

CMS Releases New Guidance for States Seeking to Leverage New Opportunities for Integrated Care Programs

The [Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs Rule](#) codified a new pathway at 42 CFR 422.107(e) through which states can use state Medicaid agency contracts to require dual eligible special needs plans (D-SNPs) with exclusively aligned enrollment to:

- a) establish contracts that only include one or more D-SNPs within a state, and
- b) integrate certain materials and notices for enrollees.

Choosing to pursue the opportunities under 42 CFR 422.107(e) would confer several benefits, such as enabling quality reporting and ratings specific to each D-SNP-only contract, improving beneficiary experiences by providing a more seamless description of coverage through integrated materials, and improving coordination between states and the Centers for Medicare & Medicaid Services (CMS) on monitoring and oversight of D-SNPs.

On August 25, CMS released [Guidance for States Seeking to Leverage New Opportunities for Integrated Care Programs](#) that describes for states the process for working with CMS to establish D-SNP-only contracts and develop integrated materials.

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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