

Illinois Managed Care Program Features, as of 2017 (1 of 2)

Features	Family Health Plan (FHP)/Affordable Care Act (ACA)	Illinois Health Connect (IHC) Primary Care Case Management	Managed Long Term Services and Supports
Program type	Comprehensive MCO + MLTSS	Primary Care Case Management (PCCM)	MLTSS only (PIHP and/or PAHP)
Statewide or region-specific?	Winnebago, Boone, McHenry, Lake, Cook, DuPage, Kane, Will, Kankakee, DeKalb, Lee, Livingston, Woodford, Ford, Vermilion, Champaign, Piatt, DeWitt, McLean, Macon, Logan, Christian, Sangamon, Menard, Scott, Pike, Brown, Adams, Warren, Henderson, Tazewell, Peoria, Stark, Knox, Henry, Rock Island, Mercer, Madison, Clinton, St. Clair, Washington, Randolph, Perry, Jackson and Williamson counties	Jo Daviess, Stephenson, Carroll, Ogle, DeKalb, Whiteside, Lee, Kendall, Grundy, LaSalle, Putnam, Bureau, Marshall, Livingston, Woodford, Iroquois, Warren, Henderson, Hancock, McDonough, Fulton, Schuyler, Mason, Cass, Brown, Adams, Pike, Scott, Morgan, Calhoun, Greene, Jersey, Macoupin, Montgomery, Bond, Fayette, Shelby, Moultrie, Douglas, Edgar, Coles, Clark, Cumberland, Crawford, Jasper, Effingham, Marion, Clay, Richland, Lawrence, Wabash, Edwards, Wayne, Jefferson, Washington, Monroe, Randolph, Perry, Franklin, Hamilton, White, Gallatin, Saline, Williamson, Jackson, Union, Johnson, Pope, Hardin, Alexander, Pulaski and Massac counties	Lake, Kane, DuPage, Cook, Will and Kankakee counties
Federal operating authority	1932(a)/1915(c)	1932(a)	1915(b)
Program start date	07/01/2014	07/01/2006	07/01/2016
Waiver expiration date (if applicable)	09/30/2019		12/31/2019
If the program ended in 2017, indicate the end date	12/31/2017	12/31/2017	
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory	Mandatory	
Populations enrolled: Aged, Blind or Disabled Children or Adults		Mandatory	Mandatory

Features	Family Health Plan (FHP)/Affordable Care Act (ACA)	Illinois Health Connect (IHC) Primary Care Case Management	Managed Long Term Services and Supports
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory	Mandatory	
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals			Mandatory
Populations enrolled: Partial Duals			
Populations enrolled: Children with Special Health Care Needs	Mandatory		
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt	Exempt	Exempt
Populations enrolled: Enrollment choice period	60 days	N/A	60 days
Populations enrolled: Enrollment broker name (if applicable)	MAXIMUS	MAXIMUS	MAXIMUS
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health	X		
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X		
Benefits covered: Outpatient hospital physical health	X		
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X		
Benefits covered: Partial hospitalization	X		
Benefits covered: Physician	X	X	
Benefits covered: Nurse practitioner	X		

Features	Family Health Plan (FHP)/Affordable Care Act (ACA)	Illinois Health Connect (IHC) Primary Care Case Management	Managed Long Term Services and Supports
Benefits covered: Rural health clinics and FQHCs	X		
Benefits covered: Clinic services	X		
Benefits covered: Lab and x-ray	X		
Benefits covered: Prescription drugs and prosthetic devices	X		
Benefits covered: EPSDT	X		
Benefits covered: Case management	X	X	
Benefits covered: SSA Section 1945-authorized health home			
Benefits covered: Health home care (services in home)	X		
Benefits covered: Family planning	X		
Benefits covered: Dental services (medical/surgical)	X		
Benefits covered: Dental (preventative or corrective)	X		
Benefits covered: Personal care (state plan option)			
Benefits covered: HCBS waiver services	X		X
Benefits covered: Private duty nursing	X		
Benefits covered: ICF-IDD			
Benefits covered: Nursing facility services	X		X
Benefits covered: Hospice care	X		
Benefits covered: Non-Emergency Medical Transportation	X		X

Features	Family Health Plan (FHP)/Affordable Care Act (ACA)	Illinois Health Connect (IHC) Primary Care Case Management	Managed Long Term Services and Supports
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit	X		
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Ambulatory, surgical treatment center, assistive/augmentative communication devices, audiology, blood and blood components, chiropractic, vision, podiatry, physical/occupational and speech therapy, renal, behavioral, assisted living, specialized medical equipment and supplies, environmental accessibility		Non-Medicare behavioral health
Quality assurance and improvement: HEDIS data required?	Yes	Yes	No
Quality assurance and improvement: CAHPS data required?	Yes	Yes	Yes
Quality assurance and improvement: Accreditation required?	Yes	No	Yes
Quality assurance and improvement: Accrediting organization	NCQA		NCQA
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group		Health Services Advisory Group
Performance incentives: Payment bonuses/differentials to reward plans		X	X
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics	X		
Performance incentives: Withholds tied to performance metrics	X		X

Features	Family Health Plan (FHP)/Affordable Care Act (ACA)	Illinois Health Connect (IHC) Primary Care Case Management	Managed Long Term Services and Supports
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	X		X
Participating plans: Plans in Program	Aetna Better Health; Blue Cross Blue Shield of Illinois; CountyCare; Family Health Network; Harmony Health Plan; IlliniCare Health Plan; Meridian Health Plan; Molina Healthcare of Illinois; NextLevel Health Partners	Illinois Health Connect	Aetna Better Health; Blue Cross Blue Shield of Illinois; IlliniCare Health Plan; Meridian Health Plan
Notes: Program notes	Low-income pregnant women are enrolled mandatorily in this program.	Providers that render services to IHC members bill the state in accordance with state fee-for-service reimbursement policies. As such, clients receive the same fee-for-service covered benefits in PCCM as they do in regular fee-for-service with no assigned PCCM primary care practitioner.	Only dual eligibles are allowed to enroll in the MLTSS program.

Illinois Managed Care Program Features, as of 2017 (2 of 2)

Features	Integrated Care Program
Program type	Comprehensive MCO + MLTSS
Statewide or region-specific?	Boone, Champaign, Christian, Clinton, Cook, DeWitt, DuPage, Ford, Henry, Kane, Kankakee, Knox, Lake, Logan, Macon, Madison, McHenry, McLean, Menard, Mercer, Peoria, Piatt, Rock Island, Sangamon, St. Clair, Stark, Tazewell, Vermilion, Will and Winnebago counties
Federal operating authority	1932(a)/1915(c)
Program start date	05/01/2011
Waiver expiration date (if applicable)	09/30/2019
If the program ended in 2017, indicate the end date	12/31/2017
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)	
Populations enrolled: Full Duals	
Populations enrolled: Partial Duals	
Populations enrolled: Children with Special Health Care Needs	

Features	Integrated Care Program
Populations enrolled: Native American/Alaskan Natives	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Exempt
Populations enrolled: Enrollment choice period	60 days
Populations enrolled: Enrollment broker name (if applicable)	MAXIMUS
Populations enrolled: Notes on enrollment choice period	
Benefits covered: Inpatient hospital physical health	X
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	X
Benefits covered: Outpatient hospital physical health	X
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	X
Benefits covered: Partial hospitalization	X
Benefits covered: Physician	X
Benefits covered: Nurse practitioner	X
Benefits covered: Rural health clinics and FQHCs	X
Benefits covered: Clinic services	X
Benefits covered: Lab and x-ray	X
Benefits covered: Prescription drugs and prosthetic devices	X
Benefits covered: EPSDT	X
Benefits covered: Case management	X
Benefits covered: SSA Section 1945-authorized health home	

Features	Integrated Care Program
Benefits covered: Health home care (services in home)	X
Benefits covered: Family planning	X
Benefits covered: Dental services (medical/surgical)	X
Benefits covered: Dental (preventative or corrective)	X
Benefits covered: Personal care (state plan option)	
Benefits covered: HCBS waiver services	X
Benefits covered: Private duty nursing	X
Benefits covered: ICF-IDD	
Benefits covered: Nursing facility services	X
Benefits covered: Hospice care	X
Benefits covered: Non-Emergency Medical Transportation	X
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of benefit	X
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Ambulatory surgical treatment center, chiropractic, durable medical equipment, hearing, immunization, physical therapy, renal dialysis services, speech therapy, vision
Quality assurance and improvement: HEDIS data required?	Yes
Quality assurance and improvement: CAHPS data required?	Yes
Quality assurance and improvement: Accreditation required?	Yes

Features	Integrated Care Program
Quality assurance and improvement: Accrediting organization	NCQA
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group
Performance incentives: Payment bonuses/differentials to reward plans	
Performance incentives: Preferential auto-enrollment to reward plans	
Performance incentives: Public reports comparing plan performance on key metrics	X
Performance incentives: Withholds tied to performance metrics	X
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	X
Participating plans: Plans in Program	Aetna Better Health; Blue Cross Blue Shield of Illinois; Cigna-HealthSpring; Community Care Alliance of Illinois; CountyCare; Humana Health Plan; IlliniCare Health Plan; Meridian Health Plan; Molina Healthcare of Illinois; NextLevel Health Partners
Notes: Program notes	Dual eligibles are not allowed to enroll in the ICP program. Cigna-HealthSpring ended service to the program effective 7/31/2017.