



525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.dph.illinois.gov

To: All Program Participants

October 25, 2019

From: Dr. Jeffrey Maras, Administrator

RE: 2020 Illinois Off-Marketplace Open Enrollment **November 1, 2019 – December 15, 2019**

Dear Participant:

You are receiving this letter because you are currently enrolled in either the Illinois Department of Public Health's Medication Assistance Program or the CARE Services Program. The Illinois Department of Public Health strongly encourages you to enroll in health care coverage for 2020. You are able to enroll in an insurance plan between **November 1, 2019 and December 15, 2019**. **Remember**, the Program can only assist with premium payments on **SILVER** level plans. The insurance providers listed below offer plans that can be purchased outside of the Marketplace for those participants who are not eligible to enroll through the Marketplace.

SILVER level plans from the following insurance providers:

- Blue Cross Blue Shield of Illinois**
- Health Alliance

***IMPORTANT!** Enrollments **MUST** be completed by **December 15th** for **January 1st** start date.

**** Please Note:** Blue Cross Blue Shield of Illinois is currently in network with CVS Caremark Specialty Pharmacy for enrollees through a special agreement brokered with the Illinois Department of Public Health Medication and Premium Assistance Program.

How to Enroll:

1. Gather a list of the following to prepare for your 2020 Off-Marketplace Enrollment. Take this with you to your appointment, if enrolling with a Case Manager or Medical Benefits Coordinator:
 - ✓ State ID or other form of identification with your picture
 - ✓ Piece of mail such as government mail, phone or utility bill with your current address
 - ✓ List of medications, primary care physicians, specialists, preferred clinics/hospitals
2. Enroll in your selected Benefit Plan:
 - a. Short Term Insurance Plans and Association Health Plans, Legacy and **COBRA are not** eligible for Premium Assistance.
 - b. The Illinois Department of Public Health Medication and Premium Assistance Program is allowing participants to let their 2019 policies roll over for 2020, but important action is required—**failure to complete these steps can possibly result in 2020 policy payments not being approved**. Please see the Roll Over letter and Roll Over Attestation form located at the back of this packet for instructions.

3. **Confidential Fax:** 217-785-8013 or **Email:** DPH.ADAPFAX@Illinois.gov a copy of your Enrollment for both 2020 medical and dental plans. Please wait 15 days to confirm with your insurance plan that premium payments have been made by the Department.
4. **Confidential Fax:** 217-785-8013 or **Email:** DPH.ADAPFAX@Illinois.gov a copy of your 2020 Insurance cards and Premium invoice with Member ID, Billing ID, the new 2020 premium, and the mailing address.

Please Note:

- Individuals enrolled in premium assistance **must fill all prescriptions** through the Program's current contracted pharmacy. Failure to fill through the Program's contracted pharmacy, within 90 days of premium assistance approval, will result in your termination from the Premium Assistance Program.
- **IMPORTANT!** As of 10/1/2019 The Illinois Department of Public Health will have made payments to cover the remaining months of your 2019 health insurance plan. **Payments towards your 2020 insurance plan cannot be made until you have submitted your 2020 insurance plan information.**
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THERE ARE TWO WAYS TO ENROLL!

OPTION 1: You are encouraged to reach out to your regional Medical Benefits Coordinator/Medical Case Manager for assistance in enrolling in eligible Marketplace plans.

Agency	Counties Served by each Agency	Medical Case Manager or Medical Benefits Coordinators
Winnebago County Health Department	Boone, Bureau, Carroll, DeKalb, Henry, Jo Daviess, Lee, Mercer, Ogle, Rock Island, Stephenson, Whiteside, Winnebago	309-762-5433 michelle@tpgc.org
Positive Health Solutions - UIC College of Medicine in Peoria	Fulton, Hancock, Henderson, Knox, LaSalle, Marshall, Mason, McDonough, McLean, Peoria, Putnam, Stark, Tazewell, Warren, and Woodford	309-671-8427 bclayton@uic.edu
SIU School of Medicine	Adams, Brown, Cass, Christian, DeWitt, Green, Logan, Macon, Menard, Montgomery, Moran, Moultrie, Piatt, Pike, Sangamon, Schuyler, Scott and Shelby	217-545-8257 dwhite39@siumed.edu
St. Clair County Health Department	Bond, Calhoun, Clinton, Fayette, Jersey, Macoupin, Madison, Marion, Monroe, Randolph, St. Clair, Washington	618-825-4483 Gary.gasawski@co.st-clair.il.us
Jackson County Health Department	Alexander, Edwards, Franklin, Gallatin, Hamilton, Hardin, Jackson, Jefferson, Johnson, Massac, Perry, Pope, Pulaski, Saline, Union, Wabash, Wayne, White, and Williamson	618-684-3143 (Ext. 261) carriev@jchdonline.org
Champaign-Urbana Public Health District	Champaign, Clark, Clay, Coles, Crawford, Cumberland, Douglas, Edgar, Effingham, Ford, Iroquois, Jasper, Kankakee, Lawrence, Livingston, Richland, and Vermillion	217-531-4316 skilian@c-uphd.org
AIDS Foundation of Chicago	DuPage, Grundy, Kane, Kendall, Lake, McHenry and Will	847-782-4211 marihernandez@catholiccharities.net 630-264-1819 estherh@odhcil.org
	Cook	312-334-0978 LArguello@aidschicago.org 312-784-9085 evillanueva@aidschicago.org 312-784-9075 rmurga@aidschicago.org AFC Health Insurance Hotline: 312-784-9060

OPTION 2: Contact these insurance carriers directly. Both these carriers offer plans outside of the Marketplace. You must contact the carrier directly and speak to a sales associate directly.

- Health Alliance – (866) 247-3296
- Blue Cross Blue Shield – (866) 514-8044

ACA Passport for Enrollment Assistance Coordination with IDPH

Bring this form and all documentation listed below to your appointment with your Medical Benefits Coordinator or Medical Case Manager. You can also use this form if you are self-enrolling over the phone or through the [Get Covered Illinois](#) website.

Your Name: _____ DOB: _____

Documents to bring to my appointment for ACA Enrollment:

- State ID or other form of identification with my picture
- 2018 Tax forms- Federal 1040 (If you filed a Tax Return)
- Pay Stubs or checks from my job dated within the last 90 days (if you are currently working)
- Piece of mail such as government mail, phone or utility bill, rent or lease receipt with my current address.
- List of medications, physicians, specialist, and clinics\hospitals you use

MY MEDICATIONS:

1.	5.
2.	6.
3.	7.

My primary care provider is: _____ at
_____ clinic/hospital.

My specialist physician is: _____ at
_____ clinic/hospital.

Other specialist I see: _____ at
_____ clinic/hospital.

My psychiatrist is: _____ at
_____ clinic/hospital.

I currently use the following local pharmacy: _____.

If I became really sick, I would like to go to what hospital _____.



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Date: October 25, 2019

To: Premium Assistance Participants

From: Dr. Jeffery Maras, Administrator

Regarding: Preparation for 2020 Illinois Insurance Marketplace Open Enrollment

The 2020 Illinois Insurance Marketplace open enrollment period will be a six week window beginning on **November 1, 2019** and ending on **December 15, 2019**.

The Department has made the decision to allow clients to roll their 2019 health insurance plans (Medicare/Illinois Marketplace plans) over into 2020.

If you are currently enrolled in a 2019 Medicare/Illinois Marketplace plan, and you do not select a new plan for 2020, the Medicare/Illinois Health Insurance Marketplace will either enroll you in the same plan for 2020, or if the plan is not offered, a similar plan.

Auto enrollment will take place and become effective on **December 16, 2019**. Clients who wish to roll over their 2019 plan will need to complete the attached ***Health Insurance Continuation Attestation***. **This form requires a third-party signature, which must be a Ryan White Facility Representative; i.e., Case Manager, Medical Benefit Coordinator, Retention Specialist, or Lead Agent.**

It is **important to note** that **all** 2019 insurance plans will be paid in full by the Department's Ryan White Premium Assistance Program through December 31, 2019, and then be **closed out** by November 1 2019. This means that all clients, including clients choosing to roll over their 2019 plans, **must submit 2020 premium information** before any 2020 payments will be sent out by the Program.

If you have any questions regarding the Open Enrollment process for 2020 Medicare and Illinois Marketplace plans, please contact the Ryan White Hotline at 1-800-825-3518.

Client First Name	Middle Initial	Client Last Name
Social Security Number (Leave blank if no valid SS number for client)		Date of Birth (mm/dd/yyyy)

By signing this affidavit, I confirm that I will not be making any changes to my health insurance plan during the 2020 Open Enrollment period. This means that my current 2019 Health Insurance Plan will roll over into the 2020 calendar year. I acknowledge that it is my responsibility, as the insurance policy holder, to notify the Ryan White Part B Program of any changes to my health insurance policy.

I have attached the rollover notification from my health insurance company. This notification contains the 2020 health insurance plan name and premium amount.

Client Signature (age 12 and older)

Date

Parent/Guardian (if under 12) or Legal Representative

Date

Signature of Facility Representative

Date

Name of Facility