STATE OF ILLINOIS
DEPARTMENT ON AGING

COMPLIANCE EXAMINATION
For the Two Years Ended June 30, 2020

Performed as Special Assistant Auditors
for the Auditor General, State of Illinois

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DEPARTMENT OFFICIALS

Director (March 18, 2019 - Current)	Paula A. Basta
Director (July 1, 2018 - March 17, 2019)	Jean Bohnhoff
Deputy Director (April 3, 2019 - Current)	Lora McCurdy
Deputy Director (July 1, 2018 - April 2, 2019)	Jamie Ewing
Chief of Staff (July 19, 2019 - Current)	Selma D'Souza
Chief of Staff (May 4, 2019 - July 18, 2019)	Vacant
Chief of Staff (July 1, 2018 - May 3, 2019)	Jim McDonough
Chief Legal Counsel	Rhonda Armstead
Chief Fiscal Officer (September 16, 2019 - Current)	Sarah Harris
Chief Fiscal Officer (July 1, 2018 - September 15, 2019)	Anna O'Connell
Chief, Bureau of Business Service	Theresa McKeon
Chief Internal Auditor (May 18, 2020 - Current)	Mike Sartorius
Chief Internal Auditor (February 1, 2020 - May 17, 2020)	Vacant
Chief Internal Auditor (July 1, 2018 - January 31, 2020)	Nicholas Barnard

The Department's primary administrative offices are located at:

One Natural Resources Way
Suite 100
Springfield, Illinois 62702

160 North LaSalle Street
Suite N-700
Chicago, Illinois 60601

Illinois Department on Aging

JB Pritzker, Governor
Paula A. Basta, M.Div., Director

One Natural Resources Way, Suite 100, Springfield, Illinois 62702-1271
Phone: 800-252-8966 • 888-206-1327 (TTY) • Fax: 217-785-4477

MANAGEMENT ASSERTION LETTER

July 22, 2021

Borschnack, Pelletier & Co.
Certified Public Accountants
200 E. Court St., Suite 608
Kankakee, IL 60901

Ladies and Gentlemen:

We are responsible for the identification of, and compliance with, all aspects of laws, regulations, contracts, or grant agreements that could have a material effect on the operations of the State of Illinois, Department on Aging (Department). We are responsible for and we have established and maintained an effective system of internal controls over compliance requirements. We have performed an evaluation of the Department's compliance with the following specified requirements during the two-year period ended June 30, 2020. Based on this evaluation, we assert that during the years ended June 30, 2020 and June 30, 2019, the Department has materially complied with the specified requirements listed below.

A. Other than what has been previously disclosed and reported in the Schedule of Findings, the Department has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.

B. Other than what has been previously disclosed and reported in the Schedule of Findings, the Department has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions, or mandatory directions imposed by law upon such obligation, expenditure, receipt, or use.

C. Other than what has been previously disclosed and reported in the Schedule of Findings, the Department has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

D. Other than what has been previously disclosed and reported in the Schedule of Findings, State revenues and receipts collected by the Department are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate, and in accordance with law.

E. Money or negotiable securities or similar assets handled by the Department on behalf of the State or held in trust by the Department have been properly and legally administered, and the accounting and recordkeeping relating thereto is proper, accurate, and in accordance with law.

Yours truly,

State of Illinois, Department on Aging

SIGNED ORIGINAL ON FILE
Paula A. Basta, Director

SIGNED ORIGINAL ON FILE
Sarah Harris, Chief Fiscal Officer

SIGNED ORIGINAL ON FILE
Rhonda Armstead, Chief Legal Counsel

COMPLIANCE REPORT

SUMMARY

The compliance testing performed during this examination was conducted in accordance with *Government Auditing Standards* and the Illinois State Auditing Act.

ACCOUNTANT'S REPORT

The Independent Accountant's Report on State Compliance, on Internal Control Over Compliance and on Supplementary Information for State Compliance Purposes does not contain scope limitations or disclaimers, but does contain a qualified opinion on compliance and identifies material weaknesses over internal control over compliance.

SUMMARY OF FINDINGS

Number of	Current Report	Prior Report
Findings	21	16
Repeated Findings	13	9
Prior Recommendations Implemented or Not Repeated	3	5

SCHEDULE OF FINDINGS

Item No.	Page	Last/First Report	Description	Finding Type
			FINDINGS (STATE COMPLIANCE)	
2020-001	10	2018/2010	Inadequate Controls and Monitoring Over Enhanced Rate Payments Made to Community Care Program Service Providers	Material Weakness and Material Noncompliance
2020-002	12	2018/2018	Failure to Maintain Accounts Receivable Records	Material Weakness and Material Noncompliance
2020-003	14	2018/2016	Inadequate Controls Over State Property	Material Weakness and Material Noncompliance
2020-004	18	2018/2016	Inadequate Monitoring of Grantees and Service Providers	Material Weakness and Material Noncompliance
2020-005	20	2018/2018	Inadequate Internal Controls Over Interagency Agreements	Material Weakness and Material Noncompliance
2020-006	22	2018/2006	Failure to Prepare, Submit and Post Reports	Significant Deficiency and Noncompliance

COMPLIANCE REPORT

SUMMARY (CONTINUED)

SCHEDULE OF FINDINGS (CONTINUED)

Item No.	Page	Last/First Report	Description	Finding Type
2020-007	24	2018/2018	Failure to Develop a Program to Identify the Special Needs and Problems of Minority Senior Citizens	Significant Deficiency and Noncompliance
2020-008	27	2018/2016	Failure to Make a Grant to Study Employment Plan	Significant Deficiency and Noncompliance
2020-009	28	New	Weaknesses in Cybersecurity Programs and Practices	Significant Deficiency and Noncompliance
2020-010	30	New	Inadequate Controls Over Monthly Reconciliations	Significant Deficiency and Noncompliance
2020-011	32	New	Failure to Meet Quality Assurance and Improvement Program Standard	Significant Deficiency and Noncompliance
2020-012	34	2018/2018	Inadequate Controls Over Voucher Processing	Significant Deficiency and Noncompliance
2020-013	36	2018/2014	Noncompliance with the Fiscal Control and Internal Auditing Act	Significant Deficiency and Noncompliance
2020-014	38	2018/2012	Failure to Complete Performance Evaluations	Significant Deficiency and Noncompliance
2020-015	39	New	Weaknesses in Disaster Contingency Planning and Testing	Significant Deficiency and Noncompliance
2020-016	40	New	Lack of Controls over Changes to the Case Management System	Significant Deficiency and Noncompliance
2020-017	42	New	Indirect Cost Reimbursements Not Claimed for All Federal Grants	Significant Deficiency and Noncompliance
2020-018	44	New	Failure to Report on Community Care Program Reforms	Significant Deficiency and Noncompliance
2020-019	46	2018/2016	Failure to Enter into Agreement with the State Board of Elections	Significant Deficiency and Noncompliance
2020-020	48	2018/2016	Failure to Share Data with the State Board of Elections	Significant Deficiency and Noncompliance

COMPLIANCE REPORT

SUMMARY (CONTINUED)

SCHEDULE OF FINDINGS (CONTINUED)

Item No.	Page	Last/First Report	Description	Finding Type
2020-021	50	New	Inaccurate Debt Transparency Reporting	Significant Deficiency and Noncompliance
			PRIOR FINDINGS NOT REPEATED	
A	53	2018/2018	Statewide Failure to Execute Interagency Agreements and Perform Essential Project Management Functions Over Provider Enrollment in the Medicaid Program	
B	53	2018/2018	Inadequate General Information Technology Controls Over IMPACT	
C	54	2018/2018	Insufficient Review and Documentation of Provider Enrollment Determinations	

EXIT CONFERENCE

The findings and recommendations appearing in this report were discussed with Department personnel at an exit conference on June 29, 2021. Attending were:

Department on Aging
Paula A. Basta, Director
Selma D’Souza, Chief of Staff
Lora McCurdy, Deputy Director
Rhonda Armstead, Chief Legal Counsel
Sarah Harris, Chief Fiscal Officer
Michael Sartorius, Chief Internal Auditor
Theresa McKeon, Chief, Bureau of Business Service
Russ Kemple, Chief Information Officer

Office of the Auditor General
Lisa Warden, Audit Manager

Borschnack, Pelletier & Co.
Paul Pelletier, Partner
Brian Creek, Manager

The Department on Aging’s responses to the recommendations were provided by Mr. Michael Sartorius, Chief Internal Auditor, in correspondences dated July 8, 13, 14 and 15 of 2021.

Borschnack Pelletier & Co.
Certified Public Accountants & Consultants
200 East Court Street • Suite 608 • Kankakee, IL 60901
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INDEPENDENT ACCOUNTANT'S REPORT ON STATE COMPLIANCE, ON INTERNAL CONTROL OVER COMPLIANCE, AND ON SUPPLEMENTARY INFORMATION FOR STATE COMPLIANCE PURPOSES

Honorable Frank J. Mautino
Auditor General
State of Illinois

Compliance

As Special Assistant Auditors for the Auditor General, we have examined compliance by the State of Illinois, Department on Aging (Department) with the specified requirements listed below, as more fully described in the *Audit Guide for Financial Audits and Compliance Attestation Engagement of Illinois State Agencies* (*Audit Guide*) as adopted by the Auditor General, during the two years ended June 30, 2020. Management of the Department is responsible for compliance with the specified requirements. Our responsibility is to express an opinion on the Department's compliance with the specified requirements based on our examination.

The specified requirements are:

A. The Department has obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.

B. The Department has obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions or mandatory directions imposed by law upon such obligation, expenditures, receipt or use.

C. The Department has complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

D. State revenues and receipts collected by the Department are in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts is fair, accurate and in accordance with law.

E. Money or negotiable securities or similar assets handled by the Department on behalf of the State or held in trust by the Department have been properly and legally administered and the accounting and recordkeeping relating thereto is proper, accurate and in accordance with law.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants; the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States; the Illinois State Auditing Act (Act); and the *Audit Guide*. Those standards, the

Act, and the *Audit Guide* require that we plan and perform the examination to obtain reasonable assurance about whether the Department complied with the specified requirements in all material respects. An examination involves performing procedures to obtain evidence about whether the Department complied with the specified requirements. The nature, timing and extent of the procedures selected depend on our judgement, including an assessment of the risks of material noncompliance with the specified requirements, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our modified opinion.

Our examination does not provide a legal determination on the Department's compliance with the specified requirements.

Our examination disclosed material noncompliance with the following specified requirements applicable to the Department during the two years ended June 30, 2020.

<u>Specified Requirement A</u>
As described in the accompanying Schedule of Findings as item 2020-001, the Department had not obligated, expended, received, and used public funds of the State in accordance with the purpose for which such funds have been appropriated or otherwise authorized by law.

<u>Specified Requirement B</u>
As described in the accompanying Schedule of Findings as item 2020-001, the Department had not obligated, expended, received, and used public funds of the State in accordance with any limitations, restrictions, conditions or mandatory directions imposed by law upon such obligation, expenditures, receipt or use.

<u>Specified Requirement C</u>
As described in the accompanying Schedule of Findings as items 2020-001, 2020-003, 2020-004 and 2020-005, the Department had not complied, in all material respects, with applicable laws and regulations, including the State uniform accounting system, in its financial and fiscal operations.

<u>Specified Requirement D</u>
As described in the accompanying Schedule of Findings as item 2020-002, the Department had not ensured the State revenues and receipts collected by the Department were in accordance with applicable laws and regulations and the accounting and recordkeeping of such revenues and receipts was fair, accurate, and in accordance with law.

In our opinion, except for the material deviations from the specified requirements described in the preceding paragraphs, the Department complied with the specified requirements during the two years ended June 30, 2020. However, the results of our procedures disclosed instances of noncompliance with the specified requirements, which are required to be reported in accordance with criteria established by the Audit Guide and are described in the accompanying Schedule of Findings as items 2020-006 through 2020-021.

The Department's responses to the compliance findings identified in our examination are described in the accompanying Schedule of Findings. The Department's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing and the results of that testing in accordance with the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.

Internal Control Over Compliance

Management of the Department is responsible for establishing and maintaining effective internal control over compliance with the specified requirements (internal control). In planning and performing our examination, we considered the Department's internal control to determine the examination procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the Department's compliance with the specified requirements and to test and report on internal control in accordance with the *Audit Guide*, but not for the purpose of expressing an opinion on the effectiveness of the Department's internal control. Accordingly, we do not express an opinion on the effectiveness of the Department's internal control.

Our consideration of internal control over compliance was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been identified. However, as described in the accompanying schedule of findings, we did identify certain deficiencies in internal control over compliance that we consider to be material weaknesses and significant deficiencies.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with the specified requirements on a timely basis. A *material weakness in internal control* is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that material noncompliance with the specified requirements will not be prevented, or detected and corrected, on a timely basis. We consider the deficiencies described in the accompanying Schedule of Findings as items 2020-001 through 2020-005 to be material weaknesses.

A *significant deficiency in internal control* is a deficiency, or combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiencies described in the accompanying Schedule of Findings as items 2020-006 through 2020-021 to be significant deficiencies.

As required by the *Audit Guide*, immaterial findings excluded from this report have been reported in a separate letter.

The Department's responses to the internal control findings identified in our examination are described in the accompanying Schedule of Findings. The Department's responses were not subjected to the procedures applied in the examination and, accordingly, we express no opinion on the responses.

The purpose of this report is solely to describe the scope of our testing of internal control and the results of that testing based on the requirements of the *Audit Guide*. Accordingly, this report is not suitable for any other purpose.

Supplementary Information for State Compliance Purposes

Our examination was conducted for the purpose of forming an opinion on the Department's compliance with the specified requirements. The accompanying supplementary information for the years ended June 30, 2020 and June 30, 2019 in Schedules 1 through 7 and the Analysis of Operations Section are presented for purposes of additional analysis. Such information is the responsibility of the Department's management. We have applied certain limited procedures as prescribed by the *Audit Guide* to the accompanying supplementary information for the years ended June 30, 2020 and June 30, 2019 in Schedules 1 through 7. We have not applied procedures to the accompanying supplementary information for the year ended June 30, 2018 in Schedules 3 through

7 and in the Analysis of Operations Section. We do not express an opinion, a conclusion, nor provide any assurance on the accompanying supplementary information in Schedules 1 through 7 or the Analysis of Operations Section.

SIGNED ORIGINAL ON FILE

Kankakee, IL

July 22, 2021

2020-001 **FINDING** Inadequate Controls and Monitoring Over Enhanced Rate Payments Made to Community Care Program Service Providers

The Department on Aging (Department) lacked adequate controls and monitoring over eligibility determinations and payments made to service provider agencies (providers) that applied for and received a special hourly rate under the Community Care Program.

The Illinois Act on Aging (20 ILCS 105/4.02) requires the Department to pay an enhanced rate under the Community Care Program to those in-home providers that offer health insurance coverage as a benefit to their direct service worker employees consistent with the mandates of Public Act 095-0713. For Fiscal Years 2019 and 2020, the enhanced rate was $1.77 per hour. For the two fiscal years under examination, the Department paid all providers a total of $86,458,388 for the enhanced rate payments.

The auditors tested 6 of 12 (50%) providers who were paid an enhanced rate and noted none of the providers tested submitted a verification from an independent certified public accountant of the actual, documented expense for health insurance during at least one of the fiscal years tested. In addition, 6 of 6 (100%) providers tested did not submit a Direct Service Worker Health Insurance Certification (DSWHIC) during at least one of the fiscal years tested.

According to the Illinois Administrative Code (Code) (89 Ill. Adm. Code 240.1970), providers must provide a certification showing that they offer, or will offer, health insurance coverage to all direct service workers who have worked a specified amount of time and that at least one quarter of those workers accept the offer of health insurance.

The enhanced rate is available for eligible providers with private insurance (Type 1), as well as eligible employer-provided health plans as part of a collective bargaining agreement with unionized workers (Type 2). As part of required annual insurance reviews, both Type 1 and Type 2 providers are required to substantiate their continued eligibility to receive the enhanced rate by submitting a copy of its health insurance plan or a certificate of insurance to the Department within six months after the end of the fiscal year. Providers are also required to submit verification from an independent certified public accounting firm of the actual, documented expense for health insurance during the providers' fiscal year. Any excess payments received over the amount spent for health insurance must be returned to the Department.

This finding has been reported since 2010 and the Department has failed to take sufficient, substantive corrective actions to resolve this finding. The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

Department officials stated the issues noted were due to providers not submitting the proper documentation and the Department having insufficient resources in the Fiscal Office to follow up with providers.

2020-001 **FINDING** Inadequate Controls and Monitoring Over Enhanced Rate Payments Made to Community Care Program Service Providers (Continued)

Failure to ensure accuracy and completeness of eligibility determinations and verification of expenses can lead to provider overpayments. Failure to timely obtain, maintain, and review DSWHIC forms increases the risk that incorrect or excessive enhanced payments will not be prevented or detected. (Finding Code No. 2020-001, 2018-004, 2016-001, 2014-001, 12-01, 10-01)

RECOMMENDATION

We recommend the Department strengthen controls to ensure that initial and ongoing reviews of eligibility and annual reporting for the enhanced reimbursement rate are conducted and documented in a timely manner, and in accordance with the Code. We also recommend the Department obtain reimbursement from providers if determined to be ineligible.

DEPARTMENT RESPONSE

The Department concurs with this finding and is currently working with Central Management Services to hire a manager that will develop proper procedures and trainings for staff to create a cohesive area so that initial and ongoing reviews of eligibility and annual reporting for the enhanced reimbursement rate are conducted and documented in a timely manner, and in accordance with the Code.

2020-002 **FINDING** Failure to Maintain Accounts Receivable Records

The Department on Aging (Department) failed to maintain detailed documentation of the accounts receivable reported on its Quarterly Summary of Accounts Receivable – Accounts Receivable Activity (Form C-97), Quarterly Summary Accounts Receivable – Aging of Total Gross Receivables (Form C-98) and Quarterly Summary of Accounts Receivable – External Collections Activity for Accounts Over 180 Days Past Due (Form C-99) reports submitted to the Office of Comptroller (IOC).

The auditors tested four of the quarterly accounts receivable related reports the Department filed with the IOC during the examination period and noted the following:

- Included in receivables on each of the reports were $1,155,000 of receivables for the General Revenue Fund. The Department was unable to provide any detailed records to support the information on the quarterly reports. The same $1,155,000 was also reported as accounts receivable since June 30, 2016 in previous examination reports.
- For the quarter ended March 31, 2020, the Department reported additions of accounts receivable totaling $1,010,000, but was not able to provide any detailed records to support this amount. This amount was backed off as an adjustment to receivables on the June 30, 2020 report.
- Reports for two (25%) of the eight quarters during the examination period were submitted late to the IOC. Those reports were submitted 1 day and 3 days late.

The auditors also inquired whether any of the Department's accounts receivable were sent to the IOC's Debt Recovery Offset System. The Department responded they do not use the IOC's Debt Recovery Offset System as the Department does not have a system for tracking receivables. However, the auditors noted the Department provided recoupment reports detailing (by vendor) $1,871,529 of refunds due to the Department which were added to the Department's receivables in Fiscal Year 2019 and a notification sent to an In-Home Care provider requesting refund of $569,765 of enhanced rate payments which was added to the Department's receivables in Fiscal Year 2020.

The Statewide Accounting Management System (SAMS) (Procedure 26.30.10) requires State agencies to report receivable information with the IOC quarterly on Form C-97, Form C-98, and Form C-99 no later than the last day of the month following the end of the quarter. The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001(4)) requires the Department to establish and maintain a system, or systems, of internal fiscal controls to provide assurance that funds are properly accounted for and maintain accountability over the State's resources. The State Records Act (5 ILCS 160/8) requires the head of each agency to cause to be made and preserved records containing adequate and proper documentation of the essential transactions of the agency designed to furnish information and protect the financial rights of the State. The State Collection Act of 1986 (30 ILCS 210/5 (c-1)) requires all debts exceeding $250 and more than 90 days past due to be placed with the IOC's Offset System.

2020-002 **FINDING** Failure to Maintain Accounts Receivable Records (Continued)

Department management indicated the Department had not specifically identified who the recorded receivables were due from and had not referred receivables for offset because of an antiquated accounting system, insufficient staffing in the Fiscal Office, and other competing priorities. Department management indicated the late and unsupported report filings were due to clerical errors and misunderstandings.

Failure to timely file reports, maintain documentation of the Department's accounts receivable and pursue IOC offset of past due receivables could lead to the failure to properly collect amounts owed to the State and results in noncompliance with the Acts noted above. (Finding Code No. 2020-002, 2018-012)

RECOMMENDATION

We recommend the Department locate the related records and make reasonable collection efforts. If the documentation cannot be found, the Department should request permission to remove the receivables from its records. In addition, we recommend the Department strengthen procedures and allocate and utilize necessary resources to properly report and collect accounts receivable.

DEPARTMENT RESPONSE

The Department concurs with this finding and is currently working with Human Resources to hire staff that as a component of their job duties, will investigate options with the Attorney General's Office and the Comptroller to write off old uncollectable debt and begin a process within the new accounting system for more current and potentially collectable receivables. Staff will develop procedures and trainings to ensure if staff turnover occurs that procedures and guidance are available to new hires.

2020-003 **FINDING** Inadequate Controls Over State Property

The Department on Aging (Department) did not exercise adequate control over the recording and reporting of State Property.

As of June 30, 2020, the Department reported property with a total cost of $1,587,840. The auditors noted the following during the examination of the Department's equipment records:

- The Department did not report an internally developed intangible asset in progress. The auditors noted the Department had allocated $1.6 million to develop an application to replace other outdated applications still in use by the Department. The auditors noted payments made to the contractor working on the project totaled $218,968 in Fiscal Year 2019, $314,121 in Fiscal Year 2020, and an additional $147,296 of vouchers sent to the Court of Claims. In addition, payroll costs for the IT personnel assigned to the project were estimated to be $165,000. Statewide Accounting Management System (SAMS) (Procedure 03.30.30) requires capitalization of internally generated intangible assets that exceed $1 million. SAMS (Procedure 03.30.10) requires the accumulation of costs incurred during development of intangible assets in an internally developed intangible asset in progress account.

- The Department's policies did not clearly delineate the categories of equipment considered subject to theft. The policy adopted by the Department defines items at high risk for theft as being small and easily transportable, and caveats the list of these items is subject to change and is therefore fluid and unfixed. The Illinois Administrative Code (Code) (44 Ill. Adm. Code 5010.210(c)) states all agencies shall consider all vehicles and firearms to be subject to theft. Additionally, the Code states each agency is responsible for adopting policies clearly delineating categories of equipment considered to be subject to theft.

- For 7 of 30 (23%) equipment items selected for observation, totaling $6,067, the items were not able to be located, and therefore could not be observed. In addition, for 5 of the 30 (17%) equipment items totaling $2,041, the Department indicated the items were in a separate building in Springfield which had been condemned for mold and could not be observed. These items had not been removed from the Department's inventory listing as of June 30, 2020. The State Property Control Act (Act) (30 ILCS 605/4) requires responsible officers at each State agency to be accountable for the supervision, control and inventory of property under their jurisdiction to ensure proper accounting and safeguarding of assets.

- For 6 of 30 (20%) equipment items selected for observation, totaling $44,551, Department personnel indicated the items had been sent to the Department of Central Management Services (DCMS) Surplus Property Warehouse, but no written evidence of the property transfer or date of transfer was provided. These items had not been removed from the Department's inventory listing as of June 30, 2020. The Code (44 Ill. Adm. Code 5010.400) states that agencies shall adjust property records within 90 days of acquisition, change or deletion

2020-003 **FINDING** Inadequate Controls Over State Property (Continued)

of equipment items. The State Records Act (5 ILCS 160/9) requires agencies to establish and maintain a program for agency records management, which shall include effective controls over maintenance of records.

- For 6 of 30 (20%) equipment items selected for observation, totaling $2,803, Department personnel indicated the items were obsolete. The Act (30 ILCS 605/7.3) states responsible officers at each State agency shall periodically report all transferable property to DCMS. The Code (44 Ill. Adm. Code 5010.620) requires all agencies to regularly survey their inventories for transferable equipment and report any such equipment to the DCMS.

- For 3 of 3 (100%) equipment disposals tested, totaling $20,349, the disposals were not reported on the Department's Agency Report of Fixed Assets (C-15) in a timely manner. These capital lease items were returned when the capital lease ended September 30, 2019 but, were not removed from the Department's C-15 for 316 days. The Code (44 Ill. Adm. Code 5010.400) states that agencies shall adjust property records within 90 days of acquisition, change or deletion of equipment items.

- The Department did not report capital leases addition on its C-15 report totaling $32,848 and $21,290 which commenced in Fiscal Year 2018 and in the quarter ended September 30, 2019, respectively, until it filed an amended C-15 report for the quarter ended June 30, 2020. SAMS (Procedure 29.10.30) requires the Department to include on the quarterly Form C-15 all assets with an individual value of $1,000 or more and all items with a value of less than $1,000 that are highly susceptible to theft.

- For 3 of 25 (12%) equipment items found in the Department's facilities, the items were not included in the Department's property control records or reported to DCMS on the annual inventory. The unrecorded equipment included a television, a desk and a file cabinet. The Code (44 Ill. Adm. Code 5010.220) requires all equipment with an acquisition value greater than the nominal value (currently $1,000) and equipment that is subject to theft with a value less than that nominal value to be reported to the DCMS by the holding agency. The Code (44 Ill. Admin. Code 5010.230) identifies the required entries to be made in the inventory records. The Act (30 ILCS 605/4) requires responsible officers at each State agency to be accountable for the supervision, control and inventory of property under their jurisdiction to ensure proper accounting and safeguarding of assets.

- The auditors noted 85 of 1,497 (6%) equipment items on the Department's inventory listing did not include a purchase date or purchase price. The Code (44 Ill. Adm. Code 5010.230) states the date of purchase and purchase price must be entered on all agency records and provided by the agencies for the DCMS Property Control Division records.

2020-003 **FINDING** Inadequate Controls Over State Property (Continued)

- The auditors also noted no acquisitions were added and no assets were removed from the Department' property control records during the examination period, although the Department acquired equipment totaling $112,873 and disposed of property totaling $20,349. The Code (44 Ill. Adm. Code 5010.400) states that agencies shall adjust property records within 90 days of acquisition, change or deletion of equipment items.

- The Fiscal Year 2019 Certification of Inventory filed with DCMS by the Department for their March 29, 2019 physical inventory was inaccurate. We noted the physical inventory count sheets for two locations identified 107 items that were not found totaling $166,832, but none of the missing items were reported to DCMS as inventory discrepancies. All of these missing items were still on the Department's property control records as of June 30, 2020.

- As of the completion of our testing, the Department had not filed a Fiscal Year 2020 Certification of Inventory with DCMS 19 months after the last annual inventory was conducted. The Code (44 Ill. Adm. Code 5010.460) requires all agencies to complete an annual inventory of 100% of State equipment required to be reported to DCMS and is to include the "Discrepancy Report".

  The Code also requires agencies to provide a listing of all equipment items with a value greater than the nominal value, and equipment that is subject to theft with a value less than the nominal value.

- The Department could not provide documentation supporting the $56,688 equipment additions reported on the C-15 reports during the examination period. The State Records Act (5 ILCS 160/9) requires the head of each agency to establish and maintain a program for the economical and efficient management of records of the agency.

- The Department did not include its cellular phones on its property control records but did maintain a separate inventory of them. The auditors noted one (2%) of 42 cellular phones listed on the Department's June 30, 2018 cellular phone inventory was not included on the inventory records at June 30, 2020 and there was no evidence of it having been sent to (or in the process of being sent to) the State surplus property during the current examination period. Also, the Department reused cellular phone tag numbers for new phones that replaced old phones during the examination period.

- As a result of the conditions noted above, the Department's Schedule of Changes in Property also included significant misstatements, some of which were adjusted by the Department subsequent to the auditor's testing of property and equipment.

2020-003 **FINDING** Inadequate Controls Over State Property (Continued)

- The Department failed to take all reasonable and appropriate corrective actions to resolve the cause of this finding, which was first reported in FY16.

  The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources.

Department management indicated the noted issues were due to a lack of staffing resources and competing priority assignments for available staff in the Fiscal Office.

Failure to exercise adequate control over property and maintain accurate property control records increases the potential for fraud and possible loss or theft of State property. Inaccurate and untimely property reporting reduces the reliability of Statewide property information. (Finding Code No. 2020-003, 2018-011, 2016-010)

RECOMMENDATION

We recommend the Department allocate sufficient resources and strengthen internal controls over the recording and reporting of State property by reviewing their inventory and recordkeeping practices to ensure compliance with statutory and regulatory requirements. In addition, the Department should ensure all equipment and intangible assets are accurately and timely recorded on the Department's property and financial records.

DEPARTMENT RESPONSE

The Department concurs with this finding and has moved to a new inventory system that is much more user friendly and manageable. As staff are hired, they will be allocated to strengthen internal controls over the recording and reporting of State property by reviewing Department inventory and recordkeeping, assist with physical inventory taking, and tracking.

2020-004 **FINDING** Inadequate Monitoring of Grantees and Service Providers

The Department on Aging (Department) did not adequately monitor its grantees and service providers.

During testing of 40 grantees/service providers, which received $252,406,712 from the Department during the fiscal years tested, the auditors noted the Department had not received annual audit reports for 2 (10%) of the 20 Fiscal Year 2019 grantees/service providers tested. The 2 grantees/service providers received $15,278 from the Department for the individual programs tested and $20,094,837 in total payments (inclusive of all programs) for the fiscal year tested.

Each of the grant agreements tested included a requirement for the grantee to obtain an annual audit in accordance with Federal and State audit requirements and submit the audit report to the Department within 6 months or 180 days after the entity's fiscal year end. The type of audit required was determined by the amount of expenditures of Federal and State funds made by the grantee/service provider.

We also tested compliance with the reporting requirements applicable to the Department's in home care aide (homemaker services) providers. We tested 25 providers and noted:

- Three (12%) of the 25 providers tested had not submitted an audit to the Department since 2016.
- Twenty two of the providers did submit an audit for 2018 or 2019; however 19 (86%) of the 22 did not include any evidence of assurance the provider's procedures were in compliance with the Department's financial reporting guidelines requiring an administrative and employee wage and benefits cost split as required in the Department's administrative rules.

The Illinois Act on the Aging (20 ILCS 105/4.02) requires the Department to require an annual audit from all home care aide vendors. The annual audits shall assure the audited vendor's procedures are in compliance with the Department's financial reporting guidelines requiring an administrative and employee wage and benefits cost split.

This finding has been reported since 2016 and the Department has failed to take sufficient, substantive corrective actions to resolve the cause of this finding. The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance that resources are utilized efficiently, effectively, and in compliance with applicable law and obligations and costs are in compliance with applicable laws. Accordingly, the Department must receive and review the audit reports of its service providers and grantees in a timely manner to determine whether the funds were utilized in accordance with the purpose of the program.

Department management indicated they had not adequately monitored grantees/service providers and obtained all required audit reports and assurances due to staff vacancies and other competing priorities in the Fiscal Office.

2020-004 **FINDING** Inadequate Monitoring of Grantees and Service Providers (Continued)

Failure to properly monitor grantees/service providers through timely receipt and review of their audit reports decreases the Department's accountability over these expenditures and increases the risk of noncompliance with the provisions of the contracts with grantees and service providers. (Finding Code No. 2020-004, 2018-010, 2016-008)

RECOMMENDATION

We recommend the Department designate sufficient staff to monitor grantees/service provider activities by identifying, following-up on and enforcing submission of delinquent audit reports in order to determine whether the funds were utilized in accordance with the purpose of the program.

DEPARTMENT RESPONSE

The Department concurs with this finding and is currently working with Central Management Services to hire a manager. The manager will collaborate with the State Grant Accountability and Transparency Unit team and will develop proper procedures and trainings for staff to ensure standardized monitoring of audit requirements to comply with the financial components of agreements and contracts. Internal communication will be improved and will be inclusive of program managers to act when necessary for providers to become compliant.

For CCP Providers, the program managers may, under Section 240.1505 of the Service Provider contract agreement, cap the intake of any and all contracts held by a Service Provider due to non-compliance, including failure to provide audited financial reports. For providers falling under Older Americans Services, in accordance with the Older Americans Policy Manual Section 1100, the Department reserves the right to conduct a full financial review of the grantee due to non-compliance, including failure to provide audited financial reports.

2020-005 **FINDING** Inadequate Internal Controls Over Interagency Agreements

The Department on Aging (Department) did not maintain a complete inventory of interagency agreements the Department is or should be a party to and did not ensure it entered into, maintained and complied with all required interagency agreements.

During the examination, the auditors requested the Department provide a list of interagency agreements (IA) that were in effect during the two years ended June 30, 2020. The Department provided listings of all interagency agreements management believed to be in effect during the examination period. The auditors noted probable IAs omitted from these listings.

The auditors noted the interagency agreements required by the Illinois Act on the Aging (Act) (20 ILCS 105/4.02) were not included in the Department's inventory of IAs. In addition, the Department was unable to locate the interagency agreements required by the Act. The Act required the Department to execute, relative to the nursing home prescreening project, written interagency agreements with the Department of Human Services and the Department of Healthcare and Family Services to effect (1) the intake procedures and common eligibility criteria for those persons who are receiving non-institutional services, and (2) the establishment and development of non-institutional services in areas of the State where they are not currently available or are underdeveloped.

Due to these conditions, the auditors were unable to conclude whether the Department's population records were sufficiently precise and detailed under the Attestation Standards promulgated by the American Institute of Certified Public Accountants (AT-C § 205.35) to test the Department's interagency agreements. Even given the population limitations noted above which hindered the ability of the accountants to conclude whether a sample selected could be representative of the population, the accountants selected a sample and performed testing.

The State Records Act (5 ILCS 160/8) requires agencies to preserve records containing adequate and proper documentation of the organization, functions, policies, decisions, procedures, and essential transactions of the agency designed to furnish information to protect the legal and financial rights of the State and of persons directly affected by the agency's activities. The Act (5 ILCS 160/9) also requires agencies to establish and maintain a program for agency records management, which shall include effective controls over maintenance of records.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance that resources are used efficiently, effectively and in compliance with applicable law and revenues, expenditures, and transfers of assets, resources, or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

Department management indicated that due to personnel turnover in the 25 years since passage of the Act, the agreements could not be located at the Department or obtained from the sister agencies.

2020-005 **FINDING** Inadequate Internal Controls Over Interagency Agreements (Continued)

Failure to maintain, track, and ensure compliance with interagency agreements required by the Act poses a risk program objectives will not be met and the State may be exposed to legal and financial risks. Failure to maintain a complete inventory of all interagency agreements could also result in the Department entering into agreements that have conflicting requirements or possibly a duplication of services. Additionally, without the Department providing complete and adequate documentation, the auditors were unable to provide useful and relevant feedback to the General Assembly regarding the Department's compliance with interagency agreements. (Finding Code No. 2020-005, 2018-005)

RECOMMENDATION

We recommend the Department conduct a comprehensive review of statutory and other requirements to ensure all required IA's are identified, listed in its centralized record of all of its interagency agreements and monitored to ensure compliance. We further recommend the Department locate the agreements required by the Act or execute new agreements to comply with this State law.

DEPARTMENT RESPONSE

The Department concurs with this finding. The Department has already created a new tracking process to ensure its ability to locate and maintain its inventory of interagency agreements. Due to the identification of a missing IA during this audit, the Department will conduct a comprehensive review of all applicable statutes to ensure all required IA's are identified and contained in the repository.

2020-006 **FINDING** Failure to Prepare, Submit and Post Reports

The Department on Aging (Department) failed to prepare, submit and post required reports.

Annual Report

The State Finance Act (30 ILCS 105/3) requires the Department, at least 10 days preceding each regular session of the General Assembly, make and deliver to the Governor an annual report of the Department's acts and doings for the fiscal year ended in the previous calendar year.

As of June 30, 2020, the Department had not prepared or submitted an annual report for either fiscal year 2018 or fiscal year 2019. At the end of the examination period, those reports were 547 and 183 days overdue, respectively.

Community Care Program Annual Report

The Illinois Act on the Aging (20 ILCS 105/4.02) requires the Department and the Department of Human Services (DHS) to cooperate in the development and submission of an annual report of programs provided under this section, which includes the Community Care Program (CCP). Such annual report is to be filed with the Governor and the General Assembly on or before September 30 of each year. The auditors noted no evidence the Department had prepared, submitted or posted the CCP Annual Reports during the examination period. As of June 30, 2020, the FY18 and FY19 reports were 21 months and 9 months overdue, respectively.

Further, the General Assembly Organization Act (Act) (25 ILCS 5/3.1) requires an agency to electronically submit its required reports to specified members within the General Assembly. The Act requires an agency to make available for a reasonable time on its website all reports that are required to be submitted to the General Assembly by law or resolution. Additional copies are to be filed with the State Government Report Distribution Center for the General Assembly.

Distribution of Publications

The Department had not informed the State Library in writing of the person, persons, or positions responsible for distribution of publications of the Department.

The Illinois Administrative Code (Code) (23 Ill. Admin. Code 3020.150) requires each State agency to inform the Government Documents Section of the Illinois State Library in writing of the person, persons, or positions responsible for distribution of publications of that agency by July 15 of each year (January 15 for years prior to 2020) and shall be notified within two weeks after any changes.

2020-006 **FINDING** Failure to Submit and Post Reports (Continued)

Department management noted several factors contributed to the delays in completion and filing of the CCP Annual Reports in collaboration with the Department of Human Services. Department management stated they were seeking a legislative remedy for this requirement and were not aware of the requirement to inform the Government Documents Section of the person responsible for distribution of publications. Management stated a staff vacancy was another factor contributing to the delay and the change in Department administration adversely impacted the department's staffing levels and ability to timely provide the required annual reports.

Failure to file, submit, and post annual reports results in noncompliance with the Illinois Compiled Statutes and reduces available information to those parties that may be used in making budget and policy decisions. Failure to inform the Government Documents Section in writing of the person responsible for distribution of publications is a violation of the Code and inhibits follow up on reports and confirmation that reports are received from authorized persons. (Finding Code No. 2020-006, 2018-007, 2016-002, 2014-003, 12-05, 10-09, 08-09, 06-11)

RECOMMENDATION

We recommend the Department implement internal controls to ensure compliance with reporting requirements contained in the Acts and the Code or seek legislative remedy.

DEPARTMENT RESPONSE

The Department concurs with this finding.

Although the Department completes an Annual Report which includes updates on the Community Care Program (CCP), the Department accepts this finding and plans to complete an annual CCP Report in collaboration with the Illinois Department of Human Services.

The Department submitted an Annual Report for FY18 and FY19 which includes specific information related to the Community Care Program (CCP). In FY 2021, the Agency completed an inventory of statutorily required reports and developed a tracking mechanism to assist in their timely completion.

The Department implemented a plan for timely completion of Annual Reports to comply with the State Finance Act (30 ILCS 105/3).

The Department did not complete an exclusive CCP Annual Report. Although CCP specific data is included in the Department's Annual Report, the agency will cooperate with the Department of Human Services to develop such annual CCP reports in accordance with the Illinois Act on Aging (20 ILCS 105/4.02).

The Department is currently in compliance with Illinois Administrative Code (Code) (23 Ill. Admin. Code 3020.150) that requires each State agency to inform the Government Documents Section of the Illinois State Library in writing of the person, persons, or positions responsible for distribution of publications of that agency by July 15 of each year.

2020-007 **FINDING** Failure to Develop a Program to Identify the Special Needs and Problems of Minority Senior Citizens

The Department on Aging (Department) failed to develop a program to identify the special needs and problems of minority senior citizens as required by the Illinois Act on the Aging (Act)

The Act (20 ILCS 105/4.06) requires the Department to develop a program to identify the special needs and problems of minority senior citizens and evaluate the adequacy and accessibility of existing programs and information for minority senior citizens. This Act also requires the Department to develop procedures to enhance and identify availability of services and promulgate administrative rules to establish the responsibilities of the Department. The Department is also required to coordinate services for minority senior citizens and develop and submit an annual report with the Department of Public Health, the Department of Healthcare and Family Services, and the Department of Human Services before September 30 of each year.

The Department provided numerous statewide services which were inclusive of all Illinois senior citizens, including Illinois minority senior citizens. The Department also assisted with coordinating services with other State agencies across State programs, including applications for Medicaid and Supplemental Nutrition Assistance Program benefits with local offices of the Department of Human Services and the Department of Healthcare and Family Services, for all of the citizens served by the Department. However, the Department did not develop a prescribed program to identify the special needs and problems specific to minority senior citizens as opposed to all senior citizens. In addition, the Department had not promulgated any administrative rules to establish the responsibilities of the Department related to a separate program targeting minority senior citizens, and had not coordinated services specific to targeted minority senior citizens with the other named departments pursuant to the Act.

Although the Department and other designated agencies jointly filed Serving Minority Seniors annual reports which provided demographic information for the Department's existing programs for all senior citizens, those reports provided almost no information on programs and services specific to minorities as provided under this section of the Act. The auditors also noted these annual reports were compiled and submitted by September 30, but 15 months instead of 3 months following completion of the State's fiscal year.

Department management stated they sought legislative remedy to clarify the reporting deadline, but the bill had not advanced in the prior legislative session. In addition, Department management stated they believe existing programs and outreach efforts satisfy the intent of the Act.

Failure to develop and evaluate programs and information, develop procedures and administrative rules and work with designated health and human service agencies to coordinate services and annually report regarding the special needs and problems of minority senior citizens fails to satisfy the legislation's objective of identifying and addressing challenges unique to minority senior citizens. (Finding Code No. 2020-007, 2018-008)

2020-007 **FINDING** Failure to Develop a Program to Identify the Special Needs and Problems of Minority Senior Citizens (Continued)

RECOMMENDATION

We recommend the Department comply with the Act or seek a statutory revision.

DEPARTMENT RESPONSE

The Department partially concurs with this finding, as outlined below, the Department provides services to minority senior citizens through its inclusive approach to programming. The Department is presently working to evaluate its outreach to minority populations to determine a more effective means to target its outreach efforts to minority populations who are under-represented in its current programs and to plan for the projected changes in Illinois' aging demographics.

Although the Department does not have a distinct program targeting minority seniors, the Department's inclusive approach to the provision of supports and services is evidenced through its largest program, the Community Care Program (CCP), which serves a higher proportion of minority populations at 55% than non-minority populations. In addition to providing services to minority populations, the Department assists with coordinating services across state programs, including applications for Medicaid and Supplemental Nutrition Assistance Program benefits with local offices of the Department of Human Services (and the Department of Healthcare and Family Services). Additionally, the Department's federal Older Americans Act programs include services to minorities as a key component of its federally approved statewide funding formula which dictates that a portion of the federal funding be directed to minority populations.

In addition to the provision of direct services to older minority citizens, the Department worked to support additional minority CCP applicants through the process and certified additional minority providers. The Department developed a new language access policy to ensure that older adults have access to translated materials. The Department translated its materials on its website and printed materials. The Department utilized the Emergency Senior Services (ESS) funding to provide culturally appropriate ethnic meals. Training materials have been translated to Spanish. Also, recent Adult Protective Services education campaign Engage to Change have been translated into Spanish. Additionally, the Department trained Department of Human Services Welcoming Center staff to raise awareness of the Department's programs amongst immigrant populations.

The Department's approach to implementing programs is comprehensive, inclusive, and person centered taking a holistic view of the older adult, including race and ethnicity.

2020-007 **FINDING** Failure to Develop a Program to Identify the Special Needs and Problems of Minority Senior Citizens (Continued)

ACCOUNTANT'S COMMENT

Although the Department's programs and services also serve minority senior citizens, the Department did not comply with the following provisions of the Act during the examination period:

- The Department had not developed a prescribed program to 1) identify the special needs and problems of minority senior citizens and 2) evaluate the adequacy and accessibility of existing programs and information for minority senior citizens.
- The Department had not promulgated administrative rules to establish the responsibilities of the Department related to a separate program targeting minority senior citizens.
- The Department had not coordinated services specific to targeted minority senior citizens with the other named departments pursuant to the Act.
- The Department had not cooperated in the development and submission of annual reports on programs and services provided under Section 4.06 of the Act.

If the Department believes a program, services, evaluation, administrative rules, and reporting specific to minority senior citizens pursuant to Section 4.06 is not necessary, or if the Department believes existing programs, services, and reporting are sufficient to satisfy the intent of the Act, the Department should seek a legislative remedy to either eliminate or amend the specific requirements of the Act.

2020-008 **FINDING** Failure to Make a Grant to Study Employment Plan

The Department on Aging (Department) failed to make a grant to an institution of higher learning to study the feasibility of an affirmative action plan for persons 60 or older.

The Illinois Act on the Aging (Act) (20 ILCS 105/4.01(14)) required the Department to make a grant to an institution of higher learning to study the feasibility of establishing and implementing an affirmative action employment plan for the recruitment, hiring, training and retraining of persons 60 or more years old for jobs for which their employment would not be precluded by law.

The Department did not request an appropriation to make the grant for Fiscal Years 2019 or 2020. Instead, the Department sought legislative remedy to remove the requirement to make the grant; however, these bills did not progress out of committee in the prior legislative session.

Department management stated they continued to seek a legislative remedy, but the General Assembly had not passed the necessary legislation. Management also stated a grant for this purpose would be redundant of established employment training programs.

Failure to make a grant to an institution of higher learning to study the feasibility of establishing and implementing an affirmative action employment plan will not allow growth and evolvement in training and employing persons over 60 years old. (Finding Code No. 2020-008, 2018-009, 2016-004)

RECOMMENDATION

We recommend the Department request an appropriation and make the grant required by the Act or continue to seek a legislative remedy to the current statutory requirement.

DEPARTMENT RESPONSE

The Department concurs with this finding and will make a grant with an institution of higher learning in FY 2022. The Department will not seek a legislative remedy unless the Department finds appropriate federal and state programs under the Workforce Innovation and Opportunity Act (WIOA) already in existence, that have created an affirmative action employment plan for those 60 years and older.

2020-009 **FINDING** Weaknesses in Cybersecurity Programs and Practices

The Department on Aging (Department) had not implemented adequate internal controls related to cybersecurity programs and practices.

As a result of the Department's mission to serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage independence, dignity, and quality of life, the Department maintains computer systems that contain large volumes of confidential and personal information such as names, addresses, and Social Security numbers of the citizens of the State.

The Illinois State Auditing Act (30 ILCS 5/3-2.4) requires the Auditor General to review the State agencies and their cybersecurity programs and practices. During our examination of the Department's cybersecurity program, practices, and control of confidential information, we noted the Department:

- Had not developed a formal, comprehensive, adequate, and communicated security program (policies, procedures, and processes) to manage and monitor the regulatory, legal, environmental and operational requirements.
- Had not established and documented cybersecurity roles and responsibilities.
- Had not classified its data to identify and ensure adequate protection of information (i.e. confidential or personal information) most susceptible to attack.
- Had not evaluated and implemented appropriate controls to reduce the risk of attack.
- Had not ensured the Department's employees completed cybersecurity training in accordance with the Data Security on State Computers Act (Act). We selected 25 employees for testing and noted six (24%) employees did not complete the required cybersecurity training for calendar year 2019.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources. Additionally, generally accepted information technology guidance, including the National Institute of Standards and Technology (NIST), endorses the development of well-designed and well-managed controls to protect computer systems and data.

The Act (20 ILCS 450/25(b)) requires every employee to annually undergo training by the Department of Innovation and Technology concerning cybersecurity, encompassing, but not limited to, detecting phishing scams, preventing spyware infections and identity theft, and preventing and responding to data breaches.

Department management indicated they did not realize their responsibility to identify information technology risks and placed reliance on the Department of Information and Technology. Department management further indicated they relied upon system

2020-009 **FINDING** Weaknesses in Cybersecurity Programs and Practices (Continued)

notification of all employees on a regular basis of the requirement to complete trainings; however, certain employees failed to complete the training.

The lack of adequate cybersecurity programs and practices may result in unidentified risk and vulnerabilities and ultimately lead to the Department's volumes of personal information being susceptible to cyber-attacks and unauthorized disclosure. (Finding Code No. 2020-009)

RECOMMENDATION

The Department has the ultimate responsibility for ensuring confidential information is protected from accidental and unauthorized disclosure. Specifically, we recommend the Department:

- Establish and communicate the Department's security program (formal and comprehensive policies, procedures, and processes) to manage and monitor the regulatory, legal, environmental and operational requirements.
- Establish and document cybersecurity roles and responsibilities.
- Classify its data to identify and ensure adequate protection of information.
- Evaluate identified risks and implement appropriate controls to reduce risk.
- Monitor and follow up on employees who have not completed cybersecurity training as required by the Act in order to enforce the training requirement.

DEPARTMENT RESPONSE

The Department concurs with the finding. The Department has complied with all needed actions identified by NIST in the Department's Cybersecurity Plan with links to appropriate in force Department of Innovation and Technology Policies and Plans. The Department's Cybersecurity Plan was completed 05/26/2021.

Regarding cybersecurity training, the link to the Security Awareness Training report will be sent by Department CIO, or designated subordinate manager, to Division Directors/Managers on a quarterly basis. Managers would then be accountable to Department Director for ensuring their division staff completes required annual Security Awareness Training. A new policy will be implemented immediately upon the Department Director's approval.

2020-010 **FINDING** Inadequate Controls Over Monthly Reconciliations

The Department on Aging (Department) had inadequate internal controls over the performance and review of reconciliations.

The auditors tested 40 monthly reconciliations which included reconciliations of the Office of Comptroller's (IOC) reports to the Department's records of expenditures, unexpended appropriations, cash receipts, cash balances, contracts, and obligations.

The auditors noted the Department did not provide evidence of a monthly reconciliation having been performed for 23 of the 40 (58%) reconciliations selected for testing. Of the 17 reconciliations performed, 16 (94%) were not performed timely or did not evidence a date prepared, and 17 (100%) had no evidence of supervisory review. The late reconciliations were performed from 76 to 286 days subsequent to the end of the month, which was 16 to 226 days late.

The Statewide Accounting Management System (SAMS) (Procedures 07.30.20, 09.40.30, 11.40.20, 15.30.30, and 25.40.20) requires reconciliations of monthly reports to be completed within 60 days of the end of the month.

Proper internal controls require review of the reconciliations by an individual who did not prepare them to ensure a proper segregation of duties. Such reviews should be documented and performed in a timely manner.

As a result of not preparing and reviewing reconciliations and adjusting the Department's accounting records when appropriate, the Department initially prepared inaccurate fiscal schedules for inclusion in the State Compliance Examination Report. These initial fiscal schedules included several errors which may not have occurred if the Department had prepared reconciliations and adjusted its accounting records for errors identified. After the auditors pointed out these discrepancies to the Department, the Department provided revised fiscal schedules to include in the State Compliance Examination Report.

The Fiscal Control and Internal Auditing Act (Act) (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls, to provide assurance that revenues, expenditures, and transfers of assets, resources, or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

Department management stated the noted issues were due to insufficient staffing in the Fiscal Office and other competing priorities.

Failure to timely reconcile the Department's records with the IOC's records increases the risk of inaccurate financial reporting and undetected loss or theft. Lack of appropriate supervisory review increases the likelihood of misappropriation of State assets going undetected. Failure to prepare accurate fiscal schedules for its biennial compliance report indicates a weakness in accountability for the Department's fiscal operations. (Finding Code No. 2020-010)

2020-010 **FINDING** Inadequate Controls Over Monthly Reconciliations (Continued)

RECOMMENDATION

We recommend the Department assign sufficient staff to timely reconcile its records to the IOC's records, ensure the reconciliations receive appropriate supervisory review each month, and properly adjust its accounting records when necessary.

DEPARTMENT RESPONSE

The Department concurs with this finding and is currently in the process of posting positions and training new staff to ensure compliance with monthly reconciliations between the Agency and the Comptroller, as well as we are updating procedures to include a manager review each month.

2020-011 **FINDING** Failure to Meet Quality Assurance and Improvement Program Standard

The Department on Aging's (Department) internal audit department did not have an external or internal assessment performed of its program of internal audits as required by professional standards.

During testing, the auditors noted the Department's internal audit department did not have an external assessment performed within the past five years. The previous external assessment was completed on June 15, 2015. In addition, the Department could not provide evidence that the internal audit department had conducted any internal assessments during the examination period. Furthermore, our testing revealed that 3 of 3 (100%) internal audit reports tested during the examination period contained language stating the audit was conducted in accordance with the "International Standards for the Professional Practice of Internal Auditing" published by the Institute of Internal Auditors even though the standard had not been complied with by the Department.

The International Standards for the Professional Practice of Internal Auditing (IPPIA), Section, 1312 states, "External assessments must be conducted at least every five years by a qualified, independent assessor or assessment team from outside the organization." In addition, the IPPIA, Section 1311 states, internal assessments must include: 1) ongoing monitoring of the performance of the internal audit activity and 2) periodic self-assessments or assessments by other persons within the organization with sufficient knowledge of internal audit practices.

The IPPIA, Section 1321 states, "Indicating that the internal audit activity conforms with the International Standards for the Professional Practice of Internal Auditing is appropriate only if supported by the results of the quality assurance and improvement program."

Department management indicated vacancies in the Chief Internal Auditor (CIA) position for a total of ten months in the last five years limited the necessary continuity and personnel to ensure assessments were conducted. Management also stated continued use of the phrase "conducted in accordance with the International Standards for the Professional Practice of Internal Auditing" was an oversight.

Failure to complete the required assessments may result in a failure to timely detect any deficiencies in the internal audit program. Continuing to use the phrase "conducted in accordance with the International Standards for the Professional Practice of Internal Auditing" is also a violation of the IPPIA standards. (Finding Code No. 2020-011)

RECOMMENDATION

We recommend the Department ensure assessments are conducted as required by the IPPIA and to refrain from using the statement "conducted in accordance with the International Standards for the Professional Practice of Internal Auditing" until the Department is again in compliance with the standards.

2020-011 **FINDING** Failure to Meet Quality Assurance and Improvement Program Standard (Continued)

DEPARTMENT RESPONSE

The Department concurs with the finding. An internal quality assurance review and improvement program has been successfully developed and implemented. An external quality assurance review is scheduled for July 2021. Internal audit reports will continue to disclose non-compliance with the International Standards for the Professional Practice of Internal Auditing until conformance is demonstrated through a quality assurance review. Internal Audit reports no longer state conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.

2020-012 **FINDING** Inadequate Controls Over Voucher Processing

The Department on Aging (Department) did not have adequate controls over voucher processing.

During the examination, the auditors tested 185 vouchers for expenditures, totaling $6,440,142, and noted the following:

- 46 (25%) vouchers, totaling $689,869, were approved more than 30 days after receipt of a proper bill. These vouchers were approved for payment from 1 to 384 days late.
- 9 (5%) vouchers, totaling $682,661, where the Department failed to process an additional voucher to pay the vendor required interest, totaling $7,096.
- 14 (8%) vouchers, totaling $107,509, where the Department processed the interest payment to the vendor for an incorrect amount. Net interest underpaid totaled $147.
- Two (1%) vouchers, totaling $8,929, where the Department charged the expenditure to an incorrect detail object code.
- One (1%) voucher, totaling $1,181, where an employee failed to sign the receipts for gasoline purchased that supported the expenditure.
- One (1%) voucher, totaling $2,824,348, where the Department could not locate the voucher. This voucher was a refund to the federal government for unspent grant moneys.

The auditors also requested to examine 1 of the 3 (33%) petty cash reimbursement vouchers processed during the examination period. The Department was unable to locate the $44 voucher.

The Illinois Administrative Code (74 Ill. Adm. Code 900.70(b)) requires State agencies to approve proper bills or deny bills with defects, in whole or in part, within 30 days after receipt.

The State Prompt Payment Act (30 ILCS 540/3-2(1.05)) requires a State Agency to pay an invoice within 90 days after receiving a proper invoice for goods or services that were furnished to the State. If payment is not issued within 90 days, an interest penalty of 1.0% of any amount approved and unpaid shall be added for each month or 0.033% for each day, after the end of this 90-day period, until final payment is made.

The Statewide Accounting Management System (SAMS) (Procedure 11.50.30) provides a detailed description of the State's detail expenditure accounts.

The State Records Act (5 ILCS 160/8) requires the head of each agency ensure records are prepared and maintained which contain documentation of the agency's essential transactions.

Department management indicated the issues noted were due to staffing shortages, clerical errors and delays caused by the COVID-19 pandemic.

2020-012 **FINDING** Inadequate Controls Over Voucher Processing (Continued)

Inadequate controls over voucher processing, approvals and documentation can lead to additional interest payables, inaccurate financial reporting and inaccurate or questionable payments. (Finding Code No. 2020-012, 2018-006)

RECOMMENDATION

We recommend the Department improve its procedures to timely approve proper bills for payment, ensure that proper prompt payment interest is paid when required, and to ensure documentation is maintained to support all expenditures and approvals. Further, we recommend the Department ensure expenditures are charged to the correct detail object code.

DEPARTMENT RESPONSE

The Department concurs with this finding. We are in the process of updating procedures, in part, as a result to implementing the new statewide accounting system and to enhance timely payments. We are also in the process of posting positions with the intention of those positions assisting in processing of payments and more training on use of proper detailed object codes.

2020-013 **FINDING** Noncompliance with the Fiscal Control and Internal Auditing Act

The Department on Aging's (Department) did not comply with internal audit requirements of the Fiscal Control and Internal Auditing Act (Act).

The Department's Chief Internal Auditor position was vacant from February 1, 2020 through May 17, 2020 and the Department had no additional internal audit staff during the second half of fiscal year 2020. All systems of internal accounting and administrative controls, including grants received and made, contractual services and expenditures, were not reviewed during the two year examination period.

Furthermore, the Adult Protective Services Case Management System (APS CMS) application was implemented and modified during the examination period, but a pre-implementation review had not been conducted. Internal audit did not document the basis for concluding the APS CMS was not a major new system application or modification, although the Department identified this application as critical to continued operations or to fulfill a statutory mandate.

The Act (30 ILCS 10/2001(a)) requires the Department maintain a full-time program of internal auditing. Further, the Act (30 ILCS 10/2003(a)(2)) requires the Department's Executive Director to ensure the internal auditing program includes audits of major systems of internal accounting and administrative controls so that all major systems are reviewed at least once every two years. The Act also requires reviews of the design of major new electronic data processing systems and major modifications of those systems before their installation to ensure the systems provide for adequate audit trails and accountability.

Department officials indicated the internal audit vacancies and performing other audits deemed to be higher risk precluded the Department's internal audit program from completing audits of all major systems of internal accounting and administrative controls during the two year period. Department management indicated the internal auditor attended meetings relative to information system application development and concluded it was not a major system or modification, but did not document the basis for this conclusion. Department management further indicated the lack of a pre-implementation review may have been the result of a misunderstanding or lack of communication within the agency.

Failure to maintain a full time program of internal auditing results in some major systems of internal accounting and administrative controls not being reviewed during the two year period and results in noncompliance with the Act, weakens the Department's assessment of its overall internal control environment and increases the risk that an effective system of internal controls may not be maintained. Failure to document the basis for conclusions reached regarding major new information systems or modifications to existing systems can result in an unsupported position. Failure to review a major system modification before implementation increases the risk a system flaw may not be prevented or timely detected. (Finding Code No. 2020-013, 2018-013, 2016-011, 2014-007)

2020-013 **FINDING** Noncompliance with the Fiscal Control and Internal Auditing Act (Continued)

RECOMMENDATION

We recommend the Department maintain a properly staffed program of internal auditing and ensure all major systems of internal accounting and administrative controls are reviewed at least once every two years as required by the Act. We further recommend the Department document the basis for conclusions reached regarding major new information systems or major modifications to existing systems and ensure pre-implementation reviews are conducted when required.

DEPARTMENT RESPONSE

The Department concurs with the finding. Following the appointment of a new Chief Internal Auditor in May 2020, a risk-based methodology for evaluating IT projects for pre-implementation reviews has been adopted and implemented. The Internal Audit department has also adopted guidance from the State Internal Audit Advisory Board for identifying and scheduling internal audits based upon a comprehensive annual risk assessment methodology and available resources. The Office of Internal Audit has requested an additional staff and is working with the Department's Budget Office as well as Human Resources to determine a hiring plan.

2020-014 **FINDING** Failure to Complete Performance Evaluations

The Department on Aging (Department) did not conduct employee performance evaluations in accordance with the Illinois Administrative Code (Code).

The auditors reviewed 40 employee personnel files and noted seven (18%) employee files did not contain a completed performance evaluation for at least one of the fiscal years under examination. These employees' anniversary dates of employment ranged from 4 to 10 months before the end of the fiscal year. The Department was first cited for noncompliance with performance evaluation requirements in 2012 and has not implemented sufficient processes and controls to ensure completion of annual employee evaluations.

The Illinois Administrative Code (80 Ill. Adm. Code 302.270) requires a certified employee to be evaluated not less often than annually.

Department management indicated the uncompleted employee evaluations were due to turnover in management level personnel and the COVID-19 pandemic.

Annual performance evaluations are important to ensure all employees understand the duties and responsibilities assigned to them and that they are adequately performing the duties for which they are being compensated. Failure to conduct timely annual evaluations increases the risk of insufficient employee performance monitoring and corrective action for weaknesses identified and represents noncompliance with the Code. (Finding Code No. 2020-014, 2018-014, 2016-007, 2014-002, 12-4)

RECOMMENDATION

We recommend the Department implement procedures to identify outstanding evaluations, remind managers of their responsibilities, and ensure employee performance evaluations are completed timely.

DEPARTMENT RESPONSE

The Department concurs with this finding. The Department on Aging has filled all of its Deputy Division Manager positions and is making progress on filing other middle-management and supervisory positions. The Department is also working on filling two key Administrative Assistant positions that support the management team and assist in tracking progress on evaluations. The Division of Community Relations and Outreach and Home and Community Services have already taken strides to catch up on delinquent evaluations as their management teams have filled out. Significant improvement is expected as the other key management positions are filled, and those new team members become acclimated to their job duties and gain familiarity with the employees they supervise. Improvements are evident at the end of FY21 and more improvements are anticipated by the mid-point of FY22.

2020-015 **FINDING** Weaknesses in Disaster Contingency Planning and Testing

The Department on Aging (Department) had not updated its disaster contingency plans or performed recovery testing of its computing environment during the examination period.

The Department carries out its mission through the use of Information Technology. Computer systems that support the Department's mission include the ECCPIS, Case Management System and Critical Event Reporting.

The Department's disaster contingency plan had not been reviewed or updated during the examination period. Additionally, the Department had not conducted a test of the disaster and contingency plan during the examination period.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources. Additionally, generally accepted information technology guidance, including the National Institute of Standards and Technology and Government Accountability Office, endorse the formal development and testing of disaster recovery plans.

Department management indicated they were in the process of developing a new disaster recovery and contingency plan for the Department outlining the steps necessary for recovery. Management also indicated they had prioritized the creation of a contingency plan.

Failure to adequately update and test the disaster recovery plans leaves the Department exposed to the possibility of major disruptions of services. (Finding Code 2020-015)

RECOMMENDATION

We recommend the Department review and update its disaster recovery and contingency plan at least annually. We also recommend the Department perform and document tests of its plan at least once a year. In addition, we recommend the plan be continuously updated to reflect environmental changes and improvements identified from tests.

DEPARTMENT RESPONSE

The Department concurs with this finding. The Department is fully engaged with the Department of Innovation and Technology with the Resiliency Information System Contingency Planning-ISCP effort. The contingency plans for the Department applications under control are available upon request. The Department on Aging anticipates completion of contingency plans for existing applications by June 30, 2021.

2020-016 **FINDING** Lack of Controls over Changes to the Case Management System

The Department on Aging (Department) lacked controls over changes to the Adult Protective Services - Case Management System (CMS).

In September 2018, the Department implemented the CMS to report, maintain, and track reports of allegations of abuse or self-neglect. CMS is utilized by multiple entities: State agencies, local service entities, and law enforcement.

In order to ensure changes to CMS are properly controlled, we requested the Department's change control policies and procedures. According to the Department's management, the controls over changes to CMS had not been documented. The Department further stated changes were documented in a "story board" beginning in Fiscal Year 2020 in order to maintain documentation. However, this information was not readily able to be downloaded and provided to the auditors.

Given the Department had not documented the controls over changes to CMS and was unable to provide a population of changes, we were unable to design suitable procedures to test compliance with such controls. As such, we were unable to determine if changes made to CMS during the examination period were properly controlled: approved, tested, and properly moved to the production environment.

The Fiscal Control and Internal Auditing Act (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls to provide assurance funds, property, and other assets and resources are safeguarded against waste, loss, unauthorized use and misappropriation and maintain accountability over the State's resources. Additionally, generally accepted information technology guidance, including the National Institute of Standards and Technology, endorses the implementation of suitable change management procedures to control changes to computer systems.

Department management indicated the Department's change control policy was not documented due to prioritizing improving functionality and lack of awareness of the need for a formal, written policy. Department management also indicated CMS change tickets and coding changes were not initially documented until late 2019 because the volume of problem tickets was overwhelming.

The inability to determine and document changes to CMS are properly controlled increases the risk CMS will not have the required accuracy, integrity, availability and security. (Finding Code No. 2020-016)

2020-016 **FINDING** Lack of Controls over Changes to the Case Management System (Continued)

RECOMMENDATION

We recommend the Department document and implement controls over changes to CMS. Specifically, we recommend the Department develop change control policies and procedures to control changes. The policies and procedures should include at a minimum:

- Procedures to generate a complete listing of all program changes.
- Formal documentation authorizing changes by the Department.
- Testing and documentation requirements.
- Formal documentation authorizing changes prior to being moved to the production environment.

DEPARTMENT RESPONSE

The Department concurs with this finding. The Department has developed a formal policy detailing the procedure for tracking software changes from request to completion. Approvals to release an application to production will be documented in the software development tool. A listing of development items and changes can be generated from the software development tool and provided for audit review purposes.

2020-017 **FINDING** Indirect Cost Reimbursements Not Claimed for All Federal Grants

The Department on Aging (Department) did not pursue all indirect cost reimbursements or provide sufficient evidence they were precluded from claiming indirect costs for all federal grant programs.

During the examination period, the Department had indirect cost rate agreements in effect which were approved by the Department of Health and Human Services. The agreements specify indirect cost rates to be applied to direct salaries and wages (excluding all fringe benefits) based on the cost center assigned. As reported on the Department's Schedules of Expenditures of Federal Awards, the Department expended $58 million and $66 million in federal awards during Fiscal Years 2020 and 2019, respectively, of which $55 million and $63 million, respectively, were passed through to subrecipients. Direct salaries and wages paid from federal awards totaled $1.2 million and $1.3 million in Fiscal Years 2020 and 2019, respectively. We performed an analysis of the Department's Schedules of Expenditures of Federal Awards and identified four awards which may have been eligible for indirect costs based on the criteria of the indirect cost rate agreements. Direct salaries charged to those four awards were $655,403 and $709,538 in Fiscal Years 2020 and 2019, respectively. This could potentially result in indirect cost reimbursements of $392,585 and $425,014 for Fiscal Years 2020 and 2019, respectively.

The Department claimed indirect costs as part of the State matching portion for its Aging Cluster programs. No indirect costs were charged to and reimbursed from other federal funds. The Department claimed most of its federal awards are fully expended on direct costs (leaving no funds available for indirect cost reimbursements) but did not provide any documentation to support its claim. The Department also claimed certain federal awards do not allow for indirect costs, but the Department did not provide any regulations or documents supporting the claim.

The initial Schedules of Indirect Cost Reimbursements prepared by the Department were incomplete. The first draft only reported the indirect cost rates approved for Fiscal Years 2019 and 2020. The second draft included some of the indirect costs that were claimed for matching, but did not include complete information for Fiscal Year 2020.

The State Officers and Employees Money Disposition Act (30 ILCS 230/2a.3) requires the Department to make timely application for all indirect cost reimbursements for which it is eligible and maintain accurate records concerning the application for and the receipt, deposit and use of all indirect cost reimbursements under its control.

The Fiscal Control and Internal Auditing Act (Act) (30 ILCS 10/3001) requires all State agencies to establish and maintain a system, or systems, of internal fiscal and administrative controls, to provide assurance that revenues, expenditures, and transfers of assets, resources, or funds applicable to operations are properly recorded and accounted for to permit the preparation of accounts and reliable financial and statistical reports and to maintain accountability over the State's resources.

2020-017 **FINDING** Indirect Cost Reimbursements Not Claimed for All Federal Grants (Continued)

Department management indicated it did not pursue indirect cost recoveries for all federal programs because its federal awards were primarily passed through to subrecipients and the Department's negotiated indirect cost rate agreement has only been utilized for additional matching contributions for the Aging Cluster programs.

Failure to claim all indirect costs that the Department is eligible to receive results in a loss of revenue to the State to cover costs incurred in administering federal programs. (Finding Code No. 2020-017)

RECOMMENDATION

We recommend the Department thoroughly examine its federal awards to identify and document those awards eligible for indirect cost reimbursements. We further recommend the Department claim all indirect cost reimbursements for which it is eligible.

DEPARTMENT RESPONSE

The Department concurs with this finding. The Department on Aging does not draw in Federal funds by distinguishing draws between Direct or Indirect Charges. The draws for payrolls within the Aging Older Americans grant cluster are for both Direct and Indirect employees, mainly for fiscal functions which are indirect costs that are allowable in Federal grants. The Department also understands the need for more distinctive record keeping to track and record Direct and Indirect charges.

The Department will find ways to better communicate internally with the understanding that it is imperative when grants are applied for outside the cluster. The Department is very well versed and able to find grant language of whether indirect charges are allowed or not which will help to ensure indirect revenues are not lost.

2020-018 **FINDING** Failure to Report on Community Care Program Reforms

The Department on Aging (Department) failed to report on the progress of Community Care Program reforms and Care Coordination Unit performance during the engagement period.

The Department did not submit bi-monthly reports of the Department's Community Care Program reforms required by P.A. 98-0008 during Fiscal Years 2019 and 2020. The required reports through November 1, 2014 were posted on the Department's website; however, no additional reports after that date were provided. In addition, the Department did not provide reports of their quarterly review of Care Coordination Unit performance and adherence to service guidelines reports during the examination period. The last quarterly report provided was dated September 30, 2014.

The Illinois Act on the Aging (Act) (20 ILCS 105/4.02) requires the Department to provide bi-monthly reports on the progress of the Community Care Program reforms required by P.A. 98-008 to the Speaker of the House of Representatives, the Minority Leader of the House of Representatives, the President of the Senate, and the Minority Leader of the Senate. The Act also requires quarterly review of and reports on the Department's review of Care Coordination Unit performance and adherence to service guidelines reports, including longitudinal performance data, to be submitted to the legislative leaders. Neither of these statutory requirements specify an end date for the reporting requirement.

Department management indicated they believed the requirements for these reports were satisfied and should have ceased after the Auditor General's Review of the CCP Reform Implementation Report was released in March of 2014. However, the Act's reporting requirements were not contingent upon completion of the Auditor General's review of the Department's Community Care Program reform implementation report, which concluded the Department's evidence submitted generally supported actions taken by the Department as of February 1, 2014, but also stated a determination was not made whether there were additional provisions in the reform legislation that required further action by the Department.

Department management also noted they sought statutory revisions to repeal the reporting requirements in Fiscal Years 2016 and 2017, but the revisions to remove the bi-monthly reporting requirement were not enacted by the General Assembly. The Department provided no evidence of actions taken to request repeal of the bi-monthly reporting mandates during Fiscal Years 2019 or 2020.

Failure to prepare and submit reform and performance reports required by the Act reduces monitoring, oversight and accountability and deprives the General Assembly of information which it may need to make informed decisions. (Finding Code No. 2020-018)

RECOMMENDATION

We recommend the Department comply with reporting and review provisions of the Act or seek a statutory revision to remove the requirements.

2020-018 **FINDING** Failure to Report on Community Care Program Reforms (Continued)

DEPARTMENT RESPONSE

The Department concurs with this finding.

The Department has sought a legislative remedy to sunset these obsolete reporting requirements, which were determined to have been fulfilled and overly burdensome from a staffing standpoint. In 2017, the Department worked with Senator sponsors to introduce SB 1936 to address the requirements outlined in Public Act 98-0008. The intent of this proposed legislative change was to eliminate the production of an obsolete bi-monthly report on CCP changes by deleting the requirement from statute. Per Public Act 98-0008, the Department is required to submit a bi-monthly report updating the legislature on the Department's progress in implementing the CCP reforms. The legislation passed the Senate and House committee but remained on 2nd reading in the House. It was also introduced as HB 5532 in the 99th General Assembly, but the bill did not leave the House Rules committee.

Additionally, the Office of Auditor General's report dated 3/26/14, "As required by Public Act 98-0008, Aging submitted its February 1, 2014 report along with the evidence which it identified as documenting the actions delineated in its June 27, 2013 report. The evidence consisted of 100 documents, including new or revised policies, proposed rules, meeting attendee information and agendas, training presentations, federal approval of payment initiative, etc. The OAG reviewed the specific evidence provided by Aging to determine whether it was supportive of the actions that Aging said it had taken. On February 14, 18, and 28, the OAG followed up with Aging with questions concerning the evidence provided and requested additional evidence to support actions taken. Aging provided responses to the OAG's questions on February 25 and March 5, providing over 45 pieces of additional documentation. Our review concluded that the evidence submitted by Aging generally supported the actions reported by the Department."

The Department plans to again seek a legislative remedy to eliminate the outdated requirements in Public Act 98-0008.

2020-019 **FINDING** Failure to Enter into Agreement with the State Board of Elections

The Department on Aging (Department) failed to enter into an agreement with the State Board of Elections and provide information necessary to transmit member data under the Electronic Registration Information Center Membership Agreement.

Effective June 1, 2015, the Election Code (10 ILCS 5/1A-45(b-5)) (Code) requires the State Board of Elections and the Department to enter into an agreement requiring the Department to provide the State Board of Elections with any information necessary to transmit member data under the Electronic Registration Information Center Membership Agreement. The Director of the Department shall deliver this information on an annual basis to the State Board of Elections pursuant to the agreement between the entities.

During testing, the auditors noted the Department did enter into an agreement with the State Board of Elections in Fiscal Year 2020 allowing the Department to register voters and update voter registration information; however, it did not address the requirements noted above.

The Department has failed to take substantive corrective action during the examination period to resolve the cause of this finding. The auditor comment to the finding in the previous examination stated "If the Department believes that there are conflicts in State law that inhibit its duty to cooperate with the State Board of Elections, or if it believes cooperation with the State Board of Elections is prohibited under federal law or regulations, the Department should seek a legislative remedy to either resolve the conflict or eliminate the requirement." The Department has not taken such action.

Department management indicated they contacted the State Board of Elections in a previous year and expressed its concerns stating although State and Federal laws allow the Department to share data for limited purposes, voter registration is not an allowed purpose. Management stated the State Board of Elections concurred and noted the only applicable program administered by the Department (Benefit Access Program) allows data sharing with the Secretary of State, which already has an agreement with the State Board of Elections to share data, therefore the Department's sharing of data with the State Board of Elections is accomplished through the Secretary of State. Management also stated the Department's sharing is therefore superfluous and not necessary.

Failure to timely enter into the required agreement with the State Board of Elections represents noncompliance with the Code and fails to ensure the transmission of member data from the Department to the State Board of Elections, as required by the Code, has occurred. (Finding Code No. 2020-019, 2018-015, 2016-003)

RECOMMENDATION

We recommend the Department timely comply with the statutory requirements for interagency agreements or promptly seek a legislative remedy.

2020-019 **FINDING** Failure to Enter into Agreement with the State Board of Elections (Continued)

DEPARTMENT RESPONSE

The Department concurs. The Department entered into an interagency agreement (IGA) in or about April 2020 with the State Board of Elections (SBE). In addition, the Department entered into a subsequent IGA with SBE in or about March 2021 which more clearly identifies the data access and exchange as may be required and necessary. The Department will continue to work with SBE to resolve this issue.

2020-020 **FINDING** Failure to Share Data with the State Board of Elections

The Department on Aging (Department) did not share data with the State Board of Elections.

The Illinois Act on the Aging (Act) (20 ILCS 105/4.02) requires the Director of the Department to make information available to the State Board of Elections as may be required by an agreement the State Board of Elections has entered into with a multi-state voter registration list maintenance system. The State Board of Elections' agreement with the multi-state voter registration list maintenance system requires the State Board of Elections to submit 1) all active and inactive voter files, (2) all licensing or identification records contained in the motor vehicles database, and (3) identification records contained in the Department's databases (excluding those unrelated to voter eligibility) to the multi-state voter registration list maintenance system on a periodic basis.

During testing, the auditors noted the Department entered into an agreement with the State Board of Elections during Fiscal Year 2020 allowing the Department to register voters and update voter registration information; however, the agreement did not address the data sharing requirement of the Act. The Department provided no other evidence of sharing data with the State Board of Elections.

The Department has failed to take substantive corrective action to resolve the cause of this finding. The auditor comment to the finding in the previous examination stated "If the Department believes that there are conflicts in State law that inhibit its duty to cooperate with the State Board of Elections, or if it believes cooperation with the State Board of Elections is prohibited under federal law or regulations, the Department should seek a legislative remedy to either resolve the conflict or eliminate the requirement." The Department has not taken such action.

Department management indicated they contacted the State Board of Elections in a previous year and expressed its concerns stating although State and Federal laws allow the Department to share data for limited purposes, voter registration is not an allowed purpose. The State Board of Elections concurred and noted the only applicable program administered by the Department (Benefit Access Program) allows data sharing with the Secretary of State, which already has an agreement with the State Board of Elections to share data, therefore the Department's sharing of data with the State Board of Elections is accomplished through the Secretary of State. Management also stated the Department's sharing is therefore superfluous and not necessary.

Failure to share data with the State Board of Elections pursuant to an agreement entered into with a multi-state voter registration list maintenance system results in noncompliance with the Act and limits the data available to ensure accuracy, completeness and legal compliance of voter records. (Finding Code No. 2020-020, 2018-016, 2016-012)

RECOMMENDATION

We recommend the Department comply with the Act or seek a legislative remedy.

2020-020 **FINDING** Failure to Share Data with the State Board of Elections (Continued)

DEPARTMENT RESPONSE

The Department concurs. The Department entered into an interagency agreement (IGA) in or about April 2020 with the State Board of Elections (SBE). In addition, the Department entered into a subsequent IGA with SBE in or about March 2021 which more clearly identifies the data access and exchange as may be required and necessary. The Department will continue to work with SBE to resolve this issue.

2020-021 **FINDING** Inaccurate Debt Transparency Reporting

The Department on Aging (Department) failed to file accurate Debt Transparency Reports with the Illinois Office of Comptroller (IOC) and did not retain documentation supporting the data reported.

The State Finance Act (Act) (30 ILCS 105/9.08) requires each State agency to report on a monthly basis to the IOC current State liabilities held at the agency and estimated accrued interest penalties. Each agency's reported State liabilities are to be posted monthly on the IOC's public website.

The auditors selected for testing 6 (25%) of the 24 reports required to be filed by the Department during the examination period, as follows:

- For three monthly reports in Fiscal Year 2020, the Department reported zero liabilities or indicated liabilities were less than $1 million and no report was filed.
- Three monthly reports in Fiscal Year 2019 primarily reported prompt payment interest due on invoices paid by the IOC during the year where the unpaid interest totaled $684,408 or $1,010,831. One report also reported an estimated pending liability of $50,000.

The auditors noted the following:

- The Department did not retain detailed records supporting the amounts reported for the six (100%) debt transparency reports tested.
- The required reporting form was not used for two (33%) reports tested.
- The Department paid numerous service providers on a reimbursement basis; however, on five (83%) reports tested, the Department did not report an estimate of these incurred liabilities not yet invoiced by the service provider.
- The Department had not developed an estimation methodology with documented procedures for pending liabilities.
- For 100% reports tested, the Department did not report liabilities for bills received but not yet paid although it had numerous proper bills daily that had been received and were in the process of submission for payment, but had not yet been submitted to the IOC. A proper bill has not been processed until it has been approved and submitted to the IOC for payment.

2020-021 **FINDING** Inaccurate Debt Transparency Reporting (Continued)

The auditors noted the following on the Department's June 30 debt reports:

Over/(Under) Estimates on Year End Debt Transparency Reports			
Liability	Reported Estimate	Subsequently Paid	Misstatement
6/30/20			
Lapse Period	$0	$59,741,844	($59,741,844)
Interest	0	42,991	(42,991)
Total	$0	$59,784,835	($59,784,835)
6/30/19			
Lapse Period	$50,000	$76,483,774	($76,433,774)
Interest	$1,010,831	320,563	690,268
Total	$1,060,831	$76,804,337	($75,743,506)
Note: The Department did not submit the required report for June 30, 2020 but e-mailed the IOC that the Department's liabilities were less than $1 million.			

The Statewide Accounting Management System (SAMS) (Procedure 33.17.20) provides instructions for completion of the monthly debt transparency report. Amongst other requirements, it specifically requires the Department to report on SCO-961 forms:

- Liabilities for proper bills that have been received but have not been fully processed for payment as of the end of the month;
- Prompt payment interest owed on bills that have already been paid; and,
- Estimated liabilities owed which have not yet been properly invoiced. The Procedure states "Agencies should develop an estimation technique that has documented procedures that can be reviewed by the Office of the Comptroller upon request or by the agency's auditors."

IOC Accounting Bulletin 234 states reporting submissions that do not follow the prescribed format of SCO-961 forms will be considered non-compliant.

The State Records Act (5 ILCS 160/8) requires the head of each agency to cause to be made and preserved records containing adequate and proper documentation of the essential transactions of the agency designed to furnish information and protect the financial rights of the State.

Department management stated it would be challenging to create a reasonable estimate for the amount of bills held at the end of any given month because there are several factors involved in such a calculation that the Department would have to re-evaluate each month with its limited Fiscal Office staffing.

Failure to properly report the Department's liabilities reduces the State's transparency and limits the IOC's ability to report accurate amounts of unpaid bills. (Finding Code No. 2020-021)

2020-021 **FINDING** Inaccurate Debt Transparency Reporting (Continued)

RECOMMENDATION

We recommend the Department develop and document an estimation methodology based on historical or other data in order to properly report its liabilities to the IOC on a monthly basis on the SCO-961 forms as required. We further recommend the Department maintain supporting documentation for amounts reported.

DEPARTMENT RESPONSE

The Department concurs with this finding and has developed a report within the statewide accounting system to report projected liabilities.

A. **FINDING** Statewide Failure to Execute Interagency Agreements and Perform Essential Project Management Functions Over Provider Enrollment in the Medicaid Program

During the previous examination, the Department of Healthcare and Family Services (HFS), the Department of Human Services (DHS), the Department of Children and Family Services (DCFS), and the Department on Aging (DoA) (collectively, the "Departments") failed to execute adequate internal controls over the implementation and operation of the State of Illinois' Illinois-Michigan Program Alliance for Core Technology system (IMPACT). Specifically, management of the Departments did not enter into interagency agreements (IA) defining each agency's roles and responsibilities and did not perform essential project management functions over the implementation of IMPACT.

Phase 2 of the IMPACT implementation was completed in Fiscal Year 2018 and there were no significant project management activities in Fiscal Year 2019 or Fiscal Year 2020. During the current examination period, DoA and HFS entered into IAs which identify responsibilities relative to the State's Medicaid Program and the use of IMPACT. Project management responsibilities were not assigned to DoA. This finding has not been repeated for DoA. (Finding Code No. 2018-001)

B. **FINDING** Inadequate General Information Technology Controls Over IMPACT

During the previous examination, the Department of Healthcare and Family Services (HFS), the Department of Human Services (DHS), the Department of Children and Family Services (DCFS), and the Department on Aging (DoA) (collectively, the "Departments") failed to execute adequate internal controls over the implementation and operation of the State of Illinois' Illinois-Michigan Program Alliance for Core Technology system (IMPACT). Specifically, the Departments did not establish and maintain general information technology controls (general IT controls) over IMPACT, which was developed to document and monitor provider enrollment for those providers offering services to recipients of the Medicaid Program administered throughout the State of Illinois.

During the current examination period, DoA and HFS entered into an interagency agreement (IA) which helped to clarify responsibilities related to IMPACT. The IA did not assign any responsibilities for general information technology controls over IMPACT to DoA. This finding has not been repeated for DoA. (Finding Code No. 2018-002)

C. **FINDING** Insufficient Review and Documentation of Provider Enrollment Determinations

During the prior examination, the Department of Healthcare and Family Services (HFS), the Department of Human Services (DHS), the Department of Children and Family Services (DCFS), and the Department on Aging (DoA) (collectively, the "Departments") failed to design and implement adequate internal controls over the implementation and operation of the State of Illinois' Illinois-Michigan Program Alliance for Core Technology system (IMPACT) sufficient to prevent inaccurate determinations and approvals of provider enrollment for those providers offering services to recipients of the Medicaid Program administered throughout the State. Specifically, the auditors noted the Departments did not sufficiently review and document approval for provider enrollments and, as a result, did not maintain all necessary documentation supporting provider enrollment approvals.

During the current examination, our sample testing did not identify any instances of DoA making inaccurate determinations or approvals of provider enrollments in IMPACT. This finding has not been repeated for DoA. (Finding Code No. 2018-003)

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2020

Schedule 1

For the Fifteen Months Ended Septmeber 30, 2020

Public Acts 101-0007 AND 101-0637 FISCAL YEAR 2020	Expenditure Authority (Net After Transfers)	Expenditures Through June 30, 2020	Lapse Period Expenditures July 1 to September 30, 2020	Total Expenditures 15 Months Ended September 30, 2020	Balances Lapsed September 30, 2020
APPROPRIATED FUNDS					
GENERAL REVENUE FUND - 001					
Personal Services	$ 5,035,500	$ 3,756,843	$ 4,011	$ 3,760,854	$ 1,274,646
State Contributions to Social Security	385,200	279,397	307	279,704	105,496
Contractual Services	2,075,000	590,292	148,224	738,516	1,336,484
Travel	315,300	23,778	2,759	26,537	288,763
Commodities	22,600	13,375	3,537	16,912	5,688
Printing	60,000	40,494	206	40,700	19,300
Equipment	19,000	17,083	1,900	18,983	17
Electronic Data Processing	5,839,700	2,108,138	752,276	2,860,414	2,979,286
Telecommunications	230,000	162,745	34,760	197,505	32,495
Operations of Auto Equipment	57,600	23,444	9	23,453	34,147
Senior Employment Specialist Program	190,300	170,155	20,145	190,300	-
Grandparents Raising Grandchildren Program	300,000	244,693	43,581	288,274	11,726
Specialized Training Program	475,000	81,580	741	82,321	392,679
Monitoring and Support Services	182,000	20,772	843	21,615	160,385
Illinois Council on Aging	28,000	679	-	679	27,321
Senior Helpline	2,608,700	2,091,860	26	2,091,886	516,814
Senior Community Outreach and Events	65,000	3,929	-	3,929	61,071
Administrative Expenses of the Senior Meal Program	40,000	4,092	-	4,092	35,908
Community Care Program	206,500,000	150,834,717	31,873,670	182,708,387	23,791,613
Colbert Consent Decree	10,000,000	5,367,126	1,956,442	7,323,568	2,676,432
Ombudsman Program	4,500,000	3,653,670	-	3,653,670	846,330
Federal Refunds	1,502,800	-	-	-	1,502,800
TOTAL GENERAL REVENUE FUND - 001	**$ 240,431,700**	**$ 169,488,862**	**$ 34,843,437**	**$ 204,332,299**	**$ 36,099,401**

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2020

For the Fifteen Months Ended Septmeber 30, 2020

Public Acts 101-0007 AND 101-0637 FISCAL YEAR 2020	Expenditure Authority (Net After Transfers)	Expenditures Through June 30, 2020	Lapse Period Expenditures July 1 to September 30, 2020	Total Expenditures 15 Months Ended September 30, 2020	Balances Lapsed September 30, 2020
SENIOR HEALTH INSURANCE PROGRAM FUND - 396					
Senior Health Insurance Program	$ 2,700,000	$ 1,622,035	$ 57,239	$ 1,679,274	$ 1,020,726
TOTAL SENIOR HEALTH INSURANCE PROGRAM FUND - 396	**$ 2,700,000**	**$ 1,622,035**	**$ 57,239**	**$ 1,679,274**	**$ 1,020,726**
SERVICES FOR OLDER AMERICANS FUND - 618					
Personal Services	$ 975,200	$ 493,562	$ -	$ 493,562	$ 481,638
State Contribution to State Employees' Retirement System	529,400	268,119	-	268,119	261,281
State Contributions to Social Security	74,600	39,262	-	39,262	35,338
Group Insurance	288,000	94,487	-	94,487	193,513
Contractual Services	125,000	76,038	16,610	92,648	32,352
Travel	175,000	3,321	-	3,321	171,679
Commodities	6,500	-	-	-	6,500
Telecommunications	50,000	10,370	1,692	12,062	37,938
Operations of Auto Equipment	15,000	-	-	-	15,000
Expenses of Senior Meal Program	225,000	151,244	-	151,244	73,756
Older Americans Training	100,000	71,353	26,372	97,725	2,275
Discretionary Government Projects	9,000,000	1,278,141	263,338	1,541,479	7,458,521
Training and Conference Planning	150,000	22,051	33,937	55,988	94,012
Administrative Expenses of Title V Grant	300,000	140,736	-	140,736	159,264
Grants for Adult Food Care Program	850,000	77,630	10,820	88,450	761,550
Grants for Employment Services	4,000,000	2,494,628	367,775	2,862,403	1,137,597
Grants for Social Services III B Ombudsman	10,000,000	572,935	79,547	652,482	9,347,518
Grants for Social Services	55,000,000	11,827,176	2,676,892	14,504,068	40,495,932
National Lunch Program	7,000,000	1,734,314	88,151	1,822,465	5,177,535
National Family Caregiver Support Program	45,000,000	5,660,976	1,605,206	7,266,182	37,733,818
Prevention of Elder Abuse, Neglect and Exploitation	1,000,000	170,037	27,248	197,285	802,715
Long Term Care Ombudsman Services for Older Americans	1,500,000	627,388	147,199	774,587	725,413
Preventive Health	3,000,000	599,323	72,940	672,263	2,327,737
Nutrition Services Incentive Program	25,000,000	5,411,038	2,705,355	8,116,393	16,883,607
Congregate Meals Program	50,000,000	7,835,418	2,190,533	10,025,951	39,974,049
Home Delivered Meals Program	63,000,000	14,175,669	6,930,959	21,106,628	41,893,372
TOTAL SERVICES FOR OLDER AMERICANS FUND - 618	**$ 277,363,700**	**$ 53,835,216**	**$ 17,244,574**	**$ 71,079,790**	**$ 206,283,910**

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2020

For the Fifteen Months Ended Septmeber 30, 2020

Public Acts 101-0007 AND 101-0637 FISCAL YEAR 2020	Expenditure Authority (Net After Transfers)	Expenditures Through June 30, 2020	Lapse Period Expenditures July 1 to September 30, 2020	Total Expenditures 15 Months Ended September 30, 2020	Balances Lapsed September 30, 2020
COMMITMENT TO HUMAN SERVICES FUND - 644					
Adult Protective Services	$ 22,900,000	$ 15,117,944	$ 2,766,052	$ 17,883,996	$ 5,016,004
Home Delivered Meals (formula and non-formula)	23,800,000	23,800,000	-	23,800,000	-
Retired Senior Volunteer Program	551,800	440,055	76,225	516,280	35,520
Planning and Service Grants to Area Agencies on Aging	11,500,000	11,500,000	-	11,500,000	-
Foster Grandparent Program	241,400	192,180	19,440	211,620	29,780
Long-Term Care Systems Development	273,800	183,999	72,498	256,497	17,303
Community Based Services to Area Agencies on Aging	1,751,200	1,751,200	-	1,751,200	-
Community Care Program	660,000,000	639,219,280	20,727,646	659,946,926	53,074
Comprehensive Case Coordination	69,600,000	56,625,499	6,797,611	63,423,110	6,176,890
Care Coordination Medicaid Applications	23,832,500	-	-	-	23,832,500
TOTAL COMMITMENT TO HUMAN SERVCIES FUND - 644	**$ 814,450,700**	**$ 748,830,157**	**$ 30,459,472**	**$ 779,289,629**	**$ 35,161,071**
LONG TERM CARE OMBUDSMAN FUND - 698					
Long Term Care Ombudsman	$ 2,600,000	$ 1,044,897	$ 2,159	$ 1,047,056	$ 1,552,944
TOTAL LONG TERM CARE OMBUDSMAN FUND - 698	**$ 2,600,000**	**$ 1,044,897**	**$ 2,159**	**$ 1,047,056**	**$ 1,552,944**
TOBACCO SETTLEMENT RECOVERY FUND - 733					
Senior Health Assistance	$ 2,800,000	$ 2,089,398	$ 350,684	$ 2,440,082	$ 359,918
TOTAL TOBACCO SETTLEMENT RECOVERY FUND - 733	**$ 2,800,000**	**$ 2,089,398**	**$ 350,684**	**$ 2,440,082**	**$ 359,918**
DEPARTMENT ON AGING STATE PROJECTS FUND - 830					
Private Partnership Projects Expense	$ 345,000	$ -	$ -	$ -	$ 345,000
TOTAL DEPARTMENT ON AGING STATE PROJECTS FUND - 830	**$ 345,000**	**$ -**	**$ -**	**$ -**	**$ 345,000**
TOTAL - ALL APPROPRIATED FUNDS	**$ 1,340,691,100**	**$ 976,910,565**	**$ 82,957,565**	**$ 1,059,868,130**	**$ 280,822,970**

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2020

For the Fifteen Months Ended Septmeber 30, 2020

Public Acts 101-0007 AND 101-0637 FISCAL YEAR 2020	Expenditure Authority (Net After Transfers)	Expenditures Through June 30, 2020	Lapse Period Expenditures July 1 to September 30, 2020	Total Expenditures 15 Months Ended September 30, 2020	Balances Lapsed September 30, 2020
NON-APPROPRIATED LINES					
SERVICES FOR OLDER AMERICANS FUND - 618					
Refund Federal Grant Funds		$ 2,876,252	$ 1,919,975	$ 4,796,227	
TOTAL SERVICES FOR OLDER AMERICANS FUND - 618		**$ 2,876,252**	**$ 1,919,975**	**$ 4,796,227**	
DEPARTMENT ON AGING STATE PROJECTS FUND - 830					
Non-Appropriated Census Grant		$ 247,750	$ 202,888	$ 450,638	
TOTAL DEPARTMENT ON AGING STATE PROJECTS FUND - 830		**$ 247,750**	**$ 202,888**	**$ 450,638**	
TOTAL - ALL NON-APPROPRIATED LINES		**$ 3,124,002**	**$ 2,122,863**	**$ 5,246,865**	
GRAND TOTAL - ALL FUNDS (Appropriated and Non-Appropriated)		**$ 980,034,567**	**$ 85,080,428**	**$ 1,065,114,995**	

Note1: Expenditure authority, appropriations, expenditures, and lapsed balances were obtained from the Department's records as of September 30, 2020 and have been reconciled to the State Comptroller's records.

Note 2: Expenditure amounts are vouchers approved for payment by the Department and submitted to the State Comptroller for payment to the vendor.

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2019

For the Sixteen Months Ended October 31, 2019

Public Acts 100-0586 and 101-0007 FISCAL YEAR 2019	Expenditure Authority (Net of Transfers)	Expenditures Through June 30, 2019	Lapse Period Expenditures July 1 to October 31, 2019	Total Expenditures 16 Months Ended October 31, 2019	Balances Lapsed October 31, 2019
APPROPRIATED FUNDS					
GENERAL REVENUE FUND - 001					
Personal Services	$ 4,284,200	$ 3,387,708	$ 380,629	$ 3,768,337	$ 515,863
State Contributions to Social Security	327,800	250,369	28,668	279,037	48,763
Contractual Services	2,222,600	181,359	406,871	588,230	1,634,370
Travel	280,300	17,003	2,218	19,221	261,079
Commodities	22,600	11,460	326	11,786	10,814
Printing	40,700	40,042	-	40,042	658
Equipment	19,000	656	-	656	18,344
Electronic Data Processing	3,107,600	2,196,523	786,823	2,983,346	124,254
Telecommunications	253,100	157,039	52,061	209,100	44,000
Operation of Auto Equipment	9,500	9,131	23	9,154	346
Elder Abuse and Neglect Act	22,900,000	12,471,614	2,911,814	15,383,428	7,516,572
Senior Employment Specialist Program	190,300	89,188	98,592	187,780	2,520
Grandparents Raising Grandchildren Program	300,000	137,500	120,623	258,123	41,877
Home Delivered Meals (formula and non-formula)	21,800,000	21,800,000	-	21,800,000	-
Specialized Training Program	475,000	8,893	747	9,640	465,360
Monitoring and Support Services	182,000	44,457	2,768	47,225	134,775
Illinois Council on Aging	28,000	1,965	600	2,565	25,435
Senior Helpline	2,608,700	1,932,899	274,609	2,207,508	401,192
Unpaid Wage Increase	1,017,900	-	984,402	984,402	33,498
Administrative Expenses of the Senior Meal Program	40,000	6,903	-	6,903	33,097
Retired Senior Volunteer Program	551,800	519,694	-	519,694	32,106
Planning and Service Grants to Area Agencies on Aging	8,600,000	8,600,000	-	8,600,000	-
Foster Grandparent Program	241,400	221,637	3,682	225,319	16,081
Long-Term Care Systems Development	273,800	198,366	75,434	273,800	-
Community Based Services to Area Agencies on Aging	1,751,200	1,751,200	-	1,751,200	-
Community Care Program	191,000,000	105,929,788	66,191,409	172,121,197	18,878,803
Comprehensive Case Coordination	69,600,000	46,668,739	6,426,677	53,095,416	16,504,584
Colbert Consent Decree	34,300,000	18,533,659	9,886,615	28,420,274	5,879,726
Ombudsman Program	4,500,000	3,488,995	37,424	3,526,419	973,581
TOTAL GENERAL REVENUE FUND - 001	**$ 370,927,500**	**$ 228,656,787**	**$ 88,673,015**	**$ 317,329,802**	**$ 53,597,698**

Schedule 2

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2019

For the Sixteen Months Ended October 31, 2019

Public Acts 100-0586 and 101-0007 FISCAL YEAR 2019	Expenditure Authority (Net of Transfers)	Expenditures Through June 30, 2019	Lapse Period Expenditures July 1 to October 31, 2019	Total Expenditures 16 Months Ended October 31, 2019	Balances Lapsed October 31, 2019
SENIOR HEALTH INSURANCE PROGRAM FUND - 396					
Senior Health Insurance Program	$ 2,500,000	$ 1,033,641	$ 55,222	$ 1,088,863	$ 1,411,137
TOTAL SENIOR HEALTH INSURANCE PROGRAM FUND - 396	**$ 2,500,000**	**$ 1,033,641**	**$ 55,222**	**$ 1,088,863**	**$ 1,411,137**
SERVICES FOR OLDER AMERICANS FUND - 618					
Personal Services	$ 895,500	$ 504,681	$ 21,269	$ 525,950	$ 369,550
State Contribution to State Employees' Retirement System	447,800	260,665	10,985	271,650	176,150
State Contributions to Social Security	68,600	37,094	1,558	38,652	29,948
Group Insurance	345,800	118,577	4,927	123,504	222,296
Contractual Services	125,000	17,992	29,966	47,958	77,042
Travel	165,000	5,493	1,364	6,857	158,143
Commodities	6,500	-	-	-	6,500
Telecommunications	50,000	7,140	1,028	8,168	41,832
Operations of Auto Equipment	15,000	-	-	-	15,000
Expenses of Senior Meal Program	225,000	143,328	7,328	150,656	74,344
Older Americans Training	100,000	5,557	5,098	10,655	89,345
Discretionary Government Projects	4,000,000	2,549,328	363,136	2,912,464	1,087,536
Training and Conference Planning	150,000	13,611	47,486	61,097	88,903
Administrative Expenses of Title V Grant	300,000	135,561	6,790	142,351	157,649
Grants for Adult Food Care Program	200,000	95,088	19,548	114,636	85,364
Grants for Employment Services	4,000,000	2,373,737	379,037	2,752,774	1,247,226
Grants for Social Services	24,000,000	15,977,944	848,355	16,826,299	7,173,701
National Lunch Program	2,800,000	1,900,603	470,699	2,371,302	428,698
National Family Caregiver Support Program	7,000,000	5,521,815	571,885	6,093,700	906,300
Prevention of Elder Abuse, Neglect and Exploitation	500,000	123,558	14,145	137,703	362,297
Long Term Care Ombudsman Services for Older Americans	1,000,000	490,957	16,401	507,358	492,642
Preventive Health	2,000,000	924,240	66,097	990,337	1,009,663
Nutrition Services Incentive Program	8,500,000	6,117,543	220,416	6,337,959	2,162,041
Congregate Meals Program	20,000,000	12,231,437	757,291	12,988,728	7,011,272
Home Delivered Meals Program	16,000,000	10,359,164	449,171	10,808,335	5,191,665
TOTAL SERVICES FOR OLDER AMERICANS FUND - 618	**$ 92,894,200**	**$ 59,915,113**	**$ 4,313,980**	**$ 64,229,093**	**$ 28,665,107**

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2019

For the Sixteen Months Ended October 31, 2019

Public Acts 100-0586 and 101-0007 FISCAL YEAR 2019	Expenditure Authority (Net of Transfers)	Expenditures Through June 30, 2019	Lapse Period Expenditures July 1 to October 31, 2019	Total Expenditures 16 Months Ended October 31, 2019	Balances Lapsed October 31, 2019
COMMITMENT TO HUMAN SERVICES FUND - 644					
Community Care Program	$ 610,000,000	$ 598,289,218	$ 3,985,274	$ 602,274,492	$ 7,725,508
TOTAL COMMITMENT TO HUMAN SERVCIES FUND - 644	**$ 610,000,000**	**$ 598,289,218**	**$ 3,985,274**	**$ 602,274,492**	**$ 7,725,508**
LONG TERM CARE OMBUDSMAN FUND - 698					
Long Term Care Ombudsman	$ 2,600,000	$ 978,706	$ 65,630	$ 1,044,336	$ 1,555,664
TOTAL LONG TERM CARE OMBUDSMAN FUND - 698	**$ 2,600,000**	**$ 978,706**	**$ 65,630**	**$ 1,044,336**	**$ 1,555,664**
TOBACCO SETTLEMENT RECOVERY FUND - 733					
Senior Health Assistance	$ 1,800,000	$ 1,800,000	$ -	$ 1,800,000	$ -
TOTAL TOBACCO SETTLEMENT RECOVERY FUND - 733	**$ 1,800,000**	**$ 1,800,000**	**$ -**	**$ 1,800,000**	**$ -**
DEPARTMENT ON AGING STATE PROJECTS FUND - 830					
Private Partnership Projects Expense	$ 345,000	$ -	$ -	$ -	$ 345,000
TOTAL DEPARTMENT ON AGING STATE PROJECTS FUND - 830	**$ 345,000**	**$ -**	**$ -**	**$ -**	**$ 345,000**
TOTAL - ALL APPROPRIATED FUNDS	**$ 1,081,066,700**	**$ 890,673,465**	**$ 97,093,121**	**$ 987,766,586**	**$ 93,300,114**

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES
Expenditure Authority for Fiscal Year 2019

For the Sixteen Months Ended October 31, 2019

Public Acts 100-0586 and 101-0007 FISCAL YEAR 2019	Expenditure Authority (Net of Transfers)	Expenditures Through June 30, 2019	Lapse Period Expenditures July 1 to October 31, 2019	Total Expenditures 16 Months Ended October 31, 2019	Balances Lapsed October 31, 2019
NON-APPROPRIATED LINES					
SENIOR HEALTH INSURANCE PROGRAM FUND - 396					
Refund Federal Grant Funds		$ 4,274	$ -	$ 4,274	
TOTAL SENIOR HEALTH INSURANCE PROGRAM FUND - 396		**$ 4,274**	**$ -**	**$ 4,274**	
SERVICES FOR OLDER AMERICANS FUND - 618					
Refund Federal Grant Funds		$ 7,313	$ 103,731	$ 111,044	
TOTAL SERVICES FOR OLDER AMERICANS FUND - 618		**$ 7,313**	**$ 103,731**	**$ 111,044**	
TOTAL - ALL NON-APPROPRIATED LINES		**$ 11,587**	**$ 103,731**	**$ 115,318**	
GRAND TOTAL - ALL FUNDS		**$ 890,685,052**	**$ 97,196,852**	**$ 987,881,904**	

Note 1: Expenditure authority, appropriations, expenditures, and lapsed balances were obtained from the Department's records as of October 31, 2019 and have been reconciled to the State Comptroller's records.

Note 2: Expenditure amounts are vouchers approved for payment by the Department and submitted to the State Comptroller for payment to the vendor.

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF NET APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES

Schedule 3

For the Fiscal Years Ended June 30,

	2020	2019	2018
APPROPRIATED FUNDS			
GENERAL REVENUE FUND - 001			
Expenditure Authority	$ 240,431,700	$ 370,927,500	$ 422,450,300
Expenditures			
Personal Services	$ 3,760,854	$ 3,768,337	$ 4,015,235
State Contributions to Social Security	279,704	279,037	296,137
Contractual Services	738,516	588,230	559,004
Travel	26,537	19,221	22,183
Commodities	16,912	11,786	9,171
Printing	40,700	40,042	40,202
Equipment	18,983	656	2,145
Electronic Data Processing	2,860,414	2,983,346	2,040,738
Telecommunications	197,505	209,100	186,943
Operation of Auto Equipment	23,453	9,154	9,402
Elder Abuse and Neglect Act (Adult Protective Services)	-	15,383,428	14,674,443
Senior Employment Specialist Program	190,300	187,780	172,408
Grandparents Raising Grandchildren Program	288,274	258,123	241,467
Home Delivered Meals (formula and non-formula)	-	21,800,000	21,800,000
Specialized Training Program	82,321	9,640	80,599
Monitoring and Support Services	21,615	47,225	20,153
Illinois Council on Aging	679	2,565	1,730
Senior Helpline	2,091,886	2,207,508	1,562,914
Unpaid Wage Increase	-	984,402	-
Benefits, Eligibility, Assistance and Monitoring	-	-	252,392
Senior Community Outreach and Events	3,929	-	-
Administrative Expenses of the Senior Meal Program	4,092	6,903	1,391
Retired Senior Volunteer Program	-	519,694	487,293
Planning and Service Grants to Area Agencies on Aging	-	8,600,000	7,548,300
Foster Grandparent Program	-	225,319	237,185
Long-Term Care Systems Development	-	273,800	272,132
Community Based Services to Area Agencies on Aging	-	1,751,200	1,751,200
Community Care Program	182,708,387	172,121,197	135,481,369
Comprehensive Case Coordination	-	53,095,416	51,631,289
Colbert Consent Decree	7,323,568	28,420,274	27,614,404
Ombudsman Program	3,653,670	3,526,419	3,309,236
Total Expenditures	$ 204,332,299	$ 317,329,802	$ 274,321,065
Balances Lapsed	$ 36,099,401	$ 53,597,698	$ 148,129,235
SENIOR HEALTH INSURANCE PROGRAM FUND - 396			
Expenditure Authority	$ 2,700,000	$ 2,500,000	$ 2,500,000
Expenditures			
Senior Health Insurance Program	$ 1,679,274	$ 1,088,863	$ 1,510,780
Total Expenditures	$ 1,679,274	$ 1,088,863	$ 1,510,780
Balances Lapsed	$ 1,020,726	$ 1,411,137	$ 989,220

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF NET APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES

Schedule 3

For the Fiscal Years Ended June 30,

	2020	2019	2018
SERVICES FOR OLDER AMERICANS FUND - 618			
Expenditure Authority	$ 277,363,700	$ 92,894,200	$ 83,323,500
Expenditures			
Personal Services	$ 493,562	$ 525,950	$ 563,806
State Contribution to State Employees' Retirement System	268,119	271,650	286,487
State Contributions to Social Security	39,262	38,652	41,286
Group Insurance	94,487	123,504	130,540
Contractual Services	92,648	47,958	86,055
Travel	3,321	6,857	8,451
Telecommunications	12,062	8,168	11,971
Operations of Auto Equipment	-	-	1,484
Expenses of Senior Meal Program	151,244	150,656	85,940
Older Americans Training	97,725	10,655	43,896
Discretionary Government Projects	1,541,479	2,912,464	1,778,123
Training and Conference Planning	55,988	61,097	74,131
Administrative Expenses of Title V Grant	140,736	142,351	137,853
Grants for Adult Food Care Program	88,450	114,636	114,769
Grants for Employment Services	2,862,403	2,752,774	2,601,133
Grants for Social Services III B Ombudsman	652,482	-	-
Grants for Social Services	14,504,068	16,826,299	15,223,159
National Lunch Program	1,822,465	2,371,302	1,998,513
National Family Caregiver Support Program	7,266,182	6,093,700	5,398,943
Prevention of Elder Abuse, Neglect and Exploitation	197,285	137,703	192,297
Long Term Care Ombudsman Services for Older Americans	774,587	507,358	614,581
Preventive Health	672,263	990,337	762,710
Nutrition Services Incentive Program	8,116,393	6,337,959	5,784,182
Congregate Meals Program	10,025,951	12,988,728	12,572,340
Home Delivered Meals Program	21,106,628	10,808,335	7,830,412
Total Expenditures	$ 71,079,790	$ 64,229,093	$ 56,343,062
Balances Lapsed	$ 206,283,910	$ 28,665,107	$ 26,980,438
COMMITMENT TO HUMAN SERVICES FUND - 644			
Expenditure Authority	$ 814,450,700	$ 610,000,000	$ 619,000,000
Expenditures			
Adult Protective Services	$ 17,883,996	$ -	$ -
Home Delivered Meals (formula and non-formula)	23,800,000	-	-
Retired Senior Volunteer Program	516,280	-	-
Planning and Service Grants to Area Agencies on Aging	11,500,000	-	-
Foster Grandparent Program	211,620	-	-
Long-Term Care Systems Development	256,497	-	-
Community Based Services to Area Agencies on Aging	1,751,200	-	-
Community Care Program	659,946,926	602,274,492	618,996,542
Comprehensive Case Coordination	63,423,110	-	-
Total Expenditures	$ 779,289,629	$ 602,274,492	$ 618,996,542
Balances Lapsed	$ 35,161,071	$ 7,725,508	$ 3,458

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF NET APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES

For the Fiscal Years Ended June 30,

	2020	2019	2018
LONG TERM CARE OMBUDSMAN FUND - 698			
Expenditure Authority	$ 2,600,000	$ 2,600,000	$ 2,600,000
Expenditures			
Long Term Care Ombudsman	$ 1,047,056	$ 1,044,336	$ 1,092,881
Total Expenditures	$ 1,047,056	$ 1,044,336	$ 1,092,881
Balances Lapsed	$ 1,552,944	$ 1,555,664	$ 1,507,119
TOBACCO SETTLEMENT RECOVERY FUND - 733			
Expenditure Authority	$ 2,800,000	$ 1,800,000	$ 1,800,000
Expenditures			
Senior Health Assistance	$ 2,440,082	$ 1,800,000	$ 1,800,000
Total Expenditures	$ 2,440,082	$ 1,800,000	$ 1,800,000
Balances Lapsed	$ 359,918	$ -	$ -
DEPARTMENT ON AGING STATE PROJECTS FUND - 830			
Expenditure Authority	$ 345,000	$ 345,000	$ 345,000
Expenditures			
Private Partnership Projects Expense	$ -	$ -	$ 25
Total Expenditures	$ -	$ -	$ 25
Balances Lapsed	$ 345,000	$ 345,000	$ 344,975
TOTAL APPROPRIATED FUNDS			
Expenditure Authority	$ 1,340,691,100	$ 1,081,066,700	$ 1,132,018,800
Expenditures	$ 1,059,868,130	$ 987,766,586	$ 954,064,355
Balances Lapsed	$ 280,822,970	$ 93,300,114	$ 177,954,445

Schedule 3

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF NET APPROPRIATIONS, EXPENDITURES, AND LAPSED BALANCES

For the Fiscal Years Ended June 30,

	2020	2019	2018
NON-APPROPRIATED LINES			
SENIOR HEALTH INSURANCE PROGRAM FUND - 396			
Expenditures			
Refund Federal Grant Funds	$ -	$ 4,274	$ 4,639
Total Expenditures	$ -	$ 4,274	$ 4,639
SERVICES FOR OLDER AMERICANS FUND - 618			
Expenditures			
Refund Federal Grant Funds	$ 4,796,227	$ 111,044	$ 65,492
Total Expenditures	$ 4,796,227	$ 111,044	$ 65,492
DEPARTMENT ON AGING STATE PROJECTS FUND - 830			
Expenditures			
Non-Appropriated Census Grant	$ 450,638	$ -	$ -
Total Expenditures	$ 450,638	$ -	$ -
TOTAL NON-APPROPRIATED LINES			
Total Expenditures	$ 5,246,865	$ 115,318	$ 70,131
GRAND TOTAL-ALL FUNDS			
Total Expenditures	$ 1,065,114,995	$ 987,881,904	$ 954,134,486
STATE OFFICERS' SALARIES			
GENERAL REVENUE FUND - 001 (State Comptroller)			
Expenditures			
For the Director	$ 136,146	$ 119,531	$ 115,613
Total Expenditures	$ 136,146	$ 119,531	$ 115,613

Note1: Expenditure authority, appropriations, expenditures, and lapsed balances were obtained from the Department's records as of September 30, 2020 and October 31, 2019 and have been reconciled to the State Comptroller's records.

Note 2: Expenditure amounts are vouchers approved for payment by the Department and submitted to the State Comptroller for payment to the vendor.

Note 3: The Department received appropriations during Fiscal Year 2020 from Public Acts 101-0007 and 101-0637. In addition, the Department received appropriations during Fiscal Year 2019 from Public Acts 100-0586 and 101-0007.

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF NET EXPENDITURES
BY MAJOR ACTIVITY

For the Fiscal Year Ended June 30,

	2020	2019	2018
EXPENDITURE STATISTICS			
All State Treasury Funds			
Total Operations Expenditures:	$ 25,728,680	$ 43,920,577	$ 43,482,681
Percentage of Total Expenditures:	2.4%	4.5%	4.6%
Personal Services	$ 12,051,307	$ 13,387,477	$ 11,689,676
Other Payroll Costs	$ 4,174,159	$ 1,981,927	$ 1,848,596
All Other Operating Expenditures	$ 9,503,214	$ 28,551,173	$ 29,944,409
Total Awards and Grants Expenditures:	$ 1,034,590,088	$ 943,846,009	$ 910,581,674
Percentage of Total Expenditures:	97.1%	95.5%	95.4%
Total Refund Expenditures:	$ 4,796,227	$ 115,318	$ 70,131
Percentage of Total Expenditures:	0.5%	0.0%	0.0%
GRAND TOTAL - ALL EXPENDITURES:	$ 1,065,114,995	$ 987,881,904	$ 954,134,486

Note 1: Expenditures were obtained from the Agency's records and have been reconciled to the State Comptroller's records as of September 30, 2020, and October 31, 2019.

Note 2: Expenditure amounts are vouchers approved for payment by the Agency and submitted to the State Comptroller for payment to the vendor.

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF CASH RECEIPTS AND DEPOSITS INTO THE STATE TREASURY

For the Years Ended June 30,

	2020	2019	2018
GENERAL REVENUE FUND - 001			
Miscellaneous Reimbursements	$ 11,199	$ 247	$ 661
Prior Year Refunds	121,363	1,350,451	135,799
Total Cash Receipts Per Department	132,562	1,350,698	136,460
Plus - Receipts in Transit at Beginning of Year	4,085	25	-
Less - Receipts in Transit at End of Year	-	4,085	25
Total Cash Receipts Per State Comptroller's Records	$ 136,647	$ 1,346,638	$ 136,435
SENIOR HEALTH INSURANCE PROGRAM FUND - 396			
U.S. Department of Health and Human Services	$ 1,640,984	$ 1,034,188	$ 1,484,469
Prior Year Refund	-	24,194	-
Total Cash Receipts Per Department	1,640,984	1,058,382	1,484,469
Plus - Receipts in Transit at Beginning of Year	-	-	121
Less - Receipts in Transit at End of Year	87,286	-	-
Total Cash Receipts Per State Comptroller's Records	$ 1,553,698	$ 1,058,382	$ 1,484,590
SERVICES FOR OLDER AMERICANS FUND - 618			
U.S. Department of Health and Human Services	$ 51,747,206	$ 59,779,375	$ 51,530,396
U.S. Department of Agriculture	2,376,157	2,716,949	2,271,971
U.S. Department of Labor	3,014,402	2,836,658	2,721,618
Grantee Interest Income	54,013	39,263	17,347
Prior Year Refunds	8,770	48,629	35,778
Total Cash Receipts Per Department	57,200,548	65,420,874	56,577,110
Plus - Receipts in Transit at Beginning of Year	14,742	516	559,411
Less - Receipts in Transit at End of Year	162,609	14,742	516
Total Cash Receipts Per State Comptroller's Records	$ 57,052,681	$ 65,406,648	$ 57,136,005
COMMITMENT TO HUMAN SERVICES FUND - 644			
Prior Year Refunds	$ 3,190	$ 131,662	$ 8,304
Total Cash Receipts Per Department	3,190	131,662	8,304
Plus - Receipts in Transit at Beginning of Year	6,468	-	-
Less - Receipts in Transit at End of Year	-	6,468	-
Total Cash Receipts Per State Comptroller's Records	$ 9,658	$ 125,194	$ 8,304
BUDGET STABILIZATION FUND - 686			
Prior Year Refunds	$ -	$ -	$ 66
Total Cash Receipts Per Department	-	-	66
Plus - Receipts in Transit at Beginning of Year	-	-	-
Less - Receipts in Transit at End of Year	-	-	-
Total Cash Receipts Per State Comptroller's Records	$ -	$ -	$ 66

STATE OF ILLINOIS
DEPARTMENT ON AGING
COMPARATIVE SCHEDULE OF CASH RECEIPTS AND DEPOSITS INTO THE STATE TREASURY

For the Years Ended June 30,

	2020	2019	2018
LONG TERM CARE OMBUDSMAN FUND - 698			
Prior Year Refunds	$ 44,058	$ -	$ -
Total Cash Receipts Per Department	44,058	-	-
Plus - Receipts in Transit at Beginning of Year	-	-	-
Less - Receipts in Transit at End of Year	-	-	-
Total Cash Receipts Per State Comptroller's Records	$ 44,058	$ -	$ -
TOBACCO SETTLEMENT RECOVERY FUND - 733			
Prior Year Refunds	$ -	$ 133,503	$ 64,611
Total Cash Receipts Per Department	-	133,503	64,611
Plus - Receipts in Transit at Beginning of Year	-	-	-
Less - Receipts in Transit at End of Year	-	-	-
Total Cash Receipts Per State Comptroller's Records	$ -	$ 133,503	$ 64,611
DEPARTMENT ON AGING STATE PROJECTS FUND - 830			
General Revenue	$ 332,000	$ -	$ -
Total Cash Receipts Per Department	332,000	-	-
Plus - Receipts in Transit at Beginning of Year	-	-	-
Less - Receipts in Transit at End of Year	-	-	-
Total Cash Receipts Per State Comptroller's Records	$ 332,000	$ -	$ -
GRAND TOTAL - ALL FUNDS			
Total Cash Receipts Per Department - All Funds	$ 59,353,342	$ 68,095,119	$ 58,271,020
Plus - Receipts in Transit at Beginning of Year	25,295	541	559,532
Less - Receipts in Transit at End of Year	249,895	25,295	541
Total Cash Receipts Per State Comptroller's Records - All Funds	$ 59,128,742	$ 68,070,365	$ 58,830,011

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF CHANGES IN PROPERTY
For the Two Years Ended June 30, 2020

	Beginning Balance	Additions	Deletions	Net Transfers	Ending Balance
FISCAL YEAR 2019					
Property					
Equipment	$ 629,582	$ 2,047	$ -	$ -	$ 631,629
Total	$ 629,582	$ 2,047	$ -	$ -	$ 631,629
Capital Leases					
Equipment	$ 20,349	$ -	$ -	$ -	$ 20,349
Total	$ 20,349	$ -	$ -	$ -	$ 20,349
Intangible Assets					
Construction in progress	$ -	$ 465,264	$ -	$ -	$ 465,264
Total	$ -	$ 465,264	$ -	$ -	$ 465,264
FISCAL YEAR 2020					
Property					
Equipment	$ 631,629	$ 56,688	$ -	$ -	$ 688,317
Total	$ 631,629	$ 56,688	$ -	$ -	$ 688,317
Capital Leases					
Equipment	$ 20,349	$ 54,138	$ 20,349	$ -	$ 54,138
Total	$ 20,349	$ 54,138	$ 20,349	$ -	$ 54,138
Intangible Assets					
Construction in progress	$ 465,264	$ 380,121	$ -	$ -	$ 845,385
Total	$ 465,264	$ 380,121	$ -	$ -	$ 845,385

Note 1: This schedule has been prepared from the Department's records and reconciled to the Department's quarterly *Agency Report of State Property* reports submitted to the Office of the Comptroller.

Note 2: Certain deficiencies related to the maintenance of the Department's records were noted in the Compliance Examination. Not all adjustments that may be necessary as a result of the noted deficiencies are reflected in the schedule above. See Finding 2020-003.

STATE OF ILLINOIS
DEPARTMENT ON AGING
SCHEDULE OF INDIRECT COST REIMBURSEMENTS

For the Year Ended June 30,

	Federal Fiscal Year*		
	2020**	2019	2018
Indirect Cost Centers			
Finance and Administration Center	95.10%	95.10%	74.00%
Information Technology Center	31.90%	31.90%	29.90%
Home and Community Services & Planning and Development Center	59.90%	59.90%	82.30%
Communications and Outreach Center	65.00%	65.00%	85.80%
U.S. Department of Health and Human Services			
Aging Cluster:			
Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers			
Special Programs for the Aging, Title III, Part B, Grants for Ombudsman			
Special Programs for the Aging, Title III, Part C-1 , Congregate Meals			
Special Programs for the Aging, Title III, Part C-2 Home Delivered Meals			
Total Aging Cluster	**$ 394,704**	**$ 391,951**	**$ 320,437**
Special Programs for the Aging National Family Caregiver Support, Title III, Part E			
Total - National Family Caregiver Support, Title III, Part E Program	**163,772**	**155,519**	**157,671**
***** Total Indirect Costs Claimed as State Match**	**$ 558,476**	**$ 547,470**	**$ 478,107**

* The Department on Aging (Department) tracks its indirect costs based on the federal fiscal year.

** Provisional rates

*** The Department does not draw indirect costs from its award agreements with the federal government. Therefore, there are no reimbursements received relative to the Department's indirect costs and no beginning or ending balances of uncollected reimbursments are reported above. The Department's negotiated indirect cost rates are utilized by the Department to meet the State's matching requirements related to its above federal award programs. The indirect cost rates are applied to direct General Revenue Fund and Commitment to Human Services Fund salary expenditures to determine the total match to be claimed for indirect costs. The amounts listed above are the indirect costs claimed as part of the State's match.

The Department is the recipient of several other federal awards other than those noted above. Many of these other awards are passed through to subrecipients and no direct salary expenditures are incurred by the Department, therefore are ineligible for indirect costs reimbursements in accordance with the Department's negotiated indirect cost rate agreement. However, as noted in Finding 2020-017, certain awards were noted to have incurred expenditures for direct salaries but the Department did not claim or request indirect costs for those programs. The Department is unsure whether indirect costs are allowable for these programs but will begin the process of identifying which other awards may be eligible for indirect cost reimbursements.

Department Functions

Nearly fifty years ago, members of the Illinois General Assembly passed the Illinois Act on Aging (Public Act 78-242). The Act stipulates that the Department is to “provide a comprehensive and coordinated service system for the State's aging population, giving high priority to those persons in greatest need; to conduct studies and research into the needs and problems of the aging population; and to insure participation by the aging in the planning and operation of all phases of the system.”

Although the mission of the Illinois Department on Aging (the Department) has remained consistent throughout the past 47 years, which is to serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage independence, dignity and quality of life, the service delivery system has evolved to meet the changing needs of older adults and the growth in the aging population. The Aging network consists of 13 Area Agencies on Aging (AAAs), 55 Care Coordination Units, 48 Adult Protective Service agencies, over 300 In-Home agencies,75 Adult Day Service agencies, 400 Senior Centers, Statewide Emergency Home Response Services, and Ombudsman.

The Department is the designated agency in Illinois authorized to receive and dispense federal funding from the Administration for Community Living (ACL) for the implementation of services authorized under the Older Americans Act. Additionally, Illinois receives federal matching dollars through the Department’s operation of a Medicaid Home and Community-Based Services (HCBS) 1915(c) Waiver Program.

The Department’s largest program, the Community Care Program (CCP), provides services to approximately 71,000 older adults throughout the State of Illinois. With a budget of $959 Million in FY 20, the services provided support older adults ability to “age in place.” Core services provided include In-Home services, Adult Day Services (ADS), Emergency Home Response Services, Automated Medication Dispenser, and Comprehensive Care Coordination.

Community support services are provided through the 13 AAAs who in turn contract with local providers in each of the designated Planning and Service Areas (PSAs) to respond to locally determined needs. Services funded through the Older Americans Act include, but are not limited to: nutrition services, caregiver supports, employment supports, legal assistance, information and assistance, services to address social isolation, gap filling services to support older adults experiencing dementia, and supports for grandparents raising grandchildren. In FY 20, approximately 523,500 older adults received services through programs funded by the 13 AAAs.

Executive Office

The Executive Office provides leadership, oversight, and planning related to administering the Department’s programs, ensuring compliance with federal and state regulations, and acting as a strong advocate for Illinois’ older population. The functions of the Office include the following: management operations, legislative proposals, audit findings, including the implementation of corrective actions, analysis of proposed budgets, rule and policy changes, and providing legal counsel.

Division of Finance and Administration

The Division is responsible for fiscal forecasting, annual budget preparation, Federal financial reporting, monitoring compliance with the Federal regulations and State Grant Accountability and Transparency Act (GATA) requirements, mail operations, travel compliance, procurement, payroll and timekeeping. The Division also provides a variety of other agency wide administrative support services. The Division is the lead contact for the Department with the Governor's Office of Management and Budget (GOMB), the Comptroller's Office, the State Treasurer and others. Additionally, the Division actively participates in legislative review and analysis of bills that potentially impact the Department's appropriations and operations.

Division of Information & Technology

The Division is responsible for ensuring that the Department's numerous information technology platforms are responsive to the ever-changing environment and demands of federal and State funders as well as bringing outdated systems up to speed. The Division has implemented a number of new platforms to enhance our data collection efforts, including the implementation and continuous updates to the Critical Event Reporting automated system and the Adult Protective Services automated system. The Division assists the other Divisions in transitioning to new systems such as assisting the Division of Finance and Administration with the implementation of the Enterprise Resource Planning (ERP) system.

Division of Planning, Research, Development & Training

The Division is responsible for long term strategic planning, policy and rule development for the CCP; research on innovative new programs for possible inclusion in the Department's Elderly Waiver Program; oversight of the Department's Demonstration Programs; and the implementation of training for the CCP care coordinators and providers. In response to the federal critical event reporting requirements, the Division implemented monthly quality webinars to respond to the reports/data that was being analyzed in order to provide the Aging network with risk mitigation strategies to prevent future events, (e.g. elderly falls).

Division of Home and Community Services

The Division is responsible for distributing federal funding received through the Older Americans Act as well as monitoring the services provided by the AAAs for compliance with federal requirements. The Division is also responsible for monitoring all of the CCP providers to ensure compliance with the federal Persons who are Elderly Medicaid Waiver requirements and CCP administrative rule requirements, as well as developing corrective action plans for providers that are performing at an insufficient rate of compliance.

Division of Home and Community Services – Community Care Program			
Program / Area	**FY 2020**	**FY 2019**	**FY 2018**
CCP Caseload (1)	68,829	71,503	71,256

(NOT EXAMINED)

Division of Home and Community Services – Community Care Program			
	FY 2020	**FY 2019**	**FY 2018**
Percentage of Males	29%	28%	28%
Percentage of Females	71%	72%	72%
Percentage of Clients over 75 Living Alone	34%	32%	32%
Percentage of Ethnic/Minority	55%	53%	52%

The FY 2020 decrease in CCP caseload was due to the transfer of 8,000 participants from CCP to Managed Care Organizations on July 1, 2019, and decreases in spring of 2020 due to the Covid-19 pandemic.

(1) Average monthly caseload refers to Community Care Program (CCP) clients who received a paid service for that month. This count is adjusted to include clients who receive service through the Community Based Residential Facility demonstration project. This count does not include individuals receiving elderly waiver services provided by a Managed Care Organization.

Division of Home and Community Services – Community Care Program			
Prospective Nursing Home Cases (2)	**FY 2020**	**FY 2019**	**FY 2018**
Number of Cases Prescreened	29%	28%	28%
Number of Face-to-Face Screens	71%	72%	72%
Number of Non-Face-to-Face Screens	34%	32%	32%

(2) Subsection G.12., DIVERSIONS FROM INSTITUTIONAL CARE, of the approved Home and Community-Based Services Waiver for the Elderly Population, which is currently in effect, states in part: "The present caseload represents persons deflected from nursing home placement during the current waiver." Accordingly, all clients of the CCP are considered to be prospective nursing home cases who have been diverted from institutional care.

Division of Home and Community Services – Older American Services			
Program / Area	**FY 2020**	**FY 2019**	**FY 2018**
Number of Seniors Receiving Older American Act Services	523,500	511,065	498,943

(NOT EXAMINED)

Recognizing the demand placed on nutrition programs and the need for additional funding during the COVID-19 pandemic, Congress passed both the Families First Coronavirus Response Act (FFCRA) and the Coronavirus Aid, Relief, and Economic Security Act (CARES). The Department on Aging received $8.8 million in funding under the FFCRA earmarked solely for meals that was distributed to the Area Agencies on Aging using the interstate funding formula. CARES provided an additional $17.6 million in funding for home-delivered meals and $11.7 million to support community-based services, the ombudsman program, and supportive gap-filling services. The increased federal funding of $38.2 million increased spending during fiscal year 2020 for supportive services in the community.

Division of Community Relations and Outreach

This Division is responsible for administering the Senior HelpLine that provides information about the State's social service delivery system and links older adults and their caregivers to programs and services. The Senior HelpLine staff answer the dedicated Adult Protective Services (APS) Hotline and complete reports of suspected abuse, neglect, financial exploitation and self-neglect of adults over the age of 60, as well as persons with disabilities between the ages of 18 to 59 living in the community. This Division also operates the critical Benefits Access Program (BAP) which determines eligibility for older adults and persons with disabilities to receive license plate discounts from the Secretary of State and free rides on fixed route transit systems. In addition, this Division includes the Senior Health Insurance Program (SHIP) that provides outreach and counseling to Illinois Medicare beneficiaries.

Division of Community Relations and Outreach			
Program / Area	**FY 2020**	**FY 2019**	**FY 2018**
Number of Benefits Access applications received	145,108	126,181	108,476
Number of calls answered by the toll-free Senior Helpline	134,467	132,692	129,511

The increase in the number of calls answered is primarily due to filling vacant Senior HelpLine positions, as well as modifying internal policies and procedures resulting in greater operational efficiencies.

Division of Advocacy, Prevention & Benefits, Eligibility, Assistance & Monitoring

The Adult Protective Services Program (APS) was transitioned from the Division of Home and Community Services to the Division of Benefits, Eligibility, Assistance & Monitoring (BEAM) in August 2019. The transition was designed to improve efficiencies and oversight of the APS program, and to focus more on a preventative approach across the Department's programs. The Department administers the statewide APS program, under the authority of the APS Act (320 ILCS 20/1 et seq.), to respond to reports of alleged abuse, neglect, and financial exploitation of older adults aged 60 and up and persons with disabilities aged 18-59 who live in the community at the time of the report. As a result of a change in statute, reports of self-neglect were added to the list of categories that APS has jurisdiction over for intake and follow-up services. APS received 20,800 (includes self-neglect and Abuse Neglect and Exploitation Reports) reports in FY2020, and it anticipates receiving an increase in reports in FY 21 as the aging population continues to grow and the efforts to increase public awareness of abuse, neglect and exploitation expand. At the start of FY 19, Self-Neglect was added to the APS Act.

Division of Advocacy and Prevention Services			
Program / Area	**FY 2020**	**FY 2019**	**FY 2018**
Number of APS reports received (3)	16,733	17,681	17,085
Number of APS Self-Neglect reports received (4)	4,067	3,667	0
Average monthly APS caseload	4,684	3,652	3,344

(3) Does not include self-neglect reports

(4) Self-Neglect added to APS Act in FY 2019

Note: The Department received approval from Central Management Services to re-name the BEAM Division to the Division of Advocacy & Prevention.

Office of the State Long Term Care Ombudsman

Mandated by the Federal Older Americans Act and the Illinois Act on Aging, the Illinois Long-Term Care Ombudsman Program is a resident-directed advocacy program which protects and improves the quality of life for residents in a variety of long-term care settings. This office develops policy and provides oversight of the Regional Ombudsman and the Home-Care Ombudsman Program.

Office of the State Long Term Care Ombudsman			
Program / Area	**FY 2020**	**FY 2019**	**FY 2018**
Opened Cases (5)	4,597	6,475	5,309
Closed Cases	4,371	6,345	5,101
Complaints (5)	6,551	9,513	7,679

(5) The number of cases and complaints dropped in FY 2020 due to the COVID-19 pandemic. Beginning mid-March of 2020, Ombudsmen were instructed to stop all visits to facilities. This restriction eased up with the allowance of window visits and outdoor visits during the summer. Maintaining a visible presence in long-term care facilities is paramount in assuring residents have access to the Ombudsman Program. Many complaints are brought to the ombudsman program during routine visits. The FY 2020 case and complaint numbers decreased due to visitation restrictions.

The Division of Transition & Community Relations

The lead oversight for the implementation of the Colbert Consent Decree transitioned from the Department to the Illinois Department of Human Services (IDHS) effective July 1, 2019. With the transition, IDHS assumed the role of lead agency for all three of the Consent Decrees.

The Department assumed the role of lead agency for the Colbert Consent Decree in 2014. During this time, the Colbert Consent Decree ensured that over 1,800 Class Members moved from Cook County-based nursing facilities to housing options that met their needs and preferences.

Although the Department continues to prioritize rebalancing Long-Term Services and Supports (LTSS), specifically supporting older adults' ability to transition from nursing facilities outside of Cook County to the community, the Department no longer employs designated staff for rebalancing due to the transition of Colbert to IDHS. As a result, this Division was abolished in FY 2020.

Accomplishments

Response to COVID pandemic: In the fourth quarter of FY 20, the Department on Aging along with the Aging Network quickly transitioned to a remote service delivery model with the exception of in-home services, home delivered meals (HDMs), and emergency senior services. The top priority was keeping seniors safe and supporting their ability to remain in their own homes. The Area Agencies on Aging closed all congregate dining sites and provided seniors with access to home delivered meals. In June 2020, the Department provided 1,016,435 million HDMs – an increase of 67% from FY 19. From March 30, 2020 through December 2020 the Aging Network provided 10.4 M meals averaging 48,000 meals per day.

The Department implemented a new program – Emergency Senior Services to address older adults' immediate needs during the pandemic. The Department's contracted Care Coordination Units (CCUs) have provided over 10,000 older adults with access to transportation assistance, deliveries of medication, home modifications, assistance with grocery shopping, and access to ethnic meals.

With funding from the federal ACL, the Department coordinated with the Illinois Assistive Technology Program and the Illinois Department of Human Services to implement the Illinois Care Connections Program which has provided over 1000 assistive devices and hotspots to older adults and persons with disabilities to assist them with staying "connected" and to avoid social isolation.

The Department prioritized sustaining the Aging Network during the pandemic to ensure that older adults had access to ADS, for example, once services were allowed to re-open. Through close coordination with the Illinois Emergency Management Administration, the Department was able to secure over 1 million pieces of Personal Protective Equipment (PPE) which was distributed to the Aging Network. Additionally, the Department provided PPE off set payments to providers and preservation grants to ADS providers to sustain the network through the pandemic.

State Plan on Aging: Every three years, the federal ACL requires states to conduct an extensive planning process to guide the programmatic initiatives funded by the Older Americans Act and to submit a three-year plan to the Administration on Aging. The development of the three-year plan must be inclusive of internal and external stakeholders, must focus on services for older adults, family members, and caregivers, and must establish priorities for the future direction of statewide services. The Department's most recent three-year plan was approved for 2017-2019. The Department requested and received a one-year extension and submitted its State Plan on Aging in December 2020. In October of 2020, the Department held three virtual stakeholder hearings to obtain feedback on the draft State Plan. The State Plan on Aging represents coordination with its other Advisory Councils including the Older Adult Services Advisory Committee and the Illinois Council on Aging.

Rebalancing Long Term Care Services & Supports: The Department on Aging participated in the federal rebalancing initiative – Money Follows the Person (MFP) to assist older adults to remain independent and in their own homes. Following almost nine years of operation, the Department and DHS were notified by HFS that the program would be sunsetting on 12/31/19. To ensure that all participants in the transition process will be properly assisted, a transitional timeline was provided. Referrals for MFP/Pathways at the HFS MFP website stopped effective 6/30/17. MFP/Pathways transition coordinators are continuing to follow their post-transition participants through their 365 days of post-transition MFP eligibility. Any Critical Incidents are still being staffed by the University of Illinois at Chicago and the State agency leads. The Department on Aging, in collaboration with its Care Coordination Units (CCUs) transitioned 431 older adults to community-based settings since the inception of MFP.

Person Centered Planning: In response to a federal Centers for Medicare and Medicaid Services (CMS) waiver regulations, the Department updated policies and provided extensive training on ensuring that person-centered planning concepts and practices become the centerpiece of Comprehensive Care Coordination for Illinois' older adults. Additionally, CCP rules were amended to include person-centered planning requirements, effective January 1, 2019.

Critical Event Reporting Application (CERA): In August 2018, the Department implemented a centralized comprehensive Critical Event Reporting Application (CERA) for the purposes of keeping older adults safe and at home. The CERA satisfies a federal waiver requirement allowing for Community Care Program Providers and Care Coordination Units alike to better meet the ever-changing needs of older adults through targeted and timely response.

Conferences for the Aging Network: The Department held in person conferences which allowed for educational and networking opportunities for the Aging network in June 2018 and September 2019. Over 400 and 600 individuals, respectively, attended these conferences. A wide variety of speakers and topics were available for attendees. The Department pivoted to virtual on-line conferences starting in October 2020 when face to face contact was not an option due to COVID-19.

Training Tracking System: The Department is responsible for ensuring that Care Coordination Units (CCUs) and providers of Community Care Program (CCP) services meet regulatory, certification, and training requirements on both an initial and ongoing basis. In September 2020, the Department implemented a system to document qualifications and training for CCU staff. CCUs and Department staff can view the information electronically. The system allows CCUs to see, at a glance, the year to date in-service hours for each of their Care Coordinators.

Report Uploader System: Care Coordination Units are required to assist with completion of Medicaid applications and redeterminations for CCP participants who meet certain asset guidelines. To track numbers of new Medicaid applications, which can be reported to the General Assembly and other stakeholders, the Department implemented a Report Uploader System in September 2020.

ADS Rule Amendments: The Department amended Administrative Rules specific to CCP ADS to allow for revised internal processes associated with reviewing applications for new ADS providers. Under the newly adopted rules, the application process is more accommodating for

ADS providers of all sizes and backgrounds across geographic/metropolitan locations.

Automated Medication Dispenser Rule Amendments: The Department amended Administrative Rules specific to the CCP Automated Medication Dispenser service to allow additional older adults to benefit. Under the newly adopted rules, older adults are required to be on fewer medications prior to becoming eligible for this type of medication assistance.

APS Public Awareness Campaign: The Department received a $2.1 million grant from the federal ACL for a public awareness campaign, Adult Protective Services (APS) Caseworker Simulation Training, Caseworker Trauma-Informed Training, and Legal Professional Training to educate the judiciary and legal professions about APS. The new public and professional awareness campaign, #Engage2Change, is to remind everyone about the importance of reporting suspected abuse, neglect and exploitation of persons ages 60 and older and persons with disabilities ages 18-59.

APS Self-Neglect: Adult Protective Services (APS) accepted Self-Neglect (SN) reports for the first time in Fiscal Year (FY) 2019. In fact, nearly 5,000 such reports were received. The program's official acceptance of the reports was allowed when funding was appropriated. It is well-established that self-neglect can have grave consequences, including increased mortality, increases in occurrence and severity of chronic diseases, and the loss of savings and even homes. The APS Program is now able to help eligible adults who are unable to perform essential self-care tasks that substantially threaten their health, well-being and safety.

APS Registry: The APS Registry was enabled through Public Act 98-49 and implemented to protect victims or potential victims receiving in-home or community-based services from caregivers against whom a verified and substantiated finding of abuse, neglect, or financial exploitation was made. The APS Registry includes the identity of caregivers who are found, as a result of an APS investigation, to have abused, neglected or financially exploited persons age 60 or over and adults with a disability age 18-59 who reside or were visiting a domestic living situation at the time of the report. The APS Registry is intended to limit caregivers with verified and substantiated determinations from moving from one direct care agency to another.

State Long-Term Ombudsman Program: In order to align with federal rules pertaining to the Ombudsman program that were issued for the first time in 2016, the Office of the State Long-Term Care Ombudsman Program worked to revise 89 Ill Admin. Code 270 (B). The revised state rule took effect on January 1, 2019. Some of the major changes include clarification about conflicts of interest, strengthened language regarding access and disclosure, and specific language on grievances.

Challenges

Adequate staffing: As a result of the change in Administration in November, 2018, the Department's Division Manager positions and Deputy Division Manager positions were vacant. The executive management team was partially complete in the spring of 2019, however; the Department had vacancies in most of its Divisions responsible for the operations of the Department's programs, including the Division of Community Relations and Outreach; the Division of Home and Community Services; the Division of Benefits, Eligibility, Assistance and Monitoring; the State Office of the Long-term Care Ombudsman; the Deputy Division Manager positions, and the Administrator of the Older Americans Act Services. Additionally, the Department was without a Chief of Staff until July 2019. The temporary vacancies in some of the Department's key programmatic areas were definitely challenges, as responding to numerous requests and requirements was difficult with such a shortage in key management positions. Over the course of nine months, the Department filled all of the Division Managers vacancies with the last position filled in January 2020, however; the Deputy Division Manager positions were not all filled until December, 2020 and the Administrator over the Older Americans Act Programs was not filled until April, 2021.

<u>Division of Finance and Administration:</u> Adequate staffing has been an ongoing issue; however, the division was able to complete FY19 with no backlogs and FY20 had minimal due to changing to the new State accounting system. Despite these challenges, the division was able to successfully process all transactions, but at a slower pace. Though processing was successful, challenges elsewhere within the division still remain. Mid-level supervisory positions within the fiscal area of the division, which are vacant, created pressure for the Deputy Chief Fiscal Officer (CFO) to fill several roles, then creating pressure for the CFO to as well perform many additional functions to allow for processing payments timely and ensure Federal reporting deadlines were met along with other daily operational work. The Division has created a new organizational path moving forward by working with Human resources and Central Management Services to assist in more cross training, increased numbers and additional supervisory positions. This process has been slow, but once completed, it should allow the division to be successful in addressing the many requirements they are responsible for.

<u>Rebuilding relationships with the Aging Network:</u> An initial challenge during the change in Administration was to rebuild the relationships with the Aging network. The executive team under the leadership of Director Paula Basta prioritized strengthening those relationships. Included under this approach was sustaining the network of providers which were still attempting to recover from the budget impasse of the prior few years. The Department implemented a number of rate increases to address the goal of sustaining the Aging network, as well as rebuilding and expanding our Adult Day Service provider network which was hit especially hard during the budget impasse. These challenges are ongoing.

<u>Impact of COVID 19 on Department Operations:</u> As a result of the COVID-19 pandemic and the Governor's Stay at Home Order, the Department had to quickly transition the majority of its 150 staff members to working remotely. The transition for the Senior Helpline and the Adult Protective Services Hotline staff was especially challenging. Ensuring that staff had the necessary equipment to work remotely required significant coordination with our Division of Information and Technology. The Department continues to coordinate with the Illinois Department of Innovation and Technology to ensure that staff who do not have access to technology and/or the internet acquire access through requests for additional equipment and the provision of hot spots if necessary. The transition to successfully working remotely was for the most part completed by the end of the examination period, however; there continue to be occasional access issues with remote work and the IT staff solve those issues on a case by case basis.

<u>Stabilization of Aging Network of Services</u>: The COVID-19 pandemic has been especially challenging for our Senior population and for our Aging Network. On March 16th, the Department was directed to close 75 Adult Day Service agency sites as well as 400 Senior Centers, including congregate dining sites, resulting in the Aging network having to quickly adjust to providing additional home delivered meals and remote ADS. Additionally, our Care Coordination Units were instructed to provide remote assessments to CCP participants. The Department closely coordinated with our federal and state partners, including the ACL, Federal Emergency Management Administration (FEMA), and our 13 AAAs to provide additional access to home delivered meals and shelf stable meals. Since March 30, 2020 a total of 58 million home delivered meals have been provided through December 2020 reflecting an average of 48,000 meals per day. The challenges related to service delivery continued past the end of the examination period as a result of the COVID pandemic.

Coordination with FEMA/IEMA: In addition to the increase in federal funding, the Department has coordinated with FEMA and Illinois Emergency Management Agency (IEMA) to obtain 750,000 shelf stable meals that are scheduled to be delivered in collaboration with our AAA network. The shelf stable meals were being provided at no cost to the State.

Stabilizing ADS network: During the COVID pandemic and in order to preserve capacity for older adults to return to ADS, once the shelter in place is removed, the Department is providing a capacity grant to its ADS providers at approximately $2M per month.

Appendix K for Elderly Waiver: The Department continues to coordinate with our sister agency - the Illinois Department of Healthcare & Family Services to provide increased flexibilities specific to the Elderly Medicaid Waiver, including proposing a new definition to federal CMS via Appendix K for remote ADS in order to provide meals and other support to older adults who no longer could attend ADS due to the closures. Additionally, the Department implemented a number of additional flexibilities via Appendix K to ensure care coordination services could be provided on a remote basis.

Provision of Personal Protective Equipment: The Department's In-Home agencies and Adult Protective Services (APS) agencies have continued to provide services throughout the pandemic - impacting 71,000 of our most vulnerable older adults who receive services under the Community Care Program. In the spring of FY 20 and throughout the COVID pandemic, the Department closely coordinated with the Illinois Emergency Management Agency to distribute $943,024 in personal protective equipment (PPE) to our Aging Network, with those agencies hardest hit by COVID-19 receiving the top priority. Additionally, the Department has provided a PPE offset payment to its CCP providers to assist with ensuring that all of their staff have access to PPE. This has been on going beyond the end of Fiscal Year 2020.

Implementation of Statewide Accounting System: The Department implemented the Statewide Accounting system on July 1, 2020. Though the official go live of the system was not until Fiscal Year 2021, the preparation of transition files and daily decision meetings began in April of Fiscal Year 2020 on a remote basis. Fiscal staff have worked to learn the new system and coordinating with the Department of Innovation and Technology's transition team to resolve issues, find suitable agency-specific system solutions and continue to support our at-risk senior population in the manner they are accustomed to.

STATE OF ILLINOIS
DEPARTMENT ON AGING
ANALYSIS OF OPERATIONS
For the Two Years Ended June 30, 2020

(NOT EXAMINED)

The following are key indicators of the Department's performance by fiscal year. The Department provided this information to the Comptroller's Public Accountability Project Office.

Performance Indicators	Fiscal Year 2020	Fiscal Year 2019	Fiscal Year 2018
Input Indicators			
Community Care Program (CCP)			
Total Expenditures	$ 911,593,900	$ 859,713,100	$ 832,684,200
Average Monthly Full-Time Equivalents	51	58	55
Output Indicators			
CCP Average Monthly Caseload	63,829	71,503	71,256
Total Assessments Conducted	264,945	270,433	265,765
Number of Deinstitutionalizations Conducted	29	51	67
Units of Service Conducted			
Homemaker Service	35,338,825	37,635,878	36,677,362
Adult Day Service	1,076,072	1,670,748	1,706,603
Outcome Indicators			
Percent of CCP Screens			
Face-to-Face	90.5%	90.0%	94.2%
Non-Face-to-Face	9.5%	10.0%	5.8%
CCP Caseload Cost vs. Nursing Home Caseload Costs	31.8%	28.6%	28.4%
Efficiency/Cost-Effective Indicators			
Average Monthly Cost of Medicaid Nursing Home	$ 3,468	$ 3,362	$ 3,294
CCP Average Monthly Cost of Care	$ 1,103	$ 961	$ 937
Individuals in CCP vs. Nursing Home			
Monthly Savings (Federal/State)	$ 150,946,011	$ 171,706,589	$ 167,031,162
Yearly Savings (Federal/State)	$ 1,811,352,128	$ 2,060,479,070	$ 2,004,373,944

(NOT EXAMINED)

Significant variances in expenditures were determined to be changes of $30,000 and at least 20% between fiscal years and are explained below.

FISCAL YEAR 2020 COMPARED TO 2019

General Revenue Fund - 001

Contractual Services – For Fiscal Year 2020, in preparation for moving to the statewide accounting system, the Department revised their budget into a cost center format which took formerly shared operations lines and allocated costs to a division or cost center level. That action zeroed out the shared lines causing expenditure variances throughout all General Revenue Fund operations lines.

Elder Abuse and Neglect Act (Adult Protective Services) – These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund which allowed for faster payment of billings for services rendered to protect Illinois' extremely vulnerable population that depend on this program for assistance.

Home Delivered Meals Program – These program expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment of billings for services rendered to protect Illinois' extremely vulnerable population that depend on this program for help.

Specialized Training Program – Due to spending restrictions implemented in Fiscal Year 2019, the Department was not allowed to hold their annual conference, which did occur in Fiscal Year 2020.

Unpaid Wage Increase – The decrease in Fiscal Year 2020 expenditures is due to the agreement with the Union and the Administration concerning back pay owed to Union members being paid in Fiscal Year 2019 and no back pay remaining to be paid in Fiscal Year 2020.

Retired Senior Volunteer Program – These program costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Planning and Service Grants – Planning and service grants were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Foster Grandparent Program – Foster Grandparent Program costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Long-term Care Systems Development – These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

(NOT EXAMINED)

Community Based Services to Area Agencies on Aging – These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Comprehensive Case Coordination – These costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Colbert Consent Decree – The Department on Aging worked diligently with the Department of Human Services to transfer this program during Fiscal Year 2020. Due to the transfer, the Department only maintained a portion of the contracts and grants providing services to clients to ensure a seamless transition and to address client safety. However, this action reduced the overall expenditures incurred by the Department.

Senior Health Insurance Program Fund – 396

Senior Health Insurance Program – The increase in spending in Fiscal Year 2020 was due to receiving permission from the Federal Government to carry over grant funds from the prior year and expend them from Fiscal Year 2020.

Services for Older Americans Fund - 618

Contractual Services – During Fiscal Year 2020, the Department provided training statewide for our Area Agencies on Aging, which was paid from this line. In addition, approximately $36 thousand of contractual employee costs were paid from this line. No similar costs were charged to this line in Fiscal Year 2019

Older Americans Training – Due to spending restrictions implemented in Fiscal Year 2019 the Department was not allowed to hold their annual conference, which did occur in Fiscal Year 2020.

Discretionary Government Projects – Several discretionary federal grants ended in Fiscal Year 2019 and therefore caused a reduction of expenditures in Fiscal Year 2020.

Grants for Social Services III B Ombudsman – The increase from Fiscal Year 2019 to 2020 was partially due to separating the appropriation for the Title III B Ombudsman Program from the Title III B Social Services. Formerly, the spending for this activity was within the Title III Social Services program appropriation. To ensure better tracking and transparency in Fiscal Year 2020, a separate appropriation was created which accounts for the variance.

Prevention of Elder Abuse, Neglect and Exploitation – During Fiscal Year 2020, the remaining 2019 grant was drawn in as well as a portion of the 2020 grant, which resulted in an increase over 2019.

National Lunch Program – As the COVID pandemic started, the National Lunch Program was significantly impacted as providers scaled back services. This resulted in an approximately 23% decline in expenditures compared to Fiscal Year 2019.

(NOT EXAMINED)

Long Term Care Ombudsman Services Older Americans – During Fiscal Year 2020 the remaining 2019 grant was drawn in as well as a portion of the 2020 grant, which resulted in an increase in spending over 2019.

Preventive Health – As the COVID pandemic started, the federal government and the Department shifted our focus to health, safety, and welfare which resulted in additional nutrition and family caregiver grants and spending, and a decrease in preventive health expenditures from Fiscal Year 2019 to Fiscal Year 2020.

Nutrition Services Incentive Program – As the COVID pandemic started, the federal government and the Agency shifted focus to health, safety, and welfare, which resulted in additional nutrition and family caregiver grants and spending. This resulted in an increase in nutrition services incentive program expenditures from Fiscal Year 2019 to Fiscal Year 2020.

Congregate Meals Program — As the COVID pandemic started, Congregate Meal sites were closed which lead to a decrease in expenditures from Fiscal Year 2019 to Fiscal Year 2020.

Home Delivered Meals Program – As the COVID pandemic started, Home Delivered Meals were in high demand as congregate sites and adult day centers were closed which created more need for home delivered meals and resulted in the increase in spending from Fiscal Year 2019 to Fiscal Year 2020.

Refunds Federal Grant Funds – In Fiscal Year 2020, the Department refunded in excess of $4.5 million of unspent grant funds from Federal Fiscal Years 2012 - 2014.

Commitment to Human Services Fund - 644

Adult Protective Services – Program expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment on billings for services rendered to protect Illinois's extremely vulnerable population that depend on this program for help.

Home Delivered Meals – Program costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment of billings for services rendered to protect Illinois' extremely vulnerable population that depend on this program for help.

Retired Senior Volunteer Program - These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Planning and Service Grants to Area Agencies on Aging – These grants were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

(NOT EXAMINED)

Foster Grandparent Program – Foster Grandparent Program costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Long-term Care Systems Development – These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Community Based Services to Area Agencies on Aging – These program costs were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network.

Comprehensive Case Coordination – These expenditures were formerly paid from the General Revenue Fund. Beginning in Fiscal Year 2020, the appropriation was moved to the Commitment to Human Services Fund, which allowed for faster payment and cash flow stability for the Aging network. The program is also an entitlement and grown in clients annually which increases spending.

Tobacco Settlement Recovery Fund 733

Senior Health Assistance Program – This program received an increase in its appropriation to accommodate the needs of seniors seeking assistance with applications and information.

Department on Aging State Projects Fund 830

Non-Appropriated Census Grant – The Department was granted monies by the Department of Human Services as a passthrough for the Area Agencies on Aging to enable Seniors of Illinois to be counted in the Census. This was a one-time grant for Fiscal Year 2020.

(NOT EXAMINED)

FISCAL YEAR 2019 COMPARED TO 2018

General Revenue Fund – 001

Electronic Data Processing – This spending increased as changes were made to how the State budgeted for what would become the Division of Innovation and Technology within the Aging budget. Several vacancies were filled and increased contractual cost were incurred as the need for programming new and repairing old systems became vital to continuing programmatic operations.

Specialized Training Program – The decrease in Fiscal Year 2019 program expenditures was due to there not being a conference held in Fiscal Year 2019.

Senior Helpline – During Fiscal Year 2019, the Department re-evaluated staffing to ensure the integrity of the Helpline was maintained. The executive team decided that additional staff were necessary to keep wait times and missed calls numbers down. The increase in spending is associated with adding those necessary staff.

Unpaid Wage Increase – The increase in Fiscal Year 2019 costs are due to the payment of back pay in accordance with the agreement between the Union and the Administration concerning back pay owed to Union members.

Benefits, Eligibility Assistance and Monitoring (BEAM) – During Fiscal Year 2019, the executive team re-evaluated the functions of the BEAM, as the Benefits Access Program had transitioned to the Division of Community Relations and Outreach and the transition to managed care had occurred a number of years ago resulting in a decreased demand for assistance from our provider network. The executive team decided that staff within this program would be redistributed to other areas of the Department to respond to increased demands within the Department which distributed the former appropriation to other areas.

Community Care Program – This program is an entitlement and experiences growth in clients annually, which increases spending.

Senior Health Insurance Program Fund – 396

Senior Health Insurance Program – Because this program runs on an irregular fiscal year from April to March, funding crosses State fiscal years. Expenditures that could have been paid from Fiscal Year 2019 were pushed into Fiscal Year 2020 as a result of a delay for refining the grant process to comply with the Uniform Guidance for federal grant spending.

Services for Older Americans Fund – 618

Contractual Services –The spending decrease is due to National Association of States United for Aging and Disabilities being paid from this appropriation in Fiscal Year 2018, but not in Fiscal Year 2019.

Expenses of Senior Meal Program – Expenditures increased as the program received additional funding to pay salary and fringe benefits completely from the Federal grant.

<u>Older Americans Training</u> – Due to spending restrictions implemented in Fiscal Year 2019, the Department was not allowed to hold their annual conference, which did occur in Fiscal Year 2018.

<u>Discretionary Government Projects</u> – The Department applied for and received several additional grants during Fiscal Year 2019, as well as had several older grants close out, which increased the spending in this appropriation which is used for short term Federal awards.

<u>Prevention of Elder Abuse, Neglect and Exploitation</u> – During Fiscal Year 2018 the expenditures were higher due to a change in the awarding of the grants. The grants were changed to be spent over two years. This caused a delay in creating grant agreements and therefore expenditures occurred in Fiscal Year 2020, instead of Fiscal Year 2019.

<u>Home Delivered Meals Program</u> – Delays due to the Federal budget impasse resulted in funding not being available to draw down until very late in Fiscal Year 2018, which pushed expenditures into Fiscal Year 2019.

<u>Preventive Health</u> – Delays due to the Federal budget impasse resulted in funding not being available to draw down until very late in Fiscal Year 2018, which pushed expenditures into Fiscal Year 2019.

<u>Refund Federal Grant Funds</u> – Refunds vary by year due to grantees' need for funding.

(NOT EXAMINED)

Significant variances in receipts were determined to be changes of $30,000 and at least 20% between fiscal years, and are explained below:

FISCAL YEAR 2020 COMPARED TO 2019

General Revenue Fund - 001

Prior Year Refunds – The decrease in receipts was primarily due to three large refunds of Fiscal Year 2018 expenditures that were received in Fiscal Year 2019. These refunds did not recur in Fiscal Year 2020.

Senior Health Insurance Program Fund - 396

U.S. Department of Health and Human Services – The increase in receipts was due to additional grants being granted out in Fiscal Year 2020.

Services for Older Americans Fund - 618

Prior Year Refunds – The decrease in receipts was due to more timely refunds being received.

Commitment to Human Services Fund - 644

Prior Year Refunds – The decrease in receipts was due to more timely refunds being received.

Long Term Care Ombudsman Fund - 698

Prior Year Refunds – The increase in receipts was due to receiving refunds for prior years after the fiscal year was closed.

Tobacco Settlement Recovery Fund - 733

Prior Year Refunds – No prior year refunds were received in Fiscal Year 2020.

Department on Aging State Projects Fund - 830

General Revenue – The increase in receipts was due to receiving monies for the census grant.

(NOT EXAMINED)

FISCAL YEAR 2019 COMPARED TO 2018

General Revenue Fund - 001

Prior Year Refunds – Increased refunds were primarily due to three large refunds of Fiscal Year 2018 expenditures that were received in Fiscal Year 2019. No similar large refunds occurred in Fiscal Year 2018.

Senior Health Insurance Program Fund - 396

U.S. Department of Health and Human Services – Decreased receipts were due to less grants being sent out to grantees.

Commitment to Human Services Fund - 644

Prior Year Refunds – Increased refunds were due to timing of receiving refunds for prior years after the fiscal year was closed.

Tobacco Settlement Recovery Fund - 733

Prior Year Refunds – Increased refunds were due to return of unspent grant funds by a grantee after the fiscal year closed.

(NOT EXAMINED)

Lapse Period spending exceeding 20% of total fiscal year expenditures and at least $20,000 is explained below:

FISCAL YEAR 2020

General Revenue Fund – 001

Contractual Services – The State sent workers home in March 2020 to work remotely due to the COVID-19 Pandemic to protect their safety and wellness. Many businesses also closed their doors and struggled to work remotely. As a result, our Division of Finance and Administration received many bills late in the fiscal year, causing a higher than normal amount of lapse period spending.

Electronic Data Processing – The State sent workers home in March 2020 to work remotely due to the COVID-19 Pandemic to protect their safety and wellness. Many businesses also closed their doors and struggled to work remotely. As a result, our Division of Finance and Administration received many bills late in the fiscal year, causing a higher than normal amount of lapse period spending.

Colbert Consent Decree – The Division of Finance and Administration received many bills late in the fiscal year, causing a higher than normal amount of lapse period spending due to final reconciliations of grants and contracts before the program was completely moved to the Department of Human Services.

Services for Older Americans Fund – 618

Older Americans Training – Significant lapse period spending was due to a billing received late in the fiscal year from the Office of the Auditor General for the Department's share of the Fiscal Year 2019 Statewide Single Audit.

Training and Conference Planning – Significant lapse period spending was due to a billing received late in the fiscal year from the Office of the Auditor General for the Department's share of the Fiscal Year 2019 Statewide Single Audit.

National Family Caregiver Support Program – The Department received two additional sources of Federal grant awards from the Family First Coronavirus Response Act and the CARES Act. The awards were received in late April, and grant agreements needed to be completed which delayed requests for cash until late May and mid-June. This pushed processing of payments into the lapse period, which accounts for the variance.

Nutrition Services Incentive Program – The Department received two additional sources of Federal grant awards from the Family First Coronavirus Response Act and the CARES Act. The awards were received in late April, and grant agreements needed to be completed which delayed requests for cash until late May and mid-June. This pushed processing of payments into the lapse period, which accounts for the variance.

Congregate Meals Program – The Department received two additional sources of Federal grant awards from the Family First Coronavirus Response Act and the CARES Act. The awards were received in late April, and grant agreements needed to be completed which delayed requests for cash until late May and mid-June. This pushed processing of payments into the lapse period, which accounts for the variance.

Home Delivered Meals Program – The Department received two additional sources of Federal grant awards from the Family First Coronavirus Response Act and the CARES Act. The awards were received in late April, and grant agreements needed to be completed which delayed requests for cash until late May and mid-June. This pushed processing of payments into lapse period, which accounts for the variance.

Refund Federal Grant Funds – The Department worked with the Administration on Community Living to process the return of unused grant funds. Due to the need to coordinate the state system and the federal system, as well as the need to receive agreement as to the amount of the refund, the refund took longer to process than usual.

Commitment to Human Services Fund – 644

Long Term Care Systems Development – This grant is usually fully requested and expended during the fiscal year. We received reimbursement requests during the lapse period in Fiscal Year 2020.

Department on Aging State Projects Fund – 830

Non-Appropriated Census Grant – The Department on Aging was provided monies by the Department of Human Services (DHS) to pass through to the Area Agencies on Aging to assist with getting seniors counted during the 2020 Census. This grant was received late in the fiscal year from DHS, therefore, the Department's grantees were requesting their final payments near the end of the lapse period.

(NOT EXAMINED)

Lapse Period spending exceeding 20% of total fiscal year expenditures and at least $20,000 is explained below:

FISCAL YEAR 2019

General Revenue Fund - 001

Contractual Services – The Department discovered late in the fiscal year that bills from one of the operations companies were being sent to the wrong address. Once this was discovered it took time to get all bills processed which led to greater than normal lapse period spending.

Electronic Data Processing – Regular billings from the Department of Innovation and Technology were delayed as they were transitioning to the State's new accounting system. This caused bills to come in very late in the fiscal year which were processed during lapse period.

Telecommunications – Regular billings from the Department of Innovation and Technology were delayed as they were transitioning to the State's new accounting system. This caused bills to come in very late in the fiscal year which were processed during lapse period.

Senior Employment Specialist Program – The Division of Finance and Administration did not receive the final reconciled payment requests until July of 2019 which increased lapse period spending.

Grandparents raising Grandchildren Program – The Division of Finance and Administration did not receive the final reconciled payment requests until July of 2019 which increased lapse period spending.

Unpaid Wage Increase – The appropriations for making back pay wage payments were not available until lapse period.

Long-term Care System Development – The largest Area Agency on Aging was late in requesting funding causing higher than normal spending to occur during lapse period.

Community Care Program – The increase in lapse period spending occurred due to 2 reasons, processing of prompt pay interest and delays in providers submitting bills.

Colbert Consent Decree – The increase in lapse period spending occurred due to delays in providers submitting bills.

Services for Older Americans Fund - 618

Contractual Services –There was a unique training held for our Aging network late in the Spring, which was new to the Agency. This caused delays in receiving and paying the final invoices for the training.

Training and Conference Planning –There was a training held in June for Ombudsman and Adult Protective Services. The bills for speakers and room rentals were not received until July for processing, as well as most of the speakers were not certified vendors at the Comptroller, which led to delays in payments.

(NOT EXAMINED)

National Lunch Program – The Department deployed a new system for billing which created delays as providers were training to use the new system which cause delays in payments.

Refunds Federal Grant Funds – During Fiscal Year 2019 an unusually high amount of interest earned on federal grants was returned to the Department from our network, which was then processed for payment to the federal government during lapse period.

STATE OF ILLINOIS
DEPARTMENT ON AGING
NUMBER OF EMPLOYEES

(NOT EXAMINED)

For the Fiscal Year Ended June 30,

	2020	2019	2018
AVERAGE FULL-TIME EMPLOYEES			
Executive Office	20	21	23
Division of Finance and Administration	16	16	15
Division of Planning, Research and Development	13	13	11
Division of Home and Community Services	34	32	32
Division of Communications and Outreach	38	38	36
Division of Benefits, Eligibility, Assistance and Monitoring	11	15	17
Information Technology	16	15	16
Total average number of employees	148	150	150

The table above presents the average number of paid employees by division for the Department.

STATE OF ILLINOIS
DEPARTMENT ON AGING
COST STATISTICS
For the Two Years Ended June 30, 2020

(NOT EXAMINED)

Cost Per Community Care Program Client

The following comparative data was prepared from Department records for the fiscal years ended June 30:

		2020	2019	2018
Average Monthly Caseload	(1)	63,829	71,503	71,256
Average Cost per Client per Year	(2)	$ 13,235	$ 11,533	$ 11,248
Average Unit Cost	(3)			
Homemaker (per hour)		$ 20.20	$ 18.29	$ 18.20
Adult Day Care (per hour)		$ 11.12	$ 9.02	$ 9.02
Adult Day Service Transportation (one-way trip)		$ 9.08	$ 8.30	$ 8.30

(1) Average monthly caseload refers to Community Care Program (CCP) clients who received a paid service for that month. This count is adjusted to include clients who receive service through the Community Based Residential Facility demonstration project. This count does not include individuals receiving aging waiver services provided by a Managed Care Organization.

(2) Average Cost per Client per Year is calculated by taking total Community Care Program expenditures attributable to the fiscal period divided by the average monthly caseload, then annualizing over 12 months.

(3) The rate for Homemaker services increased from $17.14 to $18.29 on 8/1/2017, and to $20.28 on 12/1/2019 and $21.84 on 1/1/2020.

The rate for Adult Day Care increased from $9.02 to $14.30 on 12/1/2019.

The rate for Adult Day Service Transportation increased from $8.30 to $10.29 on 12/1/2019.

STATE OF ILLINOIS
DEPARTMENT ON AGING
ANALYSIS OF OVERTIME AND COMPENSATORY TIME

(NOT EXAMINED)

For the Fiscal Years Ended June 30,

	2020	2019	2018
Entire Department			
Overtime Hours Paid	1,177	1,018	322
Compensatory Hours Granted	3,734	4,016	3,489
Total	4,911	5,034	3,811
Value of Overtime Hours Paid	$ 65,378	$ 45,959	$ 11,264
Value of Compensatory Hours Granted	157,434	166,735	140,160
Total Costs	$ 222,812	$ 212,694	$ 151,424