MEDICAID ADVISORY COMMITTEE (MAC)

February 3, 2023
VIRTUAL WebEx Meeting
10AM – 12PM





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, responive 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.

Welcome To The MAC

The Medicaid Advisory Committee (MAC) advises the Department of Healthcare and Family Services with respect to policy and planning related to the health and medical services provided under the department's Medical Programs including Medical Assistance, All Kids and FamilyCare pursuant to federal Medicaid requirements established at 42 CFR 431.12.

House Keeping

- Meeting basics
 - Please note, this meeting is being recorded. To ensure accurate records, please type your name, organization, and email address into the chat.
 - If possible, members are asked to attend meetings with their camera's turned on, however, if you called in, please note all meeting materials referenced today will be made available to you on the MAC website following this meeting. If you need assistance accessing this material, please email Melisha.Bansa@Illinois.gov.
 - If you have questions during the meeting, please contact the Host. Patience please, a member of our team will get back to you between now and the next meeting.
 - Please Mute your audio throughout the duration of this WebEx meeting, except when speaking. When speaking or voting (committee members only) please state your name.
 - Please note that HFS staff may mute participants to minimize disruptive noise or feedback.
 - Patience, please some committee members, staff, and participants are new to MAC proceedings.
 - If you are a presenter and wish to be granted presenter rights during your presentation, please use the chat function to contact the host. When presenting, please say "next", to advance to the next slide in your presentation
- HFS is committed to hosting meetings that are accessible and ADA compliant. Closed captioning will be provided. Please email 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.
- Minutes of the prior meeting and relevant meeting materials have been circulated to subcommittee members in advance of this session. Once approved, they will be posted to the website.



Agenda

- Call to order
- II. Roll call of Committee Members
- III. Introduction of HFS staff
- IV. Review and Approval of Meeting Minutes
- V. Healthcare & Family Services Executive Report
- VI. Subcommittee Reports & Recommendations
- VII. Public Comments
- VIII. Additional Business: Old & New
- IX. Adjournment



V. Healthcare & Family Services Executive Report



V.A. Public Health Emergency

1. Flexibilities





End of Continuous Coverage, End of PHE

- White House announced this week that they will let the PHE expire on May 11, 2023.
- In December, Congress passed Consolidated Appropriations Act, which delinked certain Medicaid provisions from PHE:
 - Ends Continuous Coverage Requirement effective March 31, 2023.
 - Phases out enhanced federal match



Medicaid State Plan Amendment PHE Flexibilities

 When the PHE ends, HFS has the option to continue some PHE flexibilities during the PHE Unwinding Period.

Expiring	Extend During PHE Unwinding Period	Required to End	Required to Extend
Waiving signature	More frequent	COVID-19 Uninsured	Coverage of COVID-19
requirements for	presumptive eligibility	Program	testing, vaccine
prescription drugs	for adults, pregnant		administration, and
	women, and children		treatment
Exceptions to the			
Preferred Drug List	Suspended premiums		
	for Health Benefits for		
Automatic renewals of	Workers with		
prior authorizations	Disabilities program		
without clinical review			
	Paying Medicare rates		
No asset test for Aged	for COVID-19 services		
Blind and Disabled			
Category of Eligibility	Paying FQHCs for		
	COVID-19 services		
Paying nursing facilities	outside of their		
enhanced rates for	traditional encounter		
isolation, quarantine,	rates		
and ventilator services			



End of PHE: What's ending for Medicaid?

- A. COVID-19 Uninsured Program covering testing, vaccine administration, and some treatment services
- B. Other flexibilities for providers, eligibility, and delivery of care approved by CMS through State Plan Amendments, waivers, CMS concurrences, etc.
- C. Federal authority to continue some flexibilities like automatic (ex parte) redes



Expiration of Medicaid 1135 Waiver PHE Flexibilities

- 1135 waivers modify federal regulatory requirements to increase access to health care services during a PHE.
- HFS does not have the option to extend 1135 waiver flexibilities.
 - Expiration dates were established by CMS and range from expiring before the PHE ends to up to six months after the PHF ends.
- HFS will track the 1135 waiver end dates and provide notice to providers and customers when applicable.
- The state has the option of suspending the use of any 1135 waiver prior to the CMSestablished end date.

1135 Waiver Examples with CMS End Dates

Expire Prior to PHE Ending	Expire When PHE Ends	Expire Three Months After PHE Ends	Expire Six Months After PHE Ends
Allow provision of services in alternate settings (expires June 6, was only used by HFS and DPH for the McCormick Place Field Hospital)	Temporarily suspend fee-for-service prior authorization requirements Extend pre-existing prior authorizations Delay Pre-Admissions Screening and Annual Resident Review (PASRR) for long term	HCBS flexibilities for assessments and evaluations of need	Waive provider enrollment requirements
	care admissions		



Appendix K Flexibilities

Appendix K allows for PHE flexibilities for Medicaid Home and Community Based Services waivers.

Expired Prior to PHE Ending	Expire When PHE Ends	Expire Six Months After PHE Ends	Flexibilities Illinois is Making Permanent
Adult day service and	Verbal	Waiver services for	DRS waivers (Brain Injury, HIV/AIDS, Disabilities):
day habilitation centers reopened	consent	hospitalized customers	Spouses/legally responsible adult provide personal care services, rate increases
		Increased respite hours	
All state agencies		·	MFTD waiver: Licensed parent (RN, LPN) provide in-
resumed face-to-face			home shift nursing, rate increases, overtime for nurses
visits except			
IDHS/DRS and MCOs			Elderly waiver: Rate increases, remove the
			requirement for Home Care Aides to have a high
Supervisory visits have			school, GED, or one year employment in a comparable
resumed for nursing			human services field, allow legally responsible adult to
and home care aides			be a paid caregiver
			DD waivers: Rate increases, virtual day services



V.A. Public Health Emergency

2. Continuous Coverage Requirements





Consolidated Appropriations Act, 2023 (CCA)

- Signed by President Biden on December 29, 2022
- Amends the FFCRA to delink the Medicaid Continuous Enrollment Requirement from the end of the COVID PHE.
 - Other Medicaid flexibilities remain tied to the end of the PHE.
- Phases out the enhanced federal match rate authorized by the FFCRA.

Impact on Continuous Enrollment

- Continuous Enrollment no longer tied to PHE end date.
- Medicaid continuous enrollment condition will end March 31, 2023.
 - Redeterminations will begin for Illinois medical customers in April 2023.
 - First group of redetermination letters will be mailed by May 1, 2023.
 - First date Medicaid customers could lose coverage is July 1, 2023.



V.A. Public Health Emergency

3. Telehealth





Telehealth

- A. Telehealth services were expanded significantly during the PHE to help support our customers and address some of the access to care challenges created by the PHE restrictions.
- B. The department continues to evaluate telehealth claims, provider utilization and implement program enhancements to better manage telehealth services across all programs.
- C. In July, 2022, the department implemented programming to accept CMS' newly created modifier to distinguish between video and phone services.
- D. At this time, all telehealth flexibilities remain in place until we better understand the impact to both service delivery systems and customer outcomes.



V.A. Public Health Emergency 4. Communication | Outreach and Partnering Engagement



Communication | Outreach and Partnering Engagement

- A. Communication and Key Messaging
- **B. MCO Customer Communications**



Communications and Key Messaging

Phase 1: (NOW)

Update your address

Phase 2: (3-4/23)

Ready to Renew





Phase 2 Ready to Renew



Audience + Messages

A. Medicaid Customers

- 1. Verify your address
- 2. Find your due date
- 3. Check your mail
- 4. Complete your renewal
- 5. Connect to coverage

B. External Stakeholders

- Healthcare providers, state agencies, application agents, schools, food banks, elected officials, community leaders, etc...
- Help Medicaid customers get ready to renew
- Use our outreach materials and messaging to talk to Medicaid customers about redeterminations

Ready to Renew Global Messaging

Got Medicaid? Get ready to renew! Manage your case at abe.illinois.gov.

Illinois is checking to see if you are still eligible for Medicaid. Here's what you need to do now:

Click Manage My Case at abe.illinois.gov to:

- Verify your mailing address under 'contact us.'
- Find your due date (also called redetermination date) in your 'benefit details.'

Watch your mail and complete your renewal right away.

If you are no longer eligible for Medicaid, connect to coverage at work or through the official Affordable Care Act marketplace for Illinois, <u>GetCoveredIllinois.gov</u>.

Call 1-800-843-6154 for help with your renewal.



Targeted Outreach to Medicaid Customers

Verify your address | | Find your due date | Check your mail | Complete your renewal | Connect to coverage

HFS/DHS

- Paid Advertising
- Social (organic)
- News Media
- ABE Texts
- •TV/Radio PSAs
- Website
- Messaging toolkit +Institutional outreach

In Development

- Salesforce Marketing Cloud
 - Email
 - Social Media (Paid)
- Paid advertising campaign



Targeted Outreach to Medicaid Customers

Verify your address | | Find your due date | Check your mail | Complete your renewal | Connect to coverage

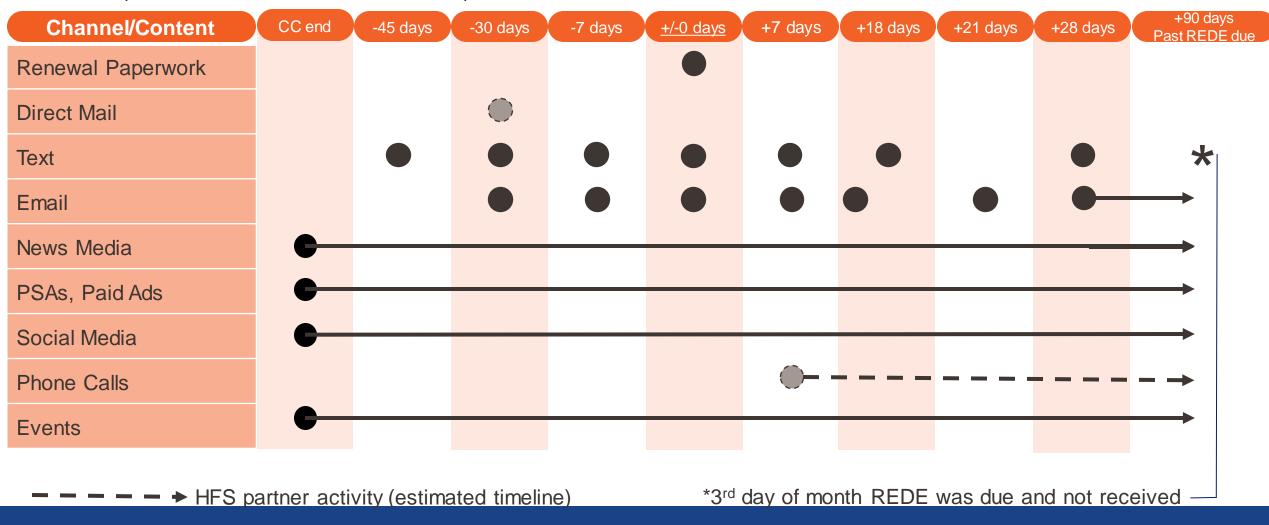
MCOs

- Increased data sharing with HFS to target customers who are due
- Phone Calls
- Events
- Mailers
- Social: Organic + paid
- IVRs
- Emails
- Texts
- Provider tools (MEDI, MyChart, etc)



Customer Communication

Sample timeline in relation to redetermination print date





Paid Media Campaign: In contract review

- Statewide
- Targeted
- Omnichannel
- Yearlong
- Multilingual



V.B. Innovations

1. Healthcare Transformation Collaboratives Program Update







A. Presentation from Medicaid Innovation Collaborative (MIC)

Introduction of Brandi Clark, Vice President, Digital Care, OSF OnCall







Medicaid Advisory Committee Meeting

February 3rd 2023

Brandi Clark

February 3, 2023











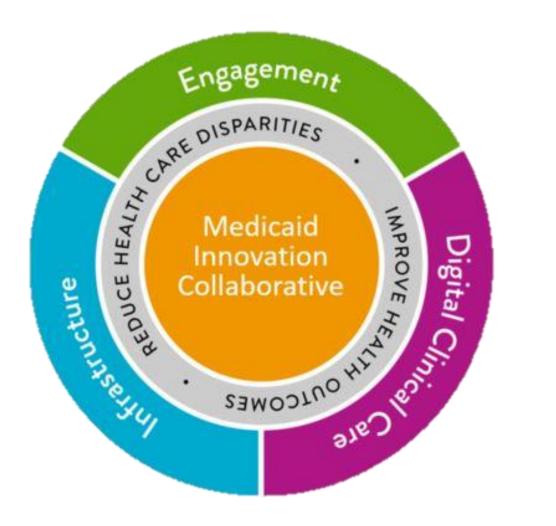




Funds for the Medicaid Innovation Collaborative (MIC) come from the Illinois Department of Health and Family Services / Healthcare Transformations Collaboratives. MIC will radically transform Medicaid delivery in Central Illinois, using innovation to improve access to care, improve healthcare outcomes, and address unmet needs. MIC partners—which serve our communities' most vulnerable—are shown to the right.



MIC VISION



- MEDICAID INNOVATION COLLABORATIVE: Medicaid patients, Federally Qualified Health Centers, community-based organizations and OSF OnCall Digital
 - Health are partnering together to transform Medicaid delivery in Illinois by improving quality, increasing access, and addressing health disparities.
- **ENGAGEMENT:** We are building engagement through continuous listening and feedback, flexibility and agility based on neighborhood and community needs and building trust by always being available.
- **INFRASTRUCTURE**: We are building technology platforms, using frictionless integration, predictive analytics, community health worker workforce training, and mobile technology vans.
- **DIGITAL CLINICAL CARE**: We will utilize chronic disease management, digital wrap-around services (remote patient monitoring), deploy digital behavioral health services and digital prenatal and postpartum care programs, cancer screenings and virtual care 24/7/365.



Medicaid Innovation Collaborative

WESTERN REGION

OSF HealthCare Saint Anthony Medical Center Rockford, Illinois

OSF HealthCare Saint Paul Medical Center *Mendota, Illinois*

OSF HealthCare Saint Elizabeth Medical Center Ottawa, Illinois

OSF HealthCare Saint Clare Medical Center Princeton, Illinois

OSF HealthCare Saint Luke Medical Center Kewanee, Illinois

OSF HealthCare St. Mary Medical Center *Galesburg, Illinois*

OSF HealthCare Holy Family Medical Center *Monmouth, Illinois* OSF HealthCare Saint Anthony's Health Center Alton, Illinois

Eagle View Community Health System Oquawka, Illinois

EASTERN REGION

OSF HealthCare St. Francis Hospital & Medical Group *Escanaba, Michigan*

OSF HealthCare Little Company of Mary Medical Center Evergreen Park, Illinois

OSF HealthCare Saint James

– John W. Albrecht

Medical Center

Pontiac, Illinois

OSF HealthCare St. Joseph Medical Center Bloomington, Illinois

Chestnut Health System Bloomington, Illinois

OSF HealthCare Heart of Mary Medical Center *Urbana, Illinois*

OSF HealthCare Sacred Heart Medical Center Danville, Illinois

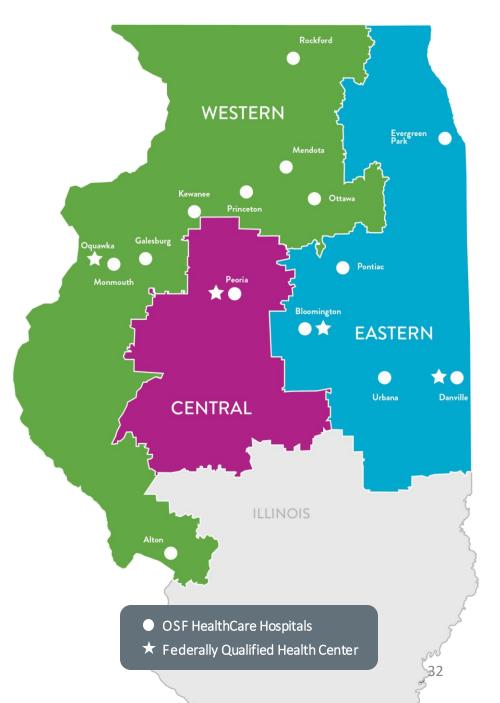
Aunt Martha's Health & Wellness Danville, Illinois

CENTRAL REGION

OSF HealthCare Saint Francis Medical Center *Peoria, Illinois*

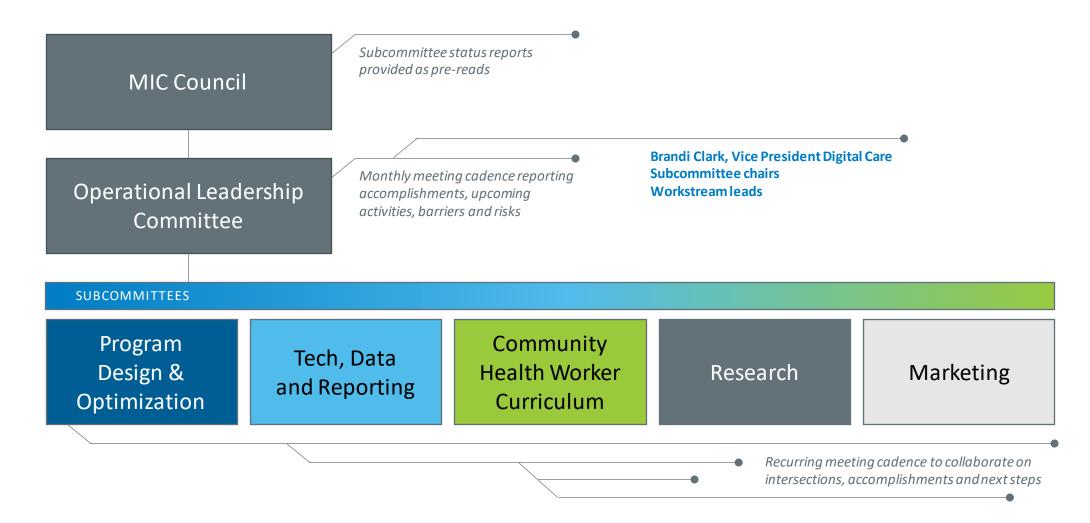
OSF HealthCare Children's Hospital of Illinois *Peoria, Illinois*

Heartland Health Services *Peoria, Illinois*





GOVERNANCE STRUCTURE







MIC Year in Review - OSF OnCall

Behavioral Health

Team Lead: Courtney

Team chartered and kicked off July 28, 2022

Identified opportunities to connect patients to digital application(s) that provide education and/or support for stress, anxiety and depression, including remote monitoring and patient access to behavioral health navigators.



Cancer Screening

Team Lead: Melissa Shipp

Initiated: February, 2022 Outreached: 4869 Screenings Scheduled: 479 Screenings Completed: 143

Using data-driven patient identification and digital outreach, connecting patients to cancer screening scheduling and services.



Maternal and Child Health

Team Lead: Melinda Cooling

Initiated: August, 2022 Outreached: 1738 Enrolled: 760

The Pregnancy & Postpartum program connects patients in order to receive timely prenatal care (starting in the first trimester) and postnatal care (up to 6 weeks postpartum), as well as 24/7, 365 access to a virtual clinical support team.



Health and Wellness

Team Lead: Karlen Sandall

Initiated: July, 2022 Outreached: 73000 Enrolled: 6779

Connecting patients to a digital health and wellness application, the Digital Health Worker team provides education and/or support for patients enrolled in programs targeted at improving:

- Weight
- Diet
- Smoking cessation
- Exercise goals



Chronic Disease Management RPM

Team Lead: Kara Roat

Initiated: June, 2022 Outreached: 16733 Enrolled: 2252

The clinical remote monitoring team provides chronic disease management support 24/7, 365 for patients with chronic conditions such as:

- Asthma
- COPD
- Diabetes
- Heart failure
- Hypertension



Team Lead: Beth Wharton

Initiated: March, 2022 Outreached: 302 Enrolled: 179

Connecting the highest risk patients with multiple chronic conditions to Advanced Care, patients have 24/7, 375 access to a clinician and routine evaluation by an interdisciplinary team. Patients are equipped with in-home Bluetooth monitoring devices for daily vitals, wellness surveys, and routine video visits.









MIC Year in Review – FQHC Partners

Aunt Martha's Health & Wellness, Danville

Kenny Martin-Ocasio, Senior
Vice President - Community
Integration

- Deploying workforce of CHWs
- Providing education and support to local community based organizations and promoting MIC programs





Chestnut Health Systems, Bloomington

Dave Sharar,
Chief Executive Officer

- Colocation agreements for CHWs at local agencies including:
- Mid-Central Community Action
- o The Baby Fold
- Home Sweet Home Shelter
- The Salvation Army: Safe Harbor
- o Bloomington Housing Authority
- McLean County Health Department
- Implementing fluoride varnish program
- Installing dental eClinicalWorks module







Eagle View Community Health System, Oquawka

Shannon Courson, Executive Director

- Implementation of Epic electronic medical record, including use of Wisdom to support provision of dental services.
- Remote LCSW has been hired to begin in January







Heartland Health Services, Peoria/Tri-County

Sharon Adams, Chief Executive Officer

- Creating formal memorandums of understanding with 5 local homeless shelters
- Clinically trained CHWs on site at homeless shelters will use portable telediagnostic equipment, connecting shelter residents to a remote primary care provider











V.B. Innovations

2. PACE





PACE

- A. Of the 8 organizations competitively selected, four (4) of the PACE organizations made application to CMS at the end of (The remaining four (4) will apply in March 2023). December:
 - Kinship PACE of Illinois, LLC (West Chicago)
 - Lawndale Christian Health Center (West Chicago)
 - Esperanza Health Centers (South Chicago)
 - OSF HealthCare System (Peoria)
- B. All 8 PACE Organizations are working towards enrollment in June 2024.
- C. The State Plan Amendment was submitted and CMS has indicated minor changes.



V.B. Innovations

3. Community Health Workers Status



Community Health Workers (CHW) Building Healthier Communities and Achieving Health Equity through Community Engagement Dr. Kenneth Campbell, DBe, MPH, MBA, MA **Executive Assistant to the Director of IDPH**





Community Health Workers (CHWs)

Common Titles for CHWs

- Case managers/Case workers
- Community health advocate
- Community health outreach worker
- Community health worker (CHW)
- Health ambassador
- Health educator
- Patient navigator
- Peer educator



Employment Settings

- Health plans (case management, utilization management)
- Behavioral health
- Community health departments
- FQHCs and community clinics
- Private practice medical groups
- County health care systems
- Hospitals:
 - **ER**
 - BH
 - NICU
 - Diabetes treatment center
 - Trauma centers



Community Health Worker Engagement Strategies

Direct Patient Engagement:

- Home visitation
- Health coaching
- Medication review
- Transition of Care
- Performance and Outcomes Measures:
 - Caseloads, medical and social measures
 - Behavior change planning
 - Discharge planning
 - Capacity building & compliance outcomes
 - Patient navigation, referral services

- > ADVOCACY
- > NAVIGATION
- **OUTREACH**
- > COMMUNITY ENGAGEMENT
- > ASSESSMENT & DATA COLLECTION

Community Health Worker Service Care Coordination

> SERVICE COORDINATION:

- > Identifying and accessing resources
- Overcoming barriers
- Making appropriate referrals
- > Helping create action plans and reach patient goals
- > Coordinating with other services
- > Following-up and tracking care and referral outcomes
- > Tracking healthcare outcomes





Illinois Department of Public Health (IDPH)



Community Health Worker Review Board CHWRB

Office of Health Promotion (OHPm)





Melissa Stalets Assistant Deputy Director

Community Health Worker Review Board

Seeking Community Health Worker Review Board Members

The Illinois Department of Health (IDPH) is seeking candidates from Central and Southern Illinois for its Community Health Worker (CHW) Review Board. This Board serves in an advisory capacity, providing critical input for the development of the Illinois Community Health Worker Certification Program.

Candidates representing the following categories are sought:

- Individuals who have experience providing CHW services
- Individuals who represent institutions that provide education/training to CHWs
- Individuals who have received support from a CHW

Meeting are held quarterly and are virtual

If interested, please complete an application by scanning the QR code or heading to:



https://tiny.one/CHW BoardMember

Email the completed application and any questions to:

Allison Nickrent

Allison.Nickrent@illinois.gov





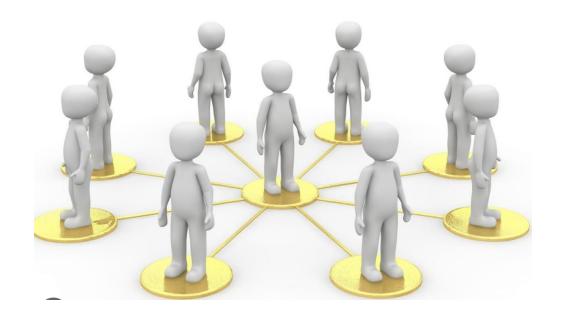
Community Health Worker Review Board

Diverse

Geographical Representation

CHW Skill Driven





Next CHW Board Meeting *February 22, 2023 at 2:00-4:00 pm



Moving Beyond Grants U.S. Department of Health and Human Services (HHS)

U.S. Department of Health and Human Services (HHS)

Enhancing the health & wellbeing of all Americans

Hospital CFO Report

HHS awarded Sinai Chicago a nearly \$3 million grant to fund the expansion of the Sinai Urban Health Institute's community health worker training program.

The HHS grants are a new multiyear program to support training and apprenticeship initiatives for an estimated 13,000 community health workers across the country, according to an Oct. 6 news release.

"Sinai Chicago and SUHI have been longtime leaders in advancing health equity efforts, especially through expanding career pathways and employment opportunities for CHWs. This grant allows us to expand the impact of our work and put more trained and supported CHWs in

Sinai Chicago receives \$3M to expand community health workforce

Nathan Tucker - Thursday, October 6th, 2022

SUBSCRIBE

U.S. Department of Health and Human **Services (HHS)**

Enhancing the health & wellbeing of all Americans

Hospital CFO Report

HHS is investing \$225.5 million in community health workers and \$40.7 million in public health scholarships.

According to a Sept. 30 news release, HHS awarded more than \$266 million in American Rescue Plan funding to grow the community and public health workforce.

"Patients depend on community and public health workers for care and medical information. These investments will equip community and public health workers with the skill sets needed to provide effective community outreach, increase access to care, and assist individuals with critical prevention and treatment services," said HHS Secretary Xavier Becerra.

The Community Health Worker Training Program awarded \$225.5 million to 83 grantees. The new multiyear program will support



U.S. Department of Health and Human Services (HHS)

Enhancing the health & wellbeing of all Americans

Friend Family Health Center, Inc.	Chicago	IL	\$3,000,000
Sinai Health System	Chicago	IL	\$2,999,988
University of Illinois	Chicago	IL	\$3,000,000
Latino Alzheimer's and Memory Disorders Alliance	Cicero	IL	\$2,244,582
Illinois Public Health Association	Springfield	IL	\$2,999,856





V.C. Program Updates

1. HealthChoice Illinois
Update



V.C. Program Updates

2. Eligibility Updates



Goals

A. Our unifying goals:

- Minimize the number of eligible customers who lose coverage.
- Provide <u>all</u> customers with access to multiple customer-centered redetermination completion and submission opportunities.
- Ensure all Medicaid eligible customers continue to connect with their healthcare providers.



COVID-19 Public Health Emergency

- The Families First Coronavirus Response Act (FFCRA) legislation offered states enhanced federal match in exchange for meeting a Maintenance of Effort (MOE) requirement.
 - The <u>'continuous coverage</u>' or <u>'continuous enrollment</u>' condition was part of the Maintenance of Effort.



Consolidated Appropriations Act, 2023 (CCA)

- Signed by President Biden on December 29, 2022
- Amends the FFCRA to delink the Medicaid Continuous Enrollment Requirement from the end of the COVID PHE.
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Impact on Continuous Enrollment

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 - Redeterminations will begin for Illinois medical customers in April 2023.
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 - First date Medicaid customers could lose coverage is July 1, 2023.



Redetermination Timeline

- Customers with a medical redetermination date of June 30, 2023 will be the first to receive a redetermination form.
- Redeterminations will be mailed by May 1st.
- Form B redetermination responses will be due June 1st.
- Last day to turn in the redetermination to avoid cancellation will be June 15th, 2023.
- Customers that do not respond to the Form B renewal will lose coverage effective July 1, 2023.

Redetermination Process by Month

End of	Rede Mail	Rede Due	Case Closure Date:	First day of	Last day to return
Certification	Date	Date Printed	Form B not	Coverage	rede: potential
Period		on Notice	received	Loss	reinstatement
	Ву				
06/30/2023	05/01/2023	06/01/2023	06/15/2023	07/01/2023	09/30/2023
	Ву				
07/31/2023	06/01/2023	07/01/2023	07/17/2023	08/01/2023	10/31/2023
	Ву				
08/31/2023	07/01/2023	08/01/2023	08/15/2023	09/01/2023	11/30/2023



Helping our customers retain coverage

- Assist customers with setting up Manage My Case (MMC) accounts.
- Encourage medical customers to <u>learn about their redetermination date</u>.
- Promote DHS and HFS Call Centers to find out <u>REDE dates</u>.
- <u>Check MEDI</u> when someone comes to you for services or assistance and tell them when their redetermination is due.
- Explain the timeline of when <u>redeterminations are mailed vs. their due date</u>.
 - Redes are mailed 60 days before the Medicaid Eligibility end date.
- Continue to encourage medical customers to <u>update their contact information</u>.

Eligibility Metrics



Applications and Redeterminations

Type	Total	Notes
New Applications	5,073	Total reflects statewide applicationsOlder than 45 days
Redeterminations	6,662	 On hand Form A that is being returned, but are not required SNAP Redetermination that has a Medical Redetermination attached to it



V.C. Program Updates

3. Reproductive Healthcare



Reproductive Healthcare

A. Medicaid Family Planning Program Implementation

- Program launched November 30, 2022 and has nearly 991 enrollees.
- SPAs are still pending at federal CMS but will have November 30, 2022 effective dates when approved, per CMS.
- Eligibility and coverage administrative rules are posted for public comment.
- HFS and IDPH are meeting regularly to coordinate family planning programs.

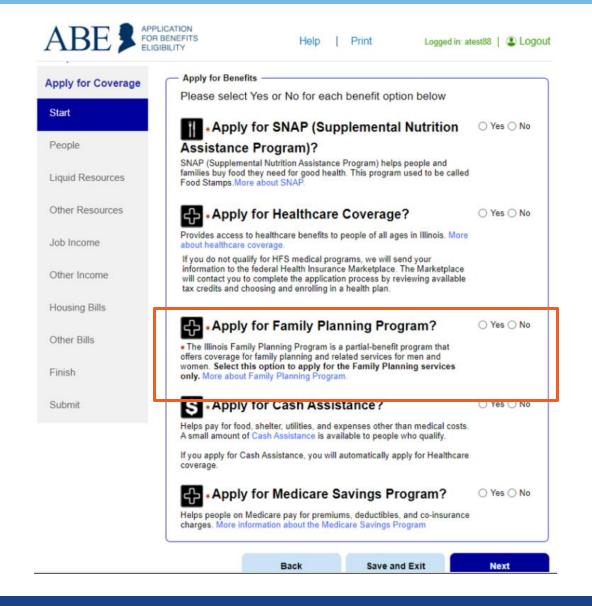
B. Prenatal and Postpartum Visit Rate Increase

Medicaid rate increase effective January 1, 2023.

D.2. Family Planning

Applying for Family Planning

- Customers that do not have an active Medicaid case
 - Apply via ABE
 - abe.illinois.gov



V.C. Program Updates

4. Health Benefits For Immigrant Adults



Health Benefits For Immigrant Adults

- A. Started as Health Benefits for Immigrant Seniors, individuals over 65 otherwise eligible for Medicaid coverage but for immigration status
 - > 13,542 enrollees. FY 22 spend of \$130 million.
- B. Next phase increasing eligibility to those between 55-65 last spring.
 - > 11,264 enrollees. FY 23 spend to date \$73 million.
- C. Beginning this fiscal year, eligibility increased to those 42-54
 - > 18,528 enrollees. FY 23 spend to date \$70 million.
- D. 67% of enrollees reside in Cook County. Since inception, 46% of payments have gone to Cook County Health and Hospital System.



V.D. Veto Session Update and Spring Legislation Outlook



Veto Session Update and Spring Legislation Outlook

- A. Introductions: Angela Ryan, Director of Legislative Affairs
- B. Veto and Lame Duck Session Recap
 - A. Bills Impacting HFS
 - A. HB 4664 SA #5 Reproductive Health Bill
 - B. HB 240 SA #2 Healthcare Package
 - C. SB 1720 HA #3 Budget Implementation Bill
 - B. Supplemental Appropriations, HB 969 SA #4 and 5



Veto Session Update and Spring Legislation Outlook

- A. Spring Legislation Outlook
 - A. Session calendar:
 - A. Session scheduled to adjourn May 19th
 - B. Budget Address on February 15th
 - C. Joint HHS Briefing later that day by Directors
 - **B.** Pending Bills
 - A. Currently reviewing over 40 bills that may impact HFS
 - B. Majority filed in House chamber, several repeats from 102nd



VI. Subcommittee Reports & Recommendations





A. Community Integration Subcommittee

- A. Finalization of Subcommittee recommendations delayed
- B. Next and final meeting will be February 16, 2-4 pm
- C. Agenda will include:
 - An overview presentation of final key points in the recommendations
 - A subcommittee vote to refer final recommendations to the full MAC for approval



B. Health Equity and Quality Care Subcommittee

- A. Discussion on Quality of Care in Nursing Facilities and Rate Reform to improve Quality-Presenter Andy Allison.
 - 1. Staffing and Quality of Care
 - 2. Long Stay STAR quality ratings
- B. MCO report out on use of Disproportionality Impacted Areas



C. Public Education Subcommittee

- A. Presentations from Dec 15 and special meeting on Jan 25 are online.
 - I. Summary of Dec 15 meeting:
 - Family Planning SPA Went live 11/30/22. Allows for individuals with individual income at or below 213% FPL to qualify for limited family planning coverage program, no age limits. PE available to noncitizens, but Medicaid immigration requirements in place for full application.
 - Health Benefits for Immigrant Seniors/Adults enrollment shared reports
 posted here.
 - Review of end of PHE communications and key messaging toolkits posted here.



C. Public Education Subcommittee

- A. Presentations from Dec 15 and special meeting on Jan 25 are online.
 - II. Summary of January 25 special meeting to discuss plans for end of PHE and resuming redes
 - Recent federal legislation decouples enhanced Medicaid match from continuous eligibility. In Illinois, July 1, 2023 is the first date that Medicaid enrollees could lose coverage.
 - HFS shared IES enhancements, eligibility flexibilities, staffing plans, and communications efforts to support efforts to keep eligible individuals enrolled in Medicaid
 - 30-40% of medical only cases are rede'd using ex-parte/Form A; this is expected to increase with enhancements and flexibilities
 - Federal CMS is also requiring regular data reporting from states to monitor efforts



D. NB Stakeholder

- A. Subcommittee meeting monthly to discuss Pathways to Success implementation
- B. 10 Care Coordination and Support Organizations are operational serving 247 youth
- C. Additional providers for Pathways services are being recruited
- D. Subcommittee will be discussing additional recruitment efforts for Family Peer Support and other providers
- E. No recommendations to the MAC from the Subcommittee at this time



D. Special Bylaw Committee

- A. Motion passed to appoint a Special Committee to review MAC Bylaws During the last Nov 4th, 2022, MAC meeting.
- B. MAC Members and HFS Staff were given the opportunity to submit recommendations.
- C. Special Committee met on Jan 11, 2023, to review all submitted recommendations.
- D. Proposed recommendations were sent to MAC members prior to the this meeting.
- E. Presentation and discussion of proposed recommendations for revisions.



VII. Public Comments





Public Comments

Update:

A. None Reported



VIII. Additional Business: Old & New



A. Items For Future Discussion





IX. Adjournment

THANK YOU



