



**HealthChoice Illinois: comments submitted by Family Physicians and Pediatricians**

On behalf of the 88% of family physicians and pediatricians who accept Medicaid in Illinois, we bring forth the following concerns and issues facing our providers and their patients as HealthChoice Illinois' rollout ensues.

Early in January, as the rollout began in Cook County, our members reported “churn” in the re-auto-assignment process, coupled with narrow provider networks and unfilled prescriptions. This has continued downstate as the rollout went “live” on April 1<sup>st</sup>. Multiple providers, across specialties and across the state have expressed similar concerns and frustrations about HFS and the Medicaid managed care rollout. Our goal is to identify systemic flaws that should be addressed. Likewise, our voice amplifies individual provider complaints that are regarded as “one-off” anecdotes.

As we received enumerated issues from members across the state, a pattern appeared:

- HFS has asked that problems be submitted to the complaint portal which in and of itself doesn't resolve the issue.
- Express communication with providers remains essential, not just postings on the HFS website.
- Delays are evident and some are necessary: waiver programs, LTSS, etc. are already delayed. This entire transition impacts everyone. Specifically, pregnant women, adult disabled and medically fragile children could stand in harm's way if their care in HealthChoice Illinois isn't explicitly addressed. We recognize and appreciate the new 90-day option being implemented after April 1<sup>st</sup>.
- Historically, our providers have worked to provide care and resolve issues for their patient population. Most practices succeed. However, when the problems are systemic or unwieldy beyond their jurisdiction, HFS and the Medicaid health plans should be readily available to step in and problem-solve. Access to this help should be transparent.

**Going forward, the following strategies/steps are proposed:**

At a minimum, we would ask that HFS:

1. Work with MCOs, providers, and other stakeholders to establish a 'Chain of Command' algorithm, to help resolve issues and grievances, so providers know who to work with, and know when to escalate issues to a higher level.
2. Provide increased written communication regarding resolved issues and/or plans to resolve future issues of concern.
3. Assert HFS' oversight of the auto-assignment process to ensure network adequacy for all plans instead of using arbitrary geo-map limits.
4. Address the time-consuming activity of training on issues like medical homes. Who developed the training? Where is the requirement? Is this a plan-specific outreach like the care-coordination process or other?
5. Receive clarity on meeting quality bonuses: ensure commonality in terminology.
6. Allow flexibility in contracting in new areas to encourage specialty participation, including allowing plans to take limits. If not possible, please explain.
7. Lengthen the timeline for implementation.
8. Report back in 30 days on progress made in addressing the outlined concerns.

**IAFP, ISMS, and ICAAP are working with IAMHP to provide our members the tools they need to navigate HealthChoice Illinois in order to treat and care for our Medicaid population. HFS' leadership is sought to further this goal.**