

# Frequently Asked Questions (FAQs) about the Integrated Care Resource Center

## 1. What does the Integrated Care Resource Center (ICRC) do?

ICRC helps states to improve care for people who are eligible for both Medicare and Medicaid by:

- Offering one-on-one technical assistance around policy options and program management questions;
- Providing peer-to-peer group learning through webinars and small groups calls among states with similar issues or needs;
- Developing written resources and e-mail alerts that examine integration-related topics and explain the relevance of federal Medicare and Medicaid guidance to state Medicaid agencies; and
- Providing a website [www.IntegratedCareResourceCenter.com](http://www.IntegratedCareResourceCenter.com) where visitors can find ICRC's technical assistance briefs and tools, archived e-mail alerts and webinars, and other materials related to integrating Medicare and Medicaid.

## 2. Who runs ICRC?

ICRC is supported by the Medicare-Medicaid Coordination Office in the Centers for Medicare & Medicaid Services (CMS). Our activities are coordinated by staff from [Mathematica Policy Research](#) and the [Center for Health Care Strategies](#), with additional assistance from [Infocrossing](#) and other external experts.

## 3. Who can receive assistance from ICRC? Is it free? How can a state request one-on-one technical assistance from ICRC?

Any state can receive assistance from ICRC at no charge. You can email us with a question or request a call with ICRC staff. To contact ICRC, send an email to: [ICRC@chcs.org](mailto:ICRC@chcs.org).

## 4. Why should my state invest in efforts to integrate care for dually eligible beneficiaries?

The biggest potential benefits of better Medicare-Medicaid integration are improving beneficiaries' access to care, quality of care, and experience of care. It can also improve beneficiaries' health outcomes and reduce their out-of-pocket costs. In addition, integrated care programs can incorporate administrative simplifications that reduce burdens on providers and state staff. Finally, states have the potential for cost savings from some integrated care approaches.

## 5. How can I learn more about the dually eligible beneficiaries in my state?

States that want to improve care for their dually eligible beneficiaries should start by learning more about these populations: where they live; the types of benefits they have; whether they are enrolled in Medicare Advantage plans; the types of physical and behavioral health conditions they have; and the services they use. CMS regularly reports data on dually eligible beneficiary demographics, service utilization, spending,

and other characteristics that can be helpful to states. See the ICRC tool “How States Can Better Understand their Dually Eligible Beneficiaries: A Guide to Using CMS Data Resources” for more information on these data sources and how to use them.<sup>1</sup>

## 6. How can ICRC help states that are looking to better understand Medicare?

A good place for state Medicaid staff to start learning about Medicare is ICRC’s technical assistance brief “Medicare Basics: An Overview for States Seeking to Integrate Care for Medicare-Medicaid Enrollees.”<sup>2</sup> ICRC’s *Working with Medicare* webinar series provides more information on specific topics:

- Medicare 101 and 201: Key Issues for States<sup>3</sup>
- Medicare and Medicaid Nursing Facility Benefits: The Basics and Options for Improved Coordination and Quality<sup>4</sup>
- Coordination of Medicare and Medicaid Behavioral Health Benefits<sup>5</sup>
- Update on State Contracting with D-SNPs<sup>6</sup>

ICRC has other Medicare resources including briefs, tools, and newsletters that build upon the information presented in the *Working with Medicare* webinars. In addition, we will help states with specific questions about Medicare or Medicare Advantage by pointing them to (and helping to translate) Medicare resources (statutes, regulations, manuals, and guidance documents).

## 7. Can ICRC help states that are beginning to weigh various integration options?

Yes, ICRC is ready to help states at all stages. We will help your state craft a strategy for integrating care based on your goals, Medicaid program structure, available staff and other resources, level of interest in and support for integrated care among agency and political leadership and relevant stakeholders, and level of interest among managed care organizations or other entities that can assist with integration.

## 8. How can ICRC help states fine-tune their integrated care programs?

ICRC has worked extensively with states with many years of experience with integrated programs, and can draw on that experience and contacts with people in those states to help other states advance their own efforts. ICRC frequently features innovative or cutting-edge approaches to improving coordination and integration developed by experienced states and health plans in its briefs and reports, webinars, and newsletters, and continually seeks to enhance these resources with lessons from states that have taken new steps to fine-tune and improve their programs.

### ABOUT THE INTEGRATED CARE RESOURCE CENTER

The *Integrated Care Resource Center* is a national initiative of the Centers for Medicare & Medicaid Services Medicare-Medicaid Coordination Office to help states improve the quality and cost-effectiveness of care for Medicare-Medicaid enrollees. The state technical assistance activities provided by the *Integrated Care Resource Center* are coordinated by [Mathematica Policy Research](#) and the [Center for Health Care Strategies](#). For more information, visit [www.integratedcareresourcecenter.com](http://www.integratedcareresourcecenter.com).

## ENDNOTES

<sup>1</sup> Chelminsky, D. "How States Can Better Understand their Dually Eligible Beneficiaries: A Guide to Using CMS Data Resources." Integrated Care Resource Center, May 2018. Available at: <https://www.integratedcareresourcecenter.com/resource/how-states-can-better-understand-their-dually-eligible-beneficiaries-guide-using-cms-data>

<sup>2</sup> Libersky, J., Verdier, J., and Stringer, R. "Medicare Basics: An Overview for States Seeking to Integrate Care for Medicare-Medicaid Enrollees." Integrated Care Resource Center, June 2017. Available at: <https://www.integratedcareresourcecenter.com/content/medicare-basics-overview-states-seeking-integrate-care-medicare-medicaid-enrollees>

<sup>3</sup> Integrated Care Resource Center. "Medicare 101 and 201: Key Issues for States." February 2018. Available at: <https://www.integratedcareresourcecenter.com/content/medicare-101-and-201-key-issues-states-0>

<sup>4</sup> Integrated Care Resource Center. "Medicare and Medicaid Nursing Facility Benefits: The Basics and Options for Improved Coordination and Quality." May 2018. Available at: <https://www.integratedcareresourcecenter.com/content/medicare-and-medicaid-nursing-facility-benefits-basics-and-options-improved-coordination-0>

<sup>5</sup> Integrated Care Resource Center. "Coordination of Medicare and Medicaid Behavioral Health Benefits." September 2017. Available at: <https://www.integratedcareresourcecenter.com/content/coordination-medicare-and-medicaid-behavioral-health-benefits-1>

<sup>6</sup> Integrated Care Resource Center. "Update on State Contracting with D-SNPs." December 2017. Available at: <https://www.integratedcareresourcecenter.com/content/update-state-contracting-d-snps-0>