

Integrated Care Updates

CMS Releases State Medicaid Agency Contract Submission Requirements for Contract Year 2024

On January 11, the Centers for Medicare & Medicaid Services (CMS) [released the requirements for State Medicaid Agency Contracts \(SMACs\) with D-SNPs for contract year 2024](#). This submission will be due in the summer of 2023.

All organizations seeking to offer a D-SNP in 2024 – including new D-SNP applicants and existing D-SNPs – must complete the 2024 D-SNP SMAC submission within the CMS Health Plan Management System (HPMS). All D-SNP applicants must: (1) complete the required attestations in HPMS, (2) upload executed state Medicaid agency contracts for each state of operation in 2024, and (3) upload a completed SMAC requirements matrix (previously referred to as the 5.11 matrix). Applicants seeking fully integrated D-SNP (FIDE SNP) or highly integrated D-SNP (HIDE SNP) designation, and D-SNP applicants seeking applicable integrated plan (AIP) designation must also complete and upload the SNP Contract Status Review matrix (previously referred to as the 5.12 matrix). Copies of these matrices and the attestations that applicants must complete within HPMS are included within the instructions document provided above.

CMS will only accept 2024 SMAC submissions using the 2024 version of the D-SNP SMAC application. All uploaded documentation must contain the appropriate CMS-issued contract number.

CMS Publishes Increased Minimum Income Limits for Medicare Savings Programs for Dually Eligible Individuals

In a [January 19, 2023 Informational Bulletin](#), the CMS Center for Medicaid and CHIP Services (CMCS) notified states of the new federal poverty level guidelines for 2023, which reflect an 8.0 percent price increase between calendar years 2021 and 2022. The release of these new poverty level guidelines also results in an increase in the minimum income limits for Medicare Savings Programs (MSPs), in which state Medicaid programs pay Medicare premiums and cost sharing for individuals who are dually eligible for Medicare and Medicaid. For Qualified Medicare Beneficiaries (QMBs), for example, the income limit in calendar year 2023 is \$1,235 per month for individuals, and \$1,663 per month for couple. (In 2022, these limits were \$1,153 and \$1,546 per month, respectively.) The limits in Alaska and Hawaii are higher.

CMS has also increased the minimum asset limits for MSPs for calendar year 2023. For QMBs, for example, the minimum limit in 2023 is \$9,090 for individuals and \$13,630 for couples, up from \$8,400 and \$12,600 in 2022. Section 1902(r)(2) of the Social Security Act requires that states use income and resource eligibility standards for MSPs that are “no more restrictive” than the national standards, but states can choose to use standards that allow more people to be eligible for the programs. For example, using section 1902(r)(2)(A) authority, states can choose to disregard certain income and assets that are counted for MSP but not LIS, such as in-kind support, cash value of life insurance, and burial exclusions. Similarly, using section 1902(r)(2)(A) authority, states can increase the effective income level needed to qualify for MSPs. Finally, states can adopt the family size definition for LIS when determining eligibility for MSPs.

ICRC Invites Website Feedback

The Integrated Care Resource Center (ICRC) is an initiative of the CMS Medicare-Medicaid Coordination Office that supports state Medicaid agencies in improving care for individuals dually eligible for Medicare and Medicaid.

The [ICRC website](#) is a major component of our technical assistance activities. We would like your feedback on our website and how we can improve it to better meet your needs or the needs of the state Medicaid agency(ies) in the state(s) where you work. We invite you to complete the survey through **February 17, 2023**. We thank you in advance for your participation and greatly value your feedback.

Take the Survey: <https://forms.office.com/r/Jrp6KKjFWa>

January 2023 Enrollment in Medicare-Medicaid Plans

Between December 2022 and January 2023, total Medicare-Medicaid Plan (MMP) enrollment in the nine states (CA, IL, MA, MI, NY, OH, RI, SC, and TX) with current capitated model demonstrations under the Financial Alignment Initiative decreased from 429,073 to 307,748 as shown in ICRC's table [Monthly Enrollment in Medicare-Medicaid Plans by Plan and by State, January 2022 to January 2023](#). This decrease is largely due to the transition of enrollees from Medicare-Medicaid plans in California's Cal MediConnect Financial Alignment Initiative demonstration to new "Medicare Medi-Cal Plans," which are D-SNPs that have exclusively aligned enrollment with affiliated Medicaid plans.

January 2023 Enrollment in PACE Organizations

Program of All Inclusive Care for the Elderly (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, [PACE Total Enrollment by State and by Organization](#), PACE organizations were operating in 31 states in January 2023. Between December 2022 and January 2023, the total number of Medicare beneficiaries enrolled in PACE increased from 56,167 to 55,765.

New Resources on the ICRC Website

- [Definitions of Different Medicare Advantage Dual Eligible Special Needs Plan \(D-SNP\) Types in 2023 and 2025](#) (December 2022): This tip sheet summarizes the updated definitions of FIDE SNPs, HIDE SNPs, Coordination Only (CO) D-SNPs, and applicable integrated plans (AIPs) for 2023 and compares the requirements for each D-SNP type. This information can be helpful to states as they develop and implement programs that advance Medicare-Medicaid integration for their dually eligible populations.
 - [Working with Medicare Webinar on State Contracting with Dual Eligible Special Needs Plans \(D-SNPs\)](#) (December 13 & 15, 2022): These webinars provide an overview of state strategies for contracting with D-SNPs to improve care coordination and Medicare-Medicaid alignment for dually eligible individuals. The webinars are especially helpful to state staff who are new to or seek a refresher on D-SNP contracting and working with Medicare plans.
 - **Webinar 1:** [Introduction to D-SNPs and D-SNP Contracting Basics](#)
 - **Webinar 2:** [Using D-SNPs to Integrate Care for Dually Eligible Individuals](#)
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Key Upcoming Dates

- **February 1, 2023-** Release of the Advance Notice of Methodological Changes for CY 2024 for Medicare Advantage (MA) Capitation Rates and Part C and Part D Payment Policies
- **February 2023-** Model of Care (MOC) renewal submissions are due for SNPs with MOC approvals ending December 31, 2023.

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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