

Senior Care Task Force: WGB – Access to Services

Discussion: Adult Daycare Resources

March 11, 2022

9:00am-10:30am

WebEx

Facilitator:	Hina Shah - KHI	Note taker:	KHI
Attendees:	<p>Working Group Members: Sarah Schlitter, JCDS; Senator Kristen O'Shea; Jamie Gideon, Alzheimer's Association; Annette Graham, Central Plains Area Agency on Aging; Linda MowBray, KHCA; Jan Kimbrell, Silver Haired Legislators; Dan Goodman, KDADS; Tanya Dorf Brunner, Oral Health Kansas; Shawn Sullivan, Midland Care Connection; Staci Carson, JCDS; Heather Brown, JCDS; Kendra Baldridge, KDHE</p> <p>Other Attendees: Sean Marshall, KLRD, Xavier Strong, KLRD, Leighann Thone, KLRD</p> <p>Subject Matter Experts: Nanette Perrin, Sunflower Health Plan; Melody Dowling, United Healthcare; Jennifer Pruento, Aetna; Heather Thies, Cottonwood Incorporated; Julie Govert Walter, North Central-Flint Hills Area Agency on Aging; Eileen Doran, TARC; Michelle Morgan, Northwest Kansas Area on Aging</p> <p>KHI Staff: Hina Shah, Emma Uridge</p>		
Reviewed Documents	<ul style="list-style-type: none">• Agenda• United Healthcare Presentation• Sunflower Health Presentation		
Agenda:	<p>9:00am – Welcome and Introductions</p> <p>9:10am – Supplemental Experts <i>Julie Govert Walter, North Central-Flint Hills Area Agency on Aging</i> <i>Heather Thies, Cottonwood Incorporated</i> <i>Eileen Doran, TARC</i> <i>Michelle Morgan, Northwest Kansas Area on Aging</i> <i>Colene Marshall, Adult Day Services Wichita</i> <i>Representatives from KanCare Managed Care Organizations</i> <i>Dan Goodman, Kansas Department for Aging and Disability Services</i> <i>Tanya Dorf-Brunner, Oral Health Kansas</i></p> <p>10:25am – Administrative Updates</p> <p>10:30am – Adjourn</p>		

Minutes

Agenda item:	Introductions / Opening Remarks / Review Agenda / Working Group Process
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Discussion:

Hina Shah provided a review of the agenda

- Ground Rules Reviewed
 - Come ready to discuss and compromise.
 - Keep remarks succinct and on topic.
 - Don't hesitate to ask clarifying questions.
 - Start and end on time.
- Vision Statement:
 - "Establish and expand a clear path with public policy recommendations for Kansas older adults and caregivers to access services."
- Group introductions and prompt: "What is one word that comes to mind regarding rebalancing HCBS?"
 - Sarah Schlitter: Flexibility
 - Jamie Gideon: Access
 - Dan Goodman: Opportunity
 - Annette Graham: Progress
 - Jan Kimbrell: Needed More
 - Linda MowBray: Transportation
 - Heather Brown: Engagement
 - Staci Carson: Collaboration
 - Tonya Dorf Brunner: Ensuring Dignity
 - Shawn Sullivan: Innovation

Agenda item:	Subject Matter Experts
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Discussion:

Heather Theis, Cottonwood Incorporated

- Works with high-risk population
- Pandemic affected activity level for individuals
- Day Services for I/DD Population
 - Community Employment
 - Work Center Employment
 - Work Enrichment

Eileen Doran, TARC Services for Adults and Children with IDD

- Based in Lawrence
- Traditional service model for those with IDD does not adequately meet changing needs of population as they age.
- Serve seniors, but meeting needs of those with dementia can be difficult to meet goals and need requirements
 - Individuals with down syndrome have increased incidences of dementia
- Aim to have individuals be in a community setting
 - Being in the community is not necessarily wanted for some adults
 - Shawnee County CDO does track those in the community with IDD, also have anecdotal info if they are having challenges, needs being met
 - Tracks aging population waiting for services.
 - 10 year waiting list for IDD Waiver
 - Rigorous and Dire situation could FastTrack individual to services

- Some folks may not enter service due to family being primary caregivers
- Overview of Discussion
 - Working group members asked to identify barriers for finding or accessing senior geriatric services no matter what Medicaid waiver an individual is on, and if there is resistance to switch waivers. Barriers include inability to switch waivers, hesitation from family members to switch waivers, change can be difficult for those with IDD, and some individuals simply don't want to live outside of a group setting.
 - Working group member asked about the training dementia care specialists require to address needs in growing IDD population. Training includes having a good knowledge of a person's history is critical in both populations. Coordinators also must recognize that those with IDD have shorter experience with dementia as it moves quickly through their bodies and the brain. Someone with IDD may only experience dementia for five years until passing away.

Julie Govert Walter, North Central-Flint Hills Area Agency on Aging

- Serve an 18-county region
 - Based in Manhattan with locations in Emporia in Salina
 - Serve as 1 out of 11 Disability Resource Centers in Kansas
- Basic Needs Assessment for Caregivers
 - Top 5 Issues Caregivers Experience with Care Recipient
 1. Exercise
 2. Falls Prevention
 3. Memory Difficulty
 4. Nursing home care
 5. In home care
 - 65% live in rural areas
 - Adult Day Services ranked #10 in list of needs
- Rural Kansans may not know the possibilities of Adult Day Services
 - Availability in rural communities is limited
 - Great options in larger cities, but does not help those in rural areas
- Ideal Service would include:
 - Safe, Accessible Location
 - Environment to Promote Social Interaction
 - Low Care Needs
- Rural Areas will not have a lot of people, and if they do come to center it's intermittent
 - Service would not be super lucrative
 - Different models need to be explored
- Senior Centers already in many rural communities
 - Hubs for volunteers
 - Has Staff Capacity
 - Not Medicalized
 - Not long-term
 - Would need to rethink roles
 - Challenged with funding, this could create additional funding stream to meet needs of community

Michelle Morgan, Northwest Kansas Area on Aging

- "There are four kinds of people in the world: those who are currently caregivers, those who have been caregivers, those who will be caregivers and those who will need caregivers."
- New report from National Alliance for Caregiving
 - Collectively, family caregivers spend \$500 billion annually providing care
 - 62% of caregivers providing medical care for rural care recipients is much higher in rural areas than urban areas
 - Use Facetime to help with care, and give instructions for activities of daily living
 - Many caregivers go into debt providing care
 - Credit card debt and loans more prevalent in rural areas than urban areas
 - Respite care is essential, yet limited to nonexistent especially in Western Kansas
 - Need to develop more services for families
- Stand Alone Adult Day Service may not be sustainable
 - Need innovation and partnerships
 - KDADS could establish Senior Advisory Council for Aging
- Overview of Discussion
 - Working group member asked if county support for services in conjunction with the local senior centers that recommended state funding could help establish day services. Morris County was used as an example, where local board provides funds to seniors for assistance. Working group members wondered if counties would budget or help with centers in communities to expand services, or if they would need to do it in conjunction with the state.
 - Many counties provide significant support and moving forward to build day services for current senior centers, and there would need to be a lot of collaboration, meetings, agreements where AAA has role in doing that. AAA staff has a lot going on, especially with the aftermath of COVID-19.
 - Key Consideration: Have local buy-in that this is a need and desired outcome for local senior centers. Some Adult Day services have difficulty staying open, particularly in Hays Kansas, due to trying to accomplish too much and operating like an assisted living facility. However, it can be difficult to make adult day work as a stand-alone offering.
 - Group discussed concept for senior centers not being medicalized, as it can negatively impact the mental state of seniors using day services. Presenters indicated that if seniors go to a community-based service like a senior center where they know someone is looking out for them, that's not a nurse or doc, it's more of a friendly place. Presenters call senior centers friendship centers.
 - Group asked to establish higher senior center staff qualifications. Senior center manager is to maintain documentation for friendship meals which is a major source of revenue. If not possible, a consultant or contracted position could provide.
 - Baseline operations of a senior center include less than 200 people for rural centers, full day service, a PRN on-site, and meal offerings.
 - An example is Morris County that have site managers who are paid partly by AAA and supplemental wages by a local group. One center has a paid cook and the other center recommended cooked food from a different site. The other staff needed are paid by the local center/local board. Volunteers deliver the meals, lead the activities.

Colene Marshall, Adult Day Services at Catholic Charities Wichita

- Since 1975, has served:
 - Seniors 55+
 - IDD Population
- Program participants help plan daily activities such as:

- Group and individual activities
 - Community outings
 - Educational programs
 - Nursing services and care coordination
 - Meals and snacks
 - Transportation to off-site activities
- New Campus: Spring 2022
 - 5.5 acres
 - Building is 30,000 square feet
 - 10 program rooms
 - 24 ADA compliant bathrooms
 - 3 changing rooms
 - 1 interior courtyard
 - 1 large multipurpose room
- Funding Sources
 - Veterans' assistance, Medicaid (HCBS waiver), sliding scale, Private pay

Melody Dowling, Health Services Director, United Healthcare

- COVID Impact on Transitions
 - 16% increase in member's transitioning from a Nursing Facility into the community in 2020.
 - 16% decrease in 2021
 - Challenges for community placement
 - COVID visit restrictions
 - Workforce shortages
 - Legal history
 - Behavior challenges
- Workforce Shortage
 - Aging population with increased need for caregiver services in the home setting
 - MCO's complete needs assessment to determine caregiver support hours
- Challenges/barriers assessed include:
 - Lack of workers particularly in rural and frontier areas of the state
 - Need for 24/7 care
 - Need for 1-2hrs/day
 - Medicaid rates lag other employment options
 - Discrepancy in rates between HCBS waivers
- CareBridge
 - Connects members on the FE, PD, and TA waivers with a care team through a tablet
 - Care team is available 24/7
 - Tablet is free to the member and delivered to the home
 - Member pushes red button to connect to a member of the care team
- Benefits to member include:
 - Doctor/nurse available 24/7 through push of a button
 - Order/refill medications (non-narcotics)
 - Order a mobile x-ray to come to member's home
 - Order therapies
 - Order supplies and/or medical equipment
 - Emotional support for the member and family/caregivers
 - Advance care planning
- Membercare Hub Pilot for Technology Support
 - Membercare Hub Pilot
 - HIPAA compliant; cellular Wi-Fi
 - Voice activated device
 - Video calls with Care Coordinator
 - Telehealth visits with Provider
 - Video calls with members of care team (including family)
- Additional Pilot Opportunity:
 - Program that addresses loneliness and social isolation through app technology
 - Outbound support to members who score as lonely, depressed, SDOH issues or just need companionship

Jennifer Pruento, Aetna

- Transition Program for Members
 - Single point of contact for facilities
 - Service Coordinator
 - Meet frequently with members and service staff
 - Challenging to not see members during pandemic
- The Aetna Long Term Services & Supports (LTSS) team monitors the number of LTSS members residing in a community setting vs. members residing in a custodial setting.
- Target goal is to support 70% of LTSS members to reside in a community setting.

Nan Perrin, Sunflower Health Plan

- Rate increase has not gone down
- Many still want to transition back into the community

Agenda item: Administrative Updates and Adjourn

Discussion:

Next Meeting Topic: Recommendation Development: *Adult Daycare Services*

Next Meeting Date: March 25, 2022

Next Steps:

- Questions for MCOs, email Hina
- Will send reports and information
- Meeting on March 25, 2022, will continue discussions with supplemental experts and record recommendations for the topic of *adult daycare resources*
- Meeting on April 1, 2022, will focus on topic of *funding and implementation of the senior act*

Information Requests for Heather Theis, Cottonwood Incorporated; and Eileen Doran, TARC

- What is the number of clients you serve?
- Is there a population who are not being served?
 - Shawnee County CDO does track those in the community with IDD, also have anecdotal info if they are having challenges.
- What is the number of those 60+ in need of day services in these speakers' areas?
- What is the state-wide need for services for 60+ IDD folks?
- Do you have information for those 60+ on the waiting list?
 - Yes, we know everyone 60+ on waiting list, but only those identified
 - We pull people in who may have just moved into the community as well
 - Heather Thies: We can provide that as well. For those retiring, we follow their choice as much as possible. For our folks, it is an interesting predicament when diagnosed with dementia, and that becomes #1 disability versus IDD.

Information Requests for Julie Govert Walter, AAA; and Michelle Morgan, NWKAAA

- Are there any areas in the country with a adult day service model that works that working group can see?
 - Did not provide exact model but provided anecdotal answer that some day centers serve as multipurpose senior centers.