



Older Adult Services Advisory Committee

Executive Committee Meeting

Date: April 28, 2008

Location: Illinois Department on Aging, 160 N. LaSalle, Ste. N-700, Chicago;
421 E. Capitol, Springfield; and conference call

ATTENDANCE:

Executive Committee Members:

Stephanie Altman, Health and Disability Advocates

Darby Anderson, Addus HealthCare

Carol Aronson, Shawnee Alliance for Seniors

Kelly Cunningham for Theresa Eagleson, Illinois Department of Healthcare and Family Services

Charles Johnson, Illinois Department on Aging

Flora Johnson, SEIU Local 880

Phyllis Mitzen, citizen member over the age of 60

Susan Real, family caregiver

Department staff:

Michael Gelder

Shelly Ebbert

Jan Cichowlas

Leann Dolan

Guests:

Jeremy Schroeder, SEIU Local 880

Barb Ginder, HFS

Absent:

Bill Bell, Illinois Department of Public Health

Dennis Bozzi, Life Services Network

Pat Comstock, Illinois Health Care Association

Myrtle Klauer, Illinois Council for Long-Term Care

Jonathan Lavin, Age Options, Inc

Dave Vinkler, AARP

Cathy Weightman-Moore, Catholic Charities Long-Term Care Ombudsman Program

SUMMARY:

Welcome and Introduction

Director Johnson opened the meeting and welcomed everyone.

Approval of Minutes

Stephanie Altman moved to approve the minutes from April 7, 2008. Phyllis Mitzen seconded. The minutes were approved as submitted.

Department Updates

Illinois Department of Healthcare and Family Services — Kelly Cunningham reported HFS continues to work on the Money Follows the Person (MFP) demonstration project and submission of the Operational Protocol. The last date to submit is April 30.

The Governor proclaimed this week as Supportive Living Facility (SLF) week. There is a proclamation and events are being planned for later this week including something at the Capitol. The Supportive Living Coalition championed the proclamation and put together what they believe is the world's largest jig saw puzzle. The theme of SLF weeks is the missing piece of the puzzle in terms of affordable housing with services. The puzzle will be on display in the capitol rotunda. More information is available at www.Aalconline.org. There are currently 95 operational facilities with over 7400 operational apartments, with an additional 74 facilities in development.

Illinois Department on Aging — Deputy Gelder reported IDOA has submitted its portions of the Operational Protocol for MFP as requested by HFS. The Department is ready to support any final issues that need to be resolved.

The Department's appropriation will be under consideration by the Senate tomorrow at 4 pm. Members are encouraged to support the Department's budget. It is possible the General Assembly will want to make cuts to the Governor's budget request.

Shelly Ebbert reported on the rapid reintegration pilot project which has championed by the Governor's office with the Office of Management and Budget (OMB), HFS and DHS. The purpose of the pilot is to provide resources at the point of a nursing home pre-screen to allow an older or disabled individual to immediately return to the community if a nursing home placement is not truly necessary.

The Department plans to work with two pilot sites. There is no new money associated with the project but it is an opportunity to work with disability groups and the Enhanced Transition project to quickly get MFP up and running across the state. There is a grant opportunity with federal CMS for the same responsibilities. The Department is considering applying.

Deputy Gelder reported personnel are working to comply with legislation, which included a rate increase for homemakers of \$1.70 and an additional \$1.30 per hour for provider agencies offering health insurance to homemakers and their dependents. The health insurance issue is a challenge as it would apply to only those providers offering insurance. The Governor's office is meeting with the Department and the union to be sure what we implement meets the agreement the Governor's office reached with SEIU. New rates will be published by HFS to assure they are eligible for 50% federal match. Traditionally the General Assembly has approved a budget by May 31. We are preparing for the possibility the budget will not be approved by then.

Old Business

Benchmarks — Shelly Ebbert reported the goal is to establish benchmarks by June at the latest to put together work for all of OASAC and present at the June meeting. The revised benchmarks were distributed prior to the meeting. At the last meeting the department was advised to remove benchmarks concerning CPOE and

CCC. The group also discussed incorporating goals and outcomes and what is coming out of the Outcomes Measurement Committee. The department also met with the interagency group and discussed adding a bed reduction target to the benchmarks.

Deputy Gelder reported the OASA gives us a clear mandate related to nursing home conversion. We should have a benchmark that addresses the idea of trying to achieve savings through closure and conversion of beds and shift resources from unneeded institutional uses to things that would support efforts for home and community based services.

Shelly Ebbert added the actual language in the act talks about Medicaid nursing home cost containment and maximizing Medicare utilization. The interagency group spent a lot of time talking about the baseline numbers and which state agency has data most useful in the development of the benchmark and subsequent monitoring of progress.

The nursing home conversion workgroup was discussed as well as the subgroup looking at that specifically. Phyllis Mitzen reported the workgroup is looking at the issue and would support the idea of including it as a benchmark.

Kelly Cunningham explained at the interagency meeting the various types of beds, (vacant, licensed, etc) and bed days which Medicaid pays which comes from a line item in the appropriation bill. The budget is based on number of bed days which does not tie into the number of beds. It is possible to reduce the number of beds without a savings. We need to agree as to what we are going to look at to create a benchmark. We could also reduce the rate of growth to affect savings if not actual savings. It is also possible to close beds that are empty and not occupied and achieve a savings on paper without affecting any savings.

It was agreed that Kelly Cunningham and Phyllis Mitzen would discuss this idea further. The nursing home conversion workgroup will bring a recommendation back to the executive committee after consulting with HFS.

2009 OASAC report timeline — Shelly Ebbert reported the goal last year was to submit the report to the General Assembly in December. It was actually submitted in January. This year, we would like the report to be an important part of the legislative process and would like it completed in November. To achieve this, the benchmarks need to be finalized in June or July. We have a very short timeframe to put the report together. The workgroups need more specific assignments about what is expected. It is expected that July, August and September will be when we need to put together the plans to achieve the benchmarks. This should not differ significantly from what has been done in the past, it will be targeted differently.

Stephanie Altman requested the Department provide a format for the submission of workgroup reports. The agenda should be narrowed down so we are not listing what has been done and is being asked for.

Deputy Gelder explained the legislature is looking for us to define Long term Care transformation, what it will look like and what it will take to get there. It is easier to identify individual gaps but we need to work towards a comprehensive goal and determine how to measure it. The report will then become more than a laundry list of requests.

New Business

Legislation impacting OASA — Deputy Gelder reported there are several bills that could impact OASA. SB 2199 amends the OASA and requires the Department to submit a plan by no later than September 30, 2009 and includes new language to take into account nursing home concerns. The bill also changes language to add DPH and HFS as responsible for putting the report together with Aging.

HB 5703 repeals Acts that the Department has not been able to implement, or that are obsolete. An amendment was drafted by the CCU Council that codifies CCC and requires the Department to conduct rate studies for case management. The language regarding the rate increase and the requirement to increase rates

every two years is problematic. We have compromised and agreed to look at the data every two years to see if a rate increase is necessary. The Governor's office still has a problem with that language and that it could be implying the possibility of rate increases.

Stephanie Altman added HB 4449 makes IL Cares Rx the same for everyone.

HB 4585 would bring Circuit Breaker eligibility income levels in line with where HFS has established theirs through rule. This is not based on the federal poverty level but is to make sure people do not lose benefits when Social Security increases the COLA each year.

MFP IDOA Service Design — Shelly Ebbert reported there are several differences between the ET program and MFP demonstration project. For the ET program, clients do not have to be Medicaid eligible and there is no minimum nursing home stay requirement. In ET we are able to provide a full service package to meet all of the needs of the client. For MFP only existing waiver services, demonstration project services and supplemental services are allowed. We will put into demonstration services one time costs including moving, first months rent, utilities, home modification and assistive technology. The challenge is that because we are renewing the Medicaid waiver in the next year, there likely will be additional services added. Those services were not included in the operational protocol because we would have had to have definitions, rate, standards, and quality assurance established. For MFP, we will use existing waiver services and one time services.

The new federal rule on case management will also affect MFP. We currently pay for case management as an administrative cost. Once the waiver is approved, case management becomes a service.

The department created an advisory group for the development of MFP that included current ET sites and advocates. They shared case studies of ET clients that went into the development of the operational protocol. HFS also created a statewide group for MFP development that met monthly. We have continued to say we will transition 1,300 people over 4 years with previous listed services. We are looking forward to getting data for existing clients and getting information from the MDS to create a profile. HFS has contracted with the MDS developer to do a profile of successful transitions. Once we get the list of eligible clients we can look at the MDS scores and have a more targeted list.

The Department originally projected MFP to be statewide July 1, 2008; but we have decided to go with the initial 6 ET sites and implement MFP and add additional sites in the second year and go statewide for years 3 and 4.

All states were given the same deadline for the Operational Protocol. The feds have committed to having all states reviewed by the end of June to allow for July 1 start date. The federal project officer assigned to Illinois is planning a site visit in June to determine our readiness.

We are working on an interagency agreement with IHDA to ensure funding for the current ET efforts. We want to be sure clients continue to receive services and CCUs are able to have a dedicated case manager instead of shifting to a fee for service program.

Workgroup Updates

Services Expansion — Carol Aronson reported the workgroup met on April 21 and had a panel presentation and discussion of coordinating care between social and medical care.

Finance — Stephanie Altman had nothing new to report.

Workforce/Caregiver — Susan Real reported the workgroup met on April 21. The Department hosted a conference call to plan the working caregiver conference that will occur at the Governor's Conference in December. It was a productive meeting and workgroup members are making contacts with potential sponsors in Chicago and looking into a keynote speaker. The workgroup is also working on the roundtable discussion and

setting up the format similar to the nutrition summit. The discussion will deal with issues effecting working caregivers and a white paper will be a product of conference. The workgroup hopes to have everything finalized by the June OASAC meeting. The workgroup will invite Shelly Ebbert to speak at the next meeting about working minimum wage.

Coordinated Point of Entry — no report.

Nursing Home Conversion — Phyllis Mitzen suggested the OASAC have a presentation on the Elder Economic Security Initiative. This may also be something the Workforce workgroup should look into it. The report is under final revisions. The conversion workgroup has not met recently. The next meeting is June 3.

Announcements

Phyllis Mitzen reported next Monday, May 5, will be Health and Medicine's second seminal at Loyola University. There will be speakers and small groups to discuss goals.

The meeting adjourned at 4:30 pm.

These minutes were approved on May 19, 2008.