



SINGLE INSIGHT POINT

2025 DUAL ELIGIBLE RETENTION STUDY

Keeping D-SNP Enrollment from ‘Backsliding Down the Well’ is Tough Enough Already. The Prioritization of C-SNP and the Shift to HIDE/FIDE are Making It That Much Harder.

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Deft Research recently published the 2025 Dual Eligible Retention Study. This national market research report of nearly 1,600 Dual Eligibles with Full, Partial, or under 65 status examines the experiences these beneficiaries have had throughout the first half of the year that has set them up to be more loyal as we head into what will be another very disruptive AEP.

With the dissolution of the quarterly SEP, 2025 (and soon-to-be 2026) cuts to supplemental benefits, the sunsetting of VBID, Medicaid recertification, and the shift to more integrated HIDE/FIDE plans, the Dual space may have never seen the level of change that it is undergoing at this moment.

The 2025 Dual Eligible Retention Study features sections on how the member experience is evolving for Duals based on demographics and SDoH factors, how all SNP plans—including C-SNP—appeal to current Dual members in both managed and unmanaged care, how health insurance literacy impacts the member experience, the drivers of loyalty for Duals that carriers must deliver on, how supplemental benefit changes for last year and this year will impact Dual consumerism in the fall, and how onboarding and communications can best set up Duals for retention in spite of the change occurring in the industry.

Armed with the insights from the Dual Eligible Retention Study, carriers, brokers, and agencies alike will be better positioned to win in 2026 and beyond as the Dual Eligible market looks to expand on its current 6 million members. For more information on the rest of the report, please contact your Deft Research Client Services associate or email info@deftresearch.com.

From the start of the COVID pandemic in Q1 of 2020 through its declared end in Q3 of 2023, D-SNP was perhaps the most predictable growth engine in all of health insurance. Plan managers could sit back, kick up their feet, and enjoy steady 20% year-over-year growth in enrollment. With plenty of Dual Eligibles in need of more managed care, a growing willingness for all carriers (no longer just the nationals) to serve these historically neglected beneficiaries, and no threat to enrollment backsliding with Medicaid redetermination on pause, conditions were ripe for rapid growth.

Up until the start of the pandemic, carriers had noticed that enrollment in Medicaid programs would predictably grow as the population of lower income consumers grew. But if members did not properly jump through the recertification hoop every year, enrollment would also predictably sputter due to temporary losses of coverage. This Medicaid growth cycle resembled the proverbial frog trying to work his way up and out of the well—jumping three feet up before sliding one foot back.

During the pandemic, Dual Eligibles did not have to recertify on an annual basis for the first time. All the “frog” did was jump onward and upward. With no backsliding, enrollment in D-SNP surged nearly 100% over four years—from just under 3 million to just under 6 million—with nothing on the horizon to stop it.

Now let’s fast forward to Q3 of 2025.

The post public health emergency era has continued to see D-SNP enrollment grow, but only by 400,000 (7%) over nearly two years. What was once “goosed frog growth” was now growth coming in at about the same rate as the growth in the total count of Medicare eligibles, around 3% a year—not too shabby, but a far cry from the D-SNP growth of the early 2020s. This recent change in growth fortunes has been partially stymied by Medicaid recertification and partially by carriers taking their eye off the D-SNP ball.

In terms of the impact of recertification post the PHE, any temporary loss of Medicaid eligibility—not permanent loss due to improved financial status, but temporary loss due to administration errors or delays in recertifying—can really be felt by carriers. For example, if half of D-SNP members lose coverage temporarily for just one month a year, total enrollment would be reduced by 4% for the whole year. That’s significant. And that sort of dynamic has been playing out each of these last two years.

But that is happening at the same time as national carriers (and a few regional carriers) have gone “all in” on C-SNP at the expense of driving D-SNP growth. Carriers reallocated D-SNP resources to C-SNP for a variety of reasons including as a hedge against upcoming HIDE/FIDE changes and the potential that current CO-SNP stalwarts might lose state Medicaid bids and be locked out of the new D-SNP world.

As carriers have redirected growth efforts from D-SNP to C-SNP, and as recertification is back on, the D-SNP frog has slipped back deeper into the well. One can argue that D-SNP to C-SNP conversion may better serve Dual members with a qualifying chronic condition, but one cannot argue that Duals—or anyone for that matter—benefits when they lose coverage for any length of time due to errors with coverage redetermination.

The good news? Various stakeholders are positioned to assist Duals and keep them in coverage year-round despite the redetermination speed bump.

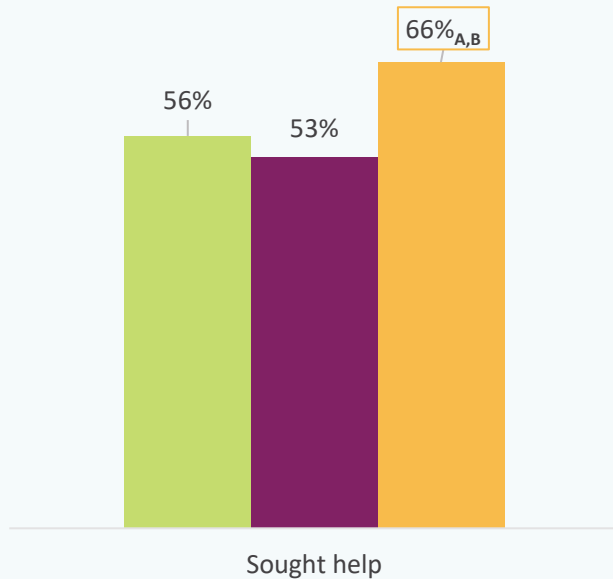
As seen on the charts on the following page, at least half of all Duals seek help when it comes to Medicare Assistance applications today. Everyone connected to Duals—family members, carrier case managers, and even brokers—has been sought out for assistance. But it is the broker channel, and their relatively high relied-upon rate, that may be the most intriguing to consider when it comes to keeping these consumers enrolled now and into the future with redeterminations.



% SOUGHT HELP WITH MEDICARE ASSISTANCE APPLICATIONS

Base: Not Easy to Understand Paperwork for Medicare Assistance

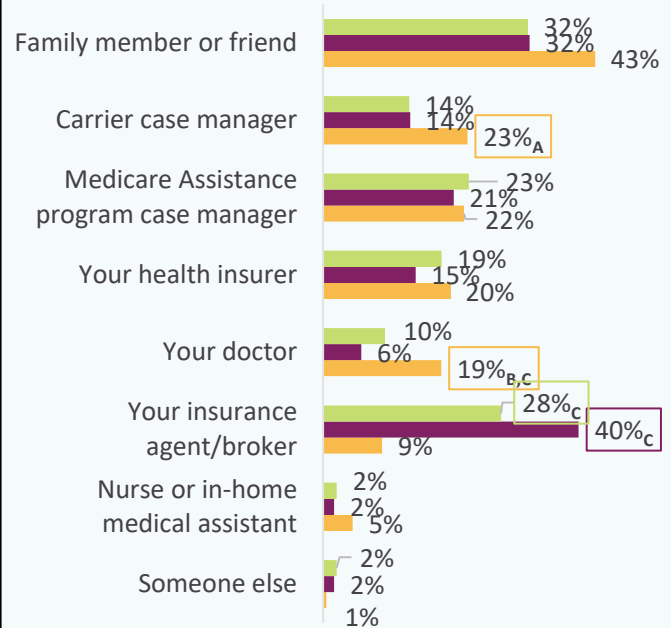
- Full Dual, n=422 (A)
- Partial Dual, n=221 (B)
- <65 Dual, n=292 (C)



WHO DUALS TURN TO FOR HELP WITH MEDICARE ASSISTANCE APPLICATIONS

Base: Not Easy to Understand Paperwork for Medicare Assistance, Sought Help Multiple Response

- Full Dual, n=236 (A)
- Partial Dual, n=117 (B)
- <65 Dual, n=194 (C)



*indicates statistically significant difference from corresponding group, $p < .05$.

When brokers work with Duals once or twice a year to ensure their coverage meets their needs, they are also positioned to help them stay on top of their Medicaid redetermination and not lose that coverage in the first place.

But that interaction doesn't have to end there: members may open up to brokers helping them better understand their plan benefits and how to use them, also improving retention. When that happens, and when these Duals feel the recertification process is a breeze, these beneficiaries are more likely to become promoters of their D-SNP plan (73% vs. 41% for others), more likely to want to renew coverage the following year with their carrier (81% vs 51% for others), and they are even more likely to reward their plan with top CAHPS scores of 9-10 "Best Health Plan" (71% vs 38% for others).

Recertification is not going away any time soon. (In fact, Duals dodged a bullet in the One Big Beautiful Bill by not having to redetermine twice a year like non-elderly adults will starting in 2027.) When carriers cement plans now for which stakeholder is "in charge of" driving recertification throughout the year, Duals face fewer needless gaps in care, and the "D-SNP frog" stays out of the disenrollment well altogether.

Did you enjoy this Single Insight Point (SIP) from the 2025 Dual Eligible Retention Study? Are you ready to move from just a SIP to a whole gulp? Please connect with your Deft Research Client Services Associate to unlock all the business-changing insights from the 80-plus pages of insightful reporting.

Don't miss these offerings related to the 2025 Dual Eligible Retention Study:

- [Dual Eligible Acquisition Study](#) provides insights into Dual Eligible seniors shop and consider new coverage, helping carriers attract Duals during the AEP.
- [Custom Research](#) can help you answer the tough questions facing your organization about Dual Eligible consumers going into and throughout the 2026 AEP.
- [SNP Market Assessment](#) can help your organization easily assess market sizes, helping you reach Dual Eligibles or those with chronic conditions this AEP.

Keep the insights coming all year with our syndicated studies.

The 2025 Senior Market Insights Service includes the following studies:

- [National MAPD Benefit Design Conjoint Plus MaxDiff Study](#) examines tradeoffs between benefits, illuminating senior's preferences for major product components alongside preferences for supplemental benefits.
- [Medicare Shopping and Switching Study](#) examines senior consumerism during the AEP and highlights what made members venture to new products.
- [Medicare Part D Study](#) provides insight into seniors' reaction to IRA-influenced changes to Part D, including how that may have influenced migration from standalone Part D to MAPD and how carriers might reduce attrition.
- [Dual Eligible Acquisition Study](#) provides insights into the rapidly growing segment of seniors with Medicaid eligibility (D-SNP or otherwise), examining how they shop and consider new coverage.
- [Medicare Member Onboarding Study](#) can help you better understand the important events and touchpoints that drive enduring membership for MA, MedSupp, and Part D members.
- [Medicare Age-In Study](#) shows the product preferences and ideal cadence of touchpoints, channels, and enrollment preferences of the next generation of boomer eligibles as they navigate their journey into Medicare.
- [AEP Gut Check Study](#) examines the pain points, service failures, and plan experiences that carriers and agents must address as we near the AEP.
- [Dual Eligible Retention Study](#) helps to better understand the member experience carriers, agencies, and consultants need to hold to Dual Eligible consumers.
- [Medicare Digital Tools Study](#) gives an in-depth look at how seniors shop online, navigate health insurance and healthcare, and whether they find the amount of information online to be overwhelming.
- [Medicare Member Experience Study](#) shows what causes attrition, switching intention, and lower CAHPS scores, helping carriers to better engineer member communications and customer service for higher scores.

Our 2025 Commercial Market Insights Service studies for the Individual Under 65 Market include:

- [Individual and Family Plan Benefit Design Conjoint Study](#) gauges consumer appetite for richer or leaner benefits, providing carriers and consultants with fresh insight on how consumers may react if ACA subsidies change for 2026.
- [Individual and Family Plan Shopping and Switching Study](#) examines the traditional OEP enrollment period, the channels that best connected with consumers, and how these individuals chose to enroll.
- [Commercial Group, ICHRA, and Alternative Health Plans Study](#) provides insight into non-traditional solutions that appear poised to disrupt the commercial group market, including how current commercial group members feel about a potential move to ACA coverage through ICHRA and the market potential of copay-only insurance plans.
- [Individual and Family Plan Digital Tools Study](#) gives an in-depth look at all aspects of digital healthcare, including online shopping on public and private exchanges, portal management, e-brokers, virtual care, and virtual-first plans.
- [Individual and Family Plan Member Experience Study](#) identifies the experiences that either inflate or depress loyalty so that carriers can be more informed on how to hold onto their ACA members.