



HR0850

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1 HOUSE RESOLUTION

2 WHEREAS, Due to federal health care reform, an integrated
3 care pilot program in Northern Illinois, and statewide Medicaid
4 reform, a managed care approach to providing Medicaid coverage
5 is no longer up for debate making Medicaid managed care a
6 reality in Illinois; and

7 WHEREAS, Managed care has proven a sometimes inefficient
8 provider of health care coverage especially for long-term care
9 and those individuals - typically the elderly or people with
10 disabilities - receiving it; and

11 WHEREAS, Illinois' pilot program and the recent Medicaid
12 reform law make it mandatory for managed care to provide the
13 services expected in a long-term care setting, which is a
14 potentially risky scenario for those receiving these kinds of
15 services; and

16 WHEREAS, A number of other states have discontinued managed
17 care for people with disabilities and the elderly, including
18 California which found it more cost-effective not to utilize
19 managed care after an extensive overhaul of the state's health
20 care program; and

21 WHEREAS, The State of Illinois is setting forth on this

1 venture with two for-profit managed care organizations under
2 contract, while not exploring other entities to provide quality
3 care, such as not-for-profit organizations; and

4 WHEREAS, The Institute on Disability and Human Development
5 at the University of Illinois at Chicago (UIC) is overseeing
6 the consumer satisfaction levels and the managed care
7 organizations' competency for the test population in the pilot
8 program; nonetheless, only an estimated 40,000 individuals
9 with disabilities are in the pilot program area and targeted to
10 receive services; as Illinois Medicaid reform and federal
11 health care reform become the norm for Medicaid recipients in
12 this State, a conservative estimate is that 2.4 million people
13 currently receive Medicaid, and approximately 1.2 million
14 people - or 50% of the Medicaid population - under that program
15 will move into a managed care system, as mandated by the
16 Illinois Medicaid reform law; this increased number will not
17 receive monitoring from UIC and, possibly, will not receive the
18 adequate follow-up, thereby, leaving them more susceptible to
19 fraudulent practices, abuse, neglect, and insufficient care
20 through providers and the managed care organizations; as
21 Illinois moves toward transitioning 50% of the Medicaid
22 population to a managed care system, as with the pilot program,
23 no other plans except those involving for-profit managed care
24 organizations are presently receiving serious discussion;
25 therefore, be it

1 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE
2 HUNDREDTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that there
3 is created in the Department of Healthcare and Family Services
4 the Medicaid Managed Care Oversight Task Force to monitor how
5 Illinois approaches and manages a new form of health care
6 delivery system based on a managed care model, particularly for
7 people with disabilities and the elderly; and be it further

8 RESOLVED, That the Task Force shall consist of the
9 following: (1) 3 members, appointed by the Speaker of the
10 Illinois House of Representatives; (2) 3 members, appointed by
11 the Minority Leader of the Illinois House of Representatives;
12 and (3) 4 members, appointed by the Governor; the Task Force
13 shall elect a chairperson from their membership; and be it
14 further

15 RESOLVED, That the Department of Healthcare and Family
16 Services shall facilitate the Task Force and provide the Task
17 Force with administrative support, but shall have no hand in
18 guiding its direction or ascertaining its results; the Task
19 Force shall meet quarterly and report on its findings to the
20 General Assembly and its appropriate committees; reports from
21 the Task Force shall indicate (i) whether individuals within
22 the pilot program and the intended 50% of Medicaid recipients
23 transitioned into managed care are satisfied with their health

1 outcomes, can access all necessary forms of medical care, and
2 received all necessary information from the State and the
3 Department regarding the changes to their health care delivery
4 system; and (ii) any other satisfaction indicators deemed
5 applicable by the Task Force, especially with the knowledge of
6 how UIC conducted satisfaction surveys; the Task Force's life
7 span shall continue until January 1, 2019, unless the General
8 Assembly deems a longer tenure necessary, as that date would
9 mark the two-year anniversary of the transition of Medicaid
10 enrollees into managed care programs, as mandated by the newly
11 enacted Medicaid reform law in Illinois; and be it further

12 RESOLVED, That upon receiving reports from the Task Force,
13 the General Assembly and all appropriate committees therein
14 must take the necessary steps to ensure all individuals
15 receiving health care through a managed care delivery system
16 are satisfied with that care and are not receiving worse care
17 as a result; if the General Assembly finds negative outcomes
18 per reports from the Task Force, it should amend the process by
19 which managed care is put to use for Medicaid recipients,
20 especially for people with disabilities and the elderly, and
21 further, if the reports are positive or neutral, the General
22 Assembly should decide whether to continue monitoring the
23 program for a set period to ensure that all recipients receive
24 the best quality health care available to them under a managed
25 care process; and be it further

1 RESOLVED, That as changes to health care delivery improve
2 or changes come to pass based on new laws passed by the State
3 or federal government, the General Assembly must decide if
4 continuing the use of the managed care approach is the most
5 appropriate, cost-effective, and beneficial means in providing
6 health care to Medicaid recipients in Illinois; and be it
7 further

8 RESOLVED, That suitable copies of this resolution be
9 delivered to the Governor and to the Director of the Department
10 of Healthcare and Family Services.