

MINUTES

Senior & Disabled Services
Advocacy Committee
Hilyard Center
2580 Hilyard Street
Eugene, OR 97405

May 19, 2006

Members Present: Kathy Jenness, Chair; Tim Baxter, Marion Esty , Jim Patterson, , Ed Necker

Members Excused: Dianne Burch, Andrea Gillispie, Dan Arkin

Guest: Trescott Ducker

Staff Present: Patti Little, Kay Metzger

1. Call to Order

Kathy Jenness called the meeting to order at 2:24 p.m.

2. Consideration of Meeting Agenda

Tim Baxter requested that an agenda item be added regarding video conferencing. Kathy confirmed it will be added as an announcement in item 5.

3. Consideration of the minutes of the April 2006 Meeting

Ed Necker moved to accept the minutes as written, seconded by Jim Patterson. Motion passed unanimously.

4. Committee Business

a. Legislative Priorities

Kay reviewed last year's priorities with the Committee. The Committee determined that, given several members were unable to attend this month's meeting, it would be best to use this time to brainstorm potential ideas for next year's priorities. Out of this brainstorm session, a list will be created. At next month's meeting, the Committee will review the list, have further discussion, and vote

on the priorities for next year. For full representation, all members will be encouraged to attend.

List of Potential 2006-07 Advocacy Committee Priorities

A) *Representation of the Needs of the Senior and Disabled Population at the Policy Making Level for Health Care Issues*

The Committee discussed the need for the Department of Human Services Office of Medical Assistance Programs (OMAP) to be more transparent and open to consumer, advocate, and stakeholders input. At this time OMAP does not have established practices that support collaboration and the involvement of those who are impacted by policy decisions. While this may not be an issue that is appropriate to be solved legislatively, it is an issue of importance to the public and should be considered as a priority.

B) *Funding for Older Americans Act (OAA) Programs*

The Federal allocation for many of the OAA programs has been static for years, and next year the III-B and III-C1 and III-C2 programs will be reduced. These particular programs offer such services as Information and Assistance, Legal Services, Money Management, Elder Help, Group Dining Sites and Meals on Wheels. All of them are an efficient and low cost means of helping people stay in their own home. With the population aging, there is a greater need for flexible programs that can serve people prior to being eligible for Medicaid. Oregon has done a great job with the Oregon Project Independence Program, however more assistance is needed to prevent reductions in services.

C) *Equity for Transfer AAAs*

We have heard there is a possibility that 95% equity will be included in the Governor's Recommended Budget. However, there is still much work to be done and focus on this problem needs to be maintained in order to accomplish our goal.

D) *Oregon Project Independence Modernization*

At the conclusion of the last Legislative Session, OPI Modernization was passed, with funding at \$12 million approved. The inclusion of the disability population was added, along with an identified funding source (revenue raised from the property tax deferral process). The

Department of Human Services Seniors and People with Disabilities Office is now in the process of writing new rules. The Committee agreed that our work is not yet completed, and the unique nature of the OPI program needs to be promoted and protected.

E) *Safety Net Services*

In 2003, Medicaid services were cut to people assessed at Survival Priority Levels 14 – 17. People that were able to do most, but not all, activities of daily living lost the help they were receiving. In essence, the Long Term Care system in the State of Oregon cut the safety net that was keeping people independent for as long as possible. When services cannot be delivered earlier and at a lower level, consumers often deteriorate sooner than they would have had they received help. Thus, in the end people come into the system with higher, more costly needs. In an attempt to focus on prevention and safety net services, the Committee felt it important to consider this as a potential priority.

F) *Protecting the Values of the System for Oregon’s Seniors and People with Disabilities*

Oregon’s model of long-term care is rooted in values that support the needs of the person to maintain independence, choice and dignity. It has been a social model, considering the person as a member of the community, rather than a medical model of care. These values should drive the system, not the “bottom-line”. The Department of Human Services Seniors and People with Disabilities Office is in the process of evaluating the future of long-term care in Oregon. Activities to protect our values-based system should be considered as a potential priority.

G) *Prescription Drug Coverage*

The cost of prescription drugs is an issue to many seniors and people with disabilities. Additionally, coverage through Medicare Part D can be confusing and the system is hard to navigate. The Committee agreed that this issue should be on the list for consideration as a priority.

b. Status Report on Tax Exemption Paper

Kay reported that the Tax Exemption Paper will be presented at the LCOG Board meeting in June.

c. Other business

Kay reminded members of the DHS Budget Hearing on Monday May 22nd and the Community Forum for the Future of Long Term Care to be held on Thursday May 25th.

5. Announcements

Tim Baxter announced that at a recent meeting of Office of Medical Assistance Programs Durable Medical Equipment Committee, it was announced that video conferencing would be expanded in the near future. This is good news and supports our efforts in this area.

6. Reminder of Next Meeting – June 16th, Hilyard Center

7. Adjourn