

Older Adult Services Advisory Committee Meeting Minutes

Date: February 25, 2013 1-3pm

Location:

Illinois Department on Aging Conference Room, 160 N. LaSalle St., 7th floor, Chicago Illinois Department of Natural Resources, One Natural Resources Way, Springfield (Rock River Video Conference Room – 2nd Floor)

IN ATTENDANCE:

Committee Members

- Pat Ahern Rainbow Hospice
- Stephanie Altman Health and Disability Advocates
- Darby Anderson Addus Healthcare
- Carol Aronson Shawnee Alliance for Seniors
- John Becker Senior Services Plus
- Jean Bohnhoff Effingham County Committee on Aging
- Thomas Cornwell, MD Homecare Physicians
- Cindy Cunningham Adult Day Services
- Frank Daigh Caregiver and citizen over age 60
- Joyce Gusewelle Parish Nurse
- Dr. Susan Hughes Gerontology Researcher
- Michael Koronkowski UIC College of Pharmacy
- Dave Lowitzki Trade or Union member
- Phyllis Mitzen Citizen member over 60, Health and Medicine Policy Research Group
- Patricia O'Dea-Evans A Silver Connection
- Jon Lavin Illinois Area Agencies on Aging
- Eli Pick Post Acute Innovations
- Susan Real Caregiver, Eastern Illinois Area Agency on Aging
- Cathy Weightman-Moore Catholic Charities of Rockford
- Ancy Zacharia Nurse Practitioner, Homecare Physicians

Committee Members not in attendance:

- Pat Comstock Health Care Council of Illinois
- Jerry Crabtree Township Officials of Illinois
- Robyn Golden Rush University Medical Center
- Jan Grimes IL Homecare and Hospice Council
- Terri Harkin SEIU
- Beverly Kimmons Alzheimer Disease and Related Disorders
- Myrtle Klauer Illinois Council on Long-Term Care
- Christopher Laxton Nursing homes

- Mari Money- Illinois Finance Authority
- Melissa O'Brien Senior Services Center of Will County
- Dave Vinkler AARP

Ex-officio – non-voting Committee Members in attendance:

- John K. Holton Director, Illinois Department on Aging
- Vice-Chair: Bill Bell Illinois Department of Public Health
- Julie Hamos, Director, Illinois Healthcare and Family Services
- Ben Noven Illinois Housing Development Authority
- Sally Petrone Illinois Department on Aging, State Long-Term Care Ombudsman
- Gail Hedges Illinois Department of Commerce and Economic Opportunity
- Sandy Leith Illinois Department of Professional Regulation, Senior Health Insurance Program
- Lyle Van Deventer Illinois Department of Human Services
- Doree Vetter Illinois Department of Veterans Affairs

Ex-officio – nonvoting Committee Members not in attendance:

- Vice-Chair: Lora McCurdy for Theresa Eagleson Illinois Department of Healthcare and Family Services
- Michael Gelder Office of the Governor

Illinois Department on Aging staff:

- Sandra Alexander
- Andy Austin
- Janice Cichowlas
- Joseph Mason
- Patrick Maguire (graduate intern)
- Mary Mayes
- Lisa Zuurbier
- Carole Schwartz

Guests:

- Hillary Bray, HMPRG graduate intern
- Theresa Collins, Senior Services Plus
- Bill Dart, Illinois Department of Public Health
- Mike Hall, Senior Director of Medicaid Policy and Planning at NASUAD
- Tamar Heller, UIC
- Randall Owen, UIC
- Kristen Pavle, HMPRG

SUMMARY

Welcome and Introductions – Sandra Alexander welcomed everyone to the meeting.

Approve November 5, 2012 OASAC Minutes

• Eli Pick moved that the minutes be approved with corrections to attendance. Michael Koronkowski seconded. The minutes were unanimously approved.

Membership Report

Resignation: Christopher Laxton

New Members: Jason Speaks, replacing Christopher Laxton as the Nursing Home

or License assisted living establishment representative.

Executive Committee Report

Carol Aronson gave an update on the last Executive Committee meeting. There was discussion regarding the Integrated Care Program – Service Package 2 launch, and the formation of the MLTSS Workgroup to provide input into a report being developed by Health & Medicine Policy Research Group. Stephanie Altman requested that State agencies provide their update reports in writing so there can be more discussion and questions regarding the reports at the meetings.

MLTSS Workgroup Update

Phyllis presented a PowerPoint overview of the Managed Long Term Services and Support Workgroup (MLTSS) including the goals and objectives, workgroup members and progress to date.

Current literature shows that those who require LTSS are often vulnerable and require unique services. HMPRG has a contract to provide actionable recommendations to the agencies to whom OASAC advises with an emphasis quality assurances and consumer protection. Other states that may be interviewed include Tennessee, Texas and Kansas regarding their MLTSS implementation. Key questions include what is the role that MLTSS plays in rebalancing? What is the role of the stakeholder community? HMPRG will issue a white paper/policy brief with recommendations. The committee met four times to date. All state agencies were represented at a meeting held earlier in the day with Mike Hall, Senior Director of Medicaid Policy and Planning at NASUAD. HMPRG will also review the OASAC goals/objectives and make recommendations for possible revisions.

Discussion with Mike Hall (Senior Director of Medicaid Policy and Planning at NASUAD) Mr. Hall discussed the work that is being done at NASUAD and made the following key points.

- Rapid shift in states from fee-for-service to managed care
- Challenges with care management such as system tracking of care coordination and the IT capabilities needed
- NASUAD (which has an ACL grant to help states build business capacity) trying to help states acquire appropriate roles, IT, service pricing
- States determining core competencies for managed care in their state. Some states are using Area Agencies on Aging for case management.
- States most successful have been very detailed in their transition plans. The more you are transparent and communicate, the better.

Group Discussion:

- Illinois has separate agencies that deliver services to specific populations under separate waivers; each with their own array of services and service costs.
- Consumers may benefit from an ombudsman type function to help them navigate managed care. Advocacy agencies need a place to go when something goes wrong for a consumer.
- Kansas implemented a system, which included "ride alongs". As people were being enrolled, the State would monitor by sending staff on home visits to evaluate the quality of the communications, training, provide correction and learn where there were issues. The group discussed conflict of interest issues with case management.
- How do states insure that MCOs move toward state goals of rebalancing? MCO reimbursement mechanisms can provide incentives/penalties such as contractual withholds until performance goals are met; high performers have their withholds reduced; performance incentives if they do well; fines that are graduated (e.g., each occurrence is a higher fine) etc.....

Evaluation of Integrated Care Program

Report presented by Tamar Heller and Randall Owen from UIC

- Found decrease in ER use, decrease in ER visit leading to hospital admission, 18% reduction in overall hospital readmissions, reduced hospital lengths of stay, transportation services improved.
- Most grievances had to do with transportation.
- Most appeals had to do with medical necessity.
- 2,000 of 40,000 participants were surveyed 35% return.
- For most appeals, the MCO agreed to address so most appeals are resolved. Many of the complaints had to do with changes in prescriptions.
- Literature is limited but points out the importance of consumer engagement. Recommend continuity of care.
- Evaluation: measures needed for quality of life. For the duals population, there will be a national evaluation.
- NCI system is being used with DD population in 30 states. UIC evaluation, unlike NCI, is doing longitudinal measures.

Updates from State Departments - Deferred

Announcements: none

Meeting adjourned at approximately 4:00 pm.