

ALASKA COMMISSION ON AGING
Rural Outreach Meeting, September 15-18, 2014
Fairbanks North Star Council on Aging Senior Center,
Raven Landing Community Center, & Morris Thompson Cultural Center
Fairbanks, Alaska
Approved Meeting Minutes

Roll Call: Commission members present: Mary Shields, Anna Frank, David Blacketer, Rachel Greenberg, Rolf Numme, Banarsi Lal and Eleanor Dementi.

Not present: Duane Mayes (excused), Paula Pawlowski (excused), and Marie Darlin (plane delayed)

Staff members: Denise Daniello and Lesley Thompson

Staff not present: Sherice Cole (plane delayed)

Denise reviewed the proposed changes to the agenda:

- Commissioner Streur will not be able to attend the meeting due to a meeting conflict.
- Nancy Burke, Trust senior program officer, will not be able to attend the meeting. Amanda Lofgren, Trust program officer, will provide the Trust report.
- There is a change site visit schedule on Wednesday from 11:15 a.m. – 12:30 p.m. The group will meet with FNA staff and Elders at the Fairbanks senior center due to renovation of their Hannah Solomon building.
- Reports from the Legislative Advocacy and Bylaws Committee have been postponed to September 16 at 1:00 p.m. after Marie, who chairs these committees, arrives to Fairbanks.

Meeting Agenda: Rachel moved to adopt the agenda as amended. The motion was seconded by Anna. The motion passed.

Meeting Minutes: Rachel moved to approve the minutes as written, seconded by Rolf. Minutes were approved.

Mary reminded Commissioners to review, sign and hand the Ethics disclosures to staff.

Safety Moment: Rolf provided the safety moment.

ACoA Chair Report: Mary Shields presented the ACoA Chair report. She noted much Committee work underway. The Bylaws policies and procedures committee has drafted a Policies and Procedures manual which

will be distributed tomorrow and reviewed by Marie. The Anchorage Senior Activity Center applied for a national fall prevention grant to establish a pilot senior fall prevention program for possible duplication in other areas of the state. The ACoA sent a letter of support. They are waiting to hear if they have received the grant.

ACoA Vice Chair Report – Rolf Numme presented the ACoA Vice Chair report. Rolf noted that he has been asked to serve on the Mat-Su Council on Aging representing ACoA. Sandra Heffern is moderating the Mat-Su Council on Aging. There are 11 members in the group. They are in the organizational stage but they approved a resolution to support the Mat-Su Aging & Disability Resource Center (ADRC) funding request to the Legislature.

Rolf attended a summer seminar on health literacy communication meeting sponsored by UAA that was conducted for health care providers and consumers. Rolf defined “health care literacy” as the ability to understand, evaluate and act upon health related information that is provided by a patient’s health care provider and to effectively communicate one’s health care needs to their provider. Elderly patients that have lower levels of formal education, do not have English as their first language, or have health impairments (such as low hearing or cognitive impairments) do not always understand the directions given by their doctors such as proper dosage on medication and other information provided. Rolf noted that by improving health care literacy, the cost of health care could be reduced each year. We need to improve health care shared decision-making by engaging a patient’s health advocate that could be a family member or friend to ensure that provider information is understood and followed. Something we need to look at more in the future.

Denise welcomed the newest member of the Commission David Blacketer, resident of Kodiak, who was appointed by Governor Parnell in July to serve in ACoA’s public member seat.

Executive Director Report: Denise reviewed her Executive Director’s report.

Alaska’s Roadmap to Address Alzheimer’s Disease and Related Dementia (ADRD): The Roadmap’s core team has been meeting over the summer months and developed six goals with corresponding recommendations for strategies and performance measures. This planning document, the first state plan in Alaska to address ADRD, is expected to be completed by the end of November. It will be presented at the Alzheimer Vision to Reality Conference in November.

The current State Plan for Senior Services, FY2012-FY2015 expires on June 30, 2015. The Commission prepares the four-year comprehensive State Plan in collaboration with Senior & Disabilities Services and other partners. The Department of Health and Social Services, which serves as the Governor’s designated State Unit on Aging, submits the plan to the U.S. Administration on Community Living/Administration on Aging. This plan is federally required for all states to be able to draw down federal funding from the Older Americans Act that funds a variety of senior programs and services statewide including senior grant-funded services, elder protection, senior vocational training, Senior Voice newsletter, legal assistance, and other programs. ACoA is

looking into contracting out the actual writing of the plan as the Planner II position is vacant. Funds saved from holding off hiring the Planner II position will be used to pay for the contractor.

The White House Conference on Aging (WHCoA) occurs every ten years with the purpose of gathering input from all states on important issues facing older Americans. The last WHCoA event occurred in 2005. The next WHCoA event is planned for 2015. Information gathered from the Elder-Senior Listening Sessions will be used for the State Plan for Senior Services needs assessment and the WHCoA to draft policy recommendations from Alaska.

ACoA's Planning, Legislative Advocacy, and Executive Committees approved and prioritized two operating budget recommendations for this year's advocacy efforts for increased base funding for two senior grant programs administered by Senior and Disabilities Services (SDS): (1) National Family Caregiver Support Program (\$325,000 General Funds/Mental Health) and Senior In-Home Services (\$350,000 General Funds/Mental Health).

In addition, the Commission recommended \$300,000 MHTAAR (Mental Health Trust Authority Authorized Receipts) base funding for the Aging and Disability Resource Centers (ADRCs) to the Trust Planning Committee and to transition the ADRCs as a stand-alone item under the Trust's budget to come under the Trust's Housing and Long-Term Supports Focus Area. Previously, the Trust provided \$125,000 to the ADRCs based on ACoA's funding recommendation. In September, the Trust approved all of ACoA's budget recommendations to include in the Mental Health bill (National Family Caregiver Support Grant Program, Senior In-Home Services, and the Aging and Disability Resource Centers).

Mary added a reminder to the Commission that next week is "Senior Fall Prevention Week." Everyone needs to be educated about senior fall prevention to prevent injuries from happening. In addition, the Governor signed a Proclamation to recognize next week as "Employ Older Workers Week" to recognize the contributions of older workers and their employers who hire them.

In November 2013, the Governor proposed the creation of the Medicaid Reform Advisory Group (MRAG). This group is comprised of legislators, health care providers, and consumer groups for the purpose of proposing policy recommendations to restructure Medicaid in Alaska and make it a sustainable program. This group has been tasked with three key reform mandates: (1) improve budget predictability and stability; (2) increase ease for providers to navigate the system; and (3) implement the patient-centered medical home model to integrate physical and behavioral health services to provide whole person care. Commissioner Streur Chairs this group as a non-voting member and provides information/staff support. The MRAG held its first meeting in April and has been meeting monthly. The Governor requested that the MRAG submit a report by November 15 describing their findings and recommendations for reforming Medicaid as a sustainable program and address his three mandates. The Governor will use this report to inform his FY2016 budget deliberations. Further, the Governor requested that recommendations from the Medicaid Task Force Report (2011) be considered in the November 2014 report.

The MRAG met in April, May, June, and July with their next meeting scheduled for September 16. They will have one more meeting in October. During the July meeting, MRAG members were presented with the “Medicaid Innovation List” of 23 items for consideration in Medicaid Reform. Members identified 8 items from the list to move forward to the Governor as recommendations for Medicaid Reform. The remaining items will be considered at future meetings. The Medicaid Innovation List is attached under Tab 4 in the meeting binder. The circled options are those that were selected at the July meeting by MRAG Committee members to be forwarded to the Governor. The Department’s staff are now preparing more background information on the other options listed.

We have asked Josh Applebee, Deputy Director for Health Care Policy; Margaret Brodie, Director of Health Care Services; and Jon Sherwood, Deputy Director for Senior & Disabilities Services to provide the Commission with an overview of the MRAG options and their possible impacts for Alaska seniors. We have scheduled time on Thursday’s agenda for the Commission to discuss options for MRAG’s recommendations and what action the Commission may want to pursue.

Jon Sherwood made the introduction of Margaret Brodie who is working closely with this committee. They have been working since April preparing information for MRAG’s innovations.

Margaret reviewed the eight potential items that the Medicaid Reform committee will recommend to the Governor as ways to reduce Medicaid spending. The other item numbers 4, 5, 8, 10, 12, 13, 16, 18, 19, 20, 21, 22 and 23 remain under consideration as staff provides additional information. Many of these items will affect seniors in this state. It is very important that the Commission provide input on this list. Recommendations need to be submitted to the MRAG soon.

Medicaid Innovation List: Below are the innovation options under consideration by MRAG.

1. Combine all Program Integrity/Fraud efforts in the Department
2. Analyze Travel Patterns/Diagnoses/Frequency/Results for Increased Savings – **Margaret noted that a transportation broker will be used for all travel.**
 - a. 10-Day Plan Ahead
 - b. Non-emergent travel rules
 - c. Retrospective reviews on all medevac’s
3. Maximize Use of Telemedicine through incentivizing reimbursement
4. Medicaid Diabetes Self-Management Program. **Margaret noted that this will not be like managed care in the lower 48. This recommendation should not affect seniors in a negative way but will help to insure that seniors receive the proper care in an appropriate setting.**

5. Utilize Public Health Nurses (PHN) for Evaluation and Assessment of Waiver Recipients
6. Cap Waiver Recipients to Nursing Home level of care annually
7. Cap total number of prescriptions per recipient (8-10?)
8. Cost Savings through contracted services – **Margaret and Jon noted that if waiver services cost more than nursing home care, the funding for these services will be capped to the annual cost of nursing home level of care. Waiver’s cost will be neutral and may affect a small number of seniors.**
 - a. Pharmacy
 - b. Assessments
 - c. Care Coordination
9. Uniform FFS reimbursement for all treatment grants
10. Reduce benefits to optional benefit plan (or state plan benefits only). **Essential benefits are the requirements of every plan as this is a federal mandate. Only optional benefits will be considered for reduction.**
11. Eliminate the loophole that allows legally responsible relatives (spouse, parent) to refuse to financially support them in order for the other relative (spouse, child) to obtain Medicaid.
12. Look at Behavioral Health service limitations (utilization limits) on an annual basis per recipient
13. Establish Utilization Limits for Physical Therapy, Occupational Therapy, Speech Therapy and Speech-Language Pathology for practitioner and clinic. **Margaret noted that this recommendation prevents a loop hole and will have minimal impact to seniors.**
14. Develop and implement a Uniform Assessment Tool (UAT) for all waiver services.
15. Encourage the development of regional behavioral health organizations to utilize and take advantage of economies of scale in service delivery. **Margaret noted that this will put limits on services provided.**
16. For Medicaid fee-for-service increase co-pays, add new co-pays, & increase annual cap.
17. Allow aged and permanently disabled with fixed incomes to be automatically renewed based on cost of living increases. **Margaret and Jon noted that this will provide a cost savings for staff time and ease the burden on filing paperwork by recipients.**
18. Expand the scope of practice for RNs, LPNs and home health aides to improve access to services and decrease associated costs in delivering services.

19. Limits total Medicaid spending to no greater than four percent annual growth, in essence establishing a global spending cap on Medicaid expenditures.
21. An across the board rate freeze for one year.
23. 1915(k) - capture an additional 6 % federal match. Change Alaska's 1915(c) waiver system to 1915(k) as a way to restructure Personal Care Assistant (PCA) services to increase federal funding to the State.

Jon discussed the value of 1915(k) option for bringing in new federal funding to the State. Denise noted the drawbacks of the 1915(k) in that individuals must still meet nursing home level of care and that the (k) option does not provide all of the services provided under the existing (c) waiver such as assistive technology, home modifications, and medical equipment and supplies. Denise noted the benefits of looking at using the 1915(i) waiver as a means to serve people with ADRD and other cognitive impairments who may not qualify for nursing home level of care. She said that ACoA may want to recommend to MRAG that the State should consider both the 1915(k) and (i) options as a way to improve service to people with ADRD and other cognitive impairments who are underserved and unserved.

Rachel wondered if part of this group was going to look at Medicaid expansion. Margaret stated that MRAG is not considering Medicaid expansion as Alaska is not seeking expansion at this time.

Denise asked the Commission to provide input on what options we should recommend to the MRAG in our public comment. On September 18, we have scheduled time for the Commission to discuss these innovations and make decisions regarding what options we want to emphasize in our public comments.

Mary reviewed the Executive Committee report. She noted that the Executive Committee met to review and take action on the September meeting agenda, the format for the Elder-Senior Listening Forums, and ACoA's budget and policy recommendations as referred by the Planning and Legislative Advocacy Committees.

Banarsi presented the Pioneer Home Advisory Board (PHAB) report. Banarsi is the PHAB Chair. He thanked Mary for her service to the Pioneer Home Advisory Committee. Banarsi explained that that PHAB is looking at policies and procedures and will get feedback from residents to see if they would be beneficial. They have put together a checklist to ensure Homes pass inspections. In the past, they have looked at trying to use space extra space in Sitka and Anchorage that needs minor modifications to make rooms useable. This could increase the bed space by 25 beds. Banarsi noted that the cost would be around \$1.5 million.

Governor's Council on Disabilities & Special Education (GCDSE) report. Banarsi serves as ACoA's representative on the GCDSE and expressed his gratefulness to serve on this board. Banarsi noted that the Governor's Council has 28 members. They believe that people with disabilities should be given the same opportunities and jobs as anyone else. Banarsi serves on the GCDSE's legislative advocacy committee.

Denise reviewed the format for the Elder-Senior Listening Sessions that will take place during the next two days. The first one will be held at Raven Landing Community Center in partnership with Raven Landing and the

Fairbanks North Star Borough Senior Advisory Commission. The second one is a special outreach to the Alaska Native Elder community. It will be held at Morris Thompson Cultural Center in partnership with Denakkaanaaga.

Site visits are planned for September 15. The Commission will split off to three groups to visit agencies in Fairbanks, North Pole, Nenana, and Galena. ACoA's meeting recessed until September 16th.

Tuesday, September 16, 2014
Raven Landing Senior Community

FAIRBANKS NORTH STAR BOROUGH LISTENING FORUM ON SENIOR ISSUES. This session was held in the morning.

Alaska Commission on Aging Business Meeting

Call to order: 1:00 p.m.

Roll Call: Commission members present: Mary Shields, Anna Frank, David Blacketer, Rachel Greenberg, Rolf Numme, Banarsi Lal, Eleanor Dementi, and Marie Darlin.

Not present: Duane Mayes and Paula Pawlowski.

Staff members: Denise Daniello, Lesley Thompson, and Sherice Cole

Public comment was heard from persons attending in-person and by teleconference.

Public Comment - Lucy Beach from the audience stated she has the privilege of taking care of her mother here in Alaska. She is an only child with no siblings. Ms. Beach stated that she received help from the Fairbanks Alzheimer's Association with finding out about services for her mom. Lucy said there is frustration with not enough long-term care services and beds for the elderly in rural Alaska. She believes that Southeast Native facilities need to step up and hopes that serious change can happen soon. Ms. Beach stated that she has heard many sad stories about Elders not receiving proper care and it is heartbreaking.

Public Comment – Allison Lee, Executive Director for ResCare Alaska

Ms. Lee talked about older Alaskans receiving Medicaid waiver services and Personal Care Assistant (PCA) services in Fairbanks. Ms. Lee observed that there has been a significant reduction in hours for services since the implementation of the 2012 regulations. The PCA Association is working closely with the Senior and Disabilities Services to implement meaningful changes to the current PCA Program to improve services. Ms. Lee said she would like see the Alaska Commission on Aging (ACoA) support Option 23 being considered by MRAG to amend the Medicaid State Plan and include 1915(k). She believes this is the only option that has the ability to increase services and reduce costs.

Public Comment – City of Fairbanks Mayor, John Eberhart

Mayor Eberhart said that Fairbanks needs an Alaska Commission on Aging. Mayor Eberhart requests ACoA to advocate for a funding increase for the Community Matching Block Grant for Human Services as this state funding source funds a variety of nonprofit organizations in Fairbanks including funding for the North Star Council on Aging’s senior meal program. Fairbanks city has a small boundary. They are trying to cover areas that extend beyond the city of Fairbanks. They like to try and help the small non-profit senior centers in the borough such as Salcha Senior Center and the Nenana Santa Senior Center. The administrators from these centers have requested funding assistance from the City of Fairbanks for their centers. The Fairbanks North Star Borough has one opportunity to divide up community revenue sharing. The Borough is allowed to give a certain percentage to these centers.

ACoA Committee & Representational Reports

Marie Darlin, Chair, ACoA Bylaws Committee

Marie reported that the Bylaws Committee continued work on the draft Policies and Procedures manual that will supplement ACoA’s Bylaws. The Committee reviewed other Policy and Procedures manuals from other organizations to inform its work. Marie asked Commissioners to review and provide feedback of the draft Policies and Procedures. We plan to present the draft Policies and Procedures manual to the Commission at the December meeting and ask for approval.

Marie Darlin, Chair, ACoA Legislative Advocacy Committee

Marie discussed the legislation that ACoA advocated for last session and those which were not approved. She also reviewed possible legislation that may be considered by the Legislature next session and which ones the Commission should approve. Marie noted that an important topic is the need for improved support for family caregivers (who provide the majority of care for seniors) and respite care. She also explained that there exists legislation in other states that provide support for family caregivers. This legislation is known as the CARE Act and is supported by AARP.

Division of Senior & Disabilities Services (SDS) Report

Jon Sherwood, Deputy Director

Jon Sherwood presented the SDS report. One challenge SDS is working on is rural service areas as there is much turnover among rural tribal partners. From the start of the year, SDS has been doing re-assessments for waivers and personal care using tele-health. Individuals can go to their local health clinic for these appointments. SDS has conducted a little over twenty re-assessments to date. Currently, SDS is using tele-health in areas served by Tanana Chiefs and Maniilaq.

SDS is looking at creating a Tribal Aging and Disability Resource Center (ADRC). The Office of Rate Review, SDS, Alaska Native Tribal Health Consortium (ANTHC), Elder’s Committee, and Tanana Chiefs Conference have been collaborating to conduct a pilot project that would examine an alternative method to pay for services in rural areas (where services cost more) and are looking at developing a uniform rate, for PCA, chore and respite care.

They are striving to develop a cost based rate targeting services in rural areas. This project remains in the pilot stage.

Regarding senior grants, SDS has ongoing grants for assisted living facilities through the Senior Residential Services Grant for Dillingham, Galena, and Tanana. SDS also provides grant support for rural case management and ADRD training. SDS has been working with the Alaska Commission on Aging on the Road Map to Address Alzheimer's Disease and Related Dementia.

SDS is receiving proposals to conduct case management for traumatic brain injury in rural areas. SDS's pilot Aging and Disability Resource Center (ADRC) in Kenai is doing well. Funding for this program came through a capital recommendation advocated for by the Boards/Council/Commission on Aging. This ADRC is also working with the Veterans Administration. Rachel Greenberg asked about the Kenai assessment data. Jon said that they are still analyzing data and they will be doing a follow-up with the pilot.

Jon talked about the SDS listening sessions being held statewide regarding the new final rulings from the Centers on Medicare and Medicaid regarding home- and community based waiver services. To date, these sessions have been held in Fairbanks, Anchorage, Kenai, and Juneau. These final rulings will change the way services are provided in Alaska in two important ways. It will require (1) Conflict-free care coordination where the agency that develops the plan of care is not the same one that provides services to avoid self-referrals (except in special circumstances where no other providers are available); and (2) waiver services to allow recipients access to mainstream society and not segregate recipients.

Alaska Mental Health Trust Authority: Amanda Lofgren, Program Officer

Amanda Lofgren went over the staffing changes with the Trust. Amanda said she will be the Trust Program Officer that will be working with ACoA. All focus areas have more than one program officer overseeing the different focus areas. The Bring the Kids Home focus area has completed its work and is being phased out. Disability Justice remains a focus area. Workforce Development remains a focus area but is mainly maintenance now. Two new focus areas are Substance Abuse Prevention and Treatment, and Beneficiary Project Initiative which the Trust has now changed the Initiative's name to Beneficiary Employment Engagement. The Housing Focus Area is now called Housing Long-term Services and Support to include emphasis on long-term services and supports.

The following changes have been made to the Trust's FY16 Budget for funding services:

Non-Focus area Allocations

These allocations are similar to the grant making process. Funding for the small projects grant program was increased by \$100,000 this year. Many senior centers around the state use this funding. Trust funding for the Partnership Designated Grant program was also increased. This grant program recently provided funding for a documentary film that followed four caregivers in the state.

Focus area Allocations

Trustees allocated an additional \$400,000 to the Housing and Long-term Services Support Budget. A portion of this funding will be available for assistance with assisted living home transition and care coordination services. This funding models the SDS the Nursing Home Transition Grant but is dedicated for Trust beneficiaries who are on the General Relief Program. An additional \$200,000 was allocated for community integration service system infrastructure and capacity development for Alzheimer's Disease and related Dementias (ADRD) and geriatric institutional diversion; \$100,000 allocated for the Information Technology Tele-Health Service System Program; and \$175,000 increase to the original allocation of \$125,000 for the Aging & Disability Resource Centers (ADRCs) as recommended by ACoA.

Amanda said Chief Justice, Dana Fabe presented to the Trustees and shared her concerns about Elders and Guardianship. She has assigned an Elders Task Force to examine this issue. Chief Justice Fabe extended an invitation to the Trust and ACoA, Executive Director Denise Daniello to participate in this work.

In August, Representatives Stoltze and Hughes invited the Trust and partners to tour the Wasilla and Palmer Senior Centers and attend a meeting at the Palmer Town Hall for the community to share concerns. Trustees, Trust staff, Commissioner Streur, SDS staff, the Mat-Su Health Foundation and ACoA members Denise Daniello, Rolf Numme, and Rachel Greenberg attended this event.

Amanda has been working with Diana Weber and the Alaska Psychiatric Institute (API) to determine whether senior patients who are admitted for mental health are actually suffering from ADRD. If the patients were suffering from Dementia or Alzheimer's disease, API would not be an appropriate place for them to reside. The Alzheimer's Roadmap will help with this process.

The Trust is working on making an assisted living facility in Unalakleet and is collaborating with the Norton Sound Corporation. They are working with the Rasmussen Foundation for the pre-development phase. Fairbanks and Juneau are now having a needs assessment done for assisted living facilities.

Marie said the Juneau needs assessment final draft should be completed by October 1.

Office of Long-Term Care Ombudsman (OLTCO)

Diana Weber, Long-Term Care Ombudsman

Diana Weber is retiring in October this year.

Diana commended Amanda Lofgren for her work with the Trust.

Diana said she is pleased that the ACoA is tracking the legislation for the Power of Attorney Bill.

Adult Protective Services is looking into being able to continue services for cases involving deceased persons to continue services until the case is done. ACoA presented Diana with a retirement card thanking her for her service.

FY14 OLTCO Program Statistics

The Ombudsman's Office opened 734 cases for investigation in FY14, which was a 10% increase from the previous year; this stretched their budget as far as it can go. The Trust is aware of this and is looking at providing an increment for the Ombudsman's Office.

Diana noted that she encouraged her staff to do more announced visits this year. During the last year, the OLTCO made 477 unannounced visits compared to 257 visits in the prior year. This is a 67% increase and these visits are steadily increasing. The Ombudsman's Office resolved or partially resolved 90% of verified complaints to the satisfaction of the residents and complainants. Information and referral was provided to 508 public members. OLTCO also provided 81 consultations to facilities and conducted training for new home administrators on residents' rights. OLTCO also trained a lot of care coordinators.

Diana and staff completed their training program for care providers in assisted living facilities. This training focused on medical emergencies, when to call 911 and what to say. OLTCO plans to offer training on fall prevention, resident assessment, and care planning. Diana said the Ombudsman's Office works closely with the Division of Licensing to determine which facilities requires training. The OLTCO provides follow-up with care providers who have completed the training.

AARP Advocacy Report

Daryl Royce, Associate State Director Community Outreach (by teleconference) and Marie Darlin, Capitol City Task Force

Daryl Royce discussed the Affordable Health Care Act and how it is a national priority.

Daryl said that he would have to defer to Ken Helander on AARP's advocacy work.

Marie Darlin said that we will have some new legislators next session and that we need to be sure to talk to our legislators and mention bills that we supported last session that did not make it through such as the Power of Attorney bill. (Note: This bill was being worked on last session and was not yet introduced.)

AgeNet Report

Marianne Mills, AgeNet Chair

Marianne Mills explained the purpose of AgeNet which is an advocacy group composed primarily made up of senior service providers throughout the state of Alaska who provide home and community based services that advocate for services for seniors. Marianne thanked ACoA for the way ACoA works with AgeNet to coordinate advocacy. From the advocacy work of AgeNet and ACoA, we were able to secure an increase in base funding for the Nutrition and Transportation Services Grant.

AgeNet is also working with the Trust Training Cooperative to have new training offered for providers on medication management. There was a new regulation approved in July 2013 for home and community based providers regarding medication management. AgeNet is working with the Trust Training Cooperative to implement training that is now required from these new regulations.

AgeNet is working on narrowing its legislative priorities and would like to once again coordinate efforts with the ACoA. The priorities AgeNet plan to advocate for include base funding increases for the Adult Day Services Grant, National Family Caregiver Grant, Senior In-Home services, increased funding for senior services in rural communities, and increased wages for direct service staff.

Marianne has noticed some rural service providers have to close their doors due to limited funding. AgeNet would like to see all of the service providers to be able to continue providing services. AgeNet is looking at ways to help service providers and prevent the closure of senior providers. They invite ACoA to help with this advocacy effort.

Marianne stated there are some concerns regarding the new final rulings from the Centers for Medicare and Medicaid. One new regulation prohibits providers that provide direct care services from also providing care coordination services. In the smaller communities the only agencies that provide direct care services also provide care coordination services. AgeNet would like to work with ACoA and SDS to develop a plan to remediate this problem.

Thursday, September 18, 2014
Morris Thompson Cultural Center

Talking Circle Listening Session on Alaska Native Elder Issues held in the morning. ACoA Commissioner Anna Frank facilitated forum discussion.

Alaska Commission on Aging Business Meeting: Called to order at 1:30 p.m.

ACoA Commissioner Discussion of Site Visits
Group 2 Site Visits, Fairbanks Area

Site visits included Alzheimer's Resource of Alaska, Osher Lifelong Learning Institute at University of Alaska Fairbanks, Fairbanks Pioneer Home, Fairbanks Native Association Elders Program, Fairbanks Resource Agency Senior Services Adult Day Program, Denali Center, and Chief Andrew Issac Health Center. Commissioners who participated in this group presented their impressions.

Rachel Greenberg reported there are a lot of challenges including a problem with staff turnover due to agencies not being able to pay a decent wage. There was also a need expressed for skilled nursing facilities for patients with Alzheimer's disease and Dementia. Providers discussed problems with Medicaid reimbursement rates that are not sufficient to cover the cost of services. There were also concerns expressed regarding the lack of information provided to the public on where to go for services and a need for an Aging and Disability Resource Center (ADRC) located in Fairbanks.

Marie Darlin reported it was a very busy day and they saw a lot of different groups who expressed the same concerns that Rachel mentioned. Marie said she really appreciated the opportunity to have lunch with the Native Elders. Marie observed that there appeared to be agreement about senior concerns in Fairbanks. .

David Blacketer noted that there should be more collaboration between agencies. He observed that there are gaps in services where seniors could fall in-between. No elder or senior should feel that they are alone. We should not leave a senior or elder alone even if they don't want help or company. Neighborhood watch would be good to keep an eye on our older neighbors.

Mary Shields reported from group 2. Mary said her group received a lot of good information from their meeting at the Alzheimer's Resource Agency. Her group learned that the Chief Andrew Issac Health Center visit is working on establishing a Geriatric Unit. They expressed their need for more support for this program. The lunch at the Fairbanks Native Association Elders Program was very nice. She enjoyed all of the site visits.

Site visit group 1 - Galena, AK

Site visits included meetings with the Yukon Koyukuk Elder Assisted Living Facility, Galena Tribal Council Members, Chris Reitan, Superintendent of Schools, and staff of the Edgar Nollner Health Center.

Rolf Numme reported. The Yukon Koyukuk Elder Assisted Living Facility is a very nice facility but there is a lack of residents due to previous flooding that prevented some elder residents from wanting to move back. There needs to be a waiver for people with early to middle stages of dementia who do not meet nursing home level of care. Without this support, residents are limited to services that can only help with the later stages of dementia. Their group held an informative visit with the Galena Tribal Council. They learned about the problem of unreported elder abuse. Rolf noticed that they have a strong sense of leadership and are looking to their future.

Eleanor reported Rolf explained the visits really well. Eleanor expressed concern for the safety of the people in Galena since the flooding as many of the homes that were renovated are now built on stilts – which limits safe access to them, particularly for people who are disabled. Eleanor noted said the Galena's health clinic is excellent but they have limited dental care services. She noted that staff receive a decent wage which helps them to retain staff and provide quality care.

Denise Daniello also reported. She said that transportation was a significant need for Galena as well as funding for services. She said that Galena applies for Title 6 funding but does not apply for Title 3 funding. She encouraged the Tribal Council to consider applying for both sources to enhance funding for their Elder programs. Sidney Huntington, a renowned elder, lives at the Yukon Koyukuk Elder Assisted Living Facility. She noted their meeting with Agnes Sweetsir, administrator for the facility who noted the limited funding for their residents with dementia who do not meet nursing home level of care. The facility receives private pay for these residents according to their ability to pay – which is short of the total funding needed. Denise referred

to Eleanor's safety concern for elders living in homes on stilts. During their visit, they observed a couple of ladies walking up long flights of stairs to their homes. Both ladies were disabled and used a walker or a cane. Their group noted their observations to staff at the Galena Edgar Nollner Health Center and the risk of senior falls during the winter as these stairs accumulate snow and ice. This is the first year residents are living in their renovated homes.

Group 3 - North Pole, Fairbanks, & Nenana

Site visits included Holiday Heights Senior Housing, Moore Street Senior Housing, Nenana Tortella Council on Aging Senior Center, Meda Lord Housing, Mary Demientieff Health Center, and the Nenana Cultural Center. Banarsi Lal reported Lesley did a great job introducing the Commission and explaining what the commission does. Anna Frank was very helpful since she knows the area. Holiday Heights Senior Housing is an older housing complex being built during the Pipeline era. The residents seemed happy and content with no complaints. The housing receives support from the Fairbanks North Star Borough. The Moore Street Senior Housing is a 20 unit facility and over 30 years old. About 20 people are on the waitlist. Resident turnover is slow and the wait for placement is long. They visited the Nenana Senior Center. This facility is small but well attended during lunchtime. It appears to be well-utilized well by the community. Native and non-Native seniors ate lunch at the Center but they sat separately. Many only stayed during the lunchtime. During lunch, the ACoA group met Phil Benson who introduced himself as part of the rural outreach for the Veterans Administration. His organization assists veterans with completing their paperwork.

Meda Lord Housing. Most of the units were closed and the group did not stay very long there.

Next visit was the Mary Deminetieff Health Center. They met with Donald Charlie who is a Chemical Dependency Counselor that provides counseling and intervention. Donald is also the first chief. The last stop was the Nenana Cultural Center. Banarsi said he was impressed with the overall scope of the cultural center. Banarsi said Elder home care and respite care are two senior services needed in Nenana.

Lesley Thompson also reported. The group met a lifelong Nenana resident at the Cultural Center who expressed his concern about the amount of disrespect of the elders from the youth. He also mentioned that there is a real need for hospice. They went to the town store. The store owner said the store has been in her family for 98 years. She also mentioned the need for hospice because Elders do not want to leave their home and community to die somewhere else.

Mature Alaskans Seeking Skills Training Program (MASST)

Alaska MASST State Plan Modifications & "September is Hire Older Workers Month"

Rita Bowen, Program Coordinator

Rita gave a summary about the services provided by the Mature Alaskans Seeking Skills Training program and participant eligibility requirements. Rita said the biggest need is for older adults between the ages of 55 and 65. Rita noted that the MASST program funds less than one half of 1% of the senior population. In the past

year, the MASST program has helped over 300 people. Federal funding for the MASST program was reduced by 50% two years ago.

Rita said she is working to update the MASST State Plan. She asked the commission to provide comments and/or suggestions to include in the updated MASST State Plan. Rita noted that the MASST program works closely with ACoA and strives to mirror their state plan following the Alaska State Plan for Senior Services.

Rita reviewed the MASST program participant statistics: 65% of those served from the program are on public assistance; 25% are homeless; 35% have disabilities; 19% are Veterans; and most of the people in the program have received two to three years of college. In most cases, MASST participants are not under educated. They lack sufficient work experience to compete for current jobs. When the training in the program is complete, 60% of the MASST participants get jobs and earn an average of \$20,000 to \$40,000 annually.

Marie Darlin added that during the Fairbanks site visits, her group learned of many people using the MASST program either as participants or employers who provide vocational training for MASST participants.

Rita said they are working on the bridge to college to help MASST participants complete their degree programs.

Alaska Housing Finance Corporation (AHFC), Senior Housing Office
Jim McCall, Officer Housing Relations

Jim provided ACoA Commissioners with a written report. He reported the Alaska Housing Finance Corporation has financed the following housing projects through interest rate reduction loans. These projects included new construction of an assisted living facility for developmentally or physically disabled residents; a refinance-renovation of a single family home to be used as a group home for seniors who are mentally or physically disabled; and three new single family homes to serve seniors who are physically or mentally disabled. AHFC will open 88 new affordable units in Anchorage (Mountain View and Russian Jack) for just under \$30 million.

Jim reported on changes to AHFC's Loans-to-Sponsor Program (LTSP) for nonprofit organizations providing affordable housing. Previously, the LTSP provided funding to qualifying organizations with loan funds at 0% interest rate. In July 2014, AHFC is now charging nonprofit organizations use of these loan funds at 1.5% interest. This change was necessary for program sustainability.

Jim provided an update on AHFC's energy programs. Since 2008, AHFC received \$350 million for the Weatherization Program from the Legislature. This program expended just under \$274 million and has weatherized approximately 15,000 units statewide with no tax liability to program participants. Through the Energy Rebate program, qualifying home owners can receive a rebate up to \$10,000 for energy-related home improvements. Since 2008, the legislature appropriated \$252 million. AHFC has expended \$182 million which has completed almost 37,000 initial ratings. AHFC has paid out almost 22,000 rebates. AHFC has given rebates

to just under 2,500 five star plus new construction homes and now provides rebates for six star plus homes. Currently, the rebate waitlist is 180 statewide. Previously, it was 3,000.

Jim provided an update on public housing. In Alaska there are a total of 611 senior housing units that are earmarked as senior units with 556 seniors on the senior unit waitlist. AHFC has re-opened the Housing Choice Voucher Waitlist. This waitlist was closed two years ago and was re-opened for the month of August 2014 only. They received 1,100 applications during this time frame. The waitlist is now closed again. The Housing Choice Voucher Waitlist was also opened in Soldotna and Homer and will remain open. These voucher programs are for working families that have hit hard times and is temporary until the families can financially improve their income standing.

Chugiak Manor Senior Housing waitlist has been closed for two years and it is now open and will remain open for a while. Chugiak Manor Senior Housing's order of preference is the following: 1st preference, persons 62 or older; 2nd preference, persons 55 and older with a disability; 3rd preference, for disabled individuals.

Jim said AHFC is working with Neighbor Works to provide a housing assessment in Juneau. Rachel asked what ACoA can do as there is a need for senior assisted living facility and skilled nursing. Jim said the ACoA needs to advocate for more funding to address this need. In Alaska, 19 people turn 65 every day and there are only 48 senior assisted living beds in Juneau that are operated by the Juneau Pioneer home. Jim said that many people that have had to move from Juneau since there are no assisted living openings in Juneau. More advocacy is needed for senior housing funding. Marie Darlin said there are new legislators coming into office and that the Commission needs to educate them about the need for senior assisted living in Juneau. Jim said we need to deal with this now, not later. Juneau has an economic base. Jim said a Harvard report said that we are working longer because senior retirements were impacted by the recession. Jim noted that more funding is needed for senior housing, transportation, nutrition and other senior services.

Commissioner Closing Comments

Eleanor Dementi said she is happy to have visited Fairbanks and being able to see the needs in this area first-hand.

David Blacketer really enjoyed this trip, being able to see the bigger needs in the state.

Marie Darlin said this has been a great meeting and thinks that the Commission received a lot of information we will be useful in our advocacy work.

Banarsi Lal said he is humbled that the Commission chose Fairbanks for this outreach meeting and is thankful to Denakkanaaga, Raven Landing, and the North Star Council on Aging Senior Center for hosting the Commission meeting and forums. He appreciates the Commission's leadership.

Rachel, said “thank you” to the Fairbanks community, as it was good to see the needs and strengths in Fairbanks. Rachel also noted that we have a big job ahead of us as a Commission.

Mary thanked the Fairbanks Agencies that hosted our meetings and site visits. Mary observed that these site visits help to broaden our understanding to see the needs and strengths of the communities. Mary urged Fairbanks public members to contact the Commission of issues they would like to see addressed.

Meeting adjourned at 3:08 p.m.