



Best Practices to Manage Dual Eligibles



Five Strategies to Improve Care Continuity and Access to Services

Dual Eligibles have a voice and your quality ratings are at stake. According to the Kaiser Foundation over 9.6 million seniors and younger people with significant disabilities are dually eligible for Medicare and Medicaid programs. Annually, the federal government spends over \$300 billion to provide healthcare for dual eligibles. As major consumers of healthcare services, dual eligibles typically represent a chronically ill population that requires care services from several doctors, specialists and home and community service providers. The complexities of their



care combined with their social and economic status present a number of challenges. Examples of these challenges for health plans include underperforming on quality benchmarks related to NCQA Healthcare Effectiveness Data and Information Set (HEDIS) Scores and CMS Five-Star Ratings. With healthcare reform, policy changes, quality incentives, and rising healthcare costs, health plans should have strategies for improvements to care coordination, communication of benefits and access to services.

High quality strategies for delivering services to dual eligibles should include:



Promote Care Communication Among All Providers

Improve the management of the dual eligible's health by coordinating care across a multitude of providers. A community of providers treating a dual eligible reside in disparate locations and represent a number of medical specialties. Therefore, bring all providers and care managers into the care loop through an online solution allowing them to see a snapshot of the dual eligible's health profile, view the care plan and make comments. A centralized online location facilitates interaction among all providers rendering care and captures their communication. It also helps to prevent adverse drug interactions, avoidable hospitalizations, readmissions and emergency department use and improves outcomes for the dual eligible.



Educate On All Their Benefits

Since coverage can vary, it's important to educate the dual eligible on their benefits; rely on member web-based and mobile access as a communication vehicle and offer permissions-based access to their caregivers. The member experience should be easy for the dual eligible and their caregivers to find benefit information, such as at-a-glance dashboards. Premiums, co-pays, cost shares and deductibles are difficult to track, so offer online accumulators. Don't underestimate the advantage of vendor integration into the member experience. Offer links to pharmacy benefits vendors so dual eligibles can understand medication, drug pricing and even order medication online. By increasing their awareness of benefits, you help improve their access to care.



Proactively Notify

Take the initiative to remind dual eligibles about care gaps and health and wellness to improve your quality scores and help them manage their care. By proactively notifying the dual eligible through text or email, you can educate them on necessary screenings such as glaucoma tests, breast cancer screenings, annual flu vaccinations, and send them information about adverse drug side effects.



Integrate Community-Based Service Providers

Managing community-based services can be an administrative nightmare. Streamline operational efficiencies by giving these nontraditional providers 24/7 online access to request approval of services, submit invoices and documentation. Community-based providers such as home modification contractors, home cleaning, meal and transportation services are a great asset to improve the dual eligible's quality of health and happiness. Online forms and workflows make your plan more available to these providers and improve efficiencies, thereby driving higher member and provider satisfaction.



Eliminate Confusion to Finding a Doctor or Service in Network

Recognize that dual eligibles don't always know which healthcare provider will accept coverage. They may go to an emergency room for care instead of seeing a primary care physician or a specialist, driving up healthcare costs. Simplify access to care by providing online access to a relevant list of providers, specialists and urgent care, and hospitals that accept Medicare and Medicaid. Customized online provider directories help define coverage and are another communication vehicle to build awareness. Also, create a customized community-based home service provider directory, so dual eligibles are aware of providers that can help them remain in their home rather than at a long-term care facility.

In a rapidly changing environment, it is critical for health plans to stay ahead of the curve. Focus should be placed on achieving better care coordination and communication among primary care physicians, care managers and community-based providers. The results will yield improved performance on quality scores, drive better outcomes for the chronically ill, and result in cost savings associated with improved operational efficiencies.

Collaboration Cheat Sheet

Promote Care Communication Among All Providers

- Offer an online solution allowing all treating providers and care managers to view the care plan and post comments.
- Aggregate the comments in a hierarchical structure so each provider can read comments from other providers.
- Provide a snapshot of the member's overall medical history.

Educate On All Their Benefits

- Offer online accumulators so members can track cost shares and deductibles.
- Utilize dashboard-style member web-based and mobile access views of benefits coverage.
- Make member web-based solutions viewable on mobile devices.
- Integrate pharmacy benefits management systems into member web-based and mobile access.
- Make it easy for dual eligibles to check eligibility status.

Proactively Notify

- Send email and text notifications about chronic disease management.
- Educate the member on recommended preventive services and how to coordinate care with the provider.

Integrate Community-Based Service Providers

- Offer limited access to patient data for community-based service providers.
- Provide online access to submit requests, submit invoices and other documents.

Eliminate Confusion to Finding a Doctor or Service in Network

- Provide online customized provider directories of doctors, specialists, and hospitals.
- Provide online provider directories of community-based service providers.