Adequate Health Care Task Force Meeting Minutes Wednesday, September 14, 2005 10:00 AM – 1:00 PM

Illinois Public Act 93-0973, formerly House Bill 2268, creates the Health Care Justice Act and encourages the State of Illinois to implement a health care plan that provides access to a full range of preventive, acute, and long-term health care services; maintains and improves the quality of health care services offered to Illinois residents, and meets other criteria. The Illinois Department of Public Health (IDPH) is required, subject to an appropriation or availability of other funds, to enter into a contract with an "independent research entity" experienced in assessing health care reforms, financing, and care delivery models. The provisions of this legislation establish an "Adequate Health Care Task Force" with 29 voting members: five to be appointed by the Governor, and six appointments made by each of the four leaders of the General assembly (the Speaker of the House and the House Minority Leader, and the President of the Senate and the Senate Minority Leader). The Directors of the Departments of Public Health, Public Aid, Aging, and Insurance, along with the Secretary of the Department of Human Services, are to be invited to meetings of the "Adequate Health Care Task Force," but are not included in the Task Force's membership. The Department of Public Health is required to be "the primary agency in providing administrative support" to the Task Force.

This legislation provides for public hearings in each Illinois Congressional District, and a website detailing the work of the Task Force, accessible through the Governor's internet home page, is to be established and maintained. Printed copies of Task Force information are to be made available for persons who lack access to the Internet website. A Task Force report, detailing recommendations for a health care access plan as specified within the legislation, is to be submitted to the General Assembly by March 15, 2006. The bill encourages the General Assembly to consider legislation enacting the Task Force recommendations by December 31, 2006. The Act took effect July 1, 2004.

Task Force Members in Attendance: Dr. Craig Backs, Dr. Anthony Barbato, Catherine Bresler, Timothy Carrigan, Rep. Elizabeth Coulson, Jan Daker, Margaret Davis, Jim Duffett, Dr. Arthur G. Jones, Colleen Kannaday, David Koehler, Dr. Wayne Lerner (Chair), Dr. Niva Lubin-Johnson, Pamela Mitroff, James Moore, Michael Murphy, Dr. Joseph Orthoefer, Kenneth Robbins, Joseph Roberts, Ruth Rothstein, Gregory Smith, Kenneth Smithmier, Dr. Quentin Young

Task Force Member Proxies: Alison Burnett (Tracy Printen), Laura Leon (Robyn Gabel)

Regrets (Task Force Members): Kenneth Boyd, Sen. Iris T. Martinez, Sen. Donne E. Trotter

State Agency Representatives: Tim Cena (Division of Insurance), Michael Gelder (Department on Aging)

Illinois Department of Public Health Staff: David Carvalho, Mike Jones, Ashley Walter

Guests: Melissa Buenger, Elena Butkus, Susy Cherian, Teresa Hursey, Megan Meagher, Jeff Moor, Gaylee Morgan, Janice Neme, Dr. Javette Orgain, Jay Shattuck, Dennis O'Sullivan, Cynthia Riseman, Sherry Sherman, Margaret Stapleton, Susan Vega

The second meeting of the Adequate Health Care Task Force (the Task Force) was called to order at approximately 10:10am by Dr. Wayne Lerner, Chair of the Adequate Health Care Task Force. After calling the meeting to order, Dr. Lerner asked those present to introduce themselves.

Dr. Lerner began the meeting by stressing the importance of the work of the Task Force. He also asked that the Task Force conduct an objective analysis of the policy questions before the Task Force before getting into political discussions surrounding each policy. He added that it is important for the Task Force to focus in order to get its work done.

Dr. Lerner then put forth the meeting minutes from August 1, 2005 for discussion. Ruth Rothstein motioned to approve the minutes. Jan Daker seconded the motion. Ruth Rothstein requested that the acronyms "AHCTF" and "SC" not be used. Rather, "the Task Force" and "the Steering Committee" should be used. IDPH staff agreed. Kenneth Robbins pointed out that he did not nominate David Koehler for Vice Chair of the Task Force as stated in the draft minutes. Rather, James Moore did. All were in favor of approving the minutes given the suggested changes.

Dr. Lerner next asked Ashley Walter, IDPH, to walk the Task Force through the packet of documents distributed at the meeting. These documents included the September 14, 2005 Meeting Agenda; the August 1, 2005 Meeting Minutes; Task Force Bylaws (as amended and adopted on August 1, 2005); Steering Committee Recommendations; Tentative Task Force Calendar; Public Hearing Suggestions; Public Hearing Attendance Preferences; reference materials; SCI Technical Assistance Information; Online Community User Agreements; Travel Reimbursement Guidelines; and Biographies of Task Force Members.

Mike Jones, IDPH, then made the first of a series of "lay of the land" presentations to the Task Force. As part of his presentation, Mr. Jones highlighted sections of the Health Care Justice Act with respect to its policy goal and the charge and responsibilities of the Task Force. He also presented statistical figures from the Current Population Survey (CPS) and the Behavioral Risk Factor Surveillance Survey (BRFSS), as well as figures from the Census Bureau (Small Area Health Insurance Estimates). In discussing these figures, Dr. Lerner pointed out the need for the Task Force to consider Medicaid in its deliberations. Michael Murphy added that it is important for the Task Force to review other studies which have "drilled down" on the number of the uninsured to better understand the number of people who are uninsured and why they are uninsured. It is the intention of IDPH staff to present future "lay of the land" presentations to the Task Force with assistance from its sister agencies. Margaret Davis suggested that the Department of Healthcare and Family Services present to the Task Force. Mr. Jones then walked members through a packet of reference materials previously distributed to members of the Task Force.

Dr. Lerner proceeded by presenting the recommendations of the Steering Committee to the Task Force –

- 1. Public hearings and Task Force deliberations should run concurrently;
- 2. Public hearings should conclude in April 2006; and
- 3. The research entity should deliver its final report sometime between August 1st and October 1st of 2006.

The Steering Committee agreed with Dr. Lerner's summary of its recommendations. Dr. Lerner then shared the proposed details for each hearing. The Steering Committee recommended that each hearing –

- Be held from 4:00pm to 7:00pm;
- Be held on a Wednesday;
- Begin with an opening presentation (that should last no more than a half hour); and
- Conclude with two and a half hours of public testimony.

Furthermore, the Steering Committee recommended that each individual wishing to testify be given three minutes to do so, and that this time limit be posted as part of the public notice for each hearing. It also recommended that two to three hearings be held each month and that at least three Task Force members attend each hearing (thus, each

Task Force member must attend two to three hearings). At each monthly Task Force meeting, IDPH staff will present a summary of that month's hearings, with assistance from Task Force members who attended the respective hearings, to the rest of the Task Force.

The Steering Committee also recommended that the Task Force and Steering Committee meet monthly on Wednesdays. Task Force meetings should be held from 10:00am to 1:00pm and Steering Committee meetings should be held from 2:00pm to 3:30pm. David Carvalho, IDPH, added that going forward, Steering Committee meetings should start immediately following Task Force meetings and can be noted as such in the public notice for the meetings. Lastly, the Steering Committee recommended that no ad hoc committees be created at this time and that the Task Force be receptive to technical assistance opportunities.

Discussion ensued regarding organizations wishing to testify at public hearings. It was determined that organizations who want to testify at public hearings, must send individuals who will sign up to testify at the public hearings just like other individuals. However, if organizations wish to present to the Task Force at one of its meetings, they should submit a request via email to Ashley Walter.

Kenneth Robbins inquired as to who would chair the public hearings. Dr. Lerner responded that a member of the Steering Committee, if present, would chair each hearing. If no Steering Committee members are present, another member of the Task Force or a member of the IDPH staff will chair the hearing. Dr. Niva Lubin-Johnson suggested that if either the Chair or Vice-Chair were present at the public hearings, that one of them should act as chair of the hearing. Mr. Robbins also inquired as to whether or not elected officials in each Congressional District will be invited to their respective public hearings. David Carvalho responded stating that congressmen, as well as state representatives, state senators, and U.S. senators will be invited to their respective public hearings.

Discussion then shifted to the locations of the public hearings. Margaret Davis and Dr. Niva Lubin-Johnson asked to be given copies Congressional District maps. Ashley Walter made photocopies of these maps and distributed them to Task Force members. Timothy Carrigan inquired about the accessibility of the public hearing venues, as well as the availability of interpretation services. IDPH staff responded that all venues would be accessible and that American Sign Language interpretation would be available if requested per the public hearing notice. Spanish (and other language) interpretation will be secured as the need is identified. After much discussion, it was suggested to the Steering Committee that it change the location of the 17th District hearing from Galesburg to the Quad Cities, and the location of the 19th District from Springfield to Collinsville. The Steering Committee was also asked to consider holding additional public hearings to ensure that all major metropolitan areas across the state, especially Springfield, are covered.

Several members asked about the process for submitting preferences for the public hearings that they would like to attend. It was determined that Ashley Walter would resend an updated calendar to the Task Force. Members are then to reply to Ashley and list the three hearings that they will commit themselves to attending. Should a member wish to attend more than three hearings, they should list all of these but note the three hearings which they wish to be reimbursed for.

David Carvalho then gave the Task Force a brief update on the RFP. Mr. Carvalho noted that IDPH has received comments from several Task Force members and will be considering these as they further develop the RFP. Mr. Carvalho asked that anyone else wishing to submit comments regarding the RFP do so as soon as possible by emailing them to Ashley Walter and invited Task Force members to submit vendor suggestions in the same manner. Mr. Carvalho also reiterated that the research entity would be contracting with IDPH not the Task Force. Several Task Force members inquired about the timing of the RFP; Mr. Carvalho responded that IDPH was about two weeks behind the originally proposed schedule.

Michael Jones and Ashley Walter then discussed technical assistance opportunities with the Task Force. Mr. Jones walked Task Force members through some additional references and Ms. Walter informed the group about an opportunity to host an "Illinois Health Summit" with assistance from the State Coverage Initiatives (SCI) group. The Task Force had several suggestions regarding the "Illinois Health Summit" –

- Both the successes and failures of other states should be addressed;
- Overall, the presentations should be fair and balanced;
- The agenda should include more about private sector initiatives; and
- Change the title of the event from "Illinois Health Summit" to "Illinois Health Forum".

IDPH staff asked that Task Force members email Ashley Walter with any suggestions they may have regarding potential speakers. Mr. Murphy asked how speakers would be selected from the suggestions IDPH receives. David Carvalho answered that the Steering Committee would ultimately decide.

Next, Mike Jones informed the Task Force that the public web site was under construction and would be rolled out in the near future. Ashley Walter presented the idea of a read-only online community for Task Force members. This community would be a place for the Department to post resources for Task Force members and to organize articles, reports, etc. that members sought to circulate amongst themselves. The Task Force was receptive to this idea and requested that members be sent weekly or bi-weekly emails to inform them of new postings to the online community. These emails should include abstracts or brief descriptions of items that are posted. Task Force member will complete and return to Ashley Walter the IDPH Web Portal User Agreement and the IDPH Web Portal Registration documents.

The Steering Committee then proposed its recommendations for sharing Steering Committee documents with the entire Task Force. It recommended that interim drafts of documents not be shared with the Task Force, but that final documents be distributed to all members. David Carvalho reminded Task Force members that all meetings of the Steering Committee are open to the public under the Open Meetings Act. Michael Murphy strongly encouraged Task Force members to attend these meetings. Jim Duffett requested that a call-in line be set up for all Steering Committee meetings, if possible. Kenneth Smithmier agreed.

Ashley Walter then explained the travel voucher and guidelines that were distributed at the meeting. IDPH staff will distribute a hypothetical completed travel voucher to members at the next meeting. Ms. Walter also walked members through completing their time sheets. Time spent on any Task Force related business should be noted to the nearest quarter of an hour. The time noted on the time sheets should include Task Force related travel time, meeting time, and preparatory time. The time sheets will be collected quarterly. Ms. Walter will remind the Task Force members when the time sheets should be submitted.

The Task Force then considered new business. Dr. Lerner asked everyone to please review the biographies of members distributed at the meeting. Dr. Joseph Orthoefer suggested beginning Task Force meetings at 10:30am (rather than 10:00am) to allow for more travel time. Others agreed as the suggested timing would better coincide with public transportation schedules. Ms. Pamela Mitroff also suggested that the meetings be held in a consistent location. David Carvalho announced that the Department (led by Mike Jones), along with the Division of Insurance, successfully obtained U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) grant of \$250,000. Of this, up to \$200,000 will be available to the Department to support the activities of the Task Force, subject to the guidelines set forth by HRSA.

Lastly, Ashley Walter asked Task Force members to review and/or submit their biographies, to return any outstanding documents, and to submit their three revised public hearing preferences.

Ruth Rothstein moved to adjourn the meeting. Kenneth Robbins seconded the motion. Dr. Lerner adjourned the meeting at approximately 1:00 PM.

Action:

- IDPH Staff will correct the August 1, 2005 meeting minutes as directed.
- IDPH Staff will send Task Force members an updated Task Force Calendar. Members will then respond with their preferences for the three public hearings they wish to attend.
- Task Force members will send any comments regarding the RFP, as well as names of potential vendors, to IDPH staff
- Task Force members will send any suggestions they may have for expert speakers to IDPH staff.
- Task Force members will complete and return to IDPH staff the IDPH Web Portal User Agreement and IDPH Web Portal Registration documents.
- At the next Task Force meeting, IDPH staff will distribute a completed hypothetical travel voucher for Task Force members to reference.
- IDPH staff will remind Task Force members when their time sheets are due.
- Task Force members will review and/or submit their biographies to IDPH staff.
- Task Force members will submit any outstanding documents to IDPH staff.
- IDPH staff will prepare meeting minutes of this meeting for review and approval at the next Task Force meeting.

Next Meeting:

The next Adequate Health Care Task Force meeting will be held from 10:30am to 1:30pm on Wednesday, October 26th. This meeting will be held at the James R. Thompson Center (JRTC), 100 West Randolph Street, Room 9-031, Chicago, Illinois.

The following Adequate Health Care Task Force meeting will be held from 10:30am to 1:30pm on Wednesday, November 30th. This meeting will be held at the Bilandic Building (MABB), 160 North LaSalle Street, Room 5-N502, Chicago, Illinois.