Public Education Subcommittee Meeting

February 6, 2020 Final Meeting Minutes 401 S. Clinton Street, Chicago, Illinois 201 S. Grand Avenue East, Springfield, Illinois

Committee Members

Kathy Chan, Cook County Health Brittany Ward, CPS Erin Weir Lakhmani, Mathematica Policy Research (by phone) Sergio Obregon, Chicago Public Schools Nadeen Israel, AIDS Foundation of Chicago Sherie Arriazola, Safer Foundation (by phone)

Committee Members Absent

Connie Schiele, HSTP Sue Vega, Alivio Medical Center

HFS Staff

Jane Longo Lynne Thomas Robert Mendonsa Lauren Polite Veronica Archundia Melissa Black Arvind Goyal Elizabeth Nelson Laura Phelan

DHS Staff

Gabriela Moroney Lilian Jimenez Patricia Reedy

Interested Parties

Sophia Cipriano, UI Health Nina Misra, Ever Thrive IL Sam Hollis, LCHJ Patrick Maguire, MHN Susanne Wiecek, UI Health Zsaza Pimentel, ICIRR Ryan McGraw, Access Living Laurie Cohen, Civic Federation Kristin Hartsaw, DuPage Federation on Human Services Emily Chittajallu, La Rabida Michael Gerger, UIC Carrie Chapman, Legal Council for Health and Justice Jessica Pickens, Next Level Health Karina Gonzalez, Molina Health Andrea Kovach, Shriver Paula Campbell, IPHCA Susan Gaines, IPHCA Jill Hayden, Meridian Timothy Jackson, Aids Foundation of Chicago Marina Kurakin, Legal Council for Health Justice

Interested Parties (by phone)

Joe Packett, APC
Maria Borrayo, Aunt Martha's Health Wellness
John Hachmeister,
Martha Jamuz, Choices
Letitia Dewith-Anderson, Anderson Legislative Consulting/Centene
Nelson Soltman,
Trisha Rodriguez, Senate Democrat Staff Member
Angela Boley, Land of Lincoln Legal Aid
Rose Dunaway, Girling Community
Ralph Schubert, University of IL Chicago
Brittani Provost, Division of Specialized Care for Children
Faye Manaster, The Arc Illinois
Andrea Davenport, Meridian
David Lecik, Department of Aging (SHIP)

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1. Introductions:

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

Chairperson Kathy Chan asked attendees to be respectful and quietly enter and leave the conference rooms. She asked if anyone wished to have make a phone call or to have a conversation that this be done by the area of the elevators.

2. Review and Approval of the Meeting Minutes from December 5, 2019:

Kathy Chan asked for the correction of *two* names which had been misspelled. The correct spelling is Ralph Schubert and Jennie Pinkwater. On page four, paragraph five, Sergio Obregon asked that the term IAPs be changed to IEPs. Therefore, the paragraph should read ".... take into account children who have IEPs and other school assessments...". With these changes, the minutes were approved. Sergio Obregon made a motion to approve the minutes from December 5, which was seconded by Brittany Ward.

3. Care Coordination Updates:

Robert Mendonsa reported that there have been recent mergers taking place; Centene, which is the parent of IlliniCare is finalizing the acquisition of WellCare (parent of Meridian.) Centene "spun off" IlliniCare to CVS, which also owns Aetna. Nadeen Israel asked if there had been plans to send any client notifications. Robert said it should not be necessary because these are plan acquisitions and nothing is changing for the members.

Mr. Mendonsa said, at the end of January 2020, Aetna/CVS will run the IlliniCare plan. It will remain IlliniCare for now; however, at some point in the future, he expects everything will be moved over to the Aetna platform, and the name will change. Robert added that the combined plan membership of Meridian and IlliniCare would have been 60% of the total of Illinois Medicaid membership for which HFS have raised concerns with respect to this dominance in the market.

Robert Mendonsa said YouthCare is not part of the sale to CVS/Aetna. Therefore, YouthCare was moved under Meridian. YouthCare is a specialty plan for DCFS and it is a separate contract, separate network, and separate staff. IlliniCare's MMAI product was not part of the sale to CVS either, so Centene retained MMAI.

Mr. Mendonsa said by mid-February Molina will be purchasing NextLevel Health. HFS will move Next Level's estimated 55,000 members into Molina, effective April 1. HFS has already removed

NextLevel from being a choice or receiving auto-assignment. Therefore, NextLevel is not available as a HealthChoice Illinois plan moving forward. Robert added that there is "100% network overlap." Molina network is bigger. NextLevel and Molina will be sending out notices to providers.

Patricia Reedy asked for a listing of the latest MCO mergers to be placed on the HFS website to educate members and providers regarding all these changes. Kathy Chan asked to update the statewide map located on the HFS website to help clarify the acquisitions and remaining plans. Robert Mendonsa agreed with the request.

Mr. Mendonsa said that in response to concerns expressed by advocates, the transition of the Youth in Care was postponed to April 1, 2020. He said, as of Feb 1, 2020, there are about 19,000 Former Youth in Care and there are 22,000 Children with Special Needs. HFS acknowledges there has been confusion among providers about the transition. Nevertheless, the Department has established an 8 month transition period for the Former Youth in Care cases; and a 6 moths of transition period for the Special Needs Children. This means that all Medicaid providers will be paid regardless of whether they are in-network with the plan, or the member has chosen a plan or has been assigned, they will be paid during this period.

Robert indicated that YouthCare has 97% of previous DCFS service providers. Overall the network is larger and added 200+ care coordinators for former and current Youth in Care, many of them have backgrounds in Behavioral Health. Mr. Mendonsa said, on February 1st, "there was a hiccup" due to an HFS error, about 2,500 names children were omitted in the file that was sent to the plans. The correction was made almost immediately on Sunday February 2. HFS was in communication with the CEOs of the plans involved. A revised file was sent to the plans, and HFS is taking the necessary steps in order to prevent this system issue from happening again. He noted that, the Former Youth in Care children were auto-assigned to YouthCare, nevertheless, these children also have the option to choose another plan.

Sergio Obregon from Chicago Public Schools (CPS), recommended improvement with respect to coordination regarding Children with Special Needs. He suggested CPS connect its behavioral Health staff/teams with the MCOs that are doing work on Integrated Health Homes, as well as with DCFS staff members who are working with SNC.

4. Illinois Department of Human Services (DHS) Update:

Gabriela Moroney provided an update about the Public Charge Rule. She said the USCIS lifted the last remaining nationwide injunction, which was preventing the Rule from going into effect. Therefore, the Public Charge Rule was upheld nationwide with the exception of the State of Illinois. Ms. Moroney introduced Lilian Jimenez who is a DHS Associate Director of the Office of Welcoming Centers for Refugee and Immigrant Services.

Ms. Jimenez indicated that the federal government requested to lift the injunction in Illinois. She said, in spite the efforts to block the Rule, the injunction could be lifted prior to February 24. If

the injunction is not lifted, the Shriver Center and the Legal Council will be before the appellate court on February 26 to argue in keeping the injunction in place, and the court in turn is expected to rule in a few days after February 26. Ms. Jimenez said that the Department of Human Services is focusing its efforts on mitigating the effects of the ruling. She said that the State continues to work with DHS funded partners in order to provide appropriate information and training to anyone inquiring, as well to all community partners. More details can be found at the DHS website: http://www.dhs.state.il.us/page.aspx?item=117419

Sergio Obregon said that some families have asked whether their information will be kept safe and not shared in efforts to deport individuals. He asked what is the right message to share with families? Chairperson Kathy Chan suggested discussing this further during the next meeting.

Gabriela Moroney indicated that DHS continues to work with the Illinois Department of Corrections (IDOC) to identify small scale pilots to leverage DHS resources for individuals who are being discharge from IDOC. Ms Moroney thanked committee members for their interest in providing stakeholder input in the DHS website redesign. Anyone interested in sign-up to the IDHS Stakeholder newsletter that can be found at:

http://www.dhs.state.il.us/page.aspx?module=17&item=117871&surveyid=1488

5. ABE/IES/Redetermination Update:

Lauren Polite shared the attached report, 'ABE Manage My Case' with the committee members. She said the "Report of a Birth" process, which allows authorized hospitals to report the birth of a newborn has been operating very well and has been incorporated into the ABE MMC functionality so that a deemed newborn can be automatically added to a case if submitted with the correct information through MMC. Ms. Polite reported that in terms of the Manual Identity Proofing, the process may take an approximately one to two weeks but there may be a delay in sending out the notices since it's a manual process. If it feels like it's taking a long time a client can attempt to link their ABE account to their cases prior to receiving the notices in the mail.

Jane Longo provided the redetermination report, for which she shared three tables attached. Ms. Longo said, the reconciliation of EDW reports and Deloitte reporting numbers continue to decrease each month and HFS is on target in monthly goals. She attributed the backlog reduction to an increase in hiring more case workers. Ms. Longo said the report on redeterminations appear to show significant improvement with nearly 90% of cases that were processed in December 2019 to have been approved for continued coverage. HFS says data from other months in 2019 appears to follow a similar trend. She noted that, HFS is working on a second report that has data related to the A/B redetermination forms, which it is expected to include the number of redes processed and approved, along with reinstatements. Ms. Longo added, HFS has a goal of no apps over 45 days by end of the year; redeterminations would be done by the end of the 12 months of coverage, which will require HFS to make some policy decisions about that in the future.

With respect to the influx of 76,000 applications from the Marketplace, Ms Longo said this increment in application contributes to the backlog of initial applications processing. She also noted that the federal government counts redetermination differently than Illinois. She said that, anyone who is over 12 months (IL provides 13 months of coverage) is a delayed rede to the feds. Jane Longo clarified that, if someone is in the rede backlog and it has not been processed by HFS, the Medicaid coverage continues until a caseworker takes action. There is a small number of cases included in the rede backlog where someone may have lost coverage, because the request for reinstatement is not processed in the 90 day period, but if received within 90 days. HFS will process and reinstate a case back to original date of cancellation.

6. Criminal Justice Update:

Lynne Thomas said that HFS and DHS have been working with IDOC on an overall way to get applications filed and processed for inmates prior to release. HFS has had several meetings with IDOC, which includes offering technical assistance to help inmates apply for benefits. With respect to the services provided to clients residing in work-release centers or halfway houses, also known as Adult Transit Centers (ATCs), Ms. Thomas indicated that the new staff at IDOC want to take a closer look at this policy. She indicated that some adjustments are necessary to a file received from IDOC, and it is nearly ready to make the policy.

10. Open Discussion and Announcements:

Kathy Chan asked for an update concerning the Georgetown Center on Children and Families' report: https://ccf.georgetown.edu/2019/05/28/medicaid-and-chip-enrollment-decline/ Laura Phelan said that she has had a conference with staff members at Georgetown to better understand the data. Georgetown will send HFS additional information in terms of the methodology to help better understand this report. HFS wants to address this but also recognizes that they need to better understand the underlying issues, as Illinois is "an anomaly" when it comes to the increase of uninsured kids combined with children's coverage program that includes higher income families and undocumented children. It is suspected that "the chilling effect" has had a more dramatic effect in Illinois, as there are larger numbers of immigrants in Illinois compared to some other states.

Laura Phelan also provided an update with respect to the 1115 Waiver for Continuity of Care and Administrative Simplification, which seeks to cover post-partum women through 12 months; the return to a previous MCO if reinstated to Medicaid within 90 days; and a delay of Hospital Presumptive Eligibility. Ms. Phelan said that HFS has made an invitation period to provide public comments to federal CMS which is open through February 13, 2020. https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/1115DemonstrationWaiverHome.aspx

Ms. Phelan noted there is a link to the federal website where people can submit formal comments and/or view formal comments that have been submitted:

https://public.medicaid.gov/connect.ti/public.comments/questionnaireResults?qid=1904067

11. Adjournment:

The meeting was adjourned at 11:55 a.m. The next meeting is scheduled for April 2, 2020, between 10:00 a.m. and 12:00 p.m.

Number of Cases by Form B Reason

Total

Form	Form B Reason	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20
Α	Received Form A	26,490	30,381	31,237	32,719	41,736	49,376	46,148	48,155	44,903	38,620	40,162	41,934	37,669
		20%	29%	25%	26%	33%	37%	32%	37%	37%	32%	35%	37%	32%
В	IL Residency not verified	26,302	17,933	24,048	23,724	0	0	0	0	0	0	0	0	0
В	Program on the case does not qualify	25,338	21,997	23,861	22,862	27,831	29,478	31,738	27,197	24,521	24,453	26,552	24,015	24,880
В	Earned income exists on the case record and none was found in the clearances	15,912	5,962	7,236	10,118	10,462	5,550	9,141	5,515	5,009	7,661	4,704	4,714	7,383
В	No clearance or case record income was found	14,959	9,908	12,168	12,691	14,097	22,508	26,167	21,827	21,649	22,843	18,312	19,156	23,054
В	SSN not provided	5,929	3,694	4,893	5,000	8,075	9,577	9,976	8,496	8,329	8,813	8,667	8,697	9,115
В	AWVS income exceeds the income limit	5,634	7,449	7,411	6,286	8,310	8,214	11,210	10,283	9,491	9,973	8,683	8,980	9,554
В	Individual is active and eligible for Medical on a different IES case	4,367	3,609	4,084	4,428	5,220	0	0	0	0	0	0	0	0
В	Case record has SelfEmployment	2,883	2,021	2,816	3,099	4,514	4,580	5,039	4,670	4,547	4,079	3,983	4,116	4,539
В	Unearned income on the case record is not verifiable electronically	1,372	1,086	1,290	1,312	1,581	1,609	1,775	1,520	1,494	1,478	1,382	1,392	1,473
В	Individual is undocumented	555	342	455	470	916	18	22	31	24	20	22	24	22
В	Technical Exception	300	417	3,749	416	781	858	1,038	978	977	863	918	8	15
В	Case Record	287	251	201	239	253	264	291	272	204	284	225	187	257
В	Unknown individual flagged by conversion	126	81	109	147	260	15	22	12	16	13	9	18	13
В	Citizenship not verified	121	82	81	68	119	65	70	66	58	51	36	21	26
В	Individual is a pregnant woman / child that would not qualify as an adult	117	109	127	124	266	275	303	258	272	228	228	233	232
В	Case record has Rental Room & Board	53	28	45	55	55	79	78	68	81	66	51	62	75
В	TPL Coverage	28	18	27	33	191	192	254	215	184	228	171	209	196
В	Benefit Match Not Successful	2	0	3	0	0	0	0	0	0	0	0	0	0
	Received Form B	104,285	74,987	92,604	91,072	82,931	83,282	97,124	81,408	76,856	81,053	73,943	71,832	80,834
		80%	71%	75%	74%	67%	63%	68%	63%	63%	68%	65%	63%	68%

143,272

129,563

121,759

114,105

113,766

118,503

119,673

130,775 105,368 123,841 123,791 124,667 132,658

1/28/2020

Date Run:

2/5/2020								
	Backlog A	n Hand ove	Backlog Redes					
	Actual		Old	Revised	CMS Def.		Redes	
	In CAP		Deloitte	Deloitte	In CAP		On Hand	
	<u>Update</u>		Rpt**	<u>Rpt***</u>	<u>Update</u>		<u>Deloitte</u>	
Feb-19								
Mar-19	112,444	*	133,636	137,712	183,171	*	192,442	
Apr-19	106,504	*	127,078	131,293	N/A		186,540	
May-19	111,076	*	114,813	119,060	N/A		181,729	
Jun-19	102,617	*	101,207	109,371	N/A		171,493	
Jul-19	95,417	*	93,823	101,440	196,406	*	167,718	
Aug-19	85,876	**	85,876	93,530	190,604		168,535	
Sep-19	78,878	**	78,878	85,294	213,591		164,572	
Oct-19	72,433	**	72,433	78,207	197,118		153,275	
Nov-19	67,991	**	67,991	72,807	190,802		148,048	
Dec-19	81,180	***		81,180	190,624		153,228	
Jan-20	preliminar	y nun	nbers	102,523			143,683	
Feb-20								
Mar-20								
Apr-20								
May-20								
Jun-20								
Jul-20		_						
Aug-20								
Sep-20								
Oct-20								
Nov-20								

^{*}Based on EDW reports from Jeremy - less inclusive than Deloitte reports

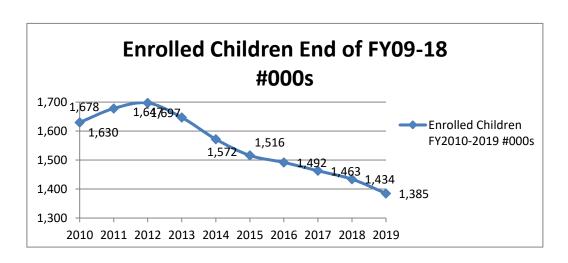
^{**}Old report query last released in early early January 2020.

ABE Manage My Case, Appeals FFM and Newborn Add stats For MAC Public Education Subcommittee As of 02/02/2020

	02/02/20	11/25/19	9/23/19	7/29/19	5/23/19	4/3/19	2/7/19	10/3/18	7/31/18	4/10/18
ABE MMC Accounts	974,179	902,599	836,178	747,236	702,833	643,018	570,348	416,010	329,244	240,780
Linked										
Renew My Benefits	294,736	272,015	252,648	232,669	209,483	193,446	172,590	125,603	97,679	53,557
Report My Changes	225,736	206,154	187,361	169,956	151,150	136,784	121,002	84,882	63,762	31,187
Program Adds	95,625	86,564	78,096	70,302	61,447	54,621	46,896	31,136	22,908	10,033
Member Adds	28,492	26,907	24,683	22,495	20,116	18,545	16,485	11,758	9,753	5,173
Mid-Point Reports	158,350	139,426	125,304	112,567	98,207	88,057	74,786	47,454	34,357	11,247
Appeals submitted	63,349	59,124	54,067	49,360	43,935	39,974	34,576	24,551	NA	7,380
FFM cases received	326,316	269,289	234,257	226,185	215,901	208,047	198,234	123,550	114,885	102,618
since 11/17										
Cumulative count of	2,865	2,399	1,918	1,512	959	449	NA	NA	NA	NA
people successfully ID										
proofed through the										
State										

Children's Enrollment

	Enrolled
	Children
	FY2010-2019
End of FY	#000s
2010	1,630
2011	1,678
2012	1,697
2013	1,647
2014	1,572
2015	1,516
2016	1,492
2017	1,463
2018	1,434
2019	1,385



End of Month 2016	Enrolled Children #000s	End of Month 2017	Enrolled Children #000s	End of Month 2018	Enrolled Children #000s	End of Month 2019	Enrolled Children #000s
Jan	1,505	Jan	1,476	Jan	1,467	Jan	1,377
Feb	1,502	Feb	1,472	Feb	1,443	Feb	1,371
Mar	1,501	Mar	1,472	Mar	1,433	Mar	1,384
Apr	1,497	Apr	1,467	Apr	1,424	Apr	1,386
May	1,495	May	1,464	May	1,436	May	1,385
June	1,492	June	1,463	June	1,434	June	1,385
July	1,491	July	1,463	July	1,433	July	1,384
Aug	1,492	Aug	1,458	Aug	1,431	Aug	1,384
Sept	1,488	Sept	1,452	Sept	1,423	Sept	1,382
Oct	1,482	Oct	1,446	Oct	1,415	Oct	
Nov	1,481	Nov	1,448	Nov	1,400	Nov	
Dec	1,477	Dec	1,457	Dec	1,384	Dec	

