

201 South Grand Avenue East
Springfield, Illinois 62763-0002

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

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CONTACT
Evan.D.Fazio@Illinois.gov

Illinois Department of Healthcare and Family Services Announces \$56 Million Investment in Providers and Community Organizations

Almost half of the total—\$27.6 million—to be spent in disproportionately impacted areas.

Springfield—Building on its investments to fight against COVID-19, the Illinois Department of Healthcare and Family Services today announced \$56 million in additional capital to community organizations and providers across Illinois. The funding comes from quality payments to its Medicaid Managed Care Organizations (MCOs): Blue Cross and Blue Shield of Illinois, CountyCare, Aetna Better Health, Meridian, and Molina.

The money for these investments was substituted from the quality payments the department otherwise would have made to the health plans on a pay for performance basis. Each year the department withholds a portion of total money due to the five Medicaid health plans to allocate based on performance.

This year, due to the COVID-19 pandemic, HFS determined that its quality metrics would be affected in unprecedented ways because of changes in utilization associated with the pandemic. Rather than relying on performance metrics disrupted by the pandemic, HFS asked the plans to submit proposals for how they would invest the funding into Illinois communities.

“We knew we had to be nimble with our policymaking to combat the pandemic, and I thank our Medicaid partners for stepping up to the plate with their investments in our communities and providers,” said HFS Director Theresa Eagleson. “Supporting our customers, healthcare providers, and community partners—especially those in disproportionately affected areas—is critical to our state’s ability to deal with this pandemic.”

Next year, the department plans to return to a pay for performance allocation of the annual withholding. Performance metrics will center on five pillars measured through an equity lens: Adult behavioral health, children’s behavioral health, maternal and child health, improving opportunities for people to be treated in their communities, and

improving health equities around breast cancer, cervical cancer screenings, high blood pressure, and access to primary care. Each pillar has been carefully chosen to better serve the department's 3 million Medicaid customers and to ensure the best possible allocation of the state's scarce resources.

For this year's health plan spending proposals, investments were directed with a lens toward equity and the greatest impact for organizations and providers that were not already receiving other support. Of the \$56 million in redirected quality payments, \$27.6 million, nearly 50 percent of the total, was spent in disproportionately impacted areas.

Highlights of the investments include:

To date, health plans made the following investments in critical services and taken the following steps to help Medicaid members and providers during this pandemic:

- \$13.8M spent to increase reimbursement rates for Illinois Behavioral Health and Mental Health Providers based off of claims received thus far. Between March and June of 2020, Medicaid Health Plans increased reimbursement rates by 20 percent to ensure providers had adequate resources to continue serving Medicaid members in need of behavioral health and mental health services.
- \$4.6M invested to expand telehealth capabilities and infrastructure. This investment in telehealth services will benefit the Medicaid well – beyond Covid-19 and supports all Illinois residents.
- \$4M spent with vendors and community-based organizations owned by minorities, women and people with disabilities to increase community engagement in African American and Latinx communities which were the hardest hit by the pandemic.
- Partnered with community organizations to provide food and other PPE supplies to communities most impacted by Covid-19 including over \$750K invested in PPE, cleaning and disinfectant supplies for members. Health plans also hosted drive-through food events and provided home meal delivery service, while one health plan offered low-income families laundry service during the crisis.
- Provided technology assistance for families to ensure members could meet their schooling and health-related needs.
- Over \$2.7M invested in housing support to extend housing benefits for Medicaid members to ensure that members in the maintain their current services and allow members to remain in the community where they feel most comfortable. Recent expenditures by plans have increased housing support investments to over \$6 million that will be captured in future reports.
- Over \$800K in pay for performance grants to fund school-based health centers, parenting and vaccine programs. The funding will be used to develop a health

food and lifestyle program targeted for members with chronic illnesses and a program to incentivize members to complete mammograms and other important screenings. The parenting program will ensure underserved mothers and babies are given more reliable care to reduce maternal mortality.

[View more details](#) about the investments from each plan.