

# Wisconsin SeniorCare

---

## 1115 Demonstration Annual Monitoring Report

Reporting Period: Calendar Year 2023  
(01/01/2023-12/31/2023)

## **Introduction**

In June 2018, the Wisconsin Department of Health Services (DHS) submitted an application to the Centers for Medicare and Medicaid Services (CMS) to extend Wisconsin's Section 1115 Demonstration Project in accordance with section 1115(a) of the Social Security Act. DHS received approval for a 10-year renewal period from January 1, 2019, through December 31, 2028, on April 12, 2019.

The SeniorCare demonstration project offers a comprehensive prescription benefit to Wisconsin residents who are age 65 and older with income at or below 200 percent of the Federal Poverty Level (FPL) and are not otherwise receiving full Medicaid benefits. The program includes several innovative program features including: 1) a simple application and enrollment process; 2) an open formulary and broad network of providers; and 3) affordable cost-sharing for members.

Key program goals include: 1) Keeping Wisconsin seniors healthy by providing a necessary prescription drug benefit with low administrative burden and high level of member satisfaction; 2) Helping protect the finances of low-income Wisconsin seniors by controlling prescription drug costs and reducing financial barriers to obtaining needed medications; and 3) Reducing the rate of increase in the medical services provided to this population such as hospital, emergency department, and nursing facility services.

The SeniorCare program maintains budget neutrality.

## **Operational Updates**

### Operational Issues

The SeniorCare program has been in existence since 2002 with very little changes to the program. Because of the consistency with the program, the program does not have administrative difficulties or challenges operating.

### Operational/Policy Development

SeniorCare communicates policy and operational updates to prescribers and providers through ForwardHealth Updates. The following information was communicated during 2023.

- ForwardHealth Update 2023-09 announced changes to two preferred drug list classes, prior authorization form changes and other pharmacy policy changes. These changes were effective April 1, 2023.
- ForwardHealth Update 2023-13 communicated certain changes to the preferred drug list drug classes, prior authorization form changes and other pharmacy policy changes. These changes were effective for May 1, 2023.
- ForwardHealth Update 2023-18 announced effective June 13, 2023, the Provider Services call center implemented a new automated tool for assisting callers. This was part of an initiative to modernize ForwardHealth systems and will employ a virtual agent to help providers obtain information they need quickly and easily.
- ForwardHealth Update 2023-25 announced changes to certain preferred drug classes, prior authorization form changes, and other pharmacy policy changes. These changes were effective for July 1, 2023, unless otherwise noted in the Update.

- ForwardHealth Update 2023-32 communicated policy changes for certain preferred drug list drug categories, prior authorization forms and other pharmacy policy areas. These changes were effective October 1, 2023, unless otherwise noted in the Update.
- ForwardHealth Update 2023-33 announced coverage of the respiratory syncytial virus for SeniorCare members effective for dates of services on or after September 5, 2023.
- ForwardHealth Update 2023-35 announced ForwardHealth's holiday schedule.
- ForwardHealth Update 2023-46 communicated the Department rolled out of multi-factor authentication to the ForwardHealth portal in a continued effort to enhance the security its applications.
- ForwardHealth Update 2023-50 announced changes to the preferred drug list drug classes, prior authorization form changes and other pharmacy policy changes. These changes were effective January 1, 2024, unless otherwise noted in the Update.

In response COVID-19 public health emergency, ForwardHealth communicated information to pharmacy providers specific to COVID-19 via ForwardHealth Alerts. ForwardHealth Alerts are short, targeted publications designed to disseminate the latest COVID-19 information to providers quickly.

- ForwardHealth Alert 80 announced on June 1, 2023, the FSA ended the emergency use authorization for certain COVID-19 vaccines. Certain COVID-19 vaccine procedure codes would not be covered for dates of service on or after June 2, 2023.
- ForwardHealth Alert 76 announced as of May 12, 2023, the expedited urgent prior authorization requests for members will no longer be accepted through Provider Services with the ending of the Public Health Emergency on May 11, 2023.

### Legislative Updates

2023 Wisconsin Act 71 was enacted on December 6, 2023. This Act created 49.688(3m) of the statute, relating to 100 days' supply of medications under the SeniorCare program. The enactment of the Act does not require program changes as SeniorCare already allows 100 days' supply of medications as outlined in Medicaid's 100 days' supply policy. The Act confirms in SeniorCare rules, the Department can provide drugs it determines to be cost-effective/appropriate in quantities not to exceed 100 days' supply.

### Member Issues

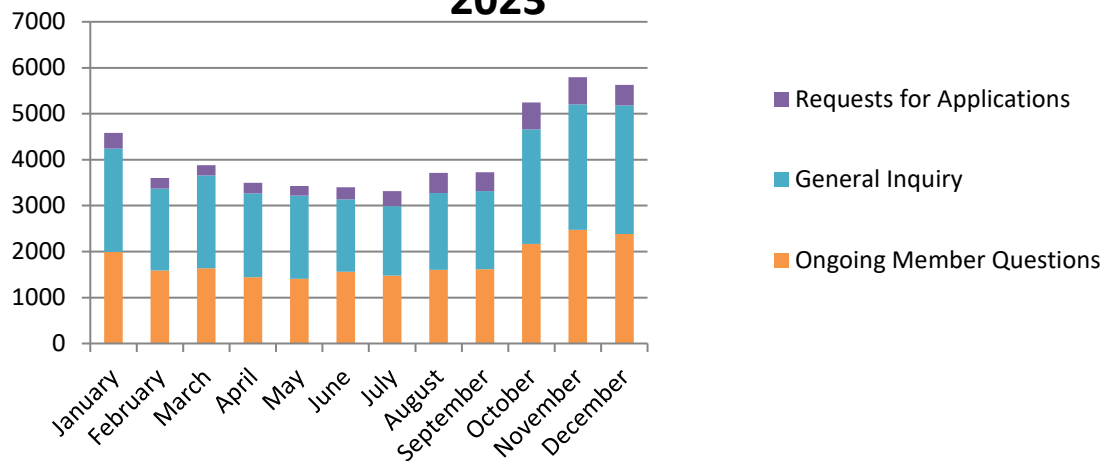
The SeniorCare Customer Service hotline is staffed with seven full-time equivalent correspondents. Calls received by the hotline can be classified into three categories:

1. Members who want to report a change or have specific questions about their benefits; and
2. Non-members who have general inquiries about the program; and
3. Request for applications.

Below is a summary of the 2023 calls received by the hotline:

## Customer Service Calls by Category and Month

2023



As in prior years, the majority of the calls were for general member inquiries.

### Request for Fair Hearing

There were three requests for a fair hearing in 2023. All three requests for a fair hearing were withdrawn.

2023 Disposition of Hearings	
Dismissed by Judge	0
Abandoned	0
Remand	0
Withdrawn	3
<b>Total</b>	<b>0</b>

### SeniorCare Advisory Committee

To ensure ongoing communication and coordination with relevant stakeholders, the Department established the SeniorCare Advisory Committee (SAC). This committee convenes to discuss ongoing SeniorCare enrollment statistics, customer service issues, review policy considerations and discuss possible changes to benefit design.

The SeniorCare Advisory Committee did not meet in 2023.

### **Performance Metrics**

#### Enrollment, New Applications and Renewals

SeniorCare Monthly Enrollment, New Applications, Renewals Due and Received and Renewal Rate 2023						
Month	Enrollment	New Applications	Renewals Due	Renewals Received	Dis-enrolled**	Renewal Rate
January	48,099	1,339	7140	5407	1,733	76%
February	48,235	1,148	6,669	5,155	1,514	77%
March	48,317	1,445	6,685	5,405	1,280	81%
April	48,420	1,175	4,922	3,836	1,086	77%
May	48,571	920	4,533	3,480	1,053	77%
June	48,398	1,165	8,206	3,589	4,617	50%
July	47,096	1,279	8,247	3,810	4,437	49%
August	46,823	1,258	8,531	4,382	4,149	51%
September	46,371	1,235	8,196	4,181	4,015	51%
October	45,913	1,324	7,939	4,799	3,140	60%
November	43,696	1,803	8,110	5,967	2,143	74%
December	42,207	2,807	7,393	5,827	1,566	71%
<b>Total</b>	<b>46,846*</b>	<b>16,898</b>	<b>64,094</b>	<b>55,838</b>	<b>30,733</b>	<b>66%*</b>

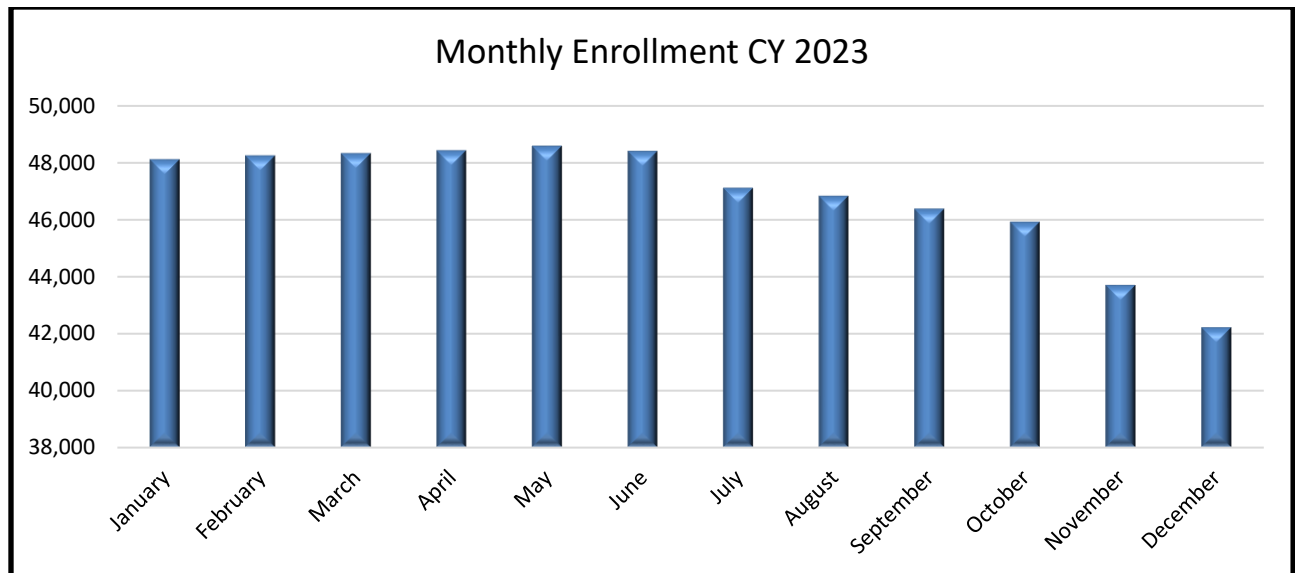
\*Denotes yearly average

\*\*Members who do not enroll before the end of their benefit plan are considered to be disenrolled. Members may reenroll in SeniorCare and will have a new benefit plan year.

As has been observed in prior years, new application requests were steady for most of the year and experienced an increase in the fourth quarter. In addition, monthly renewal requests have an average annual renewal rate of 66%, which is lower from last year's rate (see table below).

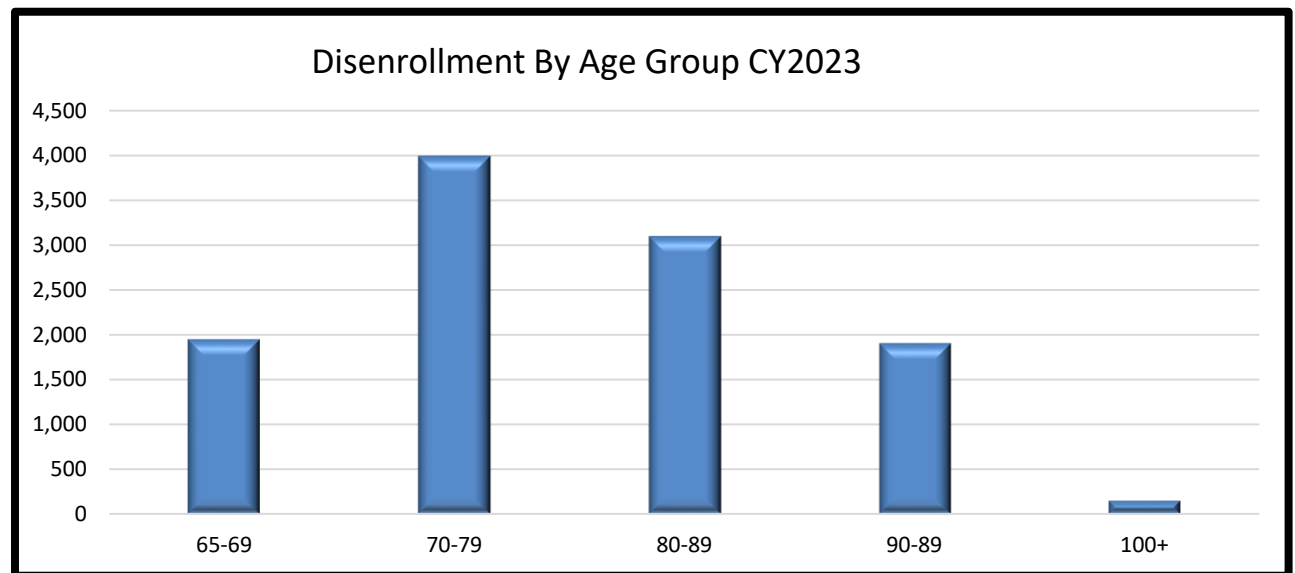
	2019	2020	2021	2022	2023
<b>Average Annual Renewal Rate</b>	81%	78%	79%	79%	66%

During the PHE, SeniorCare maintained the members eligibility when the member did not submit a renewal application, unless the member requested to be disenrolled from the program, moved out of state or was deceased. Starting in May 2023, members who did not resubmit a renewal application since the PHE started in 2020, members were given another chance to renew their application. This work was spread out over the remainder of 2023 in order to maintain the timely enrollment of new SeniorCare members. Average monthly enrollment was 46,846 in 2023.



### Disenrollment and Demographic

The SeniorCare program had 11,073 members disenrolled from the program in 2023. Below is a breakdown in disenrollment by age.



Of the members that disenrolled to the program, the following is a breakdown of the ethnicity of the members:

Race or Ethnicity	Count
American Indian/Alaskan Native	101
Asian	63
Black/African American	100
Hispanic/Latino	160
Native Hawaiian/Other Pacific Islander	3

White	9,628
Other Race or Ethnicity	32
Not Provided	986

### Benefits and Cost Sharing of Waiver Program

SeniorCare covers legend drugs and OTC insulin products of manufacturers that have signed a rebate agreement with the federal government.

All members pay a \$30 annual enrollment fee and have copayments of \$5 for generic drugs and \$15 for brand name drugs. Deductibles are as follows:

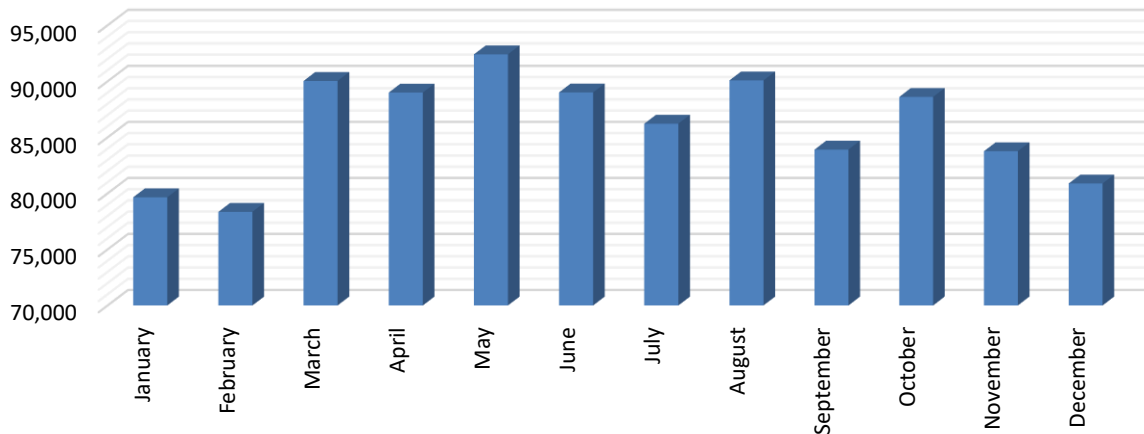
- Participation Level 1: Income at or below 160% FPL, members do not have a deductible.
- Participation Level 2a: Income greater than 160% and equal to or less than 200% FPL, the member pays a deductible, which is the first \$500 in drug costs. Members receive the discounted SeniorCare rate while meeting their deductible.

### 2023 SeniorCare Member Cost Sharing

<b>Month of Service</b>	<b>Amount Allowed Detail</b>	<b>Co-pay Amount Detail</b>	<b>Deductible Amount</b>
January	\$10,928,788	\$395,760	\$350,249
February	\$11,122,772	\$394,215	\$313,149
March	\$12,658,200	\$453,919	\$312,730
April	\$11,560,376	\$426,782	\$276,761
May	\$12,966,336	\$475,177	\$281,430
June	\$12,624,951	\$464,082	\$238,651
July	\$12,344,378	\$454,061	\$226,748
August	\$12,958,094	\$475,585	\$233,043
September	\$11,875,916	\$441,564	\$228,527
October	\$12,992,206	\$467,945	\$239,176
November	\$12,173,189	\$437,339	\$271,041
December	\$11,938,951	\$416,883	\$234,481
Total	\$146,144,127	\$5,303,312	\$3,205,986

### Cost of Care

## Pharmacy Claims Paid CY 2023

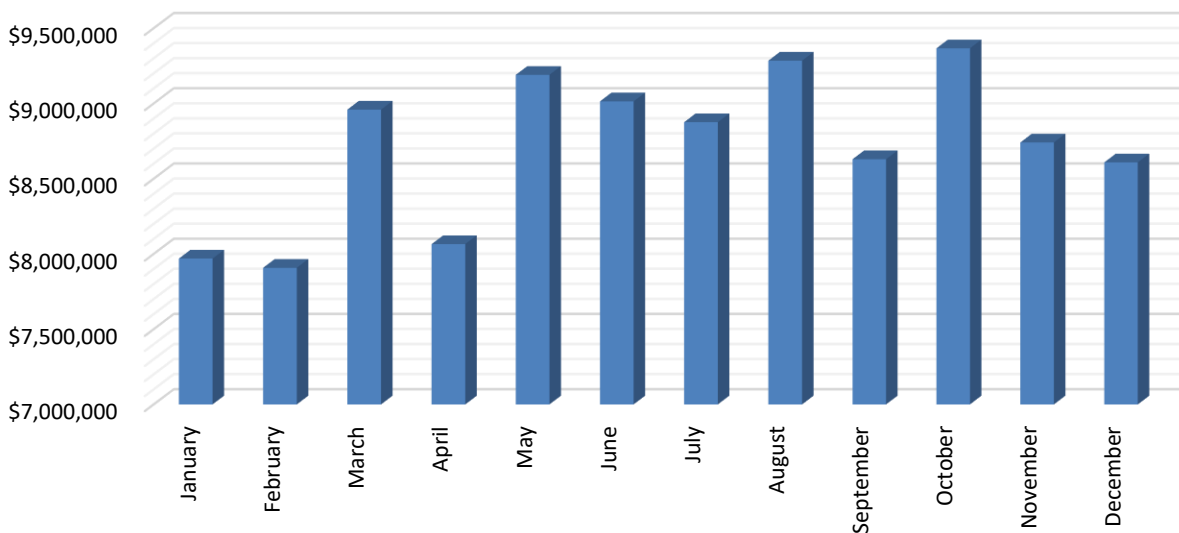


Year	Number of Pharmacy Claims Paid
2019	1,699,025
2020	1,048,742
2021	925,143
2022	865,556
2023	1,031,906

There were 92,406 claims paid during the month of May. Over the past few years, there has been a downward trend in the amount of paid pharmacy claims. Program flexibilities employed during the PHE increased the number of prescriptions dispensed in a three-months supply instead of a one-month supply, which would account for a lower overall annual prescription count. On December 1, 2022, SeniorCare rolled back the program flexibilities that were in place due to the PHE ending. This increased the number prescriptions dispensed in a one-month supply instead of a three-month supply, which would account for an increase in overall annual prescription count.



## Pharmacy Claims Paid Amount CY 2023



Year	Pharmacy Claims - Amount Paid
2019	\$87,419,963
2020	\$91,643,072
2021	\$95,438,463
2022	\$98,934,066
2023	\$104,641,498

The largest amount paid during 2023 was in October. During the month of October, SeniorCare paid \$9,366,284. Compared to CY2022, there was a slight increase in the amount paid on pharmacy claims in CY2023.

### Budget Neutrality Development/Issues <sup>1</sup>

Below are expenditures, revenue, and enrollment for the SeniorCare program in 2023. In the “Projections” column are the estimates that were submitted and approved in the 2019-2028 waiver renewal application. In the “Actuals” column is the actual experience with the SeniorCare waiver program.

SeniorCare had less expenditures than originally projected.

### **CY 2023 Enrollment and Expenditures**

	Projections	Actuals
Enrollment	47,070	47,325
Gross Expenditures	\$143,860,148	\$146,495,080
Member Cost Sharing	\$7,584,441	\$8,558,600

<sup>1</sup> Data source: DHS data warehouse

Manufacturer Rebates	\$77,540,082	\$78,162,007
Net Expenditures	\$24,602,105	\$27,279,117

In addition, the Department monitors overall budget neutrality of the SeniorCare program in accordance with the specifications agreed to by DHS and CMS. Budget neutrality of SeniorCare is tested by comparing Medicaid expenditures for seniors with and without the SeniorCare waiver program. See Attachment A for the completed budget neutrality workbook.

### **Demonstration Evaluation**

The SeniorCare evaluation is being conducted by the University of Wisconsin Institute for Research on Poverty (IRP). The Department submitted the SeniorCare evaluation design to CMS on August 9, 2019. During calendar year 2019 the evaluation parameters were defined.

In 2022, IRP has analyzed demographic characteristics of Wisconsin older adults with Medicare Part D only to adults with SeniorCare only. IRP also analyzed low-income subsidy data including drug use and cost. IRP analyzed hospitalizations, emergency department, and skilled nursing home visits. IRP compared health services use in the SeniorCare waiver population to those a Medicare Part D plan and who were not low-income subsidy members. IRP also started to perform work on the vaccine claims for SeniorCare members.

During 2023, IRP finished analyzing the data and drafted the Interim Evaluation Report. The Department finalized the Interim Evaluation Report and submitted the report to CMS on December 18, 2023. As of March 2024, CMS has not approved the Interim Evaluation Report.

### **Enclosures/Attachments**

Attachment A – CY2023 Wisconsin SeniorCare Budget Neutrality Report

#### **State Contacts:**

- Pam Appleby, Director, Bureau of Clinical Policy and Pharmacy:  
608 261-9423  
[Pamela.Appleby@dhs.wisconsin.gov](mailto:Pamela.Appleby@dhs.wisconsin.gov)
- Susan Seibert, Deputy Director, Bureau of Clinical Policy and Pharmacy:  
608 264-7733  
[SusanR.Seibert@dhs.wisconsin.gov](mailto:SusanR.Seibert@dhs.wisconsin.gov)
- Kim Wohler, Pharmacy Section Manager, Bureau of Clinical Policy and Pharmacy:  
608 267-7100  
[Kim.Wohler@dhs.wisconsin.gov](mailto:Kim.Wohler@dhs.wisconsin.gov)
- Tiffany Reilly, Policy Analyst, Bureau of Clinical Policy and Pharmacy:  
608-266-9438  
[Tiffany.Reilly@dhs.wisconsin.gov](mailto:Tiffany.Reilly@dhs.wisconsin.gov)

- Pang Xiong, Bureau of Enrollment Services:  
608-266-0010  
[PangA.Xiong@dhs.wisconsin.gov](mailto:PangA.Xiong@dhs.wisconsin.gov)

**Date Submitted to CMS:** March 27, 2024