



**JULY 17, 2009
COUNCIL MEETING
12-2 P.M.
THE GILL FOUNDATION, COMMUNITY ROOM**

MEETING NOTES

ATTENDANCE

MEMBERS

Appointed Members

- Paul Bell
- The Honorable Betty Boyd
- Bill Bridgwater
- Bill Dahlquist
- David Harris
- Jeanette Hensley
- JoAnna Miller
- Linda Mitchell
- Barbara Prehmus
- Carol Riegenbach
- Lynn Betz-Seybold
- The Honorable Ken Summers
- Michael Wasserman
- Deb Wells

Guests

- Amelia Schafer, Alzheimer's Association

Colorado Health Institute staff

- Pam Hanes, President and CEO
- Tasia Sinn, Research Fellow
- Emily King, Research Assistant

WELCOME AND INTRODUCTIONS

Pam Hanes, President and CEO, Colorado Health Institute

Tasia Sinn is joining CHI as the staff contact for this project. She can be reached at sinnt@coloradohealthinstitute.org or 303.831.4200 x217.

THE FUTURE HEALTH CARE NEEDS OF COLORADO'S ALZHEIMER'S POPULATION: SENIOR CARE OF COLORADO AND THE M.E.S.A. INITIATIVE

Michael Wasserman, MD, from Senior Care of Colorado Inc. and co-chair of CACC, gave a PowerPoint presentation outlining the professional challenges associated with treating Alzheimer's disease in Colorado and then discussed the Medicare Experts/Senior Access Initiative (MESA).

Dr. Wasserman opened his [presentation](#) (2.06 MB ppt) by providing an overview of geriatric medicine. Geriatricians are typically paid less than other physicians, though they frequently report higher satisfaction rates. Dr. Wasserman pointed out that although Medicare funds more than \$8 billion annually for Graduate Medical Education for medical residency programs, geriatric training is not required in any of the specialties.

Senior Care of Colorado is a primary care geriatric medical practice providing office-based care as well as home visits, it is the largest private geriatric practice in the country and provides care predominantly to Medicare patients.

Colorado's rural areas tend to have a higher proportion of Medicare eligible patients and yet many rural physicians are closing their practice to new Medicare patients. The MESA initiative is funded by a grant from The Colorado Health Foundation and support from the Alzheimer's Association of Colorado and Senior Care of Colorado. The three goals of the initiative are to:

- Educate physicians about ways to legally maximize Medicare billing so as to incentivize them to serve Medicare patients;
- Provide physician education with regard to Alzheimer's disease and other dementias so as to increase their confidence in treating these patients; and,
- Provide resources that strengthen support networks and assistance for individuals with Alzheimer's or other types of dementia and their caregivers.

Through the MESA initiative, physicians learn to bill Medicare appropriately for time spent with patients and increase their clinical skills to treat Alzheimer's disease and other dementias' patients.

The current program covers most of southwest, south central and western Colorado. Expansion into northeastern Colorado is planned for the fall of 2009.

OVERVIEW OF THE LONG-TERM CARE WORKFORCE IN COLORADO

CHI staff prepared a [chart pack](#) (689 KB pdf) for council members profiling the long-term care (LTC) workforce in Colorado. The data compare certified nurse aides (CNAs), licensed practical nurses (LPNs) and registered nurses (RNs) working in long-term care with those working in other care settings. Data used in the chart pack come primarily from Health Professions Workforce Surveys conducted by CHI and the Colorado Department of Labor and Employment.

Pam Hanes highlighted some of the more interesting findings from the chart pack. While approximately 60 percent of Colorado's CNAs work in a LTC setting, only 41 percent of LPNs and 8 percent of RNs do so. CNAs and LPNs working in a LTC setting are more likely to be younger, non-white and fluent in

a language other than English when compared with CNAs and LPNs working in other settings. Between one-third and one-half of all nurses grew up in a rural community, but only 20 percent reported working in a rural area. Nurses working in a LTC setting were more likely to report working in a rural community than nurses working in other settings.

Projected job growth in the LTC workforce was discussed from data provided by the Colorado Department of Labor and Employment. Representative Ken Summers requested that CHI conduct further research on issues related to supply of and demand for the LTC workforce so as to determine future need in each of the nursing professions.

Several council members requested that CHI staff prepare a matrix containing additional background information about each nursing profession as well as other LTC occupations such as personal care attendants, home health aides, nutrition counselors, etc. Members were interested in learning more about:

- Education and training;
- Current curriculum requirements, if any, for dementia and Alzheimer's-specific training; and
- Best practices in dementia and Alzheimer's disease-specific training.

NEXT MEETING

The council agreed that the next meeting should continue the discussion about workforce issues. Pam will continue to lead a discussion about the long-term care workforce for the first half of the meeting. The second half will be spent reviewing the state plan and incorporating lessons learned from the educational sessions held thus far.

Senator Betty Boyd requested that an additional educational session be devoted to a discussion of telehealth and its potential for providing better geriatric care in rural areas where there are few geriatric resources available.

The next meeting will be held on September 18, 2009, from 12-2 p.m. (lunch will be provided). CHI will contact members prior to the meeting to identify the specific location.