

Community Care Program Advisory Committee Minutes

10:00 a.m., Tuesday, April 19, 2016

Agriculture Auditorium, Springfield

Members in Attendance: Tracy Barczewski, Midland AAA; Carol Aronson, Shawnee Health Service; Kevin Cosgrove, Guardian Medical Monitoring; Joanne Glenn, Comprehensive Quality Care, Inc.; Cary Crawford, Chicago Commons; Andrea Davenport, BCBS; Diane Drew, CHELP; Ella Grays, Gareda Home Care; Stephanie Garrigan, Philips Lifeline; Terri Harkin, SEIU; Dan Healy, Aetna; LaShun James, Addus; Greg Kyrouac, SIU School of Medicine; Lori Long, Chinese Mutual Aid Association; Lubertha Mercer, HCI; Kristin Murphy, IlliniCare; Lori Pence, Central Illinois Area Agency on Aging; Marta Pereyra, CLESE; Robert Spaulding, Healthcare Plus Senior Care; Susan Simmons, Help at Home, Inc.; Robert Thieman, CAE, IACCPHP; Jennifer Triplett, CCSI; Kathy Wyatt, McDonough District Hospital; Kathy Woodworth, Healthcom

Members Not in Attendance: Robert Childers, Williamson County Programs on Aging; Theresa Collins, Senior Services Plus/IACCPHP; Sherry Barter Hamlin, River to River Residential; David Lukens, VRI; Vicki Schlomann, IADA, Jane Stansell;

Illinois Department on Aging: Director Jean Bohnhoff, Mike Berkes, Desirey Ackerman, Lori Brannan, Elizabeth Delheimer, Janet Dobrinsky, John Eckert, Jose Jimenez, Matt Ryan, Mary Gilman, Karen Kloppe, Sandy Leith, Jody Martin, Lora McCurdy, Robin Morgan, Maureen Squires, Becky Ward

By telephone: Debbie Baldauff, Catholic Charities DOJ; Tom Gonzalez, ADT; Lori Hendren, AARP; Mary Lee Tomsa, DuPage County Senior Services; Barbara Wylie, Peace Meal Senior Nutrition Program

Guests: Carolyn Bates, Molina; Amy Marchant Brown, CRIS Healthy Aging; Betty Degroot, Cass County Mental Health; Melissa Edie, CCSI; Becky Gillen, Macon County Health Department; Awilda Gonzalez, Universal Industries; Ryan Gruenenfelder, AARP; Jean Jones, Cass County Mental Health; Marsha Johnson, CCSI/CCU; Richard Juarez, Lawndale Christian; Lisa Kracht, ECCOA; Kristin McCracken, AMAC; Tonia Oberg, ECCOA; Marsha Nelson, Shawnee Alliance; Cari Outman, Molina Health Care; Gustavo Saberbein, ABCOR; Tania Schwer, Grundy County Health Department; Bill Wheeler, ICCCU

Welcome and Introductions:

The meeting was called to order at 10:10 a.m. by Lora McCurdy and roll call was taken.

Lora asked for March 8 meeting minutes to be approved. Bob Thieman made the motion, seconded by Kathy Woodworth, and minutes were approved.

Lora stated that Director Bohnhoff, Jose Jimenez and Department managers were called over to the Capitol and would be joining CCPAC later in the morning.

Lora asked if there was anyone who wanted to speak as part of the Public Comment portion of the meeting.

Public Comment:

Bob Thieman asked to speak on behalf of the Illinois Association of Community Care Program Home Care Providers.

Bob had a series of questions and comments: How the Medicaid spend-down would work under the Community Reinvestment Program (CRP), as well as the 77/23 split; Whether there has been evaluation of the EVV program, and if so, what it found; Commented that the mandated minimum wage hike for Chicago (\$10.50 this year; \$11 in 2017, \$12 in 2018 and \$13 in 2019) will have a detrimental effect and whether the Department would investigate waiver and rate variances between regions; Whether updates to the CCP manuals started by the Department a few years ago were completed - he said the Association successfully worked on them in the past and would be willing to do so again. He asked whether rules have been developed for the Community Reinvestment Program and if they would be shared with the Committee. He said they should be reviewed by the Committee as that is its job as an advisory body. He asked about timeframes with regard to submission of the Rules to JCAR and whether they would be submitted as emergency rules. He asked about non-Medicaid payments once a budget is passed and if they would be paid directly or via Court; he asked for more information on Cost Service Maximum as it relates to CRP.

Bob Spaulding asked about non-Medicaid vouchers paid through the Vendor Support Initiatives (VSI).

Lora said those and other questions would be addressed as part of Department updates, particularly relating to Fiscal.

Terri Harkin of the Service Employees International Union said she is concerned as she feels the Department is making decisions with regard to CRP without appropriate feedback from stakeholders. She said the Department should not move forward on Rules until they are vetted by the appropriate committees. She asked how the Department would maintain the level of services needed for seniors with a \$200 million proposed cut to its budget. She said scant details have been released pertaining to CRP as providers and others have only received a two-page document. She is concerned that what little has been released shows in-home care services i.e. laundry, meals etc. would be sub-contracted and would undermine the relationship between in-home care workers and participant. She said her group is concerned that over 40,000 seniors on CCP would not receive appropriate care under CRP. Terri said if the Department did a better job of obtaining Medicaid reimbursement, and recouping those dollars, it would strengthen existing programs.

Lora said the Department is exercising due diligence in getting individuals to apply for Medicaid. She said there is a webinar scheduled for the following day which is mandatory for CCUs. It will be conducted by John Spears of HFS and will cover the steps to apply for Medicaid through ABE (Application for Benefits Eligibility). The webinar will cover all the steps of ABE, including an explanation of the Medicaid redetermination process.

Lora said if applicants do not submit the Medicaid redetermination paperwork within 30 days, they can be dropped from Medicaid. When it comes to CCP, participants would still be receiving the service, though the state would not be getting the match.

The Department believes there could be 6,000 married people and 10,000 single people who could be potentially enrolled in Medicaid. She said undoubtedly some may have income and/or assets over the Medicaid eligibility threshold, however. She said the majority reside in Cook County. The Department is sending out the names and asking the CCUs for assistance with the Medicaid application and redetermination processes.

Jose and other Department managers joined the meeting and apologized for being late. He said there was a bill introduced on Friday that the Department had to testify on.

He noted that HFS and DHS are leading the process in getting individuals to apply for Medicaid.

Ella asked what exactly the Department is doing in order to get the applications processed, since there is such a backlog.

Lora responded that a letter goes directly to the participant, though in the past the CCU was copied. She said the Department is talking with HFS to develop a new way to obtain the names of the individuals prior to when their redetermination application is due.

Lubertha mentioned the need for more open communication with DHS. One of the Chicago providers mentioned that some clients don't read or even open their mail and need help with the redetermination process. She also mentioned it would be helpful to get the list of clients who are due for redetermination to better help those folks.

An MCO provider mentioned they receive lists every month and once they get the lists they are able to assist clients with redetermination applications. There are ways to set up online profiles and tracking and that HFS sends multiple letters to the clients. Lora mentioned that Department is working closely with HFS to give the CCUs access to a similar system the MCOs have in place. It was also mentioned that the MCO receives the lists 60 days prior to the redetermination due date, which gives them time to contact their members.

Carol Aronson asked how to help someone who's impaired. Sandy Leith mentioned in July 2016, Medicaid will allow application assistance to be handled by 3-way calls and then a second phase of ABE called "Manage My Case" will allow electronic access to documents.

Terri Harkin commented that maybe there could be additional funding for CCP rather than a new program.

Kathy Woodworth asked about the transition of the 13,000 dual eligible MMAI clients who still need to be transitioned to an MCO. The Department indicated once it receives a copy of the letter that is sent to the client, it will be shared with the Network.

Lora indicated the CMS Federal waiver is still pending approval. Federal CMS is taking a closer look at all waiver rates.

Bob Thieman asked for more information regarding rate analysis and Lora asked him to submit the request in writing.

Department Updates:

The Department hired Mike Berkes to focus on quality assurance measures and compliance with the Federal waiver requirements that include data collection of critical incidents, person centered planning, service plans, etc.

The Department's Training Section is evaluating and updating training materials, training processes, and will be providing training on new Federal requirements. Updated CCP manuals will also be available in the near future.

Lora mentioned the results of the Person Centered Planning survey results will be discussed in the Quality Sub-Committee meeting. Mary Gilman said the Lewin Group is conducting "business process mapping." When the consultants are done, the information will be provided to the BIP Policy Group. The business process mapping visits included agencies who serve older persons, persons with physical and developmental disabilities, and supportive living facilities. She said the Department and BIP Policy Group have given input into the UAT and the changes are awaiting final approval by interRAI. Software for the UAT will be developed with input from BIP Policy Group and tested prior to its approval.

The group looked at an on-line training module.

The DON will be incorporated into the assessment. (29 will remain the minimum for eligibility).

The BIP Call Center will be housed within the Department. Elizabeth Delheimer said staff has already been hired to perform Level 1 screens. Work is being done to iron out the details pertaining to pre-questions that are sensitive in nature.

Carol Aronson noted that most calls would likely be coming not from participants themselves but rather from hospitals or other referral entities. She wanted to know if there will be an abbreviated process for referral. She urged the group to think carefully through the referral process, especially for those participants/applicants who are impaired.

Mary agreed, stating that there is no way a comprehensive screen can be done in certain situations.

Lora said that it would be a good assignment for the UAT Sub-Committee to examine such “triggers” with regard to what individual is directly to what form of screen.

A break was called for lunch. Upon resuming the meeting at 1:12 p.m., the Department asked Jodi Becker to respond to Bob Spaulding’s earlier question. Jodi Becker stated that the Vendor program was not structured for or applicable to non-Medicaid pending vouchers as they do not fall under “operational costs”.

Bill Wheeler asked about the WEX program and if this is how the state vehicles are able to stay in operation.

Jodi said yes and that VSI has a lot of criteria to follow and CCP does not fall within this purview.

The Director said she wanted to respond to some of Bob Thieman’s questions but she had not seen the list before.

The Director said the Department plans to distribute the draft CRP rule in order to obtain feedback from the Network.

She said it is exciting to be going forward with CRP as some of the things that will work in this program can later be incorporated into the waiver.

Ella said, for example, she has a 103-year-old participant being cared for by her 80-year-old daughter and she worries that in this scenario and for others who may be on the brink and may not be eligible for Medicaid but still need a high level of service.

Matt Ryan said in such a case some participants could plausibly get more hours of service under CRP and that there have been campaigns of “disinformation” hampering progress on the subject. For example, he said, services will not be cut in half for any one.

He said by AARP and other estimates, our state is provides 3.7 times more state funding than what other states are spending to support non-Medicaid individuals. He said CRP offers many advantages. There is no way to fund home modifications, for example, under CCP when that has proven to be a critical service under the nursing home deflection pilot. He said Colbert cases show that hospital readmissions are a huge problem and Medication Management could help in this area. There are many other innovative examples that can put Illinois in the same successful place that progressive states such as

Wisconsin and Minnesota have been able to get to. He said Wisconsin has been able to achieve great results with 5,000 individuals, and Illinois will be attempting this on a larger scale.

He reiterated that the Department is “not just throwing this (CRP) out there,” and that much contemplation has gone into the proposal.

He noted that some states such as California spend “zero dollars” on non-Medicaid residents and stressed that our state is trying to sustain services for an aging population. This, in turn, will drive waiver changes in the future.

Ella said part of the fear may be that providers have had very little information to go on.

Matt responded that a “blueprint” has been put in place and that the Department worked hard to get a “buy in” from the Governor’s Office, but now that the foundation is in place and can be worked on with the Network.

Terri Harkin again raised concerns that stakeholders in the process have not been consulted and it may not make sense to take a \$200 million dollar cut to existing services but instead to focus on all other funding sources. She stressed that parceling out services or giving an individual vouchers for meals or laundry services will diminish the relationships with their in-home worker.

Jodi Becker then announced that another release of cash would be occurring the following day for March billings.

Karen Kloppe told the committee their Ethics training needs to be completed and they need to send the appropriate paperwork to Maureen Squires.

Ryan Gruenenfelder of AARP came forward to state that he was disappointed that the meeting would be closed without more questions pertaining to CRP and asked that it remain open until all questions were answered.

Director Bohnhoff said she would entertain more questions or comments.

Ella asked if the \$200 million taken out of the budget for CCP, she is wondering how that would affect her participants and she is just trying to understand the process.

Director Bohnhoff said she is trying to view the situation from all perspectives, including that of a taxpayer.

Joann Glenn commented that she hopes that the Committee and the Department do not lose sight of the human needs of participants and that not everything can be solved by increasing technology.

Jennifer Reif stated that she understands all the frustration among the Aging Network and that she wanted to address the Committee to bring it back “full circle.”

She said the Department understands it is imperative to keep everyone abreast of developments. She said part of the problem to date has been “the process.” By that, she said some information has been embargoed and that when the Department is authorized to share information, it does go forward and shares it. She said it makes no sense that anyone put up a fight despite being on opposite sides of an aisle or a table because every individual and group has the best interest of their clients at heart. Part of the pressure and frustration, she said, is simply the “unknown.”

She reminded the Committee that the Department is still in hearings and visiting Area Agencies on Aging. She said the goal is to sustain both care and volume of participants. She asked everyone to consider what Illinois is going to look like in the future. Again, she said, “We are all here for the right reasons,” and urged the Committee to continue an open dialogue and the Department is working hard to do the right thing by seniors.

Awilda Gonzalez said she knows of some extreme cases in which home care hours are really not appropriate for certain individuals who may be abusing the services.

Jennifer said she appreciated her sharing the example and that if those resources are not needed in that situation they need to be allocated to someone who needs the care.

Kathy Woodworth said she wanted to voice to the Department that Emergency Home Response providers need to remain involved and in the loop on developments. She said they can be especially helpful since their territories involve other states and they work with many states on various services to keep older adults in their homes.

Jennifer thanked Kathy and said that is duly noted.

Director Bohnhoff said she would be happy to share the schedule in which she is visiting all areas of the state via Area Agency on Aging to gather input.

The meeting adjourned at 2:30 p.m. and the Sub-Committees convened.

The next CCPAC meeting will be held June 21 in the auditorium of the Agriculture Building.