

In October 2026, Illinois Central Management Services learned that BJC HealthCare is terminating its Medicare Advantage Prescription Drug (MAPD) contract effective January 1, 2027.

How many members will be impacted?
There are approximately 5,000 members impacted by this termination based on the criteria outlined below:

- Primary Care Provider (PCP) - members assigned to a PCP or who have seen a PCP at least once within a 3-year period prior to the termination processed date.
- Specialist - members who have received services at least once within a 6-month period prior to the termination processed date except for behavioral health providers (e.g. psychiatrist, psychologist, LCSW, LPC, marriage/family therapist, drug and alcohol counselor). For Behavioral Health as noted, notification will be sent to all members who received services at least once with a 3-year period prior to the term date processed.
- Hospitals – members who have received services at least once within a 6-month period prior to the termination processed date.

Have members been notified?
Letters and automated phone calls to those who met the previously outlined criteria, when required, began on/ around September 3, 2026.

What if I'm in the middle of treatment at the end of the year?
For an active treatment plan, like cancer care, which is planned to continue into 2027, BJC will continue to serve those patients until their treatment plan ends. Those patients will need to receive an out-of-network authorization from Aetna for "continuity of care" – a request BJC and their physician, as needed, will make at the patient's request to ensure patients continue to receive innetwork benefit coverage for said services. BJC will continue to submit claims to Aetna just as they do today.
If members have questions on whether this is applicable, they should consult their BJC HealthCare provider(s).

Our plan includes an Extended Service Area (ESA) provision - will BJC still see me?
BJC HealthCare has elected not to see ESA plan members if they do not meet the medical necessity guidelines for continuation of care.

Are there adequate providers to see me if I need to switch?
Based upon Centers for Medicare & Medicaid Services (Federal CMS) guidelines, there is no network adequacy concern. We would encourage impacted members to begin to think about their medical care transition and what makes sense to them regarding where to seek services beginning January 1, 2027. Members should contact Aetna Member Services by calling 1-855-223-4807, Monday – Friday, 7:00 AM – 6:00 PM (CT), if they need assistance finding a provider that accepts the Aetna MAPD PPO Plan.

Will BJC HealthCare providers take patients on a case-by-case basis?

For patients who need unique services that only BJC can provide in the downstate Illinois region (e.g., gene therapy, certain transplants, and other advanced medicine services), patients will need Aetna to authorize these out-of-network services for coverage. This type of special arrangement requires a single case agreement between BJC and Aetna, again, something that BJC can and will assist with as needed to help our patients.
If a patient with an out of network plan needs emergent services or is in an exceptional situation that allows out of network benefit coverage, BJC will provide care and

submit claims directly to the health plan for consideration and processing.

Will Aetna help me through this process?

Yes, Aetna is creating targeted mailers to those impacted by the BJC HealthCare termination that will list the closest in-network facility along with pertinent contact information.

For members who are currently engaged in Aetna Case Management, outreach calls will be made to offer assistance in finding a new care team.

Can I drop this plan during the TRAIL Open Enrollment Period, and if so, may I re-enroll at a later date?

Yes, you may disenroll from the Aetna MAPD PPO Plan effective January 1, 2027, during the TRAIL Open Enrollment Period, which runs from October 15 through November 16, 2026, by calling the MyBenefits Service Center at 1-844-251-1777, Monday – Friday, 8:00 AM – 6:00 PM (CT), or by using the online portal at MyBenefits.Illinois.gov.

Medicare-eligible members and dependents may re-enroll in the TRAIL MAPD Program throughout the plan year. However, coverage can begin no sooner than the 1st of the month following the date on which re-enrollment is requested. For questions regarding re-enrollment, please contact the MyBenefits Service Center.

Is there another plan accepted by BJC HealthCare?

BJC HealthCare has indicated that it will continue to accept traditional Medicare and Medicare supplement plans. At this time, it is not yet known which, if any, Medicare Advantage (MA) or Medicare Advantage Prescription Drug (MAPD) plans will be accepted by BJC HealthCare providers. Impacted individuals are strongly encouraged to consult directly with their healthcare provider(s) for the most current information.

CONTACT US
for Additional Questions

For members needing assistance in locating a new provider that accepts the Aetna MAPD PPO Plan, please contact **Aetna Member Services** by calling

1-855-223-4807
Monday – Friday
7:00 AM – 6:00 PM (CT)

If you have questions regarding your **TRAIL** open enrollment, please contact the **MyBenefits Service Center** at

844-251-1777

You may also contact the **CMS Medicare Coordination of Benefits Unit (MCOB)** at

217-782-7007

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