

**Board of Directors Meeting**  
Board on Aging and Long Term Care  
Holiday Inn at the American Center  
5109 W Terrace Dr  
Madison, WI 53718  
February 19, 2020

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                                  Dr. Valerie Palarski

**Newly Appointed Member:** Abigail Lowery (pending confirmation)

**Members Excused:** Michael Brooks

**Staff Present:** Heather Bruemmer                  Kellie Miller                  Vicki Buchholz  
Jessica Trudell                                  Vicki Tiedeman                  Amy Zabransky  
Rachel Selking                                  Kathi Miller                  Julie Button  
Kim Marheine                                  Cindy Freitag                  Steve Shapiro  
Melanie Quarles

**Guests Present:** **Anthony Pilsner**, Department of Administration  
**Jessica Kautz**, Department of Administration  
**Cori Stinebrink**, Department of Administration  
**Ann Angell**, Department of Health Services

**Agenda:** Approval of agenda as submitted M/S/C (Palarski/Bechtel)

**Minutes:** Minutes of the October 30, 2019 board meeting were approved as presented. M/S/C (Taylor/Palarski)

**Presentation:** Kari Orn, Department of Justice: Silver Alert Coordinator with the Silver Alert Program

Ms. Orn provided updates on the first 5 years of the program and lessons learned:

- 388 Silver Alerts were requested by counties 8/01/14 to 10/31/2019
- If person is not found in 24 hours, risk is greatly increased
- Be prepared; have current photo, know medical information, have a clean scent article, know vehicle information
- Understand behavior patterns
- Recommended follow-up; Referral to Adult Protective Services or DOT

## **Volunteer Services Update, Ms. Miller, Volunteer Services Supervisor**

Amy Zabransky, Volunteer Coordinator gave updates on her recruiting efforts.

Ms. Miller gave program updates:

The February in-services were conducted in all regions by the Volunteer Coordinators for the Volunteer Ombudsmen. The in-services were well attended, and much appreciated by the Volunteer Ombudsmen. They ask for and appreciate time with our program staff to increase learning, problem solving and support for their weekly resident centered visits.

Seven formal nominations were submitted for the 2020 Louise Abrahams Yaffe Volunteer Ombudsman Program Award. The Executive Board members will review the nominations and select the award recipient. The recipient will receive the award during the 34<sup>th</sup> Annual Alzheimer's State Conference Awards banquet on Sunday May 3, 2020.

Recruitment efforts continue to be in full force. Staff are working diligently on outreach and education regarding the need and importance of the Volunteer Ombudsman and Ombudsman Programs in all regions. The need for more Volunteer Ombudsmen continues in all regions to strengthen the advocacy services provided by the Regional Ombudsmen for the residents living in nursing homes.

Several Obstacles the Volunteer Coordinators face during the recruitment process of potential volunteers are:

- Not passing the Background Information Disclosure
- Potential and actual conflict of interest
- Lack of follow through by person of interest
- Persons unable to attend scheduled mandatory trainings
- Personal issues arising in potential volunteer's lives

Since the last reporting period staff have conducted mandatory training sessions in the La Crosse region and the Green Bay region, adding seven new Volunteer Ombudsmen. Initial training sessions are tentatively scheduled for the Janesville region, Milwaukee region and the Wisconsin Rapids region in the next few months.

The Volunteer Ombudsman Program annual evaluation form has been recently revised and distributed to the Volunteer Ombudsmen for their feedback on their year of volunteering. Data will be compiled and reviewed by the Volunteer Ombudsman Program staff.

The VOP continues to support the residents during the facility closures and relocations. The Volunteer Coordinators and Volunteer Ombudsmen work closely with the Regional Ombudsmen and the Relocation Ombudsman Specialist. Residents who have moved to a new home are a priority meet and greet for the Volunteer Ombudsmen.

Volunteer Ombudsmen assigned to a closing nursing home continue with weekly visits until each resident has moved. The volunteers then work with their Coordinators to select a new nursing home assignment.

Plans for the 2020 volunteer recognitions / in-services will focus on Dementia Live and Virtual Dementia Training for the Volunteer Ombudsmen.

Staff in-service is being planned for March 17-18, 2020 in Madison.

Staff will have the opportunity to attend the Annual State Alzheimer's conference in May 2020, in Wisconsin Dells.

### **Legislative Updates:** Jessica Trudell, Counsel to the Board

Ms. Trudell commented on:

- **Mandatory training requirements for guardians.** Proposed bills would require mandatory initial training requirements for guardians on topics such as a guardian's duties and responsibilities and alternatives to guardianship.
- **Medication for the purpose of ending one's life.** Proposed bills would permit an individual over age 18 who is of sound mind and has a terminal disease to request voluntary medication for the purpose of ending their life. The bill specifies that if a requester is a resident of a nursing home or community-based residential facility, at least one witness to the written request for medication must be an advocate from the Board on Aging and Long Term Care. Ombudsmen would also be required to act as advocates for the resident making the request. BOALTC only has authority to advocate for residents age 60 and over, our advocacy is on a voluntary basis and we do not act as witnesses to signing of legal documents. No action occurring on the bill currently.
- **Advance directives.** This law expands additional health care professionals allowed to determine incapacity for activation of a Power of Attorney for Health Care. This would also expand which medical professionals can determine someone is in a persistent vegetative state or has a terminal illness under a Living Will to include an advanced practice registered nurse (APRN) or a physician's assistant (PA) in addition to a physician. This bill would also allow PAs and APRNs to issue Do Not Resuscitate (DNR) orders when a qualified patient makes the request. Enacted into law.
- **Certified Nurse Aide training.** These bills would have reduced the 120-training hour requirement to the federal training minimum of 75 hours for certified nursing aides. Governor Evers vetoed. BOALTC did provide testimony in opposition to the bills.
- **Governor's Task Force on Caregiving.** There is a Direct Care Paid Workforce Workgroup and Family Caregiving Workgroup. Current discussions of the Family Caregiving Workgroup include creation of a clearinghouse and the Credit for Caregiving Act. The Direct Care workgroup is discussing better health care benefits and training for staff. They are also discussing increasing efforts to reach out to other untapped worker groups like older adults. The task force is working on next steps and recommendations.
- **Reporting on aging and elderly population in Wisconsin's prisons.** These bills would require the Department of Corrections to prepare a report on the aging and elderly population in Wisconsin's prisons and to evaluate possible options for alternatives to prison. The department would also be required to report on the feasibility of operating

a state run facility for elderly inmates, the feasibility for adopting electronic monitoring as an alternative to incarceration for elderly inmates, and the possibility of eligibility for medical assistance for individuals who would qualify for alternatives to incarceration.

- **Elder abuse and exploitation bills.**
  - Financial exploitation of an adult at risk or an individual age 60 years or older. These bills would allow financial service providers to refuse or delay financial transactions when financial exploitation of a vulnerable adult is suspected. These bills would also allow a financial service provider to refuse to accept a power of attorney if they reasonably suspect financial exploitation. These bills also provide immunity for the financial service providers if they have acted reasonably.
  - Criminal law changes. Increases sexual assault of a victim age 60 years or older from a Class C felony to a Class B felony. These bills also create a crime of physical abuse of an elder person. These bills create a procedure for a court to freeze or seize assets from a defendant who has been charged with financial exploitation of a victim over age 60. These bills also increase the term of imprisonment when the victim is an elder. These bills also allow an elder person seeking a restraining order to be able to appear by live video instead of in person.
  - Securities and abuse or exploitation of an adult at risk or individual over age 60. These bills would allow securities agents, investment advisors, brokers, etc. to delay a transaction if they reasonably suspect financial exploitation.

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

The Medigap Helpline staff commented on how the fall open enrollment period was a success and trends they are seeing in their work.

Ms. Buchholz reported on the following:

The Medigap Helpline Programs had a strong ending to 2019 with calls totaling 12097, which was 300 more than in 2018. The intake staff increased the number of calls that were answered live to 46.8% compared to 40.9% in 2018. Average call length was 33 minutes. Currently callers are looking at using the Medicare Advantage Open Enrollment Period (MAOEP) to make a change from their current advantage plan to another advantage plan or back to original Medicare.

- **Outreach:** The Medigap Team finished 2019 with 58 outreach events
- **SHIP Customer Service Satisfaction Survey:** As part of the Administration for Community Living (ACL)'s efforts, a survey was sent to beneficiaries who had received services from the SHIP counselors to measure the satisfaction level of the counseling services. The survey also asked how well the customers valued the services and information they received and to identify areas for improvement.
- **Complaint tracking Module:** As part of the SHIP (State Health Insurance Program), the Medigap Helpline has access to the online Complaint Tracking Module (CTM) where we file complaints directly to both the insurance company and to CMS (Centers for Medicare and Medicaid Services) on behalf of beneficiaries who had enrollment or coverage issues. Of the 21 complaints filed in 2019, 19 of the cases were resolved in the beneficiaries' favor.

- **Program Trends:** The Office of the Commissioner of Insurance (OCI) no longer publishes the Medicare Supplement Insurance Approved Policies List as previously printed with premium rates included. Currently this is in discussion as this resource was used heavily by the SHIP program throughout the state in working with the beneficiaries.

The updated Plan Finder tool continues to have errors in prescription costs and pharmacy designations. Providing accurate and trustworthy information to Medicare beneficiaries is a challenge. The Medigap Helpline staff are not accessing the Plan Finder tool through the “MyMedicare” accounts due to requiring the beneficiary’s personal ID and password information.

There was an increased number of beneficiaries calling the Medigap Helpline about “cold calls” from agents who apparently received the beneficiary’s contact information when using their “MyMedicare” account to run a Plan Finder to compare options, for Medicare Advantage and for Medicare supplement insurance.

As of January 1, 2020; all Medicare beneficiaries need to use their new Medicare Beneficiary Identifier (MBI) for their Medicare claims or the claims will be rejected.

Confusion continues with the MACRA (Medicare Access and CHIP Reauthorization Act of 2015) changes for Medicare Part B deductible riders in Medicare supplement policies.

There are increased concerns about Agent information and behaviors related to suitability of coverage, misinformation, errors in understanding enrollment options, misleading television/print ads.

#### **Ombudsman Services Update, Ms. Marheine, Ombudsman Services Supervisor**

Regional Ombudsmen commented on issues and trends they have observed in their work.

Ms. Marheine reported on the following:

Ombudsmen in every region continue to be involved with heightened monitoring of particular facilities, as well as monitoring the adjustment of residents relocated from several closures. Residents of closing homes continue to experience, in some parts of the state, difficulties accessing needed and acceptable settings, particularly if they have unique needs.

Areas of issue advocacy presently being monitored include abuse, capacity to consent to sexual relationships, managed care changes, legal issues such as guardian training and boundaries of substitute decision-makers.

In the last quarter, several ombudsmen presented at state and regional conferences, provided Resident Rights in-services for facilities and the Volunteer Ombudsman Program.

Casework relative to managed care members who are unable to access their preferred living settings has been higher than typical.

Consultations and education to providers and others as a result of allegations of abuse remains a most-requested topic for provider staff education, both based on setting-specific needs as well as for Association conferences.

Complaints of not enough staff, staff not trained in both nursing homes and assisted living communities also remain higher than typical.

Twenty-three Immediate Jeopardy cites (as compared to 21 in the previous reporting period) have been noted since the October board meeting.

**Comments from the Public:** No comments from the public were received.

**Administrative Report:** Ms. Bruemmer, Executive Director/State Ombudsman

Ms. Bruemmer provided the administrative report and agency updates.

The State Health Insurance Program (SHIP) is looking at the prospect of changing the grant funding from annual to every five years.

We are working on waivers for the Sole Source which is the software program we use to collect data.

The Conflict of Interest forms have had significant changes made to them and they have been sent out to all agency staff.

The ED spoke at the Consumer Voice Conference and received a lot of questions about our program from other state aging departments.

The Include, Respect, I Self-Direct (IRIS) Ombudsman program continues to be a success.

The ED continues to mentor the Illinois State Ombudsman.

The agencywide rollout of Windows 10 was a success. We find it to be a very efficient operating system. We look forward to learning the new applications to make our jobs more efficient.

The new website is moving forward with an expected release date in the fall of 2020.

The ED was nominated to be on the Committee of Excellence for Assisted Living as the State Ombudsman and is looking forward to providing feedback.

The ED continues as the Long Term Care Council Chair.

The ED and Jessica Trudell, Counsel to the Board are working on agency policies and procedures.

The Long Term Care (LTC) 2020 Report provides statistics regarding the crisis of Certified Nursing Assistants (CNA) staff shortages in nursing homes and assisted living facilities.

**New business:** No new business.

**Next Board meeting date:** May 13, 2020

Other future Board meeting dates are:

August 5, 2020

October 28, 2020

**Adjournment:** Meeting adjourned at 2:30 pm; M/S/C (Surprise/Taylor)

Respectfully submitted,  
Vicki Tiedeman, Recorder