

### FY 2007 Annual Report



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





#### ROD R. BLAGOJEVICH GOVERNOR



#### To the People of Illinois:

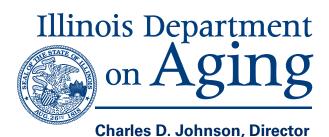
Since this Administration began, we have demonstrated our commitment to helping those Illinois residents who most need our assistance. Many of those residents are older adults who are challenged to manage on limited incomes, and in the face of rising costs and physical challenges.

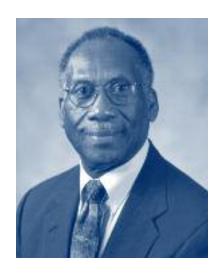
The State of Illinois, through its agencies and on behalf of its people, is dedicated to re-balancing long-term care in Illinois and helping older adults by delivering innovative programs and services. As evidenced by the Department on Aging's Fiscal Year 2007 Annual Report, much progress has been made to support older adults in their homes and communities, as well as helping them access the important benefits to which they are entitled.

The accomplishments noted here are evidence that state government in Illinois works. It works for both clients of service and taxpayers who fund it, when state agencies come together in commitment to the people they serve. I am proud to lead this effort to improve the quality of life for senior Illinoisans. Although there is still much work to do ahead of us, I am proud of what we have been able to achieve in the recent years.

Sincerely,

Rod R. Blagojevich Governor of Illinois





#### Dear Friends:

I am pleased to report that during Fiscal Year 2007, the Illinois Department on Aging made unprecedented strides on behalf of older Illinoisans and their caregivers. Working with the Area Agencies on Aging and hundreds of dedicated local providers, we have significantly expanded the scope and reach of Department services to better meet the needs of older adults.

Among the accomplishments in Fiscal Year 2007, the Department expanded eligibility for the Community Care Program by increasing the non-exempt asset requirement to \$17,500 from \$12,500. Hundreds of additional seniors at risk for nursing home placement will receive home and community-based care. We also implemented a new, holistic approach to assessing the needs of seniors that links them to a broad array of supportive services. Comprehensive Care Coordination will be available to all older adults who seek assistance to continue living independently in the community. In addition, for the first time in the program's 30-year history, the department added new services such as Emergency Home Response and Flexible Senior Services to better serve frail older adults and help reduce unnecessary nursing home utilization.

The Department on Aging, with its partner agencies, has also increased older adults' access to prescription assistance. We have helped tens of thousands of individuals enroll in the state's prescription assistance program — Illinois Cares Rx — and understand how it supplements the new federal Medicare Part D benefit.

As we move forward, the Department on Aging will continue to enhance home and community-based service options, improve older adults' access to important benefits, and provide clients with consumer-directed choice. We are committed to helping older adults live independently and with dignity for as long as possible.

Sincerely,

Charles D. Johnson

Charles D. Johnson

Director

#### **MISSION**

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.

#### **VISION**

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.

#### **SUMMARY OF AGENCY OPERATIONS**

The Illinois Department on Aging administers a comprehensive service delivery system to serve the State's 1.9 million seniors in coordination with the 13 Area Agencies on Aging. The Department's major programs include the Community Care Program, which provides case management, homemaker services, adult day services, and other services to eligible seniors age 60 and older; and the Illinois Cares Rx / Circuit Breaker Program, which provides prescription assistance to low income seniors and disabled residents. Other home and community-based services, such as home-delivered meals, transportation, information and assistance, Elder Rights and the Long-Term Care Ombudsman program are provided locally through the Area Agencies on Aging and contracted social service providers.

#### **STRATEGIC PRIORITIES**

- Re-balance Illinois' long-term care system to improve access and enhance community-based services and client-centered options.
- Improve access to better health care benefits and protect elder rights.
- Maximize federal and state funds.
- Promote responsive management and innovation.

#### Fiscal Year 2007 Budget by Fund

Fund Category	FY 2007 Appropriations (\$ thousands)
General Funds	426,465.3
Other State Funds	10,035.9
Federal Funds	72,891.2
Total	509,392.4

#### Fiscal Year 2007 Budget by Major Program

Program	FY 2007 Appropriations (\$ thousands)
Home and Community-Based Car	re 344,833.3
Elder Rights	10,041.4
Circuit Breaker	61,919.5
Supportive Services	84,318.7
Employment Services	3,661.3
Training and Staff Development	193.3
Central Management	4,424.9
Total	509,392.4

#### Fiscal Year 2007 Employees by Ethnicity

Ethnicity	FY 2007 Employees (Percentage)
White	85%
African American	11%
Hispanic	3%
Asian	1%
Total	100%

At the end of Fiscal Year 2007, the agency had a headcount of 152 employees. There was no underutilization of Hispanic and African American employees in all the Department's geographical work locations. The Department was pleased to have expanded the number of bilingual Spanish speaking option positions to three as of June 2007. These employees provided professional programmatic and language expertise to limited English-speaking older adults and their caregivers, helping them to access an array of long-term care services through the toll free Senior HelpLine.

## Department on Aging 2007 Accomplishments

In Fiscal Year 2007 (FY 07), the Illinois Department on Aging continued to work in partnership with the Area Agencies on Aging and hundreds of local service providers throughout the State to fulfill its mission to encourage independence, dignity and quality of life for senior Illinoisans. Priorities included expanding services to help older adults stay in their homes as they age, protecting the rights of older adults living in the community as well as in nursing homes, and increasing older adults' access to important benefits such as pharmaceutical assistance. With the support of Governor Blagojevich and the General Assembly, along with the continued dedication of the Aging Network, the Department on Aging accomplished much during FY 07.

#### **Community Care Services**

During FY 07, the Community Care Program (CCP) expanded in several important ways. The non-exempt asset requirement to participate in the program increased to \$17,500 from \$12,500 to allow more seniors to qualify for services. The Department also implemented a new and holistic approach to assessing the needs of older adults. Comprehensive Care Coordination assured that older adults are linked to a wide array of supportive services to help them live safely and securely in the community. Emergency Home Response Service, also implemented in FY 07, is the first new statewide service added to the Community Care Program since its inception in 1980. This service allows seniors to summon emergency assistance 24-hours-a-day, 7-days-a-week from their own homes, enhancing the peace of mind for caregivers and distant family members. In addition, in FY 07 the Department on Aging utilized funding under the Community Care Program to offer Flexible Senior Services to address needs of eligible frail seniors not covered, such as home modifications, medication management and respite care.

#### Money Follows the Person

In May 2007, Governor Blagojevich announced that Illinois will receive an estimated \$55.7 million in new federal funding over five years to help people living in nursing facilities return to their homes or community residences. The Money Follows the Person initiative is expected to increase the number of individuals who transition back into their communities by approximately 3,500 over the next five years. The Department on Aging is working with Healthcare and Family Services, the Department of Human Services, and the Illinois Housing Development Authority on this project, which will serve the elderly, disabled, developmentally delayed, as well as persons with mental illness.

#### **Elder Self-Neglect Steering Committee**

In January 2007, amendments to the Elder Abuse and Neglect Act went into effect requiring the Department on Aging to accept reports of self-neglect (Public Act 94-1064). The reports are forwarded to the appropriate local agencies to conduct assessments and link older adults to needed services. In addition, the amendments called for the Department to convene an Elder Self-Neglect Steering Committee to develop by rule the specific protocols, policies and procedures to respond to reports of elders who self-neglect while respecting their rights and autonomy. The Steering Committee began meeting in January 2007 and the deadline for completion of its recommendations is January 2008.

#### **Evidence-Based Health Promotion**

Illinois was among 16 states selected by the Administration on Aging to receive a three-year grant to empower older adults to take more control of their health through evidence-based programs. The Illinois Department of Public Health, as the grant recipient, is partnering with the Illinois Department on Aging, East Central Illinois Area Agency on Aging, AgeOptions, and the Chicago Department of Senior Services to implement Chronic Disease Management intervention (by Kate Lorig of Stanford University) and Fit for Life, a program designed by the University of Illinois.

#### **Increased Online Applications**

Concerted efforts by the Department and the Aging Network, especially Area Agencies on Aging, led to the increase in online Illinois Cares Rx and Circuit Breaker applications to more than 190,000 during 2007. This number has nearly quadrupled since 2003 when fewer than 45,000 online applications were received by the Department. Online applications greatly reduce error rates and the time for processing, issuing grant payments and approving pharmaceutical benefits.

#### Older Adult Services Act

The Department continued to lead and staff the committee, consisting of approximately 30 long-term care stakeholders identified in the Older Adult Services Act, as well as five workgroups that develop detailed plans to transform long-term care addressing finance, workforce, coordinated points of entry, nursing home conversion and the need for additional services. The annual report to the General Assembly was drafted and submitted as required under the Act. Many of the Committee's recommendations from the previous report were adopted by the Department or recently enacted into law.

## Older American Act Services and Elder Rights

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 and local service providers, more than 598,820 older adults received services to help them remain independent in their homes and communities during Federal Fiscal Year 2007 (FFY 2007).

#### **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 professionals on a wide range of available programs and benefits.

In FFY 2007, information and assistance staff at local sites across the state received 681,867 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 Illinois Department on Aging's statewide toll-free information and assistance service, the Senior HelpLine, assisted more than 132,000 callers 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 07, 12,874 older persons 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, friends and families. Through the Department's transportation services in FFY 07, older adults made more than 680,400 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 as a result of the 2000 amendments to the federal Older Americans Act (Public Law 106-501). In FFY 2007, the National Family Caregiver Support Program was funded at \$155,844,808 nationally with \$6,242,158 million allocated to Illinois. The program calls for all states, working in partnership with Area Agencies on Aging 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 2007, more than 159,845 family caregivers, including grandparents raising grandchildren, were served by the Illinois Family Caregiver 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 center services, which may include congregate meals, transportation and pharmaceutical assistance, enhance the choices available to older adults in the community. The Illinois Department on Aging funds 325 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 2007, Illinois' legal assistance providers contributed 32,670 hours of assistance to older adults.

#### **Nutrition Services**

Congregate meals are served weekdays in over 690 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 74,774 older adults benefited through the program in FFY 2007, enjoying more than 2.7 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 2007, 45,234 eligible older adults received over 7.4 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 re-entering the job market. The program is administered by the Department on Aging through the Area Agencies on Aging 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 FFY 2007, more than 557 older adults participated in the program. Approximately 23 percent of the older workers who have received temporary assignments through SCSEP were transferred to permanent jobs.

#### **ELDER RIGHTS PROGRAMS**

#### **Elder Abuse and Neglect Program**

The Illinois Department on Aging 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 42 provider agencies that conduct investigations and work with older adults in resolving abusive situations.

During FY 07, there were 9,489 reports of elder abuse received by the program. Financial exploitation was reported in more than half of the cases and is highly associated with emotional abuse, which represented 45 percent of the reports. The other types of abuse reported included passive neglect, physical abuse, willful deprivation, confinement and sexual abuse.

Social workers or medical personnel were responsible for reporting one in five cases of elder abuse. Family members reported 19 percent of cases, while victims self-reported in 9.5 percent of all cases. Older adults more often needed others to report for them in cases of neglect and willful deprivation. Self-reports were most likely to occur in physical, sexual, emotional and financial exploitation cases.

Elder abuse is primarily a family problem. Three-fourths of the abusers were the spouse (12 percent), child (42 percent) or other relative (21 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 07, alleged victims were older adults between 60 and more than 100 years of age, with the average age of 78. Almost three-fourths of the victims were female, although females represent only 59 percent of the general population over age 60. With regard to race, 74 percent of elder abuse victims were white, 20 percent were black and 3 percent were Hispanic.

#### Illinois 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, Area Agencies on Aging and the 16 regional ombudsman programs, which include over 350 volunteers.

In FFY 2007, the Ombudsman Program responded to 9,421 complaints. The majority of individuals reporting complaints were family members and friends (31 percent) and the residents themselves (27 percent) followed by nursing home staff (14 percent). FFY 2007 data indicates 70 percent of the complaints were verified, and 72 percent were resolved or partially resolved.

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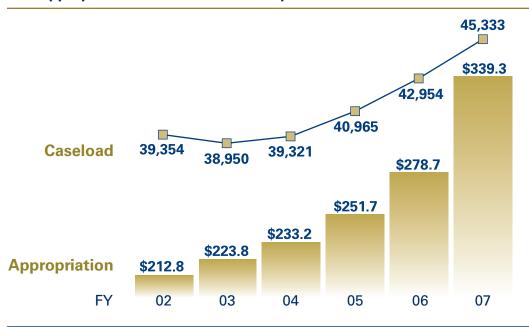
Ombudsmen also empowered residents and families to resolve their own issues by responding to 17,388 inquiries and attending 1,833 resident and family council meetings. Quality care was promoted through 3,102 educational sessions, consultations and/or interactions between ombudsmen and nursing home staff separate from the complaint resolution process.

**Community Care Program** 

The Community Care Program (CCP), established in 1979 by Public Act 81-202, provides in-home and community-based care to seniors at-risk of nursing home placement. During FY 07, the CCP served an average of 45,333 frail elderly each month, thereby successfully diverting or delaying those individuals from nursing home placement.

On July 1, 2006, the non-exempt asset requirement for the Community Care Program expanded from \$12,500 to \$17,500 (home, car and household furnishings are excluded) to allow more low income seniors to qualify for the program. This was the second increase in recent years, with the asset requirement increasing from \$10,500 to \$12,500 in 2004. The other income eligibility requirements stayed the same. To participate in the Community Care Program, an individual must be age 60 or over, a U.S. citizen or legal alien, apply for medical benefits (Medicaid) and have an assessed need for long-term care.

#### **CCP Appropriation and Caseload History**



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

#### Case Management

The foundation of the Community Care Program is case management provided by a network of community-based Case Coordination Units. Case managers with these agencies arrange for an array of supportive services and make appropriate referrals for older adults who need assistance. The case managers develop plans of care and help older adults and their families decide if, and when, nursing home placement is appropriate.

In FY 07, the Department implemented a new approach to assessing and determining the care needs of frail older adults. Under Comprehensive Care Coordination, all seniors are assessed using a new comprehensive instrument and linked to assistance to meet their needs regardless of the funding source. The Department has also added new activities for case managers to develop and implement that include detailed care plans and more frequent visits for seniors with greater needs. These system changes improve coordination among the federal Older Americans Act Title III funded services and the state funded Community Care Program, as well as locally supported programs and services.

#### **Homemakers**

Homemakers provide assistance with household tasks that include cleaning, shopping, preparing meals and assisting clients with personal care tasks such as dressing, bathing, grooming and following special diets. In FY 07, the Department on Aging contracted with 60 homemaker agencies to meet the needs of an average monthly caseload of approximately 45,000 older adults. In addition, a rate increase of \$1.00 per hour went into effect June 2007, increasing the rate for homemaker services to \$13.62 per hour.

#### **Homemaker Hourly Rate History**



#### **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 impairment. 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 FY 07, 75 adult day service sites provided community-based service to approximately 2,400 clients per month. Several of these sites specialize in providing care to clients diagnosed with Alzheimer's disease and related disorders, while others serve specific ethnic populations.

Service providers with the program transport seniors to and from adult day service centers across the state. In FY 07, the transportation reimbursement rate for adult day service doubled from \$4.15 to \$8.30 per person per ride. This was the first transportation reimbursement rate increase since 2000.

#### **Emergency Home Response Service**

Emergency Home Response Service, implemented in October 2006, allows seniors to summon emergency assistance from a device worn around their necks 24-hours-a-day, 7-days-a-week from their own homes. These devices provide seniors and their caregivers with peace of mind and reduce the need for premature nursing home placement. In FY 07, approximately 11,170 clients utilized the service.

#### **Senior Companions**

Senior Companion agencies provide an array of assistive, supportive companion-ship services to frail seniors by utilizing volunteers, age 60 or older, who have limited incomes. The focus of these services is to provide economic, psychological and social benefits to volunteers while meeting the needs of older adults and offering respite to family caregivers. Senior companion services are available on a limited basis in six areas of the State. In FY 07, senior companions served more than 200 clients monthly.

#### **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.

Case managers from Case Coordination Units 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, case managers may conduct follow-up screenings in the nursing facilities to aid transition back into the community when possible. In FY 07, over 88,000 prescreening visits were conducted with persons requesting care or considering placement in a long-term care facility.

#### **Demonstration Projects**

- Recognizing the diverse needs of seniors, in FY 07 the Department awarded \$2 million for Flexible Senior Services. Grant funds are distributed to the Area Agencies on Aging (AAAs) and authorized in conjunction with case managers for clients 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 live at home without significantly increasing overall costs under CCP. In FY 07, more than 1,800 clients were served.
- The Assistive Technology Demonstration Project helps to preserve the mobility and/or autonomy of clients. Assistive technology can improve physical or mental functioning, alleviate a disorder or prevent the worsening of a condition. Some examples of assistive technology include chair lifts, grab bars, magnifying lenses and walking canes. This initiative, in conjunction with the Flexible Senior Services, provides frail older adults with new options to increase their quality of life and keep them living in their own homes or apartments longer. In FY 07, more than 375 clients were served with funds transferred from the Illinois Housing Development Authority.
- The Enhanced Transition, "Home Again" demonstration, initiated in FY 05, continues to move frail older adults from nursing homes back into the community. In the first two years of the project, the Department on Aging successfully transitioned 270 nursing home residents into community living arrangements. This effort not only allows clients to enjoy the freedom and dignity of living in the community, but represents potential savings to the state by expending fewer Medicaid dollars than required in an institutional setting. The Department on Aging will continue this six site demonstration in FY 08 with \$1 million from the Illinois Housing Development Authority to support housing service needs.
- In FY 07, the Department on Aging continued to support the two **Aging** and **Resource Disability Centers** funded under a 2003 Administration on Aging (AoA) grant in Rockford and Decatur. The ARDCs serve older adults, disabled persons and family caregivers with long-term care support needs by providing a single point of entry for accessing public programs and benefits.
- Situated in several urban and rural areas of the state, the Community-Based Residential Facilities Demonstration Project combines housing, personal and health related services for those who need assistance with activities of daily living. In FY 07, facilities had an average monthly caseload of approximately 190 seniors. This alternative to nursing home residency promotes independence and provides a more cost-effective housing and community-based service option alternative to nursing home care. All facilities involved in

the project are licensed under the Assisted Living and Shared Housing Act, Public Act 91-0656. Project sites include Murphysboro, Deerfield, Rockford, Ullin, Herrin, Chicago and Olney.

- In FY 2000, the Extended Community Care Options Demonstration Project was developed to address the homemaker shortage, which prevented some of Lake County's CCP clients from receiving authorized levels of service. Under this demonstration project, Catholic Charities contracts with multiple local organizations to provide a variety of services that include homemaker and adult day services, as well as home-delivered meals, money management, laundry, transportation and grocery delivery. The project was designed to provide creative service options to clients. In FY 07, approximately 800 clients were served monthly.
- The Managed Community Care Demonstration Project completed its 12th year of operation in FY 07. The project is designed to provide a broader range of services more efficiently and cost effectively. The Department's project partner, the Council for Jewish Elderly, is paid a set monthly fee for each client served based upon the client's level of impairment, rather than the more traditional fee-for-service model. In addition to homemaker and adult day services, available services for eligible clients include home-delivered meals, transportation, medication management, elder rights advocacy, money management and home repair. During FY 07, the program served approximately 470 clients per month.
- Since FY 1998, the Department and the East Central Illinois Area Agency on Aging have implemented a **Home Delivered Meals Demonstration Project** that provides meals to CCP clients. In FY 07, the project served approximately 340 clients.
- The Transportation Demonstration Project, which began in 1997, was developed to address problems associated with transporting CCP clients to medical appointments and essential errands. The project provides a transportation option in DeKalb, Pope, Hardin, Gallatin and Saline counties, as well as several other counties in southern Illinois. In FY 07, the project provided over 4,800 rides to approximately 160 clients.

## **Circuit Breaker Illinois Cares Rx**

On July 1, 2004, the Circuit Breaker Pharmaceutical Assistance program transferred to the Department on Aging from the Department of Revenue. Pursuant to Executive Order 2004-3, the Department on Aging 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.

The transfer is only one of the many changes the Circuit Breaker program has experienced since its implementation in 1972. When it was initiated more than 30 years ago by the Illinois Department of Revenue (Public Act 83-1531), the Circuit Breaker program's primary purpose was to provide yearly 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.

The Department of Revenue partnered with the Department of Healthcare and Family Services (formerly the Department of Public Aid) in 2002 to allow seniors at least 65 years of age with an income at or below 200 percent of the federal poverty level to receive benefits through the Illinois SeniorCare program. The Illinois SeniorCare program provided a comprehensive pharmaceutical benefit or a rebate option to qualifying residents.

In 2005, the Circuit Breaker Pharmaceutical Assistance and SeniorCare programs were modified pursuant to Public Act 094-0086. The Department of Healthcare and Family Services and the Department on Aging re-designed the SeniorCare and Circuit Breaker Pharmaceutical Assistance programs to "wraparound" the new Medicare Part D prescription drug benefit that went into effect January 1, 2006.

Circuit Breaker Pharmaceutical Assistance and SeniorCare were joined into one program: Illinois Cares Rx. Illinois Cares Rx consists of Illinois Cares Rx Basic (formerly Circuit Breaker Pharmaceutical Assistance) and Illinois Cares Rx Plus (formerly SeniorCare). The property tax rebate and the license plate reduction continued to be benefits of the Circuit Breaker program as well.

If an individual has 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 2007, to participate in Illinois Cares Rx Basic, an individual must have been at least 65 years of age or disabled with a 2006 household income of \$22,793 for a single person and \$30,594 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 2007 who were at least 65 years of age and met income eligibility requirements, which included a 2006 annual income of \$21,936 for a single person and \$29,412 for a married couple. Illinois Cares Rx Plus covers all classes of medically necessary prescription drugs.

Illinois Cares Rx participants paid \$2.15 for generic covered drugs and \$5.35 for preferred brand name covered drugs during 2007. In addition, participants paid 20 percent of prescription costs plus co-pays after \$1,750 drug benefits were paid on their behalf if they did not have Medicare. If Medicare eligible and enrolled in a coordinating plan, a participant paid 20 percent of costs plus co-pays after \$2,510 in drug benefits were paid on their behalf.

Individuals file just one application (Form IL-1363) to receive the pharmaceutical benefits available though Illinois Cares Rx, as well as a Circuit Breaker grant to reduce property tax burden, and a \$54 license plate discount from the Secretary of State's Office. However, the income requirement to receive the grant and the license plate discount was different in 2007 than the income requirements of Illinois Cares Rx.

In claim year 2007, the income limit for the Circuit Breaker grant and license plate discount was \$22,218 for a single person household and \$29,480 for a married couple. The amount of property grant is figured by a formula using the amount of property tax or mobile home tax paid and an individual's total income.

The Department on Aging processes all applications and provides outreach, while the Department of Healthcare and Family Services administers all aspects of Illinois Cares Rx pharmaceutical coverage including processing pharmacy claims, distributing prescription cards, and contracting with Medicare Part D plans to provide for wrap-around benefits.

In calendar year 2007, the number of Circuit Breaker and Illinois Cares Rx applications (Form IL-1363) filed with the Department on Aging was 349,443. The total number of applicants requesting Illinois Cares Rx was 241,170. The number of applicants eligible for Illinois Cares Rx Basic was 49,236 and the number of applicants eligible for Illinois Cares Rx Plus was 191,934.

In recent years, the Department enhanced its World Wide Web presence to improve customer service. As a result, the number of Circuit Breaker and Illinois Cares Rx applications the Department on Aging receives over the Internet has increased significantly. Last year, the Department received 190,796 applications

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over the Internet as compared to 44,734 applications received over the Internet in 2003. Those applications are received with fewer errors and can be processed several weeks faster than paper-based applications.

The Department on Aging offers a variety of services designed to provide information about the programs and allows an applicant to check the status of his or her application. Information about Circuit Breaker and Illinois Cares Rx can be accessed on the Internet, via telephone and by mail.

#### **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 on programs and links older adults and their caregivers to local services. Professionally trained staff assess client 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 (1-866-800-1409). 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.

Recognizing the value of the Senior HelpLine and the important information it provides to older adults, policy-makers have increased funding in recent years to make enhancements, including the installation of a new phone system in 2006. The enhanced system fully automated the Senior HelpLine for the first time since its inception with Interactive Voice Recognition (IVR), allowing callers to check on the status of their Illinois Cares Rx Circuit Breaker applications without the assistance of staff. In addition, with increased funding the Senior HelpLine hired additional bilingual staff members to better respond to limited English-speaking callers.

During FY 07, the Senior HelpLine responded to 132,226 calls. The majority of the calls received, nearly 75 percent, were regarding the Circuit Breaker and Illinois Cares Rx programs. The Community Care Program accounted for 7 percent of the calls; elder rights, including Elder Abuse and Long-Term Care Ombudsman, accounted for 6.5 percent; and services funded by the Older Americans Act, such as transportation and home-delivered meals, totaled approximately 6 percent of the calls received.

#### Outreach

The Department is committed to promoting programs and services that benefit senior Illinoisans. For example, the Department plays the lead role in the statewide pharmaceutical clearing house, often working with the Department of Healthcare and Family Services and the Senior Health Insurance Program to make older adults aware of policy changes and updates that may impact their prescription drug coverage.

Each month, the Department hosts a conference call that includes the Area Agencies on Aging as well as local service providers committed to ensure that seniors across Illinois receive the pharmaceutical assistance benefits to which they are entitled. The calls provide a forum to keep the Aging Network apprised of developments and respond to pending issues.

The Department has also extended efforts to update older adults, caregivers and professionals about recent enhancements to the Community Care Program. Press releases and speaking engagements provide opportunities to inform the public about the Aging Network's efforts to transform the long-term care system in Illinois and expand home and community-based service options.

In July, during Elder Abuse Awareness Month, the Department's Elder Abuse Program conducted its second annual "Break the Silence" campaign. The mission of the campaign is to educate the public about elder abuse and encourage individuals who suspect elder abuse to report it. The "Break the Silence" campaign was successful, with elder abuse reports increasing by more than 10 percent since FY 2005. It included outreach efforts such as billboards and mass-transit advertisements, public service announcements and senior community fairs to increase awareness and visibility of this important issue.

Overall, in FY 07, outreach staff coordinated the Department and Aging Network partner participation at nearly 100 events throughout the state. These events provided the opportunity to reach more than 36,000 older adults and their caregivers, helping them to access beneficial programs and services.

#### Illinois State Fair

Since 1990, the Department on Aging 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 7 p.m. The senior building provides older adults 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 also available to provide information to attendees about their programs and services.

In FY 07, the State Fair ran from August 11-20. In addition to the exhibits, each day included entertainment and bingo. Department staff were also on hand to share information with seniors and their families regarding the new federal Medicare Part D drug benefit and Illinois Cares Rx.

On Senior Day, August 14, Blue Cross/Blue Shield of Illinois sponsored a special session by Jim Karras, a nationally known fitness and weight loss expert. In addition, special portraits of Illinois' fallen soldiers from Iraq and Afghanistan were on public display. Health screenings were provided by St. John's Hospital, Illinois Pharmacists Association, the Lions Club and the Illinois Optometric Association 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, Governor's Award for Unique Achievement and the Older Workers Awards. 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, which was 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 FY 07, four new members were recognized in December 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 FY 07, 4100 individuals participated in Department-sponsored conferences and workshops. The Department hosted conferences and offered training 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 field of aging. In FY 07, the event brought together more than 650 people focused on the issues affecting senior Illinoisans.

#### Mental Health and Aging

The Department on Aging recognizes that the need for mental health services is a major factor for the health and well-being of older adults. During the past several years, the Department has forged a strong partnership with the Office of Mental Health Services, Illinois Department of Human Services. Both the Aging and Mental Health Service Networks have benefited from sharing information and training.

In April 2007, the Department on Aging and Department of Human Services hosted the 7th Annual Mental Health and Aging Conference at the Lincolnshire Marriott, which drew more than 300 attendees. The Conference addressed the

latest in mental health and aging research and practices, including the treatment of dementia, pain management and depression.

The Department continues to be a member of the Department of Human Services' Advisory Committee on Geriatric Services, which increases awareness of diseases such as Alzheimer's and the need for more coordination among physicians and geriatric case managers.

#### Grandparents Raising Grandchildren

The Illinois Department on Aging continues to address issues related to the Grandparents Raising Grandchildren program, which began with the award of a two-year, \$10,000 Brookdale Foundation grant in October 1996. Additional financial support from the legislature has allowed the Department to expand the program by establishing additional support groups, providing more grandparents with information and referral assistance, and training professionals to meet grandparents' needs. Grandparents and other relatives over the age of 55 raising their families' children are also eligible for services under the Illinois Family Caregiver Support Program. In FY 07, more than 7,500 relatives received assistance through the Grandparents Raising Grandchildren program.

#### Volunteer Programs

For individuals who want to contribute their time and experience, there are volunteer opportunities available in the Aging Network. Volunteers are needed for a variety of activities including delivering meals to homebound elderly, providing rides so older adults can access necessary services, and advocating for the rights of nursing home residents. In addition, there are volunteer programs designed to allow older adults to share their special abilities and talents.

Illinois Long-Term Care Ombudsman volunteers visit long-term care facilities in their communities to empower and help residents and their families resolve complaints. Complaints may range from cold food or a missing sweater, to more serious issues such as abuse or a resident's right to decline medical treatment. Volunteers complete a training course established by the Office of the State Long-Term Care Ombudsman and attend ongoing service training. In FY 07, 316 volunteers represented the rights of older adults in long-term care facilities.

The Corporation for National Service and the Illinois Department on Aging partnered to fund the Foster Grandparents Program and the Retired and Senior Volunteer Program in Illinois.

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; mentor troubled teenagers and young mothers; help with homework and work in hospitals with

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special needs children. In FY 07, 780 Foster Grandparents Program volunteers provided over 770,000 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 07, senior volunteers provided more than 2,626,831 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 assistants and income tax aides.

# Organizational Structure

# **Executive Office**

**Central Administration Human Resources** Public Information Legislative Affairs **General Counsel** 

> **Administration** Finance and Division of

Relations and Community Division of Outreach

Community Division of **Home and** Services

Research and **Development** Division of Planning,

Pharmaceutica/ **Circuit Breaker Division of Assistance** 

- Circuit Breaker Eligibility Determination
- Illinois Cares Rx Enrollment and Processing

## **Budget and Costing** Operations

## **Bureau of Business** Services:

- Accounting
- Financial Reporting and Recovery
- Administrative Support • Payroll and

Bureau of Information

**Development and** Office of Service Procurement **Fechnology** 

## **Bureau of Community** Operations:

Policy Development New Programs and

> · Community Care Field Services

Special Events and Fairs

Senior HelpLine

Older Americans Act Services

Forms Management

Marketing:

Marketing and **Publications** 

- Senior Employment Caregiver Support
- Intergenerational Programs

Warehouse

Print Shop

## Office of Elder Rights

Office of the State

- Strategic Planning Program Evaluation Medicaid Waiver Management
- Demonstration Projects
- Grant Writing
- Forecast and Analysis

Ombudsman

Office of Training and Development



#### State of Illinois, Department on Aging

421 East Capitol Avenue, #100, Springfield, Illinois 62701-1789 Senior HelpLine: 1-800-252-8966, 1-888-206-1327 (TTY)

Download this brochure at **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 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).