401 S. Clinton Street, Chicago, Illinois 201 S. Grand Avenue East, Springfield, Illinois

Members Present

Eli Pick, Chairman Robyn Gabel, IMCHC Robert Anselmo, R.Ph. Jill Fraggos for Susan Hayes Gordon

Members Absent

Pedro A. Poma, M.D.
Richard Perry, D.D.S.
Diane Coleman, PCIL
John Schlofrock, Barton Mgt.
Kim Mitroka – Christopher Rural Health
Neil Winston, M.D.
Myrtis Sullivan, IDHS Debra Kinsey – DCFS
Nancy Crossman, DHS

HFS Staff

Jacquetta Ellinger
James Parker
Amy Harris
Mary Miller
Dave Spinner
Mike Jones
Lynne Thomas
Deborah Saunders
Sinead Madigan
Carla Lawson
Aundrea Hendricks

James Monk

Interested Parties

Aaron Newell, Legal Assistance Foundation
Kathy Bovid, Bristol-Myers, Squibb
Alice Holden, CMS (HHS)
Alicia Swanson, CMS (HHS)
Kenzy Vandebroek, CDPH
Sharon Dyer-Nelson, IDHS-HCD
Mary Davis - Comprehensive Bleeding Disorder Center
Marsha Hurn - Comprehensive Bleeding Disorder Center

I. Call to Order

Chairman, Eli Pick, called the meeting to order at 10:05 a.m.

II. Introductions

Attendees in Chicago and Springfield introduced themselves.

III. Review of the Minutes

The March minutes were not reviewed as there was not a quorum present.

IV. Administrator's Report

- 1) James Parker, Deputy Administrator for Operations, provided the report. He stated that the administration is working hard on the supplemental regarding the hospital assessment. He extended appreciation to everyone who was working with the department on this effort as well as Illinois Covered. The department is monitoring the legislative activity closely and is hoping the legislation will pass. Mr. Parker advised the committee that a press conference was held on May 17th on the expansion of the family planning waiver for Illinois Health Women. The change to the wavier was effective May 1st.
- 2) Jacquetta Ellinger, Deputy Administrator for Policy Coordination, provided more information on the family planning waiver. The current waiver allows the department to extend family planning services to women who become ineligible for regular benefits. Deborah Saunders, the chief of the Bureau of Maternal and Child Health Promotion, worked very hard to make changes to the waiver which would allow women to apply for coverage without having had prior coverage through Medicaid. It is anticipated that 45,000 women will apply, whereas the waiver currently covers about 35,000 women.

The waiver authorizes a narrow package of services that costs the department about \$280 a year per person. Some additional follow-up is authorized if STI (sexually transmitted infection) is diagnosed. Family planning services have a positive impact, as there are better birth outcomes if pregnancies are spaced 18 months or more apart. The waiver is 90% funded at the federal level.

The threshold for eligibility is 250% of the FPL (federal poverty level). The application is in English on the website www.illinoishealthywomen.com. A Spanish version of the application will be added soon.

Promotional materials will be sent to our community partners and the materials can also be ordered on-line. Because this is an 1115 waiver demonstration project, we ask about past pregnancy as part of the research component. One intention of this project is to get women to apply for the Medicaid waiver and free-up Title X money for other women, e.g., undocumented women.

3) Mr. Parker reported that approval of the "Money Follows the Person" demonstration project proposal was announced this week. Details still need to be worked out. The project will allow for enhanced services for individuals in a nursing home to get back to a community setting.

V. Old Business

All Kids and FamilyCare update. Enrollment statistics from April 2006 through March 31, 2007 were provided. Lynne Thomas, chief of the Bureau of All Kids, stated that the All Kids Unit is processing at 10 days. Ms. Thomas shared that almost half of the All Kids applications are completed on-line. Increased staffing is the primary reason for faster processing. With faster processing time some staff have been redirected to customer service and case renewal due to increase caseloads in that area. The first redetermination of the All Kids expansion groups has started.

2) Primary Care Case Management (PCCM) activity Mr. Parker reported that the rollout into the collar counties is near completion. The second letter showing the mandatory assignment and auto-assignment has been completed for about 300,000 persons. Approximately twenty to thirty thousand cases are not yet assigned, meaning persons have not made a choice or been auto-assigned.

Next week, the second package to persons in Cook County will be mailed. The phased mailing will be about ten thousand letters per day. Work will also begin on the Northwest part of the state [basically Northwest of Peoria]. There will an initial mailing of postcards, followed by the first choice letters.

HFS has had good success in getting doctors to enroll, including big practices downstate, such as, Southwest Memorial, Carle Clinic and Christy Clinic. Provider enrollment in the central region of the state is looking good.

Robyn Gabel asked if HMOs get to send letters to participants asking enrollees to choose them. Mr. Parker stated that many FQHCs were allowed to send mailings to encourage participants to choose them. Discussions have also occurred regarding follow-up letters from FQHCs. HFS is not aware of HMOs sending letters.

Mr. Parker shared the following PCCM enrollment numbers:

Collar counties: 272,000 eligibles, 234,000 enrolled in IHC and 38,000 without auto-assignment.

Cook county: 852,000 eligibles, 277,000 enrolled in IHC, 131,000 enrolled in HMOs (mainly existing HMO) and 409,000 without auto assignment [48% or 4 of 9 enrollments].

Auto-assign is only to IHC (Illinois Health Connect). Participants are not assigned to an HMO, unless currently enrolled in an HMO. Of the 443,000 enrolled about 29% are enrolled in HMO.

3) Disease Management (DM). Mary Miller of the Bureau of Healthcare Quality Improvement gave the report. Your Healthcare Plus has about 225,000 eligible individuals and taking part about 114,000 in the AABD population. There are approximately 85,000 in the family health plans with persistent cough or asthma and about 35,000 in the frequent ER user population.

The department's disease management vendor, McKesson Health Solutions, has placed staff in 24 catchments that have begun to embed staff in the highest volume hospitals and clinics. About half of these are in the Chicago area. Jill Fraggos shared that McKesson has staff at Children's Memorial hospital. The work is going well with McKesson and clinic staff working as partners. Nurses, social workers, behavioral health specialists and pharmacists help with discharge planning and follow up appointments. Contacting families within 48 hours, these staff help ensure that prescriptions are filled and DME supplies made available as needed. Last week, nurse practitioners were assigned to 4 long-term care facility sites. This will eventually expand to 24 sites where staff will be assisting in better care coordination.

Comprehensive Neuroscience (CNS) is researching the high cost of psychotropic drugs. CNS completes mailings to 2500 providers per month. For psychotropic drugs, the highest cost represents usage of about 7,500 clients.

We are working on the follow-up mechanism to talk about the patient profile. Most proscribers are primary care providers reaching out to give help.

Health Systems of Illinois (HSI) is completing a quality improvement study using real time data on hospital admissions and discharges. The goal is to ensure that the PCP is contacted and, if needed, a follow-up visit is scheduled.

There are a small number of patients, about 2-3%, that shift into high-risk cost or have subsequent hospitalizations. A letter will be sent to these patients to contact

McKesson and receive a \$10 certificate. The department is getting about a 17-18% "hit rate" and will eventually roll out to the remaining population.

The Interactive Voice Response (IVR) program is the method that McKesson is using to attempt to reach Your Health Plus persons who are part of the persistent asthma and non-institutionalized disabled population. Using an automated phone call, the goal is to conduct a brief knowledge assessment with these eligible persons.

4) Medicare Part D. Sinead Madigan, chief of the Bureau of Pharmacy Services, provided the update. Ms. Madigan advised that the biggest issue currently is a review of records to determine if persons are eligible for "Extra Help" from the federal Centers for Medicare and Medicaid (CMS). Between May 16th and June 26th, CMS will be mailing outreach letters to low income Medicare beneficiaries to inform them about help available through the Medicare Savings program, as well as extra help available for Medicare prescription drug costs. Hopefully people will apply. These are not dual-eligible participants, but people who wish to take action by applying online or in the community with partners such as the Department on Aging. Person receiving the letter will reach out to HFS and DHS and may be enrolled in our cost-sharing program. We are watching the Medicare call letters and the coordination with our plan.

HFS is working to streamline the Illinois Cares Rx application for fiscal year 2008. The department has received feedback from the community. Current enrollment for Illinois Cares Rx is about 192,000. The majority has Medicare and is enrolled in a coordinating plan.

There is a problem with people saying that they have Medicare, when they don't. There have been about 2,000 cases where this has occurred. Not having Medicare is defined as having neither Medicare Part A or B.

There has been an Illinois Cares Rx income increase. We disallow the 6.9% the SSA COLA (Cost of Living Adjustment) increase. So we are seeing more applications coming in.

The state of Wisconsin is creating a program to wrap around Medicare Part D and is looking at the Illinois program and experience.

Our pharmacy group met in April. We discussed a mechanism for pharmacies to bill for back fees. The goal is to get this done before the flu season to address the need for flu and pneumococcal vaccine.

5) Veterans Care. Ms. Ellinger provided the update. The program currently has 64 active persons. HFS is working with the Department of Veterans Affairs

(DVA) and looking at an alternate application process that would not be limited to DVA. Veterans Care is designed to capture the veterans group with too much income to qualify for federal veterans benefits. The state is looking at serving vets but not supplanting the Federal VA.

The department is looking at moving veterans enrolled in Veterans Care to the Illinois Covered program in 2010. We are looking at veterans with income in the 300% to 400% FPL and most of these vets are working.

6) Access to Benefits and Services Task Force. Ms. Ellinger reported that the full task force has not met, but there was a steering committee meeting in April by phone. The next meeting is scheduled for July. Right now much energy is going into legislative initiatives. The Heartland Alliance was the organizing force behind the resolution and will continue to keep the task force going.

VI. New Business

None for this period.

VII. Subcommittee Reports

Long Term Care (LTC). No report for this period.

Dental Policy Review (DPR). David Spinner with the Bureau of Maternal and Child Health Promotion provided the report. He advised that about 20 persons met in March. The group discussed ongoing grants with 6 local health departments.

Doral Dental was awarded a three-year contract as the claims administrator for the dental program. The contract runs from March 2007 through February 2010, with three one-year extensions available to the department. Doral has been the claims administrator for the past eight years and has done a good job for the department. Ms. Saunders advised that the Doral contract has a few significant enhancements. One of these is the Dental Champion program designed to recruit colleagues in their own regions. Doral will work with foundations to increase new dentist participation.

HFS has worked with Doral on dental outreach programs. This year the focus was on children ages 3 to 18 that had no dental exam in the last year. 130,000 letters and another 75,000 follow-up letters were sent. About 78,000 children have received a dental exam. Ms. Saunders indicated that the outreach effort for children that have not seen a dentist in the last year has been modified so that telephone contact is initiated first before the first of two outreach letters is sent.

The committee works on the dental office manual that is revised each year. Doral did 8 provider training sessions with about 50 providers attending each session. One benefit of the training sessions is that providers are able to speak directly with Doral and department staff.

Ms. Saunders informed the committee that there would be an increase in information about smoking cessation information going to pediatricians with information about Doral. In addition, Doral is piloting a fluoride varnish program with the Cook County Department of Public Health.

Robyn Gabel asked if Doral would recruit dental specialists. Ms. Saunders advised that AHS (Automated Health Systems) would refer dentists to Doral. Doral does a recruitment project every year but we are seen as outsiders so we are trying to use insiders with our Dental Champion program.

The next committee meeting is in July.

Pharmacy Subcommittee Charge. No report for this period.

Public Education Subcommittee. No report for this period.

VIII. The meeting was adjourned at 11:12 a.m. The next MAC meeting is scheduled for July 20, 2007.

Medicaid Advisory Committee May 18, 2007 All Kids/FamilyCare Report

Enrollment

- Enrollment data is attached. Enrollment data as of 03/31/07:
 - a. 1,266,867 All Kids Assist (Up to 133% of FPL)
 - b. 62,357 All Kids Rebate, Share, Premium Level 1 (133% to 200% of FPL)
 - c. 54,224 All Kids expansion children
 - d. 5,864 Moms and babies expansion (133% to 200% of FPL)
 - e. 361,728 pre-expansion parents (up to approx. 35% of FPL)
 - f. 146,215 FamilyCare expansion parents

Web-based application capability

We implemented our web-based application statewide on August 11, 2005. Since then, we have received a total 85,515 web apps: 57,070 from the general public and 28,445 from AKAA's.

MAC 05/18/07

	4/30/2006		5/31/2006		6/30/2006		7/31/2006		8/31/2006	
	Previous		Previous		Previous		Previous		Previous	
	Numbers	Numbers	Numbers	Numbers						
Pre-expansion children	1,078,255	1,082,900	1,073,408	1,084,453	1,085,052	1,090,318	1,086,894	1,106,169	1,116,196	1,124,306
All Kids Phase I	73,553	74,043	74,466	75,710	77,138	77,825	77,604	79,072	80,658	81,412
All Kids Phase II	40,889	40,937	42,393	42,431	43,356	43,432	45,435	45,481	46,678	46,710
All Kids Phase III	3,246	3,244	3,655	3,651	3,867	3,860	4,481	4,465	4,886	4,882
All Kids Expansion							7,755	14,274	18,644	20,226
Moms and Babies Exp	5,738	5,861	5,553	5,801	5,586	5,736	5,341	5,615	5,590	5,763
Pre-expansion parents	364,708	367,666	359,272	364,486	360,116	363,413	354,567	360,635	358,085	361,523
FamilyCase Phase I	32,911	33,055	33,043	33,303	33,373	33,546	32,977	33,294	33,404	33,585
FamilyCare Phase II	32,851	33,092	32,918	33,391	33,447	33,746	33,104	33,684	34,038	34,387
FamilyCare Phase III	48,210	48,651	48,656	49,605	50,819	51,330	50,887	51,942	52,798	53,336
FamilyCare Phase IV	5,633	5,633	6,797	6,795	7,769	7,833	9,222	9,304	10,242	10,317
TOTAL	1,685,994	1,695,082	1,680,161	1,699,626	1,700,523	1,711,039	1,708,267	1,743,935	1,761,219	1,776,447
Children	1,195,943	1,201,124	1,193,922	1,206,245	1,209,413	1,215,435	1,222,169	1,249,461	1,267,062	1,277,536
Parents	490,051	493,958	486,239	493,381	491,110	495,604	486,098	494,474	494,157	498,911

	4/30/2006		5/31/2006		6/30/2006		7/31/2006		8/31/2006	
	Previous	Current								
	Numbers									
All Kids Assist	1,151,808	1,156,943	1,147,874	1,160,163	1,162,190	1,168,143	1,164,498	1,185,241	1,196,854	1,205,718
All Kids Rebate, Share, Premium Level 1	44,135	44,181	46,048	46,082	47,223	47,292	49,916	49,946	51,564	51,592
All Kids Expansion							7,755	13,736	18,644	20,226
Moms and Babies Expansion	5,738	5,861	5,553	5,801	5,586	5,586	5,341	5,615	5,590	5,763
Pre-expansion Parents	364,708	367,666	359,272	364,486	360,116	360,116	354,567	360,635	358,085	361,523
FamilyCare Parent Expansion	119,605	120,431	121,414	123,094	125,408	126,455	126,190	128,224	130,482	131,625
Total	1,685,994	1,695,082	1,680,161	1,699,626	1,700,523	1,707,592	1,708,267	1,743,397	1,761,219	1,776,447

MAC 05/18/07

	9/30/	2006	10/31	/2006	11/30/	/2006	12/31/2006		1/31/	2007
	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current
	Numbers	Numbers	Numbers	Numbers						
Pre-expansion children	1,114,524	1,132,179	1,135,327	1,144,236	1,131,996	1,148,843	1,151,736	1,156,947	1,154,842	1,166,292
All Kids Phase I	81,404	82,894	84,548	85,283	85,454	86,823	88,060	88,521	89,587	90,650
All Kids Phase II	47,972	47,972	49,164	49,219	50,591	50,568	51,903	51,955	52,748	52,678
All Kids Phase III	5,366	5,352	5,814	5,801	6,262	6,239	6,579	6,573	6,898	6,885
All Kids Expansion	22,015	25,834	30,856	33,743	34,348	38,204	42,493	43,375	45,758	47,794
Moms and Babies Exp	5,377	5,662	5,600	5,815	5,419	5,783	5,736	5,853	5,708	5,953
Pre-expansion parents	354,833	360,546	359,135	362,879	357,488	363,675	360,868	363,950	359,160	365,146
FamilyCase Phase I	33,265	33,589	33,752	33,899	33,300	33,577	33,435	33,577	33,580	33,821
FamilyCare Phase II	33,792	34,345	34,316	34,591	33,860	34,330	34,359	34,616	34,779	35,294
FamilyCare Phase III	52,855	53,914	54,426	55,027	54,301	55,362	56,036	56,494	56,794	57,731
FamilyCare Phase IV	11,343	11,411	12,370	12,409	13,363	13,385	14,538	14,594	15,208	15,260
TOTAL	1,762,746	1,793,698	1,805,308	1,822,902	1,806,382	1,836,789	1,845,743	1,856,455	1,855,062	1,877,504
Children	1,271,281	1,294,231	1,305,709	1,318,282	1,308,651	1,330,677	1,340,771	1,347,371	1,349,833	1,364,299
Parents	491,465	499,467	499,599	504,620	497,731	506,112	504,972	509,084	505,229	513,205

	9/30/2006		10/31/2006		11/30/2006		12/31/2006		1/31/2	2007
	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current
	Numbers	Numbers	Numbers	Numbers	Numbers	Numbers	Numbers	Numbers	Numbers	Numbers
All Kids Assist	1,195,928	1,215,073	1,219,875	1,229,519	1,217,450	1,235,666	1,239,796	1,245,468	1,244,429	1,256,942
All Kids Rebate, Share, Premium Level 1	53,338	53,324	54,978	55,020	56,853	56,807	58,482	58,528	59,646	59,563
All Kids Expansion	22,015	25,834	30,856	33,743	34,348	38,204	42,493	43,375	45,758	47,794
Moms and Babies Expansion	5,377	5,662	5,600	5,815	5,419	5,783	5,736	5,853	5,708	5,953
Pre-expansion Parents	354,833	360,546	359,135	362,879	357,488	363,675	360,868	363,950	359,160	365,146
FamilyCare Parent Expansion	131,255	133,259	134,864	135,926	134,824	136,654	138,368	139,281	140,361	142,106
Total	1,762,746	1,793,698	1,805,308	1,822,902	1,806,382	1,836,789	1,845,743	1,856,455	1,855,062	1,877,504

MAC 05/18/07

	2/28/2007 Current	3/31/2007 Current
	Numbers	Numbers
Pre-expansion children	1,169,411	1,173,650
All Kids Phase I	91,814	93,217
All Kids Phase II	53,496	54,769
All Kids Phase III	7,209	7,588
All Kids Expansion	51,163	54,224
Moms and Babies Exp	5,886	5,864
Pre-expansion parents	363,134	361,728
FamilyCase Phase I	33,882	34,167
FamilyCare Phase II	35,655	36,120
FamilyCare Phase III	58,403	59,345
FamilyCare Phase IV	15,780	16,583
TOTAL	1,885,833	1,897,255

Children	1,373,093	1,383,448
Parents	512,740	513,807

	2/28/2007	3/31/2007
	Current	Current
	Numbers	Numbers
All Kids Assist	1,261,225	1,266,867
All Kids Rebate, Share, Premium Level 1	60,705	62,357
All Kids Expansion	51,163	54,224
Moms and Babies Expansion	5,886	5,864
Pre-expansion Parents	363,134	361,728
FamilyCare Parent Expansion	143,720	146,215
Total	1,885,833	1,897,255