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To: [HFS.Webmaster](#)
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Subject: Comments for Coordinated Care Program
Date: Friday, July 01, 2011 2:46:46 PM

Illinois Department of Healthcare and Family Services:

Attached are comments from Trinity Regional Health System related to the Coordinated Care Program for the State of Illinois. Trinity:

1. is committed to working with the state of Illinois to coordinate the care of patients and is willing to work on pilot programs.
2. believes that the care of the patient is for the medical and mental health of the patient. The program must integrate both aspects of care by the contracted coordinator of care. Medical and Mental Health cannot be separated for the best clinical outcomes to patients and most cost effective care.
3. believes that contracting should be done for populations, not by disease. The contracted coordinator of care can contract with specialty providers for specific diseases.
4. believes that high cost care, such as transplantation and burns, be borne by Medicaid directly. The cost of these infrequent patients can diminish the impact of a "high value" provider.
5. supports the concepts of sharing in cost savings and "pay for performance". Trinity does not support "full-risk" contracts.
6. believes that "any willing provider should be considered to have a contract with Medicaid, as long as quality criteria are met. The Dept. of Insurance should not be added to the process. If risk is accepted by the care coordinator, DOI criteria for financial soundness should be included as part of the application.
7. believes that auto-assignment should be random and not formula driven. Any auto-assignment should be based upon family groupings.
8. believes that coordinators of care should not be expected to receive reduced reimbursement if a member transitions from Medicaid into an exchange or vice versa. Providers of care should be guaranteed equal or improved reimbursement when the member changes coverage. The alternative is to allow the provider the right to cancel his/her care provision upon the change of coverage.
9. supports the purchase power of Medicaid be used to reduce the cost of supplies, pharmaceuticals, and insurance for providers of care.

Sincerely,
Gregory Pagliuzza,
CFO, Trinity Regional Health System

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