



Washington State Council on Aging

Meeting Title: 2021 November Washington State Council on Aging Meeting

Date: 11/16/21

Location: Zoom Meeting

	Members Present	Appointment			Appointment
✓	Jean Kindem	At-Large East	✓	Bruce Dougherty	Pierce County Connections Advisory Council
✓	Beth Anderson	AAAD Southwest WA Advisory Council	✓	Karen Kiessling	At-Large East
	Vacant	WA House of Representatives	✓	Art Swannack	Association of Counties
✓	Sharon Curley	At-Large West	✓	Joe Sharkey	O3A Advisory Council
✓	Georgiann Dustin	NWRC Advisory Council	✓	Dennis Wheeler	Snohomish County AAA
	Vacant	Central AAA	✓	Karol Stevens	Kitsap AAA Advisory Council
✓	Michele Horaney	Lewis Mason Thurston AAA Advisory Council		Arlen Washines	Yakama Golden Eagle Advisory Council
✓	Sandra Miles	At-Large West		Guests Present	
	Vacant	ADS King County Advisory Council	✓	Susan Engels	ALTSA
✓	Bob Scarfo	Aging and Long-Term Care Eastern Washington Advisory Council	✓	Cathy Knight	W4A
	Sen Karen Keiser	WA State Senate	✓	Walt Bowen	Senior Lobby
✓	Michele Blythe	Association of Cities	✓	Sariga Santhosh	ADS King County
✓	Kathy Medford	Southeast WA Aging and Long-Term Care	✓	Melanie McGuire	ALTSA
	Rep. Kelly Chambers	WA House of Representatives	✓	Cameron Akita	ALTSA
			✓	Ben Veghte	WA Cares Fund



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Topic	Key Points and/or Decisions Made
<ul style="list-style-type: none"> • Member Welcome • Review/approve agenda • Review/approve October meeting minutes • Review of current action items • Member organization updates 	<p>Meeting called to order at 9:00am.</p> <p>Chairperson Georgiann Dustin welcomed members.</p> <p>October meeting minutes reviewed. Motion made to approve minutes passed.</p> <p>November’s agenda reviewed and approved.</p> <p>New Member Mentorship: Karen Kiessling supported the idea of mentoring new members, especially with the Zoom meeting format. She is currently mentoring Bob Scarfo.</p> <p>Sandra Miles shared that she is open to mentor new members.</p> <p>National Family Caregivers Month: Karen announced that November is Family Caregivers month, and that her letter to the editor was printed in the Pullman Daily News. Only two letters were printed that day, and the other detailed a writer’s experience with Life Flight.</p> <p>Georgiann thanked Karen for providing this update and asked if others had anything to share on Family Caregivers Month.</p> <p>Susan Engels offered that the State Unit on Aging had sent toolkits to each Area Agency on Aging (AAA) and for any SCOA members who wanted these resources to reach out to Cameron.</p>



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Member Organization Updates:

Karol Stevens noted since October's conferences, there was nothing to note from Kitsap.

Karen Kiessling, At-Large East, noted how confusing vaccination data has been, reporting a 38.5% vaccination rate in Whitman County not including students and military. She offered that this figure should be corrected to include everyone in the county.

Jean Kindem asked for clarification on there being a backlog of 1,600 people in Idaho.

Karen suggested that this number could be people who wanted to be vaccinated.

Art Swannack shared that the backlog referred to federal data not readily getting into state systems. The data doesn't correctly report student vaccinations.

Council discussed vaccination efforts further, with Karen noting unvaccinated students not being able to attend second semester, and Art explaining the difficulty of linking county to state website data. Art posed the question of what long term goals are with COVID being endemic.

Karen added the question of how we can best educate people, and Art suggested that immunity could also be discussed.

Kathy Medford shared that Kaiser Health News had an article that spoke to the real crisis of COVID-19 being endemic. The article discussed different strains of the virus putting health systems at risk. Kathy expressed wishing more people would focus on the facts and would wear a mask or do something nice.

Jean Kindem stated that her hip surgery was delayed because of COVID-19.



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	<p>Dennis Wheeler provided an update on Snohomish County’s senior centers, noting that some of the 14 locations are now open. Non-profits have also had difficulty with labor shortages. Senior centers provide many services, and during COVID a major shift was moving from congregate meal services to home-delivered meals (HDMs). Senior centers and HDMs provide essential nutrition for older adults, especially for seniors that experience isolation.</p>
AL TSA Updates	<p>Susan Engels introduced herself to the Council as Office Chief of the State Unit on Aging at AL TSA.</p> <p>Request Legislation: <i>Tribal governments</i> – a revision of RCW to provide sovereign tribal governments the opt-in ability to perform financial and functional eligibility for Medicaid funded long-term services. This has good support from stakeholders.</p> <p><i>“Personal Aide” definition</i> – provides a technical fix to the definition of “Personal Aide” in the RCW regarding the Consumer Directed Employer (CDE). Representative Cody is assisting with this legislation.</p> <p><i>Adult Protective Services Abuse Registry</i> – creates a process for individuals to petition their name on the registry and allow in certain cases for a person to be removed from the registry. Currently, if a person has a finding in the registry they cannot work in home & community-based services. This would give opportunity for a second chance and doesn’t expunge the record but does provide the ability to work in this industry at a time of workforce shortage.</p> <p>Also requested but not likely to move forward was to designate a fund for HCS.</p> <p>Decision Packages - reviewed in September’s meeting and have moved to the Governor’s office. AL TSA is waiting to hear back about this.</p>



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All unions have a memorandum of understanding with the state relating to reopening; a request for funding is moving forward to the governor's office to be included in his budget. This would increase some of the competition for funding.

Rate Enhancements - AL TSA is waiting to hear from the Office of Financial Management on whether these will be kept (they are set to expire December 31st). With the extension of the Public Health Emergency into January, the FMAP (Federal Medical Assistance Percentage) will likely be extended to the end of the 1st quarter 2022, the end of March. AL TSA is waiting to see if OFM will continue wage enhancements with this funding.

Questions:

Georgiann asked what the current average wage for a caretaker is.

Susan noted that for an IP this is above \$15 an hour. An average may be around \$16/hour. The enhancement is \$2.40 on top of base wages.

Sandra asked for clarifying whether IPs were the same as a CNA.

Susan clarified that IPs are contracted by the state to provide services in the home, which can include CNAs.

Sandra expressed how competitive CNAs wages are at around \$23/hour.

Susan shared that this is part of the direct care workforce shortage. In the IP world, many are family members working for their family. CNAs tend to be a broader spectrum of workers among various settings, although all settings are experiencing difficulty.



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Georgiann commented that even the \$18 (enhanced rate) is below the CNA wage (Sandra had mentioned), and that to attract qualified people we need to pay them.

Susan advised that IPs have training and certification exams that are covered, and a lot is continuing to be done to qualify potential workers.

HCBS/Infrastructure Bill – this is a big issue nationally, as Biden has proposed \$150B for HCBS, which is enough for a 6% FMAP. Current FMAP is enhanced through COVID funds. The new infrastructure bill gets rid of the “Bow Wave” concern and may help to fund an increase in the PNA.

Kathy Medford asked if this would increase Medicaid participation in the state.

Susan noted that some people reject Medicaid services, but some receive services from the MAC/TSOA program. This additional permanent FMAP can help people get and remain in Medicaid services.

Vision/dental have been dropped from potential Medicaid coverage, but \$35B has been kept for hearing related services.

\$150M funds available nationally through the ACL to coordinate aging networks and public health, to be split between independent living centers and could be about \$3M for Washington.

CMS has not yet approved extension of the 1115 Waiver. Presumptive eligibility will also be requested, and both have been delayed. CMS has indicated this will be approved but presumptive eligibility may be delayed until Spring (this would help people move more quickly out of acute hospital stays).



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	<p>Consumer Direct Washington (CDWA) - pilot began in October, and phase 1 preparations have started. Phase 1 will add a large group of 16,000 IPs in January of 2022, and the program is busy hiring with full operations to begin in spring.</p> <p>CDWA will help case management by reducing administrative workload of qualifying and managing staff. This will also move to a more stable payment system for providers.</p> <p>ALTSA's response to the vaccine mandate - 95% of ALTSA staff are vaccinated, with 2% receiving accommodations, 2% in the process of getting vaccinated, and 1% having separated from service. This has led to some deeper staffing crises, with APS already in crisis as well as HCS. APS is looking at contingency planning and working with W4A.</p> <p>Federal vaccination mandate – will be next up, and the only provider not already included in this are people served through the PACE program. The federal mandate will also affect employers with over 100 employees—OSHA will be managing this.</p> <p>Questions: Art asked if the Consumer Directed Employer, being the new employer for IPs, would count towards the 100-employee requirement under the federal mandate.</p> <p>Susan shared that currently they would be exempt.</p>
State Plan on Aging	<p>Susan Engels shared that ALTSA is planning to request an extension for the State Plan on Aging.</p> <p>State Plan on Aging background - the Older Americans Act (OAA) requires that every state has a State Plan on Aging, updated every four years, and approved by the Administration for</p>



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Community Living (ACL). This is done through research, stakeholdering, and it is written over the course of many months. The current State Plan on Aging expires in September 2022. The ACL provided new guidance for the first time in many years this August, which includes the new section of equity—a section ALISA is excited about. There is also a new section on COVID. Rosemary was a longtime author of this plan.

Updates - currently there are 10 states that are due for their 4-year plan.

Last year, all states due received a one-year extension.

For 2021, states must go through a waiver request process for an extension. This involves four elements:

- 1) Legislator approval (not required for Washington State Plan),
- 2) Collaboration with AAAs—this has been discussed with W4A and they plan to provide a letter of support, in addition to attending SCOA,
- 3) Public review of this request was made available, and
- 4) Pros and cons were weighed. Census data which would have been aligned with planning process, has been delayed.

With an extra year, the stakeholdering/research process and goal to address the equity topic area can be achieved. The intrastate funding formula (IFF) was planned to be developed in 2022, and this will align with a State Plan on Aging extension as well. The current plan can still be executed with an extension.

Questions:

Kathy Medford inquired about how states conduct focus groups or surveys.



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Susan stated that there is opportunity to be more inclusive, and that Kathy could be a good person for this group. There will be a planning process, and surveying will be through David Mancuso's Research and Data Analysis group at DSHS. Outreach would include communities of color and LGBTQ communities as well.

Dennis Wheeler asked if the subsequent State Plan would be due 2026 with an extension.

Susan acknowledged this same question was asked of the ACL with the plan covering 4 years.

Art shared that he had received the public notice and asked if another document had followed.

Susan noted this document as the request for public input with some members of the public contributing, but no one asking for public comment. The [current State Plan](#) was shared with the attendees as well as Section 316 of the OAA.

Sandra Miles asked if someone was helping with feedback and offered interest in focus groups on equity as she will be retired as of December 3rd.

Karen Kiessling moved for approval of State Plan on Aging extension request.

The motion was seconded and approved unanimously.

Susan thanked the Council for their support and returned the floor to Georgiann.

[Break from 10:00-10:15]



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<p>WA Cares Fund</p>	<p>Ben Veghte, Director of the WA Cares Fund introduced himself to the Council and shared a presentation on the WA Cares Fund.</p> <p>The WA Cares Fund is a critical program to the future of the state.</p> <p>We all have concerns about our own aging, or friends or family who are aging. Most people cannot afford pay out of pocket for the expenses that come with aging.</p> <p>LTC Costs: Can overwhelm family finances. Private insurance is also unaffordable, averaging \$2700 a year with premiums increasing over time. Later in life, these costs become difficult to afford.</p> <p>Private insurance is bought at age 60 on average, leaving a couple decades to pay in. This adverse selection creates failures in the market.</p> <p>WA Cares Fund is designed to support the needs of family caregivers and those needing services.</p> <p>In Washington State, 6.3% of the budget goes LTC spending. The status quo is broken and will worsen without this fund.</p> <p>What is the WA Cares Fund? Universal long-term care program in Washington State; a social insurance (like Medicare, Social Security, workers comp, or L&I).</p> <p>People pay small portion of wages, about \$300/year for a medium wage at 1/9th the cost of private insurance. People only pay when actively in the workforce.</p>
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This is an earned benefit where only those who contribute are eligible.

WA Cares Fund also serves to allow Medicaid to function as intended, better protecting Medicaid from the Age Wave.

The maximum benefit is \$36,500 and benefits become eligible in 2025.

Private insurance can also be used to supplement this benefit, like Medigap coverage, where the WA Cares Fund benefit acts as a deductible.

There is no employer contribution portion and is fully funded by employees.

Vesting:

Occurs after 10 years of contributions, or 3 of the last 6 years while working at least 500 hours/year.

The Legislature may recommend that near retirees may benefit as well.

This is a multiagency project including DSHS (lead agency), Health Care Authority (HCA), Employment Security Department (ESD), and the State Actuary.

This is a more affordable way to support family, a universal program that supports family caregivers.

Discussion:

Dennis Wheeler commented that he has LTC insurance and is also a double cancer survivor. With pre-existing conditions, many people are ineligible for private LTC insurance.



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Ben acknowledged that 30% of people get turned down for LTC insurance due to underwriting.

Dennis shared that \$36,500 is a godsend to those desperate for services and could be a great transition for those needing nursing care.

Ben explained that Medicaid recipients need 100 hours/month of services on average, and this benefit would begin the care trajectory. Combined with unpaid family caregiving, WA Cares adds supports and resources to be better equipped for LTC.

Karen Kiessling stated that on the Washington/Idaho border, a major employer has fought the WA Cares Fund very hard and asked what is happening with opponents.

Ben acknowledged that there are well-founded issues with border states, and that the LTSS Trust Commission will look at border state employees. These details are being ironed out currently and asked for patience as program improvements work their way through the Legislature.

Michele Horaney commended the program and shared her hope for other states to follow, also asking what else is being done to get the word out about the program.

Ben noted giving 10-15 presentations weekly to various organizations and unions. An advertising campaign has reached over 1 million people in Washington State. The WA Cares Fund also relies on these presentations to communicate throughout communities about the program.

Michele Blythe expressed appreciation for the direct presentation given and asked if there will be a minimum that people will need to pay in for benefits.

Ben shared that a minimum number of years will be required, with a minimum of 500 hours worked per year.



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Kathy Medford asked how the issue of portability will be addressed.

Ben offered that although there is no uniform national system to address portability, there is a statutory functional assessment. This will have to be studied and will require working with other states.

Georgiann asked if premiums will go up.

Ben noted that this is a non-medical program, and that it pays care workers which is a different type of inflation that would apply to a medical program. There are no plans to raise premiums in the coming years.

Sandra Miles appreciated that portability is being looked at, and that younger people may be more concerned about this.

Ben offered understanding and appreciation of this.

Art Swannack commented on the Council discussing the WA Cares Fund a lot during its beginnings, and that support was split. Art expressed not being in favor of the Fund due to the costs of the program versus the coverage it provides, and suggested it being structured like crop insurance – letting people buy a rate they can afford.

Ben appreciated the suggestion and noted that this was studied – 20% of the population would be covered through this method. The intent of the Fund is to keep people in their homes, with the option to supplement with private policies.

Art expressed that inflation estimates are incomplete with labor costs in the next 5-10 years not included in the cost.



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	<p>Ben noted that the Fund must keep up with the cost of care.</p> <p>Sandra agreed that the cost vs. benefit was hard to support.</p> <p>Ben encouraged people to do an analysis. For example, a 40-year-old making \$100K a year would incur a total cost of about \$15K until retirement (65). The Fund is designed to be affordable, with no profit or underwriting costs, and no subsidy from the state's General Fund.</p> <p>Michel Blythe inquired about those who work for two more years but can't get the benefit.</p> <p>Ben provided there is consensus that this issue needs to be addressed in the next session.</p> <p>Kathy Medford shared that after her father suffered a stroke, the doctor recommended a nursing home for him. After taking him home, her family moved him to a nursing home – this program would have been ideal.</p> <p>Ben encouraged people to reach out to him to get the word out among communities.</p>
Partner Updates	<p>Senior Lobby – Walt Bowen</p> <p>Shared that the Fall Conference was held last month in October.</p> <p><i>Committee Day</i> – the Joint Committee on Aging is scheduled for 11/17 at 2pm.</p> <p>Senior Lobby working on issues regarding work shortages and public comment on the WA Cares Fund.</p>



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Changes in the Legislature – Senator Darneille, 27th District in Tacoma and original member of the JLEC has retired to serve as Assistant Secretary of the Dept. of Corrections' Women's Prison Division.

Senator Hobbs will be replacing Kim Wyman as the new Secretary of State.

Legislative committees are meeting and will announce how the upcoming session will operate by the end of the week.

The next meeting of the Senior Lobby will be the 20th of December, and Legislative Priorities will be reviewed with a member from the Council presenting. The issue of mobile homes as a housing option will also be a topic of discussion.

Previous Senior Lobby Meeting - Food Lifeline provided a presentation on food insecurity and dental care professionals provided input on senior issues, as dentition greatly affects one's diet.

W4A – Cathy Knight

Thanked all who attended the October 20th Joint Conference and appreciated partnership with SCOA.

Conference materials were sent out for those unable to attend, with W4A's priorities spelled out. Hopeful for meeting in-person next year.

Currently meeting with Legislators; achieving parity for case management as a critical issue.

Lobby Day will likely be in the end of January, most likely Wed-Fri the week of January 24th.



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	<p>On the national level, N4A (W4A's national advocacy association) has rebranded to USAging and provided a recent congressional advocacy alert.</p>
<p>Committee Meetings</p>	<p>[Breakout rooms for Public Relations, Social Isolation, and Legislative Committees]</p>
<p>Committee Updates</p>	<p>Public Relations Committee Kathy Medford shared that the committee welcomed Michele Horaney to the group, who will bring extensive Public Relations experience to the committee.</p> <p>Key committee activities to note are Older Americans Month in May, and November being National Family Caregivers Month. Committee discussed how to best support these issues.</p> <p>Vaccination efforts were discussed, with a focus on how needles going into arms is often portrayed and potentially discourages participation.</p> <p>The impact of the pandemic on the health care system was a final topic of discussion. Similarities were discussed between people having concerns over the Affordable Care Act creating health care rationing, and people who are vaccine hesitant.</p> <p>Social Isolation & Engagement Karol Stevens shared the committees continued work involving aging in place. Current considerations surround how to best package last year's report with an audience in mind.</p> <p>Broadband access, as an example excerpted from the report, is a multifaceted issue that requires training for improved computer literacy, addressing equipment costs, monthly costs, and tech support.</p>



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	<p>Options moving this report forward include sending this to the Governor's office, working with the Legislative Committee for fine tuning, or Council Members picking items from individual areas to bring forward.</p> <p>Walt Bowen shared how important these issues are with the current state of federal funding. The time to use this data is now, as many national studies have focused on isolation. The Senior Lobby has worked with the League of Women Voters on similar issues and SCOA can provide timely input on senior issues.</p> <p>Discussion held on distributing the Social Isolation & Engagement report – full report and excerpted section to be distributed to Council following end of meeting.</p>
Legislative Priorities	<p>Legislative Committee 2022 Priorities</p> <p>Art Swannack detailed the two legislative priorities for the upcoming year:</p> <ol style="list-style-type: none">1. Addressing the issue of social isolation2. Decreasing the case load for case managers <p>Within the first priority is a section on broadband, bolded for emphasis.</p> <p>Kathy Medford asked if the issue of parity for state reimbursement rates, relating to parity for state wages should be included.</p> <p>Karen Kiessling agreed that pay rates need to be the same, as this is the biggest concern from Eastern Washington.</p> <p>Cathy Knight shared that the current Legislative Priorities achieve what AAAs need and parity may be more detailed than what is needed.</p> <p>Art noted that supporting DSHS in renewing the 1115 demonstration waiver was also listed as priority. If no other comments, Art asked the board for approval.</p>



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	<p>Motion to approve 2022 Legislative Priorities was made, seconded, and passed. Georgiann asked if committees held separate meetings.</p> <p>Karol Stevens stated that the Social Isolation & Engagement Committee meets the second Tuesday of the month, from 1:00-2:30 on Zoom.</p> <p>Kathy Medford shared that the Public Relations Committee does not currently meet outside the regular meetings but may start. Committee issues such as vaccination efforts should continue to be discussed with Advisory Councils and must still consider long term issues.</p>
Vaccine Discussion	<p>Sandra Miles wished to talk about this issue in a non-polarizing way. She shared her experience overseeing a bilingual Spanish program with 120 children, where a COVID positive employee came to work and unknowingly infected 2 infants. Similarly, in an Assisted Living Facility a cook unknowingly had brought COVID to the facility.</p> <p>Kathy Medford agreed that the goal is to talk in a constructive way and how to best support vaccination efforts, similar to how cancer cell treatment is approached.</p> <p>Art Swannack discussed people being emotional vs. logical decision-makers, with a third group including people who were upset by the Governor's vaccine mandate. This group has since decided to get vaccinated after seeing people get sick.</p> <p>Sandra shared that healthcare has always required flu shots, and COVID should be no different.</p> <p>Kathy offered the military as an example of requiring vaccines—her husband took a malaria pill after returning from serving in Hawaii.</p> <p>Art shared that the Legislative Committee meets only during the Council meetings.</p>



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<p>New Business Public Comment</p>	<p>Georgiann asked the Council about their level of interest to meeting in person.</p> <p>Karen suggested individually gathering opinions.</p> <p>In favor of meeting in person: 7 Council Members</p> <p>Opposed to meeting in person: 2 Council Members</p> <p>Combination of in favor of meeting when safe/to be determined after the new year/in favor of hybrid meetings: 4 Council Members</p> <p>Meeting adjourned at 12:01pm.</p>
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ACTION ITEMS	Assignee	Due Date
Send Council materials discussed in meeting (from W4A, Social Isolation Committee, Bob Scarfo)	Cameron Akita	ASAP