



# **Raising the Bar and Supporting State Efforts to Integrate Care for Dually Eligible Beneficiaries**

**Medicaid and CHIP Payment and Access Commission**

Kirstin Blom and Ashley Semanskee

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# Overview

- Recap of recent MACPAC work on integrated care
- Roundtable: purpose, participants, key takeaways
- Themes from the roundtable
- Policy options preview

# Recap of Recent MACPAC Work

- Focus on Medicare Advantage dual eligible special needs plans (D-SNPs) affiliated with Medicaid managed care plans as vehicle for integrating care because D-SNPs have higher enrollment and more availability than other models
- June 2021 report to Congress
  - Focused on state strategies for D-SNP contracts

# Roundtable

- Purpose: better understand the factors affecting state decisions on integrated care and how the federal government can support states
- Participants
  - State staff from Delaware, Kansas, Louisiana, Maine, Mississippi, Missouri, North Carolina, and Washington
  - Policy experts from ADvancing States, CMS Medicare-Medicaid Coordination Office, Speire Consulting
  - MACPAC Commissioners: Melanie Bella and Dennis Heaphy

# Roundtable: Major Takeaways

- Federal support in the form of technical assistance or financial support is needed to overcome barriers to integration
- Focus on beneficiary experience
- Integrated care where all benefits are covered by one managed care plan does not necessarily mean more coordination of care or improved experience
- Exploring integrated care options outside of managed care could enable states to reach beneficiaries in FFS

# Themes from the Roundtable

- Over two half days of discussion, we gathered insights from roundtable participants. We grouped those insights into themes:
  - Key factors for state adoption of integrated care
  - Factors inhibiting state progress
  - State actions to address barriers to integration
  - Federal support

# Themes from the Roundtable

- Key factors for state adoption of integrated care
  - Experience enrolling dually eligible beneficiaries in Medicaid managed care
  - Integrating care through FFS
  - Access for beneficiaries exempt from mandatory Medicaid managed care
  - Avoiding enrollment disruptions for beneficiaries
  - Data exchange and analytic support
  - Federal support

# Themes from the Roundtable

- Factors inhibiting state progress
  - Lack of state capacity
  - Limited beneficiary knowledge of integrated care and preference for existing coverage
  - Lack of data
  - Opposition from stakeholders
  - Other



# Themes from the Roundtable

- State actions to address barriers to integration
  - Identifying state staff leads
  - Enhancing state contracts with D-SNPs
  - Establishing beneficiary advisory mechanism
  - Outreach to stakeholders
  - Building relationships with health plans

# Themes from the Roundtable

- Federal support to help states raise the bar on integrated care
  - Technical assistance
  - Short-term funding
  - Long-term funding
  - Other federal support

# Policy Options Preview

- Option 1: Make additional federal financing available to states that want to advance integrated care
- Option 2: Require that every state develop a strategy to integrate care
- Option 3: Require that states establish an ombudsman for integrated care programs

# Policy Options Preview

- Option 4: Require that states contracting with D-SNPs select at least one MIPPA contracting strategy and include it at the next contract renewal
- Option 5: Require that states only contract with D-SNPs designated as HIDE or FIDE SNPs
- Option 6: Require that every state fully integrate care for full-benefit dually eligible beneficiaries

# Next Steps

- Following feedback from Commissioners, staff will further develop the policy options of interest
- Staff will consult with states and other stakeholders
- Staff will return to Commissioners this winter with options to review
- Finally, staff will finalize potential recommendations for June 2022 report to Congress



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