



The Illinois Academy of Family Physicians and All Kids, Medicaid and Your Healthcare Plus – the Primary Care Case Management Program

Family physicians believe in access to care and that we are committed to systems that will help them provide that medical home. Family physicians remain committed to the underserved no matter what develops before, during and after the implementation of All Kids.

IAFP and our members have specific concerns about the reimbursement process given Medicaid's history of delayed payments. Given the timeline for implementation and the cash-flow issues of the state budget, family physicians are concerned that the predicted savings and costs will not pan out as forecasted. Some can't afford to sacrifice now and simply hope for the best.

IAFP is committed to representing our members and their patients in every avenue in shaping the program so that family physicians will be able to participate and benefit from the partnership.

Reasons for family physicians to participate in All Kids

For the pediatricians and family physicians in Illinois, there are good fiscal reasons for participating in All Kids Covered:

- A. Rates for ambulatory care for pediatric services were significantly increased in January 2006, as the result of a lawsuit settlement against the Illinois Medicaid program.
- B. Signing up as a provider will make them eligible to receive expedited payment for services to children. Expedited payment is 30 days. The State Comptroller reported that in 10 years, there have been no late expedited payments.
- C. Children will have a medical home where they will receive quality comprehensive care and preventive health care to stay healthier and save the state from catastrophic and emergency care costs.

For the family physicians, whose practices average 20-30% children and 70-80% adults, these fiscal reasons are good for 20-30% of their practice.

The Medicaid Primary Care Case Management Program:

The Primary Care Case Management, Illinois Health Connect, will pay primary care physicians caring for Medicaid patients the following per member per month amounts: \$2 for children, \$3 for adults and \$4 for senior or disabled.

For the 70-80% of their practice, the one good fiscal reason is the “per member per month” amounts for adults: \$3 for adults and \$4 for senior or disabled. However, family physicians who care mostly for adults continue to struggle with “low and slow” reimbursements.

Where does IAFP stand on All Kids?

IAFP released a public statement on October 21, 2005 supporting access to healthcare for Illinois children through All Kids <http://www.iafp.com/legislative/All%20Kids.htm>

IAFP has a long history of supporting universal access to health care and of support for incremental increases in access through the Kid Care and Family Care over the past eight years.

IAFP takes the approach that health care systems exist and family physicians need to figure out how to work with and through them. Family physicians' general idealism means they are hopeful that they can shape health care systems to serve their patients' health care needs. Family physicians are invested in the communities they serve, and remain a constant voice at all levels on how to best deliver primary care services.

Family physicians themselves believe that there are still many uncertainties about the Medicaid changes and the All Kids program. Some who have the option to enroll or not enroll as a provider prefer a "wait and see" position for now as the program rolls out.

The Illinois state budget faces a serious structural deficit. Therefore unanswered questions remain on how the state can continue to finance health programs, as well as other priorities such as education, transit, and pensions. Until the overall fiscal health of our state improves, we will always face the question "how will the state pay for this?" Family physicians will continue to ask that question, but will also continue to care for patients to the best of their abilities within the system we have.

IAFP's role representing the membership

IAFP will continue to participate in the various meetings and offer information to the process of implementing All Kids.

IAFP has decided that it will focus on three main areas:

1. Physician involvement in the development and approval of disease management protocols is essential. The Medicaid changes will not be successful without meaningful physician input.
2. **Adequate funding of providers is essential to its success.** An adequate funding mechanism for analyzing, reporting, and evaluating results of the program is necessary.
3. Case management infrastructure and support will be keys to making the system work. There needs to be face-to-face interaction with the medical practices.

IAFP's relationship to Medicaid's Illinois Health Connect (PCCM)

IAFP has not endorsed Illinois Health Connect. IAFP has made educating members about Illinois Health Connect a very high priority. IDHFS and AHS are developing the program as it is being rolled out.

IAFP members serve on Illinois Health Connect committees to make sure the voice of family medicine is heard as these programs are developed.

Since more than 80% of IAFP members report seeing Medicaid patients, IAFP has continued to work diligently to help shape Illinois Health Connect. Several accommodations to family physicians' concerns have been made by Automated Health Systems (the PCCM vendor) working with IAFP, Illinois Chapter of American Academy of Pediatrics and Illinois State Medical Society.

Illinois Health Connect is a huge change to the Medicaid program in Illinois. There is no simple way to communicate the change to the thousands of family physicians practicing in Illinois. IAFP therefore offers a variety of educational venues for members to find out more about the program.

We have sent letters and e-mails and held audio teleconferences where members can ask questions of the Illinois Health Connect staff. Some IAFP leaders have personally contacted Chicago area members to find out what they know or think of Illinois Health Connect.

IAFP's goal is for every member to be well enough informed that they can make a reasonable decision on whether or not to participate.

Background on IAFP's involvement in the Medicaid Payment Cycle

IAFP has been concerned about how family physicians have interacted with the Illinois Medicaid program for a very long time. IAFP and other organizations were very active in the summer and fall of 2005 in working with the Medicaid program, the State Comptroller and the State Treasurer, to address the extremely long payment cycles that physicians were facing in the Medicaid. That effort was successful in the short-term when the state took a loan to pay down the backlog of state Medicaid payments to physicians (see the front page of the December 2005/January 2006 *Family Physician*, <http://www.iafp.com/newsletter/> for a brief article on the IAFP's activity).

One of the results of IAFP's continuing involvement was the shortening of the payment cycle for Medicaid payments for primary care to 60 days for adult medical services (see announcement <http://www.iafp.com/legislative/medicaidpayments.htm>).