

**ILLINOIS COUNCIL ON AGING**

**MEETING MINUTES**

**TUESDAY, SEPTEMBER 20, 2022**

**10:00 a.m. to 12:00 p.m.**

**ILLINOIS COUNCIL ON AGING (ICoA) MEMBERS PRESENT:**

Christine Goleman, Kim Hunt, Julie Bobitt, Nancy Chen, Anthony Frazier, Talat Khan, Britta Larson, Sylvia Mahle, Patricia Marton, Phyllis Mitzen, Robert Mueller, Dylan Olthoff (on behalf of Representative Rita Mayfield)

**ICoA MEMBERS ABSENT:**

Melvin Grimes, Paulette Hamlin, Susan Lawler, Mubarak Mirjat, Susan Vega, Senator Mattie Hunter, Representative Anna Moeller, Senator Brian Stewart, Senator Dave Syverson

**VISITORS/GUESTS:**

Lisa Gregory, Illinois Department of Healthcare and Family Services, Division of Medical Programs Administrator

**ILLINOIS DEPARTMENT ON AGING (IDoA) STAFF:**

Lora McCurdy, Deputy Director  
Selma D'Souza, Chief of Staff  
Rhonda Armstead, General Counsel  
Glenda Corbett, Special Assistant to the Director on Community Engagement & Equity  
Jennifer Hebel, Special Research Assistant, Executive Office  
Mike Berkes, Division Manager of Planning, Research, Development & Training  
Amy Brown, Division Manager of Advocacy & Prevention Services  
Sandra Pastore, Division Manager of Home & Community Services  
Dana Wilkerson, Deputy Division Manager of Advocacy & Prevention  
Lynnette Martin, Deputy Division Manager of Community Relations & Outreach  
Chelsey Peters, Deputy Division Manager of Home & Community Services  
Sandy Leith, Senior Health Insurance Program (SHIP) Director  
Katherine Ostrowski, Legislative Liaison  
Amy Lulich, Senior Policy Advisor  
Emily Howerton, Budget & Finance Manager  
Kelly Richards, State Ombudsman  
Iris Schweier, Public Information Officer  
Bonnie Williams, Administrative Assistant II, Office of General Counsel  
Lisa Zuurbier, Division Manager of Community Relations & Outreach  
Lisa Dupoy, Administrative Assistant, Community Relations & Outreach

## **SUMMARY**

### **OPENING:**

The meeting was called to order by Council Chair Christie Goleman at 10:01 a.m. Roll call was taken, and it was determined that a quorum was established. Lisa Zuurbier shared sad news that ICoA member Robert O'Connor had recently passed away. She noted that he had been an excellent ICoA member who had served since 1984 and done much to advocate on behalf of older adults in Illinois.

### **APPROVAL OF MINUTES:**

Christie asked for a motion to approve the minutes from the June 28, 2022 meeting. Patricia Marton entered a motion. Anthony Frazier seconded the motion; all members voted aye, and the minutes were unanimously approved.

### **PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE) OVERVIEW:**

Lisa Gregory, Division of Medical Programs Administrator for the Illinois Department of Healthcare and Family Services (HFS) provided an overview of Program of All-Inclusive Care for the Elderly (PACE). The vision for PACE is to improve the health and wellness of individuals and their families by tailoring care solutions that meet the unique needs of these individuals within their communities. Improved outcomes, decreased disparities, and sustainability over time are the goals of this program.

PACE is a Medicare program and Medicaid State Plan optional service providing community-based care and services. The PACE program will align with existing HFS healthcare transformation initiatives. Lisa went on to explain the history of the PACE program that began in California in 1970 and added Illinois as a Medicaid State Plan service in 2003. For reasons unrelated to PACE, it was discontinued in 2012/2013 in Illinois.

Senate Bill (SB) 2294/Public Act (P.A.) 102-0043 requires HFS to pursue reimplementing of the PACE program in Illinois. PACE regulations are overseen by the Centers for Medicare and Medicaid Services (CMS) with a required three-way contract between the federal government, state government, and a PACE organization. PACE participants must be 55 years of age or older, live in the service area of a PACE organization, be certified by the state to be eligible for nursing home care, be able to live safely in the community, and be dually eligible for Medicare and Medicaid benefits.

The Illinois Department on Aging's (IDoA) Community Care Units (CCUs) will be a first step in enrolling individuals into the PACE program. In the future, HFS will include PACE information on their website for those interested in locating a CCU in their area to contact for service and

program information. There are currently eight PACE provider organizations located in five regions in Illinois. Actual enrollment will not start until June of 2024.

**WORKFORCE RECRUITMENT & RETENTION SURVEYS:**

Sandy Pastore, IDoA Division Manager of Home & Community Services, gave an update on the workforce recruitment and retention survey results. Staff shortages and turnover, wages, worker safety, and work/life balance were top reasons hindering providers from completing required goals such as annual re-determinations and face-to-face visits, as well as areas to make improvements to help stabilize the workforce. Sandy's survey shows that, overall, 47 percent of workers have left homecare aide employment since 2020 and have taken positions outside of aging and human services largely due to workload expectations, burnout, better pay and benefits, and work-from-home opportunities. All of this is happening at a time when the need for home caregivers is quickly rising throughout the state, as well as nationwide. Strategies that are being used to recruit and retain workforce are higher pay and benefits, flexible schedules, sign on and referral bonuses, attendance incentives, paid mileage, improved training and in-field support. The top differences in recruiting and retaining workforce now as compared to the pre-Covid time period reported are concern for safety, lack of candidates/passion for the profession, caregivers hesitant to go into multiple homes, and not passing or completing required caregiver training. There is an increase in the use of paid family home care aides, which allows family members to apply for, be trained, and paid to be a caregiver for their loved ones. Survey participants state that IDoA assistance with transportation reimbursement, streamlining training, increasing client hours, and higher levels of efficiency with applications and paperwork would be areas of improvement that could help recruit new caregivers and retain the current workforce. Sandy also said that we are beginning to meet with other states to compare *our* programs to *their* programs to see if we can learn from their successes and to implement new processes to aid in our success.

**EQUITY AND RACIAL JUSTICE ACT (ERJA) REPORT:**

Glenda Corbett, IDoA Special Assistant to the Director on Community Engagement and Equity, reported on the Equity and Racial Justice Act (ERJA). Preliminary statistics have been collected pursuant to the provisions of Section 20-12(a) of the Data Governance and Organization to Support Equity and Racial Justice Act (20 ILCS 65/20-1). The Act requires reporting of statistical data on race, ethnicity, age, sex, disability status, sexual orientation, gender identity, and primary or preferred language demographics of agency program participants. IDoA programs that have been identified to participate in this reporting are the Community Care Program, Nutrition Services, and Adult Protective Services. The current phase of this reporting is to research the programming, staffing and training needed to implement the data collection process. Software is being developed or modified allowing necessary changes to program applications, forms, or documents to allow compliance with data collection requirements. Glenda explained that this is a work in process, and we do not currently have all of the answers but are working quickly to implement our data collection process with minimal issues or concerns from our community

partners. The next progress report is due in March 2023 and the annual report is due in July 2023. There was some discussion regarding the method and accuracy of the data collected. It was noted that the current methods of collecting this data, across all participating providers and programs, is not and has not been consistent. That is an observed challenge that is currently being worked on through different venues to combine consistency so that the data is more valuable and aligns with the reporting format that the ERJA requires. As we continue to work on the consistency across government operating agencies, the data collected will become more reflective of the diversity of the populations that we serve.

#### **DEPARTMENT UPDATES:**

IDoA Deputy Director Lora McCurdy shared that Director Basta has been asked to participate in several interviews to promote awareness of Fall Prevention Week, as well as Senior Employment Promotion Week.

Lisa Zuurbier, Division Manager of Community Relations and Outreach provided an overview of the Department's Organizational Chart. She explained the different Divisions of the Department, what their responsibilities are and who works within these areas, as well as staffing changes that have occurred over the last few months.

Mike Berkes, Division Manager of Planning, Research and Development & Training, provided an update on the Federal Medical Assistance Percentage (FMAP) spending plan. Due to Covid, the federal government has given an extra 10 percent to the Medicaid match allowing us to spend an extra \$100 million dollars. Part of these extra funds have been used for workforce retention grants, CCU bonus pay, rate increases, as well as the development and implementation of new services that will allow us to reinvest back into the Medicaid Waiver Program. Mike shared that there were three areas of new services being considered. The first area is the expansion of the Emergency Home Response Service. Technology is being developed to allow the pendants to use GPS (Global Positioning System) so that the service will be mobile and the device will be able to be used away from its base. Additionally, fall detection functionality may be included with this service. Secondly, work is being done in the area of assisted technology or assisted devices such as tablets and hot spots to help reduce social isolation and the negative impact social isolation plays for the elderly. The third area of spending is low cost, high impact home improvements that can be made to improve the safety and functionality for the older adult in their home. Mike told ICoA members to please contact him directly with their thoughts and comments, as they are important to the development of new services.

Sandy Leith, Senior Health Insurance Program (SHIP) Director, provided an update on the upcoming Medicare Open Enrollment and the Inflation Reduction Act. Medicare Open Enrollment starts on October 15. Currently, in the United States, almost 35 million people are enrolled in original Medicare. In addition, almost 30 million more people enrolled in Medicare Advantage plans, which combine original Medicare Parts A, B, and D and is commonly referred to as Medicare Part C. Illinois has over two million people enrolled in Medicare. Enrollment in Medicare Advantage plans have increased rapidly since Covid, greatly due to an abundance of advertising done by insurance companies to promote these plans. They have used famous

people to promote the plans using the “what are you missing out on” tactic of enticing potential applicants to call. SHIP has received many phone calls from people who did not understand the changes they were making, or who they were calling, when they signed up for the Medicare Advantage plans advertised on TV. The federal government is asking IDoA for input on what is happening with these plans and the people who sign up for them and SHIP is providing feedback about their findings. The Medicare & You 2023 books will be coming out any day and will include all 2023 Medicare changes, as well as the new 2023 insurance plans.

Sandy continued with the insulin co-pay provision that is included in the Inflation Reduction Act. It limits the monthly co-pay on insulin to \$35, for those with Medicare Part D coverage, and will not be subject to the plan’s deductible. In addition, beginning July 1, 2023, insulin delivered through an insulin pump will also be at a reduced co-pay of \$35. The Inflation Reduction Act also has a provision for drug companies to rebate drug prices when pricing has risen faster than the rate of inflation. This rebate program will not start until the year 2026 and will, most likely, be on the higher end drug classes, such as biologics, and will continue to be implemented on additional drug classes through the year 2029. Another area that costs are being reduced for is vaccines. An example was given of the shingles vaccine, which is a two-part vaccine, costing Medicare D participants up to \$300 per vaccine. The Inflation Reduction Act eliminates the shingles vaccine cost share completely in 2023. The Inflation Reduction Act also addresses the Part D ‘Catastrophic Coverage’ phase, to eliminate that phase entirely. This means that after reaching the catastrophic out-of-pocket expense level, you would have no more out-of-pocket costs. This will be part of the 2024 revisions. Revisions will continue through 2029, including continued work on drug pricing.

#### **PLAYGROUND EQUIPMENT FOR OLDER ADULTS:**

ICoA member Phyllis Mitzen presented on her recent experience with adult playground equipment. Through a social service exchange between Chicago and Shanghai, China in 2015, Phyllis learned about a “People’s Park” which was not a children’s playground, but a playground for older adults in Shanghai. It contained many pieces of equipment designed for older adults and meant to keep them moving, strong, and fit. Phyllis loved this concept so much that she brought the idea home to her neighborhood in Chicago and to her park district to explore the possibility of re-creating the park here in Illinois. With a Grand Opening held on April 25, 2022, they now have adult exercise equipment installed in Lake Shore Park. Phyllis said that the company they went through to install the all-weather equipment was Greenfields Outdoor Fitness. She states that there are several other parks in the Chicagoland area and other parts of the State that now have adult equipment installed. Phyllis explained that this is great for bringing the community together and proves what a valuable asset it is to collaborate with other states and countries to get ideas on how we can improve our own lives and communities.

#### **CLOSING REMARKS:**

Phyllis Mitzen alerted us to the ASA Chicagoland Roundtable to be held on October 7 with the topic of nursing home reform. A link to the meeting was sent to the ICoA membership.

Lisa Zuurbier reminded all Council members to complete the Diversity, Equity, and Inclusion training on OneNet with the deadline being October 1. Certificates of completion for this mandatory training should be sent to Lisa Dupoy.

**ADJOURNMENT:**

Chair Christie Goleman then thanked everyone and asked for a motion to adjourn the meeting. Julie Bobitt made the motion to adjourn which was seconded by Kim Hunt. All members were in favor and the meeting was adjourned.

The meeting was adjourned at 11:52 a.m.

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Julie Bobitt, Secretary  
Illinois Council on Aging