

Care coordination for dual-eligible beneficiaries: evaluating special needs plans' models of care

ISSUE: Beneficiaries who qualify for Medicare and Medicaid typically have multiple chronic conditions that result in high combined program spending. Because two programs pay for their care, their care is often uncoordinated. One program that coordinates the care for dual eligible beneficiaries are dual-eligible special needs plans (D-SNP). D-SNPs are Medicare Advantage plans that target their enrollment to dual-eligible beneficiaries. In response to concerns that the plans do not offer care coordination programs designed to address specialized care for their enrollees, CMS now requires SNPs to submit “models of care” that describe their care coordination activities.

As part of our ongoing work considering how to improve the care coordination of services furnished to dual-eligible beneficiaries, we examined the models of care special needs plans (SNP) are required to submit to CMS. Our key questions were:

- Can the models of care be used to evaluate if a SNP provides good care coordination?
- Can the models of care be used to assess whether the plans integrate Medicare and Medicaid benefits?

KEY POINTS: Staff will present findings of its analysis of the models of care submitted by special needs plans to CMS.

ACTION: At the meeting, Commissioners will consider the issues identified.

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