



EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
COMMONWEALTH OF MASSACHUSETTS
OFFICE OF MEDICAID
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June 9, 2026

Chair Michael J. Rodrigues
Senate Committee on Ways and Means
State House, Room 212
Boston, MA 02133

Chair Aaron Michlewitz
House Committee on Ways and Means
State House, Room 243
Boston, MA 02133

Dear Chairs Rodrigues and Michlewitz,

MassHealth is engaged with the federal government in an innovative program known as One Care to improve care for adults ages 21-64 who are enrolled in both Medicare and Medicaid (Dual Eligibles). One Care members are served through contracted managed care entities that provide comprehensive and coordinated services. The goal of One Care is to provide integrated, person-centered care, including a broader array of services in a more cost-effective way. One Care plans have achieved among the highest quality and member experience ratings among plans serving Dual Eligible individuals across the country.

The Fiscal Year (FY) 2026 budget requires in line item 4000-0300 that the Executive Office of Health and Human Services (EOHHS) shall report to the House and Senate Committees on Ways and Means on the number of members served in the dual eligible initiative, the average expenditure per member, the average expenditure per member prior to the demonstration project and the number of clients that receive care at skilled nursing facilities. I am pleased to provide you with the following information on One Care experience to date.

As of January 22, 2026, 38,327 individuals were enrolled in a One Care plan, including 349 individuals enrolled in the F1 (facility based care) rating category. Members in this rating category have been identified as having a long-term facility stay of more than 90

days. Applicable facilities include nursing facilities, chronic rehabilitation, and psychiatric hospitals.

EOHHS entered into contracts with five One Care plans effective June 17, 2025. Mass General Brigham Health Plan and Molina Healthcare began offering One Care plans on January 1, 2026, in addition to United Healthcare, Commonwealth Care Alliance and Point32Health (Tufts), which have historically offered One Care plans. The One Care plans are contracted to provide coordinated care covering all the services of Medicare Parts A, B, and D, MassHealth, and additional dental, diversionary behavioral health, and community support services. For calendar year 2025 (Q3 year to date), MassHealth paid an average monthly amount of \$2,091.51 per enrollee in the form of a per member per month (PMPM) capitation payment to the One Care plans. This average PMPM reflects a higher enrollment concentration in higher-cost rating categories and a lower concentration of individuals in the lowest-cost rating category. For calendar year 2025 (Q3 year to date), approximately \$25.3M has been withheld for performance on quality measures from plan capitation payments in calendar year 2025. The quality withhold amount will be distributed to the plans at a later date, provided they meet certain benchmarks for pre-defined quality measures.

One Care transitioned from a Medicare Medicaid Plan (MMP) to a Dual-Eligible Special Needs Plan (D-SNP) effective January 1, 2026. One Care capitation rates are developed using a methodology that is structured using an actuarial estimate of the costs of serving these members in the absence of the demonstration. In other words, the rates are calculated using fee-for-service equivalents that are developed from actual base data for a population that is eligible but not enrolled in One Care.

Additional information about the One Care program may be found at: <http://www.mass.gov/masshealth/onecare>. If you have any questions about this report, please contact Sarah Nordberg at Sarah.Nordberg@mass.gov.

Sincerely,

A handwritten signature in black ink that reads "Mike Levine". The signature is written in a cursive, flowing style.

Mike Levine

cc: Kiame Mahaniah, MD, MBA