

Illinois Department on Aging



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Pat Quinn, Governor

Fiscal Year 2014 Introduced Budget - Aging Network Briefing

March 7, 2013



Governor's FY14 Fiscal Strategy

BALANCE

- Stabilizing Medicaid
 - Rebalancing
 - Facility Closures
- Office consolidations & lease reductions
- Program eliminations

BUILD

Illinois Jobs Now (\$31 Billion)
Move Illinois – Tollway (12 billion)
Clean Water Initiative (\$1 Billion)
= \$44 Billion in Capital and Thousands of Jobs

GROW

Illinois has added 136,300 jobs since December 2009, including
41,900 jobs in calendar year 2012

What this budget is: Balanced, Honest & Difficult

Governor's FY14 Fiscal Strategy

HUMAN SERVICES SECTOR

(Illinois Department on Aging)

Balance: Achieving efficiencies and paying old bills

Build: Serving the growing elderly population

Grow: Reforming Adult Protective Services

Mission Statement & Strategic Priorities

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.

<u>STRATEGIC PRIORITY I.</u>	<u>STRATEGIC PRIORITY II.</u>	<u>STRATEGIC PRIORITY III.</u>	<u>STRATEGIC PRIORITY IV.</u>	<u>STRATEGIC PRIORITY V.</u>
<p>Rebalance Illinois' long term care system to expand in-home & community-based services for older adults and their caregivers.</p>	<p>Advocate for the protection of the rights of older adults.</p>	<p>Improve access to public benefits, affordable health care benefits, and community-based services for older adults.</p>	<p>Maximize federal, state, local and private resources to increase healthy aging options and social programs for older adults.</p>	<p>Promote responsive management, accountability and advanced technologies.</p>

We Serve a Rapidly Growing Population Who Seek More Services, Innovation and Choice

There are currently 2.3 million older adults across Illinois...
They are Rapidly Growing, Staying Active, and Living Longer!

Illinois	2010	% of Total	2015	% of Total	2020	% of Total
State Population	12,830,632	100%	13,748,695	100%	14,316,487	100%
Total, Older Adults-IL	2,274,642	18%	2,653,198	19%	3,064,634	21%

Summary of Agency Operations

The Department administers a comprehensive service delivery system for the state's growing 2.3 million older adults and their caregivers.

Services are provided in coordination with 13 Area Agencies on Aging and hundreds of contracted provider agencies at the local level.

Currently, the Department's major programs and services include:

- Community Care Program (CCP),
- Prevention of Elder Abuse and Self Neglect,
- Long Term Care Ombudsman Program,
- Older Americans Act funded services such as: information & assistance, outreach, nutritional services, employment services, and transportation, along with other community supportive services, and
- Eligibility determination for various senior benefits.

Agency FY14 Introduced Budget Highlights

- The Fiscal Year 2014 Introduced Budget for the Department totals approximately \$1.3 billion, which is an increase of \$388.6 million, or 43.9% over the FY13 current appropriations.
- *The **General Revenue funds*** (GRF) budget totals approximately \$1.2 billion, and represents an increase of \$399.1 million, or 51% over the FY13 enacted budget.
- ***Direct Federal budget funds*** totals \$85.6 million, which is a net **decrease** of \$2.4 million, or 2.8% from the FY13 enacted appropriations. The change reflects a slight decrease in spending authority for federally supported Older Americans Act services.
- The ***Other State Funds (OSF)*** budget totals \$4.9 million which is a net **decrease** of \$8.0 million or 61.8% from the FY13 enacted budget. This change in the Other State Funds budget was mainly due to a reallocation of \$9 million in the current budget for Medicaid Community Care program services funded from the Tobacco Settlement Recovery Fund, and the increase of \$1.0 million in the Long Term Care Ombudsman Fund to maintain nursing home reform initiatives.

The FY14 funding adjustments reflect and support the following major programmatic developments:

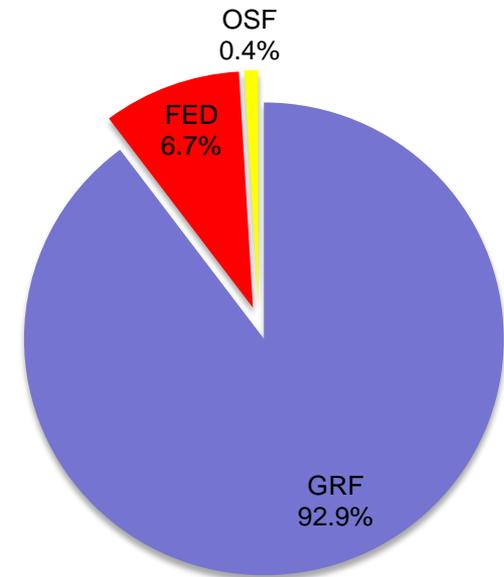
- ✓ Increased ***Community Care Program (CCP) services utilization and caseload growth*** of approximately 96,000 (or 12% over FY13) on an average monthly basis of low income frail older adults needing long term care services. CCP continues to serve as a client preferred and cost effective alternative to nursing home placement - (Traditional CCP Lines \$173.5 million).
- ✓ Payment for ***CCP prior year unfunded liability*** (\$142 million).
- ✓ Implementation of ***Managed Care*** for eligible CCP clients to coordinate and improve their medical and long term care services within home and community settings - (\$67.6 million).

Agency FY14 Introduced Budget Highlights

- ✓ Following national trends and for enhanced service coordination and delivery, the Department will assume oversight of the **Senior Health Insurance Program (SHIP)**, effective April 1, 2013, pursuant to Executive Order 13-01, signed on January 1, 2013 - (\$3 million).
- ✓ *Last, but certainly not least, this budget reflects legislative action underway following extensive interagency and stakeholders collaboration for Aging to assume responsibility for **Adult Protective Services (APS)** and abuse investigations for disabled persons effective July 1, 2013, along with its current mandate for similar services (i.e., **Elder Abuse & Neglect** services) for older adults - (\$20 million).*
- ✓ The budget also supports 170 staff positions which includes 13 for SHIP and 2 for APS.

Appropriations by **Funding Source and Distribution**

(\$ in 000s)	FY13 Enacted Budget	FY14 Budget Request	\$ change	% Change
All Funds	\$886,157.8	\$1,274,798.3	\$388,640.5	43.9%
General Revenue	\$785,139.8	\$1,184,215.3	\$399,075.5	50.8%
Direct Federal Funds	\$88,073.0	\$85,638.0	(\$2,435.0)	(\$2.8%)
Other State Funds (OSF)	\$12,945.0	\$4,945.0	(\$8,000.0)	(61.8%)



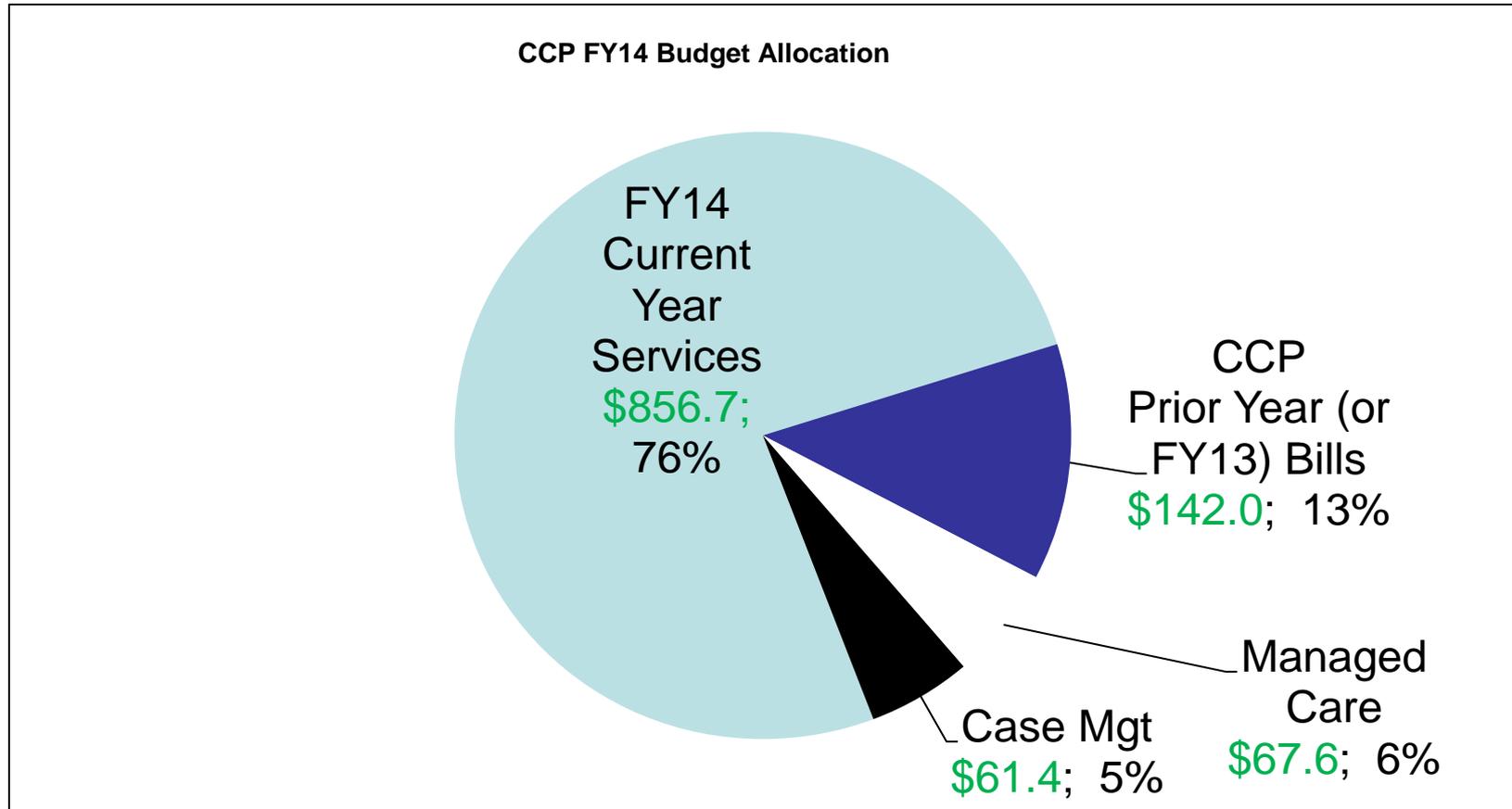
Illinois Department on Aging



Fiscal Year 2014 Highlights by Programmatic Areas

Community Care Program (\$ in millions)

The budget includes approximately **\$1.13 Billion** for Community Care Program Services



Community Care Program

(cont'd)

- The CCP services budget funds:
 - CCP overall caseload growth averaging approximately 12% annually and increased service utilization,
 - Covers projected unfunded prior year's (FY13) liability rollover,
 - Transfer of CCP clients to managed care under the Integrated Care Program-2 (ICP-2), [4,500 clients], and to the Medicare Medicaid Alignment Initiative (MMAI) [23,000 clients].

Community Care Program Budget (\$ in thousands)	FY13 Enacted Budget*	FY14 Introduced Budget	\$ Change	% Change
CCP Current Year Services	\$696,124.4	\$856,650.0	\$160,525.6	23.1%
CCP Prior Year (PY) Liability *	\$0.0	\$142,000.0	\$142,000.0	100.0%
CCP - Capitated Coordinated Care/MCOs	\$0.0	\$67,644.3	\$67,644.3	100.0%
Sub-Total Services	\$696,124.4	\$1,066,294.3	\$370,169.9	53.2%
Case Management	\$57,406.4	\$61,371.6	\$3,965.2	6.9%
Total Community Care Program (All Funds)	\$753,530.8	\$1,127,665.9	\$374,135.1	49.7%

* **FY13 Budget Shortfall:** The Department has already expended approximately \$173 million for CCP FY12 and other prior years bills out of the FY13 appropriations, nor were major FY13 proposed changes related to increasing the Determination of Need and imposing a 133% of FPL income threshold for eligibility permitted by federal CMS. What is more, the agency is experiencing continued payment delays to CCP providers in excess of six months. The lack of adequate funding to serve an increasing older adults population will create added operational hardship on CCP vendors, and potentially clients alike; while the FY14 introduced budget would not accommodate total projected liabilities despite the cost savings and management efficiency controls planned.

Community Care Program

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- The Community Care Program serves as a viable and cost effective alternative to nursing homes as all participants are eligible for nursing home placement. The program is also partially supported by a 1915(c) Federal Medicaid waiver.
- CCP participants receive a holistic array of CCP services to remain independent for as long as possible in the most integrated community-based setting of their choice.
- In FY2014, approximately 96,100 older adults will be serviced on an average monthly basis under the CCP service umbrella, which is an increase of 12% over the current year.
- The projected caseload includes approximately 27,500 or approximately 29% of the CCP caseload that will be transferred to managed care under the Integrated Care Program and the Medicare-Medicaid Alignment Initiative, which are discussed in subsequent sections of this presentation.

Community Care Program FY14 Goals and Objectives

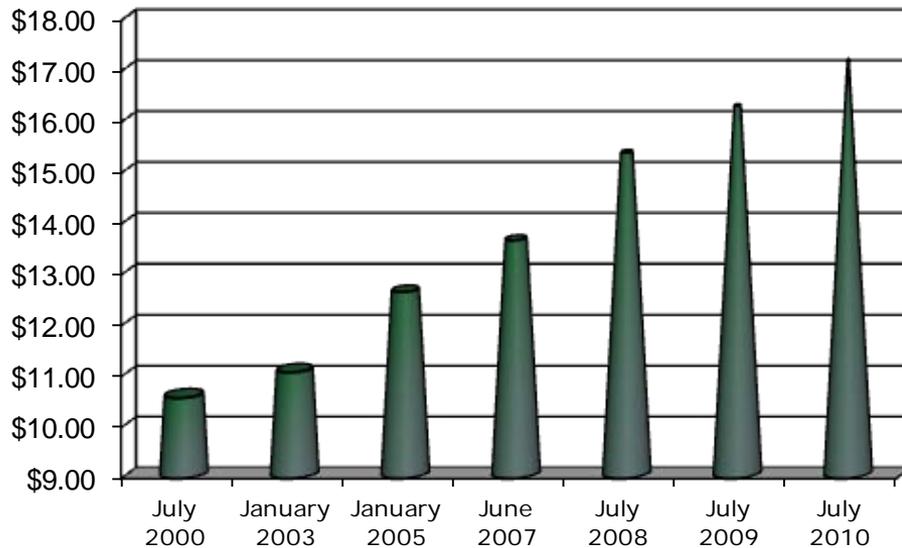
- Recognizing the opportunity to serve a growing population, in addition to changes under the Federal Affordable Care Act amidst ongoing constraints of the State's fiscal condition, the fiscal 2014 budget also calls for several program efficiencies and cost containing measures which include the following:
- Continue efforts to **Rebalance Illinois' Long Term Care system** to enhance services and care options for older adults in integrated home and community settings and enable consumer choice.
- Pursuant to the Save Medicaid Access and Resources Together (SMART) Act, all CCP In-Home Service providers will be required to implement **Electronic Visit Verification** system in FY14 for better program oversight, efficiency and fraud prevention;

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Community Care Program FY14 Goals and Objectives

- Improve upfront **Medicaid Enrollment** of eligible clients which consequently leads to serving lower income clients in greatest need, and the ability to leverage greater federal financial participation / Medicaid matching funds;
- Implement added program controls that include **task based parameters** within CCP; and
- Participate in the **interagency redesign of a new assessment tool** to qualify for LTC services.
- Participate in the application for the **Balancing Incentive Program** to obtain increased federal matching funds and to improve community capacity.

In-Home Service Hourly Rate History Summary

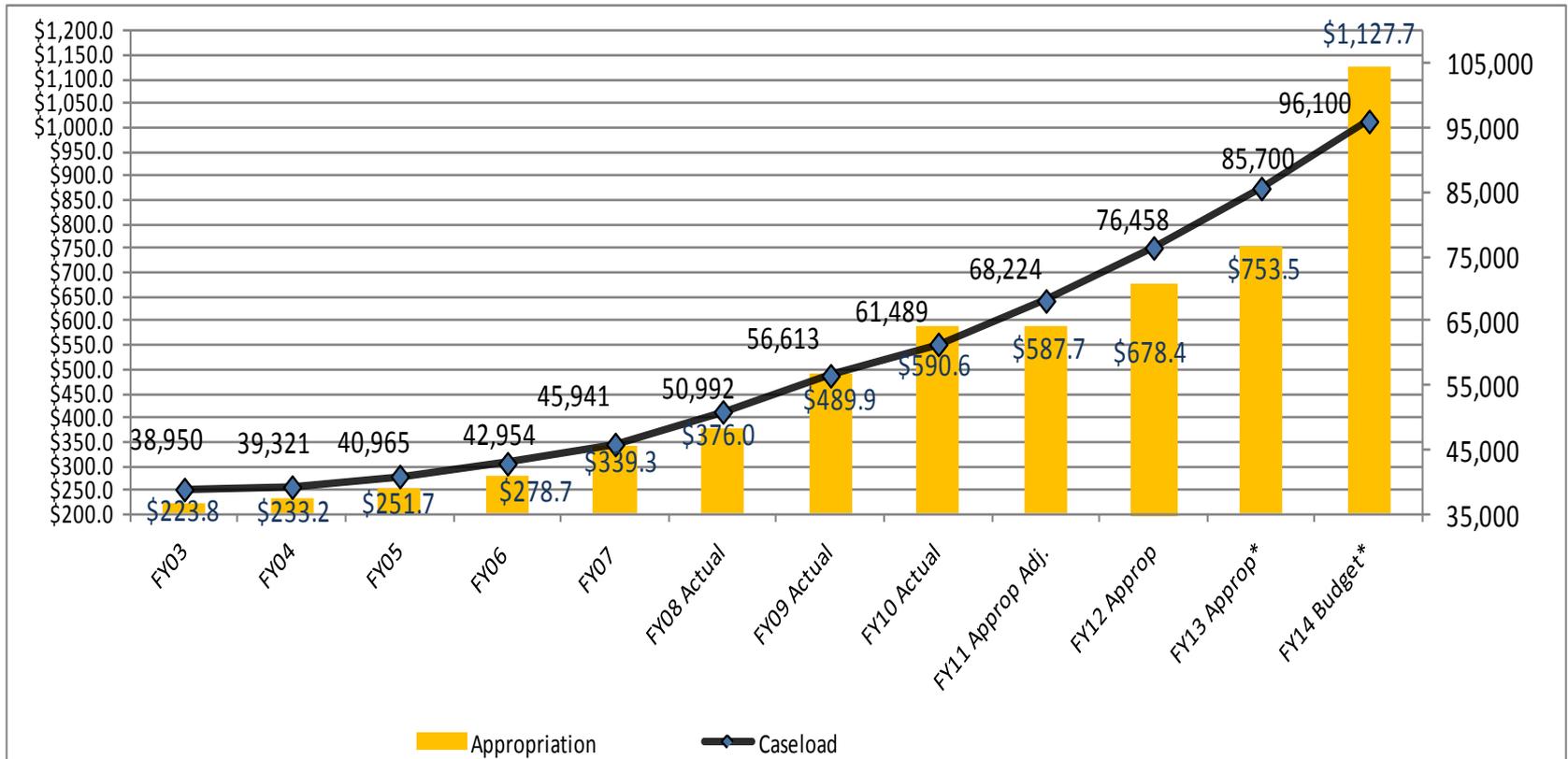


Effective Date	Rate	\$ Change	% Change
1-Jul-10	\$17.14	\$.91	5.6%
1-Jul-09	\$16.23	\$0.91	5.9%
1-Jul-08	\$15.32	\$1.70	12.5%
1-Jun-07	\$13.62	\$1.00	7.9%
1-Jan-05	\$12.62	\$1.56	14.1%
1-Jan-03	\$11.06	\$0.50	4.7%
1-Jul-00	\$10.56	\$0.26	2.5%

*The unit rate for the health insurance benefit for eligible homecare providers is \$1.61 per hour.

CCP Appropriations & Caseload History

(\$ in Millions)



- The caseload figures for FY13 and FY14 are unadjusted. As such, they include the projected transfers of CCP clients served by Managed Care entities.
- The FY14 Introduced Budget includes \$142 million to cover prior year unfunded liability from FY13.

Medicaid Reform & Managed Care

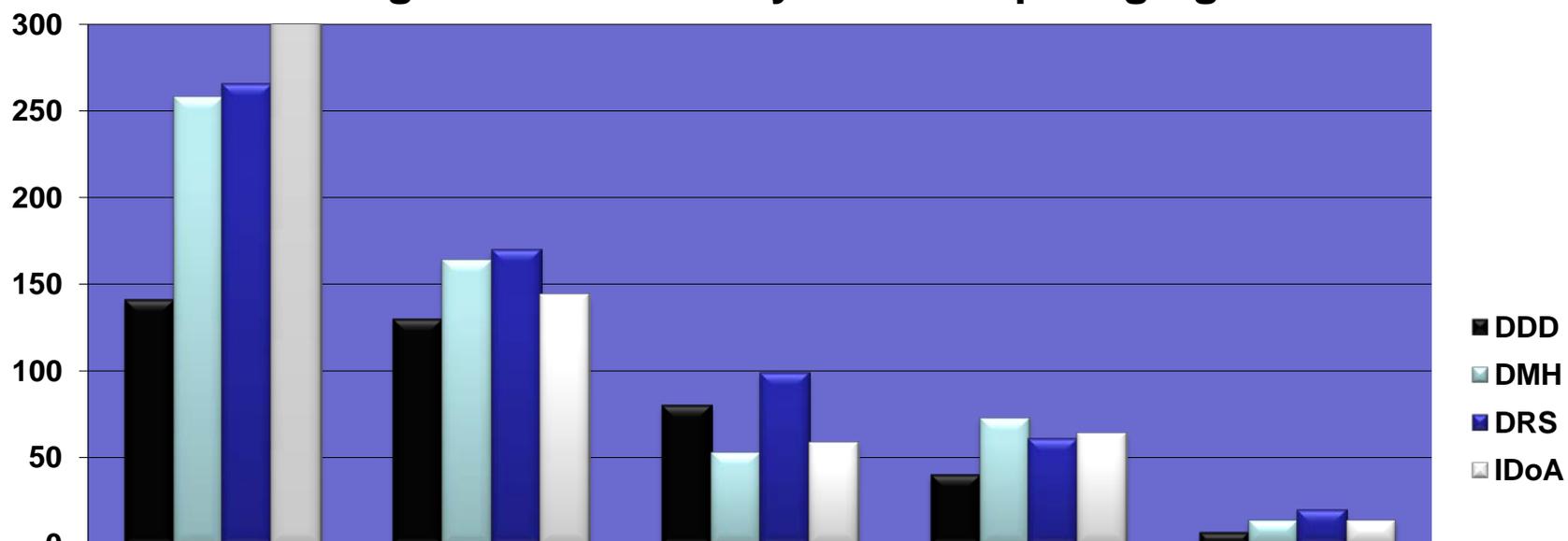
- *Public Act 96-1501* established policy reforms to improve care coordination and the redesign of Illinois' healthcare delivery system to be more patient-centered, while focusing on improved health outcomes, enhanced access, patient safety and cost efficiencies.
- The Department of Healthcare and Family 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 care 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, and
 - The ***Medicare/Medicaid Alignment Initiative (Capitation)*** 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 2014 budget includes \$67.6 million to cover the per member per month share for older adults under the Elderly waiver who transfer to managed care.

Pathways to Community Living

also commonly called 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 a total 207 transitions.

2012 Program Outcomes by All Participating Agencies



	Total Contacts	Total Enrollments	Total Transitions	Disenrolled before Transition	Disenrolled after Transition
DDD	141	130	80	40	7
DMH	258	164	53	73	14
DRS	266	170	99	61	20
IDoA	1,717	144	59	64	14

Colbert Consent Decree Implementation Plan

- The Colbert v. Quinn class action lawsuit (9/07) filed on behalf of nursing home residents with disabilities in Cook County resulted in a Consent Decree approved on 12/20/2011.
- The Consent Decree provides Medicaid-eligible nursing home residents in Cook County with supports and services needed in the most integrated community-based settings appropriate to their needs, and which maximize individuals' independence and choice to live their lives similar to individuals without disabilities.
- The defendants and plaintiffs filed an Implementation plan as required by the Consent Decree on November 8, 2012; which began on February 1, 2013, and will continue for two and a half years.

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Colbert Consent Decree Implementation Plan

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- The plan is being implemented under the auspices of the Department of Healthcare and Family Services in conjunction with the other co-defendants: the Office of the Governor, and the Departments of Aging, Public Health and Human Services.
- The plan outlines two and a half years of required initial outreach, evaluations and transition goals. Services will be coordinated by both Care Coordination Units and Managed Care Entities.
- It is projected that 5,000 individuals would be evaluated and 1,100 transitioned from Long Term Care facilities to a community setting, half of whom would be over age 60.

Senior Health Assistance Program (SHIP)
Transfer to Illinois Department on Aging
Effective April 1, 2013

- *Effective April 1, 2013*, the Senior Health Insurance Program (SHIP) will be transferred from the Department of Insurance to the Department on Aging per ***Executive Order 13-01***.
- Nationally, there are 54 SHIP Programs, and currently two-thirds or 36 of them reside within the State Unit on Aging. The SHIP activities align with the Department's mission to help individuals maintain their health and independence in their homes and communities.
- SHIP provides one-on-one counseling to Medicare beneficiaries to help them navigate complex health and long-term care issues. This transfer promotes a natural extension of services such as Information and Assistance and Benefits Counseling, as well as furthers the Department's Aging and Disability Resource Center (ADRC) efforts.
- SHIP is fully funded by a grant from the Centers for Medicare and Medicaid Services. The transfer would also enable the Department to apply for future federal funding opportunities that include providing Options Counseling to "dual eligibles" through the ***Illinois Medicare-Medicaid Alignment Initiative***.
- The FY14 budget includes \$3.0 million in spending authority to support the Senior Health Insurance Program.

Division of Benefits, Eligibility, Assistance & Monitoring (BEAM)

- The division formerly known as Circuit Breaker and Rx Assistance has been redefined and will serve the agency in the verification of benefits, eligibility, assistance and monitoring (BEAM); in close coordination with the agency's well known Senior HelpLine that spans the entire State and covers assistance with all available services for older adults and caregivers.

BEAM responsibilities will include:

- Certify eligibility for mass transit districts for Seniors and Persons with Disabilities Rides Free Programs and the Secretary of State license plate discount;
- Manage client data and verification for the Community Care Program and Managed Care Organizations;
- Assist with intake and provide client information verification for the Benefit Access Application, Community Care Program and Managed Care Organizations, and quality assurance for elderly Medicaid waiver;
- Investigate billing rejects and other client information issues to reduce data input errors, improve federal match for Medicaid reimbursements, and help prevent fraud.
- The budget includes \$3.35 million in GRF for the Senior Helpline and BEAM operations.

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 other social services agencies to leverage federal funding for this initiative, and to complete the initial planning and assessment processes.

Elder Abuse and Neglect & Adult Protective Services (APS)

- Legislation is under consideration by the 98th General Assembly that would establish the Department on Aging as the single adult protective services (APS) agency in the State to investigate allegations of abuse, neglect and exploitation of adults with disabilities and older adults who reside in a domestic setting.
- The Department on Aging plans to build on its existing program model for delivery of elder abuse investigative services to serve adults with disabilities who have been victimized.
- The Department is developing training to assure that the staff of the current 41 provider agencies possess the skills needed, and are aware of the resources available to provide an effective response and appropriate intervention in cases of abuse of adults with disabilities.
- The Department will enter into an inter-agency agreement with the Department of Human Services to assure that a mechanism for referral for services and subsequent follow-up is in place between the service provider agencies and the Divisions of Mental Health, Developmental Disabilities and Rehabilitation Services.
- The GRF budget includes approximately \$20 million for Elder Abuse and Neglect and APS.

Adult Protective Services

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- The Department on Aging projects that the service providers' caseloads will increase by one-third through the addition of services to adults with disabilities.
- For fiscal year 2014, that projection represents 4,225 reports of abuse, neglect and exploitation of adults with disabilities, who live in a domestic setting.
- The FY14 budget projections for Adult Protective Services includes costs associated with:
 - Direct Services (Assessment, Casework and Follow-up)
 - Training
 - Outreach
 - 24 hour response
 - Early Intervention Services
 - Administrative Oversight/Monitoring
 - Money Management, and
 - IT Upgrade

Abuse, Neglect and Exploitation (ANE) Program

- The Illinois Elder Abuse and Neglect Act directs the Department on Aging to establish an intervention program to respond to reports of alleged abuse, neglect and financial exploitation of older adults over the age of 60 who reside in a domestic setting.
- The Department, in conjunction with the 13 Area Agencies on Aging in the State, has designated 41 community agencies that respond to abuse, neglect & exploitation reports.
- Provider agencies assist eligible older adults by conducting face-to-face assessments, referring for necessary support services, providing casework and follow-up services, and referring criminal conduct to law enforcement.
- Provider agencies receive support through their multi-disciplinary team (M-Team), which includes professionals in mental health, health care, legal, financial, law enforcement and the faith community. The M-Team serves in a technical advisory role, providing case consultation, assistance, and encouraging cooperation among the various service agencies.

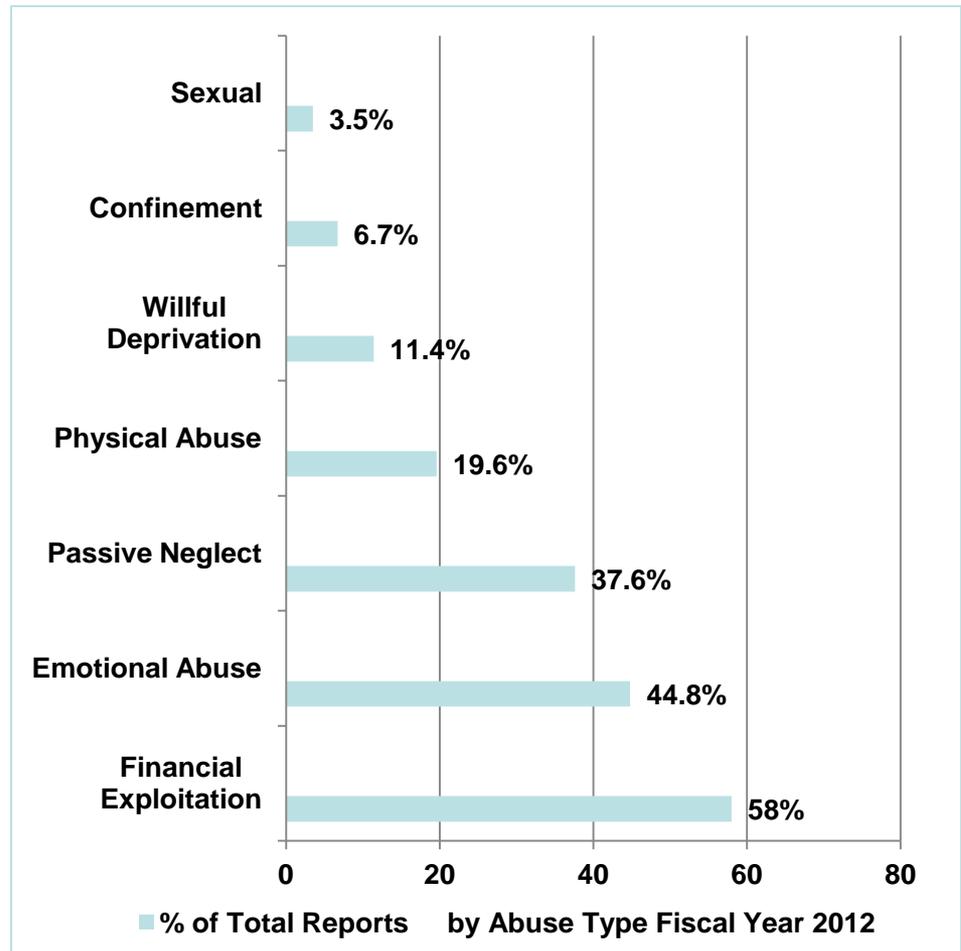
ANE and APS FY14 Budget and ANE Statistics

ANE Reports

- FY 2012 Actual: 11,840 (60+)
- FY 2013 Estimated: 12,230 (60+)
- FY 2014 Projected: 12,694 (60+)
- **FY 2014 Projected: 4,225 (18-59)**

ANE & APS Budget (\$000's)

- FY 2012 Budget: \$9,937.8
- FY 2013 Budget: \$10,000.0
- FY 2014 Request: \$19,968.0



FY14 Older Americans Act: Community Supportive Services

- The Department distributes Older Americans Act funds to 13 Area Agencies on Aging (AAAs). In turn, the AAAs contract with approximately 229 service providers to provide services for older adults at the local level.
- In FY2014, Older Americans Act funds are projected to serve 478,300 or 21% of Illinois' approximately 2.3 million older adults, age 60 and over.

Long-Term Care Ombudsman Program (LTCOP)

- The LTCOP is a resident centered advocacy program that protects and promotes the improvement of quality of care and quality of life for the residents living in the 1575 licensed facilities in Illinois.
- The 5 primary ombudsman services are:
 - *investigative services,*
 - *regular presence visits,*
 - *issue advocacy,*
 - *consultations, and*
 - *resident and family council support.*
- In Federal fiscal year 2012, Ombudsman made 14,623 regular presence visits to long-term care facilities. There were 17,221 consultations handled by the Ombudsman program and 7,458 complaints during Federal fiscal year 2012.

- The top five types of complaint categories that Ombudsman handle include:
 - *issues with care;*
 - *problems with family disputes, legal issues, and financial exploitation;*
 - *issues relating to autonomy and choice within the facility;*
 - *involuntary transfers and discharges; and*
 - *problems with the environment within the facility.*
- 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 1, 2010, LTCOP has made 1,362 MFP referrals and provided 2,203 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.
- Pursuant to the Illinois Nursing Home Reform bill passed in 2010 (or Public Act 96-1372), the LTCOP realized a notable increase of \$1 million in GRF and \$1.25 million from the LTC Provider fund.
- The added funds enables the LTCOP to attain the Institute of Medicine recommended ratio of 1 FTE paid ombudsman to 2,000 licensed beds for the first time in the program's 30 year history.

FY14 Community Supportive Services

General Revenue Funded Programs (\$ in 000's)	FY12 Approp	FY13 Budget	FY14 Request	FY14 Request Over FY13 \$ Diff.	FY14 Request Over FY13 % Diff.
Senior Employment Program	\$190.3	\$190.3	\$190.3	\$0.0	0.0%
Older Adult Services Initiatives	\$0.0	\$5.0	\$5.0	\$0.0	0.0%
Grandparents Raising Grandchildren	\$242.3	\$300.0	\$300.0	\$0.0	0.0%
Special Training Programs (Including Alzheimer's)	\$94.2	\$25.0	\$50.0	\$25.0	(100.0%)
Exp for Monitoring and Support Services	\$76.5	\$80.0	\$182.0	\$102.0	127.5%
Exp of Illinois Council on Aging	\$18.0	\$26.0	\$26.0	\$0.0	0.0%
USDA Lunch Program Administration	\$31.1	\$31.1	\$31.1	\$0.0	0.0%
Exp of Senior HelpLine Operations*	\$1,194.0	\$1,500.0	\$0.0	(\$1,500.0)	(100.%)
Benefits, Eligibility, Assistance & Monitoring*	\$0.0	\$0.0	\$3,351.2	\$3,351.2	100%

* Consolidation and shift of various lines involving similar functions to streamline agency operations and customer service.

FY14 Community Supportive Services

General Revenue Funded Programs (\$ in 000s)	FY12 Budget	FY13 Budget	FY14 Request	FY14 Request over FY13 \$ Diff.	FY14 Request over FY13 % Diff.
Retired Senior and Volunteer Program	\$557.4	\$557.4	\$557.4	\$0.0	0.0%
Planning and Services Grants to AAA	\$1,775.5	\$5,800.0	\$7,800.0	\$2,000.0	34.5%
Foster Grandparent Program	\$243.8	\$243.8	\$243.8	\$0.0	0.0%
Agencies for LTC Systems Development	\$246.3	\$246.3	\$246.3	\$0.0	0.0%
Ombudsman Program	\$348.4	\$1,348.4	\$1,348.4	\$0.0	0.0%
HDM and Mobile Food Equipment (Non Formula & Formula funds)	\$9,025.0	\$10,748.2	\$12,323.2	\$1,575.0	14.7%
Community-Based Services	\$2,425.3	\$0.0	\$0.0	\$0.0	0.0%
Community-Based Services (equal distribution)	\$758.7	\$758.8	\$758.8	\$0.0	0.0%

FY14 Community Supportive Services

Federal and Other State Funds (OSF) (\$ in 000's)	FY12 Budget	FY13 Budget	FY14 Request	FY14 Request over FY13 \$ Diff.	FY14 Request over FY13 % Diff.
National Lunch Program (excl. administrative)	\$1,500.0	\$1,800.0	\$2,500.0	\$700.0	38.9%
Child and Adult Food Care Program	\$200.0	\$200.0	\$200.0	\$0.0	0.0%
Nutrition Services Incentive Program	\$8,500.0	\$8,500.0	\$8,500.0	\$0.0	0.0%
Administration of Senior Meal Program	\$85.0	\$134.0	\$134.0	\$0.0	0.0%
Older Americans Act Training	\$150.0	\$150.0	\$125.0	(\$25.0)	(16.7%)
Title III Nutrition Services - Congregate and HDM	\$24,475.8	\$32,000.0	\$32,000.0	\$0.0	0.0%
Title III Social Services	\$17,000.0	\$17,000.0	\$17,000.0	\$0.0	0.0%
Title V Employment Services (excl. administrative)	\$6,000.0	\$6,500.0	\$6,500.0	\$0.0	0.0%
Title V Employment Services (administrative expenses)	\$95.0	\$300.0	\$300.0	\$0.0	0.0%
Title VII Prevention of ANE	\$500.0	\$500.0	\$500.0	\$0.0	0.0%
Title VII LTC Ombudsman Services	\$1,000.0	\$1,000.0	\$1,000.0	\$0.0	0.0%
Title III D Preventive Health	\$1,000.0	\$1,000.0	\$1,000.0	\$0.0	0.0%

FY14 Community Supportive Services

Federal and Other State Funds (OSF) (\$ in 000's)	FY12 Budget	FY13 Budget	FY14 Request	FY14 Request over FY13 \$ Diff.	FY14 Request over FY13 % Diff.
Expenses for Governmental Discretionary Projects	\$5,000.0	\$5,000.0	\$3,000.0	(\$2,000.0)	(40.0%)
National Family Caregiver Support	\$7,500.0	\$7,500.0	\$7,500.0	\$0.0	0.0%
Ombudsman Training and Conference Planning	\$150.0	\$150.0	\$150.0	(\$0.0)	0.0%
Senior Health Insurance Program	\$3,545.5	\$3,545.5	\$3,000.0	(\$545.5)	(15.4%)
Senior Health Assistance Programs (OSF)	\$1,600.0	\$1,600.0	\$1,600.0	\$0.0	0.0%
Medicaid Community Care Program (OSF)*	\$0.0	\$9,000.0	\$0.0	(\$9,000.0)	(100%)
Long Term Care Ombudsman Fund (OSF)**	\$2,000.0	\$2,000.0	\$3,000.0	\$1,000.0	50.0%

* All Community Care Program services are funded from regular General Revenue funds line items in the FY14 budget request.

** For additional LTC Ombudsmen and for other program enhancements resulting from the recent nursing home reform legislation.

THANK YOU!

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

www.state.il.us/aging

or call the Senior HelpLine at:

1-800-252-8966

1-888-206-1327 (TTY)