DSNP/Duals Update

AHCCCS CONTRACTOR UPDATE MEETING

OCTOBER 16, 2013
Duals Alignment

- **128,263** total Medicare-Medicaid eligible members as of October 1, 2013
- **53,190** of these members are aligned in one plan for their Medicare and Medicaid services
- **Over 41% of all Arizona duals!**
- More members opted out from recent alignment effort than we originally thought, but outcome still successful
- Will consider another effort to align acute members in February

30 Years of Medicaid Innovation
Our first care is your health care
Arizona Health Care Cost Containment System

“Reaching across Arizona to provide comprehensive quality health care for those in need”
Medicare Coordination

- Currently nearly all AHCCCS Plans are also Medicare D-SNPs

- AHCCCS is very committed to strategies to improve the system for dual eligible beneficiaries
  - Requiring all plans to offer a D-SNP in all Medicaid service areas
  - Policy effective where AHCCCS will not sign MIPPA contracts with D-SNPs who do not have AHCCCS contract
  - Pursuing alignment opportunities with CMS

“Reaching across Arizona to provide comprehensive quality health care for those in need”
Medicare Coordination - Future

- Advocate for D-SNPs as a tool to advance state integration, with enrollment exceptions based on individual state efforts
- Champion for statute/rule changes from CMS to support integration activities
- Flexibility from broader Medicare Advantage
  - Quality measures/Star Rating system
  - Network requirements
  - Notices
  - Application timelines/requirements
  - Marketing
Medicare Coordination - Future

- Administrative efficiencies for health plans
- Alignment of AHCCCS enrollment with Medicare when possible
- Better data – State access to all Medicare/Medicaid data
  - Currently working with CMS to get Medicare Parts A, B and D data
  - Internal workgroup to get batch AHCCCS eligibility data to plans
Support for NAMD Recommendations

- Permanently reauthorize D-SNPs
- Uniform definition for ‘integrated D-SNP’ including Medicaid agency role of contracting and oversight
- Eliminate statutory misalignment in policies and procedures (marketing, enrollment, grievances)
- Allow MMCO to grant states exceptions to Medicare processes and design D-SNP agreements
- Create a permanent federal team to address D-SNP issues
Medicare Coordination - Future

- Continue to work with AHCCCS health plans
  - Workgroup meetings

- Remain involved at a local and national level
  - Participation in local/national governmental affairs efforts (health plan association; waiver and rule changes)
  - Collaboration with other states
  - National organizations
  - CMS