



2014 Medicare Medicaid Financial Alignment Initiative (MMAI) Timeline of Consumer Mailings & Enrollment Periods



Letters sent to individuals NOT receiving LTSS. Clients can voluntarily enroll in an MMAI plan of their choice (starting in March) or opt out of the program. Click title to view letters: [Chicago Letter](#)
[Central IL Letter](#)

Voluntary Enrollment begins for individuals NOT receiving LTSS. Individuals will receive an enrollment packet in the mail and can enroll into an MMAI plan after this date.

Passive Enrollment begins for individuals NOT receiving LTSS, and will occur in phases over 6 months. Clients will be automatically enrolled into an MCO plan if they did not choose a plan or choose to opt out of the program.

Initial enrollment letters sent to individuals receiving LTSS in batches. Once an individual receives an MMAI enrollment letter, s/he will have 60 days to respond by enrolling in an MMAI plan or opting out of the program. If s/he does nothing, s/he will be automatically enrolled into the plan designated in the letter. Click [here](#) to review letters. (*scroll to bottom of page for MMAI letters*)

February

March

April

May

June

July

August

September

Individuals NOT receiving LTSS who did not make a choice during voluntary enrollment will receive letters 60 days and again 30 days before their Passive Enrollment. These letters will inform them of their options, and that **if they do nothing, they will be automatically assigned and enrolled into a plan.** They can respond to the letters by enrolling in a plan of their choice or by opting out of the program

NOTE: Passive Enrollment occurs in phases over 6 months, so individuals will receive letters at different times depending on the month they will be passively enrolled.

Text with a Blue Box pertains to individuals NOT receiving Long Term Care Supports and Services (LTSS). Individuals without LTSS can opt out of the program or switch plans at any time of the year.

Text with an Orange Box pertains to individuals receiving LTSS. Individuals receiving LTSS can opt out of the program or switch plans any time of the year. However, if individuals who are receiving LTSS opt out of the program, they will receive a letter with information about the Managed Long Term Care Services and Supports (MLTSS) program around winter of 2015. The letter will inform them that they must choose an MLTSS plan to cover their LTSS, but they can continue to receive their medical services through fee for service Medicare & Medicaid. Individuals will be locked in to their MLTSS plan choice for one year from date of enrollment, but will always have the option to enroll into an MMAI plan to cover all of their services at any time of the year. Click [here](#) to view an MMAI fact sheet for more information.