Date: February 27, 2017 1:00 - 3:00 p.m.  (Minutes approved May 22, 2017)

Locations:
Illinois Department on Aging, 160 N. LaSalle St., 7th floor, Chicago
Illinois Department on Aging (at the DNR bldg.), One Natural Resources Way, Springfield

IN ATTENDANCE: Committee Members
Sherry Barter Hamlin – River-to-River Residential Corporation
Paul Bennett – Next Level Health Partners
Amy S. Brown – CRIS Healthy Aging Center
Theresa Collins – Senior Services Plus Inc.
Cindy Cunningham – Illinois Adult Day Services Association
Lori Hendren – AARP
Susan Hughes – UIC Community Health Sciences School of Public Health
Kaye Kibler – Willowbrook Memory Support Houses
Michael Koronkowski – UIC College of Pharmacy
Andrew Kretschmar – Alzheimer’s Association, Greater Illinois Chapter
Sharon Post (for Phyllis Mitzen) – Health and Medicine Policy Research Group
Susan Real – Caregiver – East Central Illinois Area Agency on Aging
Gustavo Saberbein – Help at Home LLC
Karen Schainker – Senior Services of Central Illinois
Teva Shirley – Southwestern Illinois Visiting Nurse Association
Cathy Weightman-Moore – Catholic Charities LTC Ombudsman Program

Ex-officio Committee Members:
Jean Bohnhoff, Director – Department on Aging
Debra Bryars – Department of Public Health
Kristopher Classen (for Kelly Cunningham) – Department of Healthcare and Family Services
Megan Spitz – Illinois Housing Development Authority
Lyle VanDeventer – Department of Human Services
Gwen Diehl – Department of Veterans Affairs

Guests: Michele Arling, Carol Aronson, Bill Bell, Alejandra Cancino

Department on Aging staff:
Alex Burke, Cindy Bushur-Hallam, John Eckert, Sophia Gonzalez, Jose Jimenez, Lora McCurdy, Jim Ofcarcik, Jennifer Reif, Matt Ryan, Veronica Vera

NOT IN ATTENDANCE: Committee Members
Dr. Thomas Cornwell – HomeCare Physicians
Carla D. Fiessinger – Monaham Law Group
Kelly Fischer – Journey Care Hospice
Jan Grimes – Illinois HomeCare and Hospice Council
Terri Harkin – SEIU HealthCare – Illinois and Indiana
Dave Lowitzki – SEIU HealthCare Illinois and Indiana
Patricia O’Dea-Evans – A Silver Connection
Jason Speaks – Leading Age Illinois
Louise Starmann – Citizen Member
Ancy Zacharia – Home Care Physicians

Ex-officio – Committee Members not in attendance:
Debra Bryars – Department of Public Health
Jamie Freschi – State Long Term Care Ombudsman
Representative – Governor’s office

Introductions & Call to Order:
Director Jean Bohnhoff welcomed everyone to the meeting. Everyone was asked to introduce themselves and indicate what organization they were representing, since there were several new members. Director Bohnhoff asked for a motion to call the meeting to order. Theresa Collins motioned to call the meeting to order and Michael Koronkowski seconded. All members voted in favor.

Approve minutes of Full OASAC November 14, 2016 Meeting:
John Eckert asked everyone to review the minutes from November 14, 2016 meeting and asked for a motion to approve the minutes. Sherry Barter Hamlin made a motion to approve the meeting minutes, Cathy Weightman-Moore seconded. All were in favor; the minutes were approved unanimously without additions or corrections.

2017 Ethics Training for Boards:
Sophia Gonzalez asked everyone to complete the 2017 Ethics Training for Boards and submit a copy of their training certificate before May 31, 2017. Reminders will be sent to everyone before the due date.

Present on Medication Management Demonstration:
Matt Ryan, Chief of Staff introduced Michele Arling from APC Corp, the Department’s new Medication Management Demonstration Project provider. Ryan shared that the Medication Management Demonstration is being piloted in the Chicago area. Michele Arling stated that APC is a new concept healthcare company that initiated this service in 2014 in Washington D.C. with a mission to fill a critical missing piece in the patient care process. APC currently has patients in 11 states including Illinois. Arling shared that APC has been working with and has visited four CCUs to discuss the IDoA Med Management Demonstration. Referrals have been received from these CCUs and home visits have been conducted. There are currently 19 active participants. Additionally, Arling provided examples of how APC has been able to assist participants with financial and safety difficulties under the Demonstration.

OASAC members asked for clarification regarding specific outcomes being looked at and type of credentials levels that persons completing these home visits were required to have. Michele Arling explained that they were looking at outcomes on staying home for one year without hospitalization usage and the cost savings. Persons completing the home visits have been certified pharmacists. Matt Ryan added that in depth reviews of all medications that these participants take are being completed and assured everyone that the number one goal of the Demonstration is the participant’s safety. Members also asked about the most effective strategy for communicating with patients. Arling shared that it has depended on each patient; some prefer face to face visits and others texts. Eligibility criteria and expansion of the Medication Management Demonstration was discussed.

Update on Universal Assessment Tool:
Kris Classen from HFS presented on the UAT. He shared that HFS has worked with interRAI consulting group on the approval of the Comprehensive Health Assessment (CHA) tool that includes “Illinois specific” items. Classen shared that Momentum is the contracted software vendor and AIS has been given the training contract to train the CCU assessors in the pilot program. The UIC College of Nursing has a contract with HFS to provide technical assistance and training on both utilizing the CHA and navigating the Momentum software. The training will be rolled out to the first phase of assessors in early summer. A website portal will be made available for compiling the information. The goal of the initial pilot is to complete 300-400 assessments using both the CHA and DON. Both selected CCUs and DRS staff are participating in the pilot. The results will be analyzed and a crosswalk will be conducted by the University of Michigan.
OASAC members asked which six CCUs were in the pilot program. It was shared that the following CCUs are part of the pilot; Elder Care Services of DeKalb, Shawnee Alliance for Seniors, Southwestern Illinois VNA, Alternatives for the Older Adult, DuPage County Senior Services, and Catholic Charities (Harvey). Lora McCurdy also noted that eventually the CCP comprehensive assessment currently used will not be used once the CHA is in place; adding that the Department will be adding additional questions related to the Older Americans Act and other Illinois-specific questions to be included as a supplement.

**Choices for Care Policy/Public Act 099-0857:**
Lora McCurdy shared that the Department has been working with its sister agencies in implementing the requirements of S.B. 2929 that became P.A. 099-0857 that requires the CCUs to transmit Hospital and community pre-screen information to Nursing Facilities. She noted the changes to the Choices for Care policy and compliance with P.A. 099-0857 mirrors one of the key recommendations from the BIP-funded Choices study conducted by The Lewin Group consultants. The changes included requiring the CCUs to provide weekend coverage effective January 1st. Additionally, McCurdy noted that the Department with its sister agencies have conducted three webinars on changes to the Choices Policy and federal Pre-Admission Screening and Resident Review (PASRR) requirements to: CCUs, DHS PAS Agents, DDD ISC Agencies; Nursing Facility (NF) and Supportive Living Program (SLP) providers; and Hospital staff. She shared that the previous policy allowed 10 days to conduct post-screens and that has been shortened to two days. CCUs are also now required to send the Department a weekly list of those individuals that they were not able to complete a pre-screen (hence requiring a NF/SLP post-screen) for within the two-day timeframe and to state the reason. This information is being shared with HFS and with representatives of the Illinois Health and Hospital Association to identify and mitigate reasons why pre-screens aren’t completed prior to discharge from a Hospital.

OASAC members asked if the CCU is the point of access for screens for all hospitalizations (i.e.; including individuals ages 18-59) and the response was that they are. It was also clarified that if a DHS/DRS participant in the community needs a screen for a Nursing Facility placement, then they would work with a DRS counselor. Interim services for the Aging population were discussed and whether MCOs should be setting up these services. The Department responded that additional trainings need to be provided to staff to ensure that all parties involved understand their roles.

**Update on Budget:**
Jim Ofcarcik, CFO provided an update on the Budget. He shared that FY18 Budget for IDoA was introduced at $965 million and that not having the FY17 budget has been a challenge. The “Stop Gap” budget appropriations have been depleted and there are no funds left for non-Medicaid payments. He shared that the Department has been vouchering the Medicaid bills to the Comptroller; and that he has ongoing communication with the Assistant Comptroller regarding hardship payments. Ofcarcik noted that there is a $6.7 billion backlog of bills at the Comptroller’s office with a current available balance of $48 million. He also noted SB 6, amendment 1 (a supplemental bill) that would allow the state to pay bills out of the commitment to Human Services for non-Medicaid bills.

**Update on Community Reinvestment Program:**
Deputy Director Reif reported that the Department will be submitting the proposed rules to GOMB soon. She additionally noted that the Department will also be participating in a subject matter hearing on CRP before the House Aging Committee. Paul Bennett asked if de-coupling non-Medicaid individuals from CCP is in violation of the Benson v Blaser decree. Cindy Bushur-Hallam, IDoA Chief Counsel noted that it will not impact the creation of CRP but she will get back to OASAC with more specifics. Cindy Cunningham asked if the Department would proceed with CRP without a budget. The response was that the Department will continue to proceed with the development of CRP but that it cannot be implemented without an appropriation. Lori Hendren asked what would happen if JCAR approves the proposed rules for CCP and CRP without an appropriation. Bushur-Hallam indicated that emergency rules would be filed to keep the current CCP rules intact.
**Update on Legislation:**
Alex Burke, Legislative Liaison shared that the next House Aging Committee meeting is on March 9th at 8:30 a.m. This Committee has met once and is chaired by Representative Moeller. Burke shared that the Department is currently tracking 250 bills related to Aging. These include a Department initiative (SB 1319) that would permit the use of video conferencing equipment in any adult guardianship hearing.

**Other Issues & Announcements:**
John Eckert asked the members to email the Department any recommendations for the full OASAC and Executive Committee vacancies.

Director Bohnhoff shared that she would like to explore the efficacy of merging some of the Department’s existing advisory councils like OASAC and the Long Term Care Council and asked the Legislative Liaison how many councils did the Department currently have. Alex Burke noted that the Department has five councils and advisory committees. Director Bohnhoff noted that she would like the Department to begin looking into the statues and different purposes that council and advisory committees have and consider the possibility of combining some of these groups. Susan Real noted some similarities between OASAC and the LTC Council and noted that its required annual report was 3-4 years past due. It was agreed that the Department prepare an overview of the five councils and advisory boards and share this at a future OASAC meeting.

Lora McCurdy shared that HFS has an RFP to expand Managed Care to every county in the state and the Department is included in this initiative. The deadline to bid on this proposal is May 15th. Director Bohnhoff asked the OASAC members how have CCUs been affected by the MCO roll out. It was shared that providers are having problems and that many CCUs have not been getting paid. It was suggested that it might be a communication problem between the MCOs and the CCUs regarding IT systems and coding.

**Motion to Adjourn:**
John Eckert asked for a motion to adjourn the meeting. Gwen Diehl made a motion to adjourn. Sherry Barter Hamlin seconded the motion. All were in favor; the motion was approved unanimously. The meeting was adjourned at 2:55 p.m.