Illinois Department on Aging... promoting independence, dignity and quality of life
Age 60+ Population in Illinois

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage of Total Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>15%</td>
</tr>
<tr>
<td>2005</td>
<td>18%</td>
</tr>
<tr>
<td>2010</td>
<td>21%</td>
</tr>
<tr>
<td>2015</td>
<td>24%</td>
</tr>
<tr>
<td>2020</td>
<td></td>
</tr>
<tr>
<td>2025</td>
<td></td>
</tr>
<tr>
<td>2030</td>
<td></td>
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</tbody>
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Population Growth in Illinois for Persons Age 85 and Older

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>175,000</td>
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<td>2020</td>
<td>275,000</td>
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A MESSAGE FROM
DIRECTOR CHARLES D. JOHNSON

I am pleased to present the Fiscal Year 2010 Annual Report for
the Illinois Department on Aging. Although we face
challenging economic times, we remain committed to our
mission of helping older adults stay safe and independent in
their homes and communities for as long as possible.

The Department, working with the Area Agencies on Aging and
local service providers, serve hundreds of thousands of older
adults and their caregivers each year through the Community Care Program,
Circuit Breaker and services funded by the Older Americans Act. The need for
our services will only increase as the population ages and people live longer
than ever before, often with chronic conditions.

Confronted by tight budgets and an increase in the older adult population,
there is an incentive for state and federal government to support the
rebalancing of the long-term care system. Policy-makers are realizing that, not
only would many older adults prefer to stay in their homes, but community-
based services are often a lower cost alternative to nursing home care. We also
recognize that a nursing home might be the best option for an older adult so
we must promote quality care.

I am optimistic about the opportunities that the Patient Protection and
Affordable Care Act, enacted in March 2010, provides to enhance home and
community-based services and supports. The law has the potential to improve
the life of older Americans in several ways that include gradually closing the
Medicare prescription drug coverage gap commonly known as the “donut
hole,” providing better preventive and chronic care, and improving the
availability of long term care at home.

I encourage us to see the challenges as opportunities to find new and more
efficient ways to serve older adults. The Department is dedicated to
collaborating with our partners on the federal, state and local levels to help
older adults live longer, healthier and independent lives.
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VISION
The vision for the Illinois Department on Aging is that, united with local communities and the public and private sector, it will be both a leader and a partner in helping all older Illinoisans and their caregivers achieve an optimum quality of life, assuring independence, dignity, self-sufficiency, health and safety.

MISSION
The mission of the Illinois Department on Aging 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.

SUMMARY OF AGENCY OPERATIONS
The Illinois Department on Aging administers a comprehensive service delivery system to help the State’s approximately two million older adults remain independent in their own homes and communities. The Department’s Community Care Program (CCP) is designed to assist older adults age 60 and older at risk of nursing home placement by providing services including comprehensive care coordination, adult day, in-home care and emergency home response. The Department also administers the Circuit Breaker Program, which provides property tax relief to eligible older adults and disabled residents. The Circuit Breaker Program is also responsible for facilitating enrollment in the State’s pharmaceutical assistance program Illinois Cares Rx, which is administered by the Illinois Department of Healthcare and Family Services. In addition, the Department works in partnership with the 13 Area Agencies on Aging to administer community-based programs funded through the federal Older Americans Act such as home delivered meals, transportation, information and assistance, and caregiver support. The Elder Abuse and Neglect and Long-Term Care Ombudsman are other programs administered by the Department that are vital to the health and well-being of older adults.

STRATEGIC PRIORITIES
- Promote community-based services and client-centered options to prevent premature institutionalization.
- Improve access to better health care benefits and protect elder rights.
- Maximize federal and state funds.
- Promote responsive management and innovation.

Fiscal Year 2010 Budget by Fund

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<thead>
<tr>
<th>Fund Category</th>
<th>FY 2010 Appropriations ($ thousands)</th>
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<tr>
<td>Other State Funds</td>
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<td>Federal Funds</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>745,171.1</strong></td>
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### Fiscal Year 2010 Budget by Major Program

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<tr>
<th>Program</th>
<th>FY 2010 Appropriations ($ thousands)</th>
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<td>Elder Rights</td>
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<td>32,286.9</td>
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<td>89,247.6</td>
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<td>Training and Staff Development</td>
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<tr>
<td>Central Management</td>
<td>8,571.9</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>745,171.1</strong></td>
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### Fiscal Year 2010 Employees by Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>FY 2010 Employees (Percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>87%</td>
</tr>
<tr>
<td>African American</td>
<td>9%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3%</td>
</tr>
<tr>
<td>Asian</td>
<td>1%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

At the beginning of Fiscal Year 2010, the agency had a headcount of 159 employees. The Department achieved parity in all workforce categories in accordance with its FY 2010 Affirmative Action and Hispanic Employment Plans. The Department will continue to fill vacancies timely, and secure and retain a qualified and balanced workforce that is representative of the Affirmative Action categories, pursuant to the State Personnel rules and AFSCME contract provisions.
Department on Aging
2010 Accomplishments
In FY 2010, the Illinois Department on Aging continued to work in partnership with the Area Agencies on Aging and hundreds of local service providers throughout the State to fulfill its mission to encourage independence, dignity and quality of life for older Illinoisans. Continued priorities include maintaining services to help older adults stay in their homes as they age, protecting the rights of older adults living in the community as well as in nursing homes, and helping older adults access important benefits such as pharmaceutical assistance.

Lifespan Respite
In September 2009, Illinois was one of only 12 states chosen to receive a Lifespan Respite Care Program Award in the amount of $200,000 from the U.S. Administration on Aging. As a grantee, the Department on Aging is using the funds to enhance the coordination and accessibility of community-based respite care programs available for caregivers. The ultimate goal is the reduction of family caregiver strain.

Year of the Engaged Older Adult
At the Governor’s Conference on Aging, Governor Pat Quinn announced 2010 as the “Year of the Engaged Older Adult.” The announcement was a kick-off to a year-long campaign encouraging older adults to engage in community activities. The campaign is a call to action for individuals, families, and communities to boost learning, strengthen the workforce, and enrich community life by encouraging older adults, ages 50 and older, to lend their expertise to these areas. Department on Aging Director Charles D. Johnson leads the statewide initiative with the support of an advisory team.

ILHousingsearch.org
The Department on Aging has partnered with other state agencies to create a new Web site to help Illinois residents find rental homes. The Website, ILHousingsearch.org, features statewide property listings and allows users to search through a range of features to find a home that fits their needs. Other partners include the Illinois Housing Development Authority, the Illinois Department of Human Services, and the Illinois Department of Healthcare and Family Services.

State Plan on Aging
The Department on Aging developed and submitted the three-year Illinois State Plan on Aging to the U.S. Administration on Aging. The Plan establishes priorities and identifies Department on Aging initiatives to fulfill its mission to serve and advocate for older Illinoisans and their caregivers. The Plan includes input from various stakeholder organizations, associations and advisory groups, as well as comments received at four public hearings held across the state.
Elder Abuse Fatality Review Teams

In response to amendments to the Elder Abuse and Neglect Act, effective June 1, 2009, the Department on Aging is establishing regional interagency elder abuse fatality review teams. The purpose of an Elder Abuse Fatality Review Team (EAFRT) is to review suspicious deaths of persons age 60 or older who reside in domestic living situations. EAFRTs will be established in Boone/Winnebago, Kane, DuPage and Madison counties.

Circuit Breaker/Illinois Cares Rx Applications

There were more than 283,000 Circuit Breaker and Illinois Cares Rx applications filed online in 2010. The number has increased dramatically since 2004 when fewer than 45,000 online applications were received by the Department. Online applications greatly reduce error rates and the time for processing, issuing grant payments and approving pharmaceutical benefits.

Medicare Improvements for Patients and Providers Act Outreach

The Department on Aging, in collaboration with the Senior Health Insurance Program (SHIP), applied for and received a two-year federal grant totaling $1.087 million to provide outreach and assistance to people likely to be eligible for the Medicare Part D Low-Income Subsidy (LIS) and Medicare Savings Programs (MSP). The funding is jointly administered by the U.S. Administration on Aging (AoA) and the Centers for Medicare & Medicaid Services (CMS) and made possible by the Medicare Improvements for Patients and Providers Act of 2008.

Veterans Independence Program

The Department began implementation of the U.S. Administration on Aging funded initiative to provide community-based services to veterans in Illinois. Through the “Veterans Independence Program (VIP),” Area Agencies on Aging serve veterans of all ages as identified by their partners at the regional Veterans Affairs Medical Centers. VIP is a veteran directed home and community-based services program that helps veterans who are at risk of being placed in nursing homes.

Operation Guardian

In February 2010, the Long Term Care Ombudsman Program joined with the Office of Attorney General in an effort to protect residents in long term care facilities by becoming engaged in Operation Guardian, a multi-disciplinary compliance check in nursing homes. More than 20 unannounced nursing home checks were held to review safety and compliance issues. Collaborating partners include law enforcement, the Illinois Department of Public Health and the Illinois Department of Professional Regulations.
Older Americans Act Services and Elder Rights
Older Americans Act funded programs serve older adults who reside in neighborhoods throughout Illinois. Available programs and services include Information and Assistance, Outreach, Transportation, Legal Assistance, Nutrition services and more. With the support of the Area Agencies on Aging and local service providers, more than 511,700 older adults received services to help them remain independent in their homes and communities during Federal Fiscal Year 2010 (FFY 2010).

ACCESS PROGRAMS

Information and Assistance
Before older adults can consider what services best fit their particular needs, they need to know as much as possible about the services available. Beginning with a simple telephone call to one of Illinois’ local information and assistance providers, an older adult or their caregiver can receive up-to-date information from trained professional staff on a wide range of available programs and benefits.

In FFY 2010, information and assistance staff at local sites across the state received 833,490 calls from older adults seeking information on a host of issues including home and community-based service options, pharmaceutical assistance and elder rights. In addition, the Illinois Department on Aging’s statewide toll-free information and assistance service, the Senior HelpLine, assisted more than 146,100 callers during the year.

Outreach
Outreach services target older adults in Illinois communities who may be isolated or unaware of the programs and services that are available to them. Outreach staff visit with older adults, or their caregivers, to inform them about the various benefits available and to help them access needed assistance. In FFY 2010, 15,270 older adults were offered help through the Aging Network’s outreach efforts, thus increasing their chances for receiving beneficial services.

Transportation
Many older adults cannot drive because of hearing, vision or mobility losses, and health conditions. Transportation is the link that ensures older adults access to the services and opportunities that help them remain independent. Transportation helps older adults access health care, nutritional services, employment opportunities, and friends and families. Through the Department’s transportation services in FFY 2010, older adults made more than 622,850 trips to and from locations in their communities.
Support for Family Caregivers
The Illinois Family Caregiver Support Program was made possible by the Administration on Aging as a result of the 2000 amendments to the federal Older Americans Act (Public Law 106-50). The program calls for all states, working in partnership with Area Agencies on Aging and local service providers, to offer the following to family caregivers:

- Information about available services;
- Assistance in gaining access to services;
- Individual counseling, organization of support groups, and caregiver training;
- Respite care to enable caregivers to be temporarily relieved from their responsibilities; and
- Supplemental services, on a limited basis, to complement the care provided by caregivers.

Individuals eligible for the program include family caregivers, defined as adult family members or other individuals who provide in-home and community-based care to older adults, as well as grandparents and other relative caregivers of children no more than 18 years of age. The law requires states to give priority consideration to persons in greatest social and economic need, and older adults providing care and support to persons with mental retardation and related developmental disabilities. In FFY 2010, approximately 70,400 family caregivers and 2,560 Grandparents Raising Grandchildren (GRG) were served by the Illinois Family Caregiver Program.

In SFY 2010, the Illinois Department on Aging issued General Revenue Funding (GRF) to community organizations to deliver supportive services to Grandparents Raising Grandchildren (GRG). In SFY 2010, approximately 1,625 GRG were served by this General Revenue Fund Program.

SOCIAL SERVICE PROGRAMS
Senior Centers
Local senior centers have regular operating hours and are often the community’s focal point for older adult services. The senior center provides excellent opportunities for socialization, relaxation and participation in a variety of programs and activities. Senior centers, which services may include congregate meals, transportation and pharmaceutical assistance, enhance the choices available to older adults in the community. The Illinois Department on Aging collaborates with more than 370 senior centers that serve older friends and neighbors across Illinois.

Legal Assistance
Legal assistance providers advocate for and represent older clients in civil cases. Those cases include elder abuse and neglect, financial exploitation, consumer fraud, landlord-tenant relationships, nursing home residents’ rights, and conflicts over benefit programs such as Medicare, Medicaid, and Social Security. They help with simple estate planning, prepare living wills and
durable powers of attorney, and conduct educational programs regarding legal rights. In FFY 2010, Illinois’ legal assistance providers contributed 32,800 hours of assistance to older adults.

**Nutrition Services**

Congregate meals are served weekdays in over 512 sites throughout the state including senior centers, churches, senior housing facilities and community buildings. The program provides a nutritionally balanced meal and may also include nutrition education. Approximately 99,620 older adults benefited through the program in FFY 2010, enjoying more than 2.8 million meals with their peers.

When older adults cannot leave their homes and cannot personally prepare nutritious meals, home-delivered meals are an available option. In FFY 2010, 40,910 eligible older adults received over 7.5 million home-delivered meals.

Typically, federal and state funded meal programs allow for home-delivered meals on weekdays only. Illinois participates in a public/private partnership program known as MEALS-ON-WHEELS ILLINOIS. The program is designed to raise funds for holiday, weekend and emergency meals, helping to fill the “gaps” left by federal and state funded home-delivered meal programs.

**Employment Program**

The Senior Community Service Employment Program (SCSEP) is a federally funded program designed to assist adults age 55 and older in entering or re-entering the job market. The program is administered by the Department on Aging through the Area Agencies on Aging and two private contractors, which are responsible for implementing it at the local level.

The SCSEP fosters and promotes part-time community service opportunities. Anyone who is at least 55 years old, has a limited income (a figure set by the U.S. Department of Labor at not more than 125 percent of the poverty level) and is capable of performing the tasks involved in the proposed community service assignments, is eligible to enroll in the program. SCSEP places enrollees, usually 20 hours a week at minimum wage, in community service or not-for-profit agencies where they can remain productive and independent in their communities while earning modest incomes.

Participants also receive personal and employment-related counseling to enhance their abilities and skills to increase their job marketability. In SFY 2010, more than 720 older adults participated in the program. Approximately 51 percent of the older workers who have received temporary assignments through the SCSEP were transferred to permanent jobs. An additional 178 older adults were served with ARRA funding during SFY 2010.
ELDER RIGHTS PROGRAMS

Elder Abuse and Neglect Program

The Illinois Department on Aging administers the statewide Elder Abuse and Neglect Program to respond to reports of alleged mistreatment of older adults 60 years of age or older who live in the community. The Elder Abuse Program is locally coordinated through 41 provider agencies that conduct investigations and work with older adults in resolving abusive situations.

During FY 2010, there were 10,308 reports of elder abuse received by the program. Financial exploitation was reported in more than half of the cases (58 percent) and is highly associated with emotional abuse, which represented 45 percent of the reports. The other types of abuse reported included passive neglect, physical abuse, willful deprivation, confinement and sexual abuse. In many cases, more than one type of abuse was reported.

Types of Abuse Reported

- **Financial Exploitation**: 5,953
- **Emotional Abuse**: 4,590
- **Passive Neglect**: 3,896
- **Physical Abuse**: 2,173
- **Willful Deprivation**: 1,143
- **Confinement**: 765
- **Sexual Abuse**: 396

Social workers or medical personnel were responsible for reporting approximately one in four cases of elder abuse. Family members reported 20 percent of cases, while victims self-reported in nine percent of all cases. Older adults often need others to report for them in cases of neglect and willful deprivation. Self-reports were most likely to occur in physical, sexual, emotional and financial exploitation cases.

Elder abuse occurs primarily within a family. More than three-fourths of the abusers were the spouse, child or other relative of the victim. Half of the abusers were male even though the majority of caregivers to older adults are women.

In FY 2010, 23 percent of the alleged victims were age 86 or older and 70 percent were female. Three of the five victims suffered from one or more barriers to independent living. While 37 percent of the victims were
functionally impaired, meaning they had difficulty performing daily tasks such as walking, personal care, meal preparation and housecleaning. Many of these older adults were victims of neglect and deprivation.

**Illinois Long-Term Care Ombudsman Program**

As mandated by the Federal Older Americans Act and the Illinois Act on Aging, the Long-Term Care Ombudsman Program advocates for residents of licensed long-term care facilities. Quality resident care and residents’ rights are top priorities for the Department, Area Agencies on Aging and the 16 Regional Long-Term Care Ombudsman Programs, which include 52 full-time paid Ombudsmen and 171 volunteer Ombudsmen.

In FY 2010 the Ombudsman Program responded to 7,322 complaints. The majority of the cases (77 percent) were fully or partially resolved to the satisfaction of the resident involved. In addition, the Ombudsman Program handled 17,407 consultations with nursing home residents or their family members and made 17,138 facility visits. Despite no additional funding, the Ombudsman Program continued its push to be more visible and available to residents in Illinois long-term care facilities.
Community Care Program
The Community Care Program (CCP), established in 1979 by Public Act 81-202, provides in-home and community-based care to frail older adults. During FY 2010, CCP served approximately 61,000 older adults each month, thereby successfully diverting and delaying many of those individuals from nursing home placement.

To qualify for CCP, an older adult must have less than $17,500 in assets (home, car, and household furnishings are excluded). This CCP asset level requirement has increased twice since the inception of the program going from $10,000 to $12,500 on January 1, 2004, and to the current level on July 1, 2006, allowing more older adults at risk of nursing home placement to receive in-home and community-based services. In order to participate in the CCP, a participant must also be age 60 or older, a U.S. citizen or legal alien, apply for and enroll in medical benefits (Medicaid) and have an assessed need for long-term care (scoring 29 points or higher on the "Determination of Need" assessment instrument).

### CCP Appropriation and Caseload History

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<tr>
<th>FY</th>
<th>Appropriation</th>
<th>Caseload</th>
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<tbody>
<tr>
<td>2003</td>
<td>$223.8</td>
<td>38,950</td>
</tr>
<tr>
<td>2004</td>
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<tr>
<td>2010</td>
<td>$590.6</td>
<td>60,964</td>
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</table>
The Department on Aging takes a holistic and participant-focused view to providing older adults with the services they need to stay at home and in their communities. CCP services include the following:

**Comprehensive Care Coordination**

The foundation of the CCP is Comprehensive Care Coordination provided by a statewide network of community-based Care Coordination Units. Comprehensive Care Coordination, implemented in FY07, is a holistic approach to assessing the needs of older adults to help them access supportive services so they can live safely and securely in the community. This system provides coordination among CCP services and federal Older Americans Act Title III funded services, as well as local service options. In FY 2010, more than 41,502 older adults received initial comprehensive assessments.

**In-Home Service**

Homecare aides provide assistance with household tasks that include cleaning, shopping, preparing meals and assisting clients participants with personal care such as bathing, grooming, dressing, feeding and following special diets. In FY 2010, the Department on Aging contracted with 71 home care agencies to meet the needs of an average monthly caseload of approximately 52,750 older adults. Rates for home care provider agencies have increased dramatically in recent years, from $10.56 per hour 10 years ago to $17.14 per hour in FY 2010.

**In-Home Service Hourly Rate History**
Adult Day Service
Adult day service is designed especially for older adults who want to remain in the community but who cannot be home alone during the day due to physical, social or cognitive impairment. Adult day service also provides respite for family caregivers and socialization for isolated adults. Services offered in adult day service centers include health monitoring, medication supervision, personal care and therapeutic activities. Nutritious lunches and snacks are served and special diets are provided.

During FY 2010, 76 adult day service sites provided community-based services to approximately 3,000 participants per month. Several of these sites specialize in providing care to participants diagnosed with Alzheimer's disease and related disorders, while others serve specific ethnic populations.

Emergency Home Response Service
Emergency Home Response Service, implemented in October 2006, allows seniors to summon emergency assistance from a device worn around their necks 24-hours-a-day, 7-days-a-week from their own homes. These devices provide seniors and their caregivers with peace of mind and reduce the need for premature nursing home placement. In FY 2010, more than 24,725 clients utilized the service.

Choices for Care
The Department on Aging provides universal nursing home pre-admission screening for all persons age 60 and older seeking admission to a nursing facility. In accordance with state law, all persons seeking admission to nursing facilities must be informed of all available care options prior to admission, regardless of the individual’s income, assets or funding source.

Care Coordinators from Care Coordination Units conduct the screenings primarily in hospitals immediately prior to patient discharge. The screening process gives older adults and their families the opportunity to ask questions and to understand community-based services, as well as institutional options for continuing care. In instances of short-term nursing facility placement for purposes of rehabilitation or convalescence, care coordinators may conduct follow-up screenings in the nursing facilities to aid transition back into the community when possible. In FY 2010, approximately 97,450 prescreening visits were conducted with persons requesting care or considering placement in a long-term care facility.

Demonstration Projects
The My Choices Cash & Counseling Demonstration Program gives participants the flexibility to develop a monthly budget within program guidelines, decide which services they receive, how and when the care will be
provided, and select the individuals who provide the services. Participants are the employers of their personal care workers and are responsible for hiring, training, supervising and if necessary, firing their workers. This demonstration project began in FY08 and is offered in Kankakee County, Macon County, Marshall, Stark, Woodford, and Tazewell Counties, Bond, Clinton, Madison, Monroe, Randolph, St. Clair, and Washington Counties. In FY 2010, Cash & Counseling served an average of 123 participants per month.

The Senior Companion Demonstration Program started in FY89. Senior Companion agencies provide an array of assistive, supportive companionship services to frail seniors by utilizing volunteers, age 60 or older, who have limited incomes. The focus of these services is to provide economic, psychological and social benefits to volunteers while meeting the needs of older adults and offering respite to family caregivers. Senior companion services started in FY89 and are available in Alexander, Cook, Macon, Madison, Pulaski, St. Clair, Union, and Will counties. In FY 2010, senior companions served more than 131 participants each month.

Recognizing the diverse needs of seniors, the Department awarded $2 million for Flexible Senior Services in FY 2010. Grant funds were distributed to the Area Agencies on Aging (AAAs) and authorized in conjunction with care coordinators for participants with needs outside the normal spectrum of services available through CCP. Examples of Flexible Senior Services include respite care, home modifications, assistive devices and medication management. These types of additional services allow more seniors to remain independent and living at home at a cost effective level under CCP. In FY 2010, more than 2,400 participants were served.

The Department on Aging Money Follows the Person initiative is part of a statewide, multi-department demonstration program. This voluntary program is for individuals 60 and over who have resided in nursing facilities for a minimum of six months, and have received Medicaid benefits for a minimum of the past 30 days. The goals of the program are to assist individuals who wish to transition out of the nursing home to home and community-based services. The Department began its participation in this project in FY09. During FY 2010, there were 1,601 face-to-face interviews with nursing home residents conducted and 34 participants transitioned from nursing homes into community-based services or supportive living facilities.

In FY 2010, the Department received a 3-year grant from the Administration on Aging to enhance and expand Aging and Disability Resource Centers (ADRCs) in Illinois. The Department on Aging first received federal funding to initiate ADRCs in 2004 and with the new grant the number of pilots has increased from 3 to 5 sites. The pilot sites are currently operating in 5 of the thirteen Planning and Service Areas (PSAs) including Rockford, Kankakee, Bloomington/Decatur, Southwestern Illinois and Suburban Cook County.
Situated in several urban and rural areas of the state, the Comprehensive Care in Residential Settings (CCRS) demonstration program combines housing, personal and health related services for those who need assistance with activities of daily living. In FY 2010, the CCRS demonstration program had an average monthly caseload of approximately 221 seniors. This alternative to nursing home residency promotes independence and provides a more cost-effective housing and community-based service option alternative to nursing home care. All facilities involved in the program are licensed under the Assisted Living and Shared Housing Act, Public Act 91-0656. Project sites include Murphysboro, Deerfield, Rockford, Ullin, Herrin, Chicago and Olney.

In FY00, the Extended Community Care Options demonstration project was developed to address the homecare aide shortage, which prevented some of Lake County’s CCP participants from receiving authorized levels of service. Under this demonstration project, Catholic Charities contracted with multiple local organizations to provide a variety of services that include homecare aide and adult day services, as well as home-delivered meals, money management, laundry, transportation and grocery delivery. The project was designed to provide creative service options to participants. In FY 2010, approximately 995 participants were served each month.

The Managed Community Care demonstration project completed its 16th year of operation in FY 2010. The project was designed to provide a broader range of services more efficiently and cost effectively. The Department’s project partner, the Council for Jewish Elderly, is paid a set monthly fee for each participant served based upon the participant’s level of impairment, rather than the more traditional fee-for-service model. In addition to in-home care and adult day services, available services for eligible participants include home-delivered meals, transportation, medication management, elder rights advocacy, money management and home repair. During FY 2010, the program served approximately 512 participants per month.

The Transportation Demonstration Project, which began in 1997, was developed to address problems associated with transporting CCP participants to medical appointments and essential errands. The project provides a transportation option in DeKalb, Pope, Hardin, Gallatin and Saline counties, as well as several other counties in southern Illinois. In FY 2010, the project served approximately 68 participants monthly.
The Home Delivered Meals Demonstration Project, which started in FY98, was designed as a support service to provide CCP participants, who are homebound by reason of illness, incapacitating disability or are otherwise isolated, with a nutritious meal delivered to their home. In FY 2010, the project served 58,225 meals.

The Illinois Volunteer Money Management Program started in 1993 and is a partnership between the Department, AARP and the Illinois Council of Care Coordination Units. The program offers daily money management service to CCP participants who have difficulty budgeting, paying routine bills and keeping track of financial matters. In FY 2010, the program served approximately 551 participants each month.

The Department received a federal grant in FY08 to develop a program that would divert older adults from nursing home placement. The Community Living Program utilizes a cash and counseling program model to provide older adults and/or their family caregivers financial assistance to support a variety of services to help them remain in their own homes. In FY 2010, the program served 288 participants.
Circuit Breaker
Illinois Cares Rx
On July 1, 2004, the Circuit Breaker Pharmaceutical Assistance program transferred to the Department on Aging from the Department of Revenue. Pursuant to Executive Order 2004-3, the Department on Aging assumed responsibility for functions of the program including the application and enrollment process, as well as administering the customer service toll-free Circuit Breaker line.

The Circuit Breaker program was initiated in 1972 by the Illinois Department of Revenue (Public Act 83-1531) to provide property tax relief to low-income senior and disabled residents. The Circuit Breaker program expanded in 1985 to include Pharmaceutical Assistance as an optional benefit to give low-income seniors and disabled residents access to essential medication. In 1992, the Circuit Breaker program was further expanded to include one reduced license plate sticker annually per qualifying household.

In 2005, pursuant to Public Act 094-0086, Circuit Breaker Pharmaceutical Assistance joined with the Department of Healthcare and Family Services' (HFS) SeniorCare program to form Illinois Cares Rx. The new, combined program was designed to “wrap-around” the Medicare Part D prescription drug benefit that went into effect January 1, 2006.

Illinois Cares Rx consists of two categories – Illinois Cares Rx Basic (formerly Circuit Breaker Pharmaceutical Assistance) and Illinois Cares Rx Plus (formerly SeniorCare). The property tax grant, the Disabled Ride Free card, and the license plate reduction continue to be benefits of the Circuit Breaker program as well.

If an individual is eligible for Medicare, Illinois Cares Rx helps pay the monthly premium, annual deductible, and cost sharing if enrolled in a coordinating Medicare Part D prescription drug plan. If participants are not eligible for Medicare, they can still receive coverage under both the Illinois Cares Rx Basic and Illinois Cares Rx Plus plans.

In claim year 2009 (calendar year 2010), to participate in Illinois Cares Rx Basic, an individual must have been at least 65 years of age or disabled with a 2009 household income of $26,917 for a single person and $36,212 for a married couple. Illinois Cares Rx Basic covers medications to treat the following conditions: Alzheimer’s disease, arthritis, cancer, diabetes, glaucoma, heart and blood pressure problems, HIV/AIDS (if eligible for Medicare), lung disease and smoking related illnesses, multiple sclerosis, osteoporosis and Parkinson’s disease.

Illinois Cares Rx Plus was available to citizens or qualified non-citizens in claim year 2009 (calendar year 2010) who were at least 65 years of age and met income eligibility requirements, which included a 2009 annual income of $27,610 for a single person and $36,635 for a married couple. Illinois Cares Rx Plus covers all classes of medically necessary prescription drugs.
Individuals file just one application (Form IL-1363) to receive the pharmaceutical benefits available though Illinois Cares Rx, as well as a Circuit Breaker grant to reduce the property tax burden, a Disabled Ride Free card if requested, and a $75 license plate discount from the Secretary of State's Office. However, the income requirements for the benefits differ.

In claim year 2009, the income limit for the Circuit Breaker grant, Disabled Ride Free card, and license plate discount was $27,610 for a single person household and $36,635 for a married couple. The amount of property grant is figured by a formula using the amount of property or mobile home tax, rent or nursing home charges paid and an individual’s total income.

In claim year 2009 (calendar year 2010), the number of Circuit Breaker and Illinois Cares Rx applications filed with the Department on Aging was 385,263, with 354,122 of those applications approved for at least one of the four benefits. The total number of applicants enrolled in Illinois Cares Rx was 227,360. The number of applicants eligible for Illinois Cares Rx Basic was 54,421 and the number of applicants eligible for Illinois Cares Rx Plus was 172,939.

The number of Circuit Breaker and Illinois Cares Rx applications filed online continues to increase each year. Of the total number of applications received last year, 283,284 were received online. These online applications are received with fewer errors and can be processed several weeks faster than paper-based applications.

**On-line Application History**

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Community Relations
and Special Programs
Senior HelpLine

The Department's statewide toll-free Senior HelpLine, 1-800-252-8966, 1-888-206-1327 (TTY) provides information on programs and links older adults and their caregivers to local services. Professionally trained staff assess participant needs, send literature and provide written referrals on a range of issues including pharmaceutical assistance, elder rights and home and community-based service options.

In addition, the Senior HelpLine staff answer incoming calls on the dedicated Elder Abuse Hotline (866-800-1409). The staff respond to reports of suspected abuse, neglect and exploitation of older adults and relay the information to the appropriate elder abuse provider agencies for investigation and follow-up.

A new phone system was installed in 2006 to better serve the public. The enhanced system fully automated the Senior HelpLine for the first time since its inception with Interactive Voice Recognition (IVR), allowing callers to check on the status of their Circuit Breaker Illinois Cares Rx applications without the assistance of staff. In addition, the Senior HelpLine hired additional bilingual staff members to better respond to limited English speaking callers.

In FY 2010, the Senior HelpLine responded to 146,172 calls. The majority of the calls received, nearly 80 percent, were regarding Circuit Breaker and Illinois Cares Rx. These calls included specific questions on prescription coverage, grants, the Persons with Disabilities Ride Free program and license plate discounts. Approximately 16 percent of the calls were in regard to the access and delivery of home and community-based services funded through the Older Americans Act and the Community Care Program, while the remaining five percent pertained to Elder Rights and included the reporting of elder abuse.

Outreach

The Department is committed to promoting programs and services that benefit senior Illinoisans. For example, the Department plays the lead role in the statewide pharmaceutical clearinghouse, often working with the Department of Healthcare and Family Services and the Senior Health Insurance Program (SHIP) to make older adults aware of policy changes and updates that may impact their prescription drug coverage.

Each month, the Department hosted a conference call that includes the Area Agencies on Aging as well as local service providers committed to ensuring that seniors across Illinois receive the pharmaceutical assistance benefits to which they are entitled. The calls provide a forum to keep the Aging Network apprised of developments and respond to pending issues.
The Department has also extended efforts to update older adults, caregivers and professionals about recent enhancements to the Community Care Program. Press releases and speaking engagements provide opportunities to inform the public about the Aging Network’s efforts to transform the long-term care system in Illinois and expand home and community-based service options.

During FY 2010, outreach staff coordinated the Department and Aging Network partner participation at 76 events throughout the state. These events provided the opportunity to reach more than 47,000 older adults and their caregivers, helping them to access beneficial programs and services.

**Illinois State Fair**

Since 1990, the Department on Aging has operated a senior building at the annual Illinois State Fair in Springfield. The air-conditioned Illinois Building, which is near the main gate on the state fairgrounds, is open daily from 9 a.m. to 6 p.m. The senior building provides older adults with an opportunity to get out of the heat, while taking advantage of informative exhibits, free health screenings and entertaining performances.

The Department staffs the building and manages all activities. This includes arranging and coordinating entertainment and special events, as well as working with the many exhibitors. State agencies and private organizations are available to provide information to attendees about their programs and services.

In FY 2010, the State Fair ran from August 14-23. On Senior Day, held August 17, daily admission was free for people 60 years of age and older. Senior Day highlights included the 2009 Illinois State Senior Spelling Bee sponsored by Blue Cross and Blue Shield of Illinois, the Illinois Department on Aging, the Illinois Association of Senior Centers and the Illinois Homecare Council.

Health screenings were provided by St. John's Hospital, Blue Cross and Blue Shield of Illinois, the Illinois Optometric Association and the Illinois Lion’s Club to check for conditions such as osteoporosis, diabetes, high blood pressure and cholesterol.

**Awards and Recognition Programs**

The Department and the Aging Network regularly recognize individuals and organizations that have made outstanding contributions to their communities. Annual awards programs include the Senior Illinoisan Hall of Fame, Governor’s Award for Unique Achievement and the Older Workers Awards. In addition, at the annual Governor’s Conference on Aging a number of awards are presented by professional associations to individuals and groups whose accomplishments merit recognition.
Perhaps the most prestigious of the awards is the Senior Illinoisan Hall of Fame, initiated by the General Assembly in 1994, to commemorate the achievements and contributions of citizens age 65 or older. Inductees, recognized for their contributions in four areas including community services, education, the work force and graphic/performance arts, are selected each year through a statewide nomination and judging process. In FY 2010, four new members were recognized in October during a special ceremony held at the Governor's Mansion.

Training and Education
The Department on Aging is a leader in providing educational opportunities to professionals from aging services agencies. In FY 2010, approximately 4,000 individuals participated in Department sponsored conferences and workshops. Training focused on issues such as caregiving, prescription assistance programs, mental health, Alzheimer's disease and elder rights. Much of the training offered by the Department is made available to social workers, nursing home administrators and other professionals in the aging field for continuing education credits.

The Department's biggest and most comprehensive training event is the annual Governor's Conference on Aging held each December in Chicago. It continues to be one of the largest statewide meetings of professionals who work in the aging field. In FY 2010, the event brought together more than 500 people focused on the issues affecting senior Illinoisans.

Senior Corps
Senior Corps is a program of the Corporation for National and Community Service which connects adults age 55 and older with volunteer opportunities. In Illinois, Senior Corps partners with the Illinois Department on Aging to fund the Foster Grandparents Program and the Retired and Senior Volunteer Program.

The **Foster Grandparents Program** provides opportunities for senior volunteers to assist young people with special needs. Many volunteers offer support to children who have been abused and neglected; mentor troubled teenagers and young mothers; help with homework and work in hospitals with special needs children. In FY 10, 774 Foster Grandparents Program volunteers provided over 795,600 hours of services through 11 projects located throughout the state.

**Retired and Senior Volunteer Programs** throughout Illinois provide a variety of volunteer opportunities to seniors. In FY 10, senior volunteers provided more than 2.6 million hours of volunteer service to agencies, businesses and organizations in over 23 sites in Illinois. Volunteers contributed hundreds of hours of service to schools, libraries, Head Start, adult literacy and after school programs. RSVP members include skilled carpenters, data entry workers, counselors, nutrition site aides, and income tax aides among others.