

**Community Care Program Advisory Committee Minutes**  
**10:00 a.m., Tuesday, September 6, 2016**  
**Department on Aging, Springfield**

**Members in Attendance:** Carol Aronson, Shawnee CCU; Tracy Barczewski, Midland AAA; Kevin Cosgrave, Guardian Alarm; Diane Drew, CHELP, Stephanie Garrigan, Phillips Lifeline; Ella Grays, Gareda, LLC; Lori Hendren, AARP; Shana Holmes, SEI AAA; Greg Kyrouac, SIU School of Medicine; Dave Lowitzki; David Lukens, VRI; Lubertha Mercer, HCI; Kristin Murphy, IlliniCare Health; Marta Pereyra, CLESE; Robert Spaulding, Healthcare Plus Senior Care; Jane Stansell, Adults Over 60; Jennifer Triplett, CCSI; Kathy Woodworth, Healthcom, Inc.; Kathy Wyatt, McDonough District ADS

**Illinois Department on Aging:** Desirey Ackerman, Mike Berkes, Lori Brannan, Cindy Bushur-Hallam, Kristin Chi, Janet Dobrinsky, Brent Ellis, Kris Gardner, Mary Gilman, Sarah Harris, Jose Jimenez, Sandy Leith, Terri McKeon, Jody Martin, Steve Milburn, Robin Morgan, Lora McCurdy, Becky Ward

**By Telephone:** Theresa Collins, Senior Services Plus; Mary Lee Tomsa, DuPage County Senior Services; Jennifer Chlela, DuPage County Senior Services; Tuyet Ngo, Chinese Mutual Aid Association; Elio Montenegro, Genesis Home Healthcare; Lori Pence, Central IL Agency on Aging; Joanne Glenn, Comprehensive Quality Care, Inc. Foundation; Dan Healy, Aetna; Terri Harkin, SEIU; Andrew Kretschmar, Alzheimer's Association; Andrew Davenport, Meridian Health Plan; Marta Pereyra, CLESE; Alex Burke, IDoA;

**Guests:** Terri Belville, Schuyler Counseling & Mental Health; Amy Marchant Brown, CRIS Healthy Aging; Rosetta Cutright, HCI; Betty Degroot, Cass County Mental Health; Topaz Gunderson-Schwesia, Molina Health Care; Lisa Fanning, ACHS; Mary Hemp, CCSI; Jean Jones, Cass County Mental Health; Marsha Johnson, CCSI/CCU; Richard Juarez, Lawndale Christian; Dave Lowitzki, SEIU; Kristin McCracken, AMAC; Tonia Oberg, ECCOA; Marsha Nelson, Shawnee Alliance; Cari Outman, Molina Health Care; Gustavo Saberbein, ABCOR; Peter Valessares, Hellenic Foundation; Bill Wheeler, ICCCU

**Welcome and Introductions:**

The meeting was called to order at 10:00 a.m. by Jose Jimenez and roll call was taken.

Jose asked for the June 21<sup>st</sup> meeting minutes to be approved. Dave Lukens made the motion, seconded by Jane Stansell, and minutes were approved.

Jose asked if there was anyone who wanted to speak as part of the Public Comment portion of the meeting.

**Public Comments:**

Carol Aronson asked if she had a question to ask the Department's CFO if she should ask now or wait until later. Jose indicated she should wait to ask her question until the Department's fiscal updates.

Marta Pererya asked for the Department to speak more on GATA and provide some necessary clarifications.

**Department Updates:****Chief Financial Officer Report (Sarah Harris)**

Sarah Harris indicated the FY16 billings that had been received were processed and the comptroller had begun processing FY17 Medicaid payments.

Carol Aronson asked about "prompt payments" being processed under the Stop Gap budget. Sarah indicated the payments would begin being processed in the next few weeks and the Department would be able to issue payments out of the Stop Gap budget.

Kathy Woodard indicated that in the past the providers received the budget of actual expenditures and asked if the Department would be willing to provide that information, again. Sarah indicated she would provide that information.

Dave Lowitzki asked if there was any funding left over from paying FY 2016 bills to pay for FY 2017 bills. Sarah indicated there would be a minimum amount of money left after paying the prompt pay interest.

Ella asked for the Sarah to elaborate on the Court of Claims payment process. Sarah indicated the billings are being paid as they clear the system and are not going through the Court of Claims, at this time. It was then mentioned that the FY16 bills being paid would be something the banks would like to hear and it was asked if there could be something sent out for FY17 regarding bill payments. Sarah indicated she would inquire about that.

**Business Services Report (Teri McKeon)**

Teri McKeon indicated the Grant Accountability and Transparency Act (GATA) require all CCUs and CCP providers who do business with the State of Illinois to get registered through the GATA website. She indicated that entities would need DUNS and Sam Cage numbers and each entity should go ahead and get registered at this time. It was mentioned that all entities that have an agreement or contract with the Department would be required to register prior to the signing on a renewal or new contract.

Carol Aronson asked if the Department was able to see if an organization was registered on GATA. Teri indicated the Department is able to see the status of a GATA registration and can see the agency GATA assigned as the Cog. Agency. The Cog. Agency listed is responsible for answering and handling the registration of their listed entities.

Linda Hubbard indicated her entity had registered but had not received any emails for the ICQ, etc. Ella Grays indicated she thought there was a link provided to do the ICQ to complete the registration. Teri indicated that each entity is required to do a Programmatic Risk Assessment and ICQ.

The subject of indirect cost as part of the GATA registration was discussed and some found it difficult to determine if an entity is direct or indirect cost and/or if there is any negotiation for indirect rate agreements. Sarah indicated that it is confusing to figure out and that the Department is trying to put a framework together to better understand the GATA process. If you don't have an agreement with the feds, then you don't need to worry about direct cost ratios.

It was also mentioned that the GATA process for Illinois is still in the rollout phase.

Jose mentioned that originally the Department thought that the CCP would be exempt from GATA; however, it is now known that registrations of all entities are required by GATA. He indicated that it has been a work in progress for everyone and the GATA website does have some good webinars and tutorials regarding the program. Entities are encouraged to reach out to the Department if there are GATA questions.

It was also mentioned that an entity is only required to register for GATA once, even if there are multiple contracts.

Marta asked about the pre-registration process and the next steps of GATA after the pre-registration. The Department will be issuing future contracts with the GATA language in the agreement. If there are missing components in the plans, there will have to be language in the contracts regarding those components. If necessary, the Department is reaching out to providers regarding GATA registration as contracts expire. GATA questions can be sent to Teri McKeon and copy Becky Ward.

### **Legislative Report (Alex Burke)**

Alex Burke indicated the IDoA website includes legislative updates and public acts. Any questions regarding legislative information can be sent to Alex. He briefly discussed the passing of SB 2929 regarding the CCUs providing documentation to nursing homes rather than it being the job of the discharge planner. SB 2929 goes into effect January 1, 2017. Other legislation briefly discussed included HB 4826, HB 4552, HB 5009, HB 5603, HB 5805 and HB 5924. Jose mentioned that we would send a link to the legislation list on the Department's website to CCPAC members.

### **Planning Report (Lora McCurdy)**

Lora discussed the upcoming Critical Incident Reporting System. She mentioned the SIP system; however, the CI Reporting System will pull all of the data together into one collaborative system for better communication and follow-up of reports. She indicated there would be changes and training of the CCP network in the near future. There are federal assurances of requirements in the waiver and critical incident reporting is a key component.

Tracy inquired about who would be trained on the new CI system. Lora indicated training would be provided to the CCUs and provider network, and that it would probably be in the form of webinars.

Lora indicated the feds are requiring rates to be reviewed every five (5) years and that this year the Department would be doing a cost study of EHRS. She indicated there would be an RFP developed for a cost study and that next year would be an ADS cost study and the third year would be an in-home cost study. Federal CMS seemed to be satisfied with that approach to the rate reviews.

There were new waiver regulations announced in March that addressed Person Centered Planning (PCP) requirements and settings who receive services must be integrate into the community. ADS sites received visits from the Department's review team. The regulations require special attention of "Category 3" ADS locations, which are ADS sites located on the grounds of an institution, hospital or nursing facility. The new regulations include settings that are more integrated into the community. Lora indicated the Department would be sending letters to six (6) ADS sites located on the grounds of a hospital. The Department plans to ask the feds for approval under heightened scrutiny. Quality services will need to be proven to the feds, and the deadline is 2019 to get finalize ADS regulations. A newly created ADS work group will be meeting soon.

### **BEAM Update (Robin Morgan)**

BEAM is in the heart of the MLTSS transition and the September 1<sup>st</sup> list included approximately 3,000 participants to transition to MCOs and anticipation of a large list of participants in October. Those who are being transitioned are the participants who opted out MMAI and will now have to choose an MCO to continue services. The BEAM staff are receiving a lot of questions and calls and regarding confusion about services and provider billings. Robin indicated that providers who are having issues with HFS initiative, Impact can be forwarded to BEAM.

Diane Drew asked if were plans of a new MCO in the central Illinois area as there is currently only one MCO. HFS has indicated have been discussions with MCOs. Robin indicated that regardless of discussions or decisions, central IL will not get an MCO until 2018 because of the federal requirements for registration to be an MCO. It was mentioned that EHRS providers do

not have Medicaid numbers; however, the Department indicated EHRS providers do have Medicaid numbers but the Department provides the MCOs with all business names, dbas, etc.

The Participant Search Screen (Screen) launched and is a great tool to use to check MCO status, date ranges, CCP information, etc., making it much easier to work through communications. Another nice feature is that the Participant Search Screen works even when eCCPIS is down. Other nice features of the Screen include information regarding Public Health records of death dates and other waiver programs. Bill Wheeler indicated the PACE system has been problematic. Robin asked that as people begin using the Screen to feedback and/or suggestions of other systems or beneficial information that could be added to the Screen.

Lora reminded everyone that HFS has been providing the Department with the names of participants who have an upcoming Medicaid redetermination due. CCUs can view the names on eCCPIS and can bill for in-person assistance with Medicaid applications. It was asked if the CCU can bill for each trip to the participant's residence. Robin indicated MCOs are also assisting Medicaid participants as well. It was also asked if there could be communication so both aren't going to the residence to assist; however, there is another billing code for billing transferred clients – therefore, there should not be double billing of participants. MCOs and other groups will receive access to the Participant Search Screen in the future.

#### **Home and Community Based Services (Jose Jimenez)**

The No Wrong Door (NWD) report was distributed and there were public hearings in the summer. There was a lot of feedback and participation in the sessions, and feedback has been put into the report. The Department will send the report to CCPAC and CCUs.

The Nursing Home Deflection grant with Lewin ends at the end of this year. PCP training is in the contract and will be done by year's end. Choices for Care information is included in the Lewin contract. The information provided from Lewin will be helpful because the information is being received from a non-interested third party. The information will help with training topics, etc., and the Department wants to be proactive in its approach.

The Department has begun a new initiative regarding eCCPIS billing rejects being handled in an ongoing and timely basis. There are many components that have to be taken into consideration regarding billing issues; contract number changes, budget impasse, consent decrees, etc. Some providers have reached out to the Department for assistance with their billing rejects. It is important for the CCP provider's billing staff to obtain the information regarding contract number changes and reject issues. The Department hopes to provide some training on how to clear different rejects. Robin mentioned that the Participant Search Screen is a great tool to assist with clearing rejects.

Jose mentioned the overall POSM numbers are almost up to 70%. The Department has reached out to CCUS with performance issues and working with them to create corrective action plans to improve their service numbers.

The 24-hour backup plan that is required in the federal waiver was discussed. Jose mentioned that although some providers already utilize a backup plan, the Department plans to implement a universal plan that provides streamlined information for the network. The QA Subcommittee has been reviewing backup plans and will have a one-page draft plan to share with CCPAC soon.

The CCP Marketing Policy requirements were discussed. The policy requires all CCUs, CCP case managers and HCAs to view a webinar and sign an acknowledgement form to be kept on file. The Department plans to offer ongoing trainings to minimize marketing issues; the Marketing Policy is consistent with CCP rules and effective immediately. There will be timelines set for compliance of the policy. Lora mentioned the emphasis for participant choice, as required in the waiver. It was asked if MCOs would be required to follow the marketing policy and the Department indicated they would be required, as well.

### **Other CCPAC Discussion**

Dave Lowitzki with SEIU inquired about the status of CRP. Jose mentioned that CRP was still moving forward and the DoA executive staff are continuing to make visits to the network. Dave also asked about the initiation of CRP without a full budget. Jose indicated that the Department does not have all of the answers regarding the budget at this time and at this time continues to move ahead with preparations for CRP. The CRP rules are still scheduled to be submitted to JCAR in the near future.

Carol Aronson asked about the Department providing additional information in response to questions about CRP and that she only remembered one wave of answers provided to the network.

Ella Grays inquired about CRP being filtered through the AAAs and that the network had received limited information from the AAAs. It was indicated the CRP meetings with the AAAs were initiated by the DoA executive staff; however, the network invitations to the meetings were the decided by each AAA.

The January 1, 2017 start date of CRP was inquired about; specifically if that would be the date of the new CRP contracts or the date clients would begin on CRP. There was also an inquiry about the CRP draft rule revisions. The DoA staff indicated there is still a planning phase for the initiation of CRP since the program is being crafted without the knowledge of a budget. The CRP rules have been carefully revised based on feedback from the network, and it was reminded there would be no CRP without a budget.

The meeting adjourned at 1:22 and the Sub-Committees convened.