

Illinois Department of Healthcare and Family Services

Medicaid Advisory Committee August 14, 2015

MAC Members Present

Kelly Carter, Illinois Primary Health Care Association
Kathy Chan, Chair, Cook County Health and Hospitals System
Mary Driscoll, Illinois Department of Public Health (ex-officio)
Jan Grimes, Illinois Home and Hospice Council
Thomas Huggett, Lawndale Christian Health Center
Nadeen Israel, EverThrive Illinois for Janine Lewis, EverThrive Illinois
Karen Moredock, Illinois Department of Children and Family Services, ex-officio (interim)
Samantha Olds Frey, Illinois Association of Medicaid Health Plans for Karen Brach, Blue Cross Blue Shield of Illinois
Howard Peters
Verletta Saxon, Centerstone
David Vinkler, Molina

MAC Members Absent

Arnold Kanter, Barton Management
Tyler McHaley
Glendean Sisk, Illinois Department of Human Services, ex-officio

HFS Staff Present

Mike Casey
John Hoffman
Teresa Hursey
Shawn McGady
Ray Marchiori
Christine Mitts
Director Felicia F. Norwood
Bridgett Stone

Interested Parties

Sherie Arriazola, TASC, Inc.	Dan Coleman, Merck
Tiffany Askew,	Nora Collins-Mandeville, ICOY
Jeanette Badrov, ISAA	Scott Crawford, HPH
Chris Beal, Otsuka	Denise Cushancy, Xerox
Matthew Berkley, Advocate	Brian Dacy, LifeTech
Eric Boklage, Medical Home Network	Anna Deatherage, HDIS
Judy Bowlby, Liberty Dental	Sandy DeLeon, Ounce of Prevention
Nick Boyer, Otsuka	Paula Dillon, Illinois Hospital Association
Christine Breitzman, FHN-CCAI	John Eckert, Department on Aging
Kim Burke, Lake County Health Department	Andrew Fairgrieve, HMA
Grant Cale, Bristol-Myers Squibb	Paul Frank, Harmony/Well Care
Eric Campbell, Aetna	Paul Gazze, Doubck Medical Supply
Anna Carvalho, LaRabida	Susan Gordon, Lurie Childrens
Joe Cini, IHC	Cathy Harvey, Molina
Laurie Cohan, Civic Federation	Jill Hayden, BCBSIL
Sheri Cohen, Chicago Department of Public Health	Marvin Hazelwood,
	Franchella Holland, Advocate

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Bill Jensen, iCare	Xenia Okalibe, Smartplan Choice
Sara Jones, Meridian	Priti Patel, VNA Health Care
V Keenan, IAFP	Hetal Patel, Illinicare Health
James Kiamos, FHN	J. Michael Patton, IPHA
Elyse Kienilz, Together4Health	Jennie Pinkwater, Illinois Chapter, AAP
Margaret Kirkegaard, HMA	Sharon Post, HMPRG
Jennifer Koehler, UIC	Luvia Quinones, ICIRR
Mike Krug, Sunovian	Dan Rabbitt, Heartland Alliance
Keith Kudla, FHN-CCAI	Garth Reynolds, IPHA
Brianna Lantz,	Rachel Sacks, Leading Healthy Futures
David Large, Supernus Pharmaceuticals	Amy Sagen, UI Health
Robin Lavender, Enroll DuPage	Ralph Schubert, IL Public Health Association
Dawn Lease, Johnson and Johnson	Lynn Seermon,
Carol Leonard, DentaQuest	Alvia Siddiqi, Advocate ACE/MCCN
Karen Malamut, Merck	Jacquelyn Smith, NextLevel Health
Mona Martin, PhRMA	Nelson Soltman,
Sarita Massey, HealthCura	Felicia Spivak, BCBSIL
Deb Matthews, UIC-SCC	Margaret Stapleton, Shriver Center
Joe McLauren, Planned Parenthood	Chet Stroyny, 3M HIS
Jim McNamara, ViiV Healthcare	Mikal Sutton, Cigna-Health Spring
Deanne Medina, LAF	Kai Tao, CDPH
Susan Melczer, MCHC	Gary Thurnauer, Pfizer
Emily Miller, IARF	Laura Torres, MCHC
Jill Misra, Together4Health	Polly Uner, Johnson and Johnson
Diane L. Montanez,	Brittany Ward, Primo Center
Phil Mortis, Gilead	Matt Werner, M Werner Consulting
Lucky Mosqueda, Together4Health	Karen Williams, VNA Health Care
Robert Nocon, University of Chicago	Linnea Windel, VNA HealthCare
Heather O'Donnell, Thresholds	

Meeting Minutes

- I. **Call to Order:** The regular bi-monthly meeting of the Medicaid Advisory Committee was called to order August 14, 2015 at 10:06 a.m. by chair Kathy Chan. A quorum was established.
- II. **Introductions:** MAC members and HFS staff were introduced in Chicago and Springfield. Director Norwood acknowledged Teresa Hursey as Acting Administrator of the Division of Medical Programs.
- III. **New Business**
 - a. **Legislative Update:** Shawn McGady, Office of Legislative Affairs, discussed bills which are expected to have an have an impact on HFS. HB1 is a comprehensive heroin

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prevention/treatment bill with significant cost impact on HFS. Governor Rauner currently reviewing and receiving input from departments impacted by this legislation. SB661 requires providers to offer Hepatitis C testing to certain populations. This bill requires the test to be offered, not necessarily administered, and is expected to have a fiscal impact on HFS.

HB4096, an initiative of Rep. Feigenholtz, would move individual care grants from DHS to HFS. Mr. McGady noted that HFS is neutral on the bill. A committee member inquired about the possibility of posting bills impactful to HFS online, Mr. McGady noted that OLA is working with the John Hoffman and the communications team on the website redesign and will identify if this is a possibility.

- b. Budget Update:** Mike Casey, Director of the Division of Finance for HFS presented on the current status of the budget. It is unknown when budget impasse will be resolved. HFS is currently working to pay FY15 bills. For FY16 payment, as there is no current budget in place, HFS does not have authority to pay FY16 bills; however, recent court actions have directed HFS to make payments and the Governor announced last week that HFS would be processing all Medicaid payments received statewide. HFS expects to begin sending payments to the Comptroller in the third week of August, however it is uncertain when payments will be processed by the Comptroller and sent to providers. HFS will work to process payments timely moving forward. A committee member inquired whether other state agencies which cover matching Medicaid services will begin making payments; Mr. Casey noted that DHS is expected to begin making payments, but to refer to individual departments for further information. A committee member inquired that absent a state budget, what budget assumptions is HFS working from? Mr. Casey noted that HFS is working off of a maintenance budget, using \$19.2B as the total agency budget, with \$8.2B from the General Revenue Fund and are paying providers rates in effect on April 30, 2015, not taking into account the reductions that were applied for June and July as those reductions were only for FY15.
- c. Website Update:** John Hoffman, Director of Communications for HFS gave an update on the comprehensive update of the HFS website. The communications team is working to implement suggestions made in the last MAC meeting. Mr. Hoffman encouraged all present to complete the survey available online with their suggestions, and to forward

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on the survey to colleagues and clients. An inquiry was made about posting more provider notices online, particularly in relation to payment updates. Mr. Hoffman noted that he will work to coordinate with Medical Programs. Director Norwood noted that website updates and notices are not made until information is ensured to be 100% correct.

- d. IMPACT-Provider Enrollment Update:** Teresa Hursey, Acting Administrator of the Division of Medical Programs, reported on the progress of the IMPACT provider enrollment transition. The IMPACT online enrollment system opened beginning on August 3, and HFS has seen a strong response thus far. In the 5 days since the online system has been open, 650 new provider applications have been received, averaging a 5 day turnaround for application approval, in comparison to the previous 6-8 week timeframe for processing paper applications. Call center wait time averages less than 30 seconds. All existing Medicaid providers must validate their data in order to continue participating in the Medicaid program, the deadline is December 31, 2015. Providers who do not validate by the deadline will be required to complete a new application. HFS has training opportunities and technical assistance available. Those interested may contact Teresa.Hursey@illinois.gov. Status updates will be provided as the process continues.
 - e. Health Disparity Discussion:** Director Norwood would like the MAC to identify what can be done to improve health outcomes and reduce disparities. Medicaid enrollment data was shared with members of the MAC to begin this discussion. HFS has established 22 quality metrics, and will share these measures in order for the MAC to identify what measures represent the best opportunities for improvement. Members of the public made several suggestions and made offers to assist the MAC with this project. Those interested in volunteering to help, please contact Bridgett.Stone@illinois.gov
 - f. Topics for October Meeting:** Kathy Chan suggested revisiting Health Disparities for the October meeting.
- IV. Old Business**
- a. Phone Participation:** Bridgett Stone reported on phone capability. HFS is able to provide a listen-only phone line with toned for exit and entry muted. Howard Peters

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recommended this item be tabled until video conference technology issues can be resolved.

V. Subcommittee Reports

a. **Public Education Subcommittee Report:** Kathy Chan reported on the most recent meeting of the Public Education subcommittee, which she chaired.

VI. **Approval of June, 2015 Meeting Minutes:** David Vinkler made a motion to approve the June minutes; the motion was duly seconded by with all committee members voting to approve the minutes.

VII. **Other Business:** An interested party reported concerns which the DuPage Health Department has regarding the recent decision of DuPage medical group to no longer see Medicaid enrollees. The DuPage Health Department has major concerns related to access. Director Norwood recommended that issues such as these be brought to the department directly so they may be addressed in a timely manner.

Dr. Huggett followed-up on concerns with redetermination and auto-assignment which were discussed at the June meeting. HFS reported on the redetermination appeals process. Dr. Huggett noted that he had discussed with HFS the possibility of sending redetermination letters to the physician on record, as well as the client. A committee member suggested possibly sending the redetermination lists to providers. Director Norwood discussed that she will coordinate with John Spears.

HFS discussed the auto assignment algorithm. If a member does not make a Health Plan or PCP choice within the 60 day voluntary enrollment period, the algorithm finds a best-fit plan for the member by first identifying the member's plan history for a current plan or provider relationship. Next the algorithm reviews HFS claims history for the member. The algorithm then identifies family members, particularly the plan or Provider of the family member closest in age, and then finally moves to geomapping to find the closest provider to the member with a max of 30 miles in Chicago and 60 miles in the remainder of the state.

A member of the public brought a concern regarding FY16 payments, and inquired if there is a process to expedite payments passed on provider need, and many providers are being faced with closing and layoffs. Mike Casey discussed the HFS will be working as closely with the comptroller for FY16 payments.

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- VIII. Adjournment:** David Vinkler made a motion to adjourn the meeting, which was duly seconded and passed without objection by the committee. The meeting was adjourned at 11:48 a.m.