



A Look At The Numbers

Local partners: Managed care & community-based organizations

Managed care organizations (MCOs) don't just partner with states to administer Medicaid benefits – they also work closely with community-based organizations (CBOs) to identify and address local health needs.

86% of CBOs believe

that members and state governments benefit from Medicaid managed care.¹

How CBOs view managed care:

Improving Health Outcomes

69% of CBOs agree that MCOs provide better health outcomes for Medicaid beneficiaries.¹

65% of CBOs agree that Medicaid recipients benefit more under the managed care model¹

Addressing Social Determinants of Health

7 in 10 Nearly 7 in 10 CBOs believe that healthcare is defined by factors like housing and nutrition that are beyond the clinical setting.¹

Top benefits According to CBOs, one of the top benefits of modern managed care is the ability to address SDOH.

Prioritizing Preventive Care

91% of CBOs believe that preventive services can prevent costly and more serious health care.¹

73% of CBOs say that MCOs can play a key role in helping patients access preventive resources like primary physicians and screenings.¹

Modern MCOs across the U.S. are partnering with CBOs to help improve the health of local communities through:



Healthy meals



Transportation



Affordable housing



Preventive care



Care services

Learn more about how MCOs are:



[Advancing health equity in Washington](#)



[Supporting affordable housing in Texas](#)



[Improving birth outcomes in Nebraska](#)

1. MHPA Community-Based Organizations MCO Perceptions Survey, 4-14 January 2022. 2. "Medicaid Authorities and Options to Address Social Determinants of Health (SDOH)," Kaiser Family Foundation, 5 August 2021.