STATE MEDICAID PROGRAMS SUCCEED WITH COMMUNITY HEALTH PLANS

As community health plans, our mission-driven approach – rooted in decades of direct community investment and provider partnerships – cannot be replicated by for-profit entities whose primary obligation is to maximize shareholder returns. Our full focus remains directly in the communities we serve and the members within them.

ACHP member companies score **over half a rating higher** than the industry, reflecting sustained ability to provide high quality coverage and care. Despite these ratings, the complexity and lack of transparency in the Medicaid procurement process prevents ACHP companies from receiving fair consideration for state contracts.

As provider-aligned organizations, we partner closely with local clinicians with deep-rooted knowledge of community needs, allowing us to provide exceptional, personalized care.

We collaborate with local clinicians day-in and day-out to solve delivery system gaps, expand health care access and meet complex care needs – giving providers a direct voice in operations and decisions.

Our inherently strong provider relationships stabilize and strengthen health care access, especially in rural, underserved areas with workforce shortages.

These relationships also allow us to be distinctly agile in our service delivery, care coordination and ability to adapt to the changing requirements directly in the region.

As community health plans, we provide unique local economic impact through direct investments in the communities in which we serve and reside.

We don't localize a national model. We are embedded in the local health care ecosystem and have longstanding ties in the community, unlike national plans with various regional footprints.

As nonprofits, we invest in health care delivery systems without needing to answer to shareholders. Our investments reflect local community needs and improve infrastructure.

Our approach stands apart. We have decades of experience driving local initiatives that address community-specific needs.



MAKING HEALTH CARE BETTER

The current system underemphasizes plan performance and undermines competition.



Community health plans have demonstrated value

Community health plans have a **proven track record of success**. Prioritizing provider-aligned, community health plans **maximizes consumer choice**, improving patients' ability to access proven, effective care.



The current system constrains competition

State procurement processes have become **increasingly complex and burdensome**, with 18-to-24-month timelines that strain provider-aligned plan resources. Current processes **rely heavily on subjective narrative questions** rather than proven past performance metrics. This systematically disadvantages community health plans and reduces competition in the procurement process.



Local health plans' ability to serve the community hinges on change

Community health plans deliver innovative and tailored care. To ensure they continue to be sustainable, states should:

- Prioritize proven past performance in the market.
- Establish clearer, objective scoring criteria that value quality of care, social determinants of health and health equity.
- Align procurement timelines with other regulatory requirements.
- Increase transparency in evaluation processes, including by providing meaningful debriefs.

About ACHP

The Alliance of Community Health Plans (ACHP) represents a unique nonprofit partnership model in health care, bringing together health plans and providers on behalf of the patients and communities they serve.

ACHP member plans:

- Cover tens of millions of people in nearly 40 states and D.C.
- Operate on margins of one to three percent
- Have an average of 40+ years in their communities

MAKING HEALTH CARE BETTER