

**Illinois Department of Healthcare and Family Services
Medicaid Advisory Committee
September 18, 2009**

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

Members Present

Robert Anselmo, R.Ph.
Lisa Kritz for Robyn Gabel, IMCHC
Karen Moredock, DCFS

Members Absent

Eli Pick, Chairman
Jill Fraggos, Children's Memorial Hospital
Myrtis Sullivan, DHS
John Shlofrock, Barton Mgt.
Pedro A. Poma, M.D.
Kim Mitroka, Christopher Rural Health
Neil Winston, M.D.
Richard Perry, D.D.S.
Mary Driscoll, DPH

HFS Staff

Frank Kopel
Lynne Thomas
Michelle Maher
Deborah Saunders
Jamie Tripp
Stephanie Hoover
Barbara Ginder
Amy Wallace
Shannon Stokes
James Monk

Interested Parties

Ryan Dwyer, Midwest University student
Andrea Kovach and Carrie Gilbert, Sargent Shriver
National Center on Poverty Law
Matt Werner, Consultant
George Hovanec, Consultant
Kathy Bovid, Bristol Myers Squibb
Jason Verbrugge, Allergran
Cassie Ayres and Lora McCurdy, Illinois Association
for Rehabilitation Facilities
John Bullard, Amgen
Mike Lafond, Abbott
Mandy Ungrittanon, Quest Diagnostics
Robin Scott, Chicago DPH
Kelly Dingle, MedImmune
Esther Morales, Gary Fitzgerald and Citseko Staples,
Harmony Health Plan
Vince Champagne, DCFS
Deb Mathews, DSCC

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I. Call to Order

Lisa Kritz called the meeting to order at 10:10 a.m.

II. Introductions

Attendees in Chicago and Springfield introduced themselves.

III. Review of the Minutes

The March, May and July minutes were not reviewed for lack of a quorum.

IV. Administrator's Report

Frank Kopel, Deputy Administrator, Division of Medical Programs, provided the report.

- Mr. Kopel reported that HFS anticipates a \$600 to \$700 million shortfall and will face a very tight budget year. With respect to payment and the American Recovery and Reinvestment Act of 2009 (ARRA) requirements passed in February 2009, the department is in compliance to pay physicians and dentists and a few other provider types for 90% of claims within 30 days and 99% of other claims within 60 days. Pharmacy services are not included in these time frames. To preserve the federal match, the state complies with the ARRA standards. As a result, payments to other providers may take longer, and in the range of 90 to 190 days.
- The department is looking at enhanced case management to improve health outcomes.
- Beginning October 2009, Primary Care Case Management edits will be phased in over the coming months.
- There are numerous healthcare reform bills being discussed in Washington D.C. The department is monitoring this activity.
- The department recently submitted a letter of intent for healthcare technology grants for statewide upgrades in the technology systems.

V. Old Business

- 1) **All Kids and FamilyCare update.** Lynne Thomas, Chief of the Bureau of All Kids provided the report. Enrollment statistics through July 31, 2009 were provided (Attachments 1 and 2). Application processing is at 29 days. With students returning to school there has been an increase in the number of applications, which contributes to the longer processing time.
- 2) **Primary Care Case Management (PCCM) activity.** Michelle Maher, Chief of the Bureau of Managed Care, provided the report. Meeting participants received a handout (Attachment 3) showing the number of medical homes and client enrollments statewide as of September 12, 2009. There were no questions on the handout.

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Ms. Maher advised that the rollout of the PCP edit would be activated first in the Northwest region in October 2009. The edit would require enrollees to go to their PCP or get a referral to see another PCP. The rollout would continue with the Cook collar counties in December 2009, then Cook County in February 2010; followed by central Illinois counties in March 2010; and last in the southern Illinois counties in April 2010.

- 3) **Disease Management (DM).** Ms. Maher reported that as of July 1, 2009, the DM program has been expanded to about 8,000 aged and disabled clients that are not dual-eligible for Medicare/Medicaid. These participants have a higher need for case management services and include persons with persistent asthma, diabetes, COPD or are high emergency room users. Program staffs are on site at nursing homes and at other sites in the community.
- 4) **Medicare Part D.** No report for this period.
- 5) **FFY 2008 Form CMS 416 – EPSDT Report.** The report summary had been provided to MAC members and participants as a handout at the July meeting. Deborah Saunders, Chief of the Bureau of Maternal & Child Health Promotion, was available to answer specific questions about the report.

Ms. Saunders noted that the earlier questions pertained primarily to children receiving preventive dental services with an interest in the increase in participation. The department's vendor for dental services, Doral Dental, had prepared the report and found that the expenditures for dental services were \$96 million in FY2005 and increased to about \$200 million in FY09. For persons under age 21, expenditures were \$60.9 million in FY05 and increased to \$151 million by FY09. The participation rate increased from 32% in FY05 to 36% in FY07, the most recent data available.

Compared to other states with population over 1 million, Illinois has a higher participation rate for dentists than California, Florida and New York. The states of Ohio and Texas did a little better than Illinois. Ms. Saunders gave examples of how Illinois is working to improve the participation rate through outreach and public education.

Mr. Anselmo asked if the participation rate by dentists has increased. Ms. Saunders shared statistics for a recent 18-month period that showed 2,353 unique dentists provided services with 92% submitting at least one claim and 69% submitting at least 70 claims. The trend has been an increase in the number of providers serving more children and a decrease in the number of providers seeing fewer children.

Andrea Kovach asked about the progress the department has made in providing dental services to children with extensive treatment needs. Ms. Saunders stated that it is a challenge to find specialists, however, the department is improving access by working with dentists that will do outpatient surgical services. The department continues to have the "Dental Champions" program in which Medicaid enrolled dentists encourage their peers to enroll as providers. This program is active in all regions of the state. In addition, the department is encouraging Federally Qualified Health Centers (FQHC) to provide more sophisticated dental services and is working with the Illinois oral health

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advocacy group, IFLOSS. Ms. Saunders indicated that any assistance MAC members and meeting participants can provide to the department and Doral in their efforts to recruit dental specialists, such as, dental surgeons and pediatric dentists, would be appreciated.

The next dental policy meeting is November 4, 2009 with information on the website at: <http://www.hfs.illinois.gov/dental/schedule.html>

VI. New Business

1) Ethics Training

Ms. Shannon Stokes, HFS Assistant General Counsel, advised that it is time for the annual ethics statement to be provided by members serving on state boards and committees. The statement is due to the office of Mike Stehlin, Chief, Bureau of Training, no later than December 23, 2009. She stated that an Ethics officer needs to be named for the group. The information should be provided to the General Counsel office no later October 1, 2009.

2) Open to Committee

Ms. Kritz would like to see the committee reinvigorated and would hope to get a quorum at the next meeting.

Lora McCurdy, of the Illinois Association for Rehabilitation Facilities, stated that there are Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) that have not received payment for services provided last March, April, May, and June. These are Medicaid covered services, however, ICF/DD's are not considered nursing homes and so they are not included in the ARRA priority groups for prompt payment. This is a concern for Illinois Association of Rehabilitative Services (IARF) members and we will continue to track the outstanding unpaid bills.

VII. Subcommittee Reports

Long Term Care (LTC) Barbara Ginder, Deputy Administrator, Division of Medical Programs gave the report. The Home Based Community Services (HBCS) waiver renewal for persons who are elderly has been submitted and the department has received an informal approval. The waiver for persons with disabilities has also been submitted and the department anticipates approval in the next week or two. The next LTC meeting is scheduled for October 16, 2009.

Public Education Subcommittee. No report for this period.

Pharmacy Subcommittee. No report for this period.

VIII. The meeting was adjourned at 10:51 a.m. The next MAC meeting is scheduled for November 20, 2009.

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All Kids Report**

Enrollment

- Enrollment data is attached. Enrollment data as of 07/31/09:
 - a. 1,510,679 All Kids Assist (Up to 133% of FPL)
 - b. 75,240 All Kids Rebate, Share, Premium Level 1 (133% to 200% of FPL)
 - c. 71,752 All Kids expansion children

Web-based application capability

We implemented our web-based application statewide on August 11, 2005. Since then, we have received a total 216,243 web apps: 147,102 from the general public and 69,141 from AKAA's.

MAC 09/18/09

	3/31/2009		4/30/2009		5/31/2009		6/30/2009	7/31/2009
	Previous	Current	Previous	Current	Previous	Current	Current	Current
	Numbers							
Pre-expansion children	1,333,282	1,370,284	1,385,906	1,389,487	1,387,943	1,394,097	1,397,500	1,402,789
All Kids Phase I	113,696	114,541	102,531	103,001	103,881	104,683	106,434	107,890
All Kids Phase II	62,993	62,766	67,816	67,722	67,719	67,527	67,578	67,402
All Kids Phase III	9,868	9,839	6,797	6,787	7,186	7,171	7,630	7,838
All Kids Expansion	70,923	71,001	69,761	69,820	70,708	70,799	71,367	71,752
TOTAL	1,590,762	1,628,431	1,632,811	1,636,817	1,637,437	1,644,277	1,650,509	1,657,671
All Kids Assist	1,446,978	1,484,825	1,488,437	1,492,488	1,491,824	1,498,780	1,503,934	1,510,679
All Kids Rebate, Share, Premium Level 1	72,861	72,605	74,613	74,509	74,905	74,698	75,208	75,240
All Kids Expansion	70,923	71,001	69,761	69,820	70,708	70,799	71,367	71,752
Total	1,590,762	1,628,431	1,632,811	1,636,817	1,637,437	1,644,277	1,650,509	1,657,671

**Statewide Medical Homes and Client Enrollments
for September 12, 2009**

Number of Medical Homes*	Panel Size	Eligible Client Count	Clients Enrolled in IHC	Clients Enrolled in MCO	Total Clients with a Medical Home
5,460	5,235,723	1,957,739	1,686,405	194,548	1,880,953

* FQHC/RHC/ERC Sites are counted as 1 Medical Home