

**TENNESSEE COMMISSION ON AGING AND DISABILITY  
MINUTES  
COMMISSION MEMBERS  
February 10, 2009  
James K. Polk Bldg. (TPAC)  
1st Floor, 505 Deaderick St., Training Room #3  
Nashville, TN  
9:00 A.M. CST**

**Members Present:**

John Arriola, Chair  
Renee Bouchillon  
Diane Cornell  
Bernard Danzig  
Virginia Davidson  
Mickey Eldridge  
William Johnson  
Ronald Jordan  
Kenneth Kisiel  
Timothy Martin  
Beauton Matthews  
Frankie McCord  
Barbara McIntyre  
Patricia Miller  
Lynne O'Neal  
Judson Palmer  
Seth Stanger  
Mary Stockley  
Jackie Talley  
Carolyn Waugh  
Wanda Willis  
James York

**Members Absent:**

Shelburne Ferguson, Jr.

**TCAD Staff:**

Mike Hann  
Phil Barnett  
Ryan Ellis  
Janet Lamb  
Perry Register  
Cindy Warf  
Kathy Zamata

**CALL TO ORDER:** Chair Arriola called the meeting to order at 9:00 A.M.

**ROLL CALL:** Cindy Warf called the roll and attendance is listed above.

**TCAD STAFF UPDATE**

Mike Hann briefed the Commission Members on new TCAD staff members. Mr. Hann introduced Lucy Utt, Supervisor of Community Services, and asked her to introduce Valerie Hawkins-King, RD, LDN, Dietetics Consultant.

Mr. Hann introduced Cindy Warf, Administrative Assistant to Mike Hann.

Mr. Hann advised that one TCAD staff member resigned: Don Floyd accepted a new position.

## **APPROVAL OF DECEMBER 22, 2008, CONFERENCE CALL MINUTES (Tab 2)**

Chair Arriola asked if there were any corrections, deletions or additions to the Minutes of the December 22, 2008 meeting. A motion was made and seconded to approve those minutes. There were no objections or abstentions and the motion was passed and the minutes were approved.

### **CHAIR ARRIOLA'S COMMENTS**

Chair Arriola commended the efforts of the Commission Members.

#### Issues Discussed:

- Legislation was passed last year which affected and changed Long Term Care issues and Home and Community Based Services
- Meeting with Commissioner Goetz and also with Darren Gordon, they talked about the efficient and effective processes which is part of our job in working with the AAADs
- Working hard to meet the July 1<sup>st</sup> deadline with the waiver as far as what they sent to Washington. If they do not meet the deadline that the Governor first imposed and asked for, then they will be looking at extending the deadline to October 1<sup>st</sup>. The waiver packet is there but it will take some time to work through the process.
- Working for one common goal to make sure that people in our respective areas get services.
- Update of what is going on and what is being heard and meeting with the different players including TennCare who is one of the main players
- Working with the AAADs who are working in our communities with our constituents and the people that we represent. The AAADs are appreciated for their hard work.
- Encouragement that as the Commission on Aging and Disability, they need to continue focusing on the goals and expressing their concerns and being an active part of this Legislation.

### **COMMISSION MEMBERS UPDATE**

None

### **FORMER COMMISSION MEMBER UPDATE**

Mike Hann acknowledged the death of former Commission Member Donald Glen Petree who passed away on December 14, 2008.

## **EXECUTIVE DIRECTOR'S REPORT – MIKE HANN (Tab 4)**

Items included:

- No change in the current Commission Members status
- TCAD Staff Update
  - Cindy Warf – Administrative Assistant 1
  - Valerie Hawkins-King – Dietetics Consultant
  - Don Floyd – Resigned
  - Positions Assigned: 56
  - Positions Currently Filled: 41
  - Vacancies: 15
  - Note: 12 vacancies are in the Waiver Program and 3 vacancies are in the traditional program
  - Hiring freeze remains in effect
- Alzheimer's Task Force
  - State Alzheimer's Plan due February 15, 2009 to Governor and Legislature
  - Task Force work groups have been meeting via conference calls and face-to-face meetings on January 28, 2009, and February 3, 2009, to finalize recommendations
  - TCAD's role is administrative support to Task Force Members
- Alzheimer's Innovation Grant
  - Purpose: To reach rural and minority populations
  - Length of Grant: 18 months
  - Amount of Grant: \$236,253
  - Contracts with three AAADs, TN Respite Coalition and the Alzheimer's Association are in place
- Single Point of Entry (SPOE) Update
  - Medicaid SPOE plan presented to TennCare on December 9, 2008
  - TennCare stated the plan did provide enough detail
  - Non-Medicaid Waiver SPOE stakeholder planning met on January 27 & 28, 2009
- TDOT Coalition "Drive Smart. Stay Well."
  - Tennessee received a planning grant from the National Center on Senior Transportation to develop an Older Driver Safety Action Plan
  - Belinda Bruns and Kathy Zamata are serving on the work groups to develop the training curricula and brochures
  - Partners include: TDOT, AARP, AAA, TN Department of Health, TCAD, TN Department of Safety, Meharry, Council on Aging, and TN Regional Safety Council
- Financial Integrity Act
  - Due December 31, 2008, but, submitted December 19, 2008
  - Reviewed by Shared Services
  - Reviewed by Audit Committee

- Budget Update
  - Anticipated 15% - 20% reduction in State Funds starting July 1, 2009
  - Impact on funding streams discussed with AAAD Directors and Commission Members via telephone calls
- Tennessee Emergency Management Agency (TEMA)
  - LaVerdia McCullough represented TCAD in the Emergency Preparedness training for state agencies held at Paris Landing State Park in November
- Nutrition Planning Committee
  - On January 13, 2009, AAAD Directors and key staff formulated recommendations, rationale and action steps related to the Nutrition Program funded by Title III and Options
  - Issues included: Funding issues, need for some AAADs to request waivers to serve congregate meals 4 days per week, reporting issues, development of consistent RFP process
- State Health Insurance Assistance Program (SHIP)
  - SHIP's focus this year is to meet the healthcare needs of low income people and those with mental illness
  - CMS identified zip codes in which to target outreach efforts
  - Part D Open Enrollment November 15 – December 31
  - SHIP staff and volunteers counseled 1,968 Medicare beneficiaries
  - 26 Medicare presentations given in the community
- Planning and Evaluation
  - Conducted Quality Assurance site visits in South Central (December 17 - 18, 2008) and in Southwest (January 5 – 7, 2009) to review contracted programs (Title III, Options, Waiver and Title VI Compliance (civil rights))
  - Area Plan Format sent to AAADs and Area Plans are due on March 18, 2009
  - Statewide Needs Assessment (UT has completed on-line survey and literature review. Focus Groups are scheduled in the three Grand Divisions of the State
    - Knoxville, TN on February 5, 2009
    - Jackson, TN on February 17, 2009
    - Nashville, TN on February 18, 2009
  - 2010 – 2014: State Plan on Aging due to AOA August, 2009
- Consumer Directed Care “Cash and Counseling” Update
  - Goal: To provide an opportunity for the consumer to receive care in his/her home rather than in a nursing home. Care provider is a person of the consumer's choice.
  - Three year Pilot Program underway at GNRC
  - \$80,000 per year
  - 10 – 14 persons have expressed interest in participating in the program
  - Four persons have been approved to receive services (\$5,000 for each budget)
  - Background checks and training underway

- Options for Community Living Update
  - Options provides services that delays spend down into Medicaid
  - Future funding concern
  - Received additional \$3.9M
  - | <u>Month</u> | <u>Active Consumers</u> | <u>Waiting List</u> |
|--------------|-------------------------|---------------------|
| October      | 2,019                   | 5,143               |
| November     | 1,733                   | 5,187               |
| December     | 2,008                   | 5,468               |
- Other
  - Attended Governor’s Housing Summit in December
  - Visited Upper Cumberland Development District and AAAD
  - December 18, 2008, participated in ADRC satellite office grand opening in Gallatin, TN
  - Single Point of Entry (Non-Medicaid) Strategic Planning meeting
  - Department status
- Horizon Issues
  - Potential additional budget reductions
  - CMS Biller implementation
  - State Plan submission
  - Single Point of Entry
  - Upcoming Legislation
- Concerns
  - AAAD and TCAD’s role in Long Term Care implementation
  - Budget
  - Staffing

**CHAIR JOHN ARRIOLA INTRODUCED THE COMMITTEE CHAIR REPORTS**

**Committee Reports**

- Audit Committee – Chair Judson Palmer
  - Extensive discussion on the 92% rule – The committee is looking to develop a format to present to the Commission Members and address the format at the May, 2009 meeting.
  - The Area Agencies are supposed to spend 92% or more of their money during the year. In the past, if they didn’t spend it, then a waiver was granted and the money was rolled over. However, the money has to be spent in a 3 year period and applies only to Federal funds.
  - The Committee will look at that rule and develop certain percentages that apply; not for a total, but item by item of the different funding sources.
  - Look at how the Area Agencies and Tennessee Commission on Aging and Disability can monitor the progression as to how they are meeting the spend-down of their funds.
  - Discussed the Comptroller’s Audit – One finding: The Audit that TCAD received covered the period of January 1, 2005 – March 31, 2008. There was only one official finding and it was the Financial Integrity Report that

was due December 31, 2007, was not submitted timely, and which has been corrected. Mr. Mike Hann had just been hired two or three weeks before that report was due. The Financial Integrity Report that was due December 31, 2007, was submitted on March 31, 2008, and the problem was simply a timing problem. Subsequently, the report that was due December 31, 2008, was submitted on December 19, 2008, a couple of weeks early.

- Discussed suggestions from the Auditor to the Audit Committee on reviewing certain documents and reports:
  - How to handle complaints
  - Code of Conduct
  - Risk Management and Assessment
- Long Term Care Committee – Chair Bernard Danzig
  - Discussed signing the contract with TennCare - It was suggested that the Long Term Care Committee request a meeting with TennCare for clarification of what is going on. The Committee decided not to pursue this recommendation
  - Discussed the new waiver program and about when the contract is signed and when the Managed Care Organization (MCO) takes over the Waiver Program, what a large role the Case Managers will play. The Committee hopes that the Case Managers will not only look at the resources for the waiver program, but, will also look at the other community resources that the Area Agencies may have in their district that would help the client stay independent longer and improve their quality of life.
  - Discussed Presumptive Eligibility – Presumptive Eligibility states that the Case Managers and the Area Agencies (AAAD) are able to review a person trying to get on the Waivers Program. After evaluating and determining that a person has a good possibility of being eligible for the Waivers Program, then that person would become enrolled for services, and then services would begin. Even though the person had been enrolled for services, they would still have to go through the same approval process which can take 40 to 45 days. If it turned out that the person who was placed on the Waiver Program is not approved, then everything that had been spent on that person would have to be reimbursed by the AAAD. After the Committee talked with three or four of the AAADs, they found out that they were very cautious about using this procedure because of the possibility of having to pay back the money that was spent once the client was determined not eligible. For people who receive SSIs as their only income, it is easier to presumptively state that the client should be eligible for the Waiver Program.
  - Discussed if someone is already on Medicaid, there should be a smooth transition into the Waiver Program. If they had already been approved financially and had passed the PAE form that medically stated that nursing home care was needed, there should not be any problem. It was suggested that the process can be speeded up and there is hope that all of the Department of Human Services across the State would look at that and make it a really smooth and speedy transition.

- Discussed the procedure requiring a doctor to sign off on the PAE for a patient for everything. An example: If a patient enrolled in the Waiver Program needs pest control service, it is required for the doctor to sign off for that service. When you look at ways and how to speed up the eligibility process, you know that the doctor is not going to the patient's house to inspect for bugs. He's going to listen to the Case Manager or the AAAD verifying that there are bugs, and he will sign the PAE so that pest control can be scheduled. It was suggested that there is a need for some of the non-medical decisions that are currently made by doctors be changed to make the process more streamlined which will speed up the application process for that person.
- Discussion on where referrals come from and who makes referrals for the Waiver Program. Below are statistics as of December 2008:
  - Family and friends – 244 requests for the Waiver Program
  - Client – 346 requests for the Waiver Program
  - Home Health Agencies – 132 request for the Waiver Program
  - Hospitals – 15 requests for the Waiver Program
- Discussion on how speedily you want to get a patient out of the hospital
- Decision that the Long Term Care Committee will have a telephone conference call every month so that they are kept up to date on changes
- Advocacy Committee – Chair Carolyn Waugh
  - Discussed several bills that have been introduced in the Legislature which are bills relate to the aging and the disabled that are supported by the Advocacy Committee:
    - Silver Alert – New statewide notification Alert Programs that assists in locating certain persons that are disabled or elderly who are lost. Sometimes the adults are developmentally impaired or they suffer from a cognitive impairment. There are four different bills have been introduced in our State Legislature for the Silver Alert, and we as a Committee support this Legislation also they don't support any particular bill
    - HB0201/ SB0031 General Assembly Studies – Extends the reporting date from February 1, 2009 to February 1, 2010 – It's a continuation of a study that studies the effects of litigation on the nursing home industry. Tennessee is one of the States with no caps on nursing home and we as a committee feel that the caps are necessary in order to discourage out of State law firms that might seek Tennessee clients for their benefit
    - HB0093 Hospitals and Health Care Facilities – It requires criminal background checks to be conducted for direct care employees. We as a committee feel that it is very important to have the background checks processed prior to employment of these individuals before they have access to the patients.
- Planning Committee – Chair Wanda Willis
  - Reviewed the changes in the Area Plan format. The Area Agencies this year are doing a one year update on their plan instead of the normal three to four year plan.

- TCAD staff will research Microsoft Share Point as a tool to expedite the process of reviewing the plans on the Web which will provide the Committee and other Commission members would have a central sight to look at those plans
- Discussion that the Committee Members would review all nine Area Plans but would divide up the task of reporting the results of the review at the May 12, 2009, Commission meeting
- Explanation of how the results of the statewide needs assessment would play a part in the development of the State plan
- The summary plans will be e-mailed to the Committee Members to look at format

**CHAIR JOHN ARRIOLA ANNOUNCED A BREAK: 10:21 A.M.**

**SPECIAL GUEST AND SPEAKER (Tab 5)**

Mr. Mike Hann introduced our special guest and speaker Cheryl Watson-Mingle

With more than 32 years of experience in the senior and non-profit community, Cheryl Watson-Mingle currently serves as the executive director of the McMinnville Warren County Senior Center, Inc. A Warren County native, she was named UCSSA Social Service Person of the year in 1998 and was listed as an Honored Professional in the Who's Who in executives and professionals in 2001. Cheryl is the President of the Tennessee Senior Center Director's Association, chairperson of the Tennessee Nutrition Consumer Education Program (TNCEP-Warren County), and is a member of the Warren County Health Council.

Cheryl's professional experience includes nonprofit financial management, program development and resource development. During her 20 years of employment with the Senior Center, she has served on various boards in the Upper Cumberland including the Family Investment Resources System (FIRST) at the Department of Human Services, United Way of Warren County, Upper Cumberland Social Services Association, Warren County Emergency Food & Shelter and the South Central Tennessee Adult Abuse Coalition. Prior to her work at the Center, she was employed as a Homemaker Aide for 11 years with Upper Cumberland Human Resource Agency (UCHRA) and collaborated with the Department of Human Services on Adult and Child Protective Services cases.

From Cheryl's training, she developed a sense of understanding changing environments and community threats. She is the co-founder of the Families in Crisis Domestic Violence Shelter and served as President from 1991-1994. She also founded the Relatives as Parents Program at the Senior Center for those raising nieces, nephews or children other than their own. Particularly refreshing are her practical approaches that reflect her hands-on management experiences. She has always been able to work with the community to make things happen.

## Discussion on Tennessee Association of Senior Centers

### History:

- First introduced in New York City in 1943
  - For adults to provide social activities, nutritious meals and case management
  - Aged 60 and older
  - Targeting low income seniors
- 66 years later:
  - Senior centers are widely recognized
  - Older Americans Act of 1965
  - 15,000 centers in the United States (2005 National Institute of Senior Centers)

### Senior Centers Work:

- In 1986 the National Center for Health Statistics reported that 15% of all Americans aged 65 and over (roughly 4 million individuals) had attended a senior center in the past year
- According to the Administration on Aging (AoA) (2000), senior centers are community focal points and are “both the first and the foremost, source of vital community based social and nutrition supports that help older Americans remain independent in their communities”
- The National Institute of Senior Centers (NISC) defines a senior center as a place where “older adults come together for services and activities that reflect their experience and skills, respond to their diverse needs and interests, enhance their dignity, support their independence, and encourage their involvement in and with the center and the community”
- As a new generation of older adults looks to redefine retirement, there is a growing focus on wellness, work and volunteerism. When it comes to finding tolls for staying healthy and involved or information about benefits, senior centers are the place to start.
- Today’s Senior Centers “... are evolving to reflect a new view of aging that empowers the people they serve,” said James Firman, President and CEO of the National Council on Aging. “They’re connecting older adults with meaningful career and volunteer opportunities, increasing their access to valuable benefits and resources and helping seniors manage their health and finances.”
- Not only do senior centers offer helpful resources to older adults, they serve the entire community with information on:
  - Aging
  - Support for family caregivers
  - Training professionals, lay leaders and students and
  - Developments of innovative approaches to addressing aging issues

### Tennessee Aging Statistics:

- According to the US Census (2000):
  - 14.8% of all Tennessee residents were over the age of 62
  - 47.8% of all people over 65 reported some form of disability
  - 13.5% of all people over 65 live below the poverty line

### Senior Center Services:

Advocacy	Health & Wellness Programs
Outreach	Health Screenings
Information & Assistance	Volunteer Opportunities
Telephone Reassurance	Mental Wellness
Visitation	Adult Day Services
Physical Fitness Programs	Support Groups
Educational Opportunities	Nutrition Screenings
Trips	Emergency Shelters
Intergenerational Programs	Food Banks
Special Events	Computer Labs
Employment Assistance	Transportation Services
Financial & Benefits Assistance	Homemaker Aide Services
Social & Community Action	In-home Services
Activities	Errands Services such as medicine and commodities pick up
Legal Assistance	
Medicare Part D	

### Senior Center Operation:

There are several major funding considerations associated with the successful day to day operation of a senior center:

- Funding of personnel
- Travel
- Overhead
- Equipment
- Daily operational expenses necessary for a center and its programs

### Benefits of Senior Centers:

A 2003 study by Dr. Ron Aday (Middle Tennessee State University) demonstrated that senior centers:

- Improved physical health
- Increased health promotion strategies and positive health behaviors
- Increased social support
- Decreased depression and isolation
- Provided vital information and assistance
- Were the primary sources of nutrition for many seniors
- Allows seniors to remain independent in their own communities rather than enter long term care facility

### Senior Center Funding:

Senior Centers can acquire funding from a variety of sources and methods:

- Matching Requirements
  - 6-3-.01 Federal Funds: Federal funds may be used to pay part of the cost of operation of a multipurpose senior center with the following provision: The AAAD will designate match requirements with at least a minimum of 10% local cash or in-kind
  - 6-3-.02 State Funds: State appropriations must be equally matched by local resources – 50% state and 50% local
    1. In the initial year, at least 10% of the local match must be in cash

2. In each succeeding year of funding thereafter, the grantee must increase the level of local cash funds used to support the program by 1% or \$100, whichever is greater
- Federal and State Funds
    - Typically comprise less than 30% of a senior center's total funding
    - Although 70% of funding comes from non-governmental sources, it will become increasingly difficult in the current economy to raise these private funds. If governmental funding is cut senior centers won't be able to make up the gap through fundraising alone
    - 6-4 Other Funding Sources - A senior center shall secure the financial resources necessary to meet its obligations by:
      1. Seeking funding from local sources in ways that are compatible with the requirements of the sponsoring organization and major funding sources
      2. Assuring accountability for the received funds
      3. Sources of funds may include corporate gifts, individual donations, bequests and endowments and a minimum of two major fundraising activities annually
    - 6-4-.01 Grants and Contracts – A center shall pursue grants and contracts, provided that the intent is consistent with the center's philosophy, is financially feasible, and strengthens the center's role in the community.
  - Tennessee and Aging Services
    - There are 9 Area Agencies on Aging and Disability in Tennessee
    - There are a total of 133 senior centers – both funded (OAA) and non-funded that serve several thousands of Tennessee seniors daily
    - A recent report showed that over 166,000 seniors were served through TCAD
  - Why Senior Centers are Vital - Research (John Krout, 1998; Pardasani, 2004) shows that senior centers:
    - Are the most economical and cost-effective programs for community-based seniors
    - Provide vital supportive services to keep seniors independent as long as possible
    - Have faced increased demand from the growing population of seniors but decreasing federal and state fiscal support
    - Majority of senior centers nationwide function with a skeletal staff and still manage to make a significant difference in the lives of their community seniors
    - Cannot survive with further cuts in funding which will jeopardize the health and lives of seniors everywhere
    - Will face increased demand from community seniors for support and nutrition in the current economic climate (losing jobs, increasing expenses, more care-giving responsibilities, etc.)
  - The Future of Senior Centers
    - One of the main purposes of senior centers is to provide seniors with access to the community in a fashion that enables dignified and supportive engagement

- If senior centers are to continue this function, they need to be redesigned for broader appeal and multiple uses. Furthermore, their management needs to evolve to better engage the entire community and be even more responsive to those they serve now and in the future.
- 2008 Tennessee Senior Centers SAMS Agency Summary Report Totals

<b>AGENCY</b>	<b>CONSUMERS SENIOR CITIZENS</b>	<b>UNITS OF SERVICE</b>
East Tennessee	10,103	222,923.42
Greater Nashville	22,011	139,831.00
First Tennessee	10,959	680,855.45
Mid-South	7,489	271,910.00
Northwest	8,121	227,719.00
Southeast	71,236	374,021.00
Southwest	4,469	268,107.50
South Central	11,846	467,247.52
Upper Cumberland	12,835	664,602.47

- Senior Centers are Community Partners
  - Senior Centers are “where the rubber meets the road”
  - Senior Centers are trusted by senior citizens
  - Provide a variety of activities designed to support the needs of older Americans
  - Essential links in the aging networks

**TENNESSEE COMMISSION ON AGING AND DISABILITY FINANCE  
REPORT – PERRY REGISTER, SUPERVISOR OF FISCAL AND  
ADMINISTRATIVE SERVICES (Tab 6)**

Discussion of the Current Budget:

- TCAD has not been told that there will be any cuts for the current year
- Budget submitted and approved: \$48,415,700
- Budget expansions to pick up Federal funds resulted in a budget expansion of an additional \$2,719,100, for a total budget to \$51,134,800.

<b>CURRENT BUDGET</b>				
		<b>TCAD</b>	<b>AAADs</b>	<b>TOTAL</b>
<b>Budget as Submitted</b>		<b>4,259,800</b>	<b>44,155,900</b>	<b>48,415,700</b>
<b>Expansion</b>				
<b>No. 1</b>	<b>Prior Year Unrequested Carryover</b>		<b>847,300</b>	<b>847,300</b>
<b>No. 2</b>	<b>SHIP Funds Carryover</b>	<b>79,900</b>	<b>491,100</b>	<b>571,000</b>
	<b>SHIP One-Time Awards</b>	<b>416,700</b>		<b>416,700</b>
	<b>SHIP Increased Funding</b>	<b>130,800</b>		<b>130,800</b>
<b>No. 3</b>	<b>Increased AoA Funding</b>	<b>29,900</b>	<b>614,600</b>	<b>644,500</b>
<b>No. 4</b>	<b>AoA One-Time Award</b>		<b>108,800</b>	<b>108,800</b>
	<b>Total Expansion</b>	<b>657,300</b>	<b>2,061,800</b>	<b>2,719,100</b>
<b>Expanded Budget</b>		<b>4,917,100</b>	<b>46,217,700</b>	<b>51,134,800</b>

Discussion on Expenditures:

- TCAD has expended \$19,851,714 of the \$51,134,800 as of December 31, 2008, leaving a balance of \$31,283,086
- Area Agencies (AAAD) have spent \$18,123,492 of their \$46,217,700 leaving \$28,094,208.

<b>EXPENDITURES</b>			
	<b>TCAD</b>	<b>AAADs</b>	<b>TOTAL</b>
<b>Expanded Budget</b>	<b>4,917,100</b>	<b>46,217,700</b>	<b>51,134,800</b>
<b>Expenditures through December</b>	<b>1,728,222</b>	<b>18,123,492</b>	<b>19,851,714</b>
<b>Balance of Budget as of 12/31/2008</b>	<b>3,188,878</b>	<b>28,094,208</b>	<b>31,283,086</b>

Discussion on Budget 2009-2010:

- As of October 1, 2008, the budget submitted was for \$48,308,600.
- Advised to plan for a 3% reduction
- In November of 2008, a projection for a 3% reduction was requested; but, also requested for worse-case scenario projection of 6% reduction
- Request came for projection for much larger cuts
- Smaller amount of increases of recurring funds
- Before the cuts, budget expansion totals \$49,083,900

<b>BUDGET 2009-2010</b>			
<b>Budget as Submitted</b>			<b>48,308,600</b>
<b>Expansion – Recurring Only</b>			
<b>No. 2</b>	<b>SHIP Increased Funding</b>		<b>130,800</b>
<b>No. 3</b>	<b>Increased AoA Funding</b>		<b>644,500</b>
	<b>Total Expansion</b>		<b>775,300</b>
<b>Expanded Budget</b>			<b>49,083,900</b>

Discussion on determination of Tier 1 and Tier 2 on \$49,083,900:

- Tier 1 would be first cuts
- Presumption that there would be no Stimulus money, then Tier 2
- Since this was presented on December 22, 2008, we have been advised that instead of a 15% cut, it looks like maybe a 20% cut. If this is the case, we will probably get Tier 1 and Tier 2, even with the Stimulus money. However, there is no way of knowing for certain until the Governor presents the budget.

Discussion on Tier 1 Reduction:

- TCAD was advised that they needed to show a \$1,063,900 cut

<b>BUDGET REDUCTION 2009-2010</b>			
<b>Expanded Budget</b>			<b>49,083,900</b>
	<b>Tier 1 Reduction</b>		<b>1,063,900</b>
	<b>Tier 2 Reduction</b>		<b>964,600</b>
	<b>Total Reduction</b>		<b>2,028,500</b>
<b>Net Budget</b>			<b>47,055,400</b>

- TCAD looked at the Alzheimers Task Force
  - Alzheimers Task Force - on a limited time frame and funds would be depleted this month.
  - TCAD will have to report to the Legislature this month because those were all State funds and they will be taken out of the budget for fiscal 2010
- TCAD looked at In-Home Services
  - In-Home Services - is a combination of both matched money Title III and Options money.
  - TCAD is subject to Maintenance of Effort which says that we can't spend less State dollars this year than the average of the last three years. Mr. Register explained that for the last three years, TCAD has had the same dollar amount. But, if the dollar amount is reduced below that, we would be subject to losing significant Federal money.
  - Under the Maintenance of Effort, if a cut was applied, it would not help the State Budget by cutting State dollars. Therefore, it is not recommended for TCAD to cut staff positions because it would not save any State dollars
  - TCAD State money is compared to the Federal money that is applied. It doesn't apply to the Area Agencies (AAAD). They have to maintain match, but, we are over-matching.
  - The State has to put in match for In-Home Services. We have to put in at least 5% of the award that has to come from State funds. We are well over 5%.
- TCAD looked at Senior Center Operations
  - All Senior Center money, all State Nutrition, all State Homemaker and all Caregiver Management far exceed 5% on \$22,000,000.
- TCAD looked at Title III and Options Program
  - TCAD has several million dollars in the non-Options Program. The Options Program plus the increase puts us to \$9,000,000.
  - TCAD will need to take cuts for Title III and the Options Program. Mr. Register explained that it can be done that way because we are not going to decrease our match on the Federal dollars.
  - Options Program - those people who qualify for the Older American's Act 60 plus - any funds expended to them can be used as a match against the Federal funds. We will actually increase the match provided against the Federal funds and with or without cuts we will be providing more match. The cut was applied in the match money and the Options money which is \$946,400 in Tier 1.
- TCAD looked at Senior Center funds Tier 1 Reduction
  - Mr. Register explained that Senior Centers took a significant 25% funding cut in Governor Bredesen's first year.
  - Since then Senior Centers have been restored a portion of that funding, but not all of it.
  - TCAD tried not to jeopardize their operation any more than possible. However, a reduction was given to them, but not to the same level as TCAD was required to do on the State plateau.

- Tier 1 reduction: \$62,500

<b>BUDGET REDUCTION BUDGET YEAR 2009-2010</b>		
<b>Tier 1 Reduction</b>		
	<b>Alheimers Task Force</b>	<b>55,000</b>
	<b>In-Home Services</b>	<b>946,400</b>
	<b>Senior Center Operations</b>	<b>62,500</b>
<b>Total Tier 1 Reduction</b>		<b>1,063,900</b>

- TCAD looked at Senior Center funds Tier 2 Reduction
  - Mr. Register explained that the biggest money is in In-Home Services which is all the match money and all the Options. He said that we have to take a significant amount of cuts there as well, which is another \$869,400
  - For Senior Centers with Tier 2, they were given an additional \$62,500 reduction. That is a \$125,000 reduction of the two Tiers combined on \$1,250,000. We are talking about a 10% reduction for Senior Centers at this time.
- TCAD looked at the Guardianship Program with Tier 2
  - Mr. Register explained the Guardianship program has not had any increases since the 1990s. TCAD gave them an increase of \$100,000 and the \$32,700 is a 3% cut of the Guardianship Program. The cut will affect salaries because it's the biggest thing expended by the Guardianship Program. If there is any cut that will not be taken, the Guardianship Program will be the one that will be wiped off first. If we save some money at our operations, we may be able to cover that as well so that we are not affecting the staffing of the Guardianship Program.

<b>BUDGET REDUCTION BUDGET YEAR 2009-2010</b>		
<b>Tier 2 Reduction</b>		
	<b>In-Home Services</b>	<b>869,400</b>
	<b>Senior Center Operations</b>	<b>62,500</b>
	<b>Guardianship</b>	<b>32,700</b>
<b>Total Tier 2 Reduction</b>		<b>964,600</b>

- Discussion on how Stimulus money coming into the State will affect the budget reduction
  - Budget reductions do not have anything to do with Stimulus money.
  - If Stimulus money comes, then it will be the Budget Office and the Governor's Office to decide where it goes
  - Previous projections are only 15% cuts, but it could go to 20%.
  - If the Stimulus package is 5%, we will still take the whole cut. If the Stimulus package is more than 5%, depending on the ear marks that is on the Stimulus, it could have an impact. None of this is Waiver. All of this is State money which is excluding Waiver

**STATEWIDE MEDICAID WAIVER – PHIL BARNETT, HCBS WAIVER ADMINISTRATOR (Tab 7)**

Mr. Barnett discussed the Statewide Medicaid Waiver.

Items Discussed:

- Current enrollment as of February 2, 2009 – 4,804 with 1,196 available slots
  - Enrollment:
    - October – December, 2008: Enrollment 804
    - July – September, 2008: Enrollment 806
  - Claims:
    - December, 2008: Claims – 51,277
    - July – September, 2008: Claims – 30,016
- Service Providers:
  - November 6, 2008: Service Providers – 316
  - April 30, 2008: Service Providers – 230
- Provider deficiencies as of December 31, 2008
  - Adult Day Care – 45 Counties
  - In-Patient Respite – 8 Counties
  - Assisted Care Living Facilities – 8 Counties
    - Provider deficiencies as of September 30, 2008
      - Adult Day Care – 55 counties
      - In-Patient Respite – 9 counties
      - Assisted Care Living Facilities – 8 counties
    - TennCare granted all but 12 of the Provider Waiver Requests
- October – December, 2008, Quality Assurance
  - 6 on-site surveys of AAADs and CMAs
- The current Cost Cap is \$50,100 per year, or \$4,200 per month.

**TENNESSEE COMMISSION ON AGING AND DISABILITY FISCAL 101 PERRY E. REGISTER, SUPERVISOR OF FISCAL AND ADMINISTRATIVE SERVICES (Tab 8)**

Mr. Perry Register prepared a PowerPoint presentation as an overview of how TCAD is funded, how TCAD allocates funds, and how TCAD reports it. He advised that he was going to try to stay away from specific dollars to keep from confusing the issue. The PowerPoint presentation will not reflect specific dollar amounts but will be explaining terminology.

## Items Discussed:

### Funding Sources:

- TCAD receives funding from a number of Federal Grants
  - Title III and VII – Older Americans Act – Administration on Aging (AoA)
  - Nutrition (NSIP) Supplemental Incentive Program – Older Americans Act (AoA)
  - Aging and Disability Resource Center (ADRC) – Older Americans Act (AoA)
  - Statewide Health Insurance Program (SHIP) – Medicare and Medicaid – CMS
  - Demonstration Grants – Various
- TCAD is appropriated funds in the State Budget
  - TCAD Administrative Operations
  - Guardianship program
  - Options for Community Living
  - Match for Title III of the Older Americans Act:
    - ◆ Senior Center Operations
    - ◆ In-home services of Home Delivered Meals, Homemaker and Caregiver Support
    - ◆ Special allocation – Alzheimer’s Task Force
- TCAD contracts with other State Agencies for Specific Programs
  - Statewide Medicaid Waiver under contract with the Bureau of TennCare
  - In the past included contracts with Commerce and Insurance and other departments

### TCAD Budget Process:

- Annual budget due to F&A Budget Office on October 1<sup>st</sup>
- F&A Budget Office Hearing in early November
- F&A Budget Office present budget to the Governor
- Governor presents the Budget to the Legislature
- Legislature approves or amends Budget

### Federal Grant Funding:

- Grant Awards are received from the Federal Agency – Most are Annual Grants but some are longer periods
  - Annual Recurring Grants based on Federal Regulations – Allocated for the Federal Fiscal Year
  - “Continuing Resolutions” at level funding are issued until the budget is approved
  - SHIP grant is a continuation of the same grant with annual or special allocation of additional funds
  - Demonstration Grants – 3 years – Alzheimer’s
  - Project Grant – 18 months – New Alzheimer’s
- Limitations on period of expenditure
  - AoA Grant – Obligated within the Grant year with expenditure in 36 months
  - SHIP Grant – Funds and time added to existing grant
  - Demonstration Grants – Expend within the period
  - No-Cost Continuation Grant – Extension to expend unexpended grant

- Determination of amounts
  - AoA Grants – Federal Budget has an amount which is allocated based on the census
  - SHIP Grant – Allocation of funds can be affected by grantee’s performance or other special allocations
  - Demonstration Grants – Application based on grantor agency needs and available funds

Funding Allocation:

- Funding Formula Allocations
  - OAA funds and State Matching funds are allocated by a funding formula approved by the Commission and the Legislative Rule Making process
  - All funds allocated to the AAADs must follow the formulas without exception
  - OAA requires periodic review of the formula used for Federal funds and the status recorded in the State Plan
- Even Allocations
  - Funds to be allocated to the AAADs must be allocated as an even amount to each AAAD if no approved formula applies
- Other Contract/Grants
  - Contracted Services based on the grant application
  - Grant applications received requesting participation in available funding
  - TCAD may request applications from agencies based on the needs within the grant

AAAD Budget Process

- Annual Area Plan and Budget submitted by each AAAD
- TCAD review of Area Plan and Budget
- Area Plan and Budget presented to Commission for Approval

AAAD Reporting

- AAAD submits electronic report quarterly for expenditures of all funds received from TCAD
- The report includes an allocation of the Area Agency Administrative Cost
- Reports are due on the 20<sup>th</sup> of the month following the end of each quarter
- Final reports are due September 30<sup>th</sup>

TCAD Federal Reporting

- Form 272 – Quarterly report of Grant Funds drawn from Federal Grants. Two reports cover all grants.
- Form 269 – Quarterly, Semi-Annual or Annual report of Grant Funds Liquidated on each Federal grant

Tracking of Unexpended Fund

- Quarterly report tracks funds available from TCAD and calculates balance of unexpended funds
- The funds drawn are compared to the contract amount to determine the amount still available to be drawn by the AAAD
- The drawn funds that remain unexpended are calculated as Cash-on-Hand at the AAAD or providers

### Unliquidated Funds Carryover

- Unliquidated AoA funds are permitted to be carried forward at the end of each year
- Funds must be applied in the quarterly reports for the following year
- The 92% Rule/Policy addresses the amount of unliquidated funds that may be retained (Audit Committee is currently reviewing this policy)

### **TCAD ETHICS TRAINING – JANET LAMB (Tab 9)**

Janet Lamb discussed that Commission members will need to complete the Conflict of Interest form for Year 2009 on Tuesday, February 10, 2009, and return those to Cindy Warf.

#### **Issues Discussed:**

##### Duties of a Commission Member

- Serve the public, beyond serving oneself
- Recognize and support the public's right to know the public's business
- Be prepared to make decisions that may not be popular
- Exercise discretionary authority to promote the public interest

What authority comes with being a Commission member?

- None

##### Authority of Commission Members

- The authority of Commission members lies with the body as a whole. No individual Commission member, nor committee of the Commission has authority to make statements in the name of the Commission, request or direct state agency staff for support of take other actions in the name of the Commission without specific approval by vote of the Commission. "This in no way precludes the authority of Commission members to speak to other individuals and groups regarding activities, issues and decisions of and by the Commission on Aging and Disability." (Tennessee Commission on Aging and Disability By-Laws; Article VII, Section 1)

##### Conflict of Interest

- Members: If any matter before the Commission involves a project, transaction, or relationship in which a member of his associated institution or business has a direct or a conflicting interest, the member shall make known to the Commission that interest and excuse himself from the proceedings. (Tennessee Rules and Regulations 0030-1-3-.08(1))

##### Code of Conduct

- No State Agency employee or agent shall solicit or accept gratuities, favors, or anything of monetary value from contractors or potential contracts. (Tennessee Rules and Regulations 0030-1-3-08(3)(a))

##### Definition of Agent

- A person who acts in an official capacity for a government

Who is an agent of TCAD?

- All Commission Members

### The 6 Ps of Conflict of Interest

1. Public duty versus private interests – Do I have a personal or private interest that may conflict, or be perceived to conflict with my public duty?
2. Potentialities – Could there be benefits for me now, or in the future that could cast doubt on my objectivity?
3. Perception – Remember, perception is important. How will my involvement in the decision/action be viewed by others? Are there risks associated for me/my organization?
4. Proportionality – Does my involvement in the decision appear fair and reasonable in all the circumstances?
5. Presence of mind – What are the consequences if I ignore a conflict of interest? What if my involvement was questioned publicly?
6. Promises – Have I made any promises or commitments in relation to the matter? Do I stand to gain or lose from the proposed action/decision?

### **Chapter 16: Options for Community Living – State-Funded Home and Community Based Services – Tabitha Satterfield, Aging Program Coordinator, for the Options for Community Living Program (Tab 10)**

Chapter 16 replaces the Options Manual which was completed in 2001. The Chapter is made up of information that was pulled from the manual along with some things that were added in. There was a Committee with members from the Area Agencies who helped with putting the Chapter in place and help with the writing and preparing the Chapter.

Items reviewed and highlighted that were newly added included:

- 16-2 - Definitions
  - (1) Allowable Cost per Consumer – Added “service plans not to exceed \$7,000 per consumer”
- 16-3 – Service Components
  - (1) Homemaker Services
  - (2) Personal Care
  - (3) Home-Delivered Meals

Although the old manual did not limit the services that could be covered under the Options program, due to limited resources, there were directives from TCAD that limited the services to homemaker, personal care and home-delivered meals. The new chapter allows flexibility to provide services according to the consumer’s need and service plan within the financial limitations.

- 16-7 - Screening

The new chapter provides for a telephone “screening prioritization” to replace the old procedure of serving consumers on a “first come/first serve” basis. A prioritization form (Attachment A) has been added. The form ranks the consumer’s functional needs (those who need the most assistance with their

- activities of daily living). The screening prioritization procedure will assist the AAADs in managing the waiting list.
- 16-10 – Cost Sharing and Participant Contribution Requirements  
After discussions with some AAAD staff, it was discovered that some AAADs routinely waive the cost share. The language in the new chapter makes it clear under what circumstances the cost share may be waived. They wanted to be very specific about that and change it to:
    - (g) “If the AAAD finds that collecting a given amount is not cost effective, the AAAD may waive this amount”
  - 16-12 – Reduction/Termination of Services
    - (h) Added: “unless it has been determined that they can not afford to pay the cost share, then a waiver can be granted on a case-by-case basis”
    - (j) Added: “consumer is frequently not at home to receive services or refuses to let providers carry out their duties” – services can be terminated
    - (k) Added: (k) “When no service providers will provide services or service providers are not available in the area.”
    - Last paragraph: Added: “Individuals who become eligible for the Medicaid Home and Community Based Services Waiver Program but choose not to receive services under the Waiver program, regardless of the reason, shall not be terminated from the Options program or prohibited from being on the wait list to receive services under the Options program.”

### **TCAD By-Laws (Tab 11)**

Chair John Arriola advised that he would like to appoint a By-Laws Committee to take a look at the document in front of the Commission members. Chair Arriola advised that he would like to appoint as Chair of the By-Laws Committee, Judson Palmer, and appoint Beauton Matthews, Ron Jordan, Mickey Elridge, Bernard Danzig to serve on the By-Laws Committee. He asked for Chair Judson Palmer to schedule a meeting with that Committee to review the By-Laws and make a recommendation to the Commission for a vote. Chair Arriola advised that he was not certain if they would be able to schedule a conference call to review the By-Laws. Janet Lamb advised that she would check to see if legal is agreeable with having a conference call in that regard.

### **Title III Legal Assistance Chapter Revision – Janet Lamb (Tab 12)**

What you see in the notebook is the 1996 version, and what I am passing out now is the marked up version for 2009. The purpose of this change is cleaning it up and bringing it up to date. The changes are as follows:

- Changes all references from Tennessee Commission on Aging to Commission on Aging and Disability.
- Deletes all references to the Tennessee Legal Assistance Provider Manual
- Corrected all of the site references
- Makes use of the Internet by providing an electronic version where you can click on links to receive information

- [http://www.aoa.gov/OAA2006/Main\\_Site/oa\\_full.asp](http://www.aoa.gov/OAA2006/Main_Site/oa_full.asp)
- [http://edocket.access.gpo.gov/cfr\\_2007/octqtr/45cfr1321.3.htm](http://edocket.access.gpo.gov/cfr_2007/octqtr/45cfr1321.3.htm)
- Under State Agency 8-3-.01 (3) delete “The State Agency shall establish quarterly program reports and shall compile and analyze program statistics, and shall distribute a quarterly statewide report.”
- Under State Agency 8-3-.01 (5) delete “The State Agency shall make available to the area agency and the legal assistance provider a written report of all assessments.”
- Under General Standards for Providers 8-4-.01 (28) The language was deleted “A suggested participant contribution schedule shall be developed.” They can ask for voluntary contributions but they can’t require contributions.
- Under General Standards for Providers 8-4-.01 (31) delete “Tennessee Commission on Aging and Disability Guide to Contract Preparation and Report.” – We changed that to “Each legal assistance provider shall document the time spent on legal casework” we are allowing them to document the time and we are not requiring them to have MOUs for all the providers such as DHS, etc. They only have to have a Memorandum of Understanding for the Guardianship and Ombudsman programs
- Under General Standards for Providers 8-4-.01 (36) Is about the Memorandum of Understanding
- Under Priority Setting Standards 8-4-.03 (1) The language was deleted “Each legal assistance provider shall assure that the following major categories of legal assistance are available to older persons throughout the service area and shall furnish direct legal assistance in at least the priority subcategories starred (\*) under each major category.” The added language was “Each legal assistance provider shall assure that the following major categories of legal assistance are given priority to older persons throughout the service area and shall ensure that at least 51% of the legal assistance caseload will consist of cases from the priority subcategories starred (\*) under each major category. [OAA, Sec. 307(11)(E)]

Chair Arriola commented that this would be pushed to the May Commission meeting and that it looked like that this is the Title III Legal Aid Chapter which they have to review and vote on and approve. Mr. Arriola also commented that Ms. Lamb had made this review through the legal process and the changes in front of them were changes suggested by that group. Ms. Lamb confirmed that the changes were suggested by the Title III attorneys and it was also sent out to the Area Agencies for review. Mr. Arriola suggested to the committee to review the document and wait until the May Commission meeting for the vote to approve.

**Chair John Arriola announced a break.**

#### **TN4A Presentation – Aaron Bradley (Tab 13)**

Mr. Aaron Bradley advised that Mr. Mike Hann asked him for the next Commission meeting to include in the Area Agency report stories of how they are impacting people’s lives and they will do that.

## Items Discussed:

- Planning and Administration
  - Working on the Area Plan Updates for 2009 – 2010 for all services funded by TCAD/AAADs
  - Revising and updating goals and objectives developing budgets and preparing for public hearings
  - Working with TCAD in support of the statewide needs assessment process including recommendations for survey distribution and assisting to facilitate focus groups across the State
- CMS Biller
  - Electronic billing program for Waiver consumers that utilizes data in SAMS to streamline the provider payment process
  - Reduces the time it takes to get payments to providers
  - Program will be administered by each AAAD
  - A considerable amount of time and resources has been spent on this project over the past year
- Options for Community Living
  - Enrollment statewide is up significantly due to increased funding
  - Most AAADs have already reached their enrollment goals for 2008-2009
  - TCAD and the AAADs worked together to revise and update the Options policy manual chapter
  - Taking a wait and see attitude before enrolling more consumers until it is known how the budget reductions will impact Options funding
- Nutrition
  - AAADs asked TCAD staff to convene a planning committee to look at a variety of challenges in the nutrition program – Meeting was in mid January, 2009
    - The group discussed grant based versus unit cost contracting for nutrition to stabilize costs and increase services
    - A recommendation was made to release a Request for Proposal to promote improved partnerships at the local level to increase local funding
    - Discussed working together to establish statewide menus and improve program consistencies
- Waiver Update
  - Enrollment is moving along well and all 6,000 slots should be enrolled by year end
  - May even have to start a waiting list later this year
  - Enrollment Barriers/Delays:
    - Waiting on Physician Authorizations
    - Working with 95 different DHS offices
    - Meeting Caregiver and Safety Plan Requirements
    - Overcoming Estate Recovery Issues
    - Scheduling Difficulties – Consumer/Family Members

- We are experiencing some difficulties with the 2008-2009 Waiver contract
  - Limited Payments for Network (Provider) Capacity because standards are unrealistic – especially for Adult Day Care and Assisted Living
  - No payments earned because the QA Plan and Missed Visit Report Plan requirements in the contract have not been realized
  - Extraordinary amount of time/money has been spent on the implementation of the CMS Biller and there is no provision in the current contract to cover these costs
- Legislative Issues
  - We are hearing that there is a renewed interest in a Department Bill this session
    - Our position is and has been for many years, that under the right circumstances, elevating TCAD to a cabinet level position would be beneficial to older adults and persons with disability in Tennessee
    - We have consistently said this elevation should be singular in scope and not immediately involve consolidation of other state services, divisions or departments
  - Other Department Bill Considerations:
    - Keep the Commission on Aging membership in place as an advisory board
    - Structure the staff in such a way as to have a Commissioner who is not singular in focus
    - Possibly assign Medicaid Waiver operational responsibilities to an Assistant Commissioner
    - Install a second Assistant Commissioner to manage non-Medicaid programs and services
- Single Point of Entry (SPOE) Discussions:
  - Closely working with TCAD and TennCare to find tune the existing SPOE process
    - TCAD has convened two work sessions in the past four months for this development
    - They have involved Jim McConnell from Oregon as the facilitator
    - We have a SPOE framework in place already that needs to be strengthened to meet the new demands of the LTC Choices Act
  - Building on a Quality Foundation
    - Each component of the SPOE has been studied and recommendations have been developed and shared with TennCare
    - Five components are:
      - Outreach
      - Counseling
      - Screening and Intake
      - Facilitate Enrollment
      - Data Management

- Next Steps
  - Assure that we develop “ONE” SPOE for all LTC needs, for all population groups, and for all funding sources
  - Continue our discussions internally and with our stakeholders
  - Ask TennCare to provide a list of expectations of the SPOE for the Medicaid eligible population
  - Develop a secure web based platform to assure real time communications and coordination with all of our partners, including TCAD, TennCare and the MCOs

### **Discussion/Questions/Comments from the Committee Members**

Mickey Eldridge expressed concern about senior centers in regards to some sort of activity through Legislators to try to put money back in.

She was not sure with her position as a Commission member if it is appropriate or in-appropriate for her to talk to a Legislator or if other Commission members would want to talk to a Legislator about their concerns for Senior Centers and their funding. She expressed her appreciation for the Area Agencies and she knows that they work closely with senior centers. She was wondering if there might be some discretionary use if there is a fund balance that might be available and utilized that could be sent to Area Agencies that they have total discretion on how to allocate that. She is concerned for senior centers, directors, staff and the volunteers who work because what they are doing in the State of Tennessee is so critical in the communities. Questions: Would it be appropriate for us to communicate with Legislators? Would it be appropriate for this commission to entertain a motion where the allocations of those funds are, if there are any, to be designated to the Area Agencies at some point in time could we request a percentage of those be designated to the Agencies to go to Senior Centers since they are behind on funds anyway.

Chair Arriola advised that they could talk to your law makers but you cannot talk with the lawmakers and say “well the Commission says ...” But you can certainly go to the lawmakers and express your wishes that “you would really would like to see you do this ...”. You can as an individual you can support that lawmaker and encourage them to add some money in for that program.

Ms. Eldridge asked where specifically would we be asking him/her to add that money?

Chair Arriola advised that typically what they do, is add a budget amendment. So what you are asking him to do is add budget amendment into the budget deal. They can do that for their State dollars, or they could do that where they are asking the local government to add some money in. I’m sure that even though they say that there is not any money left in the State, there might be something there where they can find some money available. A lot of folks will be adding some budget amendments in.

On the second question, we could certainly have a vote on where we are as far as our position as a Commission I don't know as far as the weight that we would have in that area, but I know that we could that we would like to see in the end if there is any way to have money sent over to senior centers that we could try to do that. That would be more of a sense of the Commission as far as a desire ... I don't know as far as the direct line ... Typically, we go through the budget process not really liking what we see but trying to do everything we can to effectively so that it's impact is not felt as much. It seems that the senior centers are going to be hit by a direct reduction and I know it concerns us all. We have to work towards finding money in the State budget and encouraging the AAADs to do that as well.

Ms. Eldridge asked if they would have an opportunity to know when that point in time comes. If they would be advised at that time of what funds would be available and what the intent is to re-allocate back out so that the Commission can discuss it before that's done?

Chair Arriola said that they might be able to and that the May meeting won't be the end of it. The Legislator's will still be session talking about the budget. They can let the staff know that the Commission is kept up to date with how this progresses because there is a real sense of concern that they have with the cut backs.

There was discussion on Janet Lamb's Chapter 8 Legal Assistance changes.

Mr. Judson Palmer asked Ms. Lamb if the punctuation on section #31 would be cleaned up and she said that it would be cleaned up. She explained that the reason the document was presented as is was so that the Commission members could see the language that was being deleted, but, that the final document would be cleaned up.

Mr. Bernard Danzig said that he didn't understand the purpose of this document and wanted to know if this was different than Guardianship. Ms. Lamb confirmed that it is different from Guardianship. She explained that this document is Title III. Mr. Danzig's asked if the AAADs have some legal assistance within the framework services they provide. Ms. Lamb confirmed that the AAAD contracts with Legal Aid, Legal Services. Mr. Danzig wanted to confirm his understanding that if someone goes to a AAAD that needs some sort of legal assistance then there is a referral source for that person. Ms. Lamb confirmed that understanding. Ms. Lamb explained in the back there are the priority listings starting on page 8-19 of the Chapter 8 Legal Assistance and the proprietor has to ensure that at least 51% of the legal caseload will be consisted of these priority cases. If you continue down the page to (a) Income/Public Benefits, then you have the stars (\*) Social Security (Disability/Retirement), Supplemental Security Income (SSI), Food Stamps (Nutrition Assistance), then you flip the page to 8-20 and the unstarred topics Unemployment Compensation, AFDC and Tax Relief, if it is not starred then they don't have the money to do it. If it is starred, then they will take it, but you have to be over age 60 and meet the eligibility requirements. But all

those are the priorities, so if it is starred then you can refer those to Legal Aid and they should be able to get some assistance.

There were suggestions for correction from Seth Stanger on Tabitha Satterfield's Chapter 16 Options for Community Living:

- 16-4 Eligibility
  - Add a period at the end of sentence 1 "Have a residence that is a safe setting for the consumer and any service providers."
  - (4) Correct "Consumers of OPTIONS services will be adults with physical and cognitive disabilities..." to "Consumers of OPTIONS services will be adults with physical **and/or** cognitive disabilities..."
- 16-2 Definitions
  - (2) Correct "Applicant means an individual who resides in Tennessee and has completed a screening to an Area Agency on Aging ..." to Applicant means an individual who resides in Tennessee and has completed a screening **by** an Area Agency on Aging ..."
- 16-7 Screening
  - Third Paragraph, in the last sentence – Correct from "...ranked by date." to "...ranked by **earlier** date."
- 16-9 Service Plan
  - Page 13 (1) Service Plan Updates, 3<sup>rd</sup> Paragraph: "A consumer is considered in Interrupted Status if they do not receive services for thirty (30) days ..." and then the last sentence of that paragraph "The AAAD may terminate a consumer from the program if the consumer remains in Interrupted Status longer than thirty (30) days." So that makes it a total of sixty (60) days. Then at the top of page 19 (f) then you are saying that you can terminate them after 30 days after being in the hospital. (The Commission will need to work on the language for clarification in this section.)
- 16-13 Quality Assurance Components –
  - (1) 2<sup>nd</sup> sentence "...and a report is produced that documents the evaluation of provider efforts." Drop the word "is".

Chair Arriola asked the Commission if there were any other changes to bring down our policies and review and procedures. Chair Arriola advised that the Commission would probably like to have the staff make those corrections that were discussed and then they would need for the staff and the AAADs to meet to discuss the paragraph on page 13 and try to come up with some kind of language as well as to continue the other discussion as far as moving people from Options to Waiver. Suggested that by the May, 2009 Commission meeting they might have a complete document.

Mr. Hann asked Chair Arriola if he would like for them to bring it to the Long Term Care Committee before the next meeting for review and then let that committee bring it before the Committee with the updates and changes to the Commission members at the May, 2009 meeting. Chair Arriola advised that the process should be that the Commission take the document with the changes and then have their meeting, let the Long Term Care Committee take a look at that and then bring it back to the full Commission in May with

the updates and the changes that were discussed today and then they will have a vote on it. The Commission was in agreement with that recommendation.

## **NEW BUSINESS**

### **New Business #1:**

Chair Arriola advised that there was earlier discussions as far as what the Commission's position would be regarding the Waiver and the physician approved position if the Commission wanted to make a stance on that. We could certainly do that as a full Commission and we could re-send that to TennCare, the chairman of the committees.

Mickey Eldridge addressed Chair Arriola and said that if they agreed that is a concern in the Area Agencies where clients are concerned and if we are saying that they are looking at it but it is stalling and has been for four years then maybe we need to let them know that it is important to us that we get a decision on some movement. Chair Arriola advised that we know that it is being worked on through the Waiver so it is already in the process, but.

Phil Barnett's comments: The first thoughts were that when we revised the current Waiver and then the Long Term Care it all became a little too complicated to do it at the same time and so the decision was made not to try to revise the current Waiver and to try and concentrate on the new product. So concentrating on the new product, the intent was after it was granted by CMS to go back and do these things in the new product. It was already in the plan, and then as they started working with CMS they decided not to forward a revision to the old way since they were changing the whole thing anyway.

Chair Arriola wanted to go on record for doing that and maybe send such a notice to the governor, it seems that would be where we could send that communication if that is the desire of the Commission and we can get a vote on it. We could come up with some language to do that. We might want to come up with some language first, and then come to the May, 2009, meeting and after voting and send that out. I'm certainly familiar with coming up with language in a committee and voting on it and sending it over, but, I'll certainly yield to what the will of the Commission.

Chair Arriola recommended for the Commission to come up with some language and then send that to all the Commission members and interested parties and then we should discuss that at the May, 2009, Commission meeting. It is a work in progress, we've heard from staff on the Waiver so that will be sent over to them to be reviewed.

### **New Business #2:**

Chair Arriola discussed Legislation that our committee had discussed. Chair Arriola advised that there are three areas that was discussed and suggested that the Commission could go on record for:

- Statewide notification of work programs called the Silver Alerts to assist disabled and elderly missing persons

- Studies of the General Assembly which they studied said to continue a study of the effects of litigation on the nursing home industry
- Bill that requires criminal background checks for direct care employees prior to employment and that at this time has a House sponsor and no Senate sponsor

Chair Arriola suggested on the Bill that requires criminal background checks they should see if it has a Senate sponsor before the Commission moves on that Bill. Otherwise, it will stay in the House until there is a Senate sponsor.

Janet Lamb explained that as an example the Silver Alert, the Advocacy Committee voted to support the concept on that Bill. For the background check, the Commission might decide to support the concept of it and not that particular Bill.

Discussion on what to do followed. It was suggested that what they need to vote on entertaining a motion that the Commission support the concept of these three, not the Bill, but the concept so they can move forward. Chair Arriola advised that there was a motion placed on the floor that the Commission support the concept of these Bills that was outlined by our Advocacy Committee. Chair Arriola the motion was seconded by Virginia Davidson. A motion was made and duly seconded. Chair Arriola confirmed that the Commission heard the motion and asked for all of those in favor of the motion as described. Chair Arriola asked for a Roll Call Vote of the Commission members in this regard.

Cindy Warf was asked to process the Roll Call Vote:

Chair John Arriola – Aye  
 Renee Bouchillon – Aye  
 Diane Cormell – Aye  
 Bernard Danzig – Aye  
 Virginia Davidson – Aye  
 Mickey Eldridge – Aye  
 Shelburne Ferguson, Jr. – Absent  
 William Johnson – Aye  
 Ronald Jordan – Aye  
 Kenneth Kisiel – Aye  
 Timothy Martin – Absent for Roll Call Vote  
 Beauton Matthews – Aye  
 Frankie McCord – Aye  
 Barbara McIntyre – Absent for Roll Call Vote  
 Patricia Miller – Aye  
 Lynne O’Neal – Aye  
 Judson Palmer – Aye  
 Seth Stanger – Abstain  
 Mary Stockley – Aye  
 Jackie Talley – Aye  
 Carolyn Waugh – Aye  
 Wanda Willis – Aye

James York – Absent for Roll Call Vote

Chair Arriola announced that the motion passed and asked for the TCAD staff to provide a few lines on what we are all trying to say as far as those three programs.

Janet Lamb advised that she handed out a document that broke that out as follows:

- Page 1: SB0015 Elderly Persons - “Silver Alert Legislation” there are some comments on that which is why we were supporting the concept. We want it, but, we are not going to choose which one we want.
- Page 2: HB0201/SB0031 General Assembly, Studies – Currently, that is the litigation on the nursing home industry. We want them to continue to study that because proponents say that it is necessary to have the caps and opponents say that the caps allow nursing homes to be neglectful of their patients so we want to continue to study that and see if we can come to some common ground on that.
- Page 3: HB0093 Hospitals and Health Care Facilities – As introduced, requires criminal background checks to be conducted for direct care employees “prior to employment” instead of “prior to employment or within seven days of employment”. Opponents say that there is a backlog for the background checks and the proponents say it is necessary to have it completed prior to having access to vulnerable persons.

Ms. Lamb confirmed that Chair Arriola’s comment that there is not a Senate Bill on this, but, the Commission members voted on the concept and you can be broad about it. She said that she would send this information to the Commission members electronically and they can click on it to review the information.

## **OLD BUSINESS**

Mr. Mike Hann reviewed Commission Goetz’ policy in order to save State dollars for all community meetings, such as today’s Commission meeting, needed to go to a State park. Mr. Hann confirmed that we had this meeting lined up at Montgomery State Park. As you recall Mr. Shelburne Ferguson, and possibly others, really wanted to stay downtown and then the task that I was given was to do a business case analysis to see if it was feasible to stay downtown, was it cost effective to stay here, or do we need to go out to Montgomery. The purpose was to save funds. Mr. Don Floyd worked up a cost analysis and by us coming to the James K. Polk Bldg and using Training Room #3, and the conference rooms at the William R. Snodgrass Tennessee Tower Complex for our Monday meetings the cost evens out ... I think that there is about a \$300 - \$400 difference. We were spending about \$6,000 per meeting for the rooms at the hotel. There is no cost for using the conference rooms at the James K. Polk Bldg or the William R. Snodgrass Tennessee Tower Complex so it all balances out. For the people staying in the hotel rooms, we factored all of that in so within \$300 - \$400 plus/or minus. We have this room for the rest of the year unless someone with a higher priority needs it. For the AAAD Wednesday meetings, those will also be held in the James K. Polk Bldg, Training Room #3. Mr. Hann asked the Commission Members if they were happy with the arrangements made for the conference rooms. The Commission Members were happy with the arrangements.

**ADJOURN**

Chair Arriola adjourned the meeting at 3:37 P.M.

The next meeting of the Commission Members will be Tuesday, May 12, 2009, at 9:00 A.M. in Training Room #3, located on the 1<sup>st</sup> Floor of the James K. Polk Building.

**Cindy Warf**  
**Recorder**