



103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

HB4076

Introduced 5/9/2023, by Rep. Camille Y. Lilly

SYNOPSIS AS INTRODUCED:

305 ILCS 5/11-5.3a new

Amends the Illinois Public Aid Code. Requires the Department of Innovation and Technology, in conjunction with the Department of Healthcare and Family Services, to hire a State vendor to redetermine the eligibility of medical assistance enrollees not covered by specified federal waivers provided under the Social Security Act. Provides that the selected vendor must be certified by the Business Enterprise Program and have no less than 60% of its owners with established residency in Illinois. Requires the selected vendor to conduct redeterminations utilizing a system that meets certain requirements. Provides that all vendors applying for consideration as the State vendor to conduct medical assistance eligibility redeterminations shall submit a letter of intent to the Department of Innovation and Technology in a form and manner required by the Department of Innovation and Technology. Requires the Department of Innovation and Technology to allow 7 days for a letter of intent and to issue a grant award to the selected vendor within 2 weeks after the end of the 7-day period. Provides that, to qualify for a grant award the selected vendor must already have all contracts in place with any relevant subvendors no later than 5 business days after the effective date of the amendatory Act. Provides that nothing in the amendatory Act shall be construed to contravene any federal regulation, policy, or requirement of the Centers for Medicare and Medicaid Services; and that if any provision of the amendatory Act or its application is found to be in violation of any federal regulation, policy, or requirement of the Centers for Medicare and Medicaid Services, that provision is declared invalid but does not affect any other provision or application of the amendatory Act that can be given effect without the invalid provision or application.

LRB103 32309 KTG 61622 b

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by
5 adding Section 11-5.3a as follows:

6 (305 ILCS 5/11-5.3a new)

7 Sec. 11-5.3a. Business Enterprise Program certified vendor
8 for redetermination system.

9 (a) The General Assembly finds that there is a real and
10 current need for automation of the process of determination,
11 redetermination (generally "determination"), certification,
12 or recertification of entry into any type of regulated program
13 while also providing for an automatic system of facilitating
14 the determination process where recalcitrance or reticence is
15 detected. Further, there is a need for a system that includes
16 finding, informing, recruiting, and securing an individual's
17 participation in programs such as the medical assistance
18 program under Article V to the benefit of the individual.

19 (b) The Department of Innovation and Technology, in
20 conjunction with the Department of Healthcare and Family
21 Services, shall select a State vendor to redetermine the
22 eligibility of medical assistance enrollees not covered by the
23 federal waivers provided under Section 1902(e)(14)(A) of the

1 Social Security Act. The selected vendor must be certified by
2 the Business Enterprise Program and have no less than 60% of
3 its owners with established residency in Illinois as of the
4 effective date of this amendatory Act of the 103rd General
5 Assembly. The selected vendor shall conduct redeterminations
6 utilizing a system that meets the following requirements:

7 (1) The redetermination system must be hosted on a
8 cloud-based platform that is secure and compliant with
9 standards under the federal Health Insurance Portability
10 and Accountability Act of 1996.

11 (2) The redetermination system must also use a cloud
12 communication platform to programmatically perform calls,
13 text messages, and other communication functions using web
14 services or application programming interface services.

15 (3) The redetermination system must be able to make
16 contact with a medical assistance enrollee in an automated
17 fashion, using the last known contact information to
18 contact the medical assistance enrollee, and if the
19 redetermination contact process is advised that contact
20 was not made, the process must use public and private
21 databases to find and test newly found contact information
22 until the medical assistance enrollee is reached and
23 redetermination is started, or the medical assistance
24 enrollee opts out of the redetermination contact process.
25 The redetermination system must be designed to continue
26 until contact is made and confirmed and contact

1 information is updated to facilitate the following year's
2 redetermination contact process. A relentless search to
3 find medical assistance enrollees and complete the
4 redetermination process must be made, such that no
5 eligible medical assistance enrollee or applicant is left
6 behind.

7 (4) The redetermination system must also have the
8 ability to reward a medical assistance enrollee who
9 successfully completes the redetermination process, such
10 as with a gift card or other rewards that can be provided
11 to the medical assistance enrollee when the process is
12 completed. The amount of the gift card may be conditioned
13 on the responsiveness of the medical assistance enrollee
14 or dependent on other factors such as age, living
15 conditions, or abode as well as other factors or criteria.

16 (5) The redetermination system must have the ability
17 to simplify and greatly facilitate medical assistance
18 enrollees to engage in the redetermination process and
19 easily enter, update, and transmit their required
20 information and data by being able to go from using a voice
21 virtual agent or text virtual agent to an online web form
22 and back to a human assistant seamlessly and without
23 losing any data input.

24 (6) The redetermination system must allow the medical
25 assistance enrollee to start the process through one of
26 the means available, stop at some point, and then resume

1 using the same means or transferring the process to
2 another means available through the system without missing
3 a beat.

4 (7) The redetermination system must allow the medical
5 assistance enrollee to switch between the voice virtual
6 agent (using artificial intelligence), the text virtual
7 agent, and an online web form.

8 (8) The redetermination system must also perform the
9 function of pre-populating forms with the information
10 confirmed by the medical assistance enrollee, which can be
11 uploaded during the redetermination process as the medical
12 assistance enrollee proceeds through the data fields so as
13 to confirm or update the medical assistance recipient's
14 information.

15 (9) The redetermination system must be designed to be
16 compliant with the Americans with Disabilities Act (ADA).
17 ADA compliance must be found regardless of which of the
18 different ways a medical assistance enrollee enters the
19 data, and then, any of the other means to which the medical
20 assistance enrollee can switch, continues to be ADA
21 compliant regardless of the stage of the redetermination
22 process that the enrollee is in and regardless of the
23 number of transitions from one data entry means to
24 another.

25 (10) The redetermination system must provide an
26 out-of-the-box analytics dashboard that is tethered to the

1 cloud-based system with no additional software
2 installation on the user's computer or mobile devices.

3 (11) The redetermination system must allow for a
4 scouring of the laws, rules, and regulations to review any
5 changes to the medical assistance program and institute
6 those changes in the questionnaires and forms utilized to
7 assess the candidate and enroll the applicant.

8 (12) Using the redetermination system shall not be
9 considered "assistance" but rather a different modality of
10 applying for redetermination.

11 (13) The redetermination system must have a cloud data
12 processing platform to accumulate enrollee data to begin
13 the process in an automated fashion. This includes data
14 validation, rejection, and preparation for communication
15 such as call or text.

16 (14) The redetermination system must have a cloud data
17 processing platform to be able to provide data submitted
18 by medical assistance enrollees to managed care
19 organizations at a predefined frequency, such as daily,
20 weekly, or monthly.

21 (c) All vendors applying for consideration as the State
22 vendor to conduct medical assistance eligibility
23 redeterminations as provided in subsection (b) shall submit a
24 letter of intent to the Department of Innovation and
25 Technology in a form and manner required by the Department of
26 Innovation and Technology. The Department of Innovation and

1 Technology shall allow 7 days for a letter of intent and shall
2 issue a grant award to the selected vendor within 2 weeks after
3 the end of the 7-day period. To qualify for a grant award under
4 this Section, the selected vendor must already have all
5 contracts in place with any relevant subvendors no later than
6 5 business days after the effective date of this amendatory
7 Act of the 103rd General Assembly.

8 (d) Nothing in this amendatory Act of the 103rd General
9 Assembly shall be construed to contravene any federal
10 regulation, policy, or requirement of the Centers for Medicare
11 and Medicaid Services. If any provision of this amendatory Act
12 of the 103rd General Assembly or its application is found to be
13 in violation of any federal regulation, policy, or requirement
14 of the Centers for Medicare and Medicaid Services, that
15 provision is declared invalid but does not affect any other
16 provision or application of this amendatory Act that can be
17 given effect without the invalid provision or application. The
18 provisions of this amendatory Act of the 103rd General
19 Assembly are declared to be severable.