



Memo: To All IHC PCPs
From: Margaret Kirkegaard, MD, MPH, Medical Director
Date: 3-12-10
Re: PCP Verification and Excluded Populations

With the implementation of Phase I of the IHC Referral System, it is extremely important to verify clients' eligibility and PCP at the time of service. There are several ways to confirm a client's PCP:

- Check the monthly mailed IHC panel roster. If a patient is listed on the provider's panel at the beginning of the month, that provider can provide care to that patient through the whole month even if the patient has made a PCP change during the month.
- Check the online panel roster through the IHC Provider Portal accessed through MEDI. This is updated daily. MEDI can be access at <http://www.myhfs.illinois.gov/>
- Contact the IHC Provider Helpdesk at 1-877-912-1999.
- If you are using a REV vendor such as Nebo, Passport or E-care to confirm eligibility, this will also list the PCP.

The most secure way to determine both eligibility and the PCP at the time of service is by using HFS' Medical Electronic Data Interchange System (MEDI) which is available to all HFS providers at no charge. In order to access the MEDI system, providers need to register and establish a username and password. IHC Provider Relations staff can assist any provider with MEDI registration.

If no PCP is listed on the MEDI system, the patient is not currently linked to a PCP and can be seen by any HFS provider.

The patient may be in the 60-day enrollment window or part of one of the excluded populations. Approximately 25% of all HFS (Medicaid) clients are excluded from the IHC program and do not have to select a PCP. While HFS encourages these clients to establish a medical home, care can be rendered by any HFS provider. Excluded populations are:

- People who receive Medicare
- Children under age 21 who get Supplemental Security Income (SSI)
- Children in foster care and children who get Subsidized Guardianship or Adoption Assistance from DCFS (Department of Children and Family Services)
- Children under age 21 who are blind or who have a disability
- People who live in nursing facilities
- American Indians and Alaska Natives
- Individuals with Spend-down
- Refugees
- Some People who get Home and Community-Based Services like the Community Care Program, the Home Services Program, or community services for persons with developmental disabilities
- Individuals residing in Community Integrated Living Arrangements (CILAs)
- Individuals in Presumptive Eligibility programs
- Individuals enrolled in the following programs with limited benefits:
 - Illinois Healthy Women
 - All Kids Rebate and FamilyCare Rebate
 - Illinois Cares Rx, formerly SeniorCare/Circuit Breaker
 - Transitional Assistance, age 19 or older
 - Emergency Medical Only
 - Hospice
 - Renal and Hemophilia programs
- Populations Already Managed:
 - Individuals with High Level Third Party Liability (TPL)/Private Insurance
 - Program for All-Inclusive Care for the Elderly (PACE) participants
 - Children under age 21 whose care is managed by the Division of Specialized Care for Children (DSCC) of the University of Illinois at Chicago

For questions, contact the IHC Provider Relations Helpdesk at 1-877-912-1999.