



# Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs)

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on how to help consumers **navigate the**  
**complexities** of Medicare & Medicaid.



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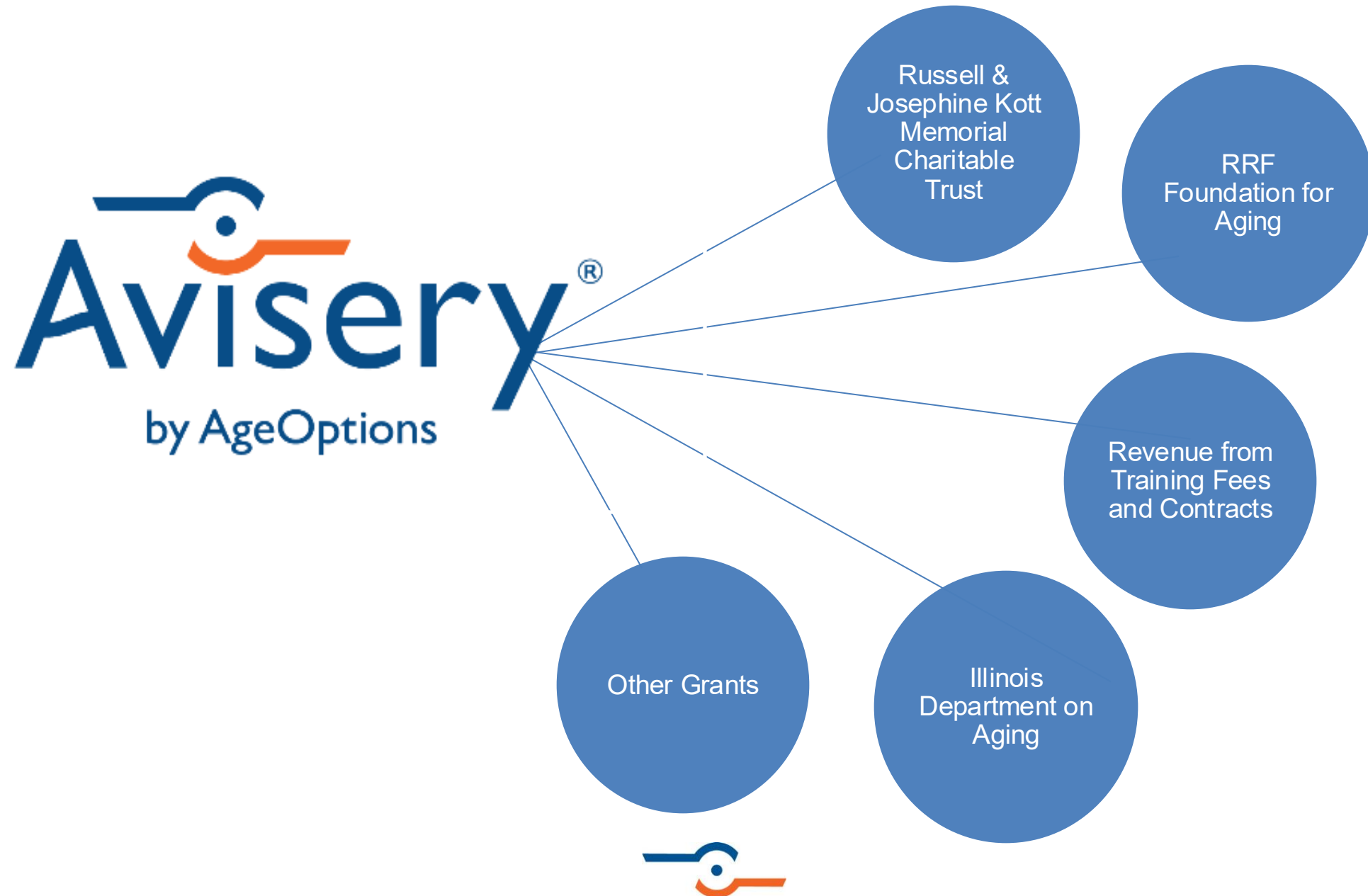
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# 2025 Sources of Revenue



# What We'll Cover Today

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What is a D-SNP?

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D-SNP Eligibility

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D-SNP Enrollment

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D-SNP Benefits



# Background



- The Center for Medicare and Medicaid Services (CMS) is ending the Financial Alignment Initiative (FAI) demonstration project by December 31st, 2025
  - Illinois' FAI demonstration is the Medicare-Medicaid Alignment Initiative (MMAI)
- Illinois to replace MMAI plans with Medicare Advantage Dual Eligible Special Needs plans (D-SNPs) beginning January 1st, 2026



# **What is a Medicare Advantage Dual Eligible Special Need Plan (D-SNP)?**





# Special Needs Plans

- A Medicare Advantage plan tailored to specific populations

Special Needs Plan	Population	Offered in Illinois?
Chronic Illness Special Needs Plan (C-SNP)	Individuals with specific chronic conditions (Ex: diabetes, dementia, heart failure)	Yes
Institutional Special Needs Plans (I-SNP)	Individuals expected spend more than 90 days in an institution who cannot travel for care	Yes
<b>Dual Eligible Special Needs Plans (D-SNP)</b>	<b>Individuals enrolled in Medicare and Medicaid.</b>	<b>Coming in January 2026!</b>



# What is a D-SNP?

- Medicare Advantage plans designed specifically for dually eligible individuals (those with Medicare and Medicaid)
  - States can pick from multiple models of D-SNPs which vary by how integrated they are.
  - All D-SNPs cover all Medicare services and must at least coordinate Medicaid benefits
- Must have a contract with the state and with CMS
  - Plan required to submit a Model of Care



# Difference Between D-SNPs and Medicare Advantage Plans

Requirement	D-SNPs	Medicare Advantage Plans
Must hold a contract with Medicare	Yes	Yes
Cover Medicare benefits	Yes	Yes
Offer supplemental benefits (dental, vision, hearing, transportation)	Yes	Yes
Must hold a contract with the state Medicaid agency, with certain minimum requirements	Yes	No
Tailor benefits specifically for the needs of dually eligible individuals	Yes	No
Coordinate and/or integrate delivery of Medicare and Medicaid benefits (and state can impose additional requirements)	Yes	No

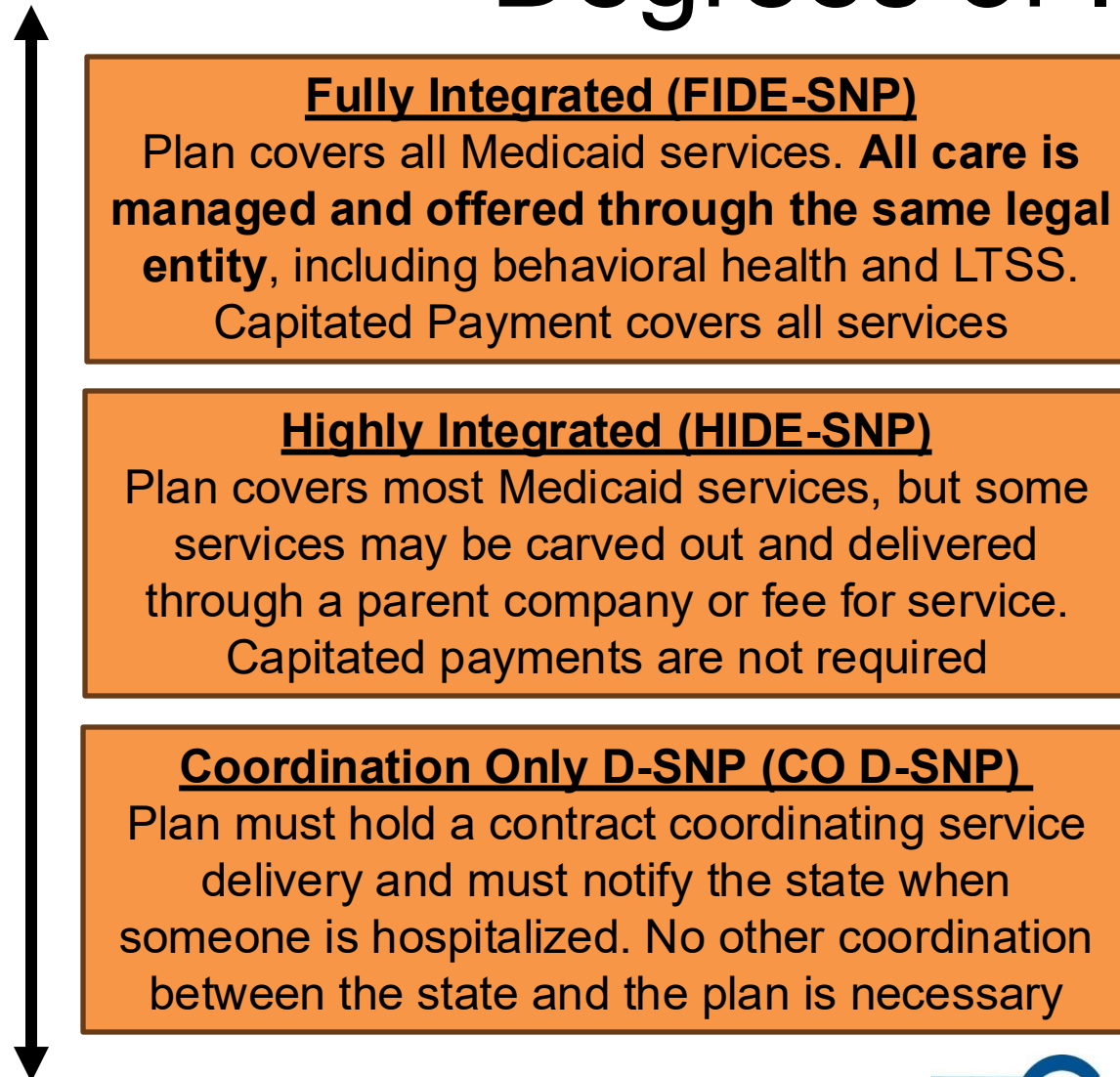


# Difference Between D-SNPs and Medicare Advantage Plans

Requirement	D-SNPs	Medicare Advantage
May cover Medicaid benefits	Yes	No
Have a Model of Care to describe how the plan will meet the needs of dually eligible individuals	Yes	No
Must establish and maintain at least one enrollee advisory committee in each state where the plan operates	Yes	No
Must collect information about enrollees' transportation, housing, and food security needs during health risk assessments	Yes	No



# Degrees of Integration



- The more ‘integrated’ the D-SNP model, the more oversight the state can place over the D-SNP plan’s contract.



# FIDE SNPs

- FIDE SNPs must be Exclusively Aligned
  - Operated by the same company, with fully integrated enrollee materials, single ID card, and unified appeal process.
- All D-SNPs in Illinois will be FIDE SNPs
- FIDE SNPs are the closest to MMAI
  - One plan covers all Medicare and Medicaid benefits, including long term care services and care coordination.
- IL D-SNPs will be operating statewide granted that they meet CMS network adequacy standards for all counties
  - One provider network





# D-SNP Eligibility



# D-SNP Eligibility



- To be eligible for a D-SNP plan individuals must be:
  - Enrolled in full AABD Medicaid benefits (no Spenddown) or FamilyCare
  - Age 21 or older at the time of enrollment
  - Entitled or enrolled in Medicare Part A
  - Enrolled in Medicare Part B
  - Eligible to enroll in Medicare Part D
  - Live in the plan's service area



# Excluded Populations



- Individual cannot enroll in IL D-SNPs if they are
  - Under 21 years old
  - Have Medicaid through Spenddown
  - Receiving developmental disability institutional services or HCBS waiver for Adults with Developmental Disabilities
  - Enrolled in the Illinois Medicaid Breast and Cervical Cancer program
  - Enrolled in a partial benefit program (ie Medicare Savings Program, Family Planning Program)
  - Have comprehensive third-party insurance



# Deeming Period

- CMS requires D-SNPs to have **Deeming Period**
  - Allows the individual to stay in their D-SNP plan for a certain amount of time if they lose their Medicaid benefits.

## Illinois Deeming Period:

- If an individual loses their Medicaid benefits, they can remain in their D-SNP plan for at minimum 90 days.
- If an individual is not reinstated within 90 days their D-SNP coverage will end.



# D-SNP Enrollment



# D-SNP Enrollment

## Initial Enrollment Period (IEP)

- When a beneficiary first becomes eligible for Medicare (3-1-3 rule)
- Must be enrolled in AABD Medicaid or FamilyCare

## Medicare Annual Open Enrollment Period (OEP)

- October 15- December 7 of each year
- Can enroll or switch D-SNP plans or non-integrated Medicare Advantage plans for the following calendar year

## Medicare Advantage Open Enrollment Period

- January 1- March 31
- If already enrolled in a MA plan or D-SNP can switch D-SNP plans, enroll in non-integrated Medicare Advantage plans or go back to Original Medicare

## Integrated Care Special Enrollment Period (SEP)

- Monthly opportunity for duals to enroll or switch D-SNPs
- Other SEPs are available to individuals based on circumstances





# How to Enroll in a D-SNP

- Individuals can search available plans using the PlanFinder ([Medicare.gov/plan-compare](https://www.Medicare.gov/plan-compare)).
  - This site will list Illinois plans starting 10/15/2025
- Enrollment in a D-SNP can be done in one of these ways:
  - Select “Enroll” for the D-SNP on Medicare.gov PlanFinder
  - Call the D-SNP or visit their website.
  - Call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.
- Enrollment is **voluntary**, can opt out at any time
- D-SNP plans are allowed to market beginning October 1, 2025, unlike MMAI plans



# Disenrolling from D-SNPs

- Individuals can disenroll from a D-SNP and return to Original Medicare and FFS Medicaid at any time using the Dual/LIS Special Enrollment Period
  - Allows individuals to enroll and switch standalone Part D plan monthly
  - Prescription coverage is through Medicare Part D
  - Cannot use to enroll in a regular Medicare Advantage plan
- Individuals who would like to enroll in a regular MA plan must wait for the Medicare Annual Open Enrollment Period (Oct 15- Dec 7) or the Medicare Advantage Open Enrollment Period (Jan 1- March 31)
- Can disenroll online (Medicare.gov), calling 1-800 Medicare, or calling the plan



# Disenrolling from D-SNP and Receiving LTSS Services



- Illinois residents receiving Medicaid Long Term Services and Supports (LTSS) must be enrolled in a managed care plan that provides those services
- If an individual is receiving LTSS from their DSNP and chooses to no longer be enrolled any D-SNP:
  - HFS will assign them to a HealthChoice MLTSS plan and send them an enrollment packet
  - Will have the option to enroll in a different MLTSS plan per instructions to be provided in the packet



# MMAI to D-SNP Transitions for CY 2026



- As of July 2025, 4 out of 5 of the MCOs offering MMAI plans were awarded D-SNPs contracts
  - Aetna, Humana, Meridian, and Molina
  - Awards are not final until CMS approves the D-SNP plans
- Enrollees in MMAI plans that were awarded D-SNP contracts will be transferred into a D-SNP with the same parent company
  - Will receive an Annual Notice of Change (ANOC) around 9/30/2025 explaining the transition
  - Can opt out and be in Original Medicare/Medicare Advantage and FFS Medicaid



# MMAI and D-SNP Transition: BCBS



- Enrollees in the BCBS Community MMAI plan will receive a notice of non-renewal that their MMAI plan is ending around 9/30/2025
  - Can choose to enroll in a D-SNP or a non-integrated Medicare Advantage plan during the 2025 Medicare Annual Open Enrollment (October 15th – December 7th)
  - In December 2025, individuals can use the new Integrated Care Special Enrollment Period to enroll in a D-SNP
  - If no choice is made, CMS automatically transitions them to Original Medicare with a standalone Part D prescription drug plan starting January 1, 2026



# D-SNP Benefits





# D-SNP Benefits



- D-SNPs cover all Medicare and Medicaid benefits
  - Including LTSS, behavioral health, transportation, home health
- D-SNPs have an integrated formulary of drugs that includes drugs covered by Medicare Part D and Illinois Medicaid
- Some benefits may require prior authorization or referrals



# D-SNPs and Long-Term Care Benefit

- Illinois D-SNPs cover long term care
- This includes nursing home care and all services under the following Home and Community Based Waiver Services (HCBS):
  - Persons who are Elderly
  - Persons with Disabilities
  - Persons with HIV/AIDs
  - Persons with Brain Injury
  - Supportive Living Program
- [Home and Community Based Services Waiver Programs | HFS](#)
- **REMINDER:** Persons enrolled with the Adults with Developmental Disabilities waiver are not eligible for D-SNP



# Supplemental Benefits

- D-SNPs can offer supplemental benefits like other Medicare Advantage plans
- Supplemental benefits may duplicate Medicaid benefits
- D-SNP plans that have high integration are allowed to offer supplemental benefits beyond what is offered by regular Medicare Advantage plans



# Care Coordination

- D-SNP enrollees will be assigned a care coordinator that will provide care management services
- Enrollees must be given the contact info of a care coordinator or entity providing care coordination services
- Care coordinators have contact requirements depending on high risk the individual is or enrolled in a HCBS waiver



# Care Coordination

- Care coordinators can help D-SNP enrollees with the following:
  - Assessment of enrollee's clinical risks and needs
  - Medication management
  - Health education
  - Coordinate services with community and social services providers
  - Discharge planning
  - Assisting with grievances and appeals



# Services Not Covered by D-SNPs



- Experimental services
- Services provided by an out of network provider
- Services provided without required referral and prior authorization
- Cosmetic services





# Provider Networks

- D-SNPs have a provider network that individuals must use.
  - Must meet CMS and state Medicaid provider network adequacy standards
- Contact the plan to check provider networks



# Continuity of Care



- Illinois D-SNPs must offer a 90-day continuity of care transition period for enrollees new to a D-SNP plan
  - Allows enrollees to continue receiving care from out of network providers
  - D-SNPs must pay for covered services provided by the out of network provider
- D-SNP plans must make efforts to recruit out of network providers providing services to enrollees during this time



# Prescription Cost Sharing



- Enrollees will have to pay Extra Help costs for covered drugs
  - In 2025, for less than or equal to 100% FPL pay \$1.60 for generic drugs and \$4.80 for brand name drugs.
  - In 2025, individuals through 150% FPL pay up to \$4.90 for generic drugs and up to \$12.15 for brand name drugs
  - These copays amounts will change every year
  - Unless in waiver or nursing home care
- We are waiting for additional information on other costs



# Grievances and Appeals

- Enrollees have the right to file a grievance
  - Can do so internally by filing a complaint with the plan or provider
  - Can do so externally by filing a complaint with 1-800-Medicare
- Enrollees have the right to appeal any decision where services are being denied, reduced, terminated, or suspended
  - First level of appeal is with the D-SNP plan directly





# Resources

Medicare.gov Special Needs Plans:  
[Special Needs Plans \(SNP\) | Medicare](#)

CMS D-SNPs Website:  
[Dual Eligible Special Needs Plans \(D-SNPs\) | CMS](#)

Justice in Aging: D-SNPs and What Advocates Need to Know  
[Dual Eligible Special Needs Plans \(D-SNPs\): What Advocates Need to Know - Justice in Aging](#)

# Thank you!

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