



State of Illinois

Illinois Department on Aging  
Director John K. Holton, PH.D.



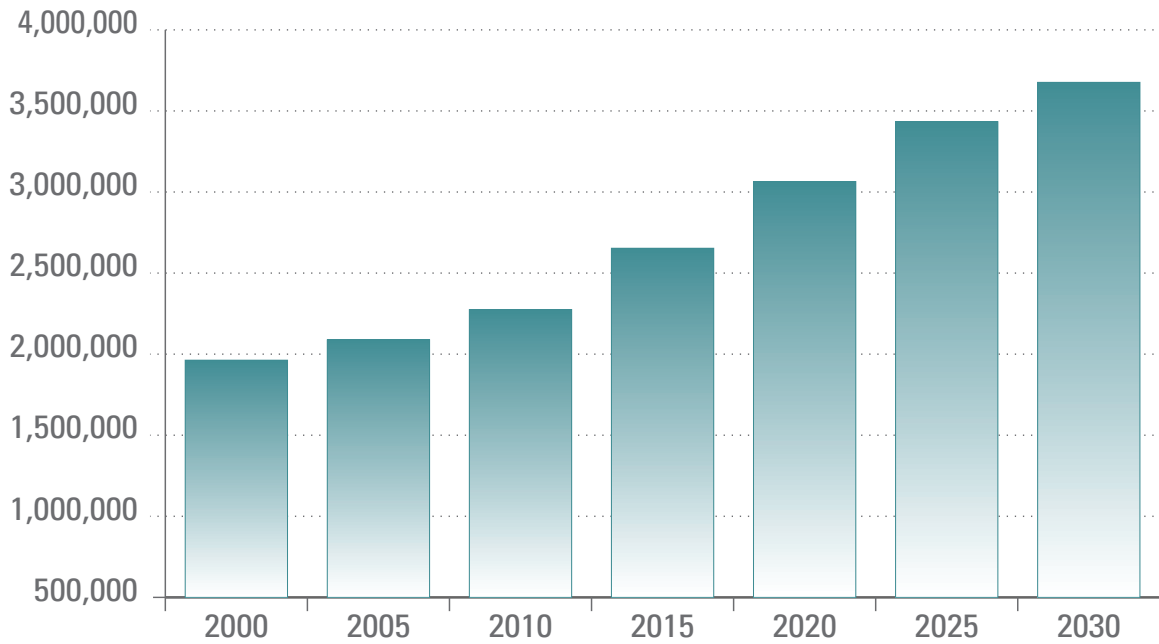
Illinois Department  
on **Aging**

*... promoting independence, dignity and quality of life*

**FY 2011 Annual Report**

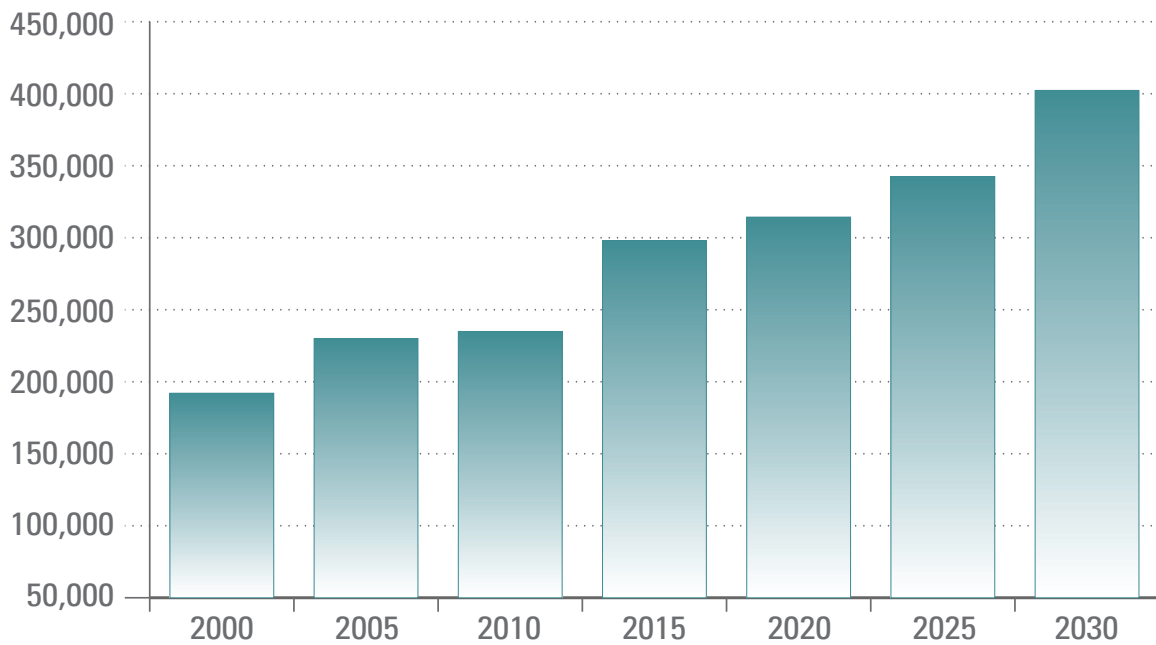
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## 60 + Population in Illinois



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## 85+ Population in Illinois



**Sources:** U.S. Census Bureau and Illinois Department of Commerce & Economic Opportunity (2012)

## A MESSAGE FROM

DIRECTOR JOHN K. HOLTON, PH.D.



Dear Friends,

I am pleased to present the Fiscal Year 2011 Annual Report for the Illinois Department on Aging. The report describes the Department's efforts to administer quality and culturally appropriate programs that help older Illinoisans maintain their independence, dignity and quality of life.

As we face significant fiscal challenges, it is important to recognize that home and community-based services are a cost effective and efficient use of limited State and Federal dollars. The Department is committed to helping older adults avoid or delay costly institutional placements for as long as possible through the provision of home and community-based services.

The demand for alternatives to nursing home care will only continue to increase as the population of older adults grows. In the past decade, Illinois' older population has grown from 1.9 million to approximately 2.3 million representing 17.7 percent of the State's total population. By 2030, the older adult population in Illinois is estimated to increase to 3.6 million and will represent approximately 24 percent of the population. The fast growing segment of the population will be those individuals 85 years of age and older who tend to be in poorer health and have a greater need for services.

As the Illinois population continues to age, we will all be called upon to examine how Illinois residents may live their older years with the dignity they've earned, and the independence we all desire. The Department looks forward to continued collaboration with Governor Quinn, legislators, other State agencies and partners to find ways to improve long term care services and supports for older adults in Illinois.

Sincerely,

A handwritten signature in cursive script that reads "John K. Holton".

John K. Holton

*Director*

Illinois Department



on **Aging**



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**Illinois Department on Aging...**  
promoting independence, dignity and quality of life

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# Overview

## Summary of Agency Operations

The Illinois Department on Aging administers a comprehensive service delivery system to help the State's approximately two million older adults remain independent in their own homes and communities. The Department's Community Care Program (CCP) is designed to assist older adults age 60 and older at risk of nursing home placement by providing services including comprehensive care coordination, adult day, in-home care and emergency home response. The Department also administers the Circuit Breaker Program, which provides property tax relief to eligible older adults and disabled residents. The Circuit Breaker Program is also responsible for facilitating enrollment in the State's pharmaceutical assistance program Illinois Cares Rx, which is administered by the Illinois Department of Healthcare and Family Services. In addition, the Department works in partnership with the 13 Area Agencies on Aging to administer community-based programs funded through the federal Older Americans Act such as home delivered meals, transportation, information and assistance, and caregiver support. The Elder Abuse and Neglect and Long-Term Care Ombudsman are other programs administered by the Department that are vital to the health and well-being of older adults.

## Strategic Priorities

- Promote community-based services and client-centered options to prevent premature institutionalization.
- Encourage older adults to lend their expertise to boost learning, strengthen the workforce and enrich community life.
- Maximize federal and state funds.
- Promote responsive management and innovation.

## Fiscal Year 2011 Budget by Fund

Fund Category	FY 2011 Appropriations (\$ thousands)
General Funds	628,826.5
Other State Funds	9,185.9
Federal Funds	80,162.4
<b>Total</b>	<b>718,174.8</b>

## Fiscal Year 2011 Budget by Major Program

Program	FY 2011 Appropriations (\$ thousands)
Home and Community-Based Care	572,029.4
Elder Rights	10,687.8
Circuit Breaker	32,286.9
Supportive Services	86,125.2
Employment Services	8232.9
Training and Staff Development	150.0
Central Management	8,662.6
<b>Total</b>	<b>718,174.8</b>

## Fiscal Year 2011 Employees by Ethnicity

Ethnicity	FY 2011 employees (percentage)
White	80%
African American	13%
Hispanic	5%
Asian	2%
<b>Total</b>	<b>100%</b>

At the end of FY 2011, the agency had a headcount of 149 employees. The Department achieved parity in all workforce categories in accordance with its FY11 Affirmative Action and Hispanic Employment Plans. The Department will continue to fill vacancies timely, secure and retain a qualified and balanced workforce that is representative of the Affirmative Action categories, pursuant to the State Personnel rules and AFSCME contract provisions.



The **vision** for the Illinois Department on Aging is that, united with local communities and the public and private sector, it will be both a leader and a partner in helping all older Illinoisans and their caregivers achieve an optimum quality of life, assuring independence, dignity, self-sufficiency, health and safety.

The **mission** of the Illinois Department on Aging is to serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage independence, dignity and quality of life.

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# Illinois Department on Aging 2011 Accomplishments

## Accomplishments Fiscal Year 2011

In Fiscal Year 2011, the Department on Aging (IDoA) completed the move of more than 100 employees from Capitol Avenue to the Department of Natural Resources on the Illinois State Fairgrounds. The move was successfully implemented without significant interruption on operations or service delivery.

IDoA achieved quality management objectives as outlined in the Home and Community Based Service (HCBS) Elderly waiver including the implementation of a Participant Outcomes Satisfaction Survey (POSM), customer satisfaction surveys and electronic case notes for intensive casework and monitoring. Training was conducted throughout the state with our Community Care Program (CCP) provider network about the quality management improvements, as well as the new consolidated CCP forms and Clients Forms Manager.

Effective September 1, 2010, CCP service costs became an allowable medical expense toward meeting Medicaid spend down. IDoA worked closely with the Departments of Healthcare and Family Services (HFS) and Human Services (DHS) to implement the new policy, which includes an automated process to place an individual in spend down met status when his or her CCP services costs equal or exceed their monthly Medicaid spend down amount. When a CCP participant's Medicaid spend down is met automatically, the participant receives notification and the medical card is sent to them in the mail.

IDoA developed joint rules with the Department of Financial and Professional Regulation (IDFPR) to implement mandated training for all bank personnel who have customer contact. The rules resulted from Public Act 96-110 which required all current banking personnel trained to recognize potential financial exploitation of older adults and how to report it. During FY 2011, 88 trainings were conducted by elder abuse provider agencies to 1,630 bank personnel.

IDoA, working with the Area Agencies on Aging (AAAs) and Veterans Administration Medical Centers (VAMCs), launched the Veteran Directed Home and

Community Based Service Program (VD-HCBS). In Illinois, the Program is referred to as the Veteran Independence Program (VIP). The U.S. Department of Veterans Affairs purchases services from the AAAs on behalf of eligible Veterans who manage their own flexible budgets, decide for themselves what mix of goods and services best meet their needs, and hire and supervise their own workers. The AAAs facilitate assessment and care planning, arrange fiscal management services, and provide ongoing options counseling and support.

The Senior Community Service Employment Program (SCSEP) continued to exceed the performance goals established by U.S. Department of Labor. By the end of the third quarter, the program had exceeded its annual goals in five of six categories. In addition, staff updated numerous policies and procedures for SCSEP grantees in accordance with revised federal regulations.

IDoA increased Circuit Breaker internet applications by 9 percent, totaling over 300,000 electronic submissions in 2011. The increase provided for more operational efficiency and the ability for claimants to receive their benefits faster.

The Department continued to work with the AAAs and the Senior Health Assistance Program (SHAP) sites on a federal grant that expanded outreach activities and application assistance for Medicare Savings Programs (MSP), the Low Income Subsidy (LIS), and prescription coverage available under Medicare Part D plans. During FY 11, Illinois filed more applications on behalf of older adults and persons with disabilities than any other state in the nation with the value of benefits totaling approximately \$33.9 million.

The Grandparents Raising Grandchildren Program collaborated with the Illinois Department of Children and Family Services (DCFS) to develop a comprehensive curriculum and mandated training of DCFS staff on issues related to older caregivers. IDoA and the AAAs regularly participate in the training of investigators, caseworkers, licensing and post adoption/guardianship staff, presenting information on resources available to assist relatives raising children through various state agencies and private organizations.



Older Americans Act funded programs serve older adults who reside in neighborhoods throughout Illinois. Available programs and services include Information and Assistance, Outreach, Transportation, Legal Assistance, Nutrition services and more. With the support of the Area Agencies on Aging (AAAs) and local service providers, more than 493,300 older adults received services to help them remain independent in their homes and communities during Federal Fiscal Year 2011 (FFY 2011).

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# Older Americans Act Services and Elder Rights

## Access Programs

### Information and Assistance

Before older adults can consider what services best fit their particular needs, they need to know as much as possible about the services available. Beginning with a simple telephone call to one of Illinois' local information and assistance providers, an older adult or their caregiver can receive up-to-date information from trained professional staff on a wide range of available programs and benefits.

In FFY 2011, information and assistance staff at local sites across the state received 830,247 calls from older adults seeking information on a host of issues including home and community-based service options, pharmaceutical assistance and elder rights. In addition, the Department's statewide toll-free information and assistance service, the Senior HelpLine, assisted more than 146,600 during the year.

### Outreach

Outreach services target older adults in Illinois communities who may be isolated or unaware of the programs and services that are available to them. Outreach staff visit with older adults, or their caregivers, to inform them about the various benefits available and to help them access needed assistance. In FFY 2011, 13,350 older adults were offered help through the Aging Network's outreach efforts, thus increasing their chances for receiving beneficial services.

### Transportation

Many older adults cannot drive because of hearing, vision or mobility losses, and health conditions. Transportation is the link that ensures older adults access to the services and opportunities that help them remain independent. Transportation helps older adults access health care, nutritional services, employment opportunities, and friends and families.

Through the Department's transportation services in FFY 2011, older adults made more than 551,820 trips to and from locations in their communities.

### Support for Family Caregivers

The Illinois Family Caregiver Support Program was made possible by the Administration on Aging (AoA) as a result of the 2000 amendments to the federal Older Americans Act (Public Law 106-50). The program calls for all states, working in partnership with the AAAs and local service providers, to offer the following to family caregivers:

- Information about available services;
- Assistance in gaining access to services;
- Individual counseling, organization of support groups, and caregiver training;
- Respite care to enable caregivers to be temporarily relieved from their responsibilities; and
- Supplemental services, on a limited basis, to complement the care provided by caregivers.

Individuals eligible for the program include family caregivers, defined as adult family members or other individuals who provide in-home and community care to older adults, as well as grandparents and other relative caregivers of children no more than 18 years of age. The law requires states to give priority consideration to persons in greatest social and economic need, and older adults providing care and support to persons with mental retardation and related developmental disabilities. In FFY 2011, approximately 64,590 family caregivers and 2,780 Grandparents Raising Grandchildren (GRG) were served by the Illinois Family Caregiver Program.

In State Fiscal Year (SFY) 2011, IDoA issued General Revenue Funding (GRF) to community organizations to deliver supportive services to GRG. Approximately 3,651 GRG were served by this GRF Program.

## Social Service Programs

### Senior Centers

Local senior centers have regular operating hours and are often the community's focal point for older adult services. The senior center provides excellent opportunities for socialization, relaxation and participation in a variety of programs and activities. Senior centers, which services may include congregate meals, transportation and pharmaceutical assistance, enhance the choices available to older adults in the community. IDoA collaborates with more than 371 senior centers that serve older friends and neighbors across Illinois.

### Legal Assistance

Legal assistance providers advocate for and represent older clients in civil cases. Those cases include elder abuse and neglect, financial exploitation, consumer fraud, landlord-tenant relationships, nursing home residents' rights, and conflicts over benefit programs such as Medicare, Medicaid and Social Security. They help with simple estate planning, prepare living wills and durable powers of attorney, and conduct educational programs regarding legal rights. In FFY 2011, Illinois' legal assistance providers contributed 34,580 hours of assistance to older adults.

### Nutrition Services

Congregate meals are served weekdays in over 475 sites throughout the state including senior centers, churches, senior housing facilities and community buildings. The program provides a nutritionally balanced meal and may also include nutrition education. Approximately 87,100 older adults benefited through the program in FFY 2011, enjoying more than 2.6 million meals with their peers.

When older adults cannot leave their homes and cannot personally prepare nutritious meals, home-delivered meals are an available option. In FFY 2011,

40,130 eligible older adults received over 7.3 million home-delivered meals.

Typically, federal and state funded meal programs allow for home-delivered meals on weekdays only. Illinois participates in a public/private partnership program known as MEALS-ON-WHEELS ILLINOIS. The program is designed to raise funds for holiday, weekend and emergency meals, helping to fill the "gaps" left by federal and state funded home-delivered meal programs.

### Employment Program

The Senior Community Service Employment Program (SCSEP) is a federally funded program designed to assist adults age 55 and older in entering or reentering the job market. The program is administered by the Department through the AAAs and two private contractors, which are responsible for implementing it at the local level.

The SCSEP Program fosters and promotes part-time community service opportunities. Anyone who is at least 55 years old, has a limited income (a figure set by the U.S. Department of Labor at not more than 125 percent of the poverty level) and is capable of performing the tasks involved in the proposed community service assignments, is eligible to enroll in the program. SCSEP places enrollees, usually 20 hours a week at minimum wage, in community service or not-for-profit agencies where they can remain productive and independent in their communities while earning modest incomes.

Participants also receive personal and employment-related counseling to enhance their abilities and skills to increase their job marketability. In SFY 2011, more than 830 older adults participated in the program. Approximately 46 percent of participants that exited the program entered unsubsidized employment.

## Elder Rights Programs

### Elder Abuse and Neglect Program

IDoA administers the statewide Elder Abuse and Neglect Program to respond to reports of alleged mistreatment of older adults 60 years of age or older who live in the community. The Elder Abuse Program is locally coordinated through 41 provider agencies that conduct investigations and work with older adults in resolving abusive situations.

During FY 11, there were 10,949 reports of elder abuse received by the program. Financial exploitation was reported in more than half of the cases (57 percent) and is highly associated with emotional abuse, which represented 44 percent of the reports. The other types of abuse reported included passive neglect, physical abuse, willful deprivation, confinement and sexual abuse. In some cases, more than one type of abuse was reported.

Social workers or medical personnel were responsible for reporting one in five cases of elder abuse. Family members reported 20 percent of cases, while victims self-reported in 9 percent of all cases. Older adults often need others to report for them in cases of neglect and willful deprivation. Self-reports were most likely to occur in physical, emotional and financial exploitation cases.

Elder abuse occurs primarily within a family. Three-fourths of the abusers were the spouse (11 percent), child (42 percent) or other relative (23 percent) of the

victim. The abusers were slightly more likely to be male as female, even though the majority of caregivers to older adults are women.

In FY 11 alleged victims were older adults between 60 and more than 100 years of age, with the average age of 77 years old. Approximately 67 percent of the victims were female, although females represent only 59 percent of the general population over age 60. With regard to race, 73 percent of elder abuse victims were white, 20 percent were black and 4 percent were Hispanic.

### Long-Term Care Ombudsman Program

As mandated by the Federal Older Americans Act and the Illinois Act on Aging, the Long-Term Care Ombudsman Program advocates for residents of licensed long-term care facilities. Quality resident care and residents' rights are top priorities for the Department, AAAs and the 16 Regional Long-Term Care Ombudsman Programs, which include 41 full-time paid Ombudsmen and 157 volunteer Ombudsmen.

In FY11, the Ombudsman Program responded to 6,936 complaints. The majority of the cases (76 percent) were fully or partially resolved to the satisfaction of the resident involved. In addition, the Ombudsman Program handled 17,651 consultations with nursing home residents or their family members and made 15,327 facility visits. Despite no additional funding, the Ombudsman Program continued its push to be more visible and available to residents in Illinois long-term care facilities.



The Community Care Program (CCP), established in 1979 by Public Act 81-202, provides in-home and community-based care to older adults who are at risk of nursing home placement. In FY11, CCP served approximately 68,100 frail older adults each month, thereby successfully diverting or delaying those individuals from nursing home placement. The average monthly caseload increased by approximately 6,600 participants, or 11 percent from the previous year.

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# Community Care Program

To qualify for CCP, an older adult must have \$17,500 or less in assets (home, car, and household furnishings are excluded). The CCP asset level requirement has increased twice since the inception of the program going from \$10,000 to \$12,500 on January 1, 2004, and to the current level on July 1, 2006, allowing more eligible older adults to receive in-home and community-based services. In order to participate in CCP, a participant must also be 60 years of age or older, a U.S. citizen or legal alien, apply for and enroll in medical benefits (Medicaid), and have an assessed need for long-term care (scoring 29 points or higher on the "Determination of Need" assessment instrument).

The Department takes a holistic and participant-focused view to providing older adults with the services they need to stay at home and in their communities. CCP services include the following:

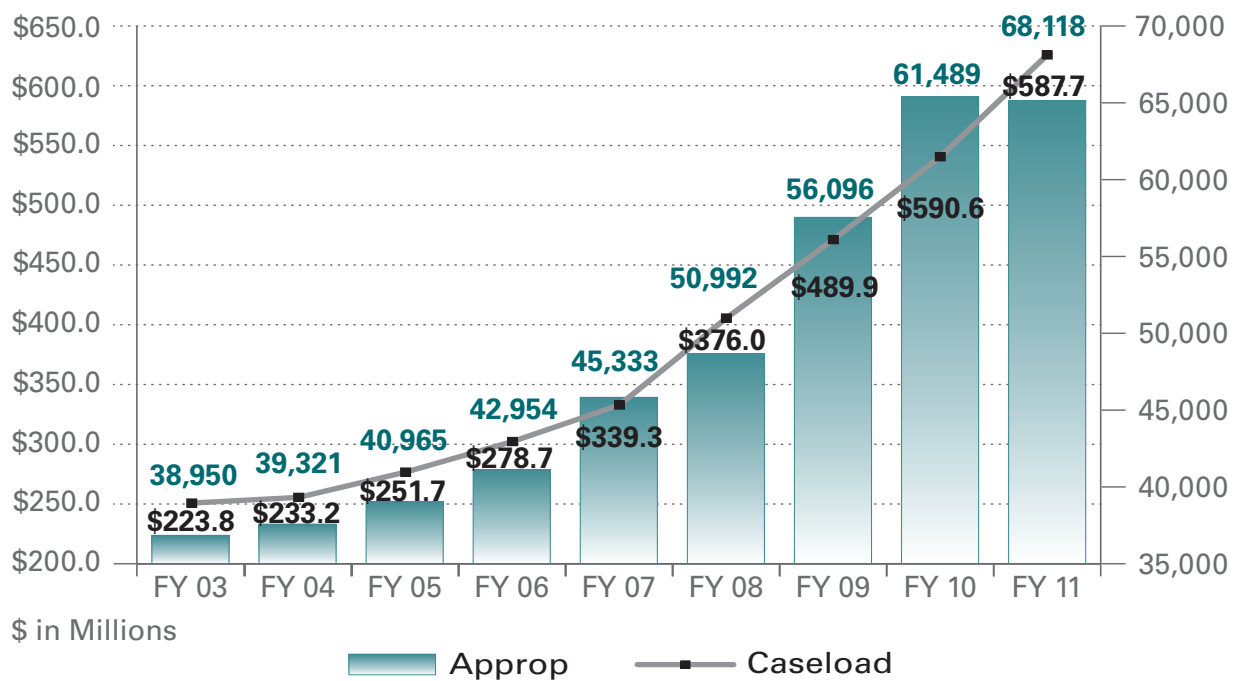
## Comprehensive Care Coordination

The foundation of the CCP is Comprehensive Care Coordination (CCC) provided by a statewide network of community-based Care Coordination Units (CCUs). Implemented in FY07, CCC is a holistic approach to assessing the needs of older adults to help them access supportive services so they can live safely and securely in the community. This system provides coordination among CCP services and federal Older Americans Act Title III funded services, as well as local service options. In FY11, 42,376 older adults received initial comprehensive assessments, an increase of 785 initial assessments or almost 2 percent from the previous year.

## In-Home Service

Homecare aides provide assistance with household tasks that include cleaning, shopping, and preparing meals. They also assist participants with personal

### CCP Appropriation and Caseload History



care such as bathing, grooming, dressing, feeding and following special diets. In FY11, IDoA contracted with 102 homecare agencies to meet the needs of an average monthly caseload of approximately 60,400 older adults who received in-home service. This was an increase of approximately 7,500 persons or 14 percent from the previous year.

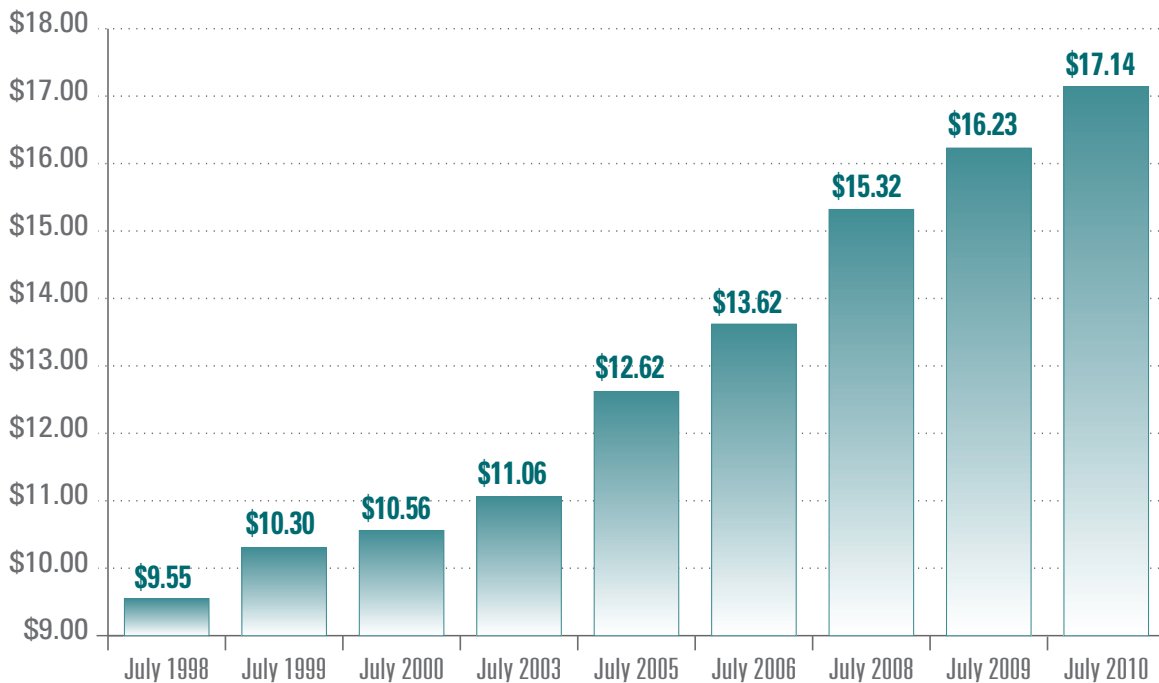
The reimbursement rate for homecare provider agencies has increased dramatically throughout the years, from \$10.56 per hour 10 years ago to \$17.14 per hour in FY10. The reimbursement rate remained unchanged in FY11. The General Assembly also enacted legislation that authorized direct care workers to begin receiving reimbursement in FY09 for health insurance for participating providers. Participating providers in the self-insurance plan receive \$1.61 per unit hour of delivered in-home service in FY11.

### Adult Day Services

Adult day service is designed especially for older adults who want to remain in the community but who cannot be home alone during the day due to physical, social or cognitive impairments. Adult day service also provides respite for family caregivers and socialization for isolated adults. Services offered in adult day service centers include health monitoring, medication supervision, personal care and therapeutic activities. Nutritious lunches and snacks are served and special diets are provided.

During FY11, 84 adult day service sites provided community-based services to approximately 3,100 participants per month, which was an increase of 167 persons or approximately 6 percent from the prior year. Several of these sites specialize in providing care to participants diagnosed with Alzheimer’s disease and related disorders while others serve specific ethnic populations.

### Hourly Rate History





## Emergency Home Response Service

Emergency Home Response Service, implemented in October 2006, allows older adults to summon emergency assistance from a device worn around their neck 24-hours-a-day, 7-days-a-week from their own homes. This service provides older adults and their caregivers with peace of mind and reduces the need for premature nursing home placement. In FY11, approximately 27,500 participants utilized the service, which was an increase of approximately 2,700 individuals or 11 percent from the previous year.

## Choices for Care

The Department on Aging provides universal nursing home pre-admission screening for all persons age 60 and older seeking admission to a nursing facility. In accordance with state law, all persons seeking admission to nursing facilities must be informed of all available care options prior to admission, regardless of the individual's income, assets or funding source.

Care Coordinators from CCUs conduct the screenings primarily in hospitals immediately prior to patient discharge. The screening process gives older adults and their families the opportunity to ask questions and to understand community-based services, as well as institutional options for continuing care. In instances of short-term nursing facility placement for purposes of rehabilitation or convalescence, care coordinators may conduct follow-up screenings in the nursing facilities to aid transition back into the community when possible. In FY11, approximately 103,000 prescreening visits were conducted with persons requesting care or considering placement in a long-term care facility.

## Demonstration Projects

The *My Choices Cash & Counseling Demonstration Program* gives participants the flexibility to develop a monthly budget within program guidelines, decide

which services they receive, how and when the care will be provided, and select the individuals who provide the services. Participants are the employers of their personal care workers and responsible for hiring, training, supervising and if necessary, firing their workers. This demonstration project began in FY08 and is offered in Bond, Clinton, Kankakee, Macon, Madison, Marshall, Monroe, Randolph, Stark, St. Clair, Tazewell, Washington, and Woodford counties. In FY11, Cash & Counseling served an average of 164 participants per month.

The *Senior Companion Demonstration Program* started in FY89. Senior Companion agencies provide an array of assistive, supportive companionship services to frail older adults by utilizing companions, age 60 or older, who have limited incomes. The focus of these services is to provide economic, psychological and social benefits to companions while meeting the needs of older adults and offering respite to family caregivers. Senior companion services are available in Alexander, Cook, Macon, Madison, Pulaski, St. Clair, Union, and Will counties. In FY11, the senior companion program served an average monthly caseload of 104 participants.

Recognizing the diverse needs of seniors, the Department awarded \$2 million for *Flexible Senior Services* in FY11. Grant funds were distributed to the AAAs and authorized in conjunction with care coordinators for participants with needs outside the normal spectrum of services available through CCP. Examples of Flexible Senior Services include respite care, home modifications, assistive devices and medication management. These types of additional services allow more seniors to remain independent and living at home at a cost effective level under CCP. In FY11, more than 2,500 participants were served.

The Department on Aging's *Money Follows the Person* initiative is part of a statewide, multi-department demonstration program. This voluntary program is for

individuals 60 years of age and older who have resided in nursing facilities for a minimum of 90 days (excluding any days paid by Medicare) and have received Medicaid benefits for a minimum of one day prior to transition. The goals of the program are to assist individuals who wish to transition out of a nursing facility to the community by accessing CCP home and community-based waiver services, as well as three new one-time services to assist in their transition. The Department began its participation in this project in FY09. During FY11, the Department conducted 1,522 face-to-face interviews with nursing facility residents and transitioned 75 participants from nursing facilities to the community, including supportive living facilities.

In FY10, the Department received a 3-year grant from AoA to enhance and expand the *Aging and Disability Resource Centers* (ADRCs) in Illinois. IDoA first received federal funding to initiate ADRCs in 2004. With the new grant, the number of pilots has increased from 3 to 7 of the Planning and Service Areas (PSAs). Pilot sites include Rockford (PSA 1); Kankakee (PSA 2); Rock Island (PSA 3); Peoria (PSA 4); Bloomington/Decatur (PSA 5); Belleville (PSA 8); and Oak Park (PSA 13). The ADRCs serve older adults, persons with disabilities, and family caregivers with long-term care needs by streamlining access to programs and benefits.

Situated in several urban and rural areas of the state, the *Comprehensive Care in Residential Settings* demonstration program combines housing, personal and health related services for those who need assistance with activities of daily living. In FY11, the CCRS demonstration program had an average monthly caseload of approximately 223 seniors. This initiative promotes independence and provides a more cost-effective housing option with supportive services as an alternative to nursing home care. All facilities involved in the program are licensed under the Assisted Living and Shared Housing Act, Public Act 91-0656.

Project sites include Murphysboro, Deerfield, Rockford, Ullin, Herrin, and Olney.

The *Managed Community Care* demonstration project is designed to provide a broader range of services more efficiently and cost effectively. The Department's project partner, CJE SeniorLife, is paid a capitated monthly fee for each participant served based upon the participant's level of need, rather than the more traditional fee-for-service model. In addition to in-home care and adult day services, available services for eligible participants include home-delivered meals, transportation, medication management, elder rights advocacy, money management and home repair. During FY11, the program served approximately 493 participants per month.

The *Illinois Volunteer Money Management Program* which started in 1993 is a partnership between the Department, AARP and the Illinois Council of CCUs. The program offers assistance to participants who have difficulty budgeting, paying routine bills and keeping track of their personal financial matters. The program's focus is to promote and prolong independent living for individuals who are at risk of losing their independence due to the inability to manage their financial affairs. Money management is primarily used by CCP participants, but is also available under the Department's elder abuse prevention and intervention program. In FY11, the Illinois Volunteer Money Management program served 656 participants per month.

The Department received a federal grant in FY08 to develop a program that would divert older adults from nursing home placement under the *Community Living Program*. This initiative utilizes a consumer directed program model to provide older adults and/or their family caregivers financial assistance to support a variety of flexible services designed to assist them in their own homes. By June 30, 2011, the program served 288 participants. Funding for this program

paid for direct services to participants, technical assistance support for the My Choices Cash & Counseling program, and the Illinois' Determination of Need (DON) Service Cost Maximum Study.

The Department continued its coordination with the AAAs on the *Veterans Independence Program* (VIP). The Program is an initiative of AoA and the U.S. Department of Veterans Affairs that serves veterans of all ages who are at risk of nursing home placement. The goal of the VIP is to provide increased flexibility and access to home and community-based services that enable a veteran to remain in the community. Eligible

veterans manage their own flexible budgets, decide for themselves what mix of goods and services best meet their needs, and hire and supervise their own workers. The AAAs facilitate assessment and care planning, arrange fiscal management services, and provide ongoing options counseling and support. To qualify for VIP, a veteran must first be enrolled to receive primary care at one of the five Illinois Veterans Administration Medical Centers (VAMCs). Enrollment in this program is determined by funding available at the local VAMCs. During FY 11 there were 74 veterans served, 65 of them were 60 or older.



On July 1, 2004, the Circuit Breaker Pharmaceutical Assistance program transferred to IDoA from the Department of Revenue. Pursuant to Executive Order 2004-3, the Department assumed responsibility for functions of the program including the application and enrollment process, as well as administering the customer service toll-free Circuit Breaker line.

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## Circuit Breaker and Illinois Cares Rx

The Circuit Breaker program was initiated in 1972 by the Illinois Department of Revenue (Public Act 83-1531) to provide property tax relief to low-income senior and disabled residents. The Circuit Breaker program expanded in 1985 to include Pharmaceutical Assistance as an optional benefit to give low-income seniors and disabled residents access to essential medication. In 1992, the Circuit Breaker program was further expanded to include one reduced license plate sticker annually per qualifying household. Additionally, in 2008 the Persons with Disabilities Ride Free transit card was added to the program.

In 2005, pursuant to Public Act 094-0086, Circuit Breaker Pharmaceutical Assistance joined with the Department of Healthcare and Family Services' (HFS) SeniorCare program to form Illinois Cares Rx. The new, combined program was designed to "wrap-around" the Medicare Part D prescription drug benefit that went into effect January 1, 2006.

Illinois Cares Rx consists of two categories – Illinois Cares Rx Basic (formerly Circuit Breaker Pharmaceutical Assistance) and Illinois Cares Rx Plus (formerly SeniorCare). The property tax grant, the Persons with Disabilities Ride Free transit card, and the license plate discount continue to be benefits of the Circuit Breaker program as well.

If an individual is eligible for Medicare, Illinois Cares Rx helps pay the monthly premium, annual deductible, and cost sharing if enrolled in a coordinating Medicare Part D prescription drug plan. If participants are not eligible for Medicare, they can still receive coverage under both the Illinois Cares Rx Basic and Illinois Cares Rx Plus plans.

In claim year 2010 (calendar year 2011), to participate in Illinois Cares Rx Basic, an individual must have been at least 65 years of age or disabled with a 2010 household income of \$26,917 for a single person and \$36,212

for a married couple. Illinois Cares Rx Basic covers medications to treat the following conditions: Alzheimer's disease, arthritis, cancer, diabetes, glaucoma, heart and blood pressure problems, HIV/AIDS (if eligible for Medicare), lung disease and smoking related illnesses, multiple sclerosis, osteoporosis and Parkinson's disease.

Illinois Cares Rx Plus was available to citizens or qualified non-citizens in claim year 2010 (calendar year 2011) who were at least 65 years of age and met income eligibility requirements, which included a 2010 annual income of \$27,610 for a single person and \$36,635 for a married couple. Illinois Cares Rx Plus covers all classes of medically necessary prescription drugs.

Individuals file just one application (Form IL-1363) to receive the pharmaceutical benefits available through Illinois Cares Rx, as well as a Circuit Breaker grant to reduce the property tax burden, a Person with Disabilities Ride Free transit card, if requested, and a \$75 license plate discount from the Secretary of State's office. However, the income requirements for the benefits differ.

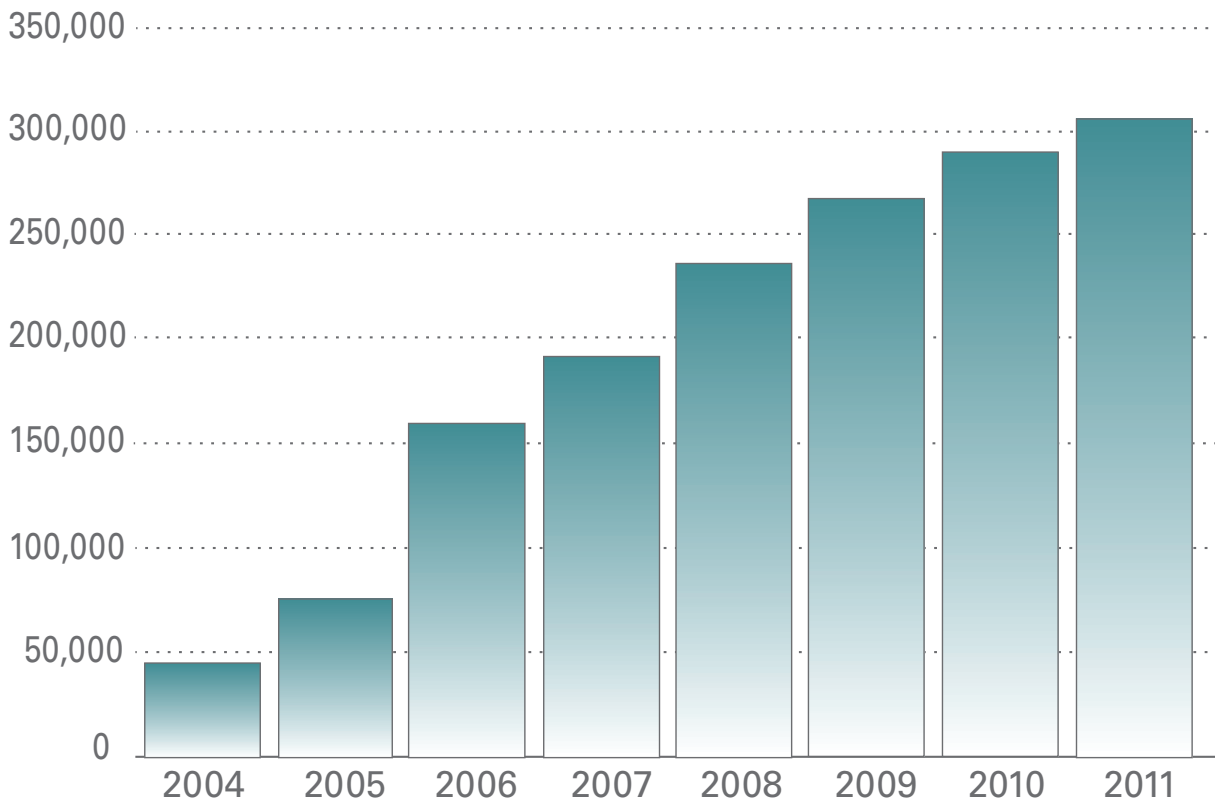
In claim year 2010, the income limit for the Circuit Breaker grant, Ride Free transit cards, and license plate discount was \$27,610 for a single person household and \$36,635 for a married couple. The amount of property tax grant is figured by a formula using the amount of property or mobile home tax, rent or nursing home charges paid and an individual's total income.

In claim year 2010 (calendar year 2011), the number of Circuit Breaker and Illinois Cares Rx applications (Form IL-1363) filed with the Department on Aging was 413,520, with 367,793 of those applications approved for at least one of the four benefits. The total number of applicants enrolled in Illinois Cares Rx was 258,411. The number of applicants eligible for Illinois Cares Rx Basic was 76,032 and the number of applicants eligible for Illinois Cares Rx Plus was 182,379.

The number of Circuit Breaker and Illinois Cares Rx applications filed online continues to increase each year. Last year, the Department received a total of 413,520 applications; 314,460 were filed over the Internet and

99,060 were paper applications. Internet applications are received with fewer errors and can be processed several weeks faster than paper-based applications.

### On-line Application History





**T**he *Foster Grandparents Program* provides opportunities for senior volunteers to assist young people with special needs. Many volunteers offer support to children who have been abused and neglected. Volunteers help with homework, mentor troubled teenagers and young mothers, and work with special needs children in hospitals. In FY11, 811 Foster Grandparents Program volunteers provided over 845,960 hours of services through 11 projects located throughout the state.

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## Community Relations and Special Programs

### Senior HelpLine

The Department's statewide toll-free Senior HelpLine, 1-800-252-8966, 1-888-206-1327 (TTY) provides information in English and Spanish and links older adults and their caregivers to local services. Professionally trained staff assess participant needs, send literature and provide written referrals on a range of issues including pharmaceutical assistance, elder rights and home and community-based service options.

In addition, the Senior HelpLine staff answer incoming calls on the dedicated Elder Abuse Hotline (866-800-1409). The staff respond to reports of suspected abuse, neglect and exploitation of older adults and relay the information to the appropriate elder abuse provider agencies for investigation and follow-up.

In FY11, the Senior HelpLine responded to 146,655 calls. The majority of the calls received, almost 80 percent, were regarding the Circuit Breaker and Illinois Cares Rx programs, which includes prescription coverage, grants, Persons with Disabilities Ride Free and license plate discounts. Elder Rights including protective and legal services, as well as elder abuse intake was approximately six percent of the total calls received. Calls regarding the Community Care Program (CCP) also accounted for six percent, while calls regarding Older Americans Act Services accounted for four percent of the calls. The remainder of the calls received was from individuals seeking assistance with services such as assistive technology, housing, health, emergency, financial and insurance. Additionally, the number of elder abuse intakes conducted by the Senior HelpLine increased a significant 13 percent from FY10 to FY11.

### Illinois State Fair

Since 1990, the Department has operated a senior building at the annual Illinois State Fair in Springfield. The air-conditioned Illinois Building, which is near the

main gate on the state fairgrounds, is open daily from 9 a.m. to 5 p.m. The senior building provides older adults with an opportunity to get out of the heat, while taking advantage of informative exhibits, free health screenings and entertaining performances.

The Department staffs the building and manages all activities. This includes arranging and coordinating entertainment and special events, as well as working with the many exhibitors. State agencies and private organizations are available to provide information to attendees about their programs and services.

In FY11, the State Fair ran from August 13-22. On Senior Day, held August 16, daily admission was free for people 60 years of age and older. Senior Day highlights included the Not So Newlywed Game, sponsored by IDoA, Central Illinois Senior Celebration and the Springfield Park District. Health screenings were provided by St. John's Hospital, Blue Cross and Blue Shield of Illinois, and the Illinois Lion's Club to check for conditions such as osteoporosis, diabetes, high blood pressure and cholesterol.

### Awards and Recognition Programs

The Department and the Aging Network regularly recognize individuals and organizations that have made outstanding contributions to their communities. Annual awards programs include the Senior Illinoisans Hall of Fame and the Governor's Award for Unique Achievement. In addition, at the annual Governor's Conference on Aging a number of awards are presented by professional associations to individuals and groups whose accomplishments merit recognition.

Perhaps the most prestigious of the awards is the Senior Illinoisans Hall of Fame, initiated by the General Assembly in 1994, to commemorate the achievements and contributions of citizens age 65 or older. Inductees, recognized for their contributions in



four areas including community services, education, the work force and graphic/performance arts, are selected each year through a statewide nomination and judging process. In FY11, four new members were recognized in October during a special ceremony held at the Governor's Mansion.

### Training and Education

The Department on Aging is a leader in providing educational opportunities to professionals from aging services agencies. In FY11, approximately 4,000 individuals participated in Department sponsored conferences and workshops. Training focused on issues such as caregiving, prescription assistance programs, mental health, Alzheimer's disease and elder rights. Much of the training offered by the Department is made available to social workers, nursing home administrators and other professionals in the aging field for continuing education credits.

The Department's biggest and most comprehensive training event is the annual Governor's Conference on Aging held each December in Chicago. It continues to be one of the largest statewide meetings of professionals who work in the aging field. In FY11, the event brought together more than 500 people focused on the issues affecting senior Illinoisans.

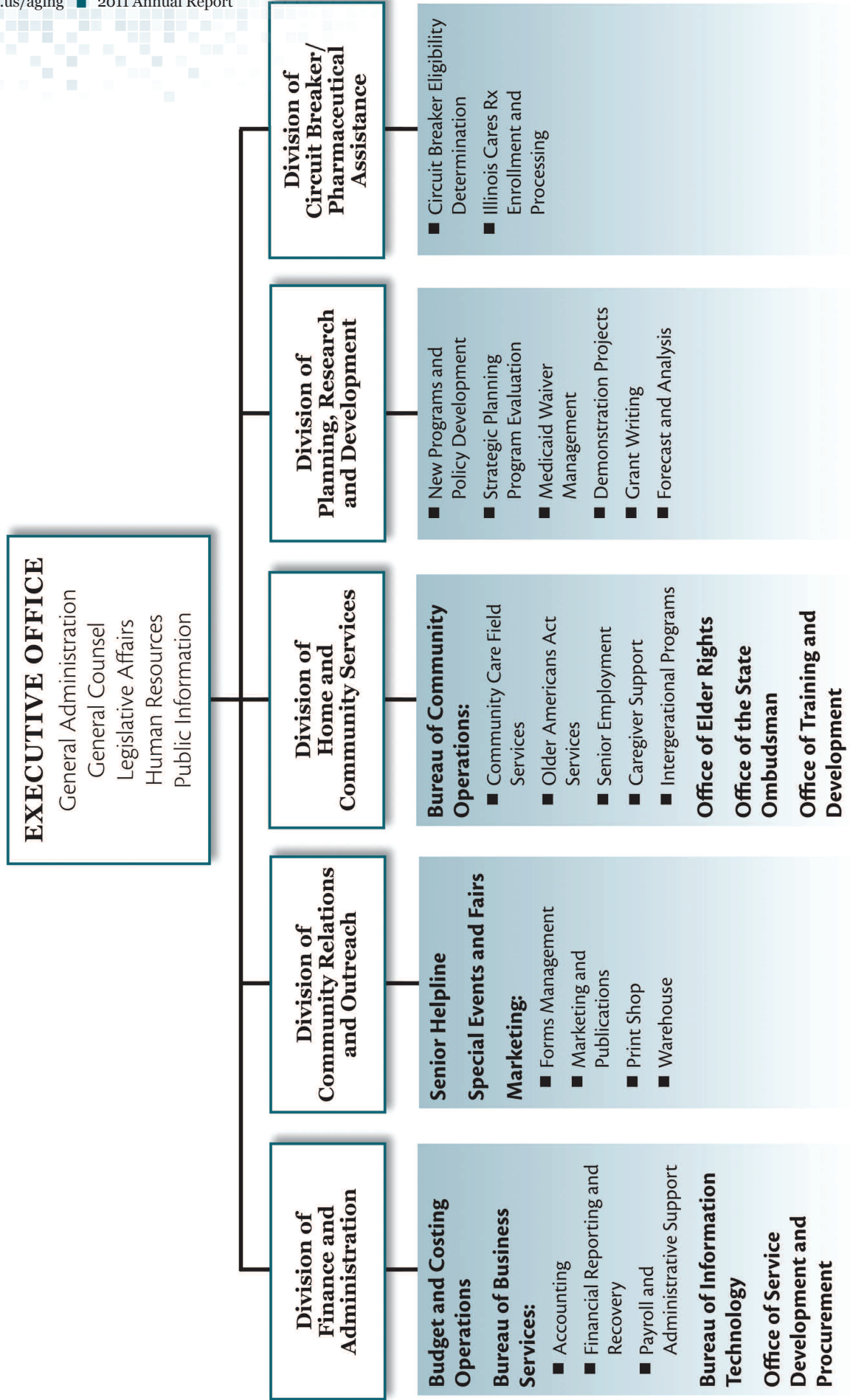
### Senior Corps

Senior Corps is a program of the Corporation for National and Community Service which connects adults age 55 and older with volunteer opportunities. In Illinois, Senior Corps partners with the Illinois Department on Aging to fund the Foster Grandparents Program and the Retired and Senior Volunteer Program.


The *Foster Grandparents Program* provides opportunities for senior volunteers to assist young people with special needs. Many volunteers offer support to children who have been abused and neglected. Volunteers help with homework, mentor troubled teenagers and young mothers, and work with special needs children in hospitals. In FY11, 811 Foster Grandparents Program volunteers provided over 845,960 hours of services through 11 projects located throughout the state.

*Retired and Senior Volunteer Programs* throughout Illinois provide a variety of volunteer opportunities to seniors. In FY 11, over 14,550 senior volunteers provided more than 2.6 million hours of volunteer service to agencies, businesses and organizations in over 23 sites in Illinois. Volunteers contributed hundreds of hours of service to schools, libraries, Head Start, adult literacy and after school programs. RSVP members include skilled carpenters, data entry workers, counselors, nutrition site aides, and income tax aides among others.

# Organizational Structure





Illinois Department  
 on **Aging**  
**FY2011** Annual Report

One Natural Resources Way, #100, Springfield, Illinois 62702-1271  
Senior HelpLine: 1-800-252-8966, 1-888-206-1327 (TTY)

Download this publication at [www.state.il.us/aging](http://www.state.il.us/aging) in the “News and Publications” section.

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in programs or activities in compliance with appropriate State and Federal statutes. If you feel you have been discriminated against, call the Senior HelpLine at 1-800-252-8966, 1-888-206-1327 (TTY).