

## **Community Care Program Advisory Committee Minutes**

**10:00 a.m., Tuesday, March 8, 2016**

**James R. Thompson Center, Chicago**

### **Members in Attendance:**

Robert Childers, Williamson County Programs on Aging; Theresa Collins, Senior Services Plus/IACCPHP; Kevin Cosgrove, Guardian Medical Monitoring; Joanne Glenn, Comprehensive Quality Care, Inc.; Cary Crawford, Chicago Commons; Amelia Griffin, BCBS (for Andrea Davenport); Diane Drew, CHELP; Tom Gonzalez, ADT; Ella Grays, Gareda Home Care; Stephanie Garrigan, Philips Lifeline, (for Matt Lisovitch), Terri Harkin, SEIU; LaShun James, Addus; Lori Long, Chinese Mutual Aid Association; David Lukens, VRI; Lubertha Mercer, HCI; Kristin Murphy, IlliniCare; Marta Pereyra, CLESE; Robert Spaulding, Healthcare Plus Senior Care; Jane Stansell; Susan Simmons, Help at Home, Inc.; Robert Thieman, CAE, IACCPHP; Mary Lee Tomsa, DuPage County Senior Services; Kathy Wyatt, McDonough District Hospital; Kathy Woodworth, Healthcom

By telephone: Carol Aronson, Shawnee Health Service; Debbie Baldauff, Catholic Charities DOJ; Tracy Barczewski, Midland AAA; Sherry Barter Hamlin, River to River Residential; Greg Kyrouac, SIU School of Medicine; Lori Pence, Central Illinois Area Agency on Aging; Jennifer Triplett, CCSI; Barbara Wylie, Peace Meal Senior Nutrition Program

### **Members Not in Attendance:**

James Scherer, Aetna; Vicki Schlomann, IADA; Senior Services; Lori Hendren, AARP

**Illinois Department on Aging:** Director Jean Bohnhoff, Jose Jimenez, Matt Ryan, Alex Burke, Mary Gilman, Lora McCurdy, Veronica Vera, Shirley Morley, Tom Brenner, Sophia Gonzalez

By telephone: Jennifer Reif, Jodi Becker, Robin Morgan

**Guests:** Darby Anderson, Addus; Jennifer Chlela, DuPage County Senior Services; Kimberley Cox; Joel Davis, Help at Home; Lori Elliott, Williamson County Programs on Aging; Ron Ford, Help at Home; Topaz Gunderson-Schweska, Molina; Marsha Holmes, Family Home Service, Inc; Don Zing Huang, Chinese Mutual Aid Association; Marsha Johnson, CCSI/CCU; Richard Juarez, Lawndale Christian; Riki Kauffman, Plows Council on Aging; Rebecca Liefert, Plows Council on Aging; Kristin McCracken, AMAC; Yick Lun Mo, Chinese American Service League; Elio Montenegro, Genesis Healthcare; Emerita Nieves, Rincon Family Services; Anh Nguyen, Chinese Mutual Aid Association; Cari Outman, Molina Health Care; Eva Prokop, Polish American Association; Gustavo Saberbein, Abcor; Tania Schwer, Grundy County Health Department, Senior Division; Renee Thomas, Peter Valessares, Hellenic Foundation; Bill Wheeler, ICCCU; Carmen Yuan, Chinese Mutual Aid Association

### **Welcome and Introductions:**

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

Jose asked for December 1 meeting minutes to be approved. Jane Stansell made the motion, seconded by Bob Thieman, and the minutes were approved.

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

Bob Thieman asked to speak on behalf of the Illinois Association of Community Care Program Home Care Providers, which met the previous day.

Bob said communication issues need to be addressed by the Department. He said information should be relayed to providers quickly and regularly. He said he would like to emphasize that the Department needs improvement in this area. For example, he said there have been terminations on clients that providers did not know about.

Bob also asked about MMAI timeframes, the transition of County Care, and the status of the BEAM unit within the Department.

Ella Grays addressed the committee asking multiple questions relating to billing and other issues. She said there are days she cannot get into eCCPIS to work until late. She also said termination of clients on June 30, 2015, have created more rejects for CCUs and providers. She said problems of this magnitude should have been shared with providers and CCUs. She asked what was going on with regard to systems using differing Java versions. She said she has trouble logging on to eCCPIS and it is very slow just to get PKI numbers. She also asked when interest starts accruing on payments due providers.

Jose said the questions would be addressed as part of Department updates.

Kevin Cosgrave asked whether the Department knows if there is a policy with regard to “lock boxes” adhered to doors similar to what realtors use. Kevin said some emergency home response providers are charging for the device while others are not. He asked if it is allowed for providers to utilize lock boxes and if so are they allowed to charge. The Department said it would research the issue and provide clarification.

Mary Killough said she wanted to welcome Jean as the new Director of the Department. She said everyone knows it is a challenging time to be in such a position and that they wish her well in this important role.

Jose called for Sub-Committee Reports

### **Universal Assessment Tool Sub-Committee**

Sub-Committee Chair Kathy Woodworth reported that a teleconference meeting was held March 2, and that the sub-committee is regrouping after being stalled by contract delays affecting the UAT.

She said sub-committee members should have received a BIP Stakeholder Powerpoint and encouraged anyone who has not been part of the BIP Stakeholder group to join and participate in those conference calls.

Kathy said information discussed at the sub-committee meeting is always subject to change, though it is anticipated the new UAT will be rolled out in mid-July.

However, this is contingent on development of needed software that HFS is addressing through its work with the software vendor.

The Department has talked in the past about pilot UAT test sites within various geographic areas of the state. However, the plan for implementation now is that the UAT will be introduced in “waves.”

Wave 1 will include a select group of CCUs, DRS case managers etc., from various geographic areas in the state. After evaluation of Wave 1 implementation, more agencies will be included in subsequent waves until the entire state is included.

The UAT Community Health Assessment (CHA) has been customized to assure elements from current Comprehensive Assessment tool are included. The customized CHA will be utilized beginning with Wave 1. The customized CHA includes information pertaining to Title III reporting.

The questions included under the DON have been incorporated into the CHA.

Bob Thieman asked about any change to the service cost maximum, and Mary replied that there is no change to the service cost maximums.

Jose said that Lewin is the contracting consultant for HFS but the contract that Lewin has with IDoA is a different one.

Mary reported that Lewin will come to Illinois for site visits with agencies participating in Wave 1. The site visits are scheduled to occur at the end of March and beginning of April.

Area Agencies on Aging, a sample of Care Coordination Units and Coordinated Entry Point sites will be included in the Wave 1 site visits to obtain information about referral and assessment processes. CCP providers will be brought into the process later.

Following the Wave 1 site visits, Lewin will issue a report to the BIP sub-committee.

## **Quality Assurance Sub-Committee**

Lora McCurdy reported that the Quality Assurance Sub-Committee held a teleconference meeting March 2. The Sub-Committee has been working on a Person Centered Planning survey that was finalized by the Sub-Committee before being shared with a broader audience in the network the previous week.

The purpose of the survey is to “poll” CCUs, providers and AAAs on where they currently stand in addressing Person Centered Planning to determine “gaps” in the current process. The intent of the survey is to inform the content of future training on Person Centered Planning. It was sent by the Department utilizing a Survey Monkey link and is due back March 25. It is intended to help transition toward compliance with the federal HCBS regulations specific to Person Centered Planning.

Sub-Committee members stated it should be conveyed to those being surveyed that there are no negative repercussions in being forthright with answers. It is understood that the very phrase “Person Centered Planning” means different things to different people; some individuals may think they are doing a very good job but others might be resistant to or unaware of the philosophy.

The Quality Assurance Sub-Committee was previously co-chaired by Jean Bohnhoff who is now Director of IDoA. Therefore, the group needs to think about someone else taking over the role.

Kristin Murphy asked Lora if her question at a previous CCPAC meeting with regard to Person Centered Planning Training and consistency had been relayed to HFS. Lora replied that it has been brought to HFS’ attention and that the Department also holds the same expectations of consistency.

## **Department Reports**

Jose said since the last CCPAC meeting, Jean Bohnhoff had been named as Director of the Department. He said the Department is preparing an email with regard to other staff appointments and when it is finalized it will be shared, but it did not make sense to send the information out piecemeal.

Director Bohnhoff addressed the committee and said that while she is new to the Department, she is not new to the Aging Network having led a Care Coordination Unit. She said these are extraordinary times and it is a challenge to try to stretch dollars even further. She said she understands the hard work dedicated providers and agencies carry out every single day and that, having come from the field, she “walks the walk and talks the talk.” The challenges facing the Network will be faced together, she said, and she is confident the Network will pull together to do what is necessary to keep older adults in their homes where they want to be.

Director Bohnhoff encouraged committee members and guests to keep a regular dialogue going with their legislators. She stated that individuals may not agree with everything that is happening in state government but to stay vocal and on top of issues as we all move forward.

She said she recalls talk years ago when those in the Aging Network asked what would happen if the Community Care Program served only Medicaid clients. She said this can be an opportunity to increase efficiency and make the most of services offered. The Community Reinvestment Program (CRP), as will be discussed later, will offer flexibility. She said it presents an opportunity to ask, “How are we going to do this?” She said when CCP first came upon the scene surely it was not a seamless process nor one that happened overnight. Ultimately, she said, thousands of older adults were served well by it.

Director Bohnhoff added that she has an open door policy and welcomes input and questions. If she does not have the answer, she said she will always get back to any individual or organization reaching out.

Jennifer Reif was asked by Jose to address “messaging.”

Jennifer said the Department continues to be extremely vocal and persistent in communicating timelines, fiscal projections and other issues to the Governor’s office. Jennifer said this is not a “one population problem.”

She said Director Bohnhoff and Department managers plan to visit PSAs throughout the state to see how providers are managing caseloads and making

fiscal projections on a weekly if not daily basis. Jennifer said, “We need to assess where you are. It is critical.”

Bob asked when the Director would be visiting the PSAs.

The Department said visits are being set up now and will hopefully start to take place before the end of the month.

Jose then asked Chief Fiscal Officer Jodi Becker to provide an update to the committee.

### **Fiscal**

In response to a question pertaining to prompt payments, Jodi said the 90-day “clock” for payment begins on the Friday of the week the voucher was accepted into the state system, and interest begins to be earned on the 91<sup>st</sup> day. Therefore, prompt payment would occur on the 91<sup>st</sup> day even though the bills are still being held in “pending status.” The committee asked prompt payment information be sent to everyone.

Mary Killough asked under what authority elder abuse bills are being paid, and the Department responded they are being covered under the Beeks Court Decree.

With regard to releasing vouchers, Jodi said the Department’s allocation is \$35 million, or about half of what would normally be spent. She said vouchers are sent over to the Comptroller each week.

Bob Spaulding asked how the Department is advocating for payments and how the Comptroller decides how much gets paid and to whom.

Jodi responded that the Department is not privy to the Comptroller’s decisions on what to pay and that every agency is vying for payments: The Department continues to lobby for additional funding though it is simply based on availability of cash.

Director Bohnhoff added that the Department “feels your pain” and understands that that the Medicaid-only population is what may be keeping providers afloat at this time.

Ella asked about “hardship requests” and said that she continues to call the Comptroller’s office each week to check on the status of payments.

Mary Killough asked about minimum wage rate increases going into effect in Chicago and the potential to eventually lose money as a provider if more money is not allocated in the FY ’17 budget (based on current rate methodology).

Bob Spaulding noted that the city of Chicago is raising the wage for Chicago workers to \$13 per hour by 2019. (\$10.50 this year; \$11 in 2017, \$12 in 2018 and \$13 in 2019).

## **Policy**

Lora McCurdy said the Department analyzed current staffing and has made changes based on policy areas that need additional focus, including the impending implementation of the new Uniform Assessment Tool (UAT). She noted that Mary Gilman will be acting as the new lead on the UAT and will be attending all BIP Policy Group meetings.

BEAM is also undergoing transition and will now be helping the Department with its quality assurance, including enhanced monitoring efforts.

Lora explained the Person Centered Planning survey in more detail and said that training will be key to implementation.

Training and monitoring should go hand in hand, she said.

Lora reiterated that Person Centered Planning regulations are non-negotiable.

She also provided an update on the waiver renewal and how the Department added language to show that Adult Day Services will be provided in integrated care settings.

To that end, at least ten ADS sites will be visited by Department staff by September to ensure compliance with the new federal Waiver regulations pertaining to the provision of services in “integrated” settings.



She said the Statewide Transition Plan will be filed with federal CMS on March 21st.

Lora said the Department is close to receiving approval for its Waiver renewal.

Bob Thieman asked if the approval would be for five years and Jose responded that though the renewal is for 5 years, it is already into the first year. Therefore, it will be up for renewal in another four years.

Lora asked Mary Gilman to address the committee on UAT developments.

Mary said she is meeting with the BIP Policy group every other week. She reminded the committee that there are software development needs that go along with any launch of an initiative.

She said CCUs who agreed to be a pilot site, and a selection of AAAs and Coordinated Entry Point sites will be visited by the Lewin Group to gather information regarding the current referral/intake and assessment processes.

She stressed that the tool has been chosen, though the Department has been allowed to customize it since it was a very thorough assessment.

Mary said it is hoped that when eCCPIS is cleaned up, there will be better ability to gather data.

Tracy Barczewski asked where she can direct any billing glitches since Mary has taken on a new role in Policy.

Mary said such inquiries should be referred to [aging.occs@illinois.gov](mailto:aging.occs@illinois.gov)

Ella asked about rumors she heard pertaining to new contracts. She said it was her understanding that contracts need to be assigned new numbers by the Department and asked how that would be taking place without the assistance of Shawnee Alliance and that this could create a “mess.”

Ella said she heard that the contract was scheduled to end June 30.

It was clarified that only providers not CCUs will need to do new applications for those agreements which expire at the end of April and May. Those agencies should have received an email from the Department's Office of Service Development and Procurement to explain the process required to complete new applications.

Some confusion was brought to the attention of the Department as it was stated that Shawnee Information Systems contract might be done after June 30, 2016. The Director said she did not have any knowledge of such a change.

Carol Aronson said she received information from Kathleen Michels at the Department that the contract could end June 30.

David Weibring from the IT Department planned to go to Shawnee the following day. When he rejoined the meeting, it was later clarified that the Shawnee's contract will not end on June 30, 2016.

### **Managed Care**

Robin Morgan indicated that the Medicaid Medicare Alignment Initiative (MMAI) is on track for July 1<sup>st</sup> implementation and approximately 13,000 persons who previously opted out will be assigned a MLTSS plan. HFS will send out notices in batches over a two-month period.

She said she would be meeting with HFS in the next week.

The newly titled "Client Inquiry Screen" should go on line very soon and should be a huge assistance to providers, especially because it will list a client's history with MCOs. To be operational, users will need an Illinois.gov account. Instructions for obtaining an Illinois.gov account will be sent to all providers, CCUs and AAAs soon.

CCUs will be able to see if a client is on another waiver such as DRS, or if they are deceased. Also, the system will not be forced to shut down when eCCPIS is running.

David said the eCCPIS system is very old and is thus large and hard to handle. It is limited in backing up or restoring information. The Department continues to transition toward modernization.

With regard to County Care, Robin said it had contracted out to IlliniCare for their case management services; however as of April 1 County Care will begin providing their own case management services – Department staff met with County Care management yesterday to discuss the transition and to provide training to their staff. The Department plans to continue to meet with their staff in the coming weeks.

Kristin asked how many MCOs will be part of the MMAI roll out. Robin said she would get clarification on that from HFS.

Becky Lerfelt asked if they could get a copy of the roll out letter that will be sent to clients. Robin said it will be forwarded as soon as Aging receives the letter.

It was asked if the MMAI is expanding and Robin said that is an HFS decision, but no discussion of expansion has been discussed with IDoA.

### **Community Reinvestment Program**

Mary Killough said the Network has already been supplied with a Fact Sheet about the program but that the “devil is in the details” and they would appreciate some more information. She said it appears CRP will be similar to Flexible Senior Services. She said concerns are prompted because the network is very fragile now and its fabric is getting thinner; safety nets are not as strong. In the past, she said, flexible meant “in addition to” and not “in place of.”

Jennifer Reif said it is always a judgment call on when to get information out. When it is released, the Department wants it to be “accurate, pointed and factual.” She said the Department appreciates receiving information as well.

She said CRP will afford the opportunity to “think out of the box” in ways to serve older adult. Flexibility will afford additional services not offered under the current waiver i.e home modification etc. It is anticipated CRP will “break the silos” currently hampering CCP.

It is anticipated that better data can be garnered with respect to individual participants with regard to Title III services or local resources.

The Department wants to know impact, good and bad and to be able to make decisions based on accurate data.

Jose said the Department has learned a lot from Flexible Senior Services, and is trying to improve monitoring.

Jennifer said the Department wants to bring solutions and has a responsibility to be leaders. Other states may not have a secondary option, she said. She said, "We are challenging the network. Let's look at what is non-traditional."

The 60- year-old of today is not the same as when CCP was enacted.

Jennifer said core services – in home supports, respite, meals, emergency home response – will still be offered by CRP.

Concerns were raised for older adults leaving the hospital needing more services right away but CRP being the default program (if and until they are Medicaid-approved).

Lora said CRP and then CCP would offer same services but different intensity levels for interim services.

Jennifer said the Department agrees and "interim services" would be known as "expedited services" or those needed in the first 30 days.

It was asked where ADS fit under CRP? Jennifer replied that it fits under 'respite.'

Director Bohnhoff said the important thing will be to keep individuals getting services who need it.

She said it is known how important transportation is to rural areas. Perhaps CRP will open up opportunities for that. Also, there could be new opportunities for home delivered meals. Other states such as Minnesota have successfully implemented alternative programs like CRP.

She said there is no reason for an individual to go into a nursing home if their home is not wheelchair accessible and they just need a doorway widened. She said CCP could not help a person in that situation.

Many times over the years, she said, many have asked “If we only had ‘whatever’ to help a person...” and this presents the opportunity to figure the ‘whatever’ out.

She said the caveat to CRP is that as information and data are gathered, some things can eventually be added into the waiver.

In response to concerns about “soft money” and long-term appropriation of CRP, Matt Ryan said program moneys would come from an income tax revenue stream titled “Human Service Fund.” He said the Department’s sister agencies have very little Medicaid-only clientele.

Tom Gonzalez asked why additional services cannot be offered at a capped rate. For example, he said PERS is currently approved at \$30 for installation and \$28 a month. He said it would make sense to offer additional services such as Medical Dispensers/Fall Detection/GPS buttons (outside the home). He said other states let the providers offer these products and services as long as the install/monthly costs stays under a certain amount (like \$55 capped).

Bob Spaulding asked about CRP billing; Jennifer said that process has not been flushed out at this time.

It was noted CRP will allow providers a quicker turn around with reimbursement.

Jane Stansell asked what do you do when it is going to be different in a different PSA.

Lora said the Department anticipates CRP being an outcome-based initiative that can track critical incidents such as number of falls and help improve the quality of life for older adults.

Marta asked about training modules and the Department responded that training will be a key component of CRP.

Bob asked if CRP would utilize personal assistants, and the Department said no, it would not.

The meeting adjourned at 2 p.m.

The next CCPAC meeting will be held April 19 in the auditorium of the Agriculture Building.