Spring has sprung and we are so excited for all that's blossoming so far this year.

This is a time for new beginnings and renewal, and it seems now more than ever, that's what we all need.

Going into year three of this pandemic, we know that the past couple years have taken a toll. However, as we reflect back on the many unforeseen challenges, we also see so many opportunities to utilize lessons learned as we look ahead to the newness on the horizon.

This year, IAMHP is highlighting a specific priority pillar each quarter that we, the Medicaid Managed Health Plans and the state continue to prioritize in an effort to achieve better health outcomes for the residents of Illinois.

Even though health equity is the thread that binds all of the work we do within the Medicaid program, we thought it important to highlight the specific work being done every day in order to close health inequity gaps within our member population.

In this edition, we highlight the work being done and the new policies put in place to address health disparities and social determinants of health. By using lessons learned from the challenges faced by our members in the midst of the pandemic, we are able to better redirect efforts to only continue to improve the Medicaid program here in Illinois.

In good health,
Samantha Olds Frey
CEO, IAMHP
Throughout 2021, IAMHP's member health plans have continued their commitment to addressing the social barriers that affect the health and wellbeing of Medicaid members.

- Over 80,000 meals provided to Medicaid members.
- $19.6 million invested in addressing the social determinants of health, including $11.6 million in the most vulnerable communities.
- $24.2 million dedicated to community investments and voluntary projects to benefit the Medicaid population.
- A million bonus benefits offered to Medicaid members, including car seats, gift cards and free wellness services.
- Over a million medical trips coordinated.

Our health plans have also reinvested about $34 million of their withhold for quality improvement in 2021 to meet the needs of Medicaid members during the pandemic.

- $7.6 million for enhanced care coordination services.
- $4.3 million dedicated to community engagement efforts.
- $3.9 million to address social determinants of health.
- $1.1 million invested in local food pantries.
- Over $700,000 to support Medicaid members with housing.
Studies have found that 25% of lower income individuals have missed or rescheduled a medical appointment due to lack of transportation. Studies show that people who have access to a vehicle or to friends and family with a vehicle are more likely to use health care services than those without vehicle access. Regardless of insurance status, approximately 3 million in the U.S. miss a health care appointment each year due to unavailable transportation; this includes 9 percent of children in families with incomes of less than $50,000. Transportation is the third most commonly cited barrier to accessing health services for older adults. Data from the Bureau for Labor Statistics indicates that people earning between $5,000 and $30,000 per year spend 24 percent of their income on transportation.

Each year, 3.6 million people in the United States do not obtain medical care due to transportation issues. Transportation issues include lack of vehicle access, inadequate public transportation, long distances and lengthy times to reach needed services, transportation costs and adverse policies that affect travel.

Compared to the overall population, low-income people face additional barriers in accessing transportation services. Many low-income Illinoisans lack the disposable income to have access to a working vehicle and may lack public transit options to get to and from medical appointments. It is critical for Medicaid members to have access to transportation services that allow them to obtain the services they need to stay healthy.

According to an article published in the Journal of Community Health:

- Studies have found that 25% of lower income individuals have missed or rescheduled a medical appointment due to lack of transportation.
- Studies show that people who have access to a vehicle or to friends and family with a vehicle are more likely to use health care services than those without vehicle access.
- Regardless of insurance status, approximately 3 million in the U.S. miss a health care appointment each year due to unavailable transportation; this includes 9 percent of children in families with incomes of less than $50,000.
- Transportation is the third most commonly cited barrier to accessing health services for older adults.
- Data from the Bureau for Labor Statistics indicates that people earning between $5,000 and $30,000 per year spend 24 percent of their income on transportation.
Over 10% of Illinois residents have no access to a vehicle. This heat map highlights counties with the following pattern: 1) no vehicle access and Medicaid enrollment above the median, 2) highest 75% for chronic conditions, and 3) lowest 75% for visited a doctor for a regular check-up.

By clicking on the link to an interactive map, you can see that vehicle access is correlated with higher rates of chronic conditions.

Additionally, Medicaid members with no vehicle or other reliable transportation are less likely to utilize health care services and to adhere to treatment plans. The American Medical Association identifies transportation as one of the leading causes of missed appointments and skipped medication refills. This puts members without transportation at a higher risk for chronic conditions, such cancer, diabetes and high blood pressure.

*Darker shading within the heat map indicates a higher percentage.

https://metop.io/insights/oxkfbad9/
IAMHP Transportation Toolkit for Medicaid Members

Providing transportation services to the most vulnerable Medicaid members remains a top priority for IAMHP and its member health plans. The Transportation Toolkit serves as a guide on how to schedule transportation with each Medicaid health plan and on which extra transportation benefits may be covered under the Illinois Medicaid program.

**Aetna Better Health**

MCO Phone Number for Medicaid Members to Schedule Transportation:
- Medicaid and DCFS Youth – 1-866-913-1265
- Special Needs Children – 1-866-913-5796
- MLTSS – 1-866-913-1441

Website or Portal to Schedule Transportation:
- Member login link to schedule and manage trips: ModivCare | Home
- Facility login link to schedule and manage member trips: Login - TripCare (modivcare.com)

Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):
- Pharmacy trips
- Nutritional services
- Diabetes supplies and education
- Aetna-sponsored events

Scheduling Policies:
- A member must provide a 48-hour notice to schedule transportation to a routine medical appointment or set up a standing order.

**BlueCross BlueShield**

MCO Phone Number for Medicaid Members to Schedule Transportation:
- Reservation Line 1 (877) 831-3148
- Where’s My Ride (to report any delays or request assistance with scheduled trips) 1 (877) 831-3149

Website or Portal to Schedule Transportation:
- https://member.modivcare.com/en/login
**Transportation Information**

### Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):
- Trips to Pharmacy
- Trips to BCBS events such as Back to School and Vaccination events
- Trips to BCBS Blue Door Neighborhood Centers
- Mass Transit
- Mileage Reimbursement

### Scheduling Policies:
- Routine Trips: Three business days. Includes the day of the call but not the day of the appointment.
- Urgent Trips/hospital discharges: For trips needed urgently when 3 day notice cannot be provided please call the Reservation Line to request an urgent transport and we will work to locate urgent transport
- Reservations can be made up to 60 days in advance.

### MCO Phone Number for Medicaid Members to Schedule Transportation:
630-403-3210

### Website or Portal to Schedule Transportation:
N/A

### Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):
- Discharges
- Dental/vision services
- Family planning services and supplies
- Inpatient and outpatient hospital services
- Subacute alcoholism and substance use services
- Licensed clinical psychologist services, licensed clinical social worker services, and mental health services
- Medical supplies, equipment, prostheses and orthoses, and respiratory equipment and supplies
- Physical, occupational, and speech therapy

### Scheduling Policies:
- A member must provide a 72-hour notice to schedule transportation.
## Transportation Information

### Humana

**MCO Phone Number for Medicaid Members to Schedule Transportation:**
- 1-855-253-6867 (TTY: 711) Monday – Friday 8 a.m. – 8 p.m.

**Website or Portal to Schedule Transportation:**
- MTM: https://www.mtm-inc.net

**Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):**
- Nursing home care
- Pharmacy trips

**Scheduling Policies:**
- Transportation should be scheduled no later than 2 business days before an appointment.

### Meridian

**MCO Phone Number for Medicaid Members to Schedule Transportation:**
- 1-866-796-1165
  - MTM Vendor Call Center is open 8am-6:00pm CST.
  - An automated system is available 24/7.

**Website or Portal to Schedule Transportation:**
- N/A

**Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):**
Non-emergency transportation is provided to Meridian members. MTM will provide non-emergency transportation to members for anything that Meridian covers, including:
- Chronic and ongoing treatment
- DME providers
- Prescriptions
- Substance abuse
- Medical and behavioral care
- Women and children’s office (WIC)

**Scheduling Policies:**
- When scheduling routine transportation, there are three methods Meridian members can choose from: sedan ride, gas reimbursement or bus ticket. The notice required varies based on the type of trip being requested:
IAMHP Transportation Toolkit (Cont'd)

Transportation Information

Scheduling Policies (Cont’d):

- Routine sedan ride or bus ticket: 3 calendar days’ notice required (based on time of appointment).
- Routine gas reimbursement: Can be requested up to the date of the trip.
- Gas reimbursement for trips to the ER: Can be requested up to 7 dates after the date of service.
- Urgent trips/hospital discharges: Same day requests; MTM will verify member was treated and released. Hospital discharge requests can be made by the Hospital Discharge Planners prior to same day discharge. MTM will confirm with Discharge Planner the date/time member will be discharged and set trip request with the most appropriate transportation provider.
- A trip that requires a member to be transported by stretcher and/or ambulance must be coordinated by Meridian Member Services at 866-606-3700 (TTY: 711) Monday through Friday, 7 a.m. to 5:30 p.m.
- Beginning January 1, 2022, for stretcher trips, ground ambulance, non-emergency transport services, Meridian members should contact First Transit, the health plan's non-emergency transportation prior approval contractor at 877-725-0569 (Monday through Friday, 8 a.m. to 5 p.m. CST) to request non-emergency ground ambulance transportation services.
- Members who need ride assistance for urgent/same date appointments or hospital discharges can contact MTM. MTM will follow urgency guidelines and will verify urgency.

MCO Phone Number for Medicaid Members to Schedule Transportation:
- HealthChoice: 1-844-644-6354
- MMAI: 1-844-644-6353

Website or Portal to Schedule Transportation:
- Molina has a Member App to schedule/managed trips. https://idp-ua.mtmlink.net/Account/Login

Additional Transportation Benefits That May Be Covered (Outside of Doctors’ Visits):
- Pharmacy Trips
- Molina Community Events
- NICU Parent Transportation (transportation for parents with infants still in the hospital)

Scheduling Policies:
- Trips must be scheduled 72 hours in advance.
Access to safe and affordable housing plays a crucial role in maintaining your overall health and wellbeing. Without stable housing, Medicaid members may have limited access to preventative care and be more at risk for developing chronic health conditions. The State of Illinois has a housing locator website to search for affordable housing to meet your budget and to access community resources for those experiencing homelessness.

- [https://www.ilhousingsearch.org/](https://www.ilhousingsearch.org/)

Food insecurity is associated with poorer health outcomes and a higher likelihood of having a chronic health condition. To find local food pantries in your area, you can visit the Feeding Illinois website.

- [https://www.feedingillinois.org/food-banks/](https://www.feedingillinois.org/food-banks/)

This past month IAMHP CEO, Samantha Olds Frey, sat down with Latasha Smith, Director for Provider Network Management at Molina Healthcare, to talk about how health plans are improving health outcomes by addressing health equity and social determinants of healthcare.

To listen to this episode and past podcast episodes, visit [https://iamhp.podbean.com/](https://iamhp.podbean.com/)

Illinois Association of Medicaid Health Plans (IAMHP)
iamhp.podbean.com
Catching Up on Preventative Care

Healthcare workers and health systems have been stressed by pandemic surges, and this had made use of preventive healthcare services more challenging. Lockdowns, disruption to services, and fear of entering healthcare facilities caused people to postpone or cancel routine health visits. In addition, healthcare providers were forced to prioritize services and staffing during pandemic surges and minimize care that was not related to COVID-19.

Although the benefits of preventive services like immunizations are widely recognized, other preventive measures were subordinate to concerns over COVID-19. Delays in preventive screenings and services increase the risk of conditions being diagnosed later when they are more difficult to treat. Over the long term, this scenario will negatively affect health outcomes and increase the overall cost of care in direct contradiction to the goals of healthcare stakeholders, especially those charged with care of Medicaid members, a particularly vulnerable population.

Now is the time to get caught up on your health care needs - preventative services are 100% covered by your Medicaid health plan, including:

- Immunizations to keep you healthy
- Health screenings, including screenings for cancer, women's health and high blood pressure
- Wellness visits to detect and manage chronic conditions early

Preventive healthcare services are essential to avoid costly and dangerous medical complications. These services not only offer opportunities to improve overall health outcomes but also help to minimize medical complications when acute illness occurs. It is now more important than ever for Medicaid MCOs, providers, members, and community-based partners to collaborate in efforts to regain momentum that was lost during the pandemic. By engaging their members and other stakeholders, Medicaid MCOs are leading efforts to increase and sustain use of preventive healthcare services that will help to reduce health disparities, lower the costs of care, and save lives.

For more information on wellness visits (preventive services) covered by Illinois Medicaid MCOs visit: Smart Health Choices | HFS (illinois.gov).
Our care coordinators do incredible work every day to support Medicaid members. This is a story about a Care Coordinator at Molina supporting the social determinant of health needs of a member with intellectual disabilities by connecting him with housing and resources to access healthy food.

A 61-year-old African American man from central Illinois was on the brink of homelessness. Challenged with intellectual disabilities, housing instability and a lack of support system, Michael Smith was forced to move out of state to live with his niece in Texas. This posed a huge risk for him since all his doctors were in Illinois, and he subsequently lost all waiver services and most of his independence and autonomy because his homemaker was also Illinois-based.

Molina’s care coordination team was able to:

- Identify and address his social determinant of health needs.
- Secure housing for him through community partnerships.
- Help him furnish his new home.
- Educate and connect him with resources available to him.
- Reinstate his home and community-based waiver services.

Michael is now back in a clean and safe home in Illinois, active in his community including attending church regularly, and enjoys taking advantage of the food pantry that’s located in his building.

When Michael moved to Texas, he moved out of desperation, because he needed housing. If Molina’s care coordination team hadn’t stepped in, Michael would have been at a high risk of becoming homeless, which would have created another set of barriers for him.