

Helping states develop integrated programs for individuals who are dually eligible for Medicare and Medicaid

July 28, 2020

Integrated Care Updates

MedPAC Data Book on Medicare Spending

On July 17, the Medicare Payment Advisory Commission (MedPAC) released its 2020 Data Book: Health Care Spending and the Medicare Program, which provides data on Medicare spending, demographics of the Medicare population, beneficiaries' access to care, and quality of care in the program, among other information. Section 4 covers dually eligible beneficiaries and includes information on the percentage of Medicare spending for this population, demographic data, health status, and service use. Section 9 covers Medicare Advantage (MA) and includes information on D-SNP enrollment trends and enrollment of dually eligible beneficiaries in Medicare Advantage plans by age and by whether they have full or partial dual eligibility. It also shows the growth in recent years of average monthly rebate dollars, which plans can use to provide supplemental benefits.

New ICRC Tools Help States Identify Dually Eligible Individuals and Aligned Enrollees

State Count Down to 2021 – Implementing New D-SNP Integration Standards

By January 1, 2021, D-SNPs must meet new integration standards. Each month, ICRC will post tips for state Medicaid agencies to help them support the implementation of these requirements.

In late July, CMS will send deficiency notices to D-SNPs whose State Medicaid Agency Contracts (SMACs) did not meet the new integration standards effective January 1, 2021. However, D-SNPs will have the opportunity to correct contract deficiencies and resubmit revised SMACs by November 2, 2020. The first window for resubmissions runs until August 17, 2020. For more information, see the CMS memo from April 13, 2020.

In July, ICRC released new resources to help states identify both individuals who are (or who will soon be) dually eligible and dually eligible individuals who are enrolled in D-SNPs and Medicaid managed care plans owned by the same parent company ("affiliated" plans).

The TA tool <u>Using Medicare Modernization Act (MMA) Files to Identify Dually Eligible Individuals</u> explains how states can identify Medicaid enrollees who are currently dually eligible, as well as Medicaid enrollees who will become dually eligible in the next three months (known as "prospective" dually eligible individuals) though the MMA file exchange process that states are required to complete with CMS on at least a monthly basis.

A related tool, <u>State Guide to Identifying Aligned Enrollees: How to Find Medicare Plan Enrollment for Dually Eligible Individuals in Medicaid Managed Care Plans</u>, explains how states can identify aligned and unaligned enrollees within their dually eligible populations by either: (1) accessing CMS data on Medicare plan enrollment and matching it with Medicaid plan enrollment data; or (2) collecting aligned enrollment data directly from D-SNPs.

Want to Know More about the Dually Eligible Individuals in Your State? Request a State Data Profile

ICRC has developed an <u>online form</u> for state agencies to request a customized data profile on their dually eligible populations. These profiles can include data on demographics, enrollment and coverage, service utilization, chronic conditions, and other information at the state (and sometimes county) level. These profiles can help state decision makers to better understand their dually eligible populations and improve the programs that serve them. ICRC staff will work closely with state staff to identify which variables and data would be of greatest use and create a profile that highlights key findings in easy-to-interpret graphs and charts.

July 2020 Enrollment in Medicare-Medicaid Plans

Between June and July 2020, total Medicare-Medicaid Plans (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 389,944 to 390,986 as shown in ICRC's table Monthly Enrollment in Medicare-Medicaid Plans by Plan and by State, July 2019 to July 2020.

July 2020 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 Medicare-Medicaid enrollees. As shown in ICRC's table, <u>Program of All Inclusive Care for the Elderly (PACE) Total Enrollment by State and by Organization</u>, PACE organizations were operating in 31 states in July 2020, with three new PACE organizations launched in CA and one new PACE organization in OR during July. Between June and July 2020, the total number of Medicare beneficiaries enrolled in PACE increased from 49,277 to 49,333.

New Resources on the ICRC Website

- <u>Integrated Appeal and Grievance Processes for Integrated D-SNPs with Exclusively Aligned Enrollment</u>: This fact sheet is intended to help states with applicable integrated plans understand the new integrated appeal and grievance processes, the types of Dual Eligible Special Needs Plans (D-SNPs) that are required to use them, and steps that states can take to help ensure effective implementation of the new processes in 2021. (ICRC/ July 2020)
- <u>Using Medicare Modernization Act (MMA) Files to Identify Dually Eligible Individuals</u>: This technical assistance
 tools explains how states can identify Medicaid enrollees who are currently dually eligible, as well as Medicaid
 enrollees who will become dually eligible in the next three months though the MMA file exchange process that
 states are required to complete with CMS on at least a monthly basis. (ICRC/ July 2020)
- State Guide to Identifying Aligned Enrollees: How to Find Medicare Plan Enrollment for Dually Eligible Individuals in Medicaid Managed Care Plans: This technical assistance tool explains how states can identify aligned and unaligned enrollees within their dually eligible populations through two methods: (1) accessing CMS data on Medicare plan enrollment and matching it with Medicaid plan enrollment data; or (2) collecting aligned enrollment data directly from D-SNPs. (ICRC/ July 2020)

Key Upcoming Dates

• July-August - Release of state-specific marketing guidance for MMPs

- August 7 Comments due on the proposed <u>Addendum to the Part C & D Enrollee Grievances</u>, <u>Organization/Coverage Determinations</u>, and <u>Appeals Guidance</u> ("Part C & D Guidance")
- Mid-September CMS fully executes MA and Prescription Drug Plan (PDP) contracts
- September 30 Deadline for all MA, MA-PD, MMP, PDP, and cost-based plans (including those not offering Part D and those that do offer Part D) to send the standardized Annual Notice of Change (ANOC) and LIS (Low Income Subsidy) rider to current enrollees
- Early November Final notification by CMS of D-SNP integration status and sanctions based on CY 2021 SMACs
- November 2 Deadline for D-SNPs to correct contract deficiencies and resubmit revised SMACs

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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