

April 16, 2021

Calendar Year 2020 report required by 305 ILCS 5/11-5.1(h). (Public Act 101-0209)

The Illinois Department of Healthcare and Family Services (HFS) and the Illinois Department of Human Services (DHS). continue to collaborate on our multi-pronged plan to maintain low eligibility backlog which includes adding caseworkers, providing better training, deploying best practices across both agencies, and rolling out simplified policies and procedures. Addressing the backlog and improving the Integrated Eligibility System (IES) is a primary focus of HFS and DHS every day.

In addition to our focus on backlog in IES, beginning in March 2020, the agencies took multiple steps to address the COVID Public Health Emergency.

Application Backlog

In December 2020, pending Medicaid applications over 45 days were 52,417, down from 147,000 at the end of January 2019 by 82%. This reflects an increase over the October 2020 of 10,273 primarily due to an influx of applications transferred to the state during the Federally Facilitated Marketplace (FFM) open enrollment period. Our plan to eliminate backlogs anticipated this increase for December and for each of the next few months.

Hiring Personnel – Caseworker Onboarding & Training

We continue to make progress in hiring caseworkers to increase the total number of caseworkers working to reduce backlogs and will continue to increase staff into the first half of 2020. Since August 2019, we have added 306 net new caseworkers in local DHS offices around the state and in the HFS Bureau of All Kids. The onboarding of caseworkers is vital to processing backlogs, applications, and renewals. New caseworkers can take several months to learn the complex system of eligibility. Caseworkers often assist with flagging IES issues, suggesting more efficient processes, and testing new enhancements before full implementation.

Long Term Care – Continued Efforts

HFS and DHS continue to work to address issues related to the backlog of long term care (LTC) applications and admissions. A complete alignment of the processes and workflows at the three LTC hubs across the state began during the fall of 2019. Training for caseworkers continues. Several initiatives occurred in 2020, including preparations for a new LTC statewide processing center at Granite City and allowing facilities the ability to upload documents to IES through the ABE Provider Portal. In 2021 the Medical Field Operations Anna office will open to help process and house cases; the new model of assigning work to caseworkers, Facility Base Casework, will be initiated in all 4 offices; the Central Scanning Unit for Long Term Care will open; and, extensive training will continue. As of end of December 2020, the total number of LTC applications pending over 45 days was 45. Total admissions pending over 45 days was 193.

Call Center – In Progress

The Alton Call Center became fully operational on September 16, 2020. There are currently 37 staff on board and trained. Additional positions are in the process of being filled. As of 4/1/2021, all caseworker staff on board will be taking calls through the ABE Call Center. FCS is currently working with a vendor and the Illinois Department of Innovation and Technology (DoIT) to restructure the Call Center System to allow for these caseworkers to also process Medical redeterminations and SNAP redeterminations.

System Improvements – In Progress

We continue to work on IES system performance initiatives and plans to refresh IES hardware and software. Both HFS and DHS are upgrading the desktop computers used by caseworkers. Further, we are digging into the source of system slowness experienced by caseworkers to implement a multi-pronged approach. Finally, an external vendor to advise HFS and DHS on system improvements has been working with the agencies since January 2020.

COVID Strategies

Beginning in March 2020, HFS implemented a variety of eligibility and enrollment flexibilities to apply during the COVID Public Health Emergency (PHE) with the goal of streamlining application requirements, starting coverage faster, and assuring continued coverage throughout the PHE. These flexibilities included changes to: simplify documentation requirements at application, delay renewals and actions that would change or end coverage, disregard assets in determining eligibility, waive premiums and co-payments for certain children in All Kids and individuals in the Health Benefits for Workers with Disabilities program, cover COVID-19 testing for the uninsured, and provide presumptive eligibility to certain adults.

Challenges Exist

Despite our significant efforts, challenges remain. HFS, DHS and DoIT continue to face challenges with finding candidates and onboarding new staff to address IES performance and the backlog of applications and renewals. Strategies to address IES system performance issues are underway, but some are slower than anticipated. New staff training and best practices continue to be developed and introduced, however refining and solidifying new workflows takes time.

See following page for Quarterly Reporting of Medical Application and Renewal Processing Data for January through December 2020.

For the purposes of part B of the chart below, reference the following:

The term “ex parte renewal” refers to a process by which the state systematically uses approved electronic sources during the annual renewal process to automatically verify an individual’s eligibility status and continue medical coverage. Using the ex parte process provides efficiency for both clients and state caseworkers through automation. The state sends Form A to clients found eligible for ex parte renewal. Note, beginning in March 2020, HFS suspended Form B mailings due to COVID.

Medicaid Eligibility Backlog Report

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))			
A. Medical Applications (End of month)	Jan-20	Feb-20	Mar-20
Total applications on hand by number of days on hand	135,676	123,057	127,534
0-7 Days	8,084	7,086	15,298
8-45	25,069	24,064	24,498
46-90	43,861	28,956	16,102
91-180	15,705	20,074	28,124
181+	42,957	42,877	43,512
Total applications on hand by basis for determining income eligibility	135,676	123,057	127,534
Modified Adjusted Gross Income (MAGI)	32,503	25,661	22,771
Non-MAGI - Long Term Care	5,685	5,489	5,349
Non-MAGI - Excluding Long Term Care	8,445	6,752	5,977
Unknown	89,043	85,155	93,437
Applications over 45 days	102,523	91,907	87,738
Modified Adjusted Gross Income (MAGI)	28,260	22,280	17,943
Non-MAGI - Long Term Care	4,239	4,131	4,052
Non-MAGI - Excluding Long Term Care	6,914	5,519	4,747
Unknown	63,110	59,977	60,996
B. Medical Renewal (by month in which ex parte decision is made)			
Total number of cases up for renewal in two months	118,503	108,824	117,352
Form A Mailed (ex parte)	37,669	39,800	43,542
	32%	37%	37%
Not Eligible For Form A	80,834	69,024	73,810
	68%	63%	63%
Reasons Not Eligible For Form A	80,834	69,024	73,810
Aged, Blind and Disabled	24,880	24,902	25,761
	31%	36%	35%
Unverifiable Income	8,856	5,287	5,803
	11%	8%	8%
Zero (\$0) Income	23,054	18,177	19,971
	29%	26%	27%
No SSN	9,115	6,783	7,770
	11%	10%	11%
Income Exceeds Eligibility Criteria	9,554	9,458	9,387
	12%	14%	13%
Self-Employment Income	4,539	3,622	4,336
	6%	5%	6%
Other Reasons	836	795	782
	1%	1%	1%

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))				
A. Medical Applications (End of month)		Apr-20	May-20	Jun-20
Total applications on hand by number of days on hand		104,560	55,532	33,605
0-7 Days		7,420	3,494	4,447
8-45		18,305	9,784	9,227
46-90		11,329	3,464	3,368
91-180		24,140	9,195	2,325
181+		43,366	29,595	14,238
Total applications on hand by basis for determining income eligibility		104,560	55,532	33,605
Modified Adjusted Gross Income (MAGI)		20,102	12,011	9,976
Non-MAGI - Long Term Care		2,426	1,281	810
Non-MAGI - Excluding Long Term Care		4,887	2,518	1,691
Unknown		77,145	39,722	21,128
Applications over 45 days		78,835	42,254	19,931
Modified Adjusted Gross Income (MAGI)		14,764	6,118	4,081
Non-MAGI - Long Term Care		1,977	1,073	619
Non-MAGI - Excluding Long Term Care		3,928	1,773	874
Unknown		58,166	33,290	14,357
B. Medical Renewal (by month in which ex parte decision is made)				
Total number of cases up for renewal in two months		123,497	122,844	131,141
Form A Mailed (ex parte)		44,754	46,306	48,541
		36%	38%	37%
Not Eligible For Form A		78,743	76,538	82,600
		64%	62%	63%
Reasons Not Eligible For Form A		78,743	76,538	82,600
Aged, Blind and Disabled		24,485	23,991	26,495
		31%	31%	32%
Unverifiable Income		7,869	6,316	6,699
		10%	8%	8%
Zero (\$0) Income		22,734	22,121	22,117
		29%	29%	27%
No SSN		8,395	7,925	9,027
		11%	10%	11%
Income Exceeds Eligibility Criteria		9,812	11,063	12,315
		12%	14%	15%
Self-Employment Income		4,753	4,370	5,042
		6%	6%	6%
Other Reasons		695	752	905
		1%	1%	1%

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))				
A. Medical Applications (End of month)		Jul-20	Aug-20	Sep-20
Total applications on hand by number of days on hand		32,804	30,975	27,903
0-7 Days		4,995	6,065	5,101
8-45		10,550	11,964	11,905
46-90		3,470	3,316	3,503
91-180		2,480	2,040	1,557
181+		11,309	7,590	5,837
Total applications on hand by basis for determining income eligibility		32,804	30,975	27,903
Modified Adjusted Gross Income (MAGI)		10,980	9,518	7,941
Non-MAGI - Long Term Care		692	680	559
Non-MAGI - Excluding Long Term Care		1,800	1,797	1,817
Unknown		19,332	18,980	17,586
Applications over 45 days		17,259	12,946	10,897
Modified Adjusted Gross Income (MAGI)		4,630	3,693	3,150
Non-MAGI - Long Term Care		464	399	364
Non-MAGI - Excluding Long Term Care		851	622	646
Unknown		11,314	8,232	6,737
B. Medical Renewal (by month in which ex parte decision is made)				
Total number of cases up for renewal in two months		137,448	131,015	125,511
Form A Mailed (ex parte)		44,938	47,218	45,530
		33%	36%	36%
Not Eligible For Form A		92,510	83,797	79,981
		67%	64%	64%
Reasons Not Eligible For Form A		92,510	83,797	79,981
Aged, Blind and Disabled		27,873	24,240	21,382
		30%	29%	27%
Unverifiable Income		10,563	8,809	8,526
		11%	11%	11%
Zero (\$0) Income		27,135	24,719	24,692
		29%	29%	31%
No SSN		9,279	8,151	7,802
		10%	10%	10%
Income Exceeds Eligibility Criteria		11,188	11,581	11,126
		12%	14%	14%
Self-Employment Income		5,172	5,082	5,239
		6%	6%	7%
Other Reasons		1,300	1,215	1,214
		1%	1%	2%

Medicaid Eligibility Backlog Report

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))				
A. Medical Applications (End of month)		Oct-20	Nov-20	Dec-20
Total applications on hand by number of days on hand		25,983	53,979	71,108
0-7 Days		5,056	9,441	4,178
8-45		10,654	31,837	44,095
46-90		3,018	4,666	14,513
91-180		1,512	2,030	2,195
181+		5,743	6,005	6,127
Total applications on hand by basis for determining income eligibility		25,983	53,979	71,108
Modified Adjusted Gross Income (MAGI)		5,827	24,156	44,438
Non-MAGI - Long Term Care		593	634	552
Non-MAGI - Excluding Long Term Care		1,496	5,909	9,124
Unknown		18,067	23,280	16,994
Applications over 45 days		10,273	12,701	22,835
Modified Adjusted Gross Income (MAGI)		2,144	2,823	11,330
Non-MAGI - Long Term Care		395	395	387
Non-MAGI - Excluding Long Term Care		526	646	2,675
Unknown		7,208	8,837	8,443
B. Medical Renewal (by month in which ex parte decision is made)				
Total number of cases up for renewal in two months		134,437	123,384	135,994
Form A Mailed (ex parte)		44,690	45,037	50,186
		33%	37%	37%
Not Eligible For Form A		89,747	78,347	85,808
		67%	63%	63%
Reasons Not Eligible For Form A		89,747	78,347	85,808
Aged, Blind and Disabled		23,973	22,659	22,543
		27%	29%	26%
Unverifiable Income		10,866	7,068	7,553
		12%	9%	9%
Zero (\$0) Income		28,398	22,844	26,295
		32%	29%	31%
No SSN		9,264	8,630	8,419
		10%	11%	10%
Income Exceeds Eligibility Criteria		10,825	11,598	14,771
		12%	15%	17%
Self-Employment Income		5,066	4,354	4,631
		6%	6%	5%
Other Reasons		1,355	1,194	1,596
		2%	2%	2%