

Illinois Department on Aging



Care Coordination Unit Performance Report

Period ending June 30, 2024

Illinois Department on Aging 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.

Illinois Act on Aging

This Care Coordination Unit performance report is produced to fulfill requirements detailed in the Illinois Act on Aging (20 ILCS 105). The Act provides that “the Department shall conduct a quarterly review of Care Coordination Unit performance and adherence to service guidelines. The quarterly review shall be reported to the Speaker of the House of Representatives, the Minority Leader of the House of Representatives, the President of the Senate, and the Minority Leader of the Senate. The Department shall collect and report longitudinal data on the performance of each care coordination unit. Nothing in this paragraph shall be construed to require the Department to identify specific care coordination units” (20 ILCS 105/4.02).

Community Care Program Overview

The Illinois Department on Aging’s (IDoA) Community Care Program (CCP) is the Medicaid-Waiver Program for the Elderly for which IDoA is the Operating Agency and Healthcare and Family Services (HFS) is the Managing Agency. CCP serves 129,868 (inclusive of fee for service and managed care) older Illinoisans statewide through 41 Care Coordination Units (CCU), 398 in-home provider agencies, 64 Adult Day Service programs (ADS), and a choice of contracted providers for Emergency Home Response Services (EHRS) and Automated Medication Dispensers (AMD). This program serves as alternative to nursing home placement by supporting older adults with person-centered plans, allowing older adults to continue live and thrive in their home and community.

Care Coordination Units

General Overview

The Care Coordination Units (CCUs) serve as the front door to the CCP services. At the initial face-to-face meeting, the Care Coordinator conducts an eligibility assessment and determination of need, then works with the CCP eligible older adult to develop a person-centered plan of care based on the participant's strengths, needs, and preferences. The plan directs different connections the Care Coordinator will make on behalf of the participant outside of CCP and within CCP, including tasks and activities associated with in-home care, ADS, EHRS, and/or AMD. At this visit, the participant chooses their preferred provider, and the Care Coordinator completes the paperwork to get services started within fifteen days.

Six months after the initial assessment or Medicaid redetermination, the CCU conducts a face-to-face six-month review. This check-in could result in a full assessment if the participant is presenting with increased or decreased difficulties or needs.

The CCU must redetermine all CCP participants eligibility and level of need at least annually. At the initial and annual redetermination, the Care Coordinator will conduct the full CCP assessment as well as check for financial eligibility which requires verification of income, assets, and related financial documents. Additionally, participants are required to apply for Medicaid, which the CCU facilitates, unless there is already an application in progress, or the person is currently receiving Medicaid.

The CCUs are responsible for completing assessments to ensure emergency services are in place for persons returning to the community from institutional settings and hospitalizations, which is known as Choices for Care.

Successes

Across the state the CCUs are providing services to 129,868 older persons. Of this, 79,924 older persons are non-MCO and 54,944 are assessed for eligibility for CCP by the CCU and then served by a Managed Care Organization (MCO).

More CCP Participants on Medicaid

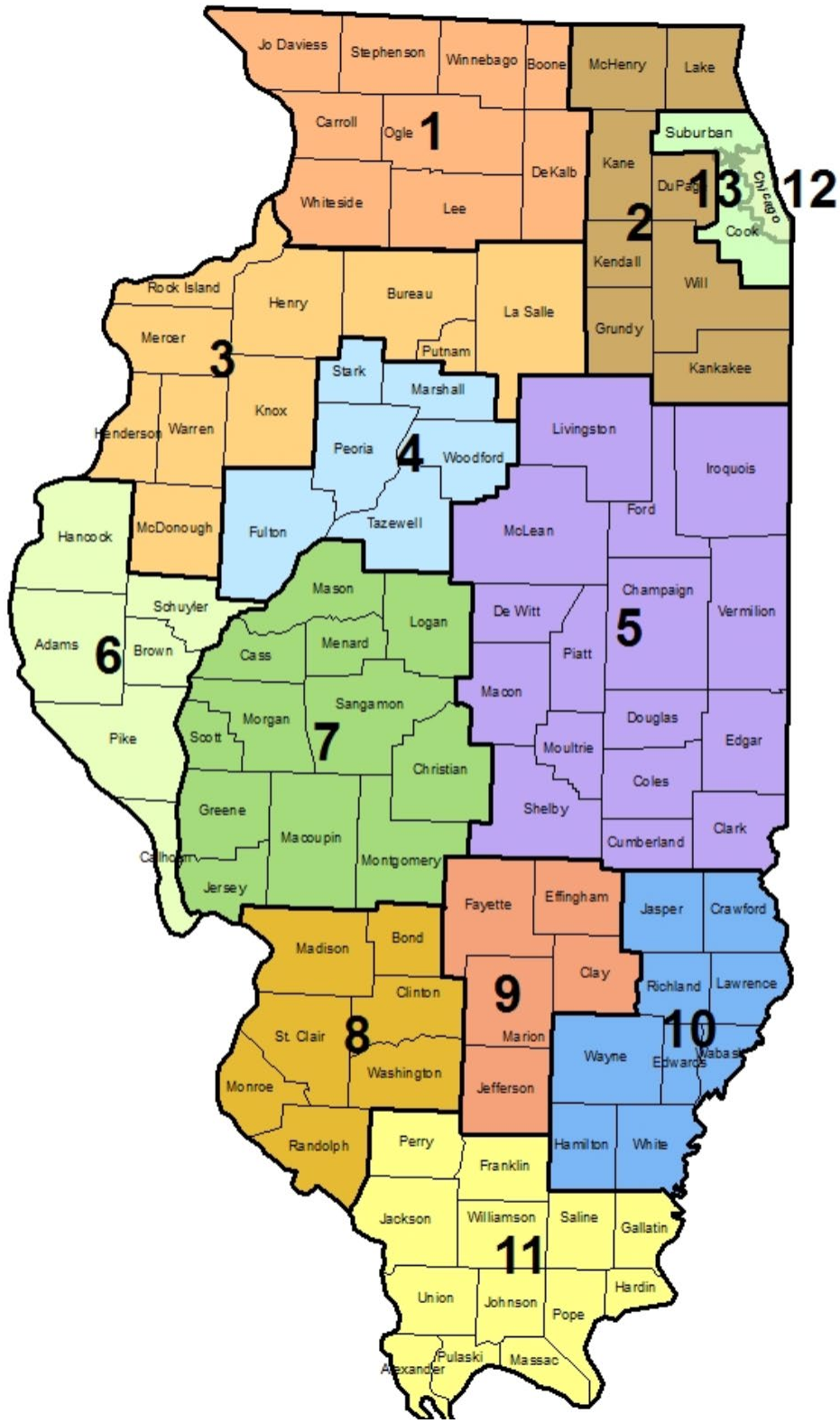
The table below demonstrates an increase in CCP participants who are Medicaid-eligible, going from 47,521 one year ago to 50,250 in 2024, owing in part to the State’s increase in allowable assets from \$2,000 to \$17,500 for Medicaid eligibility effective May 12, 2023. Over the past year the number of CCP participants who eligible for CCP, but are not eligible for Medicaid, decreased from 30,291 one year ago to 24,674 in 2024.

PSA	Waiver Services provided by an MCO (all Medicaid)	Community Care Program (CCP)			Total CCP and MCO Participants
		Medicaid	Non-Medicaid	Total CCP Participants	
01	1,818	2,260	993	3,253	5,071
02	8,212	6,988	2,909	9,897	18,109
03	1,040	1,149	617	1,766	2,806
04	1,067	982	531	1,513	2,580
05	2,156	2,450	981	3,431	5,587
06	301	420	71	491	792
07	1,414	1,781	894	2,675	4,089
08	1,846	1,932	1,231	3,163	5,009
09	517	630	84	714	1,231
10	375	512	92	604	979
11	1,383	1,382	292	1,674	3,057
12	22,818	18,246	9,876	28,122	50,940
13	11,997	11,518	6,103	17,621	29,618
Total	54,944	50,250	24,674	74,924	129,868
*Data from 4/1/24					
Totals from 1 year ago*					
Total	55,117	47,521	30,291	77,812	132,929
*Data from 3/23/23					
Totals from 2 years ago*					
Total	51,513	43,573	31,506	75,079	126,592
*Data from 3/15/22					
Totals from 3 years ago*					
Total	48,910	41,270	30,979	72,249	121,159
*Data from 4/15/21					
Data Source: Authorized participants listed in IDoA Billing System compared to daily eligibility file from HFS.					

Six-month review

In 2022, to fulfill the requirement of the six-month review under the Persons Who Are Elderly 1915(c) Waiver, the Department, as the Operating Agency, implemented this mid-year formal touch base with participants to ensure services are meeting needs, 82% of participants received their 6-month review.

Below is a map of the PSAs.



Challenges

Annual Redetermination Rate

The annual redetermination rate is determined by the number of participants who are reassessed within 12 months of the last assessment. The chart below shows the annual redetermination rates for FY16-FY24. During the PHE, for a short period of time, CCUs were able to complete remote assessments. This led to an increased redetermination rate for FY21, the highest in the lookback period cited below. Since 2021, the CCUs have moved back to face-to-face assessments in the participant’s home and in the community. For FY24 YTD, the CCUs have an overall annual redetermination rate of 61.1%. Upon the lifting of the PHE flexibilities, the CCUs were flooded with a waterfall of redeterminations in the face of significant workforce challenges, along with the incorporation of the new asset limit for Medicaid increasing the number of Medicaid-eligible participants and Medicaid applications.

Fiscal Year	Percentage of Assessments completed timely annually
FY16	70.2%
FY17	71.3%
FY18	69.8%
FY19	73.5%
FY20	76.6%
FY21	82.7%
FY22	73.3%
FY23	65.1%
FY24 YTD	61.1%

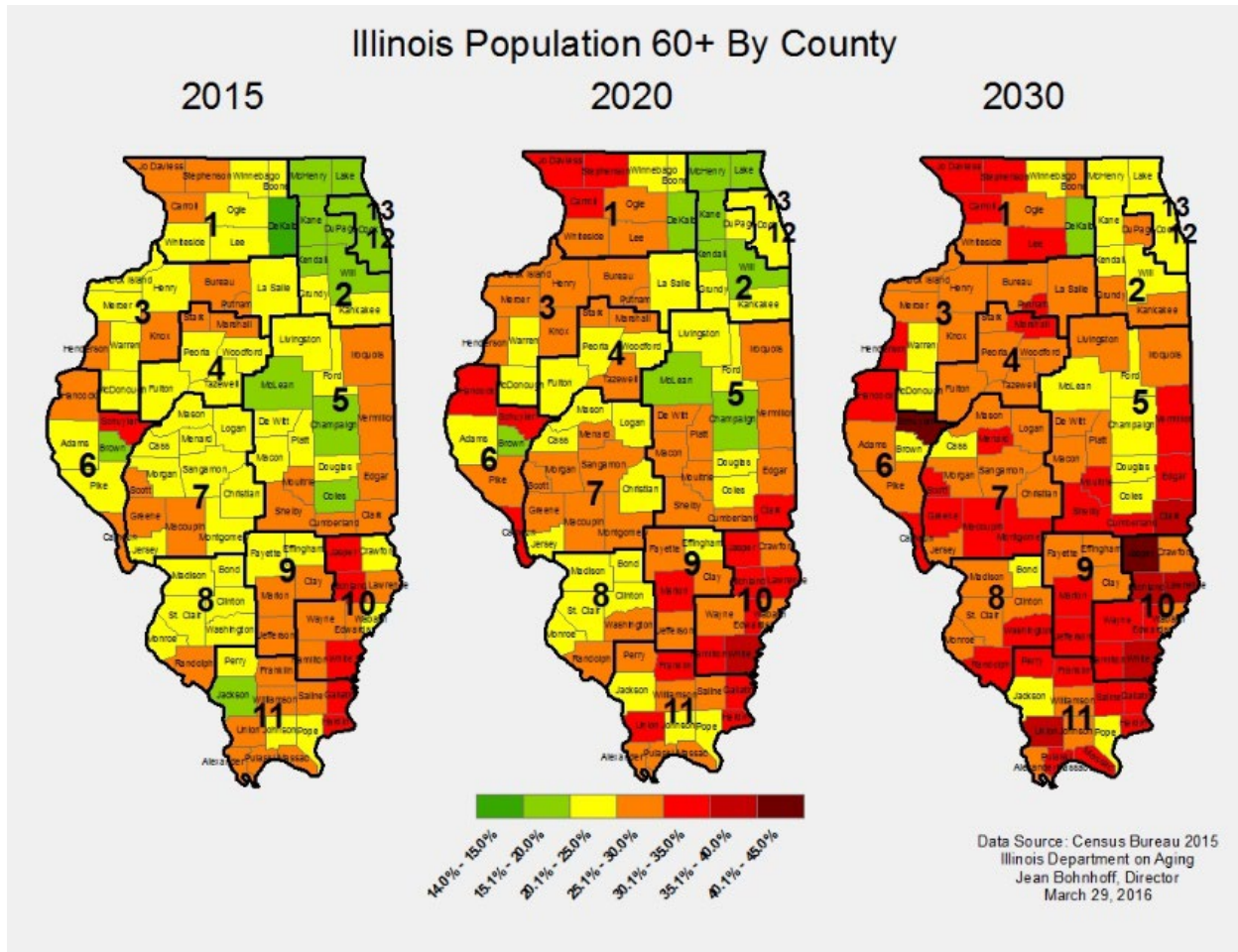
Care Coordination Unit Workforce Shortages

Care Coordination Unit (CCU) workforce shortages continue to impact CCUs across the state with the southern part of the state demonstrating significant challenges recruiting and retaining care coordinators. To address these issues, the Department is utilizing several strategies including participating in a cross-sector Peer Learning Collaborative (PLC) sponsored through ACL’s Direct Care Workforce Strategies center. The PLC opportunity will enable the Department to address Direct Care Workforce (DCW) needs in partnership with other state agencies, including the Department of Healthcare and Family Services (HFS), Department of Human Services (DHS), and Department of Commerce and Economic Opportunity (DCEO). The state will also partner with subject matter experts from PHI and the Rockingstone Group and representatives from California, Connecticut, and Kansas. The Illinois team has identified the following goals:

- Developing a core curriculum with additional modules focused on specialized populations that will meet pre-service and annual service training requirements for multiple waivers.
- Building a framework for a DCW certification pathway in Illinois and strategies to apply DCW training time toward certifications.
- Incorporating DCW retention and growth priorities into Illinois’ multi-sector plan on aging.
- Supporting career pipelines for DCWs in partnership with high schools and community colleges.
- Integrating targeted training for paid and unpaid family caregivers.

- Working with workforce development agencies to find ways to incorporate DCWs into the state's existing workforce development framework.

In past years the Department has secured a rate study for CCUs and In-Home workers to ensure Illinois was paying competitive salaries. It is anticipated a similar study will be conducted in FY25. Additionally, the Department is engaging in discussions with (DCEO) to determine if there are opportunities to develop pilot projects to grow this workforce to satisfy current and future demand. This demand is expected to continue as the Illinois population ages creating communities with a higher density of older people, demonstrated by the projected population estimates in the maps below.



Summary

The CCUs continue to meet the needs of thousands of older Illinoisans through assessment for services, development of a person-centered plan, and comprehensive care coordination. While the total number of persons served through CCP has decreased over this past year by 3,000 participants, the current number demonstrates an overall increase over pre-pandemic participation.

Workforce shortages along with the sustained increase in need for CCP will continue to be a challenge for the CCUs. The Department looks forward to working with fellow Illinois state agencies, peers from California, Connecticut, and Kansas, and national subject matter experts through the Direct Care Workforce Peer Learning Collaborative to help grow this workforce in Illinois. As the General Assembly focuses on workforce shortages across the state, IDoA hopes the labor needs of the aging network, particularly Care Coordinators and In-homecare Aides, will be a topic of focus and future workforce planning.



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Senior Helpline: 1-800-252-8966, 711 (TRS)
8:30 a.m. to 5:00 p.m. Monday through Friday
24-Hour Adult Protective Services Hotline: 1-866-800-1409, 711 (TRS)
ilaging.illinois.gov

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