

A PRIMER ON THE DUAL ELIGIBLE POPULATION IN MASSACHUSETTS

MARCH 31, 2021

PRESENTED BY:



TODAY'S SPEAKERS



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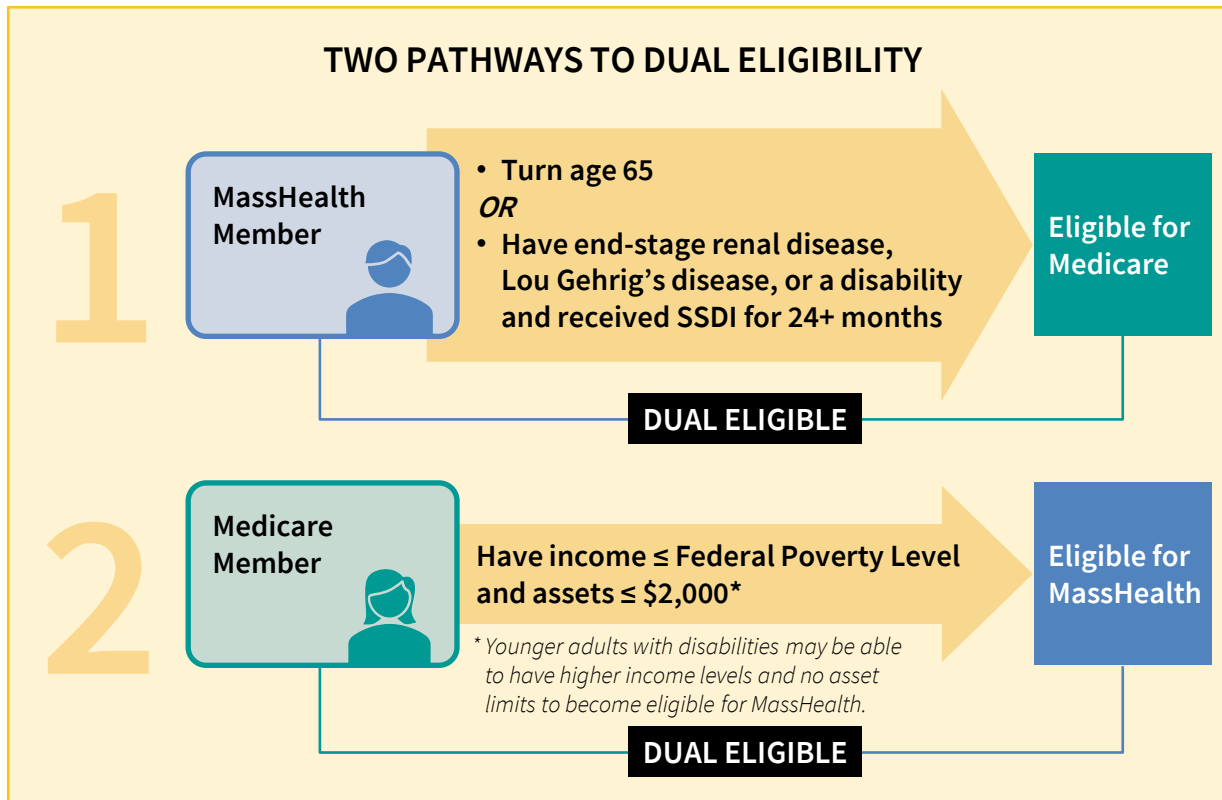
WELCOME!

TODAY'S AGENDA

- Overview and Key Findings from *A Primer on the Dual Eligible Population in Massachusetts*
- Key Features of MassHealth's "Duals Demonstration 2.0"
- Q & A

WHO ARE DUAL ELIGIBLE MASSHEALTH MEMBERS?

Nearly 312,000 dual eligible MassHealth members receive health care coverage through two distinct payers — Medicare and MassHealth — with each payer covering a different set of services.



FOR DUAL ELIGIBLE MEMBERS:

- **Medicare** covers the majority of members’ core medical services (i.e., physician services, hospital care, post-acute care, etc.), durable medical equipment, prescription drugs, and some behavioral health services.
- **MassHealth** “wraps” members’ Medicare benefits by providing long-term services and supports (LTSS), a broader range of behavioral health services, as well as vision, dental, and transportation services. MassHealth also helps to cover some Medicare out-of-pocket costs.

OVERVIEW OF THE COMPREHENSIVE PRIMER ON DUAL ELIGIBLE MEMBERS IN MASSACHUSETTS

PRIMER COMPONENTS

A PRIMER ON THE DUAL ELIGIBLE POPULATION IN MASSACHUSETTS

The Dual Eligible Population in Massachusetts: ISSUE BRIEF

MARCH 2021

Stephanie Anthony
Kaja McKinley
Jacqueline Marks
@MassHealth

Demographic	Dual Eligible Members (%)	Medicare Only Members (%)
Hispanic	12%	1%
White	78%	88%
Black	10%	11%

More than 40 percent of dual eligible members require (LTD) under the plan of medical and dental care from the State of Massachusetts. Additionally, more than four in 10 dual eligible members live in a rural area. Health disparities are a key public health concern.

Health care costs. Dual eligible members' gross capitated costs exceed those for Medicare-only members, and capitated costs are higher for dual eligible members with chronic conditions. More than 20 percent of dual eligible members are covered under the Department of Health's Family Health Care program, which is a managed care program for dual eligible members with chronic conditions.

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A PRIMER ON THE DUAL ELIGIBLE POPULATION IN MASSACHUSETTS

The Dual Eligible Population in Massachusetts: MEMBER PROFILES

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Caring for Family Through the Generations: CARLA SANTOS AND LIZA MARQUEZ, NEW BEDFORD

Being family and community have always been important to Carla Santos. She and her husband came to Massachusetts from Portugal in 1983, settling in the Bedford area in the year, but she was not a citizen then. Carla and her husband, who had another daughter, Liza, who has her parents' support. Liza has had her management of her own business since she was 16, with friends and family support and going. She has the chance to go back to her own country, but she is not sure if she wants to.

She and her husband were in fact, she worked in one of the big local health care. She was a doctor there for 12 years, but her husband had a stroke and she had to take care of him. She and her husband had a stroke, hypertension, and angina. She had health insurance coverage through her husband's employer and had a stroke and was unable to work. She had a stroke in 2001, and she was able to get the health insurance through her husband's employer.

She was awarded eligibility for Medicare in 2007, and she was able to get the health insurance through her husband's employer. She was awarded eligibility for Medicare in 2007, and she was able to get the health insurance through her husband's employer.

A PRIMER ON THE DUAL ELIGIBLE POPULATION IN MASSACHUSETTS

The Dual Eligible Population in Massachusetts: DATA CHART PACK

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Category	Dual Eligible Members (%)	Medicare Only Members (%)
Self-reported health status	15%	10%
Employment	10%	15%
Chronic health conditions	25%	15%

DUAL ELIGIBLE MEMBERS HAVE MORE SIGNIFICANT AND COMPLEX HEALTH IN AVERAGE, THAN THEIR MEDICARE-ONLY COUNTERPARTS

INDICATORS AMONG DUAL ELIGIBLE AND MEDICARE ONLY MEMBERS

Compared with their Medicare-only peers, nationally dual eligible members have more limitations in their activities of daily living, report poorer health status, and are more often in institutional care. More than 40 percent of dual eligible members require LTD – an indicator that Medicare-only members do not have. Additionally, more than four in 10 dual eligible members have at least one mental health diagnosis and six in 10 have multiple chronic conditions (data not shown).

A PRIMER ON THE DUAL ELIGIBLE POPULATION IN MASSACHUSETTS

The Dual Eligible Population in Massachusetts: COMPARATIVE PROGRAM ASSESSMENT CHART PACK

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Program	Key Features
Family Health Care	Managed care program for dual eligible members with chronic conditions.
Medicaid	State-funded health insurance program for low-income individuals.
Medicare	Federal health insurance program for people aged 65 and older.

COMPARATIVE PROGRAM ASSESSMENT CHART PACK

Key Findings from
*A Primer on the Dual Eligible
Population in Massachusetts*

WHY FOCUS ON DUAL ELIGIBLE MASSHEALTH MEMBERS?



PEOPLE

Dual eligible members often have diverse and complex care needs and require comprehensive services to meet their needs

- More than four-in-ten have at least one mental health diagnosis and six-in-ten face multiple chronic conditions
- More than 40% require long-term services and supports, such as home health aides and personal care services to assist with daily care



COST

Dual eligible members represent a disproportionate share of MassHealth spending

- Complex, intensive care needs translate into more costly care compared to other populations
- Dual eligible members account for 18% of total MassHealth enrollment, but nearly one-third of MassHealth's program budget



CARE DELIVERY

Opportunities exist to improve the member experience and service delivery

- In every state, including Massachusetts, lack of alignment between Medicare and Medicaid can result in:
 - *For Members:* Difficulty navigating two payer systems and potential for unnecessary or duplicative care
 - *For MassHealth and Providers:* Unnecessary health care spending and barriers to effective whole-person care coordination



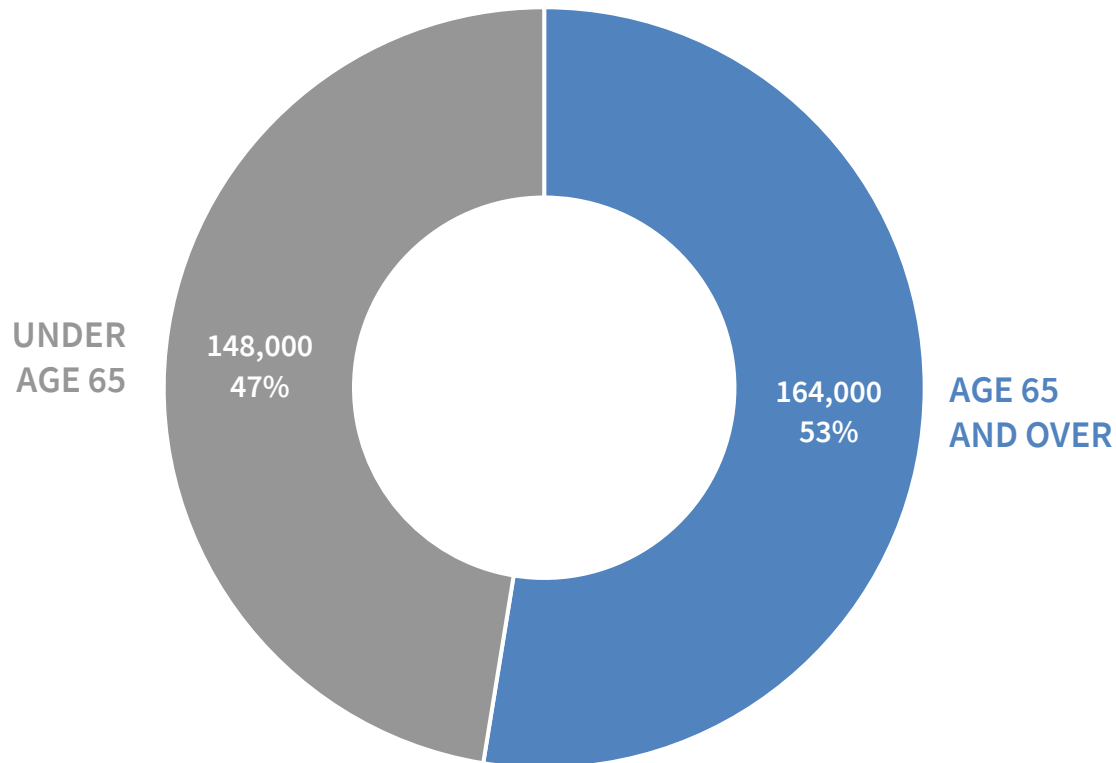
INNOVATION

MassHealth is a pioneer in developing programs to align Medicare and MassHealth benefits

- Integrated care programs streamline benefits, administrative processes, and financing
- Nearly 30% of dual eligible members are enrolled in an integrated care program (as of November 2020), growing by nearly a third over the past several years

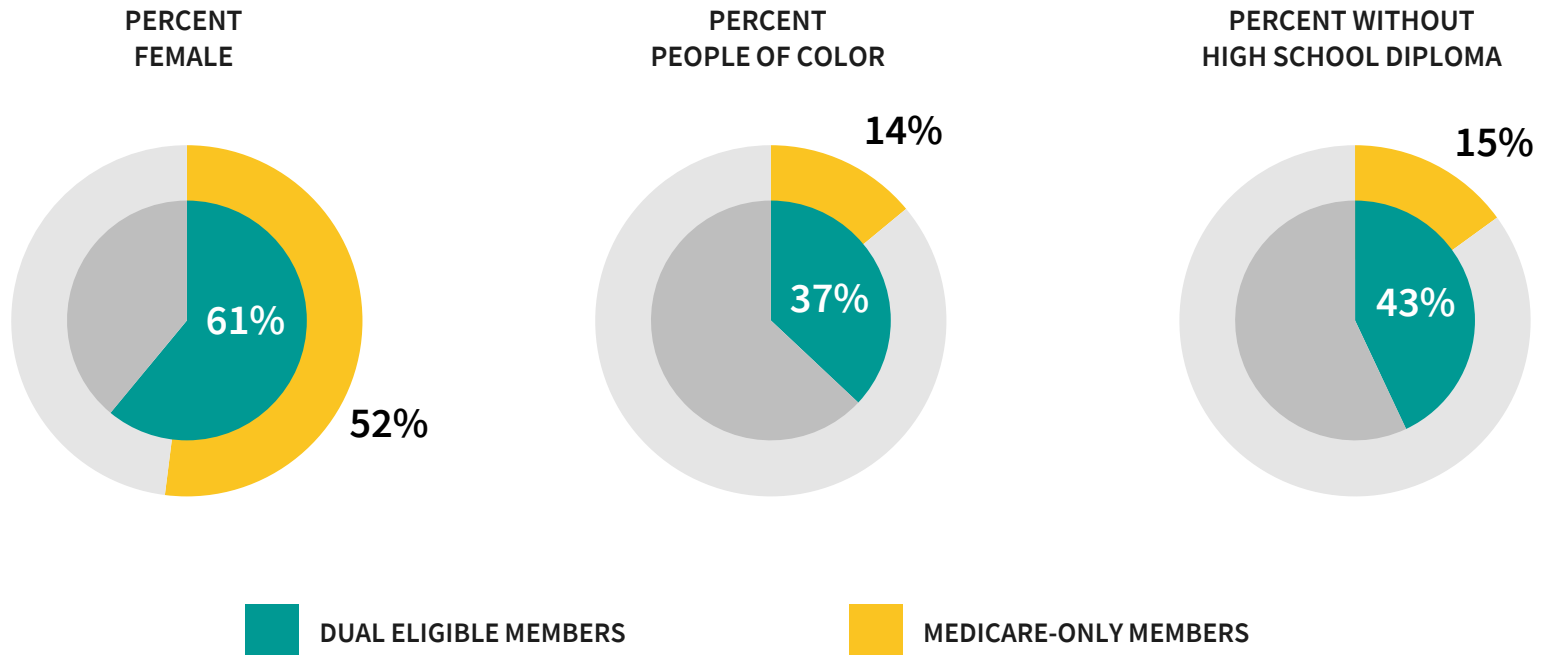
DUAL ELIGIBLE MEMBERS REPRESENT DIVERSE DEMOGRAPHIC GROUPS

DUAL ELIGIBLE MASSHEALTH MEMBERS BY AGE GROUP (SFY 2019)



DUAL ELIGIBLE MEMBERS REPRESENT DIVERSE DEMOGRAPHIC GROUPS

DUAL ELIGIBLE VS. MEDICARE-ONLY MEMBERS NATIONALLY BY DEMOGRAPHIC CHARACTERISTIC (2018)



DUAL ELIGIBLE MEMBER SPOTLIGHTS: OLIVIA, OLIVER AND MARGIE



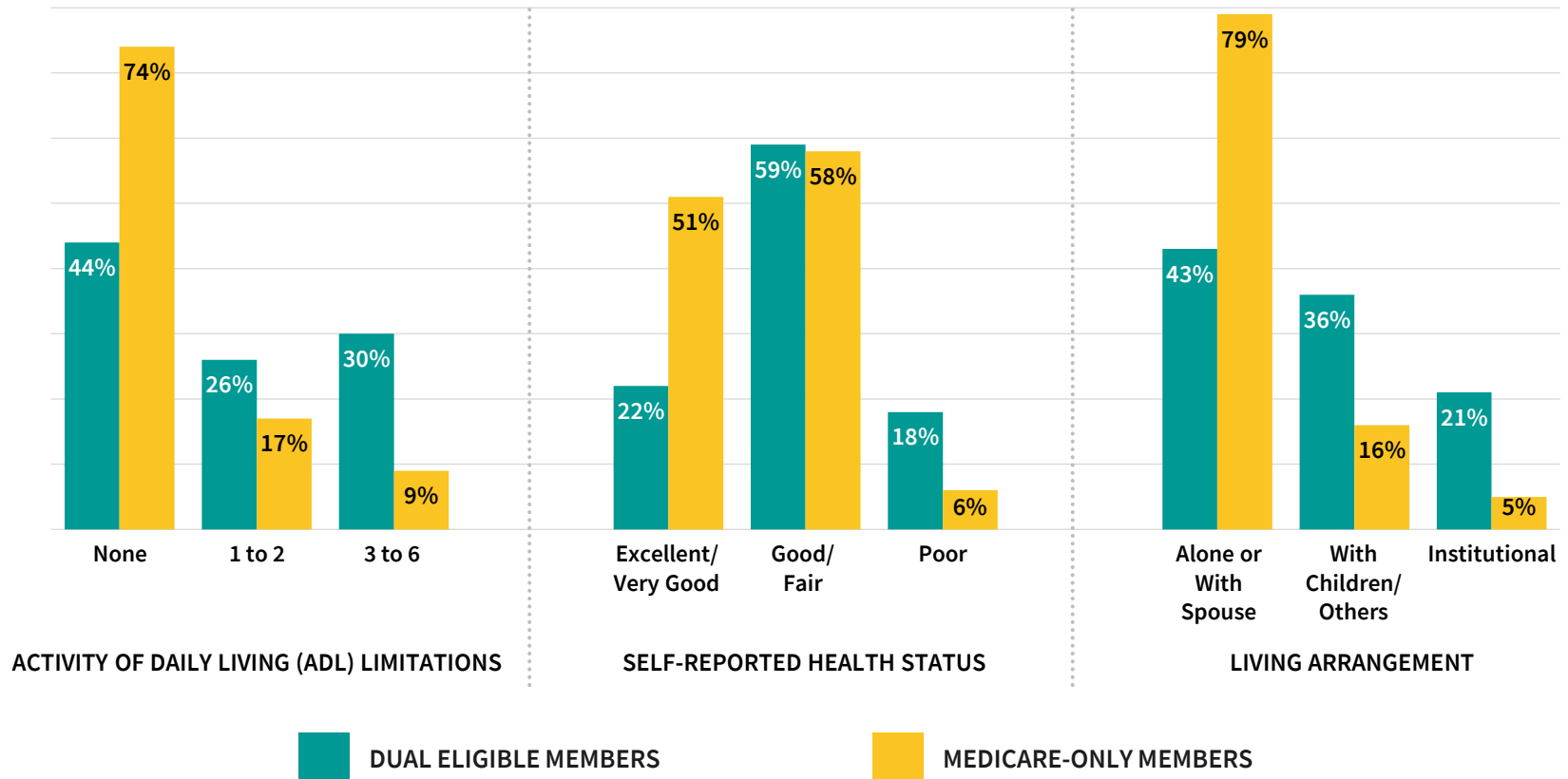
Olivia is a dual eligible young adult who grew up in the foster care system. At age 27 an illness left her with a permanent disability, which increased her need for functional daily living supports. As a recipient of adult foster care services, Olivia was already enrolled in MassHealth, and her disability qualified her for Medicare.



Oliver and Margie are dual eligible adults over the age of 65; Oliver became eligible for Medicare because of a disability, and Margie qualified when she turned 65. Oliver and Margie also qualified for MassHealth because they were over 65, needed long-term care, and met income eligibility requirements.

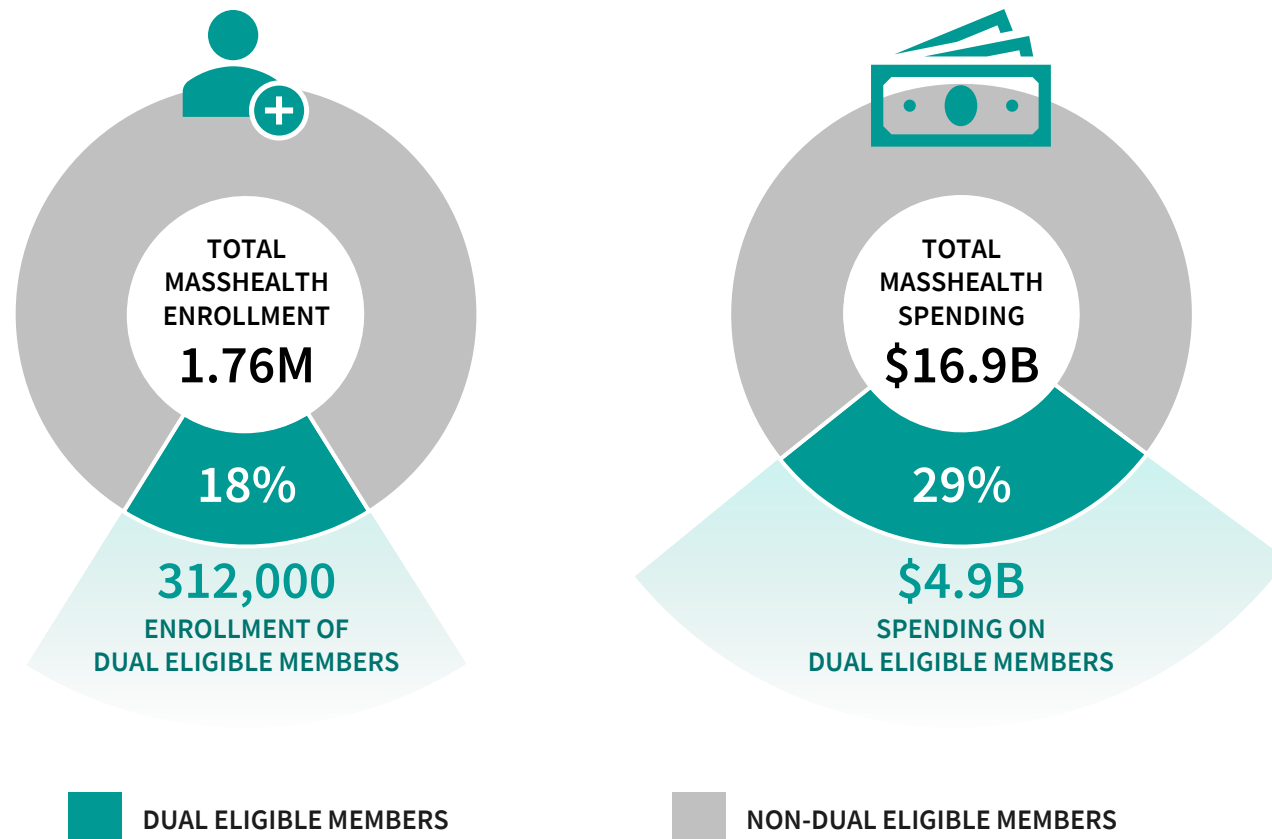
NATIONALLY, DUAL ELIGIBLE MEMBERS HAVE MORE SIGNIFICANT AND COMPLEX HEALTH CARE NEEDS, ON AVERAGE, THAN THEIR MEDICARE-ONLY COUNTERPARTS

HEALTH AND SUPPORT NEED INDICATORS
AMONG DUAL ELIGIBLE AND MEDICARE-ONLY MEMBERS NATIONALLY (CY 2013)



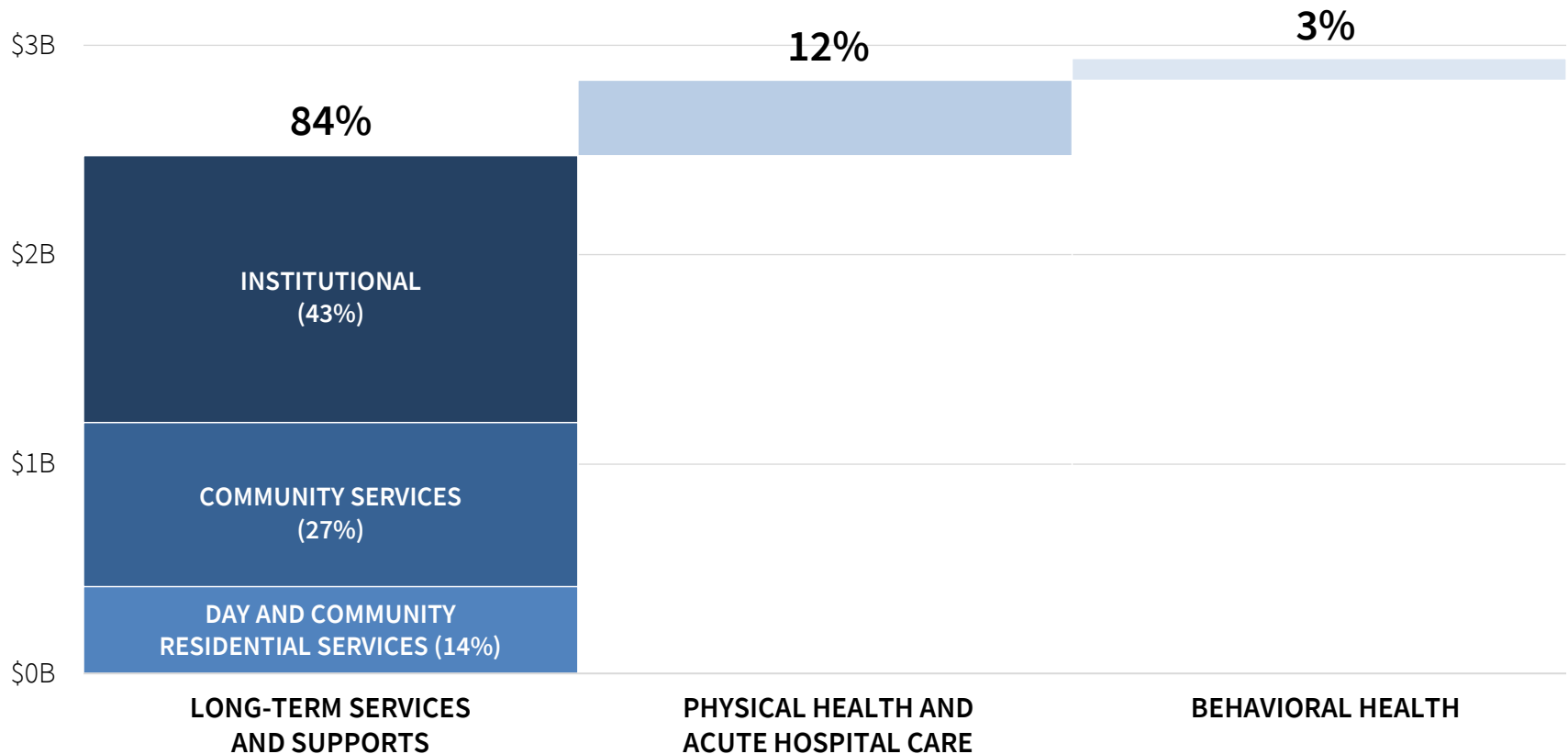
DUAL ELIGIBLE MEMBERS' DIVERSE CLINICAL NEEDS TRANSLATE INTO MORE INTENSIVE, COMPLEX, AND COSTLY CARE COMPARED TO OTHER POPULATIONS

DUAL ELIGIBLE MASSHEALTH MEMBER ENROLLMENT AND MEDICAID SPENDING (SFY 2019)

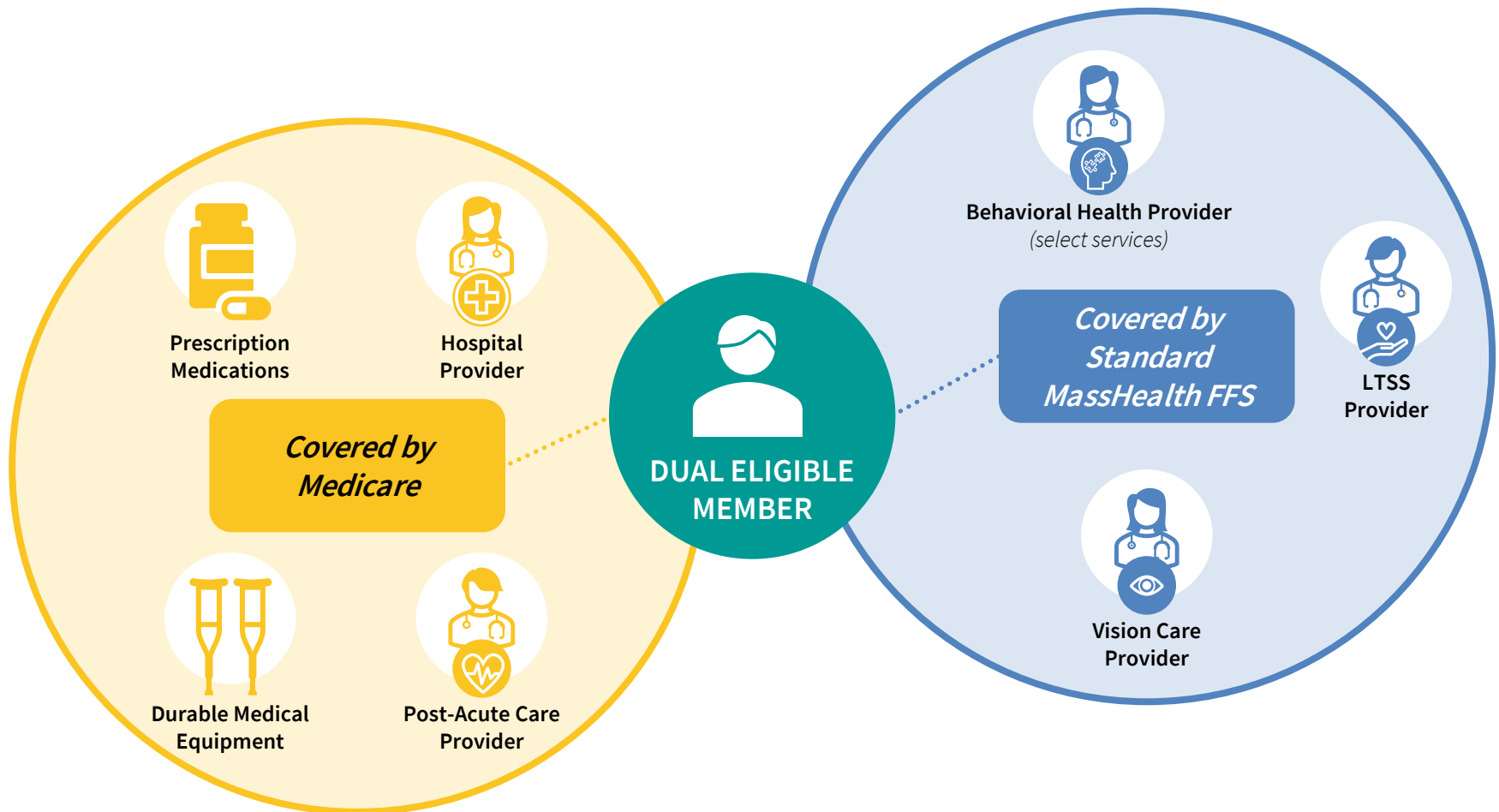


MOST OF MASSHEALTH'S DIRECT SPENDING ON DUAL ELIGIBLE MEMBERS IS FOR LTSS, WITH HOSPITAL/PHYSICIAN SERVICES MAINLY COVERED BY MEDICARE

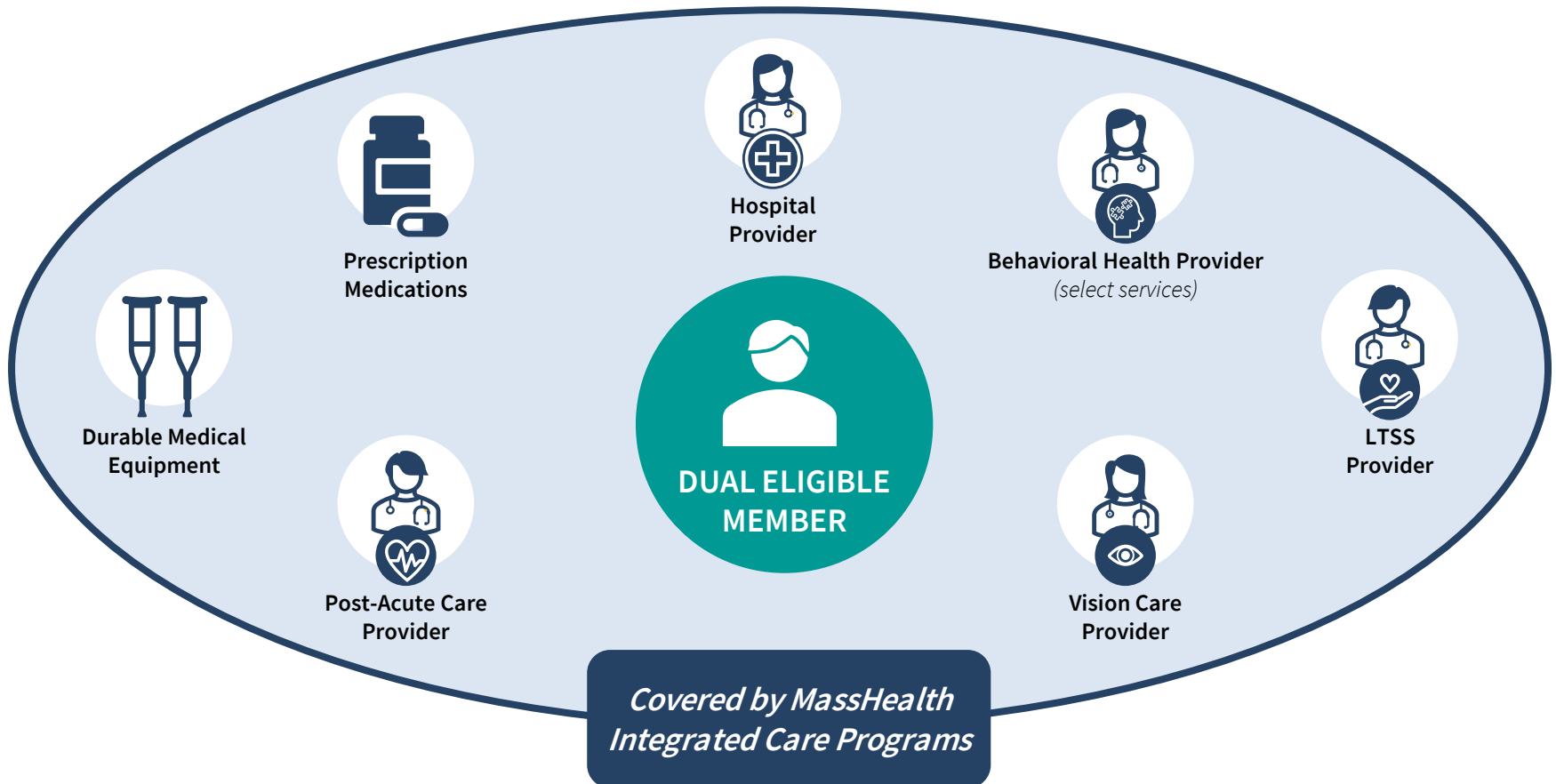
MASSHEALTH FFS SPENDING ON DUAL ELIGIBLE MEMBERS BY PROVIDER GROUP (SFY 2019)



LACK OF ALIGNMENT BETWEEN MEDICARE AND MASSHEALTH CREATES CHALLENGES FOR DUAL ELIGIBLE MEMBERS, PROVIDERS, AND PAYERS



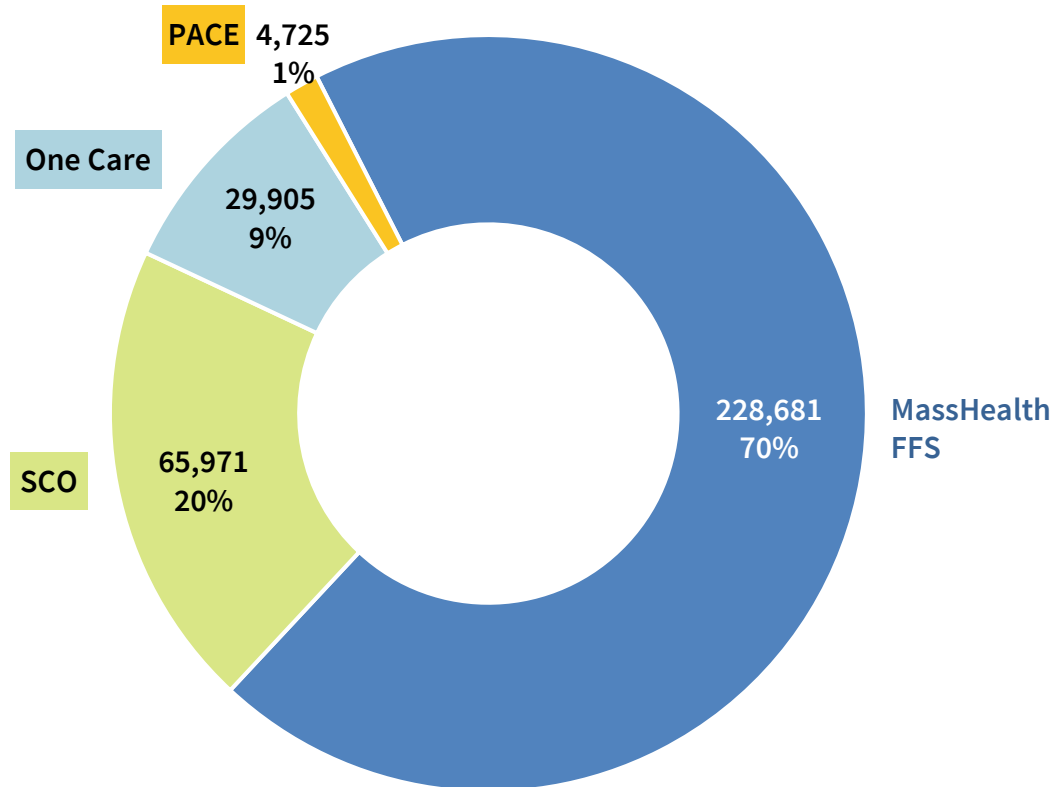
MASSACHUSETTS' INTEGRATED CARE PROGRAMS STREAMLINE MEDICARE AND MASSHEALTH BENEFITS FOR DUAL ELIGIBLE MEMBERS THROUGH A SINGLE PROGRAM



Note: Integrated care programs can cover **more** services than Medicare or MassHealth Standard FFS alone.

MASSACHUSETTS LED THE NATION IN DEVELOPING INTEGRATED MEDICARE AND MEDICAID PROGRAMS FOR DUAL ELIGIBLE MEMBERS

MASSACHUSETTS DUAL ELIGIBLE MEMBER ENROLLMENT (AS OF NOVEMBER 2020)



- **PACE** (Program of All-inclusive Care for the Elderly) organizations provide or coordinate access to comprehensive medical and support services for **people age 55 and older who meet a nursing facility level of care** in their home or community.
- **One Care** provides **dual eligible members aged 21–64** (at the time of enrollment) comprehensive Medicare and MassHealth services, as well as additional behavioral health diversionary services, dental and vision, and community support services.
- **SCO** (Senior Care Options) offers **members age 65 and older** comprehensive Medicare and MassHealth services, as well as additional behavioral health diversionary services, dental and vision, and community-based supports.

DUAL-ELIGIBLE MEMBER SPOTLIGHTS: ROLE OF INTEGRATED CARE PROGRAMS



Olivia enrolled in **One Care** because she wanted a higher level of care and functional support than she was receiving through her MassHealth FFS coverage.

According to Olivia, “They seemed to know what they were doing, and I went from having virtually nothing to having all these people and supports available to me. It was the right intervention at the right time.”



Oliver and Margie enrolled in a local **PACE** program, and were delighted at the high quality of care and broad array of services they received under one roof.

“Even if I have to come every day, I’d rather be here with the people I know and trust...the people who work here like their jobs. They are enthusiastic about what they do, and that makes a big difference. You won’t find a happier person to be in PACE,” Oliver says.

For more about Olivia, Oliver and Margie’s stories, please see the accompanying member profiles.

INTEGRATED CARE PROGRAMS SHARE COMMON GOALS THAT ENHANCE ACCESS TO COORDINATED CARE FOR DUAL ELIGIBLE MEMBERS

KEY FEATURES AND UNIFORM GOALS ACROSS INTEGRATED CARE PROGRAMS



ELIGIBILITY CRITERIA

Ensure members have clear and distinct program options based on their age, level of care, and dual-eligibility status.



ENROLLMENT MECHANISMS

Grow integrated program enrollment with transparency, choice, and protections for members.



CARE MANAGEMENT

Provide access to care management and coordination supports to foster positive care experiences and outcomes.

Most critical integrated care feature; no major differences across programs



PROVIDER NETWORKS

Ensure members have access to a robust provider network, while preserving members' long-standing relationships with providers who understand their unique and complex care needs.



FINANCING MODELS

Reduce financial risk associated with providing coverage to members with highly complex and costly care needs.

Note: Key features may vary across integrated care programs based on the needs of the population, federal program rules, and other factors. For more about how these key features vary across integrated care programs, please see the accompanying comparative program assessment.

**MassHealth's
“Duals Demonstration 2.0” Aims
to Enhance and Grow
Enrollment in One Care and SCO**

GOALS AND KEY FEATURES OF MASSHEALTH DUALS DEMONSTRATION 2.0

GOAL

Increase access to One Care and SCO (Duals Demonstration 2.0 does not address PACE) and improve the quality of care for dual eligible members, by:

- Better aligning the One Care and SCO programs; and,
- Encouraging more dual eligible members who are currently in FFS programs to enroll in One Care and SCO.

KEY OBJECTIVES



Help grow enrollment into One Care and SCO



Smooth members' transitions into coverage



Ensure the fiscal sustainability and accountability of each program

*The Duals Demonstration 2.0 concept paper and proposed demonstration focus on better aligning One Care and SCO; PACE was not included in Duals Demonstration 2.0 but is an integral part of the Commonwealth's programming for dual-eligible members.

SUMMARY OF KEY FINDINGS

- Dual eligible MassHealth members are diverse — individuals vary by age, gender, race/ethnicity, clinical need, and functional status, among other characteristics.
- They often have especially complex and costly care needs — this translates to more costly care relative to other MassHealth or Medicare-only populations.
- Most dual eligible MassHealth members receive separate coverage through Medicare and MassHealth. Fragmented coverage can cause confusion, duplicative services, suboptimal care, and poorer health outcomes.
- Massachusetts has pioneered the implementation of integrated care programs that coordinate Medicare and MassHealth benefits, simplify administrative processes, and align financing through a single program.
- Through the Duals Demonstration 2.0, MassHealth seeks to standardize and grow enrollment in its two largest integrated care programs while ensuring transparency, choice, and quality of care.

Q & A

THANK YOU!

If you have any questions or
comments about today's
presentation, please contact
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