



Integrating Care for Dually Eligible Beneficiaries: Policy Options

Medicaid and CHIP Payment and Access Commission

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Introduction

- Began discussion of policy options in December
- For February meeting:
 - Share preliminary analysis of dual eligible special needs plan (D-SNP) look-alike plans
 - Focus on specific language for recommendations to be included in June report
 - Continue discussion of other policy options

Policy Options by Grouping

- Encourage greater enrollment in integrated offerings
- Make integrated offerings available to more beneficiaries
- Promote greater integration among existing offerings
- Create a new program for dually eligible beneficiaries

Encourage Greater Enrollment in Integrated Offerings

1. Modify special enrollment period for dually eligible beneficiaries to allow opt-ins to Medicare-Medicaid plans (MMPs) at any time
2. Allow states to passively enroll beneficiaries who previously opted out after passive enrollment
3. Address the role of enrollment brokers
4. Create common enrollment periods for Medicare and Medicaid for dually eligible beneficiaries enrolled in managed care

Make Integrated Offerings Available to More Beneficiaries

5. Enhance state capacity to implement integrated care by providing additional federal funds
6. Encourage development of non-capitated options
7. Create permanent authority for MMPs
8. Encourage states to use MIPPA authorities
9. Allow D-SNPs to operate in areas where they can meet Medicaid network adequacy standards

Promote Greater Integration Among Existing Offerings

10. Limit enrollment in D-SNPs to full-benefit dually eligible beneficiaries
11. Limit D-SNP contracts to companies with MLTSS contracts
12. Require D-SNP look-alike plans to meet D-SNP requirements
13. Promote integration through default enrollment into D-SNPs

Create a New Program for Dually Eligible Beneficiaries

14. Create a new federal program uniquely focused on dually eligible beneficiaries in which all needs are met by a single organization

Discussion: Looking Ahead to June Report

- Prioritizing policy options
 - Which might be ready for June report
 - Which to discuss in greater detail in June report with goal of making recommendations in next report cycle
 - Whether to eliminate some options altogether
- Substantive discussion of options, evidence

Group A: Ready for Draft Recommendation

1. Modify special enrollment period for dually eligible beneficiaries to allow opt-ins to MMPs at any time
5. Enhance state capacity to implement integrated care by providing additional federal funds
6. Encourage development of non-capitated options

Group B: More Analysis Needed

2. Allow states to passively enroll beneficiaries who previously opted out after passive enrollment
3. Address the role of enrollment brokers
4. Create common enrollment periods for Medicare and Medicaid for dually eligible beneficiaries enrolled in managed care
8. Encourage states to use MIPPA authorities
13. Promote integration through default enrollment into D-SNPs

Group C: Early Stage of Development

7. Create permanent authority for MMPs
9. Allow D-SNPs to operate in areas where they can meet Medicaid network adequacy standards
10. Limit enrollment in D-SNPs to full-benefit dually eligible beneficiaries
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12. Require D-SNP look-alike plans to meet D-SNP requirements
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