

June 21, 2022

The Honorable Ron Wyden
Chairman, Finance Committee
221 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Frank Pallone
Chairman, Energy and Commerce Committee
2107 Rayburn House Office Building
Washington, DC 20515

The Honorable Mike Crapo
Ranking Member, Finance Committee
239 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Cathy McMorris Rodgers
Ranking Member, Energy and Commerce Committee
1035 Longworth House Office Building
Washington, DC 20515

Dear Senator Wyden, Senator Crapo, Representative Pallone, and Representative McMorris Rodgers:

For individuals with mental health needs, better access to care requires not only access to clinicians, but also information exchange and collaboration between clinicians and settings of care. Care coordination breakdowns are common and evidence-based care integration models are not widely available. This leaves people – especially those with serious mental health conditions – to navigate complicated, uncoordinated systems, often resulting in unmet need and poor outcomes.

These challenges are exacerbated for people that get coverage from both Medicare and Medicaid, the so-called dual-eligible population. People that are dual-eligible are more than three times as likely as people that have Medicare-only coverage to have a serious mental illness, and nearly one in three dual-eligible individuals has a serious mental illness.¹ These two programs were not designed to work together, and the resulting fragmentation contributes to worse health outcomes and costlier care compared to those with only Medicare or Medicaid coverage.²

One strategy for ensuring better coordination for people with mental health conditions who are dual-eligible is to integrate their Medicare and Medicaid coverage. States bear the burden of creating this alignment, which requires Medicare expertise, extensive planning and program development, data analysis and data systems change, and beneficiary engagement.³ States that have established integrated programs have demonstrated positive beneficiary experiences, but most states lack the resources to integrate their Medicaid programs with Medicare for this population.⁴

To address this challenge, we encourage Congress to pass the “Advancing Integration in Medicare and Medicaid” Act (S. 4264) which includes a requirement that all states develop a strategy to integrate Medicare and Medicaid for the full-benefit dual-eligible population as the Medicaid and CHIP Payment and Access Commission (MACPAC)

¹ Congressional Budget Office. [Dual-Eligible Beneficiaries of Medicare and Medicaid: Characteristics, Health Care Spending, and Evolving Policies](#). June 2022.

² Medicaid and CHIP Payment and Access Commission. [Financial Alignment Initiative for Beneficiaries Dually Eligible for Medicaid and Medicare](#). April 2022.

³ Nancy Archibald. [States Want to Integrate Medicare and Medicaid, but They Need Federal Resources and Flexibilities](#). Health Affairs. May 17, 2022.

⁴ Medicaid and CHIP Payment and Access Commission. [Evaluations of Integrated Care Models for Dually Eligible Beneficiaries: Key Findings and Research Gaps](#). August 2020.

officially recommended earlier this month.⁵ Additionally, we encourage Congress to consider providing states with financial support to assist in the development of their strategies as also recommended by MACPAC.⁶ States efforts to integrate Medicare and Medicaid will support the systems change necessary for effective coordination and care delivery for the dual-eligible population.

Sincerely,

Alliance for Aging Research

America's Essential Hospitals

American Association on Health and Disability

Arnold Ventures

Association for Community Affiliated Plans

Commonwealth Care Alliance

Community Catalyst

Justice in Aging

Lakeshore Foundation

Leading Age

Long-Term Quality Alliance

Medicare Rights Center

National Association of Social Workers

National Council on Aging

National MLTSS Health Plan Association

National PACE Association

SCAN Health Plan

SNP Alliance

The Gerontological Society of America

UPMC Health Plan

USAging

⁵ Medicaid and CHIP Payment and Access Commission. [Raising the Bar: Requiring State Integrated Care Strategies](#). June 2022.

⁶ Medicaid and CHIP Payment and Access Commission. [Integrating Care for Dually Eligible Beneficiaries: Policy Issues and Options](#). June 2020.