Illinois Department of Healthcare and Family Services
Medicaid Advisory Committee
November 16, 2007

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

Members Present
Eli Pick, Chairman
Nancy Crossman, DHS
Jill Fraggos for Susan Hayes Gordon
Richard Perry, D.D.S
John Schlofrock, Barton Mgt.
Robyn Gabel, IMCHC
David Carvalho - IDPH

Members Absent
Robert Anselmo, R.Ph.
Pedro A. Poma, M.D.
Diane Coleman, PCIL
Kim Mitroka – Christopher Rural Health
Neil Winston, M.D.
Myrtis Sullivan, DHS
Debra Kinsey –DCFS

HFS Staff
James Parker
Jacquetta Ellinger
Lynne Thomas
Stephen Saunders, M.D.
Sinead Madigan
Kelly Cunningham
Aundrea Hendricks
James Monk

Interested Parties
Mary Driscoll – DPH
Kevin McFadden –Astra Zeneca
Dennis Penning - Hemophilia Foundation of Illinois
Roy Pura – GlaxoSmithKline
Citseko Staples – Harmony HMO
Esther Morales – Harmony HMO
George Hovanec-Consultant
Gerri Clark – DSCC
Marsha Hurn - CBDC

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I. Call to Order

Chairman Pick called the meeting to order at 10:12 a.m.

II. Introductions

Attendees in Chicago and Springfield introduced themselves.

III. Review of the Minutes

The September 2007 minutes were approved.

IV. Administrator's Report

James Parker, Deputy Administrator for Operations, provided the report.

1) The Illinois Breast and Cervical Cancer Program has expanded to provide free mammograms, breast exams, pelvic exams and Pap tests for all uninsured women in Illinois. We have 800 persons actively enrolled. Public Health (IDPH) continues to work to expand the number of screening sites. Primarily public health sites do screening with payment from HFS.

   Women interested in screenings may be referred to the Illinois Women's Health Line (888-522-1282) or website www.cancerscreening.illinois.gov/. In Cook County, interested parties may call Access Community Health Network or Mercy Hospital and Medical Center.

   Robyn Gabel asked if DPH and HFS are monitoring the program. Mary Driscoll shared that DPH has certain parameters to monitor such as getting the screening within 60 days and getting reports back. There are two ways in which applications may be initiated. When a public health contractor does the screening and follow up is needed, the contractor will assist with the application to HFS. For women already determined to need follow up, then a referral is made from the medical provider to the screening agent that ensures an application is completed.

   The program doesn't cover treatment of uterine cancer. Only, if the cancer metastasized from the cervix or breast to another site, may we can cover treatment.

2) Mr. Parker reported that the Governor expanded FamilyCare income eligibility to include families up to 400% FPL by filing an emergency rule.

3) Jacquetta Ellinger, Deputy Administrator for Policy Coordination, provided an update on efforts to reauthorize the SCHIP (State Children's Health Insurance Program) and Illinois' waiver that allows for coverage of adults under the FamilyCare program.

The FamilyCare waiver ended on September 30th. Despite our work with the federal CMS, we did not receive an extension of the waiver.

For the last federal fiscal year, Illinois' allotment under SCHIP was about $210 million. In fiscal year 2007, Illinois drew in $450 million. Additional money came from the special shortfall appropriation by Congress and from redistribution of funds from other states that didn't use their allotment. The federal CMS never agreed to let us draft a waiver renewal budget for over $210 million.

The outlook for SCHIP reauthorization is uncertain. Services to 185% FPL parents are not federally reimbursable under SCHIP as of October 1st. We may pursue Medicaid for FamilyCare through a state plan amendment. We can go back to October 1st if we file by December 31st. Under Medicaid we will receive $60 - $70 million less in federal match. With no amendment, we would be down $200 million in federal matching funds. Although the waiver has ended, FamilyCare recipients continue to receive coverage.

A question was raised regarding the 2008 budget and rate increases for Long Term Care (LTC). If the budget had not been signed by November 15th, is it true that the new LTC rates would not go into effect on January 1, 2008? Mr. Parker stated that there is a 30-day time frame for notification required by the feds, and then it becomes a match issue.

V. Old Business

1) All Kids and FamilyCare update. Enrollment statistics through September 30, 2007 were provided. Lynne Thomas, Bureau of All Kids Chief, stated that about 1.4 million children and over 500,000 adults are covered. The numbers continue to grow. The central All Kids Unit is processing at less than two weeks. We have been moving resources to process application renewals.

Ms. Thomas stated that about half of the applications are received from families and about half are from All Kids Application Agents (AKAA). She added that about half the applications are received via mail and about half via the web-based application.

2) Primary Care Case Management (PCCM) activity Mr. Parker reported on the Illinois Health Connect program. The statewide rollout is done with about 1.7 million eligible persons enrolled. We have notified all mandatory participants although the number in the program is a little less as new enrollees have 60 days to make a decision. The 60-day period for downstate enrollees is over and the auto-assignments are done. Next week we should have the number of enrollees that were auto-assigned.

The provider network has adequate capacity with most counties having twice the capacity needed. The exception is Massac County on the border with Kentucky. We have 21 counties with 100 to 200% capacity and 80 counties with greater than 200% capacity.

Now begins the hard work of ensuring that care is given in these medical homes. We will monitor the number of well child visits, preventive screenings and immunizations. We want to achieve the goals set forth for PCCM.

Mr. Parker advised that we are not currently rejecting claims if a person goes to a location other than the assigned medical home. We won't begin the required referral process until early in 2008. Some providers are trying to reinforce that patients come only with a referral and if a patient wishes, they may change to a new PCP. Looking at Cook county data, 70% of physician services are received from the assigned PCP. We take this as a good sign.

3) Disease Management (DM). Dr. Stephen Saunders, Division of Medical Programs Medical Advisor, provided the report. He stated that about 18,000 patients are actively engaged in DM. These are high-risk patients. We are working with persons with mental health diagnoses to better coordinate mental health and non-mental health services. The goal is to ensure coordination of care for those at highest risk.

Chairman Pick asked how many of the 18,000 are in Long Term Care (LTC). Dr. Saunders stated about 4%, or 700; of the 18,000 actively engaged patients are targeted LTC participants. He added that McKesson, the DM contractor, has about 4,000 patients in LTC.

4) Medicare Part D. Sinead Madigan, Chief of the Bureau of Pharmacy Services, provided the update on Medicare Part D and Illinois Cares Rx. She advised that on November 15th and through the end of the year, people may choose a new Part D provider. This is leading into the third year of the Part D program and we expect about 28% of persons to move to a new prescription drug plan.

The federal average premium benchmark for a coordinating Medicare drug plan is $30.26. If the cost is $1.00 over, Medicare will move the enrollee to another plan in the company or to a new plan. Illinois has 2 plans above the benchmark. These are United Healthcare - AARP and the WellCare Signature plan. The state will pay the difference to allowed persons to remain enrolled in these health plans.

We will double the number of state coordinating plans to 6 from 3. The new stand-alone plans are Humana PDP Standard, SilverScript and First Health Part D Premium. There are also 3 new Medicare Advantage plans. These are Essence Healthcare, Humana and PersonalCare.

There are about 210,000 members in Illinois Cares Rx and 99% of them are in a Medicare plan.

5) Veterans Care. Ms. Ellinger reported that the enrollment numbers are fairly stable at about 80 veterans. She noted that the income threshold is pretty high at 300 to 400%

poverty and that the specific amount varies by county. We continue to work with the Department of Veteran Affairs to determine eligibility and promote the program.

In July, the Governor announced a program to screen Illinois Veterans for traumatic brain injury (TBI) and Post Traumatic Stress Disorder (PTSD). HFS is working with DVA on that initiative.

6) Access to Benefits and Services Task Force. Nancy Cross shared that a draft report had been completed. The next step is for state agencies to respond to the report and a final report would be issued to the state legislature. The recommendations primarily relate to DHS.

Ms. Crossman suggested that DHS and HFS will share the agency responses with the task force before releasing the report to the legislature and Governor.

VI. New Business

No new business for this period.

VII. Subcommittee Reports

Long Term Care (LTC). Kelly Cunningham with the Bureau of Long Term Care provided the report. She stated the subcommittee has standing topics for discussion.

- The Supportive Living Program has 84 operational sites and another 63 applications for sites to approve.
- Illinois Care Rx discussed as reviewed earlier.
- The disease management program, "Your Healthcare Plus" is working with long term care facilities and have nurse practitioners at 12 sites in the Chicago area. We hope to expand to suburban areas.
- Illinois has 9 Home and Community Based Services (HCBS) Medicaid Waiver Programs. This includes 2 new waivers for children.
- The Dept on Aging reported on the Cash and Counseling demonstration project, available in four areas in the state that allows clients to manage their budget and services.
- The "Money Follows the Person" demonstration project was awarded to Illinois in May 2007 for a five-year grant period. The program transitions person to an appropriate community setting. The eligibility criteria require that a person be in long term care for a minimum of 6 months. The community setting may be a home or residential setting of 4 or more beds. This is not a grant program but an opportunity to get 75% federal match up to a year following the transition. The project is geared to system rebalancing with issues of nursing home diversion, conversion, closure of beds and better screening of patients.

  The next meeting is December 21st.

Dental Policy Review (DPR). Dr. Richard Perry provided the report. The subcommittee met on November 7th.

The Dentist Office Reference Manual was updated. The workgroup focused on a review of the changes.

Dr. Perry reported that the number of Illinois dental providers enrolled in the Medicaid program has gone up slightly to about 1900. The increases were seen in the southern and central parts of the state. He added that Doral Dental has people enrolling new dentists.

The next meeting is March 12th.

Pharmacy Subcommittee Charge. No report for this period

Public Education Subcommittee Ms. Ellinger reported that there has not been much interest in this subcommittee. There was a staff person who has left and the staffing has not been reassigned.

Robyn Gabel asked if the subcommittee would ever meet again. Ms. Ellinger stated that if Ms. Gabel would help with developing the agenda, we could bring people together in person or via a conference call.

Ms. Ellinger advised that she would include the charge of the subcommittee with the mailing for the next MAC meeting.

VIII. The meeting was adjourned at 11:20 a.m. The next MAC meeting is scheduled for January 18, 2008. The Department will provide the annual meeting schedule at the next meeting.

Medicaid Advisory Committee
November 16, 2007
All Kids/FamilyCare Report

Enrollment

- Enrollment data is attached. Enrollment data as of 09/30/07:

  a. 1,315,838 All Kids Assist (Up to 133% of FPL)
  b. 70,068 All Kids Rebate, Share, Premium Level 1 (133% to 200% of FPL)
  c. 59,029 All Kids expansion children
  d. 5,890 Moms and babies expansion (133% to 200% of FPL)
  e. 370,628 Pre-expansion parents (up to approx. 35% of FPL)
  f. 156,905 FamilyCare expansion parents

Web-based application capability

We implemented our web-based application statewide on August 11, 2005. Since then, we have received a total 112,849 web apps: 74,898 from the general public and 37,951 from AKAA's.

	4/30/2007		5/31/2007		6/30/2007		7/31/2007		8/31/2007	9/30/2007
	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Current Numbers	Current Numbers
Pre-expansion children	1,191,757	1,194,980	1,193,440	1,199,518	1,202,947	1,206,321	1,206,194	1,212,445	1,219,991	1,221,195
All Kids Phase I	86,550	86,847	87,818	88,388	90,024	90,332	91,449	92,004	93,485	94,643
All Kids Phase II	59,792	59,798	61,108	61,073	62,124	62,124	62,740	62,680	62,682	62,759
All Kids Phase III	5,693	5,688	6,198	6,191	6,623	6,619	6,963	6,946	7,061	7,309
All Kids Expansion	49,887	50,083	52,185	52,615	54,928	55,118	56,262	56,653	58,015	59,029
Moms and Babies Exp	5,519	5,596	5,518	5,657	5,653	5,723	5,693	5,835	5,924	5,890
Pre-expansion parents	365,129	367,160	363,162	367,193	366,618	368,609	366,648	370,447	371,580	370,628
FamilyCase Phase I	36,507	36,601	36,551	36,702	36,769	36,864	36,561	36,714	36,956	36,817
FamilyCare Phase II	38,898	39,079	39,065	39,378	39,425	39,603	39,285	39,584	39,986	39,641
FamilyCare Phase III	56,712	56,997	57,609	58,114	59,008	59,297	59,326	59,850	60,613	60,673
FamilyCare Phase IV	17,462	17,471	18,226	18,244	19,003	19,027	19,438	19,459	19,607	19,774
TOTAL	**1,913,906**	**1,920,300**	**1,920,880**	**1,933,073**	**1,943,122**	**1,949,637**	**1,950,559**	**1,962,617**	**1,975,900**	**1,978,358**

Children	1,393,679	1,397,396	1,400,749	1,407,785	1,416,646	1,420,514	1,423,608	1,430,728	1,441,234	1,444,935
Parents	520,227	522,904	520,131	525,288	526,476	529,123	526,951	531,889	534,666	533,423

	4/30/2007		5/31/2007		6/30/2007		7/31/2007		8/31/2007	9/30/2007
	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Previous Numbers	Current Numbers	Current Numbers	Current Numbers
All Kids Assist	1,278,307	1,281,827	1,281,258	1,287,906	1,292,971	1,296,653	1,297,643	1,304,449	1,313,476	1,315,838
All Kids Rebate, Share, Premium Level 1	65,485	65,486	67,306	67,264	68,747	68,743	69,703	69,626	69,743	70,068
All Kids Expansion	49,887	50,083	52,185	52,615	54,928	55,118	56,262	56,653	58,015	59,029
Moms and Babies Expansion	5,519	5,596	5,518	5,657	5,653	5,723	5,693	5,835	5,924	5,890
Pre-expansion Parents	365,129	367,160	363,162	367,193	366,618	368,609	366,648	370,447	371,580	370,628
FamilyCare Parent Expansion	149,579	150,148	151,451	152,438	154,205	154,791	154,610	155,607	157,162	156,905
Total	**1,913,906**	**1,920,300**	**1,920,880**	**1,933,073**	**1,943,122**	**1,949,637**	**1,950,559**	**1,962,617**	**1,975,900**	**1,978,358**