

Master Plan for Aging
Recommendation Form: Promoting Health and LTSS Integration for the California Medicare Population through Medicare Advantage and MediGap

To submit your recommendation, fill out as many of the fields below as possible. It is fine to leave some blank. Recommendations can be submitted at engage@aging.ca.gov. Initial recommendations are requested to be submitted by December 13, but they may be submitted after this date as well.

Issue Statement: [State the problem your recommendation will address. Insert links to reports where appropriate.] Health and LTSS services are provided in silos and are difficult for consumers and their families to understand and coordinate. This is an issue for all older adults who have both health and functional needs. It is a particular issue for older adults who have Medicare either through traditional Medicare or through Medicare advantage. These older adults do not qualify for MediCal as supplemental coverage or coverage for LTSS so integration or coordination of care is even more difficult than for Duals or MediCal only older adults.

MPA Framework Goal: [Insert which goal/s from the framework this recommendation addresses. [View MPA Framework here.](#)

Goal 1: Services and Supports. We will live where we choose as we age and have the help we and our families need to do so.

Goal 3: Health & Well-being. We will live in communities and have access to services and care that optimize health and quality of life.

MPA Framework Objective: [Insert which objective/s from the framework this recommendation addresses.] Objective 3.2: Californians will have access to quality, affordable, and person-centered health care through delivery systems that are age-friendly, dementia-friendly and disability-friendly.

Recommendation: [Explain your recommendation in one to two sentences.] State of California provide planning leadership and regulatory and financial incentives to Medicare Advantage Plans and Medicare Supplemental plans to offer basic LTSS benefits. State will encourage the delivery of Special Supplemental Benefits for the Chronically Ill” (SSBCI) by California Medicare Advantage Plans and development of a MediGap related LTSS benefit.

Target Population and Numbers: [Describe groups of Californians impacted by this recommendation, with numbers if available.] Older adults not eligible for MediCal

Detailed Recommendation: [Insert detailed bullet points describing your recommendation.]

- DMHC, DHCS, and Department on Aging jointly convene leaders of Medicare Advantage Plans to design a strategy to encourage MA Plans to offer supplemental LTSS services in a systematic way.

- DHCS/Aging with plans design a marketing incentive and or a financial incentive plan for MA plans that agree to offer such LTSS benefits. Such as branding as “A California Approved Age Friendly Plan” or similar concept.
- DHCS, Aging, and Insurance Commissioner convene Medicare Supplemental insurers operating in the California market with the goal of adding a state regulated LTSS benefit package similar to that offered in the State of Minnesota as a supplement to their MediGap policies.

Evidence that supports the recommendation: [Add links or summaries of research evidence that support the recommendation.]

Minnesota Evaluation, John Cutler

Examples of local, state or national initiatives that can be used as an example of a best practice: [Provide any available links and sources.]

- **Local:**
- **State:**
- **National:**
- **Other:**

Implementation: [Insert actions state agencies, legislators, counties, local government, or philanthropy can take to move this recommendation forward. Some of the entities listed below may or may not be applicable to each recommendation.]

- **State Agencies/Departments:** [action to be taken by Governor or specific state agencies]
- **State Legislature:** [legislation needed to implement recommendation]
- **Local Government:**
- **Federal Government:**
- **Private Sector:**
- **Community-Based Organizations:**
- **Philanthropy:**
- **Other:**

Person-Centered Metrics: Individual measures of inputs or outcomes that can be used to measure the recommended action’s impact on people. Increase in the number of Older adults and family reporting that they received integrated and coordinated Health and LTSS services. Delayed use of SNF services.

Evaluations: [How will we know that the recommended action is successful once it has been implemented?]

- **Short-term (by 2020): 10% of Medicare Advantage Plans provide LTSS benefit**
- **Mid-term (by 2025):75% of MA plans provide agreed upon LTSS benefit**

- **Long-term (by 2030): 100% of MA plans and 50% of Supplemental Plans provide an LTSS benefit.**

Data Sources: [What existing data can be used to measure success or progress?]:

- Existing data sources: [specify datasets, variables, and data owner/location]
- Suggestions for data collection to evaluate implementation of this goal when no data sources exist: See Milliman White Paper, LTSS Services in Medicare Advantage Plans
- <http://www.milliman.com/insight/2019/LTSS-services-in-Medicare-Advantage-Plans/>
- Final Report: ENHANCED HOME CARE BENEFIT IN MEDICARE SUPPLEMENTAL PLANS, John Cutler Consulting, December 2018

Potential Costs/Savings: [insert any research, actuarial analysis or other evidence of the cost of this recommendation or potential savings]

The use of this benefit is too new to have substantial evaluation research available. We could project potential savings to the State if the benefit helps deter spend down to become MediCal eligible and if LTSS services integrated into Medicare Advantage also delays or avoids high cost nursing facility care. Medicare savings or Medicare Plan savings could accrue by integrated services helping to avoid some hospital and emergency room use.

Prioritization: [How would you prioritize this issue in importance relative to other needs/priorities – e.g., low, medium, high]: **High because of large population potentially affected.**

Name of person(s)/organization submitting recommendation: Marty Lynch, Ph.D., LifeLong Medical Care

Email for person(s)/organization submitting recommendation: Mlynch@lifelongmedical.org

Date of submission: 12/13/19