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Community Catalyst and ACAP Release Report on Survey Findings of Plans Participating in the Dual Eligible Demonstrations

Survey Identifies Promising Practices and Outlines Recommendations for Policy, Operational Changes

(BOSTON and WASHINGTON) – [A new report](#) released today by Community Catalyst’s *Voices for Better Health* project and the Association for Community Affiliated Plans (ACAP) recommends 15 policy and operational changes that would yield significant improvements for Medicare-Medicaid beneficiaries enrolled in the Centers for Medicare and Medicaid’s financial alignment demonstration – also known as the “dual eligible” demonstration – under way in 13 states.

The recommendations are based on a survey conducted jointly by ACAP and Community Catalyst that queried 15 health plans participating in six of the states’ dual demonstrations—representing more than 100,000 members—and examined progress in three key areas for consumers and their families: care coordination, self-direction for personal/home care services, and the role of Consumer Advisory Councils.

Survey data revealed challenges as well as plan innovations that are working well. Based on these findings, Community Catalyst and ACAP offer solutions to improve and strengthen care, services and ultimately the health of the dually eligible beneficiaries enrolled in the demonstrations. The authors identified 15 recommendations – six in the area of policy change and nine around operational changes plans can make – that are immediately actionable and can result in concrete improvements.

Recommendations include:

- a more proactive approach by states and CMS in engaging primary care physicians, including additional reimbursement for their participation in care teams

- ensuring consistent ongoing contact between care coordinators and members
- providing enhanced training to plans and for consumers on the option to direct their own home care services, and
- offering training for members to enable effective participation on plan advisory committees

“This report offers policymakers and health plan leaders insights into the challenges of system change,” said Robert Restuccia, executive director of Community Catalyst, “and also concrete strategies and recommendations on how to improve care in the areas that are of top importance to enrollees.”

“Our members are committed to serving dual eligibles, and their experience in doing so has shed some light on what works in improving coordination and quality of care, and areas where Safety Net Plans could use further resources,” said ACAP CEO Margaret A. Murray. “This report will inform discussions with policymakers and with the communities we serve on how to better meet the needs of people who are enrolled in the demonstrations.”

ACAP and Community Catalyst are providing the results of this survey to help inform the progress of the demonstrations and help identify promising practices in reaching the goal of coordinated and person-centered care. It also indicates the need for multi-stakeholder involvement in operationalizing these provisions to their full extent, for improved communication between the various stakeholders – policymakers, plans, providers, consumers, and community-based organizations – and ongoing improvements as new challenges arise and plans develop more experience implementing the demonstrations.

The report can be [downloaded here](#).

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Community Catalyst is a national, non-profit consumer advocacy organization founded in 1998 with the belief that affordable, quality health care should be accessible to everyone. We work in partnership with national, state and local organizations, policymakers, and philanthropic foundations to ensure consumer interests are represented wherever important decisions about health and the health system are made: in communities, courtrooms, statehouses and on Capitol Hill. Visit www.communitycatalyst.org. Read our blog at <http://blog.communitycatalyst.org>. Follow us on Twitter @HealthPolicyHub.

The Association for Community Affiliated Plans (ACAP) represents 61 nonprofit Safety Net Health Plans in 24 states, which collectively serve more than fifteen million people enrolled in Medicaid, Medicare, the Children’s Health Insurance Program (CHIP), and other public health programs. For more information, visit www.communityplans.net.