

201 South Grand Avenue East
Springfield, Illinois 62763-0002

Telephone: (217) 782-1200
TTY: (800) 526-5812

Medicaid Advisory Committee
Public Education Subcommittee Meeting
Thursday, April 12th, 2018
10:00 a.m. to 12:00 p.m.

401 S. Clinton St., Chicago – 1st Floor Video Conference Room
201 S. Grand Ave. East Bloom Bldg., Springfield – 1st Floor Large/Video Conference Room

Agenda

1. Introduction
2. Report of Final Meeting Minutes from February 1st, 2018
3. Care Coordination Update
4. UIC & ICIRR Medicaid Language Access Research
5. ABE/IES Update
6. Customer Services Concerns
7. Medicaid Redetermination Update
8. Criminal Justice Update
9. Open Discussion and Announcements
10. Adjourn

For anyone who cannot attend in person but wishes to participate by conference call, please confirm your attendance by phone at 312 793-1984 or 312 793-5270. This will help to ensure the distribution of meeting materials and to accurately record your participation. You will receive meeting instructions and the access code when you confirm. The conference call telephone number is: 1-888-494-4032.

This notice is also available online at:

<https://www.illinois.gov/hfs/About/BoardsandCommisions/MAC/News/Pages/default.aspx>

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018**

Interested Parties (by phone)

Alap Shah, IAFP

Kim Burke, Lake County Health Department

Dionne Hanney, Denta Quest

Margo Holden-Bowens, BCBS IL

Dave Hunter, Presence Health Partners

Sandy De Leon, Ounce of Prevention

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018**

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

Committee Members

Kathy Chan, Cook County Health & Hospital System
Margaret Stapleton, Shriver Center
Sue Vega, Alivio Medical Center
Nadeen Israel, EverThrive Illinois
Connie Schiele, HSTP (by phone)
Erin Weir Lakhmani, Mathematica Policy Research
Sergio Obregon, CPS
John Jansa, Smart Policy Works
Sherie Arriazola, TASC

Committee Members Absent

Brittany Ward, CPS
Ramon Gardenhire, AFC

Interested Parties

Andrea Kovach, Shriver Center
Gabriela Montoya, Age Options
Lisa Wiseman, Humana
Alexandra Swillinger, BCBSIL
Avelle Bailey, Medical Home Network
Patrick Maguire, Medical Home Network
Michael Lafond, ABBVIE
Jessie Beebe, AFC
Lynn Seermon, Kaizen Health
Meghan Carter, Legal Council for Health and Justice
Tamatha Smith, BCBSIL
Anna Wojeik, UI Health
Terrence Wright, Harmony Health
Enrique Salgado, Harmony Health
Leslie Carpenter, HCCI
Ralph Schubert, DSCC/UIC
Ken Ryan, Illinois State Medical Society
Paula Campbell, IPHCA
Greg Johnson, ISPS
Cyrus Winnett, IAMHP
Mikal Sutton, BCBSIL
Philp Talley, IPHA
Sarah McCoy, IHCOP

HFS Staff

Lynne Thomas
Lauren Polite
Elizabeth Lithila
Arvind Goyal
Veronica Archundia

DHS Staff

Maria Bruni
Gabriela Moroney

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018

1. Introductions:

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

2. Report of Final Meeting Minutes from December 7th, 2017:

Chairperson Kathy Chan indicated that the meeting minutes had been discussed, approved, and finalized by the committee members on January 16th, 2018.

3. Public Education Subcommittee Charge

Chairperson Kathy Chan led the discussion regarding committee members' proposed changes to the subcommittee charge. Sherie Arriazola, John Jansa, Sue Vega, Erin Weir, Margaret Stapleton, and Nadeen Israel provided arguments in favor of proposed changes shown below in italics.

The Public Education Subcommittee is established to advise the Medicaid Advisory Committee concerning materials and methods for informing individuals and *providers* about health benefits available under the Department of Healthcare and Family Service's medical programs.

The subcommittee, comprised of a diverse group of stakeholders, will:

- Review and provide advice on brochures, pamphlets and other written materials prepared by the department;
- Review and provide advice on HFS website content directed towards Medicaid beneficiaries and the general public;
- Review projects designed to inform the general public about medical programs *and to access their benefits;*
- Serve as a conduit for informing the Medicaid Advisory Committee and the department concerning gaps in public understanding of the medical programs;
- Propose additional means of communicating information about medical programs;
- Review and provide advice on program eligibility changes, customer service delivery, and eligibility processing systems; and
- Make necessary recommendations to the Medicaid Advisory Committee.

Sherie Arriazola made a motion, seconded by John Jansa, which was unanimously approved. The proposed changes will be presented during the next Medicaid Advisory Committee (MAC).

4. Care Coordination Update:

Lauren Polite reported that Phase One of Healthchoice is winding down and coming to its conclusion. Clients in the plans who were not continuing on have been moved into new plans. Aetna and CCAI members and providers in Cook County were moved to CountyCare as of January 1st, 2018, and Humana members were auto-assigned to other plans. Clients continue to have about 60 more days to change plans during their 90 days switch period. Phase Two has begun for individuals who had not previously been enrolled in managed care across the state, which includes newly, enrolled clients in Cook County.

- Individuals are currently receiving enrollment packets (between January 15th and February 15); they have a 30 day enrollment period to make a plan choice and the effective date for each individual (either through choice or auto-assignment) will be April 1st, 2018 and no sooner.
- For individuals with enrollment packets issued after February 16, 2018, the enrollment effective date will be May 1st, 2018.
- If clients are unsure of their effective date, they should go online to the www.enrollhfs.illinois.gov website, set up an account and login or call the Client Enrollment Services at 1-877-912-880.

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018

Ms. Polite indicated that for the Phase Two expansion, not all the providers are yet included within the MCOs provider lists on either the MCO websites or the CES website because it takes some time to get them loaded. She suggested that:

- Providers need to be sure they quickly get all the information requested to the MCOs.
- Clients can ask their providers (both their PCP and hospital) what plans they have signed contracts with (or are in the process of signing contracts with), and then choose the corresponding plans. They may, however, have to pick a different PCP for the time being, until their PCP gets in the system. This will give the MCO a couple more months to get the providers loaded before members are assigned to them.
- They will have 90 days from their enrollment date to make changes.

Lauren Polite said that, similar to the transition for January 1st, 2018, any individual being given an auto-assigned enrollment during this period of time, can certainly call again and make another plan choice prior to the April 1st 2018 start date.

- Plans switches made after the middle of March will not be effective in April, but will be indicated by May 1st, 2018 as a result of the cut-off dates.
- Each individual has a 90 day switch period that begins on their enrollment date.
- During this 90 day period, an individual can make only one plan switch.
- Following the 90 day switch period, individuals are locked into their health plans but will have another opportunity to switch plans during their open enrollment period.

Lauren Polite indicated that HFS is tracking the development of provider networks very closely. She said that the MCOs have been doing quite a few presentations to provider groups across the state, particularly down state. The Illinois Association of Medicaid Health Plans (IAMHP) has been conducting informational forums. The Illinois Hospital Association has arranged a number of sessions throughout the state as well. She said that all MCOs have information on their websites for providers interested in contracting with them. Some MCOs are doing their own meetings with provider groups.

Finally, Lauren Polite invited committee members to visit the Care Coordination website which has been redesigned: <https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/defaultnew.aspx>

Sherie Arriazola asked: "What is the average approval time for IMPACT registrations? Dr. Goyal said that the process may range from between 30 to 50 days. Lauren stated that anyone having issues should contact the IMPACT staff:

Email: IMPACT.Help@Illinois.gov

Phone: 1-877-782-5565

<https://www.illinois.gov/hfs/impact/Pages/default.aspx>

In response to an inquiry related to the auto-assignment algorithm, Lauren Polite said its specific details are posted on the HFS Care Coordination, under the "Frequently Asked Questions":

<https://www.illinois.gov/hfs/SiteCollectionDocuments/AutoAssignmentOverviewforPlanswithBandDetail011718.pdf>

<https://www.illinois.gov/hfs/SiteCollectionDocuments/MLTSSAutoAssignmentOverviewforPlanswithBandDetail011718.pdf>

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018

5. ABE/IES Update:

Lauren Polite provided a high level overview of the combined efforts from HFS and DHS to identify issues in ABE and IES. She reported that on a daily basis, state employees monitor and track issues conveyed by different sources such as:

Feedback from the Call Centers; inquiries received through community partners such as Help Hub. Individuals who have encountered issues while completing an ABE application have the option to: "Report Technical Problems" https://abe.illinois.gov/abe/access/jsp/access/ABUserComments.jsp?POP_UP=Y. Furthermore, requests for assistance can be made from both of the following portals: ABE.Questions@Illinois.gov and HFSPartnerportal@Illinois.gov

Lauren indicated that when the state receives a report about any system issues, an individual is first referred to a series of "Troubleshooting Tips" that can be found on the User Support site at: <http://www.dhs.state.il.us/page.aspx?item=98456>. This page contains other helpful resources, such as "How to Set-up Mange My Case (MMC), ABE Resources, and information about the ABE Appeal Portal, among others resources.

Lauren Polite went over a handout that was included within the meeting materials which are attached, "How to set-up Mange My Case & Tips for Using MMC," which is also available in Spanish: <http://www.dhs.state.il.us/page.aspx?item=98456>

She then responded to a series of questions submitted by Nadeen Israel related to MMC:

- How many people have successfully set-up accounts?

As of Monday, 1/29, 2018, a total of 121,361 accounts have been linked to Manged My Case; 21,992 "Renew my Benefits" have been submitted; 14, 254 "Report my Changes" have been submitted, and 3,728 program adds with 2,644 member adds, and 2,870 mid-point reports submitted.

- Has there been any troubleshooting around those who cannot set-up accounts and call Experian? And does Experian or HFS track those cases or developed workarounds?

Lauren explained that HFS is currently discussing a work around for individuals who are not able pass "Identity Proofing".

- Is the problem mainly due to failure in terms of being able to verify identity through Experian?

Ms. Polite reported that for the individuals who failed the process, it is not currently possible to identify those who failed for business reasons. For example, a person may have answered Experian's questions incorrectly, as opposed to encountering technical issues, such as service was down when an individual attempted verification. Ms. Polite said that Experian tracks this as well, but is not able to breakout Illinois specific statistics, since Illinois users access Experian through a "Data Service Hub" together with a large number of other states. Currently the state is waiting for alternative guidelines from CMS in order to develop an alternative process.

- How many people have successfully submitted appeals through MMC, and are the unsuccessful attempts being tracked by troubleshooters?

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018

As of January 31, 2018, there were 4,673 appeals filed through ABE. We have a process in place to make sure the appeals successfully come into IES.

Finally, Ms. Polite indicated that IRS 1095B forms started mailed out in January and will continue to go out through February. In addition, HFS has a process in place in the event that someone requests a replacement form, but that option will not begin to be offered until early March in order to avoid possible duplication of forms that have been sent through the mail.

Nadeen Israel asked for an update regarding Manage My Case for the next meeting scheduled in April 5th, 2018.

6. Redetermination Update:

Elizabeth Lithila provided the update. She said that it is official; the contract with Maximus ended on 1/31/18. Elizabeth reported that, in December of 2017, IES issued the first batch of medical redeterminations coming from IES. She said that 148,234 of the redeterminations generated in December were “medical only” or had a medical component.

Redetermination due in **January**: 23% (34,098 Rede Form “A” (Auto-Renewal) and 77% (114,136 were Rede Form “B” Regular Rede); **February**: 23% (28,057 Rede – Form “A” and 77% (92,218) were Rede Form “B”, and **March**: 20% Rede form “A” and Form “B” approximately 80%.

Ms. Lithila indicated that HFS staff members continue their efforts in terms of updating the Rede Report generated from IES, although she is not certain when this will happen, since ensuring the continuation of client eligibility is the main priority.

Sherie Arriazola asked, since the contract with Maximus has ended, how can clients receive assistance?

Elizabeth said that clients can submit their redetermination by:

- If the person has ABE Manage My Case and access to a scanner, go to abe.illinois.gov, log on to the person’s ABE Manage My Case and follow the instructions to upload requested verification documents.
- The individual can fax the documents along with the coversheet to Data Preparation/IES Central Scanning at FAX number 1-844-736-3563.
- Mail all requested documents including the coversheet to: Data Preparation/IES Central Scanning P.O. Box 19138 201 S. Grand Avenue East, 2nd Floor Springfield, IL 62763.
- All Kids Unit can help with All Kids Share and Primmum Level 1 and 2. Telephone 1-866-255-5437. <http://www.allkids.com/>

Dan Rabbit said that the DHS Helpline is very congested. Lynne Thomas indicated that Mange My Case is also a good resource. Elizabeth added that redetermination dates are populated close to the redetermination date. In addition, redetermination dates are also found in MEDI. Nadeen recommended to having redetermination dates available year round and that seeing the redetermination dates throughout the entire year would be best.

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
February 1st, 2018**

Sherie Arriazola expressed concerns related to individuals who are being released from certain prisons who do not have coverage upon at the time they are leaving the prison. Sherie will contact Elizabeth Lithila in order to discuss her concerns. Kathy Chan asked to include this topic as agenda item for the next meeting. She also asked to add the agenda item “DHS Customer Services Concerns”, as well.

Sue Vega asked that meeting minutes include information about the Community Quality Council (CQC) meetings, which are held at various FCRCs/ DHS Local Offices. These meetings are facilitated by the Local Office Administrators and managers at each Local Office. In these meetings participants have the opportunity to discuss case specific situations, and work with administrators in terms of finding resolutions.

https://docs.google.com/document/d/11WJe_ai3WKQJ2Oo_6jkFlsKiF_kCgzsgBuQalAQE-bc/edit

In addition the next SSAC Local Office meeting, which is sponsored by Department of Human Services, is scheduled for March 9th, 2018, at 2:00 p.m. Conference call – call in # 888-494-4032/Passcode: 5953520083.

7. Open Discussion and Announcements:

Maria Bruni provided an update about the recently launched Illinois Helpline for Opioids and Other Substances. In partnership, IDHS/DASA has established this Helpline (1-833-2FINDHELP) which is available 24 hours a day, seven days a week for individuals experiencing opioid use disorders, families, and anyone affected by this disease. Ms. Bruni said that, so far the toll-free helpline has received 1, 100 phone calls. Gabriela Moroney is working on the development of webinars and training regarding Healthchoice Illinois intended for DHS and DASA providers.

Kathy Chan will not be available to serve as the chair for the next meeting, scheduled for April 5th, 2018. Nadeen Israel agreed to serve as the chairperson. She reminded committee members to send suggestions for agenda items for the next meeting to veronica.archundia@illinois.gov

9. Adjournment:

The meeting was adjourned at 12:04 p.m. The next meeting is scheduled for April 12th, 2018, between 10:00 a.m. and 12:00 p.m.

Medicaid Redetermination and Limited English Proficiency

Background

Illinois has the 6th largest immigrant population in the US. From 2000-2010, foreign-born individuals accounted for half the state's population growth. Over 1.2 million among these individuals – or 1/10 people in Illinois- are limited English proficient (LEP) and about 30,000 are enrolled in Medicaid¹. Ensuring that these individuals have equal access to public services is critical. One area of major concern relates to Medicaid benefits. Eligibility for Illinois Medicaid beneficiaries is redetermined annually. The process begins with a mailed notice informing beneficiaries that their eligibility will be cancelled unless requested information is returned. According to the Illinois Department of Healthcare and Family Services' (HFS) latest available data, about 47% of people on Medicaid have their benefits cancelled each year and about 80% of these cancellations are due to lack of response. These cancellations represent a hardship for beneficiaries and an expense for the state.

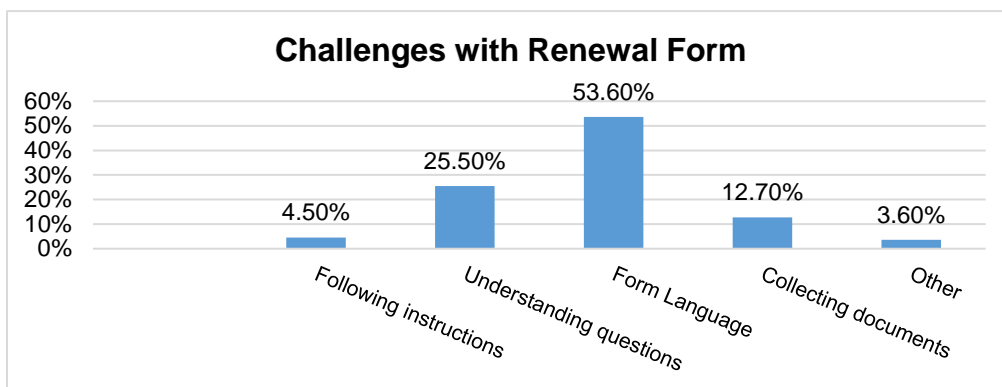
Some local immigrant and refugee communities have reported high rates of Medicaid cancellation, possibly due to language barriers. University of Illinois in Chicago (UIC) and the Illinois Coalition for Immigrant and Refugee Rights' (ICIRR) members examined the rates of Medicaid cancellation among beneficiaries from immigrant/refugee communities in Illinois. Participating agencies included Arab American Family Services, Chinese American Service League, Hana Center, and South-East Asia Center. We launched a research project to determine if there was an association between Medicaid cancellation and Limited English Proficiency (LEP) and to gain an understanding of the experiences of LEP beneficiaries during the Medicaid eligibility redetermination process

Research Findings

We examined immigrant experiences with Medicaid redetermination. The four agencies conducted 140 phone surveys of Medicaid beneficiaries in 4 Chicagoland communities: Arab, Chinese, Korean and Vietnamese. They also conducted 8 qualitative interviews of beneficiaries who had successfully stayed on Medicaid multiple years, and also those who had lost benefits. Of the 140 participants, 79% reported they could not read English well, or could not read English at all. Fifty-six percent of respondents were over age 55 and sixty-four percent were female. Fifty-three percent had lived in the US more than 20 years. Forty-one percent had less than a high school education.

Fifty-one percent of the respondents had been through the Medicaid redetermination process. Of these, 69% felt that completing the benefits renewal form was difficult or very difficult, while 20% felt that this process was neither difficult nor easy. Those reporting difficulty with completing the renewal form included higher proportions of older respondents (55 years or over), those in Chinese and Korean-speaking groups, those with lower education levels, those who had lived longer in the US, and those with lower English proficiency levels.

The most common source of difficulty was the language of the form (English). Ninety-four percent of the respondents who had been through the redetermination process needed help with the renewal form. Sixty-three percent of respondents who needed help with the renewal form received this help from community organizations. Thirty-five percent received help from family or friends. No respondents received help from the IMRP help line and only one percent received help from the DHS help line.



¹ In order to qualify for Medicaid you need to meet both income (138% FPL) and immigration status (legal permanent resident for 5 yrs or U.S. citizen) requirements

Medicaid Redetermination and Limited English Proficiency

Those who cannot read English were **5.3 times** more likely to lose Medicaid benefits

Common reasons for loss of benefits included: missing the renewal deadline (30.8%), missing documents with the renewal submission such as proof of income or proof of residency (20.5%), and becoming ineligible for Medicaid benefits (20.5%). About 10% of the respondents said that they had submitted their renewal forms on time but the Illinois Department of Human Services did not receive the application. Another 18% reported that they had never received their renewal notification in the mail. Forty-four percent did not know the reason for losing their benefits. Often, participants were unaware of benefits loss until medical appointments were denied.

Some of the effects of losing benefits include:

- Postponing essential appointments
- Inability to access preventive healthcare
 - Children unable to get annual school check-ups
 - One child needed tooth extraction due to cavities not addressed
- Inability to access care when sick, sometimes resulting in ER visits
- Financial difficulty from paying for services or Medicare premiums
- Concerns about unpaid medical bills
- Seniors unable to participate in Community Care Programs
- Mental Stress

“JUST IN CASE MY CHILD GETS SICK, WHAT CAN I DO? I CANNOT AFFORD MEDICAL EXPENSES.”

–Interview Participant

“It’s even affected the kids because every time they wanted to leave the house or go out, she would tell them, okay you dress warm, make sure you do not get sick, so they even started feeling it, okay we cannot get sick, we cannot get sick, because we don’t have insurance” –Interview participant

Recommendations

Based on our research and feedback received from the Medicaid participants, the following are recommendations for the Illinois Department of Healthcare and Family Services. Our goal is to decrease redetermination cancellations and improve services for Medicaid LEP:

1. Address language access barriers
 - Make paperwork more accessible
 - **Notification letter and renewal form translated to user languages**
 - Paperwork simplified
 - DHS logo on all mail
 - Letter arrives at same time each year
 - Provide language services at DHS offices
 - Bilingual staff
 - **Language interpreters**
 - In-person interpreters preferred for assistance with forms
2. Simplify renewal process
 - Paperwork simplified
 - Follow-up phone interviews should be eliminated
 - Beneficiaries should receive **redetermination reminders in multiple formats**: mailed notifications, text messages, calls

Contact the researchers

- Mansha Mirza, PhD (mmirza2@uic.edu)
- Luvia Quiñones, MPP (lquinones@icirr.org)
- Elizabeth Harrison, OTD (eharri20@uic.edu)

“Honestly since Medicaid is covering more than one ethnicity and language, you know, diverse community members, you should at least have [mailed notifications] in different languages.”

–Interview Participant



ICIRR ILLINOIS COALITION
FOR IMMIGRANT AND
REFUGEE RIGHTS

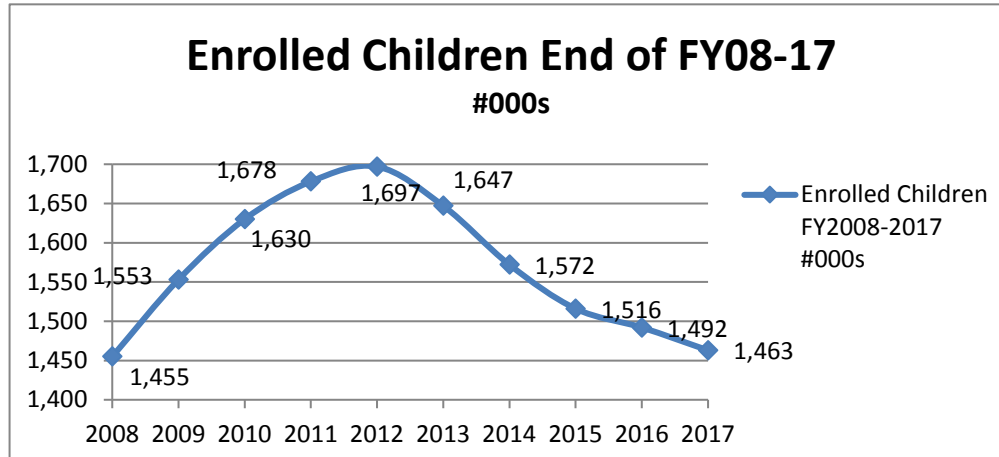


Children's Enrollment

**Enrolled
Children
FY2008-2017
#000s**

End of FY

2008	1,455
2009	1,553
2010	1,630
2011	1,678
2012	1,697
2013	1,647
2014	1,572
2015	1,516
2016	1,492
2017	1,463



End of Month 2014	Enrolled Children #000s	End of Month 2015	Enrolled Children #000s	End of Month 2016	Enrolled Children #000s	End of Month 2017	Enrolled Children #000s
Jan	1,582	Jan	1,540	Jan	1,505	Jan	1,476
Feb	1,582	Feb	1,540	Feb	1,502	Feb	1,472
Mar	1,591	Mar	1,532	Mar	1,501	Mar	1,472
Apr	1,595	Apr	1,527	Apr	1,497	Apr	1,467
May	1,587	May	1,522	May	1,495	May	1,464
June	1,572	June	1,516	June	1,492	June	1,463
July	1,564	July	1,515	July	1,491	July	1,462
Aug	1,567	Aug	1,514	Aug	1,492	Aug	1,458
Sept	1,561	Sept	1,513	Sept	1,488	Sept	1,452
Oct	1,554	Oct	1,510	Oct	1,482	Oct	1,445
Nov	1,547	Nov	1,508	Nov	1,481	Nov	1,445
Dec	1,541	Dec	1,503	Dec	1,477		

