



HR0220

LRB103 31992 KTG 60799 r

1 HOUSE RESOLUTION

2 WHEREAS, It was recently reported that the Department of
3 Healthcare and Family Services (HFS) released information
4 dated March 31, 2023 (Report) regarding updated enrollment and
5 cost estimates related to Medicaid benefits for undocumented
6 immigrant seniors and adults; and

7 WHEREAS, The Report highlights serious runaway costs in
8 recent Medicaid expansions to undocumented immigrants; and

9 WHEREAS, The Report shows dramatic growth in undocumented
10 immigrant participation which will require \$990 million in
11 general revenue funds (GRF) to support the Medicaid expansion
12 in State Fiscal Year 2024; and

13 WHEREAS, This information was not shared by HFS or the
14 Pritzker Administration to the general public or the General
15 Assembly as a whole, but instead was published in the news
16 media; and

17 WHEREAS, Public Act 101-636 expanded Medicaid coverage to
18 undocumented immigrants over the age of 65 as part of the
19 Fiscal Year 2021 State Budget; and

20 WHEREAS, HFS was questioned specifically about costs

1 related to the expansion of Medicaid for undocumented
2 immigrants in the House Human Services Appropriations
3 Committee on Thursday, March 16, 2023, but was not forthcoming
4 with any information; and

5 WHEREAS, The Medicaid expansion included in Public Act
6 101-636 was included last minute in the Budget Implementation
7 Bill (BIMP), with no time for a committee hearing or expert
8 testimony; and

9 WHEREAS, Preliminary cost estimates for this initial
10 Medicaid expansion to undocumented immigrants over the age of
11 65 was estimated to be between \$70-\$100 million in State
12 Fiscal Year 2021; and

13 WHEREAS, Public Act 102-16 expanded Medicaid coverage to
14 undocumented immigrants for ages 55-64 as part of the Fiscal
15 Year 2022 State Budget; and

16 WHEREAS, The Medicaid expansion included in Public Act
17 102-16 was, again, included last minute in the BIMP, with no
18 time for a committee hearing or expert testimony; and

19 WHEREAS, Initial cost estimates for this second Medicaid
20 expansion to undocumented immigrants was estimated to be
21 \$70-\$80 million for Fiscal Year 2022; and

1 WHEREAS, Public Act 102-1037 expanded Medicaid coverage to
2 undocumented immigrants for ages 42-54 as part of the Fiscal
3 Year 2023 State Budget; and

4 WHEREAS, Initial cost estimates for this third Medicaid
5 expansion to undocumented immigrants was estimated to be
6 \$70-\$80 million; and

7 WHEREAS, Public Act 102-1037 was added last minute without
8 bipartisan consensus to the Medicaid Omnibus bill, with no
9 time for committee hearing or expert testimony; and

10 WHEREAS, The Medicaid Omnibus bill has traditionally been
11 the result of a bipartisan, bicameral working group that
12 determines which Medicaid services and programs can be
13 expanded within the framework of available revenues; and

14 WHEREAS, The recently released Report shows initial cost
15 overruns in Fiscal Year 2021 related to the first expansion
16 specifically stating that "In 2020, the Health Benefits for
17 Immigrant Seniors (HBIS) program exceeded its appropriation in
18 the first month of implementation"; and

19 WHEREAS, This initial cost overrun should have raised
20 alarms within HFS, and the Administration should have shared

1 that information with all members of the General Assembly; and

2 WHEREAS, The Report then states that, "HFS brought in its
3 contracted actuarial firm, Milliman, for future program
4 enrollment and cost estimates"; and

5 WHEREAS, The Report states that in 2021 and 2022, Milliman
6 used "American Community Survey (ACS) census data for
7 eligibility and enrollment estimates" and assumed "HBIS and
8 Health Benefits for Immigrant Adults (HBIA) enrollees would
9 not cost more than Medicaid enrollees"; and

10 WHEREAS, These assumptions were clearly incorrect as the
11 Report states that, "Both the 65+ age group and the 55-64 age
12 group have more enrollees than Milliman thought would be
13 eligible" and that the "42-54 age group has exceeded
14 Milliman's enrollment projections 8.5 months into the program,
15 and is still seeing more than 10% enrollment growth month over
16 month"; and

17 WHEREAS, Original estimates for Fiscal Year 2023 included
18 assumptions that 53,700 eligible undocumented immigrants would
19 qualify for Medicaid coverage, with an assumed 33,500 enrolled
20 into the program; and

21 WHEREAS, Actual active case enrollees through February

1 2023 was 51,914, which is 55% higher than original estimates
2 for Fiscal Year 2023; and

3 WHEREAS, Fiscal Year 2024 estimates now include 162,100
4 eligible undocumented immigrants for Medicaid qualification
5 with 98,500 enrollees; and

6 WHEREAS, Fiscal Year 2024 estimates now show growth in
7 Medicaid coverage for eligible undocumented immigrants
8 totaling 108,400 over original Fiscal Year 2023 estimates, and
9 enrollees totaling 65,000 over original Fiscal Year 2023
10 estimates, a 202% and 94% increase respectively; and

11 WHEREAS, Participation of undocumented immigrants in the
12 Medicaid expansion is only part of the miscalculation leading
13 to increased costs within the program; and

14 WHEREAS, The Report states that, "Actual claims experience
15 reflects higher enrollee costs than the traditional Medicaid
16 population due to more untreated chronic conditions and higher
17 hospital costs"; and

18 WHEREAS, The Report indicates that Milliman originally
19 projected the estimate for this Medicaid expansion will total
20 \$221.8 million in Fiscal Year 2023, and then balloon to \$990
21 million in Fiscal Year 2024, which represents a \$768.2 million

1 increase, equaling 346% year over year; and

2 WHEREAS, The State of Illinois receives federal matching
3 Medicaid funds totaling no less than 50% of the total cost of
4 coverage for citizens and legal residents of the United
5 States; and

6 WHEREAS, Undocumented immigrants are ineligible for any
7 federal Medicaid match resulting in State GRF being used to
8 pay for the entirety of services provided; and

9 WHEREAS, These recent Medicaid expansions did not include
10 any additional revenue sources enacted by the General Assembly
11 to pay for these expanded services; and

12 WHEREAS, The additional Medicaid pressure for these
13 expansions are happening at the same time the State is
14 expected to lose \$760 million in additional federal funding
15 through the enhanced Federal Medical Assistance Percentage
16 (FMAP) that was provided to states during the pandemic; and

17 WHEREAS, This loss of the enhanced FMAP was the primary
18 reason the Governor proposed an additional \$709 million GRF
19 deposit for Medicaid to maintain the same level of coverage;
20 and

1 WHEREAS, The lump sum appropriation of State GRF into the
2 Healthcare Provider Relief Fund for the State Medicaid Program
3 by its nature hides the actual cost of specific Medicaid
4 services; and

5 WHEREAS, The General Assembly believes there should be
6 more transparency in how State funds are used to fund
7 Medicaid, specifically Medicaid coverage that does not include
8 federal matching funds; and

9 WHEREAS, There is no statutory requirement for HFS, under
10 the direction of the Pritzker Administration, to offer these
11 expanded services to undocumented immigrants as the statute is
12 permissive in nature; and

13 WHEREAS, HFS has wide latitude in controlling how the
14 expanded Medicaid services for undocumented immigrants is
15 administered with the statute stating, "The Department is
16 authorized to take any action that would not otherwise be
17 prohibited by applicable law, including, without limitation,
18 cessation or limitation of enrollment, reduction of available
19 medical services, and changing standards for eligibility, that
20 is deemed necessary by the Department during a State fiscal
21 year to assure that payments under this Section do not exceed
22 available funds"; and

1 WHEREAS, Examples of ways to control costs include the
2 introduction of more stringent residency requirements,
3 implementation of co-pay and premium payments, limitations in
4 the types of coverage offered, or a moratorium on new
5 enrollees in the expanded Medicaid program to undocumented
6 immigrants; and

7 WHEREAS, Several programs in the State are still
8 drastically underfunded, and could benefit from the \$990
9 million in GRF that would go to HFS to continue to provide
10 medical services to eligible undocumented immigrants; and

11 WHEREAS, The \$990 million could be used to manage the
12 systemic challenges within the Department of Children and
13 Family Services that have contributed to rising cases of child
14 maltreatment deaths and harmful foster care placements; and

15 WHEREAS, The \$990 million could be used to support
16 services to the Developmentally Disabled as outlined by the
17 Guidehouse Rate Study commissioned by the Department of Human
18 Services; and

19 WHEREAS, The \$990 million could be used in an effort to
20 come into faster compliance with various consent decrees and
21 court orders, including the Colbert and Ligas Consent Decree;
22 and

1 WHEREAS, The \$990 million could be used to address the
2 substantial workforce shortage in nursing homes across the
3 State that has caused various nursing homes to consider
4 closure; and

5 WHEREAS, The \$990 million could be used to increase the
6 funding available for the statewide database known as the
7 Prioritization for Urgency of Need for Services (PUNS List),
8 in an effort to increase the number of people served and the
9 quality of resources available; and

10 WHEREAS, The \$990 million could be used to more
11 aggressively fund the Evidence-Based Funding Model which
12 targets the neediest K-12 educational institutions; and

13 WHEREAS, The \$990 million could be targeted toward our
14 institutions of Higher Education in an effort to keep college
15 tuition costs down, and keep residents in the State of
16 Illinois; and

17 WHEREAS, The \$990 million could be used to pay down the
18 unfunded liability of the State-funded pension plans, which
19 would save billions of dollars in long-term costs and free up
20 GRF in future budget years; and

1 WHEREAS, The General Assembly believes that an independent
2 accounting of the recent expansions of Medicaid services to
3 undocumented immigrants should be performed to better
4 understand the cost implications of this new coverage; and

5 WHEREAS, The General Assembly believes the Auditor General
6 should cause an annual audit to be made of the Department's
7 administration of Medicaid services to undocumented immigrants
8 beginning immediately and continuing annually thereafter; and

9 WHEREAS, An audit by the State Auditor General would be
10 helpful in determining the effects of increased Medicaid
11 coverage to undocumented immigrants; therefore, be it

12 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE
13 HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that
14 we urge the Auditor General to conduct a performance audit as
15 soon as reasonably possible, and annually thereafter, to
16 assess HFS' administration of the program of Medicaid services
17 and coverage provided to undocumented immigrants; and be it
18 further

19 RESOLVED, That the first audit should include a review of
20 HFS' initial program enrollment and cost estimates for State
21 Fiscal Year 2021 and each State fiscal year thereafter up to
22 the most recently completed State fiscal year that data is

1 available; and (ii) for each reported State fiscal year, the
2 actual program enrollment numbers and amount of money expended
3 by HFS from each fund in the State Treasury used to fund
4 medical services and coverage to undocumented immigrants; and
5 be it further

6 RESOLVED, That each subsequent audit shall review HFS'
7 initial program enrollment and cost estimates for the most
8 recently completed State fiscal year for the 12-month
9 reporting period and the actual program enrollment numbers and
10 amount of money expended by HFS from each fund in the State
11 Treasury used to fund medical services and coverage to
12 undocumented immigrants; and be it further

13 RESOLVED, That we urge the Pritzker Administration to
14 impose a moratorium on the enrollment of new beneficiaries for
15 Medicaid services under the program for undocumented
16 immigrants and a moratorium on the expansion of Medicaid
17 services and coverage for any new population of undocumented
18 immigrants not already covered; and be it further

19 RESOLVED, That this moratorium should be effective
20 immediately and remain in effect until 12 months after the
21 Auditor General conducts a performance audit and issues its
22 first audit report to the General Assembly detailing the costs
23 of Medicaid expansion to undocumented immigrants; and be it

1 further

2 RESOLVED, That we urge the Pritzker Administration to use
3 every option available to control costs and bring those costs
4 in line with what the original projections were before
5 contemplating any future enrollment in the program; and be it
6 further

7 RESOLVED, That we as a body will work with the Pritzker
8 Administration, HFS, and the Governor's Office of Management
9 and Budget to better identify specific costs within the
10 Medicaid program so that we can move away from lump sum
11 appropriations into the Healthcare Provider Relief Fund to
12 better target which Medicaid costs come without any federal
13 matching funds; and be it further

14 RESOLVED, That we as a body will table all future
15 discussions regarding expanding age eligibility requirements
16 regarding Medicaid coverage for undocumented immigrants until
17 such a date that an accurate fiscal impact can be determined,
18 and a revenue source can be identified to fund any current or
19 additional expansions to this Medicaid program; and be it
20 further

21 RESOLVED, That suitable copies of this resolution be
22 presented to Governor JB Pritzker, Speaker of the House

1 Emanuel "Chris" Welch, President of the Senate Don Harmon,
2 House Minority Leader Tony McCombie, and Senate Minority
3 Leader John Curran.