



State of Illinois  
Illinois Department on Aging

## Older Adult Services Advisory Committee Meeting Minutes

**Date: August 21, 2017 2:30 – 4:30 p.m. (Approved November 13, 2017)**

**Locations:**

Illinois Department on Aging, 160 N. LaSalle St., 7<sup>th</sup> floor, Chicago

Illinois Department on Aging (at the DNR bldg.), One Natural Resources Way, Springfield

**IN ATTENDANCE: Committee Members**

Jean Bohnhoff, Director & OASAC Chair– Department on Aging

William Bell – Illinois Health Care Association

Paul Bennett – Next Level Health Partners

Amy S. Brown –CRIS Healthy Aging Center

Theresa Collins – Senior Services Plus Inc.

Cindy Cunningham – Illinois Adult Day Services Association

Kelly Fischer – Journey Care Hospice

Lori Hendren – AARP

Michael Koronkowski – UIC College of Pharmacy

Phyllis Mitzen – Health and Medicine Policy Research Group

Susan Real – Caregiver – East Central Illinois Area Agency on Aging

Gustavo Saberbein – Help at Home LLC

Teva Shirley – Southwestern Illinois Visiting Nurse Association

Louise Starmann – Citizen Member

Cathy Weightman-Moore – Catholic Charities LTC Ombudsman Program

Ancy Zacharia – Home Care Physicians

**Ex-officio Committee Members:**

Kelly Cunningham – Department of Healthcare and Family Services

Gwen Diehl – Department of Veterans Affairs

Jamie Freschi – State Long Term Care Ombudsman

Lyle VanDeventer – Department of Human Services

**Department on Aging staff:**

Rhonda Armstead, Alex Burke, John Eckert, Sophia Gonzalez, Jose Jimenez, Karen Kloppe, Lora McCurdy, and Anna O’Connell

**NOT IN ATTENDANCE: Committee Members**

Sherry Barter Hamlin – River-to-River Residential Corporation

Dr. Thomas Cornwell – HomeCare Physicians

Carla D. Fiessinger -Monaham Law Group

Terri Harkin – SEIU HealthCare – Illinois and Indiana

Kaye Kibler – Willowbrook Memory Support Houses

Susan Hughes – UIC Community Health Sciences School of Public Health

Dave Lowitzki – SEIU HealthCare Illinois and Indiana

Andrew Kretschmar – Alzheimer’s Association, Greater Illinois Chapter

Sara Ratcliffe – Illinois HomeCare and Hospice Council

Patricia O’Dea-Evans – A Silver Connection

Karen Schainker – Senior Services of Central Illinois

Jason Speaks – Leading Age Illinois

**Ex-officio – Committee Members not in attendance:**

Debra Bryars– Department of Public Health  
Megan Spitz – Illinois Housing Development Authority  
Representative – Governor’s office

**Introductions & Call to Order:**

Director Jean Bohnhoff welcomed everyone to the meeting. Members and guests introduced themselves. Director Bohnhoff asked for a motion to call the meeting to order. Mike Koronkowski made a motion to call the meeting to order and Lyle VanDeventer seconded. All members voted in favor.

**Approve minutes of Full OASAC May 22, 2017 Meeting:**

John Eckert asked for a motion to review and approve the minutes from May 22, 2017 meeting. Cathy Weightman-Moore made a motion to approve the meeting minutes, Bill Bell seconded. The minutes were approved unanimously by members without additions or corrections.

**Update on Budget:**

Anna O’Connell, CFO shared that there have been some technical issues and the Department has a backlog on FY17 payments. O’Connell shared that the Department started accepting FY18 billings last week. She also shared that next week the Department will be able to process the new rate increase beginning with the August billings. There were no questions asked by members.

**Update on Legislation:**

Alex Burke, Legislative Liaison provided an overview of pending bills: PA 100-50 allows DHS to provide medications to participants in certified day programs with developmental disabilities and adds language to the MC/DD and ID/IDD Community Care Act that limits possible penalties for violations cited against facilities. The intent of this bill is to make it easier for direct care staff to administer medication in the community. PA 100-58 requires inspections of CILA facilities to be completed at least once every two years. PA 100-184 requires the development of an Advisory Council on Early Identification and Treatment of Mental Health Treatment within DHS. PA 100-079 requires the development of an Intellectual and Developmentally Disability HCBS Task Force. PA 100-217 will permit the Director of the Department of Public Health to waive certain nursing facility requirements. Burke shared that the Legislative Updates will be posted on the Department website shortly.

**Medication Management Demonstration Update:**

John Eckert shared that the Medication Management Demonstration presentation was being postponed as Michele Arling was not able to attend today’s meeting.

**Department Updates:**

**Medicaid Managed Care**

Director Jean Bohnhoff shared that HFS plans to contract with MCOs to expand coverage to all counties of the state. The awards have been announced and will be effective January 1, 2018 for a 4-year term with an option to renew for an additional 4 years. For Option A the awards were given to Blue Cross Blue Shield of IL, Harmony Health Plan, IlliniCare Health Plan, Meridian Health, and Molina Healthcare of IL. For Option B (Cook county only) the award was given to CountyCare Health Plan and Next Level Health Partners. For DCFS Youth, the award was given to IlliniCare Health Plan. Director Bohnhoff shared that the Department is working with HFS to identify how CCUs can continue their involvement with MCOs and statewide expansion. Additional information can be found on the HFS website.

**CCP Task Force & Members**

Alex Burke shared that SB42 created the FY 18 Budget Implementation Act. This included the creation of the Community Care Services Task Force which was charged to review CCP services and consider cost savings strategies. Director Bohnhoff shared that the CCP Task Force will have a total of 19 members; including representatives from each legislative caucus and will meet four times before they provide a report on January 30, 2018. The Department has begun to fill these positions considering members that would be able to assist the Department. The first meeting will be held on Thursday, August 24<sup>th</sup> from 9:00-11:00 a.m. via video

conferencing from the Department's Chicago and Springfield offices. Additional information will be posted on the Department website.

#### Department Priorities and GOMB

Director Bohnhoff shared that she had recently asked all Division managers to develop priority lists of their Divisions' activities with timeframes to report on their progress. This will be used to better track Division activities and will be used to create a Department high priority list to submit to the Governor's Office of Management and Budget (GOMB).

#### Critical Event Reporting

Lora McCurdy shared that the Department was required to have an automated reporting system in place for reporting critical events as a condition of the waiver renewal. McCurdy noted that Mike Berkes has developed policies and has been working with IT staff to re-calibrate the automated reporting system to include the many changes. CCU's and contracted CCP providers are being asked to report critical events to the Department. The data from this system will be shared with HFS and CMS; and will be used to drive the Department's training. McCurdy also shared that the Department is reviewing policy on Intensive Monitoring and Intensive Casework and considering how it is being used. The Department has provided trainings to the aging network on critical event reporting and continues to provide technical assistance. The Department has been getting more reports with this new system compared to the SIPs system that was previously in place. Berkes added that there has been a lot of communication with the CCUs and moving forward the Department will continue to train the network and monitor the data. A question regarding the operational definition of a "critical event" was raised and how different definitions can be confusing. McCurdy shared that previous work created by Steve Lutsky for the Department, lessons learned from MFP, and work from other states had been reviewed and incorporated in development of this initiative. Kelly Cunningham shared that each State has the flexibility to identify what needs to be reported for each waiver using CMS guidelines. McCurdy stated that the Department will look in to national risk categories and share with OASAC to minimize the confusion.

The impact on falls was discussed and how falls deserve more attention. Lora McCurdy added that the Department is putting together a risk mitigation plan and understands that a lot more training is needed. The group discussed not receiving feedback on APS reports unless the case has been substantiated and it was suggested that APS be trained, as this is a change in how APS has been providing feedback. Jose Jimenez shared that the aging network will be held more accountable and that everyone must work together but certain reports and feedback will depend on each waiver. A question was asked regarding how CCUs will be trained on risk mitigation. McCurdy responded that the Department will utilize more standardized template forms that will make the monitoring perspective easier and will put together a risk mitigation plan. Jimenez added that each person will have an individualized plan and everyone working with the individual will be able to see that plan.

#### Automated Medication Dispenser

Lora McCurdy noted that the Department received one comment on the Automated Medication Dispenser (AMD) draft rules and was now moving towards 2nd notice. The Department will be revising its policy and preparing training as this waiver service rolls out.

#### Person-Centered Planning Requirements

Lora McCurdy shared that the Department has been working on incorporating the Person-Centered Planning (PCP) requirements into the Department's CCP brochures and forms. These forms include a new Bill of Rights brochure. The intake forms used by the CCUs are being compared to the initial screen questions to create a uniform intake template for all the CCUs to use. The Department plans to share draft forms and brochures with stakeholders for feedback.

#### Other Issues & Announcements:

Jose Jimenez shared that as of June 30, 2017, the Department has a new CCU covering three Chicago sub-areas, ACM Care. Beginning on August 1<sup>st</sup> the Department transferred 7,000 cases to this new CCU. Jimenez additionally added that as of Friday, a new RFP had been sent out for entities interested in providing CCU services in Chicago sub-area #7.

### **Coordinated Care Alliance & Bridge Model Pilot:**

John Eckert shared that a smaller group from the Bridge Model Workgroup worked together on a proposal for a Bridge Model Pilot Plan. Ranae Alvarez shared that the Bridge Model is a person-centered, evidence-based successful model of transitional care for older adults with complex care needs that will help identify appropriate level of care and follow up post discharge, provide family caregiver support, and reduce hospital readmissions and delay NF placements. Alvarez shared that this pilot project will focus on resources needed to implement the Bridge Model in a variety of care entities by evaluating revenue streams. Alvarez shared that the pilot plan had been submitted to the Department for review and perhaps if approved can later be shared with the advisory group. The plan outlines problems that need to be addressed, goals, a description, resources needed, administration, evaluation and cost benefits analysis. In regards to the resources needed for the project these include existing and new sites and include relationships (IDoA and Illinois Hospital Association to help identify sites); Administration (Organization and leadership support); and Evaluation (having access to claims based information). The group asked what type of support would IDoA provide for the Bridge Model Pilot project. IDoA would support this project by providing monthly support task for and expertise from OASAC members. Another discussion was started regarding who is part of the OASAC Bridge Model Workgroup and the smaller group. Eckert clarified that the smaller group had been asked to prepare the pilot plan and that all OASAC Members had been invited to participate in the workgroup. Funding for this program was discussed and it was clarified that funding is coordinated through the hospitals and that some are willing to pay and others are not. The Bridge Model providers would have to contract with the hospital. Amy Brown shared that there is some data to support the Bridge Model, which used/shared when trying to contract with hospitals. She added that social work lead evidence based models have been found to reduce all cost, 30-day admissions, and support caregivers. Louise Starmann shared that the Bridge Model has come a long way and it is time to pull the pieces together and broaden this model with partnerships. A question regarding the Bridge Model and MCO's was raised (identifying problem hospitals and PCP's). Also, what about the new MCO entities and how these can be targeted; could IDoA force these entities to do this pilot? Mike Koronkowski shared that it may be a good idea to study several participants under this pilot. Phyllis Mitzen asked about the role of HFS with the MCO's since they are the ones that fund MCO's. Kelly Cunningham shared that they could encourage MCO's to participant in the Bridge Model Pilot and invited others to look at their website for the model contract with MCO's. Paul Bennett shared that the RFP did have reference to MCO's working with local CCUs and he welcomes a proposal. He shared that the (MCO provider) receives lists everyday of individuals in the hospital.

### **Motion to Adjourn:**

John Eckert asked for a motion to adjourn the meeting. Susan Real made a motion to adjourn the meeting. Lyle VanDeventer seconded the motion. The motion to adjourn was approved unanimously. The meeting was adjourned at 4:11pm.