

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

Committee Members

Kathy Chan, Cook County Health
Brittany Ward, Lurie Children's Hospital
Sergio Obregon, CPS
Connie Schiele, HSTP
Sherie Arriazola Martinez, Safer Foundation
Nadeen Israel, AIDS Foundation of Chicago

HFS Staff

Jane Longo
Laura Phelan
Lauren Polite
Margaret Dunne
Sharice Bradford
Arvind Goyal
Veronica Archundia
Tracy Keen
Carmela Hernandez
Melishia Bansa
Jose Jimenez
Keshonna Lones
Kim McCullough-Starks

Committee Members Absent

Sue Vega Alivio Medical Center
Erin Weir Lakhmani, Mathematica Policy Research

DHS Staff

Leslie Cully
Patricia Reedy

Interested Parties

Kristin Hartsaw, DuPage Federation on Humans Services Reform
Katie Thiede, Alliance Chicago
Judith Davis, BCBSIL
Caroline Chapman, Legal Council for Health Justice
Michael Lafond, Abbvie
Vijay Parthasarathy, Molina Healthcare
Viviana Rodriguez, University of Illinois Hospital & Health Science System
Luvia Quiñones, Illinois Coalition for Immigrant & Refugee Rights
Kelsie Landers, EverThrive Illinois
Kristen Nuyen, EverThrive Illinois
Michelle Baldock, DOI
Amy Lulich, Department on Aging
Julie Mirostaw, AMITA Health
John Ranallo, Molina Healthcare
Martha Jarmuz, Choices CCS
Jennie Pinkwater, Illinois Chapter, American Academy of Pediatrics
Monica Cella, Department of Pediatrics UIC
Alaina Kennedy, IAMHP
Karen Babos, Molina Healthcare
Gustavo Saberbein, Help Home
Kristen Emanuel, Ounce of Prevention
Amy Edwards, UIC
Sakib Hassan, Abbvie
Tony Ohlhausen, Nami Chicago
Dave Lecik, Department on Aging
Marilu Moreno, ICIRR

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

Jill Hayden, Medicaid Policy Network
Lisa Marie Wiseman, Humana
Susan Gaines, IPHCA
Timothy Jackson, AIDS Foundation
Angela Boley, Land of Lincoln Legal Aid
Sami Hantuli, Cook County HHS
Megan Carter, Legal Council for Health Justice
Katherine. Lustig, Meridian Health
Robin Lavender, DuPage Health
Grecia Villegas, UIC Division of Specialized Care for Children
Samantha Hollis, Illinois Health and Hospital Association
Elizabeth Durkin, Age Options
Sarah Ferguson, Everthrive IL
Stephani Becker, Shriver Center on Poverty Law
Brandon Sandine, AHIP
Angela Townsend, Alliance Chicago
David Hurter, AMITA Health
Jamie Weber, Avesis
Alena Rooney,
Valentina Cordero, Medical Home Network
Ryan Voyles, Health News Illinois
Dani Mendez, Illinois House of Representatives
Marina Kurakin, Legal Council for Health Justice
Andrea Kovach, Shriver Center on Poverty Law
Michael Gerges, UIC
Jessie Beebe, AIDS Chicago
Beth Berendsen, City of Chicago
Andrea Davenport Meridian Health
Brittani Provost, UIC Division of Specialized Care for Children
Sarah Augustinas,
Mary Dixon, Arc of Illinois
Ashley Galante, Medical Home Network
Ken Ryan, Illinois State Medical Society
Andrew Firgrieve @ H Center
Leticia Galvez, Care Advisors
Amber Kirchhoff, Illinois Primary Care Association
Diana Rubi, Illinois Coalition for Immigrant and Refugee Rights

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

1. Introduction:

Chairperson Kathy Chan conducted the meeting and announced that it was being recorded. Committee members present were: Connie Schiele, Sherie Arriazola Martinez, Brittany Ward, Sergio Obregon, Nadeen Israel. Committee members absent were Erin Weir Lakhmani, and Sue Vega. Kathy Chan asked interested parties to send an email to veronica.archundia@illinois.gov to properly record their participation. HFS and DHS staff members introduced themselves.

2. Review and Approval of the Meeting Minutes from February 4, 2021:

Due to the lack of a quorum, the minutes were not approved and deferred for approval until the next June 3rd meeting.

3.COVID-19 Update:

Jose Jimenez, Chief, Bureau of Professional and Ancillary Services, provided COVID-19 updates. He stated that effective March 15th the Biden administration increased the rate for vaccine administration to \$42.14, while previously there had been varying rates for the first and second dose.

In February, the rates for the COVID-19 diagnostic testing were adjusted to incentivize expedited COVID-19 test results. Prior to February, the reimbursement rate for COVID-19 testing had been \$100. In accordance with Centers for Medicare and Medicaid Services (CMS). The rate for testing was lowered to \$75, with an add-on of \$25 if results were made available to the individual within two days.

HFS is in the process of releasing guidelines for hospitals to receive reimbursement for COVID-19 vaccine administration as an exception to current hospital outpatient billing policy, as vaccines are not typically administered in a hospital setting. HFS worked with the IHA and MCOs on the appropriate process for billing the COVID-19 vaccine administration performed in hospital-based outpatient settings. The billing direction applies to claims for persons covered under both traditional fee-for-service and a HealthChoice Illinois managed care plan. Guidelines will be released this week.

UPDATE: The guideline was approved, and the notice posted 4/8/21
<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210408a.aspx>

Lastly, the Governor's Office and the Department of Public Health are working on procurement to secure mobile units, with their own supply of vaccines, that can be deployed to target locations throughout the state to ensure remote areas have access to the vaccine. The Department is in the process of enrolling four vendors in the IMPACT program so they can serve the Medicaid population.

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

Kathy Chan asked to have the policy restated in order to emphasize that individuals receiving the vaccine should not be charged.

Mr. Jimenez stated any time HFS releases a guidance to providers, a clear and concise disclosure using standard language is added indicating that vaccine administration is to be provided at no cost to the individual. He added that, regardless of income, citizenship, or immigration status, there should not be a cost for clients.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210315a.aspx>

Ms. Chan reminded committee members to subscribe to HFS provider notices in order to receive provider notices from HFS and keep informed of the latest developments.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/ProviderEmailSubscribe.aspx>

Mr. Jimenez indicated that, on February 8th, HFS issued a notice to make providers aware that if a person is uninsured the provider can bill the state for COVID-19 testing as long as the provider is enrolled through IMPACT. If the patient is uninsured and the provider is not enrolled through IMPACT, the provider has the option to submit the claim to the federal HRSA portal.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210208c.aspx>

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210208b.aspx>

Mr. Jimenez stated that HFS has informed providers that the Department will resume editing for timely filing beginning with claims received May 1, 2021 so all claims => 180 days from the date of service should be submitted by April 30, 2021.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210319a.aspx>

Luvia Quiñones shared various useful resource for immigrants:

<https://www.icirr.org/covid-19-resource-guide>

4. DHS Update:

Leslie Cully said that the Family First Coronavirus Act (FFCRA) was implemented as a response to the COVID-19 epidemic. The FFCRA authorized Pandemic EBT (P-EBT) and the Continuing Appropriation Act of 202 extended P-EBT through the 20-21 school year. The United States Department of Agriculture (USDA) approved the Pandemic Electronic Benefits Transfer (P-EBT), which provides benefits to children who receive free or reduced-price school meals under the National School Lunch Program, regardless of immigration status. For the 2020-2021 school year, DHS, in collaboration with the Illinois State Board of Education (ISBE), will issue

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021

P-EBT through direct certification to all students and non-SNAP families will not have to complete an application in order to obtain P-EBT. In March, DHS staff members reached over 800,000 children. During April, additional 162,000 children have been issued P-EBT, currently totaling 962,000 students. There have been \$564 million P-EBT benefits issued. This has required a huge effort, including adding resources to keep families informed by adding staff members and responding inquiries through a toll-free hotline to DHS in order to answer questions and provide the necessary support. Information is also available on the DHS website:

<https://www.dhs.state.il.us/page.aspx?item=124215>

The following includes a Questions and Answers section regarding the Pandemic P-EBT. <https://www.dhs.state.il.us/page.aspx?item=131776>

Other important highlights:

- Federal legislation allows for a 15% increase to SNAP benefits, extended through September.
- ARPA also added an additional increase boost for some households, the minimum Emergency Allotment is now \$95 for each household.
- All 800K P-EBT cards from March have been mailed out and parents are being asked to be patient.
- The Family Community Resource Centers (FCRCs) are still operating at about 10% of their capacity with onsite staff.
- DHS has been holding vaccination clinics at state-operated facilities for staff, patients, and clients, as well as general community members.
- It is also piloting vaccination opportunities at “equity focused clinics” in Kane/Aurora FCRCs on April 9th, 10th, 12th, from 11 to 7 pm to provide evening hours and Saturday hours. DHS is working with the Department of Public Health and has partnered with the Division of Developmental Disabilities and the Division of Rehabilitation Services to contact clients so they can be vaccinated. DHS is not screening for immigration status.

Sergio Obregon congratulated DHS staff members for streamlining its process to make sure that children receive P-EBT benefits. He also asked how many cards have been sent out and how many have been activated. Leslie Cully said that to obtain this information DHS will have to contact the vendor.

Luvia Quiñones shared helpful resources through the chat for immigrants consisting of: “Know Your Rights” fact sheets on COVID testing and treatment that includes the hotline at the bottom of the page <https://www.icirr.org/covid-19-resource-guide>

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

5. Eligibility Update:

Tracy Keen referred to the report included with the meeting materials. She began her presentation by indicating that as of the end February 2021, there were 106,783 medical redeterminations on hand. Fewer renewals are being processed during the public health emergency. The full report provided with the agenda and meeting materials shows that there were 26,682 medical applications which are 45 days or older, as of February 28, 2021, indicating a decline from a high of 147,000 at the end of January of 2019, which is an 82% reduction. She is pleased to report that, last night, a new report shows that as of the end of March there were only of 13,051 Medicaid applications which were 45 or more days old.

Ms. Keen said that the Marketplace reopened on February 15th, originally scheduled to close on May 15, has now been extended to August 15. For this enrollment period, up to the current date, HFS has received 18,000 applications from the Marketplace an increase of 2,500. The State is receiving an in-flux of marketplace applications is for this new enrollment period.

Tracy Keen said that with regard to the Health Benefits for the Immigrant Seniors Program, which sometimes is referred as the "65 plus", as of March 24, there have been 4,013 seniors enrolled. HFS has received about \$20.8M in claims, and 90% of this enrollment is in Cook and its Collar Counties. The full report is attached. Also, HFS has received approval for two out of three requests under the Continuity of Care and Administrative Simplification Waiver 1115. The approved waivers are: The Waiver from the Hospital Presumptive Eligibility program (HPE) and reinstatement of clients into their original MCO if requested within three months of losing coverage due to late submission of a redetermination form. HFS anticipates getting approval for an extension to postpartum coverage up to 12 months for women in Medicaid, and there may be a possibility of including otherwise ineligible noncitizen women.

Nadeen Israel asked, "what other best practices that had been implemented during the COVID crisis is Illinois pursuing with federal government to keep post-COVID?". Tracy Keen said HFS is very interested in keeping passive renewal (Form A process). Jane Longo said that the CMS Director has not yet been confirmed, and, therefore it is not likely to see a lot of movement until a CMS Director is confirmed by the senate. HFS would like to pursue this subject, as it is one of the items that will be giving future consideration, as well as, "Zero Income and Adult Continuous Eligibility", which is also on "the wish list."

Amber Kirchhoff asked for the status of the Family Planning State Plan Amendment (SPA). Jane Longo said that the Family Planning SPA is still on pause, as it requires a great deal of reprogramming of IES. At this point, there is no estimate for a target date when this can be accomplished. Laura Phelan said there have been lots of competing

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

priorities and demands, including reprogramming related to COVID and the programming for the Health Benefits for the Immigrant Seniors Program, as well as delays in a tech-refresh project, which are critical for the functioning of IES.

Kristin Hartsaw said that the “COVID-19 Relief Bill” includes a States Plan Amendment for post-partum coverage, but not until 2022. She asked, what is the State was thinking of in terms of pursuing a waiver vs. SPA? Laura Phelan said the state plans on transitioning to a State Plan Amendment when that option becomes available and that if the PHE maintenance of effort provision ends before April 2022, “the 1115 waiver would be a bridge to a State Plan Amendment.”

There was a question through the chat, regarding the best way for individuals to apply for Medicaid if they’ve been transferred from the Marketplace to Medicaid? Should they wait until they are contacted by HFS or should they apply in ABE once HealthCare.gov says that they are likely Medicaid eligible? Tracy Keen responded that there is no need to apply through ABE if customers received notification that their application was transferred. However, if they only completed a screening with the recommendation to apply for Medicaid, they should apply through <https://abe.illinois.gov/abe/access/>

Luvia Quiñones asked if once the waiver for post-partum for non-citizens is approved, can HFS generate a provider notice stating that the program “does not count towards the Public Charge”. Jane Longo said yes, it is possible for a provider notice to be created and distributed.

Patricia Reedy asked about the status regarding Hospital Presumptive Eligibility. Jane Longo said the request from HFS to waive the requirements of HPE was approved; therefore, HFS will not be rolling out an HPE program.

Stephani Becker said, according to members of our coalition meeting it was stated that “there is started to be some bounce back” between Medicaid and marketplace applications because of how income received from the American Rescue Plan is counted. Stephani asked to whom she should send these cases. Tracy Keen replied that any cases and concerns should be sent to: Tracy.Keen@illinois.gov

The “ABE Manage My Case, Appeals, and FFM Report” remains consistent with previous months/years. The report is attached.

6. Feasibility Study Update

Laura Phelan said that Illinois Public Act 101-0649 requires HFS, in consultation with DOI, to oversee a feasibility study that explore policy actions which make health insurance more affordable and accessible for low and middle-income residents. HFS and DOI have

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

completed the Feasibility Study Report, which was submitted to the General Assembly. The report is over 200 pages and has been published on the HFS and the DHS websites:

- HFS website: <https://www.illinois.gov/hfs/SiteCollectionDocuments/04022021FeasibilityStudyReportFinal.pdf>
- DOI website: <https://insurance.illinois.gov/Reports/Reports.html#collapse05a>

Laura Phelan said the details on the stakeholder engagement process to discuss the report's results are forthcoming. Kathy Chan offered an open invitation and recommended setting aside enough time for discussion of this topic during the June Public Education Subcommittee meeting. She said the intention is that data provided can help inform stakeholders and contribute to help short-term, mid-term, and long-term future considerations. Sherie Martinez Arriazola said the Safer Foundation is implementing a Medication Assisted Treatment, through which individuals can serve the remainder of their sentences, while receiving treatment and gaining support to become self-sufficient. The issue is that when a client becomes employed, the individual is often dropped from Medicaid, which results in the interruption of his medical treatment. Sherie Martinez Arriazola expressed interest in the "Basic Health Plan" so that ideally people can stay with their plan after their income is above the 138% FPL. Kathy Chan said that she looks forward to future conversations and for the opportunity to think more broadly about special population's needs, as well as discussing certain issues that may not be obvious or that need to be flesh out. Kathy Chan said that committee members would be more than open to a special subcommittee convening.

5. Care Coordination Update:

Lauren Polite said that HFS is about to send a letter prepared by the Department of Public Health about important information regarding COVID-19 vaccine. The letter will be sent to approximately 200,000 Fee-for-Service customers. The letter includes answers to common questions so that people can make an informed decision about taking the COVID-19 vaccine. It includes a toll-free number for the hotline through which people can make appointments.

In addition, all the Managed Care plans are doing extensive outreach and marketing to members and they are working very closely with community organizations and supporting events intended to help vaccination scheduling. The plans are working with the City of Chicago and Cook County by reaching out to beneficiaries to help schedule their vaccinations.

Lauren Polite introduced Keshonna Lones as the HFS point person for the MMAI. Ms. Lones said that the MMAI statewide expansion rollout is proceeding, with July 1, 2021 as a "go live" date. She said that, the MMAI plans recently submitted networks, working very closely with federal CMS, to review their network adequacy. HFS anticipates having a

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021

final approval of these plans in the next few weeks. Once decisions are made, updates will be posted on the HFS website.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210430b.aspx>

Sergio Obregon noted that the Chicago Public Schools have been involved in innovative partnerships with HFS and Health Choice Illinois, as well as the MCOs. This is to help to complete health risk screening for all CPS' children enrolled in Medicaid, which totals approximately 245,000. The Chicago Public Schools intend to formalize a process at the beginning of every school year, that can offer health risk screening provided by the plans to be given to each student enrolled in Medicaid, with this information being transferred to the appropriate health plan. In Chicago this will be done at the start of every school year. Mr. Obregon said that the COVID- 19 pandemic has demonstrated all the inadequacies which exist in terms of access to health for students. He said that CPS is seeking input and looking forward to collaborating with other entities. He thanked HFS for "for its due diligence in terms to get efforts for improvement of the ground."

Elizabeth Durkheim asked for clarification regarding a notice issued on March 3rd from the Department of Aging about "Duals receiving MLTSS services" indicating that their passive enrollment to the MMAI would be happening on a different timeline than the originally had July 1st. She asked how the timeline will be rolled out. Keshonna Lones said that HFS has various timelines for the passive enrollment cohort for MMAI regarding expansion. MLTSS will be included in the final passive enrollment cohort. HFS wants to be sure that there are no disruptions in services. Therefore, the objective is to progressively transition at the different times.

Kathy Chan asked if information will be made available about how these cohorts are going to be phased. Ms. Lones said that a provider notice will be published on the HFS website once there is a final approval regarding the networks.

<https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn210430b.aspx>

There was a question through the chat regarding whether there, are the new Health Benefits for Immigrant Seniors will be enrolled in an MCO or Fee-for-Service? Lauren Polite responded that seniors are currently in Fee-for-Service.

Another question was regarding outreach to families with respect to "catch-up" for delays in childhood immunization during the pandemic. HFS is discussing this matter with the plans, and the committee will be updated in upcoming meetings as this is not only a challenge in Illinois but nationwide.

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021**

6. Public Charge Update:

Carrie Chapman said that the Trump Public Charge Rule of inadmissibility is no longer in effect. The original rule under the 1999 guidance is back in effect but the benefits considered under that rule are limited to cash assistance, such as TANF, SSI, township assistance, and institutionalization in long term care at government expense. The following benefits are not considered a Public Charge under the current (the 1999) public charge policy:

- Short-term and special purpose cash payments (such as emergency assistance or disaster relief).
- institutionalization for short periods of rehabilitation
- Food and nutrition programs, including SNAP
- Housing programs, such as public housing and section 8
- Medicaid (other than for long term care)
- COVID Vaccines and testing
- Health Benefits for Immigrant Seniors 65+.

Carrie Chapman said “the test” is in place when an individual is getting an initial green card or if a person with a green card has left the U.S. for more than 180 days. For the 1999 Public Charge Guidance Fact Sheet: “Make the Right Choice For Your Family”, please follow this link:

<https://protectingimmigrantfamiliesillinois.org/resources-trainings>

Luvia Quiñones said that the new Health Benefits for the Immigrant Seniors Program does not count towards Public Charge Rule.

Andrea Kovach said that specific questions regarding public charge can be posted to Help Hub or emailed to pifillinois@povertylaw.org. Presentations available in different languages can be also be requested: pifillinois@povertylaw.org

Chairperson Kathy Chan thanked advocates for their work with regard to all the legal challenges and for keeping this committee informed about the latest developments, and, finally making it possible to reduce the changes added in recent years to the Public Charge Rule.

7. Healthcare Transformation Collaboratives:

Kimberly McCullough-Starks provided the presentation. She said that the Healthcare Transformation Collaboratives put customers and communities at center of efforts to support a new vision for healthier communities. Please follow this link for more details: [Healthcare Transformation Collaboratives \(illinois.gov\)](https://www.illinois.gov/Healthcare-Transformation-Collaboratives)

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Draft Meeting Minutes
April 8, 2021

Ms. McCullough said that it is hoped that everyone is interested in serving customers better and in a more creative, collaborative, and more purposeful ways. More details about the new HFS new vision is reflected in the following slides:

[20210312HTCWebinarDeckFINALPOST.pdf \(illinois.gov\)](#)

Nadeen Israel wrote a comment in the chat indicating that community members should be consulted and listened more than any other stakeholder or there is a risk that the goals and metrics of any initiative may not be met. Kimberly McCullough thanked everyone for their feedback, and she indicated that community involvement and input are very important which is why HTC is characterized as a community initiative. Every applicant is asked to describe how their plan include community input in the solution that they are seeking to have funded.

Kathy Chan asked about the best way to direct further questions. Kimberly Mc McCullough said that answers can be obtained by visiting the HFS website at: <https://forms.office.com/Pages/ResponsePage.aspx?id=nwgia7qOPEaE9TFxIQ-QBdbPYyYbNtf9Eq5UsSa51p7NUMIJZUjFMUzFWOVRIUk04TEJLWU1JWjM0Si4u> Where there is a comprehensive list of questions and answers.

It is also possible to register on the website for periodic updates about Healthcare Transformation Collaboratives at: <https://www.illinois.gov/hfs/Pages/transformationsignup.aspx>

Information can also be obtained by sending an email to: Kimberly.mccullough@illinois.gov

8. Open Discussion and Announcements:

Nothing was discussed.

9. Adjourn:

The meeting was adjourned at 12.17 p.m. The next meeting is scheduled for June 3rd, 2021, between 10:00 a.m. and 12:00 p.m.

**ABE Manage My Case, Appeals, and FFM stats
For MAC Public Education Subcommittee
Cumulative, as of 3/24/2021**

	3/24/21	1/17/21	11/12/20	9/11/20	7/23/20	5/21/20	02/02/20	11/25/19	9/23/19	7/31/18
ABE MMC Accounts Linked	1,425,656	1,351,206	1,335,361	1,256,607	1,188,838	1,128,847	974,179	902,599	836,178	329,244
Renew My Benefits *	430,604	397,791	382,125	356,717	339,810	327,998	294,736	272,015	252,648	97,679
Report My Changes	379,609	358,532	337,288	313,323	290,726	269,498	225,736	206,154	187,361	63,762
Program Adds	180,968	170,717	159,595	147,297	133,738	123,945	95,625	86,564	78,096	22,908
Member Adds	36,192	35,224	34,135	32,916	31,834	30,801	28,492	26,907	24,683	9,753
Mid-Point Reports*	211,718	211,717	211,689	203,399	182,324	176,435	158,350	139,426	125,304	34,357
Appeals submitted	98,882	95,053	90,634	85,860	81,220	76,477	63,349	59,124	54,067	NA
FFM cases received since 11/17	501,663	481,989	408,283	380,645	Not available	354,714	326,316	269,289	234,257	114,885
Cumulative count of people successfully ID proofed through the State	4,995	4,598	4,270	3,997	3,754	3,481	2,865	2,399	1,918	NA

**Note, HFS suspended sending redetermination notices that require a response during the PHE and DHS suspended MPRs when permitted by FNS MPR's waived since March 2020.*

MMC rolled out on 11/01/2017

Senior Expansion Program
 (Report Run Date: 3/24/2021)

6l - Healthy Illinois Expansion <= 100% FPL - age >= 65 and non-citizen
 7l - Healthy Illinois Expansion Spenddown over 100% FPL - age >= 65 and non citizen

Active_Closed	Customer_Count	Amount
Active/On-going	4,013	19,231,535.29
Closed	244	1,548,669.52
Total	4,257	20,780,204.81

Active_Closed	MangP	Customer_Count	Amount
Active/On-going	6l	3,909	18,985,549.67
Active/On-going	7l - spend down	104	245,985.62
Closed	6l	213	1,539,933.72
Closed	7l - spend down	31	8,735.80
Total		4,257	20,780,204.81

Customers currently in Spenddown Status

SpendDown_Status	Customer_Count
Unmet Spenddown	4
Met Spenddown	100
Total	104

Type of Claim	Amount
Other	2,198,894.48
Outpatient Claims	6,206,130.98
Inpatient Claims	10,781,038.20
Pharmacy	1,587,356.28
Dental	4,906.30
Long Term Care	1,878.57
Grand Total	20,780,204.81

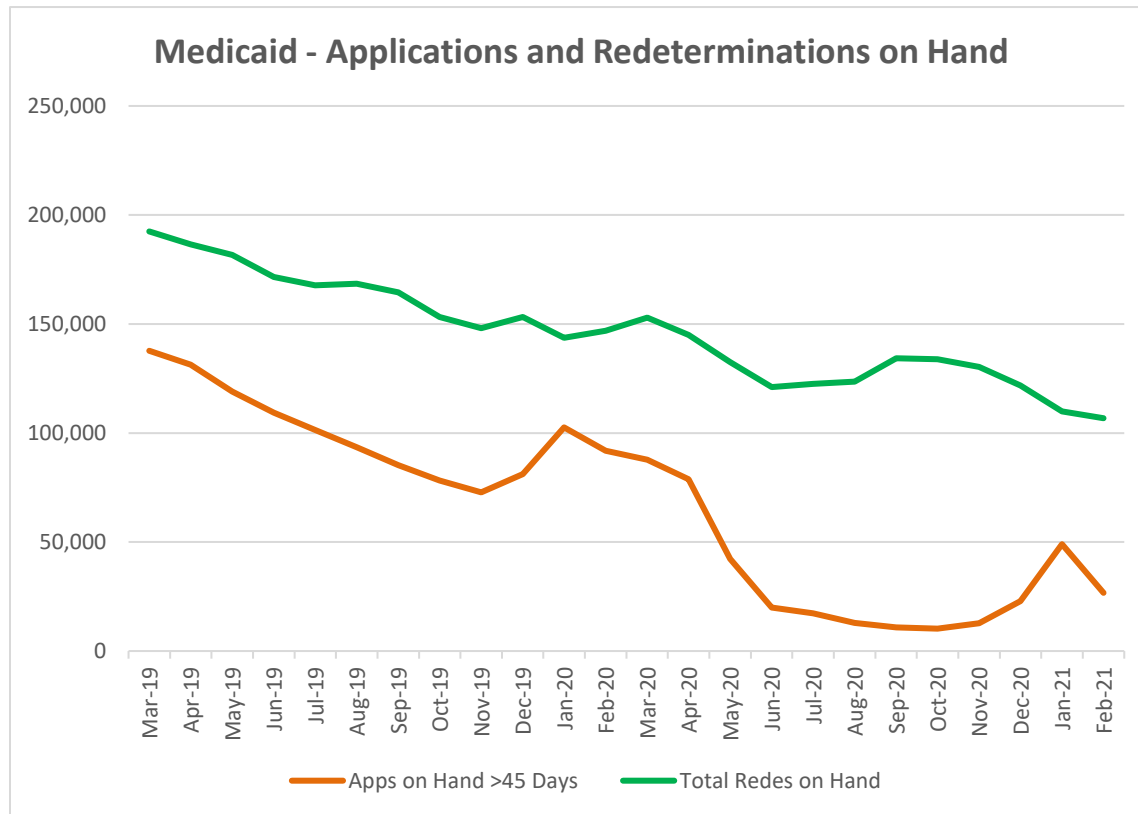
Notes:

1. Report is based on IES and RDB data as of 3/24/2021.
2. Expenditure amounts are based on claim/service data as of 3/19/2021
3. Customer Count by County info is based on Address information on IES case. Some customers who are homeless do not have a physical address in the system.

County	Customer_Count
?? - Homeless	37
Adams	2
Boone	14
Bureau	3
Cass	3
Champaign	19
Coles	4
Cook	2,999
Cumberland	1
De Witt	1
DeKalb	9
Douglas	1
DuPage	314
Effingham	3
Ford	1
Grundy	3
Jackson	1
Jasper	1
Jefferson	1
Kane	182
Kankakee	10
Kendall	17
Knox	2
Lake	316
Lee	5
Macon	3
Macoupin	1
Madison	3
McHenry	44
McLean	8
Morgan	1
Ogle	3
Out of Illinois	1
Peoria	13
Richland	1
Rock Island	13
Saline	1
Sangamon	6
St. Clair	9
Stephenson	1
Tazewell	6
Union	2
Vermilion	5
White	1
Whiteside	1
Will	119
Williamson	4
Winnebago	61
Woodford	1
zz-All County	4,257

*26,682 medical applications 45 days or older as of February 28, 2021, down from a high of 147,000 at the end of January 2019 – an 82% reduction.

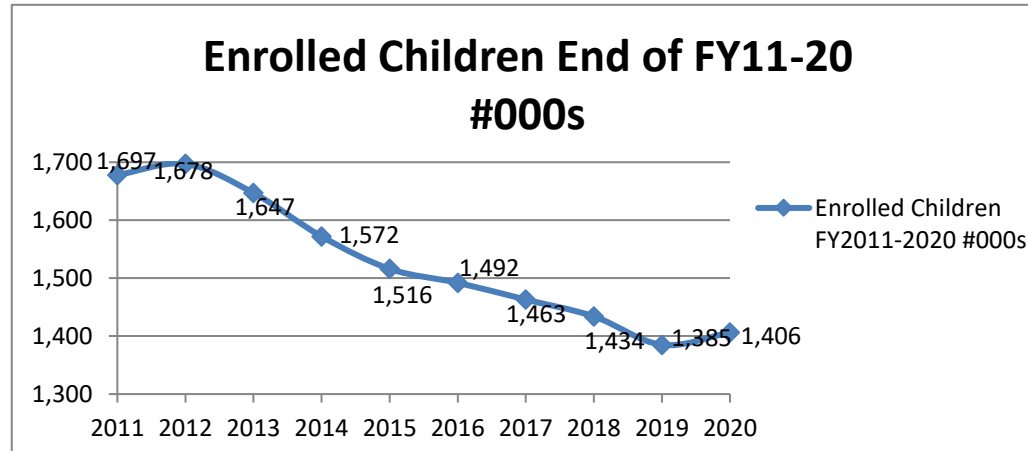
*106,783 total medical renewal on hand as of February 28, 2021. Few renewals are being processed during the continued COVID emergency because we will not take adverse action; some for example, those related to SNAP benefits, are being processed.



End of month	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19		
Apps on Hand >45 Days	137,712	131,293	119,060	109,371	101,440	93,530	85,294	78,207	72,807	81,180		
Total Redes on Hand	192,442	186,540	181,729	171,493	167,718	168,535	164,572	153,275	148,048	153,228		
	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Apps on Hand >45 Days	102,523	91,907	87,738	78,835	42,254	19,931	17,259	12,946	10,897	10,273	12,701	22,835
Total Redes on Hand	143,683	146,958	152,927	144,940	132,553	121,126	122,498	123,511	134,314	133,795	130,255	121,816
	Jan-21	Feb-21										
Apps on Hand >45 Days	48,982	26,682										
Total Redes on Hand	109,933	106,783										

Children's Enrollment

End of FY	Enrolled Children FY2011-2020 #000s
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
2020	1,406



End of Month 2017	Enrolled Children #000s	End of Month 2018	Enrolled Children #000s	End of Month 2019	Enrolled Children #000s	End of Month 2020	Enrolled Children #000s
Jan	1,476	Jan	1,467	Jan	1,377	Jan	1,387
Feb	1,472	Feb	1,443	Feb	1,371	Feb	1,383
Mar	1,472	Mar	1,433	Mar	1,384	Mar	1,383
Apr	1,467	Apr	1,424	Apr	1,386	Apr	1,393
May	1,464	May	1,436	May	1,385	May	1,400
June	1,463	June	1,434	June	1,385	June	1,407
July	1,463	July	1,433	July	1,384	July	1,415
Aug	1,458	Aug	1,431	Aug	1,384	Aug	1,423
Sept	1,452	Sept	1,423	Sept	1,382	Sept	1,430
Oct	1,446	Oct	1,415	Oct	1,388	Oct	
Nov	1,448	Nov	1,400	Nov	1,386	Nov	
Dec	1,457	Dec	1,384	Dec	1,387	Dec	

