MEDICAID ADVISORY COMMITTEE (MAC)

> February 3, 2023 VIRTUAL WebEx Meeting 10AM – 12PM



Illinois Department of Healthcare and Family Services



OUR VISION FOR THE FUTURE

We improve lives.

- > We address social and structural determinants of health.
- We empower customers to maximize their health and well being.
- We provide consistent, responive service to our colleagues and customers.
- We make equity the foundation of everything we do.

This is possible because:

We value our staff as our greatest asset.

We do this by:

Fully staffing a diverse workforce whose skills and experiences strengthen HFS.

- Ensuring all staff and systems work together.
- Maintaining a positive workplace where strong teams contribute, grow and stay.
- Providing exceptional training programs that develop and support all employees.

We are always improving.

We do this by:

Having specific and measurable goals and using analytics to improve outcomes.

Using technology and interagency collaboration to maximize efficiency and impact.

Learning from successes and failures.

We inspire public confidence.

We do this by:

Using research and analytics to drive policy and shape legislative initiatives.

Clearly communicating the impacts of our work.

Being responsible stewards of public resources.

Staying focused on our goals.

Welcome To The MAC

The Medicaid Advisory Committee (MAC) advises the Department of Healthcare and Family Services with respect to policy and planning related to the health and medical services provided under the department's <u>Medical</u> <u>Programs</u> including Medical Assistance, <u>All</u> <u>Kids</u> and <u>FamilyCare</u> pursuant to federal Medicaid requirements established at 42 CFR 431.12.



Presenter: Howard Peters, MAC Designee

House Keeping

- Meeting basics
 - Please note, this meeting is being recorded. To ensure accurate records, please type your name, organization, and email address into the chat.
 - If possible, members are asked to attend meetings with their camera's turned on, however, if you called in, please note all meeting materials referenced today will be made available to you on the MAC website following this meeting. If you need assistance accessing this material, please email <u>Melisha.Bansa@Illinois.gov</u>.
 - If you have questions during the meeting, please contact the Host. Patience please, a member of our team will get back to you between now and the next meeting.
 - Please Mute your audio throughout the duration of this WebEx meeting, except when speaking. When speaking or voting (committee members only) please state your name.
 - Please note that HFS staff may mute participants to minimize disruptive noise or feedback.
 - Patience, please some committee members, staff, and participants are new to MAC proceedings.
 - If you are a presenter and wish to be granted presenter rights during your presentation, please use the chat function to contact the host. When presenting, please say "next", to advance to the next slide in your presentation
- HFS is committed to hosting meetings that are accessible and ADA compliant. Closed captioning will be provided. Please email <u>Melisha.Bansa@Illinois.gov</u> in advance to report any requests or accommodations you may require or use the chat to alert us of challenges during a meeting.
- Minutes of the prior meeting and relevant meeting materials have been circulated to subcommittee members in advance of this session. Once approved, they will be posted to the website.



Presenter: Melishia Bansa, Special Assistant to Director of HFS 4

Agenda

- I. Call to order
- **II.** Roll call of Committee Members
- III. Introduction of HFS staff
- **IV.** Review and Approval of Meeting Minutes
- V. Healthcare & Family Services Executive Report
- VI. Subcommittee Reports & Recommendations
- **VII.** Public Comments
- VIII. Additional Business: Old & New
- IX. Adjournment



Facilitator(s) : Howard Peters, MAC Designee Melishia Bansa, Special Assistant to Director of HFS

V. Healthcare & Family Services Executive Report



V.A. Public Health Emergency

1. Flexibilities



End of Continuous Coverage, End of PHE

- White House announced this week that they will let the PHE expire on May 11, 2023.
- In December, Congress passed Consolidated Appropriations Act, which delinked certain Medicaid provisions from PHE:
 - Ends Continuous Coverage Requirement effective March 31, 2023.
 - Phases out enhanced federal match



Medicaid State Plan Amendment PHE Flexibilities

 When the PHE ends, HFS has the option to continue some PHE flexibilities during the PHE Unwinding Period.

Expiring	Extend During PHE Unwinding Period	Required to End	Required to Extend
Waiving signature	More frequent	COVID-19 Uninsured	Coverage of COVID-19
requirements for	presumptive eligibility	Program	testing, vaccine
prescription drugs	for adults, pregnant		administration, and
Executions to the	women, and children		treatment
Exceptions to the Preferred Drug List	Suspanded promiums		
Fielelieu Diug List	Suspended premiums for Health Benefits for		
Automatic renewals of	Workers with		
prior authorizations	Disabilities program		
without clinical review			
	Paying Medicare rates		
No asset test for Aged	for COVID-19 services		
Blind and Disabled			
Category of Eligibility	Paying FQHCs for		
	COVID-19 services		
Paying nursing facilities	outside of their		
enhanced rates for	traditional encounter		
isolation, quarantine,	rates		
and ventilator services			



Presenter: Kelly Cunningham, Medicaid Administrator 9

End of PHE: What's ending for Medicaid?

- A. COVID-19 Uninsured Program covering testing, vaccine administration, and some treatment services
- B. Other flexibilities for providers, eligibility, and delivery of care approved by CMS through State Plan Amendments, waivers, CMS concurrences, etc.
- C. Federal authority to continue some flexibilities like automatic (ex parte) redes



Expiration of Medicaid 1135 Waiver PHE Flexibilities

- 1135 waivers modify federal regulatory requirements to increase access to health care services during a PHE.
- HFS does not have the option to extend 1135 waiver flexibilities.
 - Expiration dates were established by CMS and range from expiring before the PHE ends to up to six months after the PHE ends.
- HFS will track the 1135 waiver end dates and provide notice to providers and customers when applicable.
- The state has the option of suspending the use of any 1135 waiver prior to the CMSestablished end date.

1135 Waiver Examples with CMS End Dates

Expire Prior to PHE	Expire When PHE Ends	Expire Three Months	Expire Six Months
Ending		After PHE Ends	After PHE Ends
Allow provision of	Temporarily suspend	HCBS flexibilities for	Waive provider
services in alternate	fee-for-service prior	assessments and	enrollment
settings (expires June 6,	authorization	evaluations of need	requirements
was only used by HFS	requirements		
and DPH for the			
McCormick Place Field	Extend pre-existing		
Hospital)	prior authorizations		
	Delay Pre-Admissions		
	Screening and Annual		
	Resident Review		
	(PASRR) for long term		
	care admissions		



Presenter: Kelly Cunningham, Medicaid Administrator 11

Appendix K Flexibilities

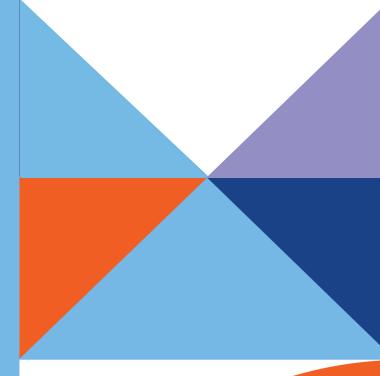
Appendix K allows for PHE flexibilities for Medicaid Home and Community Based Services waivers.

Expired Prior to PHE Ending	Expire When PHE Ends	Expire Six Months After PHE Ends	Flexibilities Illinois is Making Permanent
Adult day service and day habilitation centers reopened	Verbal consent	Waiver services for hospitalized customers	DRS waivers (Brain Injury, HIV/AIDS, Disabilities): Spouses/legally responsible adult provide personal care services, rate increases
		Increased respite hours	
All state agencies resumed face-to-face visits except			MFTD waiver: Licensed parent (RN, LPN) provide in- home shift nursing, rate increases, overtime for nurses
IDHS/DRS and MCOs			Elderly waiver: Rate increases, remove the requirement for Home Care Aides to have a high
Supervisory visits have resumed for nursing			school, GED, or one year employment in a comparable human services field, allow legally responsible adult to
and home care aides			be a paid caregiver
			DD waivers: Rate increases, virtual day services



V.A. Public Health Emergency

2. Continuous Coverage Requirements





Consolidated Appropriations Act, 2023 (CCA)

- Signed by President Biden on December 29, 2022
- Amends the FFCRA to delink the Medicaid Continuous Enrollment Requirement from the end of the COVID PHE.
 - Other Medicaid flexibilities remain tied to the end of the PHE.
- Phases out the enhanced federal match rate authorized by the FFCRA.

Impact on Continuous Enrollment

- Continuous Enrollment no longer tied to PHE end date.
- Medicaid continuous enrollment condition will end March 31, 2023.
 - Redeterminations will begin for Illinois medical customers in April 2023.
 - First group of redetermination letters will be mailed by May 1, 2023.
 - First date Medicaid customers could lose coverage is July 1, 2023.



V.A. Public Health Emergency

3. Telehealth





- A. Telehealth services were expanded significantly during the PHE to help support our customers and address some of the access to care challenges created by the PHE restrictions.
- B. The department continues to evaluate telehealth claims, provider utilization and implement program enhancements to better manage telehealth services across all programs.
- C. In July, 2022, the department implemented programming to accept CMS' newly created modifier to distinguish between video and phone services.
- D. At this time, all telehealth flexibilities remain in place until we better understand the impact to both service delivery systems and customer outcomes.



Presenter: Kelly Cunningham, Medicaid Administrator 16

V.A. Public Health Emergency 4. Communication | Outreach and Partnering Engagement





Communication | Outreach and Partnering Engagement

- A. Communication and Key Messaging
- **B. MCO Customer Communications**



Presenter: Evan Fazio, Communications Director 18

Communications and Key Messaging

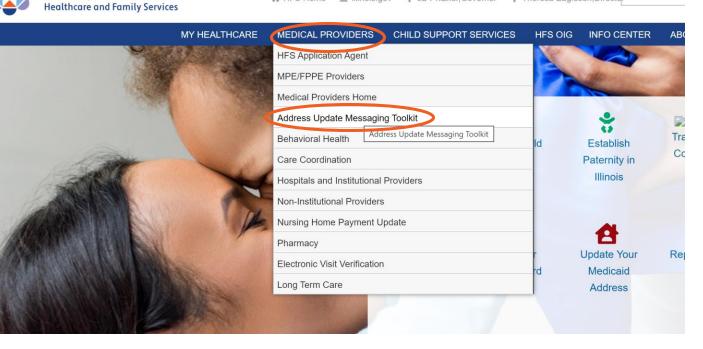
Phase 1: (NOW)
 Update your address
 Phase 2: (3-4/23)
 Ready to Renew

Toolkit: <u>hfs.illinois.gov</u>

HFS

llinois Department of

A HFS Home 🏛 Illinois.gov 🕴 JB Pritzker, Governor 🕴 Theresa Eagleson, Director Search this site





Phase 2 Ready to Renew





Presenter: Evan Fazio, Communications Director

Audience + Messages

A. Medicaid Customers

- 1. Verify your address
- 2. Find your due date
- 3. Check your mail
- 4. Complete your renewal
- 5. Connect to coverage

B. External Stakeholders

- Healthcare providers, state agencies, application agents, schools, food banks, elected officials, community leaders, etc...
- Help Medicaid customers get ready to renew
- Use our outreach materials and messaging to talk to Medicaid customers about redeterminations



Ready to Renew Global Messaging

Got Medicaid? Get ready to renew! Manage your case at <u>abe.illinois.gov</u>.

Illinois is checking to see if you are still eligible for Medicaid. Here's what you need to do now:

Click Manage My Case at <u>abe.illinois.gov</u> to:

- Verify your mailing address under 'contact us.'
- Find your due date (also called redetermination date) in your 'benefit details.'

Watch your mail and complete your renewal right away.

If you are no longer eligible for Medicaid, connect to coverage at work or through the official Affordable Care Act marketplace for Illinois, <u>GetCoveredIllinois.gov</u>.

Call 1-800-843-6154 for help with your renewal.



Targeted Outreach to Medicaid Customers

Verify your address | | Find your due date | Check your mail | Complete your renewal | Connect to coverage

HFS/DHS

- Paid Advertising
- Social (organic)
- •News Media
- •ABE Texts
- •TV/Radio PSAs

•Website

- Messaging toolkit +
- Institutional outreach

In Development

- Salesforce Marketing Cloud
 - Email
 - Social Media (Paid)
- Paid advertising campaign



Targeted Outreach to Medicaid Customers

Verify your address | | Find your due date | Check your mail | Complete your renewal| Connect to coverage

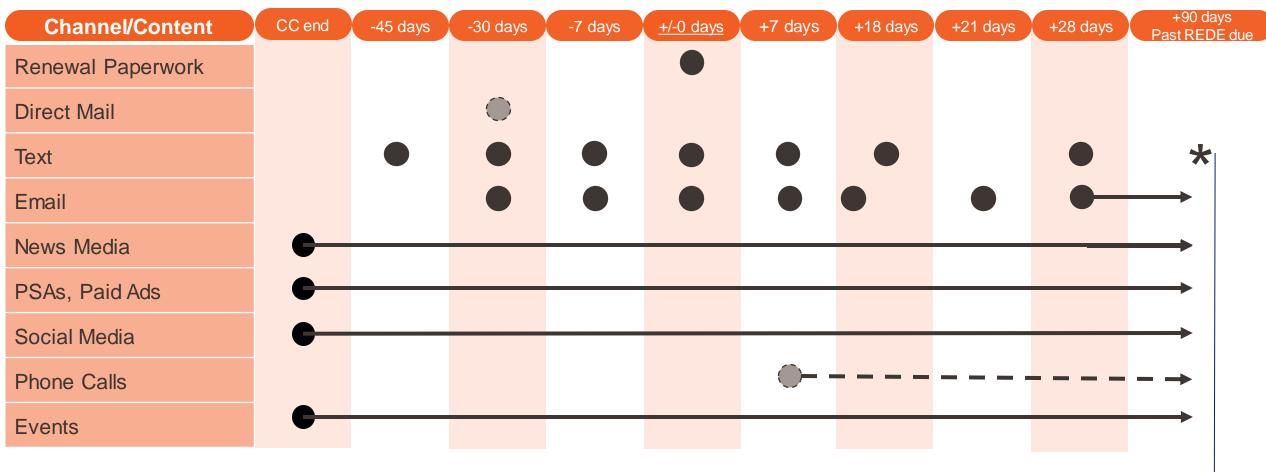
MCOs

- Increased data sharing with HFS to target customers who are due
- Phone Calls
- Events
- Mailers
- Social: Organic + paid
- IVRs
- Emails
- Texts
- Provider tools (MEDI, MyChart, etc)



Customer Communication

Sample timeline in relation to redetermination print date



► HFS partner activity (estimated timeline)

*3rd day of month REDE was due and not received



Presenter: Evan Fazio, Communications Director 25

Paid Media Campaign: In contract review

- Statewide
- Targeted
- Omnichannel
- Yearlong
- Multilingual





Presenter: Evan Fazio, Communications Director 26

V.B. Innovations

1. Healthcare Transformation Collaboratives Program Update









A. Presentation from Medicaid Innovation Collaborative (MIC)

Introduction of Brandi Clark, Vice President, Digital Care, OSF OnCall



Presenter: Kimberly McCullough-Starks, Deputy Director 28





Medicaid Advisory Committee Meeting February 3rd 2023 Brandi Clark

February 3, 2023

MEDICAID INNOVATION COLLABORATIVE











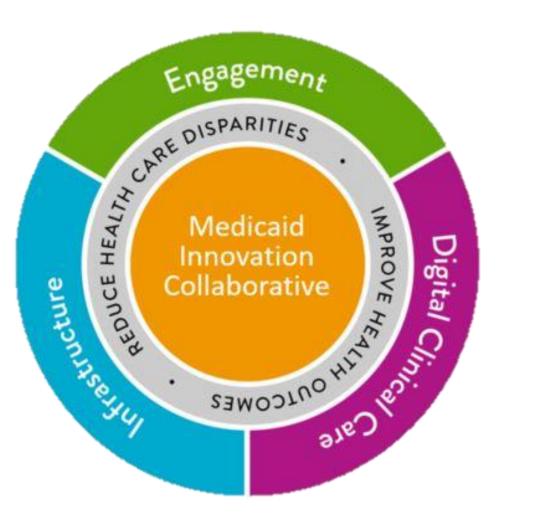


MiC

Funds for the Medicaid Innovation Collaborative (MIC) come from the Illinois Department of Health and FamilyServices / Healthcare Transformations Collaboratives. MIC will radicallytransform Medicaid delivery in Central Illinois, using innovation to improve access to care, improve healthcare outcomes, and address unmet needs. MIC partners—which serve our communities' most vulnerable—are shown to the right.

MEDICAID INNOVATION COLLABORATIVE

MIC VISION



• MEDICAID INNOVATION COLLABORATIVE:

Medicaid patients, Federally Qualified Health Centers, community-based organizations and OSF OnCall Digital Health are partnering together to transform Medicaid delivery in Illinois by improving quality, increasing access, and addressing health disparities.

- **ENGAGEMENT:** We are building engagement through continuous listening and feedback, flexibility and agility based on neighborhood and community needs and building trust by always being available.
- **INFRASTRUCTURE:** We are building technology platforms, using frictionless integration, predictive analytics, community health worker workforce training, and mobile technology vans.
- **DIGITAL CLINICAL CARE:** We will utilize chronic disease management, digital wrap-around services (remote patient monitoring), deploy digital behavioral health services and digital prenatal and postpartum care programs, cancer screenings and virtual care 24/7/365.



Medicaid Innovation Collaborative

WESTERN REGION

OSF HealthCare Saint Anthony Medical Center Rockford, Illinois

OSF HealthCare Saint Paul Medical Center *Mendota, Illinois*

OSF HealthCare Saint Elizabeth Medical Center *Ottawa, Illinois*

OSF HealthCare Saint Clare Medical Center *Princeton, Illinois*

OSF HealthCare Saint Luke Medical Center *Kewanee, Illinois*

OSF HealthCare St. Mary Medical Center Galesburg, Illinois

OSF HealthCare Holy Family Medical Center *Monmouth, Illinois* OSF HealthCare Saint Anthony's Health Center *Alton, Illinois*

Eagle View Community Health System *Oquawka, Illinois*

EASTERN REGION

OSF HealthCare St. Francis Hospital & Medical Group Escanaba, Michigan

OSF HealthCare Little Company of Mary Medical Center *Evergreen Park, Illinois*

OSF HealthCare Saint James – John W. Albrecht Medical Center *Pontiac, Illinois* OSF HealthCare St. Joseph Medical Center *Bloomington, Illinois*

Chestnut Health System Bloomington, Illinois

OSF HealthCare Heart of Mary Medical Center Urbana, Illinois

OSF HealthCare Sacred Heart Medical Center Danville, Illinois

Aunt Martha's Health & Wellness Danville, Illinois

CENTRAL REGION

OSF HealthCare Saint Francis Medical Center *Peoria, Illinois*

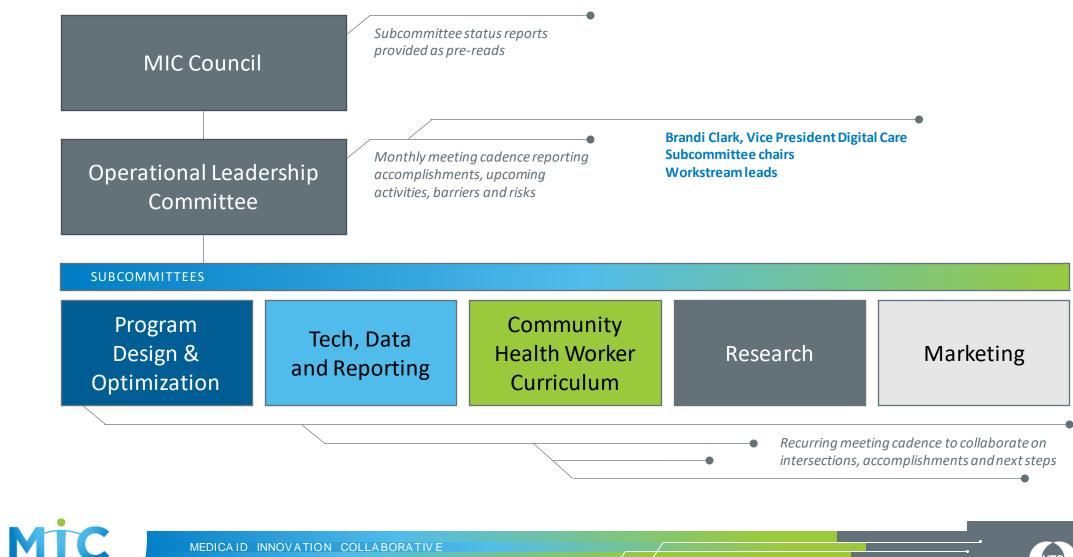
OSF HealthCare Children's Hospital of Illinois *Peoria, Illinois*

Heartland Health Services *Peoria, Illinois*



MEDICAID INNOVATION COLLABORATIVE

GOVERNANCE STRUCTURE



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MIC Year in Review – OSF OnCall

Behavioral Health	Cancer Screening	Maternal and Child Health	Health and Wellness	Chronic Disease Management RPM	Advanced Care Remote Patient Monitoring
Team Lead: Courtney	Team Lead: Melissa Shipp	Team Lead: Melinda Cooling	Team Lead: Karlen Sandall	Team Lead: Kara Roat	Team Lead: Beth Wharton
Team chartered and kicked off July 28, 2022	Initiated: February, 2022 Outreached: 4869 Screenings Scheduled: 479 Screenings Completed: 143	Initiated: August, 2022 Outreached: 1738 Enrolled: 760	Initiated: July, 2022 Outreached: 73000 Enrolled: 6779	Initiated: June, 2022 Outreached: 16733 Enrolled: 2252	Initiated: March, 2022 Outreached: 302 Enrolled: 179
Identified opportunities to connect patients to digital application(s) that provide education and/or support for stress, anxiety and depression , including remote monitoring and patient access to behavioral health navigators.	Using data-driven patient identification and digital outreach, connecting patients to cancer screening scheduling and services.	The Pregnancy & Postpartum program connects patients in order to receive timely prenatal care (starting in the first trimester) and postnatal care (up to 6 weeks postpartum), as well as 24/7, 365 access to a virtual clinical support team.	Connecting patients to a digital health and wellness application, the Digital Health Worker team provides education and/or support for patients enrolled in programs targeted at improving: Weight Diet Smoking cessation Exercise goals	The clinical remote monitoring team provides chronic disease management support 24/7, 365 for patients with chronic conditions such as: • Asthma • COPD • Diabetes • Heart failure • Hypertension	Connecting the highest risk patients with multiple chronic conditions to Advanced Care, patients have 24/7, 375 access to a clinician and routine evaluation by an interdisciplinary team. Patients are equipped with in-home Bluetooth monitoring devices for daily vitals, wellness surveys, and routine video visits.
	DETECTION STATE SCREEEEN IN GENERAL UMANAARD		<image/>		
	MEDICA ID INN	NOVATION COLLABORATIVE			HTC Healthcare

Healthcare Transformation Collaboradives HTC

MIC Year in Review – FQHC Partners

Aunt Martha's Health & Wellness, Danville	Chestnut Health Systems, Bloomington	Eagle View Community Health System, Oquawka	Heartland Health Services, Peoria/Tri-County
Kenny Martin-Ocasio, Senior Vice President - Community Integration	Dave Sharar, Chief Executive Officer	Shannon Courson, Executive Director	Sharon Adams, Chief Executive Officer
 Deploying workforce of CHWs Providing education and support to local community based organizations and promoting MIC programs Import to for the second s	 Colocation agreements for CHWs at local agencies including: Mid-Central Community Action The Baby Fold Home Sweet Home Shelter The Salvation Army: Safe Harbor Bloomington Housing Authority McLean County Health Department Implementing fluoride varnish program Installing dental eClinicalWorks module 	<text><list-item></list-item></text>	 Creating formal memorandums of understanding with 5 local homeless shelters Clinically trained CHWs on site at homeless shelters will use portable telediagnostic equipment, connecting shelter residents to a remote primary care provider Image: Constant of the second state of the second s





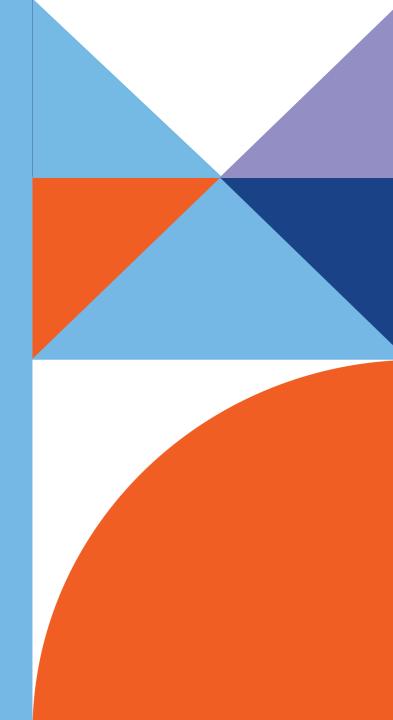
35

MEDICAID INNOVATION COLLABORATIVE

V.B. Innovations

2. PACE







- A. Of the 8 organizations competitively selected, four (4) of the PACE organizations made application to CMS at the end of December: (The remaining four (4) will apply in March 2023).
 o Kinship PACE of Illinois, LLC (West Chicago)
 - Lawndale Christian Health Center (West Chicago)
 - Esperanza Health Centers (South Chicago)
 - OSF HealthCare System (Peoria)
- B. All 8 PACE Organizations are working towards enrollment in June 2024.
- C. The State Plan Amendment was submitted and CMS has indicated minor changes.



Presenter: Kelly Cunningham, Medicaid Administrator 37

V.B. Innovations

3. Community Health Workers Status



Community Health Workers (CHW) *Building Healthier Communities and Achieving Health Equity through*

Community Engagement

Dr. Kenneth Campbell, DBe, MPH, MBA, MA Executive Assistant to the Director of IDPH



Community Health Workers (CHWs)



Common Titles for CHWs



- Case managers/Case workers
- Community health advocate
- Community health outreach worker
- Community health worker (CHW)
- Health ambassador
- Health educator
- Patient navigator
- Peer educator

Employment Settings



- Health plans (case management, utilization management)
- Behavioral health
- Community health departments
- FQHCs and community clinics
- Private practice medical groups
- County health care systems
- Hospitals:
 - ER
 - BH
 - NICU
 - Diabetes treatment center
 - Trauma centers

Community Health Worker Engagement Strategies

- Direct Patient Engagement:
 - Home visitation
 - Health coaching
 - Medication review
 - Transition of Care
- Performance and Outcomes Measures:
 - Caseloads, medical and social measures
 - Behavior change planning
 - Discharge planning
 - Capacity building & compliance outcomes
 - Patient navigation, referral services

> ADVOCACY

> NAVIGATION

> OUTREACH

COMMUNITY ENGAGEMENT

> ASSESSMENT & DATA COLLECTION



Community Health Worker Service Care Coordination

SERVICE COORDINATION:

- Identifying and accessing resources
- Overcoming barriers
- Making appropriate referrals
- > Helping create action plans and reach patient goals
- Coordinating with other services
- Following-up and tracking care and referral outcomes
- Tracking healthcare outcomes





Illinois Department of Public Health (IDPH)



Community Health Worker Review Board CHWRB



Office of Health Promotion (OHPm)





Community Health Worker Review Board

Seeking Community Health Worker Review Board Members

The Illinois Department of Health (IDPH) is seeking candidates from Central and Southern Illinois for its Community Health Worker (CHW) Review Board. This Board serves in an advisory capacity, providing critical input for the development of the Illinois Community Health Worker Certification Program.

Candidates representing the following categories are sought:

- Individuals who have experience providing CHW services
- Individuals who represent institutions that provide education/training to CHWs
- Individuals who have received support from a CHW

Meeting are held quarterly and are virtual

If interested, please complete an application by scanning the QR code or heading to:



<u>https://tiny.one/CHW</u> <u>BoardMember</u>

Email the completed application and any questions to:

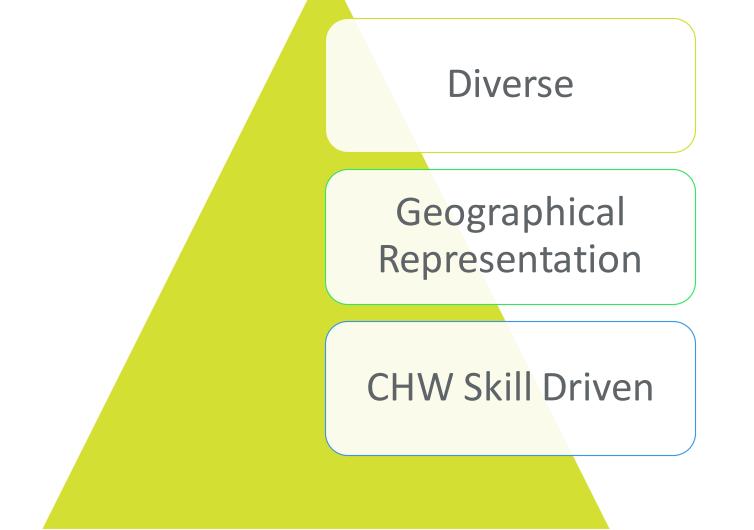
Allison Nickrent

Allison.Nickrent@illinois.gov





Community Health Worker Review Board







Next CHW Board Meeting *February 22, 2023 at 2:00-4:00 pm

*February 15, 2003 (Moving the date Up)



Moving Beyond Grants U.S. Department of Health and Human Services (HHS)



U.S. Department of Health and Human Services (HHS)

Enhancing the health & wellbeing of all Americans

Hospital CFO Report

HHS awarded Sinai Chicago a nearly \$3 million grant to fund the expansion of the Sinai Urban Health Institute's community health worker training program.

The HHS grants are a new multiyear program to support training and apprenticeship initiatives for an estimated 13,000 community health workers across the country, according to an Oct. 6 news release.

"Sinai Chicago and SUHI have been longtime leaders in advancing health equity efforts, especially through expanding career pathways and employment opportunities for CHWs. This grant allows us to expand the impact of our work and put more trained and supported CHWs in

Sinai Chicago receives \$3M to expand community health workforce

Nathan Tucker - Thursday, October 6th, 2022

U.S. Department of Health and Human Services (HHS)

Enhancing the health & wellbeing of all Americans

Hospital CFO Report

HHS is investing \$225.5 million in community health workers and \$40.7 million in public health scholarships.

According to a Sept. 30 news release, HHS awarded more than \$266 million in American Rescue Plan funding to grow the community and public health workforce.

"Patients depend on community and public health workers for care and medical information. These investments will equip community and public health workers with the skill sets needed to provide effective community outreach, increase access to care, and assist individuals with critical prevention and treatment services," said HHS Secretary Xavier Becerra.

The Community Health Worker Training Program awarded \$225.5 million to 83 grantees. The new multiyear program will support SUBSCRIBE

U.S. Department of Health and Human Services (HHS)

Enhancing the health & wellbeing of all Americans

Friend Family Health Center, Inc.	Chicago	IL	\$3,000,000
Sinai Health System	Chicago	IL	\$2,999,988
University of Illinois	Chicago	IL	\$3,000,000
Latino Alzheimer's and Memory Disorders Alliance	Cicero	IL	\$2,244,582
Illinois Public Health Association	Springfield	IL	\$2,999,856





Thank You Kenneth.Campbell@Illinois.gov

V.C. Program Updates

1. HealthChoice Illinois Update



Presenter: Robert Mendonsa | Deputy Administrator for Care Coordination

V.C. Program Updates

2. Eligibility Updates



Goals

A. Our unifying goals:

- Minimize the number of eligible customers who lose coverage.
- Provide <u>all</u> customers with access to multiple customer-centered redetermination completion and submission opportunities.
- Ensure all Medicaid eligible customers continue to connect with their healthcare providers.



Presenter: Sergio Obregón, Division of Medical Eligibility 58

COVID-19 Public Health Emergency

- The Families First Coronavirus Response Act (FFCRA) legislation offered states enhanced federal match in exchange for meeting a Maintenance of Effort (MOE) requirement.
 - The <u>'continuous coverage</u>' or <u>'continuous enrollment</u>' condition was part of the Maintenance of Effort.



Presenter: Sergio Obregón, Division of Medical Eligibility

Consolidated Appropriations Act, 2023 (CCA)

- Signed by President Biden on December 29, 2022
- Amends the FFCRA to delink the Medicaid Continuous Enrollment Requirement from the end of the COVID PHE.
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 - Redeterminations will begin for Illinois medical customers in April 2023.
 - First group of redetermination letters will be mailed by May 1, 2023.
 - First date Medicaid customers could lose coverage is July 1, 2023.



Redetermination Timeline

- Customers with a medical redetermination date of June 30, 2023 will be the first to receive a redetermination form.
- Redeterminations will be mailed by May 1st.
- Form B redetermination responses will be due June 1st.
- Last day to turn in the redetermination to avoid cancellation will be June 15th, 2023.
- <u>Customers that do not respond to the Form B renewal will lose</u> <u>coverage effective July 1, 2023.</u>



Redetermination Process by Month

End of	Rede Mail	Rede Due	Case Closure Date:	First day of	Last day to return
Certification	Date	Date Printed	Form B not	Coverage	rede: potential
Period		on Notice	received	Loss	reinstatement
	By				
06/30/2023	05/01/2023	06/01/2023	06/15/2023	07/01/2023	09/30/2023
	By				
07/31/2023	06/01/2023	07/01/2023	07/17/2023	08/01/2023	10/31/2023
	By				
08/31/2023	07/01/2023	08/01/2023	08/15/2023	09/01/2023	11/30/2023



Presenter: Sergio Obregón, Division of Medical Eligibility 62

Helping our customers retain coverage

- Assist customers with setting up Manage My Case (MMC) accounts.
- Encourage medical customers to learn about their redetermination date.
- Promote DHS and HFS Call Centers to find out <u>REDE dates</u>.
- <u>Check MEDI</u> when someone comes to you for services or assistance and tell them when their redetermination is due.
- Explain the timeline of when <u>redeterminations are mailed vs. their due date</u>.
 - Redes are mailed 60 days before the Medicaid Eligibility end date.
- Continue to encourage medical customers to update their contact information.



Eligibility Metrics



Applications and Redeterminations

Туре	Total	Notes
New Applications	5,073	Total reflects statewide applicationsOlder than 45 days
Redeterminations	6,662	 On hand Form A that is being returned, but are not required SNAP Redetermination that has a Medical Redetermination attached to it



Presenter: Sergio Obregón, Division of Medical Eligibility 65

V.C. Program Updates

3. Reproductive Healthcare



Reproductive Healthcare

A. Medicaid Family Planning Program Implementation

- Program launched November 30, 2022 and has nearly 991 enrollees.
- SPAs are still pending at federal CMS but will have November 30, 2022 effective dates when approved, per CMS.
- Eligibility and coverage administrative rules are posted for public comment.
- HFS and IDPH are meeting regularly to coordinate family planning programs.
- **B.** Prenatal and Postpartum Visit Rate Increase
 - Medicaid rate increase effective January 1, 2023.

D.2. Family Planning

Applying for Family Planning

- Customers that do not have an active Medicaid case
 - Apply via ABE
 - abe.illinois.gov

pply for Coverage	Apply for Benefits	
	Please select Yes or No for each benefit option below	
itart	Apply for SNAP (Supplemental Nutrition	⊖ Yes ⊖ No
eople	Assistance Program)?	
quid Resources	SNAP (Supplemental Nutrition Assistance Program) helps people and families buy food they need for good health. This program used to be called Food Stamps.More about SNAP.	
ther Resources	Apply for Healthcare Coverage?	⊖ Yes ⊖ No
ob Income	Provides access to healthcare benefits to people of all ages in Illinois. More about healthcare coverage.	
ther Income	If you do not qualify for HFS medical programs, we will send your information to the federal Health Insurance Marketplace. The Marketplace will contact you to complete the application process by reviewing available tax credits and choosing and enrolling in a health plan.	
ousing Bills		
ther Bills	Apply for Family Planning Program?	○ Yes ○ No
inish	 The Illinois Family Planning Program is a partial-benefit program that offers coverage for family planning and related services for men and women. Select this option to apply for the Family Planning services only. More about Family Planning Program. 	
ubmit	S • Apply for Cash Assistance?	O Yes O No
	Helps pay for food, shelter, utilities, and expenses other than medical costs. A small amount of Cash Assistance is available to people who qualify.	
If you apply for Cash Assistance, you will automatically apply for Healthcare coverage.		
	Apply for Medicare Savings Program?	⊖ Yes ⊖ No
	Helps people on Medicare pay for premiums, deductibles, and co-insurance charges. More information about the Medicare Savings Program	



Presenter: Sergio Obregón, Division of Medical Eligibility 68

V.C. Program Updates

4. Health Benefits For Immigrant Adults



Health Benefits For Immigrant Adults

- A. Started as Health Benefits for Immigrant Seniors, individuals over 65 otherwise eligible for Medicaid coverage but for immigration status
 - > 13,542 enrollees. FY 22 spend of \$130 million.
- B. Next phase increasing eligibility to those between 55-65 last spring.
 - > 11,264 enrollees. FY 23 spend to date \$73 million.
- C. Beginning this fiscal year, eligibility increased to those 42-54
 - > 18,528 enrollees. FY 23 spend to date \$70 million.
- D. 67% of enrollees reside in Cook County. Since inception, 46% of payments have gone to Cook County Health and Hospital System.



V.D. Veto Session Update and Spring Legislation Outlook



Veto Session Update and Spring Legislation Outlook

- A. Introductions: Angela Ryan, Director of Legislative Affairs
- **B.** Veto and Lame Duck Session Recap
 - A. Bills Impacting HFS
 - A. HB 4664 SA #5 Reproductive Health Bill
 - B. HB 240 SA #2 Healthcare Package
 - C. SB 1720 HA #3 Budget Implementation Bill
 - **B.** Supplemental Appropriations, HB 969 SA #4 and 5



Veto Session Update and Spring Legislation Outlook

- A. Spring Legislation Outlook
 - A. Session calendar:
 - A. Session scheduled to adjourn May 19th
 - **B. Budget Address on February 15th**
 - **C.** Joint HHS Briefing later that day by Directors
 - **B.** Pending Bills
 - A. Currently reviewing over 40 bills that may impact HFS
 - B. Majority filed in House chamber, several repeats from 102nd



VI. Subcommittee Reports & Recommendations



A. Community Integration Subcommittee

- A. Finalization of Subcommittee recommendations delayed
- B. Next and final meeting will be February 16, 2-4 pm
- C. Agenda will include:
 - An overview presentation of final key points in the recommendations
 - A subcommittee vote to refer final recommendations to the full MAC for approval



B. Health Equity and Quality Care Subcommittee

- A. Discussion on Quality of Care in Nursing Facilities and Rate Reform to improve Quality-Presenter Andy Allison.
 - 1. Staffing and Quality of Care
 - 2. Long Stay STAR quality ratings
- **B. MCO report out on use of Disproportionality Impacted Areas**



C. Public Education Subcommittee

A. Presentations from Dec 15 and special meeting on Jan 25 are <u>online</u>.

- I. Summary of Dec 15 meeting:
- Family Planning SPA Went live 11/30/22. Allows for individuals with individual income at or below 213% FPL to qualify for limited family planning coverage program, no age limits. PE available to noncitizens, but Medicaid immigration requirements in place for full application.
- Health Benefits for Immigrant Seniors/Adults enrollment shared <u>reports</u> <u>posted here</u>.
- Review of end of PHE communications and key messaging <u>toolkits</u> posted here.



C. Public Education Subcommittee

A. Presentations from Dec 15 and special meeting on Jan 25 are online.

- II. Summary of January 25 special meeting to discuss plans for end of PHE and resuming redes
- Recent federal legislation decouples enhanced Medicaid match from continuous eligibility. In Illinois, July 1, 2023 is the first date that Medicaid enrollees could lose coverage.
- HFS shared IES enhancements, eligibility flexibilities, staffing plans, and communications efforts to support efforts to keep eligible individuals enrolled in Medicaid
 - 30-40% of medical only cases are rede'd using ex-parte/Form A; this is expected to increase with enhancements and flexibilities
 - Federal CMS is also requiring regular data reporting from states to monitor efforts



D. NB Stakeholder

- A. Subcommittee meeting monthly to discuss Pathways to Success implementation
- B. 10 Care Coordination and Support Organizations are operational serving 247 youth
- C. Additional providers for Pathways services are being recruited
- D. Subcommittee will be discussing additional recruitment efforts for Family Peer Support and other providers
- E. No recommendations to the MAC from the Subcommittee at this time



D. Special Bylaw Committee A. Motion passed to appoint a Special Committee to review MAC Bylaws

During the last Nov 4th, 2022, MAC meeting.

- B. MAC Members and HFS Staff were given the opportunity to submit recommendations.
- C. Special Committee met on Jan 11, 2023, to review all submitted recommendations.
- D. Proposed recommendations were sent to MAC members prior to the this meeting.
- E. Presentation and discussion of proposed recommendations for revisions.



VII. Public Comments



Public Comments

Update:

A. None Reported



VIII. Additional Business: Old & New



A. Items For Future Discussion



IX. Adjournment

THANK YOU

