



Older Adult Services Advisory Committee Meeting

Date: June 9, 2008

Location: Illinois State Library, Springfield, Illinois

IN ATTENDANCE:

Committee Members:

- Stephanie Altman – Health and Disability Advocates
- Darby Anderson – Addus HealthCare
- Carol Aronson – Shawnee Alliance for Seniors
- Pat Stacy Cohen – Illinois Adult Day Service Association
- Pat Comstock - Illinois Health Care Association
- Thomas Cornwell, MD – HomeCare Physicians
- Jan Costello – Illinois HomeCare Council
- Joyce Gusewelle – Eden United Church of Christ
- Flora Johnson – family caregiver and SEIU Local 880
- Myrtle Klauer – Illinois Council on Long Term Care
- Michael Koronkowski – University of Illinois at Chicago
- Jonathan Lavin –Age Options
- Phyllis Mitzen – citizen member over 60
- Nancy Nelson – Illinois HomeCare Council
- Susan Real - East Central Illinois Area Agency on Aging, Inc.
- Margaret Rudnik - Illinois Hospice and Palliative Care Organization
- Karen Schainker – Association of Illinois Senior Centers
- Maria Schmidt – Alzheimer’s Association
- Cathy Weightman-Moore – Catholic Charities Long Term Care Ombudsman Program
- Dave Vinkler - AARP

Committee Members not in attendance:

- Dennis Bozzi – Life Services Network
- Jerry Crabtree – The Township Officials of Illinois
- Frank Daigh – family caregiver
- Barbara B. Dunn – Community Health Improvement Center
- Robyn Golden – Rush University Medical Center
- Patricia O’Dea-Evans – Northwest Community Hospital
- Tim Thomas – SEIU Local #4
- Ancy Zacharia – HomeCare Physicians
- Nancy Zweibel, Ph.D. – The Retirement Research Foundation

Ex-officio – non voting Committee Members in attendance:

- Charles D. Johnson – Illinois Department on Aging
- Kelly Cunningham for Theresa Eagleson – Illinois Department of Healthcare and Family Services
- William Bell – Illinois Department of Public Health
- Gail Hedges for Maureen Palmer – Illinois Department of Commerce and Economic Opportunity
- Tara Peele – Illinois Housing Development Authority
- Sally Petrone – Illinois Department on Aging, Long Term Care Ombudsman

Ex-officio – non voting Committee Members not in attendance:

- Yvonne Clearwater – Illinois Department of Financial and Professional Regulation
- Rob Kilbury – Illinois Department of Human Services
- Gwen Diehl – Illinois Department of Veterans Affairs

OBSERVERS:

- Jeremy Schroeder – SEIU 880
- Marianne Brennan – Health and Medicine Policy Research Group
- Amy Wiater - Administration on Aging
- Bonnie Lockhart – Illinois Foundation for Quality Health Care
- Juliane Alson– Health and Medicine Policy Research Group
- Paul Bennett – University of Illinois at Chicago
- Martha Holstein – Health and Medicine Policy Research Group

Illinois Department on Aging:

- Michael Gelder
- Shelly Ebbert
- Jan Cichowlas
- Ross Grove
- Leann Dolan
- Robin Morgan

SUMMARY**Welcome and Introductory Remarks**

Director Johnson welcomed members to the meeting. Members introduced themselves.

Approval of Agenda

Stephanie Altman moved to approve the agenda. Flora Johnson seconded. The agenda was approved.

Approval of minutes

Dave Vinkler moved to approve the minutes. Carol Aronson seconded. The minutes were approved.

Executive Committee Report

Jonathan Lavin reported the executive committee has been working diligently on developing and refining Benchmarks. At the last meeting, we considered information from Minnesota on their long term care reform efforts.

The Executive Committee was asked by the department to consider amending the Operations Manual to provide a specific voting process for items not on the agenda. A subcommittee has reviewed the Manual and IDOA Legal Counsel has reviewed the proposed process in terms of compliance with the Open Meetings Act. The Executive

Committee will review the workgroup's recommendation at their next meeting and it will be voted on by the full body in September.

State Agency Reports

Illinois Department of Public Health – Bill Bell reported revisions to the Homecare Licensure Rule were adopted last week and should appear in the Register June 20. Once JCAR releases a copy of the rules, they will be posted on IDPH's Website along with applications to be licensed as a home health agency. Agencies must be licensed by September 1, 2008. There is a fee for the license and that will cover the cost of the program; however, there is not any start up money. IDPH plans to hire staff once the program is up and running and fees are coming in.

Bill anticipates the rule will result in 400 to 500 home care services agencies, 200 home nursing agencies and an additional 200 placement agencies being licensed.

Illinois Department of Healthcare and Family Services – Kelly Cunningham reported on Your Healthcare Plus, the disease management initiative administered through McKesson Health Solutions. This program has been operational in a number of high Medicaid volume nursing homes in Chicago for the past year.

The program will continue to embed nurses in nursing homes and will introduce a new program that will focus on the pharmacy and Medicaid claims data. The program will be analyzing drug usage cost and utilization and make recommendations to nursing homes and work with medical directors and pharmacists to ensure medications are being administered appropriately.

Currently there are 95 operational SLFs containing 7400 units and more are expected to open before the end of June.

The state's Operational Protocol for Money Follows the Person (MFP) was submitted May 1. Federal CMS sent back requests for clarification and HFS is in the process of answering questions and verifying the information. Our response is due June 11. Until the Operational Protocol is approved, we will not be able to transition residents through this program.

Dr Cornwell requested any available outcomes data on disease management initiative in terms of benefits. Kelly agreed to check what information is available and share with the committee.

Illinois Housing Development Authority – Tara Peele reported IHDA has released the progress report for the annual housing plan which includes information on senior housing units funded in 2007. The report is available on IHDA's website.

IHDA has released the availability for 2008 funding for the home modification program in late May. There are \$2 million for organizations to do home modification that will help people remain in their homes or leave facilities if they find housing that needs modification. The money goes to local level organizations through a sub-grantee program. IHDA has also included language that reflects the MFP initiative and encourages applicants to work with local agencies doing the transition work.

IHDA's housing subgroup has requested to do a set aside for the home modification program. IHDA has not determined what the grant would be and wants to first determine how much could be matched. IHDA will consider it again next year.

IHDA submitted a draft Request for Proposals (RFP) to CMS for the Statewide Housing Locator which will be an interagency partnership with IHDA, HFS and IDOA. The Statewide Housing Locator will be a free listing available to case managers to locate housing by location, rent, accessibility, and will list senior housing. IHDA hopes to start work on interagency funding and select a contractor by the next meeting.

IHDA will be offering housing sessions at the Governor's Conference on Aging. There is a track on locating affordable and accessible housing for seniors.

Department of Commerce and Economic Opportunity – Gail Hedges distributed a brochure on the Community Service Block Grant Program. Community Action Agencies are located throughout the state and provide a variety of services. Many are involved with the Community Care Program (CCP), nutrition services and are aware of available housing. Seniors are one of the targeted populations and can be assisted if they meet income guidelines.

DCEO also funds the Illinois Association of Community Action Agencies which have a community development association that builds and develops affordable housing, partly with funding from IHDA. DCEO works with them to assist in receiving IHDA funding. OASAC members are encouraged to include these associations in meetings. Community Action Agencies are monitored annually by DCEO.

Illinois Department on Aging – Director Johnson reported the budget has been approved as introduced with the restoration of the Red Tape Cutters program. The budget includes \$1.70 increase for homemaker, \$2 increase for adult day service and also \$1.33 per hour for home care workers for insurance.

The Department is currently tracking 76 bills. SB 1920 provides for free rides for disabled individuals over 65.

The Department filed rules for Mandatory Medicaid and CCP enhancement that were included in HB 652.

Ethics Statement

Karen Kloppe, IDOA assistant general counsel, provided members with a packet on ethics training. The last page needs to be signed and returned to department staff. Ethics training has been an annual requirement since 2003. The packet covers ethical conduct, political activities and gifts.

When this group collectively comes together under OASAC, you are considered part of the state of Illinois. Part of that is to take on the responsibility of a public servant. The people of the state pay tax dollars to support this committee and the Department. You are required to account for your time, avoid conflicts of interest which include actual conflicts of interest as well as an appearance of a conflict of interest. There needs to be public perception that you are working for and on behalf of the citizens of Illinois. You may need to make disclosure about an outside employer if it will effect your decisions or recuse yourself if you or a member of your immediate household may be influenced by your decision making.

Members also need to be aware of and understand that certain political activities are prohibited in state buildings and on state time using state resources. Members should not accept a gift that makes it appear or actually directly impacts decisions you are making.

The names of ethics officers for each agency are listed on the Governor's website and agency's websites. If you have questions or need guidance, the ethics officer is a good place to start. You can also contact the Office of the Inspector General.

When choosing to serve the State of Illinois, regardless of capacity, you are undertaking separate duties. One relates to the duty to report abuse, fraud, misconduct or mismanagement or waste and have a duty to cooperate and assist with an investigation and keep your participation confidential.

Elder Economic Security Initiative

Martha Holstein, Ph.D., Health and Medicine Policy Research Group, provided handouts and a presentation to the committee. The Elder Economic Security standard is a new tool for use by policymakers, advocates, older people, families and others to see what minimum income level is necessary to live in the community. The EESI looks at what it takes to live at a bare bones level for an older person in Illinois living in a variety of

circumstances. Data is available for all counties in Illinois and was developed by the Gerontology Institute at the University of Massachusetts in Boston. Calculations are for 54 different household combinations.

The goal of the EESI is to stop thinking about the poverty level and start thinking about economic security. The core question is what is the gap between what people need and what they actually have. What happens when public supports are included and how effective are they? We want to transform how states and programs define need and distribute resources. The standard will demonstrate how income needs change as someone ages and support the development of a state wide coalition to educate policy-makers and the public. Illinois is among the first five states for which the standard has been completed and will be the fourth to launch. What has been learned is that subsidies for housing and health care are essential for both individuals and couples and without housing assistance, low income elders across the state have a difficult time making ends meet.

Martha explained the next steps include the following:

- build strong coalition of individuals and organizations that endorse the standard and will help convene local meetings and speak about this issue.
- Attend press conferences
- Review policy recommendations

Martha explained the goal of the standard is to see what it takes to live and pay bills. This does not include any extras such as going out to dinner. The poverty standard looks at only food and does not take geography into account.

Director Johnson agreed the Executive Committee should discuss this issue further and will put it on the agenda for the next meeting to be addressed and come up with specific recommendations for the full OASAC.

Presentation and Discussion of OASAC Benchmarks

Shelly Ebbert presented the benchmarks to the committee and provided handouts. The Executive Committee has been discussing benchmarks since February. As part of the review of the 2008 OASAC report we've had questions from legislators and others on how we measure our activity in terms of long term outcomes.

The Executive Committee had a retreat in March where the entire afternoon was spent talking about benchmarks. The goal is to have benchmarks that are measurable and meaningful. The interagency group that consists of HFS and IDPH has participated in these discussions and provided necessary information. We are still in the process of gathering information. The purpose of this discussion is to ask the committee if we are on the right track. The Department is looking to have OASAC sign off on pursuing these benchmarks. The benchmarks presented today are not final.

Amy Wiater reported on the perspective from the Administration on Aging. AOA wants to share best practices from states and serve as a resource to states embarking on long term care rebalancing efforts. Information was shared with Shelly including the Minnesota benchmarks and additional information which is available to use as a starting point and shows where Illinois is compared to national data. As the committee looks at benchmarks, Amy recommended that the group consider how Illinois compares to other states as well as how Illinois will compare to itself over time.

Amy recommended the benchmarks be kept simple and straight forward and be focused. They need to show where we are starting and focusing on how it will be measured and track that progress. One measure will not be enough. For example, spending may not be the only thing that should be looked at. Benchmarks should be as simple as possible. The AOA is interested to hear of the progress Illinois makes on this and discussions related to it. The department is encouraged to continue to use the AOA support center in Chicago as a resource.

Shelly explained that in some benchmarks, especially those involving dollars spent, we looked strictly at Medicaid spending. Looking at Medicaid institutional spending and Medicaid spending in the community allows for some comparability.

Kelly Cunningham presented information for MFP benchmarks. One benchmark required by federal CMS is related to the states portion of money spent on home and community based services and institutional spending. IDOA asked HFS to look at similar benchmarks for the 65 + population. MFP is not tied to age. HFS has run some of the data that compares Medicaid recipients in nursing homes age 65+ without serious mental illness. Kelly provided a handout with that information. The data goes back to 2005 and tracked Medicaid recipients for the purpose of establishing a baseline and getting everyone on the same page. The numbers for 2008 have been projected and will change in the next couple of months. For comparison purposes, the data looks at different Home and Community Based Services waiver groups including SLFs and the elderly waiver. It also looks at Medicaid recipients and Medicaid spending. These numbers contain Medicaid only dollars. When HFS considers long term care issues, it is discussed across all populations including those younger with disabilities. HFS thought it important to share all pertinent information, not just the elderly waiver.

Shelly presented the six proposed benchmarks and provided a handout. The proposed benchmarks address different elements of the long term care system. The interagency group looked at several different examples of benchmarks, brainstormed and reviewed examples from other states.

The committee discussed each benchmark and the need to look at spending that includes Medicaid only as well as what the state contributes. For the benchmark related to quality, the group agreed the executive committee should discuss further after an opportunity to review available surveys has been allowed. The sixth benchmark concerning support for caregivers was not addressed.

Shelly asked the committee if the direction the department and interagency group is moving has the blessing of the full committee and whether the basic concept is approved for continued work by the Executive Committee and the Interagency Workgroup. Director Johnson acknowledged there was consensus at both sites.

The meeting adjourned at 2:45 pm.