

New Opportunities to Test Innovative Models of Integrated Care for Dually Eligible Individuals

This morning *Health Affairs* published a blog post, [Better Care For People Dually Eligible For Medicare And Medicaid](#), by Administrator Seema Verma that highlights improving care for dually eligible individuals as one of the Centers for Medicare & Medicaid Services' (CMS) strategic priorities for 2019.

As part of that effort, CMS released a [State Medicaid Director Letter](#) that invites states to partner with CMS to test innovative approaches to better serve individuals who are dually eligible for Medicare and Medicaid. The three new opportunities include:

- **The Capitated Financial Alignment Model.** Through three-way contracts between CMS, the state, and health plans, this model provides the full array of Medicare and Medicaid services for enrollees for a set capitated payment.
- **The Managed Fee-for-Service Financial Alignment Model.** This model, which is a partnership between CMS and the participating state, allows the state to share in Medicare savings from innovations for services covered on a fee-for-service (FFS) basis.
- **State-Specific Models.** CMS is open to partnering with states on testing new state-developed models to better serve dually eligible individuals and invites states' ideas, concept papers, and/or proposals.

Today's letter complements a [December 2018 State Medicaid Director Letter](#) that highlighted 10 opportunities to improve care for dually eligible individuals, including using Medicare data to inform care coordination and program integrity initiatives, and reducing administrative burden for dually eligible individuals and the providers who serve them.

For states that already have capitated financial alignment model demonstrations underway, the new State Medicaid Director Letter offers the opportunity to request revisions to existing demonstrations, including multi-year extensions and/or changes in geographic scope.

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 Policy Research and the Center for Health Care Strategies. For more information, visit www.integratedcareresourcecenter.com.

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