



October 5, 2010

TO: LCOG Executive Committee

FROM: Kay Metzger for the S&DS Advocacy Committee

SUBJECT: S&DS Advocacy Priorities for 2010-11

One of S&DS' responsibilities as the Area Agency on Aging and Disability Services for Lane County is to work as an advocate for those we serve. To this end, S&DS, with the help of its Senior Services and Disability Services Advisory Council members, strives to develop and maintain positive relationships with Lane County delegates to the State Legislature and to educate them about the needs and concerns of seniors and people with disabilities. Additionally, at times there are local issues of concern to seniors and people with disabilities.

To facilitate this advocacy work, every even-numbered year S&DS develops a set of priority issues that the Council's Advocacy Committee will focus on. The Advocacy Committee, at its July meeting, developed a set of proposed priorities for 2010-11. The Disability Services Advisory Council endorsed these priorities at its September meeting and the Senior Services Advisory Council will consider them at its Oct 12th meeting. Once both Councils endorse the priorities, they are offered to the LCOG Executive Committee for approval.

Requested Action:

Assuming the Senior Services Advisory Council approves the proposals, the S&DS Advocacy Committee recommends that the LCOG Executive committee endorse the proposed priorities for 2010-11 and recommend approval by the LCOG Board.

Proposed S&DS Priorities for the 2010-11:

The recommended priorities contain few surprises. Several have been on LCOG's list of priorities during prior legislative sessions. The others are directed at enhancing the provision of services currently available to seniors and people with disabilities in Lane County. The three proposed priorities are set forth in summary form here. Brief explanations of each issue are attached.

- Improve access to Medicaid services through equitable reimbursement to Transfer Area Agencies on Aging and workload-based staffing.
- Support services that prevent or postpone the need for Medicaid such as the Oregon Project Independence program.
- Advocate for pedestrian safety and other improvement that will enhance the livability of our community for seniors and people with disabilities.

Improve Access to Medicaid Services through Equitable Reimbursement to Transfer Area Agencies on Aging and Workload-Based Staffing

Equitable Reimbursement to Transfer Area Agencies on Aging & Disabilities

The provisions of Oregon Revised Statute 410 allow Area Agencies on Aging, that are part of a local government organization, such as Lane Council of Governments Senior & Disabled Services, to administer the Medicaid and Food Stamp program through a contract with the State Department of Human Services. This model of service delivery allows for easier consumer access to an array of services, beyond just Medicaid and Food Stamps. It is considered the closest to a “One Stop Shop”. There are four Area Agencies on Aging in Oregon that operate as “Transfer AAAs”, meaning the State Department of Human Services has entered into a contract with them to transfer administrative costs for staff to do the work of the Medicaid and Food Stamp programs.

Historically, DHS has funded its own field offices more generously than it has funded the Transfer AAAs. Since personnel and operating costs are substantially the same, regardless of which government runs an office, this means that customers of Transfer AAAs (such as residents of Lane County) receive fewer services than customers of DHS-operated offices. In 2003 the State Legislature approved a bill that called for funding of Transfer AAAs at 95% of what it would cost DHS to deliver the same services. **However, the problem has not only persisted but gotten worse.**

For the fiscal year of July 2010 through June 2011, the disparity in funding (a.k.a., “equity gap”) is now at 15%, given the Governor implemented an additional 5% reduction to Transfer Area Agencies on Aging to address State revenue shortfalls. At the same time, caseloads have grown in Lane County by 11.5% since last year. That’s over 1600 more clients with 5% fewer dollars to support staffing. The residents of Lane County are being short-changed. Our clients face longer response times, longer waits for appointments, and inadequate staffing. Our staffs face high caseloads and have less ability to keep clients in lower cost home and community based care.

It’s time to keep the promise and fund equity for Transfer Area Agencies on Aging and Disabilities.

Fund Workload Based Staffing Models

Two recent independent studies (completed by Public Knowledge, Inc. and McKinsey & Associates) confirmed that the staffing model used by the Department of Human Services to calculate the number of employees needed for the Medicaid and Food Stamp programs was flawed and seriously out of date. The current staffing formula for Seniors and People with Disabilities (SPD) was created nearly twenty years ago and does not reflect major changes in programs, expectations, expertise, and work flow. The two studies confirmed that the workload has increased substantially.

It’s time to update the process by which staffing needs are calculated and funded for the delivery of Medicaid services to seniors and people with disabilities.

**Support Services that Prevent or Postpone the Need for Medicaid
such as the
Oregon Project Independence Program**

The State of Oregon has a tradition of supporting quality of life, independence and choice to its citizens with disabilities and who are aging. We should not abandon this framework when economic times are difficult. In fact, it is during these times that we should expand cost-effective services that prevent or delay the need for more expensive care situations. By making these investments now, we save millions in the long run.

The provision of services outside of the traditional Medicaid long term care program, such as those through the Oregon Project Independence program, has a substantial return on investment. Through focused intervention, the Oregon Project Independence program provides the level of in-home service needed and no more. OPI does not pay for any health insurance costs, as Medicaid (through the Oregon Health Plan) is currently required to do. Thus, by delaying or even preventing the need for Medicaid, OPI saves the State money. Oregon Project Independence (OPI) is the framework by which comprehensive, preventative services are delivered. By providing a small amount of OPI assistance to individuals that have some financial limitations, the State provides the means for individuals to avoid more expensive care.

In recent years the funding stream for OPI has been very volatile. In July 2010, the program was slated for closure. Luckily the Emergency Board intervened to temporarily restore funding, but only after clients endured much stress and anxiety. OPI is not an optional service for its clients. They need the help to maintain their ability to reside at home. People who use OPI are at serious risk to become Medicaid eligible. We cannot continue to expose the vulnerable and frail people of our communities to such instability. A sufficient and stable funding source is needed for these most critical services. Additionally, services should be expanded to allow adults with disabilities ages 18-59 to participate in the program, as approved by the 2005 Legislature.

There are many new opportunities on the horizon through federal health care reform. OPI lays the groundwork, along with other nationally tested models such as the Aging and Disability Resource Center. There is potential for future Federal match, and Oregon should invest in these now.

Investing State General Fund in tested services that have proven to prevent entry into Medicaid is cost effective and smart government. Investing in programs such as OPI today will result in significant cost-avoidance tomorrow. Either we pay a little now or a lot later.

**Advocate for Pedestrian Safety
and other Improvements that will Enhance
the Livability of our Community
for Seniors and People with Disabilities**

In order to support quality of life and independence for all citizens, community designers should consider the special needs of seniors and people with disabilities when making decisions and building infrastructure. This is important in several areas including housing, transportation, and walkways. Pedestrian safety is a key ingredient to creating safe communities that allow seniors and people with disabilities to remain an active part of community life.

The use of roundabouts in transportation planning is growing within Lane County. While roundabouts can be effective means of moving vehicles, they pose distinct challenges, and even dangers, to the visually or physically impaired. Additionally, most drivers are ill-equipped and not educated in how to navigate through these intersections. Since this is a fairly new technique in the field of transportation, the Department of Motor Vehicles Driver's Manual has inadequate information on the subject. Thus, drivers are left confused and pedestrians are at risk.

The Advocacy Committee of the Senior and Disability Services Advisory Council has been working with local entities to promote pedestrian safety at roundabouts. Further work, advocacy, and education are needed. Our work is not done. Additionally energy will be committed to working with cities and the Department of Motor Vehicles to assure safe passage for all pedestrians, but particularly seniors and people with disabilities, as they encounter roundabouts and other potential barriers to independent ambulation.

The committee also sees the need for better enforcement of existing Oregon laws regarding vehicles yielding to pedestrians at intersections. There are a number of intersections outside downtown Springfield and Eugene which are not regulated by lights or cross walks, but which are used by numbers of pedestrians, including seniors and people with disabilities. Such citizens often cross at risk; enforcement of laws requiring cars to stop is not enforced. We will consider working with law enforcement officials on this issue.