Illinois Department of Healthcare and Family Services
Public Education Subcommittee
Approved Final Meeting Minutes
October 8, 2015.

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

Committee Members Present
Kathy Chan, Cook County Health & Hospitals System
Margaret Stapleton, Shriver Center
Sue Vega, Alivio Medical Center (by phone)
Sherie Arriazola, TASC
Erin Weir, Age Options
Nadeen Israel, EverThrive Illinois
Hardy Ware, East Side Health District (by phone)
Brittany Ward, Primo Center for WC
Ramon Gardenhire, AFC

Committee Members Absent
Connie Schiele, HSTP
Sergio Obregon, CPS
John Jansa, WKG Advisory

Interested Parties
Deb Matthews, DSCC
Kelly Carter, IPHCA
Jill Hayden, BCBS IL
Caroline Chapman, LAF
Dan Rabbitt, Heartland Alliance
Kim Burke, Lake County Health Department
Ava Shelby, FHN
Michael Lafond, Abbott
Ron Ryan, ISMS
Anita Stewart, BCBSIL
Susan Melczer, MCHC
Alison Coogan, Legal Assistance Foundation
Karina Gonzalez, Molina Healthcare
David Vindler, Molina Healthcare
Paula Dillon, Illinois Hospital Association
Luvia Quiñones, ICIRR
Tom Wilson, Access Living
Sandy DeLeon, Once of Prevention Fund
Maura Flanary, Shield HealthCare
Vivian Gonzalez, Illinois Health Connect
Joe Cini, Illinois Health Connect
Enrique Salgado, Harmony Well Care
Lynn Seermon, Consultant
Mikal L. Sutton, Cigna Health Spring
Mark Chudzinki, Get Covered Illinois (GCI)

HFS Staff
Lauren Polite
Robert Mendonsa
Laura Phelan
Bridgett Stone
Veronica Archundia

Interested Parties (by phone)
David Hurter, Presence Health Partners
Regina Porter, Next Level Health
Priti Patel, VNA Health Care
Cheryl O’Donoghue, VNA Health Care
Lynne Warszalek, Stickney Health D
Tammy Spoon, VNA Health Care
Diane Montañez, North Shore Physician A
Staci Wilson, Illinois Chamber of Commerce
Hetal Patel, Illinicare Health
Jeremy T. Pincus, Advocate
Judy Bowlby, Liberty Dental Plan
Illinois Department of Healthcare and Family Services  
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1. **Introductions**  
Kathy Chan, from CCHHS, chaired the meeting. Attendees in Chicago and Springfield introduced themselves.

2. **Review of Minutes**  
Ramon Gardenhire made a motion to approve the minutes from the meeting held on August 13th, and it was seconded by Nadeen Israel. The minutes were unanimously approved.

3. **Care Coordination Update**  
Robert Mendonsa reported that HFS continues making progress in relation to the ACE and CCE transitions, which have occurred following two guiding principles: first, to minimize clients’ disruptions, and, second, to the extent possible, preserve and enhance the state current models with respect the MCOs. He added that most of these transitions are currently occurring and will continue through January, 2016, and may continue at a limited rate beyond that date.

Mr. Mendonsa also noted that Health Alliance MMAI has given notification of termination of its contract at the end of the year for the Medicare-Medicaid Alignment Initiative (MMAI). He stated that HFS will send a letter to providers detailing the options that clients have which include: getting enrolled with Molina Healthcare of Illinois, Medicare Advantage plan, or fee-for-service. He added that the Health Alliance Connect will remain an option for clients previously enrolled in the “Integrated Care Program Enrollment (ICP), Family Health plans (FHP), and ACA Adults Enrollments (ACA).

**Note:** The HFS informational notice for providers and the notification issued by Health Alliance, which was sent to enrollees can be found at:

- [http://www.hfs.illinois.gov/assets/102915n.pdf](http://www.hfs.illinois.gov/assets/102915n.pdf)
- [http://www.illinois.gov/hfs/SiteCollectionDocuments/HealthAllianceConnectMMAITerminationNotice.pdf](http://www.illinois.gov/hfs/SiteCollectionDocuments/HealthAllianceConnectMMAITerminationNotice.pdf)

Lauren Polite indicated that HFS has posted sample letters of the notifications that clients are receiving to explain the ACE and CCE transitions, and welcome members to the corresponding MCOs that will provide care coordination. The letters make clear that clients have 90 days to change plans. Clients will receive a new Member ID card and Handbook from the MCO. Clients should contact the Client Enrollment Services or visit the HFS web site for information about plan options and how to make a change. Sample letters can be found in the HFS web site, under the care coordination member transition letters:

- [http://www.illinois.gov/hfs/MedicalProviders/cc/Pages/default.aspx](http://www.illinois.gov/hfs/MedicalProviders/cc/Pages/default.aspx)

Luvia Quiñones and Nadeen Israel suggested making these letters available in Spanish translation. HFS staff will follow-up with the corresponding plans to meet this request.

4. **Marketplace Open Enrollment**

Mark Chudzinski from Get Covered Illinois (GCI) provided an overview concerning the efforts being directed toward the Marketplace third open enrollment period. He stated that in order to improve efficiency in outreach strategies, the GCI team has established ten regions, based on factors such as: geographic boundaries, county lines, demographics, population, number of uninsured, and Public Use Microdata Areas (PUMAS). Through research, the GCI team has identified 1.8 million uninsured individuals in Illinois, with income that range between 138% and 400% of the Federal Poverty Level. These individuals tend to be Latino, males, ages 26-34. Attachment number one contains the presentation distributed to committee members during the meeting.

Mr. Chudzinski indicated there will be four types of assisters operating in Illinois, which are Navigators, Certified Assistants Counselors (CACs), Assistants, Agents and Brokers. For the third year
of open enrollment, there is $5M available, which will be distributed among 10 prime grantees and 32 sub-grantees. A total of 42 community organizations will be receiving these grants directly or indirectly. Each of the ten regions will be staffed by a Regional Outreach Coordinator (ROC), and it is anticipated that 157 in-person counselors will be hired for the open enrollment period that will last three month, November 1st, 2015 through January 31st, 2016. In addition, CGI will have a Help Desk available to provide consumer information and offer referrals to the Assisters, the ABE Help Desk, and the Federal Health Desk. Mr. Chudzinski stated that, the goal is to create the appropriate channels for community engagement, outreach opportunities, and enrollment activities.

5. **Information Item: Preview of New HFS Website Design for Clients**

John Hoffman shared a preview displaying the new HFS website with the committee members. He thanked interested parties and members of the committee for their input, comments, and suggestions toward the design of the HFS website, about which over 200 comments had been received.

Mr. Hoffman indicated that the main objective of this project is to create an online development that is more user-friendly for the clients, providers, and the general public. He noted that, within the next two or three weeks, the department will offer “a test drive” of the new redevelopment HFS website. It will be available at:

http://www.illinois.gov/hfs/Pages/default.aspx

Committee members and interested parties were encouraged to provide comments, questions, and concerns to:

hfs.webmaster@illinois.gov

6. **Illinois Medicaid Redetermination Project (IMRP) Enhanced Eligibility Verification (EEV) Update**

In response to a request expressed during the previous meeting, John Spears discussed the appropriate use of the “Authorization to Share Information” form (attachment two), which advocates can use when contacting IMRP. He noted that, it is acceptable to use this form even in situations without having the client present. He also discussed the appropriate use of the “Approved Representative Consent” form (attachment three) which can be used in order to submit inquiries to the FCRC.

Mr. Spears reported on the combined efforts that HFS and DHS have made in processing the backlog of cases that require redetermination, and ensure that going forward all cases comply with the annual review. He answered all the questions asked and extensively discussed the concerns that several committee members expressed regarding the elevated number of clients who are being canceled during the redetermination process. Lauren Politie commented that the department is planning to establish a central processing unit for all redeterminations, which includes SNAP, cash, and medical benefits, in order to help facilitate the process. More details will be shared with the committee as information becomes available.

Chairwoman Kathy Chan stated that there appears to be consensus among members of the committee and interests parties that several barriers are preventing clients from successfully completing their redeterminations, such as delays in the mail delivery of their redetermination forms and timely reporting of address changes that prevent clients from receiving their redetermination forms, among other aspects. Ms. Chan recommended keeping this agenda item for the next meeting and allocating enough time to properly discuss the strategies that can help increase client redetermination compliance.
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7. ACA/Health Care Reform Updates
   Application Processing
   Lauren Polite reported that the state is receiving an average of 18,000 applications per week and state workers are sufficiently processing them. As of September, 27th 2015, there are almost 40,000 pending applications, half of which are long-term care applications which remain pending, as the state is waiting to receive information about new or transferred resources. She added that the state of Illinois received a total of 1.1M applications from requestors for SNAP, cash assistance, and medical benefits for FY 2015.

   Integrated Eligibility System (IES) Phase Two Update
   Lauren Polite indicated that the Department has not yet made a decision regarding when phase two of IES will be implemented.

8. Open Discussion and Announcements
   Kathy Chan asked committee members to contact HFS staff to recommend any new agenda items, and it was agreed that an update on current agenda items should be provided during the next meeting.

8. Adjourn
   The meeting was adjourned at 12:11 p.m. The next meeting is scheduled for December 3, 2015, between 10:00 a.m. and 12:00 p.m.
Get Covered Illinois:
Open Enrollment 3 (OE3) Overview

Mark Chudzinski, Acting Director

October 8, 2015
Overview

1. Health Insurance Marketplace (HIM) Mission
2. ACA Origins
3. Federal Grants to IL HIM
4. OE1 + OE2 Enrollment Results
5. OE3 HIM Program Goals
6. OE3 Outreach: Target IL Populations
7. OE3 Outreach Program: 4 Core Elements
Health Insurance Marketplace (HIM) Mission

Encourage and facilitate the enrollment in certain health insurance plans of Illinois residents who are un-insured or under-insured, the cost of such coverage being fully or partially Federally-subsidized for persons with income below 400% of Federal Poverty Level (FPL).
Origins: Affordable Care Act (ACA)

- uninsured: 47 M in US; 1.8 M in IL
- Emergency room ("charity care"): $43 Bil. in 2008 (per ACA)
  - Inefficient use of healthcare resources
  - Care results not optimal
  - Indirectly subsidized by increasing cost of other patients/taxpayers

SOLUTION:
- Expand Medicaid to all below 138% FPL
- Offer tax subsidy for cost of private health insurance for all below 400% FPL
- IL one of 26 States that expanded Medicaid
- IL declared interest in establishing Exchange
Origins: Federal Partnership Exchanges

- Federal: 28
- State: 16
- Hybrid: 7 (inc. IL)

- State tasks:
  - QHP review
  - Consumer outreach

- Federal tasks:
  - Electronic enrollment
  - Taxpayer subsidies
## Federal “Establishment” Grants to IL HIM

<table>
<thead>
<tr>
<th>Stage</th>
<th>Award</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>$ Left</th>
<th>Used</th>
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<tbody>
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<td>1</td>
<td>$5,128,454</td>
<td>8/15/2011</td>
<td>8/15/2012</td>
<td>8/15/2013</td>
<td>NCE</td>
<td>closed</td>
<td>$1,958,526</td>
<td>62%</td>
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<td>2</td>
<td>$32,075,913</td>
<td>5/16/2012</td>
<td>5/16/2013</td>
<td>5/16/2014</td>
<td>5/16/2015</td>
<td>NCE 1</td>
<td>NCE 2</td>
<td>closed</td>
<td>$6,407,578</td>
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<tr>
<td>4</td>
<td>$10,089,170</td>
<td>12/22/2014</td>
<td>12/22/2015</td>
<td></td>
<td></td>
<td>$10,089,170</td>
<td></td>
<td>$10,089,170</td>
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<td>$163,117,058</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>$28,249,425</td>
<td>83%</td>
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</tbody>
</table>

- **GetCoveredIllinois**

  The Official Health Marketplace

**Page 6**
OE1 + OE2 Enrollment Results

<table>
<thead>
<tr>
<th>Enrollment</th>
<th>OE1</th>
<th>OE2</th>
</tr>
</thead>
<tbody>
<tr>
<td>In GCI Marketplace</td>
<td>217,492</td>
<td>349,487</td>
</tr>
<tr>
<td>with Federal Subsidy</td>
<td>77 %</td>
<td>78 %</td>
</tr>
<tr>
<td>In expanded Medicaid</td>
<td>405,000</td>
<td>598,289</td>
</tr>
<tr>
<td></td>
<td>622,492</td>
<td>947,776</td>
</tr>
</tbody>
</table>

Drop in Uninsured Rates (2013 - 2014)

Illinois: 15.5 % -> 11 % = 4.5 % drop
National: 17.3 % -> 13.8 % = 3.5 % drop
OE3 HIM Program Goals

1. Increase IL OE3 enrollment
2. Consumer education: promote optimal plan selection
3. Consumer education: promote use of plan benefits/ health literacy
4. Create public-private partnerships for longer term
OE3 Outreach: Target IL Populations

- uninsured Illinoisans between 138% and 400% of the Federal Poverty Line. Those consumers tend to be:
  1. Latino
  2. Male
  3. Ages 26 – 34

- Top 25 PUMAs identified

Coverage Gap
Hispanics account for a third of people in the U.S. without health insurance

2011 Share of the Total Population

- Hispanic: 17.3%
- Asian: 5.3%
- Black: 13.1%
- Non-Hispanic White: 64.3%

2011 Share of the Uninsured

- Hispanic: 33.0%
- Asian: 16.1%
- Black: 5.6%
- Non-Hispanic White: 45.3%

Top Five States by Number of Nonelderly Uninsured, 2010-11

- California: 7.2 million
  - Hispanic: 24%
  - White: 59%
  - Black: 13%
  - Other: 4%

- Texas: 6.1 million
  - Hispanic: 24%
  - White: 60%
  - Black: 6%
  - Other: 10%

- Florida: 3.8 million
  - Hispanic: 19%
  - White: 42%
  - Black: 25%
  - Other: 15%

Note: Percentages may not add to 100% due to rounding.
U.S. Census Bureau via Dept. of Health and Human Services (total population and uninsured); Kaiser Family Foundation analysis of Census Bureau data (states)
The Wall Street Journal, WSJ, 8/21/13
OE3 Outreach Program: 4 Core Elements

1. Assisters
2. Website
3. Help Desk
4. Media
Outreach Program: 1. Enrollment Assisters

- **Selected by IL:**
  - IL Assisters
  - Fed. Navigators
  - CACs
  - IL Agents/Brokers

- **Selected by Feds:**
  - Certified by IL DOI

- **Tasks:**
  - Facilitate consumer enrollment with IL ABE (Medicaid) or Fed HC.gov
  - Targeted consumer outreach
  - Provide consumer information/education
IL Assister Grants OE1 + OE2

OE1: Part-time IPCs allowed: approx. 550 individuals
OE2: Required FTE for IPCs: approx. 400 individuals

43 Awards Ending 6/2014 $ 26,340,983.22
32 Awards Ending 6/2015 $ 23,258,324.21
32 2-month Extension $ 5,472,546.85

$ 55,071,854.28
IL Assister Grants OE3

- Grant amount: $5,000,000
- 23 applicants
- Awarded Oct. 7, 2015:
  - 10 prime grantees, with
  - 32 sub-grantees
  - 42 community organizations
  - 157 in-person counsellors (IPCs)
Outreach Program: 2. GCI Website

- Tasks:
  - Screen consumers to transfer to IL ABE or Fed HC.gov to enroll
  - Facilitate consumer shopping with Plan Comparison Tool
  - Facilitate consumer appointments with IL Assisters with EA Connector
  - Provide consumer information/education
Outreach Program: 3. Help Desk

• Tasks:
  ➢ Referrals to IL Assisters, IL ABE help desk, Federal help desk
  ➢ Targeted consumer outreach (outbound calling campaigns)
  ➢ Provide consumer information/education
Help Desk Usage OE1 + OE2
Open Enrollment Weekly Totals for Period 1 vs Period 2
Outreach Program: 4. Media (advertising)

• Elements:
   TV/Radio
   Print
   Billboards
   Social Media (You-tube; Facebook; Twitter)

• Tasks:
  ➢ Targeted consumer outreach
  ➢ Provide consumer information/ education
GCI Marketing OE1 + OE2

• OE1 + OE2 IL media buy

  $ 17,209,254  8/16/2013 -  8/15/2014

  $ 13,168,878  8/15/2014 -  4/30/2015

  $ 30,378,132

• OE1: media statewide 1.7 billion impressions; 32 million views of GCI social videos; 676 broadcast stories generated

• OE2: TV media statewide 422 million impressions; 2.1 million GCI social media engagements; 779 broadcast stories generated
GCI Marketing OE3

✔️ Budget: $5,000,000
Questions?

- [https://getcovered.illinois.gov](https://getcovered.illinois.gov)
- GCI Help Desk: (866) 311-1119
- Mark Chudzinski, Acting Director: mark.chudzinski@illinois.gov
February 12, 2014

Dear HH_NAME (ARR_ENGLISH),

You asked us to share information about your case.
We need you to give us permission to share your information.

Here’s how to renew:
1. Please fill out the form that came with this letter, and then sign it.
2. Make a copy of the form to keep for your records.
3. Send your form to us one these ways:
   → Fax your form and proofs to 1-866-661-7025
   → Mail your form and proofs in the envelope that we sent you
   → E-mail your form and proofs to www.medredes.hfs.illinois.gov

What if you change your mind?
You may ask us to stop sharing at any time. If you want us to stop, you can use the same form.
Fill out Part 2 “Please STOP sharing my information” at the bottom of the form. Then sign your
name and write the date. Make a new copy of the form to keep and send the form to us.

What if you have questions?
Please visit www.hfs.illinois.gov/review or call us at 1-855-458-4945 (TTY: 1-855-694-5458).

Thank you,
Illinois Medicaid Redetermination

Questions? Call 1-855-458-4945 (TTY: 1-855-694-5458). The call is free!
Monday to Friday from 7 a.m. to 7:30 p.m. and Saturday from 8 a.m. to 1 p.m.
E-mail us at www.medredes.hfs.illinois.gov or send a fax to 1-866-661-7025.
Tenemos información en español. ¡Servicio de intérpretes gratis!
Llame al 1-855-458-4945.
Authorization to Share Information

Part 1: Please share my information

Fill out this part if you would like us to share information about your medical benefits with a person or organization. We will share information only with the people you write here.

<table>
<thead>
<tr>
<th>My name</th>
<th>Social Security number (you can choose not to write this)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please share my information with</td>
<td></td>
</tr>
</tbody>
</table>

When I sign below, I know that:

- This authorization will last as long as I keep getting health benefits or until I tell you to stop sharing my information.
- I can change my mind about sharing information by signing part 2 of this form and sending it back to you by mail or fax.
- My choice to share information about my case, or to stop sharing it, will not change what benefits I can get.
- I can keep a copy of this form or call 1-855-458-4945 to get a copy.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Date of Birth</td>
</tr>
</tbody>
</table>

Part 2: Please STOP sharing my information

Sign here if you change your mind and would like us to stop sharing your information. After you sign, mail or fax this form to us. Keep a copy.

I do not want you to share my information with the person or organization on this form.

| Signature | Date |

Mail: Illinois Medicaid Redetermination
      PO Box 1242
      Chicago, Illinois 60690-1242

Fax: 1-866-661-7025

Questions? Call 1-855-458-4945 (TTY: 1-855-694-5458). The call is free!
Monday to Friday from 7 a.m. to 7:30 p.m. and Saturday from 8 a.m. to 1 p.m.
E-mail us at www.medredes.hfs.illinois.gov or send a fax to 1-866-661-7025.
Tenemos información en español. ¡Servicio de intérpretes gratis!
Llame al 1-855-458-4945.
State of Illinois
Department of Human Services

APPROVED REPRESENTATIVE CONSENT FORM

APPROVED REPRESENTATIVE’S INFORMATION (PLEASE PRINT LEGIBLY OR TYPE)

Name: __________________________________________________________

Address: ________________________________________________________

City: ___________________________ State: __________ Zip Code: ______

Telephone Number: ________________________________

CLIENT SECTION

I want the person named above to apply for cash, medical and/or Food Stamp benefits for me and/or my family. I understand that I am still responsible for the information that my representative gives to the Department.

Client's Signature (or mark): ________________________________

Signature of Witness
(if client signed with a mark): ________________________________

Date: __________________________

REPRESENTATIVE SECTION

I have talked to the client about why they are signing this form. I (or the company I represent) will submit to the Illinois Department of Human Services a request for cash, medical, and/or Food Stamp benefits on their behalf. I have also told this client that DHS needs to have certain facts to make a correct decision on their eligibility for benefits.

I have told the client that they need to cooperate with DHS to obtain any needed verification(s) for the eligibility decision.

Representative’s Signature: ________________________________________

Relationship to Client: __________________________________________
## Children's Enrollment

### Enrolled Children FY2006-2014 #000s

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<th>End of FY</th>
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<td>2006</td>
<td>1,215</td>
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<tr>
<td>2012</td>
<td>1,697</td>
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<tr>
<td>2013</td>
<td>1,647</td>
</tr>
<tr>
<td>2014</td>
<td>1,572</td>
</tr>
</tbody>
</table>

### Enrolled Children End of FY06-14 #000s

![Graph showing enrollment trend from FY2006 to FY2014](image)

### Enrolled Children by Month #000s

![Graph showing monthly enrollment from Jan 2012 to Dec 2015](image)

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**HFS October 2015**