

**Medicaid Advisory Committee
Care Coordination Subcommittee**

401 S. Clinton
7th Floor Video-conference Room
Chicago, Illinois

And

201 South Grand Avenue East
3rd Floor Video-conference Room
Springfield, Illinois

September 13, 2011
10 a.m. – 12 p.m.

Revised Agenda

- I. Call to Order
- II. Introductions
- III. Review of July 19, 2011 Meeting Minutes
- IV. Presentation on Care Coordination
 - Dr. Scott Sarran, Vice President and Chief Medical Officer
Blue Cross Blue Shield of Illinois
- V. Summary of responses to HFS' Coordinated Care Discussion Paper – Dr. Pont
- VI. Solicitation of additional comments for modification to PCCM
- VII. Open to Subcommittee
- VIII. Next Steps
- IX. Adjournment

Follow-up from Dr. Kirkegaard on discussion of Illinois Health Connect (IHC) at
July 19, 2011 MAC Care Coordination Subcommittee

PCP Changes

Requiring clients to lock into one provider for extended periods of time is not feasible unless there are very robust mechanisms for reviewing and allowing exceptions. Many Medicaid patients experience chaotic lives that necessitate immediate changes in medical home selection. Locking-in creates tension when a sick patient presents to a provider and the provider cannot render care because the patient cannot readily change PCPs.

The IHC experience demonstrates very little flux in PCP selection over time. For 1.5 million IHC patients who were continuously enrolled during fiscal year 2011, 190,000 or 13% made one PCP change, 22,000 or 1.5 % made two PCP changes and only 3,349 or 0.23% patients made 3 or more PCP changes.

Over the past three years, the IHC Client Survey shows that over 90% of patients are satisfied with the program and with their medical home. Anecdotal feedback suggests that the majority of patients value their medical home relationship and that lock-in is unnecessary. Patient switching is usually a consequence of a change in life circumstances or inability to readily access the current medical home, which should be addressed by promoting accessibility standards.

“Frequent switchers” (more than 4 PCP changes per year) are flagged in AHS’ system and additional education is provided when they call to activate another change in their PCP.

Data on number of users for Claims History:

An electronic database consisting of at least 2 years of claims data (including pharmacy) and 6 years of immunization data is available through the MEDI system to any Medicaid provider for any current Medicaid client, including patients who are excluded from IHC. The following shows usage for the period of October 2010 through June 2011:

Oct-Dec 2010

Unique searches: 12,662

Users: 437

Jan-Mar 2011

Unique searches: 8,951

Users: 435

Apr-Jun 2011

Unique searches: 10,698

Users: 453