

# Colbert Semi-Annual Report

May 2014 – October 2014

The *Colbert v. Quinn* lawsuit alleged that individuals are being unnecessarily segregated and institutionalized in nursing facilities in Cook County in violation of the ADA and Rehabilitation Act. Through the Colbert Consent Decree, the State of Illinois agreed to provide the necessary supports and services to enable a certain number of consenting Class Members to live in the most integrated community settings appropriate to their needs. The State also agreed to gather data that would reflect the costs of maintaining Colbert Class Members in community-based settings relative to the costs of maintaining those same individuals in nursing facilities. The results would be used to develop a Cost Neutral Plan to be used to guide the State in future community reintegration efforts.

The Illinois Department on Aging (IDoA) assumed leadership of Colbert Consent Decree implementation on January 22 2014 with a decision to build upon the existing Colbert service delivery model. IDoA established the Office of Transition and Community Relations (OTCR) to implement the Colbert Consent Decree, relying on a strengthened comprehensive community-based service delivery system which combines the services of housing, healthcare, social services and employment. Once transitioned to a community-based setting, the IDoA ensures that there are adequate and appropriate post transition services to support and maintain the individual in their community placement.

IDoA spent the first months examining all of the aspects of implementation while attempting to make changes that would net the best result in transition activities and quality outcomes. A formal Implementation Plan, named the Phase Two Implementation Plan, focusing on changes and enhancements to Colbert Consent Decree implementation for Fiscal Year 2015, was submitted to the Court in August, 2014.

Fiscal Year 2015 brought a renewed focus on Colbert service delivery and outcomes while building on the foundation set forth by Illinois Healthcare and Family Services (HFS). Enhanced communication and collaboration, program monitoring paired with capacity building and technical supports for contractual partners are the cornerstone for the second year of implementation of the Colbert Decree.

The IDoA has established operating protocols, provided numerous trainings, closely monitored Colbert transition activities and explored alternate and innovative ways to improve Consent Decree compliance and outcomes. The IDoA renewed FY2015 contracts for the two outreach and education providers and three housing specialist agencies. The IDoA formalized access to ten (10) Community Mental Health Centers (CMHC), and endorsed an expansion in the number of Department of Human Services (DHS) Division of Mental Health (DMH) recovery drop-in centers for Colbert and Williams Class Members. Finally, contractual negotiations with the two managed care organizations (MCO), Aetna and Illinicare, are underway.

This semi-annual report covers the six (6) month time period from May through October, 2014. The report highlights the implementation of the core components in the Phase Two Implementation Plan and progress made toward compliance with the tenets and requirements of the Consent Decree.

## **Cost Neutral Planning**

The Cost Neutral Planning Group has met five times during the time period covered by this report. Representatives from the Office of the Governor (OOG), IDoA, HFS, the Plaintiffs' Attorneys, Berkley Research Group (BRG) and the Court Monitor continue to discuss the data required to perform the cost neutral planning mandated by the Consent Decree. It was decided by this group that, despite the fact that transition numbers are less than what was mandated by the Consent Decree all data gathered as of February 2015 will be analyzed to determine if there is adequate data to develop a meaningful Cost Neutral Plan.

Additional meetings have been conducted with HFS and IDoA to facilitate IDoA's reporting of FY15 administrative costs related to the implementation of the Colbert Consent Decree. IDoA anticipates filling the position created to manage these processes in 30-45 days.

## **Outreach/Transition Engagement**

During the time period covered by this report, IDoA renewed contracts for the two Colbert outreach providers: Age Options, Inc., the Aging and Disability Resource Center (ADRC) serving suburban Cook County and the City of Chicago Department of Family Support Services' Aging and Disability Resource Network (ADRN) serving the City of Chicago. Individual meetings were held with both providers ensuring that contractual changes reflected solutions to challenges identified during the past fiscal year. In addition, Age Options hired an additional staff person, increasing the number of engagement specialists to three.

The City of Chicago is currently considering a candidate recommended by the Mayor's Office of Persons with Disabilities for its second engagement specialist. The Department on Aging has agreed to fund one additional staff person to support the City's outreach efforts and continued goal of visiting each nursing facility in Cook County at least once.

In addition, both providers have established peer mentoring programs to enhance the Colbert outreach and recruitment experience for Colbert Class Members as described below.

### ***Peer Mentoring Program***

In July, the ADRC and the ADRN submitted their plans to include peer mentors in their outreach and recruitment programs. The peer mentoring programs are designed to recruit and train Colbert Class Members who successfully transitioned to the community, and are willing to share their experience with nursing home residents who are considering a move. Peer mentors will accompany ADRC and ADRN engagement specialists to nursing facilities and participate in group and individual presentations. The ADRC and ADRN will reimburse the peer mentors with a small stipend to cover their time and transportation.

For monitoring purposes, the current ADRC and ADRN monthly activity reports were revised to include the number of peer mentors and the name and date of the nursing facilities that were visited during the month. Additionally, stipends will be reconciled on quarterly financial reports.

Training will be completed for the 5 to 6 peer mentors recruited by each agency thus far, and the ADRC and ADRN will start to include peer mentors in their outreach efforts in November 2014.

### ***Outreach Materials***

The Office has revised two existing outreach informational documents and created new materials to reflect the new role of IDoA as well as to provide clarity regarding Colbert implementation processes. The materials include four (4) flyers titled “The Colbert Fact Sheet”, “Things You Should Know”, “Your Right to Appeal” and “Frequently Asked Questions”. The “Colbert Fact Sheet” and the “Frequently Asked Questions” are written for a broad audience, whereas the “Things You Should Know” and “Your Right to Appeal” are directed toward nursing facility residents. All of the outreach materials include the Colbert email address and a 1-800 number where questions can be asked and answered. The IDoA has also created a poster with a brief description of the services available under the Colbert program and contact information for questions and/or referrals. It is IDoA’s intention that nursing facilities will hang the posters where they are visible so that residents will have contact information available at all times.

### ***Colbert E-mail Account***

A Colbert informational email account ([AGING.ColbertDecree@Illinois.gov](mailto:AGING.ColbertDecree@Illinois.gov)) has been created for Colbert Class Members, families, friends and the general public to ask questions or comment on the Consent Decree. A Colbert Technical Advisor is available to respond to email requests within two (2) business days, including requests to determine where Class Members are on the Colbert transition continuum.

### ***Colbert Information Line***

A Colbert Information Line has been added to IDoA’s Senior Help Line program to allow Class Members another option to request and receive information. Help Line staff in Chicago and Springfield have received training on the Colbert Consent Decree and are able to take phone calls from Monday through Friday from 8:30 a.m. through 5:00 p.m. Senior Help Line staff can also complete an on-line MFP application (Colbert Referral) on behalf of a Class Member or send a hard copy of an MFP application to a Class Member at their nursing facility. The Colbert Information Line telephone number -- **1-800-252-8966** -- became operative on September 18, 2014. Specific questions regarding a Class Member’s status on the transition continuum or other concerns regarding the Decree will be referred to a Colbert Technical Advisor for follow-up within two (2) business days. Monthly logs will be used to track and sort the number of emails and phone calls that are received and responded to. The first two weeks of service, the Office has received four (4) email requests and ten (10) phone calls through the Senior Help Line.

### ***IDoA Webpage***

The IDoA Community Services webpage was updated to include the Colbert Consent Decree, the Colbert Consent Decree Implementation Plan Phase 2, and all of the above named flyers. The Colbert email address and the Colbert Information Telephone number are also included on the webpage. The webpage continues to provide a referral link to the MFP web application and the Colbert video.

### ***Referrals***

Recruitment strategies for Colbert Class Members continue to center around outreach to Class Members residing in Cook County nursing facilities, the identification of Aetna and Illinicare Integrated Care Plan members, nursing facility referrals generated from Section Q results, and the continued use of engagement specialists employed by the ADRC and ADRN to visit and provide Class Members with information and referrals. Colbert recruitment strategies also utilize the resources of the Chicago Regional Ombudsmen’s Office and the Cook County Suburban Ombudsmen’s Office to provide outreach services. Self referrals made by nursing home residents and referrals from friends and family are encouraged as well.

The Colbert program received a total of 2827 referrals, according to HFS data, since implementation began in February 2013. The majority of referrals (41%) were received by HFS from the federally mandated quarterly assessment conducted by nursing home staff. (See Exhibit A.) Twenty three percent or 660 referrals were submitted by ADRC/ADRN engagement specialists, 13% or 361 referrals were submitted by the Ombudsmen, and 10% or 259 referrals were submitted by the State or a Community Agency. Exhibit A below shows the source of Colbert referrals over the program period.

Exhibit A  
Colbert Referrals to Evaluation by Source

<b>Colbert Referrals to Evaluation by Source</b>	
<b>Source</b>	<b># of Referrals</b>
NH Staff/MDS 3.0 Q	1141
ADRC/ADRN	660
Ombudsman	361
State or Community Agency	259
Self	100
Family/Friend/Guardian	63
MCO	74
Other	169
<b>Total</b>	<b>2827</b>

The HFS MFP on-line application continues to be primary vehicle for Colbert referrals. A link to the website is posted on all revised outreach materials and the Colbert webpage. In addition, nursing facility residents continue to have access to a hard copy of the MFP referral application via Ombudsmen, engagement specialists, nursing facility, MCO and Senior Help Line staff as needed or requested.

All assigned referrals continue to be monitored by HFS for follow-up by the MCO within the federally mandated ten (10) business day time period. This is accomplished by monitoring the completion of a First Contact form in the MFP web application, which indicates that the individual contacted is either considered appropriate for transition or not and documents the referral status rationale.

To enhance the number of referrals generated by the MCOs, with the assistance of HFS, IDoA has identified 77 nursing facilities with lower case-mix indices (the low case-mix index serves to identify a facility population with lower resource needs). This data has been used along with data regarding average Class Member age by nursing facility to target nursing facilities that house more Class Members 60 years of age and older with physical disabilities for MCO outreach and evaluation efforts. In addition, IDoA and the MCOs have agreed on a monthly targeted number of evaluations to be completed to potentially accomplish Class Member transition requirements.

## **Evaluations**

The Colbert Consent Decree mandates that 500 evaluations be completed by May 2013 and 2000 evaluations be completed by May 2014. The November 2013 Court Monitor Report to the Court states

that by “May, 913 evaluations had been completed and 2,186 by the end of October 2013”.<sup>1</sup> The Court Monitor Report also indicated that there were numerous concerns regarding the quality of the Evaluation protocols of the two MCO providers. As a result, the Court Monitor found the State not in compliance with the Evaluation benchmark despite the number of evaluations completed and required the re-evaluation of over 800 Class Members.

In February 2014 the MCOs began to use their respective revised evaluation tools for new referrals and the re-evaluation of the 800 Class Members noted above. In April 2014, IDoA reported that approximately half (405) of the re-evaluations had been completed using the new evaluation tool.<sup>2</sup> An Interim Report to the Court dated June 3, 2014 found the State Defendants in partial compliance of the May 2014 benchmark. By the end of July 2014, the re-evaluation of the remaining 452 Class Members was completed. Exhibit B shows the number and type of dispositions for recommended and non recommended completed evaluations.

Exhibit B  
Evaluations Recommended/Not Recommended by Disposition

<b>Evaluations Recommended by Disposition</b>	
<b>Dispositions</b>	<b># of Evaluations</b>
Aging Network	128
DRS Home Services	112
CMHS	366
SLF	34
Other Services	11
No Services	198
Total Recommended = 849	
<b>Evaluations Not Recommended by Disposition</b>	
<b>Dispositions</b>	<b># of Evaluations</b>
Requires 24hr Nursing Care	408
Aging Network	22
DRS Home Services	0
CMHS	384
Other Services	207
SLF	0
Class Member Lost Interest	473
Unknown	484
Total Not Recommended = 1978	
<b>Total</b>	<b>2827</b>

In summary, transition to a community-based setting was recommended for 849 (30%) of the 2827 evaluations completed. Transition to a community-based setting was not recommended for 1978 (70%) Class Members. Of the 849 Class Members recommended for transition, 366 (43%) were recommended

<sup>1</sup> Jones, Dennis R. Annual Report to the Court. Colbert v. Quinn, Case No. 07-C-4737 (N.D. ILL.), p.6, November 27, 2013.

<sup>2</sup> Colbert Consent Decree Semi-Annual Report. p.4, April 2014

for community mental health services, 128 (15%) for Aging Network services, 112 (13%) for DRS Home Services, 34 (4%) for Supportive Living Facilities, 11 (1.3%) for Other Services and 198 (23%) for No Services.

## **Transition**

The Colbert Consent Decree mandates that 300 Colbert Class Members be transitioned to community-based settings by November 8, 2013. A total of 800 Class Members are to be transitioned to community-based settings by November 8, 2014 with a grand total of 1100 Class Members to be transitioned to community-based settings by May 8, 2015. The first benchmark of 300 completed transitions was reached in June 2014.

As of September 30, 2014, a total of 455 Colbert Class Members transitioned to a variety of community based settings, including apartments with private landlords, the family home, state and federally funded properties, Supportive Living Facilities (SLF) and senior buildings.

IDoA recognizes that transition numbers will not meet the Decree's requirement of 800 Class Members transitioned to community-based settings by November 8, 2014. IDoA continues to work to better understand systemic issues which impede the ability of transition agencies to achieve targeted goals and increase the rate of transitions as well as to seek alternate and innovative approaches to community reintegration of individuals who live in nursing facilities in Cook County.

Some examples of IDoA's efforts to understand systemic issues and to increase the rate of transitions are:

- Efforts to support and provide accessible housing options for Colbert Class Members as outlined in the Housing section of this report
- Frequent communication with Colbert providers and monitoring of transition efforts during weekly teleconferences
- The development of strategies to eliminate traditional barriers to transition for housing location entities and community mental health centers as outlined below
- The development of evaluation and referral targets for MCOs as well as the identification of nursing facilities that potentially house good candidates for community reintegration as described in the Evaluation section
- Emphasis on providing Outreach to all 186 nursing facilities by Transition Engagement Specialists and the addition of two (2) Transition Engagement Specialists to aid in Outreach efforts

Efforts to seek alternate and innovative approaches to community reintegration include 1) the proposed pilot described in the CCU section, 2) the consideration of new providers and a comprehensive model described in the Colbert Program Innovation section, 3) ongoing research regarding community reintegration models in other states and 4) plans to receive technical assistance by national experts through the Center of Excellence described in the Center of Excellence section in this document.

### ***Community Mental Health Centers***

IDoA and DHS/DMH have entered into an Inter-Agency Agreement to collaborate on certain Class Members who require community mental health services. DHS/DMH contracted with ten (10) CMHCs located in Cook County to provide transition services and community mental health services for Colbert Class Members who are recommended for those services. Each of the agencies was given a targeted number of transitions to achieve on a monthly and annual basis with the total number of transitions by

CMHCs to account for approximately 50% of total Colbert monthly transitions. To date, on average, the CMHCs have achieved approximately 50% of their monthly targets for transitions.

The CMHCs received a significant amount of training and support by IDoA and DHS/DMH during this reporting period in an effort to improve their performance and weekly conference calls are conducted with both IDoA and DHS/DMH to monitor the transition process. CMHC support was recruited at the executive level with participation on monthly calls during which barriers to achievement of transition targets were addressed. At the recommendation of one of the executive directors, a CMHC Quality Administrator Summit was convened in July 2014 to identify and resolve challenges that were hindering the placement of Colbert Class Members. It was determined that these meetings would occur quarterly with the next meeting scheduled for November 2014. Colbert Quality Administrators concerns included some aspects of the HACC subsidy administration process (see below), and the medical and associated transportation needs of some Class Members, which are discussed in the Transition Barriers section of this report.

Monthly teleconferences and individual meetings with CMHC Executive Directors continue to maintain support of CMHC implementation efforts to meet transition targets and resolve issues.

### ***Transition Barriers***

IDoA staff continues to identify and respond to barriers to the timely transition of Colbert Class Members. Many of the barriers identified initially were described in the April Semi-Annual Report and were addressed over the past six (6) months. To mitigate some of the transition delays, IDoA staff organized the MCOs, housing specialist agencies, CMHCs and IDoA in various combinations to participate in regularly scheduled teleconferences to increase the quality of communication and collaboration. On balance, this has been an effective strategy as providers have strengthened their working relationships, the coordination of services and were able to increase the number of monthly transitions. The teleconferences also provide a consistent forum for IDOA staff to monitor the performance of individual provider agencies.

Challenges to timely transitions articulated by both Housing Locators and CMHCs and solutions that continue to evolve include:

- Some Class Members have extensive criminal and adverse credit histories. *Background checks are acquired after intake when it seems that the Class Member is at risk. Master-leasing agreements and Project-Based Bridge Subsidies are being sought to alleviate this issue for those Class Members.*
- Some Class Members have a history of unpaid utility bills. *Housing Locators seek housing that includes utilities and landlords are encouraged to do so when it is not the practice. IDoA pays arrearages up to \$1000.*
- Transportation to visit housing sites for individuals who are wheelchair bound continues to be a challenge. *Some housing locators have acquired access to special transportation vehicles or services. MCOs are encouraged to apply for para-transit services as early as possible in the engagement with the Class Member.*
- The collection of identification documents and income verification remains a challenging and time consuming process complicated by Class Members who require special transportation.
- With the addition of CMHCs to the housing location pool, Housing Locator agencies are working with fewer referrals, many of them with accessible housing needs. *IDoA is working with MCOs to generate an adequate number of referrals so that Housing Locators can achieve targeted*

number of transitions monthly (see Referral section). IDoA is working to improve the inventory of accessible housing available to Colbert Class Members (see Housing section).

- The Colbert Subsidy Administration process still presents some delays with regards to inspections and the issuance of transition funds. IDoA is working with HACC to improve inspection and debit card issuance timelines.

**Post-Transition Services**

Colbert Class Members receive care coordination and follow-up monitoring for 12 months post transition. All Class Members receive a minimum number of follow-up visits in accordance with MFP guidelines, i.e., weekly for the first month, bi-weekly for the second month and monthly for months 3 thru 12. Many Class Members need and receive additional monitoring visits and support. Post transition monitoring service delivery not only ensures that Class Members are receiving arranged services and are safe, but also that Class Members are able to utilize and benefit from services.

Class Members are also beginning to exit the Colbert transition continuum (post 365 days) and to become participants in their Managed Care Plan. Exhibit C below sorts Class Members into categories based on the number of post-transition days they reside in the community.

Ninety-five percent of transitioned Class Members remain in community residential settings. The remaining five (5) % include 12 transitioned Class Members who are deceased; 11 or 2% of transitioned Class Members returned to a nursing facility and two (2) or 1% of Class Members who are incarcerated. The largest number of transitioned of Class Members (138 or 30%) have resided in a community setting between 181 – 365 days. Thirty-eight (38) or 8% of Class Members have resided in a community setting for over 365 days.

Exhibit C  
Community Tenure

<b>Community Tenure</b>	
<b>In Community</b>	<b># of Class Members</b>
1-30 Days	43
31-60 Days	47
61-90 Days	44
91-180 Days	120
181-365 Days	138
365+ Days	38
In Community = 430	
<b>No Longer in Community</b>	
Deceased	12
Returned to NH	11
Incarcerated	2
No Longer in Community = 25	
<b>Total</b>	<b>455</b>

In an effort to increase the level of post transition support for Class Members will have access to the following:

- Access Living operates a program for individuals with physical disabilities to support the development and maintenance of their independent living skills. The program, supported through a contract with the Illinois Department of Rehabilitation Services focuses on training to manage budgets, personal assistants and emergency back-up certified nursing assistants and other services to optimize the Class Members' environmental safety and social well-being. Currently 35 Colbert Class Members are participating in the Access program. By participating in this program, the Class Members will be better prepared to reside independently and to seek employment.
- DHS/DMH supports several recovery drop-in centers throughout Chicago and the suburbs for individuals who have mental illness, reside in communities and are working towards recovery. The recovery drop-in centers are organized so that transitioned Williams and Colbert Class Members can spend time in a supportive environment outside of their home and can socialize and feel empowered. Contracts were executed in October 2014 to commit IDoA funding to three (3) additional drop-in centers that will serve the Hyde Park, Oakland/Kenwood and Woodlawn neighborhoods on the south side of the city, the Lawndale and West Garfield communities on the west side of the city, and Arlington, Schaumburg and Elk Grove Village in the northwest Cook County suburbs where there is a shortage of recovery centers.
- IDoA will be seeking proposals from the Illinois Area Agencies on Aging to provide socialization and skill building activities and to support community inclusion within existing senior centers for Colbert Class members.

### ***Employment***

Understanding that employment for those Class Members who wish to work, is critical to meaningful community integration, IDoA staff will be working, in the next months, to support and create opportunities for Colbert Class Members who qualify and who wish to work to have access to Supported Employment programs including IDoA's Senior Community Service Employment Program. The SCSEP program promotes useful part-time (at minimum wage) training opportunities in community service activities for unemployed low-income persons who are 55 years old or older who are actively looking for employment. An SCSEP participant must meet the age and income criteria, which is 125% of the current poverty rate, to qualify for the program.

The SCSEP program provides on-site job training to transition the participant into an unsubsidized position of employment in conjunction with the participant's job goals. This is not only a job training program it also serves as a viable community service resource based on the requirements of the Older Americans Act. Thus, SCSEP is both a training and community service program. Training regarding the Colbert Consent Decree for the eight (8) SCSEP Sub-Grantees and seven (7) National Contractors who administer the SCSEP program in Illinois will initiate in the coming quarter of FY2015.

Additionally, IDoA staff attended Equip for Equality's Illinois Employment First Blueprint presentation in October 2014 and will use learnings and recommendations from "the Blueprint" for guidance in efforts to support and develop opportunities for Supported Employment for Colbert Class Members regardless of age.

### **Housing**

IDoA is working collaboratively with the Governor's Office of Health Innovation and Transformation (GOHIT), the Illinois Housing Development Authority (IHDA), the Housing Authority of Cook County (HACC) and the Chicago Housing Authority (CHA) to meet the housing needs of Colbert Class Members. The joint efforts of these entities and others have helped to bring existing and new housing resources to

the table. The past 6 (six) months has also seen the start of a number of new initiatives designed to enhance the stock of housing available to Colbert Class Members, including accessible housing. This section highlights some of the results of these collaborations and new initiatives.

### ***New Projects***

***Clustered Model*** – The OTCR in collaboration with the Governor’s Office and DHS/DMH has met with numerous property developers and owners in Chicago and Cook County suburbs over the past six (6) months to explore Clustered Model opportunities to serve those Class Members who may need more support than can be provided in a scattered site Permanent Supportive Housing setting. IDoA is currently reviewing a proposal for a new building development in the Wicker Park neighborhood of Chicago where IDoA is considering an agreement for 10 units in a 98 unit building, many of which are accessible units. The building is a senior building accepting people aged 55 years+ where non-mental health services and supports will be provided on-site. IDoA is also exploring a second Clustered Model opportunity with a CMHC, which will provide on-site mental health services and supports for Class Members diagnosed with a serious mental illness.

***Project-Based Bridge Subsidy (Master lease)*** - Identifying landlords who are willing to rent to Class Members with criminal backgrounds, bad credit and evictions is proving difficult for transition coordinators. DHS/DMH, the Governor’s Office and IDoA have been meeting with property owners and community providers to explore the possibility of project basing the Colbert Bridge Subsidy for landlords willing to rent to Class Members with challenging barriers to housing. A key element to a project based Bridge Subsidy is for the units to be in desirable locations and be close to amenities, services and transportation. IDoA is currently reviewing a proposal to project base 5 one bedroom units in a 32 unit building in the Logan Square neighborhood of Chicago. The property owner plans to convert at least one of the units into a wheelchair accessible unit.

### ***Home First Illinois***

Illinois Accessible Housing Initiative – Seventy foreclosed condominiums were purchased and rehabbed by Home First Illinois (HFI) and were converted into wheelchair accessible units for Colbert Class Members. The condos are located in various neighborhoods across the south, north and west of Chicago and the Cook County suburbs.

***Access Housing Project*** – This is another Home First Illinois project with 55 units for households headed by people with all types of disabilities. Colbert Class members will be able to access these units through the Statewide Referral Network (SRN).

***Colbert Bridge Subsidy/HFI Initiative*** – The Illinois Accessible Housing Initiative units are subsidized using housing authority Project Rental Assistance (PRA) housing subsidies in both Chicago and Cook County suburbs. For those administered by the CHA, the process has been long and burdensome. To allow for speedier and more efficient transition, IDoA has entered into an agreement with HFI to use the Colbert Bridge Subsidy to allow Class Members to take possession of the unit while the CHA process is finalized.

### ***Illinois Housing Development Authority***

***Data Collection*** – IDoA has been working closely with the Illinois Housing Development Authority (IHDA) to ensure accurate data is being provided to drive future housing development in Cook County to address the needs of the Colbert Consent Decree. An areas preference map was developed and has been incorporated into the Colbert Tracking System, which will allow for better targeting of neighborhoods.

*Qualified Allocation Plan (QAP)* – As a result of conversations with IDoA, IDHA has released a draft QAP for public review that now requests a larger commitment from developers for accessible units. New developments will need to have 10% wheelchair accessible units and an additional 2% for sensory accessible units.

### ***Chicago Housing Authority***

*Deinstitutionalization Demonstration Project* – The CHA has approved a project that will allow Colbert Class Members to receive Section 8 Housing Choice Vouchers. Colbert Class Members will first register for the CHA open waitlist starting in October 2014. Once the waitlist registration closes, Class Members fortunate enough to be on the waitlist will be identified and offered either a tenant based or property based housing subsidy. The property based housing will include supportive housing and accessible options.

*Information Sessions and Training* – The CHA provided outreach materials and 3 information sessions about the waitlist, which Colbert contracted agency staff were instructed to attend. A separate training has also been scheduled for Colbert and Williams Consent Decree contracted agency staff to provide more detail on expectations when a Class Member is contacted by the CHA.

### ***Governor's Office Collaboration***

*Statewide Referral Network (SRN)* – The SRN has agreements with multiple new IHDA tax credit properties to provide referrals for set aside units. Colbert contracted agencies submit referrals via the Statewide Housing Coordinator who then facilitates the application process. A number of new buildings have come on line recently in Chicago and the Cook County suburbs and several Colbert applications have been submitted.

*Section 811 Allocation Committee* – Section 811 is a federally funded initiative for permanent subsidies attached to units. The State of Illinois through IHDA has now signed an agreement to allow a little over \$11 million to be released to the State to support the consent decrees. IDoA has been working with the Section 811 Allocation Committee to identify state funded developments that would best serve the housing needs of the Class Members. The first phase of allocations has been approved by the committee and a second round of allocations is scheduled to start before the end of the year.

*State of Illinois Housing Website* – Following extensive review and community feedback, the housing website has been redesigned to be more user-friendly and up-to-date. One of the special features that has been introduced is for a “waterfall” effect that will allow case workers to log in and search for SRN units and non-SRN units at the same time. They will then be able to create search criteria that they can save and receive notification when units are available in the search neighborhood. The data collected from the saved searches will allow IHDA to identify where the need is for future housing development which will drive some of the QAP application decisions.

### **Quality Assurance**

The State remains committed to developing a system of data collection, tracking and reporting as a quality assurance strategy. During the period covered by this report, 1) quality measures have been established for each component of implementation that assess performance, quality and identify priorities for intervention, and 2) audit tools have been established to monitor the evaluation, service plan development, and post-transition monitoring and care coordination of Colbert Class Members.

Record audits will begin in December 2014 that will sample Class Member individual case records. The review of referral and evaluation disposition reports is ongoing.

**Incident Reports**

In the implementation of the Colbert Consent Decree thus far, it has been expected that the MCOs will monitor and manage incident reporting along with a plan to prevent re-occurrences for Colbert Class Members. For persons who are receiving community mental health treatment, it is often CMHC staff who initiate incident reports and make adjustments to the plan of care. It is expected that CMHC staff and MCOs keep each other informed of incidents that occur, staffing that are scheduled and resulting changes to the plans of care. In June 2014, both MCOs and CMHC staff began using the incident report format developed by the Governor’s Office for use across the Consent Decrees. This new format prioritizes incidents by sorting them into three levels: Level 1 for critical incidents reported within a 24-time period, Level 2 for serious incidents reported within a 48 hour period and Level 3 for significant incidents reported within a 72 hour period.

The MCOs reported a total of 189 incident reports over the past six (6) months. The largest category of reported incidents (70%) was Class Members who experienced an unexpected medical incident. There were a total of 133 unexpected hospital visits over the past six months. Fifty-seven or 30% resulted in a medical hospitalization; 27 or 14% resulted in a psychiatric hospitalization. The remaining 49 or 26% of unexpected hospitalization visits were for an illness or an injury. There were seven deaths reported over the past six months. Six of the deaths were labeled sudden; one was expected (Leukemia).

Exhibit E  
Incident Reports

<b>Colbert Incident Reports</b>	
<b>Type of Incident</b>	<b># of Incidents</b>
Medical Hospitalization	57
Psychiatric Hospitalization	27
Unexpected Emergency Visits	24
Emergency Room Visits - Illness	25
Other Serious Injury	11
Death	7
Behavioral Incidents	14
Other	24
<b>Total</b>	<b>189</b>

**Mortality Reviews**

Deaths are reported the next business day and followed up with incident reports and full documentation of the details concerning the Class Member death to the Colbert Project Director, who is responsible to report to the Director of IDoA and the Governor’s Office. There have been 12 reported deaths since the inception of the Colbert Consent Decree in February 2013, seven (7) of which occurred during this reporting period. Since August 2014, the University of Illinois College of Nursing has conducted mortality reviews for four (4) deceased Colbert Class Members. See below for details.

### ***University of Illinois College of Nursing (UIC-CON)***

In response to the large number of incident reports that are medical in nature and the need for a formal review of mortalities when they occur among Colbert Class Members in community-based settings, discussions have begun with the UIC-CON for an IGA that designates UIC-CON to formalize the provision of mortality reviews and to provide other clinical services for Colbert Class Members, as below:

- Service plan consultation for Class Members deemed to be high risk – UIC-CON will provide risk criteria derived from their experience with the MFP program to identify those Class Members that are at risk for poor outcomes relative to their medical and psychiatric conditions. These Class Members will be identified prior to transition to the community and a staffing will be conducted by UIC-CON with the MCO staff during which the service plan of care will be reviewed and strengthened when appropriate through UIC-CON feedback.
- Colbert Class Member Incident Management – UIC-CON staff will review all Colbert Class Member reportable incidents, convene staffing, facilitate Root Cause Analyses, and make recommendations for service plan of care changes, when appropriate; and
- Mortality reviews - The mortality reviews include a review of all written clinical records, medical claims data, autopsy findings, when available, and an interview with the assigned Care Coordinator and/or other pertinent individuals. Mortality reviews are staffed by the University of Illinois during which an analysis of the findings is presented. Recommendations may be made regarding provider policy and/or procedural changes. Additionally, mortalities are reviewed in the aggregate on an annual basis with reporting provided that identifies any patterns or trends with recommendations as appropriate. It should be noted that a formal arrangement with UIC-CON to perform these services is under discussion as described below.

### ***Complaints, Grievances and Appeals***

Colbert Class Members have been informed of their right to file a complaint or grievance, and the process involved, in Colbert outreach materials titled “Things You Should Know” and “Your Right to Appeal” by MCO care coordinators, engagement specialists, and CMHC staff and HACC staff. Colbert Class Members have also been informed of their right to appeal decisions made during the implementation process. The above mentioned outreach materials are included on the Colbert webpage and routinely distributed to Colbert Class Members.

There were 3 complaints filed by Colbert Class Members during this reporting period. All of the complaints filed were regarding housing location services and all of the complaints were resolved by IDoA staff.

### ***Quality of Life Surveys***

Quality of Life surveys are conducted in accordance with MFP guidelines for all Colbert Class Members and forwarded to the University of Illinois where the surveys are analyzed on an annual basis. The analysis of the surveys will be made available for review upon the receipt of the University’s report.

### ***Colbert Class Member Focus Group***

In April, IDoA convened a focus group to allow Colbert Class Members an opportunity to provide feedback on their transition from residing in a nursing facility to residing in a Community setting. The criteria for participation were any Class Member who transitioned into the community or was in the transition process. Class Members who transitioned past the initial year of monitoring by MCOs were also invited to attend. Class Members indicated that they were happy with the services that were available under the Colbert Decree. Challenges were reported as well. Class Members expressed concern over the wait time for transitions, others had concerns regarding issues with background checks

and financial problems that affected their ability to reside in certain areas of Cook County. Overall, the focus group was rated a success as a forum for feedback and because all of the participants indicated that they were willing to participate in a peer mentoring program.

### ***Peer Advisory Council***

In September, a Peer Advisory Council was established as a formal forum for Colbert Class Members to provide input into the Colbert transition process. The purpose of the Peer Advisory Council is to “make recommendations and to comment on issues pertaining to the implementation and experience of Colbert Class Members to the Illinois Department on Aging”. The Council is made up of 12-15 Colbert Class Members who are representative of Class Members in regards to disability, race and gender. All Advisory Council Members have expressed an interest in moving out of a Nursing Facility or have transitioned to the Community and willing to advise IDoA on matters pertaining to the quality of their experience in the Colbert transitional care continuum.

### **Colbert Program Innovation**

IDoA proposes to utilize Care Coordination Units (CCU) currently under contract with IDoA to identify individuals through the IDoA Community Care pre-screen process who are about to be admitted to nursing facilities for short-term stays (less than 90 days), who are at risk for long term stays and in need of supports to reintegrate into the community. It is proposed that the CCUs will conduct an enhanced assessment in the nursing facility; identify the potential risks (housing or family support, etc.); and maintain contact with the individual during the nursing stay. At the time of transition, the CCUs will conduct an enhanced evaluation, develop a service plan of care, arrange services and ensure that the individual has a safe transition back to the community. Once returned to the community, individuals will be monitored for one year.

The goal of the pilot is to overcome barriers to timely reintegration post short-term nursing facility stays so that those stays do not end up to be long stays. During the last fiscal year, 124 individuals in Cook County who were Medicaid eligible transitioned from nursing facilities to communities with the support and assistance of the CCUs. This concept was presented to the Parties and is currently being reviewed for clarity with regards to the targeted population and compliance with Consent Decree requirements. There are currently 12 CCUs serving Chicago and the Cook County suburbs. The proposed start date of the pilot is December 1, 2014.

IDoA is also exploring the addition of another pilot project where a single provider offers a comprehensive approach to service planning, housing location, transition services and care coordination for complex populations.

### **Colbert Tracking System**

The Colbert Tracking System (CTS) has been developed to better track Colbert Class Members from initial referral through the evaluation and transition process. The objective of the CTS is threefold: to effectively track Colbert Class Members through the Colbert transition continuum; to provide a technology platform to facilitate communication and collaboration; and to collect and process data for monitoring, analysis and to implement strategic data based strategies.

Training on using the system was provided to approximately 90 contracted agency staff from the MCOs, CMHCs and HSAs in August. This was followed by an extensive beta testing period through September as a secure internet based web application available to only authenticated, authorized and trained

users. The first manual entries of data in the system were completed in September and the CTS went live on October 20, 2014.

For quality assurance purposes, data will continue to be analyzed manually for comparison with data entered in the system for a short period of time. Over time, the CTS will provide IDoA with the means and capacity to process data for process monitoring, statistical analysis and strategic decision making and support planning. In the interim, emphasis will be placed on the timely and accurate input of data.

## **Trainings**

IDoA has conducted the following trainings during this reporting period:

- IDoA and DHS/DMH provided training for Colbert providers and their newly hired staff on Transition and Service Expectations.
- IDoA and HACC provided a training for Colbert contracted agency staff to address a large number of failed inspections. The training was designed to inform agency staff of some of the most common reasons for failed inspections and provide them with the tools they need to identify problems prior to requesting an inspection. The number of failed inspections dropped significantly following the training.
- The developer of the State of Illinois Housing Website and the Governor's Office provided an online training for contracted provider agency staff to train them on the new features of the system and how to make the most of the resource.
- IDoA, including information technology staff, provided webinar training for contracted provider agency staff on how to use the CTS. The training was recorded to be used as an ongoing training tool.
- IDoA provided training to the Senior Help Line Staff in support of the addition of the Senior Helpline as a vehicle for Class Members to obtain information about the Decree.
- IDoA presented an overview of the Colbert Consent Decree and managed care interface processes for the MCOs that manage the Illinois Medicaid population.
- IDoA provided overviews of the Colbert Implementation Plan Phase Two and the Colbert Work plan to MCO, CMHC and Housing Locator staff individually with emphasis on their respective roles.
- IDoA provided an overview of the Colbert Consent Decree and Implementation Plan to the Illinois Council on Aging.

## ***Rebalancing Training Institute***

The number of disabled individuals who are residing as fully integrated members in communities of their choice is expanding as the State's rebalancing initiatives, the federal demonstration project, Money Follows the Person, the federal Balancing Incentive Program, and the *Williams v. Quinn*, *Colbert v. Quinn* and *Ligas v. Quinn* Consent Decrees are fully operational. Innovations and reforms are needed, under the States' Medicaid authority in order for the States' workforce to respond to increasing demand for home and community services.

As proposed in the Colbert Implementation Plan Phase Two, the State is moving forward to develop a "Center of Excellence" that will introduce and maintain systemic innovations required by the States' growing rebalancing initiatives. The purpose of the Center is to provide training, technical assistance and data analysis for the States' workforce responsible for policy, management and regulatory responsibilities and direct services.

Using a “Train-the-Trainers” approach and conducting an internal certification courses, the Center will provide training and technical assistance on such topics as Assertive Community Treatment, Integrated Care delivery models, risk management and other best practices that benefit and empower medically complex populations. IDoA is working closely with the Governor’s Office to identify training and technical assistance needs for state agency staff and the contracted agency community.

### **Managed Care Organizations**

Colbert MCOs, under contract with IDoA, provide Colbert Class Members with evaluations, service plans of care, discharge planning, and referrals to housing and community based services, and post-transition monitoring as required by the Colbert Consent Decree and the MFP program.

In Cook County, Medicaid recipients are expected to enroll in a MCO, under contract with the HFS to receive their health plan benefits. The last round of managed care enrollment for Medicaid recipients in Cook County began in August 2014 and will end in December 2014. If Medicaid recipients have not enrolled in a MCO, the State of Illinois will assign them to a MCO. As Colbert Class Members are Medicaid recipients or are eligible Medicaid recipients, it is possible for Colbert Class Members to be enrolled with one MCO for health services and a Colbert MCO for Consent Decree Services.

Processes are being developed to facilitate the necessary communication and coordination to ensure a seamless collaboration during the transition and post-transition phases. The Colbert MCO is responsible to initiate a relationship with the Class Member’s assigned MCO in order to share the results of their evaluation and service plan of care, secure authorization for services, coordinate the delivery of services, and provide the required year of post-transition services. During the year of post-transition services, the Colbert MCO will share any changes to the service plan of care and any incident reporting. The Colbert MCO will be responsible for notifying the Class Member’s assigned MCO 45 to 65 days prior to termination of care coordination. The Colbert MCO will inform the Class Member of the change, share the service plan of care, and coordinate the request for the Determination of Eligibility, if necessary, to ensure that there is no disruption in services.

Additionally, IDoA is acquiring and distributing contact information for all of the MCOs and the Colbert MCOs to facilitate effective communication.

### **Staffing**

The IDOA, initially staffed by a Project Director, a Transition and Research Administrator, and an Outreach and Technical Assistance Specialist have added, during this reporting period, a Project Assistant, a Quality Control and Compliance Liaison, a Housing and Transition Liaison as well as an Information Systems Analyst. It is expected that a Financial Data Analyst, a Data Analyst and another Project Assistant will be hired in the next months.

### **Budget**

The Fiscal Year 2015 budget passed by the General Assembly for implementing the Colbert Consent Decree was the same amount as introduced by the Governor’s “recommended” budget. In the IDoA FY2015 enacted budget, \$32,496,400 is designated to be used for the implementation of the Colbert Consent Decree.