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Pat Quinn, Governor
Julie Hamos, Director

E-news

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Illinois Department of Healthcare and Family Services

Welcome to another periodic edition of **HFS e-news** to keep you updated on program changes. To register for future editions, please visit [HFS E-News Online Registration](http://www.hfs.illinois.gov/eneews) or download for others who might be interested by visiting: [hfs.illinois.gov/eneews](http://www.hfs.illinois.gov/eneews). If you are a Medicaid client, this newsletter is not the official notification of any changes that may impact you, and you do not have to respond in any way. This is general information for the public.

Thank you,

Julie Hamos

Director, HFS

Update: Accountable Care Entities

As you know, under [P.A. 98-104 \(pdf\)](#), the State posted a solicitation for new Accountable Care Entities (ACE). An Accountable Care Entity (ACE) is a new model of an integrated delivery system that will be organized by providers. The extensive [questions and answers to the solicitation that were presented either via email or at the August webinar \(pdf\)](#) can be viewed on the HFS website.

For any potential bidder, the Letter of Intent for data is mandatory and is due by **September 30, 2013**. The LOI is non-binding, but it is critical that any potential ACE have the opportunity to review and understand complete claims data for the population they plan to manage.

Get Covered Illinois!

The State unveiled "Get Covered Illinois" as the official brand name for our new health insurance marketplace, where residents will be able to find quality and affordable health insurance coverage under the Affordable Care Act, or to be directed to Medicaid. The name is both a call-to-action and a description of the service this marketplace expects to provide through web, phone and personal interactions with customers beginning October 1, 2013.

The brand tagline reads "The Official Health Marketplace." It is important to remind your constituencies, members, neighbors and family to look for the word "official." There will be many advertisements enticing the public to buy health insurance from individual health plans, from private exchanges, or even from scammers. Those who want to qualify for a federal subsidy to help pay for health insurance premiums, based on income, will **only** be able to get this federal help from the "official" state marketplace or federal exchange.

The *Get Covered Illinois* website will screen consumers with a few basic questions, and then direct them

either to the Health Insurance Exchange (operated by the federal government) to shop for private health insurance being offered in Illinois, with subsidies if applicable, or to the Medicaid site for low-income Illinois residents. Illinois Medicaid has a modern new eligibility system, ready on October 1, 2013, with the website named ABE – Application for Benefits Eligibility – where people can also enroll for SNAP (food stamps) and cash assistance. ABE will be found at ABE.illinois.gov on and after October 1, 2013.

Illinois State Health Care Innovation Plan Draft Released

The draft *Illinois State Health Care Innovation Plan* for the Alliance for Health, dated September 18, 2013, is now available for comment. This very significant 213-page report sets forth a vision for health system transformation in Illinois, organized around five major transformation drivers: (1) clinical integration and supporting payment reform innovations; (2) additional integration innovations for people with specific needs; (3) population health innovations; (4) workforce innovations; and (5) “learning health care system” innovation. To read the full report [Illinois State Health Care Innovation Plan \(pdf\)](#).

To read all of the work produced by the Alliance for Health, go to [Healthcare in Illinois website](#) and select the Alliance tab.

Report on Detoxification Services Released

The *Save Medicaid Access Resources Together* (SMART) Act ([P.A. 97-689 \(pdf\)](#)) made two changes in Illinois Medicaid for clients with substance use disorders who are admitted to hospitals for in-patient detoxification services. First, the new law placed limitations and required concurrent review for every hospital detoxification stay within 60 days of a previous detoxification stay. Second, it required the Department of Healthcare and Family Services (HFS), along with our sister agency, the Division of Alcoholism and Substance Abuse (DASA) of the Department of Human Services (DHS), “to convene a workgroup to develop recommendations for quality standards, diversion to other settings, and admission criteria for patients who need inpatient detoxification.” Pursuant to [P.A. 98-104 \(pdf\)](#) and stakeholder involvement, these recommendations are being published.

To read the [Report on the Detoxification Services Planning Process and Resulting Recommendations \(pdf\)](#).

Please feel free to ask questions or share comments by e-mailing: hfs.webmaster@illinois.gov