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Dually Eligible Beneficiaries: Overview of MACPAC Work

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About MACPAC

- Medicaid and CHIP Payment and Access Commission (MACPAC) is a non-partisan legislative branch agency
- Provides policy and data analysis and makes recommendations to Congress, the Secretary of the Department of Health and Human Services, and states
 - Report annually to Congress on March 15 and June 15
 - Provide technical assistance to Congress
 - Serve as an information resource to the broader health policy community
- Government Accountability Office appoints MACPAC's 17 Commissioners, who meet 6 times annually



Recent MACPAC Work on Policies Affecting Dually Eligible Beneficiaries in D-SNPs

- Analyzed how states optimize their State Medicaid Agency Contracts (SMACs) with D-SNPs (June 2024)
 - Recommended that states require D-SNPs to submit data on care coordination and MA encounters, for purposes of state monitoring and oversight and to ensure that D-SNPs are coordinating care according to state requirements
- Identified strategies states could use in their SMACs to exercise their statutory authority and increase integration, such as limiting enrollment to full-benefit duals; also discussed factors affecting states' ability to implement those strategies, such as experience with managed care (June 2021)



Joint Work with the Medicare Payment Advisory Commission (MedPAC)

- <u>Data book</u> that analyzes utilization and spending for dually eligible beneficiaries in calendar year 2021
 - 12.8 million individuals enrolled in both programs
 - combined Medicare and Medicaid spending of \$494.3 billion
 - dually eligible account for a disproportionate share of spending in each program, relative to their enrollment
 - Medicare: 19 percent of enrollment, 35 percent of spending
 - Medicaid: 13 percent of enrollment, 27 percent of spending

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MACPAC Releases March 2025 Report to Congress

Congressional advisory panel proposes recommendations to improve transparency in Medicaid managed care, enhance access to homeand community-based services, and reduce state and federal administrative burdens



The Medicaid and CHIP Payment and Access Commission (MACPAC) released its <u>March 2025 Report to Congress on Medicaid and CHIP today</u>, with recommendations on improving the external quality review (ECIR) process in Medicaid managed care, enhancing timely access to home- and community-based services (HCBS), and reducing states' administrative burdens to providing HCBS services for MCBS.

"This report offers recommendations and insights that both state and federal policymakers can use to enhance transparency in the Medicaid program, reduce administrative burdens, and significantly improve the experience for its beneficiaries," MACPAC Chair Verlon Johnson said.

Read The Full Report

Chapter 1 makes three recommendations to enhance the managed care EQR process. Managed care is the primary health care delivery system in Medicaid, with 73 percent of beneficiaries enrolled in a comprehensive, full-risk managed care organization. As managed care continues to grow, both federal and state stakeholders have placed greater emphasis on effective oversight to ensure beneficiaries can access the services they need. State Medicaid agencies perform an annual independent review of the quality of care and access to services under each managed care contract, known as the EQR process, MACPAC assessed how states implement federal EQR requirements, the role the Centers for Medicare & Medicaid Services (CMS) plays in overseeing the process, and if the EQR process supports accountability for states and MCOs and improves care for beneficiaries.

MACPAC's analysis identified gaps in how the EQR process and its findings are used to oversee managed care plans and enhance quality. Stakeholders reported difficulties in understanding states' reporting of EQR findings, as well as challenges in accessing EQR reports due to the lack of a centralized repository. The Commission offers three recommendations to the U.S. Department of Health and Human Services (HHS) aimed at improving the transparency and accessibility of findings in the EQR annual technical reports.