

Integrated Care Updates

CMS Flu Vaccination Resources and Upcoming Webinar with the CDC

Due to the ongoing COVID-19 pandemic, the flu vaccination is critical this year. The Centers for Medicare & Medicaid Services (CMS) is taking action to protect the health and safety of the nation from the flu virus in the wake of COVID-19.

CMS has compiled the following resources on the importance of the flu vaccine to help you stay informed:

- **A Resources for Integrated Care webinar:** “Leveraging Partnerships to Promote Flu Vaccinations Among Dually Eligible Beneficiaries During COVID-19” will be held on Tuesday, November 2, 3:00-4:00 PM featuring speakers from the Centers for Disease Control and Prevention (CDC) and health plan representatives. [Register.](#)
- **CMS Flu Vaccine Page:** The CMS Flu Vaccine page includes up-to-date information for the 2021-22 flu season, including flu shot outreach & media materials and flu vaccine pricing.
- **CMS Flu Vaccine Partner Toolkit:** This toolkit includes materials, such as posters, videos, and factsheets, for partners who work with Medicaid beneficiaries, Medicare beneficiaries, and the general public.
- **CMS Health Equity Resources:** CMS’ Office of Minority Health has compiled a list of flu and immunization resources for health care providers, partners, and patients to help everyone prepare for flu season, including resources available in multiple languages.

CMS Releases D-SNP Integration Status Information for 2022

CMS has released information about the integration status of all Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs) for 2022 in an Excel workbook posted on its [D-SNP integration webpage](#). The [workbook](#) is the first link under the “Integration” heading on that page and contains two tabs – one that summarizes which states will have Highly Integrated D-SNPs (HIDE SNPs), Fully Integrated D-SNPs (FIDE SNPs), and Coordination Only (CO) D-SNPs in 2022, and one that provides the integration status of each individual D-SNP for 2022.

More detailed information about the D-SNPs and other SNP types that will be operating in CY 2022 is in the 2022 Landscape Source files for SNPs that are available on the CMS Prescription Drug Coverage page. Also on that page, in the 2022 [MMP Landscape Source Files](#), is information about the Medicare-Medicaid Plans (MMPs) that will operate in demonstrations under the Financial Alignment Initiative in 2022.

Notice of Intent to Apply (NOIA) Deadline

CMS announced the release of the Contract Year (CY) 2023 Notice of Intent to Apply (NOIA) web tool and key dates for the CY 2023 Medicare Advantage (MA) and Prescription Drug Benefit (Part D) application cycle. Organizations should submit the CY 2023 NOIA by **5:00 pm ET on November 11, 2021**.

MA and Part D organizations must submit a NOIA for CY 2023 if they plan to:

- Offer a new (initial) MA and/or Part D product type; or
- Expand an existing contract's service area (service area expansion or SAE) or adding to an existing contract.

For CY 2023, Organizations must use the following links to access and complete the NOIA web tools:

- **New/Initial MA or Part D Plan:** https://cms.gov1.qualtrics.com/jfe/form/SV_9BUmXUpMcT5aF9A
- **MA or Part D SAE (including adding a SNP to an existing contract):**
https://cms.gov1.qualtrics.com/jfe/form/SV_eA1J406CYnaYose

CMS Launches Webpage to Share Innovative State Actions to Expand Medicaid Home- and Community-based Services

On October 21, CMS launched a [new “one-stop shop” webpage](#) for state Medicaid agencies and stakeholders on Medicaid.gov to advance transparency and innovation for home- and community-based services (HCBS). State Medicaid agencies and stakeholders can use this resource to access information about states' plans to enhance, expand, and strengthen HCBS across the country using new Medicaid funding made available by the American Rescue Plan Act of 2021 (ARP). The ARP provided states with a temporary 10 percentage point increase in federal Medicaid funding for certain Medicaid HCBS from April 1, 2021 through March 31, 2022, if they meet certain requirements. As the COVID-19 pandemic continues, the additional ARP funding allows those enrolled in Medicaid who need long-term services and supports to receive the assistance required to reside in the setting of their choice.

2022 Medicare Advantage Star Ratings Released

The [Medicare Advantage \(MA\) Star Ratings](#) for calendar year 2022 are now available. CMS publishes the Star Ratings each year to help beneficiaries find the best plan for them and to determine MA quality bonus payments to plans. States can use the ratings to help assess the performance of plans operating in their state, especially Dual Eligible Special Needs Plans (D-SNPs) with which they have contracts.

In reviewing the ratings, note that:

- The lowest-ranking plans receive one star, and the highest-ranking plans receive five stars.
- Star Ratings are assigned at the contract level, not at the individual plan level. A single MA contract may include more than one type of Special Needs Plan (SNP) (i.e., chronic condition, institutional, and/or dual eligible), as well as non-SNP MA plans. A single MA contract may also include plans in more than one state. The Star Rating assigned to the contract applies to (and reflects the performance of) all plans under the contract.
- Three SNP-specific measures for care management and care for older adults are reported at the plan level rather than at the contract level. (A fourth SNP-specific measure -- Care for Older Adults -- Functional Status Assessment -- was temporarily moved to the display page as NCQA updates the measure specifications.)
- CMS implemented several changes in 2020 to address the impact of the 2019 Novel Coronavirus (COVID-19) public health emergency (PHE) on Star Ratings in the Medicare and Medicaid Programs. For more information, see the [2022 Part C and D Star Ratings Fact Sheet](#).

Five-Star Contracts. As detailed in the Fact Sheet, 74 out of 471 MA-PD contracts for 2022 have received the highest five-star rating. These contracts enroll just under 27 percent of MP-PD enrollees (Table 4). Of these 74 top-rated contracts, 39 include one or more SNPs (Appendix Table A1). The service areas for these five-star contracts are shown in Table A1 in the column titled “Non-Employer Group Health Plan Service Area.”

ICRC's [How States Can Use Medicare Advantage Star Ratings to Assess D-SNP Quality and Performance](#) technical assistance tool explains how to find Star Ratings for D-SNPs in your state.

October 2021 Enrollment in Medicare-Medicaid Plans

Between September and October 2021, total Medicare-Medicaid Plan (MMP) enrollment in the nine states (CA, IL, MA, MI, NY, OH, RI, SC, and TX) currently implementing capitated model demonstrations under the Financial Alignment Initiative increased from 418,762 to 423,883 as shown in ICRC's table [Monthly Enrollment in Medicare-Medicaid Plans by Plan and by State, October 2020 to October 2021](#). Note that as of July 2021, Illinois' Medicare-Medicaid Alignment Initiative (MMAI) began a statewide expansion. Therefore, the September increase in Illinois' MMP enrollment of approximately 10,000 people and the additional increase in October is due mainly to passive and voluntary enrollment in newly expanded service areas across the state.

October 2021 Enrollment in PACE Organizations

PACE organizations provide comprehensive medical and social services to frail, community-dwelling individuals age 55 and older, most of whom are dually eligible. As shown in ICRC's table, [Program of All Inclusive Care for the Elderly \(PACE\) Total Enrollment by State and by Organization](#), PACE organizations were operating in 31 states in October 2021. Between September and October 2021, the total number of Medicare beneficiaries enrolled in PACE increased from 51,899 to 52,088.

Key Upcoming Dates

- **October 15- December 7** – Annual Coordinated Election Period, Medicare beneficiaries can enroll in MA or Part D plans for 2022
- **November 11** – 2023 Notice of Intent to Apply (NOIA) due for new MA or Prescription Drug Plan (PDP) contracts or extensions
- **December 7** – End of the Annual Election Period

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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