



Rep. Dwight Kay

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09900HB2435ham002

LRB099 06878 KTG 34434 a

1 AMENDMENT TO HOUSE BILL 2435

2 AMENDMENT NO. _____. Amend House Bill 2435, AS AMENDED, by
3 replacing everything after the enacting clause with the
4 following:

5 "Section 5. The Illinois Public Aid Code is amended by
6 changing Section 5-11a as follows:

7 (305 ILCS 5/5-11a)

8 Sec. 5-11a. Health Benefit Information Systems.

9 (a) It is the intent of the General Assembly to support
10 unified electronic systems initiatives that will improve
11 management of information related to medical assistance
12 programs. This will include improved management capabilities
13 and new systems for Eligibility, Verification, and Enrollment
14 (EVE) that will simplify and increase efficiencies in and
15 access to the medical assistance programs and ensure program
16 integrity. The Department of Healthcare and Family Services, in

1 coordination with the Department of Human Services and other
2 appropriate state agencies, shall develop a plan by July 1,
3 2011, that will:

4 (1) Subject to federal and State privacy and
5 confidentiality laws and regulations, meet standards for
6 timely eligibility verification and enrollment, and annual
7 redetermination of eligibility, of applicants for and
8 recipients of means-tested health benefits sponsored by
9 the State, including medical assistance under this Code.

10 (2) Receive and update data electronically from the
11 Social Security Administration, the U.S. Postal Service,
12 the Illinois Secretary of State, the Department of Revenue,
13 the Department of Employment Security, and other
14 governmental entities, as appropriate and to the extent
15 allowed by law, for verification of any factor of
16 eligibility for medical assistance and for updating
17 addresses of applicants and recipients of medical
18 assistance and other health benefit programs administered
19 by the Department. Data relevant to eligibility shall be
20 provided for no other purpose than to verify the
21 eligibility of new applicants or current recipients of
22 health benefits provided by the State. Data shall be
23 requested or provided for any individual only insofar as
24 that new applicant or current recipient's circumstances
25 are relevant to that individual's or another individual's
26 eligibility for State-sponsored health benefits.

1 (3) Meet federal requirements for timely installation
2 by January 1, 2014 to provide integration with a Health
3 Benefits Exchange pursuant to the requirements of the
4 federal Affordable Care Act and the Reconciliation Act and
5 any subsequent amendments thereto and to ensure capture of
6 the maximum available federal financial participation
7 (FFP).

8 (4) Meet federal requirements for compliance with
9 architectural standards, including, but not limited to,
10 (i) the use of a module development as outlined by the
11 Medicaid Information Technology Architecture standards,
12 (ii) the use of federally approved open-interfaces where
13 they exist, (iii) the use or the creation of
14 open-interfaces where necessary, and (iv) the use of rules
15 technology that can dynamically accept and modify rules in
16 standard formats.

17 (5) Include plans to ensure coordination with the State
18 of Illinois Framework Project that will (i) expedite and
19 simplify access to services provided by Illinois human
20 services programs; (ii) streamline administration and data
21 sharing; (iii) enhance planning capacity, program
22 evaluation, and fraud detection or prevention with access
23 to cross-agency data; and (iv) simplify service reporting
24 for contracted providers.

25 (b) The Department of Healthcare and Family Services shall
26 continue to plan for and implement a new Medicaid Management

1 Information System (MMIS) and upgrade the capabilities of the
2 MMIS data warehouse. Upgrades shall include, among other
3 things, enhanced capabilities in data analysis including the
4 ability to identify risk factors that could impact the
5 treatment and resulting quality of care, and tools that perform
6 predictive analytics on data applying to newborns, women with
7 high risk pregnancies, and other populations served by the
8 Department.

9 (c) The Department of Healthcare and Family Services shall
10 report in its annual Medical Assistance program report each
11 April through April, 2015 on the progress and implementation of
12 this plan.

13 (d) The Department of Healthcare and Family Services shall
14 not use a virtual provider network to contract with any entity
15 located outside the United States or with any entity that
16 subcontracts with another entity located outside the United
17 States for the purpose of processing claims under the medical
18 assistance program where the personal or confidential
19 information of medical assistance recipients is used or
20 transmitted by employees working for the entity directly or
21 through subcontract.

22 For the purposes of this subsection:

23 "Entity" means a proprietorship, partnership, association,
24 trust, estate, business trust, group, or corporation, whether
25 or not operated for profit, or a governmental agency, unit, or
26 subdivision.

1 "Personal or confidential information" includes, but is
2 not limited to, social security numbers, healthcare
3 information, and medical records.

4 "Subcontract" means a contract or contractual action
5 entered into by a prime contractor or subcontractor for the
6 purpose of obtaining goods or services of any kind under a
7 prime contract.

8 (Source: P.A. 96-1501, eff. 1-25-11.)".