Community Care Program Task Force Minutes
9:00 A.M., Thursday, August 24, 2017

Rock River Conference Room, Springfield, Illinois
IDoA Executive Conference Room, Chicago, Illinois

Task Force Members in Attendance:
Jennifer Reif, Representative Bryant, Representative Olsen, Representative Moeller, Senator Steans, Senator Martinez, Darby Anderson, Ron Ford, Joyce Gallagher, Dan Holden, John Hosteny, Chris Kantas, Brandy Schank, Marc Staley, Lyle VanDeventer, Kathy Weiman

Task Force Members not in Attendance:
Representative Gabel

Other Attendees:
Various members of the public and administrative support from the Department on Aging.

Welcome, Roll Call, and Introductions by Members:
Upon motion, duly seconded and an affirmative vote, the meeting was called to order and roll call was taken. Each Task Force Member introduced themselves and provided a brief description of their professional background. A short biography of each member was included in the information provided to the members.

Open Meetings Act Training Requirements:
Members of the Task Force were asked to review the Open Meetings Act. Members were advised of the need to complete the training requirements.

Review Purpose and Goal of Task Force
Members were provided with a copy of the statutory language creating the Task Force, which was reviewed in detail.

The purpose and overall goal of the Task Force is to review CCP Services and develop strategies to reduce the cost of services without diminishing quality and level of care.

Public Comment:
Only one public comment was received. Lori Hendren from AARP asked about a pilot program offering flexible senior services and how that would tie into CCP.

History of Community Care Program:
Chairperson Reif highlighted the legislative details of the history of CCP.

- August 1978- Public Act 80-1411 mandated the Department of Public Aid to establish a program to prevent premature or unnecessary institutionalization of persons needing long term care.
- June 1979- Public Act 81-202 transferred responsibilities for providing alternative care services from the Department of Public Aid to the Department on Aging and the Department of Rehabilitation Services.
• Fiscal Year 1983- in the Benson vs. Blaser decision, the United States District Court ruled that persons on the waiting list for CCP services were entitled to a timely determination of eligibility and receipt of services.

• Fiscal Years 1984 and 1985- a federal home and community- based services (Medicaid) waiver and nursing home preadmission screening was obtained.

• Fiscal Year 1991- a revised Determination of Need was introduced and a case manager training manual was developed.

• Fiscal Years 1994 and 1995- rules were adopted which collapsed chore-housekeeping and homemaker services into one homemaker service.

• Fiscal year 1996- the prevention of spousal impoverishment provisions, which seek to prevent a couple from being impoverished by the cost of long term care, allowing them to maintain an adequate estate and monthly income, while providing a resource which pays for CCP services for the impaired spouse, were incorporated into the Community Care Program.

• Fiscal year 1997- on July 1, 1996 Public Act 89-21 the initiative called “Choices for Care Program”.

• Fiscal Year 1999- Public Act 91-0598 amended the Health Care Worker Background Check Act to provide that CCP homemaker and adult day service employees must complete a background check.

• Fiscal year 2003 required all program applicants and recipients to apply for medical assistance (Medicaid).

• Fiscal Year 2004- on January 1, 2004 the CCP nonexempt asset eligibility standard was increased from $10,000 to $12,500 the first increase in the program’s history.

Challenges:
Several challenges to meeting the mission of the Task Force lie ahead, including concerns with costs. For example, effective August 1, 2017, in home services must be billed at an hourly rate of $19.29. However, the rates for Adult Day Services (ADS) and Emergency Home Response Services (EHRS) were not increased. ADS are billed at an hourly rate of $9.02 and EHRS is a monthly fee of $28.

The cost for the average Determination of Need (DON) score per participant has increased from $42.92 in fiscal year 2010 to $47.23 for fiscal year 2017. In other words, the average cost per client is trending higher.

Based on current projections and leaving rates as they are, in thirteen years (2030) the State of Illinois is projected to have 176,000 participants costing $1.7 billion for the CCP program. This does not include participants in Managed Care Organizations.

Chairperson Reif stated because of such challenges, IDoA is proceeding with a CCP Demonstration Program. The Demonstration is designed to better target services to meet the individual needs of our non-Medicaid aging population while increasing cost effectiveness and participant-centered care planning.

Anticipated outcomes from the Demonstration include the following:
• Participants will continue to have quality and culturally appropriate services that encourage their independence, dignity, and quality of life;
• The rate of termination from the Demonstration will be the same or lower than in CCP; and
• Efficiencies will be realized through new services and delivery models. Target average savings per participant of up to 23%.

The Demonstration will have several areas of evaluation through surveys. These surveys include:
• Baseline satisfaction survey. The baseline satisfaction survey will be provided to participants who are in CCP and want to transition to the Demonstration.
• Quarterly Participant Survey. During the Demonstration, the participant will be resurveyed quarterly. The survey will also include questions about feeling safe and about comfort with their service providers.
• Case Manager Survey. The case managers will be surveyed regarding the plan of care and meeting the needs of clients through available services. This survey will be conducted on Demonstration and CCP clients in the Demonstration region.
• AAA Survey. IDoA will survey and receive feedback from the AAA regarding services development, Care Coordination Unit collaboration and community response.

The Demonstration will also be looking at specific measurements and assessments of the program. IDoA’s measurable results will be as follows:
• Service Cost Maximum Analysis
• Assessment Comparison
• Critical Events Assessment
• Plan of Care Assessment
• Demonstration Termination Rate
• Home and Community Based Services (HCBS) Termination Rate
• New Services Assessment

Chairperson Reif indicated additional information will be provided as the CCP Demonstration Program progresses. At which point, various members discussed holding public hearings. One public hearing will be held in Chicago the morning prior to the Task Force meeting scheduled on September 26th and a second will be in Springfield during the morning prior to the Task Force meeting scheduled on October 17th.

**Discussion not on Agenda:**
A question was raised as to the composition of the Task Force, specifically why AARP and SEIU representatives were not asked to serve. There was an indication of the expectation that AARP would be appointed to fulfill the representation for a state-wide organization and SEIU would be appointed to represent care givers.

A discussion of the qualifications and experience of the Director of the Corporation for National and Community Service represents various senior advocacy organizations in multiple states ensued. In the Director’s opinion and within her discretion, John Hosteny was asked to serve in this capacity. Likewise, the Executive Vice President/Chief Development Officer for Addus HomeCare, Inc. represents caregivers in various states. In the Director’s opinion and within her discretion, Darby Anderson was asked to serve as the representative for care givers. While there was additional discussion by legislative members desiring an advocacy group that was active at the Capitol, there was no desire to remove either of the representatives noted above. The desire was to add representatives from AARP and SEIU to the Task Force.
Chairperson Reif reiterated the mission of the Task Force is to find a solution. She stated all organizations are welcome and invited anyone to share ideas during the public hearings or Task Force meetings. The Task Force is not excluding any organizations or ideas. The public hearings and meetings are intended to make a good faith effort to have all stakeholders’ ideas heard.

IDoA’s General Counsel noted the law, as it was written, is clear and did not allow for adding two additional members.

Notwithstanding, a motion was made, seconded and was voted and affirmatively approved to add AARP and SEIU.*

Representative Bryant and Marc Staley specifically opposed the motion indicating they believed it was not a lawful motion.

**Future Meeting Dates:**
Task Force members were asked to submit potential ideas to fulfill the mission of the Task Force by September 7. The next meeting date is September 26, 2017.

Upon motion, duly seconded with an affirmative vote, the meeting was adjourned.

*indicates amended language.