

2018-08-17

## Bringing Data into Focus to Optimize Benefits and Savings for Medicare-Medicaid Members

Jenifer Hartman  
*University of Massachusetts Medical School*

Let us know how access to this document benefits you.

Follow this and additional works at: [https://escholarship.umassmed.edu/commed\\_pubs](https://escholarship.umassmed.edu/commed_pubs)



Part of the [Health Economics Commons](#), [Health Law and Policy Commons](#), [Health Policy Commons](#), [Health Services Administration Commons](#), and the [Health Services Research Commons](#)

---

### Repository Citation

Hartman J. (2018). Bringing Data into Focus to Optimize Benefits and Savings for Medicare-Medicaid Members. Commonwealth Medicine Publications. <https://doi.org/10.13028/en1f-bk98>. Retrieved from [https://escholarship.umassmed.edu/commed\\_pubs/206](https://escholarship.umassmed.edu/commed_pubs/206)

This material is brought to you by eScholarship@UMMS. It has been accepted for inclusion in Commonwealth Medicine Publications by an authorized administrator of eScholarship@UMMS. For more information, please contact [Lisa.Palmer@umassmed.edu](mailto:Lisa.Palmer@umassmed.edu).

# Massachusetts Dual Eligible Data Analytics

## FOCUS ON DUAL ELIGIBLES – A Key Medicaid Population

Dual Eligible recipients represent a critical population for State Medicaid programs

- ✓ CMS reports that Dual Eligibles accounted for only 15% of Medicaid enrollments, but 33% of Medicaid spending, in 2012<sup>1</sup>

Medicare: a valuable resource for both States and Medicaid members

- ✓ Largest single source of Third Party Liability savings for states
- ✓ Source of expanded benefits and coverage for Medicaid members

## THE MASSACHUSETTS APPROACH

MassHealth, the Massachusetts Medicaid Program and the University of Massachusetts Medical School partnered to design and deploy Dual Eligible data analytics projects

### Goals:

- ✓ Create actionable data points to improve access to Medicare
- ✓ Optimize delivery and coordination of benefits to Dual Eligible members
- ✓ Help ensure Medicaid members receive all benefits to which they are entitled
- ✓ Protect Medicaid as the Payer of Last Resort

### Activities:

- ✓ Identify combinations of key data elements for Medicaid members → indicate a high likelihood to qualify for Medicare benefits
- ✓ Isolate data discrepancies which may be preventing Medicare enrollment or access to full Medicare benefits.
- ✓ Provide MassHealth with actionable data points to:
  - Prioritize populations
  - Customize Medicare enrollment and coordination strategies
  - Resolve barriers to allow Medicaid members to full access all available Medicare coverage

## Bringing Data into Focus to Optimize Benefits and Savings for Medicare-Medicaid Members

### CURRENT DUAL ELIGIBLES

Ensure Data Integrity

#### DATA ANALYSIS

Continuously validate Medicare data on Medicaid systems to ensure information is up-to-date

#### ACTION

Identify, research, and resolve data discrepancies between state and federal data sources to facilitate successful:

- Medicare enrollment
- Payment of Medicare premiums
- Accurate crossover claims pricing and processing
- Medicare recoveries

### UNDER-65, DISABLED MEDICAID MEMBERS

Correct Missed Medicare

#### DATA ANALYSIS

Evaluate members under the age of 65 with disabilities who appear to have been missed or mistakenly denied for Social Security Disability and Medicare based on disability and work history status

#### ACTION

Collaborate with SSA to provide documentation of member eligibility and achieve benefit reviews and corrections to appropriately grant SSDI and/or Medicare benefits

### OVER-65 MEDICAID MEMBERS

Achieve full Medicare enrollment

#### DATA ANALYSIS

Classify members aged 65 and over who qualify for Medicare, but have never completed the enrollment process, into potential Medicare eligibility groups and prioritize populations for enrollment support activities

#### ACTION

Provide outreach, education, and direct customer service to assist members through the enrollment process with SSA

## RESULTS IN FOCUS – Massachusetts Dual Eligible Benefits and Savings

- Achieved over \$68M in new savings over last three years by optimizing benefits for Dual Eligible members

- Obtained Medicare entitlement corrections for nearly 1,600 Medicaid members, under the age of 65 with disabilities, who had been previously missed or mistakenly denied benefits by SSA, leading to over \$13M in new annual cost avoidance savings

- Supported more than 3,400 Medicaid members, aged 65 and older, to successfully enroll in Medicare, who have never before completed the enrollment process with SSA, resulting in over \$31M in total cost savings

- Collaborated with the SSA Regional Office to submit Medicare applications on behalf of qualifying Medicaid members who did not respond to state requests to enroll in Medicare, successfully achieving state-initiated enrollment of members into Medicare and Medicare Buy-In benefits

- Identified and recovered > \$21M in Medicare premium overpayments for Medicaid members with discrepancies in Medicare entitlement, premium rates, and premium charges

<sup>1</sup> "People Enrolled in Medicare and Medicaid" Fact Sheet, Medicare-Medicaid Coordination Office, Centers for Medicare and Medicaid Services, August 2017. Accessed at: [https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO\\_Factsheet.pdf](https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO_Factsheet.pdf)