



**HFS**

**Illinois Department of  
Healthcare and Family Services**

**JB Pritzker, Governor**  
**Elizabeth M. Whitehorn, Director**

**201 South Grand Avenue East, Springfield, Illinois 62763**  
**Telephone: +1 217-782-1200, TTY: +1 800-526-5812**



January 9, 2026

Toni Fortson-Bigby, CEO  
Aetna Better Health Inc

**RE: Aetna MMAI Key Position Change SharePoint Sanction**

Dear Ms. Toni Fortson-Bigby:

This letter serves as written notification to Aetna Better Health MMAI ("Aetna") of sanction pursuant to Section 5.3.14.1.11 of the Medicare-Medicaid Alignment Initiative (MMAI) Contract and in direct violation of Section 2.2.3.3 and MCO Policy 041 which states, "MMAI health plans shall send written notice to the Department of such key position changes immediately, but no later than five (5) business days after such position becomes vacant. The Health Plans shall also notify the Department when the position is filled and by whom. Notifications shall be sent via email to Health Plans assigned BMC Account Manager. Health Plans shall also submit a copy of their written notice in SharePoint as outlined below."

On November 13, 2025, Aetna submitted written notice of a key position change to their assigned BMC Account Manager. Notice confirmed a change for Ms. Thompson that was to be effective November 15, 2025. Pursuant to MMAI contract section 2.2.3.3 and MCO Policy number 041, Aetna was also obligated to upload a copy of their written notice to the SharePoint MMAI library. The notice was not submitted to SharePoint until December 17, 2025. In addition, Aetna did not request an extension to the SharePoint reporting due date. As such, the Department is sanctioning Aetna \$5,000. Aetna is to issue an electronic payment to the Department, by either ACH or Wire Transfer, no later than Friday, February 6, 2026. The electronic payment shall include the following fields for payment identification and tracking purposes by the Department:

ORIG CO NAME: **Aetna Better Health Inc**  
ORIG ID: **[REDACTED]**  
ENTRY DESCR: this is to be left blank  
ENTRY CLASS: **CCD**  
TRACE NO: **Bank Information**  
ENTRY DATE: **yymmdd**  
IND ID NO: **Bank Information**  
IND NAME: **Aetna Better Health Inc**  
REMARK: **Aetna MMAI Key EE Sanction**  
ORIG BANK: **Bank Name**

\*The information highlighted in yellow is specific to the Department and payment detail requirements, and shall not be changed or modified by the MCO.

\*The information in gray is the banking information.

If you have any questions regarding this notification, please contact your HFS Account Management team Jessica Pickens at [Jessica.Pickens@illinois.gov](mailto:Jessica.Pickens@illinois.gov), or Leigh Anne Ochs at [Leigh.A.Ochs@illinois.gov](mailto:Leigh.A.Ochs@illinois.gov).

Sincerely,

Helena Lefkow, Deputy Administrator, Managed Care Performance  
Division of Medical Programs

cc: Hollie Tanzillo, Anita Stefanich, Keshonna Lones, Leigh Anne Ochs, Stephanie Hunter, Amy Roberts, Rich Allen, Adam Lewis, Jessica Pickens