

201 South Grand Avenue East
Springfield, Illinois 62763-0002

Telephone: (217) 782-1200
TTY: (800) 526-5812

Honorable Senator Mattie Hunter, Chairperson
Honorable Senator Michael Connelly, Minority Spokesperson
Honorable Representative Robyn Gable, Chairperson
Honorable Representative JoAnne D. Osmond, Republican Spokesperson

Dear Honorable Members of the House and Human Services Committee:

Enclosed please find the first interim report on the expedited long term care eligibility determination and enrollment system required in changes to the Illinois Public Aid Code by PA 98-104.

The next interim report is due to you no later than February 1, 2014. Subsequent updates will be included in this Department's annual Medicaid report beginning with the Fiscal Year 2014 report.

I look forward to working with you, Department of Human Services Secretary Michelle Saddler and Department on Aging Director John Holton to assure our three agencies establish procedures and secure the resources necessary to fulfill the requirements of the new law.

Sincerely,

Julie Hamos

cc: Michelle R.B. Saddler, Secretary, DHS
John K. Holton, Director, DoA
Bradley K. Hart, Inspector General, HFS

Status Report on Expedited Long Term Care Eligibility Determination and Enrollment Pursuant to 305 ILCS 5/11-5.4

September 1, 2013

Statutory Basis

PA 98-104 added a new section, 305 ILCS 5/11-5.4, to the Public Aid Code setting forth requirements for a system to support expedited determination of eligibility for and enrollment in Medicaid covered long term care.

The new law provides that the expedited long-term care eligibility determination and enrollment system shall reduce long-term care eligibility determinations to 90 days or fewer by July 1, 2014 and shall streamline the long-term care enrollment process. The law further provides that establishment of the system shall be a joint venture of the Department of Human Services (DHS), Healthcare and Family Services (HFS) and the Department on Aging (DoA).

Governor Quinn signed the new law on July 22, 2013. As the law also required that a lead agency be named within 30 days of its effective date, on August 21, 2013 the Governor named HFS as the lead agency for the full implementation of the establishment and maintenance of the long-term care eligibility determination and enrollment system. HFS will work in close collaboration with DHS and DoA to fulfill the requirements of the law.

Overall Approach

Many of the requirements established for the long-term care eligibility determination and enrollment system will be achieved most effectively by taking advantage of other projects currently underway. In particular, these include:

- Development and deployment of a new Integrated Eligibility System and its online self-service portal, ABE (Application for Benefits Eligibility) this year with the second phase of the system implementation scheduled for the summer of 2015;
- Design and deployment of a new Medicaid Management Information System over the next several years; and
- Development of integrated systems and processes designed under the Balancing Incentive Program to support the delivery of long term support services.

Current Status of the Outcomes Established in the Law

1. *The system shall include an enhanced eligibility determination tracking system accessible to providers.*

Status: ABE is being designed to support online submission of applications for benefits and to allow necessary documents to be uploaded electronically with the application. Providers, including nursing facilities and other providers of long term support services, will have the opportunity to create their own organizational accounts through which they can assist individuals to submit applications for Medicaid and long term care services.

Basic provider account functionality will be available later this fall. Detailed application tracking ability will be available when the second phase of IES is implemented in 2015.

2. *The system will include a centralized application review and eligibility determination with all applicants reviewed within 90 days of receipt by the State of a complete application.*

Status: The state acknowledges that a serious backlog in long term care eligibility processing exists. Several actions currently underway will begin to address the problem this year.

Long term care eligibility determinations are currently dispersed among many DHS offices across the state. Long term care cases in Cook County are handled in one centralized office. DHS is moving to centralize long term care cases in two hubs, one in Cook County and one downstate. This will increase accuracy and efficiency by dedicating workers to develop long term care expertise and to focus exclusively on long term care cases. DHS is also working to hire a significant number of additional caseworkers to process the backlog of applications for long term care and other programs.

IES is being designed to automate components of long term care eligibility processing that currently require manual calculations by caseworkers. This new component of the system will be implemented later this year.

As described in #3 below, during 2011-12, the HFS OIG expanded its Long Term Care-Asset Discovery Investigation Unit to be able to receive referrals from DHS that involve assets and therefore require enhanced investigation and review. Special processes currently are being put in place to eliminate past backlogs to be able to comply with the new law.

3. *If the Department of Healthcare and Family Services' Office of the Inspector General determines that there is a likelihood that a non-allowable transfer of assets has occurred, and the facility in which the applicant resides is notified, an extension of up to 90 days shall be permissible.*

believes this is a major step toward ensuring the timely and accurate submission of eligibility, financial and demographic information necessary to support payment.

6. *The lead agency shall file interim reports with the Chairs and Minority Spokespersons of the House and Senate Human Services Committees no later than September 1, 2013 and on February 1, 2014. The Department of Healthcare and Family Services shall include in the annual Medicaid report for State Fiscal Year 2014 and every fiscal year thereafter information concerning implementation of the provisions of this Section.*

Status: This report satisfies the first reporting requirement of PA 98-104.

Conclusion

HFS and its partner agencies are committed to improving the services provided to our clients who need long term support services and the providers and plan who serve them.