

MINUTES

LONG-TERM CARE SERVICES TASK FORCE

August 30, 2004
Room 514-S—Statehouse

Members Present

Senator Larry Salmans, Chairman
Representative Bob Bethell, Vice Chairman
Senator Janis Lee
Representative Patricia Barbieri-Lightner
Representative Nancy Kirk

Non-Legislative Members Present

Mark Bailey
Evie Curtis
Janis DeBoer
Dr. Carol Moore
Bob Smith
Sister Beth Stover
Ray Vernon
Margaret Zillinger

Members Absent

Senator Henry Helgeson
Senator Chris Steineger
Senator Susan Wagle
Representative Jim Morrison
Representative Judy Showalter
Linda Lubensky
Charles Moore

Staff

Audrey Dunkel, Kansas Legislative Research Department
Amy Deckard, Kansas Legislative Research Department
Susan Kannarr, Kansas Legislative Research Department
Terri Weber, Kansas Legislative Research Department
Lisa Montgomery, Revisor of Statutes Office
Mary Shaw, Task Force Secretary

Conferees

Pamela Johnson-Betts, Secretary, KDOA
Steve Jack, Director, Kansas First Assessment and Labor Exchange Services, Kansas
Department of Commerce
Janis DeBoer, Deputy Secretary and Commissioner of Program Policy, Kansas Department on
Aging

August 30 Morning Session

Senator Larry Salmans, Chairman, called the meeting to order at 10:00 a.m., and welcomed everyone to the meeting. Representative Bob Bethell announced that Dr. Bill Thomas, Eden Alternative and The Greenhouse Program, will be at the Dole Institute at the University of Kansas on October 6, 2004, speaking from 6:00 p.m. to 9:00 p.m. Chairman Salmans noted that the Task Force may look at the possibility of moving a date to meet either in the afternoon or around that meeting timetable. At this time, there has not been time to research it.

Representative Bethell moved, with a second by Mr. Ray Vernon, to approve the minutes of the July 26, 2004, meeting as presented. Motion carried.

Chairman Salmans welcomed Pamela Johnson-Betts, Secretary, KDOA (Attachment 1). Secretary Johnson-Betts reviewed three areas in the transfer of the Nursing Facility Inspection program from the KDHE to the KDOA (KDOA) as follows:

1. A transition update on the transfer of the Licensure, Certification and Evaluation (LCE) unit from the KDHE to the KDOA;
2. The educational activities that are currently being offered by LCE staff; and
3. The statewide outreach tours, which are scheduled to begin in September.

Secretary Johnson-Betts mentioned that the transfer of LCE to KDOA was effective on July 1, 2003. She felt the transfer was successful, due to the collaborative planning efforts between the KDHE staff and the KDOA staff over the course of one year. The Secretary explained that a stakeholder's group was formed in May of 2003 to ensure that the concerns of everyone involved were heard. Secretary Johnson-Betts provided a copy of the power point presentation given at the KDOA Stakeholder's meeting on May 12, 2004, which was developed for KDOA's stakeholders to further clarify the transfer (Attachment A in the written testimony).

The Secretary explained that KDOA instituted a survey of all departments in December 2003. She shared a response regarding the survey question "Has the work process that has been implemented by the reorganization or transition impacted you?" It was noted that 63 percent of those surveyed replied that the work process is staying basically the same. KDOA also asked about the workload itself. Sixty percent noted that the workload has remained fairly consistent. Secretary Johnson-Betts pointed out that those surveyed emphasized the need to be mindful of the number of e-mails that occur in any organization. Respondents indicated their laptops clog with routine kinds of requests for assistance. Staff in the field mentioned that they do not need that type of information and that they need to utilize their laptops for business. The respondents also noted that it is important that they have good information technology assistance in order to quickly access information on their laptops when they are in a facility doing a survey.

Secretary Johnson-Betts mentioned that KDOA has hired Vera Van Bruggen as the state's Resident Assessment Education Coordinator. The Secretary explained that Ms. Van Bruggen's efforts will help to ensure that consumers and providers of long-term care services receive consistent, timely, and reliable information on federal and state regulations that impact day-to-day practice. KDOA has also formed a workgroup to discuss falls and other issues of concern for the frail elderly population in adult care homes.

The Secretary explained that she and Mark Boranyak, Commissioner and leader of the KDOA's Licensure, Certification, and Evaluation Commission (LCE Commission), will be traveling across the state to talk with seniors, their families, and representatives about any issues or concerns they have regarding adult care homes. One purpose of the meetings is to provide information on KDOA's programs and services, with emphasis on the duties and functions of the LCE unit. A second purpose is to meet and listen to nursing facility administrators in their facilities in order to hear first-hand about their priority concerns. A brochure (Attachment B of the written testimony) titled, *Helping the Kansas Adult Care Home Industry Provide Quality Care*, was discussed.

In closing, Secretary Johnson-Betts noted that she felt the transition went well, but that there were some bumps along the way. Chairman Salmans noted that he appreciated the work that was done and he felt the transition has been resolved in a very professional way. Representative Bethell thanked the Secretary for the outstanding job that was done. He also recognized the openness and willingness to listen that were shown by Secretary Johnson-Betts and Commissioner Boranyak in looking for answers to issues that are very difficult in many respects.

Questions and discussion followed. The Task Force discussed the KDOA interfacing with the State Fire Marshal's office regarding a number of new life safety codes and enforcement issues that may have economic impact on facilities and the state itself. Secretary Johnson-Betts explained that the Department has been working with the State Fire Marshal during the past couple of months to negotiate a contract that would allow KDOA to implement the new safety codes without overly burdening the Department's budget. KDOA is attempting to implement the new safety codes in such a way as to not create an economic burden. The Task Force continued discussion regarding this issue and the safety codes.

The Task Force discussed the increase in behavioral issues in long-term care facilities both from a dementia and a mental health perspective, and the lack of resources throughout the state. The Secretary explained that she has five policy directives that she is very much interested in addressing, one of which is the mental health issue. She mentioned that mental health is not just a factor in nursing facilities, but is a factor within the state. KDOA knows that unattended mental health issues for seniors is one of the major causes of early institutionalization, and seniors in the state are disproportionately impacted with mental health issues. The Secretary went on to say that many times people disregard certain behaviors as normal aging, when that may not be true. It was suggested that KDOA, SRS, and KDHE work together regarding this issue because addressing mental health for seniors is a consideration that cannot be left out. The Task Force discussed the K6 tool discussed at a Case Conference that has a high degree of credibility, and which only takes a few minutes to administer. KDOA responded that K6 is already under review to be incorporated into the uniform assessment instrument for all community-based residents.

Chairman Salmans asked if KDOA has any information regarding the detection and treatment of diabetes. The Secretary responded that she will inquire within the Department and will respond back to the Task Force.

Chairman Salmans mentioned that the presentation from the KDHE was postponed and will be scheduled for a future meeting.

The Chairman called the attention of the Task Force to discussion of Draft 1 of the Diabetes Presentation Review and Recommendation (Attachment 2). The Task Force agreed to add the following information to the recommendation:

- Incorporate the issues of obesity in the population and the impact obesity has, not only on those who are active, but on the elderly, as well. Also, incorporate the importance of good nutrition and activity.
- Incorporate some of the thoughts brought out by Richard Morrissey, Interim Director, Division of Health, KDHE, during sessions regarding the need to quit smoking, move more and eat less in order to have good health.
- Mention why it is important for the Task Force to be concerned about the issue of diabetes and its potential impact on long-term care if not dealt with in the younger population. Also, mention the potential complications of diabetes.
- Stress the importance of diabetes education and the need to set quality-of-care standards.
- Express concern and document the complications of diabetes due to the inability of individuals to purchase adequate supplies, treatment, or medications, and indicate that some individuals may not be able to afford these supplies, treatment, and medications.
- Suggest looking at diabetes education as a course in schools. The curriculum should emphasize how not to get diabetes.
- Suggest looking at the school lunch programs. The Task Force discussed soft drinks being available in some schools and at sports events. Schools with vendor contracts get revenues for having the vending machines in the schools. The issue of the difficulty in removing these machines needs to be considered.

Chairman Salmans welcomed Janis DeBoer, Deputy Secretary, and Commissioner of Program and Policy, KDOA, who presented a review of progress on the Money Follows the Person project (Attachment 3). Ms. DeBoer noted that HB 2675 proviso language is included in the attachment. She explained that the attachment was a joint effort by KDOA and SRS to capture what the project is intended to do, including the procedures on how it will be done. Ms. DeBoer explained that the project is intended to transfer the maximum of 75 persons from the nursing facility caseload budget, throughout the fiscal year, through the Physically Disabled waiver and Frail Elderly waiver programs. In FY 2004, the number of slots was divided between SRS and KDOA so that each agency would receive slots. This is significant because in FY 2004 both waiver programs had waiting lists. In FY 2005, the Frail Elderly waiver program did not have a waiting list. Throughout FY 2005, KDOA, and KDHE will continue to discuss the number of slots to be distributed between the Physically Disabled and Frail Elderly waiver programs.

Ms. DeBoer reviewed the policies and procedures developed by the Joint SRS and KDOA staffs and stakeholders, as detailed in the written testimony. She mentioned that this collaborative effort has worked well. Questions and discussion followed. Ms. De Boer spoke about data requested from the Minimum Data Set (MDS) form regarding the preference of an individual to return to the community. The MDS form is the instrument completed on all nursing facility residents across the nation. This form has a Section Q that speaks specifically to potential discharge. MDS data is CMS data, and not just Kansas-specific data, and the MDS data has been well protected and confidential. Ms. DeBoer will bring back additional information for the afternoon session regarding Section Q.

The Task Force discussed problems in rural areas regarding finding providers and concern about whether there are enough case managers to handle moving individuals out of nursing facilities back into the community.

The meeting recessed at 11:55 a.m. for lunch.

Afternoon Session

The meeting reconvened at 1:30 p.m.

Ms. DeBoer distributed copies of Section Q—Discharge Potential and Overall Status, page 7, of the MDS data sheet ([Attachment 4](#)). The two questions asked are:

1. Discharge Potential
 - a. Resident expresses/indicates preference to return to the community.
 - b. Resident has a support person who is positive towards discharge.
 - c. Stay projected to be of a short duration—discharge potential.

2. Overall Change in Care Needs

Resident’s overall self sufficiency has changed significantly as compared to status of 90 days ago (or since last assessment if less than 90 days).

Ms. DeBoer mentioned that the manual contains an outline of intent, definition, and the coding for these two questions.

Ray Vernon described copies of an article titled, “Circle of Medicaid-Eligible Care Givers Broadens” ([Attachment 5](#)). Mr. Vernon noted that the article addresses highlights regarding home- and community-based services both for the Frail Elderly, Mentally Retarded, and the Developmentally Disabled. The article talks about the Olmstead Plan and the struggles with Medicaid in terms of funding. Medicaid is an entitlement while home- and community-based services are optional.

Chairman Salmans welcomed Steve Jack, Director, Kansas First Assessment and Labor Exchange Services, Kansas Department of Commerce, who spoke before the Task Force regarding a review of employment programs for senior Kansans ([Attachment 6](#)). Mr. Jack explained that over the past decade, the employers in the country and in Kansas have been increasingly interested in older workers because of their maturity, wisdom, stability, and attitude toward being productive. As the state’s population ages, demands for services from senior citizens will increase dramatically.

Mr. Jack mentioned that the Kansas Department of Commerce administers two programs for older workers:

- Senior Community Service Employment Program (SCSEP); and
- Older Kansans Employment Program (OKEP).

Mr. Jack explained that the common mission of SCSEP and OKEP is to strengthen families and communities by providing disadvantaged and older individuals opportunities to learn, work, and

serve others. He described and distributed copies of their brochure titled, *Bold Glory, Older Americans Ready to Work* (Attachment 7).

It was noted that the Task Force may want to look at younger worker programs to possibly consider applying those processes toward helping the physically disabled and the mentally disabled workers. Chairman Salmans mentioned that this is an issue the Task Force will want to follow up on regarding long-term care and younger workers, and asked staff to schedule a follow-up.

Kathy Greenlee, the newly appointed state Long-Term Care Ombudsman, was present and was asked to address the Task Force. Ms. Greenlee expressed her commitment to the work before her. She indicated it would be a tremendous challenge to adequately represent older persons who are in long-term care facilities due to the limited number of staff, and the need for increased numbers of trained volunteers. She stated her interest and willingness to work with the Task Force in the future.

Chairman Salmans turned the Task Force's attention to discussion of expanding the Task Force to a standing committee. Lisa Montgomery, Revisor of Statutes Office, distributed copies of the Long-Term Care Task Force's authorizing statute (Attachment 8). It was suggested that several service areas currently are not being addressed:

- □ The physically disabled and the developmentally disabled are not included on the Task Force and they should be;
- □ The Long-Term Care Ombudsman's office needs to be involved as an advocate for those that receive long-term care, regardless of age; and
- □ A representative of the Kansas Hospital Association needs to be involved.

Representative Bethell noted that the group needs to be a Task Force because if made a standing committee, it could consist of legislators only. This issue will be discussed at a future meeting.

The Chairman turned the Task Force's attention to discussion of recommendations for the final report:

- Regarding the transition of the Nursing Facility Inspection program from the KDHE to the KDOA, it appears to be a relatively smooth transition, even though the Task Force has not heard from the KDHE yet. It appears at this point that no legislative action will be needed to assist with any part of the transition.
- Regarding the Money Follows the Person program, affirm the process that has been set up by the KDOA and the SRS, and that, even though there might be active waiting lists, keeping the process in place is appropriate in the event the process is needed in the future. Regarding the physically disabled waiting list, there are community barriers to people moving out of the nursing facilities and this needs to be monitored.
- Stress early education regarding diabetes, and expand on the concept of diabetes as an illness to be dealt with in long-term care.

In addition, the Task Force noted the following topics for discussion at future meetings:

- The funding for OKEP, how it is determined, and if it is possible to expand program funding to allow participation by all area agencies on aging. Because OKEP is a state-funded program, consider recommending more state funds for the program.
- The transfer process of the long-term care facilities from the KDHE to the KDOA.
- The Administrator-In-Training program and the possible need for minimal continuing education requirements for licensed operators of assisted living facilities.
- As part of the deliberation for recommending the re-establishment of the Task Force, how well the original goals of the Long-Term Care Services Task Force have been met. The discussion should include a review of the Task Force goals that have been met; the goals that have not been met and why; and, a determination of whether any unmet goals should be carried forward.
- The cost of foreign drugs, to include a review of the presentations heard last year.
- The possible need for more physical education to improve both physical and emotional health. Senator Lee requested a review of the 2003 Health Insurance Issues Working Group deliberations and recommendations that included testimony from the Sunflower Foundation on the work it is doing in the area of obesity in school age children. It was noted that additional efforts in this area may not take more funding, but just a change in curriculum or movement.

The next meeting is scheduled for September 27, 2004. The Task Force will not meet on September 9, 2004. For information, the subject of Medicare Part D, the pharmaceutical issue, will be heard by the Legislative Budget Committee, September 9, 2004, in Room 123-S. Chairman Salmans asked that staff schedule an hour briefing on the Medicare Part D information from the Legislative Budget Committee meeting. Future tentative meeting dates of the Task Force are: September 27, October 25, November 8, and December 13.

The meeting adjourned at 3:00 p.m.

Prepared by Mary Shaw
Edited by Audrey Dunkel and Terri Weber

Approved by Task Force on:

September 27, 2004
(date)