Health and Human Services
FY21 Budget Presentation
FEBRUARY 19, 2020
Health and Human Services Portfolio

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Governor Pritzker’s FY21 Investment Priorities

- Early Childhood Programs (Birth to Age 5)
- K-12 Education
- Higher Education
- Health and Social Services Programs
- Criminal Justice Reform and Public Safety
- Environmental and Cultural Resources
- Economic Development and Infrastructure

Health and Human Services continues to be a priority in FY21

Total HHS* Budget FY21:
$38.5 Billion

- 4.3% change over FY20
- 26.6% change over FY15
VISION

Illinois has a strong human services system to support individuals, families, neighborhoods, and communities – advancing human dignity, equity, and economic strength in the state of Illinois.
Maximize opportunities for all people to **work**

Ensure hungry people and families have access to nutritious **food**

Provide places for people to call **home**

Promote the **health** and well-being of individuals and communities

Help communities create **safe neighborhoods** and spaces
Meet Stanley

- Stanley has an intellectual disability.

- He used to live in a 24-hour CILA but had dreams of living independently and having a job.

- Stanley engaged with the divisions of developmental disabilities, rehabilitation services, and family and community services.

- Now, Stanley lives in his own apartment with intermittent staff supports AND he works at Jewel and supplements his income with SNAP.

- He is why we are here.
FY20 Key Accomplishments

- Diverse senior leadership team, of which 54% are people of color
- $29 Million for Census Outreach
- 2 new downstate processing centers and a new call center on state properties, hiring 130 staff
- Increased enrollment in the CCAP by 20,000
- Decreased Medicaid backlog by 50%
- SNAP timeliness improved from 65% to 94%
Initial SNAP Statewide Application Approvals
Monthly % Timely (Expedited and Non-Expedited)
Total budget of $7.4 Billion

• an increase of 7.3% over FY20

► Investment in Community-Based Service Wages – impacting more than 100,000 front-line staff
  
  • Child Care Assistance Program funding of $69.0M to support increase in provider rates
  
  • $96.0M for front line staff serving persons with developmental disabilities
  
  • $46.0M to support wage increase for individual providers serving customers of the Home Services Program
  
  • $11.8M new funds requested to address minimum wage increases
Continued investment in the Consent Decrees

- $28.5M for Ligas annualizations and new placements
- $8.0M additional funding for Comprehensive Services Pilot to Williams and Colbert class members
- The DHS budget also reflects the movement of $10.0M from the Department on Aging to support the implementation plan for the Colbert consent decree

New $2.0M investment to expand the Healthy Families and Parents Too Soon programs

IDHS operations continues to aggressively address the Medicaid application and redetermination backlogs
<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Requested FY 21 $s in thousands</th>
<th>FY 2020 Estimate Spending - No Supplemental $s in thousands</th>
<th>Change from FY 20 $s in thousands</th>
<th>Change from FY 20 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRF</td>
<td>$4,642,105.3</td>
<td>$4,254,700.6</td>
<td>$387,404.7</td>
<td>9.1%</td>
</tr>
<tr>
<td>Other State</td>
<td>$863,212.9</td>
<td>$807,308.3</td>
<td>$55,904.6</td>
<td>6.9%</td>
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<tr>
<td>Federal</td>
<td>$1,877,343.7</td>
<td>$1,816,557.6</td>
<td>$60,786.1</td>
<td>3.4%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$7,382,661.9</strong></td>
<td><strong>$6,878,566.5</strong></td>
<td><strong>$504,095.4</strong></td>
<td><strong>7.3%</strong></td>
</tr>
</tbody>
</table>

*IDHS has a FY20 Supplemental Request of $40.0 in GRF, $5.0M for the Early Intervention Revolving Fund and $750K for the SNAP to Success line from the Social Services Block Grant fund. The GRF supplemental is needed to pay for Home Services Program liability.*
Agency-Wide Key Strategies

- Complete Census count
- Integrated Service Delivery Systems intra DHS
- Integrated Service Delivery Systems inter-agency e.g. Illinois Department of Corrections
- Incorporating an equity lens
- Proactive stakeholder communication plans
Division of Substance Use Prevention & Recovery (SUPR)

KEY STRATEGIES

► Use cannabis sales revenue to *strengthen and grow the capacity of substance use and mental health services*

► **Reduce Opioid-Related Fatalities 10%**
  - Target naloxone distribution to communities of high need
  - Develop more safe consumption/opioid prevention sites
  - Extend medication assistance treatment (MAT) to at least 20 of the 40 counties now underserved counties

► **Integrate gambling disorder treatment** into a recovery-oriented system of care based on targeted needs assessment
FY 21 Budget Request Highlights

► Additional $15M in revenues from the legalization of cannabis to expand SUD and MH treatment services

► $2M more in revenues from the legalization of cannabis for a public education campaign educating youth and adults about the health and safety risks of types of substance use, including impaired driving and use by pregnant women
KEY STRATEGIES

• Investing in our community based system to create supports that people with intellectual and developmental disabilities want and need

• Reducing time on PUNS so by 2025, no one will be waiting longer than 60 months for services
FY 21 Budget Request Highlights

► $28.5M increase to support annualization of the FY20 PUNS placements
  • 630 PUNS placements in FY21

► $96.0M in funds to support a Direct Support Person hourly wage
  • Increase to $1.00 effective July 1, 2020 and additional $0.50 on January 1, 2021
KEY STRATEGIES

• Build, reinforce, and maximize services provided through the Vocational Rehabilitation Program.

• Invest, build, and promote independent living.

• Foster self-determination and control for individuals who wish to remain in their homes.

• Evolve the current Individual Provider Registry to offer customers in the Home Services Program fast and easy access to providers.
**FY 21 Budget Request Highlights**

- **Home Services Program** will require a $40.0M supplemental to support the estimated liability.

- **$89.0M increased** investment in the Home Services Program supporting the collective bargaining agreement costs
  - 900 projected net new customers

- **$1.0M expansion** to support home modifications for persons with disabilities
KEY STRATEGIES

• Continue to improve customer service and reduce application backlogs for Medicaid and SNAP with new call center and e-training for staff

• Strengthen and expand early childhood programs and supports

• Increase job placement outcomes for SNAP clients by increasing the number of providers who serve customers on SNAP
FY 21 Budget Request Highlights

► $100.0M increase to accommodate increase in child care provider rates, anticipated increases in participants, and improving the quality of care

► $2M in Healthy Families and Parents Too Soon programs

► Additional $7.2M to support the increasing participation rates in the Early Intervention Program
Division of Mental Health (DMH)

KEY STRATEGIES

- **Reinvest in services** for high-need, uninsured individuals with mental illness

- **Support promising approaches**; to reduce unnecessary ER visits and hospitalization

- **Fund temporary housing** options for high-need individuals when homelessness is a barrier to recovery
FY 21 Budget Request Highlights

- New funding of $8M to support Comprehensive Services Pilot to transition Williams and Colbert class members.

- Better utilization of existing resources to improve outcomes for individuals with mental illness

Budget by Year

<table>
<thead>
<tr>
<th>Year</th>
<th>GRF</th>
<th>Fed</th>
<th>Other State</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 18</td>
<td>$488.2M</td>
<td>$20.2</td>
<td>$53.8</td>
</tr>
<tr>
<td>FY 19</td>
<td>$462.0M</td>
<td>$27.6</td>
<td>$56.2</td>
</tr>
<tr>
<td>FY 20 (Est)</td>
<td>$655.3M</td>
<td>$45.0</td>
<td>$498.1</td>
</tr>
<tr>
<td>FY 21 (Req)</td>
<td>$687.9M</td>
<td>$45.1</td>
<td>$530.6</td>
</tr>
</tbody>
</table>
MISSION

Helping Families Succeed

HFS is committed to ensuring quality health care coverage at sustainable costs, empowering people to make sound decisions about their wellbeing, and maintaining the highest standards of program integrity on behalf of Illinoisans.

KEY PROGRAMS

- Medicaid
- CHIP
- Child Support Services

About 1 in 4 Illinoisans are served by HFS

HFS provides healthcare to more Illinoisans than any other insurer
Meet Nora

Challenges:
- Two children, 10 and 12
- Caregiver job has just ended. Needs money for her children immediately

Working together:
- Bank lien collection of more than $12,000 owed from one of the fathers
- Collection is successfully made

A better life:
- Able to buy clothes for the children
- Catches up on bills and pays rent

*Name changed for privacy.
✓ Implemented several provider rate increases and program improvements from 2019 Medicaid Omnibus Bill

✓ Cleared nearly 750,000 billing adjustments with MCO and provider partners (~$96 million in payments)

✓ Implemented BEP Goal of $100 million for MCOs

✓ Collected $1.3 billion in child support for Illinois families
HFS FY20 Accomplishments

✓ Implemented Managed Care Provider Assessment (significant program investment + $503m GRF relief)

✓ Dramatic reduction in Medicaid backlog

✓ Implemented new rules and rates for Gender Affirming services and supports

✓ Restored Vaccines for Children Program with IDPH
Total budget: $26.9 Billion

- 2.9% change over FY20

- We are maintaining our current commitments and building for the future.

- The HFS FY 21 proposal includes NO program cuts and includes increases to key program areas.
### All Funds

**In millions**

<table>
<thead>
<tr>
<th>Total By Program</th>
<th>FY2020 Appropriation</th>
<th>FY2021 Appropriation</th>
<th>$ Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Assistance</td>
<td>$25,678.4</td>
<td>$26,409.8</td>
<td>$731.4</td>
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<tr>
<td>Child Support Services</td>
<td>218.7</td>
<td>228.5</td>
<td>9.9</td>
</tr>
<tr>
<td>Program Operations</td>
<td>248.1</td>
<td>253.7</td>
<td>5.6</td>
</tr>
<tr>
<td>Cost Recoveries</td>
<td>29.8</td>
<td>31.0</td>
<td>1.2</td>
</tr>
<tr>
<td>Inspector General</td>
<td>26.1</td>
<td>27.2</td>
<td>1.2</td>
</tr>
<tr>
<td>Total</td>
<td>$26,201.0</td>
<td>$26,950.3</td>
<td>$749.2</td>
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### General Revenue Fund

<table>
<thead>
<tr>
<th></th>
<th>FY2020</th>
<th>FY2021</th>
<th>$ Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Assistance</td>
<td>$7,392.0</td>
<td>$7,810.6</td>
<td>$418.6</td>
</tr>
<tr>
<td>Child Support Services</td>
<td>28.3</td>
<td>33.5</td>
<td>5.2</td>
</tr>
<tr>
<td>Program Operations</td>
<td>38.7</td>
<td>40.8</td>
<td>2.2</td>
</tr>
<tr>
<td>Inspector General</td>
<td>5.1</td>
<td>5.5</td>
<td>0.4</td>
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<tr>
<td>Total</td>
<td>$7,464.1</td>
<td>$7,890.4</td>
<td>$426.4</td>
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</table>

1. Numbers may not appear to add due to rounding.
Medical Programs – FY21 Goals

Deliver more integrated, holistic health care
- Implement Integrated Health Homes for children & adults
- Harness the value of our MCO contracts & partnerships to drive healthcare quality

Invest in behavioral health
- Rollout behavioral health pilots, including supportive housing, supported employment
- Annualize rate/wage increases (EI, Community MH, Psych, SUD, ABA, etc.)

Maximize federal funding
- Continuing to push for more federal funding

Improve performance and transparency
- Leveraging private/federal funding to increase data-driven decision making & analysis

Significantly reduce timeframes for eligibility
- Maintain focus on hiring caseworkers, better technology, & customer service
Child Support – FY21 Goals

- **Increase performance indicators**, such as improving arrears collections

- Begin a **multi-year IT project** which will provide program efficiencies and improved customer experiences

- With existing resources, **establish a public awareness campaign** to promote child support collection services to families

- Projected to **collect over $1 billion in child support** for Illinois families for the 16th consecutive year
Meet the Jones Family

Challenges:

- Family facing father with chronic illness, children with cognitive disabilities
- Medicaid as secondary insurance

Working together:

- With All Kids, now they can focus on father’s recovery
- Crucial support for both children

A better life:

“Please take our thanks and carry it with you as a reminder of what you do and why you do it.”
MISSION

To promote prevention, child safety, permanency and well being. We bring the voices of Illinois children and families to the forefront, building trusting relationships that empower those we serve.
Meet Cindy

• Cindy is a developmentally delayed mother who struggled to raise her 3-year-old son who is Type 1 diabetic.

• DCFS assisted Cindy with parenting education, wraparound services and early intervention services weekly in her home.

• Cindy’s case was closed with a strong support team in place to do aftercare.
DCFS FY20 Accomplishments

- **Expanded Training** – Nearly every worker has received new training.

- **New Investments in Youth in Care** – The department has taken an aggressive approach to strengthening and rebuilding the resources available to the children and youth we serve.

- **Leadership** – Since April, the director has restructured the agency to ensure DCFS is positioned to overcome long-standing challenges and move forward in key areas.

- **Collaboration Across State Agencies** – DCFS has developed new collaborations with agencies like ISBE and DHS to ensure children are getting the care they deserve.
Innovation – DCFS is looking to the future of child welfare nationally, bringing innovations to our work that will allow us to better service children and families.

Increasing Staff – DCFS has been able to reverse the staffing cuts under the previous administration and make our most significant hiring increases in over a decade - hiring more than 350 new staff since April of 2019.

Expert Partners – DCFS is working closely with a number of outside partners as the Department plans, implements, and executes key projects.
DCFS FY21 Proposed Budget Highlights

Total Budget: $1.5 Billion

- Increase of 7.9% over FY20
- Increase of 20% over FY19

- **Investing in Staff** - $11.7M for an additional 123 direct service staff

- **Modernizing systems** - $27M for implementation of Comprehensive Child Welfare Information System

- **Expanding Programs** - $25.9M to support growing Foster Home programs

- **Supporting Providers** - $22.4M for proposed rate increases for institutions, group homes, and other DCFS providers
Investments in FY21

DCFS Budget and Headcount FY19-21 Proposed
DCFS Cost of Living Adjustments (Cumulative) for the private sector.

FY16-21 Requests ($ in millions)
Investments in FY21

DCFS Caseload Trends FY15-21 Projected

<table>
<thead>
<tr>
<th>Year</th>
<th>FY15</th>
<th>FY16</th>
<th>FY17</th>
<th>FY18</th>
<th>FY19</th>
<th>FY20 Est.</th>
<th>FY21 Proj.</th>
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<tbody>
<tr>
<td>Cases</td>
<td>67,726</td>
<td>78,575</td>
<td>75,030</td>
<td>81,278</td>
<td>86,945</td>
<td>93,031</td>
<td>97,683</td>
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<tr>
<td>Youth in Care (End of FY)</td>
<td>17,308</td>
<td>17,026</td>
<td>16,780</td>
<td>17,463</td>
<td>18,549</td>
<td>20,778</td>
<td>22,024</td>
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<tr>
<td>Intact Family Services (End of FY)</td>
<td>2,434</td>
<td>2,330</td>
<td>2,786</td>
<td>2,991</td>
<td>3,563</td>
<td>3,882</td>
<td>4,416</td>
</tr>
</tbody>
</table>
Investments in FY21

- **Qualified Residential Treatment Programs (QRTPs)**
  - $12,010,758
- **Institutional & Group Home: In-State Expansion**
  - $12,679,770
- **Evidence Based Prevention Services**
  - $7,000,000
- **Foster Care; Step Down Homes**
  - $7,027,439
- **Foster Care; Caregiver & Community Support**
  - $2,250,000

**Grand Total**

$40,967,967
Investments in FY21

Information System (CCWIS and legacy systems)

- FY18: $17.6M
- FY19: $26.5M
- FY20: $39.5M
- FY21 Request: $40M
Meet Anna – Intact Family Services

• Anna was found unresponsive while watching her oldest son, and was transported to the hospital and treated for an amphetamines overdose.

• Once released from the hospital, Anna worked with her Intact Family Services case manager and engaged in substance abuse, mental health counseling, parenting classes and community NA meetings.

• Not only did Anna remain sober, she obtained employment and eventually moved in with her mother for additional support.

• Her case was closed after six months of service and her family remains safe and together today.
MISSION

To protect the health and wellness of the people of Illinois through the prevention, health promotion, regulation, and the control of disease and injury.

DIVISIONS

- Health Promotion
- Healthcare Regulation
- Health Protection
- Women’s Health
- Preparedness & Response
- Policy, Planning, and Statistics
Meet Miss Kinley

- Little Miss Kinley was born without a Thymus, leaving her with only 20% of a normal immune system and congenital heart defects.

- Diagnosed with 22q11.2 Deletion Syndrome (DiGeorge Syndrome).

- Now 6 years old, she has had two open heart surgeries and will require more as she grows.

- Could not receive any live vaccines due to low immune system.

- Kinley depends on EVERYONE to be vaccinated.
IDPH FY20 Key Accomplishments

- Increase childhood immunization rates
- Maternal mortality and reducing racial disparities
- Getting to Zero Illinois to end the HIV epidemic by 2030
- Enhanced communications and partnerships regarding disease outbreaks such as Coronavirus and Legionnaires
- State and federally funded efforts to reduce opioid overdose instances and deaths
- Reduction in the burden of childhood lead exposure
Total budget of $738 million

- Increase of 5% over FY20

- New funds for Alzheimer’s disease education, suicide prevention, infectious disease, and lead poisoning prevention

- $30M in new funds for HIV/AIDS

- $3.4M in new funds for school-based health centers
## IDPH FY21 Budget Highlights

<table>
<thead>
<tr>
<th>Office</th>
<th>FY2020 Budget (millions)</th>
<th>FY2021 Proposed (millions)</th>
<th>Change</th>
<th>$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy, Planning &amp; Statistics</td>
<td>$40</td>
<td>$45</td>
<td>$5</td>
<td>12%</td>
<td></td>
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<tr>
<td>Health Promotion</td>
<td>$51</td>
<td>$52</td>
<td>$1</td>
<td>2%</td>
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<tr>
<td>Healthcare Regulation</td>
<td>$63</td>
<td>$66</td>
<td>$3</td>
<td>5%</td>
<td></td>
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<tr>
<td>Health Protection</td>
<td>$305</td>
<td>$319</td>
<td>$14</td>
<td>5%</td>
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<tr>
<td>Women’s Health</td>
<td>$76</td>
<td>$90</td>
<td>$14</td>
<td>18%</td>
<td></td>
</tr>
<tr>
<td>Preparedness &amp; Response</td>
<td>$95</td>
<td>$95</td>
<td>$0</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td>$74</td>
<td>$71</td>
<td>($3)</td>
<td>(4%)</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$704</strong></td>
<td><strong>$738</strong></td>
<td><strong>$34</strong></td>
<td>5%</td>
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</table>
IDPH FY21 Budget Highlights

- Total HIV/AIDS appropriation of $138M, increase of $30M over FY20
- $21.5M to Illinois Breast and Cervical Cancer Program, same as FY20
- $6M in state and federal funds to reduce opioid overdose instances and deaths, same as FY20
- $3.4M for 28 new school-based health centers, increase over $1.1M from FY20
$1.5M in additional funds for lead poisoning prevention, bringing total to $12.5M

$1M in new funds for an Alzheimer’s disease education and outreach program

$750K in new funds for a suicide and injury prevention program

Enhancing our infectious disease investigation capacity with additional epidemiology resources ($600,000)
Keeping Kids in School

• Local Health Departments provide a vital link to community partners, providers and schools for ensuring children are vaccinated and are prohibited from attending school.

• During the back-to-school season, Sangamon County Health Department provided vaccines to children:
  • August 6\textsuperscript{th} – 127 children served
  • August 10\textsuperscript{th} – 120 children served
  • August 27\textsuperscript{th} – 80 children served

• The IDPH Vaccines for Children (VFC) program serves children through 18 years of age who meet eligibility criteria. Illinois has over 800 VFC providers.
MISSION
To serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage independence, dignity and quality of life.

Key Programs
- Adult Protective Services
- Community Care Program
- Community Support Services (including Nutrition Services)
- Senior Health Assistance Program
- Senior Helpline
Two years ago, Toby (79) was hospitalized with swelling of the brain. She was an Adult Day Service participant for 8 years.

“All the food they serve is nutritious, and it helps that we can eat two hot meals a day. I could not wait to get back to Adult Day Service and as soon as I got better, we went. People there remember my birthday and help me celebrate. They make us feel useful.”
FY20 Accomplishments

- Stabilized the Aging Network through rate increases to address workforce turnover and retention

<table>
<thead>
<tr>
<th>Service</th>
<th>Previous Rate</th>
<th>FY20 Rate</th>
<th>% Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Home Service</td>
<td>$18.29</td>
<td>$21.84</td>
<td>19.4%</td>
</tr>
<tr>
<td>Adult Day Service</td>
<td>$9.02</td>
<td>$14.30</td>
<td>58.5%</td>
</tr>
<tr>
<td>Adult Day Transportation</td>
<td>$8.30</td>
<td>$10.29</td>
<td>24.0%</td>
</tr>
<tr>
<td>Emergency Home Response Installation</td>
<td>$30.00</td>
<td>$40.00</td>
<td>33.3%</td>
</tr>
</tbody>
</table>
Collaborated with sister agencies, network providers, and Illinois Universities through **103 site visits** and establishing **7 formal partnerships**

- Northwestern University
- University of Illinois Urbana Champaign
- University of Illinois at Chicago
- CHART
- Health and Medicine Policy Research Group
- Alzheimer's Association
- Retirement Research Foundation
Total **budget increase of 9%**

- Ensuring vulnerable older adults are able to “Age in Place”
- Growth of programs helping seniors remain in homes and communities
- Increase Medicaid enrollment
- Expand supports for Alzheimer’s, social isolation, and caregiver education

FY21 GOVERNOR’S INTRODUCED BUDGET

- **General Revenue Funds**: $757,118,200, 59%
- **Commitment to Human Services Fund**: $125,805,300, 10%
- **Federal Funds**: $5,745,000, 0%
- **Other State Funds**: $401,883,000, 31%
<table>
<thead>
<tr>
<th>Program</th>
<th>FY20 Enacted Budget</th>
<th>FY21 Governor's Introduced Budget</th>
<th>Year-Over-Year Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aging Client Protection and Rights</td>
<td>$32,650,000</td>
<td>$36,750,000</td>
<td>$4,100,000 (12.5%)</td>
</tr>
<tr>
<td>Community Care Program</td>
<td>$959,932,500</td>
<td>$1,066,000,000</td>
<td>$106,067,500 (11%)</td>
</tr>
<tr>
<td>Community Support Services</td>
<td>$157,271,800</td>
<td>$161,115,700</td>
<td>$3,843,900 (2.4%)</td>
</tr>
<tr>
<td>Service Access</td>
<td>$7,549,100</td>
<td>$7,848,400</td>
<td>$299,300 (3.8%)</td>
</tr>
</tbody>
</table>
FY21 Proposed Budget Summary

- $983 million for the Community Care Program, an increase of $56.6M from FY20

- $83 million for care coordination to increase monitoring and maintain focus on Medicaid enrollment

- $4.1 million in new appropriation to address growth in the Adult Protective Services program and stabilize the workforce

- Additional $2 million for Home Delivered Meals program to eliminate wait list, bringing total to $25.8M and allowing over 43,000 individuals to receive 7.7M meals annually
Caregiver Testimonials

“This program saved my life.

“I learned to love being a caregiver.”

“I learned to look at my mother as MY MOTHER and not as a patient.”

“I am more compassionate and calm.”

“I learned that caregivers can laugh and have a good time.”

“I learned that we caregivers need to take care of ourselves.”
The Department on Aging’s mission is to serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage **independence, dignity and quality of life.**

**Respect for yesterday, support today, and plan for tomorrow.**

- Implement innovative and evidence-based programs to support older adults ability to remain in the community and avoid premature institutionalization.

- Maximize federal, state, local and private resources to increase healthy aging options and social programs for older adults.

- Promote responsive management, accountability and advance technologies to meet the needs of the most vulnerable while create efficiencies in statewide systems.
Year 1 Pritzker Administration Aging Accomplishments

• **Stabilized** the Aging Network by increasing rates for the direct service providers in the Community Care Program.

• **Collaborated** with sister agencies, network providers and Illinois Universities.

• **Expanded** support to older adults and their caregivers by implementing quality programs.

• ** Ensured** vulnerable adults continue to “Age in Place” through the provision of various quality assurance projects.
➢ Listening Tour with CCP direct service providers, Area Agencies on Aging, and Care Coordination Units.
  • 103 site visits conducted since March 2019.
  • From Rockford to Carterville; Quincy to Danville; and everywhere in between – traveling over 15,000 miles across the State of Illinois.

➢ Established partnerships with Northwestern, U of I Urbana-Champaign and U of I at Chicago, CHART, Health & Medicine Policy Research Group, Alzheimer’s Association, and the Retirement Research Foundation to support development of innovative models.
Two years ago, Toby (79) was hospitalized with swelling of the brain. She was an Adult Day Service participant for 8 years. “All the food they serve is nutritious, and it helps that we can eat two hot meals a day. I could not wait to get back to Adult Day Service and as soon as I got better, we went. People there remember my birthday and help me celebrate. They make us feel useful.”

-Moses and Toby F., Adult Day Service Participants

“I don’t know what I would do if I couldn’t attend Adult Day Service. Before I could drive and now, I can’t even go out to the park or get food by myself. In Adult Day Service, I am fed twice a day. I can play billiards with my friends, they take us to the park where I can breathe fresh air, and even dance once in a while.”

-Lionel G., an Adult Day Service Participant
Rate increases for direct service providers working under the community care program

- Addresses workforce turnover and retention
- Service rates increased: In-Home Services, Emergency Home Response, Adult Day Services and Transportation

Rate increases for Care Coordination Units address assistance with Medicaid applications and development of person-centered care plans

- Comprehensive initial assessments and reassessments

<table>
<thead>
<tr>
<th>Service</th>
<th>Previous Rate</th>
<th>Current Rate</th>
<th>% Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Home Service</td>
<td>$18.29</td>
<td>$21.84</td>
<td>19.4%</td>
</tr>
<tr>
<td>Adult Day Service</td>
<td>$9.02</td>
<td>$14.30</td>
<td>58.5%</td>
</tr>
<tr>
<td>Adult Day Transportation</td>
<td>$8.30</td>
<td>$10.29</td>
<td>24.0%</td>
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<tr>
<td>Emergency Home Response Installation</td>
<td>$30.00</td>
<td>$40.00</td>
<td>33.3%</td>
</tr>
<tr>
<td>Care Coordination - Redetermination</td>
<td>$107.07</td>
<td>$174.00</td>
<td>62.5%</td>
</tr>
<tr>
<td>Care Coordination – Initial Assessment</td>
<td>$142.73</td>
<td>$342.73</td>
<td>140.1%</td>
</tr>
</tbody>
</table>

Stabilized the Aging Network
Executive Summary

This budget will address necessary growth and maintenance of programs that help Illinois seniors remain in their homes and community.

<table>
<thead>
<tr>
<th>$'s in thousands</th>
<th>FY20 Enacted Budget</th>
<th>FY21 Governor’s Introduced Budget</th>
<th>$ Difference</th>
<th>% Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Revenue Funds</td>
<td>$240,431.7</td>
<td>$401,883.0</td>
<td>$161,451.3</td>
<td>67%</td>
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<tr>
<td>Federal Funds</td>
<td>$124,913.7</td>
<td>$125,805.3</td>
<td>$891.6</td>
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<tr>
<td>Commitment to Human Services Fund</td>
<td>$814,450.7</td>
<td>$757,118.2</td>
<td>($57,332.5)</td>
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<tr>
<td>Other State Funds</td>
<td>$5,745.0</td>
<td>$5,745.0</td>
<td>$0</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>$1,185,541.1</td>
<td>$1,290,551.5</td>
<td>$105,010.4</td>
<td>9%</td>
</tr>
</tbody>
</table>

FY21 GOVERNOR’S INTRODUCED BUDGET

- General Revenue Funds: $1,290,551.5, 59%
- Federal Funds: $125,805.3, 10%
- Commitment to Human Services Fund: $757,118.2, 31%
- Other State Funds: $5,745.0, 0%

$1,185,541.1, 9% in thousands
## By the numbers

<table>
<thead>
<tr>
<th>Program</th>
<th>FY20 Enacted Budget</th>
<th>FY21 Governor’s Introduced Budget</th>
<th>FY19 Data Points</th>
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</thead>
<tbody>
<tr>
<td>Aging Client Protection and Rights</td>
<td>$32,650,000</td>
<td>$36,750,000</td>
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<tr>
<td>Ombudsman Program</td>
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<td>30,000 Consultations</td>
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<tr>
<td>Adult Protective Services</td>
<td></td>
<td></td>
<td>20,100 Reports</td>
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<tr>
<td>Community Care Program</td>
<td>$959,932,500</td>
<td>$1,066,000,000</td>
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<tr>
<td>Community Care Program Services</td>
<td></td>
<td></td>
<td>71,000 Seniors / month</td>
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<tr>
<td>Care Coordination</td>
<td></td>
<td></td>
<td>270,000 Assessments</td>
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<tr>
<td>Community Support Services</td>
<td>$157,271,800</td>
<td>$161,115,700</td>
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</tr>
<tr>
<td>Older Americans Act Services (Including Nutrition Services)</td>
<td></td>
<td></td>
<td>511,000 Seniors</td>
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<tr>
<td>Service Access</td>
<td>$7,549,100</td>
<td>$7,848,400</td>
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<tr>
<td>Senior Health Assistance Program</td>
<td></td>
<td></td>
<td>103,407 Medicare Consultations</td>
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<tr>
<td>Senior Helpline</td>
<td></td>
<td></td>
<td>153,507 Phone calls</td>
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</table>
➢ Person Centered Planning
Aligning with federal requirements to meet the unique self-directed needs of our vulnerable older adults.

➢ Critical Event Reporting
Using automated reporting application to obtain data and identify trends, patterns and common themes regarding critical events that impact older adults’ ability to continue to “Age in Place”
• Prevention: Falls, ER visits, Hospitalizations
• Monthly quality webinars
• Shaping policy and practice based on evidence coming from the field

➢ Adult Protective Services
Elder Abuse Task Force was established in response to the legislative mandate to investigate the effectiveness of current elder protective services and laws, barriers to prosecution, increase public awareness and identify a long-range plan to combat elder abuse.
In FY19, the average monthly cost of care for an individual on CCP was $965.91*. The average monthly cost of care in a state paid nursing facility for FY19 was $3,362.39. For every month a Medicaid individual remains on CCP, the state saves $2,396.48.

*CCP costs do not include room and board.
IDoA’s priorities include a more targeted approach to supporting CCP participants identified as being at high risk of nursing facility placement based on analysis of critical event and assessment data. IDoA continues to collaborate with the Care Coordination Units (CCUs) and sister agencies to maximize Medicaid enrollment.

The FY21 budget for care coordination request totals $83M which will allow for:

- Aligning intensive casework and intensive monitoring activities with identified risk factors
- Implementing mandatory 6-month face-to-face monitoring visits
- Maintain focus on meeting federal Medicaid Waiver requirements specific to annual reassessments
- Ensuring CCUs assist individuals with applying for Medicaid benefits
• IDoA’s budget priorities included continued support of older adults’ ability to remain independent and “Age in Place” through the provision of quality home and community-based services.

• CCP Services FY21 budget request totals $983M, which is an increase of $56.6M to address projected utilization growth and $60M for a rate increase in In-Home and Adult Day Services. It is projected the Governor’s introduced budget will accommodate over 37M (5.5% increase) units of In-Home Service to 91% of the CCP caseload.
Typical Community Care Program (CCP) Participant

- Female
- Widowed
- Lives Alone
- Caucasian or African American*
  - 78 Years Old
- Income of $16,818
- Assets of $2,204
- 48 Points on the DON**

- Has 8 impairments (including the top 3 of Arthritis, High Blood Pressure and Heart Issues)
- Is receiving In-Home Services through CCP and Home Delivered Meals without other CCP services

*42.5% of CCP participants are white, and 40.4% of CCP participants are black/African American

**The Determination of Need (DON) determines eligibility for CCP/NF level of care. A minimum DON of 29 is required to be eligible.
Community Care Program (CCP) Demographics Data from FY19

Breakdown of the 71,000 people receiving CCP services / month

- Age of Participants:
  - 60-64: 6.0%
  - 65-69: 14.1%
  - 70-74: 18.2%
  - 75-79: 19.1%
  - 80-84: 19.0%
  - 85-89: 7.2%
  - 90-94: 2.5%
  - 95-99: 0.3%
  - 100+: 0.0%

- Ethnicity:
  - White: 42.5%
  - Black / African American: 40.4%
  - Hispanic / Latino: 7.2%
  - Asian or Pacific Islander: 7.2%
  - Other: 2.6%
  - American Indian, Alaskan Native: 0.1%
  - None Entered: 0.0%
IDoA’s budget supports the Department’s priority of responding and following-up on reports of abuse, neglect, and financial exploitation of older adults and persons with disabilities through the Adult Protective Services (APS) Program and Long-Term Care Ombudsman Program.

- It is estimated that the 65+ population will increase 76% by the year 2030; increasing the number of vulnerable adults potentially exposed to abuse, neglect, and financial exploitation (ANE).
- With a $3M grant award from the Administration for Community Living, the APS Program will soon begin a public awareness campaign for the next 3 years, to focus on providing information and outreach to seniors as well as trained mandated reporters.

Adult Protective Services: The FY 21 budget request for APS includes a $4.1M increase to address the projected growth in the number of reports, to stabilize the APS workforce, and to address quality improvements within the Program.
In accordance with federal Older Americans Act regulations, IDOA has divided Illinois into 13 Planning and Service Areas (PSAs). Each PSA is managed and served by an Area Agency on Aging.
  • 12 not-for-profit corporations and one unit of local government, the City of Chicago.

Area Agencies have the primary task of planning and coordinating services and programs for older people in their respective areas.
  • The Area Agencies receive funding from the Department based on a formula which takes into consideration the number of older adults in that area, as well as the number living in poverty, in rural areas, and alone.

Area Agencies are not, as a rule, direct service providers.
  • Area Agencies contract with local agencies which provide services to the older people who live in the same community.
Title III – An increase of $2M for Home Delivered Meals (HDM) will maintain current meal levels, persons served and eliminate the 682 adults on waiting lists.

- HDM improves quality of life and saves money over time through a reduction in chronic health problems - which in turn, may result in fewer hospitalizations and Emergency room visits.

Title V – An additional $1.3M is requested to supplement the $3M in federal funding to maintain employment training at minimum wage level to eligible, low income seniors, who desire to return to the workforce.

ADL (Activities of Daily Living): Everyday personal care activities that are fundamental to caring for oneself and maintaining independence.

- 0 ADL - Indicates a person has no limitations.
- 3+ ADL - Indicates a person has 3 or more limitations.
Alzheimer’s initiatives expanded evidence-based programs to support vulnerable adults and family caregivers.

- “Stressbusters”
- “Savvy Caregivers”

Social Isolation initiative collaborating with other community-based programs to address social isolation among older adults.

Home Delivered Meals Increased FY21 state funding to $25.8M for Home Delivered Meals (HDM) targeting older adults experiencing a high nutritional risk, based on a nutritional risk assessment. In FFY19/SFY20, 7.7M meals were provided to over 43,000 adults in need.
“Stress Busters Program”

• Providing evidence-based education and support for caregivers of people with dementia
• Decreases caregiver depression
• Decreases caregiver stress
• Increases caregiver quality of life

Caregiver Testimonials

“This program saved my life.”

“I learned to love being a caregiver.”

“I learned to look at my mother as MY MOTHER and not as a patient.”

“I am more compassionate and calm.”

“I learned that caregivers can laugh and have a good time.”

“I learned that we caregivers need to take care of ourselves.”
Collaboration with State Agencies

- IDPH – Reducing involuntary discharges from long-term care facilities and public health education
- IDHS – 2020 Census
- HFS – Maximizing Medicaid enrollment
- IDOC – Partnering to assist incarcerated older adults reintegrate back into their community
- OEIG and ISP – Medicaid Fraud Abuse Task Force