

MEDICARE-MEDICAID

INTEGRATION ALLIANCE

The Problem of Uncoordinated Care for Individuals Dually Eligible for Medicare & Medicaid

Although more than 12 million Americans are enrolled in both Medicare and Medicaid (people who are dually eligible), the two programs were not designed to work together. People who are dually eligible experience some of the most significant clinical, social, behavioral, and medical needs, and face far more hurdles accessing needed care than Medicare-only and Medicaid-only individuals. Lack of benefit and program coordination is overwhelming and leads to worse outcomes for this population.

CHALLENGES GETTING AND MAINTAINING ELIGIBILITY

Many people who are dually eligible are unclear about program and benefit eligibility and/or cycle between eligibility and ineligibility. This causes gaps in care and unexpected costs.

INADEQUATE SUPPORT AT TIME OF ENROLLMENT

Many people who are dually eligible are confused by the many coverage options available across Medicare and Medicaid, and unaware of the benefits of integrated programs. This causes enrollment in unaligned, uncoordinated health plans.

INSUFFICIENT SUPPORT NAVIGATING CARE

Many people who are dually eligible are confused about how to access their coverage across two distinct programs because they lack adequate navigation. This causes system-centered care rather than person-centered care.

HURDLES WHEN TRYING TO ACCESS COVERED BENEFITS

Many people who are dually eligible struggle to understand their benefits, especially when both Medicare and Medicaid cover a service but with different eligibility rules, such as wheelchairs and other equipment. This causes delays in access.

INADEQUATE PROVIDER NETWORKS

Many people who are dually eligible have difficulty finding providers because directories are out of date, there isn't enough choice of "in-network" providers, and/or listed providers are not accepting new patients. This causes breaks in patient-provider relationships and lack of continuity of care.



VOICES OF PEOPLE WHO ARE DUALLY ELIGIBLE

"I would hang up [from calling the insurance company] and I could have a lot of notes. And I'm sort of like, well, what's the next step?"

"There's a lot of people that don't understand the difference between assisted living, nursing homes, and they don't know what they qualify for, what they will be able to access."

"If I change plans am I going to have to go to a new doctor? And it's a hard thing here that I have to explain everything because I have arthritis, I have high blood pressure, I'm paralyzed. But if I get anybody new, I have to go through the whole notion all over again."