

# Illinois Department on Aging



John K. Holton, PhD, Director

Pat Quinn, Governor

---

## **Fiscal Year 2015 Enacted Budget Aging Network Briefing**

July 1, 2014

---

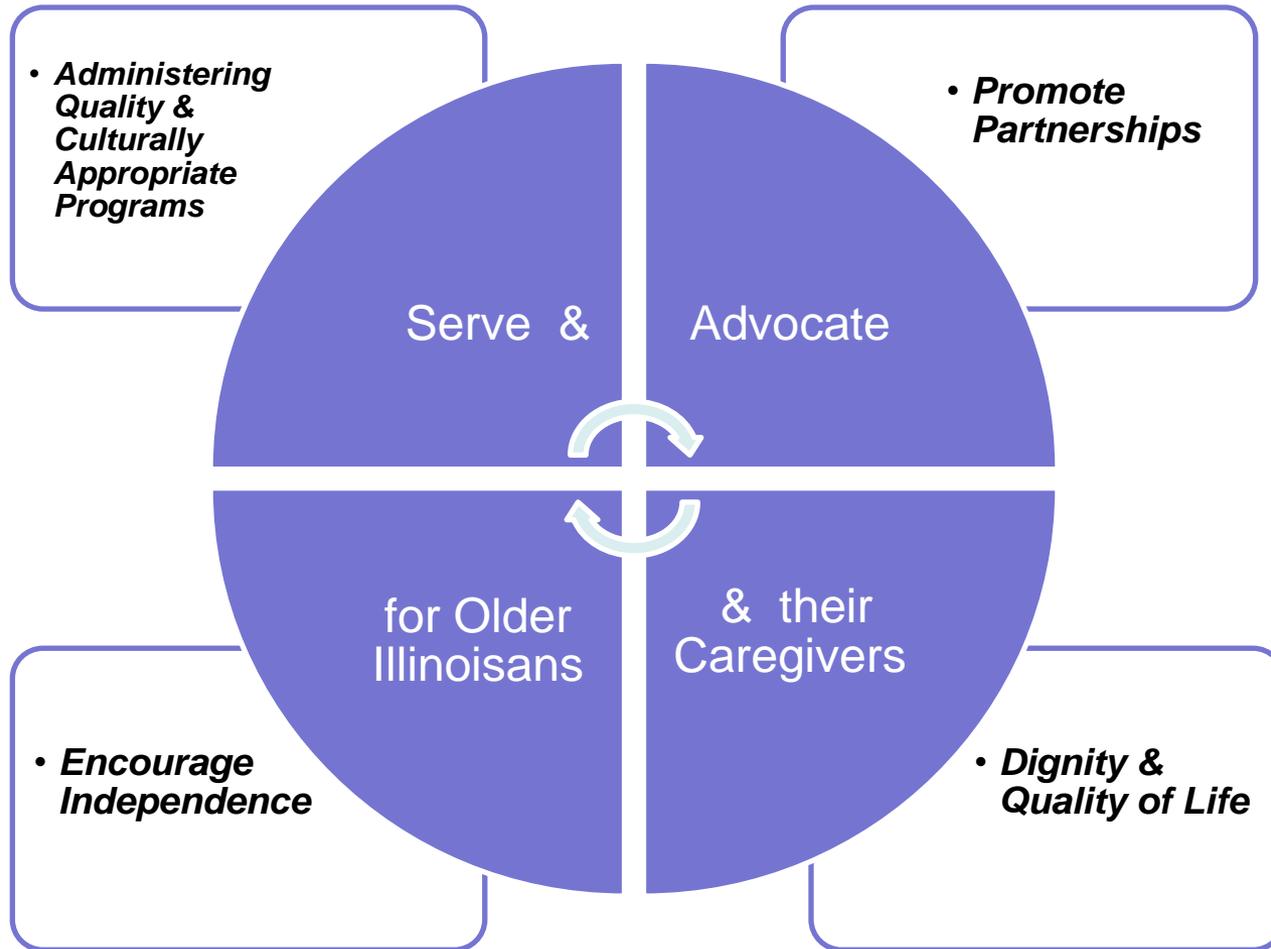
# Governor's FY15 Fiscal Strategy

---

## Securing Illinois Financial Future

- **Stable, predictable State finances**
  - No prior year liability carried forward in the Community Care Program (CCP)
- **Continue to pay down the backlog of bills**
  - Maintain timely payments which reduces the need for expedited payments request and prompt payment interest
- **Continued efficiencies and fiscal disciplines**
  - Implementation of strategies to increase efficiencies [which have included: electronic visit verification (EVV), improved Medicaid enrollment, and improved service authorization guidelines]

# Illinois Department on Aging Mission



## Agency Operations Summary

- Created in 1973 by Public Act 78-242 (or 20 ILCS 105/), the Department administers a comprehensive service delivery system to serve the State's growing 2.23 million older adults and their caregivers.
- Services are provided in coordination with 13 Area Agencies on Aging and their sub-contractors, and various direct IDoA contractors that include 38 Case Coordination Units and 150 CCP service provider agencies across all 102 Illinois counties.
- The Department serves as the single state agency to receive funds under the Federal Older Americans Act for community supportive services.
- The Department's major programs and services include the following:
  - Community Care Program (CCP)
  - Adult Protective Services (APS)
  - Long Term Care Ombudsman Program (LTCOP)
  - Senior Health Insurance Program (SHIP), and
  - Older American Act (i.e., nutritional programs, transportation, senior employment, & caregiver support) and others to improve the health and welfare of older adults.

Illinois' older population (60+) numbered 2.23 million in 2011, an increase of 273,000 or almost 14% since 2000, and is projected to increase to 3.68 million or 24.3% in 2030.

Source: US Census Data and DCEO County County Populations Projections.

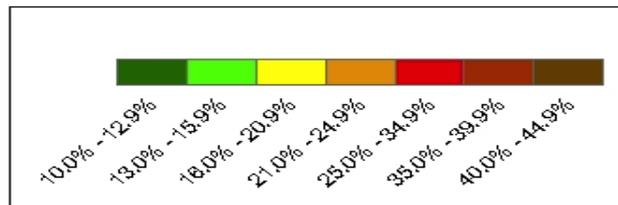
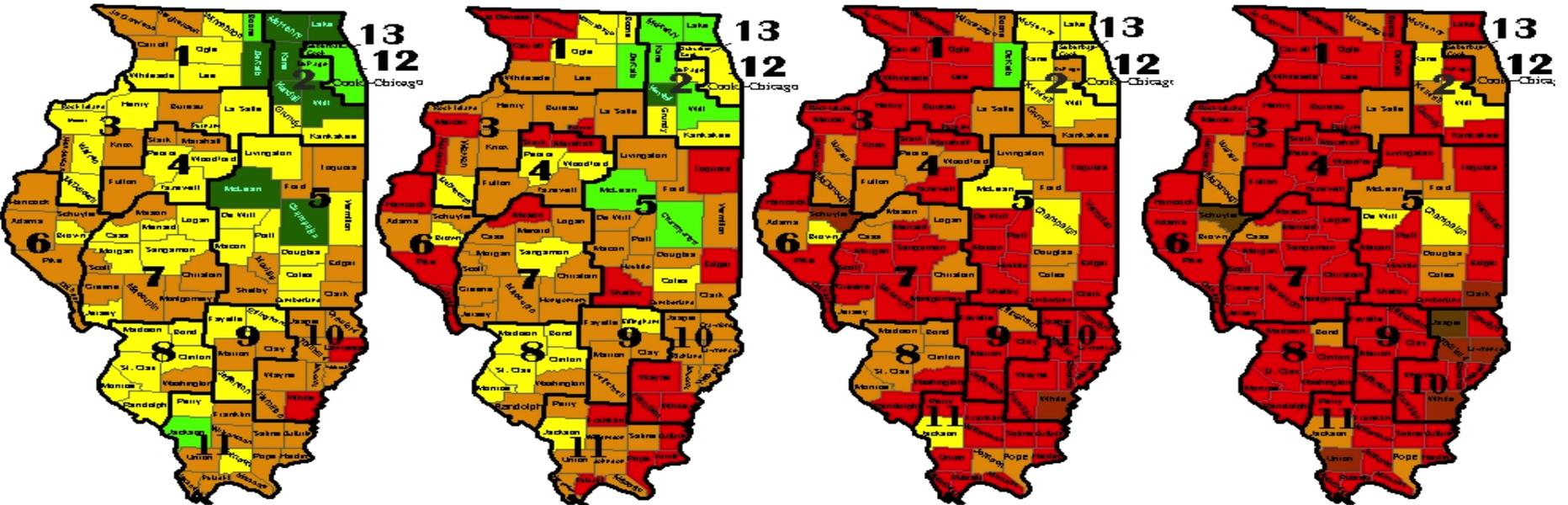
### Illinois Population 60+ By County

2000

2010

2020

2030



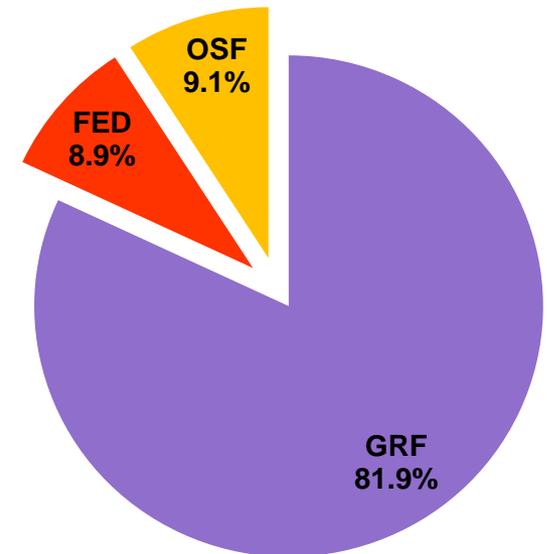
Illinois Department on Aging  
 Pat Quinn, Governor  
 John K. Holtton, Ph.D., Director  
 December 7, 2012

## FY15 Enacted Budget Agency Highlights

- The Fiscal Year 2015 enacted budget for the Department totals approximately \$1.13 billion, which is an increase of \$17.1 million, or 1.5% over the FY14 enacted appropriation.
- The General Revenue funds budget totals approximately \$933.1 million, and represents a decrease of \$97.8 million, or -9.5% from the FY14 budget. The maintenance increases that were included in the budget are below.
  - \$32.5 million for IDoA for transition and rebalancing initiatives pursuant to the Colbert Consent Decree to move eligible persons out of nursing homes
  - \$3.8 million for increase Adult Protective Services abuse investigations
  - \$3.5 million for continuation of IDoA's Balance Incentive Program projects
- Direct federal budget funds totals \$101.6 million, which is an increase of \$16 million, or 18.6% from the FY14 appropriation for added spending authority. The adjustments reflect the following:
  - \$5 million for Title III Older Americans Act Social Services
  - \$10 million for Nutritional Programs

# Appropriations by Funding Source and Distribution

(\$ in 000s)	FY 14 Enacted Budget	FY15 Enacted Budget	FY15 over FY14 \$ Change	FY15 over FY14 % Change
<b>All Funds</b>	<b>\$1,121,437.3</b>	<b>\$1,138,628.0</b>	<b>\$17,190.7</b>	<b>1.5%</b>
General Revenue	\$1,030,854.3	\$933,093.9	(\$97,760.4)	(9.5%)
Direct Federal Funds	\$85,638.0	\$101,589.1	\$15,951.1	18.6%
Other State Funds (OSF)	\$4,945.0	\$103,945.0	\$99,000.0	NA*



\*\$99 million has been appropriated in FY 15 from the Human Services Commitment Fund.

# Illinois Department on Aging



---

## **Fiscal Year 2015 Highlights by Programmatic Areas**

# Community Care Program (CCP) Services

---

- The Community Care Program serves as a viable and cost effective alternative to nursing facilities as all participants are eligible for nursing facility placement. The program is also partially supported by a 1915(c) Federal Medicaid waiver.
- CCP participants receive a holistic array of CCP services to facilitate independence for as long as possible in the most integrated community-based setting of their choice. CCP core services in FY15 include: in-home service, adult day service, emergency home response service, and automated medication device service.
- In fiscal year 2015, approximately 82,600 older adults will be served on an average monthly basis under the Community Care Program fee-for service program.
- The CCP caseload average reflects the projected net results after accommodating for 20,000 CCP Medicaid clients that will be transferred to the capitated coordinated care program under the Medicare Medicaid Alignment Initiative during FY15.

During the last Spring legislative session, the General Assembly passed Public Act 98-0098 or HB2275 that established significant programmatic and fiscal reforms to manage the Community Care Program. In support of eliminating the practice of rolling over unfunded liability from one fiscal year to the other, the Act includes the following major provisions:

- **Service Authorization Guidelines** for Case Coordination Units that became effective on May 1, 2013.
- Mandating **Electronic Visit Verification (EVV)** for all In-Home Service provider agencies that was fast tracked as a cost savings measure by the Administration and became effective on July 1, 2013. Currently, all provider agencies are EVV compliant.
- Adoption of a **7-minute rounding** policy for billing CCP service units - which the Department implemented on May 1, 2013.
- Focus on improving **CCP Medicaid enrollment** to maximize federal receipts, which is ongoing and has been aided by a root cause analysis and increased field monitoring and onsite reviews. The required stakeholders are ongoing meetings and are informing substantive reform activities.
- Partner with HFS and other agencies on the **Balancing Incentive Program** to secure enhanced federal match to strengthen the capacity and delivery system of Illinois long term care system (i.e., development of the uniform assessment tool for services, conflict free case management, and coordinated point-of-entry).

# Community Care Program FY15 Budget Allocation

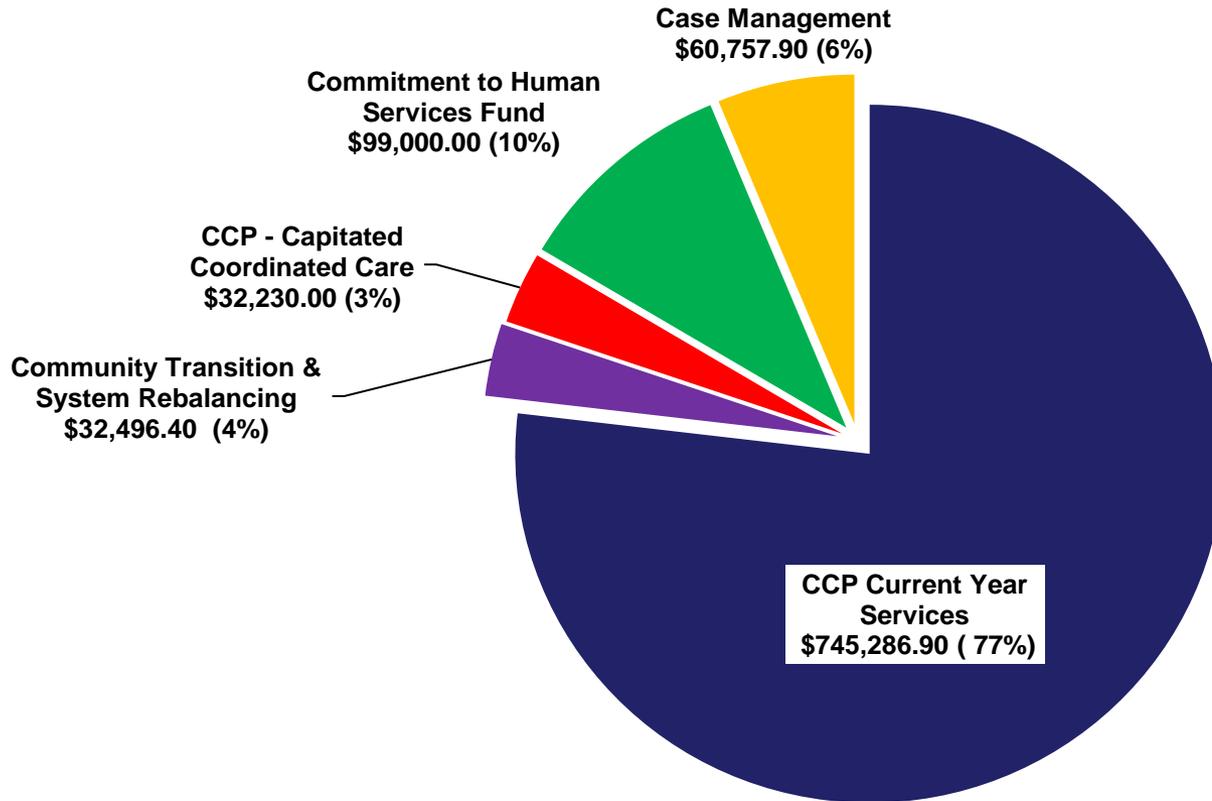
The CCP services budget funds:

- CCP overall monthly caseload averaging approximately 82,600
- Implementation of the Colbert Consent Decree, and
- Transfer of approximately 20,000 CCP clients to managed care

Community Care Program Budget (\$ in thousands)	FY14 Enacted Budget	FY15 Introduced Budget	FY 15 Enacted Budget	FY15 over FY14 Budget	
				\$ Change	% Change
CCP Current Year Services	\$882,821.4	\$904,256.0	\$745,286.9	(\$137,534.5)	(15.6%)
CCP Prior Year (PY) Liability	\$0.0	\$0.0	\$0	\$0	N/A
Community Transition & System Rebalancing	\$0.0	\$32,496.4	\$32,496.4	\$32,496.4	100%
CCP - Capitated Coordinated Care	\$32,230.0	\$101,200.0	\$32,230.0	\$0	N/A
Commitment to Human Services Fund	\$0	\$0	\$99,000.0	\$99,000.0	100%
<b>Sub-Total Services</b>	<b>\$915,051.4</b>	<b>\$1,037,952.4</b>	<b>\$909,013.3</b>	<b>(\$6,038.1)</b>	<b>(.6%)</b>
Case Management	\$60,757.9	\$63,735.4	\$60,757.9	\$0	N/A
<b>Total Community Care Program (All Funds)</b>	<b>\$975,809.3</b>	<b>\$1,101,687.8</b>	<b>\$969,771.2</b>	<b>(\$6,038.1)</b>	<b>(.6%)</b>

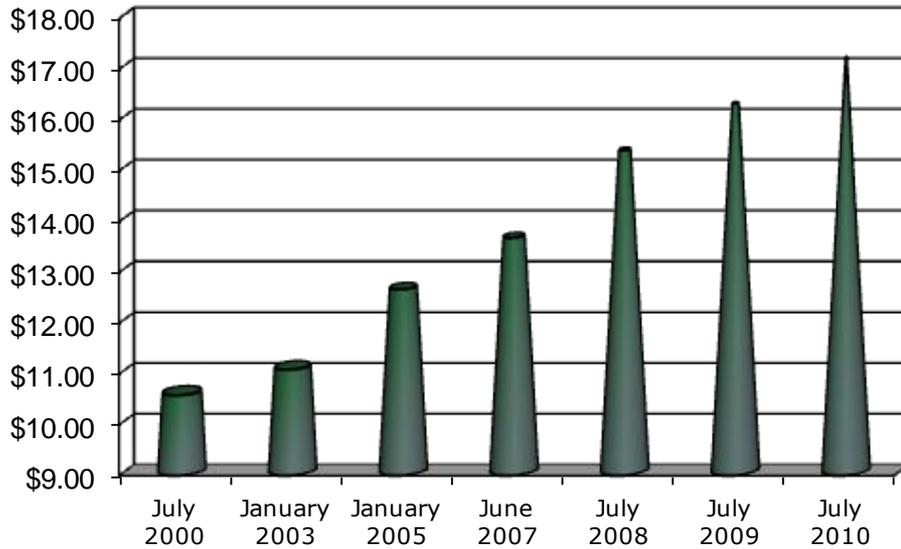


## Community Care Program FY15 Enacted Budget Summary



The FY15 Enacted Budget includes \$870.8 million General Revenue funds for Community Care Program Services.

## In-Home Service Fee-for-Service Reimbursement Hourly Rate History Summary\*



Effective Date	Rate	\$ Change	% Change
1-Jul-10	\$17.14	\$0.91	5.6%
1-Jul-09	\$16.23	\$0.91	5.9%
1-Jul-08	\$15.32	\$1.70	12.5%
1-Jun-07	\$13.62	\$1.00	7.9%
1-Jan-05	\$12.62	\$1.56	14.1%
1-Jan-03	\$11.06	\$0.50	4.7%
1-Jul-00	\$10.56	\$0.26	2.5%

\*Does not include the unit rate for the health insurance benefit for eligible homecare providers of \$1.61 per hour.

# Medicaid Reform & Managed Care

- Public Act 96-1501 established policy reforms to improve care coordination and the redesign of Illinois' healthcare delivery system to be more patient-centered, while focusing on improved health outcomes, enhanced access, patient safety and cost efficiencies.
- The Department of Healthcare and Family Services, in collaboration with the Departments on Aging and Human Services will transfer eligible older adults and persons with disabilities to risk-based managed care programs by 2015, through ***The Innovations Project***.
- These risk-based managed care initiatives include:
  - ***Retaining Care Coordination Entities*** and ***Managed Community Care Networks*** to provide enhanced case coordination services to older adults and persons with disabilities in the Medicaid Program.
  - The ***Integrated Care Program (ICP)*** that impacts Community Care Program (CCP) clients who receive Medicaid waiver services in select areas of the State.
  - The ***Medicare/Medicaid Alignment Initiative (MMAI)*** that will impact CCP clients who are dually eligible for Medicaid and Medicare in the same service area as the ICP.
- The Department's fiscal year 2015 budget includes \$32.2 million to cover the per member per month (PMPM) share for older adults in CCP who transfer to managed care.



## Balancing Incentive Program (BIP) Goals and Status Update

---

- BIP provides the state an additional 2% FFP on LTC services provided in the home & community between July 2013 and September 2015.
- Illinois agreed to spend at least 50% of LTC funding in the home & community based services and implement three core principles:
  - 1) Develop a core assessment / uniform assessment tool (UAT)
  - 2) Conflict free case management, and
  - 3) A no wrong door approach
- IDOA's FY15 budget includes \$3.5 million in GRF for's Aging BIP Projects:
  - 1) Senior Helpline to act as the required BIP toll-free hotline - \$350K
  - 2) Extending Ombudsman protections to persons in Medicaid waivers as allowed in HB1191 - \$1.12M
  - 3) Improving deflection from nursing home placements before they happen - \$1.3M, and
  - 4) Improvements in the Aging & Disability Resource Center/Networks (ADRC/ADRN) and increase inclusion of disability services - \$776K

## Colbert Consent Decree Implementation Plan

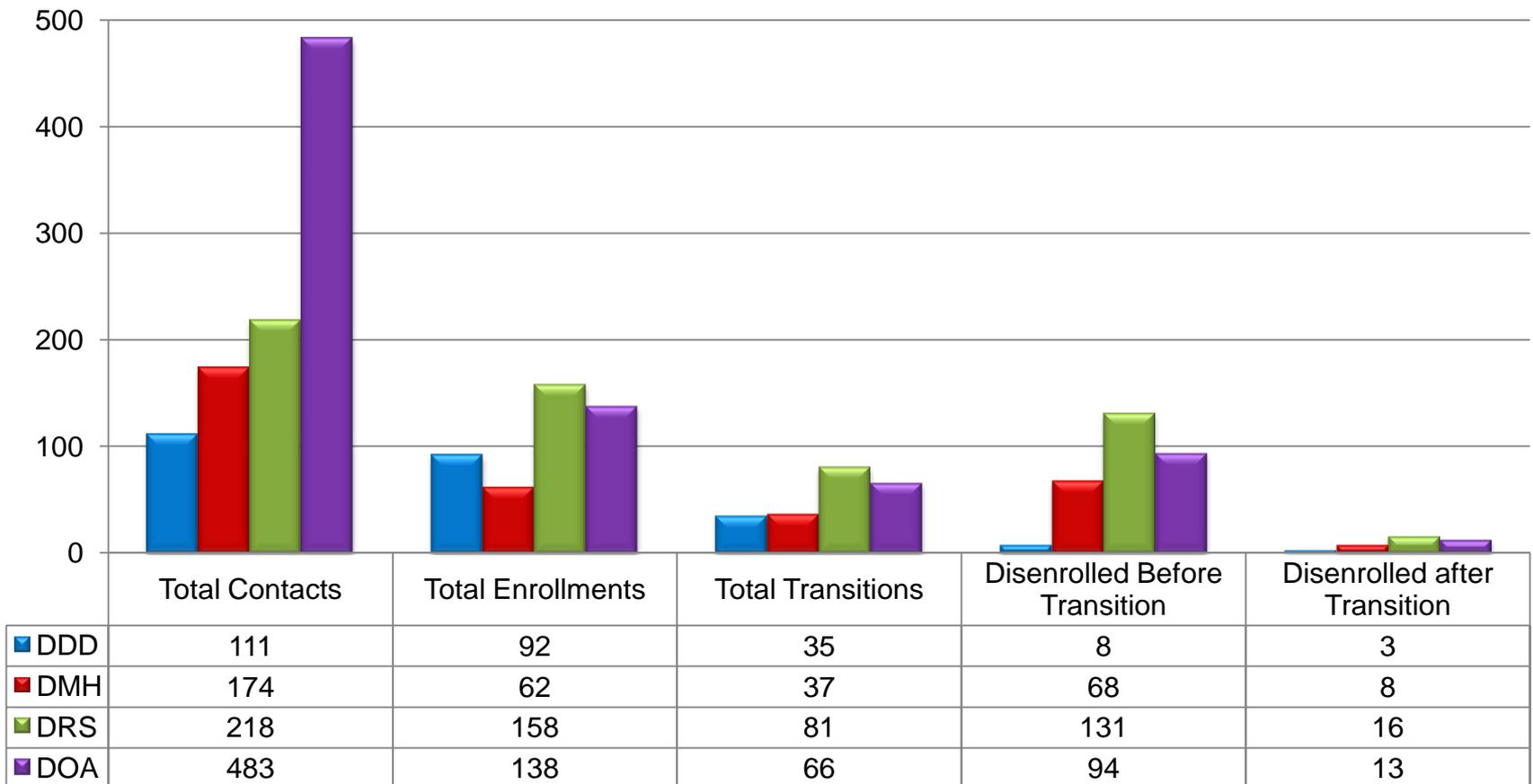
- Responsibility for the Colbert Consent Decree Implementation was transferred from the Department of Healthcare and Family Services to the Department on Aging on January 21, 2014.
- Aging is managing Phase II of the Colbert implementation collaboratively with the other co-defendants: Illinois Department of Healthcare and Family Services, Office of the Governor, and the Departments of Public Health and Human Services.
- The Implementation Plan requires outreach, education, evaluation, provision of needed resources and Class Member collaboration in setting transition goals through May 8, 2015, to gather data to develop a cost-neutral plan for effective transition of Colbert Class members in the future.
- The Implementation Plan requires that the State provide outreach, education, evaluation, resources to acquire housing and services to a requisite number of Colbert Class Members by May 8, 2015. Data will be gathered to develop a cost-neutral plan for effective transition of Colbert Class Members in the future.
- Services necessary to transition Class Members may be provided by Community Mental Health Centers (CMHCs), Housing Locator Agencies or MCOs. Services post-transition are arranged by MCOs and may be provided by CMHCs, CCUs or Centers for Independent Living.
- The FY15 budget includes \$32.5 million in GRF to administer the Colbert Consent Decree plan.

## **Pathways to Community Living: Money Follows the Person (or MFP)**

- The Departments on Aging, Healthcare and Family Services, Human Services and the Illinois Housing Development Authority (IHDA) are coordinating their efforts to redesign Illinois' long term care system in part, through the Pathways to Community Living Program based on the MFP demonstration award from the federal Centers for Medicare and Medicaid Services through 2016.
- The Program provides services to transition Medicaid-eligible persons residing in institutional settings to appropriate home and community-based settings (HCBS), as well as to further the state's overall long-term care (LTC) rebalancing strategies.
- Eligible participants must have been in a nursing facility for at least 90 days, and must be enrolled in Medicaid for at least one (1) day before their transition.
- Since the program became operational, there have been 296 transitions through May 2014 that have been facilitated by the Department's Care Coordination Units.

## Pathways to Community Living (Money Follows the Person)

### Calendar Year 2013 Enrollment



## Senior Health Insurance Program (SHIP)

- The Senior Health Insurance Program (SHIP) was transferred from the Department of Insurance to the Department on Aging per Executive Order 13-01 on April 1, 2013.
- SHIP provides one-on-one counseling to Medicare beneficiaries to help them navigate complex health and long-term care issues. The transfer promotes a natural extension of services such as Information and Assistance and Benefits Counseling, as well as furthers Aging and Disability Resource Center (ADRC) efforts.
- SHIP includes a network of volunteer counselors who are trained by the Department and available to assist Medicare beneficiaries through local community partner agencies statewide.
- SHIP is supported by a federal grant. On the national level, the administration of the SHIP Program recently transferred from the Centers for Medicare and Medicaid Services to the Administration for Community Living.
- The FY 15 Budget includes \$3.0 million in spending authority to support the SHIP Program.

The BEAM Division serves the agency in the verification of benefits, eligibility, assistance and monitoring for various senior services throughout Illinois. Through collaboration with other divisions within the Department on Aging, many state agencies and numerous Community Care Units, Managed Care Organizations and other community partners, the BEAM Division's services span the entire state to provide assistance with available services for older adults and caregivers.

Responsibilities of the BEAM Division include:

- Certification of eligibility for mass transit districts' Ride Free Programs for seniors and persons with disabilities;
- Certification of the Secretary of State's License Plate Discount Program for seniors and persons with disabilities;
- Management and implementation of the Managed Care Program, including the management of client data and verification of eligibility for the Community Care Program and Managed Care Organizations;
- Investigation of billing rejections and other client information issues to reduce data input errors, improve federal match for Medicaid reimbursement and provide assistance in fraud prevention.

# Human Services Framework Project

- The Illinois Human Services and Healthcare Framework Project is a multi-year, comprehensive project of all human service departments.
- Designed to develop a system to support data-sharing and efficient delivery of programs and services among the partner agencies.
- The Framework Project will utilize modern technology and streamlined, standardized processes to expand residents' access to human and healthcare services, enhance the state's planning ability, and improve the efficiency of the present system.
- The Department on Aging is partnering with health and human service agencies to leverage federal funding for this initiative, and to complete the initial planning and assessment processes.

## Adult Protective Services (APS)

- The Department serves as the single Adult Protective Services (APS) agency in the State to investigate allegations of abuse, neglect and exploitation (ANE) of older adults and adults with disabilities who reside in the community. Services are provided statewide in coordination with 42 provider agencies.
- The Department is engaged in a **statewide education and awareness program** to increase the general public's understanding of the prevalence of ANE, as well as the resources available to reduce and prevent ANE; and also to educate professionals on the indicators of ANE.
- The Department is expanding its adult **fatality review teams** to all its planning and service areas, to promote a coordinated response to deaths that occur as a result of abuse and neglect.
- In fiscal year 2015, the Department will initiate services, on a statewide basis, to older adults and persons with disabilities who **self-neglect**.
- The Department will be establishing a **registry** in fiscal year 2015 that will include a listing of those caregivers who have verified findings of abuse, neglect or exploitation.
- The FY15 budget includes **\$23.1 million** in GRF for Adult Protective Services which reflects an increase of \$3.8 million, or almost 20% to respond to increased abuse reports.

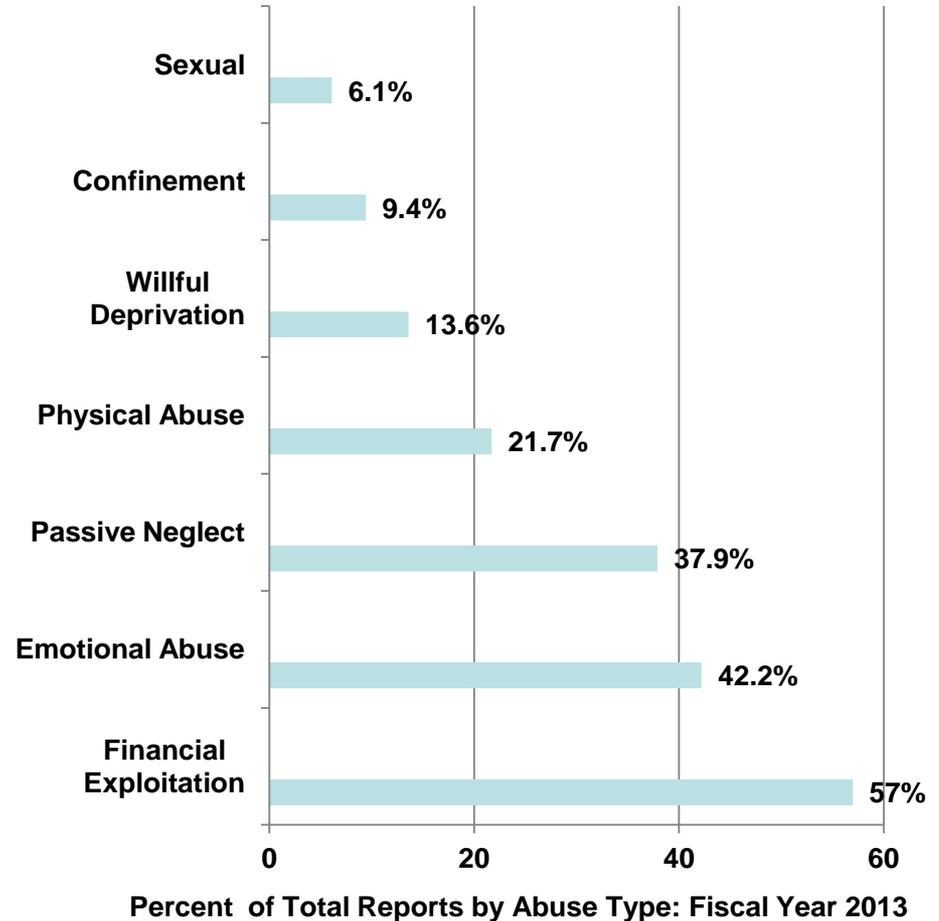
## Adult Protective Services FY15 Budget ANE Statistics by Abuse Type

### ANE Reports

- FY 2013 Actual: 11,756 (60+)
- FY 2014 Estimated: 12,200 (60+)
- FY 2014 Projected: 2,625 (18-59)
- FY 2015 Projected: 13,500 (60+)
- FY 2015 Projected: 4,500 (18-59)

### APS Budget (\$000's)

- FY 2013 Budget: \$10,000.0
- FY 2014 Budget: \$19,268.0
- FY 2015 Budget: \$23,100.0



## Long-Term Care Ombudsman Program

- The LTCOP provides outreach, education and refers Medicaid eligible persons residing in licensed facilities to the Pathways to Community Living Program, formally referred to as MFP. Since March 2010, Ombudsmen have made over 2,000 MFP referrals and have provided 8,492 MFP Consultations.
- With the three (3) consent decrees, Williams, Ligas, and Colbert, the LTCOP role has been expanded to inform this population of their right to transition and their right of choice.
- The budget maintains funding to enable the LTCOP to attain the Institute of Medicine recommended ratio of 1 FTE paid ombudsman to 2,000 licensed beds.
- On February 22, 2013, the Department of Healthcare and Family Services entered into a memorandum of understanding with Federal CMS to begin a demonstration project to provide integrated benefits to Medicare-Medicaid enrollees in targeted geographic areas. With the infrastructure in place, legislation was passed during the 98<sup>th</sup> General Assembly to expand the legal authority of the LTCOP to serve and advocate on behalf of Medicaid and managed care participants regardless of where they reside.

# FY15 Older Americans Act: Community Supportive Services

- The Department distributes Older Americans Act (OAA) funds to 13 Area Agencies on Aging (AAAs).
- In turn, the AAAs contract with approximately 237 service providers to provide services for older adults at the local level.
- Older Americans Act services includes: Information & Assistance, Home Delivered and Congregate Meals, Preventative Health, Respite, Transportation, Employment, and other supportive services.
- In fiscal year 2015, OAS funds are projected to serve 494,400 or 22%-of Illinois' approximately 2.3 million older adults age 60 and over.
- The FY15 budget includes \$98.6 million, which is an increase of \$16 million or 19.3% in spending authority for OAA funds.\*

*\*Increased spending authority as outlined in the state budget does not mean that the Illinois Department on Aging will receive the additional federal funds from the Administration for Community Living. Actual federal awards are based on the final federal budget.*

## Community Supportive Services

Description	Fund	FY14 Budget	FY15 Enacted	Δ From FY14 Budget	% From FY14
Balancing Incentive Program (BIP)	001	\$0	\$3,476,600	\$3,476,600	N/A
Adult Protective Services	001	\$19,259,700	\$23,059,700	\$3,800,000	19.7%
Senior Employment Specialist Program	001	\$190,300	\$190,300	\$0	0.0%
Grandparents Raising Grandchildren Program	001	\$300,000	\$300,000	\$0	0.0%
Home Delivered Meals	001	\$11,623,200	\$11,623,200	\$0	0.0%
Specialized Training Program	001	\$50,000	\$50,000	\$0	0.0%
Monitoring and Support Services	001	\$182,000	\$182,000	\$0	0.0%
Illinois Council on Aging	001	\$26,000	\$26,000	\$0	0.0%

## Community Supportive Services

Description	Fund	FY14 Budget	FY15 Enacted	Δ From FY14 Budget	% From FY14
USDA Admin	001	\$31,100	\$31,100	\$0	0.0%
Helpline	001	\$1,393,900	\$1,393,900	\$0	0.0%
Benefits Eligibility Assistance and Monitoring BEAM	001	\$1,848,700	\$1,848,700	\$0	0.0%
Ombudsman Program	001	\$1,348,400	\$1,348,400	\$0	0.0%
Retired Senior Volunteer Program	001	\$551,800	\$551,800	\$0	0.0%
Planning and Service Grants	001	\$7,722,000	\$7,722,000	\$0	0.0%
Foster Grandparents Program	001	\$241,400	\$241,400	\$0	0.0%

## Community Supportive Services

Description	Fund	FY14 Budget	FY15 Enacted	Δ From FY14 Budget	% From FY14
Long-Term Care Systems Development	001	\$243,800	\$243,800	\$0	0.0%
Community Based Services Equal Distribution	001	\$751,200	\$751,200	\$0	0.0%
USDA Admin	618	\$134,000	\$200,000	\$66,000	49.3%
Older Americans Training	618	\$125,000	\$125,000	\$0	0.0%
Discretionary Projects	618	\$3,000,000	\$4,000,000	\$1,000,000	33.3%
Ombudsman Training & Conference Planning	618	\$150,000	\$150,000	\$0	0.0%
Administrative Expenses Title V	618	\$300,000	\$300,000	\$0	0.0%

## Community Supportive Services

Description	Fund	FY14 Budget	FY15 Enacted	Δ From FY14 Budget	% From FY14
Child and Adult Food Care Program	618	\$200,000	\$200,000	\$0	0.0%
Title V Employment Services	618	\$6,500,000	\$6,500,000	\$0	0.0%
Title III Social Services	618	\$17,000,000	\$22,000,000	\$5,000,000	29.4%
National Lunch Program	618	\$2,500,000	\$2,500,000	\$0	0.0%
National Family Caregiver Support Program	618	\$7,500,000	\$7,500,000	\$0	0.0%
Title VII Prevention of Elder Abuse	618	\$500,000	\$500,000	\$0	0.0%
Title VII Long-Term Care Ombudsman Services	618	\$1,000,000	\$1,000,000	\$0	0.0%
Title III D Preventive Health	618	\$1,000,000	\$1,000,000	\$0	0.0%
Nutrition Services Incentive Program	618	\$8,500,000	\$8,500,000	\$0	0.0%

## Community Supportive Services

Description	Fund	FY14 Budget	FY15 Enacted	Δ From FY14 Budget	% From FY14
Title III C-1 Congregate Meals Program	618	\$21,000,000	\$26,000,000	\$5,000,000	23.8%
Title III C-2 Home Delivered Meals Program	618	\$11,000,000	\$16,000,000	\$5,000,000	45.5%
Senior Health Insurance Program	396	\$3,000,000	\$3,000,000	\$0	0.0%
Expenses of the Private Partnership Projects	830	\$345,000	\$345,000	\$0	0.0%
Senior Health Assistance Programs	733	\$1,600,000	\$1,600,000	\$0	0.0%
Long-Term Care Ombudsman Fund	698	\$3,000,000	\$3,000,000	\$0	0.0%

**THANK YOU!**

For more information about the  
Department or for assistance  
accessing services visit:

**[www.state.il.us/aging](http://www.state.il.us/aging)**

**or call the Senior HelpLine at:**

**1-800-252-8966**

1-888-206-1327 (TTY)