



Midwestern Legislative Conference
THE COUNCIL OF STATE GOVERNMENTS

Forum on Social Justice
Webinar Series

Racial Disparities in Public Health

Friday, April 29, 2022

Presented by the
Midwestern Legislative Conference
Forum on Social Justice

RACIAL DISPARITIES IN PUBLIC HEALTH

CASE STUDY: ILLINOIS



MIDWEST



Senator Mattie Hunter

Illinois



Illinois legislative black caucus four equity pillars:

1. Criminal justice, police accountability and violence reduction
2. Education and workforce development
3. Economic access, equity and opportunity
4. Health care and human services

HEALTH CARE

AND

HUMAN SERVICES

PILLAR



HB158 OVERVIEW

The health care and human services pillar is primarily focused on creating a more equitable and inclusive health care system in Illinois.



Passed the General Assembly in March 2021.

Governor Pritzker signed into law on April 27, 2021.

STRATEGY

- We have looked at strategies that invest in health care services in communities hardest hit by COVID-19;
- We have worked with the body to direct resources to eliminate health disparities;
- We have reviewed data that highlights the social influencers (social determinants of health) to reduce the barriers to health care and to improve access to health;
- And we will continue the conversations around the inequities in Black, brown and poor communities.

HOSPITAL CLOSURES

- **Moratorium on Hospital Closures:** Places a 2 month moratorium on previously submitted hospital closure applications and extends the moratorium through the pandemic for future applications to close.
- **Racial Equity Assessment:** Bolsters the current Safety Net Impact Statement by including an assessment of how any hospital closure impacts racial and health care disparities.
- **Community Involvement in the Health Facilities and Services Review Board:** Increases community involvement in the hospital closure and hospital service reduction decision-making process by adding a representative from the community with experience on the effects of discontinuing health care services or closure of a health care facilities on the surrounding community to the HFSRB.

HOSPITAL REFORM

- **Inpatient Hospital Stay Reimbursement Rate:** Amends the Illinois Public Aid Code by requiring HFS to evaluate the effectiveness of the current reimbursement rate for inpatient hospital stays beyond medical necessity.
- **Hospital Information Posting Requirements:** Modernizes hospital posting requirements by permitting hospitals to post items in an electronic format.
- **Safety-Net Psychiatric Services Payment:** Subject to appropriations, provides that starting January 1, 2021, the inpatient per diem rate for inpatient psychiatric services at all safety-net hospitals must be at least \$630.
- **Medical Staff, Proper Credentials and Certificates:** Requires a licensed hospital to request of IDFPR for the “proper credentials” and “required certificates” of an applicant seeking medical staff privileges or renewing privileges.
- **Essential Health Workers:**
 - Requires N95 masks to be provided to all doctors, registered nurses, advanced practice registered nurses and other hospital employees.
 - Allows employees to use paid sick leave for parental care.

TESTING

- **Sales Tax for Blood Sugar Testing Materials:** Amends the Retailers Occupation Tax Act, Service Occupation Tax Act, Service Use Tax Act, and the Use Tax Act; provides that all types of blood sugar testing materials qualify for the 1% tax rate, not just urine blood sugar testing materials.
- **Testing for Legionella Bacteria:** Requires hospitals and nursing home facilities to develop a policy for testing its water supply for Legionella bacteria that includes the frequency with which testing is conducted.

HEALTH CARE ACCESS

- **Increasing Access to Primary Care in Hospitals:** Many communities struggle with lack of access to primary care and over-utilization of hospitals. To combat this, the legislation requires HFS to establish a program to encourage coordination between FQHCs and hospitals and to develop a payment methodology to allow FQHCs to provide care coordination services.

COMMUNITY HEALTH WORKERS

- **CHW Training and Certification:** The use of community health workers is essential to eliminating health disparities in vulnerable communities. This proposal would establish both academic and community-based training programs with academic programs beginning in high school, define the roles and competencies of CHWs and establish a statewide CHW certification program.
- **CHW Medicaid Reimbursement:** The community health worker programs that are currently operating in the state rely on grant funding to train and employ community health workers. By requiring Medicaid reimbursement for CHW services and allowing MCO to employ CHWs, this proposal would provide more stable funding for those programs.

MCO REFORM

- **Timely Managed Care Organization Claims and Payments/ Billing Department Support:**
 - Requires MCOs to ensure that any Medicaid-Certified provider under contract with an MCO on the date of service is paid for any medically necessary service rendered to any of the MCO's enrollees, regardless of inclusion on the MCO's published and publicly available roster of available providers;
 - Provides that if HFS or an MCO requires submission of a claim for payment in a non-electronic format, a provider must always be afforded a period of no less than 90 business days following any notification of rejection to correct errors or omissions in the original submission; and
 - Requires HFS, MCOs, a statewide organization representing hospitals, and a statewide organization representing safety-net hospitals to explore ways to support billing departments in safety-net hospitals.

MCO REFORM

- **Medicaid Managed Care Oversight:** Creates a Medicaid Managed Care Oversight Commission under the Department of Healthcare and Family Services (HFS) to evaluate MCO care coordination and case management, culturally competent services, member health outcomes, payment of claims, prior authorization requirements and access to health care.
- **Medicaid Managed Care Oversight Fund:** Subject to appropriation, funds will be used by HFS to support contracting with women and minority-owned businesses as part of HFS' BEP requirements. HFS shall prioritize contracts for care coordination services, workforce development, and services that support health equity.
- **Medicaid Technical Assistance Center:** Requires HFS to establish a Medicaid Technical Assistance Center to operate as a cross-system educational resource to identify, establish and maintain best practices necessary for health care providers to ensure their capacity to participate in the Managed Care program.
- **Business Enterprise Program:** Creates the Medicaid Business Opportunity Commission to develop a program to support and grow minority, women, and persons with disability-owned businesses within the Medicaid program.



MATERNAL MORTALITY AND MORBIDITY

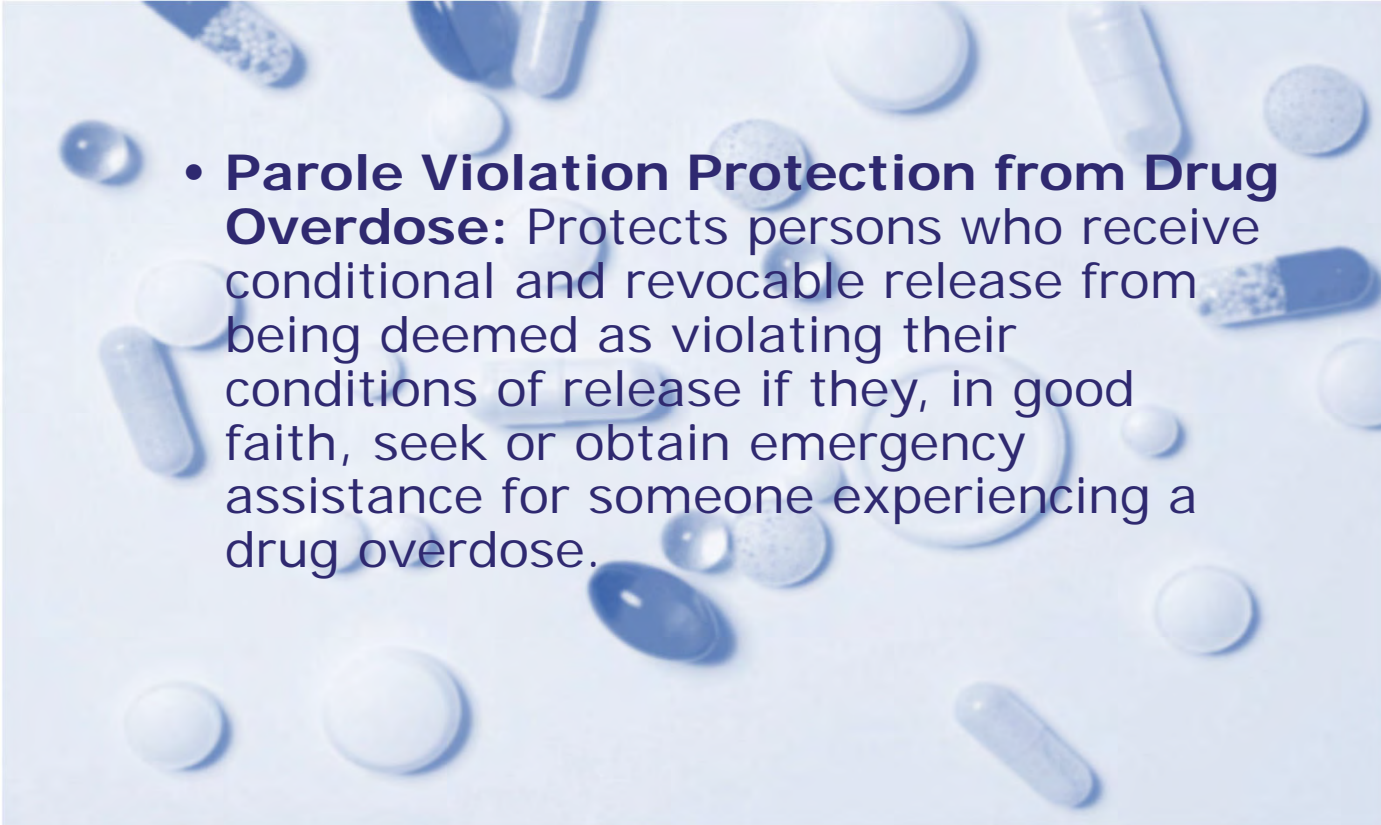
- **Doula and Home Visiting Programs:**
 - Establishes training and certification requirements for doulas and evidence-based home visiting programs.
 - Requires Medicaid reimbursement for doulas and evidence-based home visiting services to reduce disparities in maternal mortality and morbidity.
- **Perinatal Fund:** Requires the State to create a funding pool of \$50 million to preserve access to OB/GYN services and other specialty services in safety net hospitals.

WOMEN'S HEALTH

- **Special Commission on Gynecologic Cancers Act:**
Creates the Special Commission on Gynecologic Cancers Act to study disparities and make recommendations.



MENTAL HEALTH & SUBSTANCE ABUSE TREATMENT

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- **Parole Violation Protection from Drug Overdose:** Protects persons who receive conditional and revocable release from being deemed as violating their conditions of release if they, in good faith, seek or obtain emergency assistance for someone experiencing a drug overdose.



SICKLE CELL PREVENTION

- **Sickle Cell Prevention, Care, and Treatment Program Act:** Creates the Sickle Cell Prevention, Care, and Treatment Program Act and requires HFS to establish a program for providing prevention, care and treatment of sickle cell disease through a grant program; and, perform an annual study beginning July 1, 2021, on the prevalence, impact, and needs of individuals with sickle cell disease.

EQUITY-CENTERED TRAINING

- **Implicit Bias Training for Health Care Professionals:** Requires any health care professional who has continuing education requirements to complete at least a one hour course in implicit bias training per renewal period for license or registration renewals.
- **Dementia Training Requirements:** Subject to appropriations, amends the Adult Protective Services (APS) Act to require the Department on Aging (DOA) to develop a dementia training program to address gaps in current dementia training requirements.
- **Child Trauma Training:** Requires by July 1, 2022, all licensed day care home providers, licensed group daycare home providers, and licensed day care center directors and classroom staff to participate in at least one training that includes: early childhood social emotional learning, infant and early childhood mental health, early childhood trauma, or adverse childhood experiences.

EQUITY-CENTERED ANALYSIS

- **Racial Impact Note:** Creates the Racial Impact Note Act which requires the a state agency to prepare a racial impact note, upon request of any member, for any bill that has or could have a disparate impact on racial and ethnic minorities.
- **Behavioral Workforce Education Center of Illinois Act:** Creates the Behavioral Health Workforce Education Center of Illinois Act; the purpose of this Act is to leverage workforce and behavioral health resources to initiate workforce reforms in Illinois.
- **Underlying Cause of Crime and Violence Study Act:** Creates the Underlying Causes of Crime and Violence Study Act which requires DPH and DHS to study how to create a process to identify high violence communities – known as R3 (Restore, Reinvest, and Renew) areas – and prioritize state dollars to go to these communities to fund programs.

EQUITY-CENTERED ANALYSIS

- **State Health Assessment/State Health Improvement Plan:** Updates the State Health Assessment and Improvement Plan to center more on health equity.
- **Health and Human Services Task Force and Study:** Creates the Health and Human Services Taskforce to undertake a systematic review of health and human service departments and programs with the goal of improving health and human service outcomes for Illinois residents.
- **Anti-Racism Commission Act:** Creates the Anti-Racism Commission to identify and propose statewide policies to eliminate systemic racism and advance equitable solutions for Black and Brown people in Illinois. The Act requires the Department of Public Health to provide administrative support for the Commission and charges it with various tasks.

AGENCIES REPORT DUE DATES

Description	Agency	Due Date
	Illinois Department of Public Health	
Establish a program for providing prevention, care and treatment of sickle cell disease through a grant program; and, perform an annual study	Healthcare and Family Services	July 1, 2021
Participate in at least one training that includes: early childhood social emotional learning, infant and early childhood mental health, early childhood trauma, or adverse childhood experiences	All licensed day care home providers, licensed group daycare home providers, and licensed day care center directors and classroom staff	July 1, 2022