best practices and community engagement”
