

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-25-26
Baltimore, Maryland 21244-1850



State Demonstrations Group

December 12, 2023

Theresa Eagleson
Director
Department of Healthcare and Family Services
201 South Grand Ave East
Springfield, IL 62763-0002

Dear Director Eagleson:

The Centers for Medicare & Medicaid Services (CMS) approved the Evaluation Design for Illinois' Reasonable Opportunity Period COVID-19 Public Health Emergency (PHE) amendment to the section 1115 demonstration entitled, "Illinois Continuity of Care and Administrative Simplification" (Project No: 11-W-00341/5). We sincerely appreciate the state's commitment to efficiently meeting the requirement for an Evaluation Design as was stipulated in the approval letter for this amendment dated May 4, 2023, especially under these extraordinary circumstances.

In accordance with 42 CFR 431.424(c), the approved Evaluation Design may now be posted to the state's Medicaid website within 30 days. CMS will also post the approved Evaluation Design on Medicaid.gov.

Consistent with the approved Evaluation Design, the draft Final Report will be due to CMS 18 months after the expiration of the amendment approval period.

We sincerely appreciate the state's commitment to evaluating the Reasonable Opportunity Period COVID-19 PHE amendment under these extraordinary circumstances. We look forward to our continued partnership on the Illinois Continuity of Care and Administrative Simplification section 1115 demonstration. If you have any questions, please contact your CMS demonstration team.

Sincerely,

Danielle Daly
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Danielle Daly -S
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Danielle Daly
Director
Division of Demonstration Monitoring and Evaluation

cc: Courtenay Savage, State Monitoring Lead, CMS Medicaid and CHIP Operations Group

Illinois COVID-19 Public Health Emergency Demonstration

Draft EVALUATION DESIGN

October 16, 2023

On May 4, 2023, the Centers for Medicare and Medicaid Services (CMS) approved the State of Illinois Department of Healthcare and Family Services (HFS) request for a Reasonable Opportunity Period (ROP) Extension COVID-19 Public Health Emergency (PHE) section 1115 Demonstration (ROP Demonstration), as an amendment to Illinois' "Continuity of Care and Administrative Simplification" section 1115(a) Demonstration (Project # 11-W-00341/5). This authority is effective from the date the state begins its PHE unwinding period and lasts for up to 15 months.

In accordance with the terms and conditions of the ROP Demonstration approval letter, HFS is required to accommodate a qualitative assessment of the expenditure authority with applicable descriptive and contextual data. HFS is required to develop an Evaluation Design and a Final Report to synthesize all monitoring and evaluation activities and results. The Final Report must be completed no later than 18 months after the expiration of the ROP Demonstration approval period.

Towards these ends, this document is submitted to meet HFS's Evaluation Design requirements for the ROP Demonstration. This document defines research questions developed from CMS guidance that pertain to the approved ROP Demonstration and expenditure authorities and describes how HFS will test, in the context of the PHE unwinding period, how the approved ROP Demonstration and expenditure authority supported HFS in establishing parity in eligibility and enrollment processing and streamlined state workload during the unwinding period to support continuity of coverage for eligibility Medicaid beneficiaries, consistent with the objectives of Medicaid. This draft evaluation design will serve as the basis for the Final Report, which will consolidate information on demonstration implementation, evaluation measures and outcomes, and lessons learned from the demonstration.

A. Demonstration Background, Impacted Population, and Goals

Demonstration Background

On January 30, 2020, the Health and Human Services (HHS) Secretary declared a public health emergency in response to the COVID-19 outbreak. Following the PHE declaration and the subsequent declaration of a national emergency by the President of the United States on March 13, 2020, Illinois Governor JB Pritzker announced a mandatory stay-at-home order beginning March 22, 2020. As a result of the stay-at-home order during the PHE, there were dramatic disruptions to HFS eligibility and enrollment operations, including significant staffing shortages throughout the State of Illinois. Further, the federal maintenance of effort requirement throughout the PHE has led to a significant lapse of time since state agencies have had contact with beneficiaries related to eligibility verifications.

CMS issued a State Health Official Letter (SHO) #22-001 on March 3, 2022, which gave states guidance on preparing for the "unwinding" of temporary authorities and flexibilities that HHS granted in response to the PHE, including strategies to ensure states are able make timely and accurate redeterminations of beneficiary eligibility after the expiration of the PHE. One such strategy allows states to pursue Section 1115 demonstration authority to extend the ROP during the PHE unwinding period to individuals who declared to U.S. citizenship at the time of application in the same manner such extended ROP is provided under existing regulatory authority at 42 C.F.R. §435.956(b)(2)(ii)(B) for individuals who have attested to satisfactory immigration status.

Through this ROP Demonstration, individuals in the U.S. citizenship verification process during the PHE will maintain coverage based on the declared information until their redetermination, after which they will receive an extended 90-day ROP to verify their citizenship status. HFS will receive expenditure authority through the demonstration to continue processing verifications of citizenship status for 15 months beginning with the first month of a state's unwinding period. These 15 months include the state's 12-month unwinding period as described in SHO 22-001, plus three additional months for HFS to complete its verification of U.S. citizenship for an individual whose case comes up for processing in month 12 of the unwinding period.

Impacted Population

This ROP Demonstration is effective for individuals who have declared themselves to be citizens of the United States, but for whom that status has not been verified, and are otherwise eligible for Medicaid. Specifically, the expenditure authority granted through this ROP Demonstration allows for coverage of individuals who have been in an ROP beginning on March 18, 2020 or at any time thereafter during the PHE, and who have had their coverage maintained in order to comply with the continuous enrollment during the PHE. In the ROP Demonstration application, HFS projected approximately 1,484 individuals would retain eligibility and coverage under this provision during the calendar year 2023 (CY23) period of the demonstration and 1,060 individuals for the calendar year 2024 (CY24) period of the demonstration. The total projected aggregate expenditures under the demonstration were estimated to be \$10,566,632 for the CY23 period and \$5,283,160 for the CY24 period.

Demonstration Purpose & Goals

The goal of this ROP Demonstration is to assist HFS in processing eligibility and enrollment actions during the PHE unwinding period for individuals whose declared U.S. citizenship status has not been verified. Specifically, this demonstration is meant to provide additional time for individuals who have declared to U.S. citizenship, but for whom that status has not been verified, to preserve continuity of coverage and access to services during the unwinding of the PHE. This demonstration will provide HFS with additional time to complete outstanding verifications to help prevent procedural terminations of coverage for individuals who are otherwise Medicaid eligible. This extension of the ROP will allow for impacted individuals who have attested to citizenship status to retain coverage and therefore access to services.

Overall, the ROP Demonstration is intended to assist in promoting the objectives of Medicaid because it is expected to enable more flexible management of state workload during the unwinding period to promote continuity of coverage and reduce barriers to care in a manner intended to protect, to the greatest extent possible, the health, safety, and welfare of individuals enrolled in Medicaid. Further, the ROP Demonstration is expected to support parity in the application of the verification policies and processes between individuals attesting to citizenship and those individuals who declared to satisfactory immigration status. The evaluation will determine whether the ROP Demonstration resulted in verification of declared citizenship, continuity of coverage for impacted individuals, and improvements in HFS's administrative capacity for processing redeterminations, including eligibility verifications, for Medicaid beneficiaries.

B. Hypotheses & Evaluation Questions

This section and subsequent sections of this document are informed by the "*Reasonable Opportunity Period Extension COVID-19 Public Health Emergency Medicaid Section 1115 Demonstration: Guidance for Monitoring and Evaluation Requirements*" document CMS provided to HFS as supplemental guidance for developing the ROP Demonstration evaluation plan.

This evaluation will discuss key considerations for HFS and other stakeholders as it relates to the provisions authorized via the ROP Demonstration. Specifically, this ROP Demonstration will test whether and how the expenditure authority to provide a limited 90-day ROP for individuals who have declared to

U.S. citizenship, but for whom that status has not been verified, will support parity in the application of the verification policies and processes between these individuals and individuals who declared to satisfactory immigration status under the good faith ROP extension permitted under existing regulatory authority at 42 C.F.R. § 435.956(b)(2)(ii)(B), enable more flexible management of state workload during the unwinding period to promote continuity of coverage, and reduce barriers to care, in line with the objectives of the Medicaid program.

The following research questions and associated hypothesis will assist in evaluating the main objectives and goals of this ROP Demonstration.

Hypothesis 1: HFS anticipates that the extension of the ROP will lead to completion of outstanding citizenship status verifications within the 90-day period.

Description: Extending the ROP for individuals will result in completion of outstanding verifications for those whose declared U.S. citizenship status has not been verified or whose status is inconsistent with available electronic data sources. We will evaluate whether individuals' citizenship statuses were in fact able to be verified during the 90-day ROP.

Research Question: Did the ROP Demonstration lead to verification of citizenship status within the 90-day period? How many individuals were eventually able to have their US citizenship verified?

Hypothesis 2: HFS anticipates that individuals declaring to be U.S. citizens will maintain coverage during the ROP extension.

Description: Individuals in the U.S. citizenship verification process during the ROP Demonstration will have continuity of coverage and not have their coverage terminated due to procedural reason. We will evaluate whether individuals were able to maintain coverage.

Research Question: Did individuals declaring to be U.S. citizens maintain coverage during and following the ROP? How did the ROP Demonstration affect beneficiary health coverage by reducing procedural terminations and churn?

Hypothesis 3: HFS anticipates that the extension of the ROP will lead to improvements in HFS' administrative capacity for processing redeterminations, including eligibility verifications, for Medicaid beneficiaries.

Description: The ROP Demonstration will allow HFS to improve administrative capacity and management of redetermination processes including: timeliness of redetermination and other eligibility actions by the agency; ability of the agency to ensure individuals understand redetermination processes and what is required of them to establish eligibility; and ability of the agency to assist individuals in obtaining documents needed to verify their citizenship status.

Research Question: Did the ROP Demonstration lead to improvements in HFS' administrative capacity for processing redeterminations, including eligibility verifications, for Medicaid beneficiaries?

Hypothesis 4: HFS anticipates that extension of the ROP will impact underserved populations and support health equity by providing a more equitable application of the verification policies and processes for individuals who have declared to U.S. citizenship.

Description: The implementation of a good faith extension of the ROP for individuals who have attested to a satisfactory citizenship status will serve the state's populations of focus and support more equitable verification processes for these populations.

Research Question: How many Medicaid beneficiaries were impacted by this Demonstration? What were the principal demographics of the populations impacted by this Demonstration (e.g., age, sex, race/ethnicity)? Did the outcomes vary by demographic characteristics?

Hypothesis 5: HFS anticipates that any administrative challenges associated with implementing the ROP Demonstration were able to be addressed, and the beneficial outcomes of the ROP Demonstration justified any identified implementation challenges.

Description: This ROP Demonstration will reduce administrative challenges associated with processing eligibility and enrollment actions related to the U.S. citizenship verification process during the unwinding period.

Research Question: What were the principal challenges from the perspective of the state Medicaid agency associated with implementing the ROP Demonstration and engaging with individuals? What actions did HFS take to address challenges presented by the implementation of the ROP Demonstration? To what extent were those actions successful in the context of the PHE?

C. Methodology, Data Sources, and Limitations

Evaluation Design Overview

As detailed in *Figure 1: Analytic Table* below, the primary evaluation activity will include qualitative and quantitative analysis of data from multiple sources. Enrollment and eligibility data will be utilized to determine how many individuals in the redetermination process had their citizenship status verified during the ROP Demonstration. This data will also provide insight into possible reasons for disenrollment of individuals in the U.S. citizenship verification process during the ROP Demonstration. Information about the populations served and affected by this demonstration, impact and outcomes of the demonstration, and other implementation challenges will be obtained via interview feedback from key eligibility staff.

The analysis will be conducted on the experience corresponding with the approved demonstration period, April 1, 2023, through June 30, 2024. The analysis will be descriptive in nature. Analysis will be focused on individuals in the U.S. citizenship status verification process during the ROP Demonstration.

Evaluation Measures, Data Sources, and Approach

HFS will approach this Evaluation design through a mix of qualitative and quantitative analytic approaches, as described in the *Figure 1* below.

Figure 1. Analytic Table

Hypothesis and Evaluation Questions			
Hypothesis 1: HFS anticipates that the extension of the ROP will lead to completion of outstanding citizenship status verifications within the 90-day period.			
Research Question	Measures	Data Sources	Analytic Approach
Research Question 1: Did the ROP extension policy lead to verification of U.S. citizenship status within the 90-day period? How many individuals were eventually able to have their US citizenship verified?	<ul style="list-style-type: none"> • Number of individuals in the redetermination process who had their citizenship status: <ul style="list-style-type: none"> ○ Verified and who were determined eligible during the ROP; ○ Verified but who were determined not eligible during the ROP; and ○ Unable to be verified during the ROP. 	HFS Eligibility and Enrollment System	Descriptive Analysis

Hypothesis 2: HFS anticipates that individuals declaring to be U.S. citizens will maintain coverage during the ROP extension.

Research Question	Measures	Data Sources	Analytic Methods
Research Question 2: Did individuals declaring to be U.S. citizens maintain coverage during and following the ROP? How did the ROP Demonstration affect beneficiary health coverage by reducing procedural terminations and churn?	<ul style="list-style-type: none"> Number of individuals in the citizenship status verification process who maintained coverage during the ROP Demonstration Number of individuals whose citizenship HFS was unable to verify during the ROP, but who reenrolled in Medicaid during the ROP Demonstration 	HFS Eligibility and Enrollment System	Descriptive Analysis, Trend Analysis

Hypothesis 3: HFS anticipates that extension of the ROP will lead to improvements in the state's administrative capacity for processing redeterminations, including eligibility verifications, for Medicaid beneficiaries.

Research Question	Measures	Data Sources	Analytic Methods
Research Question 3: Did the ROP Demonstration lead to improvements in HFS' administrative capacity for processing redeterminations, including eligibility verifications, for Medicaid beneficiaries?	<ul style="list-style-type: none"> Average time taken to verify citizenship status during the ROP. Types of assistance provided by agency staff to individuals in obtaining documents needed to verify their citizenship status. 	HFS Eligibility and Enrollment System Interview feedback from key HFS eligibility staff	Descriptive Analysis

Hypothesis 4: HFS anticipates that extension of the ROP will impact underserved populations and support health equity by providing a more equitable application of the verification policies and processes for individuals who have declared to U.S. citizenship.

Research Question	Measures	Data Sources	Analytic Methods
Research Question 4: How many Medicaid beneficiaries were impacted by this Demonstration? What were the principal demographics of the populations impacted by this Demonstration (e.g., age, sex, race/ethnicity)? Did the outcomes vary by demographic characteristics?	<ul style="list-style-type: none"> Number of impacted beneficiaries. Analysis of demographics of population impacted by Demonstration Analysis of outcomes by population demographics 	HFS Eligibility and Enrollment System Interview feedback from key eligibility staff	Descriptive Analysis

Hypothesis 5: HFS anticipates that any administrative challenges associated with implementing the ROP Demonstration were able to be addressed, and the beneficial outcomes of the ROP extension demonstration justified any identified implementation challenges.

Research Question	Measures	Data Sources	Analytic Methods
Research Question 5: What were the principal challenges from the perspective of the state Medicaid agency associated with implementing the ROP Demonstration and engaging with individuals? What actions did HFS take to address challenges presented by the implementation of the ROP Demonstration? To what extent were those actions successful in the context of the PHE?	<ul style="list-style-type: none"> Description of challenges (if any) related to implementation of the ROP extension demonstration Description of actions taken to address challenges, as detailed in RQ 5.1 Description of how these actions were successful 	Interview feedback from key eligibility staff	Descriptive Analysis

Methodological Limitations

HFS will be reporting quantitative data regarding the impacted population and expenditure trends in its evaluation of the effects of the ROP Demonstration and will also include analyses that will be qualitative and descriptive, such as key informant interviews and document review, consistent with CMS guidance. The specific data sources proposed in *Figure 1* to be utilized for this evaluation are detailed below, including a description of data quality and any applicable data limitations:

- **Eligibility System:** HFS will conduct a review of enrollment and eligibility data to determine how many individuals were impacted by the ROP Demonstration and characteristics of the populations affected by this demonstration.
- **Interview Feedback from Key Eligibility Staff:** HFS will conduct interviews with key HFS staff involved in the implementation of the ROP Demonstration to assess many of the qualitative aspects of this Demonstration. Staff interviews will provide critical narrative information about the impacts of the Demonstration not otherwise available through the data alone. However, like all subjective interviews, common limitations associated with this data source are biases and statistical representative samples. HFS hopes to mitigate these data source limitations supplementing with quantitative data where applicable.

The methodology will investigate the overall impact of the ROP Demonstration, and whether the net effect of this extension helped prevent procedural terminations of coverage and led to improvements in the state's administrative capacity for processing redeterminations for Medicaid beneficiaries. Due to the simplified nature of this design, HFS does not anticipate significant methodological limitations.

D. Additional Information

- **Independent Evaluator Selection Process – No Attachment.** Per CMS' instructions, this evaluation is state-led, and no independent evaluator is required.
- **Evaluation Budget – No Attachment.** At the time this evaluation design was submitted to CMS, no demonstration funds are being allocated to evaluation activities.
- **Timeline & Major Milestones**

Date	Description
May 4, 2023	CMS approval day of ROP Demonstration
October 31, 2023	ROP Demonstration Evaluation Design Due to CMS (180 days after Demonstration approval)
June 30, 2024	Official end date of ROP Demonstration (15 months after beginning of state's unwinding period on April 1, 2023)
December 30, 2025	Final Report Due for ROP Demonstration (18 months after end of ROP Demonstration period on June 30, 2024)