

Community Care Program Advisory Committee Minutes

10:30 a.m., Tuesday, April 14, 2015

Northfield Inn and Suites

Members in Attendance:

Tracy Barczewski, Midland AAA; Jean Bohnhoff, Effingham City/County Committee on Aging; Kim Cox, Addus; Cary Crawford, Chicago Commons; Diane Drew, CHELP; Tom Gonzalez, ADT; Ella Grays, Gareda LLC; Sherry Barter Hamlin, River to River; Greg Kyrouac, SIU School of Medicine; Dave Lowitzki, SEIU; Joyce Mugge, Golden Circle Senior Citizens Council (for Anna Jo Cox) ; Marsha Nelson, Shawnee Alliance (for Carol Aronson); Marta Pereyra, CLESE; Lutheran Home; Susan Simmons, Help at Home, Inc., Bob Spaulding, Healthcare Plus Senior Care; Jane Stansell, IADSA; Robert Thieman, IACCPHP; Kathy Woodworth, Healthcom; Kathy Wyatt, McDonough District Hospital

Members Not in Attendance:

Debbi Baldauff, Catholic Charities CCU, DOJ; Matt Lisovitch, Philips Lifeline; Carol Mauk, IADSA; Vicki Schlomann, Lutheran Home; Marylee Tomsa, DuPage County Seniors; Barb Doss, Guardian Medical Monitoring; Barbara Greenwood, Monitoring Care; San O, Southeast Asia Center; Barbara Wylie.

Illinois Department on Aging: Jose Jimenez, Jennifer Reif, Scott Norton, Mary Gilman, Gidget Freeberg, Robin Morgan, Dennis Miner, Maureen Squires, Jody Martin, John Eckert, Mary Mayes, Sandy Leith, Abhinav Kondrapally

Guests: Cheryl Aguirre, Home Life Healthcare; Terri Belville, Schuyler County Mental Health; Theresa Collins, Senior Services Plus; Betty DeGroot, Cass County Mental Health; Lisa Fanning, Adult Comprehensive Human Services; Ron Ford, Help at Home, Inc.; Becky Gillen, Macon County Health Department; Lori Hendren, AARP; Shawn Harris, Vanguard Health and Wellness; Mary Hemp, CCSI; Marsha Johnson, CCSI; Santosh Kumar, Universal Metropolitan Services; Joseph Mason, Renaissance Adult Day Center; Kristyn Moore, McDonough County District

Hospital Day Health; Sandy Price, IADSA; Juana Reyes, Casa Central; Carla Turner, Catholic Charities; Bill Wheeler, ICCCU.

Welcome and Introductions:

The meeting was called to order at 10:40 a.m. by Jose Jimenez, newly appointed Division Manager of Home and Community Services and chair of CCPAC. Jose told the committee he is excited to be in his new position and eager to build a good working relationship with the committee. He announced that the Department has also named Jennifer Reif as Deputy Director; Brad Rightnowar as General Counsel, and Matt Ryan as Chief of Staff. Matt will work in Springfield three days a week. Director Holton was also reaffirmed in his position as Director.

Approval of Minutes:

Minutes from February were approved.

Budget

Dennis Miner distributed a budget sheet and announced that the Department continues to attend legislative hearings with regard to crafting a FY '16 budget, and has testified twice to that end.

He said overall, the proposed budget maintains service level in core programs, and described these highlights:

The Department is budgeted for \$1,043,163.8, which is below (\$95,463,200) FY15. That amounts to a reduction of 8.4 percent. Federal funds account for \$100,893,000, other state funds \$4,545,000 and General Revenue funds \$937,725.8 00.

The total introduced represents approximately \$1.1 billion and includes:

\$167 million to transfer 20,000 Medicaid CCP clients to Capitated Coordinated Care;

\$32.5 million for Department transition and rebalancing initiatives pursuant to Colbert to move people out of nursing homes;

\$5.1 million for continuation of the Department's Balance Incentive Program (BIP);

\$5.5 million to administer the LTC Ombudsman Program mandates;

\$2.4 million in additional funding for Home Delivered Meals;

Other changes impacting CCP are:

Reducing service approximately 1 unit of service per week per client;

Removing the enhanced rate;

Instituting new eligibility requirements of an income level of \$17,500 (applies to new clients only);

And,

Changing the DON to the lowest eligible score of 29 to become 37 (applies to new clients only);

Dennis concluded by saying no one likes budget reduction but overall the Department budget is in a good place.

Dave Lowitzki asked if any of the proposed changes would require a change to statute.

Dennis replied that as it is proposed now, it would require changes to rules but not statute.

It was asked if the Department or HFS have submitted papers to federal government yet with regard to implementing the changes; the Department has not.

Lori Hendren of AARP asked if the Department has a transition plan, and Jennifer Reif replied that one would be required by the waiver.

Mary Gilman said since the budget is still in the proposal stage, a transition plan would be premature to be filed at this point.

Lori than asked if people with a low DON score would be grandfathered in.

Jennifer said the Department is still working on how it would work. Ultimately, any plan would need to be approved by federal CMS.

Robin Morgan said anything negatively affecting a client has to go through review by federal CMS; each change would need CMS approval and it is all contingent on a final budget.

The Department is seeking an extension on the waiver.

Jose said at this point the Department is exploring many ideas and trying to come up with a system about flagging and tracking those individuals who may be grandfathered in.

Jennifer said the Department is seeking guidance from other entities, including CMS and HFS. As soon as plans become more formalized, they can be further discussed by the committee. She said the Department is looking forward to working more collaboratively with the committee to move forward.

Kathy asked if a new DON score would affect an individual until the next assessment or until they would expire, and it was stated that it would be when they expire.

Dennis said the number affected would be somewhere between 12,000-18,000 individuals.

Kim asked what the net reduction for CCP services would be. Dennis answered that it would be \$103.1 million.

Dennis said the Department did not anticipate tapping into the Human Services Commitment Fund this year.

Kim said by her estimation, the overall shortfall would amount to between \$30 million and \$40 million.

Ron Ford said it would help with clarification to consider that two budget lines would go down and one would go up due to the capitated rate.

Dennis added that the number of clients being served going down should also be factored in.

It was stated that it is not the Department's decision to make with regard to changing the DON score, and Jennifer said that is correct as the decision ultimately lies with HFS. Changing the DON score would affect clients with HFS, Aging and DRS.

Jennifer further stated that she understands the budget proposal and numbers are a lot to take in and there are many answers and questions that still need to be fleshed out.

Jean Bohnhoff asked how the Department is going to make it all work.

Dennis said the Governor will propose the budget and send it to the General Assembly and if they come up with a different spending plan the Department will make the necessary adjustments.

IT

Jennifer stated that another big project the Department is facing is the creation of a Uniform Assessment Tool.

Ella Grays asked how that would come into play with a revised DON score and if any deadlines have been put forth.

Scott Norton said the Department is working with HFS, DORS, DHS, Mental Health, DASA and together the goal is to have a new tool drafted by September. The Department's current assessment is 21 pages. The firm building the UAT is working diligently. He said committee members may want to become familiar with Inter RAI. It can be researched by googling that term.

In addition, Scott said the Department will be rolling out a new APS billing system by the end of summer and IT has hired eight very capable IT people to that end.

He said there is also a LTC Ombudsman Survey coming out soon and the Fatality Review Tracking System went live April 1.

He and his staff continue to work on vendor profiles, training tracking, MFP, Waiver and data analysis.

He said the Department is planning to implement a BIP Hotline and is working on building it now.

Kim asked what a BIP hotline would do or what questions it would answer. Scott replied that its purpose would be to assist people working on a Level One Assessment tool or answering questions with regard to status. It would be handled in similar fashion to the Senior HelpLine. He said that is why Aging was selected to house such a hotline – because the Senior HelpLine runs effectively and has certified staff.

Jose said UAT is being implemented in a lot of other states and is a very good idea. He said once the Department has the green light, more information will be brought forth to the committee about it.

Scott said they are getting ready to test the product and if all goes well, it would be ready in late summer though the software for it has yet to be built.

SHIP

Sandy Leith, recently named SHIP Director, reported to the committee that SHIP has four trainers and the program relies on the Senior HelpLine for in-take. She said Medicare is changing and changes are being incorporated into SHIP trainings. SHIP is sub-contracting to AAAs and then onto SHAP sites. She said they have 11 trainings on the books now to be conducted statewide. There will probably be one set up for July or August for Springfield. Open enrollment will occur this Fall. She is working with CLESE for a subcontract to reach non-English speaking beneficiaries.

Sandy said SHIP will be paid by the federal government according to the scores that come from a reporting system next year.

Sandy shared with the group several scenarios that raise concerns about how people need to be better informed and educated. In one scenario a gentleman brought to her attention that he thought he was fully insured and even had a

supplemental policy though he didn't have Medicare A or B. Problems with Social Security enrollment are affecting this person. Up to 10,000 people turn 65 every day in the country. Access to medications is another big issue.

Many changes to Medicare law are from the Affordable Care Act. If anyone has a SHIP question, email aging.ship@illinois.gov. It is staffed all day long.

Managed Care

Robin Morgan stated that BEAM is in a lull of transitions now and she hopes that problems are evening out. She said she believes things are better than last year as MCOs are getting a better handle on things. She said BEAM spends a lot of time educating new MCO staff on how to transition clients.

She said there is a halt on passive enrollments from federal CMS and that is not expected to change any time soon. HFS will not passively enroll any additional clients that become MMAI eligible. However, if a person voluntarily calls and requests to join the MMAI program, HFS will enroll them with an MCO.

She said there were 23,000 to 24,000 MMAI clients anticipated to enroll in MMAI. Of those, some 11,000 opted out. HFS is currently revising the MCO contracts to mandate that those waiver participants that opted out of MMAI are required to enroll in an MCO. This mandatory enrollment was set to begin in May ; however May 1 does not appear to be a realistic date at this point. She will alert the committee as to when this will occur and when the people will start being transferred. Hopefully, it will be this summer.

She reported to the committee that BEAM and Shawnee Information Systems recently trained CCUs on data entry. SIS had sent each CCU a new version of CMIS that included edits to help staff be in compliance with changes with regard to transferring clients from CCP to an MCO or vice-versa. The training covered the proper procedures among other data entry issues.

Robin said the training should help with rejects etc. She said the Department will work to get a training taped at a later date. Already, six webinar trainings are

available through eCCPIS to help providers and CCUs with several different topics including billing correctly for MCO participants.

Another improvement is that the Department is working on having a screen which will be an on-line portal wherein providers can verify their own MCO status and find out if clients are deceased or involved with another waiver (such as DORS). It will be secure and within eCCPIS.

Marsha Johnson relayed some problems encountered when transitioning people back to CCP services. Some clients have lost Medicaid coverage due to MCO case managers not assisting with redeterminations for Medicaid. The CCU assists clients with getting back on Medicaid and the client then goes back into an MCO. This is not cost-effective.

Robin said MCOs should be helping these people and that many problems are being encountered due to the fact there are many new managers. She agrees that clients should not be flipped back and forth and it complicates billing. Another issue is that the MCOs are not made aware of when the member's Medicaid annual enrollment is due. If they had this information they would be able to help the member reapply for Medicaid. HFS is working with DHS to secure this information for the MCOs. Robin has also asked HFS to work to secure this same information for CCUs as well.

Marsha said she would work with BEAM to make them aware of any further problems.

Program

Mary Gilman said the Department is working on a new policy to check Social Security Administration records for correct Social Security numbers. eCCPIS edits are in place to reject CATs or provider billings after the date of death from Public health records. She mentioned that CCUs sometimes have trouble obtaining Social Security numbers from hospitals and further discussion will occur with the Illinois Hospital Association prior to the SSA check being implemented.

Bob Thieman brought forth to the group that the Acting Secretary of DHS said there is a possibility of eliminating Electronic Visitor Verification for DORS and he wondered if the Department was aware of that.

Mary said she was not aware.

He said he was concerned about it since EVV was an unfunded mandate for his group.

Santosh Kumar said her agency (Universal) has experienced numerous problems with the Sandata system.

Mary said some other providers have had problems with Sandata and that hours in the home may not be calculated correctly.

Mary asked Santosh to email her information and examples to make her more aware and so she can intervene to help alleviate the problems. Other providers using Sandata system offered suggestions to Santosh to assist with her concerns.

Bob asked another question with regard to Records and Retention. He said participant files are massive and there needs to be a policy on how to dispose of old records.

Another question was posed as to Automated Medication Dispenser and whether any provider has been notified if they have qualified.

Kathy Woodworth was asked if there is any money available for that program and would the program cover the cost of the person charged with filling the unit.

Dennis said there would be an appropriation in the budget for AMD.

Scott said no rules have changed and there is not money for a person to be a filler for the device.

Robin said we can't pay for a person to fill the unit because CCP is a custodial program and paying for the unit to be filled crosses into a "medical" service. CCP is not a medical program.

Bob asked if AMD was included in the 1915 waiver and Robin said that it was.

Overview and Goals

Jennifer said there is a lot of transitioning going on in the Department in many areas but there are still vacancies that need to be filled, such as in the BEAM unit and within the Communications and Outreach Division.

She said there is much work to be done going forward and the Department would like to be more transparent and also receive more feedback from the network. She made a request of the Committee to re-establish sub-committees and possibly rename them.

She asked that that be done by the next (June) meeting. She is interested to know what works and what doesn't. She said the Department is seeking help on such important issues as UAT, BIP, what trainings are requested etc.

She said the committees have not reported on any activity in recent months.

Diane noted that the Funding Committee has needed a new chair since Dave Vinkler vacated it. She said she believes the committee would like to be a viable part of advising the Department and she thinks it can step up to accomplish this.

Jennifer reiterated that more advice is needed so the committee can be fruitful.

Kim Cox said she has chaired the Policy committee for years. She said she agrees there are not enough engaged, active individuals. She said she understands it is very difficult to carve out time to tackle some of the issues and that it is one thing to show up but another thing to be involved.

Jane Stansell said sometime ideas were brought forth to the committee in the past but they were not ultimately accepted. She does remember a time when the committee as whole voted and it experienced more active participation.

Jennifer said it will help the greater good and it is her request to all of the committee to have their voices heard. She said there is a new opportunity now and it is her expectation that the sub-committees be re-established. She said having the right people at the table is key to a successful partnership.

Tracy Barczewski said she recalls a time when there was better communication and partnership and it is good to have that again.

Questions were raised as to how to go about it and some members proposed committees that would address current issues such as the aforementioned record retention.

Jennifer said the Department could come up with suggested committees and distribute it to members with the minutes for this meeting.*

The meeting was adjourned at 1:10 p.m.

- Please see attached agenda.