2021 Hybrid HCBS Conference Aging & Disability 101 Intensive



2021 Hybrid Home & Community-Based Services Conference



Leadership, innovation, collaboration for state Aging and Disability agencies. Our Mission is to design, improve, and sustain state systems delivering long-term services and supports for older adults, people with disabilities, and their caregivers.

Aging Resources

 New Older Americans Act Primer and course on ADvancingStatesIQ.org



Older Americans Act 101: The Foundation of the Aging Services Network Older Americans Act: The Foundation of the Aging Services Network





Agenda for the Day

- ✓ Welcome and Overview of ADvancing States
- ✓ Overview of the Older Americans Act
- ✓ The Administration for Community Living
- ✓ The State LTC Ombudsman Program
- ✓ The Local Angle: Area Agencies on Aging
- ✓ Medicaid 101
- ✓ CILs and the Independent Living Movement
- ✓ Aging & Disability Director Panel





Leadership, innovation, collaboration for state Aging and Disability agencies

Any questions?

Adam Mosey amosey@advancingtates.org

Aging & Disability 101 Intensive Overview of the Older Americans Act



2021 Hybrid Home & Community-Based Services Conference

Overview of the Older Americans Act

Hon. Kathy Greenlee, J.D. December 7, 2021 kgreenlee@advancingstates.org

July 1965

- Older American's Act July 14th
- Medicare July 30th
- Medicaid July 30th
- Entitlements/versus not
- Relationship between



The OAA: A Legacy of President Johnson's Great Society Programs

- Stipulated 10 broad national policy objectives to enhance the lives of older people
- Created the Administration on Aging (AoA) as the focal point on aging in the federal government
- Created state grants for community planning and services
- Created authority for research, demonstration and training projects in the field of aging



OAA Key Events

- 1972 Congregate Nutrition Program
- 1973 Area Agencies on Aging
- 1978 Long-term Care Ombudsman
- 1978 Home Delivered Meals
- 1980's Program cut by President Reagan



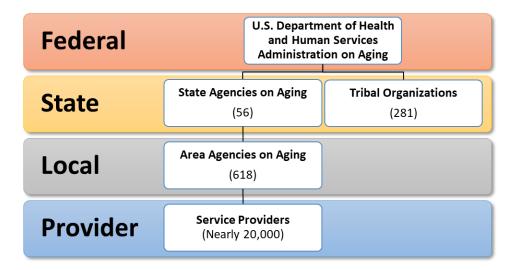
OAA Key Events

- 1987 Disease prevention & health promotion
- 2000 National Family Caregiver Program
- 2010 Elder Justice Act (part of ACA)
- 2012 Administration for Community Living created. AoA becomes part of ACL.





Aging Services Network & \$\$

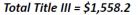


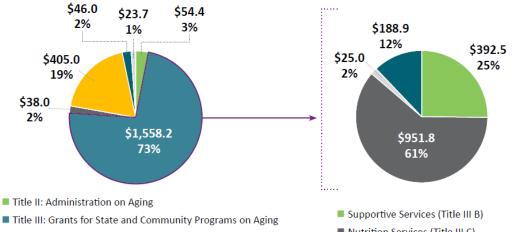
Note: 8 states, DC, 3 territories have a single AAA

OAA 2021 Funding

Figure 4. Older Americans Act Funding (in millions), FY 2021

Total OAA Funding = \$2,125





- Title IV: Activities for Health, Independence, and Longevity
- Title V: Community Service Senior Opportunities Act
- Title VI: Grants to Native Americans
- Title VII: Vulnerable Elder Rights Protection Activities

- Nutrition Services (Title III C)
- Disease Prevention and Health Promotion (Title III D)
- Family Caregiver Support Services (Title III E)



OAA Titles at a Glance

Title I. Declaration of Objectives

• Sets out broad policy objectives oriented toward improving the lives of all older people.

Title II. Administration on Aging

• Establishes AoA as the chief federal agency for older adults and sets out responsibilities of AoA and the Assistant Secretary for Aging. Establishes aging network activities.

Title III. Grants for State and Community Programs on Aging

• Authorizes activities of state & area agencies on aging & funds for supportive & nutrition services, family caregiver support, & disease prevention & health promotion.

Title IV. Activities for Health, Independence, and Longevity

• Authorizes research, training, and demonstration projects in the field of aging.



OAA Titles at a Glance, cont.

Title V. Community Senior Services Opportunities Act

• Authorizes funds to support part-time employment opportunities for unemployed lowincome people age 55 and older who have poor employment prospects

Title VI. Grants for Native Americans

• Authorizes grants for supportive, nutrition services, and caregiver services for American Indians, Alaskan Natives, and Native Hawaiians

Title VII. Vulnerable Elder Rights Protection Activities

• Authorizes funds for the long-term care ombudsman program & services to prevent elder abuse, neglect, & exploitation



Title III: Eligibility for Services

- People 60 and older
- Priority for those with "greatest economic and social need"
- No means testing for services



Greatest Need

- Social need: (paraphrased)
 - People with low income
 - People whose racial or ethnic status may heighten the need for services
 - Older individuals residing in rural areas
 - People who have needs related to a physical or mental disability
 - People who experience cultural, social, or geographic isolation
 - People not able to perform normal daily tasks to the degree it threatens their capacity to live independently.
- Economic need: Having an income below the federal poverty level



Title III: Supportive Services

Title III-B:

- Purpose: help older adults remain independent in their own homes and communities
- Priority services: access services (CM, I&R/A, transportation) home care, and legal assistance



Title III: Nutrition Programs

Title C-1: Congregate Meals Title C-2: Home-Delivered Meals Section 311: Nutrition Services Incentive Program (NSIP)

• Purpose: reduce hunger, food insecurity, malnutrition, promote socialization, and delay onset of poor health resulting from poor nutrition or sedentary lifestyle.



Title III: Evidence-Based Health Promotion & Disease Prevention

Title III-D

- Purpose: Wide range of services authorized by law, e.g. health risk assessments and screening, nutritional counseling, physical fitness, medicine management
- Evidence-based by design



Title III: Family Caregiving Services

Title III-E

- Purpose: Support adult caregivers to older adults, people with Alzheimer's disease of any age, older relatives providing care to children under age 18
- Services: I&R/A, individual counseling, support groups, caregiver training and respite care



Title V: Senior Community Service Employment Program (SCSEP)

- Purpose: provide part-time employment for unemployed low-income people aged 55 and over with poor employment prospects
- Help enrollees transition to unsubsidized employment.
- Enrollees work in community services jobs and Title III services programs, such as nutrition sites, hospitals, and schools.
- Eligibility: People over the age of 55 with incomes less than 125% of the federal poverty level.
- Administered by the Department of Labor



SCSEP Continued

- Participants earn the higher of federal or state minimum wage or local prevailing rate of pay; receive training, counseling and other work-related benefits
- DOL contracts with states and 19 national organizations as host agencies that recruit and enroll participants



Title VI: Grants for Services for Native Americans

- Recipient organizations: Recipient organizations must represent at least 50 people aged 60 and older
- Services: nutrition and supportive and caregiver services funded through three programs:
 - Native American Program
 - Native Hawaiian Program
 - Native American Caregiver Support Program



Title VII: Elder Rights Protection

- State LTC Ombudsman:
- Purpose: Advocate to improve quality of care for residents of nursing homes, assisted living facilities, and board and care homes; work with individuals; advance systemic change
- Active representation and protection of resident rights. Intended to <u>complement</u> federal and state oversight of facilities by federal and state inspection required by Medicare/Medicaid.
- Serves residents *regardless of age.*



Title VII: Elder Rights Protection

- Prevention of Elder Abuse, Neglect and Exploitation (PEANE)
 - Purpose: create public awareness of ways to identify and prevent abuse/neglect/exploitation
 - Develop state systems and legal protections to protect those who report abuse/neglect/exploitation
 - Note: Most funding for adult protective services comes from other sources, but no dedicated federal funding.



OAA: The Challenges

- Never sufficiently funded & losing ground
- Not an entitlement
- "Big Three" crowd out
- Surely we're spending enough
- Prevention is difficult to fund



OAA: The Weaknesses

- Diffuse distribution network
- Everything named something different
 No common branding
- Outputs and outcomes
- Data collection at the individual level

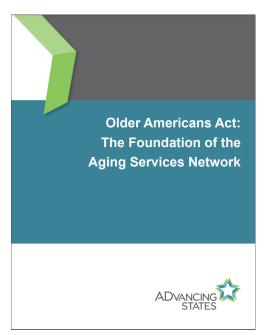


OAA: The Opportunities

- Building an evidence base
- Better coordination with Medicaid, especially LTSS
- More public interest in community-based care
- SDOH are sexy now



New OAA Report



- In May 2021 ADvancing States released a new primer on the OAA
- Useful for an array of constituencies
- Available electronically and limited print copies

Link for the report: http://www.advancingstates.org/sites/nasuad/files/Older%20Americans%20Act%20The%20Foundation%20of %20the%20Aging%20Services%20Network%20-%20Updated.pdf





Leadership, innovation, collaboration for state Aging and Disability agencies

15 Minute Break: 9:30-9:45 a.m.



2021 Hybrid Home & Community-Based Services Conference

Aging & Disability 101 Intensive The Administration for Community Living



2021 Hybrid Home & Community-Based Services Conference





An Introduction to the Administration for Community Living

Rick Nicholls, Chief of Staff

Administration for Community Living

December 7, 2021

About ACL

The Administration for Community Living was created around the fundamental principle that older adults and people of all ages with disabilities should be able to live where they choose, with the people they choose, and with the ability to participate fully in their communities.

By funding services and supports provided by networks of community-based organizations, and with investments in research, education, and innovation, ACL helps make this principle a reality for millions.

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ACL's Mission and Vision

Mission

Maximize the independence, well-being, and health of older adults, people with disabilities, and their families and caregivers.

Vision

All people, regardless of age and disability, live with dignity, make their own choices, and participate fully in society.

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History: ACL's Founding

- Created in 2012, bringing together:
 - Administration on Aging
 - HHS Office on Disability
 - ACF Administration for Developmental Disabilities
- Principal agency in HHS to lead aging and disability programs
- Reduce fragmentation and promote consistency in federal programs and policy addressing community living
- Enhance access to quality health care and long-term services and supports for older adults and people with disabilities
- Complement community infrastructure as supported by Medicaid and other federal programs

ACL Growth: 2013 to 2015

- FY 2014 and FY 2015 appropriations transfers:
 - State Health Insurance Program (SHIP)
 - Paralysis Resource Center
 - Limb Loss Resource Center
- The Workforce Innovation and Opportunity Act of 2014, transferred the following programs to ACL from Department of Education:
 - Independent Living Programs
 - Assistive Technology Program
 - National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)
- HHS Secretary transferred HRSA's Traumatic Brain Injury programs to ACL in October 2015

ACL – Program Areas by Statute

Older Americans Act:

- Grants for State and Community Programs on Aging
- · Activities for Health, Independence and Longevity
- Grants for Native Americans
- Vulnerable Elder Rights Protection

Elder Justice Act:

• Adult Protective Services

Public Health Services Act (PHSA):

- Alzheimer's Disease Supportive Services
- Lifespan Respite Care
- Chronic Disease Self-Management Education
- Paralysis Resource Center
- Limb Loss Resource Center
- Traumatic Brain Injury

<u>Medicare Improvements for Patients and Providers Act</u> (MIPPA):

- Grants to Aging and Disability Resource Centers
- Grants to Area Agencies on Aging
- Grants to State Health Insurance Assistance Programs
- National Center for Benefits Outreach and Enrollment

<u>Developmental Disabilities Assistance and Bill of Rights</u> Act (Developmental Disabilities Act):

- State Councils on Developmental Disabilities
- Developmental Disabilities Protection & Advocacy
- University Centers for Excellence in Developmental Disabilities
- Projects of National Significance

Rehabilitation Act:

- Independent Living State Grants
- Centers for Independent Living
- National Institute on Disability, Independent Living, and Rehabilitation Research

Assistive Technology Act (AT Act):

- Assistive Technology State Grants
- Protection & Advocacy for Assistive Technology
- Assistive Technology National Activities

Help America Vote Act:

Protection & Advocacy Systems

Omnibus Budget and Reconciliation Act (OBRA):

State Health Insurance Assistance Programs

ACL's Budget

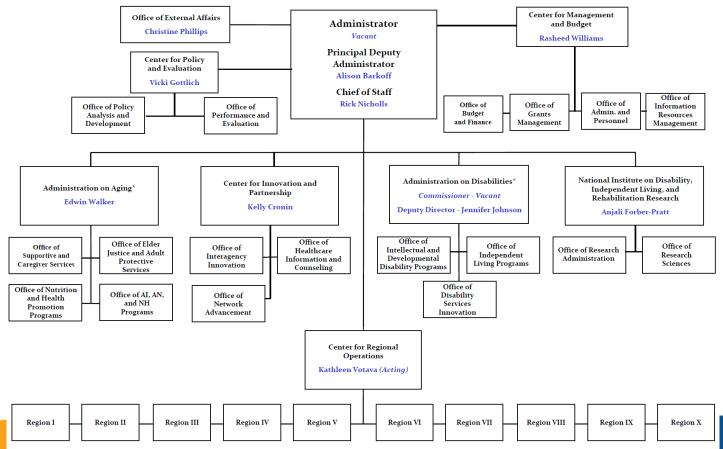
- FY 2021 total budget of **\$2.26B**
- FY 2022 budget request of \$3.12B
 - Nearly \$800M increase for aging/disability programs
 - Providing direct services, particularly HCBS

- Accelerating COVID-19 recovery
- Supporting caregivers
- Advancing equity

\$3.2B to ACL and Aging/Disability Grantees in COVID-19 Supplemental Funding

- Families First Coronavirus Response Act (FFRCA) provided **\$250M in FY 2020**
- Coronavirus Aid, Relief, and Economic Security (CARES) Act provided nearly **\$1B in FY 2020**
- Consolidated Appropriations Act of 2021 provided \$275M
- American Rescue Plan Act of 2021provided
 \$1.53B

ADMINISTRATION FOR COMMUNITY LIVING ORGANIZATIONAL CHART



* The Administration on Aging is headed by the Assistant Secretary for Aging, who is also the ACL Administrator. The Deputy Assistant Secretary for Aging supports the Assistant Secretary in overseeing the Administration on Aging. The Deputy Assistant Secretary for Aging also serves as the Director of the Office of Long-Term Care Ombudsman Programs consistent with Section 201 of the Older Americans Act.

** The Administration on Disabilities is headed by a Commissioner who also serves as: the Commissioner of the Administration on Developmental Disabilities as described by the Developmental Disabilities Act; and the Director of the Independent Living Administration, reporting directly to the ACL Administrator in carrying out those functions, consistent with Section 701A of the Rehabilitation Act.

Office of the Administrator

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Vacant Administrator

Alison Barkoff Principal Deputy Administrator

- Serve as advisors to HHS Secretary on aging and disability
- Provide leadership and executive supervision to ACL
- Establish national policies and priorities

Office of the Administrator (Cont.)



Rick Nicholls Chief of Staff



Christine Phillips Director, Office of External Affairs

Chief of Staff and Executive Secretary

- Policy Clearance
- Controlled Correspondence
- Legislative Affairs and Oversight
- Freedom of Information Act
- Office of External Affairs
 - Communications Products and

Website (<u>www.acl.gov</u>)

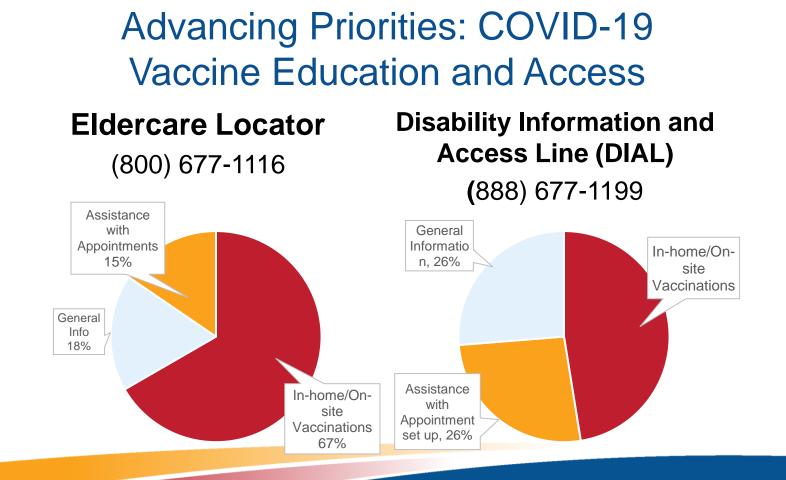
- Media Inquiries and Outreach
- Public Education Activities

A Sample of Current Priorities

- <u>COVID-19 Response</u>
- Supporting Family Caregiving
- Expanding HCBS
- Protecting Rights and Preventing Abuse
- Equity

Advancing Priorities: COVID-19 Response

- Vaccine education and access
 - <u>\$100 million</u> in partnership with CDC for vaccine access
 - Long-term care settings initiative
 - Stakeholder engagement (boosters, children's vaccination)
- Vaccine mandates for healthcare settings
- Nursing home strike teams
- <u>\$150 million</u> in Public health workforce funding



Advancing Priorities: Caregiving

Roughly 175,000 children in the U.S. have lost one or both parents or a grandparent caregiver to COVID-19.¹



- RAISE report to Congress released in September
 - https://acl.gov/RAISE/report
- Support Grandparents Raising Grandchildren (SGRG) report to Congress released in November



- <u>https://acl.gov/SGRG/report</u>
- National Caregiver Strategy under way

¹ Chatterjee, R., & Wroth, C. (2021, October 7). *Covid deaths leave thousands of U.S. kids grieving parents or primary caregivers*. NPR. Retrieved October 28, 2021, from <u>https://www.npr.org/sections/health-shots/2021/10/07/1043881136/covid-deaths-leave-thousands-of-u-s-kids-grieving-parents-or-primary-caregivers</u>.

Advancing Priorities: Expanding HCBS

- Collaboration with CMS
 - Section 9817, HCBS Settings Rule, Quality Measures, and Money Follows the Person
- Social Determinants of Health:
 - HHS-HUD Advancing Community Living through Coordination between Housing and Services
- Public Charge



Advancing Priorities: Protecting Rights & Preventing Abuse



MEMBERS

Veterans Affairs

CHAIR



ELDER JUSTICE COORDINATING COUNCIL







U.S. Department of Justice

Consumer Financial Protection Bureau

U.S. Department of Commission

Federal Communications



U.S. Department of Housing U.S. Department of the Interior





Commission

U.S. Securities and Exchange Commission First meeting of the new Administration being held 12/7 (today) at 11:00 EST

Approximately one in 10 Americans aged 60+ have experienced some form of elder abuse.² In a study of 897 older persons sheltering at home during the pandemic, the prevalence of elder abuse was one in five older persons (21.3%), an 83.6% increase compared to prevalence estimates prior to the pandemic.³

2National Council on Aging

3E-Shien Chang, Becca R, Levy, High Prevalence of Elder Abuse During the COVID-19 Pandemic; Risk and Resilience Factors, The American Journal of Geriatric Psychiatry, Volume 29, Issue 11, 2021, Pages 1152-1159, ISSN 1064-7481, https://doi.org/10.1016/j.jagp.2021.01.007 (https://www.sciencedirect.com/science/article/pii/S106474812100018X)

Social Security

Administration

U.S. Department

of Labor





U.S. Department of Agriculture

the Treasury







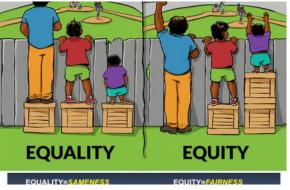
U.S. Department of



and Urban Development

Advancing Priorities: Equity

- Reaching underserved and marginalized communities is at the core of what ACL's does and is embedded in statutes authorizing ACL programs
- Implementation of Executive Orders on Equity, which identify individuals with disability and older adults as underserved populations
- Intersectional approach, inclusion of population across HHS and federal government
- FY 2022 activities in President's budget request
- Development of ACL equity plan



Equality vs. Equity - by the Interaction Institute for Social Change | Artist: Angus Maguire. Image Found: interactioninstitute.org

Build Back Better: Potential ACL Funding

- Older Americans Act (\$1.2B)
 - Nutrition and home and community-based supportive services
 - Equity focused grants
 - Social isolation
- Elder Justice (\$1.6B)
 - Long-term care ombudsman
 - Adult Protective Services
 - Includes set asides for tribes

Build Back Better: Potential ACL Funding

- \$20M for TA center on direct care workforce and family caregivers
 - Collaborate with DOL on designing and awarding grants for direct care workforce infrastructure (\$1B)
- Other grants:
 - \$40M to support the behavioral health needs of unpaid caregivers
 - \$25M to address the behavioral health needs of people with intellectual and developmental disabilities

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\$10M for assistive technology

Build Back Better: Other Key Provisions for ACL Partnerships

- HCBS funding (CMS)
 - \$150B to expand HCBS for older adults and people with disabilities
 - ACL equities, incl. HCBS ombudsman and no wrong door activities
- Housing for people with disabilities and older adults (\$900M) and funding for TA on housing and services (\$15M) (HUD)
 - Portion of funding will go to joint HHS-HUD Housing and Services Resource Center
- Grants to assist with eliminating subminimum wage employment for people with disabilities (\$300M) (DOL)

Edwin Walker Deputy Assistant Secretary for Aging

Administration on Aging

 Administers programs operated under: the Older Americans Act; Public Health Service Act; and Elder Justice Act

• Four Program Offices

- Supportive and Caregiver Services
- Nutrition and Health Promotion Programs
- Elder Justice and Adult Protective Services
- American Indian, Alaskan Native, and Native Hawaiian Programs

Administration on Aging (AoA)

1965: Three Important Programs Enacted

- Medicare
- Medicaid
- Older Americans Act (OAA)

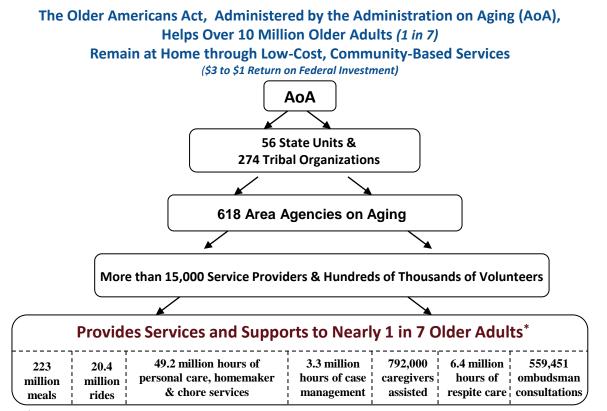


"Every State and every community can now move toward a coordinated program of services and opportunities for our older citizens." President Lyndon B. Johnson, July 1965

OAA Declaration of Objectives – Title I

To Assure Older Americans:

- 1. An adequate income in retirement
- 2. Best possible physical and mental health
- 3. Suitable housing
- 4. Comprehensive long term care services
- 5. Employment opportunities
- 6. Retirement in health, honor & dignity
- 7. Civic, cultural, educational and recreational opportunities
- 8. Continuum of care for vulnerable elderly
- 9. Benefits from research
- 10. Freedom & independence to manage their own lives



*Data Source: FY 2019 SPR and Title VI PPR

The Older Americans Act

...assures that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

Who OAA Programs Serve:

- Poor and Near Poor (below 150% Poverty)
- Frail and Vulnerable
 - Lives Alone; Diabetes; Heart Condition; Minority; Rural
- At Risk for ER visits & Hospitalization
 - Over 90% of OAA Clients have Multiple Chronic Conditions
 - Compared to 68% of general older adult population (age = 65+)
 - 66% of Case Management Clients take 5 or more medications daily
- At Risk for Nursing Home Admission
 - 42% of Home-Delivered Nutrition Clients have 3+ Activities of Daily Living (ADL) Impairments
 - 75% of Home-Delivered Nutrition Clients have 3+ Instrumental Activities of Daily Living (IADL) Impairments

Data Sources: 2017 SPR; 2018 NSOAAP, 2017 CMS Multiple Chronic Conditions Prevalence;

Health & Independence: Home & Community-Based Supportive Services

Key Service Data

- 12.1 million hours of adult day services
- More than 3.3 million hours of case management
- 12.4 million calls answered for information about and assistance obtaining services
 - Augmented by National Eldercare Locator & Support Center
- Complemented by Evidence-Based Interventions:
 - Falls Prevention
 - Chronic Disease Self Management Education
 - Diabetes Self Management Training
 - Alzheimer's Disease Supportive Services
- Collaborating with Business Acumen Initiative to transform aging & disability grant recipients into strategic business partners with the healthcare sector

Targeting: Transportation Service Example

- Nearly half (49%) of seniors using transportation services rely on them for the majority of their transportation needs and would otherwise be homebound.
- Nationally, 24% of individuals 60 and older live alone. Nearly two-thirds (64%) of OAA transportation users lived alone.
- 14% of transportation riders take 10 to 20 daily prescriptions, increasing their safety risk of driving
- About two-thirds of transportation clients have annual incomes at or below \$20,000

Data Sources: FY 2017 SPR and 2018 NSOAAP

The National Eldercare Locator https://eldercare.acl.gov/

| al demonstration | | | | | | | | | | | Home | About | Resources |
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| eldercare locator | | | | | | | | | | | 1-80 | 0-677 | -1116 🕋 |
| Find help in your community by entering your zip code OR city and state. | | | | | | | | | | | | | |
| Zip Co | de City/State | | | | | | | | | | | | |
| Enter 2 | zip code | | | | | | | | | Search | | | |
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Welcome to the Eldercare Locator, a public service of the U.S. Administration on Aging connecting you to services for older adults and their families. You can also reach us at 1-800-677-1116.





Health & Independence: Nutrition Services

Congregate (Formula Grant): Meals at Group Sites, Such as Senior Centers Home-Delivered (Formula Grant): Delivery of Meals & Related Services to Frail Seniors Who Are Homebound Nutrition Services Incentives Program: Funds Awarded Based on # Meals Served in Previous Year

- Adequate nutrition is necessary for health, functionality and the ability to remain at home in the community.
- Provide Nutrition Services, Education and Counseling
- 66% of Home-Delivered & 54% of Congregate Nutrition Clients report the meal is half or more of their food for the day.
- OAA meals are nutritious and meet the needs of seniors with nutrition ameliorated chronic illnesses (diabetes, hypertension, congestive heart failure)
 - Provide 33% of Dietary Reference
 Intake
 - Adhere to the Dietary Guidelines for Americans.

- In FY 2019, Home-Delivered Nutrition Services provided 149 million meals to over 882,000 seniors.
- In FY 2019, Congregate Nutrition Services provided 73 million meals to more than 1.5 million seniors in a variety of community settings.
- In FY 2017, nine out of ten (94%) homedelivered meal clients reported that receiving meals helped them to continue to live in their own home.

Caregivers: National Family Caregiver Support Program

Serving Over 790,000 Caregivers Annually

- Respite Care Services provided caregivers with nearly 6.4 million hours of temporary relief from their caregiving responsibilities.
 - Coordinated with Lifespan Respite Care
 Program for systems development
- Access Assistance Services provided 1.3 million contacts to caregivers assisting them in locating services from a variety of private and voluntary agencies.
- 26% of caregiver clients indicate that without OAA services the care recipient would most likely be living in a nursing home or assisted living.

- 80% of all community-based long-term care is provided by family and friends.
- In 2014, approximately 34.2 million adult caregivers, or approximately 15 percent of all adults, provided uncompensated care to those 50 years of age and older.
- A 2014 study by the Rand Corporation estimates the economic value of replacing unpaid caregiving to be about \$522 billion annually (cost if that care had to be replaced with paid services).

Data Sources: FY 2019 SPR, 2018 NSOAAP; Research Report: Caregiving in the U.S. 2015. National Alliance for Caregiving and AARP Public Policy Institute

American Indian, Alaska Native, Native Hawaiian Programs

Purpose

- Promote home and community-based supportive services to Native American, Alaskan Native and Native Hawaiian elders.
 - Help to reduce the need for costly institutional care and medical interventions;
 - o Responsive to the cultural diversity of Native American communities; and
 - Represent an important part of the communities' comprehensive services.

Native American Nutrition and Supportive Services

 Congregate and Home-Delivered Meals; Information and Referral; Transportation; Personal care; Chores; Health Promotion and Disease Prevention; and other Supportive Services.

Native American Caregiver Support Services

- Assist families and grandparents caring for grandchildren.
- Services that meet a range of caregivers' needs, including information and outreach, access assistance, individual counseling, support groups and training, respite care, and other supplemental services.



Protection of Vulnerable Elders

Long-Term Care Ombudsman

- Over 1,300 professional ombudsman and 8,000 volunteers:
 - monitor conditions,
 - investigate complaints,
 - · represent resident interests;
 - made quarterly visits to 68% of nursing homes;
 - 30% of assisted living, board and care, and other facilities.
- Ombudsman handled 123,863 complaints, 73% were partially or fully resolved.
- Improved consistency with implementation of
 - Regulation (2015);
 - Reauthorization (2016);
 - Data System (2017)

Prevention of Abuse, Neglect & Exploitation

- An estimated 1 in 10 older adults experience abuse, neglect, and/or exploitation annually.
- OAA focuses on training, education, and coordination with local law enforcement officials, community coalitions, and multidisciplinary teams.
- Elder Justice Act Implementation
 - EJ Coordinating Council
 - National Framework
 - National Center on Elder Abuse
 - National Adult Maltreatment Reporting System
 - APS Guidelines
- Recent COVID relief legislation has provided the first-ever federa formula grants for APS

Legal Services

- Provided more than 964,000 hours of legal assistance.
- Top Areas of Legal Assistance:
 - Income Security
 - Health Care Financing
 - Housing
 - Consumer Protection
 - Elder Abuse
- Enhanced Training and Technical Assistance
- Enhanced Data Collection

Administration on Disabilities

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Vacant Commissioner



Jennifer Johnson Deputy Director

- Administers programs operated under: the Developmental Disabilities Act; Rehabilitation Act; Help America Vote Act; Assistive Technology Act; and Public Health Service Act
- Three Offices
 - Office of Intellectual & Developmental Disabilities
 Programs
 - Office of Independent Living Programs
 - Office of Disability Services Innovation

The Developmental Disabilities Act

Seeks to "assure that individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life ..."

University Centers for Excellence in Developmental Disabilities

UCEDDs are a nationwide network of independent but interlinked centers, representing an expansive national resource for addressing issues, finding solutions, and advancing research related to the needs of individuals with developmental disabilities and their families. Core Services:

- Interdisciplinary pre-service preparation and continuing education
- Research and public policy analysis
- Information dissemination
- Community services, including direct services, training, technical assistance, and model demonstration projects

State Developmental Disability Councils

- Federally funded, self-governing organizations charged with identifying the greatest challenges facing of people with DD in their state or territory
- Council members are appointed by a state's governor and > 60% of a Council's members must people with DD or family members
- Bring together businesses, service providers, agencies, policymakers, and community groups to find solutions to persistent challenges
- Develop and test innovative new programs and service models.
- Help bring the voices of individuals with developmental disabilities and their families to the policy-makers whose decisions impact their lives.

Protection and Advocacy Systems (P&As)

- The national network of 57 P&As inform people of their rights, investigate suspected abuse and neglect, and provide free legal representation for clients.
- P&As have legal authority to access records, facilities, and individuals when conducting investigations.
- Amplify the voices of the disability community, engage in systems change work, and educate policymakers on the concerns of people with disabilities.
- Operate independent of service providers.

Projects of National Significance

- PNS focus on the most pressing issues affecting people with DD their families
- Allow ACL to help fill gaps identified by the community and quickly address new issues with a national scope

- Examples:
 - Longitudinal data collection projects
 - Self-Advocacy Resource and Technical Assistance Center
 - National Center on Advancing Person-Centered Practices and Systems
 - Community Collaborations for Employment

Independent Living

- IL is a movement, a philosophy, and a program
- First CIL founded in Berkley in 1972 by disability rights activists including Ed Roberts
- Cross-disability
- Rooted in "Nothing about us without us" philosophy

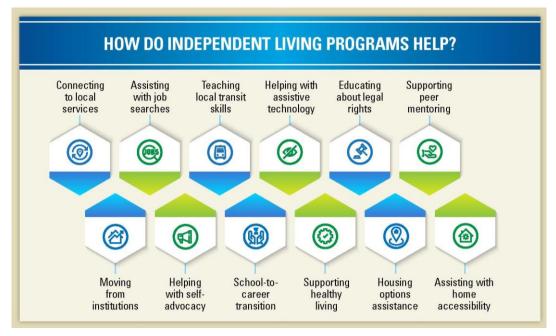


The Five Core IL Services

- Information and referral
- IL skills training
- Peer counseling
- Individual and systems advocacy
- Services that facilitate transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions, and facilitate transition of youth to postsecondary life.

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What are Independent Living Services?



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Paralysis, Limb Loss, and TBI Programs

- Limb Loss Resource Center (operated by the Amputee Coalition) works to ensure the availability of, and access to, the most comprehensive, high-quality, evidence-based information, resources, and supports for people with limb loss and limb difference, their families, and their support networks.
- The National Paralysis Resource Center (operated by the Christopher & Dana Reeve Foundation) works to improve the quality of life for people living with paralysis through grants, information, and advocacy.
- The TBI State Partnership Grant Program provides funding to help states increase access to services and supports for individuals with TBI throughout the lifetime.
 - ACL's TBI Technical Assistance and Resource Center helps state partnership grantees promote access to integrated, coordinated services and supports for people who have sustained a TBI, their families, and their caregivers. The Center also provides a variety of resources to non-grantee states, people affected by brain injury, policymakers, and providers.
- Protection & Advocacy for Traumatic Brain Injury



Center for Innovation and Partnership



Kelly Cronin Deputy Administrator for Integrated Programs

 Administers programs operated under: the Older Americans Act; Public Health Service Act; MIPPA; OBRA; and AT Act

Three Offices

- Office of Healthcare Information and Counseling
- Office of Network Advancement
- Office of Interagency Innovation

Assistive Technology Act Program

- 56 state and territorial programs offering:
 - Help older adults and people with disabilities identify AT solutions
 - Device demonstration and short-term loan programs ("try before you buy")
 - Reuse programs that provide gently used devices at substantial savings
 - Financing options
- Serve approximately 500,000 people a year



Examples of AT Devices and Solutions:

- Hearing aids
- Vehicle modifications, such as hand controls or wheelchair lifts
- Devices that help with bathing and eating
- Software modifications for those with hearing and visual challenges
- Equipment, such as grab bars in a shower, to help prevent falls
- Eye glasses and magnification devices to help individuals with low vision
- Communication devices for individuals with speech disabilities
- Wheelchairs, walkers and other mobility devices

Partnership: The VA's Veteran Directed Care Program

- The Veterans Health Administration's VDC program provides veterans with greater choice and control over their services and supports
- Veterans can:
 - Choose the services and supports they use
 - Hire their own workers, including family and friends
 - Live in their own home and community
 - Achieve goals meaningful to them

- VA Medical Center (VAMC) Responsibilities:
 - Determine eligibility for VDC
 - Provide a monthly budget
 - Refer veteran to a VDC provider
 - Approve veteran's spending plan
- VDC Provider Responsibilities:
 - Listen to veteran's goals and needs
 - Help veterans plan for your services
 - Connect veterans to community resources
 - Serve as a visible and trusted organization in the community

Partnership: Housing

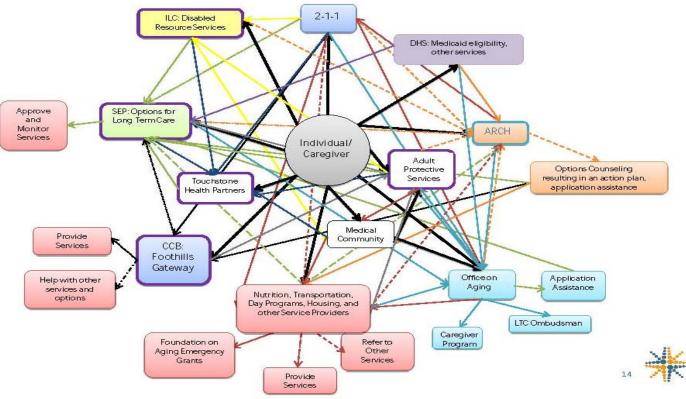
- Ongoing partnerships with HUD, ASPE, CMS, Health Plans, Housing Providers, States and Communities
- New ACL Housing Resources TA Center promotes cross-sector partnerships across federal, state, local, tribal, private, and nonprofit organizations working in the housing, home and community-based services, homelessness services, and health sectors.



Partnership: Transportation

- ACL supports the development of convenient, affordable, and accessible transportation options
- Longstanding partnership with the Federal Transit Administration and Coordinating Council on Access & Mobility (CCAM) members
- Transit 4 All: an inclusive and coordinated transportation-planning project that has funded a series of pilot projects across the nation

The LTSS Puzzle: The Need for a Coordinated No-Wrong Door System



NWD System Vision



A single system available to **all populations** who need or may at some point need LTSS and **all payers** who help to finance LTSS.



The NWD System seamlessly connects individuals to the full range of LTSS community-based options available.

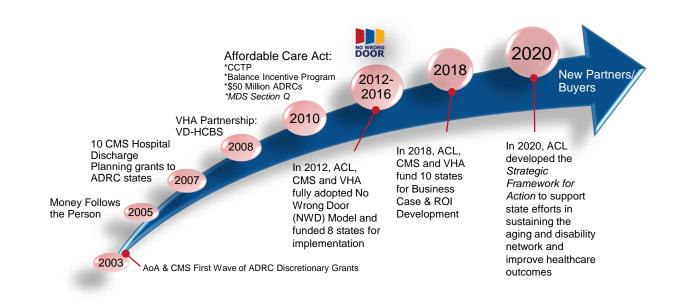


Through a network of community-based organization (CBOs), NWD expands access to services and supports, **helping individuals and their caregivers** navigate resources they need with a **person-centered approach.**



Coordinated at the state level by a strong governance structure to coordinate policy, technology/data infrastructure and resource allocation across the network of CBOs.

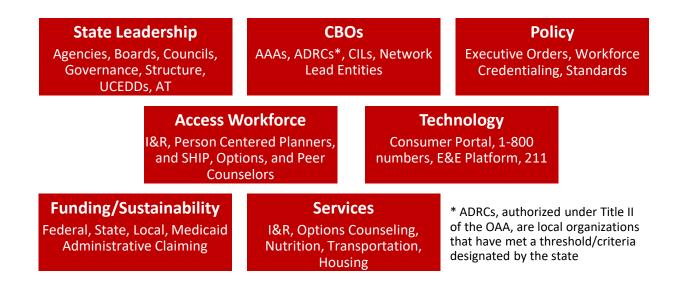
Evolution of the Aging and Disability Resource Center/No-Wrong Door System Vision





Every state is different

But every state has HCBS infrastructure supporting access



State Health Insurance Assistance Program

- Mission: to empower, educate, and assist Medicareeligible individuals, their families, and caregivers through objective outreach, counseling, and training, to make informed health insurance decisions that optimize access to care and benefits.
- 54 Grantees: One in every state, DC, PR, & USVI (2/3 in State Units on Aging; 1/3 in Dept of Insurance)
- Provide one-on-one assistance to Medicare beneficiaries who prefer or need information, counseling, and enrollment assistance beyond what they are able to receive on their own through other sources
- Built on over 3,300 local partnerships with AAAs, CILs, senior centers, and other community organizations to host 14,000 team members (approx. 50% are volunteers)



Senior Medicare Patrol (SMP)



Mission

To empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors, and abuse through outreach, counseling, and education

- 54 State Projects: One in every state, DC, PR, GU, and USVI
 - 6,900 Team Members nationally
- SMP's goals:
 - To prevent Medicare fraud before it happens via public outreach and one-on-one assistance and
 - To report suspected issues as quickly as possible to the proper investigators
- SMP is known as a trusted OIG & CMS partner and provides a direct link from Medicare beneficiaries to fraud investigators
 - Example: OIG credits SMP with first notifying them of genetic testing schemes in 2019.

Medicare Improvements for Patients and Providers (MIPPA) State Grants

- MIPPA provides additional funding to the existing infrastructure created by the SHIPs, AAAs, and ADRCs
- Purpose of funding is to conduct outreach and enrollment assistance of low-income Medicare beneficiaries into the Part D Low-Income Subsidy (LIS/Extra Help) and the Medicare Savings Programs.
- Most recently reauthorized with 2021 Budget = Increased funding from \$25.5M to \$35M
 - \$15M for SHIPs (increased from \$13M)
 - \$15M for AAAs (increased from \$7.5M)
 - \$5M for ADRCs (no change)
- State projects are located in every state, DC and PR but not all states receive all three funding streams (state's decision)

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National Institute on Disability, Independent Living and Rehabilitation Research

 Administers research grant programs authorized under Sections 202 and 204 of the Rehabilitation Act

- Anjali Forber-Pratt Sponsors grantees to generate new disability and rehabilitation knowledge and promote its use and adoption
 - Two Offices:
 - Research Sciences
 - Research Administration

9

Kristi Hill **Deputy Director**

NIDILRR's Mission

To generate new knowledge and to promote its effective use:

To improve the abilities of <u>individuals</u> with disabilities to perform activities of their choice in the community

To expand <u>society</u>'s capacity to provide full opportunities and accommodations for its citizens with disabilities

What NIDILRR Funds (Annual Budget of \$112M)



Breadth of Responsibility

| Populations across the lifespan | Children Transition age Adults Aging |
|--|---|
| Cross-disability | All disabilities Specific programs target SCI, TBI and Burn Injury |
| Focus on Health and Function, Employment, Community Living and Participation | Justified by the Rehabilitation Act of 1972 as amended most recently in the Workforce Innovation Opportunity Act (WIOA) of 2014 |

Center for Policy and Evaluation



- Advises and supports the Immediate Office of the Administrator in developing effective federal policies to address the needs of older adults and people with disabilities
- Collects and analyzes data on populations and services, and evaluates the effectiveness of programs

Vicki Gottlich Director, Center for Policy and Evaluation

- Strategic Planning
- Two Offices:
 - Policy Analysis and Development

9

- Performance and Evaluation

ACL's Office of Policy Analysis and Development

- Policy leadership on addressing COVID-19, promoting and expanding HCBS, addressing systemic barriers to Community Living, promoting Quality of Care, etc.
- Development and Publication of <u>Policy Issue</u> <u>Briefs</u>
- <u>Regulatory and Guidance Documents</u>
- Policy Coordination and Collaboration across HHS and the Executive Branch

ACL's Office of Performance and Evaluation

Three focus areas:

- 1. <u>Program Evaluation and Evidence Building</u>. Oversees and supports number of evaluations; develops annual evaluation plans and agency research agendas; implements the agency evaluation policy and learning agenda (aka evidence building plan).
- 2. <u>Performance Management.</u> Provides performance data for agency budget reporting and Reports to Congress; operates the ACL data governance council.
- 3. Data, Statistical Reports, and Resources. Oversees ACL's public data portal (<u>www.AGID.ACL.gov</u>) and produces a range of toolkits, job aids, and briefs.

National Center on Advancing Person-Centered Practices and Systems (NCAPPS) <u>https://ncapps.acl.gov/</u>



ME ABOUT NCAPPS TECHNICAL ASSISTANCE RESOUR

RESOURCES LEARNING COLLABORATIVES

WEBINARS NCAPPS SHORTS

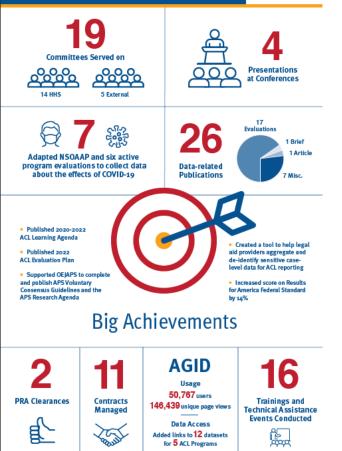
National Center on Advancing Person-Centered Practices and Systems



Transforming how we think, plan, and practice

Office of Performance and Evaluation 2020 Year in Review

*AC/



ACL promotes the development and use of high-quality data for decision making

Center for Management and Budget



- Direct and coordinate all ACL administrative and resource management activities, and improve the efficiency and effectiveness of ACL's operations
- Executive Officer, CFO, CIO, Grants Management Officer, and Human Capital Officer

Rasheed Williams Deputy Administrator for Management and Budget

- Four Offices:
 - Administration and Personnel

9 9

- Budget and Finance
- Grants Management
- Information Resources Management

Center for Regional Operations



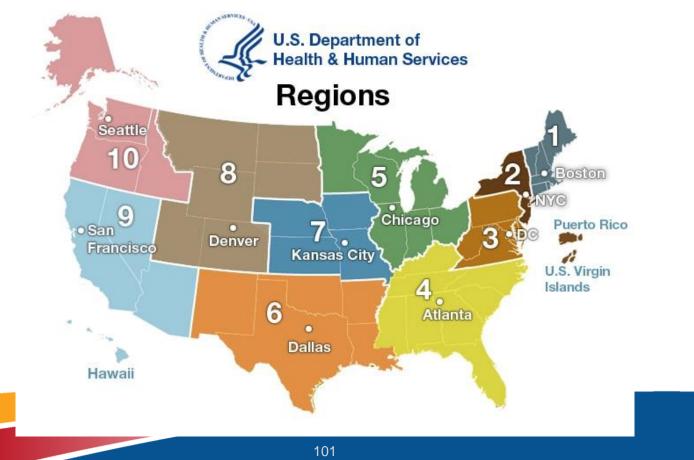
Kathleen Votava Deputy Administrator for Regional Operations and Partnership Development

- ACL's 'eyes and ears,' advocates, and liaisons at the regional level
- Works closely with federal, state, tribal and local organizations

 \cap

 Represents ACL's mission, goals, objectives and initiatives to the Aging and Disability Networks, other federal agencies, and the public

10 ACL Regional Administrators



ACL Regional Administrators

Region I: CT, MA, ME, NH, RI, VT

• Jennifer Throwe Boston, MA

Region II: NY, NJ, PR, VI

• Rhonda Schwartz New York, NY

Region III: DC, DE, MD, PA, VA, WV

• Rhonda Schwartz (Acting) Philadelphia, PA

Region IV: AL, FL, GA, KY, MS, NC, SC, TN

 Costas Miskis Atlanta, GA

Region V: IL, IN, MI, MN, OH, WI

• Amy Wiatr-Rodriguez Chicago, IL

Region VI: AR, LA, OK, NM, TX

• Derek Lee Dallas, TX

Region VII: IA, KS, MO, NE

 Lacey Boven Kansas City, MO

Region VIII: CO, MT, UT, WY, ND, SD

Percy Devine
 Denver, CO

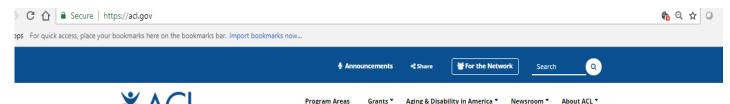
Region IX: CA, NV, AZ, HI, GU, CNMI, AS

 Fay Gordon San Francisco, CA

Region X: AK, ID, OR, WA

 Louise Ryan Seattle, WA

For More Information – ACL.gov



Advancing independence, integration, and inclusion throughout life

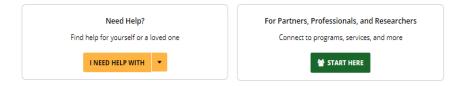
Administration for Community Living

The Administration for Community Living was created around the fundamental principle that older adults and people of all ages with disabilities should be able to live where they choose, with the people they choose, and with the ability to participate fully in their communities.

By funding services and supports provided by networks of community-based organizations, and with investments in research, education, and innovation, ACL helps make this principle a reality for millions of Americans.



Administration for Community Living: Strengthening Communities Video





*****ACL UPDATES

Policy Round Up: Updated vaccine guidance; increasing enrollment in Medicare Savings Programs; Voting access

POLICY ROUND-UP

ACLgov @ @ACLgov · Nov 18
 On 11/23 at 2PM ET, join @ADANational for a course on creating accessible digital documents. Participants will learn how people w/ #disabilities use tech to access documents, characteristics of accessible documents, & practical tips. Register:

adata.org Creating Accessible Digital Documents

Stay in Touch

ACL Updates Listserv: acl.gov/subscribe

Social Media: facebook.com/ACLgov twitter.com/ACLgov youtube.com/Administration ForCommunityLiving





Aging & Disability 101 Intensive The State LTC Ombudsman Program



2021 Hybrid Home & Community-Based Services Conference

Office of the State Long-Term Care Ombudsman

Who, What, Where, Why, and How?

HCBS Conference Intensive December 2021

The Long-Term Care Ombudsman Program –

The WHAT

MISSION:

To act as an advocate for persons receiving long-term care, whether the care is provided in a nursing home or assisted living facility, or through community based services to assist those still living at home.

The Ombudsman & representatives serve as advocates in order to protect and improve the **quality of care** and the **quality of life** of long-term care recipients.

Cornerstone: residents' rights.



History of the Long-Term Care Ombudsman Program (LTCOP)

1972

1981

1987

• Five Nursing Home Ombudsman Demonstration programs established to focus on nursing home resident complaint resolution

- •Older Americans Act (OAA) amendments **required all states** to establish an Ombudsman Program
- Program designed to be a **local**, **community program** utilizing volunteers

Duties expanded to board and care homes (e.g. Assisted Living Facilities)
Name changed from Nursing Home Ombudsman to Long-Term Care Ombudsman (LTCO)

•LTCO access to resident records (with resident consent)

•States must prohibit willful interference of official LTCO duties and/or retaliation against a LTCO, resident or other individual related to LTCOP duties

The WHO -

Acts as an **advocate** for persons receiving long-term care:

- •in a nursing home
- •in an assisted living facility
- through community based services*

*In Va includes Managed Medicaid LTSS



Title VII Goals & Programs

Title VII GOALS

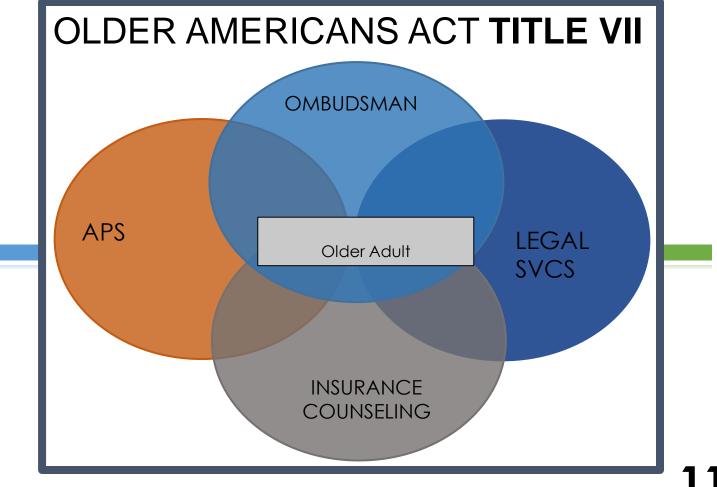
✓ Help Older People to:

- Understand & exercise their rights
- Receive benefits to which entitled
- Make informed choices

Emphasizes the Most Vulnerable **Common Ground:**

Elder Rights Protections – Vulnerable Adults

- LTC Ombudsman
- Elder Abuse Prevention
- Legal Assistance
- Insurance/benefits counseling (VICAP)



LTCOP: a 'horse of a different color'...

By Congressional design

- Part of OAA family of services - but 'apart'
 UNIQUE INDEPENDENCE/ AUTONOMY
 UNIQUE STRUCTURE:
 - Statewide program centralized or decentralized
 - Headed by the State LTC Ombudsman
 - Broad prescribed mandate
 - Special protections under law/ regulation



UNIQUE TOOLS...

and UNIQUE CHALLENGES, STRENGTHS, & OPPORTUNITIES

2015 Final Rule 45 CFR

1321.11(b) State agency policies. (revises existing rule)

New Rule

- 1327.1 Definitions.
- 1327.11 Establishment of the Office of the State Long-Term
- Care Ombudsman.
- 1327.13 Functions and responsibilities of the State Long-Term Care Ombudsman.
- 1327.15 State agency responsibilities related to the Ombudsman program.
- 1327.17 Responsibilities of agencies hosting local Ombudsman entities.
- 1327.19 Duties of the representatives of the Office.

1327.21 Conflicts of interest.

45 CFR 1327.15 State agency responsibilities related to the Ombudsman program

<u>Rule</u>:

SUA shall ensure that:

- The Ombudsman complies with the OAA and this Rule.
- Program has **sufficient authority and access** to facilities, residents, and information needed to perform the functions, responsibilities, and duties of the Office.

SUA shall provide:

- **Training opportunities**; can utilize Title IIIB and Title VII funding for this purpose.
- **Personnel supervision and management** for the Ombudsman and representatives of the Office who are employees of the State agency, including assessment of Office fulfillment of functions.
- **Contract monitoring**, including fiscal monitoring, where applicable; and may request reports of program aggregated data for this purpose.

Key Resources

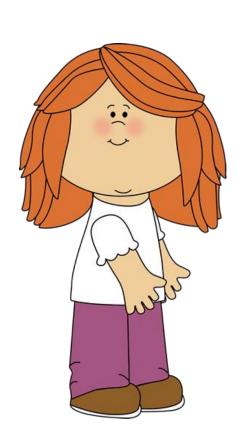
Visit the National Long-Term Care Ombudsman Resource Center (NORC) website, Long-Term Care Ombudsman Program Final Rule page for links to the Rule and materials created by the Administration for Community Living and NORC. This page is your one-stop for frequently asked questions, webinars, issue briefs, side-by-side charts, technical Assistance responses and state resources regarding the Rule. http://ltcombudsman.org/library/fed_laws/ltcop-final-rule.



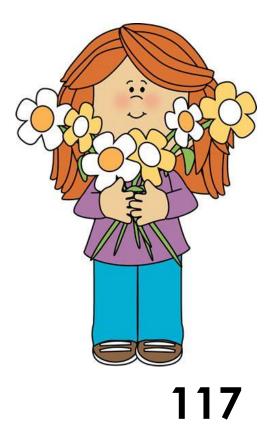
The State Long-Term Care Ombudsman Program – 2019 Revised Primer for State Agencies (NASUAD)

https://ltcombudsman.org/uploads/files/support/nasuad-ombudsman-acl-rpt-0319-web-final.pdf

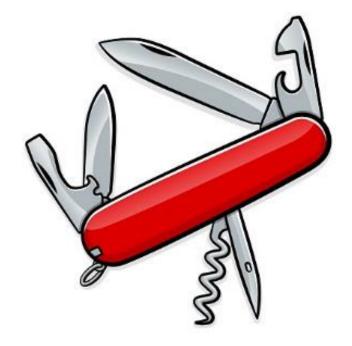
A 'red-headed stepchild ?







Indispensable TOOL – with unique features



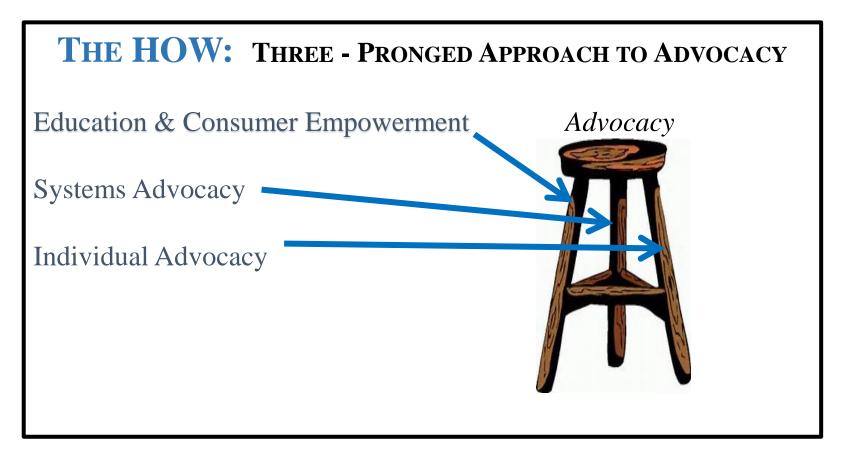


A key piece in OAA services 118

The HOW: A VERY BROAD MANDATE (OAA) (PUBLIC LAW 89-73; TITLE VII, SECTION 712)

Identify, investigate and resolve complaints that:

- (i) are made by, or on behalf of, residents; and
- (ii) relate to action, inaction, or decision that may adversely affect the health, safety, welfare, or rights of the residents... of...
 - providers, or representatives of providers
 - public agencies
 - health & social service agencies
 - guardians & representative payees



State responsibility to ensure:

- Access for LTCOP to residents & records
- Prohibition against interference with program & representatives
- Sanctions against interference & retaliation
- Confidentiality of records
- Provision of adequate legal counsel
- Autonomy in program voice

State Ombudsman Responsibilities:

- Programmatic oversight
- Fiscal management
- Designation & de-designation
- Disclosure of program records (safeguard confidentiality)
- Ensure Access
- Identification & mitigation of COI

LTCOP Responsibilities

Program requirements in the federal Older Americans Act include:

- Identify, investigate and resolve complaints made by or on behalf of residents
- Provide information to residents about long-term care services
- Provide technical support for the development of resident and family councils
- Collect, analyze, and report data on program activities

- Advocate for changes to improve residents' quality of life and care
- Represent resident interests before governmental agencies
- Seek legal, administrative and other remedies to protect residents
- Ensure residents have regular and timely access to the LTCOP

OMBUDSMAN ROLES

Listener, Counselor. Consultant Investigator & Problem Solver Educator Mediator **Coalition Builder** Data Analyst Spokesperson Policy Analyst Catalyst



An **uneven** playing field:

- Institutional Forces & Inertia
- Power differential
- Labyrinth of rules, policies, settings
- Vulnerable population





But wait –

I mean, aren't there laws, policies, and regulations to protect LTC residents?





So.... why the need for an ombudsman?



Our nation has been conducting investigations, passing new laws and issuing new regulations relative to nursing homes at a rapid rate during the past few years.

All of this activity will be of little avail unless our communities are organized in such a manner that new laws and new regulations are utilized to deal with the individual complaints of older persons who are living in nursing homes.

"The individual in the nursing home is powerless. If the laws and regulations are not being applied to her or to him, they might just as well not have been passed or issued."

Arthur Flemming



- INDIVIDUAL LTCOP investigates individual complaints and addresses concerns that impact several or all residents in a facility.
- GENERAL LTCOP also addresses general concerns they personally observe during a visit (e.g. odors, concerns about the environment, staff not knocking on resident doors before entering).

KEY PRINCIPLES:

- RESIDENT-DIRECTED
- CONSENT-DRIVEN
- **RESOLUTION-ORIENTED**
- CONFIDENTIAL



| Some of the Top Nursing Home Complaints | |
|---|--|
| 1 | Discharge/eviction-planning, notice, procedure, implementation, including abandonment |
| 2 | Failure to respond to requests for assistance |
| 3 | Dignity, respect - staff attitudes |
| 4 | Medications - administration, organization |
| 5 | Accident or injury of unknown origin, falls, improper handling |
| 6 | Resident conflict, including roommates |
| 7 | Care plan/resident assessment - inadequate, failure to follow plan or physician orders |
| 8 | Food service - quantity, quality, variation, choice, condiments, utensils, menu |
| 9 | Exercise preference/choice and/or civil/religious rights, individual's right to smoke |
| 10 | Personal hygiene (includes nail care and oral hygiene) and adequacy of dressing & grooming |

Going deeper and wider-SYSTEMS ADVOCACY

Complaint:

- Discharge/ Eviction
- Failure to respond
- Dignity, respect
- Abuse or neglect

Going deeper?

- Provider's knowledge/ understanding of discharge regs
- Staffing levels
- Staff training
- Corporate policies/ culture
- Admission policies

SYSTEMS ADVOCACY – Strategies

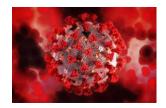
- Initiating dialogue with policymakers, agency heads, legislators, and their staff regarding identified problems for residents that require a system level resolution
- Responding and actively engaging in legislative and regulatory proposals
- **Submitting** written comments on state/federal regulations
- Testifying at legislative committee meetings or public hearings

Specific Examples – of ways Ombudsmen support residents through system advocacy include:

- Developing task forces, proposing legislation, speaking with the media to educate the public.
- Training both hospital social workers and long-term care facility staff on relevant requirements.
- Training residents and their families on their rights regarding discharge and transitioning out of a long-term care facility.



COVID – A Case in point



Individual Complaints -----> Systems Advocacy

- Transparency
- Visitation, Isolation, Access
- Transfer & Discharge Protections
- Infection Control
- Staffing Challenges



SPRINGBOARD for RETHINKING LTC 132

Opening the Doors further – Expanding Ombudsman Roles

RAPIDLY EVOLVING Health & LTC Landscape --**VORTEX** of RAPID CHANGE

REBALANCING:

- Olmstead
- Nursing Home Diversion
- NH Transitions e.g., MFP Money Follows the Pers
- Expanding HCBS, including
 - Federal Policy Realignment
 - Medicaid Managed Care Expansion





The Road (Role) Ahead?

EVOLVING ROLE for Ombudsman:

- Support for Nursing Home Transitions
- HCBS Community-based Care Advocate
- Managed Care Beneficiary Support/ Advocac

UNCHANGING MISSION

- Holding systems accountable
- Ensuring systems support residents' rights, safety, and quality care for vulnerable



Ombudsman Evolution in Virginia

- 1980's General Assembly expands LTCOP scope in Va. HCBS
- 2013 CMS Support for Demonstration Ombudsman Programs under Medicaid Medicare Financial Alignment
- 2014 Launch of Virginia's "CCC" (Commonwealth Coordinated Care) Demonstration: Care Coordination for Dually Eligible Beneficiaries
- 2017 Launch of statewide Medicaid Managed Care: "CCC Plus"
- 2021 Cardinal Care Expanded population



Beneficiary Support System-MMC



- A natural role
- Person-centered care ---> Person centered advocacy
- Consistent role, adjacent/ overlapping landscape

Key elements:

- Provide critical information to help beneficiaries make informed choices and access benefits
- Assist beneficiaries to understand & exercise their rights
- Assist with resolving problems with care and services
- Assist beneficiaries to access grievance and appeals processes

Ch – ch – ch **– changes**....

- Using Lessons learned COVID 19
- New partnerships & possibilities



- Leveraging new technologies ACCESS & ADVOCACY
- Volunteer challenges for LTCOP
- Rethinking LTC Deep Systems Change

All eyes on new frontiers



Contact Information

Joani Latimer State Long-Term Care Ombudsman Va. Dept. for Aging and Rehabilitative Services 8004 Franklin Farms Drive Richmond, VA 23229 Statewide Toll-free: 1-800-552-3402 (804) 565-1600 www.ElderRightsVa.org

30 Minute Break: 11:30-12:00 Lunch & Opening Plenary: 12:00-1:15 Dessert in Exhibit Hall: 1:15-2:00



2021 Hybrid Home & Community-Based Services Conference



Leadership, innovation, collaboration for state Aging and Disability agencies

Thank you all for attending this intensive!