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**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
October 18th, 2012.
APPROVED FINAL MEETING MINUTES**

401 S. Clinton Street, Chicago, IL
201 S. Grand Avenue East, Springfield, IL

Committee Members Present

Kathy Chan, IMCHC
Sonja McGrath, SIU School of Medicine
Paula Ramos, Community Health Care Inc(via phone)
Hardy Ware, East Side Health District
Bernie Stetz, Molina HealthCare (for John Jansa)
Sam Tuttle, Heartland Alliance (for Nadeen Israel)
Margaret Stapleton, Shriver Center
Margaret Dunne, Beacon Therapeutic

HFS Staff

Jacqui Ellinger
Lynne Thomas
Arvind Goyal
Mike Jones
Veronica Archundia

DHS Staff

Jennifer Wagner

Committee Members Absent

Susan Vega, Alivio Medical Center
Henry Taylor, Mile Square Health Center
Diane Goffinet, Land of Lincoln Legal Assistance
Cora Shaw, Client Advocate

Interested Parties

Bill Mills, CSG Government Solutions
Sue Clark, Consultant
Marissa Kirby, IARF
Sergio Obregon, CPS
Brittany Ward, Beacon Therapeutic
Jacqueline Gonzalez, CHHC
Deborah Mathews, DSCC
Christine Cazeau, Illinois Health Connect
Lea Cizek, Addus Health Care (via phone)
Erin Weir, Age Options
Joe Cini, Automated Health System
Dana Popish, BCBS
Susan Melczer, MCHO
Caroline Chapman, LAF
Alfonso Cervantes, LAF
Mathew Collins, Health Spring
Andrew Fairgreive, HMA
Mona Martin, Consultant

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1. Introductions

Kathy Chan chaired the meeting. Attendees in Chicago and Springfield introduced themselves.

2. Review of Minutes

The August 9th, 2012 minutes were approved.

3. Appointee Ethics Training

Jacqui Ellinger announced that committee members recently received a memorandum in regard to the annual ethics training. She noted that members of the MAC Public Education Subcommittee are required to complete the annual ethics training. She reminded members to complete the "Acknowledgment of Participation," which must be returned to the department no later than December 15, 2012. It was noted that committee members participating in other subcommittees are not required to submit a second acknowledgment.

Sharon Stokes, the department's Ethics Officer, will be in attendance during the next Medicaid Advisory Committee meeting, scheduled for November 16, 2012, in order to address questions on the ethics requirement.

4. Enhanced Eligibility verification Overview

Ms. Ellinger noted a correction in the agenda, observing that IES appeared twice. She introduced Bill Mills, a consultant from CSG Government Solutions, who is the project manager coordinating efforts between the Enhanced Eligibility Verification (EEV) and the Integrated Eligibility System (IES). She also clarified that Mr. Mills does not work for Maximus, the consulting firm that will be conducting annual data matches to verify client eligibility.

Mr. Mills indicated that Maximus will be performing data matches with state and national resources in order to assist with the annual client's redetermination. This is a 70 million dollar operation that has been undertaken as part of a two year contract that was finalized on 9/14/12. Health Management System (HMS), which is a subcontractor of Maximus, will conduct most, if not all, of the data matching that is going to occur.

Mr. Mills stated that the actual work, aside from electronically enhanced verification will be done by Maximum in Chicago. He added that Maximus' eligibility specialists will not make decisions concerning redeterminations; their job will be to gather additional information and make recommendations which would be provided electronically through a web portal. A state case worker will then be able to accept or override these recommendations. He emphasized that nobody's case would be canceled solely based upon the electronic data alone. When necessary, clients will be sent notifications requesting that they provide additional information to validate their eligibility for a particular program.

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Vice-Chairperson Kathy Chan inquired about the specific databases that are going to be reviewed. Mr. Mills replied that they will be obtained from the Secretary of State, the Department of Revenue, the Social Security Administration, the Illinois Department of Employment Security, and Homeland Security.

Ms. Chan expressed interest in this committee having the opportunity to review the notices that will be sent out to clients. Jacqui Ellinger, in conjunction with Mr. Mills, will facilitate this external review to incorporate the committee's comments.

Margaret Stapleton noted that, in some instances, governmental databases are not necessarily error free. She commented that, in reading the RFP, she was pleased to see that the department wants to avoid any "churning." This term refers to a person, whose case has been canceled, when in need of future services, coming back into the system as "eligible."

Ms. Ellinger indicated that one of the aspects that have been stressed to the vendor is the goal of accuracy to support the integrity of the program. Ms. Ellinger added, there will not be any changes in terms of clients' due process, or their rights and responsibilities, which include the process of requesting an appeal to any eligibility decision.

Margaret Dunne commented that, in a recent survey conducted by a coalition of social service organizations serving homeless youth, the findings suggest that homeless adolescents are not aware of the medical benefits that may be available to them and do not know how to navigate the system. In her opinion, this is a huge barrier of access among adolescents. Kathy Chan suggested adding, as a standard agenda item, the subject of "Client Communication."

A question was raised in terms of whether or not the purpose of the call center would be to provide education to clients in relation to their medical benefits. Mr. Mills responded that the purpose of the call center will not be to educate clients per se. Instead, the call center would respond to client's inquiries related to anything affecting their redetermination process.

Another question was raised in terms of what measures would be taken to keep track and ensure that certain parameters are consistently met. Ms. Ellinger responded that the contract contains specific standards that must be fulfilled.

Erin Weir commented on the difficulties encountered by individuals whose identity had been compromised through a theft or some error in processing. Other members offered examples of individuals with capacity challenges, seniors, and homeless youth.

Jacqui Ellinger suggested that committee members provide other case scenarios of concern and specify any special circumstances for which HFS should provide specific guidance to the vendor. Mr. Mills noted that the vendor will honor clients' wishes in terms of having a third party involved to advocate on their behalf, such as the case of a social service organization.

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Hardy Ware indicated that, during these crucial times when the department is launching efforts in major projects, such as the case of the IES and EEV, it must be understood that many challenges will be encountered and that it is important to keep in mind that everything cannot be fixed at once; however what is necessary is to maintain our focus when communicating with clients regarding changes in policy in order to keep them informed.

5. UPDATES

Integrated Eligibility System. Ms. Ellinger noted that a contract with Deloitte Consulting, the firm that will be developing IES, will be signed within the next few days. Ms. Jennifer Wagner, DHS, provided an update on IES.

Ms Wagner reported that the first part of this project for streamlined eligibility determination with the collaboration of external electronic verification is expected to be completed by the fall of 2013 to accommodate the Affordable Care Act (ACA). Deloitte Consulting will transfer a system that is already operating in Michigan called “Bridges” to Illinois.

Phase I will include the replacement of current online applications. This new system will offer the opportunity to submit PDF documents to accompany applications. Phase I will also replace ACM and AIS. These are the systems that caseworkers use to process clients’ cases. It is expected that the Bridges system will be more advanced and user friendly, which should increase efficiency at the FCRCs.

The implementation of Phase II is projected for the spring of 2015, when the legacy system will be completely replaced. Phase II will also include enhancements to the customer portal, which will offer an array of options, such as submitting applications, accessing case status, seeing clients notices, and completing redeterminations. Ms. Wagner added that compromises have to be made to accommodate a compressed timeframe for the training of staff, at the same time that the offices are up and running, while the 30 year old legacy system is being replaced.

Margaret Stapleton asked how this process will be tied to the implementation of the insurance exchange. Ms. Wagner replied that IES will be seamlessly connected to the Health Insurance Exchange, which will be federal/state facilitated at first. The idea is that people applying through the Health Insurance Exchange who are eligible for medical coverage will have their information fed into IES, and vice versa. However, someone applying through the Health Insurance Exchange would not be automatically enrolled in SNAP.

Susan Melczer asked, concerning clients with spenddown cases, how will this automatic method benefit the processing of their requests. Ms. Wagner replied that we expect the new system will have some features which will allow for more electronic submission of documents and tracking involving phase II. However, the fundamentals surrounding the programs will not change.

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Cook County Waiver. Jacqui Ellinger stated that the Cook County Waiver is very close to being approved by the federal government. Cook County is in the process of enhancing its provider network. Ms. Wagner added that the Stroger FCRC is dedicated to processing Cook County applications. The Stroger FCRC is expected to open in November, and it will be responsible for processing applications exclusively for medical coverage and not SNAP.

Margaret Dunne commented that there is a great deal of excitement among advocates working with homeless youth who exhibit mental or behavioral issues and no longer qualify for All Kids. She asked if these organizations could become agents in order to submit applications. Ms. Wagner responded that only the Stroger FCRC and its clinic network would be authorized to submit applications. Ms. Ellinger offered to provide contact information for communicating with Cook County about the project.

Kathy Chan asked if there is an enrollment cap for the Cook County Waiver. Ms. Wagner responded that there is projection of 100,000 people for the first year, but there is not a specific cap.

Children's Enrollment. Attendees received an updated chart showing the number of children who were enrolled for medical benefits during 2011 and 2012. Ms. Ellinger directed the committee's attention to the second table of handout which showed a decline of about 5,000 children enrolled through the spring of 2012. This coincides with a "clean up" process involving cancellations of medical cards for people residing out of state, as well as catching up on redeterminations.

AKAAs Status. Ms. Thomas provided the update by stating that, as part of the budget cuts planned for fiscal year 2013, Technical Assistance Payments (TAP) are no longer paid to AKAAs. In June, the department had 813 AKAAs. She added that, in July, the department encouraged AKAAs to submit a No-TAP agreement, so they could continue in their role as application agents. The department received 196 agreements back from AKAAs. Of those, 16 were insurance agents.

Kathy Chan asked if there is a decrease in the number of applications submitted by AKAAs compared to the applications submitted prior to the budget cuts. Ms. Thomas replied that the number of applications have decreased over the years, in part due to the availability of online applications for the general public on the HFS website.

Jacqui Ellinger commented that, often, we may be communicating with the executive staff of an organization and not necessarily the actual people completing the applications, or vice versa, which may explain the low number of No-TAP agreements received. Another aspect that it is important to take into consideration is that we had a large number of AKAAs who rarely submitted applications, yet kept the status of application agent. However, the high volume producers, such as Federally Qualified Health Facilities and medical providers, have

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submitted a No-TAP agreement and continue being the most productive agents. Ms. Thomas added that we continue receiving more agreements, so the number of AKKAs should grow.

Kathy Chan asked if the directory of agents in the All Kids website has been updated. Ms. Thomas said that she will follow up on this inquiry.

6. Open discussion and Announcements:

Committee members affirmed the date for the next meeting, which is scheduled for December 13, 2012 from 10:00 a.m. to 12:00 p.m.

Jacqui Ellinger said that, in response to a request from John Jansa, from Molina HealthCare, members of the committee can comment upon materials that will be sent to clients involved in Colbert vs. Quinn. Comments should be sent to Veronica and Jacqui.

Jacqui reported that a public involvement notice has been finalized which included members' recommendations. This notice will be inserted in the medical cards that will be mailed at the end of November.

Jacqui indicated that there has been a great deal of confusion in terms of the prescription limit and co-pays prompted by the recent budget cuts. The department has developed a client notice, which will also be inserted in the medical card that clients will receive in December.

Kathy Chan asked if there is a hard prescription limit in place at this moment. Jacqui replied that the limit is eight, and a ninth prescription will only be covered if it is prior approved. Jacqui recommended that committee members share the case specific information of clients for whom particular circumstances may require a review in order to find a resolution. She also introduced the new medical director at HFS, Dr. Arvin Goyal.

Ms. Ellinger commented that the department is looking to eliminate of the monthly medical card that may happen in early spring. The department has developed three client notices, which will be sent to clients to make them aware of the upcoming changes.

Margaret Dunne asked how the applications of transgender individuals should be addressed, and Jennifer Wagner replied that their status with the Social Security Administration could be an issue in terms of the services that could be provided.

Finally, Jacqui announced that the Medicaid Advisory Committee has created an Access Subcommittee. HFS and the MAC Chairwoman, Susan Hayes Gordon are working on the last details for the first meeting which is scheduled for October 24th, 2012. People interested in participating in this subcommittee should learn more by visiting the HFS website at: <http://www2.illinois.gov/hfs/PublicInvolvement/BoardsandCommissions/MAC/access/Pages/default.aspx>

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7. Adjourn

The meeting was adjourned at 12:34 pm. The next meeting is scheduled for December 13th, 2012, from 10:00 a.m. to 12:00 p.m.