

# Dual Eligible Special Needs Plans (D-SNPs) Deep Dive and Updates

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State Health Insurance Assistance Program (SHIP) Director

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### Navigating Medicare

# Agenda

Overview of dual eligibility

Types of Dual Eligible Special Needs Plans

Explanation of alignment

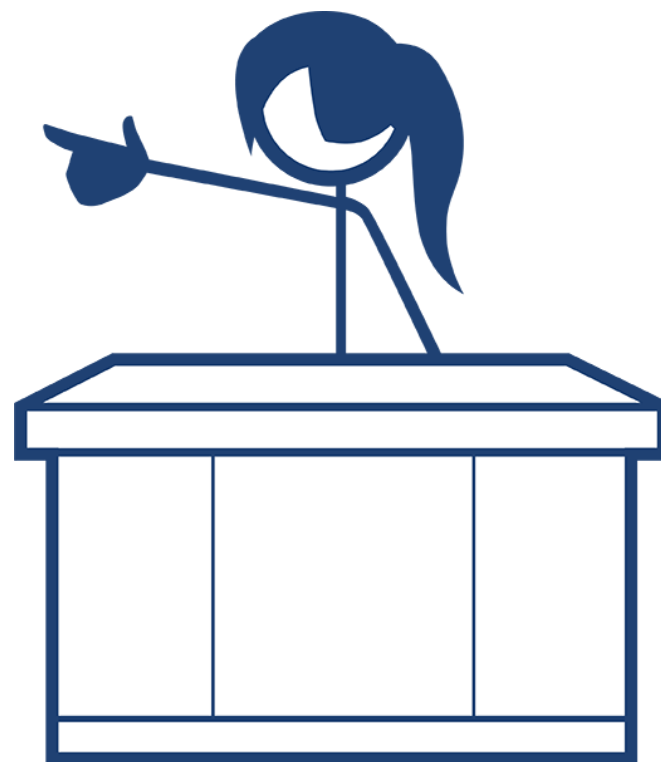
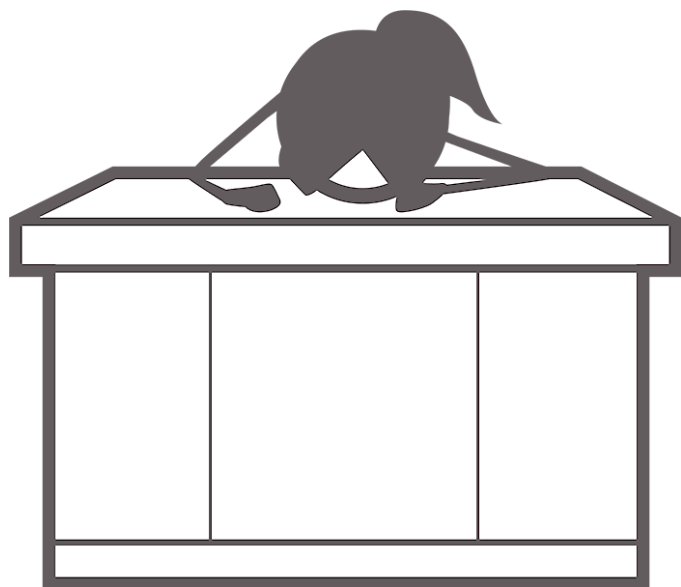
Review of default enrollment

2025 updates

Resources and counseling tips

# We're Going Into the Policy Weeds Today.

It can be confusing, but we're here for you!



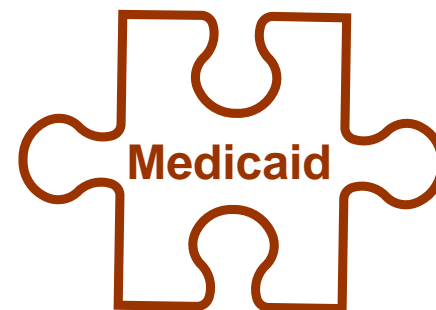
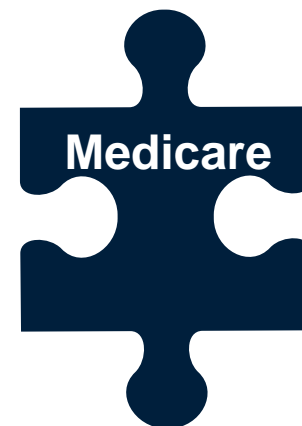
# Overview of Dual Eligibility

People who have both Medicare and Medicaid

# What is Dual Eligibility?

Dually eligible individuals (“duals”) have both Medicare and Medicaid.

- Individuals with Medicare can apply for Medicaid at any time.
- Individuals with Medicaid can get Medicare when they:
  - a) Reach their 25<sup>th</sup> month of receiving disability benefits.
  - b) Turn 65.

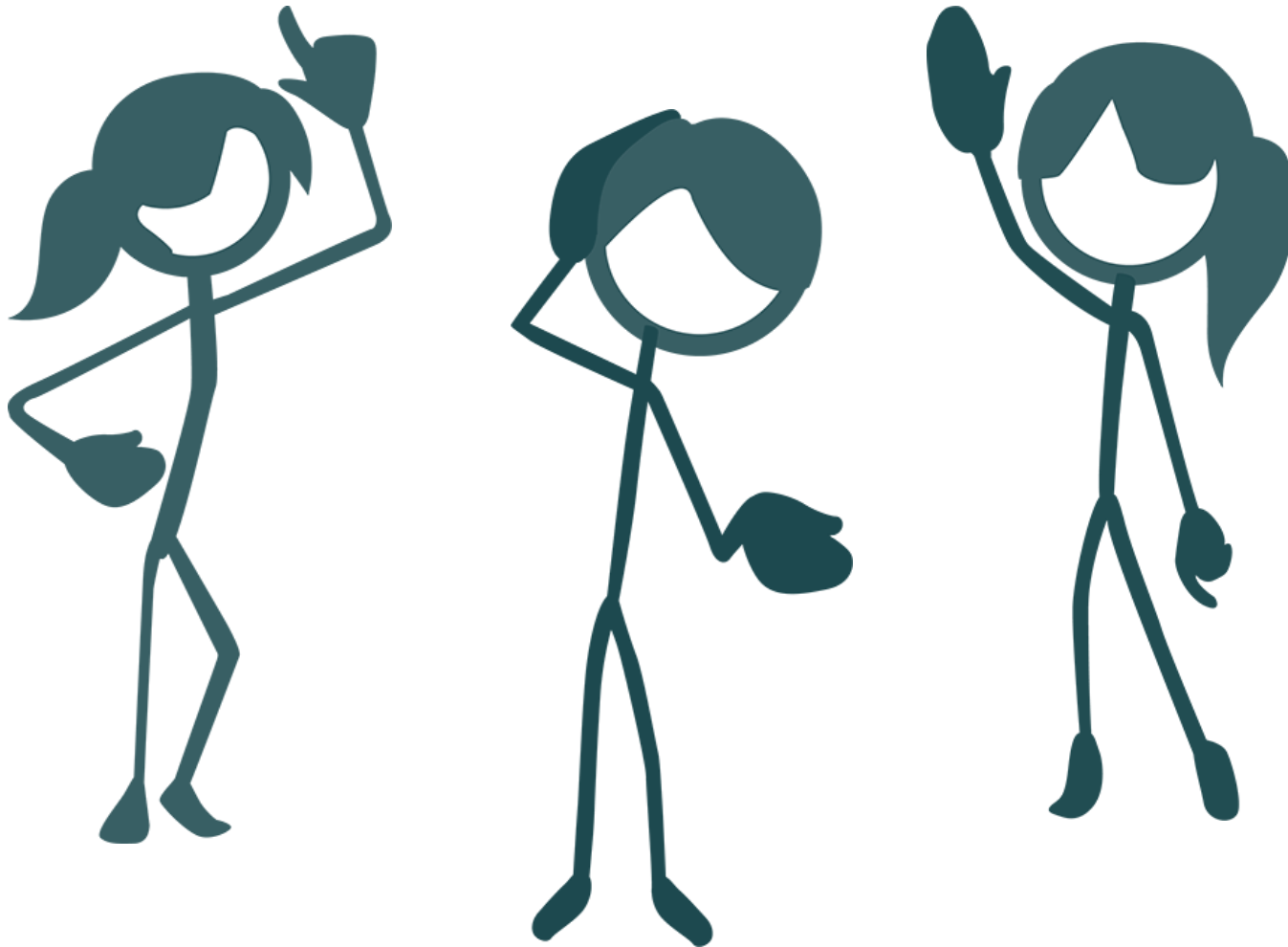


# What is Dual Eligibility?

There are two categories of dual eligibility.

	Full benefit	Partial benefit
Has Medicare	Yes	Yes
Has full Medicaid	Yes	No
Has help with Medicare premiums through the <a href="#"><u>Medicare Savings Program</u></a>	Possibly	Yes

# Questions?





# Overview of Dual Eligible Special Needs Plans (D-SNPs)

Definition and types of plans

# What Are Special Needs Plans (SNPs)?

Special Needs Plans (SNPs) are a type of Medicare Advantage plan that limits membership to people with specific conditions or characteristics. There are three types of SNPs:

1. Chronic Condition SNP (C-SNP)
2. Institutional SNP (I-SNP)
3. Dual Eligible SNP (D-SNP)

# What are Dual Eligible Special Needs Plans (D-SNPs)?

Dual Eligible Special Needs Plans (D-SNPs):

- Are a type of Medicare Advantage plan.
- Only accept dually eligible individuals as members.
- Must have a special “model of care” tailored to support duals.
- Must sign a contract with the state.
- Must follow requirements to coordinate with Medicaid benefits.

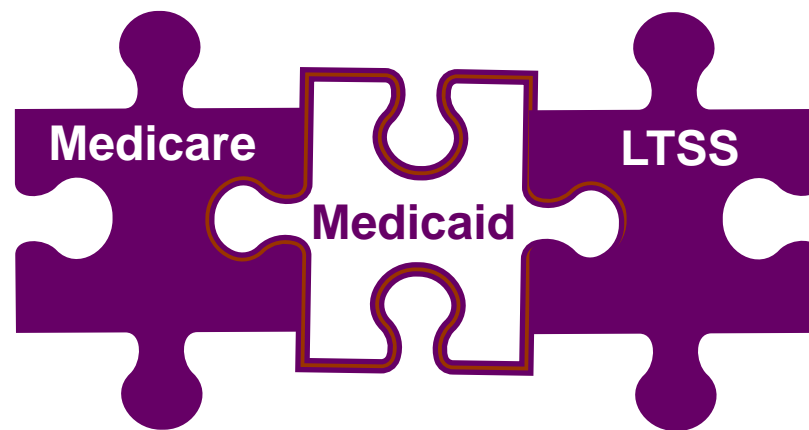
# Who Can Enroll in D-SNPs?

Only dually eligible individuals can enroll in D-SNPs.

- D-SNPs may choose [which Medicaid programs they accept](#). D-SNPs vary in whether they accept full and/or partial duals, including which Medicare Savings Programs they accept.
- Only [Family Care Partnership](#) participants can enroll in Family Care Partnership D-SNPs.

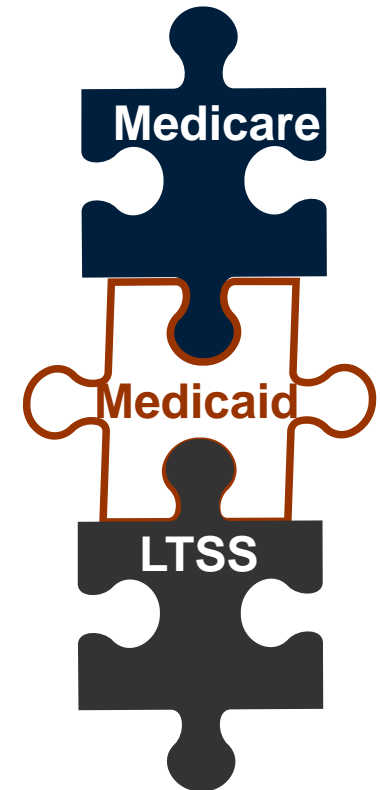
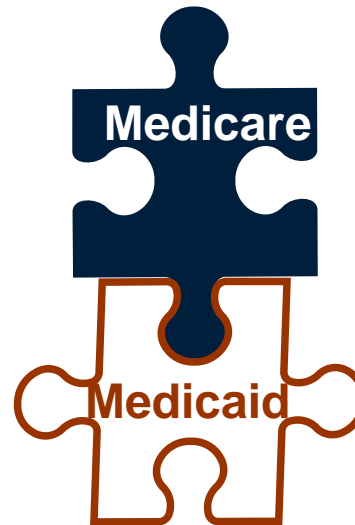
# What is Family Care Partnership?

- [Family Care Partnership](#) (“Partnership”) provides “bundled” Medicare, Medicaid, and long-term services and supports (LTSS) in one managed care plan.
- Aging and disability resource centers (ADRCs) screen individuals for eligibility.



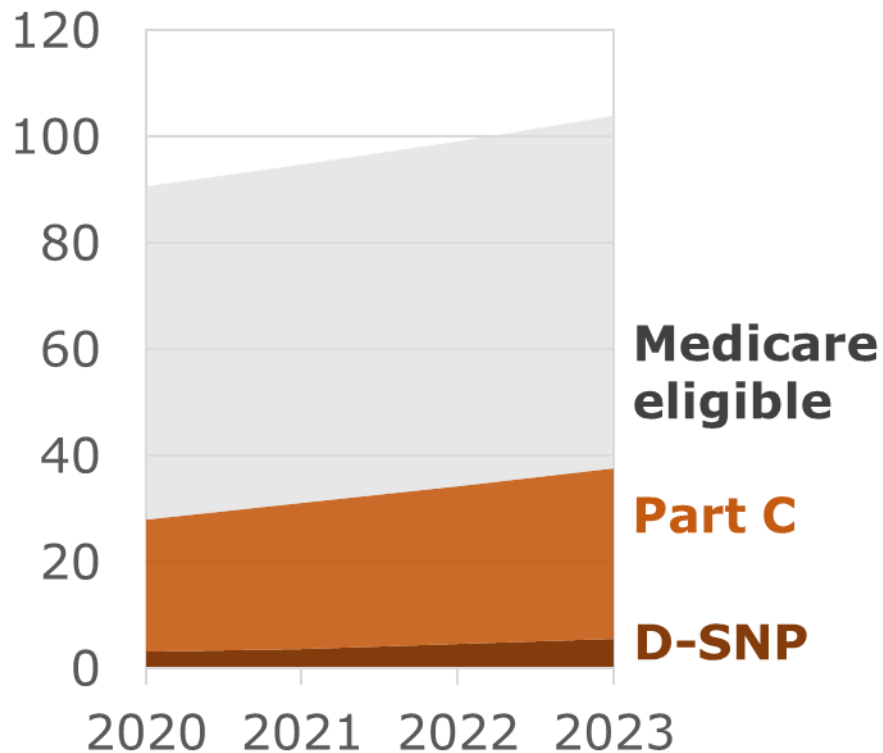
# Coverage Choices Graphic

Medicare	Medicaid	D-SNPs	Partnership
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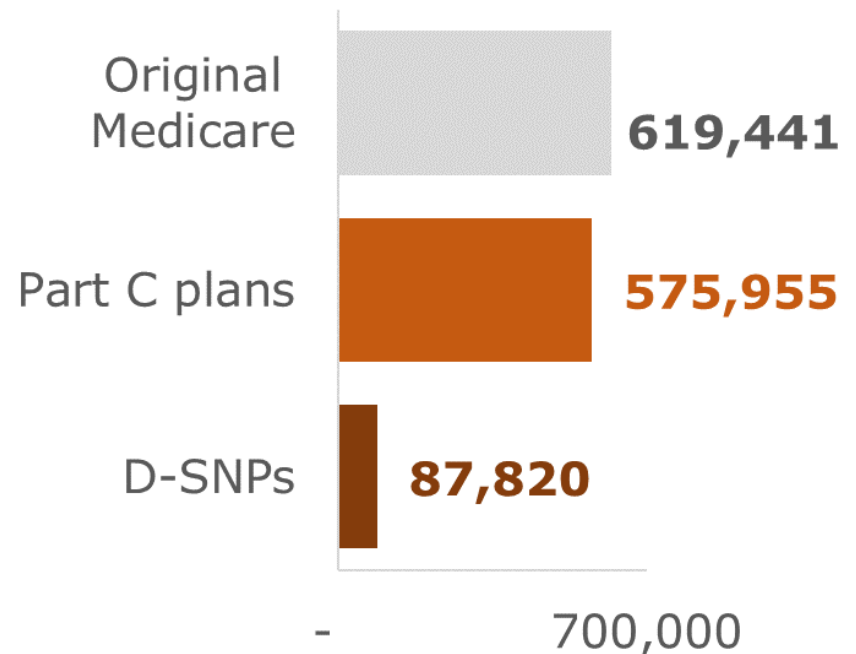


# D-SNP Enrollment is Increasing.

National Medicare enrollment (in millions)



Wisconsin enrollment in 2023



# Note About Cash Benefits

- Medicare Advantage cash benefits do not count as income for Medicaid, Medicare Savings Program, and/or FoodShare benefits ([Medicaid Eligibility Handbook 15.3.31](#)).
- Note: HUD (US Department of Housing and Urban Development) has not (yet?) exempted Medicare Advantage cash benefits as income for housing vouchers.





# Types of D-SNPs: What Counselors Need to Know

## **Bottom line:**

You don't have to understand all D-SNP jargon.

The personalized Plan Finder comparison is helpful for everyone.

It is important to know when a person can use the new Integrated Specialist Enrollment Period and how they can align insurance plans.

# Types of D-SNPs: Overview

- D-SNPs can be classified as:
  - Coordination only (**CO**).
  - Highly integrated dual eligible (**HIDE**).
  - Fully integrated dual eligible (**FIDE**).
- D-SNPs with exclusively aligned enrollment are called Applicable Integrated Plans (**AIPs**).
- [Wisconsin Landscape of Medicare Plans](#) and [CMS.gov](#) classify available D-SNPs.

Medicare Managed Care Manual, Ch. 16-B (20.2.1)

# Types of D-SNPs: Details



	Coordination only (CO)	Highly integrated (HIDE)	Fully integrated (FIDE)
Same managed care company as Medicaid	Possible	Possible	<b>Required</b>
Behavioral health		Required*	Required
Long term services and supports		*Or Required*	<b>And</b> Required

# Types of D-SNPs in Wisconsin

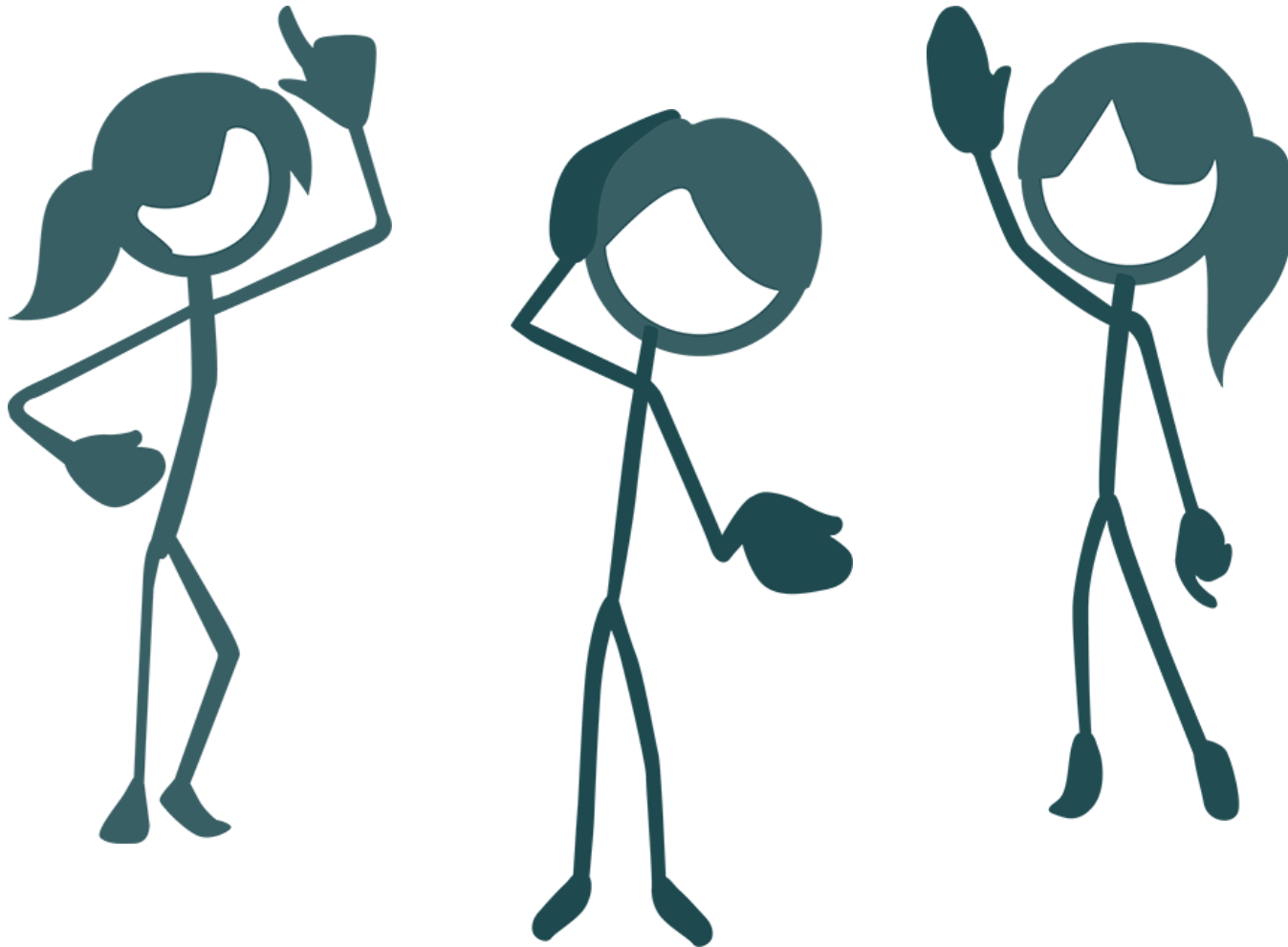


The ending CO D-SNP is Molina Medicare Complete Care Select (H2879-005). It was available in 36 counties in 2024.

Coordination only (CO)	Highly integrated (HIDE)	Fully integrated (FIDE)
Wisconsin's only CO D-SNP is ending 12/31/24	All other D-SNPs in Wisconsin	Only <a href="#">Family Care Partnership</a> plans

**AIP**

# Questions?



# Alignment

Coordination of Medicare and Medicaid

# What is Managed Care?

Health care can come in the form of:

- **Fee-for-service:** Providers are paid an approved rate for services
- **Managed care:** An insurance company is paid a capitated rate for each member and negotiates rates with network providers

	Fee-for-service	Managed care
Medicare	Original Medicare	Medicare Advantage
Medicaid	Medicaid through the state	MCOs and HMOs

# What is Medicaid Managed Care?

- Elderly, blind, and disabled (EBD) Medicaid recipients can **choose** whether they want:
  - **Fee-for-service Medicaid** (through the state).
  - **Medicaid managed care** (through a private company).
- **Medicaid managed care** is provided through health maintenance organizations (**HMOs**) and managed care organization (**MCOs**).



# Is Medicaid Managed Care Mandatory?

- Enrollment in a Medicaid HMO or MCO is required for individuals who only have Medicaid for their health insurance.
- **It is optional for dual eligible EBD Medicaid members to enroll in Medicaid HMOs or MCOs.**  
They can alternatively choose fee-for-service Medicaid.

# Aligned Enrollment

**Unaligned enrollment:**  
Benefits received through uncoordinated programs

## Medicare

Benefits include primary and acute care.

## Medicaid

Benefits include long-term services and supports.

**Aligned enrollment:**  
Benefits managed by the same company

One company provides managed care.

Medicare  
D-SNP

Medicaid  
HMO or  
MCO

# What are the Benefits of Aligned Enrollment?

- Beneficiaries in aligned plans can benefit from:
  - Easier-to-find providers who accept both Medicare and Medicaid.
  - One care manager coordinating all benefits.
  - Help with maintaining Medicaid eligibility.
- Exclusively aligned plans ([Partnership](#) plans) have combined grievance and appeals processes for Medicare and Medicaid.

# Which Plans are Aligned in Wisconsin?

The [D-SNP spreadsheet](#) lists which D-SNPs and Medicaid HMOs are “aligned.”

**Pro tip:** Save the link to this spreadsheet; it always opens to the most current version.

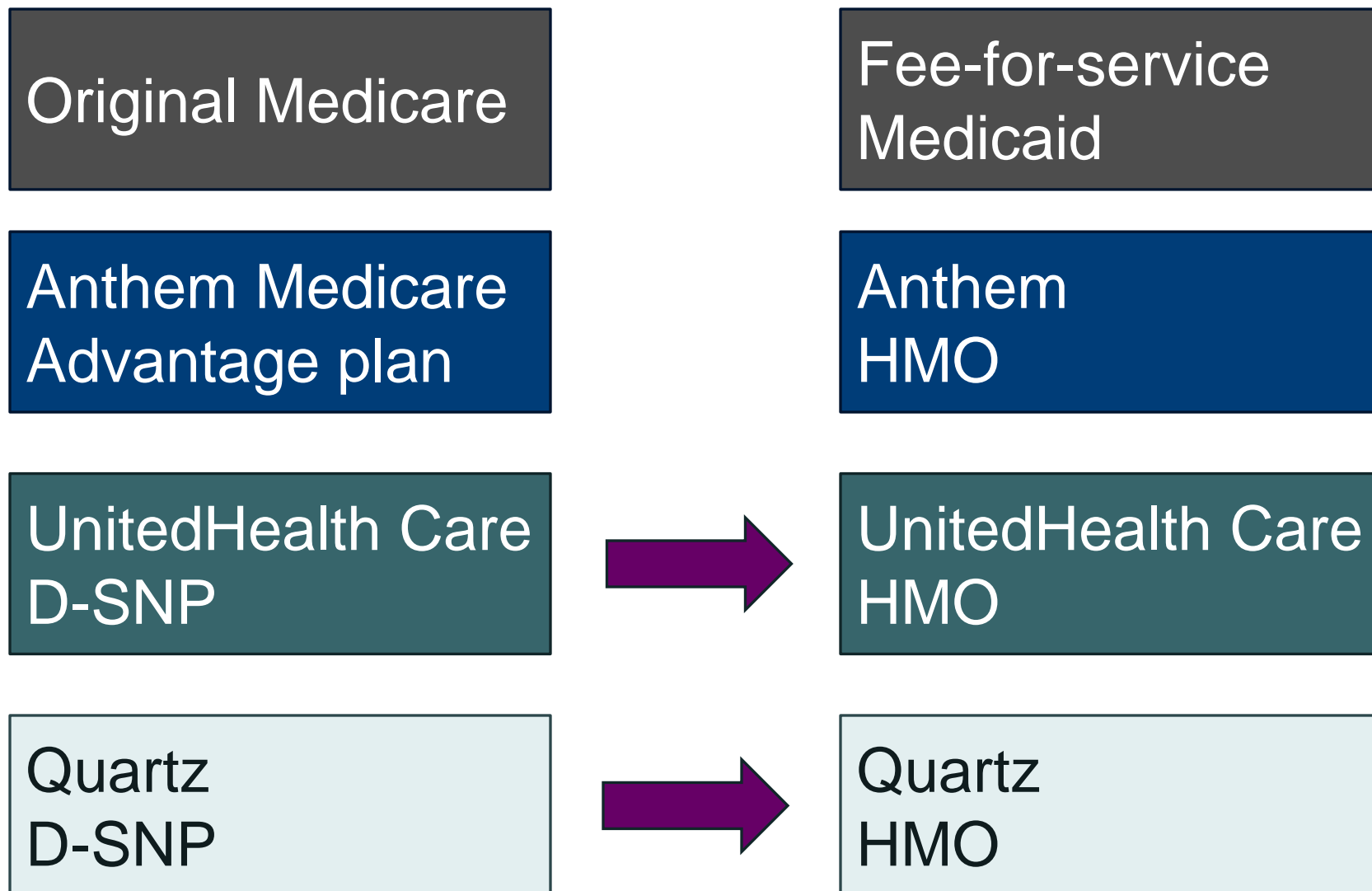
You can also find the link on the [DHS D-SNP webpage](#).

# Check Your Understanding: Aligned Enrollment

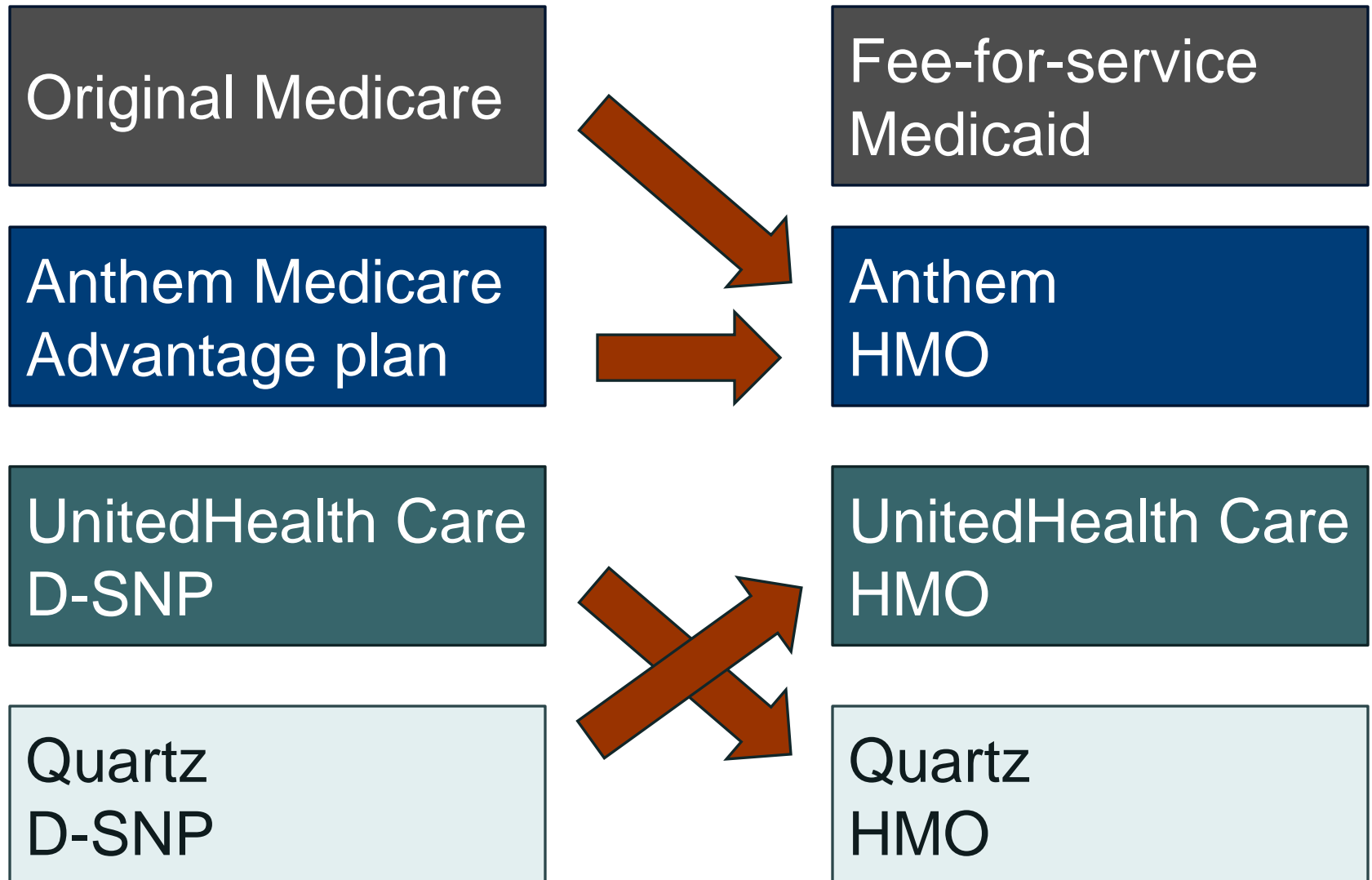
Select the below button to test your skills at matching aligned plans:

[Matching Challenge](#)

# Examples of Aligned Enrollment

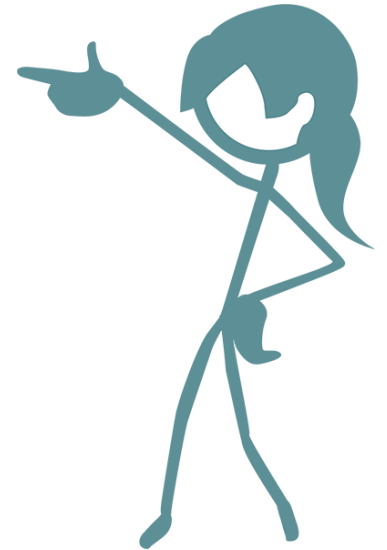


# Examples of Unaligned Enrollment



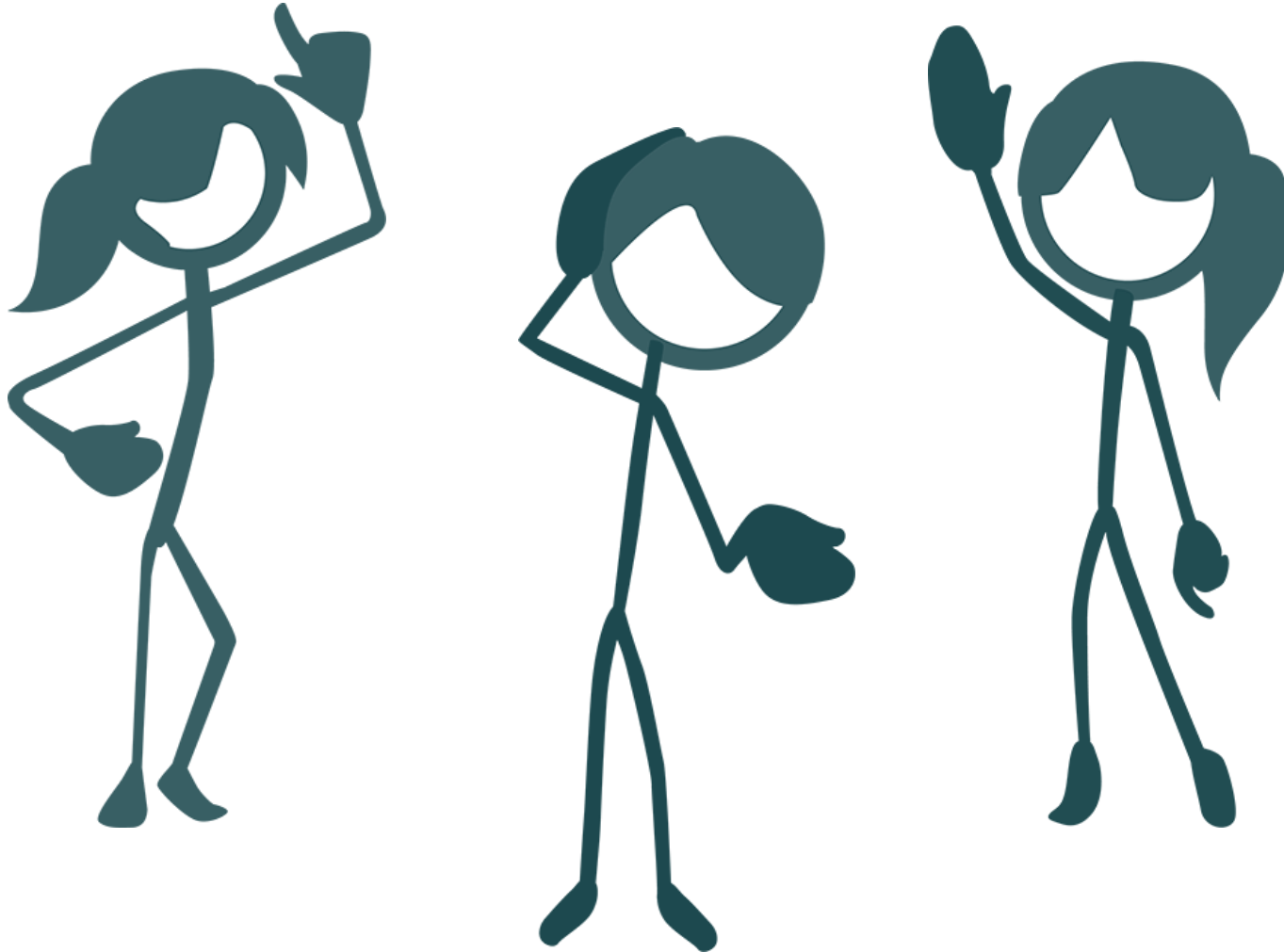
# Spoiler: Upcoming Policy Changes Increase Alignment

The federal policy updates coming in 2025–2030 will increase alignment!





# Questions?



# Review of Default Enrollment

Wisconsin policy impacting Medicaid managed care members who are starting Medicare

# Wisconsin's Default Enrollment Policy

To improve care coordination for individuals who have Medicaid managed care and Medicare, Wisconsin began “default enrolling” SSI\* Medicaid HMO and [Family Care Partnership](#) MCO members who become eligible for Medicare into aligned Dual Eligible Special Needs Plans (D-SNPs) in 2022.

\*Supplemental Security Income

# What is Default Enrollment?

- Default enrollment is when individuals with SSI Medicaid HMOs or Family Care Partnership MCOs are enrolled into the organization's corresponding D-SNP when they first become eligible for Medicare; they begin with aligned plans.
- Individuals have the option to opt out of default enrollment into the D-SNP.

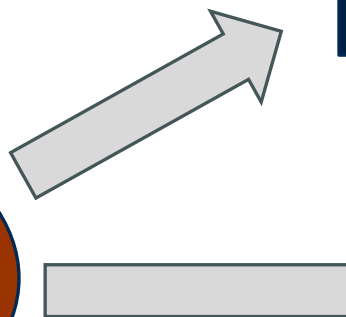
# What is Default Enrollment?

Beneficiary becomes Medicare-eligible.

- Turns 65
- 25<sup>th</sup> month of disability

Beneficiary is default enrolled in **Company X's D-SNP** for their Medicare (with the option to opt out).

Beneficiary is in **Company X's Medicaid HMO.**



Beneficiary remains in **Company X's Medicaid HMO.**

# What is Default Enrollment?

## **Aligned enrollment:**

Beneficiary receives managed care from the same company for both their Medicare and Medicaid.

Beneficiary is in **Company X's D-SNP** for their Medicare.

Beneficiary is in **Company X's Medicaid HMO.**

# Who Can Get Default Enrolled in D-SNPs?

## Members eligible to enroll in D-SNP

Family Care

Family Care Partnership

SSI

SSI Related Medicaid

SSI Related Deductible

MAPP

BadgerCare+ (BC+) Parent/Caretaker

BC+ Childless Adult

BC+ Extension

BC+ Other

Only EBD Medicaid members in these programs who are **already enrolled in an SSI HMO or Partnership MCO by a participating company** will be default enrolled in a D-SNP when they become eligible for Medicare.

# Who Cannot Get Default Enrolled in D-SNPs?

- BadgerCare+ Medicaid members are **not** eligible for default enrollment.
- Current duals (who already have Medicare and Medicaid) are **not** impacted by default enrollment.





# Beneficiary Protections: D-SNP Requirements

To implement default enrollment, D-SNPs must have and maintain:

- A 3+ star rating.
- Significant overlap of Medicare and Medicaid providers in the county ( $\geq 80\%$ ).
- Approval from the state Medicaid office and the Centers for Medicare and Medicaid Services (CMS).



# Beneficiary Protections: Opting Out

**Beneficiaries can opt out of default enrollment.**

- **The D-SNP plan will send a notice 60 days before Medicare starts**, explaining that the beneficiary is being enrolled in the D-SNP. The notice also includes SHIP contact information.
- The beneficiary can opt out by mailing the included opt-out form or by calling the D-SNP.

# Beneficiary Protections: Active Enrollment Overrides Default Enrollment

- D-SNP companies won't default enroll eligible members if they have already actively enrolled in another Medicare Advantage or a Part D plan.
- **If a beneficiary enrolls in a different Medicare plan after receiving the default notice, their chosen plan overrides the D-SNP enrollment.**

# Beneficiary Protections: Opting Out

**If the beneficiary opts out**, they are automatically enrolled in Original Medicare and (if they do not choose one for themselves) a Part D plan.

# Default Enrollment Opt Out Process

Beneficiary becomes  
Medicare-eligible.

- Turns 65
- 25<sup>th</sup> month of disability



Beneficiary is in  
**Company X's**  
Medicaid HMO.

Beneficiary  
gets default  
enrollment  
and opt-out  
notice.

# Default Enrollment Opt Out Process

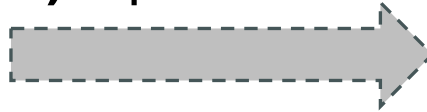
Beneficiary gets default enrollment and opt-out notice.

**A) Does nothing**



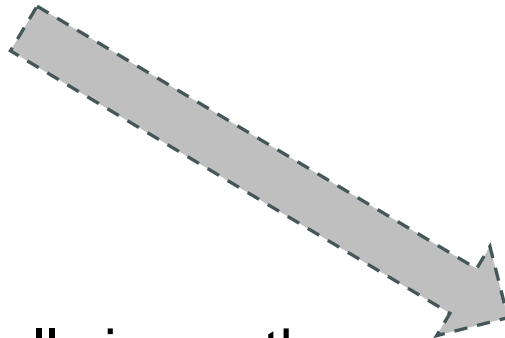
Beneficiary is default enrolled in an aligned **D-SNP with Company X.**

**B) Opts out**



Beneficiary is automatically enrolled in a Part D plan via Extra Help.

**C) Enrolls in another Medicare Advantage plan or a Part D plan**



Beneficiary is enrolled in the plan of their choice.

# Beneficiary Protections: Special Enrollment Periods

## **State-Initiated Enrollment Special Enrollment Period (SEP):**

Beneficiaries can make one change in the 90 days after Medicare coverage (through the D-SNP) begins.

Source: CMS Managed Care Manual, Ch. 2: 30.4.7



# Which Plans are Implementing Default Enrollment?

A list of the plans implementing default enrollment can be found on the:

- [D-SNP Default Enrollment FAQ for SHIP Counselors \(P-03265\)](#).
- Department of Health Services (DHS) [D-SNP webpage](#).
- [D-SNP service area and eligibility spreadsheet](#).



# Check Your Understanding

True or false: Default enrollment affects BadgerCare+ members.

True or false: Default enrollment affects people who already have both Medicare and Medicaid.

True or false: Default enrollment affects some EBD Medicaid members who are in an SSI HMO and are newly eligible for Medicare.

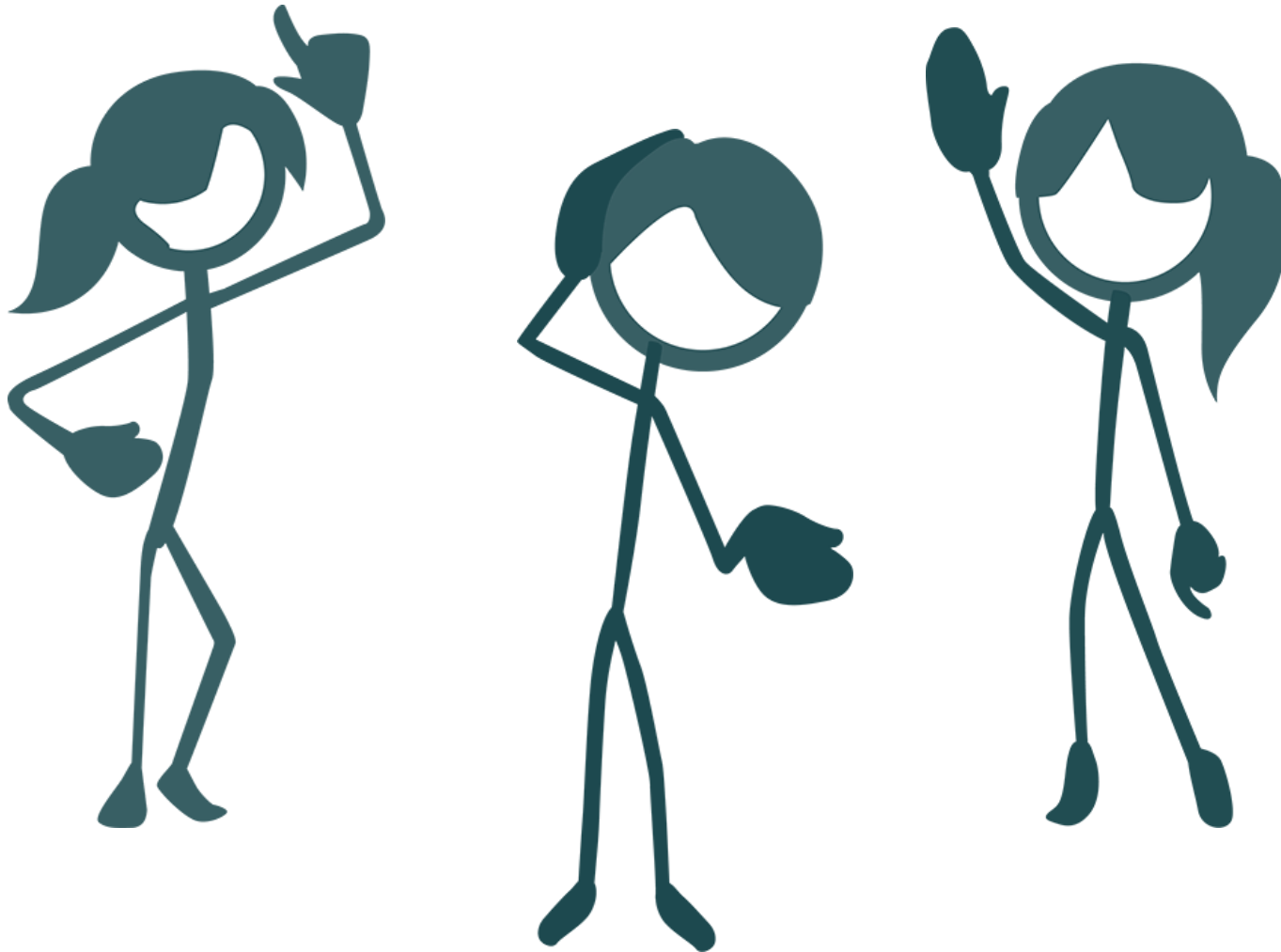
# Check Your Understanding

True or  false: Default enrollment affects BadgerCare+ members.

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True or false: Default enrollment affects some EBD Medicaid members who are in an SSI HMO and are newly eligible for Medicare.

# Questions?



# D-SNP Policy Updates

2025 Dual Eligible Special Needs Plan policy changes

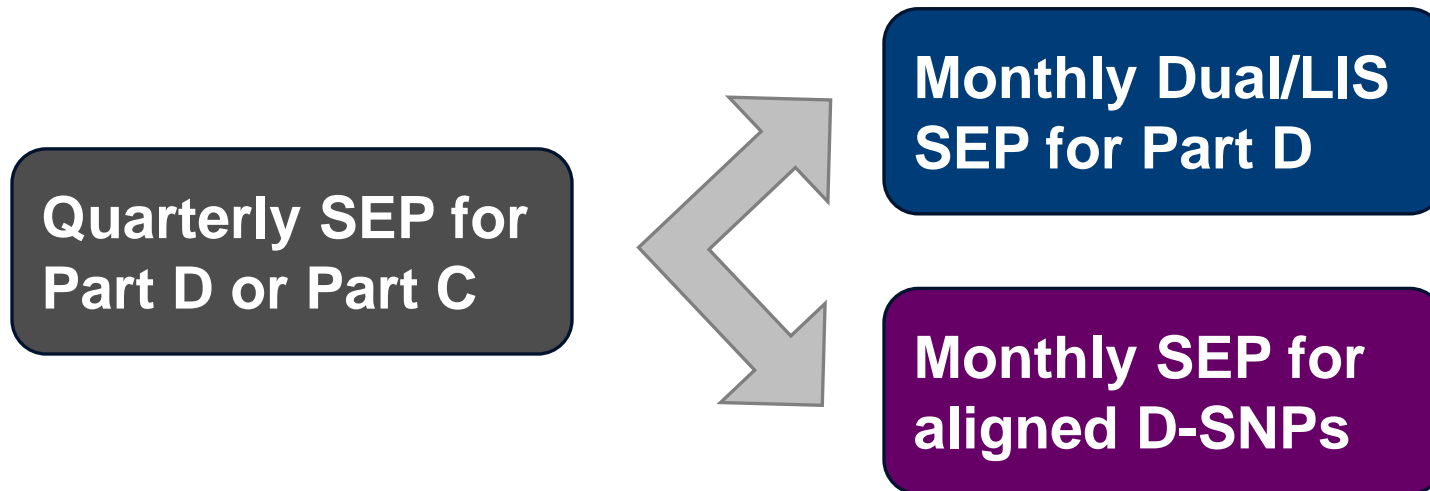
# Overview of Updates

- Changes to ongoing dual enrollment opportunities
- Changes coming after 2025

CMS 4205-F final rule; fact sheet

# Overview of Changes to Special Enrollment Periods

The ongoing, quarterly Special Enrollment Period (SEP) for beneficiaries with Medicaid or the Low Income Subsidy (LIS) is being replaced with two monthly SEPs.



# End to Quarterly Special Enrollment Periods

## Special Enrollment Period (SEP) for Dual-Eligible Individuals and Other LIS-Eligible Individuals:

One Part D or Part C enrollment change was allowed per quarter for the first three quarters of the year.

**This ends after 2024.**

**Special  
Enrollment Period**

January–March

**Special  
Enrollment Period**

April–June

**Special  
Enrollment Period**

July–September

Medicare Managed Care Manual Ch. 2 (30.4.4.5)

# New 2025 Policy: Monthly Dual/LIS Part D SEP

Each month, individuals with full Medicaid, partial Medicaid, and/or Extra Help (LIS) can:

- Disenroll from a Medicare Advantage plan that provides prescription coverage (MA-PD).
- Switch or enroll in a stand-alone Part D plan.

## Ongoing monthly Part D Special Enrollment Period





# Screening Questions

1. Do you have:

- Extra Help,
- Medicare Savings Program, and/or
- Medicaid?



Yes

2. Do you have:

- Medicare Advantage Prescription Drug (MA-PD), or
- Part D plan (PDP)?



Yes

**Then you can use the Dual/LIS Part D SEP!**

# Example

Esme has:

- A Medicare Advantage plan (MA-PD).
- Extra Help.

In April 2025, she uses the monthly Part D Special Enrollment Period to drop her Medicare Advantage plan and enroll in a stand-alone Part D plan instead.

The change is effective May 1.

# New 2025 Policy: Integrated Care D-SNP SEP

Each month, individuals enrolled in full Medicaid who have (or are joining) a Medicaid managed care plan (MCO or HMO) can enroll in an integrated, aligned D-SNP (HIDE, FIDE, or AIP).

## Ongoing monthly Integrated Care D-SNP Special Enrollment Period



# New 2025 Policy: Integrated Care D-SNP SEP

How to tell if a D-SNP is HIDE, FIDE, or AIP:

- Shortcuts
  - In Wisconsin, Partnership plans are FIDE and AIP.
  - In 2025, all other Wisconsin D-SNPs will be HIDE.

**All Wisconsin D-SNPs qualify for this SEP in 2025!**

- Source material
  - Plan Finder will be updated to list D-SNP type.
  - See the [Wisconsin Landscape of Plans file](#) or [CMS.gov](https://www.cms.gov).

# Integrated Care SEP and Medicaid HMO Enrollment

- Note that the Integrated D-SNP Special Enrollment Period does **not** allow someone to change their Medicaid HMO. A person must already be enrolled in Medicaid managed care to use it.
- Wisconsin Medicaid HMO enrollment opportunities are described in the:
  - [Wisconsin SSI Medicaid HMO Guide \(P-12770\)](#).
  - [Medicaid Eligibility Handbook, Ch. 21.6](#).

# Screening Questions for Integrated SEP

1. Do you have full Medicaid?
2. Do you have (or are you about to start) a Medicaid HMO (or MCO)?
3. Is the HMO's affiliated D-SNP a HIDE, FIDE, or AIP D-SNP?



Yes



Yes



N/A

Then you can use the Integrated D-SNP SEP!

# Example

Jamie has:

- Original Medicare with a stand-alone Part D plan (PDP).
- An SSI Medicaid HMO through Molina.

In June 2025, they use the Integrated Care Special Enrollment Period to enroll in Molina's D-SNP.

The change is effective July 1.

# Summary Table: Ongoing Special Enrollment Periods

	Old Medicaid/ LIS SEP	New Dual/LIS Part D SEP	New Integrated Care SEP
<b>Frequency</b>	Quarterly	Monthly	Monthly
<b>Eligibility</b>	<ul style="list-style-type: none"> <li>a. Full Medicaid</li> <li>b. Partial Medicaid</li> <li>c. LIS</li> </ul>	<ul style="list-style-type: none"> <li>a. Full Medicaid</li> <li>b. Partial Medicaid</li> <li>c. LIS</li> </ul>	<ul style="list-style-type: none"> <li>1. Full Medicaid</li> <li>2. Medicaid HMO or MCO</li> </ul>
<b>Enrollment changes</b>	Drop, change, or add: <ul style="list-style-type: none"> <li>a. Part D</li> <li>b. MA or MA-PD</li> </ul>	<ul style="list-style-type: none"> <li>a. Drop MA-PD</li> <li>b. Add PDP</li> <li>c. Switch PDP</li> </ul>	Enroll in an <b><u>aligned</u></b> D-SNP (HIDE, FIDE, or AIP)



# Order of Enrollments

If both new Special Enrollment Periods are used in the same month, the most recent enrollment will take effect.

# Special Enrollment Period Takeaways

- People can no longer enroll into any Medicare Advantage plan using the ongoing SEPs.
- People with the Low Income Subsidy can change Part D plans each month.
- People with Medicaid can change Part D plans each month.
- People with Medicaid HMOs can enroll in aligned D-SNPs each month.

# Knowledge Check

It's June 2025. Claude has a Medicare Advantage (MA-PD) plan and full benefit, fee-for-service Medicaid.

What are Claude's monthly enrollment options?

- a. Drop current Medicare Advantage plan
- b. Enroll in a standalone Part D plan
- c. Switch to a different Medicare Advantage plan
- d. Enroll in a D-SNP

# Knowledge Check

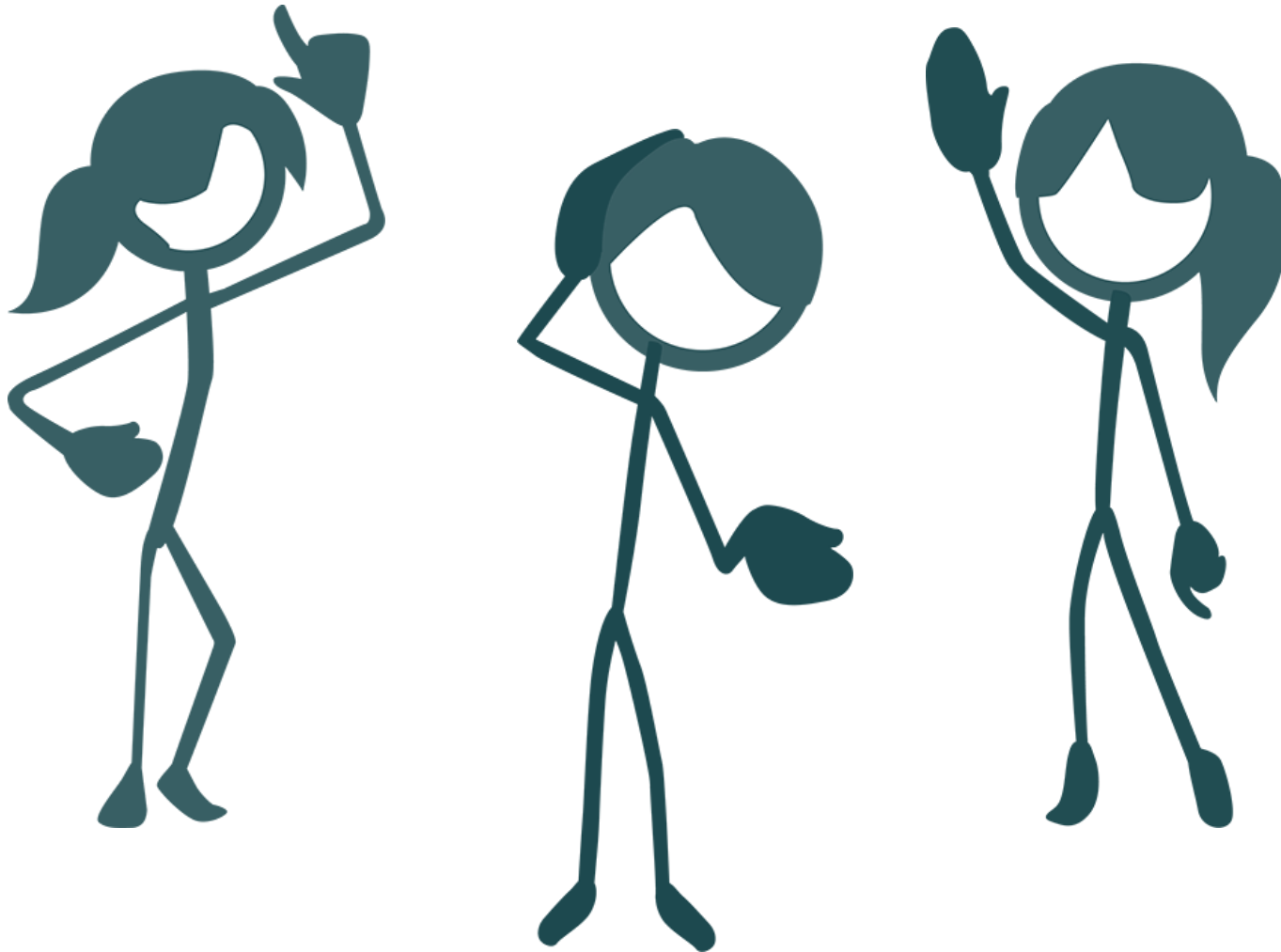
It's June 2025. Claude has:

- A Medicare Advantage (MA-PD) plan.
- Full benefit, fee-for-service Medicaid.

What are Claude's monthly enrollment options?

- a. Drop current Medicare Advantage plan
- b. Enroll in a standalone Part D plan
- c. Switch to a different Medicare Advantage plan
- d. Enroll in a D-SNP

# Questions?



# FYI: Further Limits to “D-SNP Look-Alike Plans”

- “Look-alike plans” are Medicare Advantage plans that are marketed towards duals but aren’t D-SNPs; they have no contract with the state to coordinate with Medicaid.
- **Wisconsin does not have any “D-SNP look-alike plans.”**
- Federal policy will progressively limit look-alike plans in 2025, 2026, and 2027.

# FYI: Future Updates Limits Choice Overload

Starting in 2027, organizations can only offer one D-SNP in the same service area as their Medicaid HMO or MCO.

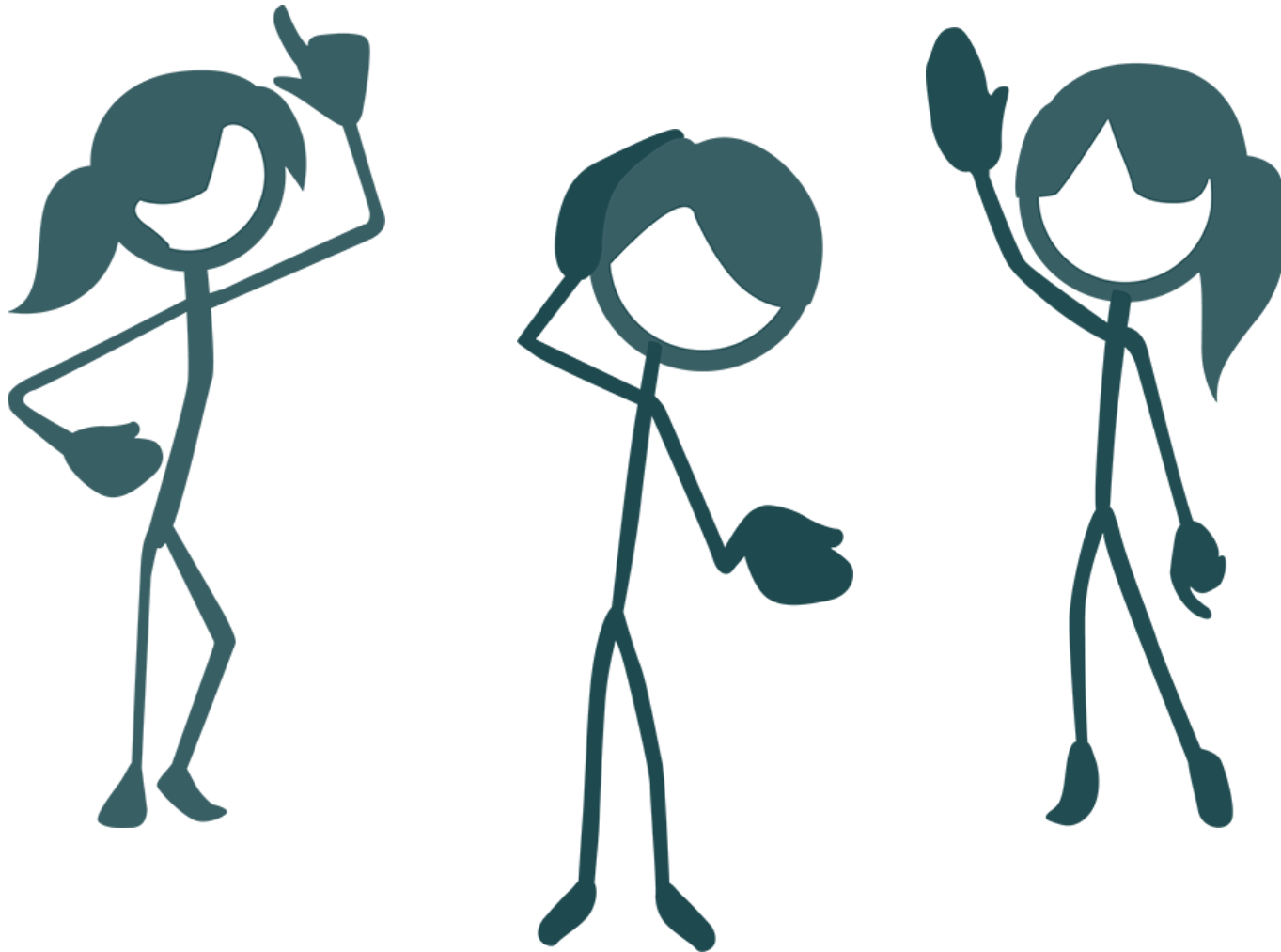
- This applies to D-SNPs serving full-benefit dual eligibles.
- Plans designed to serve distinct populations, such as only partial duals, are an exception.

# FYI: Future Updates Will Increase Alignment

- Starting in 2027: D-SNPs with aligned MCOs can only enroll **new** members who are in their affiliated Medicaid MCO.
- Starting in 2030: D-SNPs with aligned MCO service areas can only enroll members with their affiliated Medicaid MCOs (with some exceptions allowed).
- **Bottom line: starting 2030, most or all D-SNP members must be in the aligned MCO.**



# Questions?



# Counseling Tips

# How Does a Person Decide if a D-SNP is Right for Them?

Beneficiaries should check:



- Whether their providers are in network.



- Whether their prescriptions are covered by the D-SNP.



- Expected costs.

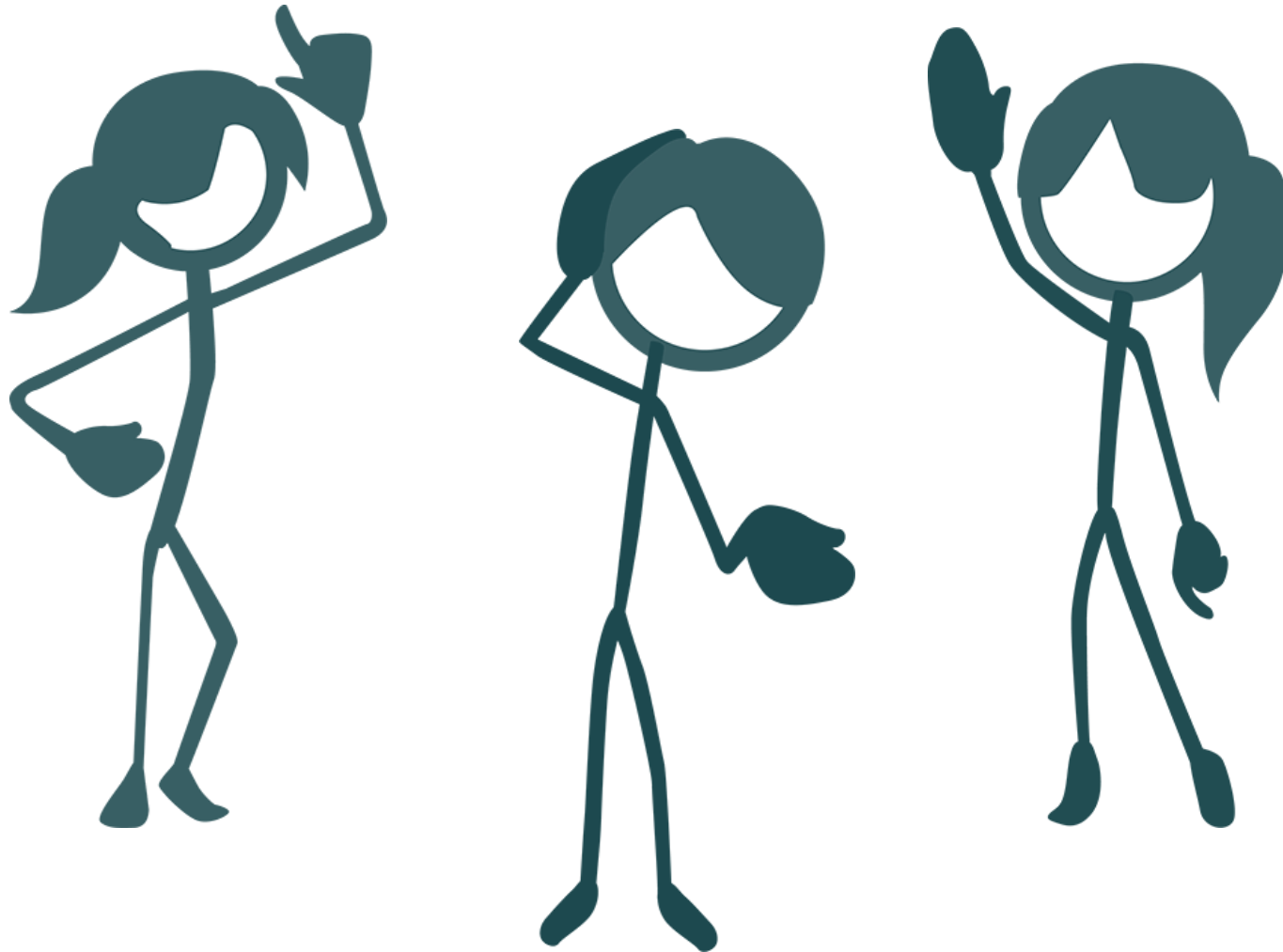


- Extra benefits, including their eligibility requirements and coverage details.

# D-SNP Considerations

- Care is only coordinated if plans are aligned.
- Medicaid eligibility criteria [varies by plan](#).
- Members with partial Medicaid can have higher cost-sharing.

# Questions and Idea Sharing



# Review and Resources

# Resources for Professionals

- [D-SNP and Default Enrollment FAQs for SHIP Counselors \(P-03265\)](#) (includes glossary)
- Federal policy:
  - [42 CFR 422.66 \(c\)\(2\)](#)
  - [Medicare Managed Care Manual Ch. 2](#)
  - [CMS 4205-F final rule](#)
    - [CMS fact sheet](#)
    - [Justice in Aging issue brief](#)

# Resources for Professionals and Beneficiaries

- [D-SNP FAQs](#) (Justice in Aging)
- [Department of Health Services D-SNP webpage](#)
  - [Wisconsin D-SNP eligibility spreadsheet](#)
  - D-SNP benefit package summaries
  - Sample default enrollment notices:
    - [SSI Medicaid HMO members](#)
    - [Family Care Partnership MCO members](#)



# Resources for Beneficiaries

- [D-SNP FAQ for members](#)
- [D-SNP brochure \(P-03556\)](#)



Thank you for  
attending!

Thank you to our  
American Sign  
Language interpreters!



# Presenter Information

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