Advancing Medicare & Medicaid Integration

Frequently Asked Questions

On July 21, 2021, Arnold Ventures and the Center for Health Care Strategies (CHCS) held a webinar to launch the *Advancing Medicare & Medicaid Integration* initiative. Following are questions and answers from the webinar that may be helpful to states and their technical assistance partners.

Additional questions about the initiative may be submitted to Medicare-Medicaid@chcs.org.

General Questions

1. **How many states will the initiative fund? Is there a limit?**

   The number of states to be funded will be determined by the scope and scale of the projects proposed. Arnold Ventures expects that most projects will receive funding between $500,000 and $1 million. CHCS and Arnold Ventures will review Letters of Interest (LOIs) on a rolling basis. While Arnold Ventures expects to fund proposals into 2022, states and their technical assistance partners should begin conversations with CHCS and Arnold Ventures as soon as possible, even if they are not ready to submit an LOI.

2. **How can states use initiative funding to access federal Medicaid matching funds?**

   To the extent awarded funds are used to support allowable Medicaid expenditures, states may be able to draw down federal matching funds for such purposes. Arnold Ventures assumes that once initiative funds are received by a state that they become public dollars, which can be used as non-federal share to draw down federal financing participation. Some states may require specific state-level legislative authority for this, while others may not. States should confirm these assumptions with appropriate state staff.

   Please note that states are not required to seek matching funds, but doing so could be a useful way to leverage initiative funding.

Types of Entities That Can Apply for Support

3. **Is this initiative targeted to states new to integrated care or can states that have developed integrated care programs apply as well?**

   The *Advancing Medicare & Medicaid Integration* initiative is designed to provide the support states need to make meaningful improvements in care delivery for their dual-eligible populations.

   While the initiative is focused primarily on helping states that do not have advanced Medicare and Medicaid integration efforts or a well-developed infrastructure to support integration, Arnold Ventures will also consider supporting states that have good ideas for expanding more advanced integrated programs or increasing enrollment in established programs.

4. **Can states that do not have Medicaid managed care apply for support?**

   Arnold Ventures recognizes that not all states have Medicaid managed long-term services and supports (LTSS) programs or managed care for Medicaid acute and primary care services. While most integrated care models are managed care, there are alternatives. For example, Washington State has built an integrated care program around Medicaid health homes. Other states could design and implement similar programs, and propose this option to the Medicare-

Medicaid Coordination Office as a [demonstration](#), which could allow them to access shared Medicare savings. Arnold Ventures would be interested in a proposal for that type of model.

Types of Projects That Could Be Supported

5. **What types of integration activities might be supported through the initiative?**

    Arnold Ventures is interested in funding projects that fall within [five broad categories](#):

    - **Capacity assessment.** State staffing capacity, skills, and knowledge are key to successfully launching any program serving dual-eligible individuals. Initiative support could be used to hire new staff or engage consultants, build expertise in Medicare and integrated care, or develop knowledge of community-based organizations or others serving dual-eligible populations. It is important to note that projects of this type would have to define clear objectives for how these staff or consultants would advance the development or expansion of integrated models and would need to include specific milestones or deliverables related to their roles.

    - **Model development and implementation**. The initiative could support states seeking to implement larger-scale efforts like creating Medicaid managed LTSS programs that align with D-SNPs, developing direct capitation contracts in which D-SNPs cover Medicaid benefits, or designing new demonstration programs under the Centers for Medicare & Medicaid Services' Financial Alignment Initiative or new state-specific demonstration models.

    - **Evaluation and improvement.** In states currently operating integrated Medicare-Medicaid programs, initiative support could be used to evaluate model effectiveness using quantitative and qualitative measures or refine program policies or operations based on evaluation findings. Funding could also be used to address enrollment churn.

    - **Outreach and education.** Stakeholder engagement is a crucial component of integrated care programs. Initiative support could be used to conduct surveys or focus groups, hold listening sessions or townhalls, or develop other communication tools. Support could also be used to conduct outreach and education for beneficiaries and providers around the value of integration using websites, marketing materials, or community events.

    - **Data analytics**. Improvements in data analytic capabilities can benefit new or established integrated care programs. Initiative support could be used to build information technology infrastructure, contract with consulting services, expand staffing, or connect health plans or providers to health information exchanges. Support also can be used for quantitative analyses of Medicare and Medicaid data to better understand characteristics of dual-eligible populations or their patterns for service use or costs of care.

6. **Would the initiative support states to develop or expand PACE?**

    The Program of All-Inclusive Care for the Elderly (PACE) is a highly integrated model of care and has very good outcomes in terms of enrollee satisfaction, access to care, and service use. PACE, however, enrolls a much lower proportion of dual-eligible individuals than the demonstrations under the Financial Alignment Initiative, Fully Integrated D-SNPs, or D-SNPs closely aligned with Medicaid managed LTSS plans. The *Advancing Medicare & Medicaid Integration* initiative is targeted to states that are looking to make significant advancements in integration for their dual-eligible populations. Building or expanding PACE might be one objective of a project funded by the initiative, but should not be the sole focus.

7. **Can a state submit multiple projects over time depending on the implementation stage of its integrated program?**

   Arnold Ventures and CHCS will consider working with a state interested in designing an incremental approach to achieving meaningful improvement in Medicare and Medicaid integration for dual-eligible beneficiaries. Arnold Ventures and CHCS encourage states that are considering this approach to reach out as soon as possible, so that CHCS can work with the applicants to determine if the approach will be funded or if the state should consider modifying its project design.

8. **Would the initiative consider projects in which one contractor or organization would support multiple states to advance integration – for example, by conducting consumer outreach campaigns, providing IT or data analytic support, or Medicare consultation?**

   No, the initiative seeks to fund individual states or technical assistance partners working with individual states to fill state-specific needs or gaps.

9. **Would this funding be appropriate for helping states or health plans to identify, cost, and develop networks for social determinants of health-related services?**

   Arnold Ventures recognizes that dual-eligible individuals often have significant service needs related to social determinants of health, and therefore it is important for states and health plans to have networks of community-based providers to address those needs. While the initiative would not support a proposal focused solely on developing networks of social service providers, this work could be a component of a larger effort to stand up or expand a state's integrated care model.

10. **Could initiative support be used to create a skilled nursing facility value-based payment (VBP) program?**

    Arnold Ventures recognizes that nursing facility VBP programs can be important in efforts to provide dual-eligible nursing facility residents higher quality of care, which is a key objective of the initiative. However, the initiative is focused on states that are seeking to make meaningful improvements in integrating Medicare and Medicaid services for their dual-eligible populations. Developing and implementing a VBP program can be an aspect of a project funded by the initiative, but it should not be the sole focus.

11. **Will smaller projects (under $500k) be considered? For example, could a state propose a project that would have a smaller, more incremental change that could enable the state to grow integrated care more substantially in the future?**

    Arnold Ventures is interested in supporting states that would like to make meaningful improvement in the care delivery for their dual-eligible populations, which will be measured by the degree of integration achieved and/or share of the dual-eligible population impacted. Smaller projects will be considered. Arnold Ventures encourages states with ideas about smaller projects to reach out to CHCS to discuss project ideas and determine if it will meet Arnold Ventures' project evaluation criteria.

Application Process and Technical Assistance

12. When should interested states engage with CHCS? Should they talk with CHCS before submitting a letter of interest or can they just submit a letter of interest and expect to talk with CHCS afterward?

If a state has a clear idea for a project, it can submit a LOI. However, if a state has questions or needs more help to develop an idea, CHCS is available to help. CHCS encourages states and their technical assistance partners to reach out as soon as possible. CHCS can help states shape and design projects that can improve their chance of being funded. To submit questions about the application process, project ideas and design, or any other questions, please email medicare-medicaid@chcs.org.

CHCS will also review all LOIs to ensure that they include all required elements. States and their technical assistance partners may be asked to refine and adjust their ideas before project concepts are reviewed by Arnold Ventures.

13. When can we expect to hear back after submitting a LOI?

CHCS will contact interested applicants no more than two weeks after they submit a LOI. Applicants whose LOIs are reviewed favorably will be invited to submit a full proposal. The full proposal application will contain many of the same elements as the LOI. Note that the initiative's website does not include instructions for preparing a full proposal because unsolicited full proposals will not be considered. All interested applicants must submit a LOI for review first.

14. Can states submit multiple LOIs if prior LOIs are rejected?

Yes, a state can submit additional LOIs if prior LOIs have not been formally approved to move on to the full proposal stage of the application process. Arnold Ventures and CHCS encourage states and their technical assistance partners to reach out as soon as possible once a state or technical assistance partner has an idea. CHCS can work with the applicants to help shape and design projects that can improve their chance of being funded. Please email any questions about the application process, project ideas and design, or any other questions related to the initiative.

15. Would Arnold Ventures/CHCS help connect technical assistance providers with states that could use their services?

Arnold Ventures prefers that technical assistance providers interact directly with states. Technical assistance providers can email CHCS with a description of their organization and their capabilities. If a state is interested in that type of support, CHCS can let the state know of the TA provider's availability.

16. Will there be peer-to-peer learning opportunities among the participating states?

No, the initiative will not include a formal learning collaborative or peer-to-peer learning component. However, CHCS will gather lessons and experiences of participating states and disseminate those broadly to inform the work of other states that are advancing integrated care models. CHCS will also help connect states interested in reaching out to other participating states.

Stakeholder Involvement

17. How can community-based, social care coordination organizations participate and support integration efforts?

Person-centered care is a key component of integrated care models for dual-eligible populations, including services to address social needs. Community-based organizations play a significant role in providing person-centered, holistic care. Arnold Ventures asks states seeking support under this initiative to describe how they will engage with stakeholders, including community-based organizations, as part of their projects.

18. Are there any opportunities for health plans to be involved?

While the *Advancing Medicare & Medicaid Integration* initiative is targeted to states and state technical assistance partners as the applicants, Arnold Ventures and CHCS recognize that many integrated care models are managed care-based. As such, state applicants should include health plans when designing project activities, including participating in stakeholder outreach activities, or providing health plan data for analysis activities.

Coordination with Other Initiatives and Programs

19. How does the Advancing Medicare-Medicaid Integration initiative align with the demonstrations under the Financial Alignment Initiative?

Several states have demonstrations under the Financial Alignment Initiative that may end in 2023. Arnold Ventures is interested in supporting and working with any of these states as they determine their next steps for transitioning their delivery systems of care for dual-eligible individuals from the demonstration model to other integrated care options.

20. States will receive significant federal funding through the Coronavirus Aid, Relief, and Economic Security (CARES) Act, the American Rescue Plan Act (ARPA), and other sources to increase beneficiary access to Medicaid home- and community-based services. How could states use that funding to augment support provided by this initiative?

Some states might use CARES Act or ARPA funding to create no-wrong-door access points for home- and community-based services, or to improve the capacity of state health insurance assistant programs (SHIPs) or aging and disability resource centers (ADRCs) to provide beneficiary counseling about LTSS options. Funding from the *Advancing Medicare & Medicaid Integration* initiative could be used to develop materials and train SHIP and ADRC counselors about integrated care options for dual-eligible individuals, with the goal of increasing enrollment into integrated care options.

21. Are there plans to combine Medicare and Medicaid at the federal level? How would the initiative support those efforts?

Several organizations have recently promoted approaches to integrating Medicare and Medicaid under a single program, however these approaches are at the early stages of development and discussion among federal and state policymakers. The *Advancing Medicare & Medicaid Integration* initiative is interested in supporting states currently trying to make meaningful improvements in Medicare and Medicaid integration. As the policy landscape evolves, the initiative can support states interested in designing programs that can align with those new integration models.