IL-HPCO Meets with Medicaid
by Betsy Mitchell, Carrie Bill, and Kellie Newman

On Monday, October 30, 2017, IL-HPCO's Reimbursement Working Group participated in a conference call with the Director and Assistant Director of Medicaid in Illinois. The purpose of the call was to discuss the status of Managed Care Organizations in Illinois. Beginning January 1, 2018, Illinois will have seven MCOs (a change from 12). Five MCOs will be statewide and two MCOs will only cover Cook County. Phase One, of the two phase program, will begin on January 1 with a notice going to current MCO participants automatically assigning them to the new plan or allowing them to be reassigned to another MCO within 90 days. Phase Two will begin on April 1, 2018, allowing all new applicants to be assigned to a MCO within 90 days. For providers, a series of notices from the Illinois Department of Healthcare and Family Services were sent beginning Friday, October 27, 2017.

In addition, several agenda items were discussed with the Medicaid leaders. The first issue discussed focused on the constantly frustrating billing issues surrounding hospice patients residing in a nursing home. The “room and board” issue was explained and IL-HPCO recommended that the “pass through” be eliminated and MCOs pay the nursing homes directly for hospice services. We also learned from the conference call that HFS is currently paying claims submitted in mid-June 2017 and working to get caught up with past bills as soon as possible. In addition, during our discussions, HFS realized confusion exists over when a credit file

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The Illinois General Assembly returned to Springfield on Tuesday, October 24, 2017 for the beginning of the annual fall veto session. During Veto Session, legislators are expected to consider up to 33 bills that were rejected over the summer by Governor Rauner. The subject of these bills include state finances, minimum wage, right to work, gun control, and greater protections for student loan debt.

Veto Session is scheduled for only six days: October 24, 25, 26 and November 7, 8, and 9. At this moment, the only legislative action we may see could involve dealing with unpaid bills to medical providers. IL-HPCO will monitor closely all action and keep you informed. Never hesitate to contact me.

The legislature will reconvene in January 2018 for the Second Session of the 100th General Assembly, where a full cadre of issues will be considered, including the Fiscal Year 2019 Budget. Based upon conversations with legislators, we can expect to see bills dealing with MCOs, physician assisted suicide, pain management and scope of medical practice issues.

As a member of IL-HPCO, you are urged to meet with your legislators as soon as possible to discuss how these issues can impact your community. If you would like assistance with this vital task, please contact me at Betsy@cook-witter.com.

Campaigns
Throughout Illinois, campaigns continue to heat up with most of the attention directed at the Governor’s race and the growing list of candidates seeking to replace Attorney General Lisa Madigan. In the Democratic Race for Governor, there is now one less candidate as Chicago City Alderman Ameya Pawar stepped down in mid-October citing a lack of funds in a very crowded field of wealthy individuals. J.B. Pritzker continue to lead field, with Senator Biss and Chris Kennedy not too far behind him. On the Republican side, with growing discontentment with Governor Rauner within the Republican Party, a few names will be emerging as possible primary candidates. It is too early to see who may emerge as the frontrunner in the AG’s race.

Hospice Provider Preview Reports Posted by CMS

Hospice Provider Preview Reports were made available in the CASPER system on August 30, 2017. The Preview Reports include hospice providers’ quality measure results based on Quarter 1 2016 to Quarter 4 2016 HIS data that will appear in the November 2017 refresh of Hospice Compare.
We are pleased to announce that the IL-HPCO Conference held in October at Northern Illinois University broke past records for attendance and sponsor/exhibitors. Thank you to the IL-HPCO Education Committee, led by Ronda Dudley, and her education experts who crafted speakers, topics and all logistics. We were happy to activate the new electronic Evaluation and Certificate Process overseen by Stephanie Meyer at JourneyCare. The pictures below tell the story.

**IL-HPCO Conference Breaks Attendance Record**

The exhibition hall at Northern Illinois University.

Mary Runge and Mary K. Sheehan

Sarah Bealles, Past Chair, and Mary K. Sheehan, Chair

Mary K. Sheehan, Tracey Moore-head, and Susan Balfour

Julie Glendenning

John Stys and Pamela Cramer

Advacare Reps and Trish Benson

Julie Glendenning, Sean O’Mahony, Marny Fetzer

Scott Manson, Lamari Brayhill III, Sarah Bealles, and Yolanda Davis

Mary K. Sheehan, Past Chair, and Mary K. Sheehan, Chair

Ellen Byrne, Nancy Sehy and Jillian Weber

The IL-HPCO website will receive the ‘Pinnacle Award of Merit’, second highest honor, from the Illinois Society for Healthcare Marketing and Public Relations. Take a Bow!

www.il-hpco.org
This week, CMS issued the FY2018 rates for the Hospice Medicaid benefit. Access the official CMS notification of rates (PDF). The national rates are listed in the CMS notification memo. The same wage index values apply to the Medicaid rates and the Medicare rates. NHPCO has prepared the FY2018 Medicaid Hospice state/county rate chart, for members to access in the Medicaid Rates section of the website.

Each state has a tab across the bottom of the spreadsheet for ease in rate look up. If you are interested in the calculations, look at the tab called “Wage-Nonwage Components” for details on how the rates are calculated.

NOTE: The FY2018 Medicaid rates are slightly different that the FY2018 Medicare rates. Please ensure that billing staff note the difference.

Two issues of note with the FY2018 Medicaid rates.

1. There is no allowance in the Medicaid hospice rates for the co-pay for respite care.
2. There is no allowance in the Medicaid hospice rates for the co-pay for drugs.

Here are the national rates for hospices who HAVE submitted the required quality data:

<table>
<thead>
<tr>
<th>Description</th>
<th>Daily Rate</th>
<th>Wage Component</th>
<th>Non-Weighted Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine Home Care (Days 1-60)</td>
<td>$193.03</td>
<td>$132.63</td>
<td>$60.40</td>
</tr>
<tr>
<td>Routine Home Care (Days 61+)</td>
<td>$151.61</td>
<td>$104.17</td>
<td>$47.44</td>
</tr>
<tr>
<td>Service Intensity Add-On</td>
<td>$40.70</td>
<td>$27.97</td>
<td>$12.73</td>
</tr>
<tr>
<td>Continuous Home Care</td>
<td>$976.80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Rate = 24 hrs of care/$40.70 hr</td>
<td>$671.16</td>
<td>$305.64</td>
<td></td>
</tr>
<tr>
<td>Inpatient Respite Care</td>
<td>$181.87</td>
<td>$98.45</td>
<td>$83.42</td>
</tr>
<tr>
<td>General Inpatient Care</td>
<td>$743.55</td>
<td>$475.95</td>
<td>$267.60</td>
</tr>
</tbody>
</table>

Below are the national rates for hospices that HAVE NOT submitted the required quality data:

<table>
<thead>
<tr>
<th>Description</th>
<th>Daily Rate</th>
<th>Wage Component</th>
<th>Non-Weighted Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine Home Care (Days 1-60)</td>
<td>$189.22</td>
<td>$130.01</td>
<td>$59.21</td>
</tr>
<tr>
<td>Routine Home Care (Days 61+)</td>
<td>$148.60</td>
<td>$102.10</td>
<td>$46.50</td>
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<tr>
<td>Service Intensity Add-On</td>
<td>$39.89</td>
<td>$27.41</td>
<td>$12.48</td>
</tr>
<tr>
<td>Continuous Home Care</td>
<td>$957.45/Full rate = 24 hours of care/$39.89 hr.</td>
<td>$657.87</td>
<td>$299.58</td>
</tr>
<tr>
<td>Inpatient Respite Care</td>
<td>$178.27</td>
<td>$96.50</td>
<td>$81.77</td>
</tr>
<tr>
<td>General Inpatient Care</td>
<td>$728.83</td>
<td>$466.52</td>
<td>$262.31</td>
</tr>
</tbody>
</table>
Transition to New Medicare Numbers and Cards

CMS, through the Medicare Administrative Contractors (MACs), recently mailed letters to all Medicare Fee-For-Service providers about our work to assign new numbers (known as Medicare Beneficiary Identifiers or MBIs) and issue new Medicare cards to all people with Medicare beginning in April 2018. Our top priorities are to make sure:

• Your Medicare patients have continuous access to care.
• You have the tools and information you need for a smooth transition.

Starting in June 2018, you can look up your patients’ new Medicare numbers through your MAC’s secure web portal. Carefully review the letter and accompanying fact sheet and find out how to prepare to accept the new number beginning in April 2018. Your letter will contain specific information for your MAC. You can also view a sample letter and print-friendly fact sheet. We also recently unveiled the new Medicare card design and issued a press release with more information about the project.

REQUEST TO HELP WITH DISSERTATION HOSPICE ASSISTANCE NEEDED

A third-year PhD student at the Jane Addams College of Social Work at UIC is starting her dissertation, and social work would like to interview older Latinos recently enrolled in hospice. The objective is to learn about how they make decisions about end-of-life care. She is looking for community partners to help with the recruitment of persons to interview.

Please contact the student below if you’d like to participate in this project:
Susanny J. Beltran, MSW, PhD Candidate
Janes Addams College of Social Work
University of Illinois at Chicago at
Susanny Beltran sbeltr2@uic.edu

Did you know???

Carrie Bill

The State of Illinois created a Managed Care Provider Complaint website so that we can share our concerns with the state. Illinois is encouraging all of us to utilize the website so that they can track our concerns for future provider education. They realize we may need extra support during times when the Managed Care Organizations will not work directly with us. It is a quick and easy form to complete online. We are sharing our stories with each other and now it’s time for the state to hear them as well. IL-HPCO is encouraging everyone to voice your concerns. If we don’t share our stories they can only assume everything is going well.

Below is the link to the State’s Complaint form.
https://www.Illinois.gov/hfs/MedicalProviders/cc/Pages/ManagedCareComplaints.aspx
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By purchasing the “A Special Kind of Caring” Illinois Hospice Specialty License, you help raise awareness about hospice services available to Illinois residents, as well as show the importance of quality supportive and end-of-life care.

When you purchase the plate, $23 of the $25 fee will support the following:

• Hospice care programs for seriously ill children;
• Improving access to end-of-life care for Illinois veterans;
• End-of-life care programs specific to gender, ethnic, religious and minority groups;
• Education and outreach for hospice volunteers, patients, families and healthcare professionals;
• Education and outreach programs
• Enhancements to the Illinois Hospice and Palliative Care website.

You can purchase:
• Random-Number Plates
• Vanity Plates
• Personalized Plates

https://www.ilsos.gov/pickaplate/pickaplate to purchase your plate today.
The Center to Advance Palliative Care (CAPC), in collaboration with the National Coalition for Hospice and Palliative Care (NCHPC), is launching an exciting new initiative to build a comprehensive inventory of community palliative care programs across all service settings—including home, office/clinic, and long-term care.

While there is growing research demonstrating the positive impact of palliative care in these settings, there are no reliable data on (non-hospice) palliative care capacity outside of hospitals. Mapping Community Palliative Care will develop estimates of palliative care access in communities across the country and track growth over time. Illinois Hospice & Palliative Care Organization is supporting this important project because it will promote the expansion of community palliative care by identifying models of service delivery and providing summary and comparative data for the field. And it will make it easier for patients, families, caregivers, and practitioners to find palliative care services in their community.

In order for this project to succeed, all community-based programs need to participate. Complete a brief survey on the Mapping Community Palliative Care website to put your program on the map. Participation takes less than ten minutes.

Participating programs will be highlighted in the Provider Directory at GetPalliativeCare.org, an online resource for palliative care information for people with serious illness and their families.

Visit the Mapping Community Palliative Care website to learn more and participate at https://mapping.capc.org.