



HR0850 Enrolled

LRB100 18295 MST 33500 r

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HOUSE RESOLUTION 850

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

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

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

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

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WHEREAS, The State of Illinois is setting forth on this venture with two for-profit managed care organizations under

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1 contract, while not exploring other entities to provide quality  
2 care, such as not-for-profit organizations; and

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

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

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