



SNP Alliance

MAY 2016

SNP Alliance Profile Briefing

Health Plans Specializing in the Care of High-Risk/High-Need Beneficiaries across the Nation

The **SNP Alliance** is a national membership organization dedicated to improving policy and practice of MA Special Needs Plans (SNPs) and Medicare-Medicaid Plans (MMPs). The SNP Alliance’s 28 members serve over 1.3 million special needs individuals in 39 States and the District of Columbia. This represents over 55% of all SNP enrollees, over 80% of all Fully Integrated SNP enrollees and over 90% of all Institutional SNP enrollees. Members also serve the majority of beneficiaries enrolled in plans involved in the capitated Financial Alignment Initiative.

SNPs

SNPs are a subset of Medicare Advantage (MA) plans specifically authorized and designed to meet special care needs of Medicare beneficiary sub-groups. The plan types and subgroups include:

- **Chronic condition SNPs (C-SNPs):** serving persons with certain severe or disabling chronic conditions (e.g., HIV-AIDS, chronic heart failure, COPD, mental illness, etc.).
- **Institutional SNPs (I-SNPs):** serving persons residing in nursing homes or with comparable care needs in the community.
- **Dual eligible SNPs (D-SNPs):** serving persons covered by both Medicare and Medicaid.
- **Fully Integrated Dual Eligible SNPs (FIDESNPs) and Medicare-Medicaid Plans (MMPs)** – which are a specific type of D-SNP and provide both Medicare and Medicaid benefits, including long-term services and support.

While SNPs are regulated, evaluated, and paid on the same basis as other MA plans, they are required to provide additional benefits and services to their target populations and to implement tailored care management according to unique Models of Care that serve every enrollee.

Since authorized by the *Medicare Modernization Act* of 2003, SNPs have grown substantially in number and enrollment. As of April 2016, a total of 568 SNPs had an enrollment of approximately 2.2 million beneficiaries. Total SNP enrollment has grown 58% since 2010. During 2015 alone, SNP enrollment grew by almost 47,000 members nationwide.

National SNP Plan Numbers and Enrollment, April 2016

	# of Plans	Enrollment
Chronic Condition SNPs	139	331,663
Dual Eligible SNPs (All types)	350	1,789,579
Institutional SNPs	79	57,526
TOTAL	568	2,178,788

Source: CMS SNP Comprehensive Report, April 2016

Plans working with states to integrate Medicare-Medicaid benefits for dually-eligible beneficiaries

SNP member plans provide extensive service to those who are dually-eligible for both Medicare and Medicaid.

In fact, approximately 92%¹ of all SNP enrollees in the SNP Alliance plans are dually eligible for both Medicare and Medicaid (as compared to roughly 8%² of non-SNP MA enrollees). These individuals may require community long-term services and supports, behavioral health services, and other assistance in order to have their complex needs addressed.

The health plan works to integrate and coordinate the two separate programs — Medicare and Medicaid — each with different rules governing how plans and providers may interact with the beneficiary.

¹ 2015 SNP Alliance Profile and Advanced Practice Report, The Menges Group, May 2016.

² MedPAC Report to the Congress: Medicare Payment Policy, March 2013

Profile of SNP Alliance Enrollees and Practices

Each year, the SNP Alliance conducts an annual survey of its membership.³ Respondents to the most recent survey represented two-thirds of Alliance members and more than 817,063 SNP enrollees. Key findings of this report along with data from CMS indicate:

➤ **Member SNPs serve beneficiaries with more complex health and social issues:**

- **Prior Disability Status** - Beneficiaries enrolled in the SNP Alliance plans were much more likely to serve aged persons who were on disability status prior to enrolling in Medicare than those in general Medicare health plans.

SURVEY DATA POINT

25% of D-SNP enrollees were disabled prior to enrolling in Medicare compared to 8% of enrollees in the regular Medicare Advantage plans.

- **Behavioral health/mental health conditions**- The enrolled population of the SNPs had much higher rates of behavioral and mental health conditions than the beneficiaries enrolled in general Medicare health plan products.

SURVEY DATA POINT

- 46% of the I-SNP enrollees in member plans had a major depressive, bipolar, or paranoid disorder compared to 6.5% of enrollees in the regular Medicare Advantage plans.
- 15.4% of enrollees in C-SNPs had drug or alcohol dependence compared to 2% in regular MA plans.

➤ **SNP Members deploy extensive outreach and care management methods to reach and serve enrolled beneficiaries:**

- **Personal Contact** - Beneficiaries enrolled in SNP Alliance plans were often contacted in person (face-to-face) by the plan to obtain important health information, including health risk assessments.

SURVEY DATA POINT

77% of FIDE-SNP enrollees were contacted via a face-to-face meeting, and another 15% were contacted both by phone and in person to obtain health information about the beneficiary and his/her condition, needs, and preferences.

- **Skilled professionals** - Persons deployed by the plans included: nurse practitioners (49% of C-SNPs and 33% of I-SNPs), registered nurses (26% of FIDE-SNPs) or social workers (11% of FIDE-SNPs) as well as other trained SNP employees to obtain this information.
- **Robust care management models** – All SNP enrollees were enrolled in a care management program, which was tailored to the level of care needs of the beneficiary. The Care Manager helped the beneficiary navigate the medical and social services and supports systems. Elements included:
 - ✓ An integrated care plan that was tied to the health risk assessment and updated at least annually
 - ✓ Access to/use of interdisciplinary care management teams
 - ✓ Attention to psychosocial needs as well as medical conditions and issues
 - ✓ Engagement with medical providers to address post-hospital follow-up, medication therapy management, and behavioral health issues

SURVEY DATA POINT

All SNP member respondents reported providing one or more of these supplemental benefits:

- Enhanced dental care
- Enhanced transportation
- Fitness/exercise and wellness classes
- Nutritional counseling and meals
- Enhanced podiatry/foot care

³ 2015 SNP Alliance Profile and Advanced Practice Report, The Menges Group, May 2016.

