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Medicaid Advisory Committee
Public Education Subcommittee Meeting
Thursday, June 13, 2013
10:00 a.m. to 12:00 a.m.

401 S. Clinton St., Chicago – 7th Floor Video Conference Room
201 S. Grand Ave. East, Bloom Bldg., Springfield – 3rd Floor Video Conference Room

Agenda

1. Introductions
2. Approval of the Meeting Minutes from April 11, 2013
3. DHS Report:
 - No-Wrong Door
 - ABE – Application for Benefits Eligibility
4. Enhanced Eligibility Verification (EEV)/Illinois Medicaid Redetermination Project (IMRP)
5. IES Update
 - Medicaid Financing Legislation / SB26
6. Alliance for Health Initiative
7. Update:
 - Children's Enrollment
 - August Agenda- Managed Care Client Communication
8. Open Discussion and Announcements:
9. Adjourn

Please confirm whether you plan to attend by responding to HFS Webmaster via e-mail, HFS.webmaster@illinois.gov, or by phone at 312-793-1984.

A conference call will be made available for persons who cannot attend in person. If you wish to call in, please request the number when you confirm your attendance. Anyone who participates by phone must identify themselves when they join the meeting. This notice is also available at:

<http://www2.illinois.gov/hfs/PublicInvolvement/BoardsandCommissions/MAC/News/Pages/default.aspx>

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
April 11, 2013**

Committee Members Present

Kathy Chan, IMCHC
Tanni Lovelace, SIU School of Medicine (via phone)
Margaret Stapleton, Shriver Center
Brittany Ward, Beacon Therapeutic for Margaret Dunne
Lamorris Perry, Mile Square Health C (for Henry Taylor)
Jacqueline Gonzalez, CHHC
Erin Weir, Age Options
John Jansa, Molina HealthCare (via phone)

HFS Staff

Jacqui Ellinger
Lynne Thomas
Mike Koetting
Robyn Nardone
Arvind K. Goyal
Gabriela Moroney
Sally Becherer
Veronica Archundia

Committee Members Absent

Hardy Ware, East Side Health District Medical Center
Paula Ramos, Community Health Care
Susan Vega, Alivio Medical Center
Nadeen Israel, Heartland Alliance

DHS Staff

Sharon Dyer-Nelson
Michael Szott

Interested Parties

Jane Longo, HMA
Indru Punwani, UIC
Joe Summers, Novo Nordisk
Brian Gorman, Office of the Governor
M. Katz, Health Spring
Andrea Dawnport, BlueCross BlueShield
Sheri Cohen, CDPH
Susan Melczer, MCHC
Fasher Klan, ICIRR
Jodie Winnett, Deloitte
Joshua Turner, LINK Solutions (via phone)
Jim McNamara, ViiV Healthcare
Deborah Mathews, DSCC
Dr. Judy King, Consumer Advocate (via phone)
Chris Breertzman, FHN/CCAI
Diane Montanez, Alivio
Carrie Chapman, LAF
Randall Mark, CCHHS
Esther Sciammarella, CHHC
Lauren Polite
Molly McAndrew, Heartland Alliance
Emily Miller, IARF

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1. Introductions

Kathy Chan chaired and called the meeting to order at 10:04 a.m. Attendees in Chicago and Springfield introduced themselves.

2. Review of Minutes

Erin Weir asked for typo corrections on page three and five. Brian Gorman asked for a correction on page one: “Office of the Governor,” instead, of “IDOI”. With these changes, the April 11, 2013 minutes were approved.

3. Welcome new members

Jacqui Ellinger reported that Chairperson Susan Hayes Gordon has appointed three new members to this subcommittee. The intent is to have a full complement of twelve members. Jacqui introduced the new members present, Jacqueline Gonzalez, Tanni Lovelace, and Erin Weir.

4. Enhanced Eligibility Verification /Illinois Medicaid Redetermination project (IMRP)

Status: Michael Koetting began by stating that HFS continues making progress working with Maximus to review cases due for redetermination. He noted that, in spite of some obstacles which were initially encountered, the project has continued to progress. He indicated that anyone who is interested in following this project should visit the HFS website, <http://www2.illinois.gov/hfs/MedicalCustomers/eev/Pages/default.aspx>, which contains a folder that is devoted to IMRP and is being updated every Thursday.

Review Notices: Members then engaged in a robust discussion on general recommendations and provided specific language changes to the notices being used for the project. However, since no consensus was achieved, it was agreed that committee members should send their comments and suggestions to HFS staff by the close of business on April 19, 2013.

Jacqui noted that the department has been (and will continue) refining these notices. She reminded members that Maximus does not have the authority to cancel cases. She added that it would be helpful to make HFS aware of specific instances when client’s interactions with the contractor requires our attention, or if it’s suspected that incorrect information has been provided, which would provide the opportunity to educate Maximus staff and address the necessary procedures to ensure that these interactions are appropriate.

Kathy Chan indicated that HHS published a series of documents to help consumers better understand their health insurance and benefits. She suggested that HFS may wish to consider using these terms for future HFS publications:

<http://www.healthcare.gov/law/features/rights/sbc/> - (See links at the bottom of the page.)

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5. ACA Update:

Integrated Eligibility System (IES): Mike Koetting noted that, development of the Integrated Eligibility System is moving forward. In spite of being a little behind, the system design has almost been completed. There are some issues that are still awaiting guidelines from the federal government. Some other things merely involve the complexities of a monumental project such as this. He added that system testing will begin soon. Jacqui noted that, for context in terms of future conversations, the fundamental structure of IES should be understood as an entire system comprised of a client facing portal and the worker facing portal.

Application for Benefits Eligibility (ABE): Michael Koetting provided an update regarding efforts to establish “the front part of the integrated eligibility system which will be called, ABE, “Application for Benefits Eligibility”. HFS has recently selected a logo that includes a silhouette of Abraham Lincoln to establish a clear connection with Illinois. ABE will be the client facing portal that people will use to apply for TANF, SNAP, and medical benefits.

Mr. Koetting noted ABE will provide a screening page through which people will be asked few questions. Depending on their answers, people will be directed to the right stream; either the federally facilitated “Marketplace,” as the Health Insurance Exchange is now called, or, the Medicaid stream.

Sharon Dyer-Nelson added that the screening instrument of the ABE portal will not provide a “real time” determination of eligibility but will help to assess potential eligibility, so the person could be directed to the right stream to submit an application.

Jacqui stated that, ABE will serve as the primarily portal through which people will apply for SNAP, TANF, and medical benefits. It was noted that, even though this is going to be the primary source for individuals applying online, which will begin in October, 2013, there will still be other mechanisms. These will include applying in person at the FCRC, completing applications over the phone, and submitting paper applications through the mail.

Medicaid Financing Legislation: Mike Koetting asserted that SB26 seems fairly assured of passage. The bill will expand healthcare benefits under Medicaid to low-income Illinois who are currently excluded. Mr. Koetting encouraged committee members and interested parties to support this pending legislation.

Health Reform Communication: Illinois Health Insurance Marketplace and Medicaid: Brian Gorman, from the Office of the Governor, announced that the outreach educational plan had been submitted to the federal government on March 29, 2013. He added that the state was recently awarded a federal grant of \$115 million for the outreach for the Health Insurance Marketplace. This grant includes funding for in-person counselor grants, as well as money for the procurement of a private marketing firm. Mr. Gorman added, as indicated in the outreach educational plan, there is a strong commitment to promoting a culture of coverage throughout the state. He said the outreach efforts to promote the Health Insurance

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Marketplace will be run like a campaign using both direct contact (grass roots educational plan) and a paid media component.

Jodie Winnett, a representative of Deloitte Consulting and part of the larger IES implementation team, asserted that to help FCRC and All Kids staff understand the changes that are coming and how the new IES will impact their daily work, a summit will be held in Decatur next month. Ms. Winnett added the summit will facilitate the discussion of strategies for the implementation of IES, and prepare key HFS and DHS staff to get ready to lead the roll-out of the first phase of the project which will take place during the summer and early fall of 2013.

6. Open Discussion and Announcements

Children's Enrollment: Lynne Thomas discussed a chart which was distributed to the committee, and indicated that there had been a decline in the number of children who were enrolled for medical benefits between January and April. She noted that the decline seems to have resulted from having started the national change of address process and not from recipients' families having incomes that exceeded eligibility limits. Ms. Thomas indicated that the state has automated an exchange of data with the US Post Office which updates addresses in the state's system based on change of address requests clients file.

Margaret Stapleton asked if this meant that someone who submitted a change of address to the Post Office would no longer need to notify the change to HFS or DHS. Lynne Thomas replied: "Yes, that is correct." It was suggested that a flyer should be developed describing different mechanisms available for clients, so they can choose the most convenient way to change their address.

Medical Card: Robyn Nardone reported that the final mailing of the medical card has been completed; there had been some delays that created some confusion for clients who did not receive their medical cards according to schedule. Robyn added that medical providers will be sent a notice reminding them of the need to confirm eligibility at the time of service and that clients no longer receive a monthly medical card. They will also be reminded that there are several ways in which eligibility can be confirmed and that patients should not be refused services if they are unable to produce a medical card:

<http://www.hfs.illinois.gov/html/041613n.html>

Robyn also invited committee members to report specific situations or instances that may have been encountered by particular clients that may need to be addressed. Jacqui proposed inviting a representative from DHS to come to the next committee meeting to address committee members' concerns.

Kathy Chan invited committee members to suggest agenda items for the next meeting.

- Kathy Chan suggested inviting DHS to provide a report on their involvement in relation to ABE.

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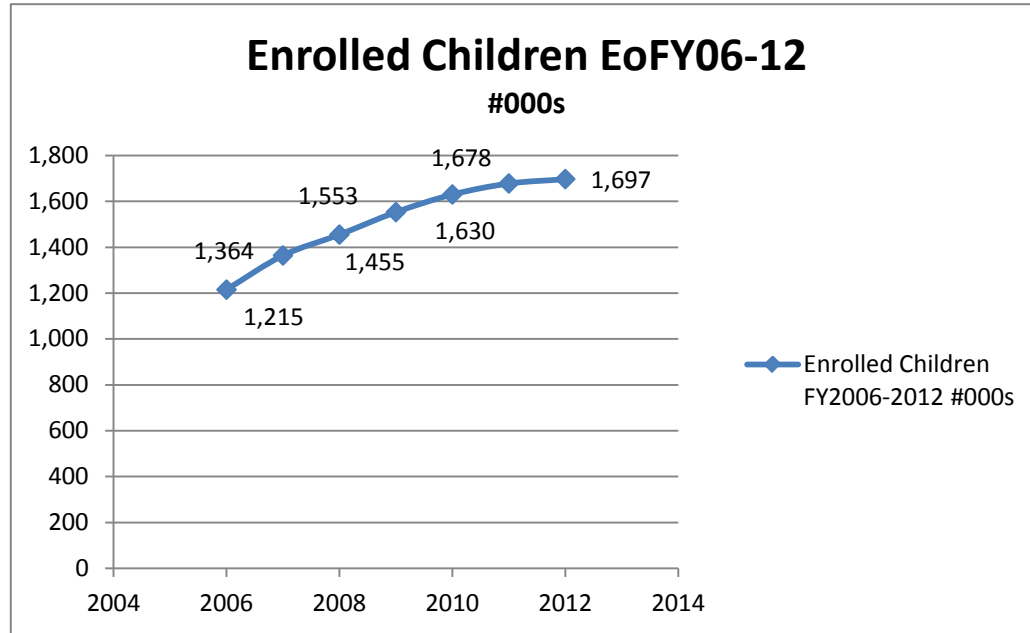
- Joshua Turner suggested discussing the “No-Wrong Door Policy.”
- Diane Montanez proposed the topic of managed care and client communication.
- Kathy Chan recommended an updated in relation to children’s enrollment.

7. Adjourn:

The meeting was adjourned at 12:06 p.m. The next meeting is scheduled for June 13th, 2013, from 10:00 a.m. to 12:00 p.m.

**Enrolled Children
FY2006-2012
#000s**

End of FY	#000s
2006	1,215
2007	1,364
2008	1,455
2009	1,553
2010	1,630
2011	1,678
2012	1,697



End of Month 2012	Enrolled Children #000s	End of Month 2013	Enrolled Children #000s
Jan	1,696	Jan	1,666
Feb	1,699		
Mar	1,701		
Apr	1,701		
May	1,698		
June	1,697		
July	1,694		
Aug	1,694		
Sep	1,690		
Oct	1,681		
Nov	1,674		
Dec	1,668		

