

**Illinois Department of Healthcare and Family Services  
Public Education Subcommittee Meeting**

**June 13, 2013**

**Approved Final Meeting Minutes**

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

**Committee Members Present**

Margaret Stapleton, Shriver Center  
Margaret Dunne, Beacon Therapeutic  
Nadeen Israel, Heartland Alliance  
Tammy Lackland, Molina HealthCare for John Jansa  
Jacqueline Gonzalez, CHHC  
Alicia Donegan, Age Options for Erin Weir

**Committee Members Absent**

Kathy Chan, IMCHC  
Henry Taylor, Mile Square Health Center  
Hardy Ware, East Side Health District  
Susan Vega, Alivio Medical Center  
Tanni Lovelace, SIU School of Medicine

**Interested Parties**

Margaret Kirkegaard, HMA  
Debra Matthews, DSCC  
Ralab Kiarie, Molina Healthcare  
Tasia Stewart, Molina Healthcare  
Kelley Martin, Molina Healthcare  
Priscilla Vasquez, Molina Healthcare  
Philippe Largent, LGS  
Marisa Kirby, IARF  
Diane Montañez, Alivio Medical Center  
Victoria Bigelow, Access to Care  
Nancy Byrne, CCAI  
Susan Melczer, MCHC  
Carrie Chapman, LAF  
Mary Kennelly, LAF  
Erin Sutton, Health Justice Project – Loyola Law  
Kiernan Keating, Takeda  
Tiffany Elking, GNG  
Susan Gaines, IPHCA  
Rick Cornell, Health Alliance  
Luvia Quiñones, ICIRR  
Jane Longo, HMA (via phone)  
Mona Martin, PHRMA (via phone)  
Marissa Kirby, IARF (via phone)  
Joshua Turner, LINK Solutions (via phone)  
Dr. Derek Lanier, Meridian Health Plans (via phone)

**HFS Staff**

Jacqui Ellinger  
Lynne Thomas  
Mike Koetting  
Arvind K. Goyal  
Lauren Polite  
Amy Wallace  
Sally Becherer  
Veronica Archundia

**DHS**

Jennifer Wagner  
Michael Szota

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**1. Introductions**

Nadeen Israel, from Heartland Alliance, chaired the meeting in the absence of the Vice-chairperson Kathy Chan. Attendees in Chicago and Springfield introduced themselves.

**2. Review of Minutes**

The minutes from June 13, 2013 were approved.

**3. DHS Report: No-Wrong Door Policy**

Jennifer Wagner, DHS Associate Director, indicated that the No-Wrong Door policy allows filing new applications for TANF, SNAP, and Medical benefits at any FCRC (with the exception of few offices). She clarified that clients who have open cases at a particular FCRC cannot receive ongoing services at any other local offices, unless previous arrangements have been made for the transfer of their cases to an FCRC of their choice.

A member raised a concern regarding instances when the No-Wrong Door policy has not been applied as stipulated. Mrs. Wagner acknowledged these occurrences and noted that, due to a combination of factors, the Local Offices have been struggling tremendously. These include: an outdated system that is over 30 years old and the loss of 40% of the caseworker staff in the past few years, which is being complicated by the challenges faced due to the increase in the number of cases served by 120%.

She indicated that the Integrated Eligibility System (IES), which will be launched on October 1<sup>st</sup>, 2013, will accommodate highly automated features that will facilitate an efficient in and out transfer of cases. Jennifer emphasized that the department's top priority is to make sure that all staff members receive IES training, continue testing the new system, and "get ready" to "go live" on October 1<sup>st</sup>, 2013. All this is parallel to the reengineering of the FCRCs. She noted that a grant issued by the Ford Foundation is being used to redesign the flow at the FCRC's lobbies in an effort to improve customer assistance and how the paperwork is routed through the office, as well as to accommodate the implementation of IES this fall.

Committee members were reminded that clients have different options when requesting an address change, which do not require them to go, in person, to an FCRC. Instead, they can call the HFS Hotline at 1-800-226-0768 or 866-468-7543, as well as the DHS Report Line at 1-800-720-4166. In addition, a client's address will be automatically updated in the Client Database (CDB) when a change of address is reported to the U.S. Postal Service (USPS) via the National Change of Address (NCOA) update process:

<https://moversguide.usps.com/icoa/home/icoa-main-flow.do?execution=e1s1>

The address will only be updated if the "old address" that is reported to USPS matches the address that was on the CDB. Ms. Wagner encouraged the committee to report case specific information to HFS, as well as local and regional administrators at DHS for instances in need of resolution.

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**Application for Benefits Eligibility (ABE)**

Mike Koetting indicated that ABE is a new website for customers which will be launched in October, 2013, and will replace the current IDHS web-application, as well as the online All Kids application.

ABE is the public interface of IES through which navigators, application assistors, hospitals, and other entities will be able to help clients apply for TANF, SNAP, and medical benefits. ABE will have a “Landing Page” screen listing questions that can be used to guide individuals in either the Health Insurance Marketplace or to apply for Medicaid.

During the second phase of IES, which will be launched in the 2015 spring, the new system will provide customers with many helpful tools to monitor and manage their benefits, including the online reporting of changes, and to complete their redetermination electronically. This topic will remain on the agenda for the next meeting.

**4. Enhanced Eligibility Verification (EEV)/ Illinois Medicaid Redetermination Project (IMRP)**

Mike Koetting reported that the IDHS and HFS continue to process the backlog of cases due for redetermination and are seeking to make sure that, going forward, all annual reviews are completed in a timely manner. Mr. Koetting indicated that, in spite of the difficulties encountered in the initial launch of this project, important progress has been made. He noted that HFS is publishing weekly reports about the number of cases processed, as well statistics on the development of this project at:

<http://www2.illinois.gov/hfs/SiteCollectionDocuments/IMRPReport.pdf>

A question was raised regarding whether or not the notices posted on the HFS website have been updated since the last meeting. Mr Koetting indicated that the client redetermination notices have been revised, taking into account the recommendations from committee members:

<http://www2.illinois.gov/hfs/MedicalCustomers/eev/Pages/default.aspx>

Jacqui Ellinger indicated that the client notices will continue to evolve in an ongoing effort for quality improvement for which the committee’s feedback will be welcomed.

**5. IES Update: Medicaid Financing Legislation/SB26**

Ms. Ellinger announced that the Illinois General Assembly passed SB26, which among other important changes, authorized the expansion of a “new eligible” adult group, which in the past did not meet the criteria that is currently applicable to adults. These “new eligible” individuals are adults from 19 to 64 years of age with incomes under 138% of poverty and without dependent children. Ms. Ellinger provided a summary of the bill and thanked members of the committee for their partnership and support in terms of the passage of this legislation. A member asked if the department would have a fact sheet regarding SB26. Ms.

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Ellinger offered to provide a summary of the bill, which will be forward to members on a follow-up e-mail.

**6. Alliance for Health Initiative**

Dr. Margaret Kirkegaard, from Health Management Associates and representing the Governor's Office, presented highlights of the Alliance for Health Initiative. This is a federal grant from the Center for Medicare and Medicaid Innovations (CMMI) that was provided to the state of Illinois to help accelerate the innovation plan in order to deliver high value medical care and reduce overall cost. Margaret asked the committee to distribute a survey titled [Town Hall Questions](#), among their contacts, through which people can share their recommendations to improve the health in their communities and health care services, as well as providing suggestions regarding how to reduce costs to make health care more affordable.

Dr. Kirkegaard indicated that, in the upcoming months, a town hall meeting will be scheduled, seeking the participation of clients, consumers and providers to get them involved in this initiative. She invited committee members to learn more about the Alliance for Health Initiative by visiting the HealthCare reform website at:

<http://www2.illinois.gov/gov/healthcarereform/Pages/Alliance.aspx>

**7. Update: Children's Enrollment**

Ms. Ellinger referred the group to a handout that was provided to the committee which shows the cumulative children's enrollment, starting in 2006 with 1,215,000 children initially enrolled and increasing to 1,697,000 children enrolled in 2012.

The second table illustrates enrollment beginning in January of 2012, with 1,696,000 children enrolled, through January, 2013, when 1,666,000 children were enrolled.

**August Agenda – Managed Care Client Communication**

Ms. Ellinger announced that, in response to the committee's request, next month, Amy Harris will discuss the following topics:

1. HFS managed care roll-out schedule;
2. Roles of CEB and PCCM vendors;
3. Client's communications by vendors.

Please contact HFS staff for consideration of additional topics.

**9. Open Discussion and Announcements**

Several committee members asked about the likelihood of restoring dental services, as had been available for clients prior to 7/01/12. Nadeen Israel asked if the department has any data concerning expenditures due to emergency room visits related to dental services. HFS will

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share any available analysis. Ms. Ellinger indicated that there is strong interest among some legislators to expand the current dental program to include what was available for clients previously. However, in spite of extensive discussion, the Illinois General Assembly did not change the law or allocate the funds to restore these services. In addition, HFS staff will send a follow-up e-mail which will include a link to the All Kids Audit report that was conducted by the Auditor General.

**9. Adjourn**

The meeting was adjourned at 12:04 p.m. The next meeting is scheduled from 10:00 a.m. to 12:00 p.m. on August 8<sup>th</sup>, 2013.