



The Illinois Home Care Ombudsman Program



Purpose of the Ombudsman Program

- Ensure that residents of long-term care facilities, older adults, and adults with disabilities receive quality services and are able to live a dignified life at the highest practicable level.



The Ombudsman Program Structure

- Illinois Department on Aging
 - Office of the State Long-Term Care Ombudsman Program
 - Long-Term Care Ombudsman Program
 - Home Care Ombudsman Program



Long-Term Care Ombudsman (LTC) Program Statute Authority

- Nursing home regulations were established by the Older Americans Act of 1965.
- The Long-Term Care Ombudsman Program was mandated in the early 1970's by the National Older Americans Act to protect the rights of nursing home residents by investigating and resolving their complaints.



The LTC Ombudsman

Long-Term Care Ombudsmen visit residents in long-term care facilities to:

- Inform residents of their rights
- Help residents resolve problems with the facility or family members
- Inform residents and their families of the right to organize resident and family councils

Long-Term Care Ombudsman work to:

- Assure that nursing home residents receive quality care and a dignified life at the highest practical level.
- Investigate and resolve complaints made by or on behalf of long-term care residents.



LTC Ombudsman Program Contact Info

- Call the Senior HelpLine to locate your local Regional Ombudsman Program:
1-800-252-8966 (V); 1-888-206-1327 (TTY)
- Or you may email the Office of the State Long-Term Care Ombudsman at Aging.STLOProgram@illinois.gov



Home Care Ombudsman (HCO)

Statutory Authority

- In August 2013, the state amended a section of the Illinois Act on Aging to expand the Long-Term Care Ombudsman Program to cover seniors and adults with disabilities living in the community.
- In 2014, the Home Care Ombudsman Program began providing advocacy and assistance outside of the Long-Term Care Setting.
- As of January 1st, 2017, the Home Care Ombudsman Program was restructured. Offices are located in Springfield and Chicago. Advocacy services are provided statewide.



The Goal of the HCO Program

Provide advocacy services to participants who receive home and community-based waiver services or services through the Medicare Medicaid Alignment Initiative to reduce the risk of placement in a long-term care facility.



HCO Program Services Components

- Identify, investigate and resolve complaints on behalf of participants made by or on behalf of participants which may adversely affect the health, safety, welfare or rights of such participants
- Respond to inquiries
- Conduct community education sessions
- Perform issue advocacy
- Attend stakeholder meetings

Who Do We Serve?

- Older persons and adults with disabilities who:
 - Are enrolled in the Medicare Medicaid Alignment Initiative (MMAI)
 - Receive the following Home and Community Based (HCBS) Waiver services in their home:
 - Persons with Disabilities (DHS)
 - Persons with HIV or AIDS (DHS)
 - Persons with Brain Injuries (DHS)
 - Persons who are Elderly (Aging)

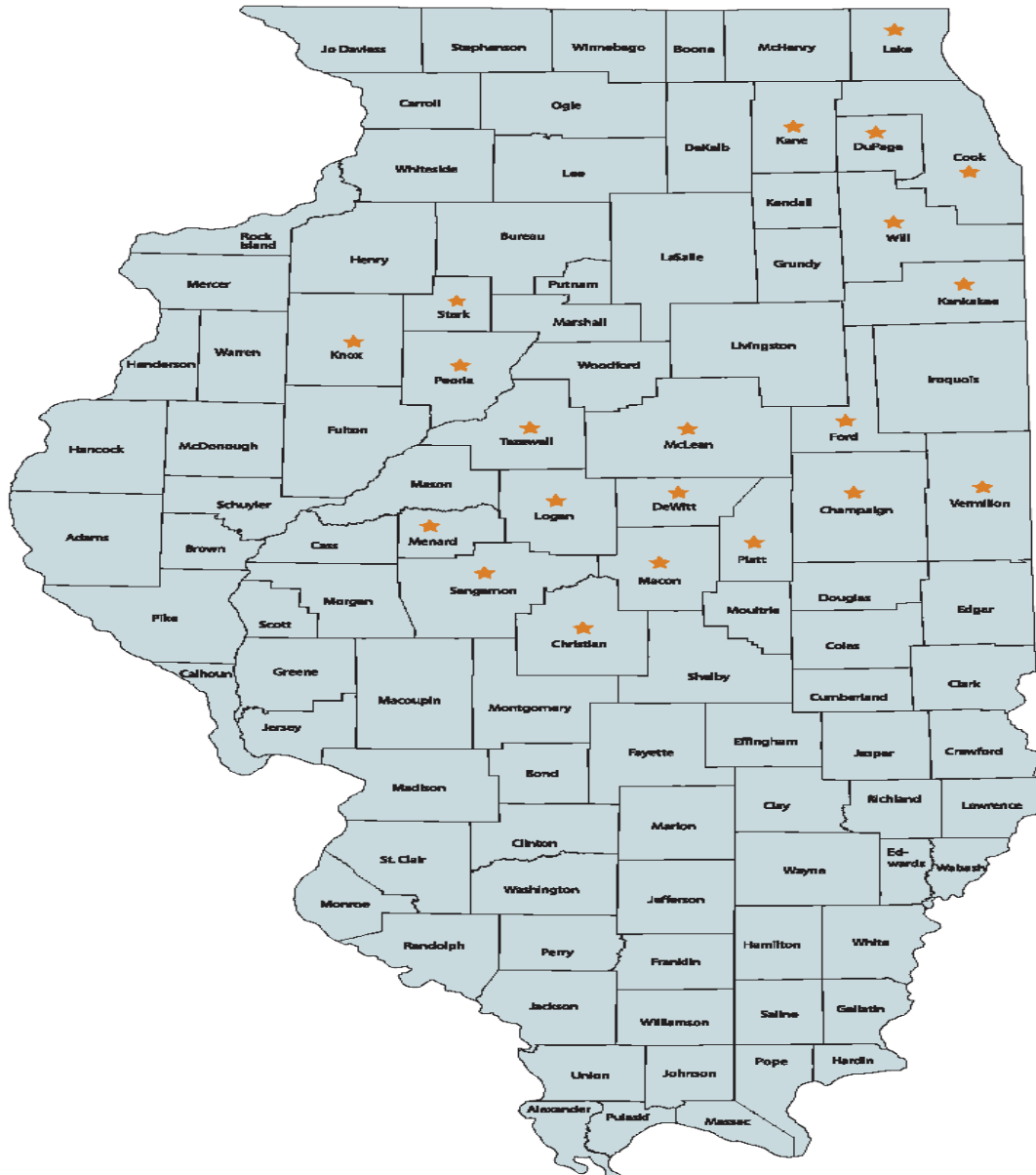


Intake Process

- Complaints and inquiries are received through the Senior Helpline, standard mail, or the Home Care Ombudsman general mailbox.
- The Deputy State Home Care Ombudsman reviews the complaint or inquiry and assigns it to a Home Care Ombudsman.
- The Home Care Ombudsman assigned to the case or inquiry then makes initial contact with the participant to answer their question or to schedule a face to face home visit to work towards complaint resolution.

Illinois Department of Healthcare and Family Services Medicaid Managed Care Program Map

July 1, 2019



HealthChoice Illinois Plans

STATEWIDE

These health plans serve all counties in the state, including Cook County.

Blue Cross Community Health Plans
IlliniCare Health
MeridianHealth
Molina Healthcare

COOK COUNTY

These health plans only serve Cook County.

CountyCare Health Plan
NextLevel Health Partners

The HealthChoice Illinois Program includes Managed Long Term Supports and Services (MLTSS) membership.

★ Medicare-Medicaid Alignment Initiative (MMAI) Plans

Aetna Better Health Premier Plan
Cook, DuPage, Kane, Kankakee, Will

Blue Cross Community MMAI
Cook, DuPage, Kane, Kankakee, Lake, Will

Humana Health Plan
Cook, DuPage, Kane, Kankakee, Lake, Will

IlliniCare Health
Cook, DuPage, Kane, Kankakee, Lake, Will

Meridian Complete
Cook, DuPage, Kane, Will

Molina Healthcare
Champaign, Christian, DeWitt, Ford, Knox, Logan, Macon, McLean, Menard, Peoria, Piatt, Sangamon, Stark, Tazewell, Vermilion



Medicare Medicaid Alignment Initiative

- Partnership between Federal and State Levels.
- How it works:
 - MMAI allows eligible beneficiaries in Illinois to receive their benefits from a single Medicare-Medicaid Plan in select counties.
 - Plans must provide all necessary Medicare and Medicaid-covered services, including Medicaid waiver benefits.

MMAI Managed Care Organizations

Greater Chicago Region

- Aetna
- Illinicare
- Meridian
- Humana
- Blue Cross Blue Shield

Central Illinois

- Molina



HCBS Waivers

- A waiver is a program that provides services that allow individuals to remain in their own homes or live in a community setting, instead of in an institution. Illinois has nine HCBS waivers. Each waiver is designed for individuals with similar needs and offers a different set of services.
- **Waivers Served by Home Care Ombudsman Program:**
 - Persons with Disabilities (DHS)
 - Persons with HIV or AIDS (DHS)
 - Persons with Brain Injuries (DHS)
 - Persons who are Elderly (Aging)



Home Care Ombudsman Role

- Educate participants about their rights as a recipient of MMAI or HCBS waiver services.
- Investigate and work to resolve complaints made by or on behalf of persons enrolled in MMAI with issue(s) relating to managed care services or persons receiving HCBS waiver services.
- Use problem solving as the primary means to assure that participant's rights are understood, honored, and complaints are resolved.
- Engage in PARTICIPANT-DIRECTED advocacy. Ombudsmen do not take action without the permission of the participant.
- Assist participants with filing an appeal and/or serving as an authorized representative during the Fair Hearing Process.
- Assist participants in filing grievances, when necessary.



Home Care Ombudsman Role

- Respond to inquiries.
- Provide referrals.
- Educate and inform stakeholders and other community partners about the services available through the Home Care Ombudsman Program.
- Advocate for participants to ensure their issues are shared with government agencies and policy makers.
- NOT duplicating services; do not provide case management.



Home Care Bill of Rights

- Receive treatment and services to help them live at home, and to support their independence
- Appeal a decision about their services or eligibility
- Have services explained in a language they understand
- Choose their services and providers
- Remain free from retaliation
- Present grievances and receive a prompt response
- Be treated with dignity and respect



When to Contact a Home Care Ombudsman

- If the MMAI or HCBS Waiver participant feels that their rights have been violated by the MCO or HCBS Waiver Program.
- If the MMAI or HCBS Waiver participant needs assistance with filing an appeal for:
 - a decrease in services hours;
 - termination of services; or
 - lack of action or response by an MCO or HCBS Waiver Program.
- If the MMAI or HCBS Waiver participant needs assistance with filing a grievance against the MCO or HCBS Waiver Program.
- If there is a question about services offered through the Home Care Ombudsman Program.



How to the HCO Program

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Questions?