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MEDICA®

February 14, 2023

Senator Kathy Hogan North Dakota State Capitol 2112 Senate Drive Bismarck, ND 58501-1978

Re: SB 2265 Dual Special Needs Plan -- Support

Dear Senator Hogan:

I am writing today to convey Medica's steadfast support of Senate Bill 2265 permitting the Department of Health and Human Services to establish at least one Dual Special Needs Plan (DSNP) in the state of North Dakota. We also support providing the Department with the resources needed to carry out this effort.

Medica is an independent and nonprofit health care organization with approximately 1.5 million members in twelve states, and has offered individual health insurance coverage in the state of North Dakota since the early 1990's. Medica's mission is to be the trusted health plan of choice for our customers, members, partners, and our employees. Medica was among the first Managed Care Organizations (MCO) to join the original dual demonstration project serving seniors in Minnesota in 1985, and has been offering Dual Special Needs Plans (DSNP) since 2006. Medica is one of the original managed care organizations to participate in the Minnesota Senior Health Options (MSHO) product, a fully integrated DSNP that incorporates in all Medicare and Medicaid benefits.

At its core, an effective DSNP brings simplicity to how vulnerable North Dakotans interact with two very complicated and cumbersome programs. Today these seniors and people with disabilities receive bills from Medicare they do not need to pay, receive notifications irrelevant to their care and condition, and interact with a fragmented system of benefits and care. A DSNP is designed to reduce clutter and confusion for beneficiaries while improving coordination of their care.

The DSNP model relies on coordinated care as a means for improving management of chronic conditions, coordinating members' clinical care and simplifying the process for members when accessing their Medicare benefits. In serving our DSNP members, Medica assigns each member a care coordinator who helps the member navigate various clinical or social barriers to care and works together with the member to improve their overall health and well-being. Medica has relied on offering supplemental services allowing members to live in their homes longer, with dignity. Simple steps such as focusing on nutrition, paying a member's heat bill or arranging for a cleaning service helps meet our members' most basic needs, which translates into reducing emergency room visits and lengthy stays in a long term care setting.



According to a study completed by the U.S. Department of Health and Human Services on the MSHO program, Fully Integrated Dually Eligible (FIDE) Special Needs Plan enrollees are 48% less likely to have a hospital stay and if so, had 27% fewer stays than enrollees in a Medicaid-only plan Enrollees had 38% fewer emergency room visits than enrollees in a Medicaid only plan. Enrollees were 2.7 times more likely to have a primary care visits than enrollees in Medicaid only plans. Enrollees are 13% more likely to have home and community based services than traditional Medicaid enrollees. When executed effectively, the DSNP model will translate into better outcomes and lower costs for our most vulnerable citizens.

I respectfully request the North Dakota Legislature to enact SB 2265 this year in order to empower the Department to pursue this meaningful step in serving our most vulnerable North Dakotans. Additionally, I would respectfully request that the Legislature approve funding needed for the Department to hire the personnel needed to support these efforts. Thank you for your consideration and please contact me if you would like to discuss this issue further.

Sincerely,

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