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

Committee Members Present

Kathy Chan, Cook County Health & Hospitals System Margaret Stapleton, Shriver Center Margaret Dunne, Beacon Therapeutic Erin Weir, Age Options
Nadeen Israel, Heartland Alliance
Sue Vega, Alivio Medical Center
John Jansa
Connie Schiele, HSTP (by phone)
Brittany Ward, Primo Center for WC
Sergio Obregon, CPS
Hardy Ware, East Side Health District

Committee Members Absent

Henry Taylor, Mile Square Health Center

Interested Parties

Deb Matthews, DSCC Laura Minzer, Cigna Jill Hayden, BCBS Kelly Carter, IPHCA Rick Cornell, Health Alliance Lucero Gomez, Cigna-Health Spring Mike Lafond, Abbvie Sherie Arriazola, TASC Carrie Chapman, LAF Susan Melczer, MCHC Alicia Siani, EverThrive Illinois Jodie Winnett, Deloitte Consultants Sean Mullins, Deloitte Consultants Srujana Kunapareddy, ICIRR Paul Frank, Harmony/Wellcare Victoria Bigelow, Access to Care Kathy Waligora, EverThrive Illinois Mona Martin, PHRMA (by phone) Ramon Gardinhire, SEIU Healthcare Lindsey Artola, Illinicare Jessica Pickens, Next Level Health Partners Enrique Salgado, Harmony WellCare Chez Ordoñez, AFC Palak Desai, Harmony WellCare Monifa Thomas, Chicago Sun-Times (by phone)

HFS Staff

Jacqui Ellinger
Gabriela Moroney
James Parker
Arvind K. Goyal
Amy Harris-Roberts
Amy Wallace
Stephanie Hoover
Patrick Lindstrom
Veronica Archundia

1. Introductions

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

2. Review of Minutes

The June 9th meeting minutes were approved.

3. ACA Updates

ABE/IES and FFM status

Jacqui Ellinger provided background information concerning the ABE usability study. She indicated that, a year ago, members of the committee, various advocate groups, as well as HFS & FCRC personnel participated in the review and assessment of the ABE web portal, which produced a large document containing suggestions intended to enhance the experience of using ABE. She introduced Jodie Winnett and Sean Mullins, from Deloitte Consultants, who in conjunction with a team of state staff are spearheading the ABE Usability Project. Sean Mullins reviewed a handout titled: "Application for Benefits Eligibility (ABE) Improving the Customer Experience" with the committee.

DOCUMENT "A"

Following this overview, committee members engaged in a discussion about how clients are being impacted by certain functionalities currently available in the ABE system. Participants shared their impressions, based on interactions with clients who had submitted ABE applications, and provided specific recommendations that include:

- improve the uploading capacity for files to make it possible to scan and index documents for multiple purposes;
- facilitate the ability to use photo capacity to capture images of and submit documents necessary to process an application.
- rephrase the question about Social Security income so applicants are better able to understand and respond accordingly. The committee also engaged in rating a proposed list of enhancements to the ABE web portal. They offered advice on prioritizing a series of enhancements based upon their impact on clients.

Jacqui Ellinger recommended offering the opportunity for committee members to share the materials discussed during the meeting with their colleagues, in order to capture additional recommendations. She reminded committee members that the goal is to improve the quality and completeness of applications. Furthermore, she asked for feedback and recommendations to be particularly focused on situations in which consumers are submitting applications on their own, without the help of assistors or navigators. Comments should be submitted to herself, Veronica Archundia, Sean Mullins smullins@deloitte.com and Jodie Winnett jwinnett@deloitte.com by August 21st.

4. Enhanced Eligibility Verification (IMRP)

Jacqui Ellinger provided a general update, indicating that the FCRCs and the All Kids Unit continuing intensive efforts to process applications and making progress in terms of reducing the backlog of applications.

She noted that Nadeen Israel has raised a series of concerns about the redetermination and other issues for which a meeting had been scheduled. HFS continues receiving inquiries regarding cases that require the department's assistance for review. In order to identify the sources of any problems,

5. Care Coordination and Announcements

Amy Harris-Roberts provided details about the managed care expansion for participants within family health plans, ACA Adults, and children with special needs living in Cook and the collar counties, Rockford, Central Illinois and the Metro East area. She indicated that clients will have 60 days to select a health plan; after a 30 day period, if they don't make a selection, they will be auto-enrolled in a health plan. Clients will have 90 days to change their health plan, or they will be locked into their plan choice for a year. Amy shared the roll out schedule which is also posted at: http://www2.illinois.gov/hfs/SiteCollectionDocuments/CC__mailsched.pdf

Kelly Carter stated that she has become aware of multiple inaccuracies with the provider enrollment database. Jim Parker acknowledged that HFS has received some reports with similar concerns, explaining that, in part, this could be happening because some providers are still in the process of updating or about to complete their new enrollment with a particular plan or managed care organization. He commented, the department is taking measures to improve quality control. In addition, Ms. Carter provided the example of an individual living in DeKalb, who nonetheless, was assigned to County Care. Jacqui Ellinger indicated that, in some instances, a client's address has been updated, but the county code has not been changed. Furthermore, she indicated, this can be a result of the way in which the current system was designed and programmed 35 years ago. At that time, every county was assigned to a DHS local office. She added, in recent years, for a variety of reasons, DHS has been asked to consolidate offices. As a result, the county code can be inaccurate in many cases. She asserted that there are some "temporary fixes" on the way and that this issue should be addressed when the second phase of IES is rolled out in the fall 2015.

Amy Harris-Roberts discussed a brochure titled, "Your Health Plan Choices" which provides a list of basic health plans, in addition to a comparison chart describing the extra benefits and services that each health plan offers:

DOCUMENT "B"

Amy also described the second handout called the "Mock-up", which presents the choices available to clients with respect to various type of plan: MCOs, ACEs, and CCEs. She noted that this document is still in its draft stage:

DOCUMENT "C"

Committee members offered comments and suggestions to enhance the handout's visual appearance, as well as recommending the use of appropriate language in order to make it easy for clients to understand. Any additional recommendations should be submitted by the close of business on August 21st to the HFS staff, Amy and Jim respectively at: Amy-Harris@illinois.gov and Jim.Parker@illinois.gov

6. Open Discussion and Announcements

Jodie Winnett announced that HFS is in the process of reviewing and updating "The ABE Frequently Asked Questions" document. Jodie encouraged committee members to submit any questions that need to be answered, in order to expand the current document. Please send your suggestions to Jodie Winnett at Jodie.Winnett@deloitte.com

Kathy Chan recommended keeping the standard agenda in anticipation of an update during the next meeting. However, if anyone would like to introduce additional topics, please submit your suggestions to the HFS staff and Kathy Chan at Kchans@cookcountyhhs.org

7. Adjournment

The meeting was adjourned at 12:03 p.m. The next meeting is scheduled for October 9, 2014, from 10:00 a.m. to 12:00 p.m.



Application for Benefits Eligibility (ABE) Improving the Customer Experience

August 14, 2014

Deloitte.



- The State of Illinois will be making a series of improvements to ABE
 the Application for Benefits Eligibility module.
- We are in the process of prioritizing a list of enhancement projects.
- We would like your input today on areas where the ABE customer experience can be improved.



Which pages, terms or data elements of the ABE
 Application do your customers have the hardest time understanding? Or you spend the most time explaining? (e.g., income, household size, expenses)



• Which parts of the application do customers most often fill out incorrectly, requiring follow-up from a caseworker or a request for further documentation?



What changes to ABE would make your job assisting with ABE Applications easier?



If there was more information available to customers after submitting their applications about "what happens next," what questions should be addressed?



Of the following possible ABE enhancements, which would have the greatest impact on the speed, accuracy and satisfaction with which ABE applications are completed? (1 = high impact / 3 = low impact)

- More explanation of terms used in the ABE application through "hover text" or Help screens
- ☐ Greater use of "quick keys" to move through the application, for example hitting "Return" rather than scrolling to the "Next" button
- More information on what to expect after the ABE application is submitted, including how will customers know if their application was approved, when benefits will start and a list of documents that may be required based on information supplied in the application
- □ The ability to photograph and submit documents using a mobile phone



Illinois Client Enrollment Services



Your Health Plan Choices

Basic health benefits

All plans have the same Medicaid services that you get now, such as:

- Behavioral health services
 Hearing services
- Doctor services
- Eve care services
- Family planning
- Home health care
- Hospice care
- Hospital services
- Immunizations
- Lab test and x-rays
- Medical supplies
- Nurse helpline
- Prescriptions
- Therapy
- Transportation

Use this chart to compare the extra benefits and services that each health plan offers:

These health plans are Managed Care Organizations (MCOs)

A Managed Care Organization (MCO) is an insurance-based health plan or provider-owned group that offers access to care through a network of doctors, specialists and hospitals. MCOs offer a full range of benefits to all enrollees and help develop a plan of care for those that need or want it.



1-877-633-2526

TTY: Illinois Relay at 7-1-1 or 1-800-526-0844 www.healthallianceconnect.org

Health Alliance Connect will help you "meet health" today with quality health care for you and your family. Our doctors and care coordinators will help you and your family get the services you need. You will also have a local team to answer your questions and access to tools for your body, mind and life.

Providers

You can choose from

- 947 primary care providers
- 2,911 specialists
- 25 hospitals



1-855-701-4886

TTY: Illinois Relay at 7-1-1 or 1-800-526-0844 www.molinahealthcare.com

Molina Healthcare will work with you and your family to get the care you need. We have special programs for moms and babies and other added benefits. The biggest benefit is being part of the Molina Healthcare family.

Providers

You can choose from

- 726 primary care providers
- 686 specialists
- 15 hospitals

Please see the back of this page for more plan information >>> Go to the **next page** for information about other plans

Questions? Visit www.EnrollHFS.Illinois.gov or call **1-877-912-8880** (TTY: 1-866-565-8576). The call is free! You can get this information in other languages or formats, such as large print or audio. Tenemos información en español. ¡Servicio de intérpretes gratis! Llame al 1-877-912-8880.



Care team

- You can get help finding the providers and services you need, including help with coordinating transportation
- You can call a nurse for advice 24 hours a day, 7 days a week

Co-pays

- No co-pays for doctor visits
- No co-pays for emergency room (ER) visits
- No co-pays for prescriptions
- No co-pays for some over-the-counter drugs (doctor's prescription required)
- \$2 for visits to the ER when it is not an emergency

Dental

Extra dental care for adults

Pregnancy and healthy kids

 You may qualify for diapers, gift cards, a stroller or baby swing by keeping appointments in the Prenatal Rewards program

Prescriptions

- Medicaid's four prescriptions per month rule does not apply
- Other rules may apply

Transportation

You can get a ride to the pharmacy right after your doctor visit

Wellness

- You may qualify for programs to help you manage diseases, such as diabetes and COPD
- You can access Web tools to help you meet your wellness goals



Co-pays

- No co-pays for doctor visits
- No co-pays for emergency room (ER) visits
- No co-pays for prescriptions

Dental

Extra dental care for adults

Pregnancy and healthy kids

 You may qualify for gift cards by keeping appointments in the Motherhood Matters program

Prescriptions

- Medicaid's four prescriptions per month rule does not apply
- Other rules may apply

Transportation

 You can get a ride to the pharmacy, medical equipment providers, and Women, Infants, and Children (WIC) food assistance sites

Visior

 You can get an extra \$40 allowance toward a pair of eyeglasses each year

Wellness

- You may qualify for gift cards for completing preventive services
- You may qualify for programs to help you manage diseases
- You can get help to stop smoking
- You may qualify for programs to help you manage your weight



Illinois Client Enrollment Services



Your Health Plan Choices

Basic health benefits

All plans have the same Medicaid services that you get now, such as:

- Behavioral health services
 Hearing services
- Doctor services
- Eve care services
- Family planning
- Home health care
- Hospice care
- Hospital services
- Immunizations
- Lab test and x-rays
- Medical supplies
- Nurse helpline
- Prescriptions
- Therapy
- Transportation

Use this chart to compare the extra benefits and services that each health plan offers:

This health plan is an Accountable Care Entity (ACE)

An Accountable Care Entity (ACE) is a provider-based health plan. ACEs offer a new way to bring together health services from doctors, hospitals, health clinics and community providers. The provider team will help you manage your health and get the services you need.



1-877-633-2531

TTY: Illinois Relay at 7-1-1 or 1-800-526-0844 www.ilpartnershipforhealth.org

Illinois Partnership for Health is a group of doctors and hospitals in Northern and Central Illinois. Our providers are connected to share information and help you get the care you need when you need it. Your health is our top priority.

Providers

You can choose from

- 505 primary care providers
- 3,983 specialists
- 24 hospitals

SmartPlan Choice

1-844-254-2273

TTY: 1-844-852-1371 www.smartplanchoice.org

SmartPlan Choice is made up of doctors, nurses and clinics. We are here to help you receive quality care at the right time from the right care provider. Think of us as your new health care partner working with you to make the best health decisions.

Providers

You can choose from

- 81 primary care providers
- 436 specialists
- 3 hospitals

Please see the back of this page for more plan information >>>

Questions? Visit www.EnrollHFS.Illinois.gov or call **1-877-912-8880** (TTY: 1-866-565-8576). The call is free! You can get this information in other languages or formats, such as large print or audio. Tenemos información en español. ¡Servicio de intérpretes gratis! Llame al 1-877-912-8880.



Care team

- You will have your own health care team, led by the doctor you choose to be your PCP
- Your care team works with you and your doctor to help you get the care and services you need, when and where you need them
- Your care team includes nurses and other people who work with you and your doctor to make a care plan just for you
- Your care team's goal is to keep you healthy or get you healthier, depending on what you need

Co-pays

- You can get all of the services you get now with your HFS medical card
- If you have co-pays now, your co-pays will be the same

Pregnancy and healthy kids

 You may qualify for support programs and classes in your community

Prescriptions

- Medicaid's four prescriptions per month rule applies to adults 19 and older
- Your care team will help you understand the Medicaid rules for prescriptions

Wellness

- You may qualify for programs and classes in your community to help you manage your weight
- You can get help to stop smoking
- You may qualify for programs to help you manage diseases, such as diabetes

SmartPlan Choice

Care team

- Your care team will be led by your PCP who will get to know you and your health needs
- You will have your own care team, with the right providers for you
- Your care team will help you get the care and services you need, when and where you need them
- You can call a crisis counselor 24 hours a day, 7 days a week

Co-pays

- You can get all of the services you get now with your HFS medical card
- If you have co-pays now, your co-pays will be the same

Pregnancy and healthy kids

You may qualify for child birth and baby care classes

Prescriptions

- Medicaid's four prescriptions per month rule applies for adults 19 and older
- Your care team will help you understand the Medicaid rules for prescriptions

Wellness

- You may qualify for programs to help you manage diseases, such as diabetes
- You may qualify for classes and programs to help you manage your weight
- You can get help to stop smoking

DOCUMENT C** MOCK-UP - FOR DISCUSSION PURPOSES ONLY **

Your Health Plan Choices Basic health benefits

All plans have the same Medicaid services that you get now, such as:

- Behavioral health services
- Doctor services
- Eye care services

- Family planning
- Hearing services
- Home health care
- Hospice care
- Hospital services
- Immunizations

- Lab tests and x-rays
- Medical supplies
- Nurse helpline

- Prescriptions
- Therapy
- Transportation

Use this chart to compare the extra benefits and services that each health plan offers:

These health plans are Managed Care Organizations (MCOs)

A Managed Care Organization is an insurance-based health plan or provider-owned group that offers access to care through a network of doctors, specialists and hospitals. MCOs offer a full range of benefits to all enrollees and help develop a plan of care for those that need or want it.

These health plans are Accountable Care Entities (ACEs)

An Accountable Care Entity is a provider-based health plan. ACEs offer a new way to bring together health services from doctors, hospitals, health clinics and community providers. The provider team will help you manage your health and get the services you need.

These health plans are Care Coordination Entities (CCEs) for Children with Special Needs (CSNs)

A Care Coordination Entity for Children with Special Needs is a provider-based health plan that helps children with special health care needs find the people, services and equipment they need. CCEs will provide each child with a Care Team that will work with the child, their family members and providers.

[logo] Health Plan A 1-866-123-4567 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplana.com	[logo] Health Plan B 1-877-234-5678 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanb.com	[logo] Health Plan C 1-877-345-6789 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanc.com	[logo] Health Plan D 1-877-456-7890 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthpland.com	[logo] Health Plan E 1-877-567-8901 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplane.com	[logo] Health Plan F 1-877-901-2345 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanf.com
Health Plan A has a large network of primary care providers, specialists and hospitals who deliver quality health care and services. We are committed to improving your health care experience by offering a wide choice of programs to support your wellness.	Health Plan B is a health plan managed by local medical providers who are focused on providing quality care for our members. We offer an extensive network of doctors with no co-pays and children's programs – for a better health plan and quality health care you and your family deserve. Join the Family!	Health Plan C is a group of doctors and hospitals in Northern and Central Illinois. Our providers are connected to share information and help you get the care you need when you need it. Your health is our top priority.	Health Plan D is made up of doctors, nurses and clinics. We are here to help you receive quality care at the right time from the right care provider. Think of us as your new health care partner working with you to make the best health decisions.	Health Plan E is a care coordination team dedicated to helping children with special healthcare needs get the best care possible. The plan gives easy access to Health Plan E pediatric specialists and support team to work with a child's PCP to coordinate services and care for the child, helping the child get the care he/she needs to stay healthy.	Health Plan F helps children with special health care needs find the people, services and equipment they need.

DOCUMENT C** MOCK-UP - FOR DISCUSSION PURPOSES ONLY **

Health Plan A 1-866-123-4567 TTY: 1-800-526-0844 or

[logo]

Illinois Relay at 7-1-1

www.healthplana.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- No co-pays for doctor visits
- No co-pays for emergency room (ER) visits
- No co-pays for prescriptions

PRESCRIPTIONS

- Medicaid's four prescriptions per month rule does **not** apply
- Other rules may apply

CARE TEAM

 You can call a nurse for advice 24 hours a day, 7 days a week

DENTAL

 Additional dental care for adults

PREGNANCY AND HEALTHY KIDS

 You may qualify for gift cards by keeping prenatal appointments

TRANSPORTATION

 You can get a ride to the pharmacy right after your doctor visit

[logo] **Health Plan B**

1-877-234-5678 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanb.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- No co-pays for doctor visits
- No co-pays for emergency room (ER) visits
- No co-pays for prescriptions

PRESCRIPTIONS

- 90-day supply mailed to your home
- Medicaid's four prescriptions per month rule does **not** apply
- Other rules may apply

DENTAL

 Additional dental care for adults

PREGNANCY AND **HEALTHY KIDS**

 You may qualify for diapers or gift cards by keeping prenatal and postpartum appointments and getting regular immunizations (shots) in the Brighter Beginnings program

TRANSPORTATION

[logo] **Health Plan C**

1-877-345-6789 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanc.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- You can get all of the services you get now with your HFS medical card
- If you have co-pays now, your co-pays will be the same

PRESCRIPTIONS

 Medicaid's four prescriptions per month rule applies for clients 19 years of age and older

CARE TEAM

- Personalized primary care from a Care Team that knows you and your health care needs
- Your Care Team will provide you with health education and help you with referrals, prescriptions and other follow-up services you need

PREGNANCY AND HEALTHY KIDS

 You may qualify for support programs and classes in your community

[logo] **Health Plan D**

1-877-456-7890 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthpland.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- You can get all of the services you get now with your HFS medical card
- If you have co-pays now, your co-pays will be the same

PRESCRIPTIONS

- · Medicaid's four prescriptions per month rule applies for clients 19 years of age and older
- Your Care Team will help you understand the Medicaid rules for prescriptions

CARE TEAM

- You will have your own health care team, led by the doctor you choose to be your PCP
- Your care team works with you and your doctor to help you get the care and services you need, when and where you need them
- · Your care team includes nurses and other people

[logo] **Health Plan E**

1-877-567-8901 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplane.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- · You can get all of the services you get now with your HFS medical card
- If you have co-pays now, your co-pays will be the same

PRESCRIPTIONS

- Medicaid's four prescriptions per month rule applies for clients 19 years of age and older
- A Care Team will help manage your child's medication

CARE TEAM

Your child's Care Coordinator will:

- Coordinate care between your child's doctors
- Visit you at home or at your child's doctor's office
- Help you develop your child's own care plan
- Help you work toward your child's wellness

[logo] **Health Plan F**

1-877-901-2345 TTY: 1-800-526-0844 or Illinois Relay at 7-1-1 www.healthplanf.com

PROVIDERS

- ## PCPs
- ## Specialists
- ## Hospitals

CO-PAYS

- You can get all of the services you get now with your HFS medical card
- If you have co-pays now, vour co-pays will be the same

PRESCRIPTIONS

- Medicaid's four prescriptions per month rule applies for clients 19 years of age and older
- A Care Team will help manage your child's medication

CARE TEAM

Your child's Care Coordinator will:

- Coordinate care between vour child's doctors
- Visit you at home or at your child's doctor's office
- Help you develop your child's own care plan
- Help you work toward your child's wellness

DOCUMENT C** MOCK-UP – FOR DISCUSSION PURPOSES ONLY **

[logo] Health Plan A	[logo] Health Plan B	[logo] Health Plan C	[logo] Health Plan D	[logo] Health Plan E	[logo] Health Plan F
1-866-123-4567	1-877-234-5678	1-877-345-6789	1-877-456-7890	1-877-567-8901	1-877-901-2345
TTY: 1-800-526-0844 or	TTY: 1-800-526-0844 or	TTY: 1-800-526-0844 or	TTY: 1-800-526-0844 or	TTY: 1-800-526-0844 or	TTY: 1-800-526-0844 or
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www.healthplana.com	<u>www.healthplanb.com</u>	<u>www.healthplanc.com</u>	<u>www.healthpland.com</u>	<u>www.healthplane.com</u>	<u>www.healthplanf.com</u>
VISION You can get \$30 toward a pair of upgraded eyeglass frames every two years WELLNESS You can get gift cards to buy healthcare items if you do things for your health like go for yearly checkups You may qualify for programs to help you manage diseases, such as diabetes and asthma Newsletter mailed to you every three months	 You can get a ride to the pharmacy, medical equipment provider, and Women, Infants and Children (WIC) food assistance site VISION You can get a \$40 adult vision rebate WELLNESS You may qualify for gift cards for completing preventive services You may qualify for programs to help you manage diseases You can get a free Weight Watchers® membership You can get a discounted Curves ® members Children's Book Club Free home pregnancy tests Newsletter mailed to you each month 	 WELLNESS You may qualify for programs and classes in your community to help you manage your weight You can get help to stop smoking You may qualify for programs to help you manage diseases, such as diabetes 	who work with you and your doctor to make a care plan just for you Your care team's goal is to keep you healthy or get your healthier, depending on what you need PREGNANCY AND HEALTHY KIDS You may qualify for child birth and baby care classes WELLNESS Diet and nutrition counseling Free stop smoking program Link to critical support services and assistance to support your overall health and wellness such as food and housing Make appointments and get your medical information online 24/7	goals • Help you access local community support services for your child • Help make your child's doctor appointments • Work with your child's school	goals • Help you access local community support services for your child • Help make your child's doctor appointments • Work with your child's school