

Integrated Care Updates

MACPAC Releases 2023 MACStats: Medicaid and CHIP Data

On December 15, the Medicaid and CHIP Payment and Access Commission (MACPAC) released the 2023 edition of the [MACStats: Medicaid and CHIP Data Book](#) that contains 2021 data on national and state Medicaid and State Children's Health Insurance Program (CHIP) enrollment, spending, benefits, and beneficiaries' health, service use, and access to care.

Several of the data book's exhibits may be of interest to states that are working to better integrate and coordinate care for their dually eligible populations. For example:

- [Exhibit 14. Medicaid Enrollment by State, Eligibility Group, and Dually Eligible Status](#) provides the number of full-benefit and partial-benefit dually eligible individuals (referred to as "dually eligible with limited benefits" in the exhibit), as well as the total number of dually eligible individuals per state in 2021.
- [Exhibit 21. Medicaid Spending by State, Eligibility Group, and Dually Eligible Status](#) provides information about Medicaid spending by dual eligible status.
- [Exhibit 29. Percentage of Medicaid Enrollees in Managed Care by State](#) provides state-level information on the number of people enrolled in various Medicaid managed care programs, including Medicaid managed long-term services and supports (MLTSS) programs.
- [Exhibit 30. Percentage of Medicaid Enrollees in Managed Care by State and Eligibility Group](#) includes state-level information on the number of people enrolled in various Medicaid managed care programs by eligibility group (for example, "aged" and "disabled" Medicaid populations).

These data allow a state to compare itself to others and may help inform planning and decision making about integrated care policy and program development. The [2021 Medicaid Managed Care Enrollment Report](#), published by CMS in Spring 2023, provides additional detail on states' Medicaid managed care programs in 2021.

CMS Releases Initial Guidance for States on Medicare Payment for Dually Eligible Individuals' Behavioral Health Services

On December 14, CMS released a [Center for Medicaid and CHIP Services \(CMCS\) Informational Bulletin \(CIB\)](#) to provide state Medicaid agencies with background information on the new Medicare enrollment of marriage and family therapists (MFTs), mental health counselors (MHCs), and providers of IOP services as well as clarification on options available to states for coordination of benefits/third party liability under Medicaid for services rendered by these providers and practitioners to dually eligible beneficiaries. Beginning January 1, 2024, Medicare will become the primary payer for dually

eligible individuals who receive services furnished by Medicare-enrolled MFTs or MHCs, and for IOP services furnished by Medicare-enrolled practitioners or providers.

These provisions were implemented as part of the [Calendar Year \(CY\) 2024 Physician Fee Schedule final rule](#) (CMS-1784-F), and the [CY 2024 Hospital Outpatient Prospective Payment System \(OPPS\) and Ambulatory Surgical Center \(ASC\) final rule](#) (CMS-1786-FC), issued on November 2, 2023.

For more information, please see the [full informational bulletin](#).

CMS Announces New Evaluation Reports for Demonstrations under the Financial Alignment Initiative

CMS has posted online additional evaluation reports for four demonstrations under the Medicare-Medicaid Financial Alignment Initiative (FAI). The reports include the third reports for the [New York Integrated Appeals and Grievance Demonstration \(AG\)](#), the [Rhode Island Integrated Care Initiative Demonstration](#), the [South Carolina Health Connections Prime Demonstration](#), and the [Texas Dual Eligible Integrated Care Demonstration](#). Key takeaways include:

- **New York Integrated Appeals and Grievance Demonstration:** Evaluators found that the state, CMS, and advocates continue to speak highly of the New York Integrated Appeals and Grievances demonstration, specifically highlighting improved beneficiary protections. However, feedback from interviews with participating plans and beneficiaries was mixed.
- **Rhode Island Integrated Care Initiative Demonstration:** Enrollee CAHPS survey responses reflect favorable experiences with the Rhode Island Integrated Care Initiative.
 - Evaluators found an increase in monthly number of physician visits. However, the evaluation found the demonstration has had no impact on probabilities of inpatient, ambulatory care, or nursing facility admissions, emergency department visits, or probability of a follow-up visit after a mental health discharge over the first over the first 4 demonstration years.
 - Additionally, the evaluation found the demonstration is associated with increased Medicare spending through the first four years of the demonstration.
- **South Carolina Health Connections Prime Demonstration:** The demonstration has resulted in positive outcomes on health care utilization and quality of care, including decreased probabilities of inpatient admissions, overall and chronic ambulatory care sensitive conditions, skilled nursing facility admission, use of long-stay nursing facility, and all-cause 30-day readmissions. However, the demonstration was associated with statistically significant increase in Medicare expenditures through the first five demonstration years.
- **Texas Dual Eligible Integrated Care Demonstration:** Enrollees are generally pleased with their plan but experience challenges connecting with their service coordinators. The demonstration has resulted in positive changes in trends in decreased monthly and annual probability of skilled nursing facility admissions. However, the evaluation found unfavorable increases in number of 30-day readmission, and emergency department usage. Additionally, the demonstration was found to have not had any cumulative effects on Medicare or Medicaid costs.

All FAI evaluation reports are available on CMS' website: <https://www.cms.gov/priorities/innovation/innovation-models/financial-alignment>

December 2023 Enrollment in Medicare-Medicaid Plans, PACE Organizations, and Applicable Integrated Plans

The December enrollment data is forthcoming.

New Resources on the ICRC Website

- [Improving Quality and Performance in Dual Eligible Special Need Plans \(D-SNPs\): Monitoring and Oversight Tips for States](#) (November 2023): This webinar describes the Medicare resources available to states to monitor D-SNP performance and provides tips for states on incorporating D-SNPs into Medicaid quality improvement activities.
- [Tips for States on Incorporating D-SNPs into Medicaid Quality Improvement Activities](#) (October 2023): This tip sheet describes the Medicare resources available to states to monitor D-SNP performance, explains how states can leverage those resources for Medicaid managed care quality oversight and improvement, and provides tips for states on incorporating D-SNPs into Medicaid quality improvement activities.

Key Upcoming Dates

- **January 1, 2024–March 31, 2024-** Annual MA Open Enrollment Period.
- **January 19, 2024-** Final day to submit Notice of Intent to Apply (NOIA) for CY 2025.

ABOUT THE INTEGRATED CARE RESOURCE CENTER

The Integrated Care Resource Center is a national initiative of the Centers for Medicare & Medicaid Services to help states improve the quality and cost-effectiveness of care for individuals dually eligible for Medicare and Medicaid. The state technical assistance activities are coordinated by Mathematica and the Center for Health Care Strategies. For more information, visit www.integratedcareresourcecenter.com.

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