Illinois Department of Healthcare and Family Services Public Education Subcommittee March 15, 2010 Approved Final Meeting Minutes

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

Committee Members

Robyn Gabel, IMCHC Robin Scott, CDPH Sergio Obregon, CPS Awilda Gonzalez, CPS Samantha Holley, CPS Diane Fager, CPS Carrie Gilbert, Shriver Center Andrea Kovach, Shiver Center Libby Brunsvold, Med Immune Jacqueline Gonzalez, CHHC Margaret Dunne, Beacon Therapeutic Brittany Ward, Beacon Therapeutic Sara Howard, IMCHC Esther Sciammarella, CHHC Susana Gonzalez, MacNeal Hospital Nancy More, Catholic Social Services of Southern Illinois

DHS Staff

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HFS Staff

Jacqui Ellinger
Pat Curtis
Robyn Nardone
Lynne Thomas
Tracy Keen
Jamie Ursh
Gretchen Grieser
Vickie Nodal
Veronica Archundia

Interested Parties

Dianne Rucienski, Ph.D., UIC Jane Longo, Health Management Associates Rebecca Winitzer, University of Chicago

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The MAC Public Education Subcommittee was called at 2:36 p.m. Jacqui Ellinger, Deputy Administrator Division of Medical Programs opened the meeting stating to be in compliance with the House Resolution HR 1063 the department is required to conduct a study of children's access to healthcare in Illinois. Jacqui introduced Dr. Dianne Rucienski as the lead investigator at the UIC Institute of Health Research and Policy. The research is focused on describing the characteristics, dynamics, and impact of government sponsored health insurance coverage on children in comparison to the type and lack of coverage that children had in 1999, when she conducted a similar study.

Dr. Rucinski discussed the methodology of the study, which includes a random-digit dial telephone survey conducted on three regions: Cook County; the collar counties comprised by DuPage, Kane, Lake, McHenry, Will, Grundy, Kankakee, and Kendall; and the remainder of the state. Assessing the number of children with or without health insurance, Dr. Rucienski shared a draft of the research organized by objectives. Committee members offered comments and recommendations to enhance the research, which included the following:

- Table # 6 describes the characteristics of dependent employer-sponsored or group-based coverage in 2009; add a column indicating "unknown."
- Table # 8 compares the service utilization for children in families with income less than 200%; add a column indicating "unknown."
- Table # 9 assesses the care utilization for the youngest child in families with any chronic condition; add a column indicating "uninsured."
- Table #10 assesses the care service utilization for youngest child in families without any chronic conditions; add a column indicating "uninsured."
- Add a table indicating the use of medical homes by race and ethnicity

Dr. Rucienski indicated these are the final stages of the study and encouraged committee members to send any additional comments and recommendations via e-mail to Jacquie Ellinger or Carolyn Eddlenton to be considered. The final report will include a narrative with the result of the research to be presented at the Illinois General Assembly in July 2010.

Robyn Nardone commented that as part of the commitment the department has to eliminate processes that cause unnecessary disruptions in client's coverage, it is working on a new initiative to eliminate the monthly paper issued medical card, to be replaced by a permanent medical card by July 2011. Robyn indicated the permanent medical card will have a standardized format, listing the client's name, I.D. or RIN # and the date of birth on the front of the card. Because it's expected that medical providers will have to verify eligibility electronically, the card will include a message saying, "This card does not guarantee eligibility." The reversed side of the card will include a logo matching the corresponding plan, and a toll free number or helpline number.

Robyn encouraged committee members to provide feedback to develop a strategy that will support the transition from the monthly to a permanent medical card that would avoid confusion among

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providers. Sergio Obregon recommended a format that would make it easy for client's to understand what type of coverage they have and to create a client account system. Jacqui advised the client account system is contemplated in the task list but will not be available at the time of the roll out. Jacqueline Gonzalez recommended ensuring that client's notices explain the transition process clearly in order to avoid confusion. Jacqui Ellinger recommended to bring client notices to the next meeting where staff from the Bureau of Contract Management will be available to answer questions. The transition to the permanent medical card will be included in the agenda for the next meeting when actual samples will be presented for the discussion.

Jacqui introduced the CHIPRA grantees and invited them to discuss their successes and barriers in outreach efforts to assist families in applying for the medical programs. Esther Sciammarella indicated the Chicago Hispanic Health Coalition continues working on the details of the MOU. Their goal is to produce 500 applications in two years. The outreach staff is focusing their efforts to find interested applicants outside the Cook County area, to work in partnership with public health and private agencies. They continue assisting families on how to navigate the healthcare system and distributing materials in English and Spanish.

Dianne Fager from Chicago Public Schools shared in launching the Early Childhood Healthcare Outreach (ECHO) initiative, intended to target early childhood families and provide assistance in applying for All Kids. The outreach team is interested in creating awareness among teachers and school administrators on the availability of 14 ECHO agents who have the skills and knowledge to make presentations at parents meetings and assist parents with applications and help them to navigate the system. Jacqui advised that the department is developing a listing of current enrollees whose redetermination dates will be due, to be shared with the CPS outreach team to assist families in their redetermination process and avoid disruptions in coverage. The target number of applications per month is 35.

Margaret Dunne from Beacon Therapeutic reported reaching out to shelters throughout Chicago and collar counties targeting homeless children and youth in need of medical services and application completion. They are also sharing their knowledge of other programs such as Illinois Healthy Women and the Breast and Cervical Cancer Program. She added they have encountered several cases of single unemployed mothers affected by the financial crisis that had been assisted by the outreach staff to apply for the FamilyCare program and added to their open cases. The target number of applications is 750 in two years.

Jacqui then discussed the Maximizing Enrollment for Kids initiative, which is part of a national effort to reduce the number of uninsured children who are eligible for Medicaid or the State Children's Health Insurance Program (SCHIP). In addition to increasing the number of eligible children, the focus is to support families in maintaining their coverage. Maximizing Enrollment for Kids plan is a two-year plan which is due in February 2011. The priority of the first year is to complete a diagnostic assessment process.

3

Illinois Department of Healthcare and Family Services Public Education Subcommittee March 15, 2010 Approved Final Meeting Minutes

The MaxEnroll IL DAP – Executive Summary for Illinois us available at: http://www.maxenroll.org/files/maxenroll/file/MaxEnroll%20Illinois%20-%20FINAL%20-%20for%20posting.pdf

Jacqui explained the Maximizing Enrollment for Kids in Illinois is comprised by four goals:

- 1. Improve Data Capacity/Management and Use,
- 2. Improve agency staff eligibility systems processing accuracy and efficiency,
- 3. Eliminate process that cause unnecessary disruptions in coverage,
- 4. Enhance stakeholder involvement.

Due to time constraints committee members agree to include the Maximizing Enrollment Plan on the next agenda. The session was adjourned at 4:43 p.m.