

# Kitsap County Division of Aging & Long Term Care Advisory Council

614 Division Street, MS-5, Port Orchard, WA 98366

Phone: (360) 337-7068 ♦ 1-800-562-6418 ♦ Fax: (360) 337-5746

## Advisory Council Meeting

**Date:** June 21, 2017

**Time:** 11:30am -1:30pm

**Location:** Cascade Room, Givens Community Center  
1026 Sidney Ave., Port Orchard

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## A G E N D A

- 11:30 1. Call To Order  
2. Welcome & Introductions  
3. Opportunity for Public to Address the Board on Agenda Topics  
4. Approve Agenda  
5. Approve & Sign Previous Meeting Minutes  
a. May 17, 2017 Meeting Minutes (Attachment 1)
- 11:40 6. Medicaid Transformation Demonstration (MTD) Overview, Handout
- 12:10 7. Workplan Goals  
a. Legislative Updates- Local, State, and Federal (Attachment 2a, 2b & 3)  
b. Council Member Report of Community Outreach Advocacy (3 minutes)
  - What did you do since the last meeting?
  - How many people were involved?
  - Brief Overview
  - Are there any items requiring action from the Council?b.1. Transportation – Kitsap Transit Forums (6 minutes)  
b.2. State Council on Aging (6 minutes)
  - Revised Council Bylaws, June 26<sup>th</sup> (Attach 4)
- 1:20 10. ALTC Report  
a. Dashboard Report: Accomplishments & Challenges (Attachment 5)  
b. Scheduled outreach events (various flyers):
  - Farmers Markets: Poulsbo June 24, Port Orchard July 8 & 29
  - Senior Lounge, coverage: August 23-27
  - 2018 OAA 2018 Conferencec. Potential New Council Member- 1 seat, 12/2017 appointments
- 1:30 ADJOURN

**NEXT COUNCIL MEETING: July 19, 2017**

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## **May 17 2017 Aging Advisory Council Meeting Minutes**

### **Cascade Room, Givens Community Center**

1026 Sidney Ave., Port Orchard, WA

**1. Convened at 11:32 a.m.**

**2. Members Present:** Al Pinkham, Susan Welsh, Connie Wurm, Gail Campbell-Ferguson, Audrey Barbakoff, Sharon Cromley

**Members Excused:** Mari Van Court, Rosemary Pinneo, Toni Fuller

**Members Unexcused:** Michaelene Manion

**Guests Present:** Linda Museus

**Staff Present:** Stacey Smith, Myriah Howard

**Public Address:** None. Al began the meeting with a brief overview of “ground rules” regarding a two minute time limit for each council member during outreach reports. For items requiring more than two minutes, he requested Council members notify Division staff and request additional time on the meeting agenda.

**3. Approval of Agenda:** The meeting agenda was reviewed.

a. Al moved to approve agenda, Gail seconded. The agenda was approved.

**4. Approval of Minutes:**

- Al moved to approve April 19, 2017 meeting minutes, Susan seconded. April 19, 2017 meeting minutes were approved with no changes.

**5. Workplan Goals**

a. Legislative Updates- Local, state, and federal

- Stacey gave a brief overview of current legislative items related to stalled state budget negotiations and federal funding concerns for seniors and Medicaid population.

b. Council Member Report of Community Outreach Events & Hours

- Al discussed his ongoing outreach with Peninsula Community Health Services. He also announced that Ambrosia Catering has a buffet the first Monday of each month; he noted it as a place of outreach to seniors in the community.
- Susan discussed her ongoing outreach with RESULTS (poverty advocacy group). She announced her interest in joining Senior Lobby. In addition Susan stated her interest in becoming the Kitsap representative for The Washington State Council on Aging.

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- Gail discussed her ongoing caregiver outreach in faith-based settings. She also gave a brief overview of a recent PEO (Philanthropic Educational Organization) meeting. Additionally she attended a meal at the Silverdale congregate meal site, served by Meals on Wheels Kitsap.
- Audrey announced several library services and programs launching this summer, including a 100 hour reading program for all ages.
- Connie announced Kitsap Transit's upcoming transportation meetings in the community. She will be attending, advocating for seniors and providing follow-up information at the June Council meeting.
- Sharon discussed her ongoing outreach with Peninsula Community Health Services.
- Stacey gave a brief overview of the Older Americans Conference. Council members who attended the conference discussed their likes, dislikes and suggestions for next year. It was noted that several council members have interest in volunteering for the next conference.

## **6. State Council on Aging (SCOA)**

### **a. Overview of April SCOA meeting**

- Stacey discussed details pertaining to the nomination of the Kitsap AAA representative for SCOA. A provision in the current bylaws does not allow the SCOA representative to be a voting member of the Council. Connie suggested changing the bylaws. The Board discussed modifying the "shall" to "may" and resubmitting the revised bylaws for Board of County Commissioner approval.
- Susan gave an overview of her experience at the April SCOA meeting. She also expressed that she would like to be the Kitsap AAA representative for SCOA.
- Connie motioned to nominate Susan as the Kitsap AAA representative for SCOA, Sharon seconded the motion; all members present approved.
- Gail moved to revise bylaws (as noted above), Connie seconded; bylaws will be revised from "shall" to "may" and resubmitted for Board of County Commissioner approval.

## **7. ALTC Report**

### **a. Dashboard Report: Accomplishments & Challenges**

- Stacey provided a brief overview of the dashboard report; Al presented a diagram to describe the process and outcomes within the dashboard.

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- Handouts were distributed to all for upcoming events. Stacey announced several opportunities for community outreach including Farmer's Market, Save a Life, MIPAA, and more.
- b. Potential New Council Member(s)
  - a. Stacey announced that three community members have applied and/or showed interest in applying to become Advisory Council Members.
- c. NeoGov Notification
  - a. Stacey asked the council members for feedback on NeoGov meeting notification system; it was agreed to proceed using the system in lieu of email notification.
- d. 2017 Calendar of Events (handout)
- e. June Presentation:
  - Stacey requested to give a brief overview of the Medicaid Transformation Project (MTP), Initiative 2 in June. Council members agreed the June presentation would be highly beneficial.

### **ADJOURNMENT**

The meeting was adjourned at 1:12 p.m.

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Mari Van Court, Chair

May 23, 2017

This morning President Trump released his first comprehensive budget proposal that includes funding recommendations for every part of the Federal government, as well as a wide range of legislative proposals that would make significant changes to a large number of Federal programs and policies. The recommendations cover Federal Fiscal Year 2018 (FY18) which runs from October 1, 2017 through September 30, 2018. Today's release provides considerably more detail regarding individual programs and legislative proposals than the Administration's "skinny budget" that was released in March.

The document is not a binding statement of policy, nor is it a specific legislative package that will enact changes to programs and financing levels. Instead, it is a proposal that Congress must digest and consider as it develops legislative and appropriations bills throughout the year. Many Congressmen in both parties have expressed concern about the scope of reductions proposed, making it unlikely that the budget will be enacted as written. However, the President does have regulatory authority to shape some programs and the Administration will likely engage with Congress to attempt advancement of some of the policies included in today's release.

Overall, the President's Budget for FY2018 presents a vision of the Federal government that would consolidate and reduce the support currently provided through an array of different agencies and programs. Instead, the Federal government would shift its focus towards safety and security related activities and would rely on the private sector, nonprofits, and philanthropic organizations to deliver and coordinate many services and programs currently administered by the government. As part of this vision, the budget includes a number of proposals that would significantly change the structure of health and human services programs.

Many programs within the Older Americans Act are level-funded in the proposal, including the Nutrition Services Programs; HCBS supportive services; Family Caregiver Support; the Long-term Care Ombudsman Program; Aging and Disability Resource Centers; and Elder Rights Activities. Notably, the document uses the original FY2017 figures instead of the recently enacted omnibus funding legislation; thus, any increases (or decreases) contained within the current appropriation are not reflected in the this

budget. This results in a slight discrepancy from current funding levels to the Administration's proposals despite the stated intent to 'level-fund' the programs.

The budget does include some reductions in and elimination of aging-related programs. As part of the vision to reframe the Federal government's role, the budget proposes a gradual elimination of the Corporation for National and Community Service. As part of this proposal, the Corporation's Foster Grandparents, Senior Companion, and Retired Senior Volunteer programs would all be eliminated in FY18. Similarly, the document proposes eliminating both the Senior Community Service Employment Program (SCSEP) and the State Health Insurance Assistance Program (SHIP). The Administration for Community Living's administrative budget also receives a proposed reduction, from \$40 million to \$38 million.

In addition to aging-related program reductions, the proposal includes some significant restructuring to Medicaid programs. The proposal includes a reduction of over \$600 billion to Medicaid, which HHS indicates is in addition to the savings that are projected from the health reform package currently under consideration in Congress.<sup>1</sup> However, the exact interplay between the proposals in this document and the Congressional reform legislation is a little unclear. Savings in the proposed budget are derived from several sources, most notably the shift of Medicaid financing from an open-ended entitlement to a choice between a per capita limited or block granted program. The current Congressional legislation also projects savings from similar mechanisms which, coupled with the repeal of the Affordable Care Act's Medicaid expansion, results in over \$800 billion of reductions to Medicaid. It is unclear whether the full \$800 billion and \$600 billion are calculated separately and, if so, what modifications would be made to the legislative financing reforms in order to meet these savings targets.

The President's budget also proposes eliminating the Agency for Health Care Research and Quality (AHRQ) and significantly reducing funding for the Office of the National Coordinator for Health Information Technology.

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<sup>1</sup> "In total, the Budget includes a net savings to Medicaid of \$627 billion over 10 years, not including additional savings to Medicaid as a result of the Administration's plan to repeal and replace Obamacare" - see <https://www.hhs.gov/sites/default/files/fy2018-budget-in-brief.pdf>

There are a number of proposals in the document that would impact disability-related programs. The legislation includes savings from Social Security Disability Benefits, both the Supplemental Security Income (SSI) as well as the Social Security Disability Insurance (SSDI) programs. The Administration proposes reducing SSI benefits when benefits are received by multiple individuals in the same family. For SSDI, the proposal would limit the amount of retroactive payments issued when there is a gap between application and eligibility determination. Current law provides for 12 months of retroactive benefits whereas the proposed budget would limit this to 6 months.

The budget also includes a proposal to establish an expert panel that would make recommendations to increase labor force participation of individuals on SSI and SSDI and result in a 5% decrease in program expenditures. The budget does not make any specific proposals; however, it suggests that the panel should examine options such as:

- Testing "time limited benefits" for beneficiaries for a period when they would be more likely to return to work;
- Requiring applicants to engage in job-seeking activities before their application is considered;
- Pushing existing State vocational rehabilitation offices to intervene earlier with individuals on a track to end up on DI;
- Replicating welfare-to-work strategies in State TANF offices to provide wellness care and vocational services to welfare applicants that cannot work due to a short-term or uncontrolled health condition; and
- Mandating that lower back pain and arthritis sufferers engage in rehabilitation traditionally used in occupational health treatment services before receiving benefits.

Additionally, the budget recommends eliminating State Councils on Developmental Disabilities and Independent Living State Grants, while level-funding Centers for Independent Living. The reductions would result in approximately \$95 million of savings, which would be partially offset by a new \$45 million program called "Partnerships for Innovation, Inclusion, and Independence." The Paralysis Resource Center, Limb Loss Resource Center, and Supported Employment State Grants would also be eliminated. The Office of Disability Employment Policy (ODEP) at the Department of Labor would also be cut from \$38 million to \$27 million.

Lastly of note, a number of human services programs would be reduced or eliminated under this proposal. Proposed eliminations include the Community Services Block Grant (CSBG), Low Income Home Energy Assistance Program (LIHEAP), Community Development Block Grant (CDBG) program, and Social Services Block Grant (SSBG). Reductions include a 10% cut to Temporary Assistance to Needy Families (TANF) and an \$8 billion cut to the Supplemental Nutrition Assistance Program (SNAP).

All told, the budget expresses priorities focused on a small Federal government that targets its programs and assistance to specific areas and individuals. While we do not anticipate that many of these proposals will be enacted, we do believe that there are areas of agreement with Congress that could lead to pressure on overall expenditures and restructuring of certain programs. Most notably, both the SHIP and SCSEP programs were reduced in the FY2017 Omnibus legislation and continue to be at-risk from Congress and the administration. Similarly, some of the proposed aggressive restructuring of Medicaid could be enacted through the health reform legislation advancing through Congress – though the full extent of Medicaid savings may not reach the levels estimated in this budget release.

The next step in the FY2018 budgetary process is the development of appropriations bills in both the House and the Senate. This is expected to occur throughout the summer months.

# NASUAD FY18 Budget Chart: Key HHS Programs Serving Seniors

*As of May 23, 2017 (Dollars in Millions)*

Program	FY15 Enacted	FY16 Enacted	FY17 President's (Obama) Request	FY17 Omnibus	FY18 President's (Trump) Request
<b>Administration for Community Living</b>					
<i>Health and Independence</i>					
HCBS Supportive Services	347	347.7	358	350.2	347
Congregate Nutrition	438	448.3	454	450.3	447
Home-Delivered Nutrition	216	226.3	234	227.3	226
Nutrition Services Incentive Program	160	160	160	160	160
Preventive Health	19.8	19.8	20	19.8	20
Chronic Disease Self-Management	8	8	8	8	5
Elder Falls Prevention	5	5	5	5	5
Native American Nutrition and Supportive Services	26	31.15	31	31.2	31
<i>Caregiver Services</i>					
Family Caregiver Support Services	146	150.5	150	150.5	150
Native American Caregiver Support Services	6	7.5	8	7.55	8
Alzheimer's Disease Program <sup>1</sup>					19
Lifespan Respite Care	2	3.36	5	3.36	3
<i>Protection of Vulnerable Adults</i>					
Elder Rights Support Activities	7.87	11.87	14	13.87 <sup>2</sup>	12
Prevention of Elder Abuse & Neglect	4.8	4.8	4.8	4.8	5

<sup>1</sup> Consolidates three Alzheimer's disease programs: Demo Grants ADSSP, Communications Campaign, and Services.

<sup>2</sup> Of this funding, \$10 million is directed to be used for the Elder Justice and Adult Protective Services program.

Program	FY15 Enacted	FY16 Enacted	FY17 President's (Obama) Request	FY17 Omnibus	FY18 President's (Trump) Request
Long-Term Care Ombudsman Program	15.8	15.8	15.8	15.8	16
Senior Medicare Patrol Program	9	--	9	-- <sup>3</sup>	18
Alzheimer's Disease Initiative <sup>4</sup>	11	14.7	11	14.7	--
<i>Programs for Individuals with Disabilities<sup>5</sup></i>					
National Institute on Disability, Independent Living, and Rehabilitation Research		103.9	103.9	103.9	95
Paralysis Resource Center		7.7	8	6.7	--
Independent Living State Grants		22.8	23	22.8	--
Independent Living (CILs)		78.3	78	78.3	78
Assistive Technology		34	32	34	32
Voting Access for People with Disabilities		4.96	5	4.96	5
Limb Loss Resource Center		2.8	3	2.5	--
Traumatic Brain Injury		9.3	9	9.3	3
State Councils on Developmental Disabilities	71	73	73	73	--
Partnerships for Innovation, Inclusion, and Independence Program <sup>6</sup>					45

<sup>3</sup> The FY16 & FY17 Omnibus Appropriations acts do not specifically provide money for the Senior Medicare Patrol Program, but instead include language directing HHS to fully fund it via the Health Care Fraud and Abuse account

<sup>4</sup> The FY18 Budget consolidated all Alzheimer's disease activities across ACL into a single grant program, funded at \$19 million.

<sup>6</sup> The Budget restructures activities carried out by the State Councils on Developmental Disabilities, Independent Living and Traumatic Brain Injury programs into a single state grant program. The Budget requests \$45 million for the Partnerships for Innovation, Inclusion, and Independence program, which will combine these activities into a single statewide, cross-disability entity, promoting evidence-based approaches, efficiencies, and a more cohesive approach to disability partnerships.

Program	FY15 Enacted	FY16 Enacted	FY17 President's (Obama) Request	FY17 Omnibus	FY18 President's (Trump) Request
<i>Consumer Information, Access, and Outreach</i>					
Aging and Disability Resource Centers	6	6	8	6	6
State Health Insurance Assistance Program	52	52	52	47.1	--
Aging Network Support Activities		9.96	9.96	9.96	10
Holocaust Survivor Assistance Fund	--	2.5	2.5	2.5	--
<i>Administration</i>					
ACL Program Administration	30	40	41	40	38
<b>Administration for Children and Families</b>					
Community Services Block Grant	674	751.3	674	742.3	--
Low income Home Energy Assistance Program	3,390	3,390	3,000	3,390	--
Social Services Block Grant	1,700	1,700	1,700	1,700	--
<b>Department of Education</b>					
IDEA Grants to States	11,498	11,900	11,913	12,002	12,942
Vocational Rehabilitation Grants to States	3,092	3,391	3,999	3,398	3,453
Supported Employment State Grants	27.5	27.5	31	27.5	--
Independent Living	33	33	35	33	33
<b>Department of Labor</b>					
Office of Disability Employment Policy	38.5	38.2	38.5	38.2	27.2
Senior Community Service Employment Program	434.37	434.37	434.37	400	--
<b>Department of Agriculture</b>					
Supplemental Nutrition Assistance Program	87,959	80,849	101,366	78,840	70,703
<b>Department of Housing and Urban Development</b>					

Program	FY15 Enacted	FY16 Enacted	FY17 President's (Obama) Request	FY17 Omnibus	FY18 President's (Trump) Request
Section 202 Supportive Housing for the Elderly	420	432.7	505	502.4	510
Section 811 Housing for Persons with Disabilities	135	150.6	154	146.2 <sup>7</sup>	121.3
<b><u>National Institutes of Health</u></b>					
Alzheimer's disease research	586	936	910	1,391	-- <sup>8</sup>
<b><u>Centers for Disease Control</u></b>					
Heart Disease and Stroke Prevention Formula Program <sup>9</sup>		160	160	130	--
Diabetes Prevention Formula Program		170	170	140	--
National Diabetes Prevention Program		20	-	22.5	19.9
<b><u>Corporation for National and Community Service</u></b>					
Foster Grandparents Program		107.7	107.7	107.7	--
Senior Companion Program		45.5	45.5	45.5	--
Retired Senior Volunteer Program		48.9	48.9	48.9	--

<sup>7</sup> Although the appropriation level is reduced, the Omnibus legislation notes that carryover funds will result in the program being fully-funded

<sup>8</sup> At the time of publication, the detailed NIH budget request is unavailable. Therefore, the exact amount and nature of Alzheimer's research funding in the President's budget is not certain.

<sup>9</sup> The President's FY18 Budget Request contains a new block grant—*America's Health* Block Grant Program—that allocates \$500 million to states to implement state-specific interventions to address leading causes of death and disability, such as heart disease and stroke, and diabetes.

<b>Department of Veterans Affairs</b>					
Veterans Choice Program <sup>10</sup>					2,900
Veterans Caregivers (Title I) Programs		487	--	494	571
LTSS: Home & Community Based Services		2,290	2,626	--	2,747

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<sup>10</sup> The Veterans Choice Program allows veterans to receive care in the community based on distance and wait time to see a VA medical professional. The program was initially authorized \$10 billion in 2014 to be used through August 2017, but the program was extended in April 2017 with the passage of the Veterans Choice Improvement Act. The \$2.9 billion request in FY18 would be combined with \$626 million in carryover funds.

# The Future of Medicaid is in Your Hands

## No Cuts! No Caps! Update June 7, 2017

### US Senate is working on a Health Care!

The US House passed American Health Care Act (AHCA) cuts over \$800 billion from Medicaid. These cuts will have devastating consequences for people with developmental disabilities. Recently, President Trump released his budget proposal which cuts an **additional \$616 billion from Medicaid**. The combined proposed Medicaid cuts from AHCA and Pres. Trump's budget total over **\$1.4 TRILLION** dollars.

The health care bill action has moved to the US Senate. A recent report rumors the Senate plans to keep 80% of what the House passed in the AHCA, creating a Senate bill that has been nicknamed the "AHCA Lite".

**Advocacy must continue to prevent the passage of any Senate health care bill that cuts and caps Medicaid.** We urge you to keep making calls, keep rallying, and keep sharing your stories.

### Let US Senators know the importance of Medicaid to you or your loved one.

Share what kinds of services it provides. Ask them questions you need answered, such as:

- Will my supports be reduced? Will they go away?
- Will I have to quit my job to care for my loved one?
- Will I (or my loved one) have to move to a facility because community supports are cut?
- Will I be put on a waiting list?
- Will I now pay for services that were covered in the past, like prescription drugs?

Here is a link to The Arc of WA website to take action now: <http://capwiz.com/arcwa/state/main/?state=WA>

### Medicaid is an important partnership of the federal government and the states

Medicaid represents \$1 out of every \$6 spent on health care in the U.S. and is the major source of financing for states to provide coverage to meet health and long-term needs of low-income populations. Washington State draws down billions in federal Medicaid funding enabling our limited state funds to go farther and serve more people; for most Medicaid the federal government pays 50 cents of every dollar. The newly established Community First Choice program draws down 56 cents on the dollar. People with disabilities nationally make up 15% of Medicaid enrollment but account for 42% of program spending.

### Medicaid touches all our lives.

People with developmental disabilities make up part of the Medicaid population. Thousands of Washingtonians with DD (adults and children) depend upon Medicaid-funded services.

- Over 44,000 people are clients of the Developmental Disabilities Administration (DDA)
- Of those more than 13,000 receive personal care services through Community First Choice that support them to get out of bed, get dressed, bathe and eat meals
- Apple Health is also Medicaid funded; Any person receiving DDA services receives Medicaid funding

*For more information contact:*

Ed Holen

Developmental Disabilities Council  
Ed.holen@ddc.wa.gov

Sue Elliott

The Arc Washington State  
sue@arcwa.org



May 31, 2017

TO: Kitsap Advisory Council on Aging and Long Term Care  
FROM: Susan Welsh  
RE: Notes from State Council on Aging – May 23, 2017

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The following notations are brief for your quick review. More detailed comments can be forthcoming depending on Kitsap Advisory Council interest. Please feel free to contact me for additional information or copies of handout material.

Requested Kitsap Advisory Council response:

1. Legislative Committee is asking for feedback on issues of importance to local AAA's.
2. Nomination of organization or person for Excellence in Action Award.

Member Organization Updates:

1. Spokane and five counties doing Fall Prevention programs.
2. NWRC: Caregivers complaining about classes and paperwork with 1115 Waiver. Comments: Program definitely causing more work on AAA staff. More hoops but no funding so everyone's scrambling.
3. SWAAA: Had luncheon for caregivers with elected officials. Great opportunity to recognize them and put face on issue for elected officials.
4. Several agencies looking for and finding intergenerational collaborating opportunities.
5. Aging Mastery Program is getting lots of positive feedback. AAAs have to purchase material. 4A wants to help.

Legislative Committee Update:

1. State-Waiting. Once McCleary is settled, budget will be settled.
2. Federal-Hard to focus.
3. They want to know what areas we are interested in.

AARP Update:

1. Wants to narrow down and focus statewide.
2. Looking at consumer protection and student loans.
3. Information session, Vancouver WA, July 18: Latest info on scams and fraud of vulnerable population.

Public Awareness Committee Update:

1. RCW 73.08 requires every County to have a Veterans Assistance Fund and Advisory Board. Millage on property tax. Amount set by County officials. Often vets don't know what's available. King County Commissioners will be approached to increase the levy.
2. Older Americans Month was May. Many people wrote letters that were published in various local papers. Samples were sent to SCOA attendees. Recommendation: Kitsap should calendar and prepare for next year.

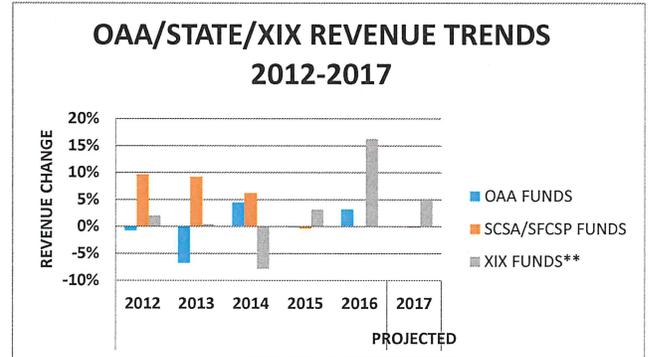
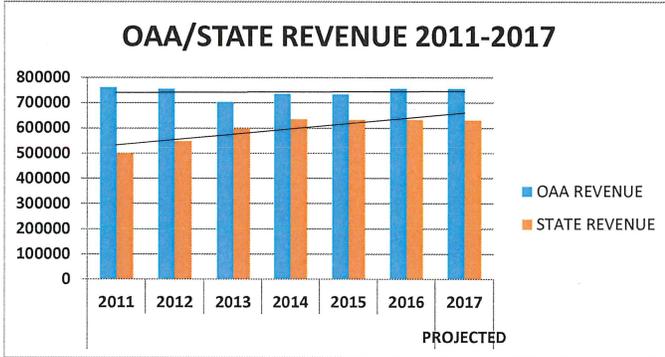
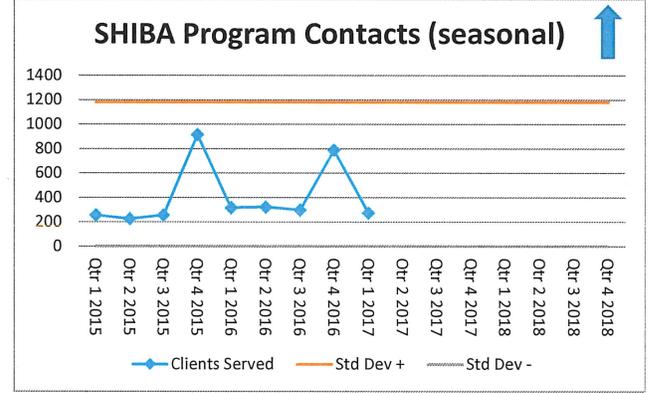
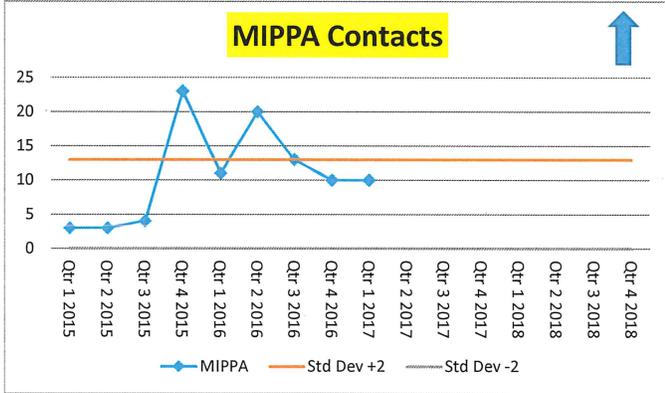
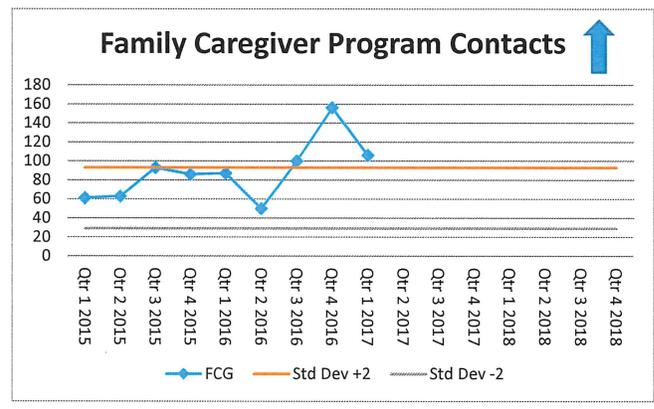
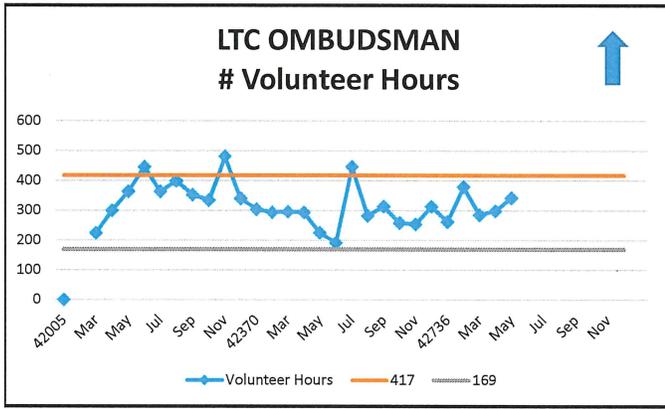
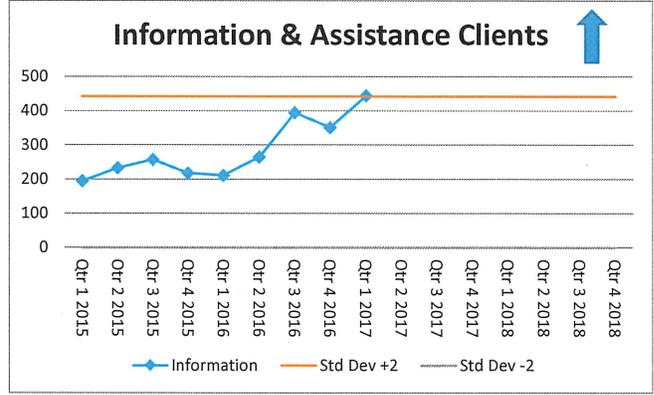
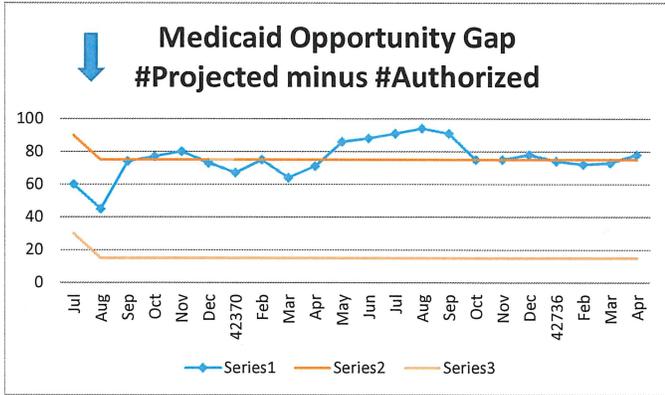
#### General Discussion:

1. Excellence in Action Award: Recipient of Award used to be taken from State AAA. Expanded to people who work for seniors. Form is available to nominate. Would like someone from each AAA-Organization or program and/or Person.
2. Sherry Appleton stressed going to hospital for observation for 3 days, not eligible for Medicare. Need to be admitted. Fiduciary rule for 401k retirement programs under threat.
3. WINGS looking at Wisconsin Model. Good resources on how to get information to people on Community Living website.
4. Yakima Nation: Special circumstances for Native Americans. They have consultant specializing in Native issues for life planning documents.

#### Handouts:

1. Article: Sage Coach-Talking to yourself and other strategies for developing wisdom
2. AARP Brochure: 2017 Washington State Aging Readiness
3. Request for State Caregiver Outreach Campaign Feedback
4. WA State Dementia Action Collaborative:
  - a. Information sheet on State Plan to Address Dementia;
  - b. Dementia Road Map-A Guide for Family and Care Partners;
  - c. Draft list of Arts, Social, Fitness & Volunteer Opportunities for persons living with memory loss and their loved ones;
  - d. Dementia-Friendly Communities, An Introduction for Washington State;
  - e. Info Kit-Safety Concerns for People with Dementia.
5. County Veterans' Relief: List of Taxes levied by County for Veterans assistance
6. Family Caregiver Conference: Program for June 5 Conference

# Aging & Long Term Care Advisory Council Dashboard- June 2017



**Challenges:**

Federal Administration funding (Medicaid/ OAA) uncertainties

**Trends:**

State legislative activities focused at increased funding for AAA Medicaid CM rate and Health Homes

**Special Outreach Activities**

**June**

3rd Aging Options Senior Resource Fair

10th 2nd Annual Save A Life March

**July**

8<sup>th</sup> Retiree Appreciation Seminar (Federal retirees)

**Routine Community Outreach Activities**

- Once a month onsite outreach at Bainbridge Island Waterfront Park Community Center
- Once a month onsite outreach at Bremerton Senior Center
- Every other month onsite outreach at Village Green Community Center (Kingston)
- Every other month participation at Kitsap Information & Referral Network (multi-agency networking meeting)
- Once per quarter Mesa Redonda de Kitsap (multi-agency networking meeting partnered with Kitsap Immigration Assistance Center)
- Once per quarter SHIBA getting ready for Medicare workshop.