

Financial Alignment Initiative: Illinois

States participate in the Financial Alignment Initiative, a demonstration program administered by the Centers for Medicare & Medicaid Services, under either a capitated model, a managed fee-for-service model, or an alternative model. The purpose of the demonstration is to test ways to improve care for dually eligible beneficiaries and reduce program costs by aligning financing and coordinating care across Medicaid and Medicare. This fact sheet provides details about Illinois's demonstration.

TABLE 1. Illinois's Capitated Model

Demonstration name: Illinois Medicare-Medicaid Alignment Initiative	
Timeline	
MOU signed	February 23, 2013
Opt-in enrollment starts	March 1, 2014
Passive enrollment	June 1, 2014
Scheduled to end	December 31, 2023
Enrollment	
Covered population	Age 21 and older; not enrolled in certain HCBS waiver programs
Enrolled (as of January 2022)	90,122
Payment	
Number of participating plans	5
Savings percentage range	1–6%
Number of rating categories	4
Other risk mitigation strategies	Medical loss ratio
Benefits	
Expanded benefits	Zero copayments for prescription drugs and over-the-counter products, transportation, and dental
Carved out benefits	ICF/IID
Required community involvement	Not specified
Care coordination	
Number of days to complete HRA	Initial health screen within 60 days of enrollment and more comprehensive assessment within 90 days for high or moderate risk enrollees
Number of days to establish ICP	Within 90 days of enrollment



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Education requirements for care coordinator	Care coordinators assigned to enrollees with high levels of health needs must have a clinical background
Care coordinator caseload requirements	<ul style="list-style-type: none"> • For high-risk enrollees, ratio of 1:75 • For moderate-risk enrollees, ratio of 1:150 • For low-risk enrollees, ratio of 1:600
Number of days to maintain continuity of care from previous coverage	Maintain providers for up to 180 days
Consumer protections	
Ombudsman	Long-Term Care Ombudsman Program

Notes: HCBS is home- and community-based services. HRA is health risk assessment. ICF/IID is intermediate care facility for individuals with intellectual disabilities. ICP is individualized care plan. MOU is memorandum of understanding.

Sources: CMS 2013, 2015, 2018, 2019, 2020, and 2021; IL Dept. of Healthcare and Family Services 2021; IL Dept. on Aging 2021; ICRC 2022; and Medicare Payment Advisory Commission (MedPAC) 2018.

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