

made the decision to hold the Regional Programs accountable to meet the minimum federal performance requirements instead of the established state benchmarks which go above and beyond federal requirements. Legislative action was required to allow for distribution of funds to the Regional Programs. Senate Bill 2047 was the stopgap bill that allowed Illinois to release funds to the Program. The BEEKS Consent Decree also allowed General Revenue Funds to be released. Because of the uncertainty of the budget, many programs cut Ombudsman staffing causing activity and case numbers to go down state-wide.

Improper Discharges:

The Program identified the following concerns related to improper discharges:

- facilities discharge residents to the hospital, but refuse to take the residents back,
- facilities discharge without proper notice,
- IDPH Administrative Law Judges (ALJs) do not have the authority to order a facility to take the resident back or to allow the resident stay in the facility if a resident wins the administrative hearing,
- Ombudsmen cannot request a hearing or represent a resident in a hearing if the resident lacks decision making capacity and has no legal representative, and
- there are not substantial consequences for non-compliance.

Volunteerism:

Due to the lack of paid volunteer coordinators, the volunteer program has diminished in many areas of the state. The decrease in volunteers has also made an impact on the number of regular presence visits made by the program. Most of the Regional Ombudsmen have had to fill the role of the volunteer coordinator. Some programs have even gone so far as to eliminate Volunteer

Ombudsmen completely from their programs because they don't have the time to manage, recruit, and train volunteers.

Recommendations

The recommendation from the Office of the State Long-Term Care Ombudsman is to amend the Illinois Nursing Home Care Act regarding involuntary discharges. Proposed legislation must close loopholes currently allowing facilities to circumvent regulations.

Another amendment to the Nursing Home Care Act should allow IDPH to issue larger fines when facilities do not follow the proper discharge process. Current fines are not an effective deterrent. In addition, Administrative Law Judges must be granted the authority to order the facility to take the resident back when the final decision in an appeal hearing is in the resident's favor.

Finally, new legislation must give a voice to our most vulnerable population by allowing Ombudsmen the authority to represent residents in an administrative hearing when the resident lacks capacity and who either has no representative or has a representative not fulfilling his or her fiduciary duty.



Illinois Department on Aging

**State of Illinois
Department on Aging**

One Natural Resources Way, #100
Springfield, Illinois 62702-1271

Senior HelpLine: 1-800-252-8966

Elder Abuse Hotline:
1-866-800-1409 1-888-206-1327 (TTY)

www.illinois.gov/aging

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).

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State of Illinois
Illinois Department on Aging



Illinois Long-Term Care Ombudsman Program

Annual Report FY 2016



Illinois Department on Aging

Fiscal Year 2016

Annual Report

Funding

Long-Term Care Ombudsman Program

In FY2016, the budget for the Ombudsman Program totaled \$4,306,135. The largest portion of funds supporting the program came from federal funding totaling \$2,669,516. The Program received \$1,188,838 in state funds while local funding for the program totaled \$447,781. However, the program did not receive funding from the Long-Term Care Provider Fund as it has in years past.

Home Care Ombudsman Program

Beginning in FY2014 and continuing into FY2016, the Long-Term Care Ombudsman Program expanded its services to include advocacy for seniors and persons with disabilities who live in the community and receive managed care services through the Medicare-Medicaid Alignment Initiative (MMAI) or who live in the community and receive Medicaid waiver services. Funding for this expansion came from three main sources: a federal grant through the Duals Demonstration Program, state funds, as well as Balancing Incentive Program (BIP) funds. The total expansion funding for FY2016 was \$1,867,242.

Legislative Advocacy

The nursing home industry introduced HB 5601 that would no longer allow anonymous callers to file a complaint with the Illinois Department of Public Health against a long-term care facility. The State Ombudsman worked with various legislators and advocacy groups as well as the Illinois Department on Aging to prevent this legislation from passing. The State Ombudsman testified against the bill in front of the House of Representatives, and was interviewed and

quoted in various news articles, including *U.S. News and World Report*. The bill did not pass.

Another legislative issue the Ombudsman began to work on in FY16 was improper discharge reform. The Office identified significant concerns with improper evictions from long-term care facilities and worked closely with the Alzheimer's Association and other advocacy groups to prepare a bill for introduction in the 2017 session.

Statewide Plan

The Ombudsman Program's statewide plan focused on promotion of long-term care rebalancing and reform.

Complaints and Consultations

The Ombudsman Program handled 7,828 complaints during FY2016. Out of 6,570 nursing facility complaints, 5,063 complaints were verified. There were 1,216 Assisted Living and Shared Housing Establishments, Supportive Living, and Shelter Care complaints for FY 16 and 850 complaints were verified. Out of 42 cases in the "other settings" category, 35 were verified. Of all complaints, 5,078 were resolved or partially resolved to the satisfaction of the resident or complainant.

There are 133 possible codes used for documenting complaints into the National Ombudsman Resource System. By far, the largest single complaint investigated by the Illinois Ombudsman Program was related to improper involuntary discharges. The Program investigated:

- 911 Complaints of Improper Discharges
- 434 Complaints of Exercise of Preference/ Choice and/or Civil/Religious Rights
- 402 Complaints of Financial Exploitation or Neglect from Individuals Outside of the Facility
- 398 Complaints Relating to Information Regarding Rights, Benefits, Services and the Resident's Right to Complain

Twenty percent of Ombudsmen complaints were made against someone other than the facility. The majority of those included complaints of financial exploitation.

There were 22,959 consultations handled by the Ombudsman Program. The three most reported consultation topics were Ombudsman Services, Resident Rights and Money Follows the Person.

Regular Presence Visits

The Ombudsman Program continued its push to be visible in Illinois long-term care facilities. Ombudsmen made 17,492 regular presence visits to 1,519 long-term care facilities. There were 139,427 beds in long-term care facilities in Illinois during FY2016.

Long-Term Care Systems Rebalancing

Money Follows the Person:

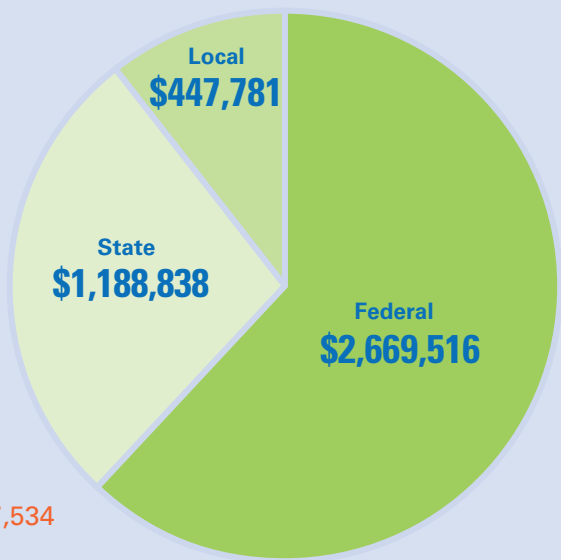
The Ombudsman program continued to receive funds to assist with education and referrals to help residents transition out of nursing homes and into less restrictive living arrangements through the Money Follows the Person Program (MFP). Illinois was awarded the MFP Demonstration Project in May of 2007 from the Federal Centers for Medicaid and Medicare Services (CMS). MFP supports states in creating systems and services to transition long-stay Medicaid-eligible persons residing in institutional settings to appropriate home and community based settings (HCBS).

Barriers and Challenges

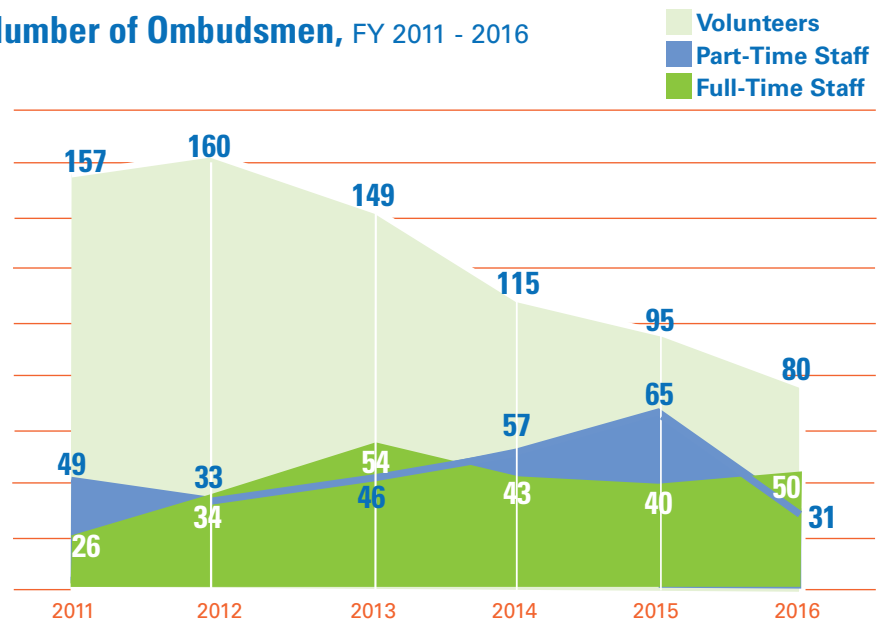
Budget Impasse:

Two Regional Ombudsman Program Provider Agencies withdrew from the Program due to concerns with the state's budget impasse. Other programs were forced to let go of staff. The State Ombudsman designated new Ombudsman Providers for both Areas. At the onset of the impasse, the State Ombudsman

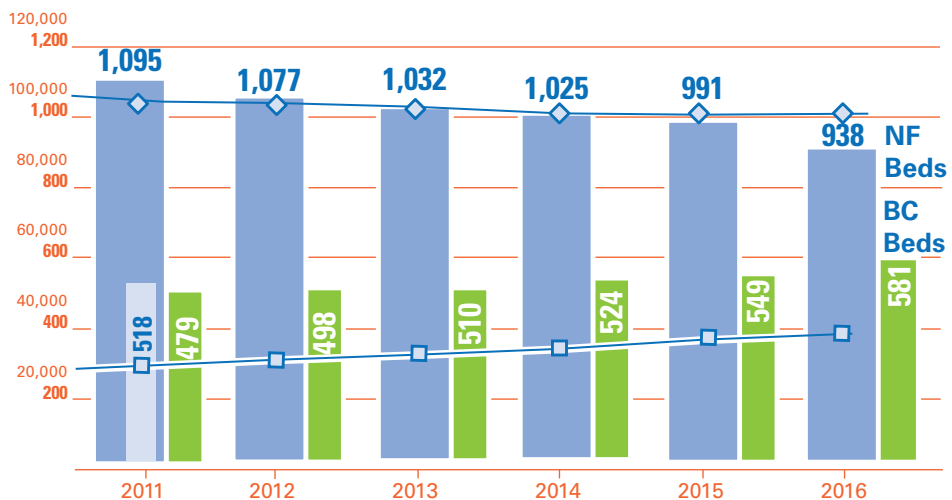
Long-Term Care Provider Fund, FY 2016



Number of Ombudsmen, FY 2011 - 2016

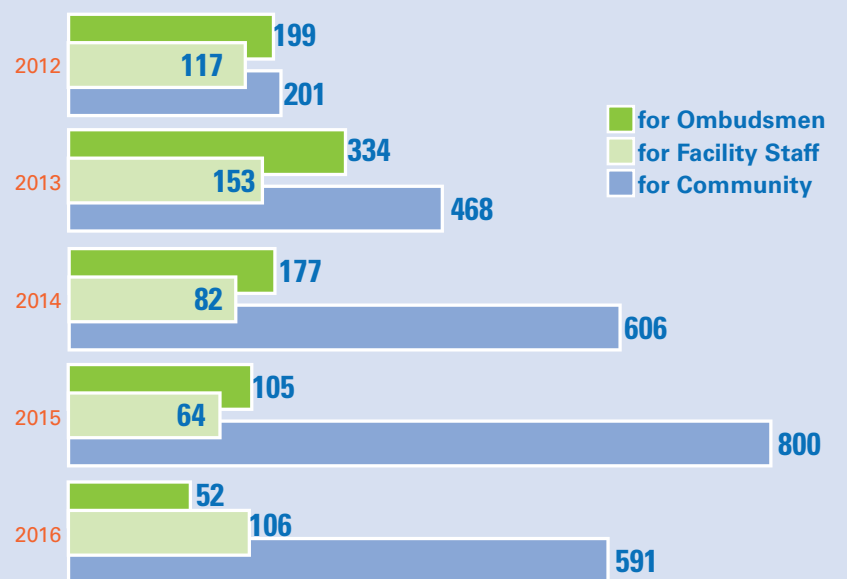


Number of Board and Care and Nursing Facilities / Beds FY 2011 - 2016

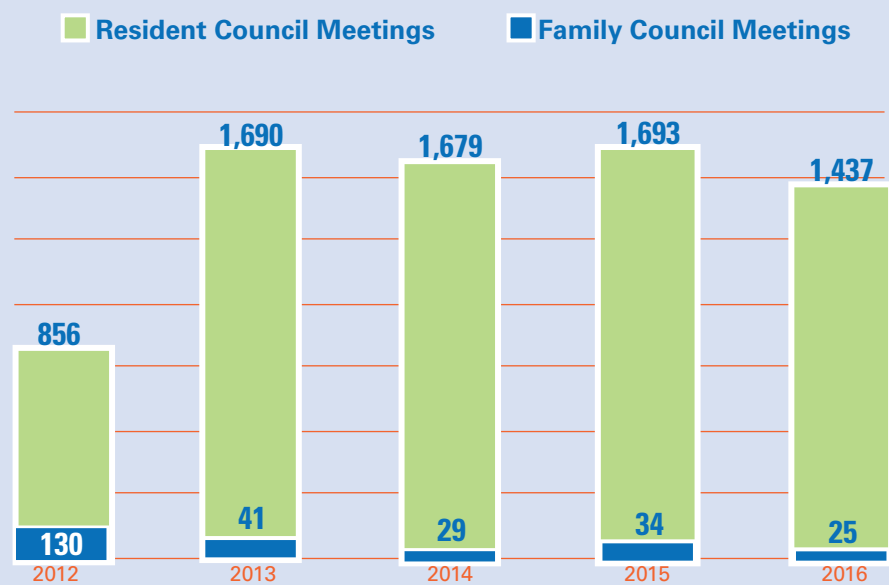


◆ Nursing Facility (NF) Beds: 2011--111,101; 2012--109,333; 2013--104,172; 2014--103,976; 2015--103,612 and 2016--103,977
 ■ Board and Care (BC) Beds: 2009--2011--29,580; 2012--30,781; 2013--31,420; 2014--32,656; 2015--33,942 and 2016--35,450

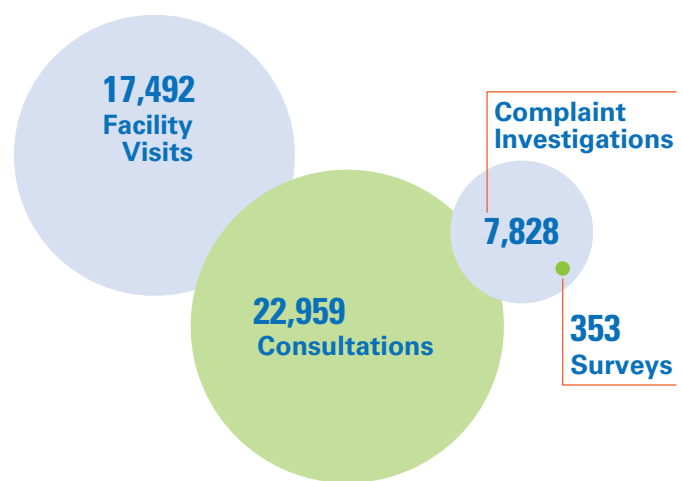
Continuing Education Sessions Held by Ombudsmen FY 2012 - 2016



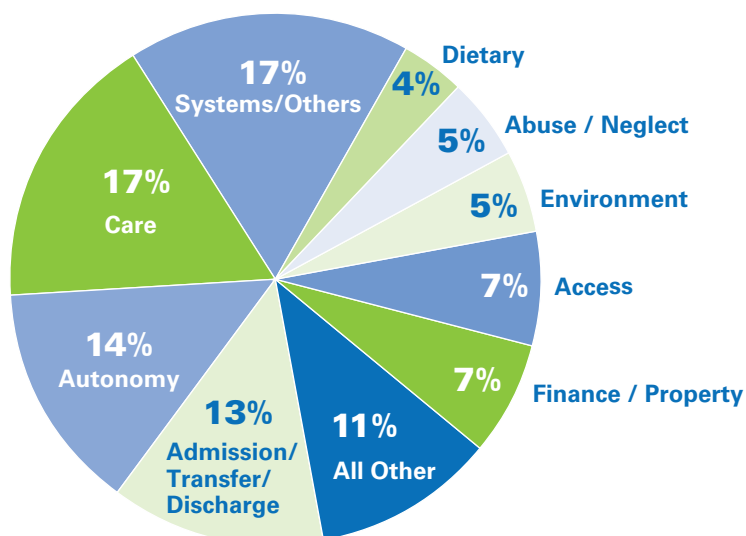
Resident and Family Council Meetings Attended, FY 2012 - 2016



Number of Activities and Services Performed, FY 2016



Analysis of Complaints, FY 2016



Number of Complaints: 8,454

Comparison of Complaints to Cases, FY 2011 - 2016

