

201 South Grand Avenue East Springfield, Illinois 62763-0002

October 6, 2021

James Kiamos, President Meridian Health Plan of Illinois, Inc. 300 S. Riverside Plaza, Suite 500 Chicago, IL 60606

## **RE: Sanction and Corrective Action Plan for Failure to Provide Covered Transportation Services**

Dear Mr. Kiamos,

This letter serves as written notification to Meridian Health Plan of Illinois, Inc. ("Meridian"), of sanction under the Contract Between the State of Illinois Department of Healthcare and Family Services ("Department") and Meridian For Furnishing Health Services by a Managed Care Organization; otherwise known as the ("Contract").

The Department is hereby providing written notice that pursuant to Section 7.16.4.1 of the Contract, it is sanctioning Meridian \$50,000.00 for failure to provide a Managed Long-Term Services and Supports member covered non-emergency transportation services. On July 6, 2021, the Department contacted Meridian regarding a complaint of a transportation provider arriving one and a half hours late to pick up a member for a medical appointment. On August 4, 2021 Federal Centers for Medicare & Medicaid Services contacted the Department to inquire about the member's canceled appointments, as well as inform the Department that the member's family faced challenges in addressing these problems when calling the Meridian customer service line, experiencing hold times over two hours. On August 11, 2021, the transportation provider cancelled an additional pick-up appointment with this member. On September 1, 2021, the Department notified Meridian that a member received a third cancellation notice from the transportation provider. Meridian assured the Department it connected this member to its preferred non-emergency transportation provider. However, these multiple cancellations by the transportation provider led the member to miss medical appointments.

Meridian must submit a written corrective action plan to HFS by Wednesday, October 20th. Additionally, Meridian is to issue a check payable to the Department of Healthcare and Family Services for \$50,000. The check shall be submitted to the contact and address listed below no later than 10/20/2021. In the memo section of the check, please indicate "CY2021 Failure to Provide Covered Transportation Services".

Department of Healthcare and Family Services Bureau of Fiscal Operations, Attn: Donavon Patton 2200 Churchill Road, Building A2 Springfield, IL 62702 JB Pritzker, Governor Theresa Eagleson, Director

Telephone: (217) 782-1200 TTY: (800) 526-5812 If you have any questions regarding this information, please contact your HFS Account Manager, Keshonna Lones at <u>Keshonna.Lones@Illinois.gov</u>.

Sincerely,

Robert Mendonsa, Deputy Administrator Division of Medical Programs

cc: Laura Ray, Matthew Seliger, Keshonna Lones, Kim Cox, Felicia Spivack, Katherine Lustig