A Pathway to Dual Eligible Data Integration: Maximizing Coordination of Benefits, Services, and Payments through the Massachusetts MMIS

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A Pathway to Dual Eligible Data Integration: Maximizing Coordination of Benefits, Services, and Payments through the Massachusetts MMIS

DATA INTEGRATION VISION

The Massachusetts Medicaid Program, MassHealth, and UMass Medical School have partnered to develop and deploy precise data integration methodologies within the Massachusetts MMIS to fully coordinate enrollment, service delivery, and payments for Medicaid recipients with current or potential Eligibility for Medicare.

Customized business intelligence within the MMIS Third-Party Liability subsystem interfaces with state, CMS, and SSA data sets; care coordination processes; and claims processing routines to ensure recipients receive the highest benefits at the state’s lowest liability, including:

- Identifies current or potential Dual Eligibles
- Recovers missed Dual Eligibles
- Identifies new Dual Eligibles
- Ensures all appropriate primary payers are identified and reported for investigation and resolution.

Dual Eligible Identification and Maintenance

MEDIS business intelligence processes initial data inputs to:

- Confirm current Dual Eligibles
- Identify new Dual Eligibles
- Recognize missed Dual Eligibles
- Enroll prospective Dual Eligibles

Algorithms are applied to direct recipients to options which provide the highest levels of benefits and care coordination, while supporting Massachusetts fully integrates Dual Eligible data throughout MMIS to achieve benefits for all parties:

- Ensures Medicaid status as the Payer of Last Resort
- Maximizes savings through cost avoidance and repricing
- Takes advantage of all COBA data elements to minimize COBA claim errors
- Identifies potential Medicare-Medicaid integrated care enrollees
- Provides up-to-date access to recipient Medicare entitlement and coverage information
- Receives assignment to highest level of Medicaid benefits based on Medicare coverage through state payment of Medicare premiums
- Receives full advantage of service delivery options, including available Medicare-Medicaid integrated care
- Receives out-of-pocket expenses and future Estate Recovery liability

Dual Eligible Benefit Enrollment and Service Delivery

MEDIS business intelligence integrates initial data inputs to:

- Enroll prospective Dual Eligibles
- Recruit new Dual Eligibles
- Recognize missed Dual Eligibles
- Confirm current Dual Eligibles

New Dual Eligibles are identified and reported for investigation and resolution. New Dual Eligible payment coordination is achieved through the COBA process.

Dual Eligible Payment Coordination

MEDIS business intelligence directs provider claims and processes MassHealth payments, based on Dual Eligible status and benefit plan information:

- Medicare Cost Avoidance
  - Stop – Fee-for-Service claims are denied and providers are redirected to Medicare or other appropriate primary payers.
  - Cross-Walk – Medicare crossover claims are crosswalked to Medicaid service codes and payment rates to determine Medicaid’s lowest liability based on Medicare adjudication results.

- Medicare Recovery Coordination
  - Yield – Claims are submitted with retroactive Medicare enrollment data to identify Medicare recovery opportunities.
  - Stop – Medicare crossover claims are denied and providers are redirected to Medicare or other appropriate primary payers.
  - Cross-Walk – Medicare crossover claims are crosswalked to Medicaid service codes and payment rates to determine Medicaid’s lowest liability based on Medicare adjudication results.
  - Notification – Claim returns are sent to providers for Medicare payment.

- Provider Raccupment
  - U-Turn – Duals waste claims are returned to providers for Medicare payment.

- Provider Raccupment
  - Stop – Medicare crossover claims are denied and providers are redirected to Medicare or other appropriate primary payers.

- Cross-Walk – Medicare crossover claims are crosswalked to Medicaid service codes and payment rates to determine Medicaid’s lowest liability based on Medicare adjudication results.

- Notification – Claim returns are sent to providers for Medicare payment.

DATA INTEGRATION ACHIEVEMENTS

Massachusetts fully integrates Dual Eligible data throughout MMIS to achieve benefits for all parties:

- Dual Eligible Recipient Benefits
  - Reassigns assignment to highest level of Medicaid benefits based on Medicare and Medicaid data.
  - Reassigns full advantage of service delivery options, including available Medicare-Medicaid integrated care.

- Provider Benefits
  - Provides up-to-date access to recipient Medicare entitlement and coverage information.
  - Reduces delay, denial, and timely filing errors in claims processing.

- Massachusetts Medicaid Benefits
  - Ensures accurate and timely enrollments into Medicaid benefit plans.
  - Identifies potential Medicare-Medicaid integrated care enrollees and passive enrollment opportunities.
  - Utilizes COBA processes to reduce multiple provider claims submissions, submission errors, and “wait” times for reimbursement.
  - Takes advantage of all COBA data elements to minimize COBA claim errors.
  - Maximizes savings through cost avoidance and repricing.
  - Ensures Medicaid status as the Payer of Last Resort.

State Data
- Medicaid Eligibility Data
- Other State Program Data – DSH, Elder Affairs, TANF, Mental Health
- COBA Medicare Entitlement Data
- Medicaid Managed Care Plans
- Medicare-Medicaid Integrated Care Plans
- Medicare Repricing
- Medicare Cost Avoidance
- Medicare Recovery Coordination
- Provider Raccupment
- Medicare Eligibility Enhancement Programs

COBA Data
- Medicaid Eligibility Data
- Other State Program Data – DSH, Elder Affairs, TANF, Mental Health
- COBA Medicare Entitlement Data
- Medicaid Fee-for-Service
- Medicare-Medicaid Integrated Care Plans
- Medicare Repricing
- Medicare Cost Avoidance
- Medicare Recovery Coordination
- Provider Raccupment
- Medicare Eligibility Enhancement Programs

CMS Data
- Medicaid Eligibility Data
- Other State Program Data – DSH, Elder Affairs, TANF, Mental Health
- COBA Medicare Entitlement Data
- CMS Medicare Entitlement Data
- Medicare-Medicaid Integrated Care Plans
- Medicare Repricing
- Medicare Cost Avoidance
- Medicare Recovery Coordination
- Provider Raccupment
- Medicare Eligibility Enhancement Programs

SSA Data
- Medicaid Eligibility Data
- Other State Program Data – DSH, Elder Affairs, TANF, Mental Health
- COBA Medicare Entitlement Data
- SSA Medicare Entitlement Data
- Medicare-Medicaid Integrated Care Plans
- Medicare Repricing
- Medicare Cost Avoidance
- Medicare Recovery Coordination
- Provider Raccupment
- Medicare Eligibility Enhancement Programs

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