

**ILLINOIS COUNCIL ON AGING**

**MEETING MINUTES**

**TUESDAY, MARCH 25, 2025**

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

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

Susan Vega, Kim Hunt, Julie Bobitt, Anthony Frazier, Paulette Hamlin, Christina Hardin-Weiss, Talat Khan, Susan Lawler, Sylvia Mahle, Mubarak Mirjat, Phyllis Mitzen, Crystal Odom-McKinney, Sherry Sparks, Meijian Linda Yu, Senator Mattie Hunter represented by Angela McLemore, Senator Laura Fine, Senator David Syverson represented by Cheryl Larson

**ICoA MEMBERS ABSENT:**

Britta Larson, Melvin Grimes, Patricia Marton, Edgar Ramirez, Kate Schwartz, Representative Maura Hirschauer, Representative Rita Mayfield

**VISITORS and GUESTS:**

Marci Phillips, Director of Public Policy and Advocacy for the National Council on Aging

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

Mary Killough, IDoA Acting Director  
Liz Vogt, Chief of Staff  
Rhonda Armstead, General Counsel  
Brian Pastor, Division Manager of Advocacy and Prevention Services  
Derek Hedges, Division Manager of Planning, Research, Development and Training  
Kelly Richards, State Long Term Care Ombudsman  
Jennifer Hebel, Special Research Assistant to the Executive Office  
Iris Huber, Public Information Officer  
Roberta Vojas, Legislative Administrative Assistant  
Yvonne Amponsah, Intern  
Lisa Zuurbier, Division Manager of Community Relations and Outreach  
Lisa Dupoy, Administrative Assistant, Division of Community Relations and Outreach

## **SUMMARY**

### **OPENING:**

The meeting was called to order at 10:05 a.m. by Council Chair Susan Vega. Roll call was taken by Julie Bobitt and it was determined that a quorum was established.

### **APPROVAL OF MINUTES:**

The Chair asked Council members for a motion to approve the minutes from the December 5, 2024 meeting. Julie Bobitt entered a motion and Kim Hunt seconded the motion; all members voted aye, and the minutes were unanimously approved.

### **NATIONAL COUNCIL ON AGING UPDATE:**

Marci Phillips, Director of Public Policy and Advocacy for the National Council on Aging (NCOA), updated the Council on NCOA policy priorities for 2025. Their mission is to improve the lives of older adults, especially those who are struggling. A goal has been set to positively impact the health and economic security of 40 million older adults by 2030. Focus areas are fall prevention, chronic disease, behavioral health, as well as economic well being focused on benefits enrollment, job training and money management. Funding has been put in place for the remainder of Fiscal Year (FY) 2025 and the FY 2026 budget request will soon be in process. Areas of focus for FY26 are the Senior Community Service Employment Program (SCSEP), chronic disease self-management, fall prevention, senior center resources, Low Income Home Energy Assistance Program (LIHEAP), direct care worker strategies, health promotion and disease prevention. NCOA is also working on key legislation known as *health extenders*, that include keeping resources in place for the Medicare Improvement for Patients and Providers Act (MIPPA) low-income beneficiary outreach and enrollment, as well as access to telehealth services and Medicaid Home and Community-Based Services. Another focus is on the reauthorization of the Older Americans Act (OAA) for another five-year period to ensure continued funding for home delivered meals, congregate meals, health promotion, disease prevention, caregiver support, and a whole array of elder rights protections. In addition, increased funding for senior centers is a priority.

NCOA will be defending the Supplemental Nutrition Assistance Program (SNAP), Medicaid, and older adult waiver program funding in the upcoming budget reconciliation. The Social Services Block Grant will also be defended as most adult protective services funding is through this grant, as well as the Community Development Block Grant which supports home delivered meals and senior center operations.

Additional NCOA efforts include supporting the WISH Act (Well-Being Insurance for Seniors to be at Home Act) which will provide a pathway for some form of incremental long-term care financing. Currently, the only federal long-term care support is through Medicaid. NCOA is also defending the Centers for Disease Control and Prevention (CDC) Injury Center, which invests in many things like behavioral health, suicide prevention, opioid use, and fall prevention. NCOA is also looking for opportunities to advance healthy aging and chronic disease management, as well as looking at tax policy to see if there are any opportunities to support older adults and

caregivers. Marci shared information about the *2025 NCOA Age + Action Conference* to be held May 28-30 in Arlington, VA, with hopes that some of the ICoA members may be able to attend. The floor was opened to questions. Council members asked how they could be of assistance. Marci suggested advocating and educating elected officials on the program needs of older adults in Illinois.

#### **CENTERS FOR MEDICARE & MEDICAID ACCESS RULES:**

Liz Vogt, IDoA Chief of Staff, updated the Council on the Centers for Medicare and Medicaid Services (CMS) new Access Rules. The rules apply to Home and Community-Based Services (HCBS) waivers. Illinois has nine HCBS waiver programs. IDoA operates the largest waiver program, the Community Care Program (CCP). Goals of the rules are to increase transparency and accountability, as well as standardizing data sharing and monitoring through reporting from Medicaid funded entities. The goals also include improving holistic access to care, supporting overall health and wellbeing, and creating opportunities to promote active engagement with participants.

CMS is requiring all states to establish a Medicaid Advisory Committee (MAC) to advise on issues related to health, medical services, coverage changes, additional services, policy development, and effective administration of the Medicaid program. Illinois currently has a MAC that is coordinated through the Illinois Department of Healthcare and Family Services (HFS). The Beneficiary Advisory Committee (BAC) is a new entity that CMS is requiring each state to establish. It will be comprised of current and former Medicaid beneficiaries, family members, and caregivers to provide first-hand feedback. CMS has given both Committees the goals of standardizing processes, being transparent to the public, and establishing ease of public access. A third advisory group that CMS is requiring all states to establish is the Interested Parties Advisory Group with members to include direct care workers, beneficiaries, and other interested parties.

New CMS requirements include that IDoA must ensure that the Case Coordination Units (CCUs) are reassessing, on an annual basis, at least 90 percent of participants served by July 2027. The CMS Access Rules also mandate that states establish a grievance process that allows beneficiaries to raise concerns about provider compliance with person-centered planning and HCBS setting requirements. The Council asked questions clarifying many of the CMS requirements, as well as inquired about the outlook of the Access Rules under the new federal Administration.

#### **DIRECTOR'S REPORT:**

Liz Vogt provided highlights of the IDoA FY26 Introduced Budget. The proposed budget increase for IDoA from FY25 to FY26 is 8.7 percent. The total annual IDoA proposed budget is \$2.02 billion. The introduced budget allows for approximately a four percent increase in CCP funding for caseload growth with the projection of an increase in the hours of service provided and new beneficiaries served. Other areas receiving budget increases are Home Delivered Meals (HDMs) and Adult Protective Services.

Director Killough provided an update on the Multi-Sector Plan on Aging (MPA). The MPA is a 10-year blueprint to support healthy aging in Illinois communities, while also addressing issues related to healthcare, housing, transportation, and other social determinants of health. IDoA is required to establish an Inter-Agency Task Force and a Community Advisory Council, as well as hire a MPA Chief. The Task Force is in place and held its first meetings. The Advisory Council has made 24 of the 25 required appointments and its first meeting was held on March 10, 2025. The MPA Chief has not been hired yet, but an MPA Ambassador has been serving since December of 2024 facilitating the group moving forward. Support staff will also be hired and public listening sessions are planned. The first MPA Report is due to the Governor's Office by December 31, 2025. The report is to include a comprehensive strategic plan with measurable outcomes. On December 31, 2025, the Inter-Agency Task Force and the Community Advisory Council will sunset. An MPA Implementation and Status Report is due to the Governor's Office by December 31, 2026.

**NEW BUSINESS:**

ICoA Chair Sue Vega introduced new member Sherry Sparks. Sherry was appointed by the Governor effective December 13, 2024. Sherry introduced herself and spoke of her past work history, volunteerism, and other activities related to serving older adults. The Council also welcomed Derek Hedges as the new IDoA Division Manager of Planning, Research, Development and Training.

There was some discussion regarding strategies to best educate legislators on the importance of IDoA programs and to obtain support for funding services. It was mentioned that using statistical data to show outcomes and sharing stories from constituent benefitting from aging services may help legislators understand the importance of maintaining and fully funding programs.

**ADJOURNMENT:**

A motion to adjourn was asked for by Chair Susan Vega, a motion was made by Sylvia Mahle and seconded by Mubarak Mirjat.

The meeting adjourned at 11:57 a.m.



Julie Bobitt, Secretary

Illinois Council on Aging