

## Integrated Care Updates

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### MedPAC and MACPAC March Reports to Congress: Issues Related to Integrated Care for Dually Eligible Individuals

The **Medicare Payment Advisory Commission** (MedPAC) [March 2023 Report to Congress](#) on Medicare Payment Policy includes a chapter on payment to Medicare Advantage (MA) plans (including Dual Eligible Special Needs Plans [D-SNPs]) that may be of interest to states that contract with – or are considering contracting with – D-SNPs. The report also includes chapters on Medicare fee-for-service (FFS) payment policy for skilled nursing facility, home health, and hospice benefits, all of which may be of interest to states seeking to better coordinate these Medicare benefits with overlapping Medicaid benefits for dually eligible individuals.

The **Medicaid and CHIP Payment and Access Commission** (MACPAC) [March 2023 Report to Congress](#) includes a chapter on Medicaid nursing facility payment policies that has a short section on the interaction between Medicare and Medicaid payment policies, which state Medicaid agencies may also find useful in understanding, developing and refining Medicaid nursing facility payment policy for dually eligible individuals (pp.45-46).

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### Integrated Care Census: 1.75 Million Dually Eligible Beneficiaries in Integrated Care

On March 27, the Centers for Medicare & Medicaid Services (CMS) provided Congressional leaders with the [Medicare-Medicaid Coordination Office \(MMCO\) FY 2022 Report to Congress](#), as required by statute.

One report highlight is MMCO's annual update on enrollment in integrated care programs. In 2022, about 21 percent of full-benefit dually eligible individuals were enrolled in integrated care. Enrollment in these programs has increased steadily over time – up from just 161,777 individuals in 2011 to 1.75 million in 2022 (see the graph on page 6 for more information). In 2022, 46% of all integrated care enrollees were in fully integrated plans or programs.

The report also provides three legislative recommendations as well as an overview of CMS accomplishments and ongoing work to improve care for the nearly 13 million individuals concurrently enrolled in both the Medicare and Medicaid programs in 2022.

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### March 2023 Enrollment in Medicare-Medicaid Plans

Between February and March 2023, total Medicare-Medicaid Plan (MMP) enrollment in the eight states (IL, MA, MI, NY, OH, RI, SC, and TX) with capitated model demonstrations under the Financial Alignment Initiative increased from 308,881 to 309,045 as shown in ICRC's table [Monthly Enrollment in Medicare-Medicaid Plans by Plan and by State, March 2022 to March 2023](#). The overall decrease in MMP enrollment since late 2022 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.

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## March 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 March 2023. Between February and March 2023, the total number of Medicare beneficiaries enrolled in PACE increased from 56,042 to 56,316.

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## New Resources on the ICRC Website

- [Selectively Contracting with Medicare Advantage Dual-Eligible Special Needs Plans \(D-SNPs\) to Promote Alignment with Medicaid Managed Care Plans](#) (February 2023): This webinar explains the potential benefits for states of selectively contracting with D-SNPs, key building blocks for selective contracting, considerations for states when deciding to selectively contract with D-SNPs, and steps that states can take when implementing selective contracting.
- [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

- **April 2023-** CMS releases guidance for D-SNP look-alikes about CY2023 transitions and Plan-Submitted Rollover (POVER) transactions.
  - **April 2023-** Plan Creation Module, Plan Benefit Package (PBP) module, and Bid Pricing Tool software released in the CMS Health Plan Management System (HPMS); organizations interested in offering a MA, PDP, or MMP product in CY2024 must submit a PBP that accurately describes the coverage details and cost-sharing for all covered benefits by June 5.
  - **Early April 2023-** Deadline for MA organizations to submit full contract consolidation requests for CY 2024.
  - **May 2023-** Release of CY2024 model templates for MA plan Annual Notice of Change, Evidence of Coverage, LIS rider, Part D Explanation of Benefits, formularies, transition notice, provider directory, pharmacy directory, and member identification cards. Plans are able to begin uploading these documents into HPMS for CMS review in July.
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- **May-July 2023-** Release of final state-specific MMP and D-SNP CY2024 models in selected states; ANOC/EOC (Member Handbook), Summary of Benefits, Formulary, Provider and Pharmacy Directory, Member ID card, and other integrated member material models.

#### **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](http://www.integratedcareresourcecenter.com).

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