

Spotlight: New Evaluation Reports Released on CMS Demonstrations for Medicare-Medicaid Enrollees

The Centers for Medicaid & Medicaid Services (CMS) recently released several new evaluation reports on findings from demonstrations under the <u>Medicare-Medicaid Financial Alignment Initiative</u>, which aim to provide more integrated, coordinated care to individuals dually eligible for Medicare and Medicaid.

In these demonstrations, states are testing either capitated or managed fee-for-service (MFFS) models of financial alignment. Ten states (California, Illinois, Massachusetts, Michigan, New York, Ohio, Rhode Island, South Carolina, Texas, and Virginia) implemented capitated model demonstrations, and two states (Colorado and Washington) implemented MFFS model demonstrations. Minnesota has implemented an administrative alignment demonstration that does not have a financial alignment component.

The new reports include the first evaluation reports for the demonstrations in <u>California</u>, <u>Illinois</u>, and <u>Ohio</u>, and the second evaluation reports for the demonstrations in <u>Minnesota</u> and <u>Washington</u>. These cover some of the earliest points in demonstration start-up, but also include some encouraging utilization results, as well as some areas for further consideration and improvement. Selected highlights include:

- Inpatient utilization: Of the three reports that contain utilization analysis (Illinois, Ohio, and Washington), all three demonstrations showed significant decreases in inpatient utilization: a five percent drop in Washington, 15 percent in Illinois, and 21 percent in Ohio.
- Skilled nursing facility (SNF): The Washington, Ohio, and Illinois demonstrations also showed significant reductions in SNF admissions, of 19 percent, 15 percent, and nearly nine percent, respectively.
- Long-stay nursing facility placement: The Washington and Ohio demonstrations showed significant declines in the probability of long-stay nursing facility use, of 24 percent and eight percent, respectively. (Despite the decrease in Medicare SNF admissions, the Illinois demonstration showed a nearly three percent increase in long-stay Medicaid nursing facility use.)
- Beneficiary experience: Three reports include demonstration plans that participated in the Medicare-Medicaid Plan Consumer Assessment of Healthcare Providers and Systems (CAHPS) beneficiary survey (California, Illinois, and Ohio). All showed improvement from 2015 to 2016 in the proportion of beneficiaries rating their health plans at the highest levels, a 9 or 10.
- **Medicare savings**: Three of the four reports that included gross Medicare Parts A & B cost analyses (Illinois, Ohio, and Washington) showed significant savings for at least one demonstration period. The California demonstration showed no significant savings or losses. Washington showed significant savings throughout, for overall estimated savings of more than 11 percent across both periods.

Due to variations in the availability of Medicare and Medicaid data, information on service utilization and cost varied among the states, with Medicaid data being especially limited. Future reports will contain that information when data are available, as well as additional information on enrollee satisfaction and experience of care.

The first evaluation reports for Minnesota and Washington, as well as a first evaluation report for Massachusetts, were released previously and are available on the CMS <u>Medicare-Medicaid Coordination</u> <u>Office webpage</u>.

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 Policy Research and the Center for Health Care Strategies. For more information, visit <u>http://www.integratedcareresourcecenter.com</u>.

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