2027 CMS DSNP Changes – Key Highlights

Overall Shift

- CMS increasing **Medicare + Medicaid integration**
- Strong push toward **FIDE (Fully Integrated DSNPs)**
    - Integrated benefits – FIDE SNPs can offer $0 Rx copayments for Part D drugs & value added for aligned MyCare Ohio members
    - Medicaid MCO alignment
    - Beyond OTC or supplemental benefits, will my Medicare and Medicaid coordinate?

Carrier Changes

- **DSNP "lookalike" plans restricted**
- Only **FIDE carriers can manage FIDE plans** (FBDE, QMB+, or SLMB+) **and CO DSNP Partial plans** (QMB, SLMB, QI, or QDWI) **in 2027**
- Confirmed FIDE carriers in Ohio
    - Anthem
    - Buckeye (expected)
    - CareSource
    - Molina
- **Anthem and Buckeye will offer CO DSNP Partial plans.** CareSource & Molina decline to offer CO- Partial DSNP plans

Members' Impact

- **Non-renewing plans:**
    - Members notified 90 days prior (by 10/2/2026) before termination
- **AEP requirement:**
    - CO DSNP Full & Partial Duals must select a new MA plan or remain in traditional Medicare on 1/1/2027
- **Agents Action**:
    - Move Full Dual clients to FIDE plans using SEP INT before AEP to retain AOR

Full Dual Eligible (2027 Options)

- Can enroll in:
    - Original Medicare
    - Regular Non-DSNP Medicare Advantage Plan
    - FIDE SNP (if eligible)
- Can switch plans with a qualifying SEP
- Key limitations:
    - **Medicaid assignment restricted to FIDE carriers**
- Example: Someone who is QMB+:
    - Members can pick the <u>UHC</u> or <u>Devoted</u> MA plan
    - Medicaid will be **assigned** to one of the FIDE carriers

CO-DSNP Changes (2026 → 2027 Transition)

Full Dual (FBDE, SLMB+, QMB+)

- If enrolled in CO-DSNP on **Anthem, Molina, WellCare in 2026**:
    - Automatically **crosswalked** to the FIDE plan from the CO-DSNP is for members of Anthem, Molina, and WellCare in 2026, not all Medicare Advantage plans.

Partial Dual (QMB under Full Dual Coordinated plan)

- Options:
    - Regular Non-DSNP Medicare Advantage Plan
    - Coordinated Partial Dual (available with FIDE carriers only)
    - Original Medicare
- **Exception**: Anthem will crosswalk (QMB) Level members to a New CO-DNSP Partial Plan while (SLMB, QDWI, and QI) Levels will remain in their Current CO-DNSP Partial Plan for 2027:
    - QMB Level → *NEW* Anthem Dual Advantage Plus HMO DSNP (H2628 006)
    - SLMB, QDWI, QI Levels → *REMAIN IN CURRENT* Anthem Dual Advantage HMO DSNP (H2628 005)

Non-FIDE Carrier Members (Full or Partial - Aetna, Cigna (HealthSpring), Devoted, Humana, The Health Plan or UHC)

- Must:
    - Choose an MA plan or Original Medicare during AEP
- If no action:
    - **Auto-enrolled into Original Medicare by CMS**

MyCare Ohio Plan Changes

- **Two FIDE plan types:**
  1. **General Statewide Plan:** Plan must operate a single MyCare statewide plan for the *full dual eligible population*
  2. **LTSS Statewide Plan:** This plan can be tailored with supplemental services to better meet the specific needs of members receiving LTSS

Long-Term Services and Supports (LTSS) PBP

- **Eligibility:**
  - Full Dual Eligible, <u>and</u> ONE of the following:
    - Residents of assisted living facilities through the MyCare Ohio Waiver
    - Individuals receiving home and community-based nursing services through the MyCare Ohio Waiver
    - PASSPORT coverage ends when a person enrolls in MyCare and transitions to the MyCare Ohio Waiver.

- **Three FIDE SNP plans have chosen to offer an LTSS PBP:**
  - Anthem
  - Buckeye
  - Molina

- ***CareSource** will not offer a separate LTSS plan but will continue providing LTSS coverage and the same supplemental benefits through its General FIDE plan.*

SSBCI Rule Changes for 2027 C-SNP & D-SNP Plans

- **Qualifying Conditions**
  - Requirements vary by carrier.

- **Members must meet all three requirements:**
  - Have a qualifying chronic condition.
  - Be at risk of hospitalization.
  - Need intensive care coordination.

- **How eligibility is determined:**
  - Medical and pharmacy claims.
  - Case management data and clinical information from HRA.
  - Healthy Visit and provider attestation.

- **Member status considerations:**
    - New members will be evaluated upon enrollment using the above criteria.
    - Existing members will be renewed annually through claims and provider attestation.

<u>Important note</u>: Carrier approval is required before SSBCI benefits can be used.

Sources:
Meeting with the ODM Director
Communication with ODM
ODM 2026 July MyCare Deck
Molina First Look
CareSource Training
Aetna SSBCI One Pager
Anthem 2027 Ohio Slides