



**MAY 15, 2009
COUNCIL MEETING
12:00 PM – 2 PM
THE COLORADO TRUST, SABIN ROOM**

MEETING NOTES

ATTENDANCE

MEMBERS

Appointed Members

- Paul Bell
- The Honorable Betty Boyd
- Lynn Betz-Seybold
- Steven Cavender
- Bill Dahlquist
- Deann Groves
- David Harris
- Jeanette Hensley
- Shelley Hitt
- JoAnna Miller
- Barbara Prehmus
- Carol Richenbach
- Howard Roitman
- Michael Wasserman
- Deb Wells

Guests

- Sarah Spalding, Alzheimer's Association
- Dr. Mary Tuuk, Total Longterm Care
- Bev Dahan, Total Longterm Care

Colorado Health Institute staff

- Amy Downs, Director for Policy and Research
- Jessica Jordan, Research Fellow

WELCOME AND INTRODUCTIONS

Michael Wasserman, Co-chair CACC

OVERVIEW OF LONG TERM CARE IN COLORADO

Amy Downs, Director for Policy and Research at the Colorado Health Institute (CHI), provided members with background information concerning demographic trends and long-term care services in Colorado.

CHI staff prepared and the Council discussed a series of maps that summarize the forecasted annual percentage change in county populations in three age groups (65 – 74 years; 75-84 years and 85 years and older). Members of the Council discussed that at the present time counties in the eastern plains have relatively higher proportions of individuals who are 65 and older compared to other counties in the rest of the state. However, future growth in this population will occur in the metropolitan areas, the north and southwest portions of the state and some resort communities.

Amy Downs reviewed the residential settings and services available for individuals receiving long-term care. Council members discussed data provided by CHI that summarize the historical costs and number of individuals enrolled in Medicaid who reside in nursing facilities compared to those who received home and community-based services via the elderly, blind and disabled waiver.

Jeanette Hensley, Director of Aging and Adult Services at the Colorado Department of Human Services briefly summarized the Adult Resources for Care and Help (ARCH) referral model that assists consumers in Colorado in gaining access to public and private long-term and supportive services.

Amy Downs requested that the members of the Council review all of the additional material provided and bring questions back to the next meeting.

PRESENTATION ON THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)

Dr. Mary Tuuk and Bev Dahan from Total Longterm Care provided a PowerPoint presentation of the PACE program.

PUBLIC FINANCING AND ELIGIBILITY FOR LONG TERM CARE SERVICES IN COLORADO

Barbara Prehmus, Long Term Benefits Division Director, Colorado Department of Health Care Policy and Financing, provided an overview of how Coloradans may qualify to receive long term care services (based on income and functional status) financed by the Medicaid program in Colorado. She also summarized the “look back” period in which the state reviews any transfers or sales of assets by the applicant over the previous five years.

COMMENTS ON THE OUTLINE OF THE STATE PLAN

Council members discussed the proposed state plan outline that was distributed at the March 20th meeting.

Some of the members of the Council explained that if private funds are used effectively when Alzheimer’s disease is first diagnosed, interventions can be implemented relatively early to slow the progress of the disease. To that end, several members mentioned that the state plan should have a discussion of programs and policy options that are financed by private sources rather than limiting programmatic options to “Medicaid solutions.” Senator Betty Boyd, a co-sponsor of S.B. 80-058, confirmed that she did not intend for the state plan to focus on programs that are financed exclusively by the state.

Council members agreed that the report should acknowledge the differences in the availability of services in urban and rural areas and the need for different models of care based on geography.

Some member of the Council members mentioned that educating the general public and the health care workforce about Alzheimer's disease is important for early detection and should be keys theme in the report. The health care workforce is unprepared for the anticipated increase in the number of Coloradans who will be diagnosed with Alzheimer's disease as the population ages. The Council also agreed that end-of-life care should be addressed in the state plan.

There were a number of topics that members agreed were important to reference in the final report for future study, but beyond the charge of the Council.

- The adequacy of competency laws in Colorado and the need to evaluate such laws in Colorado.
- The importance of the physical environment where individuals with Alzheimer's disease reside and how it impacts their quality of life.
- The importance of ensuring that individuals with Alzheimer's disease who lack the appropriate skills are not allowed to drive.

Some Council members expressed interest in exploring the formation of several work groups to address specific issues. Potential workgroups could include:

- Competency and driving
- Differences in models of care in rural compared to urban areas
- Workforce, quality of care, and staffing
- Education and awareness

Some members of the Council expressed interest in forming a timeline for the creation of the state plan. There were concerns that the scope of the state plan could be relatively broad.

NEXT MEETING

The Council agreed that the next meeting would be an educational session focused on the long term care workforce. Michael Wasserman mentioned that he currently has a grant from The Colorado Health Foundation to train primary care physicians how to treat individuals with Alzheimer's disease. He agreed to provide an overview of this work at the next meeting.

The next meeting will be held on July 17, 2009 from 12:00 – 2:00 (lunch will be provided). CHI will contact members prior to the meeting to identify the specific location.