



State of Illinois
Illinois Department on Aging

OASAC Medicaid Enrollment Oversight Subcommittee Meeting

December 10, 2019 (Approved March 10, 2020)
1:00- 2:00 p.m.

Chicago Location:

IDoA Conference Room
160 N LaSalle St., 7th Floor
Chicago, IL 60601

Springfield Location:

IDoA Offices (at DNR Building)
One Natural Resources Way
Rock River Conference Room
Springfield, IL 62702

Members in Attendance:

Lora McCurdy, Deputy Director, Illinois Department on Aging (Chair)
Darby Anderson, Addus HomeCare, Inc.
Pat Curtis for Kelly Cunningham, Illinois Department of Healthcare and Family Services
Marla Fronczak, Northeastern Illinois Area Agency on Aging
Marsha Johnson, Community Care Systems, Inc.
CoryAnne Gulkewicz for Gabriela Moroney, Illinois Department of Human Services
David Olsen, Alzheimer's Association

Department on Aging staff:

Rhonda Armstead, Mike Berkes, Aster Bowden, Samantha Brill, John Eckert, Kimberly Flesch, Sophia Gonzalez and Gloria Simmons

Guests:

Meghan Carter, Scott Slater (HFS)

Members Unable to Attend:

Anna Moeller, State Representative
Terri Bryant, State Representative
Iris Martinez, State Senator
Dave Syverson, State Senator
Ann Irving, AFSCME Council 31
Dave Lowitzki, Lowitzki Consulting
Lori Hendren, AARP

Welcome & Introductions

Lora McCurdy, IDoA Deputy Director and Subcommittee Chair welcomed everyone to the meeting. All members, guests and IDoA staff in Chicago, Springfield and on the phone introduced themselves.

Approval of September 3, 2019 Subcommittee meeting Minutes

Lora McCurdy, asked for a motion to approve the September 3, 2019 meeting minutes. David Olsen made a motion to approve the minutes. Marsha Johnson seconded. No corrections or changes were noted. All members voted in favor. The approved minutes will be posted on the IDoA website.

HFS Update on Medicaid Omnibus legislation (PA 101-0209)

Pat Curtis and Scott Slater (HFS) provided an update on the Medicaid Omnibus legislation, including ex parte redeterminations. HFS is completing research on other states' best practices working to develop new efficiencies to streamline the eligibility process for Medicaid in Illinois. IDoA has been working with HFS to include the IDoA population in the ex parte redetermination process. Curtis explained that this will include the ability to identify financial eligibility verification by approved electronic sources during the redetermination process. HFS will be submitting a plan to CMS. Lora McCurdy shared that IDoA is concerned with the continuity of care for seniors, especially those that are enrolled in managed care and get dropped off Medicaid and have a disruption in the services. Curtis clarified that the federal government does not exempt anyone from the REDE process and HFS needs to find sources that will improve the continuity of care. For the AABD group, which includes persons over the age of 65, resources and assets must be verified. An asset verification system must be used to review, confirm or not confirm resources. Curtis noted that the State began using the ABS system as of January, 2020 to check accounts in national banks using social security numbers. This system has a 10-day turnaround to respond to an inquiry. If no response is received, then DHS is still obligated to send a manual form to the client. Curtis additionally explained that when a redetermination (certification) date is due, the State searches for the client information; income, number of people in the household, and resources if the participant is eligible for AABD.

Pat Curtis noted that the State utilizes the automatic wage verification system (AWVS) to verify income. There are three different types of forms that are sent to clients, depending on the outcome of the inquiries made by the State. If Form A is sent to clients and there are no changes to results obtain by the State, the client does not have to do anything. If there is a change, then they must reply within 10 days. If additional time is needed, the client must contact the State via a hotline number. Form B is sent to clients if no response was received from the ABS system and the client must verify resources and sign the form. This requirement also applies to clients that report zero income. The Medical Benefits Renewal form requires a lot of eligibility information and allows the client 30 days to respond. If no response is received within the 30 days, the case is cancelled. However, if information is received within 90 days of cancellation date, the case can be reinstated from the date of cancellation and the client will not lose any benefits. John Eckert asked if the State has an Illinois database of all financial institutions regulated by professional regulations. Curtis responded that prior to the ABS system, the State tried to contact bank industry, but they were not cooperative.

Lora McCurdy asked if there has ever been an analysis completed on the loss of federal resources due to being dropped off Medicaid and losing the match. Curtis responded

that she would need to check with the OIG. McCurdy shared that many seniors are reluctant to consent to allow Care Coordinators to access their information via the Manage My Case system and that has been a barrier for CCUs to assist with applications for Medicaid because providers need permission to be authorized representatives. Marsha Johnson shared other issues that include representatives not receiving notices that the participant receives, and many participants do not have access to computers and send information via fax or mail and the information gets lost. Scott Slater shared that the number one reason for cancellations has been information not submitted. Slater asked why a participant would not want to give the CCU authority to manage their case. Several reasons were shared: Participants want to keep their information private and want to manage their own finances and fear that if they get help, they may be seen as not being able to live alone. HFS shared that all the IDoA concerns noted would be taken into consideration as this process moves forward.

Review Quarterly Report Data & Trends

Kimberly Flesch reviewed the Quarterly Enrollment report updated December 10th with data as of November 15, 2019. Flesch shared that IDoA sent a new list to HFS in mid-November and asked them to look at them again. IDoA continues to research participants who need follow-up. In Chicago, new CCUs are increasing compliance with the CCP REDE's. Flesch additionally shared that the MCO numbers are almost the same as the last report. Lora McCurdy shared that no direct cause has been found, but the rate increase authorized in July included assistance in completing the Medicaid application and maybe CCUs were able to hire more Care Coordinators. No questions were asked by members.

Action Steps for Next Meeting

IDoA will ask DHS to provide an update in their hiring of additional staff to assist in addressing the backlog of Medicaid applications being completed during the next meeting.

2020 Meeting Dates

Lora McCurdy asked everyone to review the OASAC Subcommittee meeting dates for the upcoming year. She noted that they were scheduled to avoid conflicting with the day's legislators are in session.

Adjournment:

David Olsen made a motion to adjourn the meeting. Marsha Johnson seconded. All members were in favor. The meeting was adjourned at 2:17 p.m.