

July 2022

**Quarter 2 2022 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 2022, pending Medicaid applications over 45 days were 2,345, down from 147,000 at the end of January 2019 by 98%.

**Hiring Personnel – Caseworker Onboarding & Training**

We continue to make progress in hiring caseworkers and maintaining staffing levels. Since February 2019, we have added 546 net new caseworkers in local IDHS offices around the state and the HFS Bureau of All Kids. This is a 20.5% 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. These backlogs have been eliminated. As of July 1, 2022, there were 63 LTC applications pending with 1 over 45 days and 559 admits pending with only 10 over 45 days. This progress is due, in part to COVID policies, but also to the re-alignment of processes and workflows at the three existing LTC hubs, the LTC Statewide Processing Center, and the new fourth LTC office in Anna; new trainings for caseworkers, and several initiatives which occurred in 2020. This included creation of a new LTC statewide processing center at Granite City, which became operational in January 2021, the ongoing creation of the Medical Field Operations Anna Office, which opened January 16, 2021, and allowing facilities the ability to upload documents to IES through the ABE Provider Portal. Further, the Central Scanning Unit for Long Term Care work opened in April 2021. The State continues to evaluate the workload and processes to make continual improvements to the system to maintain the progress made on timely application decisions.

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

The Alton Call Center became fully operational on September 16, 2020. There are currently 58 staff on board who are fully trained and 3 trainees. Additional positions are in the process of being filled. All trained caseworker staff on board will be taking calls through the IDHS Call Center. FCS has been working with a vendor and the Illinois Department of Innovation and Technology (DoIT) to restructure the Call Center System. Phase I was implemented on December 17, 2021. This phase includes new interactive self-service features, as well as new options for customers to complete Medical redeterminations and SNAP redeterminations telephonically. The Alton Rede Center has been established to focus on the telephonic SNAP Rede's. There are currently 8 HSC's and an LOA on board. When fully staffed, the office will have 34 staff. Phase II moves the FCRC's into the Statewide IVR. Rollout began in February and the offices are being moved into the IVR in waves. The last wave is scheduled for September 21<sup>st</sup>. At that time, all FCRC's will be in the IVR.

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

We continue to work on IES system performance initiatives, implementing legislative mandated policy changes, COVID-related changes and issuances, known documented defects and refreshing IES hardware and software. An external vendor was hired to advise HFS and IDHS on the most impactful system improvements since February 2022.

### **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.

### **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 2022.**

*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

## Eligibility Backlog Reporting

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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.

Quarterly Reporting - Eligibility (required by 305 ILCS 5/11-5.1(h))				
A. Medical Applications (End of month)		Apr-22	May-22	Jun-22
Total applications on hand by number of days on hand		9,776	10,603	11,718
	0-7 Days	3,189	3,452	4,223
	8-45	4,016	4,659	5,107
	46-90	403	404	414
	91-180	459	403	341
	181+	1,709	1,685	1,633
Total applications on hand by basis for determining		9,776	10,603	11,718
	Modified Adjusted Gross Income (MAGI)	1,548	1,543	1,456
	Non-MAGI - Long Term Care	189	207	197
	Non-MAGI - Excluding Long Term Care	772	855	988
	Unknown	7,267	7,998	9,077
Applications over 45 days		2,571	2,492	2,388
	Modified Adjusted Gross Income (MAGI)	622	627	623
	Non-MAGI - Long Term Care	63	63	64
	Non-MAGI - Excluding Long Term Care	204	221	196
	Unknown	1,682	1,581	1,505
B. Medical Renewal (by month in which ex parte decision is made)				
Total number of cases up for renewal in two months		163,462	184,599	186,168
	Form A Mailed (ex parte)	44,690	56,594	57,099
		27%	31%	31%
	Form B (not mailed: not ex parte)	118,772	128,005	129,069
		73%	69%	69%
Reasons Form B (not mailed)		118,772	128,005	129,069
	Aged, Blind and Disabled	30,383	32,233	29,554
		26%	25%	23%
	Unverifiable Income	18,143	17,529	15,969
		15%	14%	12%
	Zero (\$0) Income	30,225	33,114	35,248
		25%	26%	27%
	No SSN	9,822	10,312	11,284
		8%	8%	9%
	Income Exceeds Eligibility Criteria	21,799	26,037	27,111
		18%	20%	21%
	Self-Employment Income	6,537	6,881	7,517
		6%	5%	6%
	Other Reasons	1,863	1,899	2,386
		2%	1%	2%

