

## Spotlight: Care Management Resources for States and Health Plans Serving Dually Eligible Beneficiaries

Dually eligible beneficiaries often have a complex array of medical, behavioral health, and social support needs. Targeted care management approaches and coordinated interventions are essential to effectively addressing those needs. The <a href="Integrated Care Resource Center">Integrated Care Resource Center</a> developed and compiled several resources from various programs nationwide that can help states and health plans operating Medicare-Medicaid integrated care programs to better understand how to address the needs of this special population. These resources provide best practices for designing interventions and options for mitigating care management challenges to most effectively support high-risk beneficiaries.

- Contacting and Engaging High-Risk Medicare-Medicaid Enrollees and Coordinating Their
   Care Effectively. This ICRC presentation, originally aimed at Medicare-Medicaid Plans in a state
   with a financial alignment demonstration, has been adapted for use by a broader group of states
   and plans. This presentation provides states with: (1) suggestions for contacting and engaging
   high-need dually eligible beneficiaries; (2) strategies to improve care coordination and health
   outcomes; and (3) an overview and context for the other materials summarized below.
- Contacting Hard-to-Locate Medicare and Medicaid Members: Tips for Health Plans and Building a Culture of Engagement for Medicare-Medicaid Enrollees: Health Plan Approaches. It may be difficult to locate individuals eligible for integrated care programs due to inaccurate contact information, higher likelihood of unstable housing situations, or other logistical issues like prepaid cell phones running out of minutes. Similarly, it may be difficult to engage beneficiaries with mental health and substance abuse issues, unstable housing/chronic homelessness, and language/literacy barriers subpopulations particularly prevalent among Medicare-Medicaid beneficiaries under the age of 65. These briefs from the Center for Health Care Strategies were developed for health plans but also are applicable to states with programs for high-need dually eligible beneficiaries. The briefs provide approaches for identifying, reaching, and serving individuals in a timely way and engagement strategies supporting individuals' unique experiences, needs, and goals.
- Targeting Care Management Approaches. Dually eligible beneficiaries require intensive care coordination. Integrated programs, in which health plans or other entities hold risk for both Medicare and Medicaid services, may offer beneficiaries better coordinated care management services because they are able to manage the full array of benefits available to enrollees. The resources below describe how to stratify enrollees into different care management risk groups and how to use claims data for identifying individuals most likely to need intensive care coordination services. They also discuss more targeted strategies for care coordination activities to reduce potentially avoidable hospitalizations, one of the key cost drivers and factors resulting in poor outcomes for dually eligible beneficiaries.

## Issue briefs and journal articles:

- Risk Stratification to Inform Care Management for Medicare-Medicaid Enrollees: State
   Strategies. This issue brief describes how three states—California, Ohio and Virginia—required integrated health plans to stratify Medicare-Medicaid enrollees by their level of need within capitated financial alignment demonstrations.
- Six Features of Medicare Coordinated Care Demonstration Programs That Cut Hospital Admissions of High-Risk Patients. This Health Affairs article describes six common

approaches practiced by care managers in fee-for-service (FFS) Medicare Coordinated Care Demonstration sites that reduced hospitalizations among high-risk enrollees and discusses ways of making these interventions cost-effective.

- How Changes in Washington University's Medicare Coordinated Care Demonstration
   <u>Pilot Ultimately Achieved Savings</u>. This Health Affairs article outlines changes to increase
   the intensity of care management services in this FFS demonstration, including more
   frequent in-person contacts for the highest-risk enrollees in a Medicare Coordinated Care
   Demonstration site that reduced hospitalizations and monthly Medicare spending per
   enrollee.
- Reducing Avoidable Hospitalizations among Medicare-Medicaid Enrollees in Nursing
   Facilities: Issues and Options for States. This issue brief describes strategies that states
   can use to reduce avoidable hospitalizations among this population. These include
   working with health plans through contract requirements, performance incentives, and
   performance improvement projects, as well as making changes in Medicaid FFS nursing
   facility payment systems to reduce incentives for hospitalizations.

## Webinar:

Reducing Avoidable Hospitalizations among Nursing Facility Residents: Three
 Perspectives. This webinar illustrates examples of what states, health plans, and providers can do to address this long-standing problem for Medicare-Medicaid enrollees.

## 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 <a href="http://www.integratedcareresourcecenter.com">http://www.integratedcareresourcecenter.com</a>.

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