

201 South Grand Avenue East  
Springfield, Illinois 62763-0002

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September 17, 2020

Aaron Galeener, Interim CEO  
CountyCare Health Plan  
1900 West Polk Street, Suite 220-C  
Chicago, Illinois 60612

**RE: Notice of Sanction: \$100,000 Financial Penalty**

Dear Mr. Galeener:

This letter serves as notification to CountyCare Health Plan (“CountyCare”) of sanction pursuant to Section 7.16.6 of the Contract for Furnishing Health Services by a Managed Care Organization (“contract”) between the Department of Healthcare and Family Services (“Department”) and CountyCare:

**“7.16.6 Failure to submit Encounter Data.** The Department and Contractor acknowledge and agree that they will work in good faith to implement mutually agreed-upon system requirements resulting in the complete and comprehensive transfer and acceptance of Encounter Data, and that such mutual agreement shall not be unreasonably withheld. Contractor shall submit complete and accurate data quarterly to the Department in accordance with the Illinois Medicaid Health Plan Encounter Utilization Monitoring (EUM) requirements document, as set forth in Attachment XXIII, for each evaluation period. If Contractor does not meet the standards by the evaluation date as set forth in Attachment XXIII, the Department, without further notice, may:

7.16.6.1 impose a monetary penalty of up to US \$100,000;

7.16.6.2 impose an enrollment hold on Contractor; or

7.16.6.3 impose both.”

CountyCare’s overall score of 96.20% for its HealthChoice Illinois contract in the Encounter Summary report for EUM 2020 Evaluation Period 3 was below the 98% threshold related to the \$50,000 Financial Penalty outlined in Attachment XXII. Additionally, CountyCare’s score of 71.30% for the Transportation category and score of 61.50% for the Dental category were below the 88% threshold, and related to the \$50,000 Financial Penalty outlined in Attachment XXIII. The Department is hereby providing written notice that CountyCare failed to meet the established expectations and is therefore fining CountyCare in the amount of \$100,000. CountyCare is to issue a check payable to the Department of Healthcare and Family Services for \$100,000. In the memo section of the check, please indicate “Re EUM 2020 Eval 3”. Please send the check by 10/23/2020 to:

Department of Healthcare and Family Services  
Bureau of Fiscal Operations, Attn: Matthew Duff  
2200 Churchill Road, Building A2  
Springfield, IL 62702

If you have any questions regarding this information, please contact Devang Ghadia at 217-524-2502.

Sincerely,

Robert Mendonsa, Deputy Administrator  
Division of Medical Programs

cc: Amy Roberts, Dennise Parker, Devang Ghadia, Donavon Patton, Esther Macchione, Laura Ray, Lauren Polite, Qiana Shelton-Brown, Angelique Momon, and Matthew Duff