

Illinois Department of Healthcare and Family Services  
PCCM Provider Network Subcommittee  
Meeting Minutes for December 12, 2012

**Attendees:**

|                         |                              |
|-------------------------|------------------------------|
| Margaret Kirkegaard, MD | AHS                          |
| Cari VonderHaar         | AHS                          |
| Jonathan Jackson        | AHS                          |
| Pam Bunch               | HFS                          |
| Wendie Medina           | HFS                          |
| Kathy Moles             | HFS                          |
| Jerry Clark             | DSCC                         |
| Wayne Franklin, MD      | UIC                          |
| Brad Kupferberg         | Children's Memorial Hospital |
| Krystal Revai           | UIC                          |
| Omar Sawlani, MD        | Christ Hospital              |
| Sharon Pittman          | BCMC                         |
| Dan Ryan                | ISMS                         |
| Alice Vogel             | Loyola Medical Center        |
| Jill Sproat             | DHS                          |
| Mike Temporal           | SIHF                         |
| Babs Binney             | LFPC                         |
| Sally Salmons           | Carle Physicians Group       |

Jonathan Jackson, Provider Services Manager with Illinois Health Connect chaired this meeting, took names and performed roll call.

*Jonathan Jackson provided the following updates:*

**HFS Drug Prior Approval Process**

- The Illinois Department of Healthcare and Family Services (HFS) and Illinois Health Connect (IHC) encourage all providers to use the Drug Prior Approval application on the HFS MEDI System to submit Prior Approval (PA) requests. Using MEDI for PA requests means HFS does not have to do data entry, resulting in more efficient reviewing and processing of PA requests. Providers can check the status of a PA request submitted on MEDI using the confirmation number issued on the MEDI application.
- PA requests can also be submitted to HFS using an online form or a faxed form. Both are available at <http://www.hfs.illinois.gov/pharmacy/script/>. There are two fax numbers that accept PA requests: 1-217-524-7264 and 1-217-524-0404. PA requests can be submitted via phone at 1-800-252-8942.
- Providers **should not call** the HFS Pharmacy number to check on the status of a PA request. If PA request was sent using method other than MEDI, use the online status inquiry form on HFS link above.
- Schedule visits with clients who have complicated conditions to review the required medications.

**Prior Approval Notes:** 1) HFS no longer has an “approvable drug list” for PA requests. PA requests can be submitted and will be clinically reviewed for any drug. 2) Providers should list all medications a patient needs on PA requests, not just drugs that exceed four per month. 3) The 4 script limit policy currently does not apply to clients less than 19 years old. 4) Providers can view all prescriptions a client fills with HFS medical card using the Claims History tool, which can be accessed on IHC Provider Portal via MEDI.

### **Adult Well Visits**

- Adults with HFS medical card are eligible to get one well visit per provider, per year, based on client’s birthday. Women can get a well woman visit with an OBGYN and a physical with Primary Care Provider (PCP) in same year. IHC Panel Rosters list the date of last visit with assigned PCP to assist with outreach.
- IHC reminds adults via phone or letter 60 days before their birthday to schedule an annual well visit.

### **VFC Program Changes**

- Providers who participate in the Vaccines For Children (VFC) Program must enroll with I-CARE. Providers who don’t submit I-CARE application **will not be able to order** immunizations from VFC.
- Go to <http://illinoisap.org/projects/immunizations/i-care/> to register for I-CARE, which takes 4-6 weeks to complete. The VFC Illinois deadline is June 2013. VFC Chicago will implement at a later date.
- As of January 1, underinsured clients (have private insurance, but no vaccine coverage) must get all VFC shots from a Federally Qualified Health Center, Rural Health Center or a local health department.

*Cari Vonderhaar provided the following update:*

### **Tdap Recommendations for Adults**

- Vaccine protection for pertussis, tetanus and diphtheria fades over time. All adults 19 and older who have not previously had a Tdap immunization should get one, according to the CDC.
- Adults should get a Td booster every 10 years. Adults who have not had Tdap should substitute a Tdap shot for their next Td booster. Tdap shots can be given prior to the 10 year mark.
- Adults who will be around infants should get a Tdap shot at least two weeks before coming into contact with an infant. This is especially important for pregnant women and expecting fathers.
- HFS will reimburse providers for all *medically necessary* adult immunizations. For detailed information, see the “Adult Immunizations” notice dated 7/20/2010 on the IHC Provider Notices page at <http://www.illinoishealthconnect.com>

*Jonathan Jackson continued with following updates:*

### **IHC Client Education**

- IHC has produced Client Education Pads for offices to distribute to their IHC population. The message on them, in English and Spanish, promotes the medical home model of care, the importance of scheduling well visits, and that clients should contact their PCP prior to using the emergency room. IHC Provider Services Representatives (PSR) will provide them to you at no cost!
- The IHC Client Education Video is available in English and Spanish. It can be viewed on IHC website, on YouTube or on a smart phone using the quick response bar code printed on this document.

- The IHC call center performs client outreach for well child visits, adult preventive visits, mammograms and education for frequent users of the emergency room.
- The IHC Member Guide is mailed to each IHC client during enrollment and is available online in English and Spanish at <http://www.illinoishealthconnect.com/clients/membersguide.aspx>
- The semi-annual IHC Client Newsletter is mailed (in Spanish, if indicated) to each head of case, providing education on disease management, fitness, nutrition as well as IHC and HFS updates.
- The Healthy Habits page of the IHC website provides regular updates to clients with educational messages about nutrition, fitness, disease management as well as HFS and IHC program updates.

### **Quick Tips**

- All 2012 claims must be submitted to HFS by March 31 for consideration in the 2012 IHC Bonus. Immunizations not billed to HFS must be sent to I-CARE by March 31 for bonus consideration.
- The timely filing standard for HFS claims is 180 days for dates of service on or after July 1, 2012.
- IHC Panel Rosters now contain a language preference indicator as well as alternate phone numbers.
- MEDI trainings are available in webinar format for large groups or those with multiple locations. Contact Provider Training Specialist Danielle Parrillo at 847-610-8422, extension 2234, for more information.
- IHC medical homes must provide 24/7 access to clients, maintain at least 24 office hours per week for individuals (32 hours for groups) and have hospital privileges or hospital arrangements.
- Providers can request updates to IHC Location of Service Information and their MEDI phone number through the IHC Provider Portal. Ask your PSR or Quality Assurance Nurse how to request these changes.

*Dr. Kirkegaard provided the following information:*

IHC client education pads are pocket sized and were created based on recommendations from the PN subcommittee. Provider feedback surrounding this education tool has been positive and IHC PSRs will be distributing these during the first quarter of 2013. IHC is also willing to explore other options for disseminating the client education pads such as allowing provider offices to order them if there is sufficient demand. Dr. Kirkegaard also noted that while the pads had been created for use at the PCP offices, they may also be useful in an ED setting and asked the PN subcomm members to consider sharing them with ED colleagues and providing feedback. The Healthy Habits page on the IHC website is updated 2-3 times per week and is a great resource to clients. The IHC website also contains a provider Bulletin Board, also updated 2-3 times per week, with IHC and HFS updates and is a very helpful tool to provider offices.

*Dr. Sawlani and Alice Vogel* both commented that they would like to receive the client education pads at their respective offices, and the group agreed that a PDF of these materials should be included in the meeting minutes.

*Dr. Sawlani asks:*

When we order vaccines through the VFC program, is there a way to know the number of days after the order is put in, that the vaccines will be shipped? If the vaccine is out of stock or delayed will we get immediate notification regarding this, so we can manage the patient needs and patient expectations?

*Answer from Marcia Levin with VFC:*

“The simple answer to your question about how long it takes between ordering and shipment is approximately 10 business days. However, there is much variability. For example, if you place your order at the beginning of the month with many other providers, it may take a little longer than if you place it toward the middle of the month. You also asked about vaccines that are out of stock or delayed. No VFC supplied vaccines should be out of stock unless there is a national shortage, in which case your VFC program should have notified you about this previously. If there is a delay in shipment, neither the VFC program nor the provider gets a notification until the order is shipped. In most cases, the delayed item is shipped as soon as it becomes available, unless this is part of a national shortage.

All VFC providers are STRONGLY encouraged to maintain a 5 week vaccine stock in addition to their regular inventory, so that any delay in shipping should not prevent a child from receiving the needed vaccines at any visit. You should not wait until you are running out to order your vaccines. I would suggest that you communicate directly with your Illinois VFC Program in Springfield about any shipping concerns.”

*Dr. Sawlani asks:*

Is there an update at this time regarding Jan 1<sup>st</sup> 2013 increased Medicaid reimbursement payments for primary care providers as specified in the ACA legislation? *Pam Bunch from HFS* indicates that she will follow up with this question, but at this time her department is not able to provide an update.

HFS UPDATE: “Effective January 1, 2013, HFS is required to reimburse providers at Medicare rates for certain codes as defined in the Affordable Care Act. The Department is currently working on the programming necessary to implement these rate changes. If the programming is not in place until after January 1, 2013, the rate changes, when implemented, will be retroactive to the effective date.”

*Dr. Sawlani asks:*

Is there a plan for increasing the number of FQHC clinics in the Chicago area? *Dr. Kirkegaard with IHC* suggests that he talk with the Illinois Primary Healthcare Association (IPHCA).

*Dr. Sawlani states:*

There is nowhere to send Medicaid patients for follow up care after being discharged from the emergency department. Dr. Kirkegaard responds that he can feel free to have any Medicaid patients call IHC at 1.877.912.1999 and the IHC Call Center will coordinate them getting an appointment with either their assigned PCP or if there is no assigned PCP, IHC will assist with finding a medical home.

Mr. Jackson ended the meeting informing the group that he will send out meeting minutes, PDF of client education pads, and informed the group the next meeting will be 3.13.13 at noon.

