

The Advancing Integration in Medicare and Medicaid Act

U.S. Senators Bob Casey (D-PA) and Tim Scott (R-SC)

Why Do We Need the Advancing Integration in Medicare and Medicaid Act?

Almost <u>9 million Americans</u> receive full benefits under Medicare and state Medicaid programs. This population is diverse and often has multiple medical conditions, mental health needs and disabilities. Seniors and people with disabilities who have both Medicare and Medicaid must often navigate two complex, misaligned and fragmented systems leading to missed opportunities for treatments and supports, <u>poorer health outcomes and inefficiencies in care</u>.

The federal government and states have worked to create and advance coverage options that integrate Medicare and Medicaid benefits for people in both programs, in hopes of providing care through a single entity or aligned entities. These integrated programs aim to reduce confusion and complexity and ensure individuals have access to care that reflects their needs and preferences. Furthering integration also has the potential to promote more effective and efficient coordination between Medicaid and Medicare, reducing spending.

Despite these federal and state efforts, only approximately 12 percent of seniors and people with disabilities with Medicare and Medicaid benefits are enrolled in programs.

What Does the Advancing Integration in Medicare and Medicaid Act Do?

The Advancing Integration in Medicare and Medicaid Act would require states to develop integration strategies, detailing how they will improve programs for individuals with Medicare and Medicaid. Additionally, states would be required to consult with a range of affected groups, including people who have Medicare and Medicaid, their advocates, health plans, health care providers and more. In line with recommendations from the Medicaid and CHIP Payment and Access Commission (MACPAC), states would be required to describe their approach to Medicare and Medicaid integration, including:

- Education and enrollment strategies to empower individuals with Medicare and Medicaid to make informed decisions about their coverage;
- Beneficiary protections intended to preserve and strengthen choice and access to care;
- Tactics to address gaps in Medicare and Medicaid data collection and sharing;
- Strategies to assess quality of care provided in integrated programs; and
- Description of how the integration approach(es) selected by the state will advance health equity

Supporting Organizations: Community Catalyst, Justice in Aging, The National MLTSS Health Plan Association, Long-Term Quality Alliance, The National PACE Association