



Feedback from Avisery Call With Aging and Disability Services Professionals on the MMAI-> DSNP Transition

On May 17, 2023, Avisery by AgeOptions hosted an Advocacy Call: *Gathering Your Thoughts on the December 2025 End of MMAI*. The purpose of the Advocacy Call was to engage professionals who may not have the opportunity to directly engage with the state Medicaid program about their experience with the Medicare-Medicaid Alignment Initiative (MMAI) and their thoughts on the transition to Dually Eligible Special Needs Plans (D-SNPs). This call had 39 professionals who work with older adults and people with disabilities, including Senior Health Insurance Program (SHIP) counselors, Aging and Disability Resource Network (ADRN) staff, hospital social workers, benefits specialists, health plan representatives, and Care Coordination Unit (CCU) program staff. The professionals work in and serve Cook, Lake, Will, Montgomery, Macoupin, and Christian Counties.

When asked to consider their experiences with MMAI and anticipate what a transition to D-SNPs could mean for their clients, these professionals both identified issues of particular concern and offered recommendations to address them. Below is a summary of the main themes that emerged from this discussion:

Consumer Education

Concern: Customers will not be informed about the transition to D-SNPs.

Recommendation(s)

- Customer outreach and education should be accessible in multiple ways to ensure that as many dually eligible individuals are reached (e.g., through a hotline number for customers to call for information, outreach phone calls, a webpage, client notices, radio/TV commercials).
- Provide resources to community organizations and assisters that will help explain the transition to customers (e.g., visual aids or a flyer).

Concern: Notices regarding the transition from MMAI and D-SNP will not be easy to understand.

Recommendation(s):

- Language on any notices or information regarding the transition should be as simple as possible and available in multiple languages.
- Language centered on how the customer is not losing any benefits throughout this transition should be provided on notices.

Workforce Education (for those who work/assist dually eligible individuals)

Concern: Medical Providers, Enrollment Brokers, and other assisters (ie community organizations, Area Agencies on Aging, Aging and Disability Resource Network), will not understand or know of D-SNPs.

Recommendation(s):

- Training for medical providers, enrollment brokers, and community assistors on how D-SNPs work and the transition process will be beneficial to easing the transition for customers.

Plan Policies and Restrictions

Concern: D-SNP Members will be prevented from receiving care by a restrictive prior authorization/claims process, excessive denials, limited provider networks, and limited access to bicultural and bilingual services.

Recommendation:

- Plans should be required to provide better reporting on prior authorization requests and denials.
- Plans should provide an “urgent” option for when immediate authorization is needed.
- Plans should have broader provider networks, including a broader network of specialists.
- For members who are automatically transitioned to D-SNP, try to make sure that provider network and Primary Care Provider (PCP) does not change.
- Ensure that there is access to bicultural and bilingual services.

Care Coordination

Concern: D-SNP Members will be prevented from receiving care by inconsistent care coordination.

Recommendation:

- Plans should make it easier for members to access assistance through their plan.

Convenience

Concern: Loss of option to have only one medical card to use in all settings.

Recommendation:

- Customers liked only having to carry one card with MMAI versus having to carry multiple cards and not knowing which card is for what benefit.

Concern: Loss of consumer’s ability to opt out of a plan monthly

Recommendation:

- Customers should be informed that while D-SNP enrollment is not mandatory, the ability to change or opt out of a D-SNP plan cannot happen at any time of the year. Under MMAI, a customer had the option to change plans or opt out every month. Under the D-SNPs, the customer will only have the chance to change plans or to opt out once a quarter (i.e., by using the Extra Help Special Enrollment Period).