

Integrated Care for Individuals with Dual Eligibility

December 9, 2019
Kaiser Center for Total Health

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What is Integrated Care and Why Does it Matter?





























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LTQA Symposium
Integrated Care For Individuals with Dual Eligibility
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What is Integrated Care? What Does "True North" Look Like?

- Physical, behavioral, functional and social determinants of health
- Seamless experience for beneficiaries: Cohesive and accessible administration of benefits, care coordination
- Medicare and Medicaid financing: Assign total cost of care accountability and allow the flexibility to do what is needed to optimize care and cost outcomes
- Provider and plan relationships: aligned incentives, collaborative approach
- Interdisciplinary Teamwork



Why Does Integrated Care Matter?

Consumers and their families:

- Beneficiary Confusion
 - How many insurance/benefit cards do I really need to carry?
 - Am I covered for what I need?
 - Who do I call for what?
 - Does anyone really understand me? Who can I trust?
- ► Gaps in Care opportunity to address

Government payers:

- ▶ Combined Medicare and Medicaid Spend (2016) \$ 428B on dual eligibles
- Current administrative inefficiencies and complexities
- Cost and savings fairness
- Opportunity to achieve better outcomes for beneficiaries and bend the cost curve

Plans and Providers:

- Duplication and conflicts in current policies and program administration
- ► Total Cost of Care Accountability flexibility to innovate, transform and deliver excellence in care for individuals with very complex needs; opportunity to align incentives and reduce administrative burdens



What is the Opportunity?

- 12 M Duals
 - 60% with multiple chronic conditions
 - 41% with mental health diagnosis
 - 49% receiving LTSS services
 - 17% reporting poor health status
- 15-20% of the Medicaid and Medicare covered lives (duals) : account for 35% of the spend

Only 9% of full benefit duals are in integrated care programs today!

