State of Illinois
Office of the Auditor General

Performance Audit of the

Oversight of the Independent Service Coordination (ISC) Program by the Department of Human Services' Division of Developmental Disabilities

December 19, 2024

Frank J. Mautino
Auditor General

You can obtain reports by contacting:

Office of the Auditor General
400 West Monroe • Suite 306
Springfield, IL 62704

217-782-6046 or TTY: 1-888-261-2887

OR

This Audit Report and a Report Digest are also available on the worldwide web at
http://www.auditor.illinois.gov

SPRINGFIELD OFFICE:
400 WEST MONROE
SUITE 306 • 62704
PHONE: 217/782-6046 • FAX: 217/785-8222
TTY: 888/261-2887
FRAUD HOTLINE: 1-855-217-1895

CHICAGO OFFICE:
MICHAEL A. BILANDIC BLDG. • SUITE S-900
160 NORTH LASALLE • 60601-3103
PHONE: 312/814-4000
FAX: 312/814-4006
FRAUD HOTLINE: 1-855-217-1895

OFFICE OF THE AUDITOR GENERAL
FRANK J. MAUTINO

To the Legislative Audit Commission, the Speaker and Minority Leader of the House of Representatives, the President and Minority Leader of the Senate, the members of the General Assembly, and the Governor:

This is our report of the performance audit of the Independent Service Coordination program.

The audit was conducted pursuant to House of Representatives Resolution Number 66. This audit was conducted in accordance with generally accepted government auditing standards and the audit standards promulgated by the Office of the Auditor General at 74 Ill. Adm. Code 420.310.

The audit report is transmitted in conformance with Sections 3-14 and 3-15 of the Illinois State Auditing Act.

SIGNED ORIGINAL ON FILE

FRANK J. MAUTINO
Auditor General

Springfield, Illinois
December 2024

OFFICE OF THE AUDITOR GENERAL

December 19, 2024
Performance Audit
Report Highlights

Frank J. Mautino *Auditor General*
www.auditor.illinois.gov

Performance Audit of the

Oversight of the Independent Service Coordination (ISC) Program by the Department of Human Services' Division of Developmental Disabilities

Background:

On May 15, 2023, the Illinois House of Representatives adopted House Resolution Number 66, which directed the Office of the Auditor General to conduct a performance audit of the oversight of the Independent Service Coordination (ISC) program by the Department of Human Services' Division of Developmental Disabilities (DDD). ISC agencies are contracted with DDD to provide case management/service coordination to individuals with developmental disabilities.

It is the primary responsibility of the Grant Management Unit within DDD to provide monitoring and oversight to the ISC agencies based on all activities in the grant agreements.

During the audit period FY21-FY23, there were eight ISC agencies providing case management services to an average of nearly 25,000 individuals with developmental disabilities. These eight ISC agencies expended more than $133 million on ISC services.

Key Findings:

Funding for the ISC Program

- The majority of funding provided to ISC agencies is for case management services supported by the Waiver program. These services are billed on a fee-for-service basis and are based on a DHS calculation. The billings are limited to the maximum budget total for each grant. During the audit period, DHS **had not analyzed** the formula that sets the rate which ISC agencies are reimbursed for case management services. DHS **has excluded** ISC agency services from any external reviews and **has not addressed** the recommendations from the reviews involving aspects of the ISC program.

- DHS **rejected** more than $1.7 million in case management bills submitted by the ISC agencies during the audit period. While some of those rejections could have been for legitimate reasons, our analysis found that **more than 40 percent** of the total rejected bills were for an unknown error. DHS **could not explain** the reasons for the unknown errors. Further, DDD, the Division charged with oversight of the ISC agencies, **does not regularly review** the rejected billing data and **does not have complete access** to all rejected billings.

Examination of ISC Caseloads

- DHS **does not have** a set required minimum or maximum ISC case manager ratio (number of individuals served by a case manager) and **does not track** this ratio information. The Community Services Act requires DHS to include case coordination services as part of its community services system and also establishes that one factor of the funding methodologies be staffing ratios.

- DHS **could not provide** the addresses for the entire population of individuals served by ISC agencies. As a result, we reviewed ISC agency coverage on a sample basis. During testing, we found that DHS **did not adhere** to the ISC Manual and **utilized** an **unwritten policy** to allow an individual to choose an ISC agency outside of the individual's assigned region. DHS **could not provide** any additional documentation to support its decision.

ISC Agency Documentation and Reporting Allegations

- ISC agencies are statutorily required to be mandated reporters of allegations of suspected abuse, neglect, and financial exploitation. However, DHS **does not know** and **does not track** if ISC agencies are statutorily meeting the requirement to report all allegations to the four oversight entities: DHS' Office of Inspector General (OIG), Adult Protective Services (APS) within the Department on Aging, the Department of Children and Family Services (DCFS),

and the Department of Public Health (DPH). During testing, we did not find any instance of noncompliance by the ISC agencies with the mandated reporting requirement.

- DHS **does not regularly share** allegation information with the ISC agencies. In our sample of 75 individuals receiving waiver services, we identified 41 instances of allegations of abuse, neglect, or financial exploitation from OIG and APS data. We found that ISC agencies had **no documentation** to support awareness of a known allegation in 30 out of 41 instances. DHS stated that neither DHS nor anyone else is required to inform the ISC agency of an allegation or share the results of an investigation with the ISC agency.

Oversight and Monitoring

- It is the primary responsibility of the Grant Management Unit within DDD to provide monitoring and oversight to the ISC agencies based on all activities in the grant agreements. However, DDD **failed** to adequately oversee and monitor the ISC program. While ISC agencies receive a number of reviews, we found **overlapping** waiver-focused reviews and **limited** coordination with the Division.
- DDD **has not updated** the ISC Manual to reflect the number of required waiver visits found in the FY23 grant agreements. Additionally, DDD **has not updated** the ISC Manual or the grant agreement to reflect the proper program codes, which was a pre-COVID pandemic change that went into effect more than five years ago.
- ISC agencies are required to complete the person-centered planning process initially and annually. The purpose of the person centered planning process is to gather information about an individual's interests, preferences, and abilities and to outline the delivery of services. During testing, we found **missing or not timely** discovery tool or personal plan updates in at least one fiscal year for 33 of 75 individuals sampled.
- ISC agencies are also responsible for conducting monitoring visits to ensure implementation of the personal plan, as well as ensure the health, safety, and welfare of individuals receiving developmental disability services. During testing, we found **only** 86 percent of the required visits were conducted for the 75 individuals sampled.
- DHS **did not monitor** the Americans with Disabilities Act (ADA)/Olmstead Outreach and Housing Navigator pilot programs. These programs were new for FY23 and provided a total of $725,000 in funding to the ISC agencies. DHS **failed** to request grant funds back from one ISC agency, Champaign County Region Planning Commission, who received more than $49,000 in funding for both programs, yet admittedly **did not conduct** any of the required activities for either program. We reviewed Housing Navigator program information and found three out of eight ISC agencies **did not secure housing** for a single individual as part of the Housing Navigator program. Additionally, the ISC agencies **did not always** provide complete information on the required grant deliverables, and **did not always** conduct the training, presentations, and meetings as required.

Key Recommendations:

The audit report contains twelve recommendations directed to DHS including:

- DHS should regularly and systematically review the ISSA formula utilized to fund the case management services provided by the ISC agencies.
- DHS should regularly analyze the rejected billings and ensure the reasons for rejection are appropriate. Additionally, DHS should specifically review billings rejected for an unknown error and facilitate any needed corrections.
- DHS should set case manager ratios and should track ISC case manager information to ensure all grant required activities can reasonably be conducted.
- DHS should follow the ISC Manual and require each individual to only be served by the ISC agency assigned to the specific region of residence. If DHS decides to allow exceptions to the Manual, those exceptions should be included in a written policy and documented in individual case files.
- DHS should ensure all allegations reported to oversight entities (including the DHS Office of the Inspector General, Adult Protective Services, the Department of Children and Family Services, and the Department of Public Health) for developmentally disabled individuals are maintained by DHS and shared with the respective ISC agencies.
- DHS should update the ISC Manual and grant agreements to ensure accurate and consistent guidance is provided to the ISC agencies.

This performance audit was conducted by the staff of the Office of the Auditor General.

Report Digest

On May 15, 2023, the Illinois House of Representatives adopted House Resolution Number 66, which directed the Office of the Auditor General to conduct a performance audit of the oversight of the Independent Service Coordination (ISC) program by the Department of Human Services' Division of Developmental Disabilities (DDD). The Resolution contained several issues to examine. Our assessment of these determinations is shown in Digest Exhibit 1. (page 1)

Digest Exhibit 1
ASSESSMENT OF AUDIT DETERMINATIONS

Determination from Audit Resolution	Auditor Assessment
An examination of the caseloads, by ISC agency, around the State to determine whether ISC agencies are providing coverage based on agreements with the State.	• DHS does not have a set required minimum or maximum ISC case manager ratio and does not track this ratio information. • DHS did not adhere to the ISC Manual and utilized an unwritten policy to allow an individual to choose an ISC agency outside of the individual's assigned region. (pages 30-35)
An examination of whether ISC agencies maintain documentation and report allegations of suspected abuse, neglect, and financial exploitation to the appropriate oversight entity.	• DHS does not know and does not track if ISC agencies are statutorily meeting the requirement to report all allegations to the four oversight entities. Auditors did not find any instances of noncompliance by the ISC agencies with the mandated reporting requirement. • ISC agencies are required to conduct additional monitoring visits to ensure the health, safety, and welfare of an individual. However, DHS does not regularly share information with the ISC agencies. ISC agencies cannot conduct additional visits if the information is not known. (pages 36-44)
An examination of the oversight and monitoring of ISC agencies by DHS ensuring that the ISC agency complies with statutory, regulatory, and contract requirements, including site visits and inspections of records and premises.	• Auditors found significant deficiencies with DHS' oversight and monitoring of the ISC agencies. (pages 45-74)

Source: OAG assessment of the audit determinations contained in House Resolution Number 66.

Background

Independent Service Coordination (ISC) agencies serve as the primary connection between individuals (and guardians) who are seeking or receiving developmental disability services and the Illinois Department of Human Services (DHS). ISC agencies contract with DHS' Division of Developmental Disabilities (DDD) to perform their duties. DDD operates a Waiver program that specifically applies to developmentally disabled individuals receiving case management by the ISC agencies. These Waiver services accounted for approximately 70 percent, or $93.6 million of the total $133.4 million, in funding received by the ISC agencies. (page 2)

A waiver program is a program that provides services to help people remain in their homes or communities instead of in an institution.

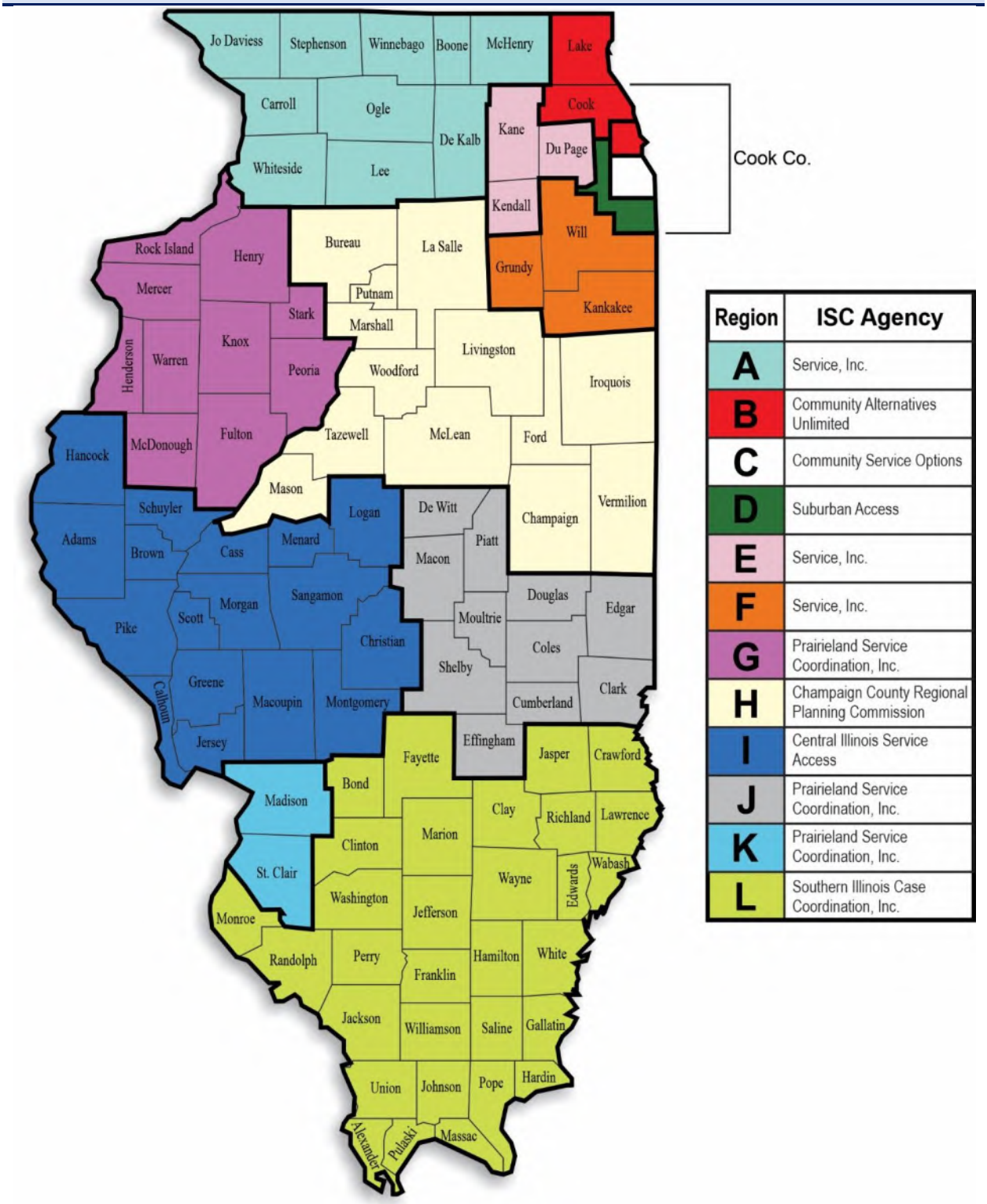
Names and Locations of ISC Agencies

During the audit period, there were eight ISC agencies providing services throughout the State. Each ISC agency is responsible for a specific region of the State. Two of the eight ISC agencies were responsible for more than one region. The ISC agency located in the geographic area in which the individual resides is the designated ISC agency for that individual. Digest Exhibit 2 shows a map of ISC regions during FY21 through FY23. (pages 2,4)

Department of Human Services

The Community Services Act (405 ILCS 30/1) directs DHS to assume leadership in providing an array of services for persons with mental health and/or developmental disabilities that will strengthen the individual's self-esteem, participate in and contribute to community life, and prevent unnecessary institutionalization. DHS primarily utilizes the Division of Developmental Disabilities to oversee the ISC program. (page 9)

Digest Exhibit 2
ISC REGIONS
FY21-FY23



Region	ISC Agency
A	Service, Inc.
B	Community Alternatives Unlimited
C	Community Service Options
D	Suburban Access
E	Service, Inc.
F	Service, Inc.
G	Prairieland Service Coordination, Inc.
H	Champaign County Regional Planning Commission
I	Central Illinois Service Access
J	Prairieland Service Coordination, Inc.
K	Prairieland Service Coordination, Inc.
L	Southern Illinois Case Coordination, Inc.

Source: OAG developed from DHS information.

Home and Community-Based Services Waiver Program

The Waiver program directly applies to one of the responsibilities of the ISC agencies, Individual Service and Support Advocacy (ISSA) Services, which is specifically for service coordination or case-management. The ISC program utilizes three separate Waivers: Adult Waiver, Children's Support Waiver, and the Children's Residential Waiver. (pages 10-11)

Waiver Program Populations

We requested a received the population of individuals enrolled in any of the three Waivers at any point during the audit period. The population is based on the fee-for-service billings by individuals for case-management services submitted by the ISC agencies. As seen in Digest Exhibit 3, the vast majority of individuals that received Waiver services are in the Adult Waiver. (page 11)

Digest Exhibit 3
INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES BY WAIVER TYPE
FY21-FY23

Waiver	FY21	FY22	FY23
Adult	22,542	23,261	23,653
Children's Support	879	820	832
Children's Residential	177	157	135
Totals [1]	23,598	24,238	24,620

Note: [1] There are approximately 300 individuals in each of the fiscal years who are not included in the totals. These individuals have a client type that includes more than one of the Waivers.

Source: OAG developed from DHS Waiver billing data.

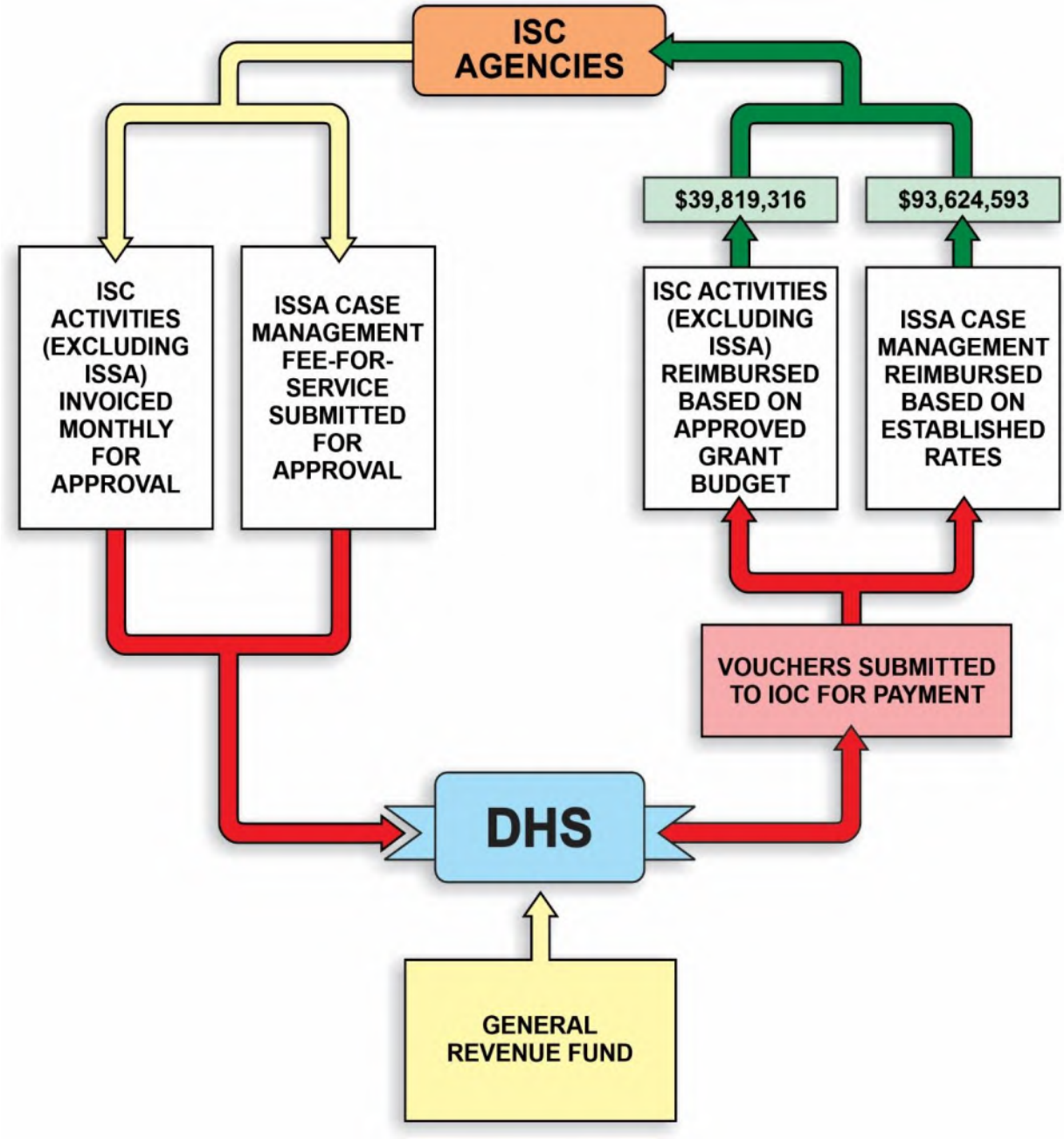
Funding for ISC Program

ISC activities are solely paid from the General Revenue Fund (GRF). The specific GRF appropriation utilized for ISC agency payments was *for grants and administrative expenses for Community-Based Services for Persons with Developmental Disabilities and for Intermediate Care Facilities for the Developmentally Disabled and Alternative Community Programs.* During the audit period, this Fund contained approximately $4.7 billion. Only a very small portion of that GRF, approximately $133 million, was used to support ISC agency services. (page 12)

Flow of Funds

ISC agencies bill for services in two ways. The first way is by reporting the ISSA case-management fee-for-service bills by individual through the Reporting of Community Services (ROCS) software. The second way is by submitting monthly grant invoices for prior months' costs on all other ISC activities via invoice to DDD for approval. These costs are billed by ISC agencies against the approved grant budgets. Digest Exhibit 4 contains a flow chart of ISC agency funding. (pages 13-14)

Digest Exhibit 4
FLOW OF FUNDING FOR ISC AGENCY SERVICES
FY21-FY23



Source: OAG developed from DHS information.

Formula Analysis

During the audit period, DHS **had not analyzed** the ISSA formula to determine whether the formula is sufficient to cover actual ISSA costs; **has excluded** ISC services from any external reviews; and **has not addressed** any of the

recommendations from external reviews involving aspects of the ISC program. ISSA funding provided to the ISC agencies represents a significant amount of overall ISC agency funding, accounting for approximately 70 percent of the overall funding the ISC agencies received during FY21 through FY23. (page 15)

Grant Award Amounts

During the audit period, grant **award** amounts to the eight ISC agencies covering 12 regions totaled approximately $143.7 million. Two ISC agencies, Service Inc. and Prairieland Service Coordination Inc., were each awarded three regions. From FY22 to FY23, ISC agencies received an overall 22.4 percent increase in the total amount of awarded grant funds. This increase was primarily the result of additional responsibilities required of each of the ISC agencies in FY23. (page 18)

ISC Agency Payment Amounts

For the period FY21 through FY23, the State **expended** $133.4 million on ISC agency services, $10.3 million less than was awarded. Digest Exhibit 5 shows a comparison of the ISC agency grant award and payment amounts by fiscal year. ISC agencies reported the ISSA rate and hours are not sufficient to cover actual costs. Yet, the exhibit shows not all of the awarded ISSA funds were claimed by the ISC agencies. (pages 19-20)

Digest Exhibit 5
COMPARISON OF ISC AGENCY GRANT AWARD AMOUNTS TO ACTUAL PAYMENTS
FY21-FY23

	FY21	FY22	FY23	Total
ISSA Case Management				
Award amount	$30,099,724	$31,645,405	$40,729,825	$102,474,954
Actual payment	$28,529,730	$29,593,457	$35,501,407	$93,624,594
Difference:	***$1,569,994***	***$2,051,948***	***$5,228,421***	***$8,850,360***
All Other ISC Activities				
Award amount	$13,330,502	$13,438,512	$14,465,074	$41,234,088
Actual payment	$12,608,562	$12,996,591	$14,214,163	$39,819,316
Difference:	***$721,940***	***$441,921***	***$250,911***	***$1,414,772***

Source: OAG developed from DHS ISC payment information.

Rejected Billings

DHS rejected **more than $1.7 million** in ISSA billings submitted by the ISC agencies during the audit period for Waiver services. While some of these billings may have been rejected for legitimate reasons, DHS was not aware and could not explain 41 percent of the total rejections which were for an **"error unknown."**

The Community Services Act (405 ILCS 30/1-3) requires DHS to facilitate and establish a service system for individuals with a developmental disability, among others. One of the areas in this service system is case coordination. In order to achieve the intent of the Act, DHS is responsible for planning and quality assurance.

Absent a review and analysis of the rejected billings, DHS cannot determine if the rejection reasons are appropriate or if ISC agency funding for case coordination services is inappropriately denied. (pages 20-23)

ISC Program

DHS entered into grant agreements with the eight ISC agencies during each year of the audit period. Each grant agreement outlined the areas of ISC agency responsibility. The responsibilities outlined in the agreements for FY21 and FY22 were generally consistent. In FY23, however, DHS increased the responsibilities of the ISC agencies. Digest Exhibit 6 lists the areas of ISC agency responsibility during FY21 through FY23; most areas are explained in more detail in the following sections. (page 24)

Digest Exhibit 6
GRANT AGREEMENT DELIVERABLES
FY21-FY23

Deliverable	FY21	FY22	FY23
Initial Eligibility and Linkage	X	X	X
Prioritization of Urgency of Need for Services (PUNS)	X	X	X
Pre-Admission Screening (PAS)	X	X	X
Individual Service and Support Advocacy (ISSA) [1]	X	X	X
State-Operated Developmental Center (SODC) Transition Support [1]	X	X	X
Bogard Modified Consent Decree	X	X	X
Americans with Disabilities Act (ADA)/Olmstead Outreach			X
Housing Navigator			X

Note: [1] Individual Service and Support Advocacy and SODC transition activities were included in the agreements for all fiscal years of the audit period; however, in FY23 the required ISSA visits increased from two to four and more responsibilities for SODC transition support were added.

Source: OAG developed from ISC grant agreements.

Prioritization of Urgency of Need for Services (PUNS)

ISC agencies are required to maintain the PUNS list for Waiver services. PUNS is the database that registers individuals who want or need Waiver services. ISC agencies are responsible for both the initial enrollment, as well as the annual update of information. (pages 24-25)

Pre-Admission Screening (PAS)

PAS is for individuals seeking services where a developmental disability is suspected. The ISC agency is responsible for all initial activities, including, but

not limited to, conducting the discovery and personal planning processes and monitoring transition of individuals for the four weeks following the start of Waiver services. (page 25)

Individual Service and Support Advocacy (ISSA)

ISSA is defined as service coordination or case management to persons who are enrolled in a Home and Community-Based Service Waiver. ISC agency responsibilities include, but are not limited to, participation in the discovery tool and personal plan, conducting monitoring visits and annual redeterminations and reporting allegations of abuse, neglect, and financial exploitation. (pages 25-26)

State-Operated Developmental Center (SODC) Transition Support

ISC agencies continue to have responsibilities to individuals transitioning from an SODC. ISC agencies are required to conduct post-transition visits when an individual transitions from an SODC to a community-based setting. However, during the audit period, the expectations increased to support individuals throughout the transition process rather than just post-transition. (pages 26-27)

Bogard Modified Consent Decree

DHS is required to follow the Bogard Modified Consent Decree signed July 25, 2000, for individuals identified as Bogard-class members. Class members are designated by DDD. The responsibilities of ISC agencies to Bogard-class members vary depending on membership in an approved Medicaid Waiver. Members in an approved Medicaid Waiver receive ISSA or case-management services. The Bogard section outlined in the grant agreements is specific to class members in a **non-Waiver** setting. The main difference is members in a non-Waiver setting receive **monthly** service coordination visits; whereas, Bogard-class members in a Waiver setting follow ISSA visiting requirements. (page 27)

Americans with Disabilities Act (ADA)/Olmstead Outreach

New for FY23, ISC agencies were responsible for conducting outreach to ensure individuals who reside in intermediate care facilities for individuals with developmental disabilities (ICF/DD) and SODCs are aware of community-based services and other living options and the process for access and making informed decisions. According to DHS, it provided a total of **$368,356** to the eight ISC agencies in the ADA/Olmstead Outreach in FY23. (page 27-28)

Housing Navigator

Also new for FY23 was the Housing Navigator program. This program was considered a pilot program for FY23 and FY24. The purpose of this program is to help individuals with developmental disabilities find housing options in Illinois communities. It is the responsibility of the ISC agencies to work with the housing navigators to help individuals with developmental disabilities **identify and apply** for housing options that are landlord-based and individuals will have a lease. DHS provided a total of **$360,000** to the seven ISC agencies participating in the Housing Navigator program in FY23. (pages 28-29)

Examination of ISC Agency Caseloads

The ISC agency grant agreements do not include any requirements related to caseloads. DHS does not track the number of case managers employed by the ISC agencies and overseeing the individuals receiving Waiver services in each of the regions. (page 30)

Caseload

DHS defines caseload as the number of individuals in need of case management being served by a single caseworker at a given time. Case management is provided by ISC agencies through ISSA. During the audit period, case management accounted for approximately 70 percent of the total funds received by the ISC agencies. Digest Exhibit 7 presents the count of all individuals receiving Waiver services by region during at least one month of each of the fiscal years. Service, Inc. was the ISC agency providing case management to the most individuals in each of the fiscal years. (pages 30-31)

Digest Exhibit 7
WAIVER PARTICIPATION BY REGION
FY21-FY23

Region	FY21	FY22	FY23
Region A – Service, Inc.	1,817	1,893	1,932
Region B – Community Alternatives Unlimited	4,975	5,069	5,126
Region C – Community Service Options, Inc.	1,866	1,981	1,992
Region D – Suburban Access, Inc.	3,436	3,573	3,607
Region E – Service, Inc.	2,070	2,188	2,281
Region F – Service, Inc.	1,883	1,942	1,992
Region G – Prairieland Service Coordination, Inc.	1,188	1,199	1,201
Region H – Champaign County Regional Planning Commission	1,562	1,579	1,555
Region I – Central Illinois Service Access, Inc.	1,206	1,196	1,199
Region J – Prairieland Service Coordination, Inc.	949	957	986
Region K – Prairieland Service Coordination, Inc.	1,015	1,042	1,084
Region L – Southern Illinois Case Coordination Services, Inc.	1,958	1,936	1,955
Totals	23,925	24,555	24,910

Source: OAG developed from DHS Waiver billing data.

Case Manager Ratio

ISC agencies were unable to provide consistent caseload information. ISC agency caseloads were continually changing, and ISC agencies reported a number of factors during the audit period, which affected caseloads.

The Community Services Act (405 ILCS 30/2(c)) requires DHS to include case coordination services as part of its community services system. The Act (ILCS

30/4(e)) also establishes that funding methodologies must include staffing ratios among other factors and is to include ISC agencies in any funding methodologies.

Absent requiring a staffing ratio, DHS cannot include this statutorily required factor in its funding methodology, which should be considered when setting the ISSA rate, the rate at which ISC agencies are ultimately reimbursed for case-management services. (pages 31-33)

Unwritten Policy for ISC Agency Selection

DHS utilized an unwritten policy to allow an individual to choose an ISC agency outside of the assigned region. DHS said DDD has approved requests for changes to ISC agencies for case management as a result of a disagreement or conflict, but there is an expectation on the ISC agency and individual to go through the conflict resolution process described in the ISC Manual. DHS **did not provide** evidence that the conflict resolution process was used for the individual in the sample. DHS also **did not provide** approval documentation allowing the individual to choose an ISC agency outside of the assigned region. (pages 33-35)

ISC Agency Documentation and Reporting Allegations

ISC agencies are statutorily required to be mandated reporters of allegations of suspected abuse, neglect, and financial exploitation. ISC agencies specifically report allegations to DHS Office of the Inspector General (OIG), Adult Protective Services (APS) within the Department on Aging, the Department of Children and Family Services (DCFS), and the Department of Public Health (DPH).

DHS OIG receives such allegations for individuals residing in Community Integrated Living Arrangements or incidents occurring at Community Day Services. APS receives allegations for individuals enrolled in the Adult-Based Support Services Program. DCFS receives allegations for individuals residing in a Child Group Home or participating in a Children's Home-Based Support Services Program. DPH receives allegations for individuals residing in an Intermediate Care Facility or a Community Living Facility. As shown in Digest Exhibit 8, OIG and APS were the reportable entities for **95 percent** of all individuals in FY23. (pages 36-39)

Digest Exhibit 8
SUMMARY OF OVERSIGHT ENTITIES
FY23

Oversight Entity	Client Type Reportable to Entity [2]	Count of Individuals
Office of the Inspector General	C – CILA D – Day Program S – SODC Community Day Service	12,417
Adult Protective Services	H – Adult Home Based Supports	11,236
Department of Children and Family Services	G – Children's Home Based Supports R – Children's Residential Waiver	967
Department of Public Health [1]	B – Bogard	63

Note: [1] The Bogard data is reported for the month of June 2023, not all of FY23 like the other entities. The Bogard data for June 2023 totaled 402 individuals. During June 2023, there were 63 individuals living in an ICF/DD arrangement reportable to DPH. The remaining 339 individuals were either receiving Waiver services and captured with another oversight entity or were classified with specialized services or other residence. These 339 individuals are not included in the Exhibit.

Note: [2] The Waiver billing data also included a total of 290 individuals with a client type of purchase of service. This client type is not specific to a single entity. It includes the following arrangements: Community Living Facilities (DPH), Child Care Institutions (DCFS), special home placements (APS) and supported living arrangements (DPH). These 290 individuals are not included in the Exhibit.

Source: OAG developed from DHS Waiver billing data and Bogard data.

ISC Agencies as Mandated Reporters

The ISC agency grant agreements require the ISC agencies to report any allegations of abuse, neglect, and financial exploitation via DDD guidelines and regulations. We asked DHS if there was a centralized location for ISC agencies to report allegations and how DHS knows if all allegations were reported. DHS said ISC agencies **may** utilize DDD's complaint process for reporting an allegation. However, DHS **did not report** having a centralized location for capturing allegation information reported by the ISC agencies.

ISC agencies are often not in situations to firsthand witness reportable allegations of abuse, neglect or financial exploitation. In FY21 and FY22, ISC agencies were only required to conduct two monitoring visits per year, and during FY21, those visits were conducted virtually due to the pandemic. In FY23, ISC agencies were required to conduct four visits. We asked each of the ISC agencies about their experiences witnessing reportable allegations. The eight ISC agencies generally said that if each is going to witness a reportable allegation, it is during one of the monitoring visits. (pages 39-40)

Additional ISC Agency Monitoring

We examined whether ISC agencies are conducting the necessary **follow-up** visits to ensure the health, safety, and welfare of individuals. The ISC agency grant agreements require ISC agencies to conduct monitoring visits that are **in addition** to the required monitoring visits and may be necessary to ensure the health, safety, and welfare of an individual. The ISC Manual outlines where an ISC

agency *"should complete an additional face to face visit to address the specific circumstance…Documentation should include confirmation that the events related to the circumstance no longer present a risk to the individual."* The list of circumstances found within the ISC Manual includes, but is not limited to, investigative findings of egregious neglect, abuse, and/or exploitation and other situations, which create concerns related to health, well-being, and service provision.

But, according to DHS, neither DHS nor anyone else is required to inform the ISC agency of an allegation or share the results of an investigation. However, DHS says they follow **best practices**. DHS also said that ISC agencies follow best practices and conduct follow-up on all allegations reported to OIG, DPH, and DCFS as needed even though it is not required in the grant agreements. Again, we note, according to DHS, no one is required to notify the ISC agency of any allegations or results of an investigation. **ISC agencies cannot conduct follow-up if they are not informed that an allegation was reported or that the results of an investigation were finalized**. (pages 40-41)

Sampling and Testing Results

We judgmentally sampled 75 individuals receiving Waiver services. This sample was used to test two areas related to allegations:

- to determine if the monitoring notes contained information that should have been reported to the appropriate oversight entity; and
- to determine if the ISC agency case files contained evidence to support that the ISC agency was aware and conducted follow-up on allegations to ensure health, safety, and welfare of an individual.

We **did not find** any evidence in FY21 through FY23 in any of the individual sample cases where the documentation maintained by the ISC agency contained information that should have been reported as an allegation. With regard to ISC awareness of OIG and/or APS allegations, 41 of 75 individuals in our sample had related allegations. We reviewed the case files for each and found that ISC agencies had no documentation to support knowledge of the allegation in 73 percent, or 30 of 41, cases in FY21 through FY23.

ISC agencies should have knowledge of such allegations in all cases in order to comply with the grant agreements by ensuring the health, safety, and welfare of all individuals as required. As the oversight entity to the ISC agencies, DHS should ensure DPH and DCFS are sharing the information not only with the ISC agencies, but also DHS.

Absent a system requiring DHS notification when allegations are reported to the mandated reporting entities and information sharing with the ISC agencies, DHS cannot ensure ISC agencies are conducting the additional monitoring as required. Further, when allegation-related information is not shared with the ISC agencies, the ISC agencies cannot ensure the health, safety, and welfare of the developmentally disabled individuals, which they oversee. When the allegation information is not shared with DHS, DHS **cannot** monitor the ISC agencies to

ensure the necessary follow-up is being conducted to ensure the health, safety, and welfare of the individuals. (pages 41-44)

Oversight and Monitoring

DDD is the Division charged with oversight and monitoring of the ISC agencies. However, ISC agencies are reviewed by a number of entities within DDD and external to DDD. We found **overlapping** Waiver-focused reviews and **limited coordination** with DDD. Additionally, the ISC agencies utilize two main IT systems, Birdseye and ROCS, for reporting purposes and for requesting funds. A third system, Mobius, was also utilized for review of certain ISC agency areas. DDD had **limited access** to this information, information that could have been helpful for oversight and monitoring of the ISC agencies. (page 45-46)

Grant Management Unit and Other Waiver-Focused Reviews

It is the primary responsibility of the Grant Management Unit within DDD to provide monitoring and oversight to the ISC agencies based on **all** activities in the grant agreements. The ISC agencies are required by the grant agreements to submit quarterly performance fiscal reports to the Grant Management Unit.

In addition to the Grant Management Unit, there are at least three other entities that conduct formal reviews actively focused on the Waiver services (ISSA) provided by the ISC agencies. These reviews are conducted on a sample basis. These three entities are: **Bureau of Quality Management** (BQM) within DDD; **Quality Improvement Organization** (QIO), Public Consulting Group, contracted by the Department of Healthcare and Family Services; and **Ligas Court Monitor and the University of Illinois at Chicago** to conduct the Ligas review. (pages 46-47)

Schedule of Reviews

ISC agencies are subjected to a **significant number** of reviews, which are **overlapping and not coordinated**. Digest Exhibit 9 shows an example of the schedule of reviews during the audit period for one ISC agency and the summary of each review. This schedule of reviews also includes the 12 quarterly performance and fiscal reports. Each of the quarterly performance and fiscal reports were to be provided to DHS no later than 15 days following the end of each quarter. (pages 50-51)

Digest Exhibit 9
EXAMPLE OF REVIEWS AT AN ISC AGENCY
FY21-FY23

Date of Request or Review	Entity Reviewing	Summary of Review
08/13/20	OCA	Fiscal Administrative
10/15/20	DDD	FY21 Q1 Performance and Fiscal Reports
11/16/20	BQM	FY21 Review – 51 Individuals
01/15/21	DDD	FY21 Q2 Performance and Fiscal Reports
04/15/21	DDD	FY21 Q3 Performance and Fiscal Reports
05/10/21	HFS - QIO	FY21 Review – 40 Individuals
07/15/21	DDD	FY21 Q4 Performance and Fiscal Reports
08/23/21	BQM	FY22 Review – 37 Individuals
10/15/21	DDD	FY22 Q1 Performance and Fiscal Reports
01/15/22	DDD	FY22 Q2 Performance and Fiscal Reports
04/15/22	DDD	FY22 Q3 Performance and Fiscal Reports
04/18/22	HFS - QIO	FY22 Review – 31 Individuals
07/15/22	DDD	FY22 Q4 Performance and Fiscal Reports
09/19/22	BQM	FY23 Review – 39 Individuals
10/15/22	DDD	FY23 Q1 Performance and Fiscal Reports
11/11/22	Ligas	FY23 – 9 Individuals
12/06/22	Ligas	FY23 – 12 Individuals
01/05/23	Ligas	FY23 – 7 Individuals
01/15/23	DDD	FY23 Q2 Performance and Fiscal Reports
02/13/23	Ligas	FY23 – 12 Individuals
04/15/23	DDD	FY23 Q3 Performance and Fiscal Reports
07/15/23	DDD	FY23 Q4 Performance and Fiscal Reports

Source: OAG developed from ISC agency reviews.

Inconsistent and Inaccurate Guidance

DDD **has not updated** the ISC Manual to reflect the number of required Waiver visits found in the FY23 grant agreements. Additionally, DDD **has not updated** the ISC Manual or the grant agreements to reflect the proper program codes, which was a pre-COVID pandemic change that went into effect more than five years ago. When the ISC Manual does not accurately reflect the required number of monitoring visits, there is potential the ISC agency does not conduct the correct number of visits. When the grant agreements and the ISC Manual do not accurately reflect the proper program codes, there is potential that an ISC agency can incorrectly bill for the services each provides. (pages 52-54)

DDD Monitoring of ISC Agency Activities

DDD is charged with the primary oversight of the ISC agencies. The agreements dictate the required activities to be conducted by the ISC agencies. The Grant Management Unit receives the ISC agency reporting that should be used to monitor the ISC program. (page 54)

Prioritization of Urgency of Need for Services (PUNS)

DHS **did not always enforce** the 95 percent timely annual PUNS update requirement. Our review of the audit period found four out of eight ISC agencies were out of compliance in at least three quarters in FY21. The percentage range of overdue PUNS updates during that fiscal year was 5.1 percent to 27.2 percent. There was additional noncompliance in FY22 and FY23. Digest Exhibit 10 shows the percentage of overdue PUNS by ISC agency. The orange shading is used to represent any quarter an ISC agency was not compliant with the performance standard (any percentage over five).

Digest Exhibit 10
OVERDUE PUNS SUMMARY
FY21-FY23

		ISC [1]							
		CCRPC	CISA	CAU	CSO	Prairieland	Service	SICCS	Suburban Access
FY21	Q1	4.6%	27.2%	1.4%	1.6%	5.7%	13.3%	6.7%	2.7%
	Q2	6.1%	23.2%	3.3%	1.2%	6.2%	12.9%	5.7%	3.6%
	Q3	3.8%	15.9%	1.0%	0.2%	5.5%	6.9%	5.1%	2.4%
	Q4	4.9%	1.0%	1.3%	1.6%	3.5%	4.9%	5.3%	0.4%
FY22	Q1	5.0%	1.4%	0.7%	2.1%	1.4%	3.8%	5.8%	0.4%
	Q2	2.8%	0.8%	0.7%	2.2%	1.5%	0.8%	2.0%	0.3%
	Q3	4.9%	1.4%	0.5%	3.1%	1.5%	1.1%	4.4%	1.1%
	Q4	4.9%	0.0%	2.0%	3.0%	1.2%	2.2%	6.8%	1.5%
FY23	Q1	4.3%	1.3%	1.4%	2.4%	1.8%	1.9%	6.8%	0.1%
	Q2	4.3%	1.1%	0.8%	1.6%	1.2%	2.1%	2.3%	1.4%
	Q3	5.2%	0.1%	0.8%	3.0%	3.1%	4.3%	2.4%	0.4%
	Q4	7.2%	0.7%	0.8%	3.7%	3.0%	5.2%	6.6%	0.5%

Note: [1] Regions were combined for ISC agencies serving more than one region.

Source: DHS Statewide overdue PUNS summaries.

When an ISC agency does not ensure there is an annual update for each individual in the PUNS database, there is a risk that the individual is overlooked for needed or desired services. Further, when the PUNS database is not updated, it is difficult for DHS to ensure adequate Statewide planning. (pages 54-57)

Annual Redeterminations

DHS **did not always enforce** the 95 percent timely annual redetermination requirement. Our review of the audit period found two ISC agencies did not meet the performance standard in any of the 11 quarters reviewed. In total, at the end of FY23, 10.8 percent (2,385 of 22,098) of the individuals requiring an annual redetermination were overdue. Digest Exhibit 11 shows the percentage of overdue redeterminations by ISC agency. The orange shading is used to represent any quarter an ISC agency was not compliant with the performance standard (any percentage over five).

Digest Exhibit 11
OVERDUE REDETERMINATIONS SUMMARY
FY21-FY23

		ISC [2]							
		CCRPC	**CISA**	**CAU**	**CSO**	**Prairieland**	**Service**	**SICCS**	**Suburban Access**
FY21	**Q1**	4.9%	3.5%	1.3%	4.5%	5.9%	12.9%	4.8%	6.2%
	Q2	4.1%	2.6%	1.2%	6.7%	6.3%	13.0%	8.7%	8.1%
	Q3	2.4%	3.2%	1.1%	5.3%	5.1%	13.6%	9.0%	9.9%
	Q4	4.1%	2.9%	1.8%	10.7%	2.8%	10.8%	4.7%	11.3%
FY22	**Q1**	4.7%	5.0%	2.5%	7.2%	5.5%	6.5%	5.6%	5.0%
	Q2	3.6%	3.6%	1.5%	8.8%	8.6%	5.8%	5.3%	5.5%
	Q3	5.0%	3.8%	1.3%	10.3%	5.4%	5.9%	7.6%	8.5%
	Q4	4.6%	3.2%	2.2%	11.0%	5.4%	5.8%	8.2%	9.5%
FY23	**Q1**[1]								
	Q2	11.7%	5.2%	1.6%	18.4%	6.8%	8.4%	9.0%	13.7%
	Q3	6.2%	4.4%	1.9%	20.4%	7.3%	8.9%	10.6%	15.4%
	Q4	7.5%	8.8%	2.4%	40.3%	6.9%	8.2%	9.4%	17.9%

Note: [1] FY23 Quarter 1 reports were not available.

Note: [2] Regions were combined for ISC agencies serving more than one region.

Source: DHS Statewide overdue redeterminations summaries.

Failure to conduct a redetermination within the required 365 days puts the individual as risk for an interruption in eligibility for Medicaid benefits. (pages 57-60)

Individual Service and Support Advocacy (ISSA)

DHS **failed** to ensure ISC agencies were completing all required ISSA monitoring visits and failed to ensure ISC agencies were conducting all required annual discovery and personal plan processes. During testing, we found missing or not timely discovery tool or personal plan updates in at least one fiscal year for 33 of 75 individuals sampled, and on average, only 86 percent of the required visits were conducted.

DHS **cannot** ensure that the needs and desires of each individual are met and the services provided to each individual are appropriate when the discovery and personal planning processes are not conducted at least annually. Additionally, failure to ensure all required visits are conducted by the ISC agencies could jeopardize the health, safety, and welfare of each of the individuals served. When visits are not conducted face-to-face, there is a risk of missing an issue that would normally have been identified. (pages 60-64)

Bogard

During the audit period, DHS **did not always** have an accurate listing of active Bogard individuals and **did not always** ensure ISC agencies were providing all required services to those individuals. For individuals with the Bogard-class designation who were not receiving Waiver services, ISC agencies were required to coordinate the Individual Service Plan development, as well as complete service coordination visits for individuals residing in all other non-Waiver settings. During testing, we found two out of 15 individuals sampled had passed away based on documentation in the case files, yet those individuals remained on DHS' Bogard listing for months after their deaths. We also found ISC agencies **did not participate** in 13 of 39 required Individual Service Plan updates and **did not conduct** 99 of 440, or 22.5 percent, of the required monthly visits for the 15 individuals in the sample.

Failure to ensure all required visits are conducted by the ISC agencies jeopardizes the health, safety, and welfare of each individual served as part of the Bogard-class designation. Additionally, failure by DHS to ensure participation in the service plans by the ISC agencies could result in individuals with the Bogard-class designation not receiving the appropriate or desired services. (pages 64-66)

Americans with Disabilities Act (ADA)/Olmstead and Housing Navigator

DHS **did not monitor** the ADA/Olmstead Outreach and Housing Navigator pilot programs. These programs were new for FY23 and provided a total of $725,000 in funding. DHS **failed** to request grant funds back from one ISC agency, Champaign County Regional Planning Commission, that received more than $49,000 in funding for both programs, yet **admittedly** did not conduct any of the required activities for either program.

DHS **did not** readily have ADA/Olmstead Outreach program data available; rather, it had to compile the information when requested. Despite having compiled the information, DHS **did not include** outreach data on three ISC agencies covering five regions, **did not know** the total number of residents entitled to receive outreach, **could not explain** a number of reported entries, and **did not follow-up** with the ISC agencies to ensure the outreach occurred. We reviewed Housing Navigator program information and found three out of eight ISC agencies **did not secure housing** for a single individual. Additionally, the ISC agencies **did not always** provide complete information on the deliverables to

DHS and **did not always** conduct the training, presentations, and meetings as required.

Without an analysis on the ADA/Olmstead Outreach and the Housing Navigator programs, DHS cannot determine if these pilot programs are successful and should be continued in future years. (pages 66-69)

SODC Transitions

DHS **did not require** the ISC agencies to comply with SODC transition activities as required by the ISC agency agreements. DHS **does not have clear and consistent guidance** on requirements for SODC transitions. During testing, we found DHS **lacked evidence** of ISC agency attendance at required pre-transition meetings and **lacked evidence** to support all post-transition visits were conducted as required. This included 2 of 11 individuals in our sample who **did not receive any post-transition visits.** The ISC agencies and DHS' Bureau of Transition Services (BTS) failed to coordinate post-transition visits. This included 6 of 11 individuals receiving at least one post-transition follow-up visit **on the same day.**

DHS relied upon ISC agency quarterly reports to determine compliance with SODC Transition Support deliverables found in the grant agreements. Again, these reports could not be used to determine compliance and are **not reviewed** at any level of detail whereby DHS could determine compliance. Further, DHS **could not provide** the visiting notes for the individuals in our sample even though their own internal policy requires the oversight and receipt of such notes from the ISC agencies.

When DHS reduces the required post-transition follow-up visits, but then does not ensure complete participation, there is an increased likelihood a transition could fail. Failure to coordinate ISC agency activities creates situations where certain activities are not conducted while others are duplicated. When DHS does not determine ISC agency compliance with the required grant activities, it has no idea how the program funds are being spent and if the required activities are being conducted. (pages 69-74)

Audit Recommendations

The audit report contains 12 recommendations directed to the Department of Human Services. The Department agreed with the recommendations. The complete response from the Department is included in this report as Appendix D.

This performance audit was conducted by the staff of the Office of the Auditor General.

SIGNED ORIGINAL ON FILE

JOE BUTCHER
Division Director

This report is transmitted in accordance with Sections 3-14 and 3-15 of the Illinois State Auditing Act.

SIGNED ORIGINAL ON FILE

FRANK J. MAUTINO
Auditor General

FJM:JMP

Contents

Glossary and Acronyms

Aging – Adult Protective Services (APS)	One of the four entities Independent Service Coordination (ISC) agencies are mandated to report allegations or observations of abuse, neglect, or financial exploitation. The allegations reportable to APS are for adults age 18 or over, who reside in their own home or family's home.
Birdseye	A software system developed by the Department of Developmental Disabilities (DDD) in conjunction with the Illinois Department of Innovation & Technology (DoIT) and Provisio Partners, a consultant and software development company. Birdseye was implemented in 2019, and the intent of the system includes, but is not limited to, processing DDD funding requests and maintaining data.
Bogard	A class of members who are 18 years of age or older, with developmental disabilities, who on or after March 23, 1986, through March 31, 1994, resided in an Intermediate Care Facility or Skilled Nursing Facility in Illinois as a Medicaid recipient for a period of more than 120 days in the aggregate. These members were identified from the Bogard Modified Consent Decree and are designated by the Department of Human Services' (DHS) DDD. These members receive a specific form of case coordination related to their residential setting.
Central Illinois Service Access, Inc. (CISA)	ISC agency assigned to Region I.
Champaign County Regional Planning Commission (CCRPC)	ISC agency assigned to Region H. Effective July 1, 2023, CCRPC no longer provides ISC services to the State.
Community Alternatives Unlimited (CAU)	ISC agency assigned to Region B.
Community Reimbursement System (CRS)	A system utilized by DDD and designed to collect and process billing information for fee-for-service programs provided to clients.
Critical Incident Reporting and Analysis System (CIRAS)	This system was developed by DHS DDD to capture electronic reports from providers and ISC agencies for critical incidents involving individuals with developmental disabilities in the State's Medicaid

Glossary and Acronyms

	Waiver programs. Critical incidents reported in this system are alleged, suspected, or actual occurrence of an incident when there is a reason to believe the health or safety of an individual may be adversely affected or an individual may be placed at a reasonable risk of harm. Allegations or observations of abuse, neglect, or financial exploitation are not to be reported in CIRAS.
Community Service Options, Inc. (CSO)	ISC agency assigned to Region C.
Department of Children and Family Services (DCFS)	One of the four entities ISC agencies are mandated to report allegations or observations of abuse, neglect, or financial exploitation. The allegations reportable to DCFS are for children under the age of 18 or for anyone residing in a Child Group Home or Children's Home-Based Support Services Program.
Department of Healthcare and Family Services (HFS)	State agency that is the administrator of the Medicaid Program for Illinois.
Department of Human Services (DHS)	State agency that oversees interactive provider networks that treat persons with developmental disabilities, mental health, and substance abuse challenges and provides rehabilitation services. DHS also aids eligible, low-income individuals and families with essential financial support, locating training and employment opportunities, and obtaining child care in addition to other family services.
Department of Innovation and Technology (DoIT)	A State agency that supports DHS among other agencies in the executive branch of State government by guiding technology solution delivery and support. DoIT oversees and maintains multiple DDD databases utilized for the ISC program.
Department of Public Health (DPH)	One of the four entities ISC agencies are mandated to report allegations or observations of abuse, neglect, or financial exploitation. The allegations reportable to DPH are for individuals residing in an Intermediate Care Facility or a Community Living Facility.
Developmental Disability (DD)	An intellectual disability or related condition that is manifested before age 18 is likely to continue indefinitely, and results in substantial functional limitations in major life activity. There are certain other conditions, such as cerebral palsy and epilepsy

Glossary and Acronyms

	that qualify as a DD as long as the condition is manifested before age 22.
DHS Office of the Inspector General (OIG)	One of the four entities ISC agencies are mandated to report allegations or observations of abuse, neglect, or financial exploitation. Specific to the ISC program, allegations reportable to DHS OIG are for individuals residing in a Community Integrated Living Arrangement (CILA) or incidents that occur at Community Day Services.
Discovery Tool	The first component of the DD Person-Centered Planning process. The Discovery Tool is used to gather information about a person's preferences, interests, abilities, preferred environments, activities, and supports needed.
Division of Developmental Disabilities (DDD)	A Division within the Department of Human Services that provides services and supports for individuals with developmental disabilities and their families.
Home and Community-Based Services (HCBS) Waivers	Services that prevent or delay a person from living in a long-term facility or institution. DDD operates three HCBS waivers for people with developmental disabilities. The Adult Waiver, the Children's Residential Waiver, and the Children's Support Waiver.
Housing Navigator	A two (2) year pilot program beginning in FY23 which was designed to help people with developmental disabilities find housing options in Illinois communities. ISC agencies help people apply for rental units.
Independent Service Coordination (ISC) Agencies	Agencies contracted by DDD to provide case management/service coordination, which includes maintaining the DDD's waiting list, determining clinical eligibility, assisting with identifying providers of choice, developing the Personal Plan, and monitoring the Personal Plan. ISC agencies serve as the front line for information and assistance to help individuals with DD and their families make informed choices and to navigate the system.
Individual Service and Support Advocacy (ISSA)	Service coordination or case management to persons who are enrolled in the DD Home and Community-Based Services Waiver and to Bogard class members who live in an Intermediate Care Facility for Individuals with DD. Through the provision of ISSA, the ISC agency monitors whether services are being

	provided as outlined in the individual's Personal Plan, as well as monitors the person's welfare, health, and safety. ISC agencies also ensure continued eligibility for Waiver services.
Individual Support Plan (ISP)	A document that prioritizes and structures the delivery of all services and supports across environments. Individual support plans are developed for individuals in Intermediate Care Facilities for Individuals with DD and other non-waiver settings.
Mobius	A software system that runs reports showing compliance by ISC agencies. Examples of these reports include the timely completion of annual redeterminations and Prioritization of Urgency of Need for Services (PUNS) updates.
Notice of Funding Opportunity (NOFO)	Process used to competitively solicit ISC agency services. This process was first used for ISC agency services for FY20. The second NOFO was scheduled for FY25, but was canceled.
Prairieland Service Coordination, Inc. (Prairieland)	ISC agency assigned to Regions G, J, and K.
Pre-Admission Screen (PAS)	A process used to determine whether an individual has a developmental disability and, if so, to determine whether the individual needs 24-hour nursing care and/or active treatment, as well as the types of services needed.
Prioritization of Urgency of Need for Services (PUNS)	A DDD statewide database that registers individuals who want or need Waiver services. As funding becomes available, this database is used to invite individuals to apply for Waiver services.
Qualified Intellectual Disability Professional (QIDP)	A professional staff responsible for variety of duties, such as integrating, coordinating, and monitoring services for individuals with developmental disabilities. The QIDP credential is a required qualification of an individual service coordinator.
Redetermination	An annual process of reassessing a person's eligibility for Medicaid benefits.
Reporting of Community Services (ROCS)	A system utilized by DDD to collect and process service reporting data. This data is used by DHS to reimburse the ISSA fee-for-service payments, as well as monitor compliance with the grant agreements.

Glossary and Acronyms

Service, Inc. (Service)	ISC agency assigned to Regions A, E, and F.
Southern Illinois Case Coordination Services, Inc. (SICCS)	ISC agency assigned to Region L.
Suburban Access, Inc.	ISC agency assigned to Region D.

Introduction

On May 15, 2023, the House of Representatives adopted House Resolution Number 66 (Resolution) directing the Auditor General to conduct a performance audit of oversight of the Independent Service Coordination (ISC) program by the Department of Human Services' Division of Developmental Disabilities. The Resolution asked the Auditor General to conduct:

- an examination of the caseloads, by ISC agency, around the State to determine whether ISC agencies are providing coverage based on agreements with the State;
- an examination of whether ISC agencies maintain documentation and report allegations of suspected abuse, neglect, and financial exploitation to the appropriate oversight entity; and
- an examination of the oversight and monitoring of ISC agencies by DHS ensuring that the ISC agencies comply with statutory, regulatory, and contract requirements, including site visits and inspections of records and premises.

The Resolution defines the audit period as FY21 to FY23.

Background

Independent Service Coordination (ISC) agencies serve as the primary connection between individuals (and guardians) who are seeking or receiving developmental disability services and the Illinois Department of Human Services (DHS). ISC agencies contract with DHS' Division of Developmental Disabilities (DDD) to perform their duties.

DDD operates three Home and Community-Based Services (HCBS) Waivers through an interagency agreement with the Illinois Department of Healthcare and Family Services (HFS), the administrator of the Medicaid Program for Illinois. The HCBS Waivers specifically apply to developmentally disabled individuals receiving case management by the ISC agencies. These HCBS Waiver services accounted for approximately 70 percent, or $93.6 million out of the total $133.4 million, in funding received by the ISC agencies.

A waiver program is a program that provides services to help people remain in their homes or communities instead of in an institution.

ISC agencies conduct activities that are both Waiver funded and non-Waiver funded. These activities include, but are not limited to: outreach, eligibility determination, linkage to services, case management, and coordination of service delivery from other sources. ISC agencies are available 24 hours per day, 365 days per year for individuals in crisis.

Names and Locations of ISC Agencies

During the audit period there were eight ISC agencies providing services throughout the State. Each ISC agency is responsible for a specific region of the State. Two of the eight ISC agencies were responsible for more than one region. The ISC agency located in the geographic area in which the individual resides is the designated ISC agency for that individual. Exhibit 1 shows a map of the ISC regions during FY21 through FY23.

The following is a list of the eight ISC agencies and the locations of their principal offices as noted in the respective grant agreement:

- Central Illinois Service Access, Inc. (CISA) – Lincoln;
- Champaign County Regional Planning Commission (CCRPC) – Urbana;
- Community Alternatives Unlimited (CAU) – Chicago;
- Community Service Options, Inc. (CSO) – Chicago;
- Prairieland Service Coordination, Inc. (Prairieland) – Decatur;
- Service, Inc. (Service) – Joliet;
- Southern Illinois Case Coordination Services, Inc. (SICCS) – Centralia; and
- Suburban Access, Inc. (Suburban Access) – Homewood.

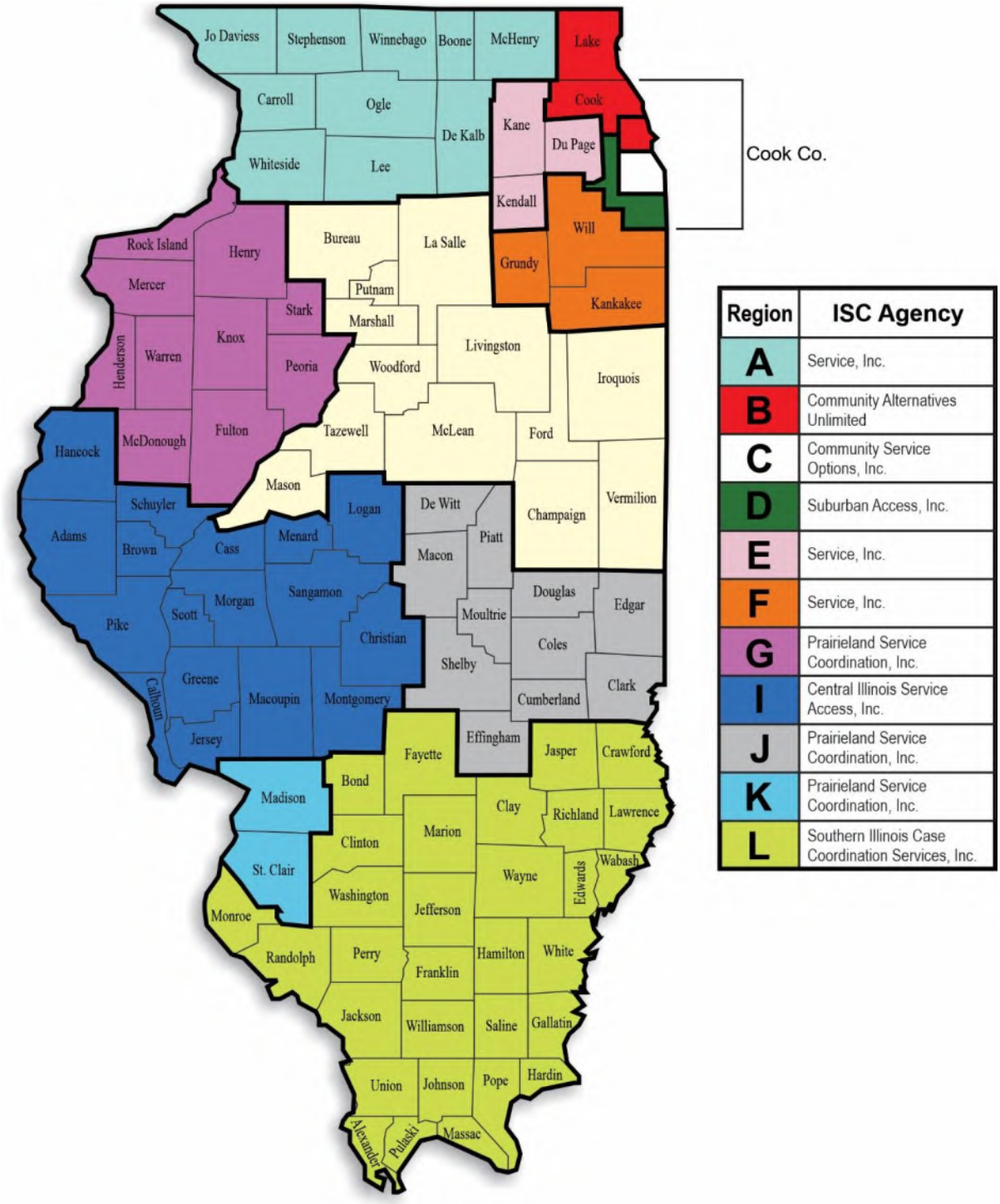
ISC Agency Changes in FY24

In March 2023, DDD was made aware that one ISC agency, CCRPC, was not renewing its ISC grant agreement for Region H for FY24. Region H covers 13 counties, and CCRPC was responsible for providing Waiver services to 1,555 individuals during FY23.

We asked CCRPC about its participation in the ISC program for FY24. CCRPC stated, *"The primary reason for termination/non-renewal was the current and FY24 projected financial deficit."* CCRPC provided other reasons including staff vacancies, additional expectations, and inadequate funding.

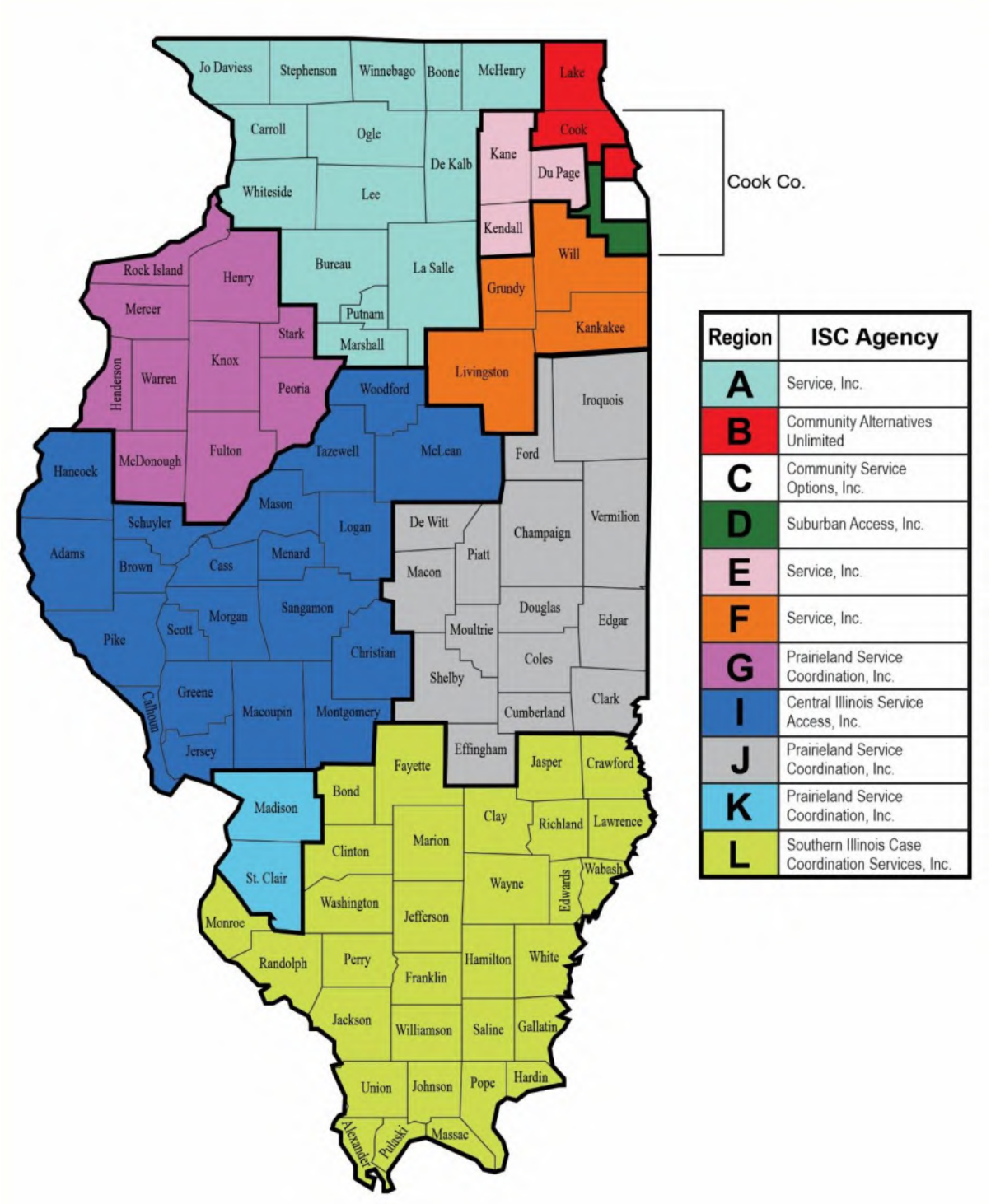
In June 2023, DDD announced that it had worked with the individuals and families and completed the transitions from CCRPC to the three surrounding ISC agencies. Exhibit 2 shows an updated map for FY24, which includes the dissolution of Region H into the surrounding regions.

Exhibit 1
ISC REGIONS
FY21-FY23



Source: OAG developed from DHS information.

Exhibit 2
ISC REGIONS
FY24



Source: OAG developed from DHS information.

Issues Impacting the ISC Agencies

During the past five years, the ISC program has received increased scrutiny; the responsibilities of the ISC agencies have become greater; and the State has increased its reliance on the services provided by the ISC agencies. As a result, the need for DHS to monitor the program has also increased. Exhibit 3 shows a general list of issues affecting the ISC program, which are further explained in the following sections.

Exhibit 3
ISC PROGRAM RELATED ISSUES

Activity	Description
Original ISC NOFO and Audit	DHS oversaw the original ISC program Notice of Funding Opportunity (NOFO) in FY19 that changed the number of ISC agencies and regions. The Office of the Auditor General conducted an audit that was released in April 2020 of the original NOFO process. The audit found the ISC program to be exempt from the competitive NOFO process and found inconsistencies in the scoring process.
Planned ISC NOFO **CANCELED – NOVEMBER 2023**	There is a general concern by ISC agencies about the impacts of another NOFO. ISC agencies expressed concerns about the reduction of ISC agencies, whether the process will be transparent and fair, and the amount of time and stress being placed on the ISC agencies in responding to another NOFO.
CILA Audit – July 2018	In July 2018, the Office of the Auditor General released an audit of the Community Integrated Living Arrangement (CILA) program that was released in July 2018. The audit found that all required ISC agency visits were not conducted on individuals transitioning from State-Operated Developmental Centers (SODCs) to the community. These visits and increased monitoring visits are a continuing requirement.
COVID Pandemic	The COVID pandemic allowed for modifications in the format and timing of ISC visits. Crises requiring ISC agency involvement increased. ISC agencies experienced staffing shortages.
Additional Responsibilities	Additional monitoring visits, reporting, outreach, and programming were added to the list of ISC agency responsibilities.
Emphasis on Community Placement	There has been an emphasis on increasing the number of community placements requiring coordination by ISC agencies.

Source: OAG developed from DHS information.

Original ISC NOFO and Audit

As reported in a prior management audit on the ISC program released in April 2020, DHS conducted its first NOFO process of the ISC program for services beginning in FY20. The results of this NOFO process decreased the number of ISC regions and some longtime ISC agencies went out of business.

The audit also reported that DHS neither adequately planned nor evaluated the ISC agency NOFO process. DHS failed to adequately plan the NOFO process by procuring the ISC program even though there was a Medicaid exemption. Other planning failures by DHS included deficiencies in the scoring parameters, a lack of administrative rules, and marginal time for evaluation. DHS also failed to adequately evaluate the NOFO process by not developing or maintaining evaluator meetings minutes and not following or uniformly applying selection criteria.

ISC NOFO – Canceled

In January 2019, DHS announced the results of the **first ever competitive NOFO process** of the ISC program that reduced the number of ISC agencies from seventeen to eight and changed the number of ISC regions from seventeen to twelve. Two ISC agencies were awarded more than one region, and some ISC agencies became responsible for services in a greater number of counties. The results of this NOFO process are reflected in Exhibit 1.

According to DHS, the original NOFO process, which brought about changes to the ISC program, included an option to renew for two (2) one-year periods. DHS opted to utilize those renewals. In FY22, DHS officials said they requested and received an approval for a **deviation** from the Grant Accountability and Transparency Act (GATA) requirements allowing DHS to extend the ISC grant program cycle for another two (2) one-year periods, which made the total grant cycle five years.

On August 3, 2023, DHS officials stated it has been its **general understanding** that the ISC program **may not be required to be *"NOFO'd"*** as it is a Medicaid-funded program. However, DHS officials said they were seeking a final determination from the Grant Accountability and Transparency Unit at the Governor's Office of Management and Budget (GOMB) as to whether a NOFO is legally required. Based on that decision, DHS stated it will determine whether it is required to, or due to the size, chooses to competitively solicit the ISC program. The issue of the ISC program being **exempt from the competitive NOFO process** because of the Medicaid funding **was reported in the ISC audit** released in April 2020.

The grant agreements in effect at the start of the audit were in effect through FY24, and DHS had announced that it planned to issue a NOFO for FY25. However, in November 2023, DHS announced that it **canceled** the NOFO for new agreements beginning in FY25, and it had received approval from GOMB for an exception to issuing the NOFO.

CILA Audit – July 2018

In a prior performance audit on the CILA program released in July 2018, it was reported that ISC agencies failed to maintain the necessary documentation on required visits specific to individuals transitioning from State-Operated Developmental Centers (SODCs) to CILAs and did not conduct all of the weekly and monthly visits to individuals in CILAs. The visits required for individuals

transitioning from SODCs to CILAs and the required visits to individuals in CILAs are only a few of the visits required of ISC agencies. These required visits are only one of the responsibilities of the ISC agencies. We conducted follow-up work on the CILA audit during this audit. The results of the follow-up are presented in the Oversight and Monitoring section of this report.

COVID Pandemic

The COVID pandemic was declared a federal public health emergency on January 31, 2020, and officially ended on May 11, 2023. The pandemic impacted the ISC agencies not only in the modifications to their coordination efforts but also to their staffing levels.

DHS, through HFS, requested and received approval from the federal government to amend the Medicaid Waiver and certain requirements pertaining to ISC case coordination and service delivery. These modifications were approved for the time period January 2020 through November 2023, which was six months after the COVID pandemic was declared over. Exhibit 4 shows a timeline of events related to the COVID pandemic.

Exhibit 4
COVID PANDEMIC TIMELINE

Date	Description
01/27/20	Effective date of Waiver modifications
01/31/20	Federal public health emergency declared
03/01/20	DDD suspended all ISC in-home visits
05/12/20	Federal CMS retroactively approved request to amend Waiver
07/01/21	DDD reinstituted ISC face-to-face visits based on certain guidance
05/11/23	End of the federal public health emergency
11/11/23	End of the federal Waiver flexibilities granted because of COVID

Source: OAG developed from DHS information.

We asked DHS how the ISC agencies were directly affected by the approval of the emergency amendment to the Waiver. DHS said DDD **authorized policy changes and allowed flexibilities,** which were provided to the ISC agencies via DDD informational bulletins and communications. The most notable changes were remote evaluations, assessments, discovery, planning, and quarterly visits.

Despite the flexibilities, a couple of ISC agencies still expressed concerns:

- One ISC agency, Service, stated it was a challenge to learn all of the adjusted requirements for providers and programs.
- Another ISC agency, CISA, expressed concern that remote visits were difficult in rural areas due to a lack of internet, a shortage of staff to assist with technology, and lack of knowledge on how to use the technology.

The section on Oversight and Monitoring includes additional discussion related to visits.

We asked all eight ISC agencies about the impact of the pandemic on each of their organizations. Most ISC agencies reported having some impact on staffing as a result of the pandemic.

- CCRPC said, *"During and after the pandemic, we struggled to find & retain qualified staff."*
- Service stated that staffing has been a major issue in one of the three of its assigned regions, Region E.
- CSO said, *"As far as COVID goes, we had to increase our staff's caseload across the board because we lost some staff during and immediately after COVID."* CSO also said, *"The combination of the NOFO, the effects and after-effects of COVID and the instability of the social service job market convulsed the ISC system terribly."*
- Suburban Access said it experienced *"several resignations throughout the pandemic and interviewing and hiring staff was a challenge, as people were reluctant to interview due to safety concerns."*

The section on Examination of ISC Agency Caseloads includes additional discussion related to staffing issues at the ISC agencies.

Additional Responsibilities and Emphasis on Community Placement

ISC agency responsibilities have increased during the few past years. These responsibilities include but are not limited to: additional monitoring visits, reporting, outreach, and programming. Also, the movement for choice continues to place emphasis on increasing community placements, which increases coordination activities required of the ISC agencies. When individuals move into the community and receive Waiver services, the ISC agencies are required to provide case management to those individuals.

Department of Human Services

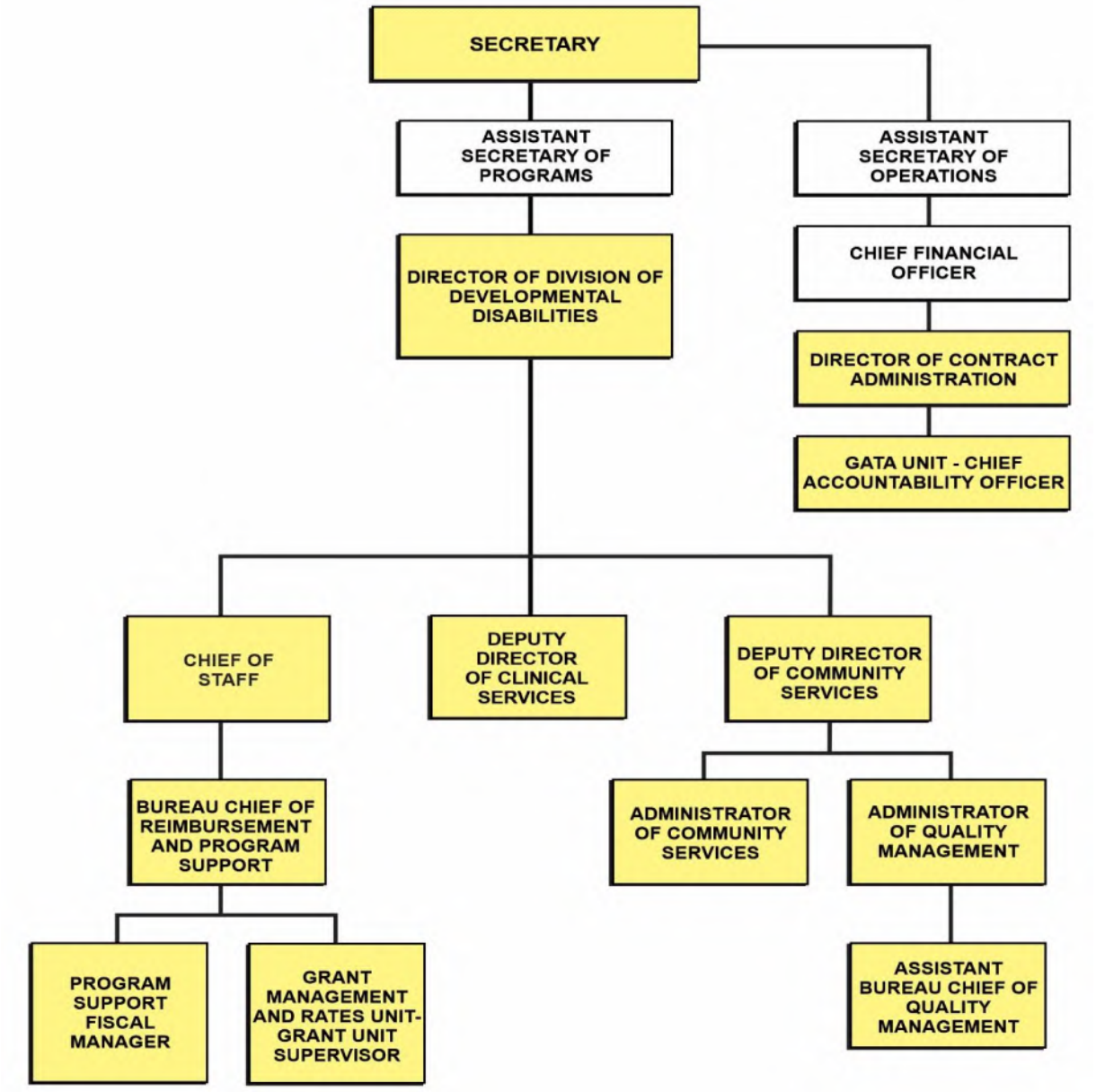
The Community Services Act (405 ILCS 30/1) directs DHS to assume leadership in providing an array of services for persons with mental health and/or developmental disabilities that will strengthen the individual's self-esteem, participate in and contribute to community life, and prevent unnecessary institutionalization.

Division of Developmental Disabilities' Mission

"*To provide leadership for the effective management of the design and delivery of quality outcome-based, person-centered services and supports for individuals who have developmental disabilities.*"

DHS primarily utilizes the Division of Developmental Disabilities (DDD) to oversee the ISC program. (See the adjacent text box for the DDD's mission.) DHS also cited the Office of Contract Administration as having some fiscal and administrative review responsibility to the ISC program. Exhibit 5 presents the DHS organizational chart with units that DHS said were involved in the ISC program.

Exhibit 5
DHS ORGANIZATIONAL CHART – ISC PROGRAM INVOLVEMENT
As of June 30, 2023



Source: OAG developed from DHS information.

Home and Community-Based Services Waiver Program

The Waiver program directly applies to one of the responsibilities of the ISC agencies, Individual Service and Support Advocacy (ISSA) Services, which is specifically for service coordination or case management. Three individual

Waivers apply to the case-management services provided by the ISC agencies: Adult Waiver, Children's Support Waiver, and Children's Residential Waiver.

Adult Waiver

The Adult Waiver is for adults **ages 18 and older** with developmental disabilities. Individuals receiving Adult Waiver services can receive: home-based support services, residential services, and day programs and vocational services.

Children's Support Waiver

The Children's Support Waiver is for eligible children and young adults **ages 3 through 21** with developmental disabilities **who live at home** with their families. This Waiver provides supports designed to prevent or delay the need for out-of-home residential services for children and young adults who would otherwise need a level of service provided by an intermediate care facility.

Children's Residential Waiver

The Children's Residential Waiver provides 24-hour residential support for eligible children and young adults **ages 3 through 21** with developmental disabilities **as an alternative to an intermediate care facility**. This Waiver provides a structured environment to children and adolescents who cannot reside in their own home.

Waiver Program Populations

We requested and received the population of individuals enrolled in any one of the three Waivers at any point during the audit period. The population is based on the fee-for-service billings by individual for case-management services submitted by the ISC agencies. As seen in Exhibit 6, the vast majority of individuals receiving Waiver services are in the Adult Waiver.

Exhibit 6
INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES BY WAIVER TYPE
FY21-FY23

Waiver	FY21	FY22	FY23
Adult	22,542	23,261	23,653
Children's Support	879	820	832
Children's Residential	177	157	135
Totals [1]	23,598	24,238	24,620

Note: [1] There are approximately 300 individuals in each of the fiscal years who are not included in the totals. These individuals have a client type that includes more than one of the Waivers.

Source: OAG developed from DHS Waiver billing data.

Funding for the ISC Program

During the audit period, DHS **had not analyzed** the formula that sets the rate at which ISC agencies are reimbursed for Individual Service and Support Advocacy (ISSA), also known as case-management services, provided by the ISC agencies to each individual receiving Waiver services. This formula supported approximately 70 percent of the funding received by the ISC agencies during the audit period. Further, DHS **has excluded** the ISC agency services from any external reviews and has not addressed the recommendations involving aspects of the ISC program.

DHS **rejected** more than $1.7 million in ISSA bills submitted by the ISC agencies during the audit period. While some of these rejections could have been for legitimate reasons, our analysis found that **more than 40 percent** of the total rejected bills were for an **"error unknown"**. DHS **could not explain** the reasons for the unknown errors. Further, the Division of Developmental Disabilities (DDD), the Division charged with oversight of the ISC agencies, **does not regularly review** the rejected billing data and **does not have complete access** to all rejected billings.

ISC activities are solely paid from the General Revenue Fund (GRF). The specific GRF appropriation utilized for ISC payments was *for grants and administrative expenses for Community-Based Services for Persons with Developmental Disabilities and for Intermediate Care Facilities for the Developmentally Disabled and Alternative Community Programs.* During the audit period, FY21 through FY23, this Fund contained approximately $4.7 billion. Only a very small portion of the GRF, approximately $133 million, was used to support ISC agency services.

Change in Funding Structure

During FY18 and FY19, ISC agencies received four separate payments for the services each provided:

- Individual Service and Support Advocacy (ISSA);
- General Service Coordination;
- Pre-Admission Screenings; and
- Bogard Service Coordination.

Beginning in FY20, DHS changed how the ISC agencies were funded. DHS said the funding process changed between FY19 and FY20 due to the ISC Notice of Funding Opportunity (NOFO) and the ISC program being turned into a grant under GATA. ISC agencies began receiving two payments:

- ISSA supported by the Medicaid Waiver and paid as a fee-for-service; and
- All other ISC activities submitted monthly via grant invoices for reimbursement.

Exhibit 7 shows ISC payments from FY18 through FY23. For the purposes of comparison with FY20 through FY23, we combined the four separate payments in each of FY18 and FY19 into two payments. DHS said, *"…DDD determined the*

ISC regions ahead of the NOFO in FY19 and thus, used each region and the population within that region, along with the proposal from each region's awardee, to determine the funding/final budget for that region." DHS' explanation for the change in how the funding was determined in FY20 could be a reason for the percentage drop from FY19 to FY20 as shown in the Exhibit.

Exhibit 7
ISC AGENCY PAYMENTS
FY18-FY23

Fiscal Year	Individual Service and Support Advocacy – Medicaid Waiver	All Other ISC Services – Grant Funded [1]	Totals	% Change from Prior Year
2018	$24,840,220	$12,617,208	$37,457,428	-
2019	$25,600,025	$13,534,911	$39,134,936	4.5%
2020	$25,581,673	$11,833,560	$37,415,234	-4.4%
2021	$28,529,730	$12,608,562	$41,138,292	10.0%
2022	$29,593,457	$12,996,591	$42,590,048	3.5%
2023	$35,501,407	$14,214,163	$49,715,570	16.7%

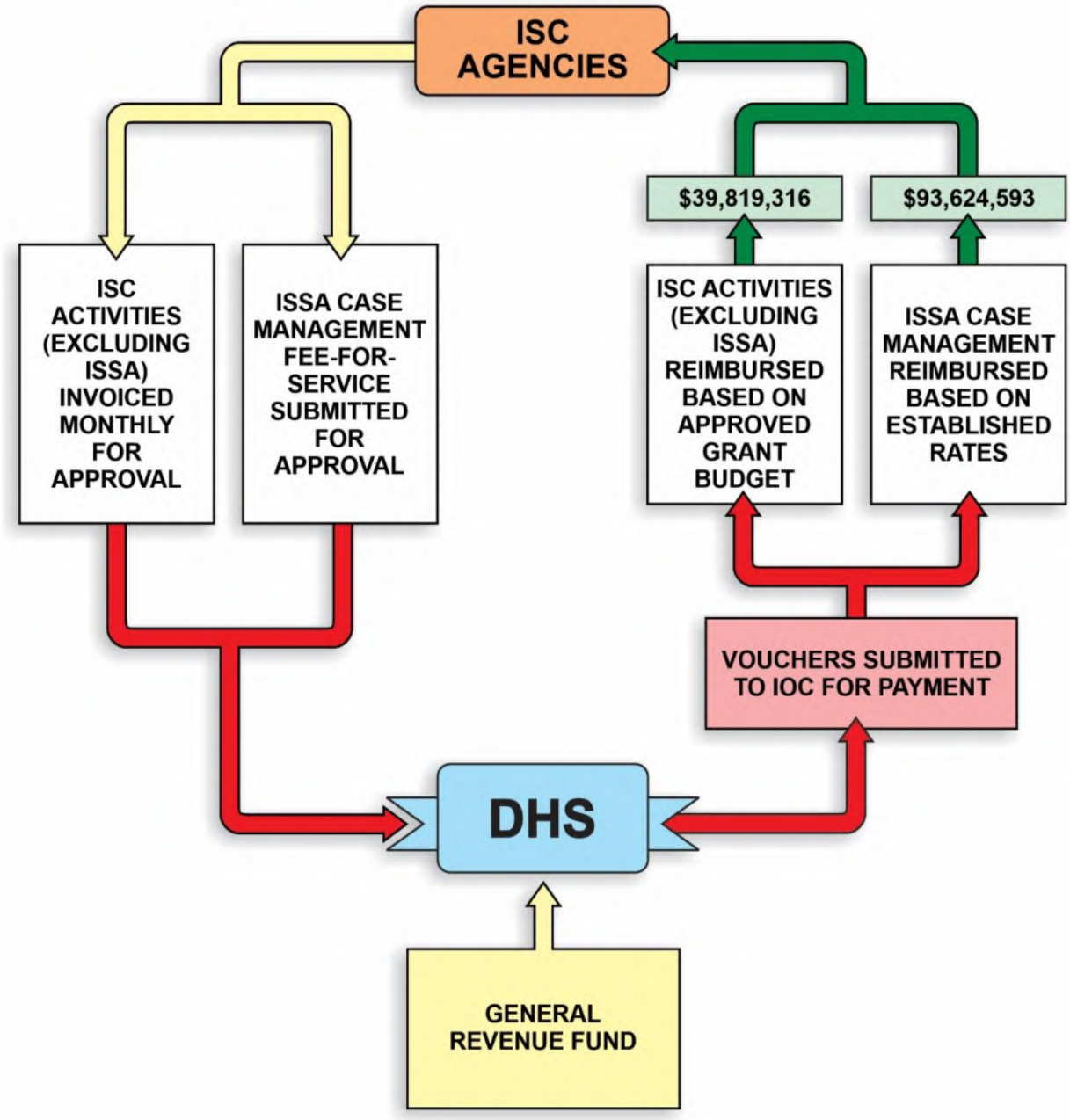
Note: [1] Prior to FY20, ISC agencies received four separate payments for the following: Individual Service and Support Advocacy (ISSA), general ISC services, Pre-Admission Screenings (PAS), and Bogard Service Coordination. Beginning in FY20, ISC agencies received 2 payments: ISSA and all other ISC services combined.

Source: OAG developed from DHS ISC payment information.

Flow of Funds

ISC agencies bill for services in two ways. The first way is by reporting the ISSA case-management fee-for-service bills by individual through the Reporting of Community Services (ROCS) System. ROCS communicates information to the DHS accounting system and generates vouchers that are submitted to the Illinois Office of the Comptroller (IOC) for payment to the ISC agencies. The second way is by submitting monthly grant invoices for prior months' costs on all other ISC activities via invoice to DDD for approval. These costs are billed against the approved ISC agencies' grant budgets for payment at the IOC. Exhibit 8 contains a flow chart of ISC funding.

Exhibit 8
FLOW OF FUNDING FOR ISC SERVICES
FY21-FY23



Source: OAG developed from DHS information.

Grant Budgets

Each fiscal year the ISC agencies submit grant budgets to DHS. The largest ISC required activity, Individual Service and Support Advocacy (ISSA), supported by the Medicaid Waiver, is captured in the Grant Exclusive Line Item of the budget.

All other ISC agency activities are captured in the grant budget line items and submitted to DHS for approval. Examples of these budgeted line items include but are not limited to: personnel, fringe benefits, travel, and supplies.

Individual Service and Support Advocacy (ISSA)

DHS determines the budget amount for ISSA for each of the regions. This amount is based on a **DHS calculation** of the number of **anticipated** Waiver participants multiplied by the **assumed** average number of annual hours multiplied by an ISSA rate. DHS stated that the number of anticipated Waiver participants is based on prior year participation plus additional persons expected to enter the Medicaid Waiver in the current fiscal year. Exhibit 9 shows the ISSA average hours beginning in FY19, and Exhibit 10 shows the ISSA hourly billing rates also beginning in FY19.

Exhibit 9
ISSA AVERAGE HOURS
FY19-FY23

FY	Average Hours - Adult	Average Hours - Youth
FY19	25	28
FY20	26	28
FY21	26	28
FY22	26	28
FY23	32	32

Source: OAG developed from DHS documentation.

Exhibit 10
ISSA HOURLY BILLING RATE
FY19-FY23

Effective Date	Billing Rate	% Change
07/01/18	$44.49	
07/01/19	$46.34	4.16%
07/01/20	$48.95	5.63%
01/01/21	$50.26	2.68%
01/01/23	$51.27	2.01%

Source: OAG developed from DHS documentation.

ISSA services are a "fixed-rate grant," whereby the billings are limited to the maximum budget total. ISC agencies receive payment for all billings as long as the billings do not exceed the grant amount. Once the grant exclusive line item budget amount is met, ISC agency billings are rejected.

Formula Analysis

During the audit period, DHS **had not analyzed** the ISSA formula to determine whether the formula is sufficient to cover actual ISSA costs, **has excluded** ISC services from any external reviews, and **has not addressed** any of the recommendations from external reviews involving aspects of the ISC program. ISSA funding provided to the ISC agencies represents a significant amount of overall ISC agency funding and was approximately 70 percent of the overall funding the ISC agencies received during FY21 through FY23.

ISC agencies are required to provide ISSA services, also known as case management, to those individuals enrolled in the Waiver program. These services are not optional and may not be refused. A case manager at an ISC agency must possess the Qualified Intellectual Disability Professional (QIDP) credential in order to provide such ISSA services.

External Reviews

DHS has been the subject of at least two recent comprehensive reviews for individuals with developmental disabilities. The first report was issued in November 2019 by the Rates Oversight Committee that serves in an advisory capacity to DHS' DDD. "Services" was one focus of the first review. One **key finding** was, *"Rates must accurately address non-staffing program support components…to ensure adequacy of reimbursement. Committee chairs include ISC services in this category and agree that the current allocation of ISC resources is **inadequate** to fulfill the critical functions they are assigned."* [Emphasis added.]

DHS contracted with Guidehouse (Navigant) for the second review. The purpose of this work was to develop **new rate methodologies** and make recommendations for **all services** involving individuals in residential settings. The results of the review were presented in a final report dated November 2020 entitled, "Developmental Disability Services Rate Study." However, the DDD Director at the time **chose to exclude ISC services** from the Study. DHS offered **no further explanation**.

Despite the exclusion of the ISC agencies, significant recommendations applicable to the ISC agencies were made, including:

- adoption of a standard for wages; and
- separate service rates for the "Chicago Area."

The Study also offered future considerations on the impact on Waiver service limitations, **but again ISC agencies were excluded:** *"The Division will need to review current service limitations for any services that establish annual payment ceilings or other expenditures caps based on a maximum annual budget rather than allowed services units."*

We asked DHS if it had analyzed whether the ISSA formula used to develop the grant exclusive budget line item is sufficient to cover costs. DHS said, *"During the period of the Grant Program, there has been **no analysis** of the ISSA formula completed."* [Emphasis added.]

DHS excluded the ISC agencies from three rate increases for DDD Waiver programs that occurred during the audit period. DDD did provide increases to the ISSA hourly billing rate as shown in Exhibit 10, but it is unclear how the rate increases were determined or if those rates were competitive with the rates applied to the other DDD Waiver programs.

We asked DHS if certain ISC agencies are eligible for regional adjustments. DHS said no, regional adjustments are not being considered for the ISC agencies at this time. We further asked why developmental disability programs, such as the regional day service providers, are eligible for the regional adjustments, but the ISC agencies are not eligible. **DHS did not provide an explanation**.

We asked each of the ISC agencies for any overall concerns with the ISC program. Six of the eight ISC agencies mentioned funding concerns for the ISC

program. Exhibit 11 shows specific funding comments made by three of the ISC agencies.

Exhibit 11
ISC AGENCY FUNDING CONCERNS

ISC Agency	Response
Community Alternatives Unlimited	• ISC agencies receive the same reimbursement per hour for the ISSA services even though DDD pays a regional rate for the Intermediate Care Facilities for Persons with Intellectual and/or Developmental Disabilities and residential and day Waiver services. • Providers have a high entry salary for the QIDP certification. • There is a need for an ISSA rate that keeps up with the cost of living.
Southern Illinois Case Coordination Services Inc.	• There is difficulty obtaining qualified ISC case managers because the case managers must have a QIDP certification, a certification also desired by provider agencies. The starting salaries at the provider agencies exceed starting salaries at the ISC agencies.
Central Illinois Service Access, Inc.	• DHS' assumed ISSA hours are insufficient. The assumed ISSA hours do not average out as designed: – 20 percent of the caseload is considered "low need" and does not utilize the allotted hours; – 40 percent of the caseload need all allotted hours; and – 40 percent of the caseload needs more than the allotted hours. The average hours do not work out, and services are provided but not paid.

Source: OAG developed from ISC agency responses to questions.

Per the Community Services Act (405 ILCS 30/2(c)), DHS is required to include case coordination services as part of its community services system. The Act (405 ILCS 30/4(e)) also establishes that the funding methodologies must reflect economic factors in providing services and supports, including considerations for geographic differences and required staffing ratios. It appears the intent of the statute was to include ISC agencies in any funding methodologies.

The DHS DDD Waiver Manual also includes a provision that DHS establish and approve Waiver activity and service rates and allows for increases subject to available funding. This provision would include ISC agency activities.

The eight ISC agencies received a combined $93.6 million of the $133.4 million in total payments for Waiver services during FY21 through FY23. The majority of the ISC agencies also reported being 100 percent State funded.

Absent a formal review of the ISSA formula, DHS cannot determine if the amounts paid to the ISC agencies for such services are sufficient to cover actual ISC agency ISSA costs in support of the ISC program. Additionally, when DHS applies rate increases and institutes regional adjustments to certain aspects of the developmentally disabled programs but excludes ISC agencies, it creates unfair competition and pay within the working environment of the developmentally disabled community.

The "Developmental Disability Service Rate Study" is dated November 2020, and to date, nearly four years later, DHS has still not fully addressed the recommendations that were made. When DHS receives a comprehensive review, DHS should address the recommendations and considerations made as a result of the review.

ISSA Formula Analysis

RECOMMENDATION NUMBER	
1	***DHS should regularly and systematically review the ISSA formula utilized to fund the case-management services provided by the ISC agencies.***

DHS Response:

IDHS accepts the recommendation. On an annual basis, IDHS now completes a review of the formula used to develop the funding for ISSA services to determine the change in the funding amount. As part of the formula, IDHS uses the same data inputs for personnel as used for the waiver service rates. The ISSA rate reflects the same wage rate for QIDPs and other administrative functions as are included in the waiver service rates, consistent with the Guidehouse Rate Study. IDHS will continue to review the formula used for the ISSA and the grant funded services.

IDHS-DDD has created the Bureau of Grant Programs Management to further expand oversight, review, and support for ISCs as they fulfill their contracted obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants. In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and bi-weekly meetings to ensure activities are implemented appropriately and consistently.

Grant Award Amounts

During the audit period, grant **award** amounts to the eight ISC agencies covering 12 regions totaled approximately $143.7 million. Two ISC agencies, Service and Prairieland, were each awarded three regions. From FY22 to FY23, ISC agencies received an overall 22.4 percent increase in the total amount of awarded grant funds. This increase was primarily the result of additional responsibilities required of each of the ISC agencies in FY23. Exhibit 12 shows the ISC grant award amounts during the audit period, FY21 through FY23.

Exhibit 12
ISC AGENCY GRANT AWARD AMOUNTS
FY21-FY23

ISC	FY21	FY22	FY23	Totals
Service, Inc. *Region A*	$3,294,286	$3,429,170	$4,298,566	$11,022,022
Community Alternatives Unlimited *Region B*	$9,335,184	$9,483,178	$11,668,841	$30,487,203
Community Service Options, Inc. *Region C*	$4,096,897	$4,486,603	$5,310,111	$13,893,611
Suburban Access, Inc. *Region D*	$5,479,777	$5,504,178	$7,019,144	$18,003,099
Service, Inc. *Region E*	$4,239,337	$4,366,104	$5,354,788	$13,960,229
Service, Inc. *Region F*	$3,323,144	$3,423,220	$4,292,301	$11,038,665
Prairieland Service Coordination, Inc. *Region G*	$2,101,236	$2,172,246	$2,622,290	$6,895,772
Champaign County Regional Planning Commission *Region H*	$2,834,339	$3,048,316	$3,584,687	$9,467,342
Central Illinois Service Access, Inc. *Region I*	$2,143,335	$2,234,415	$2,666,942	$7,044,692
Prairieland Service Coordination, Inc. *Region J*	$1,512,028	$1,636,350	$1,973,804	$5,122,182
Prairieland Service Coordination, Inc. *Region K*	$1,988,710	$1,959,572	$2,369,607	$6,317,889
Southern Illinois Case Coordination Services, Inc. *Region L*	$3,081,953	$3,340,567	$4,033,818	$10,456,338
Totals	$43,430,226	$45,083,919	$55,194,899	$143,709,044

Source: OAG developed from ISC funding information.

ISC Agency Payment Amounts

For the period FY21 through FY23, the State **expended** $133.4 million on ISC services, $10.3 million less than was awarded. Exhibit 13 shows a comparison of the ISC grant award and payment amounts by fiscal year. The fiscal year with the most unclaimed grant funds was FY23. In addition, we found:

- Only one ISC agency, CISA, claimed its entire budgeted ISSA amount for case-management services to Waiver individuals.
- None of the seven ISC agencies covering the remaining 11 regions claimed the entire approved amounts.

- The range of difference between grant award and payment for those 11 regions was $11,452 to $1,681,784.
- Four ISC agencies had more than $800,000 in unclaimed ISSA funding.

Exhibit 13
COMPARISON OF ISC AGENCY GRANT AWARD AMOUNTS TO ACTUAL PAYMENTS
FY21-FY23

	FY21	FY22	FY23	Total
ISSA Case Management				
Award amount	$30,099,724	$31,645,405	$40,729,825	$102,474,954
Actual payment	$28,529,730	$29,593,457	$35,501,407	$93,624,594
Difference:	***$1,569,994***	***$2,051,948***	***$5,228,421***	***$8,850,360***
All Other ISC Activities				
Award amount	$13,330,502	$13,438,512	$14,465,074	$41,234,088
Actual payment	$12,608,562	$12,996,591	$14,214,163	$39,819,316
Difference:	***$721,940***	***$441,921***	***$250,911***	***$1,414,772***

Source: OAG developed from DHS ISC agency payment information.

As previously discussed, ISC agencies reported the ISSA rate and hours are not sufficient to cover actual costs. Yet, Exhibit 13 shows that not all of the awarded ISSA funds were claimed by the ISC agencies. It is not entirely clear why the ISC agencies are not claiming all awarded funding, especially ISSA Waiver funding.

We asked DHS why the ISC agencies did not claim the full amounts awarded in any of the fiscal years. DHS said, *"Grant funding is paid based on expenditures reported/submitted. Some of the drop could be attributable to COVID and the slowdown in the number of individuals entering into services or changing services. During this time, the ISCs weren't completing in person visits…so travel and other expenses would be reduced as well."*

We note that according to the Waiver billing data, the number of individuals billed for case-management services through the Waiver programs by the ISC agencies **steadily increased** during the audit period and did not *"slow down"* as suggested by DHS. Additionally, despite DHS' claim that the visits were conducted virtually, visits were only virtual in FY21, the one fiscal year during the audit period with the least amount of unclaimed funding. In FY22, visits returned to in person, and FY23 was the fiscal year during the audit period with the greatest amount of unclaimed funding.

Rejected Billings

DHS rejected **more than $1.7 million** in ISSA billings submitted by the ISC agencies during the audit period for Waiver services. While some of these billings may have been rejected for legitimate reasons, DHS was not aware and

could not explain 41 percent of the total rejections, which were for an **"error unknown."**

During the audit, we reached out to one ISC agency, CISA, about the ISSA billing process. CISA, like other ISC agencies expressed funding concerns with the ISC program; however, CISA was the only ISC agency to claim its entire budgeted ISSA grant amounts in all three fiscal years of the audit period. CISA referenced rejected billings as a possible reason why ISC agencies are not claiming the full grant amounts.

We requested and received from DHS all of the fee-for-service rejection codes and descriptions. The complete listing contained a total of 103 different rejection codes. During FY21 through FY23, ISC agency Waiver billings were rejected for 21 different reasons. (See Exhibit 14 for the error codes and descriptions.)

Exhibit 14
REJECTED BILLING CODES AND REASONS

Code	Reason For Rejection
2A	Bill Date after Current Date
36	Invalid Units Value - Check Amounts and Resubmit
39	Invalid Charge Amount
43	Lapse Period Expired: Adding/Changing Bills Not Allowed
55	No ROCS Case Opening Found for Individual
56	All Fee-For-Service Programs are Terminated for Social Security Number (SSN)
61	Name Mismatch with Department of Public Aid (DPA) Medicaid
6A	Person is Bogard in Nursing Facility (NF), Program Not Authorized
6H	Person is in State-Operated Facility, Program Not Authorized
6P	Individual is in the Aging Community Waiver
6Q	Individual is in Department of Rehabilitation Services (DRS) Waiver Program
6R	Individual is in the Division of Specialized Care for Children (DSCC) Waiver
6S	Individual is in the Supportive Living Waiver
75	No Fee-For-Service Programs Ever Authorized for SSN
7A	Individual SSN Not Authorized for this Program
7B	Bill Includes Dates before or after Authorized Dates
95	Individual Not Enrolled in Medicaid
96	Recipient Identification Number (RIN) Lacking or Incorrect in ROCS
97	Individual Does Not Need Active Treatment
98	Active Treatment Field is Blank or Service Date Is before Active Treatment Effective Date
9D	Ineligible Type Of Medicaid Enrollment – Contact ISC

Source: OAG developed from information provided by DHS.

We requested and received from DHS information on rejected billings for ISSA. Rejected ISC agency Waiver billings totaled over $1.7 million during the audit period, FY21 through FY23. This data included the total amount and total count

of rejected billings by fiscal year, region, and error code/description. As shown in Exhibit 15, there were also a number of bills that rejected for *"error unknown."*

Exhibit 15
DHS REJECTED BILLING AMOUNTS BY FISCAL YEAR
FY21-FY23

Reason	FY21	FY22	FY23	Total
Rejection Codes [1]	$469,550	$272,149	$276,004	$1,017,703
Error unknown	$257,143	$245,212	$206,102	$708,457
Total [2]	**$726,693**	**$517,362**	**$482,106**	**$1,726,160**

Note: [1] The amounts for the rejection codes are the total of all rejection codes cited during each fiscal year.

Note: [2] The FY22 total does not add due to rounding.

Source: OAG developed from information provided by DHS.

Based on our review of the rejected billing data, we found **41 percent**, or $708,457 of the total $1,726,160, of all rejected bills to be for an ***"error unknown."*** Error unknown was the reason most often cited. The following are the next top three rejection codes and the percentage of the total of all rejections:

- 7A: Individual Social Security Number not authorized for this program (16 percent);
- 56: All fee-for-service programs are terminated for Social Security Number (14 percent); and
- 7B: Bill includes dates before or after authorized dates (10 percent).

We inquired about the unknown errors. DHS offered the following information about rejected billings:

- ISC agencies utilized the ROCS system for individual billings; "Mobius" reports run from ROCS and provide ISC agencies with the rejected bills and reasons.
- The onus of correcting rejected billings is on the ISC agencies.
- DDD can assist ISC agencies with correcting billings but only has access on a case-by-case basis.
- The Department of Information and Technology (DoIT) was responsible for pulling the rejected billing data from an old mainframe computer system.
- The rejected billing data provided is not necessarily non-duplicated.
- DDD does not regularly review the rejected billing data.

DHS mentioned concern about the data being potentially inflated because of duplicated billings. DHS explained that the ROCS system will only accept **one bill per person on the same day** for all services for that person. DHS suggested that any duplicate Social Security Number for the same day in the data would most likely represent a rebilling for a previously rejected bill. Based on that

explanation, we analyzed the billing data and eliminated any additional billings for the same individual on the same day. We found a few duplicate billings, but the overall result was **insignificant**. We shared the results with DHS. DHS acknowledged that rejected billings could be one, but not the only, reason for the disparity between the budgeted and actual amounts.

The Community Services Act (Act) (405 ILCS 30/1-3) requires DHS to facilitate and establish a service system for individuals with a developmental disability, among others. One of the areas in this service system is case coordination. In order to achieve the intent of the Act, DHS is responsible for planning and quality assurance. The Fiscal Control and Internal Auditing Act (FCIAA) (30 ILCS 10/3001(1)) also requires that DHS shall establish and maintain a system, or systems, of internal fiscal and administrative controls, which provide assurance that resources are utilized efficiently and effectively.

Absent a review and analysis of the rejected billings, DHS cannot determine if the rejection reasons are appropriate or if ISC agency funding for case coordination services is inappropriately denied. When a significant amount of rejected billings are for an unknown reason, ISC agencies may be inappropriately denied funding for services.

Review and Analysis of Rejected Billings

RECOMMENDATION NUMBER 2	***DHS should regularly analyze the rejected billings and ensure the reasons for rejection are appropriate. Additionally, DHS should specifically review billings rejected for an unknown error and facilitate any needed corrections.***

DHS Response:

IDHS accepts this recommendation. IDHS's website identifies commonly received rejection codes and steps the ISCs can take to self-correct. If an ISC agency is unable to correct the reason for the rejection, they are instructed to contact DDD personnel to assist. On a quarterly basis, the DDD Waiver Unit receives a file containing all currently rejected billings, so that they can review and attempt to correct the reason for the rejections. During the audit period, IDHS was experiencing a high volume of claims rejections due to claim and warrant data issues resulting from the implementation of SAP. DDD worked with staff from the Department of Innovation and Technology (DoIT) to develop a correction which was implemented in January 2024.

ISC Program

DHS entered into grant agreements with the eight ISC agencies during each year of the audit period. Each grant agreement outlines the areas of ISC agency responsibility. The responsibilities outlined in the agreements for FY21 and FY22 were generally consistent. In FY23, however, DHS increased the responsibilities of the ISC agencies. Exhibit 16 lists the areas of ISC agency responsibility during FY21 through FY23; each area is explained in more detail in the following sections.

Exhibit 16
GRANT AGREEMENT DELIVERABLES
FY21-FY23

Deliverable	FY21	FY22	FY23
Initial Eligibility and Linkage	X	X	X
Prioritization of Urgency of Need for Services (PUNS)	X	X	X
Pre-Admission Screening (PAS)	X	X	X
Individual Service and Support Advocacy (ISSA) [1]	X	X	X
State-Operated Developmental Center (SODC) Transition Support [1]	X	X	X
Bogard Modified Consent Decree	X	X	X
Americans with Disabilities Act (ADA)/Olmstead Outreach			X
Housing Navigator			X

Note: [1] Individual Service and Support Advocacy and SODC transition activities were included in the agreements for all fiscal years of the audit period; however, in FY23 the required ISSA visits increased from two to four and more responsibilities for SODC transition support were added.

Source: OAG developed from ISC grant agreements.

Initial Eligibility and Linkage

Upon request from an individual or guardian for developmental disability services for anyone 18 years old or older, ISC agencies must complete an initial screening to determine whether there is a reasonable basis to suspect a developmental disability or mental illness and if so, to make the appropriate referrals for a full assessment of the need for services. Following the initial screening, ISC agencies are then responsible for reviewing service options with the individual, as well as referring the individual to the appropriate interim service options should the person choose to be added to the Prioritization of Urgency of Need for Services (PUNS) database.

Prioritization of Urgency of Need for Services (PUNS)

ISC agencies are required to maintain the PUNS list for Waiver services. PUNS is a database of individuals who want or need Waiver services. ISC agencies are responsible for both the initial enrollment, as well as the annual update of information. The PUNS database uses two categories to define the individuals wanting or needing services:

- Seeking Services – Individuals who currently need or desire some supports; or
- Planning for Services – Individuals who do not currently want or need support but may sometime in the future.

As funding becomes available, selections are made from the "Seeking Services" category based on a person's cumulative length of time in the "Seeking Services" category.

Pre-Admission Screening (PAS)

PAS is for individuals seeking services where a developmental disability is suspected. The ISC is responsible for all initial activities, including, but not limited to:

- determining service eligibility;
- making referrals to providers;
- conducting the discovery and personal planning processes;
- submitting funding packets; and
- monitoring the transition of individuals for the four weeks following the start of Waiver services.

Individual Service and Support Advocacy (ISSA)

ISSA is defined as service coordination or case management to persons who are enrolled in a Home and Community-Based Service Waiver. ISC responsibilities include, but are not limited to:

- participation in the discovery tool and personal plan;
- conducting monitoring visits;
- conducting annual redeterminations; and
- reporting allegations of abuse, neglect, and exploitation.

Discovery Tool and Personal Plan

Person-centered planning is the process used to balance choice and services planning for individuals funded through the Waiver programs. The ISC agencies have two main responsibilities in person-centered planning: completion of the discovery process and tool and completion of the personal plan. The discovery process **gathers information** about an individual's interests, preferences, and abilities. The personal plan outlines the **delivery of services**. ISC agencies conduct the discovery and personal planning processes **initially and at least annually**.

Monitoring Visits

ISC agencies are responsible for monitoring the implementation of the personal plan, as well as ensuring the health, safety, and welfare of individuals receiving developmental disability services. In FY21 and FY22, the required number of

monitoring visits was two. In FY23, the required number of visits increased to four. In all three fiscal years of the audit period, one of the required visits was to update the discovery tool and personal plan and the other visit(s) were to assess the outcomes and services provided to the individual and to ensure the health, safety, and welfare of the individual.

ISC agencies are also required to conduct **additional monitoring visits** when there is a **significant issue or emergency**. Examples of situations which may require additional visits include: police involvement; investigative finding of egregious neglect, abuse and/or, financial exploitation; status after hospitalization; and significant medical issues, among others.

Redeterminations

ISC agencies are required to conduct annual redeterminations on all individuals assigned to their region. A redetermination is defined as the process of reassessing a person's eligibility for Medicaid benefits or participation in Waiver services. ISC agencies are required to conduct this redetermination at least annually for continuing eligibility of services in the Waivers.

Reports of Allegations

ISC agencies have the responsibility to report any allegations or observations of abuse, neglect, and financial exploitation according to DDD guidelines.

State-Operated Developmental Center (SODC) Transition Support

ISC agencies continue to have responsibilities to individuals transitioning from an SODC. ISC agencies are required to conduct post-transition visits when an individual transitions from an SODC to a community-based setting. However, during the audit period, the expectations increased to support individuals throughout the transition process rather than just post-transition.

According to DHS, beginning sometime in FY22 and ongoing, ISC agencies having at least one SODC in their assigned region received $60,000 per SODC to hire an additional staff person to handle the transitions. While there is no specific line item in the grant budgets reflective of this additional funding, DHS provided a summary of the additional $360,000 it provided in SODC transition-support funding. Exhibit 17 shows the ISC agencies and regions receiving the additional funding and the respective SODC located in the region.

Exhibit 17
SODC TRANSITION FUNDING
FY23

ISC	Total Funding	SODC [1]
Region A – Service, Inc.	$60,000	Mabley
Region B – Community Alternatives Unlimited	$60,000	Kiley
Region C – Community Service Options, Inc.	$0	-
Region D – Suburban Access, Inc.	$60,000	Ludeman
Region E – Service, Inc.	$0	-
Region F – Service, Inc.	$60,000	Shapiro
Region G – Prairieland Service Coordination, Inc.	$0	-
Region H – Champaign County Regional Planning Commission	$0	-
Region I – Central Illinois Service Access, Inc.	$0	-
Region J – Prairieland Service Coordination, Inc.	$0	-
Region K – Prairieland Service Coordination, Inc.	$0	-
Region L – Southern Illinois Case Coordination Services, Inc.	$120,000	Murray & Choate
Total	**$360,000**	

Note: [1] Fox is also an SODC; however, there were only two transitions from Fox during the audit period, and neither transition required ISC agency involvement.

Source: OAG developed from DHS information.

Bogard Modified Consent Decree

DHS is required to follow the Bogard Modified Consent Decree signed July 25, 2000, for individuals identified as Bogard-class members. Bogard-class members are defined by the Decree as *"all persons 18, years of age or older, with developmental disabilities, who on or after March 23, 1986, resided in an Intermediate Care Facility or Skilled Nursing Facility in Illinois as a Medicaid recipient for a period of more than 120 days in the aggregate. No person first admitted to an Intermediate Care Facility or a Skilled Nursing Facility on or after April 1, 1994, can be a member of the class."*

Class members are designated by DDD. The responsibilities of ISC agencies to Bogard-class members vary depending on membership in an approved Medicaid Waiver. Members in an approved Medicaid Waiver receive ISSA or case-management services. The Bogard section outlined in the grant agreements is specific to class members in a **non-Waiver** setting. The main difference is the members in the non-Waiver setting receive **monthly** service-coordination visits; whereas, Bogard-class members in a Waiver setting follow ISSA (two visits in FY21 and FY22 and four visits in FY23).

Americans with Disabilities Act (ADA)/Olmstead Outreach

New for FY23, ISC agencies were responsible for conducting **outreach** to ensure individuals who reside in Intermediate Care Facilities for Individuals with

Exhibit 18
ADA/OLMSTEAD OUTREACH FUNDING
FY23

ISC	Total Funding
Central Illinois Service Access, Inc.	$26,763
Champaign County Regional Planning Commission	$19,375
Community Alternatives Unlimited	$81,799
Community Service Options	$4,900
Prairieland Service Coordination, Inc.[1]	$44,028
Service, Inc.[1]	$93,635
Southern Illinois Case Coordination Services, Inc.	$52,170
Suburban Access, Inc.	$45,686
Total	**$368,356**

Note: [1] We combined the funding for each of the three regions served by Service, Inc. and by Prairieland Service Coordination, Inc.

Source: OAG developed from DHS information.

Developmental Disabilities (ICF/DD) and SODCs are aware of community-based services and other living options and the process for access and making informed decisions. According to DHS, the outreach funds were based on the distribution of residents in ICF/DD facilities per ISC region. DHS said in FY23, there were 3,526 residents in ICF/DD facilities and funding was based on the hourly ISSA rate and an average number of hours per resident in each region.

According to DHS, it provided a total of **$368,356** to the eight ISC agencies participating in the ADA/Olmstead Outreach in FY23, based on an assumed outreach rates of 1.5 hours per person. There is no specific line item in the FY23 grant budgets reflective of this additional funding. DHS provided a summary of the additional funding it provided for ADA/Olmstead Outreach. Exhibit 18 shows a breakdown in funds.

Housing Navigator

Also new for FY23 was the Housing Navigator program. This program was a joint pilot program between DHS and the Illinois Council on Developmental Disabilities for FY23 and FY24. The purpose of this program is to help individuals with developmental disabilities find housing options in Illinois communities. In order to qualify for the program, the individual must have Medicaid Waiver services or be selected from the PUNS list. It is the responsibility of the ISC agencies to work with the housing navigators to help individuals with developmental disabilities **identify and apply** for housing options that are landlord-based and individuals will have a lease. According to DHS, the funding amounts by region were based on the population of individuals on the PUNS list and in Waiver services.

We asked DHS if each ISC agency utilized the funding provided by the Housing Navigator program to hire a caseworker to locate and secure supportive housing for those interested individuals. DHS stated that seven out of eight ISC agencies in 11 of the 12 regions were funded. DHS provided a total of **$360,000** to the seven ISC agencies participating in the Housing Navigator Pilot program in FY23, designed to fund a housing navigator for each ISC. Exhibit 19 shows a summary of the Housing Navigator program funding and the number of individuals the ISC agencies reported as securing housing.

Exhibit 19
HOUSING NAVIGATOR PROGRAM SUMMARY
FY23

ISC	Total Funding	Secured Housing
Central Illinois Service Access, Inc.	$30,000	0
Champaign County Regional Planning Commission	$30,000	0
Community Alternatives Unlimited	$60,000	10
Community Service Options	$60,000	5
Prairieland Service Coordination, Inc.[1]	$60,000	14
Service, Inc.[1]	$60,000	4
Southern Illinois Case Coordination Services, Inc.	$0	N/A
Suburban Access, Inc.	$60,000	0
Total	**$360,000**	**33**

Note: [1] We combined the funding and individuals securing housing for each of the three regions served by Service, Inc. and by Prairieland Service Coordination, Inc.

Source: OAG developed from DHS information.

Examination of ISC Caseloads

DHS **does not have** a set required minimum or maximum ISC case manager ratio and **does not track** this ratio information. During the audit, two ISC agencies said each of their ratios for case-management services was approximately 70 individuals per case manager. ISC agencies also referenced studies suggesting the ratio should be around 45 individuals per case manager in order to provide all of the required ISC services.

DHS **could not provide** the addresses for the entire population of individuals served by ISC agencies. As a result, we reviewed ISC agency coverage on a sample basis. During testing, we found that DHS **did not adhere** to the ISC Manual and utilized an **unwritten** policy to allow an individual to choose an ISC agency outside of the individual's assigned region. DHS **could not provide** any additional documentation to support its decision. Allowing an individual to choose an ISC agency outside of the assigned region is neither allowed by policy nor fair to individuals who would otherwise select a different ISC agency.

House Resolution Number 66 asked us to examine caseloads by ISC to determine whether ISC agencies are providing coverage based on agreements with the State.

The ISC agency grant agreements **do not include** any requirements related to caseloads. DHS **does not track** the number of case managers employed by the ISC agencies. Case managers oversee the individuals receiving Waiver services.

We reviewed caseloads in two ways:

- We reviewed caseloads in terms of the number of individuals served by a case manager at a given time; and
- We reviewed a sample of individuals and determined if each individual was receiving case-management services based on their assigned region.

Caseload

DHS defines caseload as the number of individuals in need of case management being served by a single caseworker at a given time. Case management is provided by ISC agencies through Individual Service and Support Advocacy (ISSA). During the audit period, case management accounted for approximately 70 percent of the total funds received by the ISC agencies.

ISC agencies also provide services to individuals other than those receiving case-management services through the Waivers. While case-management services accounted for approximately 70 percent of ISC agency funding during FY21 through FY23, ISC agencies also provided services to individuals who were not part of a Waiver program. These services were included as part of the approximately 30 percent of funding ISC agencies received during the audit period. Individuals served by ISC agencies but not included in case management through the Waivers include those receiving independent service coordination, pre-admission screenings, and Bogard non-Waiver services. These individuals are not counted in the caseload ratios previously discussed.

Exhibit 20 presents the count by region of all individuals receiving Waiver services during at least one month of each of the fiscal years. As shown in the Exhibit, Service, Inc., was the ISC agency providing case management to the most individuals in each of the fiscal years. In total, Service, Inc. provided services through the Waivers to 6,205 individuals, or nearly 25 percent of all individuals receiving case management through a Waiver in FY23.

Exhibit 20
WAIVER PARTICIPATION BY REGION
FY21-FY23

Region	FY21	FY22	FY23
Region A – Service, Inc.	1,817	1,893	1,932
Region B – Community Alternatives Unlimited	4,975	5,069	5,126
Region C – Community Service Options	1,866	1,981	1,992
Region D – Suburban Access, Inc.	3,436	3,573	3,607
Region E – Service, Inc.	2,070	2,188	2,281
Region F – Service, Inc.	1,883	1,942	1,992
Region G – Prairieland Service Coordination, Inc.	1,188	1,199	1,201
Region H – Champaign County Regional Planning Commission	1,562	1,579	1,555
Region I – Central Illinois Service Access, Inc.	1,206	1,196	1,199
Region J – Prairieland Service Coordination, Inc.	949	957	986
Region K – Prairieland Service Coordination, Inc.	1,015	1,042	1,084
Region L – Southern Illinois Case Coordination Services, Inc.	1,958	1,936	1,955
Totals	23,925	24,555	24,910

Source: OAG developed from DHS Waiver billing data.

Case Manager Ratio

ISC agencies were unable to provide consistent caseload information. ISC agency caseloads were continually changing. ISC agencies reported the following factors during the audit period, which affected caseloads:

- increasing crises;
- PUNS selections;
- staff turnover;
- inability to hire case managers; and
- increased monitoring visits.

The additional need for case-management services and the inability of ISC agencies to replace and hire additional case managers increased the caseloads on the existing case managers.

Another factor contributing to the change in caseloads was the increase in the number of billable hours reflective of the additional responsibilities placed on the ISC agencies in FY23. In response to the questions we asked of the ISC agencies, seven out of eight ISC agencies reported **not being able to meet** all contractual obligations either during COVID and/or for FY23.

We asked ISC agencies how each covered the required visits and other requirements despite being understaffed. The ISC agencies offered the following responses for handling staffing shortages:

- case managers working overtime;
- program coordinators taking on additional cases;
- reassigned caseloads to other case managers; and
- incentivizing overtime with additional pay.

Two ISC agencies specifically commented on **ideal** case manager to individual ratios. One ISC agency, CAU, stated, *"Caseloads should be 44-46 person/Case Manager based on various time studies conducted."* We received a similar response from another ISC. Another ISC agency, CISA, said in order for caseloads to be manageable, clients to be kept safe and healthy, and to meet all of the expectations of DHS' DDD, the caseload ratio needs to be 40-45.

Exhibit 21 has other ISC agency comments regarding caseloads. This Exhibit includes two ISC agencies having reported that caseloads increased to approximately 70 individuals per case manager during the audit period.

Exhibit 21
ISC AGENCY CASELOAD COMMENTS

ISC Agency	Response
Champaign County Regional Planning Commission	• Pre-pandemic caseloads were around 50-55 but increased to 65-70.
Community Service Options	• Caseloads per case manager increase by 10 during the pandemic.
Community Alternatives Unlimited	• Current caseloads are exceedingly high, 60-80 individuals per case manager. • The number of required site visits doubled at a time when staff shortages were the highest in their history.

Source: OAG developed from ISC responses to questions.

DHS stated there is not a situation where an ISC agency's caseload is full; however, DHS said they are aware that the caseload sizes vary across ISC agencies. DHS also stated that there is no situation in which an ISC would send an individual seeking services to another ISC agency, and the ISC will always serve a person in its region if that individual needs help seeking service and supports.

The Community Services Act (405 ILCS 30/2(c)) requires DHS to include case coordination services as part of its community services system. The Act (405

ILCS 30/4(e)) also establishes that funding methodologies must include staffing ratios among other factors. It appears that the intent of the statute is to include ISC agencies in any funding methodologies.

We asked DHS if there is a specific requirement on the ratio of case manager to individuals. DHS said no, neither the original Notice of Funding Opportunity (NOFO) for ISC agency changes effective for FY20 nor any of the ongoing grant agreements with the ISC agencies contain such a requirement, and there is no Division-set caseload requirement. While the NOFO and the grant agreements do not contain a caseload requirement, the Community Services Act does contain such a requirement related to funding methodologies.

Absent requiring a staffing ratio, DHS cannot include this statutorily required factor in its funding methodology, which should be considered when setting the ISSA rate, the rate at which ISC agencies are ultimately reimbursed for case-management services.

Case Manager Ratio

RECOMMENDATION NUMBER 3	***DHS should set case manager ratios and should track ISC case manager information to ensure all grant-required activities can reasonably be conducted.***

DHS Response:

IDHS accepts the recommendation. IDHS allows ISCs to determine individual caseload mixes which results in some variation in caseloads based on need. For FY25, IDHS reimburses ISCs for an average ISSA caseload of 51. In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. Additionally, IDHS-DDD increased QIDP rates in the FY25 ISC grant agreements to be consistent with QIDPs providing waiver services to address concerns around hiring. The IDHS-DDD Bureau of Grant Programs Management is focused on expanding oversight, review, and support for ISCs as they fulfill obligations.

Unwritten Policy for ISC Agency Selection

DHS utilized an unwritten policy to allow an individual to choose an ISC agency outside of the assigned region.

- DHS could not provide the addresses for the entire population of individuals served by ISC agencies. As a result, we reviewed ISC agency coverage on a sample basis. Results of this sample analysis cannot and should not be projected to the total population.
- Of the individuals sampled, we found one of 90 individuals who was receiving services by an ISC agency other than the one assigned to its region.

- The individual's residence was in McHenry County based on the address in the file. McHenry County is in Region A, which is overseen by Service. However, CAU in Region B is the ISC agency overseeing this individual.
- We questioned this as part of our testing exceptions. DHS stated that a parent of the individual receiving services requested that CAU provide services to that child.

According to the ISC Manual, the ISC agency located in the geographic area (region) in which the individual resides is the designated ISC agency for that individual. The ISC Manual does not provide for exceptions to this policy.

We asked DHS if the individual was indeed served by an ISC agency other than the one that was assigned to the region in which the individual resided. In response, DHS stated, *"DHS does not currently allow this process, but previously it did. There was an informal policy to allow moves to different ISCs and/or retention of an ISC even if an individual moved regions prior to 2021. This policy was not in writing."*

DHS said DDD has approved requests for changes to ISC agencies for case management as the result of a disagreement or conflict, but there is an expectation on the ISC agency and individual to go through the conflict resolution process described in the ISC Manual.

We reviewed the conflict resolution process described in the ISC Manual and note that this process does not clearly outline individual and ISC agency conflict; rather, the focus is on individual and provider agency conflict. Additionally, DHS **did not provide** evidence that the conflict resolution process was used for the individual in the sample.

We note that this instance occurred during FY21, which was after the date DHS referenced for the informal policy allowing ISC agency changes. **We also note that we requested the DHS approval documentation specific to the individual in our sample. DHS did not provide such documentation.** It is unclear whether the request was approved based on an unresolved conflict or if it was approved based on personal preference.

Allowing a certain individual to choose an ISC agency outside of the assigned region is not allowed by policy and is not fair to individuals who would otherwise select a different ISC agency.

Unwritten Policy for ISC Agency Selection

RECOMMENDATION NUMBER 4

DHS should follow the ISC Manual and require each individual to only be served by the ISC agency assigned to the specific region of residence. If DHS decides to allow exceptions to the Manual, those exceptions should be included in a written policy and documented in individual case files.

DHS Response:

IDHS accepts the recommendation. Although IDHS recognizes this occurred for one individual in the auditor's sample, IDHS currently does not allow exceptions and will update the ISC Manual by December 31, 2024.

ISC Agency Documentation and Reporting Allegations

ISC agencies are statutorily required to be mandated reporters of allegations of suspected abuse, neglect, and financial exploitation. However, DHS **does not know** and **does not track** if ISC agencies are statutorily meeting the requirement to report all allegations to the four oversight entities: DHS' Office of Inspector General (OIG), Adult Protective Services (APS) within the Department on Aging, the Department of Children and Family Services (DCFS), and the Department of Public Health (DPH). During testing, we **did not find** any instances of noncompliance by the ISC agencies with the mandated reporting requirement.

DHS **does not regularly share** allegation information with the ISC agencies. In our sample of 75 individuals receiving Waiver services, we identified 41 instances of allegations of abuse, neglect, or financial exploitation from OIG and APS data. We found that ISC agencies had no documentation to support awareness of a known OIG or APS allegation in 30 out of the 41 instances. DHS stated that neither DHS nor anyone else is required to inform the ISC agency of an allegation or share the results of an investigation. Yet ISC agencies are required to conduct additional monitoring visits to ensure the health, safety, and welfare of an individual. ISC agencies cannot conduct additional visits if the information is not known.

House Resolution Number 66 asked us to examine whether ISC agencies maintain documentation and report allegations of suspected abuse, neglect, and financial exploitation to the appropriate oversight entity.

Oversight Entities

ISC agencies are statutorily required to be **mandated reporters** of allegations or observations of abuse, neglect, or financial exploitation specifically to four oversight entities:

- DHS Office of the Inspector General (OIG)
  - DHS Act (20 ILCS 1305/1-17(k)(1));
- Adult Protective Services (APS) within the Department on Aging
  - APS Act (320 ILCS 20/(f-5)(1.5));
- Department of Children and Family Services (DCFS)
  - Child Abuse and Neglect Reporting Act (325 ILCS 5/4(c)(1)); and
- Department of Public Health (DPH)
  - Abused and Neglected Long Term Care Facility Residents Reporting Act (210 ILCS 30/4).

While ISC agencies are mandated reporters of allegation information, anyone can report alleged instances of abuse, neglect, and financial exploitation.

DHS Office of the Inspector General (OIG)

Office of the Inspector General
- Community Integrated Living Arrangements
- Community Day Services

Allegations of suspected abuse, neglect, and financial exploitation for individuals residing in **Community Integrated Living Arrangements** or incidents occurring at **Community Day Services** are to be reported to the OIG. The OIG does not have authority to investigate potential abuse in private homes by family, friends, or a personal-support worker hired directly by a person or family and not employed by an agency. These instances are reportable to Adult Protective Services.

As part of this audit, we did not review the OIG's compliance with the Department of Human Services Act specific to the Inspector General and its requirements to investigate allegations of abuse or neglect. This was reviewed as part of the OIG Program Audit conducted pursuant to 20 ILCS 1305/1-17(w).

We did, however, utilize the database of OIG investigations received by the Office of the Auditor General as part of that audit. This was used as one source for the judgmental selection of individuals sampled for Waiver testing.

Adult Protective Services (APS)

Adult Protective Services
- Adult Home-Based Supports

APS is a program within the Illinois Department on Aging that investigates abuse, neglect, and financial exploitation of adults age 18-59 with disabilities living in the community. Allegations of suspected abuse, neglect, and financial exploitation for individuals enrolled in the **Adult Home-Based Support Services Program** are to be reported to APS. APS is responsible for allegations of abuse, neglect, and financial exploitation of individuals, regardless of where they live, by someone other than an employee of a State-operated facility or community agency. Instances occurring at a State-operated facility or community agency are reportable to the OIG.

APS utilizes a process whereby a Notice of Investigation is forwarded to the DDD if an allegation related to a developmentally disabled individual is received by APS. We requested and received the Notices of Investigation for developmentally disabled individuals sent by APS to DDD for the audit period, FY21 through FY23. The results of the data included 394 intakes for 324 individuals. This data included any notices that were reported by an ISC agency; however, the data does not specifically include the name of the person who reported the incident.

We used this data as one source for the judgmental selection of individuals sampled for Waiver testing.

Department of Children and Family Services (DCFS)

Allegations of suspected abuse, neglect, and financial exploitation for individuals residing in a **Child Group Home** or participating in a **Children's Home-Based Support Services Program** are reportable to DCFS.

Department of Children and Family Services
- Child Group Home
- Children's Home-Based Support Services Program

DCFS does not specifically maintain allegation information on developmentally disabled individuals. DCFS said the names of each developmentally disabled individual would have to be provided, and DCFS would then have to individually search for the names to determine if there was an allegation.

DCFS said that if allegation information is reported by the ISC agency, the assigned investigator is required to make contact with the ISC agency and confirm the information provided.

The judgmental sample selection for Waiver testing included individuals included in the children's Waivers.

Department of Public Health (DPH)

Allegations of suspected abuse, neglect, and financial exploitation for individuals residing in an **Intermediate Care Facility** or a **Community Living Facility** are reportable to DPH.

DHS stated there are no federal or State case-management expectations unless the individual in the Intermediate Care Facility setting has the **Bogard-class designation** or the individual resides in a Waiver-funded Community Living Facility.

Department of Public Health
- Intermediate Care Facility
- Community Living Facility

DHS confirmed that allegations of abuse or neglect at an Intermediate Care Facility and at a Community Living Facility are to be submitted to DPH, as the licensing body. DHS also stated that allegations can be submitted to DDD via the complaint processes and will be rerouted, or DDD will request the person alleging the abuse or neglect submit the allegation to DPH.

Similar to DCFS, if the allegation information is reported by the ISC agency, the ISC agency will be contacted for additional information during the course of the investigation, and the ISC agency will be notified of the outcome, once the investigation is complete. Otherwise, DPH said if the ISC agency is not the reporter, they do not have a mechanism to notify ISC agencies about complaints received for developmentally disabled individuals.

During the judgmental sample section for Waiver testing, we did not specifically focus on ensuring the sample included individuals residing in an Intermediate Care Facility or Community Living Facility. In FY23, the number of individuals residing in these settings represents less than 100 of the overall approximately 25,000 individuals receiving Waiver services. Additionally, we separately tested a sample of individuals with the Bogard-class designation not receiving Waiver services. The results of this testing are reported in the next section.

Entities Receiving Allegations

We analyzed the individuals receiving Waiver and Bogard-class designation services to determine the count of individuals reportable to each oversight entity. As described above, each of these entities is responsible for receiving allegations related to a certain subset of the developmentally-disabled population. Each individual has an assigned client-type designation based on the setting in which the individual resides. Exhibit 22 shows the number of individuals by client type and which entity would receive an allegation, if an allegation was made. As shown in the Exhibit, OIG and APS were the reportable entities for **95 percent** of all individuals in FY23.

Exhibit 22
SUMMARY OF OVERSIGHT ENTITIES
FY23

Oversight Entity	Client Type Reportable to Entity [2]	Count of Individuals
Office of the Inspector General	C – CILA D – Day Program S – SODC Community Day Service	12,417
Adult Protective Services	H – Adult Home Based Supports	11,236
Department of Children and Family Services	G – Children's Home Based Supports R – Children's Residential Waiver	967
Department of Public Health [1]	B – Bogard	63

Note: [1] The Bogard data is reported for the month of June 2023, not all of FY23 like the other entities. The Bogard data for June 2023 totaled 402 individuals. During June 2023, there were 63 individuals living in an ICF/DD arrangement reportable to DPH. The remaining 339 individuals were either receiving Waiver services and captured with another oversight entity or were classified with specialized services or other residence. These 339 individuals are not included in the Exhibit.

Note: [2] The Waiver billing data also included 290 individuals with a client type of purchase of service. This client type is not specific to a single entity. It includes the following arrangements: Community Living Facilities (DPH), Child Care Institutions (DCFS), special-home placements (APS) and supported-living arrangements (DPH). These 290 individuals are not included in the Exhibit.

Source: OAG developed from DHS Waiver billing data and Bogard data.

ISC Agencies as Mandated Reporters

The ISC Manual outlines the responsibilities of ISC agencies as mandated reporters of abuse, neglect, and financial exploitation. The ISC agency grant agreements require the ISC agencies to report any allegations of abuse, neglect, and financial exploitation via DDD guidelines and regulations. We asked DHS if there is a centralized location for ISC agencies to report allegations and how DHS knows if all allegations were reported. DHS said ISC agencies **may** utilize DDD's complaint process for reporting an allegation. However, DHS **did not report** having a centralized location for capturing allegation information reported by the ISC agencies.

ISC Agencies as Witnesses

ISC agencies are often not in situations to firsthand witness reportable allegations of abuse, neglect, and financial exploitation. In FY21 and FY22, ISC agencies were only required to conduct two monitoring visits per year, and during FY21, those visits were conducted virtually due to the pandemic. In FY23, ISC agencies were required to conduct four visits.

We asked each of the eight ISC agencies about their experiences witnessing reportable allegations. The eight ISC agencies generally said that if each is going to witness a reportable allegation, it is during one of the monitoring visits. One ISC agency also mentioned the possibility of witnessing an event while on the premises of the home or day program visiting another individual. Another ISC agency said that, theoretically, the ISC agency could overhear an incident of abuse over the phone or as part of a string of emails or texts.

ISC Agency Tracking of Allegations

We asked the eight ISC agencies about the allegations each reported during the audit period. ISC agencies did not always comprehensively capture this information nor were they required to do so. See Exhibit 23 for the ISC agencies' responses.

Exhibit 23
ISC AGENCY REPORTING OF ALLEGATIONS
FY21-FY23

ISC [1]	Response
Community Alternatives Unlimited	• 299 allegations reported to all entities combined
Service, Inc.	• Reported firsthand account of incidents is at most 1 out of 100 • 90-95 percent of all reporting is to the OIG or APS • 5-10 percent of reporting is to DCFS • DPH reporting is not easily tracked
Champaign County Regional Planning Commission	• 112 allegations reported to all entities combined • 77 percent were reported to the ISC by guardians, providers, or hospitals • 23 percent were reported to the ISC directly by individual or witnessed by an employee of the ISC agency

Note: [1] One ISC, Central Illinois Service Access, Inc., did not comment, and four others, Community Service Options, Inc., Prairieland Service Coordination, Inc., Southern Illinois Case Coordination Services, Inc., and Suburban Access, Inc., responded they do not collectively track the information on reported allegations.

Source: OAG developed from ISC agency responses to allegation questions.

Additional ISC Agency Monitoring

As part of this section, we also examined whether ISC agencies are conducting the **follow-up** visits to ensure the health, safety, and welfare of individuals.

The ISC agency grant agreements require ISC agencies to conduct follow-up monitoring visits that are **in addition** to the required monitoring visits and may be

necessary to ensure the health, safety, and welfare of an individual. The ISC Manual outlines situations where an ISC agency, *"should complete an additional face to face visit to address the specific circumstance…Documentation should include confirmation that the events related to the circumstance no longer present a risk to the individual."* The list of circumstances found within the ISC Manual includes, but is not limited to, investigative findings of egregious neglect, abuse, and/or exploitation and other situations, which create concerns related to health, well-being, and service provision.

But, according to DHS, neither DHS nor anyone else is required to inform the ISC agency of an allegation or share the results of an investigation. However, DHS says they follow **best practices**.

According to DHS, ISC agency case managers are more involved in the follow-up and corrective action planning for individuals specifically receiving Adult Home Based Services whose allegations are reportable to APS because APS does not conduct this function. However, DHS did say, that ISC agencies follow **best practices** and conduct follow-up on all allegations reported to the OIG, DPH, and DCFS, as needed, even though it is not required in the grant agreements.

We asked the ISC agencies about best practices. ISC agencies generally reported regularly receiving information from APS. Two ISC agencies specifically confirmed that they do not regularly receive referrals or notices of investigations related to any of the other entities.

Again, we note, according to DHS, no one is required to notify the ISC agency of any allegations or results of an investigation. **ISC agencies cannot conduct follow-up if they are not informed that an allegation was reported or that the results of an investigation were finalized.**

Sampling

We judgmentally sampled 75 individuals receiving Waiver services during FY21 through FY23. This sample was used to test two areas related to allegations:

- to determine if the monitoring notes contained information that should have been reported to the appropriate oversight entity; and
- to determine if the ISC agency case files contained evidence to support that the ISC agency was aware and conducted follow-up on allegations to ensure the health, safety, and welfare of an individual.

The judgmental selection of 75 individuals included those with known OIG and APS reported allegations. Individuals could not specifically be sampled for involvement with DCFS and DPH because there was a lack of available information. We did, however, specifically include individuals reportable to DCFS in the sample of 75 and were mindful of any allegation information in those case files.

We also reviewed a separate sample of 15 individuals with the Bogard-class designation during FY21 through FY23. The oversight entity for those individuals is DPH. We were mindful of any allegation information in those case

files as well. During testing, we reviewed **all individuals** in the samples for allegation related information.

The entirety of all testing we conducted and the results can be found in the next section on Oversight and Monitoring.

Testing Results

The **ISSA Monitoring Form** utilized by ISC agencies during their visits includes a specific question regarding abuse, neglect, and financial exploitation. Question eight on the form states, *"There is an indication the person is free from abuse, neglect and exploitation."* ISC agencies have the option to check *'Yes,' 'No,' or 'N/A'* and provide any narrative. The form also includes a section for general observations, comments, and unusual circumstances. ISC agencies can also utilize this section to document any related findings. The **Interpretive Guidelines** with the form tell ISC agencies how to facilitate conversation with the individual and/or guardian. (See Appendix C for a template of the ISSA Monitoring Form and Interpretive Guidelines.)

During testing of the 75 individuals, we used the ISSA monitoring forms to make a determination whether the ISC agency knew of an allegation but did not report it. We **did not find** any evidence in any of the individual sample cases where the documentation maintained by the ISC agency contained information that should have been reported as an allegation.

With regard to ISC **awareness of OIG and/or APS allegations**, we judgmentally selected and included sample cases based on allegations we found in the OIG and APS data. Based on the OIG and APS data, 41 of the 75 individuals in our sample had related allegations. We reviewed the case files for each and found that ISC agencies had no documentation to support knowledge of the allegation in 73 percent, or 30 of 41 cases. Specifically:

- For 8 of 10 individuals in FY21, ISC agencies had **no documentation to support knowledge** of OIG or APS activity. For 2 of 10 individuals, there was support for ISC knowledge of such activity.
- For 16 of 21 individuals in FY22, ISC agencies had **no documentation to support knowledge** of OIG or APS activity. For 5 of 21 individuals, there was support for ISC knowledge of such activity.
- For 6 of 10 individuals in FY23, ISC agencies had **no documentation to support knowledge** of OIG or APS activity. For 4 of 10 individuals, there was support for ISC knowledge of such activity.

During testing of the 15 Bogard-class individuals, we used the monthly monitoring summary documents and any available case notes to make a determination whether the ISC agency knew of an allegation but did not report it. We **did not find** any evidence in any of the sample cases where the documentation maintained by the ISC agency contained information that should have been reported as an allegation. The case files also did not support ISC agencies knowing of allegations and not conducting additional follow-up visits.

We asked the following of DHS:

- How does DHS know if the ISC agencies are reporting all allegations?
- Why does DHS not have a comprehensive system to track information on the allegations that are reported?
- How can DHS expect the ISC agencies to conduct additional visits to ensure health, safety, and welfare if no one is required to share information with the ISC agencies?
- Why is DHS not sharing the information with the ISC agencies in all cases?

In summary, DHS reported, *"The Division is **allowed to collaborate** with ISCs…if it is deemed beneficial for the ISC to be involved…If the Division determines it would be advantageous for the ISC to conduct follow up the designated staff member shares the OIG case with the ISC."* [Emphasis added.] DHS also reported that it, *"cannot speak to IDPH and DCFS"* regarding why allegations are not shared with the ISC agencies.

ISC agencies should have knowledge of such allegations in all cases in order to comply with the grant agreements by ensuring the health, safety and welfare of all individuals, as required. As the oversight entity to the ISC agencies, DHS should ensure DPH and DCFS are sharing the information not only with the ISC agencies but also DHS.

Absent a system requiring DHS notification when allegations are reported to the mandated reporting entities and information sharing with the ISC agencies, DHS cannot ensure ISC agencies are conducting the additional monitoring, as required. Further, when allegation-related information is not shared with the ISC agencies, the ISC agencies **cannot** ensure the health, safety, and welfare of the DD individuals, which they oversee. When the allegation information is not shared with DHS, DHS cannot monitor the ISC agencies to ensure the necessary follow-up is being conducted to ensure the health, safety, and welfare of the individuals.

Allegations – Sharing of Information	
RECOMMENDATION NUMBER 5	***DHS should ensure all allegations reported to oversight entities (including the DHS Office of the Inspector General, Adult Protective Services, the Department of Children and Family Services, and the Department of Public Health) for developmentally disabled individuals are maintained by DHS and shared with the respective ISC agencies.***

DHS Response:

IDHS accepts the recommendation. IDHS will share any such allegations, if reasonably feasible, that it receives. IDHS-DDD receives APS allegations and provides those to ISCs. IDHS-DDD will speak with the OIG regarding the feasibility of providing OIG-related allegations to the ISCs.

Critical Incident Reporting and Analysis System (CIRAS)

DDD utilizes CIRAS to capture electronic reports from providers and ISC agencies for critical incidents involving individuals with developmental disabilities in the State's Medicaid Waiver programs. CIRAS is not a reporting system for alleged incidents of abuse, neglect, and financial exploitation. The purposes of CIRAS are to:

- inform ISC agencies of potential issues involving participants;
- ensure incidents are addressed appropriately; and
- enhance overall system quality.

As part of this audit, we did not review any reporting by ISC agencies to CIRAS or any required follow-up conducted by the ISC agencies. This was reviewed as part of the Performance Audit of Department of Human Services' Oversight and Monitoring of the Community Integrated Living Arrangement Program, which was conducted pursuant to LAC Resolution 164.

We did, however, utilize the CIRAS database as one source for the judgmental selection of individuals for Waiver testing. The purpose of using CIRAS information in the judgmental selection of individuals was to ensure that ISC agencies did not incorrectly report allegation information.

Oversight and Monitoring

DHS **failed** to adequately oversee and monitor the ISC program. While DHS conducts a number of ISC agency reviews, we found **overlapping** Waiver-focused reviews and **limited coordination** with the Division of Developmental Disabilities (DDD).

DDD **has not updated** the ISC Manual to reflect the number of required Waiver visits found in the FY23 grant agreements. Additionally, DDD not updated the ISC Manual or the grant agreements to reflect the proper program codes, a pre-COVID pandemic change that went into effect more than five years ago.

DHS **did not always enforce** the 95 percent timely annual PUNS update requirement. Our review of the audit period found four out of eight ISC agencies were out of compliance in at least three quarters in FY21. The percentage range of overdue PUNS updates during that fiscal year was 5.1 percent to 27.2 percent. There was additional noncompliance found in FY22 and FY23 as well.

DHS also **did not always enforce** the 95 percent timely annual redetermination requirement. Our review of the audit period found two ISC agencies did not meet the performance standard in any of the 11 quarters reviewed. In total, at the end of FY23, 10.8 percent (2,385 of 22,098) of the individuals requiring an annual redetermination were overdue.

DHS **failed to ensure** ISC agencies were completing all required ISSA monitoring visits and **failed to ensure** ISC agencies were conducting all required annual discovery and personal plan processes. During testing, we found missing or not timely discovery tool or personal plan updates in at least one fiscal year for 33 of 75 individuals sampled, and on average, only 86 percent of the required monitoring visits were conducted.

DHS **did not always** have an accurate listing of active Bogard-class individuals and **did not ensure** ISC agencies were providing all required services to those individuals. During testing, we found 2 out of 15 individuals sampled had passed away based on documentation in the case files, yet those individuals remained on DHS' Bogard-class designation listing for months after their deaths. We also found 99 of 440, or 22.5 percent, of the required monthly visits for the 15 individuals in the sample **were not conducted** as required.

DHS **did not monitor** the Americans with Disabilities Act (ADA)/Olmstead Outreach and Housing Navigator pilot programs. These programs were new for FY23 and provided a total of $725,000 in funding. DHS **failed** to request grant funds back from one ISC, CCRPC, that received more than $49,000 in funding for both programs, yet **admittedly** did not conduct any of the required activities for either program. DHS **did not** readily have ADA/Olmstead Outreach program data available; rather, it had to compile the information when requested. We found DHS **did not include** outreach data on three ISC agencies covering five regions, **did not know** the total number of residents entitled to receive outreach, **could not explain** a number of reported entries, and **did not follow up** with the ISC agencies to ensure the outreach occurred. We reviewed Housing Navigator program information and found three out of eight ISC agencies **did not secure housing** for a single individual. We also found ISC agencies **did not always** provide complete information on the required deliverables to DHS and **did not always** conduct the training, presentations, and meetings as required.

DHS **did not require** the ISC agencies to comply with SODC transition activities as required by the ISC agency grant agreements. DHS **does not have** clear and consistent guidance on requirements for SODC transitions. During testing, we found DHS **lacked evidence** of ISC agency attendance at required pre-transition meetings and **lacked evidence** to support all post-transition visits were conducted as required. This included 2 of 11 individuals in our sample who received zero post-transition visits.

House Resolution Number 66 asked us to examine the oversight and monitoring of ISC agencies by DHS ensuring that the ISC agencies comply with statutory, regulatory, and contractual requirements, including site visits and inspection of records and premises.

DDD is the Division charged with oversight and monitoring of the ISC agencies. However, ISC agencies are reviewed by a number of entities within DDD and external to DDD. We found **overlapping** Waiver-focused reviews and **limited coordination** with DDD. Additionally, the ISC agencies utilize two main IT systems, Birdseye and ROCS, for reporting purposes and for requesting funds. A third system, Mobius, was also utilized for review of certain ISC agency areas. DDD had **limited access** to this information, information that could have been helpful for oversight and monitoring of the ISC agencies.

Grant Management Unit

It is the primary responsibility of the Grant Management Unit to provide monitoring and oversight to the ISC agencies based on **all** activities in the grant agreements. The ISC agencies are required by the grant agreements to submit quarterly performance and fiscal reports to the Grant Management Unit.

We requested all quarterly performance and fiscal reports and in response, received approximately 2,500 files from DHS. We note that the 2,500 files are not user-friendly. The files contain multiple spreadsheets and PDFs for each quarter, and the file titles and formats are inconsistent. We asked DHS what is done with these reports. DHS stated, *"The Grant Management Unit reviews the reporting for **completeness and appropriateness** to the scope of the grant. The report is returned to the provider if there are issues with data or incomplete data."* [Emphasis added.]

We further questioned DHS about "completeness and appropriateness." In response, DHS stated, *"…the Grant Management Unit is ensuring there are responses to all required deliverables…there is **not a process whereby the reports are reviewed** for individual level data nor is follow-up completed by the Grant Management Unit."* [Emphasis added.]

DHS provided a **tracking log** to support the receipt of quarterly reports; however, DHS noted that the spreadsheet does not include FY23 Quarter 2 because the Unit was understaffed and dealing with FY23 Quarter 1 issues. DHS said the reports are saved in a respective file for each grantee under each grant. While the ISC agencies submitted quarterly reports as required by the grant agreements, DHS did not review them in detail. DHS said that DDD began creating a grants program bureau in FY22 with the intent of reviewing grantee reporting and

conducting follow-up, but the first employee of the bureau was not hired until FY23.

Other Waiver-Focused Reviews

In addition to the Grant Management Unit, there are at least three other entities that conduct formal reviews actively focused on the Waiver services (ISSA) provided by the ISC agencies. These reviews are conducted on a sample basis. These three entities are:

- **Bureau of Quality Management** (BQM) within DDD;
- **Quality Improvement Organization** (QIO), Public Consulting Group, contracted by the Department of Healthcare and Family Services; and
- **Ligas Court Monitor and the University of Illinois at Chicago** to conduct the Ligas review.

Bureau of Quality Management Reviews

BQM monitors the ISC agencies at least annually through the use of a sample of individual records to determine compliance with the Waivers. The BQM review includes: **PUNS, Pre-Admission Screenings, Discovery Tools and Personal Plans, individual rights and monitoring visits, and documentation.** Based on the results of the review, BQM notifies the ISC agencies of any deficiencies; ISC agencies submit plans of correction; and BQM then approves such plans.

We asked about any modifications to the review process as a result of COVID. DHS stated the reviews went remote in FY21 and continued through FY23. DHS said ISC agencies submitted the sample information electronically for review by BQM.

We requested and received from BQM the populations and samples of individuals reviewed during the audit period. Exhibit 24 shows the Waiver population and sample sizes. Based on a sample size of 400 in each of FY21 through FY23, less than 2 percent of the population in the Adult Waiver received any form of review. For FY21 through FY23, the percentage of the population reviewed in each of the Children's Support Waiver and the Children's Residential Waiver was approximately 30 percent and 70 percent, respectively.

Exhibit 24
BUREAU OF QUALITY MANAGEMENT REVIEWS
FY21-FY23

Waiver	FY21	FY22	FY23
Adult Waiver			
Population Size	21,609	21,919	22,376
Sample Size Calculation	378	378	378
Actual FY Sample Size	***400***	***400***	***400***
Children's Support Waiver			
Population Size	1,050	970	888
Sample Size Calculation	282	276	269
Actual FY Sample Size	***282***	***276***	***269***
Children's Residential Waiver			
Population Size	200	184	159
Sample Size Calculation	132	125	113
Actual FY Sample Size	***132***	***125***	***113***

Source: OAG developed from BQM data.

During the audit period, individuals overseen by all ISC agencies were included as part of each of the annual BQM samples. We generally reviewed the results of the BQM reviews and note that BQM found issues with personal plans, discovery tools, personal plan meetings, monitoring visits, and redeterminations; these are all Waiver-required activities.

Quality Improvement Organization

The Department of Healthcare and Family Services, as the Medicaid Agency for the State of Illinois, contracted with an external Quality Improvement Organization, Public Consulting Group, in FY21 and FY22 with the purpose of ensuring compliance with the Waiver. Prairieland (Region K) was not part of the sample in either FY21 or FY22. The contract between HFS and Public Consulting Group expired for FY23, and there were no QIO reviews of the ISC agencies conducted in that fiscal year.

Public Consulting Group conducted the reviews on a sample basis for each ISC region in FY21 and FY22. The sample size in each of those fiscal years across all ISC agencies was **376**. These reviews focused on two Waiver-based performance measures:

- **person-centered plan meeting** occurred within 365 days from the previous person-centered plan; and
- Waiver participant had his/her **person-centered plan updated at least annually** or within 30 days of an identified change in needs.

Public Consulting Group cited noncompliance for those measures in each of the fiscal years reviewed. These Waiver based measures are also included in the

BQM and Ligas reviews. Additionally, ISC agencies have an ongoing responsibility to timely conduct person-centered plan meetings and update personal plans as required by the ISC agency grant agreements.

Ligas Review

A fairness hearing was held on June 15, 2011, for the *Ligas v. Hamos* lawsuit filed on July 28, 2005, and the result was a Court-approved Consent Decree to assist DDD in expanding its community-based system and to address the growing demand for services. The Court also approved a monitor to oversee the State's compliance with the Decree.

According to DHS' website, in FY21, plans of correction were developed and shared with the ISC agencies for the review process of 225 Ligas-class members that took place during FY19 and FY20. In FY22, follow-up was done to review changes made from the plans of correction. In FY23, a new review of 225 Ligas-class members was conducted.

An ISC agency provided auditors with the FY23 Ligas Compliance Review document request list. (See Exhibit 25 for the document request list.) The request list included the discovery tool, personal plan, monitoring notes, and individual rights. Some of these documents are also requested and reviewed by BQM and the QIO. ISC agencies also have an ongoing responsibility for each of these activities, as part of the ISC agency grant agreements.

Exhibit 25
FY23 LIGAS COMPLIANCE REVIEW

Count	Document Requested
1	Most recent Discovery Tool
2	Most recent Risk Assessment
3	Most recent Personal Plan
4	Implementation Strategies/Plans
5	Ligas Transition Plan
6	Crisis Transition Plan
7	ISC Monitoring Notes
8	Notes for all contact with family/guardian
9	Presentation of individual rights
10	Initial screening
11	OIG training documentation
12	ISC reports/notes of progress toward outcomes and any supporting documentation

Source: OAG developed from the Ligas Compliance Review document request list.

Office of Contract Administration Reviews

The Office of Contract Administration (OCA) conducted a **fiscal administrative review** on the eight ISC agencies during the audit period. The focus of these

reviews was on the fiscal and administrative policies, procedures, and records of the ISC agencies. Based on the findings, ISC agencies may be required to submit a corrective action plan for approval. Exhibit 26 shows a summary of the completed reviews during FY21 and FY22.

Exhibit 26
SUMMARY OF FISCAL ADMINISTRATIVE REVIEWS
FY21-FY22

ISC	Date of Review	Summary of Findings
Southern Illinois Case Coordination Services, Inc.	08/13/20	• Indirect cost miscalculation • Allocation plan methodology not documented • Missing written procedures • Segregation of fiscal responsibilities need improvement
Service, Inc.	02/02/21	• Missing fiscal policies and procedures • Stale bank checks
Community Service Options, Inc.	07/29/21	• Missing Board approval for previous and current fiscal year budgets • Missing policies and procedures • Stale bank checks/transactions
Central Illinois Service Access, Inc.	11/02/21	• Lack of administrative policies and procedures • Inadequate separation of duties
Community Alternatives Unlimited	12/15/21	• None
Prairieland Service Coordination, Inc.	12/15/21	• Questioned methodology for shared costs • Missing personnel conflict of interest statements • Lack of procurement policies
Suburban Access, Inc.	05/26/22	• Personal expenses claimed for ISC agency grant also claimed for the Paycheck Protection Program • Fringe Benefit expenses exceeded allowable amount for ISC agency grant • Internal control weaknesses in fiscal operations
Champaign County Regional Planning Commission	06/16/22	• No approval for budget line-item transfers

Source: OAG developed from OCA information.

Schedule of Reviews

As shown above, the ISC agencies are subjected to a **significant number** of reviews, which are **overlapping and not coordinated**. Many, but not all of the reviews are focused on Waiver services, which accounted for approximately 70 percent of the overall ISC agency funding during the audit period. Exhibit 27 shows an example of the schedule of reviews during the audit period for an ISC agency and the summary of each review. This schedule also includes the 12

quarterly performance and fiscal reports. Each of the quarterly performance and fiscal reports were to be provided to DHS no later than 15 days following the end of each quarter. This schedule **does not include the monthly reporting** required for fee-for-service reimbursement for individuals receiving case-management services by the ISC agency.

Exhibit 27
EXAMPLE OF REVIEWS AT AN ISC AGENCY
FY21-FY23

Date of Request or Review	Entity Reviewing	Summary of Review
08/13/20	OCA	Fiscal Administrative
10/15/20	DDD	FY21 Q1 Performance and Fiscal Reports
11/16/20	BQM	FY21 Review – 51 Individuals
01/15/21	DDD	FY21 Q2 Performance and Fiscal Reports
04/15/21	DDD	FY21 Q3 Performance and Fiscal Reports
05/10/21	HFS - QIO	FY21 Review – 40 Individuals
07/15/21	DDD	FY21 Q4 Performance and Fiscal Reports
08/23/21	BQM	FY22 Review – 37 Individuals
10/15/21	DDD	FY22 Q1 Performance and Fiscal Reports
01/15/22	DDD	FY22 Q2 Performance and Fiscal Reports
04/15/22	DDD	FY22 Q3 Performance and Fiscal Reports
04/18/22	HFS - QIO	FY22 Review – 31 Individuals
07/15/22	DDD	FY22 Q4 Performance and Fiscal Reports
09/19/22	BQM	FY23 Review – 39 Individuals
10/15/22	DDD	FY23 Q1 Performance and Fiscal Reports
11/11/22	Ligas	FY23 – 9 Individuals
12/06/22	Ligas	FY23 – 12 Individuals
01/05/23	Ligas	FY23 – 7 Individuals
01/15/23	DDD	FY23 Q2 Performance and Fiscal Reports
02/13/23	Ligas	FY23 – 12 Individuals
04/15/23	DDD	FY23 Q3 Performance and Fiscal Reports
07/15/23	DDD	FY23 Q4 Performance and Fiscal Reports

Source: OAG developed from ISC agency reviews.

IT Systems

We asked DHS about the IT systems utilized to input and track ISC agency grant deliverables. In addition to the quarterly performance and fiscal reports previously discussed, DHS included the following systems: Birdseye, ROCS, and Mobius.

Birdseye

Birdseye was created by DDD in conjunction with DoIT and Provisio Partners, a consultant and software development company. DHS described Birdseye as a **comprehensive system** to track and collect data on all individuals served by DDD. However, DHS stated that its side of the system is **not** comprehensive and is only utilized for receiving funding-packet requests. DHS stated the system is only comprehensive on the side of the ISC agencies.

ROCS/CRS

The Reporting of Community Services (ROCS) is a system used by the ISC agencies to bill for services. DHS said that DDD **does not have full access** to the ROCS system; only one staff member in DDD is allowed access to do billing for special cases, as needed. Again, DHS stated it does not have the same access as the ISC agencies. The Community Reporting System (CRS) is used to process the billings, received in ROCS, and it is overseen by DHS. CRS is another system to which DHS **does not have full access**.

Mobius

During the audit, we reviewed reports on overdue PUNS and overdue determinations. However, we note that there are ISC agencies included on the Mobius reports that have **not been in the ISC program** since July 2019. DHS also stated that Mobius only holds the prior month's reports; thus, at the time the reports were requested, DHS could not provide the reports prior to May 2023.

Additionally, DHS stated it also have reports through Mobius that show individual data by ISC agency for individuals for whom there have been no ISSA billings in the last six months. However, DHS stated there is **no one regularly monitoring** these reports.

Inconsistent and Inaccurate Guidance

DDD **has not updated** the ISC Manual or the grant agreements to reflect the number of required Waiver visits found in the FY23 grant agreements. Additionally, DDD **has not updated** the ISC Manual or the grant agreements to reflect the proper program codes, which was a pre-COVID pandemic change that went into effect more than five years ago.

During the audit, we found **inconsistent guidance** on the number of ISC agency required monitoring visits. The ISC Manual requires the ISC agencies to conduct a minimum of **two monitoring visits** annually for each individual in the Waiver program. This requirement was in effect and included in the ISC agency grant agreements for FY21 and FY22. However, in FY23, the requirement changed to require **four monitoring visits** annually. This requirement was changed in the FY23 grant agreements but was not updated in the ISC Manual.

During the audit, we found that **neither the ISC Manual nor the ISC agency grant agreements accurately reflected the proper program codes** used for billing by the ISC agencies.

Prior to the ISC program NOFO, ISC agencies billed for services in four different programs: Individual Service and Support Advocacy (ISSA), General Service Coordination, Pre-Admission Screenings, and Bogard Service Coordination. Effective beginning in FY20, ISC agencies billed for two services, ISSA and all other programs combined.

The purpose of the ISC Manual is to outline the policies and procedures to be followed by ISC agencies when performing their duties on behalf of DHS' DDD. ISC agencies have grant agreements with DDD specifically outlining each of the required duties. The guidance in these two documents **should be consistent.**

We asked DHS why the ISC Manual **has not been updated** with the correct number of required service-coordination visits. In response, DHS stated, *"…due to the COVID pandemic and the significant changing needs and requirements as a result of major administrative rules revisions, IDHS-DDD delayed the formal update of the ISC Manual that time.*"

When the ISC Manual does not accurately reflect the required number of monitoring visits, there is the potential that an ISC agency does not conduct the correct number of visits.

We also asked DHS why the ISC Manual has **not been updated** to accurately reflect ISC agency program codes. In response, DHS stated, *"the issues noted were due to challenges resulting from the COVID pandemic and the need to adjust operations in response to the pandemic by the Department and ISC Case Management entities."* We note that the program codes changed as a result of the ISC NOFO process and impacted the grant agreements effective July 1, 2019, which was prior to the COVID pandemic. Further, the program codes have still not been updated, and it has been more than five years since the change took effect.

When the grant agreements and the ISC Manual do not accurately reflect the proper program codes, there is the potential that an ISC agency can incorrectly bill for the services each provides.

ISC Manual	
RECOMMENDATION NUMBER 6	***DHS should update the ISC Manual and grant agreements to ensure accurate and consistent guidance is provided to the ISC agencies.***

DHS Response:

IDHS accepts the recommendation. The ISC manual update is being finalized by December 31, 2024. In addition to the ISC manual, IDHS-DDD staff meet regularly with the ISC leadership and hold one-on-one meetings with individual ISCs to address questions and concerns. Prior to a new grant agreement, IDHS-DDD staff works with ISCs to address questions related to their requirements, billing, grant agreements, and amendments.

DDD Monitoring of ISC Activities

DDD is charged with the primary oversight of the ISC agencies. The agreements dictate the required activities to be conducted by the ISC agencies. Waiver activities account for approximately 70 percent of the funding received by the ISC agencies. As previously mentioned, several of the reviews are focused on individuals receiving Waiver services. As such, the ISC agencies are reviewed on a sample basis specific to the Waiver services each provides. The other approximately 30 percent of the funding received by the ISC agencies is for activities generally not covered in the other reviews.

The Grant Management Unit, as previously referenced, is the Unit that receives the ISC agency reporting that should be used to monitor the ISC program. We reviewed the following areas of the grant agreements (described in the prior section on the ISC Program) to determine whether DDD monitored the ISC program and whether the ISC agencies are in compliance with the requirements found in the grant agreements.

Initial Eligibility, Linkage, and Pre-Admission Screening

DDD does not know exactly how much was paid or how many individuals were served by these areas of the ISC agency grant agreements. These areas are funded based on approved budgets within the ISC agency grant agreements but are combined with every other area of ISC agency responsibility with the exception of case-management services supported by the Waiver program.

The only source of information reported to DDD by the ISC agencies for these areas were the quarterly reports, which were not used for any meaningful purpose.

Prioritization of Urgency of Need for Services (PUNS)

PUNS is a Statewide database that registers individuals who want or need DDD Waiver services. As outlined in the ISC Manual and ISC agency grant agreements, it is the responsibility of the ISC agencies to complete the initial PUNS enrollment, and as well as an **annual update** on all persons awaiting

Waiver selection from the PUNS database. DHS set the performance standard for compliance with this grant deliverable at 95 percent of all PUNS annual updates completed.

During the audit period, DHS **did not always enforce** the 95 percent timely annual PUNS update requirement. Additionally, the Mobius reports utilized to assist with monitoring annual compliance included former ISC agencies, not in the ISC program since July 2019. We summarized the timeliness of the PUNS updates using the Overdue PUNS reports from Mobius. Exhibit 28 shows the percentage of overdue PUNS by ISC agency. The orange shading is used to represent any quarter an ISC agency was not compliant with the performance standard (any percentage over five).

Exhibit 28
OVERDUE PUNS SUMMARY
FY21-FY23

		ISC [1]							
		CCRPC	**CISA**	**CAU**	**CSO**	**Prairieland**	**Service**	**SICCS**	**Suburban Access**
FY21	**Q1**	4.6%	27.2%	1.4%	1.6%	5.7%	13.3%	6.7%	2.7%
	Q2	6.1%	23.2%	3.3%	1.2%	6.2%	12.9%	5.7%	3.6%
	Q3	3.8%	15.9%	1.0%	0.2%	5.5%	6.9%	5.1%	2.4%
	Q4	4.9%	1.0%	1.3%	1.6%	3.5%	4.9%	5.3%	0.4%
FY22	**Q1**	5.0%	1.4%	0.7%	2.1%	1.4%	3.8%	5.8%	0.4%
	Q2	2.8%	0.8%	0.7%	2.2%	1.5%	0.8%	2.0%	0.3%
	Q3	4.9%	1.4%	0.5%	3.1%	1.5%	1.1%	4.4%	1.1%
	Q4	4.9%	0.0%	2.0%	3.0%	1.2%	2.2%	6.8%	1.5%
FY23	**Q1**	4.3%	1.3%	1.4%	2.4%	1.8%	1.9%	6.8%	0.1%
	Q2	4.3%	1.1%	0.8%	1.6%	1.2%	2.1%	2.3%	1.4%
	Q3	5.2%	0.1%	0.8%	3.0%	3.1%	4.3%	2.4%	0.4%
	Q4	7.2%	0.7%	0.8%	3.7%	3.0%	5.2%	6.6%	0.5%

Note: [1] Regions were combined for ISC agencies serving more than one region.

Source: DHS Statewide overdue PUNS summaries.

During our review of the overdue PUNS reports, we found the following:

- There was significant noncompliance with ISC agency grant agreements requiring a 95 percent timely-completion rate in FY21. Three ISC agencies also had instances of noncompliance in FY22 and FY23.
  - Four out of eight of the ISC agencies were out of compliance in at least three quarters during FY21. The percentage range of noncompliance with the PUNS performance standard in FY21 was 5.1 percent to 27.2 percent. Additionally, during two quarters of FY21, there were over 175 individuals whose PUNS updates were more than 300 days overdue.

- One out of eight of the ISC agencies did not meet the 95 percent timely-completion rate during two quarters in each of FY22 and FY23. Two other ISC agencies had instances of noncompliance in FY23.

We asked DHS why it allowed such noncompliance and lack of timely completion of PUNS. In response, DHS said, *"During the audit period there was not a process in place whereby the reports were reviewed for individual level data or consistent follow-up done on ISCs compliance with PUNs timeliness requirements. The period under review included the first few years of COVID, which created barriers to full compliance with ISC requirements. While there were flexibilities allowed…COVID still resulted in challenges to implementing requirements and tracking compliance."*

Mobius reports through the first quarter of FY22 included **former** ISC agencies which have not been in the Program since July 1, 2019. We asked DHS why these ISC agencies were still included in Mobius. In response, DHS stated, *"The reports still reflected the previous ISC agencies due to the need to reprogram that goes through DoIT."* When the summary of overdue PUNS includes individuals assigned to the incorrect ISC, it makes it difficult for DHS to assist current ISC agencies in ensuring individuals have up-to-date PUNS records.

The ISC agency grant agreements require the ISC agencies to report quarterly on all completed annual PUNS updates. Additionally, the performance standard in the grant agreements require timely completion of 95 percent of all annual PUNS updates.

DHS said DDD's Program Developmental Unit has staff who specifically focus on the PUNS database. DHS said the staff review the Mobius reports and reach out to the ISC agencies. It is unclear if staff is regularly doing these review activities considering the noncompliance with the timely completion of PUNS updates, especially in FY21. Further, the Program Developmental Unit does not appear to regularly access or review the PUNS reporting found in the grant agreements.

When an ISC agency does not ensure there is an annual update for each individual in the PUNS database, there is a risk that the individual is overlooked for needed or desired services. Further, when the PUNS database is not updated, it is difficult for DHS to ensure adequate Statewide planning.

Monitoring – PUNS	
RECOMMENDATION NUMBER 7	***DHS should ensure ISC agencies comply with the annual PUNS update requirement outlined in the grant agreements. DHS should also ensure Mobius reports include only ISC agencies that are currently in the ISC program.***

DHS Response:

IDHS accepts the recommendation. IDHS-DDD Bureau of Grant Programs Management (Bureau) was created to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants. Additionally, IDHS worked with the Department of Innovation and Technology (DoIT) to address the Mobius issue. That work was completed in December 2023 so that the data and reporting through Mobius on the ISCs is up to date.

Annual Redeterminations

A redetermination is an annual process of reassessing an individual's eligibility for Medicaid benefits. As outlined in the ISC Manual and grant agreements, it is the responsibility of the ISC agencies to conduct this redetermination process **annually** for the individuals receiving Waiver services. DHS set the performance standard for compliance with this grant deliverable at 95 percent of annual level of care redeterminations completed within 365 days from the previous redetermination.

During the audit period, DHS **did not always enforce** the 95 percent timely annual redetermination requirement. This included two ISC agencies that were not compliant in any of the quarters during the audit period, FY21 through FY23. Additionally, redetermination reports used for monitoring the ISC program show individuals assigned to ISC agencies no longer in the ISC program.

We summarized the timeliness of reporting on the annual redeterminations. Exhibit 29 shows the percentage of overdue redeterminations by ISC agency. The orange shading is used to represent any quarter an ISC agency was not compliant with the performance standard (any percentage over five).

Exhibit 29
OVERDUE REDETERMINATIONS SUMMARY
FY21-FY23

		ISC [2]							
		CCRPC	CISA	CAU	CSO	Prairieland	Service	SICCS	Suburban Access
FY21	Q1	4.9%	3.5%	1.3%	4.5%	5.9%	12.9%	4.8%	6.2%
	Q2	4.1%	2.6%	1.2%	6.7%	6.3%	13.0%	8.7%	8.1%
	Q3	2.4%	3.2%	1.1%	5.3%	5.1%	13.6%	9.0%	9.9%
	Q4	4.1%	2.9%	1.8%	10.7%	2.8%	10.8%	4.7%	11.3%
FY22	Q1	4.7%	5.0%	2.5%	7.2%	5.5%	6.5%	5.6%	5.0%
	Q2	3.6%	3.6%	1.5%	8.8%	8.6%	5.8%	5.3%	5.5%
	Q3	5.0%	3.8%	1.3%	10.3%	5.4%	5.9%	7.6%	8.5%
	Q4	4.6%	3.2%	2.2%	11.0%	5.4%	5.8%	8.2%	9.5%
FY23	Q1[1]								
	Q2	11.7%	5.2%	1.6%	18.4%	6.8%	8.4%	9.0%	13.7%
	Q3	6.2%	4.4%	1.9%	20.4%	7.3%	8.9%	10.6%	15.4%
	Q4	7.5%	8.8%	2.4%	40.3%	6.9%	8.2%	9.4%	17.9%

Note: [1] FY23 Quarter 1 reports were not available.

Note: [2] Regions were combined for ISC agencies serving more than one region.

Source: DHS Statewide overdue redeterminations summaries.

During our review of the overdue redetermination reports, we found the following:

- There was significant noncompliance with ISC agency grant agreements requiring a 95 percent timely-completion rate:
  - Two ISC agencies, Service and Suburban Access, did not meet the performance standard in any of the 11 quarters reviewed during the audit period.
  - Two other ISC agencies, Prairieland and CSO, only met the performance standard in 1 of the 11 quarters reviewed.
  - In total, across all ISC agencies at the end of FY23, 2,385 of the 22,098 active individuals, or 10.8 percent, were overdue for an annual redetermination. This included an ISC agency whose percentage of overdue redeterminations was 40.3 percent.
  - In the last quarter of FY23, 625 of the 2,385 overdue redeterminations, or 26.2 percent, were more the 120 days late.

We asked DHS why they allowed the repeated noncompliance and lack of timely completion of annual redeterminations by the ISC agencies. In response, DHS said, "*…the issues noted were due to challenges resulting from the COVID pandemic and the need to adjust operations in response to the pandemic by the Department and ISC Case Management entities.*"

Mobius reports included **former** ISC agencies, which have not been in the ISC program since July 1, 2019. We asked DHS why these ISC agencies were still included in Mobius. In response, DHS stated, *"The reports still reflected the previous ISC agencies due to the need to reprogram that goes through DoIT."* We note, as of the last quarter in FY23, these ISC agencies **had not been involved** with the ISC program for nearly four years. Failure to maintain accurate redetermination reports makes it difficult for DHS to ensure all ISC agencies are timely completing the redeterminations for all individuals in that ISC agency's caseload.

The ISC grant agreements require the ISC agencies to report quarterly on individuals who are due for a redetermination within 90 days, as well as those that are overdue, and an explanation why those redeterminations are late. Additionally, the **performance standard** in the grant agreements is **95 percent** of all redeterminations completed within 365 days.

Section 16 of the ISC Manual states that ISC agencies are monitored by the DDD to ensure compliance with the ISC grant agreement. As part of ISC Manual on monitoring: BQM annually reviews a **sample** of individual records to determine: *"Timeliness of the annual Level of Care redetermination";* and DDD's Medicaid Waiver Unit will conduct periodic reviews of Medicaid Waiver compliance, which will be conducted, via a Mobius-based review and will also determine timely completion of redeterminations.

DHS also explained that the Bureau of Quality Management (BQM) is involved with ensuring timely compliance for the annual redeterminations. However, DHS said BQM's review is limited to the individuals in the sample. We note that for the developmentally disabled population, this sample represented approximately two percent of the overall population. Considering the significant noncompliance shown on the overdue redetermination reports, it is difficult to conclude that the Medicaid Waiver Unit is conducting the required periodic reviews.

Failure to conduct a redetermination within the required 365 days puts the individual at risk for an interruption in eligibility for Medicaid benefits.

Monitoring – Annual Redeterminations

RECOMMENDATION NUMBER	
8	***DHS should ensure ISC agencies comply with the annual redetermination requirement outlined in the grant agreements.***

DHS Response:

IDHS accepts the recommendation. The Bureau of Quality Management monitors annual redetermination for compliance and IDHS-DDD reports this to the federal Center for Medicare and Medicaid Services (CMS) in the required performance measurements. The IDHS-DDD Bureau of Grant Programs Management (Bureau) role includes oversight, review, and support for ISCs as they fulfill their grant obligations. Additionally, IDHS worked with the Department of Innovation and Technology (DoIT) to address the Mobius issue. That work was completed in December 2023 so that the data and reporting through Mobius on the ISCs is up to date.

Individual Service and Support Advocacy (ISSA)

DHS **failed** to monitor the ISC agencies by not ensuring monitoring visits and timely updates on the discovery tool and personal plan for all individuals were conducted, as required.

We judgmentally sampled 75 individuals in the Waiver program during the audit period, FY21 through FY23, and requested from DHS the ISSA monitoring and visiting notes, as well as additional monitoring contacts, visits, and notes.

- We used the ISSA monitoring notes to test the annual updates to the personal plan and discovery tool since this review could be counted as one of the required ISSA visits and to support the other required visits.
- If an individual was new to the Waiver program during the audit period, FY21 through FY23, the individual was required to receive four weekly visits following initiation of Waiver services. While these visits are required by PAS, we tested this requirement as part of the Waiver sample.

Discovery Tool and Personal Plan Updates

During testing, we found missing or not timely discovery tool and personal plan updates in at least one fiscal year for 33 of the 75 individuals in the sample.

- 19 of 75 individuals did not have evidence of having a discovery tool or personal plan update;
- 14 of 75 individuals did not have all of the required updates timely;
- 7 of 75 individuals did not require an update during the audit period; and
- 35 of 75 individual received all updates timely.

Monitoring Visits

As part of case management, ISC agencies are required to conduct monitoring visits which include:

- four initial weekly visits, following the initiation of Waiver services (via Pre-Admission Screening);
- visits to ensure implementation of the personal plan and assurance of the health, safety, and welfare of the individual (two visits in FY21 and FY22 and four visits in FY23); and
- additional visits when there is a significant issue or emergency.

(See Appendix C for the ISSA Monitoring Form and Interpretive Guidelines to be used by ISC agencies to **accurately and consistently** capture individual interviews.)

Pre-Admission Screening (PAS)

During testing, we found 18 instances, based on the documentation in the file, where initial PAS visits were required.

- 6 of 18 instances were **missing all** required visit documentation;
- 6 of 18 instances were **missing some** of the required visit documentation or the visits were not timely; and
- 6 of 18 instances **contained all** of the required visit documentation.

For one of the cases in the sample, there was confusion whether the initial four visits were required. The individual began receiving Adult Home Based Services in May 2021; however, we did not find evidence to support visits for the initial four weeks as required by PAS. We asked the ISC agency about these visits. The ISC agency reported weekly visits are **not required.** We then confirmed with DHS that any individual new to the Waiver regardless of the arrangement is entitled to the initial four visits. DHS confirmed the visits **are required.**

ISSA Visits

During testing, we found on average only **86 percent** of the required monitoring visits were conducted.

- For FY21 and FY22 combined, 233 of 260 visits, **90 percent,** were completed, as required. The required number of visits during this timeframe was **two** annually.
- For FY23, the number of completed visits **declined** to 81 percent (197 of 242), but the number of required visits also **doubled** from the prior fiscal years to **four** visits annually.

During testing, we found four visits where the only support was a billing entry, which is not the same support as the ISSA Monitoring Form required by DHS. A billing entry showing completion of the visit does not address and document all of the areas to be addressed during the visit.

During testing, we also found:

- **Not all** visits in FY22 and FY23 were conducted face-to-face, as required, and there was no support in the file providing an allowable explanation, which is also required by DHS guidance.
- In FY21, when visits were required to be conducted remotely, individuals did **not always** participate in phone calls or virtual visits.
- There were also instances in FY22 and FY23 where individuals **were not involved**, but these situations were less frequent than in FY21.

We question how an ISC agency can assess satisfaction with outcomes and services and ensure health, safety, and welfare absent the individual participating in the visit and the ISC agency seeing the individual.

Additional Visits

During testing, we found instances in all three fiscal years where ISC agencies completed additional visits as required. However, we **could not determine** whether all required additional visits were conducted because the documentation may not have supported every need for an additional visit.

The ISC agency grant agreements require the ISC agencies to complete the following activities:

- update/manage the discovery tool and personal plan at least annually;
- monitor the transition of the individual for the first four weeks following the start of Waiver services;
- complete the minimum required ISSA monitoring visits per year; and
- conduct additional monitoring visits to ensure the health, safety, and welfare of an individual.

The details of these Waiver activities are also outlined in the ISC Manual. The ISC Manual included the specific form to be used to document the visits (see Appendix C), a face-to-face requirement, information on individual involvement and requirements for maintenance of records. The initial weekly visits for individuals new to Waiver services are outlined in the PAS Manual.

During the pandemic, DDD utilized informational bulletins to allow for exceptions to the format of the visits, which included timeframes where remote activities were allowed. Once face-to-face visits resumed, DDD also provided allowable exceptions for remote activities, but those exceptions were required to be documented in the notes.

We asked DHS why they allowed the ISC agencies to not comply with the Waiver requirements. DHS stated, "*DHS reviews quarterly periodic performance reports that include overall compliance towards the ISC requirements and contracts and when concerns are identified through that review, the ISC is contacted to respond.*"

During the audit, we clarified DHS' use of the word *"review."* DHS stated there was **not a process** whereby the performance reports are reviewed for individual level data nor is follow-up completed; rather, the reports were "reviewed" for completeness and appropriateness.

DHS continued its response, *"In addition, DHS-DDD Bureau of Quality Management reviews ISC requirements…selected to be reviewed in their sample. However, DHS does not review the individual experiences of all 23,000 individuals in the waiver annually so we expect that some of the individuals selected in the sample did not undergo a review during the period by DHS."*

During the audit, we found that BQM's sample included 400 individuals in the Adult Waiver across all ISC agencies in FY23. These 400 individuals represented less than 2 percent of the overall count of individuals in the Adult Waiver in FY23.

Lastly, DHS stated, *"Furthermore, the period under review included the first few years of COVID, which created barriers to full compliance with ISC requirements. While there were flexibilities allowed for ISCs to perform some tasks virtually when COVID was an issue, COVID still resulted in challenges to implementing requirements and tracking compliance."*

We asked the ISC agencies about the issues found during testing. Below are some of the responses we received.

- Missing notes and tool:
  - case manager left the agency and did not complete notes or tool; and
  - case transferred to another ISC agency and notes were not included in the transfer packet.
- Visits not completed:
  - difficulty setting up remote meeting during early days;
  - independent service coordinator abruptly left agency;
  - ISC agency extremely short staffed and unable to cover every visit;
  - loss of independent service coordinators in the region; and
  - ISC agencies were trying to gain footing at a time with return to four visits and staff turnover leading to higher caseloads.
- Visit not conducted face-to-face for allowable reasons, but not documented in the notes:
  - staff recovering from COVID;
  - provider visitation policy did not allow face-to-face;
  - high COVID transmission rates in area;
  - staffing shortage; and

- independent service coordinator no longer employed at the ISC agency and did not document reason.

DHS **cannot** ensure that the needs and desires of each individual are met and the services provided to each individual are appropriate when the discovery tool and personal plans are not updated at least annually.

Additionally, failure to ensure all required visits are conducted by the ISC agencies could jeopardize the health, safety, and welfare of each of the individuals served. When visits are not conducted face-to-face, there is a risk of missing an issue that would normally have been identified.

Monitoring – ISSA Visits	
RECOMMENDATION NUMBER 9	***DHS should monitor the ISC agencies and ensure all individuals receive an updated discovery tool and personal plan at least annually and should ensure all individuals receive the required monitoring visits. DHS should also ensure ISC agencies use the required form and document any reason a visit is not conducted timely, in the prescribed format, or without the involvement of the individual.***

DHS Response:

IDHS accepts the recommendation. In FY24, IDHS-DDD created the Bureau of Grant Programs Management (Bureau) to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants.

In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and through bi-weekly meetings to ensure activities are implemented appropriately and consistently.

Furthermore, BQM uses a representative sample process to select individuals in waiver services and reviews their discovery tools, personal plans, and implementation strategies, as well as the person-centered planning process, monitoring visits and deadlines annually. Individuals who are reviewed are selected randomly. Findings from this sample are reported as a federal CMS required performance measure. BQM will begin reporting to the Bureau of Grant Program Management starting January 1, 2025. Additionally, the ISCs are responsible for reporting this quarterly on the Period Performance Report.

Bogard

During the audit period, DHS **did not always have** an accurate accounting of individuals with the Bogard-class designation and **did not always ensure** ISC agencies were providing the required services to individuals with the Bogard-class designation.

We requested from DHS a listing of all individuals with the Bogard-class designation during the audit period. Based on the listing provided, there were 484 unique individuals who had the Bogard-class designation for at least one month during the audit period, FY21 through FY23. This included individuals residing in a Waiver-based setting and those in other non-Waiver settings.

We randomly selected 15 individuals with the Bogard-class designation to specifically test individuals in a **non-Waiver setting.** In order to ensure the sample of 15 individuals was not receiving Waiver services, we compared each individual with DHS' Waiver data. If the individual with the Bogard-class designation was found in the Waiver data, we went to the next individual in the random sampling. We note that individuals with the Bogard-class designation receiving Waiver services were included in the population of individuals tested as part of a different audit sample.

For each individual in the sample, we requested evidence that the ISC agency conducted the required monitoring visits and coordinated the annual Individual Service Plan updates. During the audit period, we found:

- In 3 of 15 cases, the months of Bogard-class designation, according to the DHS listing, either **did not match** the individual case file, or we **could not make** a determination.
  - For the two cases that did not match, one individual died in December 2020, yet the listing showed the individual having the designation until April 2021, and the other individual died in December 2021, yet the listing had the individual having the designation for the entire audit period.
  - For one case, we could not make a determination because no file was provided for the individual.
- Of the 440 required visits, 99 or **22.5 percent,** of the visits **were not conducted**.
- ISC agencies **did not participate** in 13 of the 39 of the required service plan updates. The individual sample files included instances where the service plan was noted as overdue; there was no reference to the service plan; updates were only noted in billing entries; and one instance where the ISC agency had **no record** of the individual.

For individuals with the Bogard-class designation who were not receiving Waiver services, the ISC agencies were required to **coordinate the Individual Service Plan development**, as well as **complete service-coordination visits** for individuals residing in **all other non-Waiver settings,** among other involvement.

We asked DHS why its listing of individuals with the Bogard-class designation was not up to date. In response, DHS stated it **does have** *"an up to date listing and can track individuals with the Bogard-class designation."* We are unsure how DHS can make this assertion considering we found two individuals still on DHS' Bogard-class designation listing months after the individuals had passed away.

We also asked DHS why it did not hold the ISC agencies accountable to the Bogard-class designation requirements outlined in the grant agreements. In response, DHS stated, *"While DHS required monthly and quarterly reporting and financial data from ISCs, during the audit period, there was not a process in place whereby the reports were reviewed for individual level data or consistent follow-up done on ISCs compliance with all Bogard cases. DHS has created a Bureau of Grant Programs with a goal of focused review and follow-up to address compliance with contractual requirements."*

Failure to ensure all required visits are conducted by the ISC agencies jeopardizes the health, safety, and welfare of each individual served as part of the Bogard-class designation. Additionally, failure to ensure participation in the service plans by the ISC agencies could result in individuals with the Bogard-class designation not receiving the appropriate or desired services.

Monitoring – Bogard

RECOMMENDATION NUMBER 10	***DHS should maintain an accurate listing of all individuals with the Bogard-class designation and should ensure ISC agencies are providing all required services to individuals with this class designation.***

DHS Response:

IDHS accepts the recommendation. IDHS-DDD updates the Bogard class monthly, based on information provided by the ISCs and reports through Birdseye**.**

In FY24, IDHS-DDD created the Bureau of Grant Programs Management (Bureau) to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants.

Americans with Disabilities Act (ADA)/Olmstead Outreach and Housing Navigator

DHS **did not monitor** the Housing Navigator and ADA/Olmstead Outreach programs, which were pilot programs new to the ISC program in FY23. DHS **failed** to request grant funds back from one ISC agency, CCRPC, that received $49,375 for additional ADA/Olmstead Outreach and Housing Navigator activities, yet **did not conduct** any of the required activities for either program.

DHS relied upon ISC agency quarterly reports to determine compliance with ADA/Olmstead Outreach and Housing Navigator grant deliverables. However, as previously stated, the approximately 2,500 quarterly performance reports could not be used. Yet, these were the only source of documentation DHS had to show compliance with the respective grant deliverables.

ADA/Olmstead Outreach

Specific to ADA/Olmstead Outreach, we requested:

- a listing of all individuals each ISC was required to visit as part of ADA/Olmstead Outreach;
- determination of whether or not the ISC conducted the required visit; and
- the date the visit was conducted.

DHS has **not done any analysis** on the ADA/Olmstead Outreach pilot program. Further, DHS **did not readily** have this information available but created a spreadsheet, which was compiled from the quarterly reports we deemed were not useful.

Based on our review of DHS' spreadsheet, we found:

- DHS **did not include** outreach data on three ISC agencies covering five regions. These ISC agencies received a combined $75,691 in ADA/Olmstead Outreach funding.
- DHS **does not know** the total number of intermediate care facilities and SODC residents entitled to receive ADA/Olmstead Outreach.
- DHS **could not explain** a number of ISC agency reported entries found within the spreadsheet and did not follow-up with the ISC agencies to ensure the outreach occurred.
- CCRPC **did not conduct** any outreach during FY23. DHS said it were not aware of this until after CCRPC was no longer an ISC agency. CCRPC received $19,375 in funding to conduct ADA/Olmstead outreach.

Section 12.4 of the ISC agency grant agreements require DHS to, *"…monitor the activities of [ISC] to assure compliance with all requirements and performance expectations of the award."* Per the deliverables in FY23 ISC agency grant agreements, ISC agencies were required to report the following, specific to ADA/Olmstead Outreach:

- all SODC individuals that received outreach; and
- all ICF/DD individuals that received outreach.

DHS said it **does not have a list of intermediate care facility residents** and are not statutorily required to maintain a list, as DHS is not the agency that funds or licenses intermediate care facilities. DHS also said the **SODC resident list is as of June 2023.** DHS said people transition in and out of SODCs. We question how DHS monitored the ISC agencies to ensure the outreach was completed considering DHS neither has the names of the intermediate care facility residents nor a complete listing of the SODC residents required to receive outreach.

Housing Navigator

Specific to the Housing Navigator program, we requested the number of individuals that secured housing as a result of the program.

DHS said the ISC agencies reported a total of 33 individuals receiving secured housing through this program.

We reviewed the quarterly reports to determine compliance with the other Housing Navigator deliverables found in the agreements. We found:

- CCRPC did not participate in the Housing Navigator program but has not returned the $30,000 it received for participation.
- Three of the eight ISC agencies did not secure housing for a single individual.
- ISC agencies did not always report on individuals who signed up for housing waiting lists and those utilizing transition support when moving, as required by the grant agreement.
- ISC agencies did not always conduct trainings, presentations, and meetings.

Section 12.4 of the ISC agency grant agreements require DHS to *"monitor the activities of [ISC] to assure compliance with all requirements and performance expectations of the award."* Per the deliverables in FY23 ISC agency grant agreements, ISC agencies were required to report the following specific to the Housing Navigator program:

- individuals signed up for housing waiting lists;
- individuals that secured housing;
- list of all individuals that utilized transition support when moving into their home;
- list of training on affordable housing:
  - training dates for ISC case managers (minimum 4);
  - presentations to landlords and provider associations (minimum 4);
  - meetings with possible housing partners (minimum 4);
  - meetings with housing organizations (minimum 3).

We asked DHS about the return of Housing Navigator program funds by the ISC agency that **admittedly was not able** to hire the staff as intended by the program funding.

In response, DHS stated, *"CCRPC noted on their Q4 reporting that funding was being returned."* Based on that response, we questioned if the entire $30,000 was returned and the date the funds were returned. DHS then stated, *"CCRPC has not returned any funding…CCRPC's financial reporting will not be submitted until early FY25 at which point the Office of Contracts Administration will review their reporting requirement."* We note that CCRPC will have held the Housing Navigator program funds, funds CCRPC agreed to return, for **more than two years** before DHS decides to "review" the requirement. Additionally, effective for FY24, CCRPC is no longer participating in the ISC program.

We also asked DHS about the **return of funds** by any ISC agency that was unable to secure housing for any individuals.

In response, DHS stated, *"Funding under a UGA [Uniform Grant Agreement] is fluid meaning funding not expended in one category can be moved to another*

category…The pilot program has a number of goals…" We note that providing funds for a pilot program but then allowing those funds to be moved to different categories does not support the intent of the program. We agree with DHS that the program has a number of goals; however, as stated above, those goals were also **often not met.**

DHS provided more than $725,000 for the Housing Navigator and ADA/Olmstead Outreach programs and cannot determine if the funds were spent on the intended purposes and whether those funds could have been more effectively and efficiently used in support of the developmentally disabled community based system. Without an analysis on the ADA/Olmstead Outreach and the Housing Navigator programs, DHS cannot determine if these pilot programs are successful and should be continued in future years.

Monitoring – ADA/Olmstead Outreach and Housing Navigator

RECOMMENDATION NUMBER 11	***DHS should adequately track and monitor ISC agency compliance with the Housing Navigator and ADA/Olmstead Outreach programs. This should include complete and up-to-date populations of individuals entitled to receive such services. For any required activities not conducted, DHS should request a return of funds.***

DHS Response:

IDHS-DDD accepts the recommendation. Housing Navigator was a pilot program during the time of this audit with an evaluation component in order to track and improve the process. In addition, the FY25 budget included increased funding for the Housing Navigator program in order to ensure all ISCs will be able to continue and, in some cases, expand their activities.

Since the audit period, the ADA/Olmstead outreach program, has been strengthened with processes, language, and outreach letters improved to increase clarity. The IDHS-DD Bureau of Grant Programs Management is now providing oversight, review, and support for ISCs as they fulfill their grant obligations.

In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and through bi-weekly meetings to ensure that activities are implemented appropriately and consistently.

SODC Transitions

DHS **did not require** the ISC agencies to comply with SODC transition activities as required by the ISC grant agreements. DHS **does not have clear and consistent guidance** on ISC requirements for SODC transitions. During testing, we found DHS **lacked evidence** of ISC agency attendance at required pre-transition meetings and lacked evidence to support all post-transition visits were conducted, as required. This includes 2 of 11 individuals in our sample who **did not receive any post-transition visits**. The ISC agencies and DHS' Bureau of

Transition Services (BTS) **failed to coordinate** post-transition visits. This includes 6 of 11 individuals receiving at least one post-transition follow-up visit **on the same day**.

DHS **relied** upon ISC agency quarterly reports to determine compliance with SODC Transition Support deliverables found in the grant agreements. Again, these reports could not be used to determine compliance and are **not reviewed** at any level of detail whereby DHS could determine compliance. Further, DHS **could not provide** the visiting notes for the individuals in our sample even though its own internal policy requires the oversight and receipt of such notes from the ISC agencies.

BTS – Requirements

During the prior performance audit of the CILA program released in July 2018, we determined that BTS had a role in the SODC transition process. During this current audit, DHS reported that BTS is within SODC operations and not involved with the ISC program. While BTS may be included within SODC operations, we **do not agree** with DHS. BTS **does** play a role in the ISC program, despite DHS' assertion.

DHS provided a document titled, *Overview of BTS/SODC Staff Responsibilities* (dated 3/6/17), which included BTS-related SODC transition activities. The following BTS responsibilities were included: participate in community placement meetings, participate in transition planning, **ensure completion of the ISC follow-up monitoring,** and **oversee ISC completion of progress notes**. We note that this document was **not updated** to reflect the change in ISC agency required follow-up visits.

DHS provided another document titled, *Provider Steps for Individuals Transitioning to Community Services* (not dated), which included a step for BTS required post-transition visits for the four weeks post-transition and monthly thereafter. Exhibit 30 shows a comparison of the BTS post-transition requirement during the prior CILA audit and during this audit. As shown in the Exhibit, the BTS post-transition visiting requirements remain **unchanged**.

ISC – Pre-Transition Requirements

We found the SODC transition language in the ISC agency grant agreements was not consistent during the audit period, FY21 through FY23, and often vague. For example in FY21, the grant agreement language merely required the ISC agency to participate in consultations and provide follow-up as needed. Neither 'consultations' nor follow-up 'as needed' was defined. In FY22, there was a significant amount of detail added to the grant agreement language, which included interdisciplinary, community placement, and onsite planning meetings. In FY23, DHS removed the meeting references but specifically added involvement in the discovery tool and personal plan.

We asked DHS a number of questions about the **vague** language. DHS said 'consultations' in FY21 included interdisciplinary and community placement meetings referenced in FY22 and FY23. As for the change between FY22 and

FY23, DHS stated, *"The FY23 Exhibit did not include this language but guidance was provided and is understood with the ISC agencies."* When DHS does not issue clear and consistent guidance regarding ISC agency involvement in SODC transitions, it can create confusion regarding ISC agency responsibilities.

ISC – Post-Transition Requirements

During the prior performance audit of the CILA program released in July 2018, the ISC agency visiting requirement during the first year post-transition was eight weekly and ten monthly thereafter. For the current requirement, DHS referred to the Pre-Admission Screening guidance in the ISC Manual which is four weekly and then quarterly ISSA visits, significantly less than the previous requirement. Exhibit 30 shows a comparison of the ISC post-transition follow-up requirement during the CILA audit and during this audit.

Exhibit 30
COMPARISON OF SODC TRANSITION FOLLOW-UP VISIT REQUIREMENTS

Entity	Old	Current
ISC	8 Weekly 10 Monthly	4 Weekly 4 Quarterly ISSA[1]
BTS	4 Weekly 11 Monthly	4 Weekly 11 Monthly
Total Visits	**33**	**23**

Note: [1] During FY21 and FY22, the ISC agencies were only required to conduct two ISSA visits during the fiscal year bringing the total required visits in those two fiscal years down from 23 to 21.

Source: OAG developed from prior CILA Audit (released July 2018) and DHS information.

As previously reported, ISSA visits were **not updated** in the ISC Manual. The ISC Manual still includes two visits, not four as seen in the FY23 ISC agency grant agreements. Additionally, the other DHS-provided BTS internal guidance includes the **wrong number** of weekly and monthly visits. The BTS internal guidance still requires the ISC agencies to conduct eight weekly and ten monthly during the first year post-transition.

It is **unclear** exactly when DHS changed the post-transition visiting requirement. We asked DHS when and how the change in visits was communicated. DHS stated, on February 5, 2024, *"A change in the number…was made before the audit period."* Then on May 23, 2024, DHS stated the change occurred in FY22, *"At the time the then-Division Director met with and discussed the change directly with the ISC agencies ahead of the finalization of the FY22 grant agreements."*

We asked each of the eight ISC agencies about their understanding of the SODC transition requirements including post-transition follow-up visits. We note the following:

- One ISC agency reported the change in post-transition visiting requirement was communicated to the ISC agencies in an email memo dated September 9, 2019. DHS did not provide this memo.
- Two of eight ISC agencies reported the **wrong** number of post-transition follow-up visits. These two ISC agencies reported the old requirement of eight weekly visits followed by ten monthly visits in the first year post-transition.

- One ISC, CISA, provided a memo from the DDD dated May 2013, which specified the eight weekly and ten monthly visit requirement.
- One ISC, CSO, provided a document from DHS' website on a former initiative related to SODC closures. This document, which was active on DHS' website at the time we asked, also referenced the eight weekly and ten monthly visit requirement. We asked DHS about this document and received the following response, *"The webpage provided…is outdated and is no longer actively used by DDD…As of yesterday [4/8/24], the page has been removed from the DHS website."*

SODC Transition Sample

We sampled 15 out of 172 transitions that occurred during the audit period. For the purposes of sampling, we removed 22 transitions from the total 194 for individuals transitioning home without Waiver services and SODC temporary transitions. We tested the following areas as required by the grant agreements for the ISC agencies and internal DHS guidance for BTS and requested supporting documentation for the individuals in the sample:

Count of Total Transitions
FY21 – 49
FY22 – 69
FY23 – 76

- participation in community placement meetings;
- participation in interdisciplinary meetings, including discovery process; and
- post-transition follow-up visits.

We note, DHS **could not provide** the visiting notes for the cases in our sample. BTS internal guidance requires receipt of this information. Since DHS did not have the visiting notes it had to request the notes from the ISC agencies.

We found that for 4 of the 15 cases, the guardian did not consent to ISC agency involvement. For the remaining 11 of 15 cases, we found:

- The ISC agencies and BTS participated in **all** of the required community placement meetings (11 of 11).
- The ISC agencies and BTS generally **did not participate** in all required interdisciplinary meetings but generally **did participate** in the required discovery processes.
  - DHS stated there is **no documentation** BTS and ISC attended interdisciplinary meetings.
- BTS completed **all** required weekly transition visits (44 of 44) and **nearly all** monthly visits (60 of 61), as required.
- The ISC agencies **did not complete** the required post-transition follow-up visits.
  - ISC agencies only completed 31 of 44, or **70 percent,** of the required weekly post-transition visits;

  - There was a **delay** in the start of the post-transition visits for three individuals in the sample; and
  - ISC agencies only completed five of nine required, or **56 percent,** of the required ISSA visits.

- 2 of 11 individuals in the sample had **no** required ISC agency visits during the audit period. We asked DHS about these two cases. In response, DHS confirmed there was **no documentation** of the ISC agency visits.
- The ISC agencies and BTS conducted at least one weekly or monthly post-transition visit on the **same day** for 6 of 11 individuals in the sample.

  We asked DHS why the number of ISC agency required post-transition visits was reduced since the CILA audit was released in 2018. DHS stated, *"The **expectations** for the ISC agencies increased to better support an individual throughout the transition process (not just post-transition). Because of their additional involvement throughout the transition process, DDD reduced the number of face-to-face meetings post-transition. Additionally, and of note, BTS completes their own on-site visits for the first-year post-transition."* [Emphasis added.] We note that the ISC agencies **did not participate** in the entire transition process for all 11 individuals. When DHS reduces the required post-transition follow-up visits, but then does not ensure complete participation, there is an increased likelihood a transition could fail.

  We note these documents require **overlapping participation** between the ISC agencies and BTS, as well as requiring visits by both ISC agencies and BTS during the same timeframe. As noted above, there were certain interdisciplinary meetings where there was **no evidence** to support ISC agency or BTS attendance at the meetings. Additionally, there were certain post-transition visits where the ISC agencies and BTS conducted the visit **on the same day**. Failure to coordinate ISC agency activities creates situations where certain activities are not conducted while others are duplicated.

  When DHS does not determine ISC agency compliance with the ISC agency grant activities, it has no idea how the program funds are being spent and if the required activities are being conducted.

Monitoring – SODC Transitions	
RECOMMENDATION NUMBER 12	***DHS should ensure the ISC agencies are meeting all deliverables as required by the ISC agency grant agreements. This should include participation in pre-transition activities, as well as completion of all required post-transition follow-up visits. DHS should issue clear and consistent guidance related to ISC agency requirements for SODC transitions. DHS should consider coordinating DHS and ISC agency SODC transition activities to avoid unnecessary overlap and more efficient use of resources.***

DHS Response:

IDHS accepts the recommendation. IDHS-DDD Bureau of Transition Services (BTS) and SODC transition staff meet regularly with ISC transition staff to discuss transitions and strategize on approaches to support transitions. The Transition Manual is currently being updated. IDHS-DDD will update the ISC manual by December 31, 2024.

Appendix A
House Resolution Number 66

STATE OF ILLINOIS
HOUSE OF REPRESENTATIVES
103RD GENERAL ASSEMBLY

HOUSE RESOLUTION NO. 66
OFFERED BY REPRESENTATIVES JAY HOFFMAN, TONY M. MCCOMBIE, LINDSEY LAPOINTE AND CHARLES MEIER

WHEREAS, The Department of Human Services (DHS), through its Division of Developmental Disabilities (DDD), oversees the administration of Independent Service Coordination (ISC) activities around the State of Illinois; and

WHEREAS, ISC agencies serve as the primary connection between individuals and guardians who are seeking or receiving developmental disability services through DHS' DDD; and

WHEREAS, ISC agencies are essential to providing accurate individual information for statewide planning as well as collaborating with service providers to ensure individuals' health, safety, welfare, well-being, and satisfaction with services funded by DDD; and

WHEREAS, Prior to FY20, 17 organizations, mostly not-for-profits, provided ISC services for the State of Illinois; and

WHEREAS, On January 2, 2019, DHS, after the use of a competitive procurement process, announced that the number of ISC agencies to serve the entire state was cut from 17 to 8; and

WHEREAS, In April of 2020, the Auditor General released a management audit of the DHS process for the selection of ISC providers that serve the front line by providing information and assistance to help individuals and families make informed choices for services; and

WHEREAS, The audit found significant problems with the competitive procurement process used to select the ISC providers, resulting in 13 recommendations, including 274 scoring irregularities in this one grant opportunity, a failure to uniformly apply the grant criteria to applicant proposals, a failure to maintain documentation to show how protest resolutions were made, and a failure to follow selection criteria for the grant opportunity; and

WHEREAS, The Auditor General, given the failures by DDD, could not conclude with absolute certainty that the correct proposers were selected by DHS for the awards, estimated to value over $38 million; and

WHEREAS, In FY23, ISC costs had increased to nearly $55 million; and

WHEREAS, In July of 2018, the Auditor General released a performance audit of the Community Integrated Living Arrangements (CILA) program which reported, in part, a failure by DHS to ensure that ISCs maintained documentation on all required visits to individuals that transitioned from State Operated Developmental Centers to CILAs, and that ISCs only conducted 62 percent of weekly and 82 percent of monthly required visits to individuals in CILAs; and

WHEREAS, Oversight of programs designed to assist individuals with developmental disabilities is vitally important to ensure that transitions to living arrangements are successful; therefore, be it

RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that the Auditor General is directed to conduct a performance audit of the oversight of the Independent Service Coordination (ISC) program by the Department of Human Services' Division of Developmental Disabilities; and be it further

RESOLVED, That the audit include, but not be limited to, for the period of FY21 to FY23, an examination of the caseloads, by ISC, around the State to determine whether ISCs are providing coverage based on agreements with the State, an examination of whether ISCs maintain documentation and report allegations of suspected abuse, neglect, and financial exploitation to the appropriate oversight entity, and an examination of the oversight and monitoring of ISCs by DHS ensuring that the ISC complies with statutory, regulatory, and contract requirements, including site visits and inspections of records and premises; and be it further

RESOLVED, That DHS and any other entity having information relevant to this audit cooperate fully and promptly with the Auditor General's Office in the conduct of this audit; and be it further

RESOLVED, That the Auditor General commence this audit as soon as possible and report his findings and recommendations upon completion in accordance with the provisions of Section 3-14 of the Illinois State Auditing Act; and be it further

RESOLVED, That suitable copies of this resolution be delivered to the Auditor General and the Department of Human Services.

Adopted by the House of Representatives on May 15, 2023.

JOHN W. HOLLMAN
CLERK OF THE HOUSE

EMANUEL "CHRIS" WELCH
SPEAKER OF THE HOUSE

Appendix B
Audit Scope and Methodology

This performance audit was conducted in accordance with the audit standards promulgated by the Office of the Auditor General at 74 Ill. Adm. Code 420.310.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We examined the five components of internal control – control environment, risk assessment, control activities, information and communication, and monitoring – along with the underlying principles. We considered all five components to be significant to the audit objectives. Any deficiencies in internal control that were significant within the context of the audit objectives are discussed in the body of the report.

The audit objectives were delineated by House Resolution Number 66, which directed the Auditor General to conduct a performance audit of the oversight of the Independent Service Coordination (ISC) program by the Department of Human Services' (DHS) Division of Developmental Disabilities (DDD) during FY21 through FY23. The resolution contained three audit determinations (see Appendix A).

In conducting this audit, we reviewed applicable State statutes and administrative rules. We also reviewed the federal law for the Home and Community-Based Services Waiver program applicable to the case management services provided by the ISC agencies. We reviewed prior DHS performance audits, financial audits, and a compliance examination released by our Office.

In conducting this audit, we requested and reviewed documents and data specific to the ISC program. These documents included Department manuals, guidelines, communications, and information bulletins. We reviewed rate studies and external ISC quality assurance reviews. We reviewed the results of ISC fiscal administrative reviews conducted by DHS' Office of Contract Administration (OCA). We reviewed the results of the annual ISC reviews conducted by DHS' Bureau of Quality Management (BQM). We reviewed all ISC grant agreements for FY21 through FY23 for each of the eight ISC agencies. We also reviewed the ISC grant budgets and payment amounts.

We received multiple sources of data:

- We received approximately 2,500 files in response to our request for quarterly ISC fiscal and performance reports.

- We received the Individual Service and Support Advocacy (ISSA) Waiver billing data by individual by fiscal year. This included approximately 24,000 unique Social Security Numbers in each fiscal year.
- We received the rejected Waiver billings by fiscal year and region. The data also included the reason for the error, as well as the amount of the rejection and related Social Security Number. This total number of rejected billings was 10,945.
- We reviewed reports and summarized ISC agency timeliness of reporting of the annual Waiver redeterminations and overdue annual Prioritization of Urgency of Need for Services (PUNs) update by ISC agency.
- We received the Bogard-class designation listing by individual and month. The average number of individuals in each of FY21 through FY23 was 435.
- We received all State-Operated Developmental Center (SODC) transitions during FY21 through FY23. The three-year combined total of transitions was 194.
- We received CIRAS Report database information. The database included a three-year combined total of more than 35,500 entries.
- We received the database of OIG allegations and Notices of Investigation (NOI) that were sent by Adult Protective Services to DHS' Division of Developmental Disabilities.

We randomly selected 15 out of 484 unique individuals from the Bogard-class designation listing. We numbered the individuals and utilized a random number generator in the selection. For each random number, we compared the unique Social Security Number of the individual in the Bogard file with the ISSA Waiver billing data to ensure the sample only contained Bogard individuals not in the Waiver. If the Bogard individual was receiving Waiver case-management services, we moved to the next random number.

We requested and received the following documentation for each individual in the the Bogard sample:

- address of the residence of the individual;
- monthly visiting documentation for FY21 through FY23; and
- evidence of ISC agency coordination of the individual service plan development.

Based on the sample documentation, we tested each individual case based on the requirements outlined in the ISC grant agreements. We then sent DHS any exceptions from testing. We reviewed DHS' responses to the exceptions and created a final testing summary.

We randomly selected 15 of 172 SODC transitions during FY21 through FY23. The total number of transitions was 194; however, we removed 22 transitions not involving ISC agencies. We combined and numbered the 172 SODC transitions

and utilized a random number generator in the selection to determine the sample of 15.

We requested and received the following documentation for each individual in the SODC transition sample:

- evidence of ISC agency participation in all interdisciplinary and community placement meetings;
- evidence of ISC participation in all pre-transition meetings; and
- post-transition follow-up visit documentation.

We also requested any visits requested by DHS' Bureau of Transitional Services (BTS). This request was made as part of follow-up to the original CILA audit recommendations released in July 2018. One recommendation in that audit was for BTS transition follow-up visits not conducted.

Based on the sample documentation, we tested each individual case based on the requirements outlined in the grant agreements, as well as DHS' internal guidance. We then sent DHS any exceptions from testing. We reviewed DHS' responses to our exceptions and created a final testing summary.

We judgmentally selected 75 individuals from the Waiver billings. The basis for the judgmental selection was to ensure sample coverage of all ISC agencies and regions, as well as different types of Waivers and clients. Individuals in the Waiver sample were chosen for a number of reasons, including but not limited to, death and unknown injury, incidents reported in CIRAS with or without follow-up, individuals reported to both APS and in the CIRAS database, individuals in cases found in the OIG database, individuals with the most and least amount of payments in any of the three fiscal years, individuals starting or terminating service during the audit period, and individuals with no billings in the Waiver data for consecutive months.

We requested and received the following documentation for each individual in the Waiver sample:

- Monitoring and visiting notes and additional contacts, visits, and/or notes; and
- Evidence of ISC agency annual discussion of the discovery tool and personal plan.

Based on the sample documentation, we tested each individual case based on the requirements outlined in the grant agreements and the ISC Manual. We then sent DHS any exceptions from testing. We reviewed DHS' responses to our exceptions and created a final testing summary.

Results from any of our three samples cannot and should not be projected to the total population.

We contacted each of the eight ISC agencies on three separate occasions. We first asked general questions about ISC program participation and DHS'

monitoring. We then asked more specific questions related to allegations and SODC transitions.

We also contacted DHS' Office of Inspector General, the Department on Aging's Adult Protective Services, the Department of Children and Family Services, and the Department of Public Health, which are the four oversight entities responsible for receiving reports of any allegations or observations of suspected abuse, neglect, and financial exploitation from the ISC agencies. We asked the oversight entities about their receipt of allegations from ISC agencies, maintenance of such allegations, and sharing of information with the ISC agencies or DHS.

On November 14, 2024, we sent DHS the draft report. An exit conference was held with DHS on November 22, 2024. The principal attendees are noted below:

Exit Conference	**November 22, 2024**
Agency	**Name and Title**
DHS	• Dulce Quintero, Secretary Designate • Ryan Thomas, Assistant Secretary • John Schomberg, General Counsel • Tiffany Blair, Chief of Staff • Meg Cooch, Chief of Staff DDD • Amy Macklin, Chief Internal Auditor • Tonya Piephoff, Director DDD • Alicia Robinson, Deputy Director Bureau of Community Services Programs • Kimberly Jones-Oparah, Deputy Director Bureau of SODC Operations • Chris Albert, Internal Auditor • Chris Finley, Audit Liaison • Matt Sporlein, Audit Liaison
Illinois Office of the Auditor General	• Jill Paller, Audit Manager • Geoff Piehl, Audit Supervisor • Ryan Rizner, Audit Staff

Appendix C
ISSA Monitoring Form and Interpretive Guidelines

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

Please type or print the following information

I. GENERAL INFORMATION

Name of Person Visited: _____ Date: _____ Time of Visit: _____

Purpose of Visit: _____

Location of Visit: ☐ Home ☐ Day Program ☐ Other _____

Address of Site Visit: _____ City: _____ State: _____

Residential Program Type: _____ How many roommates: _____

Number of person living in home: _____ Day Program Type: _____

Provider Agency Name: _____

Executive Director of Provider Agency: _____

Phone Number: _____ Ext.: _____ Fax Number: _____ Email: _____

Agency Address: _____ City: _____ Zip Code: _____

Parent or Guardian Name: _____

Phone Number: _____ Email: _____

ISC Agency Name: _____ Region: _____

Service Coordinator: _____

Phone Number: _____ Ext.: _____ Email: _____

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies
Page of

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

II. SOURCES OF INFORMATION USED DURING VISIT

Date	Method: Interview, Telephone Interview, Visit and Observation	Person Interviewed, Visited or Document Reviewed	Site	Add/ Delete Row
				Add
				Delete

III. INTERESTS OF GUARDIAN, FAMILY, FRIENDS:

IV. KEY ELEMENTS OF ACCOMPLISHMENT/ATTAINMENT
(Please reference attached Interpretative Guidelines during Interview)

1.	ISC has received all Implementation Strategies for this person.	○ Yes ○ No ○ N/A
Narrative:		
2.	Services and Supports are being provided in accordance with the Implementation Strategies.	○ Yes ○ No ○ N/A
Narrative:		
3.	Progress toward desired outcome(s) is evident. List each outcome and note progress for each (i.e. maintain/increase in abilities, experiences, choices, and increments toward success).	○ Yes ○ No ○ N/A
Narrative:		
4.	The person has the opportunity to participate in decisions concerning their life	○ Yes ○ No ○ N/A
Narrative:		

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies
Page of

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

5.	The person is satisfied with the supports and services received.	○ Yes ○ No ○ N/A
Narrative:		
6.	The person appears to be in good health.	○ Yes ○ No ○ N/A
Narrative:		
7.	Changes in overall health/medical status since last visit or Personal Plan are well documented and addressed. [Share provider/family response to those emerging needs.]	○ Yes ○ No ○ N/A
Narrative:		
8.	There is an indication the person is free from abuse, neglect and exploitation.	○ Yes ○ No ○ N/A
Narrative:		
9.	The person's preferences related to privacy are upheld.	○ Yes ○ No ○ N/A
Narrative:		

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies Page of

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

10.	The person understands their rights. Rights appear to be respected. List any restrictions, reason for restrictions and identify who approved restrictions.	○ Yes ○ No ○ N/A
Narrative:		
11.	The setting of the visit appears to be safe and well maintained internally and externally.	○ Yes ○ No ○ N/A
Narrative:		

V. GENERAL OBSERVATIONS, COMMENTS, UNUSUAL CIRCUMSTANCES

This space is for overall impressions and summary information by the ISC. If the person has any concerns or issues, have they been addressed by/with the provider? Is the individual satisfied with the solution or outcome? Any special efforts or achievements by the person being visited, the team or other entities might be commended here.

VI. SUGGESTED FOLLOW-UP

Is follow-up action needed? Yes ○ No ○

This determination is based on the information in the preceding notes. Follow-up may include suggestions for the provider agency, modifications to the Personal Plan or Implementation Strategies, securing additional assessments or action needed by persons other than the ISC. If "Yes" is marked above, specify below what action is suggested (i.e. send Implementation Strategy to ISC agency).

Issue	Suggested Action	By Whom (Name and affiliation)	Suggested Target Date	Follow up Actions Response	Add/ Delete Row
					Add
					Delete

Date: _____

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies Page of

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

INTERPRETIVE GUIDELINES

Please use the following probing questions as "interpretive guidelines" to accurately capture the individual interview. These probing questions are designed to prompt conversation, encourage dialogue and demonstrate key elements. Use as many or as few questions as needed for each key element. Please be sensitive to the communication style for each person you interview. Take time to seek support from someone who knows the person best when communication styles differ from your own. Ensure that the person has whatever communication supports that are used in their daily life available to them at the time of the interview. Examples include: interpreter, communication device, visual supports, etc.

1. **ISC has received a copy of all Implementation Strategies (including the Employer of Record Implementation Strategy, if applicable) for this person.**

Audit/review documentation present:
· Are all Implementation Strategies present/on file for this person?

2. **Services and Supports are being provided in accordance with the Implementation Strategies.**

Audit/review documentation/data present:
· Is there evidence to demonstrate services and supports match the Implementation Strategies?

3. **Progress toward desired outcome(s) is evident - list each outcome and note progress for each (i.e. maintain/increase in abilities, experiences, choices, and increments toward success).**

Discussion:
· Is each outcome still important to you?
· Are you still _____?
· What do you like about these things? What do you want to do more? What do you not want to do?
· How is your life better now than this time last year?
· What is something new you have learned or done recently?
· What have you learned since the last visit?
· What are your new experiences since the last visit?
· What kinds of things are you doing during the day, at home, or in the community?

4. **The person has an opportunity to participate in decisions concerning their life.**

Discussion:
· What choices do you make for yourself?
· Can you make choices? Can you share an example?
· Does anyone help you make decisions? If so, do they include you in those decisions?
· What choices have you been given about activities, jobs, and new opportunities? For instance, where you live, work, your support staff, doctors, bank, hair stylist, spending money.
· Do you choose your daily activity?
· Do you choose your residence?
· Have you asked for a change? Tell me about that.
· Do you have family, friends, and natural supports? Natural supports are defined as people who are not paid to support you.

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

5. The person is satisfied with the supports and services received.

Discussion:
· Do you receive the supports and services you have asked for?
· Do you want to make any changes to your supports or services?
· Are you satisfied with the supports and services you receive?
· Has anyone asked you if you are happy with the people who care for you?
· Has anyone asked if you are happy with your supports and services?
· Is there anything you would like to change about your supports or services?
· Has anyone asked you whether you want to make changes in your supports or services within the last year?
· Does anyone ever ask you if you are satisfied with your supports and services?
· How do people know whether you are happy with your services? Questions? Surveys?
· If you are unsatisfied, have any changes been made to help?
· Have you ever been unhappy with your supports or services? If so, were changes made?
· If changes were made, were you happy with them?

6. The person appears to be in good health.

Discussion:
· How do you feel? Do you feel healthy?
· Are there things about your health that you wish were better?
· Do you feel you are enjoying best possible health?
· Do you take medications daily?
· Can you recognize your medications? (If person has an outcome to be independent, this question may be relevant)
· Why do you take these medications? (If person has an outcome to be independent, this question may be relevant)
· Do you see doctors when you need to? For instance, annual health exam, dental exam or any specialists?
· What doctors do you visit?
· When was the last time you visited your doctor?

7. The changes in the individual's overall health/medical status since last visit (including development of the Personal Plan) are well documented and addressed. Share provider/family response to any emerging needs.

Discussion:
· Have you had any illnesses or injuries since our last visit?
· Have there been any changes or anything new in your overall health?

8. There is indication the person is free from abuse, neglect and exploitation.

Discussion:
· Has anyone ever talked to you about what it means to be treated badly and told you what to do if it happened to you?
· Do you know what abuse means?
· Do you know what neglect means?
· Do you know what exploitation means?
· Have any of these events happened to you? If so, what was the outcome and was it satisfactory?
· What would you do if someone tried to hurt you or take advantage of you?

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies
Page of

State of Illinois
Department of Human Services - Division of Developmental Disabilities
INDEPENDENT SERVICE COORDINATION (ISC)
INDIVIDUAL MONITORING AND INTERVIEW NOTES

8. There is indication the person is free from abuse, neglect and exploitation. (continued)

Discussion:
· Do you know how to ask for help?
· Who would you tell if someone tried to hurt or take advantage of you?
· What does safe mean to you?

9. The person's preferences related to privacy are upheld.

Discussion:
· What does the word privacy mean to you?
· Do you understand privacy of person and information?
· Do you open your mail?
· Can you talk in private?
· What do you do when you want to be alone?
· Do people knock on your door before entering your home or bedroom?
· Are there places you can go when you would like to be by yourself?
· How are you afforded privacy of person at home?
· How are you afforded privacy of person at your day support program?
· Are there places at work and home where you can go if you would like to be by yourself?
· How do people give you privacy? (beyond the home and work environment)
· How is your anonymity and information protected?
· Do you have enough privacy?
· Has there ever been a time when someone has shared your personal information without your permission? In particular, communication with family members and physicians?
· Do people talk about you without including you?
· Do people talk about private things about you in front of you?
· Do people talk about private things about you when other people around?

10. The person understands their rights. Rights appear to be respected. List any restrictions, reason for restrictions and identify who approved restrictions.

Discussion:
· Has anyone talked to you about your rights?
· Do you understand your rights?
· Are your rights honored?
· Are there certain rights that are most important to you?
· Is there anything you want to do that you are not allowed to do?
· Do you have any restrictions? If so, do you know why?
· Have you shared your preference with people that support you?

11. The setting of the visit appears to be safe and well maintained internally and externally.

Discussion:
· Is the environment physically accessible for the person being reviewed (entrance/exit, bathroom, kitchen, hallways)? If not, have appropriate measures been taken to treat the lack of access as a rights restriction?
· Does the setting appear to be safe and clean?
· Are all areas in good repair? If not, please describe.
· Are stairs and halls free of obstacles?
· Is the environment free of foul odors?
· Is the environment free from evidence of roaches, bed bugs, rodents, flies, fleas, etc.

IL462-4465 (N-09-18) Independent Service Coordination (ISC) Individual Monitoring and Interview Notes
Printed by Authority of the State of Illinois -0- Copies Page of

Appendix D
Agency Responses

IDHS
ILLINOIS DEPARTMENT OF HUMAN SERVICES

JB Pritzker, *Governor*

Dulce M. Quintero, *Secretary Designate*

100 South Grand Avenue, East • Springfield, Illinois 62762
401 South Clinton Street • Chicago, Illinois 60607

November 25, 2024

Jill Paller
Auditor General's Office
400 W. Monroe
Suite 306
Springfield, IL 62703

Dear Ms. Paller,

Attached you will find the Department of Human Services responses to the Office of the Auditor General's recommendations for the Performance Audit of the Oversight of the Independent Service Coordination Program. Please let us know if there is anything further you may require.

Sincerely,

SIGNED ORIGINAL ON FILE

Amy Macklin, Chief Internal Auditor
Illinois Department of Human Services

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-1 ISSA Formula Analysis

Recommendation: ***DHS should regularly and systematically review the ISSA formula utilized to fund the case management services provided by the ISC agencies.***

Management Response:

IDHS accepts the recommendation. On an annual basis, IDHS now completes a review of the formula used to develop the funding for ISSA services to determine the change in the funding amount. As part of the formula, IDHS uses the same data inputs for personnel as used for the waiver service rates. The ISSA rate reflects the same wage rate for QIDPs and other administrative functions as are included in the waiver service rates, consistent with the Guidehouse Rate Study. IDHS will continue to review the formula used for the ISSA and the grant funded services.

IDHS-DDD has created the Bureau of Grant Programs Management to further expand oversight, review, and support for ISCs as they fulfill their contracted obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants. In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and bi-weekly meetings to ensure activities are implemented appropriately and consistently.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-2 Review and Analysis of Rejected Billings

Recommendation: ***DHS should regularly analyze the rejected billings and ensure the reasons are appropriate. Additionally, DHS should specifically review billings rejected for an unknown error and facilitate any needed corrections.***

Management Response:

IDHS accepts this recommendation. IDHS's website identifies commonly received rejection codes and steps the ISCs can take to self-correct. If an ISC agency is unable to correct the reason for the rejection, they are instructed to contact DDD personnel to assist. On a quarterly basis, the DDD Waiver Unit receives a file containing all currently rejected billings, so that they can review and attempt to correct the reason for the rejections. During the audit period, IDHS was experiencing a high volume of claims rejections due to claim and warrant data issues resulting from the implementation of SAP. DDD worked with staff from the Department of Innovation and Technology (DoIT) to develop a correction which was implemented in January 2024.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-3 Case Manager Ratio

Recommendation: ***DHS should set case manager ratios and should track ISC case manager information to ensure all grant-required activities can reasonably be conducted.***

Management Response:

IDHS accepts the recommendation. IDHS allows ISCs to determine individual caseload mixes which results in some variation in caseloads based on need. For FY25, IDHS reimburses ISCs for an average ISSA caseload of 51. In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. Additionally, IDHS-DDD increased QIDP rates in the FY25 ISC grant agreements to be consistent with QIDPs providing waiver services to address concerns around hiring. The IDHS-DDD Bureau of Grant Programs Management is focused on expanding oversight, review, and support for ISCs as they fulfill their grant obligations.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-4 Unwritten Policy for ISC Selection

Recommendation: ***DHS should follow the ISC Manual and require each individual to only be served by the ISC agency assigned to the specific region of residence. If DHS decides to allow exceptions to the Manual, those exceptions should be included in a written policy and documented in individual case files.***

Management Response:

IDHS accepts the recommendation. Although IDHS recognizes this occurred for one individual in the auditor's sample, IDHS currently does not allow exceptions and will update the ISC Manual by December 31, 2024.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-5 **Allegations – Sharing Information**

Recommendation: ***DHS should ensure all allegations reported to oversight entities (including the DHS Office of the Inspector General, Adult Protective Services, the Department of Children and Family Services, and the Department of Public Health) for developmentally disabled individuals are maintained by DHS and shared with the respective ISC agencies.***

Management Response:

IDHS accepts the recommendation. IDHS will share any such allegations, if reasonably feasible, that it receives. IDHS-DDD receives APS allegations and provides those to ISCs. IDHS-DDD will speak with the OIG regarding the feasibility of providing OIG-related allegations to the ISCs.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-6 ISC Manual

Recommendation: ***DHS should update the ISC Manual and grant agreements to ensure accurate and consistent guidance is provided to the ISC agencies.***

Management Response:

IDHS accepts the recommendation. The ISC manual update is being finalized by December 31, 2024. In addition to the ISC manual, IDHS-DDD staff meet regularly with the ISC leadership and hold one-on-one meetings with individual ISCs to address questions and concerns. Prior to a new grant agreement, IDHS-DDD staff works with ISCs to address questions related to their requirements, billing, grant agreements, and amendments.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-7 Monitoring – PUNS

Recommendation: ***DHS should ensure ISC agencies comply with the annual PUNS update requirement outlined in the grant agreements. DHS should also ensure Mobius reports include only ISC agencies that are currently in the ISC program.***

Management Response:

IDHS accepts the recommendation. IDHS-DDD Bureau of Grant Programs Management (Bureau) was created to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants. Additionally, IDHS worked with the Department of Innovation and Technology (DoIT) to address the Mobius issue. That work was completed in December 2023 so that the data and reporting through Mobius on the ISCs is up to date.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-8 Monitoring – Annual Redeterminations

Recommendation: ***DHS should ensure ISC agencies comply with the annual redetermination requirement outlined in the grant agreements.***

Management Response:

IDHS accepts the recommendation. The Bureau of Quality Management monitors annual redetermination for compliance and IDHS-DDD reports this to the federal Center for Medicare and Medicaid Services (CMS) in the required performance measurements. The IDHS-DDD Bureau of Grant Programs Management (Bureau) role includes oversight, review, and support for ISCs as they fulfill their grant obligations. Additionally, IDHS worked with the Department of Innovation and Technology (DoIT) to address the Mobius issue. That work was completed in December 2023 so that the data and reporting through Mobius on the ISCs is up to date.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-9 Monitoring – ISSA Visits

Recommendation: ***DHS should monitor the ISC agencies and ensure all individuals receive an updated discovery tool and personal plan at least annually and should ensure all individuals receive the required monitoring visits. DHS should also ensure ISC agencies use the required form and document any reason a visit is not conducted timely, in the prescribed format, or without the involvement of the individual.***

Management Response:

IDHS accepts the recommendation. In FY24, IDHS-DDD created the Bureau of Grant Programs Management (Bureau) to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants.

In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and through bi-weekly meetings to ensure activities are implemented appropriately and consistently.

Furthermore, BQM uses a representative sample process to select individuals in waiver services and reviews their discovery tools, personal plans, and implementation strategies, as well as the person-centered planning process, monitoring visits and deadlines annually. Individuals who are reviewed are selected randomly. Findings from this sample are reported as a federal CMS required performance measure. BQM will begin reporting to the Bureau of Grant Program Management starting January 1, 2025. Additionally, the ISCs are responsible for reporting this quarterly on the Period Performance Report.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-10 Monitoring – Bogard

Recommendation: ***DHS should maintain an accurate listing of all individuals with the Bogard-class designation and should ensure ISC agencies are providing all required services to individuals with this class designation.***

Management Response:

IDHS accepts the recommendation. IDHS-DDD updates the Bogard class monthly, based on information provided by the ISCs and reports through Birdseye.

In FY24, IDHS-DDD created the Bureau of Grant Programs Management (Bureau) to expand oversight, review, and support for ISCs as they fulfill their grant obligations. The Bureau is in the process of hiring additional staff to provide this oversight including a manager focused entirely on ISC grants.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-11 Monitoring – ADA/Olmstead Outreach and Housing Navigator

Recommendation: ***DHS should adequately track and monitor ISC agency compliance with the Housing Navigator and ADA/Olmstead Outreach programs. This should include complete and up-to-date populations of individuals entitled to receive such services. For any required activities not conducted, DHS should request a return of funds.***

Management Response:

IDHS-DDD accepts the recommendation. Housing Navigator was a pilot program during the time of this audit with an evaluation component in order to track and improve the process. In addition, the FY25 budget included increased funding for the Housing Navigator program in order to ensure all ISCs will be able to continue and, in some cases, expand their activities.

Since the audit period, the ADA/Olmstead outreach program, has been strengthened with processes, language, and outreach letters improved to increase clarity. The IDHS-DD Bureau of Grant Programs Management is now providing oversight, review, and support for ISCs as they fulfill their grant obligations.

In FY25, IDHS-DDD surveyed ISCs regarding the costs of ISC services, to ensure that the ISC grant budgets and the cost of the ISC activities under those budgets align. IDHS-DDD continues to work with the ISCs through this process and through bi-weekly meetings to ensure that activities are implemented appropriately and consistently.

SUMMARY SCHEDULE OF AUDIT FINDINGS
ILLINOIS DEPARTMENT OF HUMAN SERVICES
MANAGEMENT RESPONSES

PERFORMANCE AUDIT OF THE DHS OVERSIGHT AND OF THE INDEPENDENT SERVICE COORDINATION

Recommendation-12 Monitoring – SODC Transitions

Recommendation: ***DHS should ensure the ISC agencies are meeting all deliverables as required by the ISC agency grant agreements. This should include participation in pre-transition activities, as well as completion of all required post-transition follow-up visits. DHS should issue clear and consistent guidance related to ISC agency requirements for SODC transitions. DHS should consider coordinating DHS and ISC agency SODC transition activities to avoid unnecessary overlap and more efficient use of resources.***

Management Response:

IDHS accepts the recommendation. IDHS-DDD Bureau of Transition Services (BTS) and SODC transition staff meet regularly with ISC transition staff to discuss transitions and strategize on approaches to support transitions. The Transition Manual is currently being updated. IDHS-DDD will update the ISC manual by December 31, 2024.

Recycled Paper • Soybean Inks
Printed by Authority of the State of Illinois
LPU Order 00000 • December 2024 • 30 copies