

Spotlight: Preview of Dual Eligible Special Needs Plan Entries and Departures in 2017

The Centers for Medicare & Medicaid Services (CMS) has released <u>preliminary information</u> on the Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs) that will be operating in each state in 2017. The Integrated Care Resource Center (ICRC) combined this information with state-by-state D-SNP enrollment information from the CMS SNP Comprehensive Report for October 2016 to create a table of <u>New and Departing Dual Eligible Special Needs Plans (D-SNPs) in Calendar Year 2017, by State</u> identifying D-SNPs that will be new and those that will no longer be operating in each state as of January 2017.

How to use this information. States can use this information to assess changes in their D-SNP markets, as well as national patterns. States with departing D-SNPs can work with those plans and CMS to make sure that current enrollees are informed of their coverage options and receive assistance in transitioning to new coverage as needed. CMS required departing D-SNPs and those with service area reductions for 2017 to notify affected enrollees by October 2, 2016, in advance of the start of the 2017 Medicare Annual Election Period on October 15, 2016. States with D-SNPs entering in 2017 can work with them to comply with the state's Medicare Improvement for Providers and Patients Act (MIPPA) contract requirements to provide or arrange for provision of Medicaid benefits.

Highlights from the table. In October 2016, there were 192 Medicare Advantage contracts that included 350 D-SNP plans operating in 38 states, the District of Columbia, and Puerto Rico. (A contract may include more than one plan and plan type.) In 2017, 29 contracts in 19 states and the District of Columbia will include new D-SNPs. There will be one or more departing D-SNPs in 15 contracts in 7 states. Eight existing contracts in 6 states will be consolidated with other contracts in the state operated by the same company. In those cases, the D-SNP enrollees will be automatically enrolled in the D-SNP under the consolidated contract if they live in the D-SNP service area. In addition, there will be 15 large (affecting more than 50 D-SNP enrollees) service area reductions in 11 states.

Of the current 1.87 million D-SNP enrollees, only 0.8 percent (14,452) are in departing D-SNP plans, and another 0.3 percent (4,775) will be affected by large service area reductions. Only one state will have more than 5 percent of its D-SNP enrollees affected by a departing contract (Illinois, with 9 percent of its current D-SNP enrollees affected by two departures). Only Idaho will have more than 5 percent of its D-SNP enrollees affected by a large service area reduction, with 8 percent of the enrollees in one D-SNP being affected.

Final information in January. Final information on D-SNPs operating in 2017, along with their enrollment, will be released by CMS in mid-January, with more information available in mid-February. The information will be in the monthly <u>CMS SNP Comprehensive Reports</u>.

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 http://www.integratedcareresourcecenter.com.