

December 15, 2023


Medicare-Medicaid Plan Transition Monitoring

Interviews on Stakeholder Engagement

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Medicaid and CHIP Payment and Access Commission

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Overview

- Background
- State interviews: stakeholder engagement
 - Outreach
 - Feedback
- Next steps



The background features a dark blue gradient with several overlapping, semi-transparent shapes in lighter shades of blue and white. These shapes include a large white circle on the left, a vertical white bar in the center, and various blue and white curved and rectangular forms that create a layered, geometric effect.

Background

Background

- Medicare-Medicaid Plans (MMPs) under the Financial Alignment Initiative (FAI) demonstration sign a three-way contract with states and the Centers for Medicare & Medicaid Services (CMS)
- Integrated products for dually eligible beneficiaries
 - Medicare Advantage dual eligible special needs plans (D-SNPs)
 - MMPs
- D-SNPs hold two separate contracts
 - a Medicare Advantage contract between the D-SNP and CMS
 - a State Medicaid Agency Contract (SMAC) with the state in which it operates

CMS Rulemaking

Increasing Integration in D-SNPs

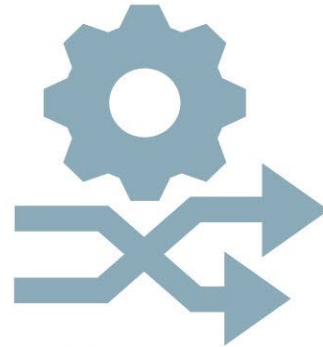
May 2022 CMS final rule sunsets MMPs encouraging all states with MMPs to transition beneficiaries to integrated D-SNPs

- Rule includes regulatory changes that increase D-SNP integration, in part by adopting elements of the MMP
 - Integrated appeals and grievance processes
 - Service area alignment for FIDE SNPs and HIDE SNPs with their companion Medicaid plans
- Commission commented in support of the rule's move toward greater integration

Transition Monitoring Framework



**Procurement
activities**



**System
changes**



**Enrollment
processes**

State Interviews

Stakeholder Engagement: Outreach Strategies

Existing Engagement

- Advisory committees
- Ombudsman program

Enhanced Engagement

- Listening sessions
- Focus groups
- Virtual outreach
 - Webinars
 - Email listservs

Stakeholder Engagement: Feedback to States

Beneficiaries

- Maintain integrated features in the new D-SNP
 - One identification card
 - No cost-sharing
 - Access to a care coordinator
- Improved case management

Providers

- Additional administrative responsibility
- Billing concerns

Plans

- Enrollment processes

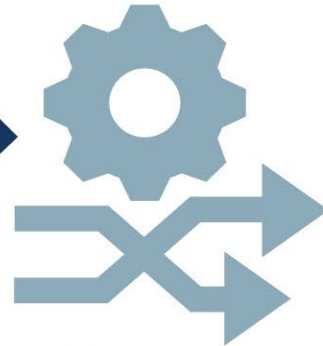
Transition Monitoring Framework



**Stakeholder
engagement**



**Procurement
activities**



**System
changes**



**Enrollment
processes**

Next Steps: Procurement

- Medicaid managed care procurement is the next step for most MMP states
- During procurement, most states will have to temporarily suspend stakeholder engagement
 - One state is incorporating “consumer reviewers” into the procurement process
- Most states plan to thoroughly examine any stakeholder concerns before procurement and again post-procurement

Questions?

- Staff are interested in any feedback Commissioners have on the transition process and our framework for monitoring
- Staff plan to update Commissioners on the status of the transition at a subsequent public meeting

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