Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
Approved Final Minutes
December 11, 2014

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

Committee Members Present	**HFS Staff**
Kathy Chan, Cook County Health & Hospitals System	Jacqui Ellinger
Margaret Stapleton, Shriver Center	Patrick Lindstrom
Sherie Arriazola, TASC	Amy Harris-Roberts
Erin Weir, Age Options	Lynne Thomas
Nadeen Israel, EverThrive Illinois	Lauren Polite
Hardy Ware, East Side Health District	Mariah Balaban
Sergio Obregon, CPS	Arvind K. Goyal
John Jansa, Consultant	Jim Parker
Connie Schiele, HSTP (by phone)	Shannon Stokes
Brittany Ward, Primo Center for WC	Veronica Archundia

Committee Members Absent
Sue Vega, Alivio Medical Center

Interested Parties
Jose Muñoz, GetCovered Illinois
Deb Matthews, DSCC
Sean Mullins, Deloitte Consulting
Jodie Winnett, Deloitte Consulting
Kelly Carter, IPHCA
Rick Cornell, Health Alliance
Helena Lefkow, MCHC
Jessie Beebe, AFC
Luvia Quiñones, ICIRR
Ana Carvallo, LaRabida
Diane Montañez, Alivio Medical Center
Sam Olds Frey, IAMHP
Ramon Gardenhire, AFC
Lee Hennigan, GSK
Sonia Caldwell, NLHP
Paul Frank, Harmony/ WellCare
Lynne Warszalek, Stickney Health Department (by phone)
Kathy Waligora, EverThrive Illinois
Alison Stevens, LAF
Lindsey Artola, IlliniCare (by phone)

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1. **Introductions**
   Kathy Chan, CCHHS, chaired the meeting. Attendees in Chicago and Springfield introduced themselves.

2. **Review of Minutes**
   John Jansa made a motion to approve the minutes from the meeting held on October 14th, and it was seconded by Nadeen Israel. The minutes were approved by a vote of 10 in favor and zero opposed.

3. **ACA/ Health Care Reform Updates**
   ABE Usability Improvement Initiative
   Jodie Winnett, from Deloitte Consulting, discussed a handout titled, "Application for Benefits Eligibility (ABE) Improving the Customer Experience" (Attachment I.) She provided a report concerning the progress achieved within the ABE usability improvement project. This project consists of three releases. The first release will be implemented on December 17th. This will include improvements to the security questions, which were prompted by the feedback from the Public Education Subcommittee and the SSAC Local Office Committee. It will incorporate enhancements to, "Frequently Asked Questions," by making an "FAQ" link available on each page throughout the application. It will also include a new segment titled, "What to Expect Next," which will appear upon submission of the application. It will explain, what to expect if someone has applied for SNAP, Medical, or TANF, as well as what happens if a person is denied, managing and renewing benefits, and finding assistance. The purpose of the first release is to increase user trust of the web site by rearranging the ABE links, color scheme logos, and icon updates, as well as adding a section listing partner agencies and resources.

   Ms. Winnett indicated that the usability team is currently working on the second release, which is expected to be implemented by the middle of March. Its purpose is to increase the readability of ABE in order to ensure that clients are able to understand the questions being asked and improve both quality and the application completeness. The redesign of ABE will include expandable gatepost questions as a way to limit vertical scrolling. This was a frequent recommendation of committee members. For example, with regard to the question, "Is this person a veteran?" applicants answering "No" will not have to answer additional questions about this subject. Additional questions will only appear for individuals who respond "Yes."

   Lauren Polite stated that, in addition to simplifying the language and streamlining the application, icons symbolizing questions will prompt to show hover text, such as "Why do we ask" or "Tell me more." She provided an example related to the non-earned income question that refers to liquid assets, stating that hover text will appear providing examples of liquid assets. Ms. Polite indicated that the team continues prioritizing the enhancements to the third release, which will focus on making the ABE web portal consumer friendly and easy to navigate. The third release is scheduled for May 2015. The committee requested that the state hold a webinar that can serve as a demonstration for community partners of the ABE usability project and Phase Two enhancements. Everthrive of Illinois volunteered to collaborate with HFS and Deloitte Consulting to plan the webinar during the next few weeks.

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Application Process Status
Jacqui Ellinger reported that HFS and DHS have made progress with processing the backlog of applications; some applications that are still remaining appear to be duplicates. Applications are currently being processed within a 45-day time frame. HFS and the FFM are collaborating to process cases with special circumstances involving individuals who are not eligible for Medicaid due to income levels that exceed established limits or not meeting "the five year requirement" for non-citizens. Lauren Polite reminded committee members to contact the ABE Call Center at 1-800-843-6154 for further assistance.

Health Insurance Marketplace
Jose Muñoz, from GetCovered Illinois, provided an overview concerning the outreach and educational campaign that has been launched for year-two open enrollment under the Affordable Care Act (ACA). He said that 800,000 people have obtained coverage through private plans offered by the Illinois Health Insurance Marketplace. The cost of the campaign had been projected to be 20 million dollars but it was accomplished for less than 15 million dollars. Mr. Muñoz commented that the outreach and public education campaign has involved radio and television, banner announcements, billboards across the state, and social and digital media, which focused upon three key messages:

1. the availability of free in-person help in English and Spanish with specially trained navigators;
2. making the public aware of the availability of an extensive list of major insurance carriers in the nation to select from within the Marketplace (more than 400 plans);
3. to help families lower their monthly premiums as compared to similar plans that they may have previously selected and information for those individuals who are seeking tax credits for the first time.

4. **Enhanced Eligibility Verification Illinois Medicaid Redetermination Project (IMRP)**
   Lauren Polite stated that the most recent report of the Illinois Medicaid Redetermination Project is now available on the HFS website at:

   http://www2.illinois.gov/hfs/SiteCollectionDocuments/QtrlyReportQ3-2014.pdf

   A question was raised regarding whether or not Maximus will continue beyond December 2014. Lynne Thomas indicated that Maximus will continue providing assistance through its call center and mailroom capabilities until September, 2015, when the State's new eligibility system is expected to be fully implemented.

5. **Ethics Training**
   Shannon Stokes reminded committee members that it is time for the annual ethics training; she noted that all board members appointed must complete the ethics training once each year. Shannon asked that, upon completion of the ethics training, an original acknowledgment should be signed and sent to her office before December 22, 2014. Additional instructions and details are included in the memorandum attached to the agenda.

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6. **Care Coordination Update**
   Amy Harris-Roberts reported that HFS has completed the roll-out for enrollment in the five mandatory managed care regions: Rockford, Central Illinois, Metro East, The Quad Cities, as well as Cook and Collar Counties. She said that HFS had to "slow down" the mailing of packets to clients due to an increase in the volume of phone calls to the call center. Subsequently, the hours of operation were extended, and additional bilingual Spanish speaking customer service representatives were given training in order to accommodate the demand. She noted that clients who do not wish be placed on hold have the option of leaving their telephone numbers, with the assurance that a customer service representative will contact them within the next 24 hours.

   The committee requested a copy of the care coordination/managed care presentation that was made available to the navigators and assisters. Please see Attachment II.

7. **2015 Tentative Meeting Schedule**
   Jacqui Ellinger shared a proposed meeting schedule for 2015. It was suggested that the originally proposed meeting date of December 10th be changed to December 3rd, 2015, in order to avoid a schedule conflict with a conference sponsored by the Department of Aging that will be held during the first week of December. Nadeen Israel made a motion to adopt the proposed schedule change (which still has to be confirmed based on meeting room availability). Erin Weir seconded the motion, and a vote was taken with 11 being in favor of the motion and none opposed.

8. **Open Discussion and Announcements**
   Kathy Chan announced that Jim Parker has become the new Acting Medicaid Director and Administrator of the Division of Medical Programs.

9. **Adjourn**
   The meeting was adjourned at 12:07 p.m. The next meeting is scheduled for February 19, 2015, from10:00 a.m. to 12:00 p.m.

Medicaid Managed Care

James Parker,
Deputy Administrator, Division of Medical Programs,
Department of Health and Family Services

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Enrollment in Medicaid
Care Coordination
How Navigator's Can Help
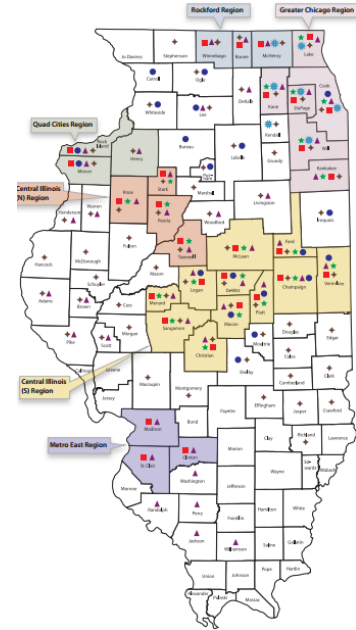
Medicaid - Care Coordination

- Care Coordination is the centerpiece of Illinois' Medicaid reform.

- Our goal is to create integrated delivery systems that provide <u>quality care</u> and result in <u>better health outcomes</u> for Medicaid recipients at <u>reduced costs.</u>

- HFS is in the process of transitioning over 1.5 million people on Medicaid and All Kids living in mandatory managed care regions to a care coordination program.

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Who is Affected
by Medicaid Managed Care

And What are Their Health Plan Options?

5 Mandatory Managed Care Regions

- HFS' expansion of care coordination covers seniors and persons with disabilities, dual eligibles (Medicare and Medicaid), and most children, their family members, and ACA Adults **who reside in one of five mandatory managed care regions – about 1.5 million people in all.**
  - Greater Chicago Region
  - Rockford Region
  - Quad Cities Region
  - Central Illinois Region
  - Metro East Region
- Please see the following link for more information about the Counties in each Region and Plans available in each County: http://www2.illinois.gov/hfs/SiteCollectionDocuments/CCExpansionMap.pdf

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Care Coordination Health Plans

In the 5 Mandatory Managed Care Regions, clients will select:
1. A Health Plan and
2. A Primary Care Provider (PCP) in that health plan.

The Health Plan types, and specific health plans offered will vary by region and population.

For more information about MMAI program for people eligible for Medicare and Medicaid and Integrated Care Program (ICP) for Seniors and Persons with Disabilities that are eligible for Medicaid, but not eligible for Medicare and are ages 19 and older, go to www.hfs.illinois.gov and click on **Care Coordination**.

Care Coordination: Types of Health Plans

1. **MCO – Managed Care Organization**
   – Traditional HMOs paid on a risk based capitated basis.
2. **MCCN – Managed Care Community Network**
   – Provider-owned and governed entities that operate like MCOs on a risk based capitated basis
3. **ACE - Accountable Care Entity**
   – Provider-based organizations that are paid a fee by the Department to coordinate care.
4. **CCE – Care Coordination Entity (SPD or CSN)**
   – Provider-based organizations that are paid a fee to coordinate care. Plans are limited to specific populations. For CSN, enrollees are limited to children the Department has identified through claims data or other information as having complex medical needs.

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Non-Mandatory Regions

- Clients living in counties outside of the 5 mandatory regions will be required to select a PCP and receive services through Illinois Health Connect (IHC), Illinois' primary care case management program.

- Voluntary Managed Care will be available in some non-mandatory counties.

Role of Illinois Client Enrollment Services

- All enrollments must be processed by CES.

- CES provides unbiased education on a client's (including all family members) Plan and PCP choices and will assist each person with the enrollment process.

- Please refer your clients to the Illinois Client Enrollment Services call center for more information about their Plan choices and for enrollment assistance: **1-877-912-8880 (TTY: 1-866-565-8576)**

  or online at http://enrollhfs.illinois.gov

  (the MMAI Program does not allow for online enrollment)

Role of Navigators and CACs
In the Process

Education Assistance

Role of Navigators & CACs Education Assistance

- A key HFS goal is for Medicaid clients to **choose** a health plan and PCP.

- With your client relationships, you can help us meet that goal by:
  - ✓ Helping clients understand the process and timelines
  - ✓ Providing general information about the various Care Coordination Programs a client may be eligible to participate in and the Health Plans participating in each Program/Region
  - ✓ Encouraging potential enrollees to make an active health plan choice within the timeframes provided in their packets, by contacting the ICES

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Role of Navigators & CACs Education Assistance

Navigators & CACs **must** ensure that a client understands the following**:**

- An individual will have Health Plan choices based on the Care Coordination Program they are eligible to participate in and their area of service (County and zip code of residence).

- An individual will have to pick a Health Plan and PCP within their area of service.

- Once enrolled, the individual will receive a welcome packet from their Health Plan.

Role of Navigators & CACs: Education Assistance

- A Counselor or Navigator **may not** process an enrollment for an individual online. All enrollments must be processed by the client through the Illinois Client Enrollment Services.

- Three-way calls are not permitted with CES.

- All education must be in compliance with the requirements in 42 C.F.R. Section 438.104 regarding appropriate activities.

- Outreach by any health plan – or any provider connected to a health plan - directed at potential enrollees, via direct or indirect door-to-door contact, telephone contact, or other cold-call activities **is strictly prohibited**.

- Do NOT answer any questions about what plan you recommend or questions for which you are not sure of the answer – instead direct them to the ICES.

- Do NOT advocate for any particular plan that you may be affiliated with.

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Education Assistance - Reminders

- Not all individuals will be eligible to participate in the same Care Coordination Programs – MMAI, ICP, FHP, IHC. Eligibility for each individual will be based on several factors that include area of residence, category of assistance, age, etc….

- Provider panels fill up. Even if a PCP is part of a plan, a client may not be able to choose that PCP if the PCP's patient panel is full.

Education Assistance - Reminders

Not all individuals will be required to pick a Plan and PCP in a Care Coordination Program.

- Not all family members may have the same Care Coordination Program and Health Plan choices.

- Not all family members have to pick the same Health Plan and PCP.

- Some individuals will be excluded from participation, such as individuals with High Level TPL (Good primary insurance) and some will be able to participate on a voluntary basis, such as American Indians.

Education Assistance

- The ICES call center is currently experiencing extended wait times throughout the day.

- Clients can leave a voice message with their name and contact information instead of holding in the queue during high call volume periods. **The CEB will call all individuals back on business days within 24 hours of the message to assist with enrollment.**

- The CEB hours of operation are:
    Monday – Friday 8:00 a.m. to 7:00 p.m.
    Saturdays 9:00 a.m. to 3:00 p.m.

Education Assistance

- Illinois Client Enrollment Services has English and Spanish speaking CSRs and utilizes a language line to assist non-English/non-Spanish speaking individuals.

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Education Assistance

There are several tools that have been approved by the Department that Counselors and Navigators should use when providing general education to individuals:

- Health Plan Comparison Charts by Program and Area of Service and sample Client Enrollment Materials by Program:

 *http://enrollhfs.illinois.gov/program-materials*

- Statewide map of Care Coordination Programs and Health Plans :

  http://www2.illinois.gov/hfs/SiteCollectionDocuments/CCExpansionMap.pdf

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Children's Enrollment

End of FY	Enrolled Children FY2006-2013 #000s
2006	1,215
2007	1,364
2008	1,455
2009	1,553
2010	1,630
2011	1,678
2012	1,697
2013	1,647

Enrolled Children End of FY06-13
#000s
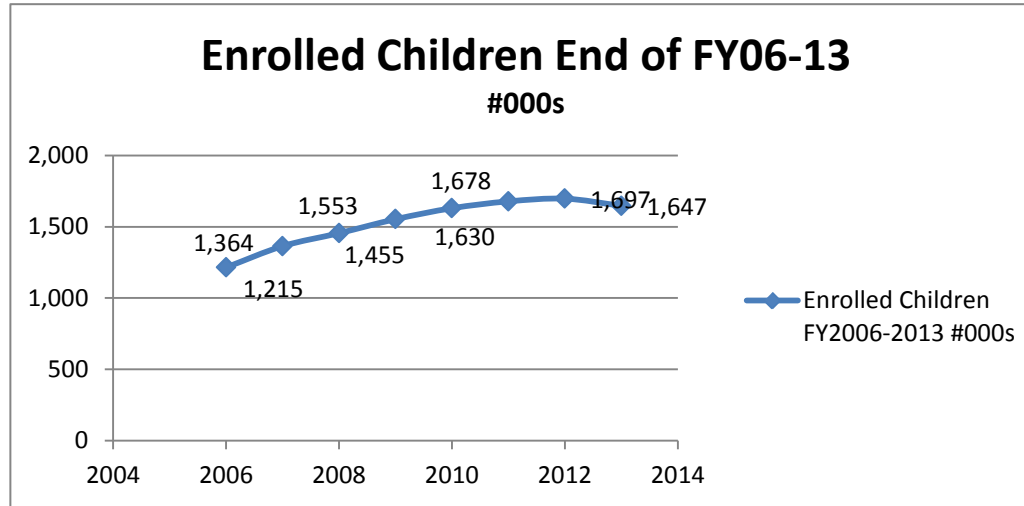
End of Month 2012	Enrolled Children #000s	End of Month 2013	Enrolled Children #000s	End of Month 2014	Enrolled Children #000s
Jan	1,696	Jan	1,666	Jan	1,582
Feb	1,699	Feb	1,665	Feb	1,582
Mar	1,701	Mar	1,667	Mar	1,591
Apr	1,701	Apr	1,665	Apr	1,595
May	1,698	May	1,656	May	1,587
June	1,697	June	1,647	June	1,571
July	1,694	July	1,638	July	1,561
Aug	1,694	Aug	1,635		
Sep	1,689	Sept	1,626		
Oct	1,681	Oct	1,610		
Nov	1,674	Nov	1,600		
Dec	1,668	Dec	1,587		

Enrolled Children
by Month
#000s

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
2012	1,696	1,699	1,701	1,701	1,698	1,697	1,694	1,694	1,689	1,681	1,674	1,668
2013	1,666	1,665	1,667	1,665	1,656	1,647	1,638	1,635	1,626	1,610	1,600	1,587
2014	1,582	1,582	1,591	1,595	1,587	1,571	1,561					

HFS December 2014
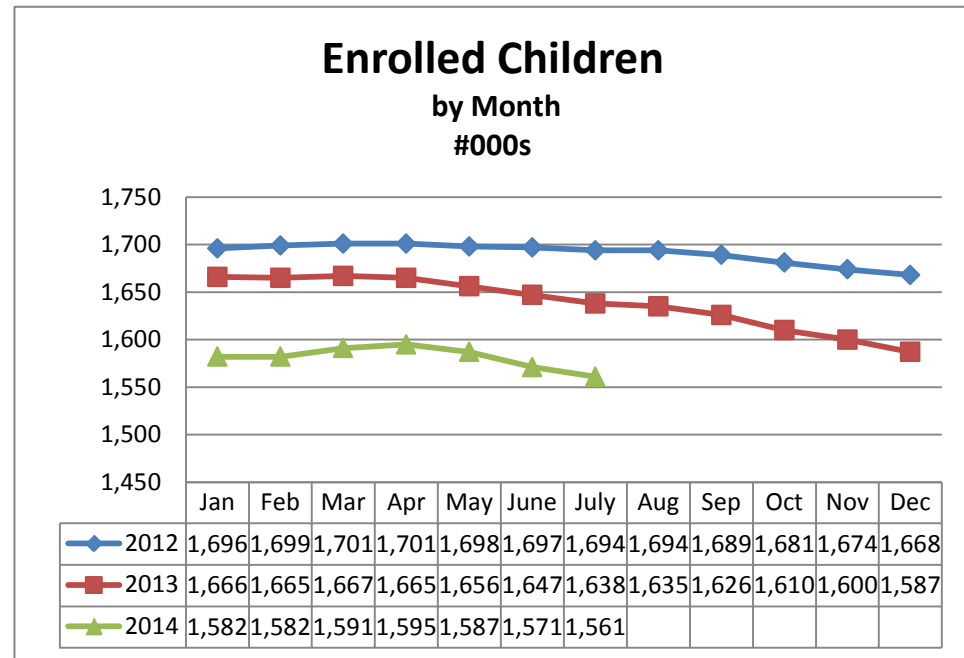
Application for Benefits Eligibility (ABE) Improving the Customer Experience

December 11, 2014

Deloitte.

ABE Usability – Release 1 Overview
Go-Live December 17

The first ABE Usability release focuses on several quick wins – over 30 subcommittee suggestions were used in design:

- Improved Frequently Asked Questions page
    - Questions consolidated onto one screen, and grouped by topic
    - New questions added to FAQ based on feedback
    - FAQ link available throughout application

- Security Question improvements
    - Questions modified or added based on being safe, stable, memorable, simple
    - Questions modified or added based on being relevancy to population groups
    - Improved error messaging helps users create answers to secret questions

- New "Next Steps" instructions
    - Upon application submission, users have access to a checklist that helps with post-submission action items, and what to expect if an application is approved or denied

- New Privacy Statement and other informational homepage updates
    - Design review in process for including additional information on homepage, including privacy text, more information about the website, information about partner agencies, and links to program information

ABE Usability – Release 2 Overview
Go-Live ~Late March

The second ABE Usability release focuses on improvements to increase the application's friendliness for people who are not strong readers.

Our aim is to keep people on the ABE site to file their benefits application, rather than give up because they become frustrated or intimidated, and to increase the completeness and accuracy of applications filed. These improvements will enhance the experience for all ABE users.

Several of these enhancements came directly from Public Education Subcommittee feedback.

Some highlights:

- Easier address entry for homeless applicants

- Policy review of key questions to limit them to only the programs for which they are relevant (i.e., level of education completed)

- Increased use of "gate post" questions to limit the need to scroll down a long list of questions (many of which are not relevant to the majority of applicants)

- Improved "hover" text on difficult areas of the application to "Tell Me More" and answer "Why Do We Ask"

- Simplified language around Dependent Care, Absent Parent, Housing Expenses and Liquid Asset questions

ABE Usability – Release 3 Overview
Go-Live ~Late May

The third ABE Usability release will continue readability improvements, further streamline the application and add more Help text, hover text and FAQs.