



Older Adult Services Advisory Committee Meeting

Date: September 11, 2006

Location: Office of the State Fire Marshal, Springfield, Illinois

IN ATTENDANCE:

Committee Members:

- Stephanie Altman – Health and Disability Advocates
- Darby Anderson – Addus HeathCare
- Carol Aronson – Shawnee Alliance for Seniors
- Pat Stacy Cohen – Illinois Adult Day Service Association
- Ann M. Cooper – Illinois Association of Nutrition Programs
- Thomas Cornwell, M.D. – HomeCare Physicians
- Donna Ginther – AARP
- Joyce Gusewelle – Eden United Church of Christ
- Flora Johnson – family caregiver and SEIU Local 880
- Michael Koronkowski – University of Illinois at Chicago
- Jonathan Lackland – Alzheimer's Association
- Jonathan Lavin – Suburban Area Agency on Aging
- Jean McCain – Livingston Manor
- Phyllis Mitzen – citizen member over 60
- Jason Speaks for Dennis Bozzi – Life Services Network
- Tim Thomas – SEIU Local #4
- Debbie Trueblood Witt – Illinois Home Care Council
- Cathy Weightman-Moore – Catholic Charities Long Term Care Ombudsman Program

Committee Members not in attendance:

- Pat Comstock – Illinois Health Care Association
- Jerry Crabtree – The Township Officials of Illinois
- Frank Daigh – family caregiver
- Myrtle Klauer – Illinois Council on Long Term care
- Harriet O'Connor – Illinois Hospice and Palliative Care Organization
- Patricia O'Dea-Evans – B A Place for Mom
- Steven K. Rothschild, M.D. – Rush University Medical Center
- Margaret Rudnik – Illinois Hospice and Palliative Care Organization
- Carmen Velasquez – Alivio Medical Center
- Cheryl Woodson, M.D. – Woodson Center for Adult HealthCare
- Cynthia Worsley – Association of Illinois Senior Centers

Ex-officio – nonvoting Committee Members in attendance:

- Charles D. Johnson – Illinois Department on Aging
- Kelly Cunningham and Theresa Wyatt for Ann Marie Murphy – Illinois Department of Healthcare and Family Services
- Jennifer Novak – Illinois Housing Development Authority
- Sally Petrone – Illinois Department on Aging, Long Term Care Ombudsman
- Enrique Unanue – Illinois Department of Public Health

Ex-officio – nonvoting Committee Members not in attendance:

- Teri Dederer – Illinois Department of Human Services
- Gwen Diehl – Illinois Department of Veterans Affairs
- Jared Thornley – Office of the Governor

GUESTS:

- Ann Ford – Illinois Network of Centers for Independent Living
- Mary Miller – Illinois Department of Healthcare and Family Services

OBSERVERS:

- Elizabeth Essex – Governors State University
- Jeremy Schroeder – SEIU 880
- Brynn Seibert – SEIU 880
- Wayne Smallwood – AALC
- Laura Watkiv – Health and Disability Advocates

Illinois Department on Aging:

- Michael Gelder
- Rance Carpenter
- Leann Dolan
- Shelly Ebbert
- Ross Grove
- Robin Morgan
- Dave Vinkler
- Paul Bennett, University of Illinois, Chicago

SUMMARY

Welcome and Introductory Remarks:

Director Johnson welcomed the members and observers to the meeting. The OASAC has several new members: Frank Daigh, Mike Koronkowski, Jonathan Lackland, and Margaret Rudnik.

Approval of minutes

The minutes were corrected to reflect Susan Real is from the East Central Illinois Area Agency on Aging. Enrique Unanue moved to approve the minutes as corrected. Stephanie Altman seconded the motion. All were in favor.

Executive Committee Report

Director Johnson announced two new members to the executive committee: Carol Aronson and Debbie Witt.

Jonathan Lavin reported the executive committee had reviewed and revised the vision statement and now recommend it be adopted by the full committee. The vision statement was revised to emphasize the importance of quality. Jonathan Lavin moved the vision statement be adopted by the full advisory committee. Stephanie Altman seconded. All were in favor.

Stephanie Altman reported the executive committee has completed work on the Operations Manual and recommends the Operations Manual be adopted by the full committee at the December meeting in Chicago. Members will be bound by the Manual effective January first once it is approved. Any questions or comments should be e mailed to Leann Dolan at the Department.

State Agency Reports

Illinois Department on Aging – Deputy Gelder reminded members to complete sign in sheets as required by the Ethics Act and turn them in periodically.

Deputy Gelder provided an update on the Department's mandates. Aging, HFS and IDPH had a successful first interagency meeting. The main theme of the conversation was the OASAC and DSAC should work together. This makes it easier for the state agencies to work towards recommendations. The executive committee had some concerns about this idea. To accommodate those concerns, Ann Ford from DSAC was invited to update members on the work of DSAC.

Deputy Gelder provided an update on Emergency Home Response. This will be a new core service under the Community Care Program (CCP). October 15 is the start date for the statewide demonstration.

Cash and Counseling is in its second year of the grant. The Department is procuring for a financial manager. The anticipated start date for the four sites is November 1.

Comprehensive Case Management will be implemented in three phases. Phase one will begin October 1. CCM will be phased in using the CCUs currently providing CCM. CCUs will use the new comprehensive instrument and be paid a higher rate. The second phase will include bringing the entire state on to CCM. The third phase will be used to work through the more elaborate issues and decisions.

The Alternative Senior Services line in the Department's budget is also being worked on to provide additional funding for home modification and other services on an ad hoc basis to seniors. The Department will use the Abuse Neglect and Exploitation (ANE) model for disbursement. AAAs will pay providers on a case by case basis based on the needs identified in the comprehensive assessment. The Department hopes to implement this by January.

The Department is working with DHS and HFS on an opportunity through federal CMS for Money Follows the Person. The data gathered from the Enhanced Transition program will be used to design the response for the proposal due November 1.

The Department received \$2 million from the Illinois Housing Development Authority's housing trust fund. The money will be used for assistive technology and enhancement of the ET project.

Illinois Department of Public Health – Enrique Unanue reported IDPH is working with the Nursing Home Conversion workgroup and developed an amendment to the Health Facilities Planning Board questionnaire that asks long term care facilities information on what types of services they provide. All of the data is expected to be in by November. The information will be analyzed and shared with the Conversion workgroup.

IDPH is in the process of completing the Nursing Home Offenders rules as a result of last session. IDPH also has programs of innovations for long term care underway. The group has met twice and is developing grant applications and forms to be released sometime in January. The grants will be \$2 – 2.5 million for innovations in long term care facilities.

Illinois Department of Healthcare and Family Services - Theresa Wyatt reported payment cycles are improving dramatically and average sixty days. JCAR cleared HFS to adopt rules on the Minimum Data Set (MDS) payment rule. Illinois is adopting a system to look at each individual assessment.

Kelly Cunningham also reported on the Supportive Living Facility (SLF) project which has 64 sites operational with 5100 units. Currently 76 applications are proceeding towards certification.

Legislation was introduced at the end of session sponsored by Senator Whiteford related to nursing home prescreening. The legislation was introduced with respect to a specific facility and problems. The legislation did not pass, however it did draw attention to short comings in the prescreening process as it operates. HFS, IDOA, DHS the CCU Council, AARP and other groups are working together to see what can be done to improve the process.

HFS is also looking into the Deficit Reduction Act with respect to Long Term Care Partnership Policies. Illinois has participated in the partnership policy for ten years. Changes to the program make it lucrative for states to offer the program and make the program better for the consumer. Changes include protecting the client's assets from estate recovery. HFS is currently doing exploratory work and partnering with the Department of Insurance to see if it makes sense to move ahead and improve what we have. Any changes would require an amendment to the state Medicaid plan.

Impact of House Calls on the Frail Elderly

Thomas Cornwell, Medical Director of HomeCare Physicians and OASAC member, presented to the Committee on the importance of house calls. Technology has improved and is no longer a barrier to providing quality health care in the home. The barrier is the reimbursement rates for doctors visiting patients in the home. Doctors were the lowest paid health profession to go into the home. The rates are slowly increasing. While we are looking at getting patients back home, we also need to look at compensating health care professionals.

A large part of the mission of doctors that make house calls is supporting caregivers. The average patient is 80 years old. One third of patients are over 85. Studies have shown that seniors' faith is important and is the number one coping mechanism. Adequate resources and supportive family caregivers ranked below faith.

Dr. Cornwell reported there is a 60% chance of a senior encountering a mistake in the hospital. Almost half of patients decline in the hospital for reasons unrelated to the reason they were admitted. Visiting patients at home is better care for the homebound person and caregiver and costs less. Caregivers are often overwhelmed with medical problems. Patients are comfortable with a doctor coming out within days of going home from the hospital.

HFS does not pay for geriatric nurse practitioner visits. There is an opportunity for nurse practitioners to do chronic disease management that would result in reduced costs. (*note: as of January 1, 2007, adult and geriatric nurse practitioners will be covered*)

Dr. Cornwell provided handouts of his power point presentation.

Trends in Long Term Care Institutional Spending

Theresa Wyatt, Illinois Department of Healthcare and Family Services provided a presentation on the costs of institutional spending to the state. HFS spends \$1.75 billion on nursing home costs, doctor visits and hospitalizations in an average month. The current average HFS payment rate is \$98 per day for nursing facilities. In 1994 it was \$74 per day.

Total nursing home bed days have remained constant as has the number of people served. HFS is now serving more people in the waiver program than in nursing facilities. Waiver spending has increased while nursing home spending has stayed relatively flat.

The numbers used in the presentation are for intermediate and skilled care facilities. Information on the waivers is for all waivers together, not just the elderly waiver. Members discussed the information and questions that were generated. This topic will continue to be discussed at the interagency meetings between the three state agencies.

Disability Services Advisory Committee (DSAC)

Co-chair, Ann Ford provided an update the activities of the DSAC. Members were appointed by the Governor a year ago. DSAC has thirty members and is staffed by DHS with liaisons from several agencies, including IDoA. Members consist of advocates, providers and consumers (parents of people with disabilities and people with disabilities). DSAC made recommendations in a draft report to the Governor in March that looked at the whole long-term care system. DSAC is looking at long term care needs and issues of people with all disabilities at all age levels, including seniors. Ford indicated that there needs to always be a level of communication and collaboration between DSAC and OASAC. The recommendations made by DSAC were based on overarching principles emphasizing quality and building community capacity in the long-term care system.

At the end of June, the Governor released the "Illinois Disability Services Plan Update" that embraced a lot of the recommendations made by DSAC. This week DSAC will be breaking into workgroups to be more disability specific. The group will look at recommendations that can be made to the General Assembly to address barriers to community-based long term care via the disability groups. The purpose is to come up with proposals for legislative initiatives this year to give people a choice in communities. The DSAC report was distributed and is also available on the DHS website.

Systems Change Grant

Paul Bennett distributed the report he developed as part of the Systems Change Grant, "Clarification of Roles and Responsibilities of Existing Aging Network Providers Participating in the Nursing Home Transition Process". Paul discussed the report with the committee and how it was developed. The report

was developed by analyzing policies and procedures of existing government agencies, interviewing key stakeholders and holding focus groups.

Since July 1996, IDOA has had a process in place of screening all nursing home applicants. Thirteen focus groups were held in the spring of 2006 consisting of eight to twelve participants from CCUs, case managers, discharge planners, nursing facilities and disability and advisory groups, ET sites and IDOA staff. The report includes the questions asked at the focus groups and the critical issues that emerged.

Members applauded the report and discussed its findings. Members agreed that the report validates some of the issues currently being worked on including Comprehensive Case Management as well as shows places in the program that can be modified for a better outcome. The report was handed out to members at the meeting and was also e-mailed to the entire committee prior to the meeting.

Conversion Workgroup Proposal

Enrique Unanue reported for the Conversion Workgroup. The workgroup is discussing the need to develop an end of life continuum to allow residents to remain in one unit for the entire life cycle by modifying the license of the facility. The workgroup has done a study on nursing home closure that shows seventy nursing homes have closed with 8,000 beds taken off line over the last three years. There is a trend toward attrition in the nursing home industry. The conversion program that is being proposed is modeled after Nebraska. The conversion workgroup proposes four projects per year in four regions of the state.

The conversion workgroup expects to ask for \$50-53 million dollars to be able to develop a conversion program that could be a five year demonstration project to see what model would be the best for the state.

Committee members discussed the conversion workgroup proposal and were given a copy of the proposed rules for IDPH to implement the conversion program. The law requires the conversion program focus on a minimum of 50% of Medicaid beds. It was discussed if the program should target 100% Medicaid beds to get the most of the program and save the state the maximum amount of money possible. The program also requires the facility to provide 20% match.

Enrique added that the conversion workgroup which has members representing nursing home associations is in favor of this conversion program and it is up to the associations to recommend this proposal and request the money. Sally Petrone recommended on behalf of the conversation workgroup that OASAC recommend or endorse the proposed rules.

Given the concerns that were raised, Deputy Gelder acknowledged that key members of the conversion workgroup were not present to explain the proposal and it may not be appropriate to move forward with this recommendation at this time. Enrique clarified that he is not asking that anything be moved forward. The key element is the financial request the nursing home associations need to make.

IDPH will be proposing the rules to JCAR and does not need approval from OASAC. The rulemaking process allows for a comment period if there are objections or concerns.

Workgroup reports

Workforce/Caregiver – Darby Anderson reported the workgroup had submitted a written summary which was distributed to members. The workgroup would like to hold a conference on working caregivers on Wednesday, November 29 in Chicago.

Services – Donna Ginther reported a written report was distributed to members. The workgroup has started to develop recommendations for the next five years, and is looking at the big picture issues with regards to comprehensive care coordination. The workgroup is unsure how the department wants them to move forward with these recommendations. Services next meeting is September 12.

The workgroup recommends that the Alternative Senior Services money be used for services not already available or where that funding has dried up. This funding should stand alone. The workgroup feels that service maximums should be increased to accommodate this additional money. This funding should be available to anyone seeking services, not just those on CCP.

Finance –a written report was distributed prior to the meeting.

Coordinated Point of Entry –a written report was distributed prior to the meeting.

Planning for 2006 Report

Shelly Ebbert reminded members that the second report to the General Assembly is due in January. The workgroups were asked to review the recommendations they made last year, submit the accomplishments towards achieving those goals and make recommendations for the upcoming year. The committee discussed the need for an additional meeting and decided a meeting in November to review the draft report is necessary. Shelly agreed to send a clear and concise memo to workgroup chairs with the desired format for their report and the required deadlines to have the report completed by January 1.

Illinois Housing Development Authority

Jennifer Novak reported the Executive Order the Housing Task Force has been operating under recently become law. The Task Force now has an interim report due September 30 which will be available to the public. The Rental Housing Support Program is in the second public comment period which runs August to October. IHDA is giving preference to administering agencies that target 30% or more of units to special needs including Enhanced Transition/community reintegration efforts. IHDA's Website contains rules on who can qualify to be a local administering agency. There is a nine month required outreach to get people more involved in applying. IHDA plans to hold three workshops so far and present the program at various speaking engagements. IHDA expects the rollout of the statewide program in late spring 2007.

The Affordable Housing Trust Fund Advisory Council met and approved eight applicants for funding under the new home modification program. These will go to IHDA's board and will be announced soon. IHDA is also approving the memorandum of understanding between IHDA and Aging to transfer money for assistive technology, CCRS and home modification.

Donna Ginther moved to adjourn. Stephanie Altman seconded. The meeting adjourned at 4:45pm.

The minutes were approved on November 13, 2006