



Aging and Disability Services Professionals React to D-SNP Transition

On December 14, 2023, Avisery by AgeOptions hosted our annual virtual Advocacy Forum entitled: *Tell Us About It! Advocate for Integrated Care for Illinois' Duals*. In attendance were roughly 70 professionals who work with and on behalf of Illinois' dually-eligible residents. In preparation for Illinois' transition to Dual Eligible Special Needs Plans (D-SNPs) in 2026, the Forum sought to educate attendees about how D-SNPs are defined, the federal requirements governing them, and how the Illinois Medicaid program could utilize specific provisions in their D-SNP State Medicaid Agency Contract (SMACs) to promote more integrated, equitable care.

After the presentation, participants joined breakout groups to discuss their preferences for specific contractual provisions based on their organizational missions and the target populations they serve. The breakout group summary below reflects discussants' calls for contract provisions that will ensure **person-centered care, continuity of care, and transparency/ oversight**.

Summary of Breakout Group Discussions

Ensuring Person-Centered Care for D-SNPs members

- **Contracting with Community Agencies-** Plan contracting with Area Agencies on Aging (AAAs) and community agencies emerged as a critical priority amongst breakout group participants. AAAs and community agencies have long-standing histories of assisting seniors with benefit enrollment, SHIP counseling, and providing Home and Community Based Services through the Community Care Program. These established service providers are predisposed to provide effective assistance to the D-SNP population.
- **Evidence-Based Practices:** Breakout group participants would like HFS to include coverage of evidence-based practices known to improve health outcomes into the SMAC. Notably, SMACs could ask D-SNPs to cover integrated team-based palliative care, an important service distinct from caretaking and hospice services. Other evidence-based programs could potentially include use of Tailored Caregiver Assessment Referrals (TCARE), an evidence-based caregiver risk management platform designed to prevent caregiver burnout.
- **Aligning Care Coordination Models:** One Care Coordination Unit (CCU) staff member raised a common perception that within the MCO model, care coordinators operate within a smaller scope of practice than has historically been the case for care coordinators within the aging network. More specifically, the CCU care coordinators can address health-related social needs through public benefits enrollment (e.g., Medicaid, SNAP, Medicare Savings Program, LIHEAP, housing, etc.) and referrals/linkages to community services. They would like to see the D-SNP care coordinators be able to coordinate a wider array of service needs than within the MMAI model.
- **Exempting Developmentally Disabled (DD) and Medically Fragile Technology Dependent (MFTD) waiver duals from Managed care/DSNPs:** DD and MFTD waiver recipients are currently

exempt from MMAI. A breakout group member advocated for the DD and MFTD waiver recipients to remain exempt from mandatory enrollment in D-SNPs.

Continuity of Care During Plan Transitions

- **Expanding Provider Networks** Breakout group advocates would like to know how we can expand D-SNP plan networks, especially considering that MMAI plans struggled with limited networks. One advocate who lives near the border of Indiana mentioned that most MMAI-eligible duals with whom they worked chose to opt out of MMAI as they were unable to use it to access healthcare across state lines. The participant wondered if there will be opportunities for D-SNP plan networks to extend across state boundaries.
- **Extended Deeming Periods-** All breakout participants agreed that strong continuity of care provisions need to be incorporated into the SMAC to allow for a smooth transition from the Medicare Medicaid Alignment Initiative (MMAI) plans to D-SNPs. Extended ‘deeming’ periods—which permit plan enrollees who temporarily lose Medicaid coverage to stay in their D-SNP plan—emerged as an overwhelming priority. While D-SNPs are mandated to incorporate a minimum 30-day deeming period in their contracts, SMACs can require the deeming periods to last up to six months. An extended deeming period will be especially important in the initial roll-out of DSNP plans in Illinois. One advocate noted that another option would be for the state to utilize the 6-month deeming period for 1-2 years immediately following the MMAI transition and then lower the deeming period to 3 months for years following.
- **Continuity of Care Transition Periods** Continuity of care transition periods allowing those who transition from MMAI to DSNPs to visit out-of-network providers are equally important. In her presentation, Tiffany Huyenh Cho noted how California incorporated a 12-month continuity of care transition period into their SMAC; breakout group advocates expressed interest in a similar transition period for Illinois. We also heard positive feedback regarding California’s additional continuity of care provisions for durable medical equipment coverage (DME).
- **Clear Enrollment Procedures:** One breakout group participant asked whether enrollments would be conducted through Client Enrollment Services or through the Medicare Plan Finder. Breakout group participants emphasized the need for outreach and communication surrounding the D-SNP enrollment process. Of concern is that Illinois dual eligibles are familiar with MMAI enrollment through Client Enrollment Services, the HFS enrollment broker, but if D-SNP instead utilize standard Medicare Advantage enrollment procedures, customers could miss enrollment deadlines and lose coverage.

Transparency/Oversight

- **Requiring data on Medicaid services be provided by plans:** Publicly available and accessible data is an integral component to plan evaluation and oversight. One breakout group discussed how data surrounding denial of care due to prior authorization and denial of supplemental benefits would be important to include in the SMAC.