June 27, 2013

TO: The Governor of the State of Illinois
    The Auditor General of the State of Illinois
    The Honorable Members of the Illinois General Assembly

The Illinois Department on Aging (IDoA) is happy to offer the bi-monthly report scheduled within HB 2275 (Public Act 98-0008). This report describes in detail the progress to-date by amended ILCS statute, IDoA’s Community Care Program (CCP) goals outlined in the legislation. This report also highlights IDoA policy changes and notifications required to implement this amendatory Act, in addition to federal waiver requests and State administrative rule changes, although no amendment to the Illinois Title XIX State plan has been made or offered.

20 ILCS 105/4.01(2-a) (provide data sharing and requested employment information verification for CCP providers)
  ✓ All agreements are in place with the exception of the U.S Department on Veterans Affairs and the Illinois Department of Revenue. It is expected that as of September 1, 2013, all agreements will be utilized.

20 ILCS 105/4.02(7) (Balance Incentive Payment Program (BIP)) - CCP effectiveness under Medicaid Waiver
  ✓ The Illinois Department of Healthcare and Family Services (HFS) submitted the BIP application to the federal Centers for Medicare and Medicaid Services (CMS) in March 2013. On June 12, the State of Illinois received official notification from CMS regarding the awarding of the BIP grant. The project period is July 1, 2013, through September 30, 2015. Illinois will receive an enhanced 2% match on non-institutional long-term services and supports, estimated at $90.3 million during the project period. The Director of IDoA serves on an interagency committee that is preparing the BIP work plan which is due to CMS in September 2013.

20 ILCS 105/4.02(9) (service authorization guidelines for in-home service)
  ✓ IDoA implemented a Service Authorization policy for Case Coordination Units (CCUs) statewide on April 1, 2013. The Department also followed up with trainings to the CCUs in the Month of April and May.
20 ILCS 105/4.02(10) (Medicaid waiver enrollment and claiming improvements)

✓ IDoA is working in conjunction with Department of Human Services (DHS) and Care Coordination Units (CCUs) to make improvements to the Medicaid claiming process/enrollment procedures by granting CCUs access to the DHS PACTS system; establishing liaisons in each Family and Community Resource Center (FCRC); streamlining application submission; cross training of agency staff; and developing a plan for centralization of services and reestablishing a stakeholders group to improve processes.

In cooperation with a bipartisan group of General Assembly members, state agencies, and stakeholders from the Aging Network, IDoA initiated a Root Cause Analysis Project (RCAP) in February 2013 to understand barriers that prevent timely enrollment into Federal Medical Assistance Percentage (FMAP), as well as to implement solutions to better ensure enrollment of CCP clients who appear to be Medicaid eligible but currently are not. A survey was done of select CCUs to determine related causes which is being followed up now with all CCUs to perform a review of their individual clients to pursue FMAP (re)application and enrollment where eligible. DHS and IDoA have met and have outlined various steps to address the issues identified from the RCAP.

20 ILCS 105/4.02(11) (seven-minute rounding policy clarification)

✓ As of April 1, 2013, IDoA has developed a policy that requires implementation of rounding from seven minutes up or down to the nearest quarter hour as a new method for calculating CCP units for in-home service providers.

20 ILCS 105/4.02(12) (coordinated (i.e., managed care) enrollment)

✓ IDoA has worked with HFS to develop policies for the implementation of the managed care Integrated Care Program (ICP) for suburban Cook County (outside the City of Chicago) in February 2013. In addition, IDoA is working on implementation for the expansion of ICP which will take place throughout the state in FY14.

20 ILCS 105/4.02(13) (maintain existing (FY13) CCP rate increase in FY14)

✓ IDoA has no plans to increase the FY14 Community Care Program rates from FY13 levels.

20 ILCS 105/4.02(new) (Electronic Visit Verification (EVV))

✓ IDoA has developed standards for EVV systems and sent the policy to in-home service providers requiring compliance by 7/1/13. EVV standards have been posted to the Electronic Community Care Program Information System (eCCPIS), as well as the IDoA website. We have also reviewed and drafted an amendment to administrative rules (Section 240.1530). This policy was shared with CCP providers at the Community Care Program Advisory Council meeting on 6/25/13. IDoA also shared a list of EVV vendors that responded to the Request for Proposal (RVP) and announced that DHS and IDoA providers may use the vendor of their choice as long as they meet policy standards.
20 ILCS 105/4.02(new) (reporting requirements /bi-monthly reporting)
✓ This report will satisfy the intended requirement of HB 2275.

20 ILCS 105/4.02(new) (CCP providers non-compliance)
✓ Our on-line billing system for Vendor Requests for Payment (VRFP) has been modified to contain certification language referring to a physical notarized statement from each provider (Notarized Certification Form). Each person who submits VRFP information must sign the form and the form must be notarized and on-file at IDoA. All eCCPIS users who submit VRFP payments must have a State of Illinois-issued public-key infrastructure (PKI) entrusted ID which ensures that the identity of the user is credentialed and approved by the organization they represent.

30 ILCS 5/2-27(new) (certification of CCP reforms)
✓ This report will satisfy the intended requirement of HB 2275.

Please do not hesitate to contact me if you have any questions regarding this report.

Sincerely,

John K. Holton, PhD
Director
Illinois Department on Aging

cc: Mary Killough, Deputy Director
    Mikal Sutton, Legislative Liaison