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**Medicaid Advisory Committee
Public Education Subcommittee Meeting**
Thursday, June 6th, 2019
10:00 a.m. to 12:00 p.m.

401 S. Clinton St., Chicago – 7th Floor Video Conference Room
201 S. Grand Ave. East Bloom Bldg., Springfield – 1st Floor Large/Video Conference Room

1. Introduction
2. Review and Approval of the Meeting Minutes from December 6th, 2018 & February 7th, 2019, and April 4th, 2019.
3. Care Coordination Update
4. DHS Update
5. Medicaid Redetermination Update
6. ABE & IES Update
7. Open Discussion and Announcements
8. Adjourn

For anyone who cannot attend in person but wishes to participate by conference call, please confirm your attendance by phone at 312 793-1984 or 312 793-5270. This will help to ensure the distribution of meeting materials and to accurately record your participation. You will receive meeting instructions and the access code when you confirm. The conference call telephone number is: 1-888-494-4032.

This notice is also available online at:

<https://www.illinois.gov/hfs/About/BoardsandCommissions/MAC/News/Pages/default.aspx>

Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
April 4th, 2019

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

Committee Members

Kathy Chan, Cook County Health & Hospitals System
Brittany Ward, CPS
Sue Vega, Alivio Medical Center
Sherie Arriazola, Safer Foundation
Nadeen Israel, AIDS Foundation of Chicago

HFS Staff

Lynne Thomas
Lauren Polite
Elizabeth Lithila
Arvind Goyal
Robert Mendonsa
Veronica Archundia

Committee Members Absent

Sergio Obregon, CPS
Erin Weir Lakhmani, Mathematica Policy Research
John Jansa, Smart Policy
Connie Schiele, HSTP (by phone)

DHS Staff

Gabriela Moroney
Tina Bhaga
Pete Almeida

Interested Parties

Nicole Lee, ACCESS
Andrea Kovach, Shriver Center
Sandy DeLeon, The Ounce
Marina Kurakin, Legal Council for Health and Justice
Anna Carvallo, Consultant
Paula Campbell, IPHCA
Mikal Sutton, BCBSIL
Jill Hayden, Meridian
Keisie Landers, Ever Thrive IL
Dan Rabbitt, Heartland Alliance
Judy Bowlby, Liberty Dental Plan
Sara McCoy, IHCOP
Jessica A. Pickens, Next Level Health
Jessie Beebe, AFC
Michael Lafond, Abbvie
Andrea Davenport, Meridian
Eric Johns, Meridian
Kathye Gorosh, AFC
Carrie Muenlbauer, ICCM
Meghan Carter, Legal Council for Health and Justice
Karina Gonzalez, Molina
Carrie Chapman, LCHJ
Patrick Maguire, Medical Home Network

Interested Parties (by phone)

Maria Bell, Avesis
Nelson Soltman,
Juanita Dorantes, ACCESS Community Health Network
Dave Lecik, Department on Aging
Sam Hollis, Illinois Health Hospital Association
Dave Hunter, Presence Health Partners
Robin Lavender, Du Page County Health Department
Leticia Lopez, ACCESS Community Health Network

**Illinois Department of Healthcare and Family Services
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April 4th, 2019**

1. Introductions:

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

2. Review and Approval of the Meeting Minutes from December 6th, 2018 and February 7th, 2018:

Kathy Chan stated that, due to the lack of a quorum, the committee will not be able to take any actions related to the draft meeting minutes. Therefore, the minutes will not be reviewed at this meeting; instead they will be discussed during the June 6th meeting.

Kathy Chan indicated that, as the new HFS administration takes leadership, they want to share their vision on issues specially regarding working with this committee on behalf of service beneficiaries and providers. Kathy introduced Jane Longo, the Deputy Director of New Initiatives at HFS. Jane's opening remarks emphasized the importance of addressing the backlog of initial applications and redeterminations. This is a top priority for the new director, Teresa Eagleson. In order to meet the federal requirement that initial applications be processed in 45 days and to become more current with rede applications, Jane Longo has developed the following plan:

1. **Hiring new staff** at DHS and HFS in system testing, additional caseworkers' staff, HFS policy staff, ABE Customer Service staff, and DOIT staff via "DHS headcount." This process has begun and will continue into next year.
2. **Training**, especially focused on eligibility staff, making sure caseworkers have tools and knowledge to efficiently use the new system.
3. **Streamlining policies**, especially where state law and rule changes could help processing times.

Ms. Longo stated that she looks forward to all suggestions, including, but not limited to:

- a) The Ex-parte redetermination process – in order to make it available to more people. (Only about 30% are part of "Form A" process.)
 - b) Reasonable compatibility – when income is reported and compared to e-verification sources, can have 5% margin of error between what is reported and what is e-verified; HFS want to look at options for improving this process by raising it beyond 5%.
4. **Upload procedures** related to Long term Care (LTC) hubs to reduce LTC processing backlog. Possibly create some case examples and standards, although there is a need for additional information in order to explore all alternatives.

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5. **Oversight of partners** via agency partners and vendors partners – monitoring partners and vendors to confirm that they are staying on schedule and using data reporting to ensure that performance and quality goals are met. Considering an independent contractor for IT vendor.

6. **Open to future eligibility improvements:**
 - a) Further automated eligibility, i.e. real-time eligibility
 - b) Express lane eligibility
 - c) Expanding opportunities for community- based assistance
 - d) Mobile friendly access to ABE also MMC for easier access by clients who may only have internet access via mobile device.

Jane Longo reiterated that HFS looks forward to hearing additional suggestions and comments from this committee. Sue Vega said that these initiatives appeared to be going in the right direction; however, she asked that the needs of the Spanish-speaking community be kept in mind, as well as the needs of others for whom English is not their first language. Sherie Arriazola said that this approach is refreshing and asked when HFS anticipates real-time eligibility (allowing the system to determine eligibility instead of requiring a caseworker's decision). Ms. Longo replied that HFS needs to stabilize IES first and cannot make any predictions about the timing of implementation.

Lynne Thomas added that 13 staff members have returned from retirement in order to help address newborn backlog. In addition, IES enhancements will make it possible to add newborn babies automatically to a case where the mother has an active Mom's and Babies case. No caseworker intervention will be required. These requests would be submitted by authorized hospitals and are expected to be a critical strategy to expedite the request to add a baby to a case where the mother has Medicaid coverage. It is expected that, in the future, clients would be able to submit a request to add a baby through Manage My Case (MMC), which will also be processed automatically without the intervention of a caseworker.

3. Care Coordination:

Robert Mendonsa indicated that Illinois received CMS approval for the MLTSS rollout, which will take place in six counties; however, the timing for this rollout has not been determined. HFS is expected to make an announcement sometime during the summer. A mailing will be done 60 days in advance, so that members have adequate time to make a choice. A provider notice will be issued outlining the schedule; however, at this time, it has not been determined when the provider notice will be sent. In addition, Mr. Mendonsa said that the MMAI letter is posted on the HFS website with a request to CMS to extend into 2020, with an additional two-year option:

<https://www.illinois.gov/hfs/SiteCollectionDocuments/030519%20RequesttoExtendtheMMAIDemonstration.pdf>

Robert Mendonsa said that HFS has been working with the plans to reduce denials. He added that HFS considers the denial rates higher than they should be and has asked the plans to develop billing guidelines which include the completion of the Inpatient and Outpatient hospital

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sections. Additionally, HFS has assigned HFS Subject Matter Experts to each section and will ask various associations to review them. HFS has also initiated biweekly meetings between provider groups and MCOs in order to try to work through any remaining issues.

Patrick Maguire indicated that MCO care coordination enrollment has been down about 100,000 members in Cook County and asked if this is attributable to IES challenges. Jane Longo acknowledged that enrollment has decreased, stating that this could be attributable to a variety of reasons, including staffing and system issues, backlog in processing, but most importantly due to individuals being termed for failure to return their rede forms on time. The decrease enrollment is not necessarily due to IES challenges.

Nadeen Israel asked about the current policy related to the processing of redetermination paperwork. Lynne Thomas said that, if someone turns in rede paperwork on time no adverse action is taken. A case will remain active until a caseworker reviews, processes it and makes a determination of eligibility. Lauren Polite added that those who lose Medicaid eligibility and are reinstated within 60 days can go back to the same MCO, but there cannot be any demographic information changes to their cases: including no changes to address, household composition; name changes, or other alteration to the case information. Most importantly, however, the reinstatement process must occur within 60 days, not just be received within that time frame.

Nadeen Israel said that she is concerned about caseworkers' errors processing cases. Jane Longo said that HFS is aware of instances of caseworker error, but there is no data showing cases being inappropriately canceled on a large scale. Lynne Thomas asked that any specific concerns should be referred to Lynne.Thomas@illinois.gov. She said that HFS is presently seeking to determine if there are system changes that could mitigate these concerns, in addition to caseworker training, and "pop up reminders". Jane Longo asserted that HFS' intention is to make it clear to this committee that HFS wants everyone who is eligible for Medicaid to remain covered, yet HFS also needs to assess the legitimacy of the clients' eligibility.

4. DHS Update:

Gabriela Moroney indicated that Governor JB Pritzker recently announced the new leadership at IDHS. Grace B. Hou was named the new Secretary of the Illinois Department of Human Services, and Pete Almeida is now the Director of Stakeholder Engagement.

Ms. Moroney indicated that the Department of Human Services, recently issued a Manual Release to provide a uniform procedure for all FCRCs across the state when assisting customers who are requesting proof of receipt of benefits. Caseworkers will complete the newly-created Proof of Receipt of Program Benefits (Form 3711). The policy can be found here:

<https://www.dhs.state.il.us/page.aspx?item=116442>

Ms. Moroney said that DHS is looking at the Notice of Proposed Rulemaking from the federal Department of Homeland Services, Inadmissibility on Public Charge Grounds. The Department

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has begun a planning process in order to better understand the impact on DHS customers, workload, as well as more broadly on the State.

5. ABE & IES Update:

Lauren Polite indicated that State ID Proofing is being piloted in six DHS offices, one per region: Adams, Humboldt Park, Randolph County, Vermillion County, Will County and Woodlawn.

Other FCRCs are forwarding ID Proofing requests to the All Kids Unit. It is expected that during May 2019, ID Proofing will be rolled out to all DHS offices. HFS will communicate this information so that advocates and others can share this with clients who could benefit from learning more about using State ID Proofing. Kathy Chan asked if it would be possible to discuss this issue further during the next meeting. Lauren Polite shared the following data on MMC use and FFM applications.

ABE Manage My Case, Appeals and FFM stats
For MAC Public Education Subcommittee

	3/21/19	2/7/19	10/3/2018	7/31/18	4/10/18	1/29/18
ABE MMC Accounts Linked	626,466	570,348	416,010	329,244	240,780	121,361
Renew My Benefits	189,378	172,590	125,603	97,679	53,557	21,992
Report My Changes	133,122	121,002	84,882	63,762	31,187	14,254
Program Adds	52,834	46,896	31,136	22,908	10,033	3,728
Member Adds	18,104	16,485	11,758	9,753	5,173	2,644
Mid-Point Reports	84,017	74,786	47,454	34,357	11,247	2,870
Appeals submitted	38,685	34,576	24,551	NA	7,380	4,673
FFM cases received since 11/2017	205,548	198,234	123,550	114,885	102,618	NA
IES cases transferred to FFM since 11/2017 **	587,906	541,228	NA	NA	NA	NA
Cumulative count of people successfully ID proofed through the State	334	NA	NA	NA	NA	NA

**HFS expanded this to include all IES cases transferred to the FFM, not just those received at the State through ABE. Previously reports no longer easily available

When asked if teens would be able to complete the State Identity Proofing, Lauren said that a teenager can complete Identify Proofing, see notices and the type of benefits for a specific case, but only the head of household is authorized to submit changes or complete a redetermination.

6. Medicaid Redetermination Update:

Elizabeth Lithila presented the report. She said that today's presentation reflects the most recent data related to Medicaid redetermination. She presented the Redetermination Report, which is attached.

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Kathy Chan, Nadeen Israel, and Sherie Arriazola, as well as other interested parties, expressed their appreciation to Elizabeth Lithila and a staff-member team for preparing the redetermination report prior to today's meeting, which makes it easier to follow along with the redetermination presentation.

7. Open Discussion and Announcements:

Prompted by a request from Sherie Arriazola regarding services provided to clients residing in work-release centers or halfway houses, also known as Adult Transitional Centers (ATC), Lynne Thomas reported that HFS has been seeking CMS confirmation that individuals at ATCs can be eligible for Medicaid. Sherie stated that this is an issue that had been announced over a year ago. However, Director Teresa Hursey said that she wanted to confirm that this is actually the case, and stated that, to date, there has not been a clear answer. She also shared that some ATC residents have successfully enrolled in Medicaid and that providers have been able to bill for services. However, Sherie would prefer that her organization receives something in writing regarding this matter from HFS.

Sherie Arriazola asked if there is a way to consider adding women onto their newborn's case after they leave the Illinois Department of Corrections, so they can be determined eligible for Medicaid more quickly. HFS will provide an update at upcoming meetings.

8. Adjournment:

The meeting was adjourned at 12:05 p.m. The next meeting is scheduled for June 6th, 2019, between 10:00 a.m. and 12:00 p.m.

Medical Redetermination Data 03/28/2019

Redetermination Data through 03/20/2019								
Redetermination Due Date	December 2018		January 2019		Feb-18		Past Three Months Totals	
Total Redes Mailed (Cases)	151,871	100%	137,600	100%	130,548	100%	420,019	100%
Form A Mailed	30,510	20%	42,787	31%	40,947	31%	114,244	27%
Form B Mailed	121,361	80%	94,813	69%	89,601	69%	305,775	73%
Changed/Continued	39,110	32%	38,737	41%	33,896	38%	111,743	37%
Cancelled	60,840	50%	39,921	42%	35,595	40%	136,356	45%
Cancelled for Ineligibility	2,481	2%	1,857	2%	1,278	1%	5,616	2%
Auto Cancellation (Non-Return Form B)	58,359	48%	38,064	40%	34,317	38%	130,740	43%

Redetermination Data through 03/28/2019																
Redetermination Due Date	01/2018	02/2018	03/2018	04/2018	05/2018	06/2018	07/2018	08/2018	09/2018	10/2018	11/2018	12/2018	01/2019	02/2019	Total	
Total Redes Mailed (Cases)	148,414	120,372	152,968	129,508	140,885	129,689	129,793	151,844	178,116	167,572	140,014	151,871	137,600	130,548	2,009,194	
Form A Mailed	34,162	28,099	30,584	29,939	32,832	28,978	29,024	32,845	34,867	37,943	32,703	30,510	42,787	40,947	466,220	
Form B Mailed	114,252	92,273	122,384	99,569	108,053	100,711	100,769	118,999	143,249	129,629	107,311	121,361	94,813	89,601	1,542,974	
Auto-Cancelled for Non-Response	60,514	50,216	59,069	0	43,567	41,389	40,390	45,633	59,594	57,545	46,494	58,359	38,064	34,317	635,151	
Current Medical Coverage	18,986	15,703	19,667	0	9,022	9,236	8,137	6,793	6,702	7,006	5,792	3,587	2,926	1,135	114,692	
Current Medical Coverage %	31.4%	31.3%	33.3%	0.0%	20.7%	22.3%	20.1%	14.9%	11.2%	12.2%	12.5%	6.1%	7.7%	3.3%	18.1%	
Persisting Cancellations	41,528	34,513	39,402	0	34,545	32,153	32,253	38,840	52,892	50,539	40,702	54,772	35,138	33,182	520,459	
Persisting Cancellations %	68.6%	68.7%	66.7%	0.0%	79.3%	77.7%	79.9%	85.1%	88.8%	87.8%	87.5%	93.9%	92.3%	96.7%	81.9%	

Total Potential Reinstatement Tasks Received		
Since IES Phase 2 Inception		
Status	Count	Percentage
COMPLETE	127,629	87.9%
DUPLICATE	112	0.1%
IN PROGRESS	1,153	0.8%
NEW	16,330	11.2%
Grand Total	145,224	100.0%

Medical Redetermination Data 03/28/2019

All Redeterminations Mailed IES Phase 2	
LANGUAGE	Percentage
English	91.25%
Spanish	7.32%
Other	0.80%
Chinese - Mandarin	0.26%
Polish	0.22%
Arabic	0.16%
Total	100.00%

Total Auto-Cancellation Language Preference	
Language	Percentage
English	89.89%
Spanish	9.11%
Other	0.57%
Polish	0.16%
Arabic	0.14%
Chinese - Mandarin	0.14%
Total	100.00%

**ABE Manage My Case, Appeals and FFM stats
For MAC Public Education Subcommittee
As of 5/23/19**

	5/23/19	4/3/19	2/7/19	10/3/2018	7/31/18	4/10/18	1/29/18
ABE MMC Accounts Linked	702,833	643,018	570,348	416,010	329,244	240,780	121,361
Renew My Benefits	209,483	193,446	172,590	125,603	97,679	53,557	21,992
Report My Changes	151,150	136,784	121,002	84,882	63,762	31,187	14,254
Program Adds	61,447	54,621	46,896	31,136	22,908	10,033	3,728
Member Adds	20,116	18,545	16,485	11,758	9,753	5,173	2,644
Mid-Point Reports	98,207	88,057	74,786	47,454	34,357	11,247	2,870
Appeals submitted	43,935	39,974	34,576	24,551	NA	7,380	4,673
FFM cases received since 11/2017	215,901	208,047	198,234	123,550	114,885	102,618	NA
IES cases transferred to FFM since 11/2017 **	675,297	609,312	541,228	NA	NA	NA	NA
Cumulative count of people successfully ID proofed through the State	959	449	NA	NA	NA	NA	NA

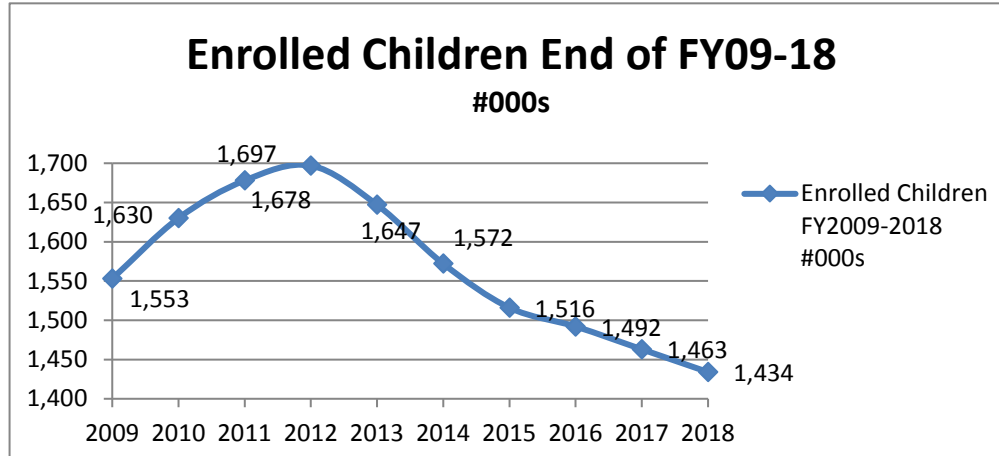
**HFS expanded this to include all IES cases transferred to the FFM, not just those received at the State through ABE. Previously reports no longer easily available.

Children's Enrollment

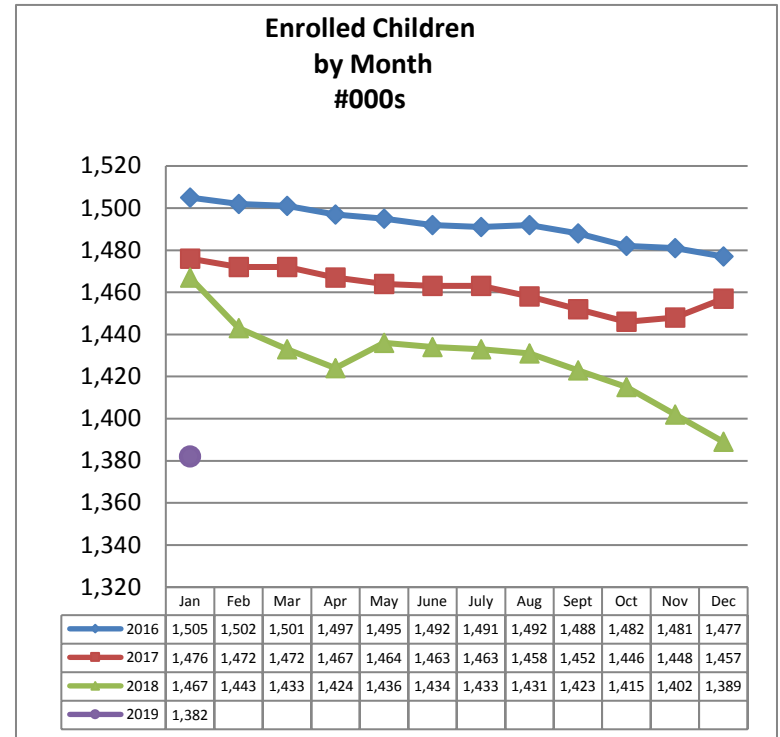
Enrolled Children FY2009-2018 #000s

End of FY

2009	1,553
2010	1,630
2011	1,678
2012	1,697
2013	1,647
2014	1,572
2015	1,516
2016	1,492
2017	1,463
2018	1,434



End of Month 2016	Enrolled Children #000s	End of Month 2017	Enrolled Children #000s	End of Month 2018	Enrolled Children #000s	End of Month 2019	Enrolled Children #000s
Jan	1,505	Jan	1,476	Jan	1,467	Jan	1,382
Feb	1,502	Feb	1,472	Feb	1,443	Feb	
Mar	1,501	Mar	1,472	Mar	1,433	Mar	
Apr	1,497	Apr	1,467	Apr	1,424	Apr	
May	1,495	May	1,464	May	1,436	May	
June	1,492	June	1,463	June	1,434	June	
July	1,491	July	1,463	July	1,433	July	
Aug	1,492	Aug	1,458	Aug	1,431	Aug	
Sept	1,488	Sept	1,452	Sept	1,423	Sept	
Oct	1,482	Oct	1,446	Oct	1,415	Oct	
Nov	1,481	Nov	1,448	Nov	1,402	Nov	
Dec	1,477	Dec	1,457	Dec	1,389	Dec	



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Kathy Chan, Cook County Health & Hospitals System
Jacenta Manley for Brittany Ward, CPS
Erin Weir Lakhmani, Mathematica Policy Research
Sherie Arriazola, Safer Foundation
Nadeen Israel, AIDS Foundation of Chicago (by phone)
Moses Tellez for Sergio Obregon, CPS

HFS Staff

Lynne Thomas
Lauren Polite
Elizabeth Lithila
Lauren Tomko
Robert Mendonsa
Arvind Goyal
Veronica Archundia

Committee Members Absent

Sue Vega, Alivio Medical Center
Ramon Gardenhire, AFC
Connie Schiele, HSTP
John Jansa, Smart Policy

DHS Staff

Gabriela Moroney
Tina Bhaga
Willie Haywood
Beatriz Gonzales

Interested Parties

Paula Campbell, IPHCA
Cyrus Winnett, IARF
Susan Gaines, IPHCA
Mikal Sutton, BCBSIL
Sara McCoy, IHCOP
Jill Hayden, Meridian
Zsa-Zsa Pimentel, ICIRR
Anna Carvallo, Consultant
Marina Kurakin, Legal Council for Health and Justice
Lisa Wiseman, Humana
Patrick Maguire, Medical Home Network
Bailey Huffman, Age Options
Carrie Chapman, LCHJ
Brielle Ostyng, Meridian
Kate Maley, Sargent Shriver National Center
James Brown, Autumn
Jessie Beebe, AFC

Interested Parties (by phone)

Judy Bowlby, Liberty Dental Plan
Juanita Brown, Next Level Health
Jessica A. Pickens, Next Level Health
Kristin Hartsaw, DuPage Federation on Humans Services Reform
Kimberly Burke, Lake County Health Department
Maria Bell, Avesis
Nelson Soltman,
Andrea Davenport, Meridian
Stephanie Seemann, DuPage M
Dalia Morales, Healthcare Access and Immigrant & Refugee Services

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Michelle Sanders, Heartland Health Services
Migdalia Ballona, Community Health Partners
Ralph Schubert, UIC Specialized Care for Children
Michelle Sanders, Heartland Health Services
Dave Lecik, Department on Aging
Robin Lavender, DuPage Health
Dave Hunter, Presence Health Partners
Karyn Britt, TC Health
Martha Jarmuz, Choices CCS
Medina Leticia,
Veronica Avila,

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February 7th, 2019

1. Introductions:

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

2. Review and Approval of the Meeting Minutes from December 6th, 2018:

Kathy Chan stated that, due to the lack of a quorum, the committee will not be able to take any actions related to the December 6th draft meeting minutes. Therefore, the minutes will not be reviewed at this meeting, instead they will be discussed during the April 4th meeting.

3. Care Coordination:

Robert Mendonsa indicated that the merging of Harmony and Meridian health plans was completed as of January 1st, 2019. Members who were enrolled in Harmony are currently being served by Meridian, unless a member has requested enrollment with a different health plan. Mr. Mendonsa said that throughout the state there are four choices of health plans, in addition to two which cover the Chicago area. He added that MLTSS are in six Chicago area counties and waiting on CMS approval, as well as for the approval of an HIV/AIDS waiver, so that HFS can proceed with the statewide rollout. Nadeen Israel asked if, during the April 4th meeting, HFS can provide a status report regarding the HIV/AIDS waiver.

Robert Mendonsa said that bringing the DCFS expansion to managed care is pending the installation of the new administration, the new director and management team. Sherie Arriazola asked if there is an estimated time for data to be loaded with the MCOs so that contract with providers can be finalized. Mr. Mendonsa said the new reporting under Health Choice Illinois will be tracking MCO provider load times by provider types, as well as tracking prior authorizations and denials. He said that there will be a standard, self-reporting format for all plans. He added that the new contract provides for the state to audit and verify any MCO reported information.

Paula Campbell said that there is confusion among clients regarding the open enrollment letter, which indicate that clients “do not need to do anything to stay in their health plan”. She said that clients tend to assume that they don’t have to complete and return their redetermination paperwork, which often arrives in the mail shortly after the open enrollment notice. Robert Mendonsa said that the Bureau of Managed Care is open to anything which can make the process less confusing. Paula Campbell said that she will contact Lynne Thomas to discuss this further. Chairperson Kathy Chan indicated that committee and non-committee members are welcome to share comments on HFS communication and educational materials through this committee.

4. DHS Update:

Gabriela Moroney said that DHS is planning to issue a formal policy memorandum to DHS caseworkers so that they can receive instructions about how to process Citizenship Application fee Waiver” requests.

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Ms. Moroney indicated that, through collaboration between DHS and HFS, the fact sheet regarding how working may impact medical assistance for people with disabilities has been finalized. She said that, although the current version has been approved, any further comments, questions, or concerns should be sent to Gabriela at gabriela.moroney@illinois.gov

5. ABE & IES Update:

Lauren Polite said that the state has now made available a new alternative for individuals who have not been able to complete “Identity Proofing” through Experian. The changes are currently in production, and the state has received about 100 requests. Staff members at the Bureau of All Kids are diligently working on these requests. Lauren noted that the form will be processed between six to eight weeks.

Ms. Polite shared with the committee members the new forms, which were included in the meeting material packet, including both, the English and the Spanish versions (see the attached forms.) She noted that if a client submits an incomplete form, a notice of rejection will be issued. Lauren Polite emphasized that the client’s User Name on the form needs to match the User Name in IES (Integrated Eligibility System), otherwise the Identity Proofing indicator in IES cannot be changed to “YES” and a denial will be sent. She also noted that if the proper documentation is submitted and if everything matches, clients will be mailed an approval notice to the address indicated in IES. This notice will tell the client that when they log-into his/her account they’ll be taken directly to Manage My Case.

Lauren Polite said that, in the future, the form will be added to the ABE application, so clients can upload the document with their applications and have the form processed along with their applications. However, this option is not yet available. Patrick Maguire asked how a client can access the form. Ms. Polite said that they will be prompted to follow a link when unsuccessful with Identity Proofing through Experian. The form is also available on the DHS website at: <http://www.dhs.state.il.us/page.aspx?item=76721>

Kathy Chan asked if, during the next meeting, it would be possible to further discuss this issue.

Ms. Polite said that it is important to note that the approval or denial response will be sent to the address in IES. She noted that the form includes a checkbox asking if the client wants the state to “change their address in the system”. Any questions, comments or concerns related to the form or the new process should be sent to veronica.archundia@illinois.gov

Lauren Polite noted that DHS and HFS continue their combined effort in terms of the implementation of performance fixes to improve IES and ABE. Lauren shared the following data on MMC use and FFM applications. She will provide these in advance for future meetings:

Continue

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February 7th, 2019**

	10/3/2018	7/31/2018	4/10/2018	1/29/2018
ABE MMC Accounts Linked	416,010	329,244	240,780	121,361
Renew My Benefits	125,603	97,679	53,557	21,992
Report My Changes	84,882	63,762	31,187	14,254
Program Adds	31,136	22,908	10,033	3,728
Member Adds	11,758	9,753	5,173	2,644
Mid-Point Reports	47,454	34,357	11,247	2,870
Appeals submitted	24,551	<i>not available</i>	7,380	4,673
FFM cases received since 11/2017	123,550	114,885	102,618	<i>not available</i>
ABE cases transferred to FFM since 11/2017	291,706	226,422	167,766	<i>not available</i>

6. Medicaid Redetermination Update:

Elizabeth Lithila indicated that today's presentation reflects the most recent data through January 2019, related to Medicaid redetermination. She noted that this will be the first full year since IES was implemented. She presented the Redetermination Report, which is attached.

Nadeen Israel asked if it would possible to provide the data regarding Language Codes and Cancellation Reasons in advance of the April 4th meeting so the committee members can have the opportunity to review the information in anticipation to the meeting. Elizabeth said that the report to be presented during the next meeting will be included with the agenda and meeting materials. Erin Weir Lakhmani asked if the data related to form A (ex-parte) numbers will be included for the April meeting. Elizabeth said that her team will make its best effort to include in the report the items that have been requested.

Elizabeth Lithila said that her team (Elizabeth and one staffer) has been working diligently in developing a report of the data according to the format of the template that Nadeen Israel had requested. Kathy Chan and Sherie Arriazola concurred with the observation that Elizabeth and her team member have made conscientious efforts to provide the information requested by the committee members. Other committee members acknowledged the efforts undertaken by HFS.

7. Open Discussion and Announcements:

Sherie Arriazola asked for an update during the April 4th meeting regarding the services provided to clients residing in work-release centers or halfway houses, also known as Adult Transitional Center (ATC). Chairperson, Kathy Chan asked to include in the minutes the reference of the link to the federal guidance, so the committee can reference it for discussion:
<https://www.medicaid.gov/federal-policy-guidance/downloads/sho16007.pdf>

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Carrie Chapman asked if, during the next meeting, it would be possible to provide an update on case conversions.

8. Adjournment:

The meeting was adjourned at 12:05 p.m. The next meeting is scheduled for April 4th, 2019, between 10:00 a.m. and 12:00 p.m.

**Illinois Department of Healthcare and Family Services
Public Education Subcommittee Meeting
December 6th, 2018**

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

Committee Members

Kathy Chan, Cook County Health & Hospitals System
Margaret Stapleton
Erin Weir Lakhmani, Mathematica Policy Research
Sherie Arriazola, Safer Foundation
Nadeen Israel, AIDS Foundation of Chicago
Connie Schiele, HSTP (by phone)
Brittany Ward, CPS
Natalie Lawson for John Jansa, Smart Policy

HFS Staff

Lynne Thomas
Lauren Polite
Elizabeth Lithila
Lauren Tomko
Veronica Archundia
Kiran Mehta
Margaret Dunne

Committee Members Absent

Sue Vega, Alivio Medical Center
Ramon Gardenhire, AFC
Sergio Obregon, CPS

DHS Staff

Gabriela Moroney
Tina Bhaga

Interested Parties

Susan Hayes Gordon, Lurie Children's Hospital
Zsa-Zsa Pimentel, ICIRR
Andrea Kovach, Sargent Shriver National Center
Kelsie Landers, Ever Thrive Illinois
Megan Carter, Legal Council for Health and Justice
Marcy N, BCBSIL
Samantha Olds Frey, IAMHP
Hannon R. Access Community Health Chicago
Bailey Huffman, Age Options
Taylor Belew, Legal Council for Health and Justice
Carrie Chapman, LCHJ
Alicia K, IAMHP
Dan Rabbitt, Heartland Alliance
Patrick Maguire, Medical Home Network
Jessie Beebe, AFC
Michael Lafond, Abbvie
Lynn Seermon, Kaizen Health
Helena Lefrow, IHA
Sharon Post,
Mikal Sutton, BCBSIL
Jill Hayden, Meridian
Sara McCoy, IHCOP
Susan Gaines, IPHCA
Paula Campbell, IPHCA
Cyrus Winnett, IARF
Judy Bowlby, Liberty Dental Plan
Claudia Rodriguez, Greater Chicago Food Depository

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Interested Parties (by phone)

Alap Shah,
Dave Hunter, Presence Health Partners
Dionne Haney, Illinois Dental Society
Nelson Soltman,
Andrea Davenport, Meridian
Kristin Hartsaw, DuPage Federation on Humans Services Reform
Martha Jarmuz, Choices Coordinated Care Solutions
Stephanie Volante, Illinois Health and Hospital Association
Rose Dunaway, Gentiva
Dave Lecik, Department on Aging
Pam Cuffle, Illinois State Dental Society

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1. Introductions:

Chairperson Kathy Chan conducted the meeting. Attendees in Chicago and Springfield introduced themselves. Kathy Chan asked to move the discussion of the Proposed Public Charge Policy, which was initially scheduled to be discussed during the Open Discussion. Nadeen Israel made the motion to move this topic to agenda item number six, and this motion was seconded by Margaret Stapleton. The motion was approved by seven members with zero opposed.

2. Report of Final Meeting Minutes from August 2nd, 2018:

Kathy Chan opened the discussion of the October meeting minutes. Sherie Arriazola asked to revise the name of the organization she represents by removing the word “the”, to read: “Safer Foundation”. Following this change, Margaret Stapleton made a motion to approve the minutes from October 4th, 2018, which was seconded by Connie Schiele.

3. Proposed Meeting Schedule for 2019:

Committee members approved the meeting dates for calendar year 2019, which are the following: February 7th, April 4th, June 6th, August 8th, October 3rd, December 5th. Please see attached schedule.

4. Ethics Training:

Kiran Mehta, from the Assistant General Counsel, provided instructions indicating that all committee members must complete the mandatory ethics training by December 21st, 2018. She provided details about submitting their “Certificate of Completion” to the Bureau of Training at hfs.bureauoftraining@illinois.gov . For any additional questions or concerns committee members should contact Shannon.stokes@illinois.gov

5. Integrated Health Homes (IHH):

Lynne Thomas indicated that the Integrated Health Homes (IHH) choice enrollment initially scheduled for January 1st, 2019 has been delayed.

6. Proposed Public Charge Policy Update:

Andrea Kovach, from the Shriver Center Poverty Law, discussed a handout with members of the committee regarding the possible impact that the proposed Public Charge Rule may have among the immigrant community at the national level, and specifically in Illinois.

Ms. Kovach indicated that the proposed rule would redefine the meaning of the legal term “public charge” by denying admission to the U.S. to certain immigrants due to their likelihood to become dependent upon the government. She indicated that, currently, the benefits that are considered to constitute “public charge” are: cash assistance (TANF), Supplemental Security Income (SSI), general Assistance (GA), and Institutionalization for long-term care at government expense. Ms. Kovach said that the benefits added under the proposed rule are: food stamps (SNAP), non-emergency Medicaid (including ACA adults, Moms & Babies); public housing, house choice vouchers, project-based section 8, and Medicare part D low-income subsidy.

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Ms. Kovach also pointed out that the comment period for the proposed rule will end on December 10, 2018. She encouraged committee members to submit their comments. Please see attached handout that includes the estimated number of people potentially impacted, as well as possible impact of revenue for medical providers. Andrea said that the proposed rule is expected to be finalized and implemented in 2019.

7. Care Coordination Update:

Lauren Tomko reported that the Integrated Health Home initiative was delayed, however, she encouraged committee members to visit the IHH website, which she stated contains a great deal of information: <https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/IntegratedHealthHomes.aspx>

Erin Weir Lakhmani asked, once a list of IHHs is approved, if it will be possible to have it posted in time for enrollment to help enrollment assisters. Lauren Tomko said that open enrollment letters sent to people in Tiers A, B or C had mentioned that IHHs are coming. Patrick Mcguire expressed concern with respect to the staffing ratios. Lauren indicated that HFS is getting ready to post something on IHH website addressing this concern. Kathy Chan reiterated the interest that the committee has in reviewing the notices so those who work with benefits can provide input.

Ms. Tomko said that as of September 1st, 2018. Harmony purchased Meridian. She added that Meridian members will receive letters indicating that they have a period of time until January 1st, 2019 to switch plans if desired, as well as an additional 90 days following January 1st. A letter explaining this transition has not been posted on the HFS website, but a letter explaining this transition has been sent to impacted enrollees. In addition, she indicated that the administration has delayed DCFS managed care implementation. Ms. Tomko said that MLTSS expansion will not be starting on January 1st, 2019.

8. DHS Updates:

Gabriela Moroney provided the update. She began by acknowledging the partnership between DHS and staff members in the Bureau of Managed Care in troubleshooting enrollee issues in the new managed care counties. Gabriela has served as the liaison between FCRC caseworkers and the BMC to address these inquiries.

Gabriela Moroney indicated that the "Application for Fee Waiver Form", it is under review at DHS. Ms Moroney will provide an update during the February 7th, 2019 meeting.

Ms. Moroney indicated that the DHS Fact sheet regarding the impact of employment on eligibility for Medical Assistance for people with disabilities has been posted in the DHS website at: <https://www.dhs.state.il.us/page.aspx?item=115334>.

Lauren Polite said that HFS became aware of a fraudulent flyer that asks SNAP recipients to call an area code 773 telephone number, so they can receive \$100 during the month of

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December. Committee members received a copy of the flyer, which included detail information. They were asked to advise clients not to respond to this scam.

9. ABE/IES Update:

Lauren Polite reported that DHS and HFS continue their combined effort in the implementation of performance fixes to improve IES and ABE. She shared the following data:

	12/06/18	10/3/2018	7/31/2018	4/10/2018	1/29/2018
ABE MMC Accounts Linked	497,124	416,010	329,244	240,780	121,361
Renew My Benefits	149,296	125,603	97,679	53,557	21,992
Report My Changes	104,412	84,882	63,762	31,187	14,254
Program Adds	39,464	31,136	22,908	10,033	3,728
Member Adds	14,275	11,758	9,753	5,173	2,644
Mid-Point Reports	60,129	47,454	34,357	11,247	2,870
Appeals submitted	30,374	24,551	<i>not available</i>	7,380	4,673
FFM cases received since 11/2017	161,333	123,550	114,885	102,618	<i>not available</i>
IES cases transferred to FFM since 11/2017	462,684	291,706	226,422	167,766	<i>not available</i>

Lauren Polite indicated that a new solution to Identity Proofing will be implemented in two phases. She said that January 2019, Medicaid clients or applicants who have tried to verify their identity online at ABE.Illinois.gov but were not able to do so, will be able to request that the State “identity proof” them for the purposes of accessing Manage My Case (MMC). Lauren described in detail the process:

Step 1: The person must have an ABE Account to initiate the process.

Step 2: The person must go to ABE.Illinois.gov, click on the Green Manage My Case Button, and proceed through the process, including answering personal Information questions (to link to case) and Identity Proofing questions. If identity cannot be confirmed after calling Experian, the person can select the option to request that the State verify the person’s Identity. A link will be provided with instructions asking the person to fill out an ID Proofing Request Form.

Step 3: State staff members will open the documentation mailed, review it, confirm information against what we have in IES and what’s on the request form. If satisfied, they will enter the ABE User Name, upload the documents into IES and indicate that the person was successfully identity proofed.

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Step 4: Once a week (on Saturday) – Deloitte will run a batch file looking for all individuals that have the check box indicating State Identity Proofing and a match in ABE for the User Name entered into the case record. If both are in place, the ID proofing indicator in IES will be switched to “yes” (like what happens when someone is identity proofed through ABE.)

Step 5: The State will mail a Notice to the requestors letting them know the outcome of their request for Identity Proofing.

- It will be a basic notice that states whether a request has been approved or denied, along with some reasons why it may have been denied. Initially, this notice will be mailed from the mailroom, so will not have identifying information on the notice itself.
- If successful, the requester needs to log into ABE with the User Name on the Request form and correctly enter the personal information to link the account to their case. At that point, clients will be taken directly to their benefit information.

Lauren Polite said that there will be a second phase to the State ID Proofing process which will be launched within a couple of months beginning 2019. It is expected that people will have the ability to upload the State ID Proofing Request form and proof documents as part of Apply for Benefits. Notices to the request will be generated by IES.

Lauren Polite answered all the questions and concerns expressed by the committee members and interested parties. Ms. Polite then asked for feedback and comments regarding the notices that will be mailed to those requesting State Identity Proofing. She asked for comments to be sent by Friday December 7th, 2018, to veronica.archundia@illinois.gov

Chairperson, Kathy Chan asked to have an update provided concerning any developments during the next meeting. Nadeen Israel asked to provide a Spanish translation.

10. Medicaid Redetermination Update:

Elizabeth Lithila presented the Redetermination Report, which is attached. Committee members had the opportunity to ask questions and express concerns, and Ms. Lithila provided responses.

11. Medicaid Enrollment, Redes, Manged Care & MMC Data:

Elizabeth Lithila said that the data requested by Nadeen Israel during the previous meeting can be found in the Detailed Managed Care Enrollment Report which is posted in the HFS website: <https://www.illinois.gov/hfs/info/factsfigures/Pages/DetailedManagedCareEnrollment.aspx>

12. Criminal Justice Update:

Lynne Thomas indicated that, with respect to Sherie Arriazola’s request regarding the services provided to clients residing in work-release centers or halfway houses, also known as Adult

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Transitional Center (ATC). HFS is waiting to receive approval from the federal government, she will inform the committee as soon as information becomes available.

13. Open Discussion and Announcements:

Kathy Chan asked if, during the next meeting, it would be possible to discuss the new language that appears on the online ABE application. She said it seems the language change was prompted by an audit and a federal requirement. Carrie Chapman asked if the text can be modified, since some people may not want to apply due to concerns regarding the proposed public charge policy. HFS will provide an update during the next meeting.

14. Adjournment:

The meeting was adjourned at 12:03 p.m. The next meeting is scheduled for February 7th, 2019, between 10:00 a.m. and 12:00 p.m.