

Board of Directors Meeting
Board on Aging and Long Term Care
Virtual Meeting via Zoom
August 4, 2021

Chair Tanya Meyer called the meeting to order at 9:00 am. It was noted that this meeting was properly noticed under the Open Meetings Notice law.

Members Present: James Surprise Dr. Dale Taylor Barbara Bechtel
Tanya Meyer Michael Brooks Abigail Lowery
Dr. Valerie Palarski

Staff Present: Heather Bruemmer Kellie Miller Vicki Buchholz
Jessica Trudell Vicki Tiedeman Rachel Selking
Jill Helgeson Joan Schmitz Mary LeMay
Kathi Miller Kayla Smith Victoria Meyer
Jill Melville Sarah Oneil Melani Quarles
Mary Jane Ripp Christy Rohrmayer Stacey Holom
Kim Marheine

Guests Present: Travis Martin, Budget and Policy Analyst, Department of Administration
Michelle Grochocinski, Department of Health Services
Cory Stinebrink, Department of Administration

Agenda: Approval of agenda as submitted M/S/C (Lowery/Taylor)

Minutes: Minutes of the May 12, 2021, board meeting were approved as presented M/S/C (Lowery/Bechtel)

Presenter:

Jill Melville, Family Care Lead and Kathi Miller, IRIS (Include, Respect, I Self Direct) Lead:
Family Care and IRIS updates

Ms. Melville, Family Care Lead, reported on the following:

- Explained her role as a Lead consultant to ombudsmen on Family Care cases/appeals
- Outlined number of Managed Care Organizations (MCOs), and number of people served in Wisconsin (approximately 25,000)
- Discussed merger of two MCOs and some of the related challenges
- Reported on the staffing crisis, and the impact on MCO members, in addition to the shortage of staff in nursing home and assisted living facilities
- Discussed the Department of Health Services (DHS) realignment of an MCO's capitation rate (the rate DHS pays per member/per month) and the impact on some members that had to move from their assisted living facilities due to a rate reduction.
- Many members report they are happy with their MCO teams

Ms. Miller, IRIS Lead, reported on the following:

- Explained her role as the IRIS Lead and the casework of the participants by providing support to IRIS Ombudsman and Regional Ombudsmen
- Works with IRIS Ombudsman, Kayla Smith, who brings a depth of consultant experience to the IRIS branch of BOALTC
- 23,000 IRIS participants and 8,500 participants are over the age of 60 which means 37% of all IRIS participants can be served by BOALTC
- Casework is steady with no trends or topics
- IRIS Advisory Committee – Proud to represent the BOALTC and bring the voice of our client’s rights to the table
- The new waiver renewal brings revamped format of consumer-facing manuals
- Outreach continues to the Aging and Disability Resource Centers (ADRC) and service providers, such as IRIS Consultant Agencies (ICA) and Fiscal Employer Agencies (FEA)

Cynthia Ofstead, Director, Office on Aging, Bureau of Aging and Disability Resources, Division of Public Health (DPH), Wisconsin Department of Health Services: Program Updates

- Covid-19 experience and recovery regarding the Aging Program
 - Increased number of participants in programs
 - Need to modernize programs
 - Covid-19 experience and recovery
 - Dementia plan update
 - DHS Budget update and Federal grants
 - Forward thinking regarding increased elder population
 - Capacity planning
 - New approaches for equity-based services
- Dementia plan update
 - Reframe policy to include equity with every objective
- DHS Budget update and Federal grants
 - Expansion of the Dementia Care Specialist program will now become a state-wide program
 - Alzheimer’s Giver Support Program received additional funding

Program updates:

Volunteer Services Update, Ms. Miller, Volunteer Services Supervisor

Ms. Miller reported on the following:

The Volunteer Ombudsman Program has implemented the in-person facility visitation re-entry plan. In-person visits began the week of July 12, 2021, after virtual training sessions conducted by Public Health Experts. Many thanks to Ms. Beth Ellinger, Epidemiologist-Infection Preventionist Healthcare-Associated Infections Prevention Program, Ms. Ashlie Dowdell, Director Healthcare – Associated Infections Prevention Program, and Mr. Thomas Haupt,

Research Scientist- Epidemiologist; all with the Wisconsin Department of Health Services, Division of Public Health.

The re-entry visits are well received. The Volunteer Ombudsmen are excited to be back with the residents and the residents are happy as well and have asked for individual visit time after being reunited with the volunteer. Some re-entry scheduled visits have been postponed and re-scheduled due to COVID positivity rates and outbreaks. The VOP will continue to participate in virtual resident council meetings and visits as needed.

The routine calls that are conducted by the volunteer coordinators to the nursing homes with a volunteer have been critical in maintaining the professional relationships

The first virtual Volunteer Ombudsman Program recognition event was conducted via Zoom on May 20, 2021. Fifty-three people were in attendance for the interactive session. Many thanks to the VOP Coordinators, Kim Verstegen, Sheryl Meyer, Mary LeMay, and Amy Zabransky, for planning the entertaining event and recognizing the volunteer's years of service.

The Alzheimer's conference committee is planning on hosting the 2022 conference in-person. The Board on Aging plans to participate and recognize the Louise Abrahams Yaffe Volunteer Ombudsman Program Award recipients from 2020, 2021, and 2022.

Outreach/Recruitment:

Exhibit booth registration requests have been received from many community organizations. Safety protocol will be followed to participate.

Staff have submitted articles and/or Public Service Announcements in local media and updated volunteer management websites that assist with volunteer recruitment.

Volunteer Ombudsman Program Staff Projects:

Volunteer Coordinators Amy Zabransky and Mary LeMay will graduate from the Enterprise Management Development Academy (EMDA) at the end of August during a virtual ceremony. Kim Verstegen is included in this graduation as she completed the EMDA in 2020.

Sheryl Meyer finalized the Volunteer Ombudsman Program mentor pilot-project with two Volunteer Ombudsmen. This will increase volunteer recognition and newly trained volunteer support. The pilot-project will be implemented with future initial trainings.

Jessica Trudell, Counsel to the Board, Program and Legislative Updates

Program support

I continue to support and advise our three programs as well as assist the Executive Director as needed, including policy work, and onboarding new staff.

Legislation- Wisconsin

State legislature is not scheduled to meet in regular session until late September.

Elder abuse and exploitation bills

SB17/AB44 Bill enrolled. Increases penalties for crimes against elder persons (over age 60); allows elder person seeking restraining order to appear by video instead of in-person; would allow freezing assets of a defendant charged with financial exploitation of an elder person; increased penalty for sexual assault of an elder person; creates crime of physical abuse of an elder person.

No action on other bills since last Board meeting.

Guardian training

SB92, AB100 would require guardian training for family and volunteer guardians. Public hearing was held in April, in executive session passage was recommended. No further action since last Board meeting. Governor did include funding in his budget proposal, but additional funding was not provided in the final state budget.

Voting

SB204/AB201. Currently, indefinitely defined voters can request to be sent ballots automatically each election. The bill would eliminate the option for indefinitely confined voters to receive an absentee ballot automatically for any election. The bill would authorize indefinitely confined voters to request and receive absentee ballot applications, rather than absentee ballots, automatically for each election. Public hearings held in Senate and Assembly Committees. SB enrolled.

SB205/AB179. This bill requires the administrator to provide notice of the dates and times when the special voting deputies (SVDs) will be visiting the home or facility to the relatives for whom the home or facility has contact information for each resident who intends to vote by absentee ballot with the SVDs. The bill also provides that an employee of a residential care facility who influences a resident to apply for or not apply for an absentee ballot or cast or refrain from casting a ballot or influences a resident's decision for whom to cast a ballot could be guilty of a Class I felony. Public hearings held in Senate and Assembly Committees. SB enrolled.

SB206/AB180. Current law allows indefinitely confined voters to automatically vote absentee every election for as long as needed. This bill would require the voter to provide a statement under oath they are indefinitely confined; if under age 65, their statement must be signed by their health care provider. Specifies outbreak or epidemic does not qualify a voter as indefinitely confined; removes indefinitely confined status every 2 years unless renewed; provides the penalty for a false statement to be a Class I felony. Passed by Committee on Elections, Election Process Reform and Ethics. Referred to Committee on Senate Organization.

Legislation-Federal

Better Care Better Jobs Act

Would increase the number of individuals receiving home and community-based services (HCBS), increase the number of informal caregivers and direct care jobs. Increases financial eligibility to 300% of FPL, requires Personal Care Services to be covered, expands respite care

and access to behavioral health services. Per Justice in Aging, the bill, which would invest \$400 billion into Medicaid HCBS infrastructure, would also create over 500,000 new direct care jobs nationwide, and provide respite care and other paid support to enable millions of family caregivers to join or return to the paid workforce.

Estimated in WI to increase total HCBS enrollment by 23,452 persons, provide 7,817 new caregiver jobs and 3,783 new direct care jobs based on an analysis by Richard Frank (Professor of Health Economics, Harvard Medical School) and Jonathan Gruber (Professor of Economics, MIT).

Infrastructure package

Negotiations continue to work towards reaching a consensus on an infrastructure bill. Proposals include increasing funding for Medicaid HCBS and expansion of Medicare to cover dental, vision and hearing benefits and possibly SSI improvements.

Essential Caregivers Act

Bipartisan legislation introduced in the House. The Act would allow for two individuals to be designated as an Essential Caregiver by a facility resident during a public health emergency, who would have the right to access the resident to provide direct care for 12 hours each day. Caregivers would be required to follow the same safety protocol as staff. This would apply to all skilled nursing and nursing facilities that receive Medicare and Medicaid funding.

Medigap Helpline Update, Ms. Buchholz, Medigap Helpline Services Supervisor

Ms. Buchholz reported on the following:

Call volume: Through May 2021, Medigap Counselors have completed 3647 calls just 230 less than 2020 for same timeframe. Calls continue to take counselors an average of 38 minutes per call, which reflects the complexity, and the issues counselors are seeing. Total Covid-19 related calls are up to 700 from March of 2020.

Outreach: Through June, staff have submitted articles and participated in virtual outreach events reaching out on topics to Wisconsin's Beneficiaries. One article included Medicare Advantage Trial Periods. Four events were geared toward Benefit Specialist and other advocate training: One at the Dane County ADRC; the Statewide Wisconsin Association for Benefit Specialist conference, Senior Law's quarterly EBS training, and GWAAR's Quarterly new EBS training. Total of twelve events through June 2021.

Complaint Tracking Modules: A tool which helps beneficiaries correct an error in their enrollments into a Medicare Advantage plan or a Medicare Part D prescription plan is using the CMS's Complaint Tracking Module (CTM). Currently we have had 20 CTM's thus far through beginning of July.

The trend of persons being enrolled into a Medicare Advantage plan without understanding what they are being enrolled into, not understanding what type of coverage it is, or simply

because they had called to inquire about the “added benefits” being advertised is continuing. Most had responded to a television advertisement or had received a “cold call” from an agent/company. Many of the “cold calls” occurred as the beneficiary’s current coverage was part of the same company as the agent who contacted them, thus allowed. However, because of the complexity of the coverage options to assure access to providers, switching coverage should not be approached lightly. Many beneficiaries thought they were adding benefits, not switching insurance.

We continue to send complaints to the Office of the Commissioner of Insurance (OCI) to inform the regulators of the agents and the issues many callers have experienced. Staff can assist the caller with this complaint stressing the gaps in information which would help the consumer be informed. 19 referrals have been sent to OCI through May.

Counseling Trends: Counselors are noticing that Medicare Advantage plans are marketing their products using dental services as a selling point. Caution is given to beneficiaries to understand the potential added premium costs for optional benefits, to understand the total out of pocket benefit, and network of dentists. They are reminded the purpose of the healthcare coverage is for healthcare needs and to better understand those costs to fit the higher cost needs they may have.

Medicare Advantage plans marketing practices are being reviewed at CMS due to the nationwide complaints being submitted.

Ombudsman Services Update, Ms. Marheine, Ombudsman Services Supervisor and Ms. Selking, Assistant Ombudsman Services Supervisor

Ombudsman Program Updates

In-person fieldwork has expanded significantly since ombudsmen resumed face-to-face contact with clients in April, guided by the agency’s comprehensive Re-entry Plan. Requests for training, care conference attendance or other opportunities for group work are also being expanded, provided the interactions can be managed with the required safety protocols.

Intake numbers have continued to be extremely high, both in terms of persons calling the toll free number as well as submitting complaints via the website’s Inbox. The nature of complaints expressed are also more complex than typical. Overall, the most common complaints being managed currently are related to facilities not having adequate staff, and visitation. Staffing complaints are not particular to facility-based care only but are also increasing in Family Care and IRIS casework. Twenty-four Immediate Jeopardy cites have been noted since the May board meeting. Facility monitoring, in addition to complaint-based casework, remains a priority as ombudsmen resume in-person field work.

Managed care complaints continue to increase around the topic of inadequate MCO provider networks and residents who are unable to access local or acceptable alternate residential living services.

It was reported that there continues to be a larger than typical number of pending closures noted, particularly among assisted living providers; the most common reason cited is lack of staff. Conversations are continuing with DHS, DQA and MCO staff to discuss how these closures can be managed in ways that are both safe and respectful of residents' rights.

Administrative Report and Program Updates: Ms. Bruemmer, Executive Director/State Ombudsman

Ms. Bruemmer reported on the following:

Financial updates and Personnel:

- The fiscal 2021 year was closed for the agency. The agency was notified by the Department of Administration (DOA) Budget Director we were no longer required to meet the lapse of \$115,000 for the FY2021 budget. The agency will not be required to lapse in the 2021-2023 biennial budget.
- The agency received \$181,304 for the Ombudsman Program from the American Rescue Plan Act (ARPA). The dollars will be available through March 30, 2024.
- The biennial state budget bill has been signed by Governor Evers as 2021 Wisconsin Act 58. The agency budget was approved without the addition of two Ombudsman positions the Governor had put in his initial budget.

Program updates:

- The ED has been appointed as the Patient Care Ombudsman by the Honorable Catherine J. Furay, from the United States Bankruptcy Court for the Western District of Wisconsin, to monitor six assisted living facilities. A sixty-day report was submitted to the courts on July 3, 2021. Patient Care Ombudsman work will be monitoring the homes for the next three years according to the court documents.
- The ED is serving on the "Dementia Summit" steering committee and actively engaged on the committee be co-leading the facility-based subgroup. The meetings are all virtual and the activity and involvement has increased these past couple of months.
- The ED is working with management on the re-entry plan for our long-term care homes and community-based services, Volunteer Ombudsman Program, and our Central Office.
- The ED attended the State Long Term Care Ombudsman Conference virtually on June 9-11, 2021. The ED presented about the tremendous work the Ombudsman Program did during the pandemic for Wisconsin consumers.
- Training standards, which fulfill the Older Americans Act requirement for the Office of Long-Term Care Ombudsman Programs, are due to the Administration of Community Living by September 30, 2021.

- All Staff-Inservice was June 7th and 8th. Dr. Debra Lafler spoke on the topics “Healing Ourselves from 2020” and “The Mindfulness Key”. We also had another speaker from Kepro on the topic, “Fostering Inclusion in the Workplace”.

Comments from the Public

No comments from the public.

New business: No new business.

Next Board meeting date: October 27, 2021

Adjournment: Meeting adjourned at 12:30 pm M/S/C (Taylor/Bechtel)

Respectfully submitted,
Vicki Tiedeman, Recorder