

201 South Grand Avenue East  
Springfield, Illinois 62763-0002

**Telephone:** (217) 782-1200  
**TTY:** (800) 526-5812

## MEMORANDUM

DATE: November 10, 2005

TO: Members of the Medicaid Advisory Committee

FROM: Anne Marie Murphy, Ph.D.  
Administrator, Division of Medical Programs

RE: Medicaid Advisory Committee (MAC) Meeting

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The next meeting of the Medicaid Advisory Committee will be on November 18, 2005. The meeting will be held via videoconference from 10 a.m. to 1 p.m. Those attending in Springfield will meet at 201 South Grand Avenue East, 3rd floor Videoconference Room B. Those attending in Chicago will meet at 401 South Clinton, 7th floor Videoconference Room.

The following meeting material has been posted to the department's Web site: The agenda for the November 18, 2005 meeting, the draft minutes and attachments from the September 16, 2005 meeting.

The current meeting material has been sent to the committee members electronically. Interested parties can access the meeting information by going to: <http://www.hfsillinois.com/mac/> or <http://www.hfsillinois.com/mac/news/>

In order to receive information on future MAC meetings, you will need to register to receive e-mail notification when information is posted to the MAC Web page. To register to receive the MAC e-mail notifications go to: <http://www.hfsillinois.com/mac/notify.html>

If you have any questions, or need to be reached during the meeting, please call 312-793-4706 in Chicago or 217-782-2570 in Springfield.

## **MEDICAID ADVISORY COMMITTEE**

401 S. Clinton, 7th Floor Video-conference Room  
Chicago, Illinois  
and  
201 South Grand Avenue East  
3rd Floor Videoconference Room  
Springfield, Illinois

November 18, 2005  
10 a.m. - 1 p.m.

### **AGENDA**

- I. Call to Order
- II. Introductions
- III. Review of September 16, 2005 Meeting Minutes
- IV. Administrator's Report
  - Hurricane Katrina Relief Effort Update
  - All Kids Program  
Website: <http://www.allkidscovered.com/>  
MAC participation
- V. Old Business
  - KidCare/FamilyCare Update
  - Medicare Part D Update
- VI. New Business
  - 2006 Meeting Dates
  - Committee Bylaws (handout)
- VII. Subcommittee Reports
  - Long Term Care (LTC) Subcommittee
  - Dental Policy Review (DPR) Committee
  - Public Education Subcommittee
  - Pharmacy Subcommittee
- VIII. Adjournment

**Illinois Department of Public Aid  
Medicaid Advisory Committee**

401 S. Clinton Street, Chicago, IL  
210 S. Grand Avenue East, Springfield, IL

September 16, 2005

Members Present

Eli Pick, Chairman  
Laura Leon for Robin Gabel IMCHC  
Jill Fraggos for Susan Hayes Gordon  
Diane Coleman  
Robert Anselmo, R.Ph  
Marilyn Peebles for Debra Kinsey – DCFS  
John Shlofrock  
Nancy Crossman, DHS  
Mike Jones, IDPH

Members Absent

Pedro A. Poma, M.D.  
Leticia Overholt  
Richard Perry, D.D.S  
Kim Mitroka – Christopher Rural Health  
Neil Winston  
Alvin Holley

HFS Staff

Theresa Wyatt  
Vicki Mote  
Carla Lawson  
Shawna Ridley  
Aundrea Hendricks  
James Monk

Interested Parties

Nelson Soltman – Legal Assistance  
Foundation  
John Benske – Amgen  
Jack Kubik - Amgen  
Terri Morris, M.D.  
Alice Holden, CMS  
Citseko Staples, Harmony Health Plan  
Kathy Bovid – Bristol Myers Squibb  
Cheryl Luria - Amylin  
Sandy Tiao – Midwestern University  
Kristel Poulsen – UIC Pharmacy  
Gerri Clark, DSCC  
Lisa Gregory, IPHA  
Mike Patton, IPHA  
Phil Young, Santarus Pharm  
Jeff Samels, Santarus Pharm

Medicaid Advisory Committee (MAC)  
Draft Meeting Minutes

September 16, 2005

**I Call to Order**

Chairman Eli Pick called the meeting to order at 10:15 a.m.

**II. Introductions**

Attendees in Chicago and Springfield introduced themselves.

**III. Review of the Minutes**

Both May and July minutes were reviewed. Diane Coleman moved to approve the minutes for May's meeting. Laura Leon seconded the motion. The motion was approved.

Laura Leon moved to approve the minutes for July's meeting. Jill Fraggos seconded the motion. The motion was approved.

**IV Administrator's Report**

On Dr. Murphy's behalf, Jackie Ellinger, Deputy Administrator for Policy Coordination, reported on current Healthcare and Family Services (HFS) activities. She stated that HFS, as well as our sister agencies, face issues that are unique and of a broad scope. A primary area of activity has been the Hurricane Katrina relief efforts.

1) Illinois decided to revise application procedure to ensure that Hurricane Katrina evacuees in Illinois receive necessary health benefits while they are here. The Illinois Department of Human Services is applying the same revised criteria.

- A key change is assuming Illinois residency for persons arriving from the federally designated disaster areas.
- The state has temporarily waived some verification requirements when proofs are not accessible. These may include: income and assets; immigration status; social security number; and proof of age, blindness or disability.
- A new form, 2378 KAT, was developed to establish that persons requesting benefits are from one of the designated disaster areas. The form is a supplement to the application for benefits completed in a local

office or submitted through the mail or electronically. The form is needed to ensure that verification requirements are waived.

- Healthcare and Family Services (HFS) has sent an Alert to all KidCare Application Agents stating that we will make a technical assistance payment for applications using the modified verification criteria.

While the state has waived some verification requirements, applicants must still be categorically related for services, e.g., meet one of several criteria for the state to receive Federal matching funds, such as dependent children and their parents or caretakers, or individuals that are aged, blind or disabled.

There is an application exception for long term care patients entering Illinois. When an evacuee is transferred to an institution in Illinois, we want the Illinois provider to bill the state from which the evacuee was transferred.

Ms. Ellinger pointed out that the federal government has allowed for loosening the standards but still holds the states responsible for fraud. She stated that Illinois' intent is to cover persons when possible.

- Nancy Crossman added that DHS has worked to sort out issues and coordinate activities with HFS. She states that key tasks are tracking services for reimbursement and doing complete documentation of eligibility after the temporary eligibility period ends. She doesn't know how many evacuee applications have been processed to date but estimated the number is fewer than one thousand.
- Robert Anselmo shared that the Pharmacy Board has endorsed refilling prescriptions for evacuees without a current prescription or receipt. If a customer can give reasonable information that they are on diabetes medication, the pharmacist may refill.

Mr. Anselmo stated that DEA has relaxed the 30-day rule for dispensing schedule 3-5 drugs and to supply schedule 2 drugs. It was added that Federally Qualified Health Centers were giving free care and prescriptions for all evacuees.

- Gerri Clark asked if HFS is trying to verify eligibility in the home state? Ms. Ellinger stated that if a person claims eligibility in another state, they can still enroll here. We also encourage providers to enroll and claim payment from the home state rather than Illinois.
- Chairman Eli Pick asked if there had been any institutional placements? Ms. Ellinger advised that this is not known at this point.
- Diane Coleman shared information about services to evacuees with disabilities. She had heard of two durable medical equipment issues. The previous Monday, a

group of evacuees called the Mayor's Office in Chicago to get a donation of 50 wheel chairs. Also there is a need for adequate beds. She stated that the United Way was trying to get help that is disability specific. She has heard that the city of Chicago has done well in providing services, however, some of the suburbs have not done as well.

Ms Coleman asked if DHS is giving help with disability specific needs? Ms. Crossman stated that she had heard some complaints and could work directly with Ms. Coleman to address specific needs.

Ms. Ellinger reviewed some of the proposed federal response for state assistance to disaster area evacuees. The federal CMS will issue an 1115 waiver template to relax certification; however nothing yet about extending services to additional groups. A proposal is in the U. S. Senate that would allow eligibility without persons being in a categorically eligible group. The recommended income standards are 100% FPL for adults and 200% FPL for children. Also being considered is a universal, one-page application allowing presumptive eligibility and off site enrollment.

At Chairman Pick's request, Ms. Ellinger will provide an update at the next meeting.

2) Ms. Ellinger reported that HFS has some new staff on board. Kelly Cunningham is now Chief of the Bureau of Long Term Care. Ms. Cunningham has a long history of service in working with the senior and disabled populations.

Stephen Saunders, M.D., MPH, and Michele Piel have joined Dr. Murphy's staff as special assistants. Stephen Saunders is our new Medical Advisor and will be working on a number of medical access and quality of care issues including working with medical provider organizations. Dr. Saunders is a pediatrician and has 25 years of public health experience. He has served as the Maternal and Child Health Director for Illinois for the last 17 years and has experience working with Medicaid on perinatal and child health issues. He is the chapter chairman of the Illinois College of Pediatricians.

Michele Piel will be working on a variety of special projects including implementation of Medicare Part D. Most recently, Ms. Piel served as Division Manager for Planning, Research and Development at the Illinois Department on Aging and has devoted over twenty-five years to working on behalf of low income families and children in the areas of housing, welfare, disability, child care, women's crisis and employment.

3) Work continues on the perinatal services report. MCH Bureau Chief, Deborah Saunders, is heavily involved in preparing the report.

4) A hearing is scheduled in November 2005 to consider the proposed settlement in the Memisovski v. Maram lawsuit.

5) HFS is working to implement the new FamilyCare standard that will be effective beginning January 2006.

6) Deputy Administrator for Programs, Theresa Wyatt, reported that since the last MAC meeting, we have approved 74 Supportive Living Facilities (SLF). The approvals have been geographically diverse with sites in about 40 different counties.

## V. Old Business

**KidCare/FamilyCare.** Vicki Mote, Chief of the Bureau of KidCare, provided the committee with an update on the KidCare/FamilyCare program. There are about 2,500 pending applications. Complete applications are currently processed within 9 days.

The web-based interactive application was implemented statewide on August 11. Since then, KidCare has received 1,116 applications from the general public and 386 from KCAAs. About 25% of our applications are now coming through on-line submittal. The volume is more than expected. An exception is the volume of KCAA submittals. We are offering training to the KCAAs to facilitate usage. A Spanish version of the application has been developed. We are now testing it and plan to implement on October 15.

**HIPAA Update.** No update at this time

**Medicare Part D.** Ms. Ellinger reported that HFS has put out a letter written to dual-eligible participants or persons in the Medicare Savings Programs, QMB, SLIB or QI-1. The letter tells participants what is happening with drug benefits. The federal CMS will announce which prescription drug plans (PDP) will be offered in individual states soon.

Illinois is focusing on outreach to Medicare enrollees. The Illinois Cares Rx caravan is touring the state and explaining how persons can preserve or expand prescription drug benefits. The toughest challenge is to get the SeniorCare and Circuit Breaker participants to apply and pick a plan. HFS is working on another mailing to these participants telling them they have to act and the steps to take.

Ms. Coleman shared that she is working with the Make Medicare Work Coalition that includes providers in the non-profit area. She suggested that the non-profit providers may be able to best communicate with and make acceptable recommendations to the target groups through "one on one" discussion.

At the next meeting, James Parker can share the specific rules on how the State can wrap a prescription drug plan so that the SeniorCare and Circuit Breaker participants can receive coverage under Illinois Cares Rx.

The federal CMS will make selections in October for dual eligible participants including those in long term care. Patients will receive notice by November 1, and may choose a different plan. Enrollment for all Medicare participants begins on November 15. Dual eligible participants may change their PDP at any time.

SeniorCare and Circuit Breaker participants should enroll by January 1 to take full advantage of the drug benefits. If participants do not enroll by May 1, they will be auto-enrolled with a chance to change one time. There is an annual open enrollment each November 15 – December 31.

Laura Leon asked if information is available to community leaders. Ms. Ellinger stated yes, through groups such as Make Medicare Work, that Diane Coleman had referenced and the Aging Network. She added that the Region V CMS has established work groups in each state and facilitators may participate. Joe Hylak-Reinholtz is coordinating for Illinois and interested parties can contact him to become involved in workgroup conference calls. The Healthcare Choice workgroup conference call is scheduled for Tuesday and information is available on the Internet website [www.makemedicarework.org](http://www.makemedicarework.org)

Ms. Leon advised that there is another organization that has a name similar to Illinois Cares Rx. She had learned of the group during a health fair this summer and noted that the group was not a government organization. Ms. Ellinger stated that the Department on Aging had done focus groups to find the best name that combined both being a state program and covering prescription drugs. Our name, Illinois Cares Rx, came out of this process.

It was asked if copies of the letter sent to SeniorCare and Circuit Breaker participants would be on the HFS website. Ms. Ellinger stated that the letter is available but a little hard to find. She referred to the HFS Medical page and policy manual shared with DHS. The policy memo was issued in August. If help is needed in accessing the letter, participants may call her at 312.793.1984.

Ms. Ellinger asked Carla Lawson to look at adding MAC as a provider type to facilitate getting relevant materials like the outreach letter to committee members and interested parties.

**Pharmacy Subcommittee Charge.** Chairman Eli Pick reported that the sub committee has identified members. The members are:

- |                       |                               |
|-----------------------|-------------------------------|
| Robert Anselmo R.Ph.  | Pharmacist<br>Target Corp.    |
| Gerald Bailey         | Pharmacist<br>Ficher Pharmacy |
| Robert Barnato, R.Ph. | Pharmacist<br>Omnicare        |



Charles Drueck, III, M.D.	Physician
Tom Lawlor, R.Ph.	Director, Pharmacy Marketing Walgreen Company
Mahendra Patel	Pharmacist Harvey Health Center & Pharmacy
Tom Rousonelos, R.Ph	Reg. Manager Managed Care Operations Albertsons/Osco Drug
Marc Sandroff	Pharmacist C and M Pharmacy
Nicholas J. Sartoris	Pharmacist Doc's Drugs of Dwight
Jagdish C. Shah	Pharmacist Maywood Pharmacy, Inc
Lisa A. Steelman	Associate Director, Government Affairs Novartis Pharmaceuticals Corporation
Eric W. Terman, M.D.	Physician
Linda Virgil	Consumer

VI. **New Business**

The MAC will be formulating a nominating committee for the committees next term. Eli Pick will chair the January meeting and the new Chairperson will convene the next meeting.

VII. **Subcommittee Reports**

**Long Term Care (LTC).** Nothing to report at this time

**Dental Policy Review (DPR).** Nothing to report at this time.

**Public Education Subcommittee.** Ms. Ellinger reported that only one member attended the August meeting. The subcommittee will need to reorganize and set new meeting dates.

VIII. Chair Eli Pick adjourned the meeting at 11:35 a.m. The next MAC meeting is scheduled for November 18, 2005.

**Medicaid Advisory Committee  
September 16, 2005  
KidCare/FamilyCare Report**

**Enrollment**

- We have around 2,500 pending applications in the KidCare Unit. We are processing clean applications at 9 days.
- Enrollment data is attached. Enrollment data as of 7/31/05:
  - a. 1,043,331 pre-expansion children (up to 100% of FPL)
  - b. 345,825 pre-expansion parents (up to approx. 38% of FPL)
  - c. 6,065 Moms and babies expansion (133% to 200% of FPL)
  - d. 68,118 Phase I (100% to 133%) and 38,668 Phase II expansions (133% - 185% of FPL)
  - e. 3,868 Phase III (over 185% - 200% of FPL)
  - f. 30,777 FamilyCare Phase I (38% - 49% of FPL)
  - g. 30,815 FamilyCare Phase II (49% - 90% of FPL)
  - h. 43,164 FamilyCare Phase III (90% to 133% of FPL)

**FamilyCare Expansion**

We are expanding FamilyCare to 185% of poverty January 1, 2006.

**Web-based application capability**

We implemented our web-based application statewide on August 11. Since then, we have received 1,116 from the general public and 386 from KCAA's.

Attachment 2  
 MAC - 09/16/05 Minutes

	1/31/2005		2/28/2005		3/31/2005		4/30/2005		5/31/2005		6/30/2005	7/31/2005
	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Previous Numbers
<b>Pre-expansion children</b>	1,029,971	1,030,187	1,033,452	1,033,859	1,037,237	1,038,707	1,040,944	1,044,607	1,038,303	1,044,733	1,045,187	1,043,331
<b>KidCare Phase I</b>	66,651	66,658	67,888	67,902	68,981	69,102	65,001	65,319	65,729	66,314	67,212	68,118
<b>KidCare Phase II</b>	35,772	35,779	35,871	35,885	35,686	35,692	37,557	37,553	38,104	38,088	38,373	38,668
<b>KidCare Phase III</b>	4,352	4,352	4,495	4,494	4,593	4,589	3,214	3,212	3,537	3,534	3,720	3,868
<b>Moms and Babies Exp</b>	6,335	6,339	6,391	6,403	6,444	6,481	6,052	6,134	6,002	6,153	6,147	6,065
<b>Pre-expansion parents</b>	340,859	341,070	342,886	343,211	345,300	346,297	345,568	348,011	344,612	348,792	347,019	345,825
<b>FamilyCare Phase I</b>	27,069	27,070	27,451	27,459	27,829	27,863	29,996	30,086	30,334	30,482	30,674	30,777
<b>FamilyCare Phase II</b>	28,825	28,828	29,069	29,083	29,511	29,593	30,348	30,554	30,477	30,823	30,926	30,815
<b>FamilyCare Phase III</b>	34,769	34,784	36,517	36,536	38,430	38,547	38,580	38,879	40,122	40,658	42,033	43,164
<b>TOTAL</b>	<b>1,574,603</b>	<b>1,575,067</b>	<b>1,584,020</b>	<b>1,584,832</b>	<b>1,594,011</b>	<b>1,596,871</b>	<b>1,597,260</b>	<b>1,604,355</b>	<b>1,597,220</b>	<b>1,609,577</b>	<b>1,611,291</b>	<b>1,610,631</b>

## BYLAWS

Amended and Adopted March 22, 1998

### ARTICLE I - NAME AND MANDATE

#### SECTION I

The Medicaid Advisory Committee (MAC) is created to advise the Department of Healthcare and Family Services (HFS)~~Public Aid~~, State of Illinois, about health and medical care services under the Medical Assistance Program pursuant to the requirements of 42 CFR 431.12 with respect to policy and planning involved in the provision of Medical Assistance.

#### SECTION II

The MAC shall have the opportunity for participation in policy development and program administration, including furthering the participation of recipient members in the agency program pursuant to 42 CFR Section 431.12(e).

### ARTICLE II - MEMBERSHIP

#### SECTION I

The MAC shall consist of up to fifteen (15) voting members at least five (5) of whom must represent consumers of medical care. (A consumer is defined as a person who is not a health care provider.) All appointments of members shall be made in writing by the Director of HFS~~the Department of Public Aid~~. These members shall include representatives of consumers' groups, including Medicaid clients, physicians (at least one of whom shall be Board Certified), and other representatives of health professions who are familiar with the health care needs, services, and resources available for low income population groups.

In addition, the Directors of the Department of Public Health, the Department of Children and Family Services, and the Secretary of the Department of Human Services or their designees shall be ex-officio members.

#### SECTION II

Terms of members shall be staggered. Each member shall serve for a term of two (2) years, or until a successor is appointed in writing by the Director of HFS~~the Department of Public Aid~~. No member other than a consumer who is a Medicaid client may serve for more than two (2) consecutive terms. Upon two (2) years of nonmembership, a former member shall be eligible for reappointment. After two (2) consecutive terms, the term of a consumer member who is a Medicaid client may be extended at the request of the Chair and at the discretion of the Director of HFS~~the Department of Public Aid~~.

### SECTION III

Members of the MAC and duly appointed members of its committees and task forces shall serve without compensation, except that they may be reimbursed for allowable travel and other approved, necessary expenses in connection with the MAC meetings and business. Such reimbursement shall be consistent with the statutory provisions and with the regulations of the State of Illinois. Operating expenses of the MAC shall be borne by ~~HFS~~the Department of Public Aid.

### SECTION IV

If a member misses three (3) consecutive regularly scheduled meetings in one year, his/her membership may be terminated at the discretion of the Director. A member may send a substitute who shall count as attendance by the member, and the substitute shall be able to vote at the discretion of the Chair.

## ARTICLE III - OFFICERS

### SECTION I

Officers of the Medicaid Advisory Committee shall consist of a Chair and Vice-Chair who shall be elected by the MAC from among its members.

### SECTION II

The Chair and Vice-Chair shall be selected in the following manner: MAC members shall appoint a nominating committee annually. At the last meeting of the calendar year, the nominating committee shall present a slate of candidates for the offices of Chair and Vice-Chair. Names and biographies of those nominated shall be mailed to members at least ten (10) days prior to the election. Nominations from the floor will be permitted. The officers will be elected by a simple majority of those present and voting at the first quarterly meeting in the following calendar year. An officer shall serve until his/her successor is elected.

### SECTION III

Any officer of the MAC shall not be eligible to serve for more than two (2) consecutive years in the same office. The two-year membership term of any member serving in the capacity of Chair or Vice-Chair may be extended by the number of years served as Chair or Vice-Chair.

### SECTION IV

The Chair of the MAC shall perform the duties ordinarily ascribed to such office and shall preside at all meetings of the MAC.

#### SECTION V

In the event of the Chair's absence, the Vice-Chair shall preside. If both are absent, the Administrator of the Division of Medical Programs or his/her designee shall serve in this capacity.

### ARTICLE IV - MEETINGS

#### SECTION I

Regular meetings of the MAC shall be held at least quarterly, unless suspended by action of the MAC and are subject to the Open Meetings Act (P.A. 82-387). Such meetings shall take place at locations, dates and times agreed to by MAC membership.

It shall be the responsibility of ~~HFS~~~~the Department~~ to give notices of the location, date and time of said regular meetings to each member of the MAC at least ten (10) days prior to each of the said meetings.

#### SECTION II

Special meetings of the MAC may be called provided that they are in compliance with the State's Open Meeting Act (P.A. 82-387).

#### SECTION III

An agenda of business scheduled for deliberation shall be prepared and distributed to the members of the MAC at least ten (10) days prior to a scheduled meeting of the MAC.

#### SECTION IV

A quorum shall be six (6) members.

#### SECTION V

Participation in MAC meetings shall be limited to MAC members and persons who have been invited by ~~HFS~~~~the Department~~ and/or Chair to provide information on an agenda item. Participation by observers shall be at the discretion of the Chair. The Chair of the MAC has the right to limit the length of each observer's address to conform to the MAC agenda. All deliberations of the MAC and its committees shall be governed by Robert's Rules of Order to the extent not inconsistent with these Bylaws.

SECTION VI

Any member may add any topic to the agenda for action at the next meeting if it is submitted to ~~HFS~~the Department prior to the date the agenda for that meeting is mailed to the members. Upon the affirmative vote of a majority of the members present, however, an item can be added to the agenda and be acted upon at the same meeting. Without a majority vote, action on new business will be taken at a future meeting.

**ARTICLE V - COMMITTEES**

SECTION I

The MAC is authorized to create subcommittees and workgroups as it deems appropriate.

SECTION II

The Chair and members of subcommittees and work groups shall be appointed by the Chair of the MAC in consultation with ~~HFS~~the Department. Subcommittee and work group membership may include persons who are not members of the MAC. Each subcommittee must have a MAC member serve on the subcommittee and represent the subcommittee at MAC meetings. ~~HFS~~The Department shall assign staff to provide support to the subcommittee and work groups.

SECTION III

At the second meeting of every year, the MAC will review the charge and membership of each subcommittee.

**ARTICLE VI - PROFESSIONAL STAFF**

SECTION I

The Administrator or his/her designee shall serve as the MAC official consultant. The Administrator may designate members of staff to assist in such consultation.

**ARTICLE VII - AMENDMENT**

SECTION I

The Bylaws may be amended by a simple majority of the members present at any regular or special meeting of the MAC if the proposed amendment is given in writing at least ten (10 ) days before said meeting.

A:\BYLAWS.WPD