Members Present on the Phone: Mary Callahan, AMAC; Theresa Collins, IACCPHP; Cary Crawford, Chicago Commons; Ella Grays, Gareda, LLC Louie Prado, Home Health Security Services; Robert Thieman, IADSA;; LaShun James, Addus Homecare -Chicago Branch; Tammy Tenton, Premier Home Health Care Services, Inc; Peter Valessares, Hellenic Foundation; Aaron Fortenbacher, Healthcom; Megan Gallegos, VRI; Mary Hemp, Community Care Adult Day Services, Inc; Dary Mien, Chinese Mutual Aid Association; Beth Menz, SEIU Healthcare Illinois/Indiana; Brycie Kochuyt, Alternative (for the Older Adult); Kevin Cosgrave, Guardian Medical Monitoring; Amy Nathan, North Shore Senior Center; Sherry Hamlin, The Voyage Senior Living; Laura Altenbaumer, Active Day; Lori Hendren, AARP Illinois; Gus Saberbein, Help at Home; Richard Juarez – Lawndale Christian Health Center; Marsha Nelson, Shawnee Health; Natasha Belli, DuPage County Senior Services; Robert Spaulding, Healthcare Plus Senior Care; John Magee, ADT; Marta Perevra, CLESE; Joanne Glenn, Comprehensive Quality Care Inc Foundation; William Wheeler, ICCCU; Stephanie Garrigan, Philips Lifeline; Shana Holmes, Southeastern Illinois Area Agency on Aging, Inc; Yvette Lyles, Pathways to Living; Yvette Holcomb, Premier Home Health Care Services, Inc

Members not Present at this meeting: Lori Elliott, Williamson County Programs on Aging; Lori Pence, Central Illinois Area Agency on Aging;

Guests Present on Phone: ; Marsha Johnson, CCSI – CCU; Darren Buatti, Critical Signal Technologies/Best Buy; Becky Edwards; Tonia Oberg; Roxanne Nuttall; Lisa Kracht; Linda Hubbartt; Chrissy Castillo; Norma Fuentes; Liz Vogt; Amber Richardson; Rhonda Roberts; Sarah McCoy; Tomas Gonzalez; Dave Lowitzki; Andrew Kretschmar; Pam Jones; Jessica Moxey; Christie Kirckhoffer; Lindsey Snelling; Megan Thornton; Sue Makowski; Tara Russo; Benita Johnson; Breanna Vanmatre; Cindy Hardiek; Cora Taylor; Jennifer Porter; Jon Hartke; Nancy Berry; Andrew Kretschmar; Becky DeGroot; Terence N. Santos de la Rosa Simms; Kelly LiVigni;

Illinois Department on Aging Staff on the Phone: Paula Basta, Director; Lora McCurdy, Deputy Director; Selma D'Souza, Chief of Staff; Mike Berkes; Barbara McConnell; Russ Kemple; Sue DeBoer; Amy Lulich; Mike Dropka; Desirey Ackermann; Jim Shovlin; Mary Gilman; Rhonda Armstead; Chelsey Peters; John Eckert; Chrystal Alexander-Wofford; Kim Flesch; Justin Heggy; Michael Sartorius; Terri McKeon; Will Salmon; Gloria Simmons; LaRhonda Williams; Katherine Ostrowski;

<u>Agenda</u>

Call to Order

The meeting was called to order by Theresa Collins at 10:09 am on May 11, 2021.

Opening comments by Director Paula Basta

85% of older adults in Illinois have been vaccinated with at least their first dose. The staff members can be credited with the drive to get our older adults to the vaccination sites and receiving their vaccinations. We can provide transportation to the vaccination sites and soon to visit homebound older adults at their residences to administer the vaccinations. Statewide, Illinois is at about 34%. We foresee the likelihood of resuming face to face visits for our case managers this summer.

Lora McCurdy, Deputy Director:

IDoA is welcoming two new staff members – Will Salmon (supervisor of OAS) and Katherine Ostrowski (Legislative Liaison).

Theresa Collins:

Announced a departure from the board. Louis Prado has accepted another position within his current company, and effective today, will resign his position as a member of the CCPAC Board of Directors. The person fulfilling the remainder of his term on the Board is John Magee, also of ADT.

There are two new Board Members who have been appointed to the CCPAC Board – Yolanda Curry, Chicago Department of Family and Support Services, and Yvette Holcomb, Premiere Home and Health Care Services.

Approval of March 9, 2021 CCPAC Board meeting minutes

Motion to accept the March 9, 2021 minutes without alterations was provided by Cary Crawford and seconded by Richard Juarez, Sr. The motion carried with no objections.

Public Comments

Dary Mien memorialized Bernie Wong, founder of the Chinese American Service League in 1978 and former CCPAC Board Member who passed on April 27, 2021.

Cary Crawford posed a question about when the CCPAC Board will be able to hold its meetings face to face again.

Richard Juarez, Sr announced that he has resigned his position at Lawndale Christian Health Center and will be leaving the CCPAC Board at the end of May 2021.

COVID Vaccination Rates and COVID Vaccine Hesitancy

The current count for those seniors in Illinois who have received at least their first COVID Vaccination is currently at 85% and opened the discussion to the providers. (See the accompanying link to the research) The discussion is to bring to light any ideas, difficulties, successes, and concerns that the providers might have with which the IDoA could assist.

<u>Theresa Collins, Metro East and southern regions of Illinois</u> – They are dealing with a small amount of vaccine hesitancy with concerns of what substance they are allowing into their bodies. This provider is using educational materials that the IDoA and other state agencies have provided to assure the public that the information they are getting is accurate. There is also a problem with transportation to some of the more remote areas and establishing a home-bound program for vaccinations.

<u>Ella Grays, Gareda, LLC</u> – People in her area are concerned about the vaccines causing the same issues as Johnson & Johnson. They are working through educational materials with their seniors to help alleviate hesitancy of the people o Gareda is seeking to initiate a celebration to revel in the successes of reaching a benchmark percentage of seniors receiving the vaccinations. Gareda is encouraging their participants to do a walk-in at the various commercial sites offering walk-in vaccinations. This action will ease the anxiety that seniors are experiencing with the reservation processes. Her staff would like to get together for a face-to-face meeting scheduled for this summer or early fall to reconnect and have a conversation and talk about their successes and trials over the past year, and to celebrate those successes.

<u>LaShun James, Addus Home Care, Chicago</u> – There has been a great uptake in their workforce in vaccinations. She indicated that the more the workers talk about the vaccines with their participants/clients, the more likely participants are to become more comfortable with the idea of getting the vaccinations. The barriers to the participants receiving the vaccinations are the fact that seniors must make appointments is a frustrating task. They are having issues with available appointment times. Seniors will feel more comfortable if the sites change to a walk-in basis for vaccinations. <u>Tammy Tenton, Premier Home Health Care Services, Inc</u> – The education component is important for our care coordinators to be comfortable in having the conversations with their clients to ensure the clients understand the process of reserving time slots for their vaccination, and what the vaccination process entails. As a result of the conversations, the number of vaccinations has significantly increased.

<u>Brycie Kochuyt, Alternatives</u> – Seniors look to their care coordinator to discuss the process of receiving the vaccinations to alleviate their concerns about the vaccination. Their organization set up a 1-800 number for a vaccine support center in March, 2021. Thanks to the support center staff and volunteers connected with nearly 4500 older adults. They partnered with the Rock Island County Health Department who set aside appointments for their seniors. That effort resulted in 99% of participants were vaccinated. Their organization partnered with the Rock Island County Project to arrange transportation for those seniors looking for a way to get their vaccinations. Alternatives services ten counties within their district. The ten counties are averaging senior vaccination rates of 66% to 70%. Henderson County, being a predominantly rural area has a vaccination rate of 39%. They are working to focus on the homebound population who want the vaccination.

<u>Marsha Nelson, Shawnee Health Services</u> – Three of their health departments in their region are doing homebound visitations for their seniors to vaccinate them. Shawnee Health Services has called all their clients to try to convince them to agree to get the vaccinations. Shawnee's district includes the seven counties that fall in the lowest vaccination rate in the state. No appointments are necessary but are finding that education and contacts are necessary to try to get the seniors to take the vaccinations. There is a large portion of the clients who are hesitant to receive the vaccinations.

<u>Dary Mien, Chinese Mutual Aid Association</u> - This organization states there are some areas in which they've experienced success, and other areas it seems as if there is no motion. They need to focus on the homebound seniors. Their staff is comprised of 95% who have been fully vaccinated.

<u>Richard Juarez, Sr., Lawndale Christian Health Center</u> – The participants have been very responsive to the calls to be vaccinated. The organization indicates 100% of their participants have received the vaccine including those who have difficulty traveling to the Center. The organization has been able to go the homes of these participants and provided vaccinations by direct care providers. The homebound patients have received at least their first vaccination; some have their second vaccination as well.

b. Collaboration with Northwestern University - training

The Department of Health Care and Human Services developed a new vaccine tool kit. The link is below:

All In Illinois toolkit:

https://www2.illinois.gov/aging/coronavirus/vaccine/Documents/Vaccine-Campaign-All-In-Illinois.pdf

There are several different links available on the vaccines on the IDoA website: <u>https://www2.illinois.gov/aging/Pages/default.aspx</u>. IDoA has developed a flyer that is now fully translated into several languages

Every Friday IDoA sends out a summary of all the announcements that are sent out.

IDoA is currently working with the Northwestern University Center for Healthcare Communications developing a webinar/training video that addresses vaccine hesitancy in seniors.

ADS Re-opening:

c. ADRC funding proposal

There currently are 55 ADSs that are approved for re-opening to some degree. Some have re-opened with capacity of 50% or 50 or less. Some have opened at 25% of their capacity. They are maintaining social distancing, using hand sanitizer and so forth.

IDoA is working alongside the AAAs on addressing re-opening of congregate meal sites and re-opening senior center sites.

Provider Profile

The Provider Profile is a waiver requirement.

- 1. IDoA is requesting all providers to develop a generic email address to which all inquiries and correspondences are sent.
- 2. Each provider is responsible to input their agency's information is entered and the general public can find services offered easier.
- 3. Each provider needs to review their information on the Provider Profile for accuracy and correct any errors or changes in service and bring their information up to date.
- 4. There are some large providers who have put in their Provider Profile information but have duplicated the information in all counties they serve. Providers need to provide *accurate, up to date information* for *individual* providers within their corporate agencies.

Please contact Mary Gilman at <u>mary.gilman@illinois.gov</u>

INH Staff/workforce shortages

This is not a new issue, however, there is a shortage of workers both in the offices as well as within the field due to COVID restrictions over the past 15 months. In order to properly staff and service their participants, agencies need to fill open vacancies within their agency. Please let IDoA know if there is anything the department can do to assist.

<u>Marsha Nelson: (Southern counties)</u>: There are still shortages of staffing and caregivers in this area. Their agency is having difficulty finding people who are wanting to work due to fears of exposing themselves or their clients to COVID. She commended those home service workers that continued to work for the clients keeping our seniors safe.

<u>Brycie Kochyt (Northwest counties)</u>: It was noticed a few years back that there began to see a shortage of staffing and caregivers. They are working with providers on services offered to help fulfill the care plans created by care coordinators. In their eastern county area, they are noticing that there are a lot of service problems due to the shortage of workers. Brycie suggested more meetings with their providers at their quarterly provider meetings to see if her agency may help providers on a case-by-case basis. The problems continue to grow. Clients have specific care plans that were provided to them prior or during the pandemic that providers are to fulfill; however, if the provider is unable to assist the client to fulfill their plan of care, the agency is calling the other providers in the area until they find one that is able to provide the services needed to the client. If they find that none of the providers in their 10-county area can take on the case, to accommodate the client there are times when their agency may provide partial care plans. There are providers who have waiting lists, and the problem has grown to the full 10-county area.

In their area they are having difficulty getting people to even apply for a position there, and when they do have applicants about 1 out of 3 applicants would show up to work. There are workers who quit without notice, leaving their agency to fulfill care plans that were already being fulfilled. Some care givers are saying the higher unemployment benefits are competitive with the current part-time wages. Facilities in some areas are paying CNAs \$23.00/hour as a starting wage, and in-home agencies cannot compete with that. Workers that continue providing services to their clients are over-worked, over-stressed due to the pandemic and getting work related injuries requiring medical time off work.

Ella Grays: The concern in her area is losing workers who are high risk or even those just afraid to expose themselves to the virus. Most of these are compassionate, hard workers and now that they are off, minimum wage is set to increase to \$15/hour, these workers could go to work for fast food restaurants and make \$15/hour for an 8-hour day. They're less likely to return to home health care agencies.

A proposal was made to consider recognizing the in-home health care workers. The suggestion was tabled until a later date.

Impact of American Rescue Plan on HCBS

The Federal Government through the American Rescue Plan is providing significant grants across all states large funding grants to shore up COVID, vaccination outreach, social isolation initiatives care-giving initiatives, home-delivered meals. The IDoA received notice last week that Illinois was presented with specific grant amounts. IDoA staff is being brought into the discussion on how best to utilize those funds at the August 10th CCPAC meeting. There are specific federal grants through which our Older Americans Services Act are going to see that additional funding.

There is also a 10% increase in federal match funds under the Medicaid waiver program. IDoA is still waiting for federal CMS guidance on how the programs through that match will be funded. The increase went into effect on April 1, 2021 and will continue until March 31, 2022.

Training updates

The in-home service pre-service work group continues to meet periodically. Most of the information from the different work group assignments has been received. It has been IDoA's practice to review that information.

The re-certification materials for Care Coordinators are currently undergoing review. There is a discussion about moving all Care Coordinators' recertification dates (expirations) to one specific date. It will be much easier on all concerned. IDoA is currently working on processing the re-certification materials to be distributed to all CCUs by June 1, 2021. The date IDoA has set as a target date is July 31st for all Care Coordinators to process their re-certification materials. This will also include those Care Coordinators who were newly certified in May and June of this year. The reason for this is to ensure that all Care Coordinators could participate in the Recertification Training opportunity.

IDoA is working on adding some new type reasons so that CCUs will bill for those phone calls they make following Choices for Care assessments. Shawnee Information Systems sent an email on Friday, May 8th with your links so that CCUs will update their participant performance manager and CMIS. CCUs may also update their platforms. IDoA is asking CCUs to not submit any billing until the procedure is programmed into the system.

Legislative Update

<u>Representative Harper's bill HB 2566</u> was not called on the floor. This legislation would address an audit finding which would put IDoA in compliance with some legislation that passed several years ago. Regarding programs and services for minority seniors, this bill would have put us in compliance with that legislation. Updates will be forthcoming. IDoA is looking to find an alternative vessel with the audit findings. IDoA is hoping to find a senate shell bill to get HB 2566 to pass. IDoA is waiting on legislative updates.

<u>Representative Stuart's HB 43</u> which would require mandated reporters to report cases of suspected abuse that resulted in death. This has become SB 700 which will be heard on May 12, 2021 at 8:30 AM. A call was made by IDoA to Rep. Stuart requesting that HB 3918 be added to HB 43 which expands the definition of mandated reporters to include investment advisors and insurance adjusters to protect seniors from exploitation. Rep. Stuart is willing to add this legislation into SB 700. This will require a wait and see for that amendment to come back from LRB at which point IDoA can add HB 43 into that bill . The hope is that it will pass.

<u>Update on SB 1970 Representative Jennifer Gong-Gershowitz</u> re: Access to Mental Health Information. Discussion with Rep. Gong-Gershowitz indicated her concern about opening the bill for language; people are already confused with the current language of the bill. Representative Gong-Gershowitz indicated she understood the concerns and would take the bill back to her stakeholders to obtain their opinions and suggestions. Representative Gong-Gershowitz indicated that if the bill did not receive the amendment during this session that she would include the bill as a standalone bill during the Spring Session.

<u>Medicaid Working Group</u> was contacted by the Governor's office regarding HB 422 which addresses the DHS increase in DON scores. Katherine and Gloria will be forwarding their position paper on that bill so that when the Medicaid Working Group meets the position paper will be able to be discussed in that meeting.

Waiver Renewal Update

is being undertaken during the throes of the public health emergency. Aging is working on the Waiver Renewal so that our providers may recognize what the assignment is. The document is about 100 pages; currently IDoA planning staff has completed approximately 80 pages examining it internally and updating all of the areas that need to be updated based on policy changes, practices that change all of those things that are different from the 2016 study.

It is a large document with many updates required. For example, Critical Event Reporting was completely re-written from the previous version which was a fragmented process initially. Another section that is being addressed will be the performance metrics; internally were complex, had many gray areas, and a bit too difficult to answer with CMS call. Throughout all the renewal processes, going through all the performance measures there are areas ie: root causes and critical event reporting to mitigate risk.

On May 25, 2021 we will be submitting our document (the 100-page document discussed earlier) to the administration for their review. The administration will have a week to review the documents and return any changes to us. The waiver bureau is requiring the return of the edited documents by June 1, 2021 for public comment. There is a 30-day open comment period with submission by July 1, 2021 to federal CMS.

First Responder Sheets not being returned by MCOs

During audits performed by our monitoring staff, it was noticed that the first responder sheets are not being returned to the CCUs while the installers are out installing the devices in the homes. This is a reminder that the first responder sheets need to be returned to the CCUs when the installers have completed the installations. If the CCUs find that they are not receiving the first responder sheets from the EHRSs, please contact the provider to remind them the first responder sheet sheets have not been submitted. As a reminder, the first responder forms only need to be submitted to the CCUs for new installations and for any information changes. This also applies to any MCOs.

Adjournment

The next meeting is scheduled for August 10, 2021, currently scheduled for a WebEx meeting, however, watch for emails from IDoA to update you all on the meeting details.

Meeting was adjourned at 12:10 PM by Theresa Collins.