

July 2024

**Quarter 2 2024 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 (IDHS) continue to collaborate on our multi-pronged plan to maintain low eligibility backlogs which includes maintaining staffing levels for eligibility workers, 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 IDHS every day.

In addition to our focus on backlog of applications and redeterminations the agencies continue work to address the COVID Public Health Emergency.

**Application Backlog**

At the end of June 2024, pending Medicaid applications over 45 days were, down from 147,000 at the end of January 2019 by 43%.

**Hiring Personnel – Caseworker Onboarding & Training**

We continue to make progress in hiring caseworkers and maintaining staffing levels. Since February 2019, we have added 873 new caseworkers in local IDHS offices around the state and the HFS Bureau of All Kids. This is a 33% increase. 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 (LTC) – Continued Efforts**

On April 30, 2019, there were 6,342 pending LTC applications with 4,898 over 45 days old and 15,173 pending admits with 10,196 over 45 days old. As of June 30, 2024, there were 675 LTC applications pending with 223 over 45 days and 1,198 admits pending with 388 over 45 days. The State continues to evaluate the workload and processes to make continual improvements to maintain the progress made on timely application decisions.

The growth of the current backlog is due to the elimination of the PHE waivers, reverting to pre-COVID policies and procedures.

### **Call Center – Continued Efforts**

The Alton Call Center became fully operational on September 16, 2020. There are currently 68 staff on board. The Alton Rede Center has been established to focus on the telephonic SNAP Rede's. There are currently 30 HSC's, with a total of 36 staff. The new IVR is fully functional and implemented to all FCRC's and DHS Call Centers. Staff utilized Telephonic Signature for Redeterminations and Initial Applications.

### **System Improvements – In Progress**

We continue to work on IES system performance initiatives, implementing legislative mandated policy changes, and issuances, known documented defects, and refreshing IES hardware and software.

### **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 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.

Some notes because of the PHE ending:

Medical redeterminations resumed at the end of the PHE. The first round included all individuals due for redetermination at the end of June 2023.

The documentation requirement strategies used during the PHE are still in place during the PHE unwinding.

Assets are no longer disregarded in determining eligibility as they had been during the PHE.

The PHE unwinding is over. The state entered the second year of renewals beginning with redeterminations due June 30, 2024.

### **Challenges Exist**

Despite our significant efforts, challenges remain. HFS, IDHS 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.

**See following page for Reporting of Medical Application and Renewal Processing Data for Quarter 2 2024.**

*For the purposes of part B of the chart below, please note:*

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 customers and state caseworkers through automation. The state sends Form A to clients found eligible for ex parte renewal.

# Eligibility Backlog Reporting

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))				
A. Medical Applications (End of month)		Apr-24	May-24	Jun-24
Total applications on hand by number of days on hand		109,387	101,264	99,838
0-7 Days		8,785	7,819	9,099
8-45		26,747	27,703	26,950
46-90		19,156	17,668	18,625
91-180		40,145	31,297	22,459
181+		14,554	16,777	22,705
Total applications on hand by basis for determining income eligibility		109,387	101,264	99,838
Modified Adjusted Gross Income (MAGI)		27,940	23,662	19,261
Non-MAGI - Long Term Care		1,263	1,225	1,338
Non-MAGI - Excluding Long Term Care		10,532	10,084	10,775
Unknown		69,652	66,293	68,464
Applications over 45 days		73,855	65,742	63,789
Modified Adjusted Gross Income (MAGI)		23,883	19,984	15,813
Non-MAGI - Long Term Care		541	554	531
Non-MAGI - Excluding Long Term Care		6,029	4,663	5,140
Unknown		43,402	40,541	42,305
B. Medical Renewal (by month in which ex parte decision is made)				
Total number of cases up for renewal in two months		196,363	289,530	272,614
Form A Mailed (ex parte)		136,705	199,490	191,001
		70%	69%	70%
Form B (not mailed: not ex parte)		59,658	90,040	81,613
		30%	31%	30%
<b>Reasons Form B - Not Mailed</b>		<b>59,658</b>	<b>90,040</b>	<b>81,613</b>
Aged, Blind and Disabled		6,576	3,158	2,880
		11%	4%	4%
Unverifiable Income		11,237	16,490	14,626
		19%	18%	18%
Zero (\$0) Income		0	0	0
		0%	0%	0%
No SSN		4,097	5,902	6,374
		7%	7%	8%
Income Exceeds Eligibility Criteria		11,417	8,253	7,595
		19%	9%	9%
Self-Employment Income		8,137	11,718	11,559
		14%	13%	14%
Other Reasons		18,194	44,519	38,579
		30%	49%	47%