

EAST CENTRAL ILLINOIS AREA AGENCY ON AGING



Corporate Board

Advisory Council

Staff

FY 2016 Orientation

ECIAAA is Your Area Agency on Aging



- Our mission is to help older Americans maintain their independence and quality of life.

Who We Are

- ❑ ECIAAA is a non-profit organization
- ❑ Founded in 1972
- ❑ Serves over 150,000 older adults and their families in 16 counties (Area 05)
- ❑ One of 618 AAAs in the U.S.; 13 in Illinois
- ❑ Governed by a Corporate Board of 20 volunteer community leaders
- ❑ Advised by an Advisory Council of 32 volunteer community leaders

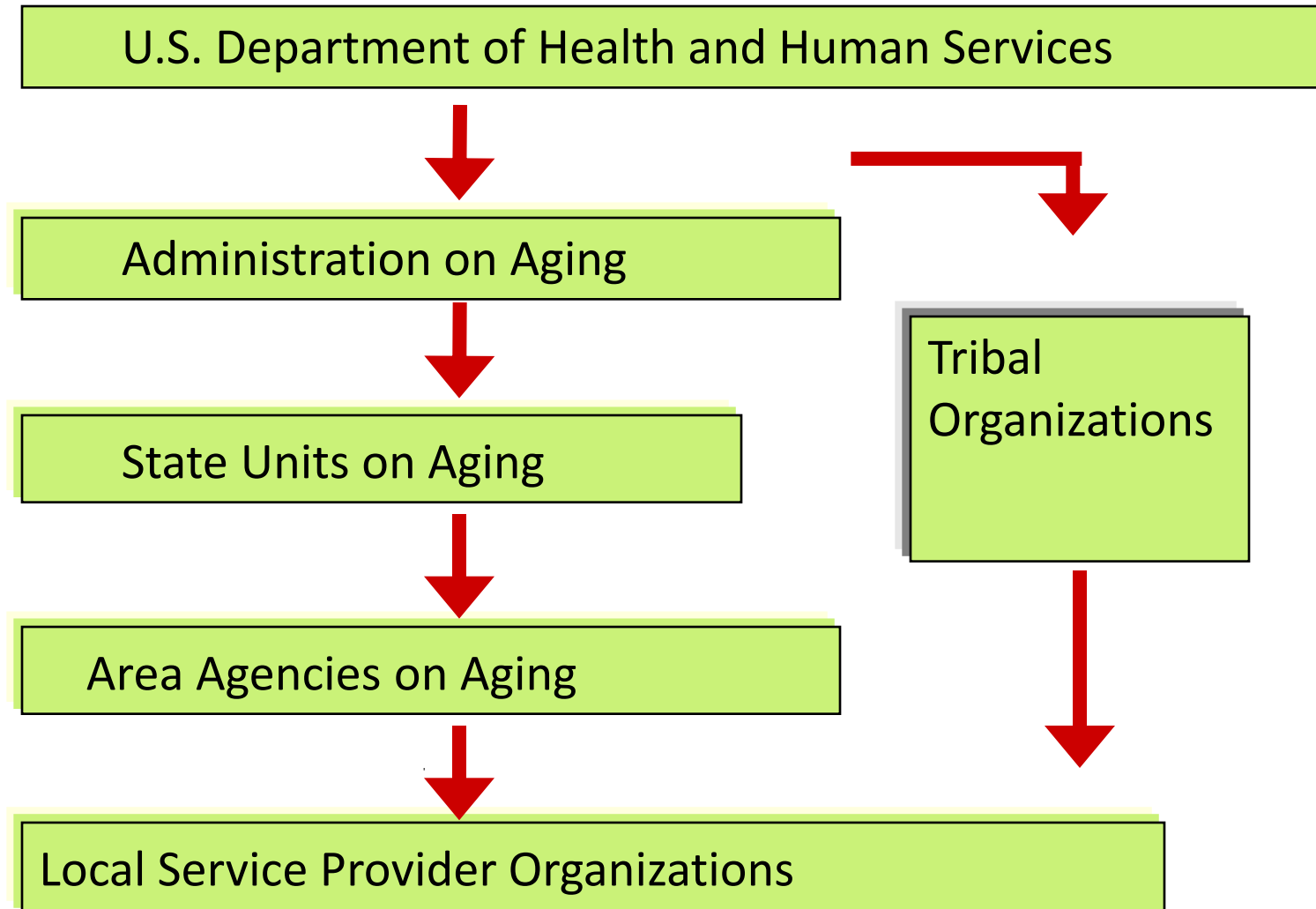
ECIAAA Staff

- Susan C. Real, Executive Director
- Susan H. Redman, Deputy Director-CFO
- Amanda Hyde, Planning & Grants Manager
- Kelly Coffee, Fiscal Manager/IT Manager
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- Jessica Aceves, ISU Stevenson Fellow
- Tess Whipple, Regional Ombudsman
- Jaime Spears, Long Term Care Ombudsman
- Misty Parker, Long Term Care Ombudsman
- Valerie Anderson, Long Term Care Ombudsman
- Joy Sorden, Administrative Assistant

Sources of Authority and Funding

- Area Agencies on Aging in Illinois are authorized under the federal Older Americans Act and the Illinois Act on Aging.
- ECIAAA is designated by the Illinois Department on Aging to serve PSA 05.
- Major funding for ECIAAA is made possible with grants of Federal Older Americans Act funds and State Funds from the Illinois Department on Aging

THE AGING NETWORK ESTABLISHED BY THE OAA



What We Do



- Advocacy in Action
- Answers on Aging
- Empowering older adults to uphold their rights
- Regional and Community-Based Planning
- Program Development
- Coordination of Services
- Grants Administration
- Quality Assurance & Quality Improvement

Coordinated System of Services

- Access Services
- In-Home Services
- Community Services
- Evidence-Based Healthy Aging Programs
- Care Transitions
- Caregiver Support Programs
- Elder Rights Programs
 - Adult Protective Services and Ombudsman Program

The Aging Network in Area 05

- 21 OAA Community Programs on Aging
- Served 20,049 older adults, 1,087 elder caregivers and 229 grandparents raising grandchildren in FY2014
- Medicare beneficiaries in Area 05 (3/31/15):
 - 141,979 Medicare beneficiaries
 - 70,505 enrolled in Medicare Part D Plans (49.66 %)
 - 1,435 Part D apps completed by SHAP sites in 2013
 - 33,690 enrolled in Medicare Advantage Plans (23.73%)

Advocacy for Residents in Long Term Care Facilities

- ECIAAAA sponsors a regional Ombudsman Program through a grant with the Illinois Department on Aging and the Office of the State Ombudsman.
- The Ombudsman Program investigates complaints made by or on behalf of residents of licensed long term care facilities, assisted living facilities and supportive living facilities.

Advocacy for Residents in Long Term Care Facilities

- The Ombudsmen visit residents, inform residents about their rights, refer residents to Transition Coordinators to facilitate the transition to community-based living arrangements, and in the future will advocate on behalf of clients receiving homecare and persons enrolled in managed care programs.

Advocacy for Residents in Long Term Care Facilities

- The Ombudsman Program also advocates on behalf of adults eligible for Medicaid-waivered home care services and older adults and persons with disabilities who are enrolled in managed care demonstration programs in Area 5.

Advocacy: On the National Scene

- ECIAAA is a member of the National Association of Area Agencies on Aging (*n4a*) advocating to:
 - Strengthen the Social Security Program
 - Strengthen the Medicare Program
 - Reauthorize the Older Americans Act
 - Increase appropriations for Older Americans Act Programs

Advocacy at the State Level

- ECIAAA is a member of:
 - *I4A* - Illinois Association of Area Agencies on Aging
 - Illinois Alliance for Home and Community Care
 - Illinois Partners for Human Services
 - Together we support rebalancing the Long Term Care System to provide community-based long term services and supports for older adults and persons with disabilities and prevent unnecessary placement in state operated facilities and long term care facilities.

Advocacy at the State Level

- Governor's Proposed Budget for FY2016 includes:
- The following changes to the Community Care Program:
 - A reduction of \$140.73 million in administration and service grants.
 - An increase in CCP Capitated Coordinated Care of \$134.7 million.
 - An increase of \$1.8 million for Case Management.
 - Average CCP case load of 76,000 with a monthly care plan of \$781.60

Advocacy at the State Level

- Proposed changes to the Community Care Program
- Proposed reductions in authorized services by an average of one unit per week per client
- Proposed new income eligibility limit of \$17,500 for new applicants effective 7.1.15
- Proposed increase in Determination of Need (DON) score from 29 to 37 points for new applicants

Advocacy at the State Level

- Recommended funding level for Home Delivered Meals is \$14,005,200 – an increase of \$2,382,000 from FY 2015 to maintain a projected service level of 6 million meals and respond to persons on waiting lists.

Advocacy at the State Level

- \$22.4million GRF for Adult Protective Services Program for persons 60+ and for persons with disabilities ages 18 – 59
- This is \$659,700 below the FY 2015 level – to respond to 18,065 projected reports of abuse, neglect and exploitation affecting persons 60+ and persons with disabilities ages 18 – 59.

Advocacy: At the State Level

- Recommended funding for the Long Term Care Ombudsman Program (LTCOP) includes: \$5.5million GRF; and, \$2.6 million in other state funds (pursuant to the Illinois Nursing Home Reform Bill (P.A. 96-1372). This represents a \$4,021,900 increase in GRF.
- 7.7 million for Planning and Service Grants to AAAs – to help seniors access federal benefits and ADRC options counseling.

Advocacy at the State Level

- Senior Health Insurance Program (SHIP)- \$2.3 million
- Senior Health Assistance Program (SHAP) - \$1.6 million (Tobacco Settlement Recovery Funds)
- Grandparents Raising Grandchildren - \$300,000
- Long Term Care Systems Development - \$243,800
- Senior Employment Specialist Program - \$190,300
- Retired & Senior Volunteer Program - \$551,800
- Foster Grandparent Program - \$241,400

ECIAAAA Advocacy Agenda for 2016

ECIAAAA is the regional focal point for advocacy on behalf of older Americans and caregivers in Area 5. ECIAAAA is a member of **n4a** - the National Association of Area Agencies on Aging, **NCOA** - the National Council on Aging, **IAA** - the Illinois Association of Area Agencies on Aging, the Illinois Alliance for Home and Community Care, and the Illinois Coalition on Mental Health & Aging. ECIAAAA supports the following advocacy agenda for 2016:

ECIAAAA Advocacy Agenda for 2016

- **On the National Scene:**
- Support strengthening the Social Security Disability Insurance Trust Fund by rebalancing existing payroll tax collections between it and the Old-Age and Survivors Insurance (OASI) Trust Fund.

ECIAAAA Advocacy Agenda for 2016

- **On the National Scene:**
- Oppose proposals which are designed to save money in the Medicare program but significantly increase costs for future Medicare beneficiaries.
- Support the passage of S. 192 to reauthorize the Older Americans Act.
- Support higher federal appropriations for all Older Americans Act Programs.

ECIAAAA Advocacy Agenda for 2016

- **At the State Level:**
- Support a FY2016 budget for the Illinois Department on Aging which maintains or increases funding for grants to Area Agencies on Aging for Community-Based Services, Home Delivered Meals, Adult Protective Services and the Ombudsman Program, and ensures timely payments for provider agencies.

ECIAAAA Advocacy Agenda for 2016

- **At the State Level:**
- Oppose increasing the minimum Determination of Need (DON) score from 29 to 37 points for eligibility of older adults for the Community Care Program and persons with disabilities for the Home Services Program, and ensure that older adults and persons with disabilities can continue to obtain services and supports needed to live independently at home, and prevent unnecessary placements in long term care facilities.

Older Americans Act of 1965



OAA Objectives

- An adequate income in retirement
- The best possible physical and mental health
- Obtaining and maintaining suitable housing
- Full restorative services for those who require institutional care, and a comprehensive array of community-based, long-term care services
- Opportunity for employment with no discriminatory personnel practices because of age.
- Retirement in health, honor, dignity
- Participating in and contributing to meaningful activity within the widest range of civic, cultural, educational and training and recreational opportunities.

OAA Objectives

- Efficient community services, including access to low cost transportation, which provide a choice in supported living arrangements and social assistance in a coordinated manner.
- Immediate benefit from proven research knowledge which can sustain and improve health and happiness.
- Freedom, independence, and the free exercise of individual initiative in planning and managing their own lives, full participation in the planning and operation of community based services and programs provided for their benefit, and protection against abuse, neglect, and exploitation.

Reauthorization of OAA

- On January 20, 2015, the Older Americans Act Reauthorization Act of 2015 (S. 192) was introduced.
- Key features include:
 - A “hold harmless” provision to achieving a funding formula compromise.
 - *I4A* supports S. 192 and must advocate even more diligently for increased federal appropriations for OAA programs to keep pace with a growing aging population.

Reauthorization of OAA

ECIAAA's Message:

“The Older Americans Act is critically important to seniors here at home, as it creates and funds the vital home and community-based services that help older Americans to live with maximum health, independence and dignity. We are so pleased the bill has bipartisan support and urge the Senate to vote in favor of reauthorization.”

Why is it important?

- The older population represents 23.8% of the general population, over one in every 8 Americans
- The U.S. population age 65 and over is expected to double in size within the next 25 years
- By 2030, almost 1-out-of-5 Americans, some 72 million people, will be 65 and over
- Reauthorization is VITAL to SURVIVAL!

Who does the OAA target?



- OAA appropriated funding serves all people age 60 and over, but is targeted to those with the greatest economic or social need.
- Services can include home delivered meals, congregate meals, senior centers, transportation, and support for family caregivers, home and community services, health promotion and disease prevention, civic engagement, and community service training and employment for mature workers with limited means.

ECIAAAA Strategic Plan

- Maintain necessary programs for support
- Coordinated Point of Entry
- Determine which programs are crucial for older adults in the area and organize programs around those priorities
- Determine the main function of the agency
- Program evaluation
- Bring awareness to the community about needs and the funding burden; get the community to take action.

County Conversations – ECIAAAA's Planning Process for FY 2015

- ECIAAAA convened 16 County Conversations on Aging and Independent Living
- 496 people participated
- Facilitated and recorded by Survey Research Service, Champaign, IL
- Summaries of 16 County Conversations and the Executive Summary were prepared by Survey Research Service and are available on our website: www.eciaaa.org

County Conversations: Senior Information Services

- Common Topics:
- Insurance, Medicare, Medicaid eligibility
- Transportation for seniors
- Managing and paying utility bills
- Help with taxes, and tax filing
- Help obtaining eye glasses, hearing aids
- Renewing auto license plates, drivers' licenses

Senior Information Needed

- Senior Information Services needed but sometimes not available:
- A “central clearinghouse” – a master list of senior services;
- Information about “point-to-point” transportation services, especially in small towns and rural areas i.e., “transportation needs not easily met using scheduled routes on mass transit systems;” and
- Information about reputable “handyman” services.

County Conversations: Caregiver Support

- Caregiver support services most often received:
- Homemaker services, e.g., help with bathing, dressing, cooking, cleaning, etc.
- Meals
- Loaned medical equipment
- Assistance with hearing, vision, disabilities
- Transportation
- Help with medications
- Help renewing license plates, driver's license

Caregiver Support Needed

- “Point to Point” transportation not easily met using scheduled public transit routes;
- Better services needed for “young” seniors and persons under 60 with disabilities;
- Services for caregivers caring for persons with Alzheimer’s disease and other dementias; and
- Services for grandparents and other adults raising children.

County Conversations: Nutrition Services

- Participants at DMCOC congregate dining sites in Macon County like the food and fellowship.
- Participants in CRIS Healthy-Aging nutrition programs like the variety of menu choices offered by participating restaurants in Vermilion County and value CRIS Meals-on-Wheels.
- Participants in the Peace Meal Senior Nutrition Program want to continue the delivery of hot meals to congregate locations and seniors' homes and do not want hot meals to be replaced by frozen meals.

County Conversations: Legal Assistance

- Major legal issues facing seniors:
- Guardianship
- Powers of Attorney
- Abuse and exploitation
- Eligibility for Medicaid, Social Security Disability
- Housing
- Wills and estate planning
- Help with taxes
- Bankruptcy and managing debt

Legal awareness and preferences

- ❑ Land of Lincoln Legal Assistance provides legal assistance to seniors in 13 counties in Area 05.
- ❑ Prairie State Legal Services serves Iroquois, Livingston and McLean Counties.
- ❑ Seniors do not always know where to go or where to call for legal assistance in their county.
- ❑ Seniors regard legal issues as personal and prefer to discuss such matters in person, not by phone.
- ❑ Older adults want legal assistance that is affordable and preferably free of charge.

Other Issues Raised

- Senior services in Ford and Iroquois Counties
- Teamwork between ECIAAA and Senior Centers
- Housing conditions in Macon County
- Help for persons with vision and/or hearing loss
- Help for people applying for Medicaid
- Help for seniors to manage medications
- Building wheel-chair ramps
- Screening for seniors with mental health problems
- Access to low-cost dental care

County Conversations Epilogue – ECIAAAA's Planning for FY 2016

- Senior Information Services
 - Medicare Improvement for Patients and Provider Act (MIPPA) Grants
 - Medicare-Medicaid Alignment Initiative (MMAI) Grants
 - SIS/CPoE Mid-Year Reviews-
 - “Central Clearinghouse” – A master list of senior services still a need
 - Transportation needs still prevail
 - Handyman services are still needed

County Conversations Epilogue – ECIAAA's Planning for FY 2016

- Caregiver Support Services
 - During January of 2015, ACL invited ECIAAA to participate in a survey of the National Family Caregiver Support Program.
 - ECIAAA exploring the feasibility of piloting the Savvy Caregiver Program
 - Caregiver Advisory Services Mid-Year Evaluation:
 - Grandparents Raising Grandchildren issues remain complex
 - Need for coordination among services

County Conversations Epilogue – ECIAAA's Planning for FY 2016

- Nutrition Services
 - Seniors reported they wanted more fruits and desserts
 - Nutrition providers reported compliance with 1/3 RDA and DRI's during FY 2015.
 - “Lunch and Learn” programs
 - Nutrition education

County Conversations Epilogue – ECIAAAA's Planning for FY 2016

- Nutrition Services
 - Want to see the continued delivery of hot meals to congregate locations
 - Peace Meal resumed congregate hot meals to five days per week during FY 2015
 - Improved attendance at congregate meal sites
 - Healthy aging programming
 - “Soup & Salad Bars”

County Conversations Epilogue – ECIAAAA's Planning for FY 2016

- Legal Assistance
 - Legal education is increasing
 - Legal services targeted to ensure confidentiality at convenient locations

Emerging Strategic Issues

- Implementation of Affordable Care Act;
- Expansion of Medicaid in Illinois;
- Integrated Care Program (ICP);
- Medicare-Medicaid Alignment Initiative (MMAI);
- Proposed 1115 Medicaid Waiver;
- Balancing Incentive Program (BIP);
- Consolidation of local DHS Family Community Resource Centers – limits access;

Emerging Strategic Issues

- Expansion of 2-1-1 System in Illinois;
- Public and private transportation options;
- Unmet need for home delivered meals;
- Growth of the 85+ population;
- Prevalence of disabilities in later life;
- 5.2 million Americans of all ages with Alzheimer's Disease;
- Growing needs of family caregivers;

Emerging Strategic Issues

- Increase in number of cases of abuse, neglect, and financial exploitation impacting older adults and adults with disabilities ages 18 to 59;
- Transition of the Adult Protective Services Program to include reports of “Self-Neglect”;
- Expansion of the Ombudsman Program to include complaint investigation and advocacy on behalf of persons receiving home care and older adults and persons with disabilities enrolled in managed care.

Age Strong, Live Strong

- The mission of ECIAAA is to empower older adults to **Age Strong and Live Strong** – to help them maintain their independence and quality of life.
- Through the implementation of the Area Plan for FY2016 and beyond, and through the extension of federal and state grant assistance for community programs on aging in Fiscal Years 2016-2017, ECIAAA will continue to pursue the following outcomes:

Outcome #1 - Easy access to information and services

- **Older Adults served by Coordinated Points of Entry and Senior Information Services are empowered to engage in services to improve their quality of life.**
- To achieve this outcome, CPoE/SIS providers will;
 - Utilize a standardized intake process
 - Utilize the Enhanced Services Program (ESP)
 - Provide on-going coordination & connection to services
 - Complete referrals and “warm transfers”
 - Utilize Options Counseling

Outcome #1 - Easy access to information and services

- CPoE/SIS providers will:
 - Engage participants in available programming, such as Plan Finder, Benefits Access, Medicaid applications, etc.
 - Provide follow-up monitoring
 - Provide access to evidence-based Healthy-Aging programs
 - Serve as a “central clearinghouse” for senior services as part of their service design
 - Collaborate with Centers for Independent Living

Outcome #2- Caregivers are supported

- To achieve this, Caregiver Support Services will:
 - Provide information and assistance
 - Organize and facilitate appropriate support groups, and/or refer to existing support groups, including support groups for families caring for persons with Alzheimer's Disease and other dementias.
 - Build and maintain local Caregiver Support Teams
 - Offer training and education on topics, such as:
 - Grandparents Raising Grandchildren
 - Powerful Tools for the Caregiver

#2 Outcome – Caregivers are supported

- Caregiver Support Programs will:
 - Caregiver and GRG Intake and Screening completion
 - Provide caregiver-centered respite services as prescribed in their Care Plan
 - Provide follow-up monitoring
 - Program Options Counseling when appropriate
 - Provide access to Healthy-Aging Programs

Outcome #3 – Improve food security; reduce social isolation

- To achieve this, Senior Nutrition Programs will:
 - Utilize the Nutritional Risk Assessment
 - Utilize the intake and screening form
 - Address operational and safety issues as part of the individual assessment for home delivered meals
 - Implement creative program design and menu planning that optimize consumer choice
 - Provide consistent meal provision in accordance with Dietary Reference Intakes (DRIs)

Outcome #3 Improve food security; reduce social isolation

- Provision of a five day per week meal program
- Reduce feelings of isolation in participants
- Provide access to Healthy-Aging programs
- Provide “wellness” or “well-being” checks which follow best practice guidelines
- Provide nutrition education
- Enhance socialization of participants

Outcome #4 Older adults have their legal needs met

- To achieve this outcome, Senior Legal Assistance Programs will:
 - Inform seniors about the availability and location of their services and their case acceptance priorities
 - Prioritize legal assistance for Adult Protective Service cases
 - Attend court hearing and prepare legal documents, such as advance directives

Outcome #4 – Older adults have their legal needs met

- To achieve, this Legal Assistance Programs will:
 - Provide assistance in obtaining public benefits, such as Social Security, Medicare, Medicaid, etc.
 - Provide referrals and follow-up for additional services to benefit the client
 - Provide community education opportunities on legal issues impacting target populations
 - Collaborate and consult with other service providers serving the same populations

Care Transitions

- Outcome: Older adults will have successful transitions between services and levels of care
- The Aging Network will:
 - Conduct holistic assessment & identification of needs
 - Make referrals and connections to services, e.g., Options Counseling, warm transfers, etc.
 - Timely service delivery and initiation of services
 - Follow-up to ensure services are in place and benefit the consumer
 - Gather consumer input, feedback on satisfaction

Healthy Aging

- Outcome: Older adults are empowered to improve their health through evidence based programs, including:
 - ▣ **Chronic Disease Self Management**
 - ▣ **Diabetes Self Management**
 - ▣ **Program to Encourage Active Rewarding Lives (PEARLS)**
 - ▣ **A Matter of Balance (falls prevention)**
 - ▣ **Strong for Life (strength-building exercise)**

Area Plan Initiatives

- Statewide Initiative – Development of Aging and Disability Resource Networks
- Local Initiative in Area 05:
 - Healthy Aging – helping older adults manage chronic health conditions
 - Take Charge of Your Health: Live Well, Be Well
 - Strong for Life
 - DSMP
 - PEARLS
 - Matter of Balance

Statewide Initiative: Aging & Disability Resource Network

- The Illinois Department on Aging has defined this statewide Area Plan initiative as follows:
- Enhance Illinois' existing aging and disability access network through improved collaboration and adoption of Coordinated Point of Entry (CPoE) and Aging and Disability Resource Center standards

Statewide Initiative: Coordinated Points of Entry to ADRC's

- ▶ **Purpose:** to make it easier for seniors and families to access information and services.
- ▶ **Definition:** “an integrated access point where consumers receive information and assistance, assessment of needs, care planning, referral and assistance in completing applications, authorizations of services where permitted and follow-up to ensure that referrals and services are accessed.”

CPoE Implementation History in Area 05

- ECIAAA incorporated statewide CPoE standards into Senior Information Services effective October 1, 2010
- ECIAAA designated CPoE Service Providers for FY 2011, and again for FY 2015.
- ECIAAA has designated 12 Coordinated Points of Entry for PSA 05.
- The CPoE Program Design is the platform for ECIAAA's Aging & Disability Resource Center (Network).

ADRC/Network = A Process

- The ADRC service model is more a process than an entity
- The ADRC is not necessarily located in a single place
- Program components are not necessarily carried out by a single agency
- **“No wrong door” approach**

Defining Characteristics of ADRC/Network

- Seamless access system for the consumer
- High level of visibility and trust
- Proactive intervention with pathways to LTSS
- Options counseling
- Integration of aging and disability service systems
- Formal partnerships across aging, disability and Medicaid services
- All income levels served
- Continuous quality improvement

ADRC/Network Workplan for FY2016

- Promote AIRS training and certification
- Convene the ADRC Network Advisory Council
- Develop core competencies, e.g., Options Counseling
- Develop relationships with Critical Pathway Partners, e.g., DHS Family & Community Resource Centers, DORS, providers of behavioral healthcare and services to persons with developmental disabilities
- Maintain and update the ESP resource data base
- Integrate the Caregiver Support Program into the ADRC Network.
- Integrate the VIP Program into the ADRC Network

Local Initiative: Healthy Aging

- ▶ Empower older adults to manage multiple chronic health conditions.
- ▶ Support Senior Wellness Coalitions in Champaign, Macon, McLean, and Vermilion Counties.
- ▶ Promote senior nutrition programs as an integral part of healthy aging.
- ▶ Advocate for public and private resources to enable senior nutrition programs to respond to unmet need.
- ▶ Integrate evidence-based interventions in community programs on aging.

Evidence-Based Programs

- ***Chronic Disease Self Management Program***
 - Senior Resource Center – Family Service
 - Starting Point – ADRC for Macon County
 - PATH – Providing Access to Help
 - CRIS Healthy-Aging Center
 - LifeSpan Center serving Coles County
- ***Diabetes Self Management Program***
 - Champaign County Diabetes Coalition
 - Livingston County Health Department
 - Macon County Health Department

Evidence-Based Programs

- ***Strong For Life*** – strength-building exercise program in partnership with Catholic Charities, Multipurpose Senior Centers, and Nutrition Programs.
- ***PEARLS*** – helping older adults to reduce depressive symptoms through gerontological counseling provided by Family Service and PATH in collaboration with a clinical consultant and a medical advisor.
- ***“A Matter of Balance”*** – helping older adults to improve balance, prevent and manage falls; targeted to Macon and McLean Counties.

Adult Protective Services Program

- ECIAAAA - Regional Administering Agency for the Adult Protective Services (APS) Program in Area 05
- Administer grant assistance to 7 APS Agencies serving 16 counties
- Responded to over 1,211 ANE reports in FY2014
- Participate in multi-disciplinary “M” teams
- Convene annual retreat, coordinate training
- Promote development of legal assistance and money management services
- Implemented an Adult Protective Services program for persons with disabilities 18-59 in accordance with statutes, rules and standards promulgated by Department on Aging
- During FY 2016, implement expansion of Self-Neglect Services.

LTC Ombudsman Program

- ▶ ECIAAA sponsors the Long Term Care Ombudsman Program in Area 05
- ▶ Serving over 10,000 residents in 144 licensed health facilities, 32 ALFs, and 18 SFLs
- ▶ Meet or exceed mandated benchmarks including: regular presence visits, individual consultations, resident council meetings, community education, facility in-service trainings, educate residents about Money Follows the Person, and facilitating MFP referrals and transitions.

LTC Ombudsman Program – cont.

Traditional Long Term Care Ombudsman Program-

- Has been sponsored by ECIAAA since the mid-seventies
- It is a resident-directed program that protects and promotes the rights and quality of life for people who reside in long term care facilities.
- Services are available to residents of any long term care facility
- Services include working to resolve complaints
- Provides a regular presence in facilities
- Assures the interests of residents are represented to policymakers and governmental agencies
- Assists in developing family councils in long term care facilities.

LTC Ombudsman Program – cont.

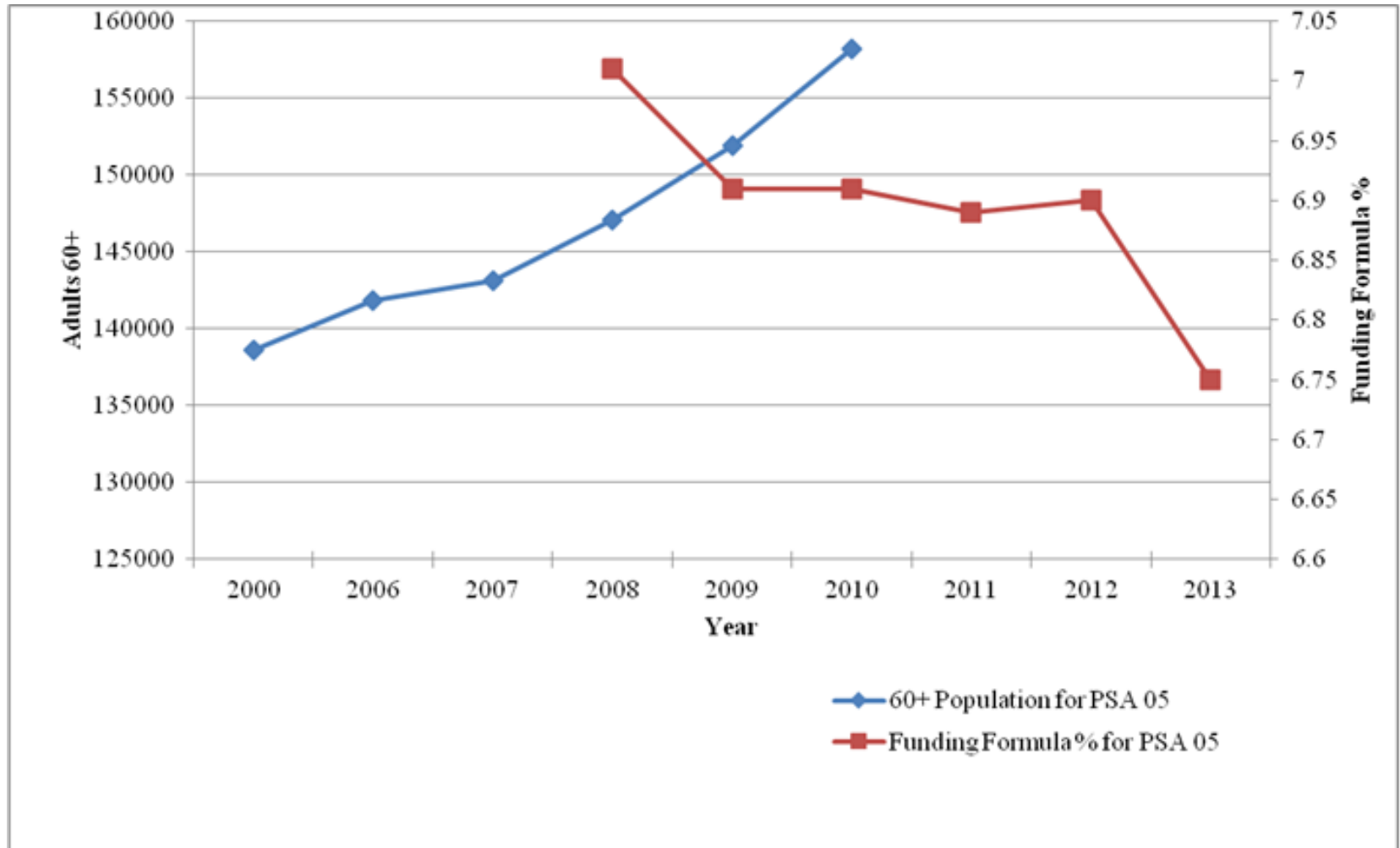
Home and Community Ombudsman

- Recently the traditional program has expanded advocacy services to consumers of Home and Community Based Services (also known as waiver services).
- Services remain essentially the same as the traditional program but will be provided to assist older adults and adults with disabilities ages 18-59 who live in their own homes
- Address concerns related to
 - managed care plans (available in 7 of 16 counties)
 - health insurance plans
 - service agreements
 - care plans
 - care coordination
 - satisfaction with services
 - housing
 - denial or termination of services

Emergency Preparedness Plan

- ECIAAAA will update its disaster plan in cooperation with local service provider to address the functional needs of older adults.
- ECIAAAA will review and revise coordination agreements with county emergency management agencies, the American Red Cross and other agencies.
- ECIAAAA will explain when and how its personnel and service providers will be mobilized to assist local emergency management agencies and responders.
- ECIAAAA explain how advocacy, outreach, and follow-up services will be conducted and how ECIAAAA will monitor service providers' delivery of disaster-related services.

Population Trends and Funding



Funding Formula for FY2016

- ▶ ECIAAA proposes to extend Federal and State funds for services among the 16 counties in Area 05 in FY2016 using a formula adopted in FY2011.
- ▶ ECIAAA will update the formula when the latest Census data are available
- ▶ Funding Formula Factors and Weights:

◦ 60+ Population	33%
◦ 60+ Minority	10%
◦ 60+ Living Alone	7.5%
◦ 75+ Population	7.5%
◦ 60+ Poverty	25%
◦ 60+ Rural (Non-MSA)	9.5%
◦ 65+ SSI+OASDI+ 2 or more Disabilities	7.5%

Funding for CPoE/SIS

- In FY2015 selected 12 CPoE/SIS provider agencies to serve Area 05 for Fiscal Years 2015 thru 2017.
- Designated CPoE/SIS providers applied for grant extensions for FY2016.
- In FY2016 ECIAAAA has extended \$35,000 as a base level of funding for SIS/CPoE equally per county.
- A balance of \$360,785 was allocated using ECIAAAA's funding formula.

Funding for Legal Assistance

- ECIAAA budgeted \$67,626 in OAA Title III-B funds for senior legal assistance in FY2016.
- Legal assistance providers funded for FY2015 have received grant extensions for FY2016.

Funding for Nutrition Services

- The FY 2015 county allocations will serve as Base Levels of Extension Funding for congregate nutrition and home delivered meals in FY2016.
- If approved by the Illinois General Assembly, the Governor's proposed budget for FY2016 would slightly increase funds for home delivered meals and federal funding levels for FY2016 are uncertain at this time.
- Federal and state funds available in FY 2016 for nutrition services, including Nutrition Program Incentive Program (NSIP) will be distributed on the funding formula share per county.

Healthy Aging Program Funds

- In FY2016 has budgeted:
- \$18,836 III-B funds for *CDSMP* & *DSMP* classes, and support for *Strong For Life*
- \$10,641 III-B funds for *A Matter of Balance* in Macon and McLean Counties
- \$9,918 III-D funds for *DSMP* classes in Macon County
- \$35,565 III-D for *Gerontological Counseling/PEARLS* in Champaign, Livingston, and McLean Counties.

Funding for Caregiver Services

- ECIAAA budgeted \$300,319 in OAA Title III-E funds for Caregiver Advisory Services in FY2016.
- ECIAAA budgeted \$17,082 in federal OAA Title III-E funds, and \$450 in federal OAA Title IIIB funds for Respite Services in FY2016.

Budget Assumptions for FY2016

- Federal appropriations for FY2016-FY2021 are expected to remain flat or decline due to federal spending caps. It is expected that OAA funds allotted to Illinois will be reduced by 0.8% in FY 2016, 1.6% in FY 2017 and 2.4% in FY 2018.

Budget Assumptions for FY2016

- ▶ The Department of Healthcare and Family Services is implementing the Balancing Incentive Program (BIP) in collaboration with other State agencies.
- ▶ To qualify for enhanced federal match for the State's Medicaid Program, the BIP requires states to implement three structural changes: (1) No Wrong Door/Single Entry Point System; (2) Conflict-Free Case Management; and, (3) Core Standardized Assessment Instruments.

Budget Assumptions for FY2016

- ▶ Progress is expected toward increasing Medicaid expenditures on home and community-based long term services and supports (LTSS).
- ▶ BIP states must agree to use enhanced Federal Medicaid Assistance Percentage (FMAP) to provide new or expanded home and community-based LTSS.
- ▶ Using BIP funds, the Department on Aging and AAAs are implementing Nursing Home Deflection Demonstration Projects through March 2016.

Budget Assumptions for FY2016

- Governor's proposed budget for FY2016 requests:
 - Totals approximately \$1.43 billion - \$170.3 million (14%) less than maintenance level.
 - Recommended funding levels for the Community Care Program total \$834,145,000 including:
 - \$604.5 million for administration and service grants (-\$140.73 million)
 - \$167 million for CCP Capitated Coordinated Care (+\$134.7 million)
 - \$62.6 million (+\$1,842,100)
 - Average monthly caseload of 76,000 clients
 - \$781.60 CCP average monthly cost of care per client

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Budget Assumptions for FY2016

- Governor's proposed budget for FY2016 requests:
- Home Delivered Meals \$14,005,200 - \$2,382,000 over FY 2015 level – to maintain a projected service level of 6 million meals, and to address a waiting list of 1,120 older adults.
- Adult Protective Services Program \$22.4 million - \$659,700 below FY 2015 level.
- LTCOP \$5.5 million GRF, and \$2.6 million in the LTC Ombudsman Fund.

Budget Assumptions for FY2016

- The Governor has recommended flat funding for the following:
 - Planning and Service Grants to AAA's
 - Community Based Services for Equal Distribution to each AAA
 - SHIP
 - SHAP
 - GRG
 - Long Term Care Systems Development Grant

Budget Assumptions for FY2016

- Continued delays in state payments
- HFS plans for Balancing Incentive Program to use enhanced FMAP to provide new or expanded home and community-based LTSS.
- OAA statutory obligations for categorical programs.
- ACL requires OAA Title III-D funds for EBIs only.
- ECIAAA may apply for up to 10% of its total Title III-B and C allotment for the cost of administration.
- ECIAAA will budget \$418,310 Title III-B funds for administratively-related direct services, which is \$113,451 below the level allowed by IDoA policy.

Budget Assumptions for FY2016

- ECIAAA proposes to transfer 8.6% of its III-C allotment to III-B (below the 15% limit and a decrease from FY 2015)
- ECIAAA proposes to transfer 14.2% of III-C1 funds to III-C2 (below the 15% limit but an increase from FY 2015)
- ECIAAA complies with IDoA policies for budgeting a minimum percentage of III-B funds for categories of services including: access, in-home, and legal services.
- ECIAAA will renew its CCU Coordination Grant with IDoA in FY2016 as interim CCU for Vermilion County in collaboration with CRIS Healthy-Aging Center.
- ECIAAA will renew its CCU Coordination Grant with IDOA in FY 2016 as interim CCU for Ford County and Iroquois County in collaboration with each respective County Health Departments.

ECIAAA Administrative Activities

- Strategic Planning
- Regional and Community-Based Planning
- Grants and Contract Administration
- Competitive Grant/Contract RFP Processes
- Program Management and Reporting
- Quality Assurance and Quality Improvement
- Fiscal Management and Reporting
- Computer Technology and Systems Support
- Technical Assistance and Problem Solving
- Training, such as, webinars

Budget Highlights for FY2016

- Federal OAA Funds expected: \$3,055,894
- State Funds expected: \$2,995,628
- NSIP funds expected: \$356,659
- Local Match projected: \$1,543,523
- Project income projected: \$1,083,500
- Total Revenues projected: \$9,035,204

Budget Highlights for FY2016

- AAA Administration - \$473,532
- Admin-Related Direct Services - \$418,310
- Direct Services (LTCOP) - \$321,216
- Total Internal Operating Budget: \$1,213,058
- ECIAAA has a staffing plan for 14 employees

Contingency Planning

- ▶ If the planning allocation for Area 05 is reduced for a specific revenue source then funds would be reduced for programs or services related to that revenue source.
- ▶ CPoE/SIS will be given the highest priority for sustained or increased funding under the Area Plan.
- ▶ Adjust inter-fund transfers to sustain CPoE/SIS and/or Home Delivered Meals, if necessary and feasible.

Contingency Planning

- ECIAAA will use additional state funds for home delivered meals to sustain current meal levels, keep pace with rising costs and respond to increased demand for meals, if feasible.
- ECIAAA will use additional state funds for the Long Term Care Ombudsman Program to comply with statutory requirements and program standards.

Contingency Planning

- ECIAAA will evaluate the impact of proposed cuts in federal and/or state funds on programs and services targeted to older adults in greatest social and economic need, especially vulnerable older adults who need assistance due to limitations in their ability to carry out activities of daily living and/or being at risk due to abuse, neglect, or financial exploitation.

Thank You

- ECIAAA appreciates your commitment to serving older adults and caregivers in your community.