

## MBA Recommendations to the Legislative Task Force on Aging

### Introduction

As the federally designated State Unit on Aging (SUA) with responsibility for administering federal Older Americans Act (OAA) dollars, the Minnesota Board on Aging (MBA) has a mission to ensure that older Minnesotans and their families are effectively served by state and local policies and programs, so we can age well and live well. While the State of Minnesota is recognized as a national leader in aging, the system of services, funding and agencies that has developed over the years is complex. It is within this complexity that the MBA, as a volunteer working board, strives to fulfill our vital mission.

The partnership between the MBA and the state's Department of Human Services has resulted in good work. Over the years, the state has developed innovative initiatives, including "Generations," the Seniors Agenda for Independent Living, Project 2030, Own Your Future, and many others, which reflect Minnesota's proactive efforts to address and adapt to demographic shifts. However, it has not been enough. ***The systems and structures supporting aging lag the changing demographics.*** Older persons face obstacles, such as inadequate transportation systems, leaving them marginalized and resulting in increased health risks and less vibrant communities. The complexity in the systems is felt by people and their families as they work to problem-solve and seek out needed resources leading to frustration, which has led to calls for louder advocacy that reaches the ears of the governor.

During a recent Legislative Task Force on Aging session, an analogy was made to the aging work in Minnesota being like a bus that is full of good, caring people eager to make a difference, but the bus lacks a driver. The MBA suggests it is not only the driver that is missing, but also a shared vision of where the bus is going and general maintenance. While there are plenty of people standing on the curb encouraging the bus to move, to get back on the road we need to start with fixing the GPS, inflating the tires, and servicing the engine. To further complete this analogy, the people on the curb are older Minnesotans, the bus is the investment and the priority placed on aging, the riders are all the people working in aging, and the GPS is complex coordination among state agencies. The driver, a shared vision, and support for ongoing maintenance are what we are seeking with this recommendation and the work of the Legislative Task Force on Aging.

Getting the bus moving is a big and imminent challenge. However, the MBA believes the challenges can be solved through a collective action that embraces the knowledge and first-hand experience of older people in Minnesota. Additional funding will be needed but money is not the only solution to the overall challenges. There are strategic structural changes that can be made to reduce complexity and gain efficiencies to build upon what is working and rebuild only where necessary. These changes will enable the mission of the MBA to be more fully realized.

***The MBA is committed to leading the effort to identify and implement creative solutions that will pave the way toward all Minnesotans thriving as we age.*** It is in this spirit that we submit these recommendations to the Legislative Task Force on Aging.

## Vision

The MBA's vision for this recommendation is to ***create a supportive and inclusive society in Minnesota where aging is celebrated, services are accessible, and older people actively shape policies to ensure we can all thrive as we age.*** Our vision focuses on creating a strong platform for advocacy by building upon Minnesota's unique strength with collaborative work to eliminate current structural boundaries. Our vision embraces the dream of a future for Minnesota where communities are designed to support us all as we age and ensuring that growing older does not mean more barriers to navigate in what should be a celebrated phase of life. Advocacy by and with older adults would be robust and impactful and include lived experiences to shape policies and decision-making. Public knowledge of services for aging would be widespread, making it easy for everyone to access the support we need throughout our lives. As Minnesotans live longer healthier lives, it is imperative that we create a society where aging is not just accommodated, but fully supported – where each of us, regardless of age, has the resources, respect, and opportunities to contribute and thrive within our chosen communities.

## Considerations

Much has changed in the almost 50 years since the legislation that established the MBA was enacted. The need and expectation for advocacy by the public has outpaced what the current structure of the MBA is able to support. Therefore, the MBA initiated and proposed legislation for the Legislative Task Force on Aging to identify gaps in our current framework, as well as identify key elements for a better structure for supporting advocacy and advisement to elevate the voice of aging at the state level.

To assist in this effort, the MBA is proposing recommendations that embody what we believe are key elements of a new structure to elevate advocacy for older adults throughout the entire state system. Specifically, the MBA recognizes any structural change must:

- Give voice to older people by providing a platform for clear and compelling cabinet level leadership and advocacy driven by what matters to older Minnesotans, upholding the belief that policies and local interventions need a state structure that values and seeks out the voice of older Minnesotans.
- Develop and implement a comprehensive Multisector Blueprint for Aging that spans all state agency goals and roles impacting aging.
- Strengthen data collection, analysis, research, and planning functions to optimize resource distribution, enhance effectiveness, measure impact of aging services across the state and understand how state funds related to aging are allocated and utilized.
- Directly combat ageism, which is defined as discrimination against older people due to negative and inaccurate stereotypes. Diversity, Equity, Inclusion, and Access (DEIA) is a central tenet of the MBA and we see aging as the great unifier – we are all aging.
- Increase public awareness of available programs and services and ease navigation for older persons, their loved ones, and caregivers.
- Support the work of the Age-Friendly Minnesota Council, which is a collaborative statewide effort across state agencies and community organizations to make our systems and communities more inclusive of and responsive to older people. This is part of a global movement to prepare for an aging

population and ensure that older people are valued and fully integrated into our communities and recognized for their contributions to the communities where we live.

- Maintain the efficiencies of service delivery administration co-location, which has been paramount to Minnesota’s ability to leverage existing public programs and various funding sources, such as the Older Americans Act, Medical Assistance, Medicare, and state general funds. This includes preserving the separate duties of the State Unit on Aging to meet the federal requirements of the Administration for Community Living (ACL) and the Medicaid single-state agency, which is required by Centers for Medicare and Medicaid Services.
- Leverage existing expertise rather than duplicate it.
- Maintain and expand collaborative partnerships at the federal, state, and local levels, with an emphasis on those who bring valuable firsthand perspectives.
- Extend the focus beyond provision of services to the creation and support of sustainable communities across the lifespan.

## **MBA Process for Developing Recommendations**

Through extensive small group discussions and consultations with MBA members, partners, and subject matter experts— including leaders of the Area Agencies on Aging, the Age-Friendly Minnesota Council, the Minnesota Leadership Council on Aging, Elder Voice Advocates, and the Minnesota Council on Disability — the MBA has concluded that a new platform to support coordination and advocacy for aging across state government is needed. This new proposal builds upon existing successful elements while identifying **“and”** opportunities that enhance the visibility of aging issues in Minnesota. We do not want to disrupt the elements that work well in this state nor duplicate what is already successful. But we agree significant changes are needed to increase advocacy and accountability for older people served by all state agencies.

## **A Proposed New Structure**

***Aging must be elevated to a higher priority within the Minnesota state government*** with dedicated visibility and influence at the highest levels of decision-making. These recommendations would strengthen and change the current structure of the MBA in four essential ways:

- Provide a direct line of communication to the governor and their office to give voice to older persons
- Allow for resources to support advocacy, research/analysis, community education and outreach, and cross-agency coordination
- Continue the collaboration and support for the Age-Friendly Minnesota Council and its work on the Multisector Blueprint for Aging
- Revise MBA’s legislative statute to strengthen its authority to work directly with the governor and their office, the legislature directly, state agencies, and Tribal Nations

These changes require the creation of a ***New & Renewed Aging Entity*** responsible for leading planning, coordination, and oversight of all programs addressing the needs of Minnesotans as we age and issues related to aging throughout the state. This Aging Entity would have a citizen’s advisory council and a leadership

position that would sit on the governor's cabinet. This position would be responsible for managing staff, overseeing projects, and ensuring directives are carried out.

The primary role of the Aging Entity would be to advocate for and coordinate policies affecting older people throughout the state system and in collaboration with community partners to fulfill the goals of both the MBA's State Plan on Aging and AFMN's Multisector Blueprint for Aging. The advisory council members would be appointed by the governor and would include older people, family caregivers, and subject matter experts in aging.

The advisory council would enhance the role of the current MBA structure by broadening the scope of its advising and advocacy functions to all services, sectors, and levels of government. The Age-Friendly Minnesota Council would be part of the new Aging Entity and the cross-sector partnerships already developed would be leveraged to achieve a comprehensive and integrated planning approach to aging services across the state. The new Aging Entity would also be supported by dedicated staff exclusively focused on supporting the work of the Aging Entity, without the burden of competing priorities.

### **Investment in Oversight, Monitoring, Planning, Evaluation, Research and Data Collection**

The Aging Entity would not directly administer older adult services. Instead, it would have staff expertise and resources to focus on oversight, monitoring, research and data collection for planning, evaluation, and budget recommendations to ensure coordination of programs serving older people in keeping with the MBA's State Plan on Aging and AFMN's Multisector Blueprint for Aging. Permanent and adequate funding for the new Aging Entity and the Age-Friendly Minnesota Council would be required to effectively carry out these critical functions. It is essential to allocate appropriate resources, including targeted funding, to adequately support staffing and expertise required to ensure the Aging Entity and Age-Friendly Minnesota Council have capacity to fulfill their responsibilities without compromise.

The Department of Human Services would continue to provide administrative support to the SUA and Medical Assistance services and programs to assure optimal alignment and efficiency of resources. SUA administrative duties would be updated. We recommend continuing oversight by an advisory council for the SUA, which could be a subset of the new Aging Entity's advisory council and could serve as the SUA. Advocacy responsibilities would shift to the new Aging Entity's advisory council, thus removing concerns about dual roles or conflict of interest for members engaged in advocacy. See more detail on this in the section below titled, ***"Important Context of Current MBA/DHS Service Delivery Structure"***.

### **Duties of the Proposed Entity**

The new Aging Entity and its advisory council would have the following responsibilities and resources to fulfill them:

- Advocacy for state and national policies to support successful aging throughout the lifespan and address the needs of Minnesotans as we age in communities and residences of our choice.
- Advising the governor and their office, legislature and state and federal agencies about aging policy.
- Seeking public input from older Minnesotans, service providers, counties, AAAs, tribal organizations, and policy experts throughout the state.

- Providing oversight to and incorporating the Age-Friendly Minnesota Council and its staff. This would allow for seamless coordination and the ability to serve as a hub for integrating grassroots innovations into state agency work, advising on policy, and monitoring progress toward the multi-sector plan on aging.
- Development and management of a coordinated State Plan on Aging and Multisector Blueprint for Aging that outlines initiatives and policies for aging spanning key state agencies (i.e. DHS, MDH, MDOT, Commerce, Housing, DEED and Education, etc.)
- Monitoring, reviewing and approving agency functions, programs and budgets related to aging services to address efficiencies, assess gaps and improvements, ensure coordination, and provide leadership on necessary changes.
- Data collection, analysis, evaluation, and research to monitor and track expenditures and programmatic success for programs serving older people and to identify trends and innovations to meet future challenges.
- The new Aging Entity and its advisory council would be charged with coordinating efforts to address priority issues for older Minnesotans, including:
  - Simplifying access to existing services through increased public information and education on available services, supports and resources for older people, families, and the general public.
  - Promoting options for in-home services or supports to allow older Minnesotans to remain at home.
  - Developing affordable insurance options to support middle income older Minnesotans who are not eligible for Medicaid benefits.
  - Addressing healthcare workforce shortages in primary care and direct care services.
  - Developing rural and urban transportation policies that accommodate older people's needs.
  - Expanding affordable housing options for older people.
  - Combating isolation through socialization and community involvement opportunities that support healthy aging.

***Given the appropriate authority and resources, this approach promotes needed changes at a modest cost while also preserving continuity of collaboration within the service delivery system that is already in place.***

#### **Important Context of Current MBA/DHS Service Delivery Structure:**

To further understand MBA's recommendation, it is important to understand some of the current agency functions and funding sources for aging services in Minnesota. Operating in accordance with a Memorandum of Understanding, the Minnesota Department of Human Services (DHS) and the MBA have a unique and coordinated partnership that is responsible for creating, influencing, and implementing policy for Medicaid Home and Community Based Services (HCBS) and other long-term care services and supports. Much of the relationship stems from federal funding and regulatory requirements specific to Medicaid, Medicare, and the Older Americans Act (OAA).

The federal Centers for Medicare and Medicaid (CMS) require that states designate a single state agency with a Medicaid Director to manage Medicaid funds, and DHS is the designated single state agency for Medicaid in Minnesota. The DHS Health Care Administration is led by an Assistant Commissioner, who also serves as the Medicaid Director. This position manages the overall delivery and payment of Medicaid services, which include nursing home care, home and community-based services (aka HCBS), and Medicaid state plan services for older adults. In addition, the DHS Assistant Commissioner for the Aging and Disability Services

Administration (ADSA) is responsible for managing the administrative policy of Medicaid covered HCBS services for older adults, grants for other long-term services and supports, and nursing home care. Therefore, Medicaid services for older adults are jointly managed within DHS between the two Assistant Commissioners.

In addition, the MBA is designated the State Unit on Aging (SUA). The SUA is required by the federal Administration for Community Living (ACL) and is responsible for OAA funded services delivered through the seven (7) Area Agencies on Aging (AAAs) statewide. The MBA is responsible for appointing an Executive Director to manage the State Unit on Aging, who also functions as the Director for the Aging and Adult Services (AASD) Division within ADSA. This dual leadership role provides coordination across the OAA services delivered through the AAAs, Medicaid HCBS services, and nursing home care.

The MBA's proposal leaves the administrative responsibilities for service delivery and management with DHS, which has been in place for years. However, there has been concern that MBA's advocacy voice has been curtailed by its relationship with DHS. MBA's proposal for a new Aging Entity with an advisory council would provide the opportunity to elevate the advocacy role and remove concerns regarding possible conflicts of interest.

Many operational processes such as assessment and eligibility requirements, federal reporting and data management are intricately designed and linked across Medicaid and OAA programs and services as well as other state funded services under DHS. These services and duties cannot be easily severed from the management of other Medicaid services within DHS and its oversight of CMS HCBS waiver policy. The MBA strongly encourages taking into consideration the complexity, expense, and disruption associated with splitting these responsibilities between two separate agencies or entities, as well as the potential loss of collaboration and access to shared expertise.

## Acknowledgment

As a volunteer board, the MBA recognizes we may not have the full breadth of expertise required to comprehensively design a state structure. However, the recommendations we are proposing are the result of many conversations with aging partners and other interested parties. While we cannot speak for all communities in Minnesota, our intention is to present a vision for aging that is part of an ongoing design process to move us closer to the goal of every Minnesotan aging well and living well. Our recommendation is not meant to be "the" answer nor is it meant to represent every differing viewpoint, as there are many voices and perspectives that have yet to be heard. We don't see this as the end of the conversation. Overall, we believe the best solution will be co-designed by all interested parties.

***By seizing this opportunity, we can positively impact the lives of older Minnesotans, which includes all of us as we age, while supporting vibrant communities. The MBA is committed to remaining actively engaged throughout this process to ensure the recommendations made by the Legislative Task Force on Aging in its final report reflects the best possible solution.***