

Medicare Advantage Fully Integrated Dual Eligible Special Needs Plans (FIDE SNPs)

September 2025



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OUR VISION FOR THE FUTURE

We improve lives.

- ▶ We address social and structural determinants of health.
- ▶ We empower customers to maximize their health and well being.
- ▶ We provide consistent, responsive service to our colleagues and customers.
- ▶ We make equity the foundation of everything we do.

This is possible because:

▶ **We value our staff as our greatest asset.**

We do this by:

Fully staffing a diverse workforce whose skills and experiences strengthen HFS.

Ensuring all staff and systems work together.

Maintaining a positive workplace where strong teams contribute, grow and stay.

Providing exceptional training programs that develop and support all employees.

▶ **We are always improving.**

We do this by:

Having specific and measurable goals and using analytics to improve outcomes.

Using technology and interagency collaboration to maximize efficiency and impact.

Learning from successes and failures.

▶ **We inspire public confidence.**

We do this by:

Using research and analytics to drive policy and shape legislative initiatives.

Clearly communicating the impacts of our work.

Being responsible stewards of public resources.

Staying focused on our goals.



What We Will Cover Today

- What is a FIDE SNP
- Comparing MMAI, FIDE SNP, and Medicare Advantage Plan Benefits
- Eligibility
- Enrollment
- Provider Networks
- Deeming Period
- Other Key Information



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WHAT IS A FIDE SNP



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Background

- The Illinois Medicare-Medicaid Alignment Initiative (MMAI) program will end December 31, 2025.
- Beginning January 1, 2026, the Illinois Department of Healthcare and Family Services (HFS) will offer Medicare Advantage dual eligible special needs plans (D-SNPs).
- HFS is offering D-SNPs because the Centers for Medicare & Medicaid Services (CMS) is requiring states with a MMAI program to convert to the D-SNP model.

What is a D-SNP

- There are different types of D-SNPs.
- The D-SNP model available in Illinois is called the fully integrated dual eligible special needs plan (FIDE SNP).
- FIDE SNPs will be the only type of D-SNP model available in Illinois because they are the most similar to MMAI plans in that they provide the same level of care coordination and integration of Medicare and Medicaid benefits included in the MMAI plans.



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What is a FIDE SNP

- A FIDE SNP is a fully integrated dual eligible special needs plan, which is a type of Medicare Advantage plan that provides both Medicare and Medicaid benefits through a single managed care plan.
- Illinois FIDE SNPs are designed for Illinoisans who receive both Medicaid and Medicare benefits (dually eligible members).
- Medicare is the primary payer for most health care services for dually eligible members, including primary care, specialty care, acute and post-acute care services, home health, and medical equipment.
- Medicaid wraps around Medicare by helping with Medicare premiums and cost sharing, and by covering some services that Medicare does not cover, such as long-term services and supports (LTSS).

What is a FIDE SNP

- FIDE SNPs simplify the delivery of Medicare and Medicaid benefits and coordinate member care with the member as the focus.
- Illinois FIDE SNPs must have an approved contract with CMS to cover Medicare benefits and a contract with HFS to cover Medicaid benefits.
- They are the only type of Medicare Advantage plan subject to regulatory oversight by the state.
- FIDE SNPs will be available in every county in the State of Illinois.



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Which Managed Care Plans are FIDE SNPs?

- Aetna
- Humana
- Molina
- Meridian/Wellcare



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Comparing MMAI, FIDE SNP, and Medicare Advantage Plan Benefits



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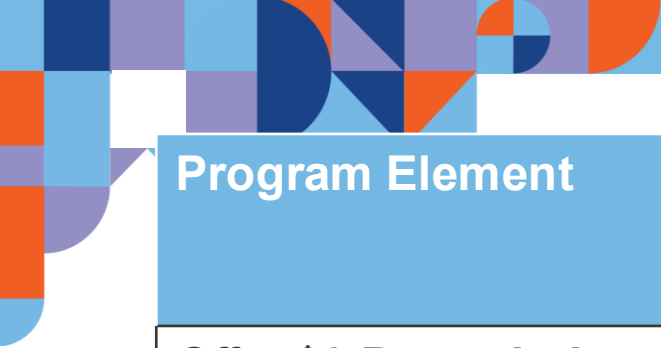
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Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Cover all Medicare and Medicaid benefits , including primary and acute care services, behavioral health services, and long-term services and supports	Yes	Yes	No – only Medicare benefits are covered
Offer supplemental benefits	Yes	Yes	Yes
Tailor benefits , including supplemental benefits, specifically for the needs of dually eligible individuals	Yes	Yes	No



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Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Offer \$0 Prescription Co-Pays	Yes	<ul style="list-style-type: none">• \$0 for waiver and nursing home members• Very small copayments for members who do not receive waiver and nursing home services• Members qualify for the Extra Help program which limits copays, see Help with drug costs Medicare• In CY 2026, Extra Help co-pays for generic drugs are up to \$5.10 and co-pays for brand-name drugs are up to \$12.65 (and \$0 for people receiving waiver or nursing home services)• Once your total drug costs (including co-pays) reach \$2,100, you'll pay \$0 for each covered drug	Same as FIDE SNP

Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
One care coordinator for both Medicare and Medicaid benefits. Care coordinator[s] help members: <ul style="list-style-type: none"> • Manage their health care • Arrange help at home, behavioral health, nursing care, depending on the needs • Get extra services, like food services 	Yes	Yes	No



Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Must have enrollee advisory committees to gather feedback from their members about how to improve access to services, care coordination, and health equity	Yes	Yes	No
One health risk assessment with members to understand members' physical, behavioral, and social needs and risk factors for both Medicare and Medicaid	Yes	Yes	No





Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Model of care to describe how the plan will meet the needs of dually eligible individuals	No	Yes	No
Continuity of care period of no less than 90 days during which the plan will cover the current services the member receives	Yes	Yes	Yes





Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Unified appeal & grievance process that enable plan members to file a single appeal or complaint with the plan, regardless of whether a service is covered by Medicare, Medicaid or both	Yes	Yes	No




Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Continuation of existing benefits during appeals (if a plan is going to terminate or reduce a benefit that was previously approved, it must continue providing that benefit during the appeal process if the member requests an appeal and continuation of the benefit)	Yes	Yes	Yes, in certain circumstances

Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Provide members with a single member ID card for both Medicare and Medicaid benefits	Yes	Yes	No
Provide information about the covered benefits — including the benefits typically covered by Medicare and the benefits typically covered by Medicaid—in a single set of materials that are easier to understand than separate materials for Medicare and Medicaid benefits.	Yes	Yes	No





Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Choice of network of providers	Yes	Yes, call the FIDE SNP to see if a provider is in the plan's network or visit their website to look through their provider directory	Yes, call the plan to see if a provider is in the plan's network or visit their website to look through their provider directory



Program Element	MMAI Plan	FIDE SNP	Medicare Advantage Plans that are not FIDE SNPs
Cover experimental services	No	No	No
Cover services provided by an out of network provider	Generally no; only in limited circumstances	Generally no; only in limited circumstances	Generally no; only in limited circumstances
Cover services provided without required referral and prior authorization	No	No	No
Cover cosmetic services	No	No	No

ELIGIBILITY



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Who Is Eligible for a FIDE SNP*

- To be eligible for a FIDE SNP, a member must be:
 - Receiving full Illinois Medicaid benefits and enrolled in either the Medicaid Aid to the Aged, Blind, and Disabled (AABD) or the FamilyCare category of assistance;
 - Age 21 and older at the time of enrollment;
 - Have Medicare Part A (Hospital Insurance) and Part B (Medical Insurance);
 - Live in the service area; and
 - A United States Citizens or lawfully present in the United States.

*Note: Same as MMAI



Who is Not Eligible for a FIDE SNP

- Members are not eligible to enroll in FIDE SNPs if they are:
 - Under the age of 21;
 - Receiving developmental disability institutional services or participating in the HCBS waiver for Adults with Developmental Disabilities;
 - In the Medicaid Spend-down population;
 - In the Illinois Medicaid Breast and Cervical Cancer program;
 - Enrolled in partial-benefit Medicaid programs; or
 - Receiving Comprehensive Third Party Insurance.

*Note: Same as MMAI

ENROLLMENT



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Redetermination*

- Transition to a FIDE SNP does not trigger a Medicaid redetermination.
- However, currently, Illinois Medicaid members are required to renew their coverage once a year to keep their health care benefits.
- **Members must be on the lookout for their redetermination form in the mail.**
- The redetermination process is a way for members to update their information and see if they still qualify for Medicaid.
- The process to renew coverage is simple, but if you have questions, call ABE Customer Service at (800) 843-6154 for assistance.
- You cannot qualify for a FIDE SNP unless you also qualify for Medicaid except as described in the deeming period.



MMAI Members FIDE SNP Enrollment

- **For the remainder of 2025, all current MMAI members will remain in their MMAI plans** until December 31, 2025 unless they take action to disenroll themselves from the MMAI plans.
- **Members of an MMAI plan offered by Aetna, Humana, Meridian, and Molina**
 - CMS will automatically enroll these members in the Illinois FIDE SNP offered by these companies with a start date of January 1, 2026.
 - These members do not need to take any action. They will receive an Annual Notice of Change from the FIDE SNP by September 30, 2025, informing them of this transition and their options to select other forms of coverage.
 - These members can enroll in other forms of coverage, including other FIDE SNPs, beginning October 15, 2025.



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MMAI Members FIDE SNP Enrollment

- **Members of the Blue Cross Blue Shield MMAI Plan**
 - These members can choose to enroll in one of the Illinois FIDE SNPs or other forms of coverage beginning October 15, 2025.
 - Notice of Non Renewal: BCBS must mail letters (post marked no later than October 2, 2025) notifying their members of this transition and their options to select other forms of coverage.
 - If these members do not make an active enrollment choice prior to December 31, 2025, CMS will automatically enroll them in Original Medicare with a Medicare drug plan starting January 1, 2026.



Members not in MMAI

- **Members Not Enrolled in a MMAI Plan who are Eligible for FIDE SNP Enrollment** can enroll in any Illinois FIDE SNP or other forms of coverage beginning October 15, 2025.
- Until 1/1/2026, the way a member receives their medical coverage will remain the same.
- Currently, there is no passive enrollment into a FIDE SNP for members newly eligible for FIDE SNPs. Newly eligible members will have to enroll themselves into a FIDE SNP. HFS expects to implement passive enrollment sometime in 2026. We understand that there are CMS requirements for FIDE SNPs to participate in passive enrollment and we will work towards implementation in conjunction with the FIDE SNPs.
- Passive enrollment for MMAI plans stopped April 2025.
- Choice enrollment into MMAI plans will end September 18, 2025.



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Follow These Steps to Enroll

- Cannot enroll until October 15, 2025
- Visit [Medicare.gov](https://www.Medicare.gov), select the “Find Plans Now” button, and follow the steps to view Medicare Advantage (Part C) plans available in your zip code. Make sure to select “Medicaid” when asked if you get help with your Medicare health or drug costs. Please note that information about Calendar Year 2026 plans will not be available in Medicare.gov until a few days before October 15, 2025.
- Call the plan or visit their website. Website information will be provided October 1, 2025.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.



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FIDE SNP Enrollment

- Enrollment is voluntary, members can opt out at any time.
- FIDE SNPs are allowed to market but cannot begin marketing until October 1, 2025.
- Brokers can enroll and obtain compensation for enrollment.
- HFS does not enroll members - the FIDE SNP enrolls members.



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Key Medicare Enrollment Events and Dates

- **Open Enrollment Period (Medicare Open Enrollment is a chance to review your current Medicare plans and compare all the 2025 health and prescription drug options)**
 - October 15 – December 7 of each year
 - Join, drop, or switch to another Medicare Advantage Plan with or without drug coverage (or add or drop drug coverage)
 - Switch from Original Medicare to a Medicare Advantage Plan **or** from a Medicare Advantage Plan to Original Medicare
 - Join, drop, or switch to another Medicare drug plan if a member is in Original Medicare.
 - Coverage starts January 1 of the next year (the plan must get your enrollment request by December 7)



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Key Medicare Enrollment Events and Dates

- **Special Enrollment Periods for Dually Eligible Individuals Throughout the Calendar Year**
 - **Integrated Care SEP:**
 - Once-per-Month
 - In Illinois, members eligible for a FIDE SNP **can enroll once-per-month** in a FIDE SNP using the Integrated Care SEP.
 - For Calendar Year 2025, coverage will begin January 1, 2026 because January 1, 2026 is the first date that FIDE SNP coverage begins in Illinois.
 - Beginning January 1, 2026, coverage will start the first of the month after the plan gets your request.
 - **Dual/LIS SEP :**
 - Once-per-Month
 - Any dually eligible member in a Medicare Advantage Plan, including a FIDE SNP, can choose to go back to Original Medicare and a standalone prescription drug plan (PDP) and switch between standalone PDPs using the dual/LIS SEP.
 - Coverage will start the first of the month after the plan gets your disenrollment request.
 - The Integrated Care SEP and the Dual/LIS SEP won't allow enrollment into non-D-SNP Medicare Advantage Plans or switching between the non-D-SNP Medicare Advantage plans.



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Key Medicare Enrollment Events and Dates

- **Medicare.Gov**
 - Not all Medicare enrollment periods are listed in this presentation.
 - See <https://www.medicare.gov/basics/get-started-with-medicare/get-more-coverage/joining-a-plan> for more information about the various Medicare enrollment periods.
 - Members can call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.



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Opting out of FIDE SNP and Receiving LTSS Services*

- If a member opts out of a FIDE SNP and is receiving Medicaid Long Term Services and Supports (LTSS) they will:
 - Return to Original Medicare or Medicare Advantage Plan with or without drug coverage and HealthChoice IL Managed Long -Term Services and Support (MLTSS) plans for LTSS coverage
 - Must remain in Medicaid managed care (HealthChoice IL) for coverage of LTSS services.
- When a member opts out:
 - The member will be sent an enrollment packet for HealthChoice MLTSS plan.
 - The letter will indicate the plan to which they will be auto assigned if they do not make a choice enrollment prior to the date indicated in the letter.
 - It is HFS's preference for members to make a choice enrollment into the plan they believe best.

*Note: Same as MMAI

PROVIDER NETWORKS



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Provider Networks*

- FIDE SNPs have a provider network that members must use.
- The provider network must meet CMS provider network adequacy standards.
- The provider network must meet HFS requirements for adequate provider network for Medicaid services.
- Call FIDE SNP or visit their website to access the network of providers.
- Due to CMS marketing rules, websites won't be available until October 1, 2025.
- HFS will issue a provider notice informing providers of the transition.
- Providers must have a contract with each FIDE SNP.

DEEMING PERIOD



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Deeming Period

- A *deeming period* allows a member to stay in their FIDE SNP for a certain amount of time if they lose their Medicaid benefits.
 - Minimum 90 days and maximum 6 months (varies per FIDE SNP, see FIDE SNP member handbook).
 - If a member loses their Medicaid benefits, they can remain in their FIDE SNP during the deeming period.
 - FIDE SNP only provides Medicare benefits to a member during the deeming period.
 - If a member is not reinstated within the deeming period, their FIDE SNP coverage will end and they will have to enroll for Medicare benefits through Original Medicare or to a Medicare Advantage Plan with or without drug coverage.
 - If a member's Medicaid benefits is reinstated during the deeming period, Medicaid coverage in the FIDE SNP will be effective the first day of the month following reinstatement.



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OTHER KEY INFORMATION



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Resources

- Medicare.gov Special Needs Plans: [Special Needs Plans \(SNP\) | Medicare](#).
- Centers for Medicare & Medicaid Services: [Dual Eligible Special Needs Plans \(D-SNPs\) Background Information](#)
- [Medicare & You Handbook](#)
- HFS Website:
 - Detailed Information on FIDE SNPs: [FULLY INTEGRATED DUAL ELIGIBLE SPECIAL NEEDS PLANS IN ILLINOIS](#)
 - FIDE SNP Benefits Information: [Comparing MMAI, FIDE SNP, & Medicare Advantage Plans](#)
 - FIDE SNP Enrollment Information: [How To Enroll in a FIDE SNP](#)
 - Ending of MMAI: [Medicare-Medicaid Alignment Initiative | HFS](#)



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Questions?

- HFS.DSNPINquiries@Illinois.gov



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