



## Older Adult Services Advisory Committee Meeting Minutes

**Date: August 24, 2020 1:00 – 3:00 p.m. (Approved November 16, 2020)**

Call in: Dial: #1-415-655-0002 Access code: 133 795 2587#, then press # again

WebEx: Please see Outlook invite for Video Option

### **IN ATTENDANCE:**

#### **OASAC Committee Members**

Director Basta – Department on Aging  
Paul Bennett – Citizen over the age of 60  
Amy S. Brown – CRIS Healthy Aging Center  
Meghan Carter – Legal Council for Health Justice  
Theresa Collins – Senior Services Plus Inc.  
Dr. Thomas Cornwell – VillageMD  
Kathy Rhoads (for Cindy Cunningham) – Illinois Adult Day Services Association  
Kelly Fischer – Pathway to Living  
Topaz Gunderson-Schweska – Molina Healthcare of Illinois  
Lori Hendren – AARP Illinois  
Linda Hubbartt – Effingham City-County Committee on Aging  
Susan Hughes – UIC Community Health Sciences School of Public Health  
John Larsen – Cantata Adult Life Services  
Phyllis Mitzen – Citizen over the age of 60  
David Olsen – Alzheimer Association Illinois Chapter  
Sandra Pastore – Oswego Senior Center  
Susan Real – East Central Illinois Area Agency on Aging  
Gustavo Saberbein – Help at Home LLC  
Teva Shirley – Southwestern Illinois Visiting Nurse Association  
Jason Speaks – Leading Age IL  
Liz Vogt (for Sara Ratcliffe) – Illinois HomeCare and Hospice Council  
Cathy Weightman-Moore – Catholic Charities LTC Ombudsman Program  
Ancy Zacharia – Home Care Physicians

#### **Ex-officio Committee Members:**

Lauren Tomko (for Kelly Cunningham) – Department of Healthcare and Family Services  
Gwen Diehl – Department of Veterans Affairs  
Kelly Richards – State Long Term Care Ombudsman  
Daniel Levad – Department of Public Health  
Christopher B. Meister – Illinois Finance Authority  
Megan Spitz – Illinois Housing Development Authority  
Lyle VanDeventer – Department of Human Services

#### **Department on Aging staff:**

Mike Berkes, Samantha Brill, Becky Dragoo, Selma D'Souza, John Eckert, Jason Jordan, Sophia Gonzalez, Amy Lulich, Chuck Miller, Lora McCurdy, Michael Sartorius, Jim Shovlin, Megan Thornton and LaRhonda Williams

### **GUESTS:**

**NOT IN ATTENDANCE:**

**OASAC Committee Members**

Sherry Barter Hamlin – The Voyage Senior Living  
Bill Bell – Illinois Health Care Association  
Michael Koronkowski – UIC College of Pharmacy  
Dave Lowitzki – Lowitzki Consulting  
Sharon Manning – Family Caregiver  
Walter Rosenberg – Rush University Medical Center  
Jacqueline Rodriguez – SEIU HealthCare – Illinois and Indiana

**Welcome & Introductions:**

Director Paula Basta welcomed everyone and thanked them for joining the meeting under the new normal. All members, guests and IDoA staff introduced themselves.

**Call to Order:**

John Eckert asked for a motion to call the meeting to order. Linda Hubbard made the motion and Gustavo Saberbein seconded. All members voted in favor.

**Approve minutes from the Full OASAC meeting on February 24, 2020:**

John Eckert asked for a motion to approve the minutes from the February 24, 2020 meeting. Dr. Thomas - Cornwell made the motion and Theresa Collins seconded. The minutes were approved unanimously by members with no additions or corrections. The minutes will be posted on the Department website.

**Approve minutes from the ICOA/OASAC Joint meeting on June 16, 2020:**

John Eckert asked for a motion to approve the minutes from the joint ICOA/OASAC meeting held on June 16, 2020. David Olsen made the motion and Linda Hubbartt seconded. Cathy Weightman-Moore had a correction for the Ombudsman Update: she clarified that the Ombudsman were not entering facilities to meet residents at this time. The sentence should indicate that the facility staff went room to room explaining to residents that Ombudsman were available to help. The minutes were approved unanimously by members with the addition. The minutes will be posted on the Department website following approval by ICOA.

**Ombudsman Update:**

LaRhonda Williams presented on the Long-Term Care and Home Care Ombudsman Programs. Williams shared that purpose of the Ombudsman Program is to 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 Long-Term Care Ombudsman Program visit residents in long-term care facilities to inform residents of their rights, help residents resolve problems with the facility or family members and inform residents and their families of the right to organize resident and family councils. As of 2014, the Home Care Ombudsman (HCO) Program began providing advocacy and assistance outside of the LTC setting. The HCO goal is to 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. The HCO serve adults and persons with disabilities that receive HCBS Waiver services in their home that include Persons with Disabilities (DHS), Persons with HIV or AIDS (DHS), Persons with Brain Injuries (DHS) and Persons who are Elderly (Aging). During the intake process the HCO 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. Williams shared that currently they are not completing any face to face visits, instead they handle the complaint telephonically and follow certain time frames. She also shared information on the Home Care Bill of Rights, the appeal process and information on when to contact the HCO. Dr. Cornwell asked if the HCO receive telehealth problems. Williams shared that in some instances they do. Some older adults are technology savvy (use DUO & Zoom calls) and it just depends on the person. Phyllis Mitzen asked if the calls during the pandemic had decreased. Williams stated that they receive about 5-10 calls a day compared to before they were receiving 50-60 calls and stated that it may be because many services are remaining in place during the pandemic. Williams thanked everyone for the opportunity to present and mentioned that brochures have been shared with the group.  
**(PPT attached)**

**\*2019 OASAC 2-Year Report to GA (2017 & 2018):**

John Eckert shared that the OASAC 2-Year Report has been completed and shared with the members. He asked for a motion to approve the 2-Year Report. David Olsen made the motion and Linda Hubbartt seconded. All members voted in favor, the 2-Year report was approved and will be posted to the website.

**Discuss FY 21 OASAC Priority Areas:**

John Eckert reviewed the thirteen FY21 Priority areas list that was developed and approved by the Executive Committee and asked everyone for feedback. He shared that the work would continue under the Workforce Stabilization Workgroup. The Department will continue to update OASAC on the Subcommittee, a September 8<sup>th</sup> Subcommittee meeting update will be provided today. The Department will also continue engagement with HFS on learning how Managed Care impacts rebalancing; receive expansion updates, and information on the impact of Managed Care in Nursing Facility deflections and admissions. Updates on the Department's Information Technology will continue. OASAC will continue to work with IDoA on additional Waiver services, what has been learned with MFP. Updates on II Care Connections, Re-opening workgroups, Colbert and Williams consent decrees. Receive information on Federal CARE Act funds distribution as it relates to serving seniors. Continue to identify and research best practices for Healthy Aging and Prevention. Receive updates on IDoA's ongoing efforts to utilize data to drive programmatic decisions and improve outcomes. Learn more about and work with the Aging Network on the expansion of Dementia-Friendly Communities. Continue to learn from members and the organizations they work with. Eckert asked if there were any other thoughts on FY21 Priorities. No additions were noted.

**Department Updates:**

Budget/Fiscal

Lora McCurdy shared that the Department has started planning the FY22 budget. They have also begun the process to renew the Waiver, it is renewed every 5 years. The Department has looked at service package to see if there are additional services needed. OASAC feedback is welcome. Data from the new COVID program ESS is being reviewed. Mike Berkes and John Eckert have been tracking expenditures (assistive technology, etc.), these services can make a big impact at a lower cost and it is on the Department's radar.

Legislation

Samantha Brill shared that there was an abbreviated session this year and none of the agency initiatives were able to move forward. Brill also shared that there was a meeting with Co-Chairs and a report is due by January 2021.

Reopening Activities & Workgroups

Lora McCurdy shared the Department has 7 workgroups and have been meeting for one and a half months with providers looking at re-opening with IDPH and HFS guidance, if applicable. HFS has reviewed guidance for ADS, all are on different stages of reopening depending on each group and each group has met on a bi-weekly basis. McCurdy shared that Kelly Richards is working with the Regional Ombudsman. There are also EHRS and AMD workgroups and an ADS workgroup. A total of 18 ADS have re-opened and additional re-opening requests are being reviewed. The APS workgroup is looking at APS service, they have restarted cases and some Priority One cases and some Priority Two Cases effective July 1<sup>st</sup>. The Senior Center workgroup is looking at Senior Centers that are funded by AAA's, they have had 36 senior Center reopen to date. Director Basta shared that there are other Senior Centers not funded by AAA's that have reopened. Director also shared that the Department has given the network 900,000 pieces of PPE. The ADS Preservation grant has also been made available to sustain the network by proving monthly payments to help keep that network going. Cathy Rhodes commented that IDoA has done a wonderful job to help sustain the network. She shared that they have 30,000 U of I students coming in and have been able to pay staff for 6 months. The ADS physical sites are closed but not closed because they have been very active by providing care via Zoom and. ADS providers have been doing phone calls with all participants. Mike Berkes added that ADS nursing staff continue to visit individuals for vitals etc. McCurdy shared that she would like to share with OASAC the various innovative approaches through video, if interested.

### Automated Medication Dispenser (AMD) revisions roll out

Mike Berkes shared that AMD service has been available for some time and it has been slow to start up. Several rules have been amended, the number of medications was reduced from 5 to 1, over the counter medications were added and the Responsible Party requirements were changed to Assisting Party effective July 1<sup>st</sup>.

### Emergency Senior Services (ESS)

Mike Berkes provided an update on ESS grants that have been made available to the CCUs to fund services for seniors to help address concerns identified due to COVID-19. ESS funds are provided through the CCUs and these are to be used as the payer of last resort. ESS went live on March 21<sup>st</sup> through the end of June 2020 and Berkes shared the following data. There were a total of 2,000 expenditures within this period, \$547,000 spent on bulk purchases and \$842,000 for individual purchases. Bulk purchases include groups of 10 or less. A total of 4,300 individuals were helped, 2,684 CCP participants were assisted, 1,700 non-CCP older adults over the age of 60 were assisted and 44 MCO participants. ESS was not intended to assist MCO participants but will follow needs and put fires out with ESS funds on a case by case basis. An average of \$126 per individual were spent but there were 76 individuals that were approved for \$500 and that was the cap. A total of \$11,000 were spent on disinfecting products, \$54,000 on personal hygiene and 3,000 individuals were helped with nutritional needs. Berkes shared that the forms were being adjusted for FY21. A total of 5 million dollars were approved for FY21. There are about 50-60 CCU contracts and all entities should have referral forms. John Eckert added that the \$500 tap cases are reviewed on a case by case basis by him and Berkes. He also shared that Exhibit A of the contract has things listed that do not need pre-approval and asked OASAC CCU members for their feedback. Linda Hubbartt shared that they have many success stories due to ESS fund requests and she is very thankful. Her CCU has been able to coordinate with different agencies, purchase things like wheelchairs, and assist some individuals that wanted to come out of Nursing Homes.

### Veteran Independence Program (VIP)

Sophia Gonzalez shared that there are currently a total of 207 Veteran Independence participants being served in by the 6 VIP programs in the state. These six programs are in PSA 02 Age Guide, PSA 05 East Central, PSA 08 AgeSmart, PSA 09 Midland, PSA 10 Southeastern and PSA 11 Egyptian. For this program the AAA's contract with the State's 5 VA Medical Centers. The VIP program provides home and community-based services to help veterans stay and remain in the community. There is an interest to start up this program again in PSA 04. John Eckert added that there has been issues with expanding this program across the State due to lack of interest by several of the VAMCs.

### Illinois Care Connections

Amy Lulich shared that the Illinois Care Connections is a program that distributes IPADS and tablets to older adults. This program was launched a couple of months ago and there have been several webinars made available regarding this program. It is being coordinated through the Illinois Assistive Technology Program, She will add the link to the FAQ, recordings of the webinar and other information in the chat box. This program seeks to identify older adults that can benefit from a device. These individuals may be missing social interactions. Devices that are provided are theirs to keep and they can also receive internet services for 12 months. Over 200 referrals have been received so far and there is plenty of opportunity for older adults. Susan Real thanked the Department and shared that she is excited to have this available in East Central IL but there have been some challenges. She shared that providers have received a response message, a glitch. It was shared that IT is investigating that issue. Lulich also shared that the allotment is being divided with DRS and DDD, and that DDD has reached its cap. Illinois Care Connections is receiving referrals but not shipping equipment. Kathy Rhodes asked what type of device are being used. Lulich shared that more IPADS than Android tablets. John Eckert added that there are hotspots made available for those individuals that do not have internet. Also, technical assistance is available, and a user guide is available for those that are not tech savvy and some apps are already loaded on the devices. Lulich added that there is a step by step guide available in English, Spanish, and Polish languages. Some of the apps included are COVID Coach, symptom checkers, educational, self-care, mental health and these are all free.

### State Plan

Amy Lulich shared that ACL sent an email prior to COVID, that stated that states could request a waiver and IL requested a waiver with the ability to submit by Federal FY 2021. The Department has shared goals and has a good draft going with the intention to submit the plan by November. Lulich shared that the work on the State Plan has restarted remotely and it is anticipated that the Stakeholder meetings be held in mid-September or mid-

October for feedback on the DRAFT Plan. Lulich stated that the AAA's are also working on their new area plans stakeholder engagement.

#### OASAC CCU Medicaid Enrollment Oversight Subcommittee

John Eckert shared that the Medicaid Uploader was set to go live on September 1<sup>st</sup>, the CCUs can document when the Medical application gets completed, for initial assessments only. The goal is to enroll as many as possible. Lora McCurdy shared that federal Guidance has been received from federal CMS not to terminate anyone. The Department worked with HFS and has advised the CCUs. Amy Lulich added that the CMS "Public Health Emergency" was from March 21 through July 24<sup>th</sup> but was extended to October 31, 2020 for those that receive Medicaid. The Department has sent out guidance beginning May. There was an emphasize that the Department does not want anyone to lose services or have a reduction of services. At the end of the Emergency, providers will have to revisit that. There are very few exceptions to his guidance that include moving out of state or deceased. Eckert stated that Quarterly data will be shared during the next September 9<sup>th</sup> Subcommittee meeting.

#### Census Outreach

Becky Dragoo shared that a PFR was submitted and DHS received additional funding of \$464,900 for the AAA's. A total of \$450,357 has been expended through the end of June. Dragoo shared that final payment should be going out soon. She thanked AAA's for doing a great job during COVID-19. She shared that some of the AAA initiatives included reaching out via radio talks, Facebook, parks, schools, and law enforcement. She shared that in one of the hard to reach areas, Harden (south), the AAA held an event with Dipping Dots, hand sanitizers with Census logo, care bags, masks, adult coloring books and other things. Billboards have also been used to remind everyone to complete the Census. AAA's have partnered with Ombudsman to send the message.

#### **Public Comments, Other Issues & Announcements:**

There were no public comments, other issues or announcements.

#### **Motion to Adjourn:**

John Eckert asked for a motion to adjourn the meeting Linda Hubbartt made a motion and Gustavo Saberbein seconded the motion. The motion to adjourn was approved unanimously. The meeting was adjourned at 2:57 p.m.