

Medicare Dual Eligible Special Needs Plans (D-SNPs)

Dual Eligible Individuals



Who is a “Dually Eligible Individual”?

Dual Eligible members qualify for both Medicare and Medicaid.

Medicare

- Age 65+
 - 65% of dually eligible individuals
- Under age 65 with a disability, end-stage renal disease (ESRD), or ALS (also called Lou Gehrig’s disease)
 - 35% of dually eligible individuals

Medicaid

- Meets income and asset requirements
- Eligibility groups include:
 - Aged, Blind and Disabled (ABD)
 - People with Supplemental Security Income (SSI) benefits
 - Medicare Savings Program groups
 - Medically needy groups
 - People who are eligible for certain waivers



Population Overview

- ▶ 1 in 5 Medicare enrollees are dually eligible.
- ▶ 1 in 6 Medicaid enrollees are dually eligible.
- ▶ Within the dual eligible population, members often experience multiple chronic conditions, behavioral health needs, and/or utilize long term services and supports needs.
 - 70% have been diagnosed with three or more chronic conditions
 - 41% have a behavioral disorder
 - Over 40% use long-term services and supports.
- ▶ Dual eligible individuals account for disproportionate Medicare and Medicaid spending.

Resources on Dually Eligible Individuals:

- ICRC -[Dually Eligible Individuals: The Basics](#)
- MedPAC-[January 2024 MedPAC MACPAC Dually Eligible Data Book](#)
- CMS [Medicare Advantage/Part D Contract and Enrollment Data | CMS](#)
- CMS [MMCO Statistical & Analytic Reports | CMS](#)



Medicare and Medicaid Roles

For a qualified dually eligible member Medicare and Medicaid both play a vital role in the care of the member.

► Medicare

- Serves as primary payer for acute, primary and preventative care
- Provides most prescription drug coverage

► Medicaid

- Serves as secondary payer for covered services.



Supplemental Medicare Coverage Options for Dual Eligible Individuals

► Medicare

- Original Medicare
 - Stand alone Drug Plan with no supplemental coverage
- Medigap
- Medicare Advantage (MA)
 - Non-Special Needs Plans
 - Special Needs Plans
 - Chronic Special Needs Plans C-SNPs
 - Institutional Special Needs Plans I-SNPs
 - Dual Eligible Special Needs Plans D-SNPs
 - Coordination Only SNPs
 - HIDE SNPs
 - FIDE SNPs



D-SNP Highlights

- ▶ D-SNPs are a type of Medicare Advantage plans that only enroll dually eligible individuals.
- ▶ D-SNPs were originally authorized in 2003, were marketed in 2006, then became a permanent part of Medicare Advantage in 2018.
- ▶ At a minimum, all D-SNPs must:
 - Coordinate Medicaid benefits for their members.
 - Maintain a detailed Model of Care that is approved by National Committee for Quality Assurance (NCQA) that describes how the D-SNP will meet the needs of their members.
 - Establish an enrollee advisory committee that surveys the member population on ways to improve services.



D-SNPs differ from other Medicare Advantage plans

- ▶ The plan must hold a contract with both Centers for Medicare & Medicaid Services (CMS) and the state Medicaid agency, with certain minimum requirements.
- ▶ Tailor benefits specifically to meet the needs of dually eligible individuals including supplemental benefits.
 - Support for needs like housing, food, transportation
 - Pest services for an individual with certain chronic diseases
- ▶ Coordinate and/or integrate delivery of Medicare and Medicaid benefits (and states can impose additional requirements).
- ▶ May cover Medicaid benefits.



Types of D-SNPs

▶ Coordination-Only D-SNPs

- Must meet minimum CMS requirements
- Must notify state Medicaid agency or designee of hospital and skilled nursing facility admissions for at least one designated group of high-risk enrollees.

▶ Highly Integrated D-SNPs (HIDE)

- Must meet minimum CMS requirements
- Must cover Medicaid behavioral health benefits and/or long-term services and supports.

▶ Fully Integrated D-SNPs (FIDE)

- Must cover Medicaid primary and acute care services and LTSS, including at least 180 days of nursing facility coverage.
- Must use specialized care management and network methods for care coordination of high-risk beneficiaries.



Providing a D-SNP in Iowa

- All D-SNPs in addition to a contract with CMS, must have a State Medicaid Agency Contract (SMAC) with each state.
- State contracts must include the minimum requirements but may include additional state specific requirements as well.
- States are not required to contract with D-SNPs and can deny a contract.

Iowa D-SNP Landscape Calendar Year 2026

D-SNP Plans in Iowa in 2026		D-SNP Enrollees(*as of 01/2026)
UHC Dual Complete	Coordination Only	24,124
Wellcare Dual Reserve, Liberty Sync & Access	HIDE	5,212
Wellpoint Full Dual Advantage & FDA2	HIDE	3,601
Aetna Medicare Dual Complete	Coordination Only	2,816
Humana Choice	Coordination Only	2,305
Molina Medicare Dual Complete Care	HIDE	336



The Future of D-SNP in Iowa

Medicare and Medicaid are both independently complex and dynamic, and both programs together are especially complicated — for members, providers, plans, and the state.

In 2024, Iowa Medicaid began evaluating the state of D-SNPs in Iowa. This included exploring the implementation of Exclusively Aligned Enrollment or EAE for D-SNPs. EAE allows an Iowa Medicaid member to receive both their Medicare and Medicaid services through the same Managed Care Organization.

The goal of this integration aims to address the misalignments and complexities inherent in separate Medicare and Medicaid programs.



The Future of Iowa D-SNP

Developments to date:

- ▶ In the SMAC for calendar year 2025, Iowa Medicaid aligned with all three Iowa MCOs to offer D-SNPs in Iowa. As of January 1, 2026, all three Iowa MCOs (Iowa Total Care, Molina, and Wellpoint) now offer D-SNPs.
- ▶ For the SMAC for calendar year 2027, contracts will contain additional measures to move Iowa towards an Exclusively Aligned Enrollment state. These contracts for 2027 are in the draft process and will be finalized and released later this summer.
- ▶ No immediate changes for currently enrolled members other than the availability of coordinated plans with our Iowa MCOs.



Resources

- Member Services Support for your specific plan
 - Contact information on ID card, Member Handbook
- Centers for Medicare & Medicaid Services
 - [Dual Eligible Special Needs Plans \(D-SNPs\) | CMS](#)
- Medicare.gov
 - [Special Needs Plans \(SNP\) | Medicare](#)
 - 1-800-MEDICARE (1-800-633-4227)
- Iowa Senior Health Insurance Information Program (SHIIP)
 - [Senior Health Insurance Information Program \(SHIIP\) | Iowa SHIIP and SMP](#)
- Senior Medicare Patrol (SMP)
 - [About SMP | Iowa SHIIP and SMP](#)



Health and
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Questions

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