

Dual Eligible Special Needs Plans (D-SNPs)

Agent Guide



What are D-SNPs?



Dual Eligible Special Needs Plans (D-SNPs) are a type of Medicare Advantage Special Needs Plan (SNP) which combines coverages and helps to coordinate Medicaid and Medicare benefits.

Understanding D-SNPs helps to better serve your clients. Here's why, using some statistics from the Kaiser Family Foundation. As of 2024:

70%

Dual-eligibles not enrolled in a D-SNP plan¹

20%

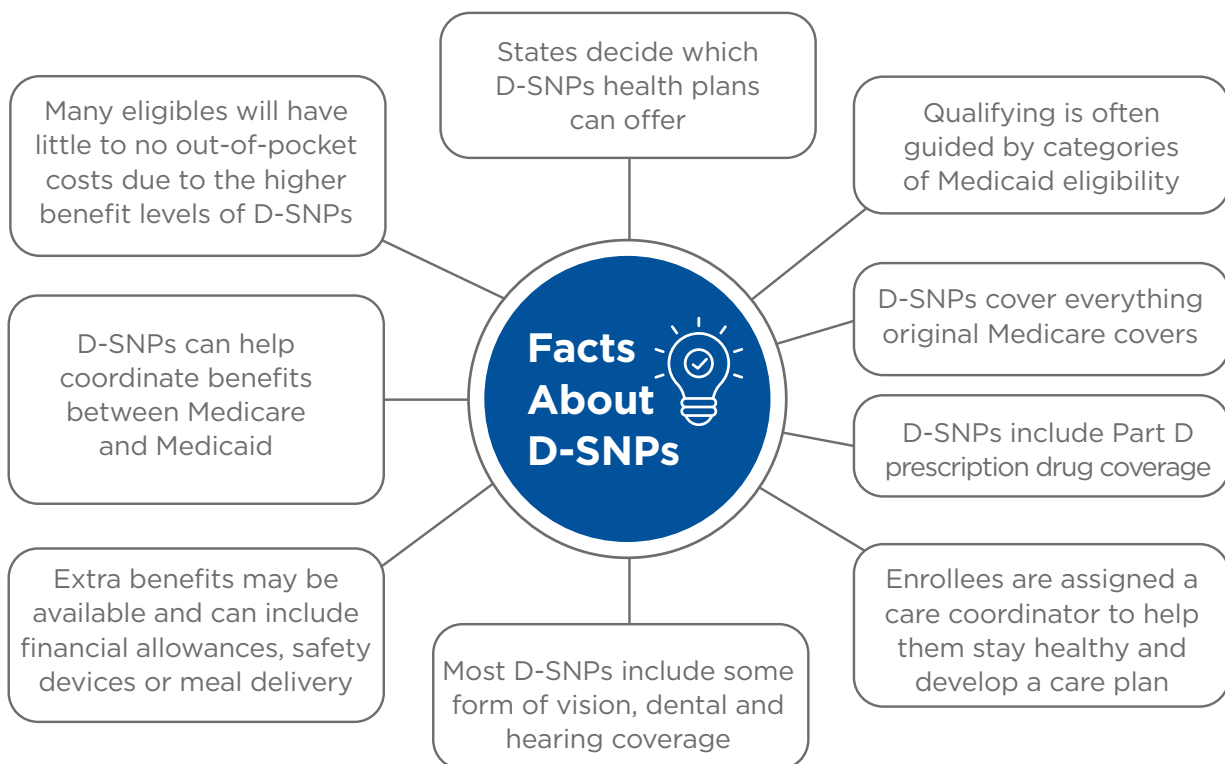
Number of Medicare Advantage enrollees in a SNP²

100%

Increase in number enrolled in SNPs since 2019²

88%

SNP enrollees in D-SNP plans²



More D-SNP Resources

This flyer is an overview. CMS has information about D-SNPs, starting here: <https://www.cms.gov/medicare/enrollment-renewal/special-needs-plans/dual-eligible>

¹<https://www.kff.org/medicare/issue-brief/10-things-to-know-about-medicare-advantage-dual-eligible-special-needs-plans-d-snps/>

²<https://www.kff.org/medicare/issue-brief/medicare-advantage-in-2024-enrollment-update-and-key-trends/>

What are the types of D-SNPs?



There are three different factors used to categorize D-SNPs:

- ✓ Their network
- ✓ The Medicaid levels they serve
- ✓ Their level of integration with Medicaid

Here's a breakdown of the different types of D-SNPs:

Fully Integrated D-SNPs (FIDE SNPs):

These plans offer the highest level of integration between Medicare and Medicaid benefits, providing comprehensive coverage for both.

Highly Integrated D-SNPs (HIDE SNPs):

These plans offer a high level of integration, but may not cover all Medicaid benefits to the same extent as FIDE SNPs.

Coordination-Only D-SNPs (CO D-SNPs):

These plans primarily focus on coordinating care between Medicare and Medicaid, rather than providing comprehensive coverage for both.

D-SNP Designation Changes for 2025



CMS Requirements for D-SNP Designations has changed for 2025.

HIDE and FIDE SNPs:

- Must have an aligned service area between Medicare and Medicaid

FIDE SNPs:

- Must have exclusively aligned enrollment
- Must cover home health & medical supplies, equipment, and appliances
- Must cover behavioral health



What is a Medicaid Managed Care Organization (Medicaid MCO):

A Medicaid MCO is part of a health care delivery system designed to improve costs, utilization, and quality. A Medicaid MCO provides delivery of Medicaid health benefits and services through a contractual agreement with a state Medicaid agency.

Kaiser Family Foundation reports that Medicaid MCOs are the dominant delivery system for Medicaid enrollees, administering benefits for 75 percent of beneficiaries.

When a person receives their Medicaid benefits through a D-SNP or a Medicaid MCO, they have **Aligned Enrollment**. Aligned enrollment helps to ensure a more integrated experience for the member and helps carriers coordinate benefits.

D-SNP Eligibility and Enrollment



To be eligible for a D-SNP, a person must:

- ✓ Be eligible for both Medicare and Medicaid
- ✓ Be enrolled in original Medicare
- ✓ Reside in an area with an available D-SNP plan

There are typically several chances to enroll in a D-SNP

ENROLLMENT PERIOD	WHEN
Initial Enrollment Period	The 7-month period around the 65th birthday.
Open Enrollment Period	October 15 - December 7 each year. During this time a new Medicare Advantage plan or Part D plan can be chosen.
Special Enrollment Period (SEP)	This period is triggered by a qualifying event, such as becoming eligible for Medicaid benefits.
D-SNP Monthly SEP (New in 2025)	Monthly SEP for full-benefit-eligible individuals. Can enroll in a stand-alone prescription drug plan or integrated D-SNP plan with enrollment in a Medicaid managed care plan.

D-SNP Changes in 2025



Some new changes have landed for D-SNP plans which were designed to better integrate Medicaid and Medicare services.

Greater access to integrated D-SNP plans through the addition of a monthly Special Enrollment Period for Fully Integrated (FIDE SNP), Highly Integrated (HIDE SNP) or Applicable Integrated (AIP) plans.

Removal of quarterly D-SNP SEP for enrollees in areas without integrated D-SNP plans

Additional plan guidelines that help ensure better coordinated care and more predictable cost sharing

CMS is also prohibiting MA carriers from offering additional look-alike plan contracts as of January 1, 2025, providing options for these carriers to transition their look-alike plan members to a different in-house MA plan, either a true D-SNP or regular MA plan with \$0 premium.



These changes require that agents:

- Know your state's rules
- Follow up on fact-finding for clients eligibility and plan attributes
- Read official information from CMS to stay aware

How Can Agents Talk to Clients About D-SNPs?



CMS has strict regulations in place around marketing D-SNPs, helping to protect consumers who may be in more vulnerable health or financial circumstances. This includes most targeted communications.

What client communications about D-SNPs are allowed?

When the client asks for information:

If your client knows about D-SNPs and asks you about availability and eligibility, you can proceed.

During AEP or the client's Initial Enrollment Period:

Clients first enrolling in Medicare or participating in the Annual Enrollment Period can be educated about qualifications for D-SNPs.

At a dedicated client meeting about D-SNPs:

If you have scheduled a client meeting with an SOA that includes D-SNPs, you may discuss them.



Check with your compliance officer before any client outreach that may discuss specific plans or types of plans.



Now that you know some of the basics of D-SNPs, you can be ready to answer questions if any clients ask!

For more detailed information, consult:

<https://www.cms.gov/medicare/enrollment-renewal/special-needs-plans/dual-eligible>