Understanding Medicare Dual-Eligible Special Needs Plans (D-SNPs)

What You Need to Know: Frequently Asked Questions

What does "dual-eligible" individual mean?
A dual-eligible individual is a person who is enrolled in both Medicare and Medicaid.

What are Medicare Dual-Eligible Special Needs Plans (D-SNPs)?
A Medicare dual-eligible special needs plan, also called D-SNP for short, is a special type of Medicare Advantage health plan for people enrolled in both Medicare and Medicaid. D-SNPs are new to the state of Illinois and help dual-eligibles coordinate their Medicare and Medicaid benefits through one health plan of your choice instead of care through Medicare and Medicaid separately. Enrollment in D-SNPs is voluntary, and an individual can enroll, disenroll, or change D-SNPs at any time.

When will D-SNPs be available in Illinois?
D-SNPs will be available in Illinois starting January 1, 2026.

What if I'm dual-eligible and I was receiving my health coverage through an MMAI plan?

Before January 1, 2026. some people with Medicare and Medicaid received their Medicare and Medicaid health benefits through a health insurance plan that was part of a program called the Medicare-Medicaid Alignment Initiative (MMAI). MMAI plans ended on December 31, 2025 and were replaced by D-SNPS which are very similar to MMAI plans. If you were enrolled in an MMAI plan, please see page 3 for more information about changes to your coverage.

Who is eligible to enroll in a D-SNP?
To enroll in a D-SNP, you must:

- Be enrolled in Medicare Part A & Part B or a Medicare Advantage plan
- Be enrolled in full Medicaid (be on Medicaid without a spenddown)
- Be age 21 and over
- Live in Illinois

You cannot enroll in a D-SNP if you are:

- Enrolled in the Medicaid Spenddown Program
- Receiving temporary Medicaid benefits
- Receiving care from the Illinois Breast and Cervical Cander Program

- Receiving private third-party insurance (such as employee or retiree coverage)
- Receiving care through an Illinois waiver program for people with Developmental Disabilities

What does a D-SNP cover?
The new health plans must offer all of the same services that Medicare and Medicaid cover, but the plans may also offer extra benefits.

A D-SNP will cover all your medical care, including long-term care services. This includes:

- doctor and specialist visits
- hospital care
- prescription drugs
- medical transportation
- dental, vision, and hearing
- mental health services
- long term care services that include:
    - Care you receive in your home through Community Care Program (CCP) or the Department of Rehabilitative Services (DRS)
    - Care in a nursing home

Do D-SNPs cover long-term care services and supports?
Yes. All D-SNPs must cover care in nursing homes or long-term care facilities. They also cover services you get at home through the Community Care Program or the Department of Rehabilitative Services (DRS). These types of care are called long-term services and supports (LTSS).

How do D-SNPs work?
D-SNPs will be offered by private health insurance companies that contract with Medicare and Medicaid. If you enroll in a D-SNP, you'll have one insurance card that covers all your services. All D-SNPs offered in Illinois are HMOs, which require you to use a list of doctors and providers called a network to receive coverage for services. Each plan has its own network, so make sure that your doctors are in-network and that your prescription drugs are covered by your plan.

All D-SNPs will also provide care coordination services to their members to help manage your healthcare services and make sure that you're receiving the care you need. Each member in a D-SNP is assigned a care coordinator who can help them with finding in-network doctors, understanding benefits, making appointments, and more.

Which companies will be offering D-SNPs?
The following D-SNP options will be available in Illinois:

- Aetna Medicare FIDE (HMO D-SNP)
- Humana Dual Fully Integrated (HMO D-SNP)
- Molina Medicare Complete Care Plus (HMO D-SNP)
- Wellcare Meridian Dual Align (HMO D-SNP)

What does a D-SNP cost?
Your costs with a D-SNP should cost no more than what you would pay with Medicare and Medicaid. You don't have to pay a monthly premium for your D-SNP or for Medicare Part B. However, you may have low co-pays for your prescription drugs as long as they are covered by the plan.

How can I enroll in a D-SNP plan?
You can enroll in a D-SNP by contacting the plan directly, calling 1-800-Medicare, or online by visiting www.medicare.gov. Some people in MMAI plans that end on December 31, 2025 may have been automatically enrolled into a D-SNP.

If I was enrolled in MMAI, what happened to my plan?
If you were enrolled in an MMAI plan, your plan ended on December 31, 2025. Most of the companies that have MMAI plans offer a D-SNP.

If you are dual-eligible and were enrolled in Aetna Better Health Premier Plan, Humana Health Plan, Meridian Complete, or Molina Healthcare then you were automatically moved to a D-SNP offered by the same company starting January 1, 2026.

BCBS Community MMAI does not offer a D-SNP in 2026. If you were enrolled in this plan, you should have received a notice that explained that your enrollment in the plan ended on December 31, 2025, and starting on January 1, 2026 your coverage will return to Original Medicare and Medicaid. Your coverage options were:

- Stay in Original Medicare and Medicaid and choose a Medicare Part D plan for your prescription drug coverage or Medicare will automatically enroll you in one.
- Enroll in a regular Medicare Advantage during the Medicare annual open enrollment period from October 15- December 7.
- Enroll in a D-SNP plan of your choice at any time if you prefer to continue receiving all your Medicare and Medicaid benefits through one health plan.

What if my doctor is not in my D-SNP network?
If your doctor or other provider is not in your D-SNP plan's network, you may be able to keep seeing them for 180 days after your new plan starts or for 90 days if you switch

from one D-SNP to another. You can ask your provider to join your plan's network or find a different provider that is in your plan's network.

What if I'm not happy with my D-SNP?
If you're not happy with your D-SNP, you can call your plan to file a complaint. You also have the right to change to another D-SNP or disenroll from your plan at any time of the year.

What happens if I disenroll from a D-SNP?
If you disenroll and do not select another D-SNP, Original Medicare and Medicaid will cover your health care. You will also need to enroll in a Part D plan for drug coverage. This means you may have to use multiple insurance cards when receiving care, including you red, white and blue Medicare care, a Medicaid card, and a Part D card for your prescription drugs.

If you receive long-term care services and supports and disenroll from a D-SNP, then you will need to choose a HealthChoice Illinois Long-Term Services and Supports plan that will only cover your long-term care services. If you do not choose and enroll in a plan, then Medicaid will automatically enroll you in one.

What happens if I'm enrolled in a D-SNP and I lose Medicaid?
D-SNPs are for people with Medicare and Medicaid so if you lose coverage, you're no longer eligible for the plan. However, your plan may allow you stay in the plan for up to 90 days while you try to get back on Medicaid or find other coverage. However, during this time you will not receive coverage for your Medicaid benefits and you may have to pay co-pays or co-insurance amounts for your Medicare services. Once your D-SNP coverage ends, you have three months to enroll in a Medicare Advantage health plan or Part D plan.

Where can I go for help or if I have questions?
For help comparing D-SNPs, enrolling or disenrolling from coverage, or for more information, contact:

- 1-800-Medicare (1-800-633-4227)
- The Illinois Senior Health Insurance Program (SHIP) at (800) 252-8966. SHIP provides free health insurance counseling for people with Medicare and their caregivers