

# Michigan Medicaid Long Term Care Task Force

## MINUTES

Tuesday, June 29 2004

Radisson Hotel

Lansing, Michigan

Members Present: R. Alcodray-Khalifa, G. Betters, R. Carter, R. Chaney, Senator Cherry, M. Cody, T. Czerwinski, S. Gire, M. Hardy, D. Hoyle, Y McKinney, J. Mendez, M. Moers, J. Olszewski, Representative Shaffer, S. Steinke, J. Sutton, M. Udow, T. Wong

Members Absent: Representative Gillard, Senator Hammerstrom

This gathering represents the first meeting of the Medicaid Long Term Care Task Force. Prior to the start of the meeting, members were provided an informal opportunity to network and review meeting materials.

John Hazewinkel, MSU Institute for Health Care Studies, reviewed general information and housekeeping matters. Task force members and individuals in attendance were advised that the meeting was to be audio recorded and asked to voice any objections. None was raised, and a decision was made to audio tape all meetings.

Jan Christensen, Deputy Director, Michigan Department of Community Health (MDCH), Health Policy Regulations and Professions Administration, conducted an official review of the reference binder contents that were given to members. He provided background as to the origin and purpose of the documents noting that the documents are informational and could be helpful to task force members during the course of their deliberations.

Chairperson Roanne Chaney asked each member to introduce himself or herself and provide a brief description of their interest in long-term care issues. Eighteen of 21 members were present for introductions. Members of the audience were also asked to introduce themselves to provide task force members with a sense of which stakeholder groups were in attendance. The audience was comprised of a large and varied group of providers, advocates, trade association and staff from various state agencies.

Immediately following the administration of the oath of office to members of the Task Force by staff of the Honorable Jennifer Granholm, Governor of Michigan, the meeting was officially called to order, at approximately 10:45 a.m., by the chair.

Task force members were welcomed, on behalf of Governor Granholm, by Patrick Cannon, Governor's Disability Policy Advisor,. In his comments he offered heartfelt thanks to members for their time and commitment to long-term care issues, and expressed the Governor's commitment to expanding options for community-based care.

Members reviewed their charge and deadlines as outlined in Executive Order 2004-1. Procedural questions were discussed in the areas of designated representatives and voting rights. The executive order permits the selection of designees for principal departments. The executive

order also requires a quorum of a majority of serving and voting members in order for action to be taken by the task force. Staff will seek clarification regarding acceptable voting procedures. A recommendation was made to consider moving the period for public comment forward on the agenda and expanding it to a minimum of one hour. Members agreed to limit public testimony to five minutes to ensure adequate time for all to speak. The proposed meeting schedule presented conflict for some members. Following a period of discussion, the schedule of meetings was changed to the second Monday of each month. While the original schedule did not include a meeting in December, members added a tentative meeting date for December to the revised schedule. Group consensus moved the July meeting to Monday the 19<sup>th</sup> to allow for more time between the first two meetings.

Chairperson Chaney expressed a desire to appoint a vice chair and secretary pursuant to language in the executive order. The following appointments of officers were made with the full consent of task force members: Sue Steinke, Vice-Chair, and Marsha Moers, Secretary.

The meeting broke for lunch at 12:15pm.

Upon reconvening at 1:00p.m., Jan Christensen conducted an overview of the Michigan's Long Term Care Vision and Values Statement included in the reference binder behind Tab 1. Mr. Christensen provided an in-depth review of the 13 core values developed by an internal workgroup of the Department of Community Health, that included representatives from the Office of Services to the Aging, Family Independence Agency, and Medicaid administration, to guide the work of the Task Force. A request by Mr. Christensen that the Task Force adopt the Vision and Values statement led to a lengthy discussion, the end result being the general agreement of members that the document needs to be more clear and precise in establishing a direction, and that it should incorporate a budgetary commitment for long term care reform in Michigan. It was agreed that the long-term care vision is to create a system that will make available for individuals the services they need, in a manner they control, in an environment they choose, with a short term goal of building a community-based system that takes us incrementally toward the long-term care vision. Dohn Hoyle, task force member, agreed to draft a broad, overarching vision statement for discussion by members at the next meeting. Adoption of the Vision and Values Statement will be addressed at an upcoming meeting.

As allowed by the executive order, some workgroups will be established to assist the task force in developing recommendations. Using the Vision and Values Statement as a template, workgroups were proposed as follows:

- Statements #1, and #2 represent the concept of a person-centered system and will be considered integral to the deliberations of each workgroup.
- Statements #3 and #4 to address access
- Statements #5 and #9 to address legislative and regulatory reform
- Statements #6 and #7 to address quality and innovation in service delivery
- Statements #10 and #13 to address education and planning
- Statement #8 to address direct care workforce
- Statement #11 to address wellness/prevention/management to reduce the need for long term care services.
- Statement #12 to address consumer participation and oversight

Some members expressed concern that the state will dismantle the existing system before the task force has an opportunity to submit its recommendations for improvements. They expressed concern that decisions were being made that reduced services and supports to vulnerable people. The example of changes to the home help program that are to become effective July 1, 2004, was

given. Concerns were raised regarding people who were losing the supports enabling them to remain in the community. One of the task force members reported that based on anecdotal information from her personal contacts, she knew of at least nine people who told her that they would be going into a nursing facility directly because of the reductions. A recommendation was made, and deliberated at length, for the task force to request that the Governor to restore the cuts, that the department of community health rescind the policy, and that a moratorium be placed on cutting community-based programs until the task force submits its recommendations. Further discussion followed regarding these specific policy changes being related to the home help policy decision having been made during the previous budgetary cycle, as well as when and how advocates can have the greatest impact upon funding decisions. It was noted that an important arena in which to raise funding concerns is with the legislature and the executive office; particularly during the entire cycle in the development of the state budget. Representative Cherry shared her perspective on the budget development process and the difficult decisions that legislators are faced with when making appropriations. Difficult decisions must also be made when state departments are faced with demands for services that exceed appropriated funds. She suggested members focus their efforts and consider recommendations that can effectively impact the decisions made during the legislative process in funding for safety net programs. This approach may be more appropriate than asking a state department to provide services in excess of the dollars that have been appropriated.

Following the discussion, task force member, Dohn Hoyle, moved for a resolution from the task force "To ask the legislature to restore funding for the Home Help Program."

The motion was seconded by Rose Khalifa and then a vote was taken. The motion was passed with one member, Reginald Carter, abstaining.

The following individuals spoke during the public comment period:

- Andy Farmer, AARP Michigan, distributed the CARING CHOICES STAKEHOLDERS SUMMARY OF ACHIEVEMENTS – READINESS FOR CHANGE document to inform Task Force members of ongoing work being conducted by stakeholders to address long term care reform.
- Tandy Biddinger, Michigan DD Council, spoke in support of regional meetings to increase the number of individuals who can provide input. Ms. Biddinger also urged workgroup leaders to invite consumer participation.
- Ellen Sugrue Hyman, the Olmstead Coalition, urged the task force to make consumer choice the foundation of long term care reform and to use person-centered planning processes.
- Carolyn Lejuste, the Olmstead Coalition, requested that the Department of Community Health include consumers, and actual recipients of services in all discussions regarding long-term care policy.

The meeting was adjourned at 3:30 p.m. The next meeting will be held on Monday, July 19 at a location to be determined.