# IL HIE Medicaid Work Group
# Meeting Notes
# August 6, 2012

Attendees (by phone):

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| Dave Barnes | Department of Healthcare and Family Services (HFS) |
| Kelly Carter | Illinois Primary Health Care Association |
| Connie Christen | Department of Healthcare and Family Services |
| Debra Clemons | Department of Healthcare and Family Services |
| Patrick Gallagher | Illinois State Medical Society |
| Andrew Garrett | Department of Healthcare and Family Services |
| Julie Glen | Loyola University Medical Center |
| Peter Ingram | Sinai Health System |
| Vince Keenan | Illinois Academy of Family Physicians |
| Mike Koetting | Department of Healthcare and Family Services |
| John Lekich | Office of Health Information Technology |
| Elizabeth McKnight | Chicago Health Information Technology Regional Extension Center |
| Susan Melczer | Metropolitan Chicago Healthcare Council |
| Renee Perry | Department of Healthcare and Family Services |
| Cathy Potter | Southern Illinois University Health Care |
| Mary Ring | Illinois Critical Access Hospital Network |
| Amanda Schmidt | University of Chicago Medicine |
| JoAnn Spoor | Illinois Hospital Association |
| Theresa Walunas | Chicago Health Information Technology Regional Extension Center |
| Matt Werner | Academic Medical Centers |

1. **Review of Minutes**
   The group approved meeting minutes from the June 25, July 9, and July 23, 2012 calls.

2. **Electronic Health Records (EHR) /Provider Incentive Program (PIP) Status Update**
   - **Payments to date (8/3/12):**
     *1,251 Eligible Professionals (EPs) - $26,371,260*
     *35 Eligible Hospitals (EHs) - $53,936,364*
     *Total to date: $80,307,624*

**Renee Perry** reviewed the number and amounts paid to EPs and EHs.

3. **Pre-payment Audit Process**
   - **Attestations in work queue (8/3/12):**
     *Eligible Professionals – 1,391*
     *2011 – 1,097*
     *2012 – 294*
     *Eligible Hospitals - 84*
     *2011 – 63*
     *2012 – 21*

Renee reviewed the number of attestations in the work queue.

The Centers for Medicare and Medicaid Services (CMS) recently informed Renee that HFS must close out payment year 2011 as quickly as possible. CMS will do whatever they need to help HFS make that happen.

Renee spoke to CMS regarding one of HFS's proposed audit strategies for hospitals and CMS verbally approved it. She will send the request and receive approval in writing from them. A list of the specific hospitals and their 90-day date range for Medicaid patient volume was sent to other HFS staff that is assisting in the implementation of the strategy. Determination letters that include the payment amount calculated by HFS will go to the hospitals to find out if they are in agreement. CMS has not yet approved the audit methodology submitted for EPs.

There may be a shorter appeal time for 2011 so that the payments can be processed more quickly. HFS is focusing on processing hospital attestations first to stay in line with their Medicare attestations. EHs have until December 31, 2012 to attest for the 2012 program year and EPs have until March 31, 2013.

**Patrick Gallagher** inquired about how Illinois ranks compared to other states in processing provider incentive payments. Renee said that it depends on the other states budgets. A lot of states have hired contractors to perform the work and others have more staff resources available to them. Indiana staff has said that it is very labor intensive and they had to work one-on-one with hospitals. 13 states have plug and play electronic health record systems.

Peter asked how this work group can help and Renee said it would be good for hospital staff to get familiar with the calculation worksheet submitted for their hospital.

**4. Payment Year 2 – Meaningful Use**

Renee had no new information to report. She did indicate that she received no comments from this work group regarding the screen shots for Meaningful Use.

Meeting adjourned. The next call is scheduled on Monday, August 20, 2012.