

# PUBLIC EDUCATION SUBCOMMITTEE (PUB ED)

June 27, 2025

VIRTUAL WebEx Meeting

10:00 AM – 12:00 PM



**HFS**

Illinois Department of  
Healthcare and Family Services



**HFS**

Illinois Department of  
Healthcare and Family Services

## OUR VISION FOR THE FUTURE

# We improve lives.

- ▶ We address social and structural determinants of health.
- ▶ We empower customers to maximize their health and well being.
- ▶ We provide consistent, responsive service to our colleagues and customers.
- ▶ We make equity the foundation of everything we do.

This is possible because:

### ▶ **We value our staff as our greatest asset.**

We do this by:

Fully staffing a diverse workforce whose skills and experiences strengthen HFS.

Ensuring all staff and systems work together.

Maintaining a positive workplace where strong teams contribute, grow and stay.

Providing exceptional training programs that develop and support all employees.

### ▶ **We are always improving.**

We do this by:

Having specific and measurable goals and using analytics to improve outcomes.

Using technology and interagency collaboration to maximize efficiency and impact.

Learning from successes and failures.

### ▶ **We inspire public confidence.**

We do this by:

Using research and analytics to drive policy and shape legislative initiatives.

Clearly communicating the impacts of our work.

Being responsible stewards of public resources.

Staying focused on our goals.

# Charter

## Public Education Subcommittee

**The Public Education Subcommittee is established to advise the Medicaid Advisory Committee concerning materials and methods for informing individuals about health benefits available under the Department of Healthcare and Family Service's medical programs.**

**This subcommittee, comprised of a diverse group of stakeholders, shall:**

1. Review and provide advice on brochures, pamphlets and other written materials prepared by the department;
2. Review and provide advice on HFS website content directed towards Medicaid beneficiaries and the general public;
3. Review projects designed to inform the general public about medical programs;
4. Serve as conduit for informing the Medicaid Advisory Committee and the department concerning gaps in public understanding of the medical programs;
5. Propose additional means of communicating information about medical programs;
6. Review and provide advice on program eligibility changes, customer service delivery, and eligibility processing systems, and
7. Make necessary recommendations to the Medicaid Advisory Committee

# Expectations of Subcommittee Members

- Attend all regularly scheduled meetings; when this is not possible, secure prior approval from Chair to send a non-voting substitute.
- Bring healthcare and social determinants of health knowledge and subject matter expertise to bear on the work of the subcommittee in support of Illinois' Medicaid Program.
- Drive meeting agendas and work products.





# Summary of Agenda

Presenter: Nadeen Israel, Chair



# Agenda

- I. Call to Order**
- II. Housekeeping Rules**
- III. Roll Call of Subcommittee Members**
- IV. Introduction of HFS and State Agency Staff**
- V. Review and Approval of the Meeting Minutes-  
April 18,2024**
- VI. State Updates**
  - A. Division of Medical Programs**
  - B. Division of Eligibility Updates**
  - C. New Policy/ Modifications**
  - D. CoC Section 1115 Waiver**

# Agenda

**E. CoC 1115 Waiver Update**

**F. HBIA/S**

**G. State Updates**

**H. Leadership Update**

**VII. Public Comments**

**VIII. Additional Business: Old and New**

**IX. HFS Announcements**

**X. Concluding Directives and Wrap-Up**

**XII. Adjournment**

# House Keeping

- Meeting basics:
  - Please note, this meeting is being recorded.
  - To ensure accurate records, please type your name and organization into the chat.
  - If possible, members are asked to attend meetings with their camera's turned on, however, if you call in & need materials, please email [jenna.king@illinois.gov](mailto:jenna.king@illinois.gov) and [Margaret.dunne@illinois.gov](mailto:Margaret.dunne@illinois.gov) with a copy to [Melisha.Bansa@Illinois.gov](mailto:Melisha.Bansa@Illinois.gov) as soon as safely possible.
  - Please be sure to mute your audio except when speaking.
  - Please note that HFS staff may mute participants to minimize any type of disruptive noise or feedback.
- Comments or questions during the meeting:
  - If you are a subcommittee member and wish to make a comment or ask a question during the meeting, please use the WebEx feature to raise your hand, contact the host/co-host, or unmute yourself during QA sections facilitated by chair.
  - If you are a member of the general public and wish to make a comment, please register to make a public comment prior to the meeting. Instructions to make public comments have been provided for you in the public meeting posting located on the MAC webpage.
  - If you have a question during the meeting, please utilize the Webex chat feature to send your question directly to the subcommittee chair or any of the host or co-host.



# House Keeping

## Meeting basics Cont.

- The chair will try to address as many questions as possible during designated sections of the meeting. We recognize that due to the limited allotted time, your question may not be answered during the meeting, therefore be sure to visit the HFS Webpage for a list of helpful resources. Your questions are important to us and will help inform the development of future presentations and informational materials.
- HFS is committed to hosting meetings that are accessible and ADA compliant. Closed captioning will be provided. Please email [jenna.king@illinois.gov](mailto:jenna.king@illinois.gov) and [Margaret.dunne@illinois.gov](mailto:Margaret.dunne@illinois.gov) with a copy to [Melisha.Bansa@Illinois.gov](mailto:Melisha.Bansa@Illinois.gov) in advance to report any requests or accommodations you may require or use the chat to alert us of challenges during a meeting.
- Patience, please – many subcommittee members and staff are new to MAC proceedings.
- Minutes of the prior meeting will be circulated to subcommittee members in advance of each session. Once approved, they will be posted to the website.

## III. Roll Call of Subcommittee Members



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## Pub Ed Subcommittee Members

**Nadeen Israel**  
AIDS Foundation of Chicago

**Kathy Chan**  
Cook County Health

**Sherie Arriazola Martinez**

**Michelle Herron, Designee for Nancy Aguirre**  
Community and Residential Services

**Connie Schiele**  
HST

**Aubrey Biga, Designee for Brittany Ward**  
Lurie Children's Hospital

**Luvia Quinones, Designee for Edith Avila**  
**Olea**  
ICIRR

**Sue Vega**  
Alivio Medical Center

Chantel Bowen  
SIU School of Medicine

## IV. Introduction of HFS and State Agency Staff



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# HFS Lead Admin Staff

## Pub Ed Subcommittee

- Dana Kelly, HFS Chief of Staff
- Kate Yager, Administrator, Division of Eligibility
- Melishia Bansa, Deputy Director, Community Outreach | Boards and Commissions
- Jenna King, Medicaid Management Analyst, BMESP
- Crystal Snodgrass, Senior Public Service Administrator, Medical Eligibility Policy, BMESP
- Jacqueline Myers, Bureau Chief, Eligibility Integrity
- George Jacaway, Deputy Administrator, Division of Eligibility
- Margaret Dunne, Program Analyst, Division of Eligibility

# V. Review and Approval of the Meeting Minutes- April 18, 2025



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# VI. State Updates



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## **VI. A. Division of Medical Programs**

**Presenter: Aileen Kim, Deputy Chief of Staff**







# Managed Care Community Network (MCCN) Certification

## What is an MCCN?

- An MCCN is an entity, other than a Health Maintenance Organization (HMO) that is owned, operated, or governed by providers of health care services within Illinois. MCCNs provide or arrange primary, secondary, and tertiary managed health care under contract with HFS to persons participating in programs administered by the Department.





# Managed Care Community Network (MCCN) Certification

- HFS is accepting applications from provider-led entities seeking certification as MCCNs in Cook County.
- Applications are available on the HFS website: <https://hfs.illinois.gov/medicalproviders/cc/mccn.html>.
- Applications are due by 11:59 PM on Monday, August 4, 2025. Applications received after the deadline will not be considered.
- Please note that applying for and being awarded MCCN certification does not guarantee or imply selection for any future Medicaid managed care contract opportunities.
- For information on MCCN eligibility criteria, standards, and requirements, please refer to [89 Ill. Adm. Code 143](#).
- Questions regarding the application should be directed to [HFS.MCCN.Certification@Illinois.gov](mailto:HFS.MCCN.Certification@Illinois.gov).



## **VI. B. Division of Eligibility Updates**





## **VI. B. 1. Medical Applications**



# Medical Applications

## Application Backlog Report:

Application Processing by Month	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Apps Received (during month)	121,248	109,969	78,340	79,397	79,355	72,873
Apps Processed (during month)	89,370	105,657	90,199	112,573	102,559	82,444
Adjustment Factor	2,234	3,764	6,064	3,226	3,551	2,853
Apps On Hand (end of month)	153,004	161,080	155,285	125,335	105,682	98,964
<i>Apps On Hand over 45 days (end of month)</i>	<i>86,091</i>	<i>111,067</i>	<i>115,853</i>	<i>94,369</i>	<i>76,982</i>	<i>73,844</i>
Net Change in Apps on Hand (Total)	34,112	8,076	-5,795	-29,950	-19,653	-6,718
Net Change in Apps on Hand (Over 45 days)	15,282	24,976	4,786	-21,484	-17,387	-3,138

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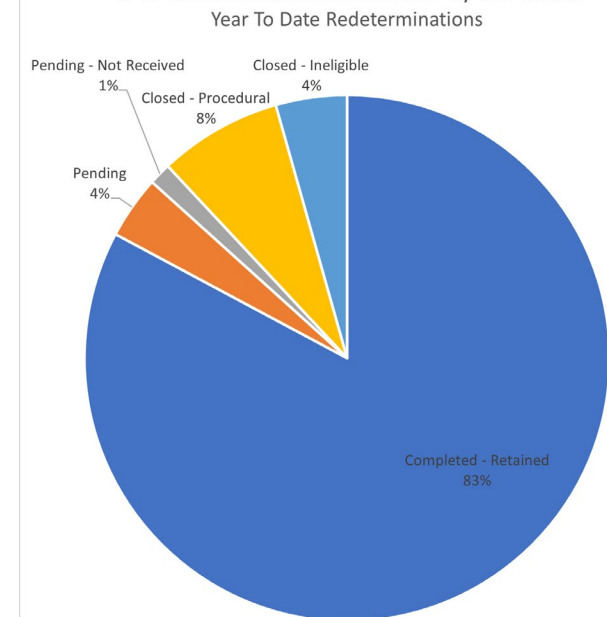
## **VI. B. 2. Medical Redeterminations**



# Redes by Status

Redetermination Status by Individual - May 2025													
Row Labels	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Grand Total
Completed - Retained	252,934	240,130	216,272	212,752	215,890	211,949	151,125	222,202	226,231	185,937	183,961	147,879	2,467,262
Pending	3,936	3,032	4,320	4,371	4,966	5,725	4,991	12,423	13,690	14,015	20,228	23,435	115,132
Pending - Not Received	0	0	0	0	0	0	0	0	0	0	0	40,481	40,481
Closed - Procedural	16,951	16,830	18,138	20,613	19,940	22,014	17,395	20,206	23,654	21,914	27,963	471	226,089
Closed - Ineligible	9,007	8,127	8,097	11,357	10,793	10,570	9,187	18,936	18,050	13,104	9,789	3,621	130,638
Grand Total	282,828	268,119	246,827	249,093	251,589	250,258	182,698	273,767	281,625	234,970	241,941	215,887	2,979,602

Status Type	Status Type Defined
Completed - Retained	Approved (Medical Benefits Continue)
Pending	Redetermination is received, but not yet processed
Closed - Procedural	Failed to respond to redetermination or failed to provide supporting information
Closed - Ineligible	Over income, refused to provide information, deceased, left the home, moved out of the state, customer request to withdraw/close case



# Redeterminations Received During Reconsideration Period (90 Days)

Late Reconsideration Request Responses - 23/24													
Days Late/Outcome	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Grand Total
CLOSED - INELIGIBLE	2,392	2,718	2,572	3,173	2,801	2,992	2,290	2,543	2,650	1,781	1,058	0	26,970
Responded within 1-30 Days	1,154	1,240	1,153	1,547	1,282	1,479	1,118	1,122	1,301	924	383		12,703
Responded within 31-60 Days	177	238	195	238	280	176	166	200	164	13			1,847
Responded within 61-90 Days	117	102	123	167	101	124	83	60	12				889
Other	944	1,138	1,101	1,221	1,138	1,213	923	1,161	1,173	844	675		11,531
CLOSED – PROCEDURAL (VCL)	15,422	15,423	16,799	18,830	18,404	20,385	16,120	18,298	21,988	20,493	26,823	0	208,985
Responded within 1-30 Days	402	404	382	578	514	580	445	483	451	453	457		5,149
Responded within 31-60 Days	103	155	143	212	215	217	170	211	251	40			1,717
Responded within 61-90 Days	119	112	140	219	140	196	164	197	43				1,330
No Response	14,798	14,752	16,134	17,821	17,535	19,392	15,341	17,407	21,243	20,000	26,366		200,789
COMPLETED - RETAINED	14,888	14,244	13,329	13,606	13,204	17,121	11,725	11,124	12,599	8,654	3,930	0	134,424
Responded within 1-30 Days	9,335	8,274	7,787	7,972	7,946	10,424	7,760	7,936	9,867	7,652	3,481		88,434
Responded within 31-60 Days	1,226	1,297	1,217	1,238	1,464	1,408	1,190	1,182	1,036	118			11,376
Responded within 61-90 Days	757	625	748	812	616	841	596	464	57				5,516
Other	3,570	4,048	3,577	3,584	3,178	4,448	2,179	1,542	1,639	884	449		29,098
PENDING	448	451	522	611	648	712	751	1,196	1,795	1,885	2,328	0	11,347
Responded within 1-30 Days	341	346	386	464	480	513	496	844	1,308	1,701	2,291		9,170
Responded within 31-60 Days	57	60	85	101	105	108	142	190	400	157			1,405
Responded within 61-90 Days	39	41	44	43	56	84	91	118	53				569
Other	11	4	7	3	7	7	22	44	34	27	37		203
Grand Total	33,150	32,836	33,222	36,220	35,057	41,210	30,886	33,161	39,032	32,813	34,139	0	381,726





# Redes By County

Recipient Outcome by County – YTD																	
Row Labels	CLOSED - INELIGIBLE			CLOSED - PROCEDURAL			COMPLETED - RETAINED			PENDING			PENDING - Not Received			ALL OUTCOMES	
	COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		Total COUNT	% ROW TOTAL
Adams	509		4%	850		7%	11,267		87%	217		2%	171		1%	13,014	100%
Alexander	86		5%	115		6%	1,560		87%	9		1%	21		1%	1,791	100%
Bond	146		6%	166		7%	2,140		85%	26		1%	28		1%	2,506	100%
Boone	482		5%	804		8%	8,242		83%	299		3%	138		1%	9,965	100%
Brown	40		5%	67		8%	721		81%	47		5%	11		1%	886	100%
Bureau	249		5%	393		8%	4,086		79%	369		7%	58		1%	5,155	100%
Calhoun	48		5%	87		9%	826		84%	17		2%	9		1%	987	100%
Carroll	110		4%	159		6%	2,187		86%	59		2%	25		1%	2,540	100%
Cass	141		4%	234		7%	2,567		80%	195		6%	54		2%	3,191	100%
Champaign	1,304		4%	2,519		8%	28,189		85%	765		2%	489		1%	33,266	100%
Christian	325		6%	448		8%	4,907		84%	108		2%	84		1%	5,872	100%
Clark	154		5%	201		7%	2,664		86%	27		1%	41		1%	3,087	100%
Clay	132		5%	217		8%	2,438		85%	58		2%	26		1%	2,871	100%
Clinton	220		5%	284		6%	3,764		86%	64		1%	48		1%	4,380	100%
Coles	510		5%	725		7%	9,234		86%	148		1%	120		1%	10,737	100%
Cook	52,317		4%	87,958		7%	981,001		82%	52,266		4%	16,168		1%	1,189,710	100%
Crawford	164		5%	231		7%	2,972		85%	76		2%	62		2%	3,505	100%
Cumberland	73		4%	171		9%	1,514		84%	18		1%	25		1%	1,801	100%
De Witt	122		4%	158		6%	2,398		87%	37		1%	29		1%	2,744	100%
DeKalb	707		4%	1,154		7%	13,898		83%	789		5%	229		1%	16,777	100%
Douglas	169		5%	245		8%	2,686		84%	63		2%	37		1%	3,200	100%
DuPage	5,913		5%	9,632		8%	92,277		78%	8,835		7%	1,611		1%	118,268	100%
Edgar	143		4%	252		7%	3,345		87%	49		1%	50		1%	3,839	100%
Edwards	46		4%	67		6%	954		88%	11		1%	7		1%	1,085	100%
Effingham	251		5%	394		8%	4,415		85%	66		1%	62		1%	5,188	100%
Fayette	234		5%	282		7%	3,685		86%	32		1%	54		1%	4,287	100%
Ford	134		6%	144		6%	2,027		84%	68		3%	42		2%	2,415	100%
Franklin	382		4%	566		6%	8,221		87%	121		1%	119		1%	9,409	100%
Fulton	313		5%	424		7%	5,416		86%	64		1%	67		1%	6,284	100%
Gallatin	74		6%	99		8%	1,082		85%	14		1%	8		1%	1,277	100%
Greene	124		5%	204		7%	2,316		84%	69		3%	38		1%	2,751	100%
Grundy	359		5%	570		8%	5,689		82%	239		3%	79		1%	6,936	100%
Hamilton	59		4%	128		9%	1,232		84%	32		2%	19		1%	1,470	100%
Hancock	131		5%	207		7%	2,527		87%	19		1%	16		1%	2,900	100%
Hardin	34		3%	61		6%	893		88%	11		1%	12		1%	1,011	100%
Henderson	43		4%	80		8%	874		85%	13		1%	22		2%	1,032	100%
Henry	312		4%	482		6%	6,656		87%	124		2%	73		1%	7,647	100%
Homeless	3,245		3%	11,590		12%	77,463		81%	1,319		1%	1,524		2%	95,141	100%
Iroquois	240		5%	259		5%	4,207		86%	144		3%	42		1%	4,892	100%
Jackson	498		4%	916		8%	10,266		86%	187		2%	123		1%	11,990	100%
Jasper	70		5%	100		7%	1,223		85%	29		2%	15		1%	1,437	100%
Jefferson	397		5%	553		6%	7,558		86%	157		2%	99		1%	8,764	100%
Jersey	177		5%	223		6%	2,970		85%	89		3%	49		1%	3,508	100%
Jo Daviess	117		5%	180		7%	2,060		82%	111		4%	34		1%	2,502	100%
Johnson	75		4%	144		7%	1,815		87%	24		1%	19		1%	2,077	100%



# Redes By County (continued)

Recipient Outcome by County – YTD Cont.																	
Row Labels	CLOSED - INELIGIBLE			CLOSED - PROCEDURAL			COMPLETED - RETAINED			PENDING			PENDING - Not Received			ALL OUTCOMES	
	COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		Total COUNT	% ROW TOTAL
Kane	4,134	5%		7,244	8%		70,985	78%		6,931	8%		1,339	1%		90,633	100%
Kankakee	937	4%		1,433	6%		19,980	86%		579	2%		333	1%		23,262	100%
Kendall	811	5%		1,470	9%		13,140	79%		899	5%		234	1%		16,554	100%
Knox	444	4%		592	6%		9,070	88%		117	1%		116	1%		10,339	100%
La Salle	869	4%		1,335	6%		17,485	85%		646	3%		209	1%		20,544	100%
Lake	4,921	4%		8,158	7%		87,174	79%		8,044	7%		1,380	1%		109,677	100%
Lawrence	153	5%		218	7%		2,563	85%		34	1%		31	1%		2,999	100%
Lee	250	4%		335	6%		4,813	84%		245	4%		64	1%		5,707	100%
Livingston	285	5%		411	7%		4,950	85%		101	2%		81	1%		5,828	100%
Logan	208	4%		340	7%		4,378	86%		64	1%		88	2%		5,078	100%
Macon	1,071	4%		1,623	6%		22,003	87%		391	2%		316	1%		25,404	100%
Macoupin	413	5%		495	6%		7,273	86%		162	2%		83	1%		8,426	100%
Madison	1,968	4%		3,222	7%		39,824	86%		799	2%		639	1%		46,452	100%
Marion	458	4%		575	5%		9,287	88%		130	1%		110	1%		10,560	100%
Marshall	81	4%		143	8%		1,475	80%		126	7%		14	1%		1,839	100%
Mason	152	6%		171	6%		2,350	86%		20	1%		30	1%		2,723	100%
Massac	171	5%		164	5%		3,160	89%		22	1%		44	1%		3,561	100%
McDonough	181	4%		301	6%		4,417	88%		49	1%		58	1%		5,006	100%
McHenry	1,858	5%		3,600	9%		31,042	76%		3,753	9%		576	1%		40,829	100%
McLean	1,025	5%		1,553	7%		18,747	85%		390	2%		269	1%		21,984	100%
Menard	63	4%		125	8%		1,396	86%		20	1%		23	1%		1,627	100%
Mercer	76	4%		169	8%		1,757	85%		39	2%		15	1%		2,056	100%
Monroe	138	6%		204	9%		1,789	82%		38	2%		12	1%		2,181	100%
Montgomery	285	5%		338	6%		5,105	87%		52	1%		55	1%		5,835	100%
Morgan	346	5%		413	6%		6,428	87%		94	1%		94	1%		7,375	100%
Moultrie	136	6%		184	9%		1,766	83%		28	1%		18	1%		2,132	100%
Ogle	385	5%		591	7%		6,935	83%		383	5%		83	1%		8,377	100%
Out of Illinois	1,020	12%		365	4%		7,443	84%								8,837	100%
Peoria	1,470	4%		2,729	7%		34,891	85%		1,579	4%		565	1%		41,234	100%
Perry	153	4%		245	7%		3,106	86%		81	2%		37	1%		3,622	100%
Piatt	94	5%		119	7%		1,503	85%		38	2%		10	1%		1,764	100%
Pike	126	4%		217	7%		2,606	86%		40	1%		49	2%		3,038	100%
Pope	28	4%		45	6%		647	88%					10	1%		732	100%
Pulaski	63	4%		74	5%		1,350	90%		7	0%		14	1%		1,508	100%
Putnam	23	4%		50	9%		453	81%		28	5%		8	1%		562	100%
Randolph	244	5%		373	7%		4,466	86%		43	1%		48	1%		5,174	100%
Richland	134	4%		240	7%		2,842	85%		75	2%		47	1%		3,338	100%
Rock Island	1,057	4%		1,886	6%		24,210	83%		1,756	6%		326	1%		29,235	100%
Saline	269	4%		434	7%		5,795	87%		73	1%		67	1%		6,638	100%
Sangamon	1,617	4%		2,444	7%		32,078	86%		459	1%		548	1%		37,146	100%
Schuyler	58	5%		84	7%		999	82%		63	5%		8	1%		1,212	100%
Scott	32	4%		53	7%		655	86%		7	1%		17	2%		764	100%
Shelby	175	5%		257	8%		2,773	84%		36	1%		46	1%		3,287	100%
St. Clair	2,191	4%		3,458	7%		45,918	87%		729	1%		701	1%		52,997	100%
Stark	47	5%		53	6%		783	87%		8	1%		8	1%		899	100%



# Redes By County (continued)

Recipient Outcome by County – YTD Cont.																	
	CLOSED - INELIGIBLE			CLOSED - PROCEDURAL			COMPLETED - RETAINED			PENDING			PENDING - Not Received		ALL OUTCOMES		
Row Labels	COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		COUNT	% ROW TOTAL		Total COUNT	% ROW TOTAL
Stephenson	410	4%		593	6%		8,141	84%		414	4%		125	1%		9,683	100%
Tazewell	930	5%		1,470	7%		17,139	85%		422	2%		234	1%		20,195	100%
Union	169	5%		240	6%		3,221	86%		54	1%		51	1%		3,735	100%
Unknown	16,502	4%		34,030	9%		328,209	83%		11,288	3%		5,926	1%		395,955	100%
Vermilion	839	4%		1,246	6%		18,586	87%		408	2%		233	1%		21,312	100%
Wabash	106	5%		102	5%		1,804	88%		29	1%		14	1%		2,055	100%
Warren	137	4%		215	6%		2,939	87%		45	1%		38	1%		3,374	100%
Washington	97	5%		155	9%		1,448	81%		48	3%		45	3%		1,793	100%
Wayne	136	5%		186	6%		2,575	86%		76	3%		28	1%		3,001	100%
White	123	4%		155	6%		2,402	87%		44	2%		25	1%		2,749	100%
Whiteside	467	4%		634	6%		9,213	87%		191	2%		104	1%		10,609	100%
Will	4,902	5%		7,875	8%		85,106	83%		3,494	3%		1,542	1%		102,919	100%
Williamson	627	5%		842	6%		12,098	87%		151	1%		180	1%		13,898	100%
Winnebago	3,039	4%		4,767	7%		61,259	86%		1,591	2%		989	1%		71,645	100%
Woodford	155	4%		303	8%		2,880	80%		209	6%		62	2%		3,609	100%
Grand Total	130,638	4%		226,089	8%		2,467,262	83%		115,132	4%		40,481	1%		2,979,602	100%



# Redes by Language

Language by Response - May 2025						
Primary Language	RESPONDED		DID NOT RESPOND		TOTAL	
	COUNT	COLUMN %	COUNT	COLUMN %	COUNT	COLUMN %
English	192,477	89%	22,646	84%	215,123	89%
Spanish	17,283	8%	3,503	13%	20,786	9%
Other Primary Language	5,358	2%	674	3%	6,032	2%
Grand Total	215,118	100%	26,823	100%	241,941	100%

# Questions?



## **VI. B. 3. Family Planning**



# Family Planning Enrollment

Year	# of Customers with FPP coverage of any type at any time within the calendar year
2022	1,964
2023	14,586
2024	34,498
2025	36,633

Current Open Enrollment by type of Application	# of Customers
Presumptive Eligibility	2,073
Stand-Alone Application	2,427
Opt-In Application	19,327
Current Total Enrollment	23,827

Data run 06/23/2025

# Questions?







## **VI. C. New Policy/Modification**






# New Policy/ Policy Modifications

## 5/2025-6/2025

1. [IDHS: MR #25.20 Medical PM/WAG Updates to Asylum Applicants and Torture Victims \(AATV\) and Victims of Trafficking, Torture or Other Serious Crimes \(VTTC\)](#) (published 5/27/2025)
2. [IDHS: MR #25.22 Treatment of Donations or Benefits from Fundraisers Received by Medical Customers](#) (published 6/10/2025)

# Questions?





## **VI. D. Continuity of Care and Administrative Simplification Section 1115 Waiver**





# Background

- HFS received approval from CMS for the Continuity of Care and Administrative Simplification 1115 demonstration waiver to further enhance health outcomes by promoting continuity of care and reducing administrative burdens within the Medicaid program.
- This 1115 waiver was approved on January 19, 2021, and the demonstration period is effective until December 31, 2025.
- The following initiatives were included in the original demonstration:
  - Managed care reinstatement when a Medicaid beneficiary submits late redetermination paperwork within 61- 90 days after redetermination due date.
  - Waiving the implementation of Hospital Presumptive Eligibility (HPE).
  - Extending postpartum coverage to 12 months - NOTE: this authority transitioned from 1115 waiver authority to State Plan authority on 7/1/22.



# Extension and Amendment Request

HFS' 1115 5-year extension request seeks two extension requests and one amendment.

- *Waiver Extension Request:* Managed Care Reinstatement When a Medicaid Beneficiary Submits Late Redetermination Paperwork within 90 Days
- *Waiver Extension Request:* Temporary Waiver of HPE (18-month waiver extension)
- *New Waiver Amendment Request:* Acceptance of Out-of-State Address from National Change of Address (NCOA) database and Medicaid Managed Care Organizations (MCOs) with Confirmation from Beneficiaries as Reliable



# Next Steps

- HFS will submit the waiver extension and amendment request to federal CMS by June 30, 2025.
  - HFS received no public comments during the comment period and two public hearings.
- Federal CMS will conduct a federal public comment period prior to considering Illinois' extension and amendment request.

# Questions?







## **VI. E. Health Benefits for Immigrant Adults/Seniors**





# HBIA Program Sunset

- The Health Benefits for Immigrant Adults (HBIA) program, which currently serves eligible individuals aged 42 to 64, will be ending effective July 1, 2025.
- The last day of medical coverage through HBIA will be June 30, 2025.
- Final notices were mailed to customers June 20, 2025.
- The Health Benefits for Immigrant Seniors (HBIS) program, which serves qualifying individuals aged 65 and over, will not be changing. If a current HBIA enrollee turns 65 in June or July 2025 and meet eligibility criteria, they will automatically be enrolled in the HBIS program.



# Available Resources

- **Federally Qualified Health Centers and Free and Charitable Clinics**
  - Individuals who are currently enrolled in HBIA may continue to have access to care through hospital financial assistance programs and primary and preventative care at Federally Qualified Health Centers (FQHC) and free and charitable clinics that serve uninsured and underinsured people regardless of their immigration status and ability to pay.
  - More information and clinic locations are available online at:
    - <https://www.illinoisfreeclinics.org>
    - <https://iphca.org/health-center-locator>



# Available Resources

- **Emergency Services**

- Individuals who are currently enrolled in HBIA will continue to have access to Emergency Medical for Noncitizens. This provides time-limited coverage for emergency services to individuals who are not eligible for other Medicaid eligibility categories solely due to their immigration status.
- In addition to traditional application pathways, hospitals may also apply on behalf of a customer.

- **End Stage Renal Disease (ESRD) Services**

- Noncitizens who are not eligible for comprehensive medical benefits who have End Stage Renal Disease (ESRD) may be eligible for certain dialysis, kidney transplantation, and post kidney transplantation services.
  - Contact HFS for additional information: 1-877-805-5312

- **Marketplace and Private Insurance**

- A small number of impacted customers may be eligible for Marketplace coverage and qualify for financial assistance. For free in-person help from a trained Navigator, go to <https://getcovered.illinois.gov/>.



# Additional Resources

- Illinois Department of Healthcare and Family Services website

<https://hfs.illinois.gov/medicalclients/healthbenefitsforimmigrants/healthbenefitsforimmigrantadults.html>

- **HFS Customer Service: 1-877-805-5312**

# Questions?



## **VI. F. State Legislative Updates**





# Medical Changes for Asylum Applicants and Victims of Trafficking, Torture or Other Serious Crimes (aka AATV and VTTC)

[Public Act 104-0009 \(SB 2437\) Medicaid Omnibus](#)

- Effective January 1, 2026, this change removed reference to Article XVI for Victims of Trafficking, Torture and Other Serious Crimes (VTTC). Article V now contains the *non-financial requirements* to receive medical as well as the financial requirements. Article XVI now only applies to SNAP and Cash.
- Single adults without derivative family member(s) will be eligible to receive medical under Victims of Trafficking, Torture or Other Serious Crimes (VTTC).
- Medical eligibility includes:
  - Persons who have filed an application for asylum, T visa, or U visa
  - Persons who are receiving federally funded torture treatment
  - Derivative family members of persons from 1 and 2, or as provided by Dept. rule
  - U visa holders
- For Asylee applicants, T visa applicants, and U visa applicants, as well as derivative family members where applicable: Medical coverage is limited to 24 *continuous* months but may continue if an application or appeal is pending at the end of the 24 continuous months.





# Victims of Trafficking, Torture, or Other Serious Crimes (VTTC)

Public Act 104-0002 (HB 1075) Budget Implementation Act

- VTTC Cash and Food amendments
  - Revised 2024 amendments as they relate to T visas and U visas in that single adults without derivative family members (DFM) will be eligible for VTTC Cash/Food assistance starting July 1, 2025.
  - Individuals preparing to file for Asylum, T, or U Visas remain ineligible for VTTC medical, food, and cash assistance.



# Initial Applications and Redeterminations

## Public Act 104-0009 (SB 2437) Medicaid Omnibus

- In response to Hampton v. Quintero, 305 ILCS 5/11-4 was revised to differentiate between an initial application for public assistance and redetermination
- “An initial application for public shall be deemed an application for all such benefits to which any person may be entitled except to the extent that the applicant expressly declines in writing to apply for particular benefits.”
- Also, add the following new language: “The redetermination is an annual redetermination of eligibility for current benefits and is not an initial application.”



# Health Benefits Exchange: Easy Enrollment

## HB 3756 Health Benefits Exchange: Easy Enrollment

- Effective July 1, 2025, amends the Illinois Health Benefits Exchange law by adding 215 ILCS 122/5-11 (new section)
- Allows for a special enrollment period for uninsured taxpayers and their dependents, if they:
  - Requested health insurance benefit information through the easy enrollment program under Section 513 of the Illinois Income Tax Act
  - Are eligible to enroll in a qualified health plan through the Exchange
- The taxpayer and dependents will have 60 days to enroll following the date of a letter from the exchange about their eligibility for insurance affordability programs, including Medicaid, premium tax credits, and cost-sharing reductions
- Coverage will be effective the first day of the month following plan selection
- Grants HFS and DOI rulemaking authority. Implementation to begin Jan 2026.



# Medicare Part A Buy-In Report

## [HB 3214 Medicare Part A Buy-In Agreement Report](#)

Requires HFS to study the impact of entering into a Medicare Part A Buy-In Agreement on Illinois and qualified Medicare beneficiaries and prepare a report

- Consult with federal CMS, DoA, and other agencies
- Conduct stakeholder engagements and summarize feedback
- Outline the methodology and potential cost savings and reduction in administrative burden
- Summarize findings and recommend further actions
- Post the report on the HFS website by July 1, 2026, and distribute to the DHS Secretary and other interested stakeholders

## **VI. G. Leadership Updates**



## **VI. G. 1. Federal Updates**



# The Latest in DC

- Budget reconciliation process continues.
  - As of 6/26/25, the Senate is marking up their version.
  - Senate Parliamentarian conducting a “Byrd bath.”
- House advances and Senate proposes major cuts to Medicaid.
  - Based on H.R. 1, CBO estimated that federal funding for Medicaid and the Marketplaces would be reduced by **\$900 billion** and an estimated **10.9 million** individuals could lose coverage.
- Proposals fall into main topics:
  - Provider taxes
  - State directed payments
  - Work requirements
  - Eligibility and cost-sharing
  - Coverage penalties
  - Other



# VII. Public Comments



**HFS**

Illinois Department of  
Healthcare and Family Services



No public comments



# Questions?



# VIII. Additional Business: Old and New



**HFS**

Illinois Department of  
Healthcare and Family Services

# Additional Business: Old & New



Items for future discussion?



HFS announcements?

# Updates to 2025 Meeting Schedule

## Meeting Dates:

- Friday, August 22<sup>nd</sup> at 10:00 am - 12:00pm
- Friday, November 14<sup>th</sup> at 10:00 am - 12:00pm

# Mandatory Ethics Trainings Reminder Email

All appointees must complete the following trainings on OneNet:

- 1 Security Awareness Training 2025
- 2 Diversity, Equity, Inclusion and Accessibility Training 2025
- 3 LGBTQIA+ Equity and Inclusion 2025
- 4 Ethics Training Program for State Employees and Appointees 2025
- 5 Harassment and Discrimination Prevention Training 2025
- 6 HIPAA & Privacy Training 2025

You can access the trainings at the following link: <http://onenet.illinois.gov/mytraining>

Please see attached memo for additional details. Please complete the trainings through OneNet no later than November 1st, 2025. If anyone has any issues logging into OneNet, please email [HFS.BureauofTraining@Illinois.gov](mailto:HFS.BureauofTraining@Illinois.gov)



# Pub Ed Subcommittee Resources

1. To receive Subcommittee email notifications regarding public meeting notices, sign up for our MAC and Subcommittee Listserv:
  - a. [Medicaid Advisory Committee \(MAC\) | HFS \(illinois.gov\)](#)
  - b. [MAC and Subcommittees E-mail Notification Request | HFS \(illinois.gov\)](#)

# MAC & Subcommittee Resources

**B. The Illinois Department of Healthcare and Family Services (HFS) utilizes a range of social media accounts to better reach our customers and stakeholders. We encourage you to follow us on:**

1. Twitter: <https://twitter.com/ILDHFS>
2. Facebook: <https://www.facebook.com/ILDHFS>
3. LinkedIn: <https://www.linkedin.com/company/ildhfs/>

for important news, announcements and alerts. And please spread the word to your own followers.

Together, let's keep those we serve well informed, educated and empowered!



# X. Concluding Directives and Wrap UP



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# XI. Adjournment



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