

Advisory Council on Aging

The Advisory Council on Aging meeting was held via Microsoft Teams and in person on Tuesday April 9, 2024.

Members Present: Cheryl Anagnopoulos, Erik Gaikowski, Tammy Hatting, Cody Seehafer, Brett Hoffman, Michele Juffer, Jenna Douglas and Justin Jones

Members Absent: James Severson

Public Participants: Michelle Kutner, Maggie Drake, Susan Gregg

Welcome (Heather Krzmarzick)

Heather welcomed the group and turned over to Chairman Anagnopoulos. Chairman Cheryl Anagnopoulos called the meeting to order at 1:02 PM CST.

Approval of Agenda (Cheryl Anagnopoulos)

The agenda was reviewed. Tammy made a motion to approve the agenda, Erik second. Motion passed.

Approval of Last Meeting Minutes (Cheryl Anagnopoulos)

Meeting Minutes from the October 2023 meeting were attached to the invite for members to review. Motion for approval by Cody, 2nd by Tammy. Motion passed.

Council Membership (Heather Krzmarzick)

Heather Krzmarzick, LTSS Director led introductions of new council members, giving each new member an opportunity to introduce themselves, as well as the public participants.

Long Term Services and Supports Updates:

Heather discussed updates for the Division of Long Term Services and Supports (LTSS) as follows:

New and Proposed Federal Regulations

- ***Older Americans Act (OAA)***

There are many policy and procedure requirements in the updated OAA. LTSS is behind the scenes working on policies, which requires doing the research to back up the changes and ensure there are not unintended consequences. Some of the changes to the OAA include defining client service priority (greatest need – social, economic.); state plan on aging requirements; Title III and Title VI 6 coordination; outreach and coordination with tribal entities as well as changes to specific services. Nutrition services changes include requirements on congregate vs home delivered meals and clarifying grab and go meals and parameters for use of funds. Family caregiver support services changes including federal definition of caregiver, eligibility for respite and some of the supplemental services. Legal assistance services, which prevent older adults from falling under guardianship; emergency

management plans. The Ombudsman program also had some policy changes that LTSS is working through.

- ***Adult Protective Services (APS) Regulations (Proposed)***

Changes to APS regulations are also quite extensive. The proposed rules would require drastic, systematic change for APS, including a significant increase in staff. DHS has a small APS team, and these requirements are not funded.

- ***Ensuring Access to Medicaid Services (Proposed)***

The proposed rules establish a new strategy for oversight, monitoring, quality assurance, and quality improvement for HCBS programs with an emphasis on transparency. Specifically, the proposed rules strengthen person-centered service planning and incident management systems in HCBS; Require states to establish grievance systems; Require that at least 80% of Medicaid payments for personal care, homemaker, and home health aide services be spent on compensation for the direct care workforce (as opposed to administrative overhead or profit); and require states to publish the average hourly rate paid to direct care workers delivering personal care, home health aide, and homemaker services. On the surface well intended, but there could be unintended consequences of this.

Legislative Session Updates

SB 46 – This was a DHS bill. Currently there is a statute that prohibits DHS from sharing information regarding a referral to the referring party (for example, Avera refers Betty and they contact DHS to find out where the referral is at; we could not share anything); however, with SB 46 passing unanimously and signed by the Governor, DHS can now share the referral status when a referring party emails Dakota at Home, which will allow for better care coordination.

Referring status' that can be shared include:

- Application sent, awaiting return
- Consumer contacted
- Referral assigned for assessment
- Referred to provider for services
- Unable to reach consumer
- Referral considered (or evaluated) and closed

HB 1016 – PACE (Program of All-inclusive Care for the Elderly). DHS signed a letter of intent to conduct a feasibility study to determine if PACE would be a good option in SD.

Typically, with PACE programs, dual eligible Medicare and Medicaid beneficiaries enroll in PACE and receive comprehensive services in a PACE center, similar to adult day services, with an interdisciplinary team of health professionals (nurse, dietician, etc.); This would be an alternative to being on the HOPE waiver. Participants choose PACE or the HOPE waiver. Financing for the program is capped. The PACE center would receive payment and be expected to provide all of their care needs such as transportation to nursing home care. This would likely be more feasible in larger communities. There are pros and cons to the program so it will be good to do the feasibility study. An RFP is anticipated to be released in April.

HB 1014- This was a bill regarding nursing home consolidation and a funding mechanism for capital costs; however, the bill did not advance.

SB 80 - This bill appropriated \$2M to DHS for Technology equipment grants for state licensed Medicaid providers primarily serving older adults. LTSS plans to release the grant application in April with awards announced in July 2024.

SB 209 – This was a sister bill to SB 80, appropriating \$5M of Department of Health (DOH) ARPA funds for telemedicine for nursing home and assisted living providers. DOH is working on this bill.

Personal Needs Allowance- This was in the General Appropriation bill and increases the amount of money residents in nursing homes, assisted livings and community living homes can keep for personal needs (clothes, phone, etc.) from \$60 to \$100 a month. LTSS is partnering with the Department of Social Service (DSS) to implement.

Funding – Nursing facilities received 4.3% increase (94% to 98% of methodology; assisted livings received 18.3% in base rate, 13.8% and 14.3% for tier 1 and 2 (85% to 98% of methodology); all other providers received a 4% increase. LTSS is working through rates and provider notifications.

Justin Jones inquired about the effective date. Heather indicated that July 1, 2024, is the effective date of all of the items outlined above.

Rate Methodologies

All services have a rate review completed by a vendor each year to inform DHS and the legislature where costs are in relation to rates, which is available on our website.

In 2023, LTSS conducted rate methodology reviews for Structured Family Caregiving (SFC), Community Living Home (CLH) (small family home), Adult Day, Assisted Living (AL) and Meals. The reports are available on DHS website at dhs.sd.gov under the LTSS provider portal. There are some planned changes from this work to include adjustments to the tier calculation for SFC, CLH and AL, which overall will have a positive impact to providers and caregivers receiving a higher tier, which is the basis for reimbursement. LTSS is still reviewing the recommendations regarding the meal program. One recommendation was to have the same rate statewide. Currently, each provider has a different rate. If one rate, it would allow DHS to adjust costs based on different levers more easily. The recommendation on meals is still being evaluated to determine how to proceed. One change that was recommended but is not being implemented at this time is increasing the percent of required pass through to the caregiver for the stipend for SFC.

LTSS is working on provider contracts (specifically In Home, Assisted Living, Nutrition, Adult Day) and communications to providers about the new rates post-session; providers are not allowed

to charge less to their private pay consumers and with the great work in rates increasing, we are seeing some rates lower than state rates to account for this.

Brett asked if there are rate methodology studies slated for this year. Heather reported that there are not. Some of the groups were combined, so all rate methodologies have been completed for this five-year period within LTSS.

State Grants

With the passage of SB 80, technology equipment grant application will be released in April and awards in July 2024.

In the 2023 legislative session, there was a \$2M appropriation to DHS for enhancing adult day. Grant applications were accepted through June 9th, 2023 for up to \$500,000 per location. 5 applications were approved, and one entity decided to withdraw so opened for round 2 with applications due Feb 9th. Expanded or additional locations include: Belle Fourche Adult Day, Adult Day Center of the Black Hills, The Homestead (Lake Norden), Good Samaritan Society – Howard, and Active Generations in Sioux Falls. Based on the proposals, this would increase adult day by at least an additional 100 participants.

Administrative Rules

Level of Care Rules- DHS planned for these to go through the November 2023 Interim Rules Committee, but due to LRC questions they were delayed to Summer 2024. These rules align with the HOPE waiver amendment, which adjusted the medical review team to the nurse consultant only and changing the mental health eligibility from requiring weekly mental health therapy to participating in the CARE or IMPACT program. The public comment period was conducted already with waiver amendment and approved by the Centers for Medicare and Medicaid Service (CMS), but will occur again this year for administrative rules. Community Mental Health Centers Association provided comment of support previously.

HCBS Waiver (HOPE Waiver) Rules are planned for the July Interim Rules. Updates include adding definitions, adding all of services available through the HOPE waiver, adding reasons for discontinuance or denial of services (participant has inappropriate or abusive behavior, refuse to cooperate with department or service provider, failed to contribute to cost of services). There will be an additional change that we need to finalize internally that will help bring parameters to the program to ensure financial substantiality based on our work with our vendor and based on best practices in other states. This change, along with the updated rate methodologies and the personal needs allowance change, will be updated in a waiver amendment, which will align with the effective date of the Administrative Rules.

Online Resource Directory RFP

Heather viewed the current resource directory online. LTSS will be releasing an RFP to solicit proposals for the online resource directory for Dakota at Home. If you go on our website dhs.sd.gov or search for Dakota at Home, you can find the resource directory, which will display different options based on your search of key words or zip code – like assisted living, etc.

Beyond what is available today, we are looking for a user-friendly searchable directory that offers printable search results and fully accessible with Section 508 of the Rehabilitation Act as well as an engaging user experience.

State Plan on Aging

The current state plan on aging spans 2021-2025. An RFP was released to complete the next plan effective October 1, 2025 through September 30, 2029. The plan is required by ACL (Administration for Community Living), so it is focused on the Older Americans Act related to assisting older adults, their families and caregivers. It involves a needs assessment survey of stakeholders, a strategic blueprint for coordination efforts to meet the needs of older adults.

There are many new requirements and considerations for the State Plan on Aging, with the updated OAA regulation. There will need to be a focus on determining the “greatest social and economic need” as this is a requirement. Additionally, LTSS will be looking at the needs of formal and informal caregivers. Heather anticipates working with the Advisory Council as stakeholders in this process as well. There will be more information as work progresses.

Dementia Dialogues & Alzheimer’s Disease Program Initiative grant (ADPI)

LTSS released an RFP for Dementia Dialogues. This program is a nationally registered and evidence-informed, intervention program. Dementia Dialogues® is a 5-module training course designed to educate community members and caregivers (formal or informal) for persons who exhibit signs and symptoms of Alzheimer’s disease and related dementias (ADRD).

SD Foundation for Medical Care was awarded the contract and will become trained as a trainer in Dementia Dialogues® and will conduct a minimum of eighteen (18) in-person training workshops per year to various organizations and stakeholders in South Dakota with a focus on rural and frontier areas.

The Alzheimer’s Disease Program Initiative grant (ADPI) is anticipated to be released soon and planning is underway for LTSS to apply for the ADPI grant. The application will address two objectives:

- The creation, expansion and sustainability of a dementia-capable state HCBS system that includes Single Entry Point/No Wrong Door (SEP/NWD) access for people with dementia and their family caregivers (via Dakota at Home).
- Ensure access to a comprehensive, sustainable set of quality state HCBS that are dementia-capable and provide innovative services to the population with dementia and their caregivers.

LTSS has done some great things in this arena already. Trulata, a web-based education site, has been made available as a resource for caregivers. LTSS will continue to work to advance efforts for caregivers, along with the application for the ADPI grant. The Department of Health (DOH) has hired a Project Coordinator for the BOLD (Building Our Largest Dementia) Infrastructure grant DOH and LTSS has met and is aligning work there as well.

LTSS Team Training

LTSS has worked to provide specific training for Dementia. In addition to all staff receiving training from Teepa Snow (nationally recognized dementia trainer), LTSS has at least one case management specialist who has done training specific to dementia and is a point person within their region for any dementia related questions.

LTSS is also working on the same set up and training for mental health, as this is increasingly something our team encounters and we want them to be prepared to navigate and help those living with mental health needs.

Heather advised that the person identified is specific to a point person for the LTSS staff. Providers would always have the Case Management Specialist as the point person still.

Statewide Coordinated Public Transit – Human Services Transportation Plan

<https://southdakotacoordinatedplans.com/>

Heather shared the above link and that the Department of Transportation (DOT) is conducting sessions to hear from the public about transportation needs specifically for human services. LTSS is participating to provide input as well.

Council Input, Ideas or Questions

Heather and Cody have been in communication regarding transportation needs. There is a study currently occurring (see above). Cody shared his experience with public transportation with the group. Cody stated that he has a difficult time getting into a regular vehicle. Cody stated that there is only one provider that has capabilities to meet his transportation needs, and they only operate until 6 pm and more limited hours on Saturday and none on Sunday. Other transportation companies will transport a wheelchair user, but require transfer to the front seat, which Cody is unable to do safely. Cody reports missing multiple community and church events and family get togethers. Cody would like to add an option for wheelchair users and have transportation operate 24 hours. Heather forwarded this information to DOT for the study.

Tammy discussed how much work has taken place. The website, the rates, the studies. There are so many good things happening. Tammy looks forward to the PACE study happening as well. Tammy has also heard other experiences related to transportation.

Brett also expressed appreciation of all the work being done. The rate methodologies and the legislative studies on sustainable long term care models and 9-10 pieces of legislation, nearly all of which became law. Just a very proactive time for how long term care is going to look and how we are going to care for the aging population.

Heather expressed the appreciation of the collaboration and partnering.

Public Comment

Maggie expressed appreciation for making the meeting public. She enjoyed listening and thankful to join.

Cheryl expressed appreciation for Maggie's comments.

Next Meeting

October 8th from 1-3pm. Please let us know if there are any agenda items to add for next time.

Adjourn

Motion to adjourn by Erik. Second by Tammy. All in favor to adjourn. Meeting adjourned at 2:09 PM