



MINNESOTA BOARD ON AGING
LONG-RANGE PLANNING TASK FORCE

Report and Recommendations

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**Minnesota Board on Aging
Long-Range Planning Task Force**

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BACKGROUND

The Minnesota Board on Aging, in partnership with the MN Department of Human Services and the Minnesota Department of Health, has done extensive work over the past three years in identifying the effects of an aging population in Minnesota on our ability—at the individual, community and state levels—to age well and live well. The longer-range issues identified by the *Transform 2010 Project* have focused primarily on the impacts of demographic change. At the same time, other significant changes are simultaneously reshaping such critical areas as technology, business and the economy and public attitudes along a range of topics, all of which will affect the future welfare of older Minnesotans and their families.

The charge to the MBA Long-Range Task Force was to assist the Board by reviewing a wide range of possible longer-term issues in order to prioritize those few which appear most critical to the Board's Mission and Roles.

LONG-RANGE PLANNING TASK FORCE

The Chair of the Minnesota Board on Aging appointed 5 Board members to the Task Force, and Board member Ken Moritz to serve as Chair of the Task Force. The Task Force was charged with working together to identify critical issues affecting older Minnesotans' ability Live Well and Age Well, and to make recommendations to the MBA at the regular July meeting 2008. The Task Force met six times between October 2007 and July 2008.

Early on, members of the Task Force sought to clarify the focus of their charge, given the extensive range of possible issues, many already identified through the *Transform 2010 Project*. The types of *long-range* issues that this Task Force discussed fell roughly into two categories:

1. Longer-range issues for which the MBA is in a unique position through its Advisory role to initiate action, or that are related to the specific long-range functioning of the Board and its Administrative role. In order to support and complement the work of the Board's standing Committees (and not duplicate their work), the Long Range

Planning Task Force focused on issues that tended to be more future-oriented and complex, and would require a longer time-frame to research and to identify possible solutions than is possible in the regular committee work of the Board.

2. Future-oriented issues that are outside the direct scope of the Minnesota Board on Aging's operations, but where the Task Force identified opportunities for the Board to either initiate or shape needed changes through its Advocacy role.

ISSUE REVIEW

In the course of the six meetings, the Task Force discussed the following written materials and presentations:

- Transform 2010: Summary Report which includes a long-range framework for reshaping Minnesota's response to an aging population categorized into five major policy directions: (1) redefining work and retirement to make optimum use of an older workforce and a new cadre of retirees; (2) supporting family caregivers to extend their care and thereby reduce pressure on an increasingly stretched long-term care system, (3) fostering communities that are supportive of persons throughout the lifecycle, (4) promoting health and wellness as well as improving chronic care management and expanding service availability; and (5) maximizing the application of new technologies that improve quality and make optimum use of limited resources.

As the Task Force members discussed these themes, they identified several specific elements that have specific salience for the MBA's mission and roles: (1) the future of facility-based long-term care, and what skilled facilities might look like in 2020; (2) the specific problems associated with older drivers and the lack of realistic transit options which is currently a significant issue in rural Minnesota and is also a growing problem in non-rural communities; and (3) in regard to supporting caregivers, many persons find themselves in the situation of caring for a loved one, but do not have the necessary training to do it well—or easily—therefore caregiver training should be provided to family and non-professionals.

- The MBA 2008 Strategic Plan which provides the broad context of the Board's current intent and priorities, now and into the future. The Board-specific policy directions are consistent with five of the areas identified in *Transform 2010* (above), namely: (1) communities for a lifetime; (2) consumer information to enable enlightened choice; (3) health system reform, focusing on attracting and sustaining adequate geriatric competence for future need; (4) promoting access to and adoption of new communication and information technologies; and (5) generally raising the visibility of aging issues and the role of the MBA in the general population.

In terms of future implications, the Task Force members discussed the importance of basic medical research to improve the health care system: many diseases of the past can now be managed better—giving people a better quality of life. Mental health issues (including both depression and dementia) are likely to be of increasing importance in the future.

- The 2008 MBA Legislative Priorities which again reflect the Board's work in developing and refining critical initiatives. After the Board's experience at the Legislature this year, it is clear that these initiatives will require a longer-term strategy in order to be effective. The current priorities are (1) ensuring the safety and security of frail older Minnesotans while addressing the quality assurance challenges of a decentralized long-term care system; and (2) providing critical information for older Minnesotans and their families to support their efforts to Live Well and Age Well.

The Task Force members discussed the lack of success in promoting these issues at the Legislature, and possible ways of being more successful in 2009—particularly when public funding is at stake. Future proposals to monitor HCBS and to ensure the safety and security of at-risk persons in the community should focus on the use of new technologies.

- The 2007 survey of MBA members regarding their individual priorities and the issues that they hoped would be addressed during their tenure on the Board. It is this survey that identified strong Board interest in (1) addressing the impacts of economic and demographic changes on Minnesota's rural communities; (2) clarify administration and funding priorities within the state portion of Senior Volunteer Programs funding (see below); and (3) overall administrative excellence regarding the Older Americans Act programs funded through the Area Agencies on Aging.
- The MBA's currently adopted long-range policy direction for the Senior Volunteer Programs which include the Retired Senior Volunteer Program (RSVP), the Foster Grandparent Program, and the Senior Companion Program. These are federal programs that are partially supported with state tax dollars which are administered through the MBA. The Task Force members suggested that the MBA's policies regarding these programs may need to be refreshed, but that this is not a Long-Range issue, but rather a topic for the MBA's Program Operations Committee.
- Summaries of two major 2008 Health Reform Initiatives (*viz.* the Legislature's Health Care Access Commission, and the Governor's Healthcare Transformation Task Force) and their various component elements developed for the 2008 legislative session; and a background brief on *Health Information Technology* produced by the Kaiser Family Foundation. A common element of these initiatives is the potential use of information technology and the web to improve the quality of health care through vastly improved monitoring and information processing across multiple health care and support service providers; particular the concept of Health Care

Home which would require a common platform that would allow data and information transfer across providers and settings.

- A Summary Report on Minnesota initiatives to expand the state's health care workforce through new programs and initiatives sponsored by Minnesota State Colleges and Universities (MnSCU), the legislatively-funded Health Care Education Industry Partnership (HEIP) and the Minnesota Health and Housing Alliance (MHHA)'s Health Care Workforce Solutions Council.

The Task Force members discussed (1) the potential impact of any immigration changes on the workforce, given that in some areas of the state a high proportion of the direct care workforce is made up of immigrants to the United States; (2) the inequity in salaries across health care sectors (e.g., hospitals pay considerably higher wages than nursing homes or home-care for the same personnel and for the same required standards of service); and (3) the need for universal workers who can provide a wider range of assistance.

- The MBA's currently adopted long-range policy direction for Older Americans Act Nutrition Programs in Minnesota: Senior Nutrition Priorities and Directions 2001-2005. The Task Force discussed the need to update MBA's position given the major changes in food access since the OAA was passed in the 1960s. In addition, the MBA recognizes an increased need to target scarce public nutrition funds to persons who are truly at high nutrition risk, and to review all the current models for their "market acceptability" to the specific audiences whom we intend to serve. Members also discussed the possibility of reviewing the *nutrition* and *socialization* components separately, and determining whether there may be more efficient models for providing them.
- An overview of Future Directions in the Older Americans Act Programs provided by Jean Wood. These are the longer-range priorities currently being articulated at the national level, which will and in some form or another affect MBA work in the future. The three national policy direction priorities are: (1) person-centered and simplified access to information; (2) evidence-based health promotion and self-directed disease management models; and (3) enhanced nursing-home diversion services.

The Task Force discussed the challenges posed to persons who because of dementia, depression, mental illness or other conditions may not be able to fully participate in selecting among an increasing array of "choices." The number and percentage of persons who may have compromised ability initiate their own choices is likely to increase because of longer life expectancies for persons with mental impairments and the increasing likelihood of frail persons having no available family supports. Mental health service for older Minnesotans is already inadequate, and it will be more so in the future.

- An overview of Minnesota Property Tax provided by Lee Graczyk from the Minnesota Senior Federation. The presenter outlined the specific implications of

Minnesota property tax policy for those persons (many older Minnesotans) whose incomes do not rise as the economy improves and for whom any property value increases (and hence, increases in property taxes) are not matched with increases in household income. There are two different types of solutions proposed: some advocate for property tax relief for elderly persons or others with limited incomes (e.g., reducing rates, granting exemptions, etc.); and some advocate for property tax reform (e.g., changing the way that residential property is evaluated for tax purposes—compared to income-generating property¹).

TASK FORCE PRIORITIES AND RECOMMENDATIONS

Issues within the Direct Scope of the Minnesota Board on Aging's Mission and Roles

1. Senior Nutrition Priorities and Directions: The Long Range Task Force supports the MBA's appointment of a work group to update the MBA's Senior Nutrition Priorities and Directions. The charge of the workgroup should include:
 - Identify and quantify the future target groups for OAA nutrition services in Minnesota—focusing on targeting persons who are at high nutrition-risk;
 - Clarify the relationships between the provision of nutrition services and social/support services and develop recommendations for best meeting these needs—whether in tandem or separately;
 - Propose new models of service delivery that will transition this program toward the future, addressing:
 - sustainable fiscal support
 - targeted approaches
 - market acceptability to target audiences
 - flexibility across rural/urban continuum
 - opportunities to collaborate with other “delivery services” (e.g., in the case of home-delivered meals, other agencies that are already delivering goods/services in the target area) and other “meals programs” (e.g., NutriSystem, caterers or other food services).
 - Create the policy and funding guidelines that will operationalize these new models, allowing for necessary lead time for change.
 - Evaluate these new models to ensure that the services are reaching the intended target populations cost-effectively.
2. MBA's Strategic Plan: In developing the MBA's Strategic Plan for 2009, the Long Range Planning Task Force recommends that the Board review the status of the following critical trends and develop (if appropriate) longer-term strategies to address them:

¹ Task Force members note that income generating property is also job-generating property, and tax policies must balance the tax burden across sectors in a way that does not overly impact any of them.

- Geriatric and health-care professional training in Minnesota and forecast supply for 2015-2020
 - Potential for requiring geriatric content in curricula,
 - Incentives for new professionals (e.g., scholarships, tax incentives, etc.)
 - Promotion of generalist approaches in health care (e.g., “universal workers,” family practitioners and generalist internal medicine)
 - Minnesota strategies for preventing and/or reducing future long-term care needs, working with AAA’s, health care providers and other partners to review and promote effective prevention programs, to empower Minnesotans to take action to reduce their own future long-term care need, and to assess environmental risks.
 - Models for supporting older person and their families in rural and sparsely populated areas—including applications of new technologies (see below).
3. Issues Related to MBA’s current work: The Long Range Planning Task Force discussed the strategic implications of two topics that fall under the purview of the MBA.
- Public Policy Committee: Ensuring service quality, client choice and protection. As the trend in long-term care is to provide more services and supports to people in their own homes and apartments, and as more services are provided by unlicensed personnel, the MBA should work through the Public Policy Committee to develop strategic partnerships to advocate for an updated system to ensure service quality, safety and security for older Minnesotans, regardless of care setting. The PPC should review the concept of the “mandated reporter” as it applies in Minnesota’s Vulnerable Adults Act as it is reviewed for update.
 - Minnesota Board on Aging: With increasing pressure on scarce public funds, the MBA should systematically review the services and programs funded with Older Americans Act dollars to ensure that they are (a) still needed, (b) well targeted to those who do need them, and (c) efficient and effective interventions.
 - This Task Force has recommended an evaluation of the nutrition programs by a special Nutrition Task Force (see Recommendation A.1 above).
 - The SLL program should continue to be reviewed annually by the full Board.
 - MBA staff should develop service-specific evaluation/review processes to ensure MBA’s oversight role in regard to accountability and outcomes.

Issues Outside the Direct Scope of the MBA

1. Medical Home: The Health Reform initiatives passed by the Minnesota Legislature in 2008 included the development of Health Care Home model to improve the coordination of health care and to improve information transfer across providers and settings. However, the legislation implicitly excludes persons who depend exclusively Medicare from the implementation strategy. The MBA and the MN Department of Human Services should work with the Minnesota congressional delegation and the federal Centers for Medicare and Medicaid Services (CMS) to ensure that those who may most benefit from service coordination (a high proportion of who are persons with multiple chronic illnesses, using multiple prescription

medications and frequently consulting with multiple specialists and health providers) are also covered under their Medicare benefit.

2. Application of New Technologies: The MBA should work in partnership with the Department of Human Services' initiative to explore and disseminate new technologies (a) to reduce social isolation, (b) to supplement in-home services such as the "smart home" concept, and (c) to improve service access and overcome distances. Updates from this initiative should be provided to the full MBA in conjunction with the Board's planning retreat to inform the development of the MBA's Strategic Plan and the Area Plans.
3. Aging Issues Visibility: Issues identified by the MBA and/or its Committees that have far-reaching implications for older Minnesotans and their families should be covered by the print and audio media. Strategies to raise public awareness of key issues through the popular press and other public media outlets should be explored.

Future Role of the Long Range Planning Task Force

1. In its few short months of existence, the Long Range Planning Task Force has reviewed and discussed several existing "future-oriented" initiatives and reports, and provided the above brief analysis and recommendations for full MBA's review. As a final recommendation, the Task Force believes that the MBA should extend the Task Force for a minimum of two years with an evaluation and recommendations regarding its future role and charge at that time. Task Force members have identified several issues on which to initially focus:
 - Ongoing environmental scan
 - Service models that are sustainable in Minnesota's foreseeable workforce and economic climate, especially in the non-metro parts of the state.
 - Ways to reduce the barriers that prevent consolidation and/or improved coordination across funding streams.
 - Issues proposed by members of the MBA or that emerge from the work of the three standing committees: the Public Policy, Program Operations and Diversity Committees.