#### FINAL MINUTES

# New Hampshire State Commission on Aging Monday, January 9, 2023 10:00 a.m.-noon NH Employment Security, 45 South Fruit St., Concord, NH

**Present in person:** Susan Ruka, Chair; Carol Stamatakis, Vice Chair; Roberta Berner, Clerk; Sunny Mulligan Shea, DOJ; Susan Buxton, Long-Term Care Ombudsman; Wendi Aultman, DHHS; Ray Fernandez, DOS; Tracy McGraw, DOL; Appointed by the Governor: Polly Campion, Doug McNutt, Daniel Marcek, Rep. Lucy McVitty Weber, Kristi St. Laurent, Rev. Susan Nolan

Rebecca Sky, Executive Director; Chris Dugan, Communications and Engagement Director

**Present via teleconference** Lynn Lippitt, NH Housing Finance Authority; Shelley Winters, DOT; Suzanne Demers, Beth Quarm Todgham, Roxie Severance, Laurie Duff **Absent:** Rep. James MacKay; Rep. Charles McMahon; Richard Lavers, NHES; Sen. Bill Gannon; Harry Viens, Susan Denopoulos

**Presenter:** Robin Lipson, Deputy Secretary of the Executive Office of Elder Affairs, Massachusetts

Guests present via teleconference: Jennifer Rabalais, Heather Carroll, Joan Marcoux, John Wilson, Christian Seasholtz, Terri Vineyard, Donna McKean, K. Sutton, Marcia Garber, Richard Danford, Ami Guimond, Ilana Illsley, Betty Gilcris, Jennifer Throwe, Brianna Beaulac, Kris Hering, Jean Crouch, Sandy Rose, Cheryl Steinberg, Amy Moore, Carissa Elphick, William Dawson, Beverly Cotton, Jill Martin, Amy Clark, Nancy Dorner, Jessica Eskeland

## I. Welcome, Attendance, Review of Minutes

Chair Sue Ruka provided an overview of the agenda and welcomed the Commission members and guests to the meeting.

Today's meeting was held concurrently in person at NH Employment Security and via teleconference.

Some Commission members were due to arrive shortly, so the review of and vote on the November meeting minutes was postponed until a quorum was present.

### II. Introduction to Master Plans on Aging: The Massachusetts Experience

Chair Ruka welcomed and introduced Robin Lipson, who was attending via teleconference. Ms. Lipson is Deputy Secretary of the Executive Office of Elder Affairs, Massachusetts, and spearheaded the "Governor's Council to Address Aging in Massachusetts' Blueprint Recommendations" (December 2018). In her role, she also is responsible for leading the process to produce and deliver the State Plan on Aging to the federal Administration on Community Living.

Deputy Secretary Lipson briefly described the difference between the two documents. The State Plan is tactical, focused on Older Americans Act services, and is required to be submitted as a condition of receiving federal funds through the Older Americans Act. The Blueprint addressed many issues including health care, food security, digital access, transportation—in short, all that goes into

healthy aging in the state. The Blueprint addresses the "bigger picture," is directional and aspirational, and aims to be a plan for systems-change. It was created by the Governor's Council to Address Aging in Massachusetts without contracted outside consultants but with the help of graduate school interns.

Ms. Lipson said, "Governor Baker wanted us to think about what it means to have 25 percent of our population over the age of 60 or 65," across all domains. The Council included about two dozen members, including academics, physicians, corporate leaders, and other experts in specific fields, such as transportation. The members conducted listening tours around the state asking attendees to outline assets that their community has available to help residents age and to suggest items that would help the aging population ("if I had a blank slate..."). For example, in one community, the town had turned off the streetlights on the main street, leading to fewer older adults going out to dinner because it was too dark to feel safe. Other issues that came up included:

- Older adults faced discrimination in the workplace or when going through job interviews;
- Family caregivers suffered from isolation;
- Transportation was a chronic issue;
- Affordable housing was a concern.

In addition to the listening tours, the Council had expert panels on topics like economic security, transportation, and housing address the group.

The Blueprint was formulated on a social justice model rather than a public health model, Ms. Lipson said. Areas addressed were:

- Housing
- Transportation
- Caregiving
- Economic security
- Innovation

The Council has seen some tangible responses to its recommendations. For example, in the transportation arena, those bus stops most used by older adults were the first to be upgraded with benches, lighting, and murals. Massachusetts has committed to be an "Age-Friendly State" per AARP guidelines and has named a steering committee to focus on the work.

She said it was important to identify a few big ideas then run the roll-out like a campaign "to change hearts and minds," with the thought that any progress is good. She added that the process proved to be a good stepping stone to building other helpful relationships (e.g., in the technology area regarding accessing broadband.).

Ms. Lipson then asked for questions from Commission members and participants.

Dan Marcek asked about Council members from academic institutions and the role they played in the process. Ms. Lipson said that the Council included a

demographer from the University of Massachusetts-Boston, a representative from Babson College who had a grant to study issues around mobility, and a representative from the University of Massachusetts-Lowell who was focused on workforce issues. Having academics involved helped facilitate placements for students who wanted to do internships related to the Council's work.

Rebecca Sky asked if the AARP Age-Friendly Communities-related "Reimagining Aging" plan was a third plan that Massachusetts developed. Ms. Lipson explained that the State Plan on Aging came out of the Executive Office of Elder Affairs, the Blueprint, from the Governor's Council (produced by the Executive Office of Elder Affairs), and the Blueprint was rolled into the "Reimagining Aging" plan submitted to AARP. This plan is refreshed annually. She said that all plans coalesce into one that the Office uses every day.

Executive Director Sky then asked if Ms. Lipson could provide an example of the most powerful impact the plan has had thus far. Ms. Lipson provided several examples: Massport called her when they were remodeling Logan Airport to ensure that the needs of an aging population were addressed; the Carpenters' Union has embedded recommendations for universal design when remodeling homes; the preeminent business group in the state has put caregiver support on its agenda.

Wendi Aultman noted that portions of the State Plan on Aging (SPOA) could be included in such a blueprint and said that she and the Bureau of Elderly and Adult Services have looked at other states' SPOAs and master plans. Executive Director Sky mentioned that today's meeting includes a listening session for New Hampshire's SPOA and asked that Commission members attend additional listening sessions in their own communities.

Polly Campion noted that a difference between the New Hampshire Commission and the Massachusetts Council was that the Council's membership included individuals representing the private sector. Ms. Lipson said that was a deliberate and strategic decision to have a robustly diverse group geographically and professionally.

Carol Stamatakis asked how the Council measured its success with the blueprint. Ms. Lipson said that two-thirds of Massachusetts towns and cities have formally engaged with age-friendly work. And while they do not have a formal dashboard, they use community level data from UMASS and other info as part of an environmental scan.

#### III. Votes on SB 36 and November Minutes

With a quorum of Commission members now present, Chair Ruka revised the agenda to enable the group to vote on items that required a majority of members in the room.

Polly Campion provided an overview of SB 36, which addresses long-term care in the state with the understanding that all residents should have access to the

services they need and the ability to choose where and how they age in the state. The bill outlines expedited access to Choices for Independence (Medicaid home and community-based services), including presumptive eligibility for the service; ensuring adequate rates for providers; and strengthening of resources for the ServiceLink Aging and Disability Resource Center network. The bill also would add a position to the Office of State Ombudsman to provide oversight for CFI providers. (See Attached brief developed by NH Alliance for Healthy Aging.)

Doug McNutt mentioned that the Commission's new member representing the state Senate, Sen. Bill Gannon, is a prime sponsor of the bill. Former Commission member Sen. Ruth Ward is a cosponsor. Member Rep. Charlie McMahon also has agreed to cosponsor the bill. Rep. Lucy Weber said that she supports the bill and that there is a robust body of bipartisan support in both chambers.

Dan Marcek asked if the bill addressed the "cliff effect," which causes paid caregivers to lose some of their benefits if their pay rises. Rebecca Sky replied that it doesn't, but that NH-DHHS is working on a policy response to that issue. A Commission Task Force will hear about that work this winter. Doug McNutt added that the bill also could be amended at any time to address such issues and said that he knew other workforce bills were likely to come forward. Polly Campion said that currently there are at least two bills proposed to address workforce issues.

Sunny Mulligan Shea said that she had a concern that guardians or powers of attorney representatives could be allowed to be paid caregivers.

Beth Quarm Todgham asked if the financial ramifications of adding staff to the Ombudsman's office would be an issue. Ms. Campion said that a fiscal note will be developed and attached to the bill. Ms. Stamatakis said that if the funding is not explicitly noted, the provisions should not be in the bill. Rep. Weber said that the Finance Committee would look closely at such ramifications.

Public attendee Bill Dawson said that it was very important to strengthen the ServiceLink network, and Mr. McNutt agreed, adding how vital it was to provide help to the public in navigating the long-term care system. Ms. Aultman said that the ServiceLink network has been level funded for at least a decade except for special allocations through public health emergency funding during the pandemic. Mr. McNutt agreed and said that both ServiceLink and CFI had been level funded with many more people now needing the service.

Ms. Campion made a motion for the Commission to endorse the bill in concept and to take actions to further its passage, recognizing that it may change over time. Mr. McNutt seconded the motion. By roll call vote the following Commission members present in the room approved the motion: Sue Ruka, Polly Campion, Sue Buxton, Doug McNutt, Rev. Susan Nolan, Carol Stamatakis, Dan Marcek, Ray Fernandez, Tracy McGraw, Sunny Mulligan Shea, Rep. Lucy Weber, Roberta Berner, and Kristi St. Laurent. Wendi Aultman abstained. The

motion passed. Chair Ruka asked that Commission members speak to their local legislators to urge support for the bill.

Chair Ruka asked for the review of the November minutes. Rep. Weber made a motion to accept the minutes as written; Sunny Mulligan Shea seconded the motion; the motion passed unanimously by voice vote of Commission members in the room.

## IV. NH DHHS BEAS State Plan on Aging (PowerPoint attached)

Wendi Aultman, Bureau Chief, NH-DHHS Bureau of Elderly and Adult Services, outlined the process for developing a new State Plan on Aging in the year to come. The Plan will cover the next four years and a draft is due to the federal Administration on Community Living by July 1, 2023. The NH-DHHS website includes a webpage focusing on the Plan. Listening sessions will be held this winter in five locations and virtually. The work to develop the Plan is being done in partnership with the State Commission on Aging and the Alliance for Healthy Aging. The Commissioner of Health and Human Services, the Governor, and the Chair of the State Commission on Aging will sign the completed plan.

The Plan is a requirement of states who receive support for Older Americans Act (OAA) programs. The OAA began in 1965, along with Medicare and Medicaid.

Commission members are asked to complete a survey and attend an in-person listening session as part of the planning process for the document. A link to the survey is available in "Aging Matters," the Commission newsletter.

Key areas of the Plan will address:

- OAA Core Programs
- COVID 19
- Equity
- Expanding access to home and community-based services
- Caregiving

In break-out sessions, attendees addressed two questions: How can New Hampshire better serve and support its aging residents? And What do you need to continue living in your home as you get older? Note takers took detailed notes on small group responses, and the notes will be passed along to BEAS for use in developing the Plan.

Each group provided a brief report to the full group on the discussions, which focused on caregiver-related issues, the importance of SB 36, building an age-friendly state and age-friendly communities, ensuring that older adults have a place to go for credible, independent advice (regarding Medicare, insurance, investments) and to connect them to services, ramping up telecommunications to connect individuals with services, having affordable housing with services, applying universal design, and strengthening community connections. Cited shortfalls included accessible and available transportation, housing, workforce,

adult day centers, programs to address social isolation, affordable and accessible broadband, and comprehensive data about the population and its needs.

## V. Social Media, Adult Volunteer Awards and Policy Team Update

Chris Dugan spoke briefly about new social media presence for the Commission—a Facebook page (the NH State Commission on Aging) and Twitter (@Aging in NH). He asked that attendees sign up for both.

The annual volunteer award program will again take place in May, and nominations are now open through March 4. Beth Quarm Todgham has agreed to chair the event; additional volunteers are welcomed.

## VI. Public Input

No additional public input was offered.

# VII. Adjournment

The meeting was adjourned at 12:02. With an announcement that the **next** Commission meeting will take place on Monday, February 13, 10 a.m.-noon

# SYSTEMS OF CARE FOR HEALTHY AGING IN **NEW HAMPSHIRE: SUPPORT SB 36**



All Granite Staters should have access to the services they need and the ability to choose where and how they age in New Hampshire.

Home and community-based services offer care where you choose to live. Investing now is a costeffective way to provide those choices to older adults.

During the state budget process, we have the opportunity to build upon the current state of home and community-based services by supporting these recommendations in Senate Bill 36:



## **EXPEDITE ACCESS TO HOME & COMMUNITY BASED SERVICES**

- Implement presumptive eligibility to allow access to home and community based services via Medicaid while applications are still in process. Is cost effective, reduces the need for unnecessary institutionalized care and allows older adults to remain in their homes.
- · Change rule to allow caregivers who are Guardians or Powers of Attorney to become paid caregivers.



SECURE ADEOUATE **RATES** 

- · Ensure rates are set annually and are adjusted by the CMS Market Basket index to account for inflation.
- Adequate rates allow for providers to plan and hire the workforce needed to cover all care . options.
- · Annual rate setting reviews will lead to parity across waivers and stabilization of the workforce.



STRENGTHEN SERVICELINK **RESOURCES** 

- Ensure proper staffing at all ServiceLink providers across the state
- Educate older adults on the range of options available
- Assist older adults and caregivers navigating the system including through the application process.





# PROVIDE OVERSIGHT CAPACITY FOR THE SYSTEM OF CARE

 Creates positions within the Longterm Care Ombudsman's office that will: Ensure the implementation of this bill including reporting requirements, field calls and complaints from consumers to improve the well-being of older adults and their caregivers, and identify quality measures including available workforce and timeliness of service.







# SYSTEMS OF CARE FOR HEALTHY AGING IN NEW **HAMPSHIRE TALKING POINTS ON SB 36**



# PURPOSE (©)

 The Alliance for Healthy Aging is bringing forth Senate Bill 36 to invest in the system of care in New Hampshire because all Granite Staters deserve access to the services they need and the ability to choose where and how they age. We have the opportunity this legislative session and during the budget process to strengthen our current system to support the growing number of older adults with the wide range of services needed to live in their homes and communities.

# PRIORITIES

# Expedite Access to Home & Community Based Services:

 Implementing presumptive eligibility would allow access to home and community based services via Medicaid while applications are still in process, which is cost effective, reduces the need for unnecessary institutionalized care and allows older adults to remain in their homes. Changes of rules could also allow caregivers who are Guardians or Powers of Attorney to become paid caregivers.

#### Secure Adequate Rates:

 Ensuring rates are set annually and are adjusted by the CMS Market Basket index would account for inflation. Adequate rates allow for providers to plan and hire the workforce needed to cover all care options and annual rate setting reviews will lead to parity across waivers and stabilization of the workforce.

## Strengthen ServiceLink Resources:

· Ensuring proper staffing at all ServiceLink providers across the state to educate older adults on the range of options available and to assist older adults and caregivers navigating the system including through the application process.

#### Provide Oversight for the System of Care:

· Creates positions within the Longterm Care Ombudsman's office that will: Ensure the implementation of this bill including reporting requirements, field calls and complaints from consumers to improve the well-being of older adults and their caregivers, and identify quality measures including available workforce and timeliness of service.

# COST

 A fiscal note will be attached to this bill, however, there will be savings to the state over time. Investing in Home and Community services wallows older adults to avoid costly institutionalized care. DHHS previously sought \$600,000 annually to implement presumptive eligibility. The positions added to the Office of Longterm Care Ombudsman will be subject to the hiring process of NH.

# DHHS BUDGET REQUEST 🎏

· AHA is actively supporting the prioritized needs that the Department's budget included in the Bureau for Elderly and Adult Services.







@NHAHA\_Advocacy





# **Bureau of Elderly and Adult Services**

# State Plan on Aging 2024-2027

Wendi Aultman, Bureau Chief

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# State Plan on Aging 2024-2027

Being Developed by:

NH Department of Health and Human Services, Bureau of Elderly and Adult Services

With Guidance and Support from:

State of New Hampshire Commission on Aging
Alliance for Health Aging

Signed by:

State of New Hampshire Governor Commissioner, NH Dept. of Health and Human Services Chair, State of NH Commission on Aging



# State Plan on Aging 2024-2027

The goal of the New Hampshire State Plan on Aging is to Advance the state's efforts in understanding, serving, supporting and celebrating older adults across our State.



# Older Americans Act – The Aging Network

Federal Legislation, Established in 1965

Provides home and community-based social support services to the older adult population.

# 1965: Three Important Programs Enacted

- Medicare
- Medicaid
- Older Americans Act (OAA)



"Every State and every community can now move toward a coordinated program of services and opportunities for our older citizens."



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# Timeline\*

Review progress of current State Plan and what will be important to continue			
Survey and Listening Sessions		Drafting of State Plan on Aging	
December2022	February and March/2023	March 2023	April and May 2023
Survey Finalized and Distribution begins	<ul> <li>5 virtual Listening Sessions</li> <li>5 in-person Listening Sessions</li> <li>Compile Survey results</li> </ul>	<ul> <li>Finalize Review of Survey results</li> <li>Review of Listening Session input</li> <li>Begin Drafting</li> </ul>	<ul> <li>Preliminary Draft provided to Administration for Community Living (ACL)</li> <li>Draft Goals, Objectives and Strategies</li> </ul>

# Final Draft of State Plan on Aging June 2023

- Finalize Goals, Objectives, Strategies
- Finalize Executive Summary
- By beginning of June, submit request from DHHS Commissioner for Gov. Signature for Draft State Plan
- Draft State Plan due to ACL by June 30, 2023



\*Dates and activities are subject to change

# State Plan on Aging Overview

BEAS must submit a draft plan by June 30, 2023. The time period for this next plan would be October 1, 2023 to September 30, 2027

State Plan Key Topic Areas Prescribed by ACL:

- Older Americans Act (OAA) Core Programs
- COVID 19
- Equity
- Expanding Access to HCBS
- Caregiving

How does this align with considerations for NH to have a Master Plan on Aging?

## State Plan on Aging and Master Plan on Aging

# State Plan on Aging

State Units on Aging, an integral part of the network, are the designated agencies responsible for developing and administering a multi-year State Plan on aging that provides goals and objectives related to assisting older residents, their families, and caregivers.

All states are required by the <u>Administration</u> <u>for Community Living</u> to submit a State Plan exclusively focused on Older Americans Act funding limited to nutrition and modest community-based support programs.

The State Plan goals and outcome measures could be built into or coordinated with similarly focused elements of a broader Master Plan for Aging.

# Master Plan on Aging

A Master Plan for Aging is a blueprint that:

- a) Includes planning for 10 or more years;
- b) Is often led by a governor with other executive and legislative leaders; and
- c) Is developed to guide the restructuring of state and local policy, programs, and funding toward aging well in the community.



## State Plan on Aging

10 Listening Sessions Across New Hampshire!

Dates, Locations, Logistics to be finalized in coming weeks

#### **5 Virtual Sessions**

- Coordination with Senior Centers around the state
- Offered to anyone statewide
- Sessions for targeted groups, i.e.

#### 5 in-person Sessions

- Offered in 5 locations around the state
- Co-facilitated with BEAS, AHA,
  NH COA



## **State Plan on Aging Listening Session Goals**

- To provide an overview of the State Plan on Aging, and the critical role of our community in this process;
- 2. To engage older adults in the development and promotion of the State Plan on Aging;
- To discuss what is going well, what needs attention, as well as opportunities in our communities; and
- 4. To begin collecting input and feedback for the development of the NH State Plan of Aging.



#### **State Plan on Aging Listening Session Questions**

- 1. How can NH better serve and support its aging population today and in the future?
- 2. What do you need to continue living in your home as you get older?



# Please Help Us Spread the Word!

Invite others in your community to:

- 1. Attend 1 of 10 listening sessions across the State, and
- 2. View the current State Plan on Aging that can be found on the Department of Health and Human Services website at:

https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/beas-nh-state-plan-on-aging.pdf

3. Take the SPOA Survey:

https://unh.az1.qualtrics.com/jfe/form/SV\_cMiO8EzWMmTmRyC





