



Medicaid Managed Care

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MEDICAID MANAGED CARE

- The state is in the process of transitioning over 1.5 million people on Medicaid and All Kids to a Medicaid managed care plan, also known as a care coordination program (virtually all Chicago-area Medicaid clients)
- The state's goal is to create integrated delivery systems that provide quality care and result in better health outcomes for Medicaid recipients at reduced costs
- Care Coordination is the centerpiece of Illinois' Medicaid reform

MANDATORY MANAGED CARE REGIONS

- HFS' expansion of care coordination covers seniors and persons with disabilities, dual eligibles (Medicare and Medicaid), and most children, their family members, and ACA Adults **who reside in one of five mandatory managed care regions:**
 - Greater Chicago Region
 - Rockford Region
 - Quad Cities Region
 - Central Illinois Region
 - Metro East Region

CARE COORDINATION HEALTH PLANS

At the time of enrollment, clients will select:

1. A Health Plan
2. A Primary Care Provider (PCP) in that health plan.

The Health Plan types, and specific health plans offered to an individual will vary by region and population.

TYPES OF HEALTH PLANS

1. **MCO – Managed Care Organization**

- Traditional HMOs paid on a risk based capitated basis, such as BCBS

2. **MCCN – Managed Care Community Network**

- Provider-owned and governed entities that operate like MCOs on a risk based capitated basis, such as County Care

3. **ACE - Accountable Care Entity**

- Provider-based organizations that are paid a fee by the Department to coordinate care, such as UI Health Plus

4. **CCE – Care Coordination Entity (SPD or CSN)**

- Provider-based organizations that are paid a fee to coordinate care. Plans are limited to specific populations. For CSN, enrollees are limited to children the Department has identified through claims data or other information as having complex medical needs.

NON-MANDATORY REGIONS

- Clients living in counties outside of the 5 mandatory regions will be required to select a PCP and receive services through Illinois Health Connect (IHC), Illinois' primary care case management program.
- Voluntary Managed Care will be available in some non-mandatory counties.

PROCESS

1. Individuals apply for Medicaid coverage.
2. If determined eligible, they will get an Approval Notice in the mail.
3. Within 10 days of the Approval Notice, they will get a Notice with their RIN – that's their HFS Medical Card. **The RIN gives them access to ANY Medicaid provider or pharmacy on a Fee-for-Service Basis.**

PROCESS

4. The family health population (parents & kids) and the ACA adults will get a **Client Enrollment Packet** in the mail.
 - For newly eligible, this will be about 2 weeks after getting HFS Medical card.
 - This packet will include a “tips” sheet on how to pick a plan, general enrollment information and a comparison chart of all of their health plan option.

5. Clients have 60 days to choose a managed care plan and Primary Care Provider (PCP) that’s part of that plan. Each individual gets to choose and enroll with a plan, even if in the same family, so families members can be in different plans.

PROCESS

6. If a client does not choose within the first 30 days of getting the Client Enrollment Packet, they will get a second packet.
 - The 2nd packet includes a cover letter that gives the name of the Plan and PCP each client will be assigned if they do NOT make a choice by the end of their 60 day choice period.

PROCESS

7. In addition to the enrollment packets, the CES will try to call each individual during their 60 day choice period – minimum of three phone attempts to encourage a voluntary choice and to offer education on Plan and PCP choices.
 - Samples of the Initial Enrollment Packet and Second Enrollment Packet can be found on the Client Enrollment Brokers Web site at:
<http://enrollhfs.illinois.gov/program-materials>

PROCESS

8. **To choose a plan and PCP, client MUST go through Client Enrollment Services (CES) (clients can enroll online or via phone).**

9. If client does not choose during their 60 day voluntary choice period, the Client Enrollment Broker will auto-assign the individual to a “best fit” Plan & PCP.
 - The auto-assignment takes into consideration:
 - An individual’s current patient/provider relationship;
 - An individual’s claims information;
 - The PCP of the family member that is closest in age to the individual;
 - An individual’s residence/county of service; and
 - Providers that are available within a Plan’s network and distance of the provider from the individual’s residence.

MEDICAID MANAGED CARE PLAN SELECTION LETTER

IFHS ILLINOIS DEPARTMENT OF
Healthcare and
Family Services
Illinois Client Enrollment Services



[HOC_NAME]
[ADDRESS_LINE2]
[ADDRESS_LINE1]
[CITY], [STATE] [ZIPCODE]-[ZIP4]

[LETTER_DATE]

Dear [HOC_NAME]:

Managed Care is expanding in Illinois!

Now you have new health plans to choose from. Please read everything that came with this letter to make the best choice for you.

You must enroll in a health plan.

To enroll (become a member), you must choose a health plan and a primary care provider (PCP). Your PCP is the doctor or clinic you go to when you are sick or need a checkup. Your health plan is the group of doctors, hospitals, and other providers who work together to give you the healthcare you need.

Even if you already have a health plan, it's important that you learn about your new healthcare choices.

You must choose by [DATE].

Please choose a health plan and PCP for each person listed here:

[HOC_NAME]	Date of birth: [HOC_DOB]	ID #: [HOC_RIN]
[ENROLLEE2]	Date of birth: [EN2_DOB]	ID #: [EN2_RIN]

The health plans you can choose from are:

- [Harmony Health Plan]
- [Meridian Health Plan]
- [Molina Healthcare]

If you do not choose by [DATE], we will choose for you.

It is better if you choose because you know your healthcare needs best. For help choosing a health plan and PCP, read *Tips to Help You Choose* and *Your Health Plan Choices* that came with this letter.

Medicaid recipients will receive a letter in the mail (sample only displayed here) requiring them to enroll in a Medicaid managed care plan.



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ILLINOIS CLIENT ENROLLMENT SERVICES

- All Medicaid managed care plan enrollments must be processed by CES (**UI Health cannot enroll anyone in a health plan**)
- CES provides unbiased education on a client's (including all family members) Plan and PCP choices and will assist each person with the enrollment process.
- Please refer your clients to the Illinois Client Enrollment Services call center for more information about their Plan choices and for enrollment assistance: **1-877-912-8880 (TTY: 1-866-565-8576)** or online at <http://enrollhfs.illinois.gov>

AFTER ENROLLMENT

- Once an individual selects a Plan and PCP or is auto-assigned to a Plan and PCP:
 - Each individual will have a 90-day “switch period” from their enrollment effective date when they can pick a different Plan (limited to 1 plan change during this 90-day period).
 - Each individual is locked-in to their Plan for a period of 12 months. The begin date of the 12 month period is the first effective date of their enrollment with the Plan.

AFTER ENROLLMENT

- At the end of their 12 month lock-in period, an individual will have a 60-day Open Enrollment period.
 - During this Open Enrollment period, the individual will have an opportunity to change Plans.
 - If the individual does not change Plans during Open Enrollment, they will remain with their current Plan.
- All Plan changes during Open Enrollment are processed by Illinois Client Enrollment Services.

AFTER ENROLLMENT

- Once enrolled with a Plan, the Plan will send each individual a welcome packet to confirm enrollment and to provide member information including a Member Handbook.
 - Some plans will send their members Plan ID cards to use when accessing services (in addition to their HFS Medical Card).
 - Plans will also begin working with members to coordinate care.
 - Once enrolled in a Health Plan, members should direct all questions to their Plans.

HOW TO SWITCH PCPS

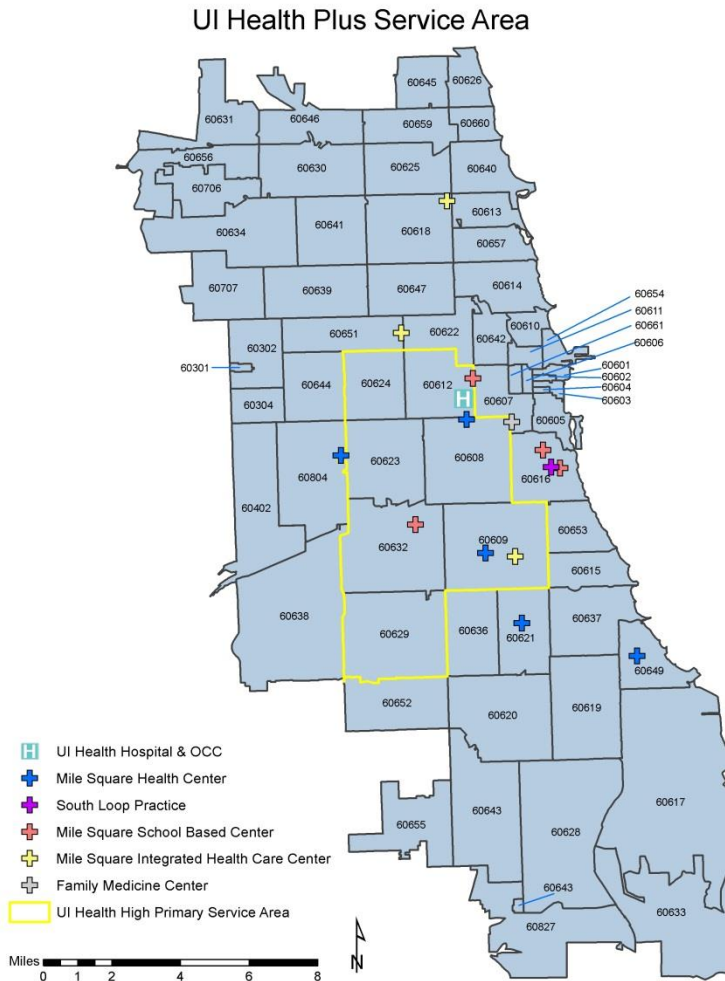
- An individual may switch their PCP within their Plan once enrolled
- To switch PCPs:
 - An individual enrolled in an MCO or MCCN must contact their Plan directly to request the change.
 - An individual enrolled in an ACE or a CCE must contact Illinois Health Connect (IHC) to switch PCPs (Limited to one PCP switch per month).
 - IHC: 1-877-912-1999 (TTY: 1-866-565-8577) or online at www.illinoishealthconnect.com

UI HEALTH PLUS

- UI Health Plus is a **Medicaid managed care** plan operated by UI Health
- UI Health Plus is an **Accountable Care Entity**, or ACE



UI HEALTH PLUS SERVICE AREA



- The following Medicaid enrollees will be able to select UI Health Plus as their plan:
 - Parents/caregivers, children, pregnant women and new individuals who enrolled in Medicaid as a result of the Affordable Care Act
 - Those in all of the “606” zip codes and the communities of Berwyn, Oak Park and Cicero

MEDICAID MANAGED CARE VIDEO

- A great, quick overview of what Medicaid managed care is in plain language
 - English & Spanish
 - Available at www.UIHealthPlus.org



MEDICAID MANAGED CARE PATIENT CARDS



COMMON TERMS AND DEFINITIONS

WHAT IS A HEALTH PLAN? The group of doctors, hospitals, and other providers who work together to give you the healthcare you need.

1. Pick a health plan.
2. Choose a Primary Care Provider.
3. You'll be guided by a team of doctors, nurses, and other providers who will work together to give you the healthcare you need.

To learn more about your health plan choices please contact

ILLINOIS CLIENT ENROLLMENT SERVICES

at 1.877.912.8880 (TTY 1.866.565.8576) or visit www.EnrollHFS.Illinois.gov

Primary Care Provider (PCP) - A doctor, nurse, or other healthcare professional; this person acts as your personal health care provider managing all your health care needs.

Managed care plan - A type of health insurance plan that contracts with health care providers and medical facilities to make sure members receive the health care they need, where and when they need it.

Medical Home - A doctor's office or clinic where you see your PCP when you are sick or need a checkup. With a medical home, you and your family get the healthcare you need to keep you healthy.

Referral - When your PCP or Care Manager sends you to see another health care provider.

RESOURCES

- Internal
 - Top 5 (Internal)
 - FAQs (Internal)
 - UI Health Plus Intranet page
 - UI Health [“Accepted Insurance Plans”](#) page
- For Patients
 - Medicaid managed care video – www.UIHealthPlus.org
 - Medicaid managed care patient cards
 - Illinois Client Enrollment Services: 1-877-912-8880 or <http://enrollhfs.illinois.gov/>
 - Health Plan comparison charts: <http://enrollhfs.illinois.gov/program-materials>
 - Health Plan map: <http://www2.illinois.gov/hfs/SiteCollectionDocuments/CCExpansionMap.pdf>