

Integrated Care Updates

Upcoming Compliance Date October 1, 2024: All states will be required to deem most Medicare-enrolled Supplemental Security Income (SSI) recipients eligible for the QMB group

Medicare-enrolled SSI recipients are always financially eligible for the Qualified Medicare Beneficiary (QMB) Medicare Savings Programs (MSP) eligibility group, but over 500,000 are not currently enrolled. By October 1st of this year, states will be required to deem most Medicare-enrolled SSI recipients, who are in the mandatory SSI group or 209(b) group (SSI Medicaid), eligible for the QMB group. An exception to this requirement will apply to states that do not have a Part A buy-in agreement (“group payer states”) where it will be optional for the state to deem SSI Medicaid recipients who lack premium-free Part A and are enrolled in Part B only, eligible for the QMB group. If you have questions about the new requirements or are a group payer state wishing to elect the option to deem SSI recipients who lack premium-free Part A eligible for the QMB group, please contact the Medicare-Medicaid Coordination Office at ModernizetheMSPs@cms.hhs.gov for more information. States can also find additional details about this new requirement in section 1.6.2.6 of Chapter 1 of the [Manual for State Payment of Medicare Premiums](#).

Upcoming Deadlines: D-SNPs to Submit State Medicaid Agency Contracts & Medicare Plans to Submit CY2025 Bids

D-SNPs must submit their fully executed State Medicaid Agency Contracts (SMACs) to CMS by **July 1, 2024**. Also, all Medicare Advantage and Part D, including D-SNPs, must submit CY2025 bids and formulary files to CMS by **June 3, 2024**.

New ICRC Resource: Tips for States on Working with Dual Eligible Special Needs Plans to Improve Coordination of Physical and Behavioral Health Services for Dually Eligible Individuals

The Integrated Care Resource Center (ICRC) has developed a new resource – [Tips for States on Working with Dual Eligible Special Needs Plans to Improve Coordination of Physical and Behavioral Health Services for Dually Eligible Individuals](#) – that details strategies states can use in their State Medicaid Agency Contracts (SMACs) with Dual Eligible Special Needs Plans (D-SNPs) to promote integration and coordination of behavioral health benefits among enrolled dually eligible individuals. This tip sheet also highlights how a few D-SNPs have gone beyond the SMAC requirements to further promote behavioral health integration.

ICRC also conducted a webinar on April 30, 2024 on coordination of Medicare and Medicaid behavioral health benefits for dually eligible individuals. The recording and slides from that webinar are available [on the ICRC website](#).

New ICRC Resource: Tips on Assessing Bidders' Past Performance for States Procuring Integrated Care Plans

In May 2024, ICRC released a tip sheet, [Success Begins with Selection: Tips on Assessing Bidders' Past Performance for States Procuring Integrated Care Plans](#). This tip sheet adds to the ICRC's existing tools on D-SNP contracting, is designed to help states that are planning procurements related to their integrated care programs for dually eligible individuals. Specifically, this tip sheet aims to help these states: (1) understand the relationship between state efforts to procure Medicaid managed care plans for these programs and the state's D-SNP contracting strategy; (2) consider options for incorporating Medicare resources into integrated care program procurements; and (3) identify and use Medicare resources to inform state selection of Medicaid managed care plans that will cover Medicaid benefits for D-SNP enrollees.

May 2024 Enrollment in Medicare-Medicaid Plans, PACE Organizations, and Applicable Integrated Plans

May data on enrollment in Medicare-Medicaid Plans (MMPs), Program of All-Inclusive Care for the Elderly (PACE) organizations, and Applicable integrated Plans (AIPs) is now available on the ICRC website at: [Monthly Integrated Care Exclusively Aligned Enrollment Report: Dually Eligible Individuals Enrolled in MMPs, PACE, and AIPs](#). Table 1 in this document shows total monthly enrollment for all integrated care plans with exclusively aligned enrollment (MMPs, PACE, and AIPs). Between April and May 2024, total enrollment in integrated care plans with exclusively aligned enrollment held steady at 1.3 million.

New Resources on the ICRC Website

- [Success Begins with Selection: Tips on Assessing Bidders' Past Performance for States Procuring Integrated Care Plans](#) (May 2024): This tip sheet is designed to help states that are planning procurements related to their integrated care programs for dually eligible individuals.
 - [Working with Medicare: Coordination of Medicare and Medicaid Behavioral Health Benefits](#) (April 2024): This webinar provides an overview of Medicare and Medicaid behavioral health benefits (including mental health and substance use disorder benefits) for dually eligible individuals.
 - [Tips for States on Working with Dual Eligible Special Needs Plans to Improve Coordination of Physical and Behavioral Health Services for Dually Eligible Individuals](#) (April 2024): This tip sheet details strategies states can use in their State Medicaid Agency Contracts (SMACs) with D-SNPs to promote integration and coordination of behavioral health benefits among enrolled dually eligible individuals.
 - [D-SNP-Only Contracts: Benefits and Key Steps for States](#) (March 2024): This webinar describes the opportunity for states to require D-SNPs that operate with exclusively aligned enrollment to establish contracts with CMS that only include one or more D-SNPs within a state and integrate certain materials for enrollees.
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- [Integrating Dual Eligible Special Needs Plan Materials to Promote Enrollee Understanding of, and Access to, Benefits](#) (February 2024): The tip sheet was created to help states work with their AIP D-SNPs to develop integrated materials for D-SNP enrollees.

Key Upcoming Dates

- **May – July 2024:** The Centers for Medicare & Medicaid Services (CMS) releases state-specific MMP and D-SNP models (where applicable), which may include: Annual Notice of Change (ANOC)/Evidence of Coverage (EOC) (Member Handbook), Summary of Benefits, Formulary, Provider and Pharmacy Directory, Member ID card, and other state-specific models.
- **Early June 2024:** Submission period begins for plans to submit CY2025 marketing materials to CMS for review via the Health Plan Management Plan System (HPMS) Marketing Module.
- **June 3, 2024:** Deadline for all Medicare plans (Medicare Advantage and Part D) to submit CY2025 bids and formulary files; plans (including MMPs) deciding not to renew their contracts must notify CMS in writing.
- **June 4-5, 2024:** Initial submission period begins for MA organizations to request crosswalk exceptions for CY2025.
- **June 7, 2024:** CMS releases CY2025 D-SNP module for D-SNPs to upload required SMACs, Attestations, and Contract Matrices in HPMS.

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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