

**Illinois Managed Care Program**  
**National Committee for Quality Assurance (NCQA)\***  
**Medicaid Healthcare Maintenance Organization (HMO) Accreditation\*\***  
*Version Date: August 5, 2025. NCQA Update July 15, 2025.*

Health Plan Name	Accreditation Status <sup>1,2</sup>
<b>Aetna Better Health of Illinois Inc.</b>	
<i>Medicaid HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Medicare HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Health Equity Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Long Term Services and Support</i>	<a href="#"><u>Distinction</u></a>
<b>Blue Cross Blue Shield of Illinois</b>	
<i>Medicaid HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Health Equity Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Long Term Services and Support</i>	<a href="#"><u>Distinction</u></a>
<b>Cook County Health &amp; Hospitals System's CountyCare Health Plan</b>	
<i>Medicaid HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<b>Humana Health Plan, Inc.</b>	
<i>Medicare HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<b>Meridian Health Plan of Illinois, Inc.</b>	
<i>Medicaid HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Health Equity Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Long Term Services and Support</i>	<a href="#"><u>Distinction</u></a>
<b>Molina Healthcare of Illinois, Inc.</b>	
<i>Medicaid HMO Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Health Equity Accreditation</i>	<a href="#"><u>Accredited</u></a>
<i>Long Term Services and Support</i>	<a href="#"><u>Distinction</u></a>

\* NCQA is an independent, not-for-profit organization dedicated to assessing and reporting on the quality of, health plans, managed behavioral healthcare organizations, preferred provider organizations, new health plans, physician organizations, credentials verification organizations, disease management programs and other health-related programs.

\*\* This document meets the federal MCO, PIHP, or PAHP accreditation information publication requirement under 42 CFR § 438.332(c)(1).

<sup>1</sup> NCQA Health Plans Report Cards. Available at: <https://reportcards.ncqa.org/health-plans?pg=1>. Accessed on July 24, 2025.

<sup>2</sup> Review dates do not indicate an accreditation expiration date. NCQA conducts the review/survey and determines accreditation status within 30 days of the final review date (as scheduled by NCQA). Available at <https://www.ncqa.org/programs/health-plans/health-plan-accreditation-hpa/faqs/>. Accessed on July 24, 2025.

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<b>Accreditation Status</b>	<b>Description of Accreditation Status and Status Modifiers<sup>3</sup></b>
<b>Accredited</b>	Service and quality meet or exceed rigorous requirements for consumer protection and quality improvement.
<b>Provisional</b>	Service and quality meet some requirements; improvement is needed to achieve higher status.
<b>Interim</b>	Basic structure and processes in place to meet expectations for organizations new to NCQA.
<b>Denied</b>	Did not meet NCQA requirements.
<b>Appealed by Organization</b>	The health plan asked the accreditation status to be reviewed.
<b>In Process</b>	NCQA is deciding accreditation status.
<b>Revoked</b>	NCQA removed accreditation.
<b>Scheduled</b>	On calendar for an accreditation survey.
<b>Expired</b>	Previously accredited, has chosen not to renew.
<b>Under Review by NCQA</b>	NCQA is confirming if performance is at the level required for accreditation.
<b>Merger Review in Process</b>	NCQA is analyzing merger's impact on accreditation status.
<b>LTSS Distinction</b>	NCQA awards LTSS Distinction to organizations that deliver efficient, effective person-centered care that meets people's needs, helps keep people in their preferred setting and aligns with state requirements.
<b>Under Corrective Action</b>	A CAP Survey is required when an organization does not meet the minimum threshold for one or more must-pass elements. The organization's accreditation status on the Report Cards is noted with an "Under Corrective Action" status modifier during the corrective action period. NCQA proactively schedules the CAP Survey for submission 6 months following the last Full Survey, with the file review or survey end date 4 weeks later.

<sup>3</sup> NCQA Health Plan Report Cards Glossary. Available at: <https://reportcards.ncqa.org/glossary>. Accessed on Aug 5, 2025.