

The PsychU Guide To The Illinois Mental Health System

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You should seek independent, qualified professional advice to ensure that your organization is in compliance with the complex legal and regulatory requirements governing health care services, and that treatment decisions are made consistent with the applicable standards of care.

Except as otherwise indicated, the information provided is accurate to the best of Otsuka's knowledge as of June 2016.

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Appendix A: Sources







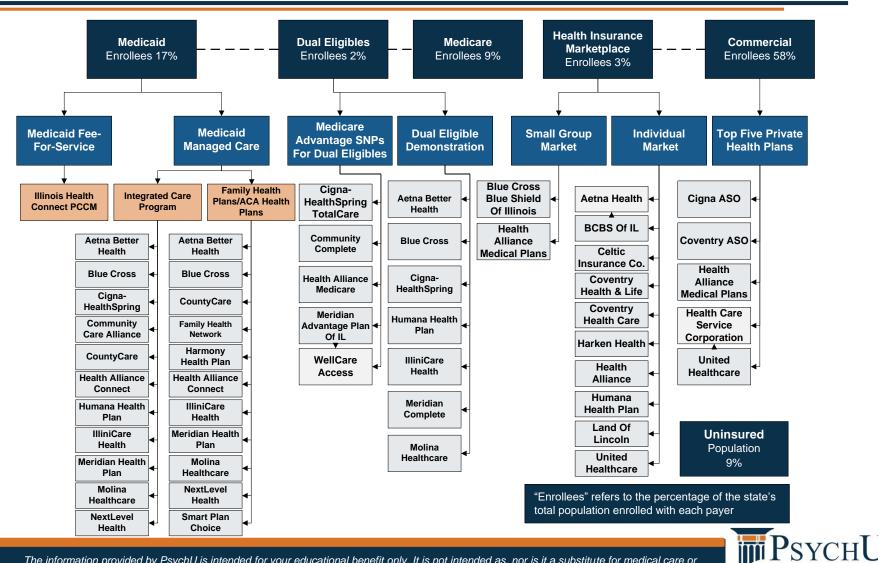
A. ILLINOIS HEALTH CARE MARKETPLACE OVERVIEW



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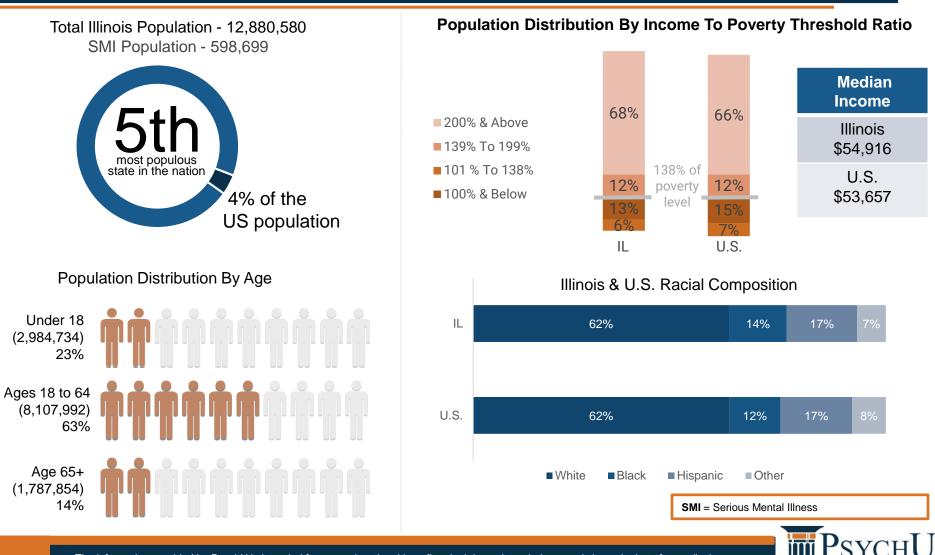
1. Physical Health Care Coverage Map



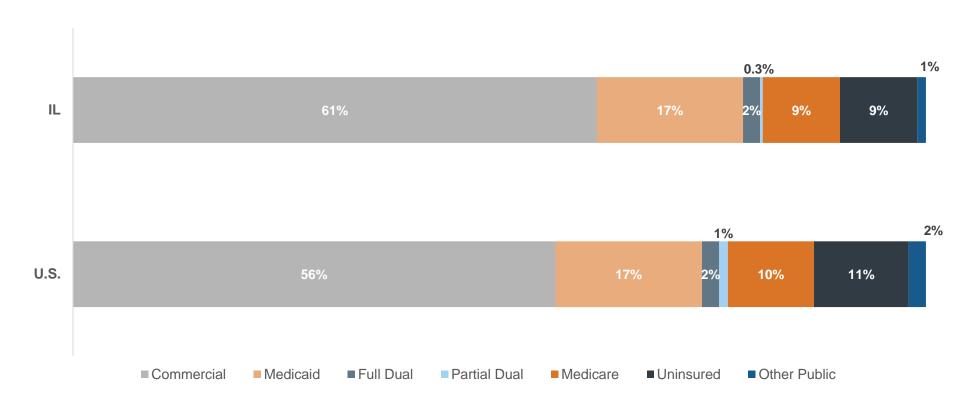
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2. **Population Demographics**



3. Population Distribution By Payer: United States v. Illinois





4. Largest Health Plans By Enrollment

Plan Name	Plan Type	Enrollment*
Health Care Service Corporation	Commercial	8,086,368
Medicare FFS	Medicare	1,476,750
Medicaid FFS	Medicaid	1,100,731
UnitedHealthcare	Commercial	704,106
Cigna	Commercial Administrative Services Only (ASO)	516,312
Coventry	Commercial ASO	487,041
Meridian Health Plan	Medicaid	349,026
Illinois Health Connect	Medicaid PCCM	322,912
Blue Cross Blue Shield	Medicaid	281,474
Health Alliance Medical Plans	Commercial	255,863

*Commercial and Medicare enrollment as of 2014. Medicaid enrollment as of May 2016.

FFS = Fee-For-Service PCCM = Primary Care Case Management



5. Largest Health Plans By Estimated Serious Mental Illness (SMI) Enrollment

Plan Name	Plan Type	Enrollment*	SMI Enrollment
Medicare FFS	Medicare	1,476,750	248,094
Health Care Service Corporation	Commercial	8,086,368	193,102
Medicaid FFS	Medicaid	1,100,731	66,296
Illinois Health Connect	Medicaid PCCM	322,912	19,449
Meridian Health Plan	Medicaid	349,026	19,448
UnitedHealthcare	Commercial	704,106	16,814
Blue Cross Blue Shield	Medicaid	281,474	15,684
Family Health Network	Medicaid	240,316	13,390
Cigna	Commercial ASO	516,312	12,330
Coventry	Commercial ASO	487,041	11,631

*Commercial and Medicare enrollment as of 2014. Medicaid enrollment as of May 2016.

ASO = Administrative Service Only FFS = Fee-For-Service PCCM = Primary Care Case Management



6. Health Insurance Marketplace Overview

Health Insurance Marketplace		
Type Of Marketplace	Federal – State Partnership	
Individual Enrollment Contact	 www.healthcare.gov 1-800-318-2596 	
Small Business Enrollment Contact	 www.healthcare.gov/small-businesses 1-800-706-7893 	



7. Health Insurance Marketplace Plans

Individual Market Health Plans

- Aetna Health, Inc.
- Blue Cross Blue Shield of Illinois
- Celtic Insurance Company
- Coventry Health and Life Co.
- Coventry Health Care of Illinois, Inc.
- Harken Health Insurance Company
- Health Alliance Medical Plans, Inc.
- Humana Health Plan, Inc.
- Land of Lincoln Mutual Health Insurance Company
- UnitedHealthcare of the Midwest, Inc.

Small Group Market Plans

- Blue Cross Blue Shield of Illinois
- Health Alliance Medical Plans, Inc.





B. ILLINOIS MEDICAID SYSTEM OVERVIEW



8. Delivery System, Risk, & Federal Participation

Medicaid Financial Delivery System			
Is Managed Care Mandatory For Populations With Serious Mental Illness (SMI)?	Yes, in mandatory managed care geographic regions		
Is Managed Care Mandatory For Dual-Eligibles?	No		
Total Medicaid Population Distribution	35% in fee-for-service (FFS)65% in managed care		
Medicaid Beneficiaries With SMI: <i>Primary Service System</i>	 OPEN MINDS estimates that 52% of the SMI population Mandatory managed care regions: OPEN MINDS estipopulation is served by managed care Non-mandatory managed care counties: The majority FFS, as there are no managed care plans serving the counties. 	imates that 60% of the SMI of the population is enrolled in	
Medicaid Financing & Risk Arrangements: Beha	vioral Health		
Traditional Behavioral Health Services			
Specialty Behavioral Health Services	 Fee-for-service population: Covered FFS by the state Managed care population: Included in the managed c 		
Pharmaceuticals	capitation rate		
Federal Financial Participation			
FY 2017 Federal Medical Assistance Percentage (FMAP)		51.30%	
CY 2016 Newly Eligible FMAP (Expansion Population)		100%	



9. Expansion Decision

State Medicaid Expansion Decision		
Participating In Expansion?	Yes	
Date Of Expansion	2014	
Medicaid Eligibility Income Limit For Able-Bodied Adults	133% of FPL Note: The PPACA requires that 5% of income be disregarded with determining eligibility	
Legislation Used To Expand Medicaid	Senate Bill 26, 98 th General Assembly	
Medicaid Expansion Enrollees (As Of September 2015)	655,224	

FPL = Federal Poverty Level



10. Care Coordination Entities

Medicaid Care Coordination Entities For Chronic Care Populations (Including SMI)		
Managed Care Plan		None
Accountable Care Organization (ACO) Program		Illinois' ACO members transitioned to full-risk managed care in 2016.
Health Home		None, but Illinois has indicated an intention to submit a SPA to implement health homes in the future.
Medical Home		None
Primary Care Case Management Model (PCCM)	~	Participation in an Illinois Health Connect PCCM is required for most populations in counties where managed care is not mandatory.

ACOs = Accountable Care Organizations SPA = State Plan Amendment SMI = Serious Mental Illness

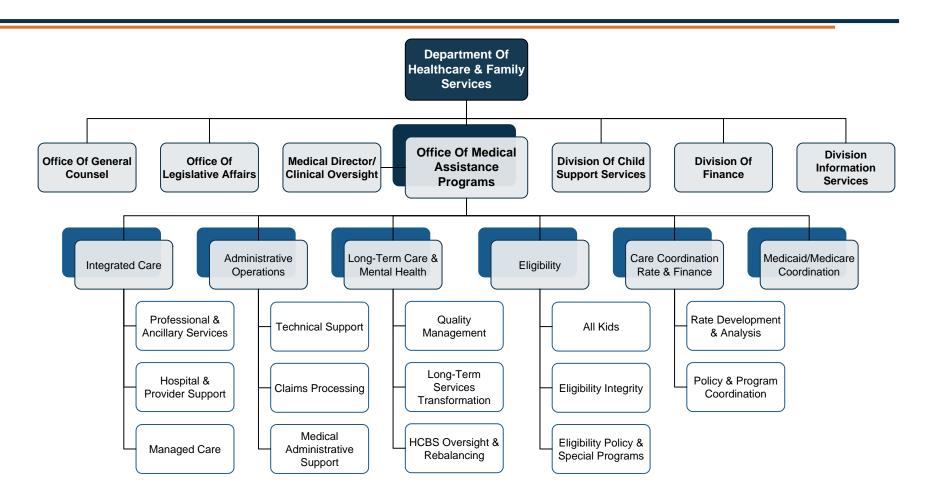


11. The Uninsured

State Agency Responsible For Uninsured Citizens & Delivery System Model		
Physical Health Services	The Illinois Department of Public Health provides funding for physical health services for the safety-net population.	
Mental Health Services	The Illinois Department of Human Services (DHS) Division of Mental Health (DMH) provides funding for mental health services for the safety-net population.	
Addiction Treatment Services	DHS is the agency responsible for funding addiction treatment programs for the safety-net population.	



12. Organizational Chart





13. Key Leadership

Name	Position	Department
Felicia F. Norwood	Director	Department Of Healthcare & Family Services
Teresa Hursey	Acting Medicaid Director	Division Of Medical Programs
Kelly Cunningham	Deputy Administrator For Long-Term Care	Division Of Medical Programs
Jacquetta Ellinger	Deputy Administrator Of Eligibility Policy	Division Of Medical Programs
Robert Mendonsa	Deputy Administrator Of Care Coordination	Division Of Medical Programs



14. Program Benefits

Federally Mandated Services

- Inpatient hospital services other than services in an institution for mental disease (IMD)
- Outpatient hospital services
- Rural Health Clinic services
- Federally Qualified Health Center (FQHC) services
- Laboratory and X-ray services
- Nursing facilities for individuals 21 and over
- Early and Periodic Screening and Diagnosis and Treatment (EPSDT)
- Family planning services and supplies for individuals of child-bearing age
- Physician services
- · Medical and surgical services of a dentist
- Home health services
- Nurse midwife services
- Nurse practitioner services
- Pregnancy services, including tobacco cessation programs
- Free standing birth centers
- · Non-emergency transportation to medical care

Illinois' Optional Services

- Case management services
- · Chiropractic services
- Clinic services
- Dental services
- Diagnostic services
- Eyeglasses
- · Home and community-based services
- Hospice care services
- Occupational and physical therapy
- · Other practitioner services
- Podiatric services
- Prescribed drugs
- Preventive services
- Prosthetic devices
- Rehabilitative services
- Speech, hearing, and language therapy services
- Tuberculosis services
- Inpatient psychiatric services and nursing facility services for individuals 21 and under
- Intermediate care facility for the developmentally disabled (ICF/DD)





C. ILLINOIS MEDICAID FINANCING & SERVICE DELIVERY SYSTEM



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15. Overview

Medicaid System Characteristics		
Characteristics	Medicaid Fee-For-Service (FFS)	Medicaid Managed Care
Enrollment (May 2016)	1,100,731	2,069,269
SMI Enrollment	88,302	97,148
Management	 Acute Services: Department of Healthcare and Family Services Behavioral Health Services: Managed by Beacon Health Options (ASO) 	Thirteen MCOs and MCCNs
Payment Model	 Acute and Behavioral Health Services: FFS Additional care coordination fee for those enrolled in Illinois Health Connect (PCCM) 	
Geographic Service Area	 FFS: Statewide Illinois Health Connect (PCCM): Available in non-mandatory managed care regions only 	 Five mandatory managed care regions encompassing 30 counties Fifteen counties with non-mandatory managed care plans

Total Medicaid Beneficiaries: 3,170,000 | Total Medicaid With SMI Beneficiaries: 185,450

	ASO = Administrative Service Only PCCM = Primary Care Case Management	MCCN = Managed Care Community Network SMI = Serious Mental Illness	MCOs = Managed Care Organizations	
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16. Enrollment By Eligibility Group

Mandatory Fee-For-Service (FFS) Enrollment

- 1. Residents of counties where no managed care plans are offered
- 2. Children under 19 who are eligible for SSI under Title XVI
- 3. Children under 19 who are in foster care or out of home placement
- 4. Children under 19 who are receiving foster care or adoption assistance under Title IV-E
- 5. Children under 19 who are eligible under 1902(e)(3) of the act
- 6. Individuals receiving partial benefits

Option To Enroll In FFS Or Managed Care

- 1. Dual eligibles in counties with dual demonstration
- 2. American Indians/Alaskan Natives
- 3. Residents outside the mandatory managed care regions where a managed care plan is offered

Mandatory Managed Care Enrollment

Members of the following populations who are residents of mandatory managed care counties:

- 1. Children
- 2. Parents and caretaker relatives
- 3. Medicaid expansion population
- 4. Aged, blind, and disabled population



17. Fee-For-Service (FFS) Program: Program Overview

- Fee-for-service (FFS) enrollment as of May 2016 was 1,100,731.
- Illinois considers its primary care case management (PCCM) program, Illinois Health Connect (IHC), a FFS program, and its enrollment count is included in the FFS population.
 - As of May 2016, PCCM enrollment was 322,912.
 - The PCCM program is available for beneficiaries residing in nonmandatory managed care counties only.
 - The PMPM case management fee is \$2.00 for children, \$3.00 for adults, and \$4.00 for disabled or elderly adults.
- In the PCCM counties, IHC enrollment:
 - Is mandatory for most children and families, the ACA expansion population, and the non-dual aged, blind, and disabled population
 - Is optional for the dual eligible and Native American populations
 - Excludes certain children





18. Fee-For-Service (FFS) Program: Behavioral Health Benefits

Beacon Health Options serves as the behavioral health care ASO for the traditional FFS and Illinois Health Connect populations.

FFS Mental Health Benefits

- 1. Crisis intervention
- 2. Psychotropic medication administration, management, and training
- 3. Individual, family, and group psychotherapy
- 4. Community support
- 5. Assertive community treatment (ACT)
- 6. Psychosocial rehabilitation services
- 7. Mental health intensive outpatient
- 8. Case management
- 9. Transition linkage and aftercare

FFS Substance Abuse Treatment Benefits

- 1. Admission and discharge assessment
- 2. Individual and group counseling
- 3. Detoxification
- 4. Medically monitored detoxification
- 5. Day treatment
- 6. Residential adolescent rehabilitation
- 7. Medication monitoring
- 8. Psychiatric diagnostic

ASO = Administrative Service Only



19. Fee-For-Service (FFS) Program: Serious Mental Illness (SMI) Population

- 48% of the SMI population is estimated to be served in the FFS delivery system.
 - Non-mandatory managed care counties: The majority of the population is enrolled in FFS, as there are no managed care plans serving the disabled population in those counties.
 - Mandatory managed care regions: *OPEN MINDS* estimates that 60% of the SMI population is served by managed care.





20. Managed Care Program: Program Overview

- Managed care enrollment as May 2016 was 2,069,269.
- There are three Medicaid programs available in the counties where managed care enrollment is mandatory:
 - Family Health Plans/Affordable Care Act Health Plans (FHP/ACA): Delivers Medicaid services to parents and families, most children, and the ACA expansion population. Enrollment is mandatory in 30 counties.
 - Integrated Care Program (ICP): Delivers Medicaid services to the non-dual eligible aged, blind, and disabled population. Enrollment
 is mandatory in 30 counties.
 - Medicare-Medicaid Alignment Initiative: Delivers Medicaid services to the dual eligible population.
- Additionally, some health plans may choose to operate in counties without mandatory managed care. Medicaid enrollees must opt-in to managed care in these counties.
 - There are FHP/ACA plans that operate in 15 non-mandatory counties.
- Illinois Medicaid contracts with two types of managed care health plans:
 - Managed Care Organizations (MCOs): Traditional insurance-based health maintenance organizations that are paid on a full-risk capitated basis to cover almost all Medicaid services.
 - Managed Care Community Networks (MCCNs): Provider-owned and local government health system entities that operate like MCOs and are paid on a full-risk capitated basis to cover almost all Medicaid services.
- Prior to 2016, the Illinois Medicaid program contracted with Accountable Care Entities (ACEs) and Care Coordination Entities (CCEs). The CCEs and ACEs either transitioned their membership to MCO/MCCNs or were acquired by MCO/MCCNs in 2016.



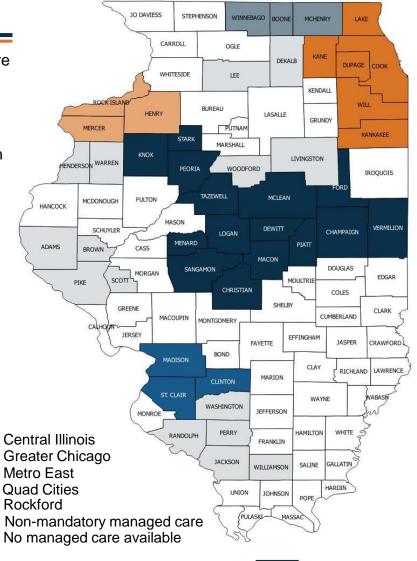
21. Managed Care Program: Regional Overview

There are five regions, encompassing 30 counties, where managed care is mandatory for children and families, Accountable Care Act (ACA) expansion adults, and the non-dual eligible aged, blind, and disabled population.

In the other 72 counties, managed care is optional and dependent upon the plans that are available.

Region	Fee-For- Service (FFS) Enrollment*	Managed Care Enrollment*	Total Medicaid Enrollment*
Central Illinois	87,742	219,313	307,055
Greater Chicago	523,286	1,589,445	2,112,731
Metro East	37,247	105,976	143,223
Quad Cities	15,876	36,767	52,643
Rockford	42,618	107,924	150,442
Non-Mandatory Managed Care Plans Available	111,871	9,844	121,715
No Managed Care Available	349,125		349,125

*Total enrollment as of FY 2015. Managed care enrollment as of May 2016. FFS enrollment derived by subtraction.



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22. Managed Care Program: Behavioral Health Benefits

Behavioral health and pharmacy benefits are included in the MCO and MCCNs' capitation rate.

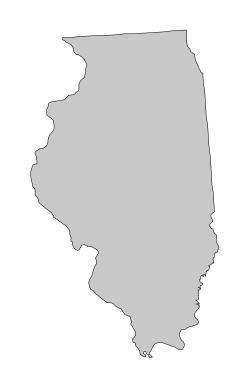
Managed Care Mental Health Benefits	Managed Care Substance Abuse Treatment
1. Crisis intervention	Benefits
2. Psychotropic medication administration, and training	1. Admission and discharge assessment
3. Individual, family, and group psychotherapy	2. Individual and group counseling
4. Community support	3. Detoxification
5. Assertive community treatment (ACT)	4. Medically monitored detoxification
6. Psychosocial rehabilitation services	5. Day treatment
 Mental health intensive outpatient 	6. Residential adolescent rehabilitation
8. Case management	7. Medication monitoring
9. Transition linkage and aftercare	8. Psychiatric diagnostic

MCCN = Managed Care Community Network **MCOs =** Managed Care Organizations



23. Managed Care Program: Serious Mental Illness (SMI) Population

- 52% of the SMI population is estimated to be served by managed care.
 - Non-mandatory managed care counties: The majority of the population is enrolled in fee-for-service (FFS), as there are no managed care plans serving the disabled population in those counties.
 - Mandatory managed care regions: OPEN MINDS estimates that 60% of the SMI population is served by managed care.





24. Care Coordination Initiatives

- Illinois' pending 1115 waiver, Path to Transformation, includes plans to submit a state plan amendment (SPA) to create health homes for individuals with serious mental illness (SMI); however, no amendment has been submitted as of June 2016.
- Illinois' Medicaid accountable care organization (ACO) membership will transition to full-risk managed care by July 2016, but most ACOs will continue to coordinate care for their members through agreements with partnering MCOs/MCCNs.



MCCN = Managed Care Community Network **MCOs =** Managed Care Organizations



25. Care Coordination Initiatives: Accountable Care Entities (ACE) & Care Coordination Entities (CCE)

- Accountable Care Entities (ACEs) for children, families, and ACA adults and Care Coordination Entities (CCEs) for seniors, persons with disabilities and children with special needs served as transitional organizations as the state moved toward increasing implementation of full-risk managed care.
- The ACEs and CCEs functioned as accountable care organizations (ACOs), providing care coordination for risk and performance-based fees, but receiving compensation for other services on a fee-for-service basis.
- CCEs and ACEs were funded through 2015 by the state. As of January 1, 2016, the state discontinued making per member per month care coordination payments to the ACOs.
- The 17 ACOs in the program transitioned their membership to MCO/MCCNs, reorganized themselves into MCO/MCCNs, or subcontracted with MCOs to provide care coordination during SFY 2016.

MCCN = Managed Care Community Network

MCOs = Managed Care Organizations



26. Program Waivers Impacting The Serious Mental Illness (SMI) Population

Waiver Title	Waiver Description	Waiver Type	2016 Enrollment Cap	Effective Date	Expiration Date
IL MLTSS Waiver (IL-01) (concurrent with IL Supportive Living Program Waiver)	Provides HCBS through prepaid inpatient health plans to dual eligibles who reside in the Greater Chicago and Central Illinois regions.	1915 (b)	None	06/01/14	05/31/19
IL Supportive Living Program (0326.R03.00) (concurrent with IL MLTSS Waiver)	Provides assisted living services for physically disabled individuals ages 22 to 64 and persons over the age of 65 who require a nursing facility level of care.	1915 (c)	13,800	07/01/12	06/30/17
IL HCBS Waiver for Persons Who are Elderly (0143.R05.00)	Provides home and community-based services (HCBS) to physically disabled individuals ages 60 to 64 and individuals over the age of 65 who require a nursing facility level of care.	1915 (c)	44,250	01/01/14	12/31/18
IL Persons with Disabilities (0142.R05.00)	Provides HCBS for physically disabled individuals ages 0 to 59 who require a nursing facility level of care.	1915 (c)	33,489	01/01/14	12/31/18



Program Waivers Impacting The Serious Mental Illness (SMI) Population (Continued)

Waiver Title	Waiver Description	Waiver Type	2016 Enrollment Cap	Effective Date	Expiration Date
IL HCBS Waiver for Persons with Brain Injury (0329.R03.00)	Provides HCBS for persons of all ages with a brain injury who require a nursing facility level of care.	1915 (c)	4,905	07/01/12	06/30/17
The Path To Transformation*	Details Illinois' plan to consolidate its nine HCBS waivers and use the savings to implement programs for individuals with SMI.	1115		Pending*	Pending*

*The Path to Transformation waiver proposal was submitted in 2014 under a previous Governor's administration. Although the Centers For Medicare & Medicaid Services (CMS) lists its status as pending, it is most likely stalled awaiting review and revision by Governor Rauner's administration.

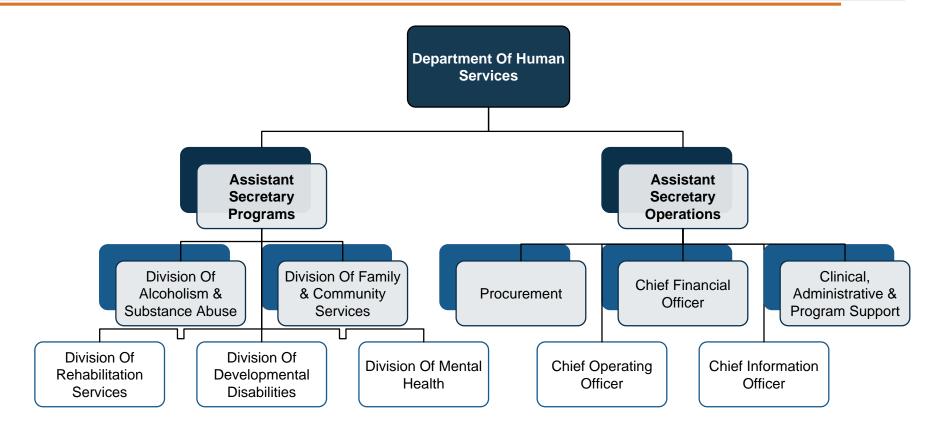




D. ILLINOIS BEHAVIORAL HEALTH ADMINISTRATION & FINANCE SYSTEM



27. Department Of Human Services (DHS) Organizational Chart





28. Department Of Human Services (DHS) Key Leadership

Name	Position	Department
James T. Dimas	Secretary	DHS
Vacant	Assistant Secretary Of Programs	DHS
Vacant	Assistant Secretary Of Operations	DHS
Maria Bruni	Acting Director	Division Of Alcoholism
Greg Fenton	Director	Division Of Developmental Disabilities
Diane Grigsby-Jackson	Director	Division Of Family & Community Services
Diana Knaebe	Director	Division Of Mental Health
Kris Smith	Director	Division Of Rehabilitation Services



29. State Psychiatric Institutions

Institution	Location	Beds	FY 2015 Average Daily Census
Alton Mental Health Center	Alton	125	121
Chester Mental Health Center	Chester	302	248
Chicago-Read Mental Health Center	Chicago	130	111
Choate Mental Health Center	Anna	79	78
Elgin Mental Health Center	Elgin	390	387
Madden Mental Health Center	Hines	173	117
McFarland Mental Health Center	Springfield	140	131
Total		1,339	1,193



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30. Accountable Care Organizations (ACOs)

Medicare Shared Savings Program

- Adena Healthcare Collaborative, LLC 1.
- Advocate Physician Partners 2. Accountable Care, Inc.
- 3. Alexian Brothers ACO
- AmpliPHY of Kentucky ACO, LLC 4.
- Baptist Health Care Partners, LLC 5.
- BJC HealthCare ACO, LLC 6.
- 7. Centegra Health and Wellness Network
- Chicago Health System ACO, LLC 8.
- Christie Clinic Physician Services, 9. LLC
- 10. Deaconess Care Integration, LLC
- 11. Franciscan Alliance ACO
- 12. Franciscan Union ACO
- 13. Genesis ACO, LLC
- 14. Heartland Physicians ACO, Inc.
- 15. Hospital Sisters HealthSystem ACO, LLC
- 16. Illinois Health Partners ACO, LLC
- 17. Illinois Rural ACO

- 18. Illinois Rural Community Care Organization (IL-RCCO)
- 19. Independent Physicians ACO of Chicago, LLC
- 20. Ingalls Care Network, LLC
- 21. Iowa Health Accountable Care, LLC
- 22. Iowa Rural ACO
- 23. Jackson Purchase Medical Associates, PSC
- 24. Loyola Physician Partners ACO, LLC

Presence Health Partners

Rockford Health System

United Hospital System

- 25. Medicare Value Partners
- 26. Mercy Health System ACO
- 27. Northwestern Medicine Physician Partners ACO
- 28. OSF Healthcare System
- 29. Primary Comprehensive Care ACO, LLC
- Rockford Health System
- 31. Springfield Clinic ACO, LLC
- 32. SSM ACO, LLC
- 33. St. Louis Physician Alliance ACO, LLC

Commercial			
ACO	Commercial Insurer		
Adventist Health-Illinois	Cigna		
Advocate Health Care	UnitedHealthcare		
AdvocateCare	BCBS of Illinois		
Alexian Brothers ACO	BCBS of Illinois		
BCBSIL / NorthShore University HealthSystem	BCBS of Illinois		
Franciscan Alliance ACO	Anthem Blue Cross and Blue Shield, Cigna		
Genesis ACO, LLC	Wellmark		
Iowa Health Accountable Care, LLC	UnitedHealthcare, Wellmark		
Kane County IPA	BCBS of Illinois		
Northwestern Medicine Physician Partners ACO	Cigna		
OSF Healthcare System	BCBS of Illinois		

Cigna

Humana

Humana



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APPENDIX A: SOURCES



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A. Health Care Marketplace Overview

1. Physical Health Care Coverage Map

- United States Department of Health and Human Services. (2015, December 22). 2016 QHP Landscape Individual Market Medical. Retrieved February 8, 2016 from https://data.healthcare.gov/dataset/2016-QHP-Landscape-Individual-Market-Medical-Excel/k2hw-8vcp
- United State Department of Health and Human Services. (2015, December 22). 2016 QHP Landscape SHOP Market Medical. Retrieved February
 8, 2016 from https://data.healthcare.gov/dataset/2016-QHP-Landscape-SHOP-Market-Medical-Excel/vcra-66c2
- United States Department of Health and Human Services. (March 11, 2016). Addendum to the Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report. Retrieved March 24, 2016 from https://aspe.hhs.gov/sites/default/files/pdf/188026/MarketPlaceAddendumFinal2016.pdf
- Illinois Department of Healthcare and Family Services. (2016, May 1). Total Care Coordination Enrollment for All Programs. Retrieved June 9, 2016 from http://www.illinois.gov/hfs/MedicalProviders/cc/Pages/TotalCCEnrollmentforAllPrograms.aspx
- OPEN MINDS Database

2. Population Demographics

- United States Census Bureau. 2014 Population Estimates. Retrieved May 3, 2016 from <u>http://www.census.gov/popest/data/state/totals/2014/index.html</u>
- United States Census Bureau. 2014 Demographic and Housing Estimates. Retrieved May 3, 2016 from <u>http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml</u>
- United States Census Bureau. State Median Income. Retrieved May 3, 2016 from https://www.census.gov/hhes/www/income/data/statemedian/index.html
- United States Census Bureau. Poverty. Retrieved May 3, 2016 from https://www.census.gov/hhes/www/cpstables/032015/pov/pov46_002.htm

3. Population Distribution By Payer: United States v. Illinois

• OPEN MINDS. (2016) Serious Mental Illness Prevalence Estimates.





A. Health Care Marketplace Overview (Continued)

4. Largest Health Plans By Enrollment

- OPEN MINDS. (2016, March). Database
- Centers for Medicare and Medicaid Services. (2014). Medicare Geographic Variation State/County Table- All Beneficiaries. Retrieved April 29, 2016 from http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Geographic-Variation/GV_PUF.html
- Illinois Department of Healthcare and Family Services. (2016, May). Enrollment for Family Health Plans/ACA Adults. Retrieved June 9, 2016 from https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/FHPEnrollment.aspx
- Illinois Department of Healthcare and Family Services. (2016, May). Enrollment for Integrated Care Program. Retrieved June 9, 2016 from http://www.illinois.gov/hfs/MedicalProviders/cc/Pages/ICPEnrollment.aspx

5. Largest Health Plans By Estimated Serious Mental Illness (SMI) Enrollment

- OPEN MINDS. (2016, March). Database
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