

FROM THE HILL

Enhanced FMAP Extension

As states wait anxiously, Congress continues to consider a long-term extension of COBRA subsidies, unemployment, and other safety net programs through the end of 2010. The American Workers, State, and Business Relief Act (HR 4213) includes the six-month extension of the enhanced FMAP provided in the Recovery Act. The enhanced FMAP is currently slated to expire on December 31, 2010. Senator Schumer (D-NY) and others said they aim to pass the bill by Memorial Day. The measure had passed both chambers, but included offsets that were subsequently used when health reform was passed. Now that those offsets have been used, Congress must modify the bill to find a pay-for elsewhere, but politically appealing options are running low and objections to cost are likely to arise again in the Senate.

Advocates are weighing in with their Senators to urge the extension of the enhanced FMAP before Memorial Day. To contact your Senator, you can call the Capitol switchboard at 202-224-3121. •

HEALTH REFORM

Health Reform and Strategic Planning

With health reform now law (PL 111-148 and PL 111-152), State Units on Aging face the challenge of developing a comprehensive understanding of the law in order to strategically plan for its implementation. As planners study the changes that the Patient Protection and Affordable Care Act (HR 3590) and the Reconciliation Act of 2010 (HR 4872) will bring to the health care system in the coming years, there are a variety of resources available to supplement these efforts.

On April 1, NASUA held the first of several all-state calls on health reform. The purpose of this call was not

only to highlight aspects of Health Reform, with specific relevance to State Units on Aging, but also to encourage a peer to peer dialogue about health reform. Martha Roherty, NASUA's Executive Director, presented a thorough overview of the law, and NASUA staff was also available to respond to questions from call participants.

During the call, NASUA referenced several of its documents that summarize and analyze health reform, and are available on NASUA's website, or by following this link: http://www.nasua.org/about_nasua/health_reform.html. Specifically, to gain a more in-depth understanding of the legislation, NASUA produced a Side-by-Side document, which compares the House-passed health reform bill (HR 3962), the Senate-passed health reform bill (HR 3590), and the changes made to the Senate-passed bill through the reconciliation process (HR 4872); the latter of which is now the law. Additionally, NASUA created an Implementation date document, which extracts key aspects of the law and the important dates associated with these provisions. Both of these documents are in draft format, given the need to update them as additional information becomes available. Accordingly, NASUA's website via the link referenced above also houses guidance and analysis released by CMS. NASUA will continue to work to provide the most current and accurate data available, to assist states in analyzing the law and anticipating its impact.

Given the scope of health reform, its passage is creating opportunities for individuals and organizations throughout the Network and beyond to interact with health care professionals and stakeholders to gain a deeper understanding of the new law's potential effects. One such opportunity was a recent briefing co-hosted by the Alliance for Health Reform and The Commonwealth Fund titled, "What's in There? An Ask-the-Experts Overview of the Health Reform Law."

Moderating the April 16 session was Ed Howard, with the Alliance for Health Reform and Karen Davis with The Commonwealth Fund. Following the introduction to the briefing, the panel of well-qualified experts, Sara Collins of The Commonwealth Fund; Dean Rosen of Mehlman Vogel Castagnetti Inc.; and Neera Tanden of the Center for American Progress, highlighted

ed issues associated with the implementation of several key health reform provisions. After the presentations, the panel was available to answer questions from the audience members. The informative session is currently available in both webcast and transcript form on the Alliance for Health Reform's website, accessible by following this link: http://www.allhealth.org/briefing_detail.asp?bi=181.

In anticipating and preparing for the implementation of health reform, NASUA encourages you to access resources such as these to aid your planning efforts. Throughout this process, NASUA will continue to reach out to the Network by encouraging a dialogue to facilitate a deeper understanding of health reform's impact. This exchange of information will assist strategic planners in crafting a vision for the future that is responsive to the changing health care landscape. •

Health Reform Cons are on the Rise

With the ink barely dry on the new health care law, scam artists across the country are targeting seniors and taking advantage of their confusion. Within the past month, health care scams have surfaced in Idaho, Illinois, Vermont, New York, Alabama, and Kansas. The most frequent con perpetrated is the unscrupulous salesperson going door-to-door pretending to be a federal employee selling "ObamaCare." Some scammers have set up toll-free phone lines; warning prospective customers that there's a "limited enrollment" period for the new health insurance program, so they better act quickly. Other scammers are ringing seniors asking for their bank account details so that they can deposit the \$250 donut hole rebate check into their account.

Moving forward, the Network, working with the Senior Medicare Patrol (SMP), must be vigilant in identifying and reporting fraud to the appropriate authorities. Further information about the SMP program can be found at **The National Consumer Protection Technical Resource Center: The Center of Service & Information for SMPs**. Also, at the same resource center, <http://www.smpresource.org>, you may locate your states SMP program. In addition to these resources, it is imperative that you provide accurate information to seniors about health care reform. To this end, I direct your attention to NASUA's Health Reform resource page at http://nasua.org/about_nasua/health_reform.html. Also, as part of NASUA's ongoing efforts to inform our members, we will be developing a series of tools for states to use with consumers; this information will also be available at our Health Reform webpage, http://nasua.org/about_nasua/health_reform.html.

If you have any further questions or concerns, please do not hesitate to contact Rex O'Rourke at rorourke@nasua.org. •

IN WASHINGTON

Summary of CMS's Informing Long-Term Care Choice MDS 3.0 Section Q Conference

On April 16, 2010, the Centers for Medicare & Medicaid Services (CMS) convened the Informing Long-Term Care Choice MDS 3.0 Section Q Conference in Baltimore, Maryland. Attendees at the conference included representatives from states, local agencies, nursing facilities, and associations. The purpose of the conference was to prepare states for implementing the MDS 3.0 Section Q (Return to Community Referral) by October 1, 2010 by increasing stakeholders' knowledge of the new requirements and to learn about the challenges and issues involved in its implementation. Attendees participated in breakout sessions to discuss plans for implementing Section Q in their states. Breakout session topics included strategy development and implementation, establishing effective referral relationships, and creating successful outcomes for referrals.

CMS advised State Medicaid Agencies to reach out to "Local Contact Agencies" or LCAs that will provide information to consumers about home and community based services (HCBS) options. CMS defines LCAs as "community contact agencies that can provide individuals with information about community living options and available supports and services." LCAs may be a sin-

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gle entry point agency, an Aging and Disability Resource Center, an Area Agency on Aging, a Center for Independent Living, or other state designated entities.

CMS also highlighted a new section (A1500) of the Preadmission Screening and Resident Review (PASRR) program. The purpose of PASRR is to ensure that individuals with serious mental illness or intellectual disabilities are not placed in a nursing facility inappropriately. A1500 reports an individual's PASRR status to determine whether he or she has a Level II PASRR determination.

Impact on Stakeholders

MDS 3.0 is a new person-centered planning tool that facilitates relationship building between institutional and community care providers to implement care based on consumers' choices from an all inclusive list of long term supports and services. MDS 3.0 formalizes long-standing requirements for states and nursing facilities to ensure that residents are appropriately assessed and to empower them to choose where they desire to live and a setting that is conducive to their needs.

According to Appendix C of CMS's Resident Assessment Instrument Version 3.0 Manual, nursing homes will communicate and collaborate with the state-designated LCA on the discharge process for those residents desiring to return home after rehabilitation. In terms of response times for individuals seeking information on HCBS, nursing homes will initiate contact with the state-designated LCA within 10 business days and document the call for those residents desiring to return to the community (Q0600). The nursing home will follow up if the LCA does not contact the resident by telephone or in person within 10 business days. Regarding next steps, State Medicaid Agencies will have to amend their Data Use Agreement with CMS to share MDS data with the LCAs that they create agreements with and designate to provide information to individuals about community and HCBS options.

Please visit NASUA's Web site at http://nasua.org/about_nasua/health_reform.html to view conference materials on MDS 3.0 Section Q and PASSR. For questions, please contact John Thompson at 202-898-2578. •

National Lesbian, Gay, Bisexual and Transgender Aging Roundtable

On Thursday, April 22, 2010, NASUA attended the **National Lesbian, Gay, Bisexual and Transgender (LGBT) Aging Roundtable briefing** held at the Cannon House office building. The event was the

first of its kind on Capitol Hill, and was hosted by the **National Gay and Lesbian Task Force** and the **Services and Advocacy for LGBT Elders** (SAGE). The briefing brought together several experts that helped educate the audience on key policy issues that affect LGBT older adults. Speakers included: Laurie Young, Interim Director of Public Policy and Government Affairs and Aging Analyst; The National Gay and Lesbian Task Force; Hope Barrett, Director of Elder Affairs, Howard Brown Health Clinic; Harper Jean Tobin, Policy Counsel, National Center for Transgender Equality; and John Johnson, Federal Director of Governmental Affairs, SAGE. Further information about the National Gay and Lesbian Task Force can be found at <http://www.thetaskforce.org/>. Also, please check out <http://www.sageusa.org/index.cfm> for more information about SAGE and its efforts to address the needs of lesbian, gay, bisexual, and transgender elders. •

Campaign for Better Care

This month, The Campaign for Better Care, led by the National Partnership, Community Catalyst and the National Health Law Program, with funding from the Atlantic Philanthropies announced its launch. This campaign was created in light of health reform with the mission of ensuring that older adults, and all Americans, can realize the promise of reform. Their goal is to convince policymakers to implement reform in ways that give people the comprehensive, coordinated health care they need, especially older adults and individuals with multiple chronic conditions, and those who are sickest and most vulnerable.

Learn more at the campaign's website: <http://www.campaignforbettercare.org>. •

Community Choice Act

On April 28, 2010 the Coalition for Community Integration, ADAP, American Association for People with Disabilities, National Council on Independent Living, TASH, and other disability groups released the results of a new Harris Poll showing strong support among Americans for legislation that looks like the Community Choice Act. The Community Choice Act seeks to help individuals eligible for institutional services choose a new alternative, "community-based attendant services and supports," to be provided at home, school, work and in the community by amending Title XIX of the Social Security Act to include these services.

For more information: <http://www.adapt.org/cca.php> •

FUNDING

The U.S. Department of Agriculture's (USDA) Food and Nutrition Service (FNS) has announced \$8 million in grants for State agencies to conduct pilot projects to increase participation in Supplemental Nutrition Assistance Program (SNAP) among the Extra Help population (also called the Low Income Subsidy). **See CFDA Number(s): 10.580-Supplemental Nutrition Assistance Program, Outreach/Participation Program.**

Specifically, FNS is interested in projects that:

- Target outreach
- Simplify eligibility for the Extra Help population
- Standardize benefits for the Extra Help population

Any of the 51 State agencies that administer SNAP may apply for a grant. State agencies may apply on behalf of county administered SNAP agencies that wish to operate a pilot. Interested State agencies must demonstrate a strong partnership with the State Medicaid agency. State SNAP agencies that are not co-located with State Medicaid agencies must take additional efforts to show collaboration and continued partnership with the State Medicaid agency. State agencies interested in these projects may collaborate with other agencies and organizations during the planning, implementation, and operation phases of the grant. Collaborating agencies may include Federal, State, and local agencies, non-profit organizations, faith-based organizations, and select private organizations that have experience working with the target population. State agencies must submit letters of commitment from all partner agencies, including the State Medicaid agency.

The amount of the award will depend upon the type of project selected, the proposed budget, and how well the project meets criteria described in the **Request For Application (RFA)**.

Key Dates:

- Notice to Submit Application Due: May 14, 2010
- Application Due: June 30, 2010
- Awards Announced: September, 2010
- Grant Funds Available: September 30, 2010

Interested State agencies may obtain grant applications at <http://www.fns.usda.gov/snap/government/grants/2010-RFA.extra.help.pdf> or <http://www.grants.gov/>. Also, a press release of this announcement can be found [here](#). •

ANNOUNCEMENTS

Older Americans Month 2010: Age Strong! Live Long!

May is Older Americans Month—a tradition dating back to 1963 to honor the legacies and ongoing contributions of older Americans and support them as they enter the next stage in life. NASUA is joining communities nationwide in celebrating this month with special activities and events. Specifically, NASUA will be joining the Administration on Aging and other aging organizations and advocates for the *Age Strong! Live Long!* Walk on the National Mall in Washington, DC on May 27th, celebrating the strength and vitality of older Americans.



This year's Older Americans Month theme—*Age Strong! Live Long!*—recognizes the diversity and vitality of today's older Americans who span three generations. They have lived through wars and hard times, as well as periods of unprecedented prosperity. They pioneered new technologies in medicine, communications, and industry while spearheading a cultural revolution that won equal rights for minorities, women, and disabled Americans.

Older Americans are living longer and are more active than ever before. And with the aging of the baby boomer generation—the largest in our nation's history—America's senior population is expected to number 71.5 million by 2030.

While keeping the growing population of older Americans healthy and active will increase the demand for senior services, what is remarkable is the extent to which older Americans themselves are supporting each other. As the new generations of seniors become better educated and more financially secure than their predecessors, they are spending more time making significant contributions in their communities through civic and volunteer opportunities.

In fact, older Americans are a core component of service delivery to seniors—embodying and modeling the drive to *Age Strong! Live Long!* They volunteer at group meal sites and deliver food to homebound seniors; they act as escorts and provide transportation for older adults who cannot drive; they help seniors with home repair, shopping and errands; and they provide



vital counseling, information and referral services. Their energy and commitment reminds all Americans—not just senior citizens and their caregivers—to do their part to enhance the quality of life for older generations.

The annual commemoration of Older Americans Month is our opportunity to recognize the contributions of older citizens and join them in providing services and support that empower the elderly. Americans of all ages and backgrounds can volunteer with programs that improve health literacy, increase access to quality health services, offer food and nutrition services, provide financial and housing counseling, sponsor social activities and community engagement, and more. •

20th Anniversary of the Americans with Disabilities Act

On July 26, 1990, President George Bush signed into law the **Americans with Disabilities Act of 1990, ADA, 42 U.S.C. §§ 12101 et seq.** As the ADA nears its 20th Anniversary, July 26, 2010, we would like to learn what states are doing to mark the 20th anniversary—please email your events and comments to rorourke@nasua.org. In addition, you can visit <http://www.disability.gov> to discuss your state's celebrations. You can also visit <http://blog.govdelivery.com/usodep/> to follow the 100 Days to the ADA, a countdown to the 20th Anniversary.

The ADA is a landmark legislation that has often been described as the most sweeping nondiscrimination legislations since the Civil Rights Act of 1964. At the signing of the ADA, President George Bush traced the ADA's roots in American history back through the Civil Rights Act of 1964, to the Declaration of Independence, stating that “We are keeping faith with the spirit of our ... forefathers who wrote ... ‘We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain inalienable rights.’ This Act is powerful in its simplicity. It will ensure that people with disabilities are given the basic guarantees ... [of] freedom of choice, control of their lives, the opportunity to blend fully and equally into the ... mosaic of the American mainstream.” Wodatch J. (1990). The ADA: What it says. *Worklife*, 3, 3.

In brief, the ADA is a civil rights law guaranteeing equal opportunity for qualified individuals with disabilities in employment, public accommodations, transportation, state and local government services, and telecommunications. As stated in the Act, its purpose is “to provide a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities.” §12101(b).

In the deliberations of the ADA, Congress cited a figure of 43 million Americans having one or more physical or mental disabilities. This estimate has been revised to 53 million based on recent census data. Although these numbers are broad estimates, it is clear that the number of people who have disabilities in the American population is large and is growing significantly with the “graying of America.” The ADA has the potential to positively impact, each and every person, by improving the quality of life for individuals with disabilities and empowering them to make independent life choices, free from discrimination. As Governor Tom Vilsack from Iowa said in 2000, “[t]he message of the ADA's anniversary is one of celebration and vigilance: celebration of the accomplishments to date, and vigilance toward the task ahead.” 85 Iowa L. Rev. 1569, 1999-2000.

Further information about the ADA can be found at http://www.hhs.gov/od/about/fact_sheets/adafactsheet.html. Also, if you have any questions or concerns, please contact Rex O'Rourke at rorourke@nasua.org. •

Chronic Disease Self-Management Program Grants awarded to States and Territories

On March 30, 2010, the U.S. Department of Health and Human Services Secretary Kathleen Sebelius announced the funding awards for the *Communities Putting Prevention to Work Chronic Disease Self-Management Program* (CDSMP). The \$27 million in grants, funded by the American Recovery and Reinvestment Act of 2009, will assist State Units on Aging and state health departments in 45 states, Puerto Rico and the District of Columbia to provide self-management programs to older adults with chronic diseases, build statewide delivery systems, and develop the workforce that delivers these programs.

To see the Chronic Disease Self-Management Program State Funding Table, visit www.hhs.gov/recovery/cdc/awardschronicdisease.html.

To learn more about the Chronic Disease Self-management Program grantees, visit http://www.aoa.gov/AoAroot/PRESS_Room/News/2009/03_18_09.aspx.

To see Secretary Sebelius's Press Release, visit <http://www.hhs.gov/news/press/2010pres/03/20100330a.html>. •

NEW RESOURCES AVAILABLE

Aging-centric Health Reform Webcasts

HealthReform.Gov has held a series of webcasts concerning the new health reform law and seniors. On April 4, 2010, Health and Human Services Secretary Kathleen Sebelius, Assistant Secretary for Aging Kathy Greenlee, and Principal Deputy Administrator for the Center for Medicare and Medicaid Services Marilyn Tavenner discussed health reform and seniors. Then, on April 22, 2010, Assistant Secretary for Aging Kathy Greenlee, AARP President Jennie Chin Hansen, and Deputy Administrator and Director at the Center for Medicare at CMS Jonathan Blum addressed this topic again. During both webcast, these aging experts discussed how seniors will benefit under the new health reform law and then answered questions from viewers. To view the archived videos of these webcasts go to: <http://www.youtube.com/ushealthreform#p/c/E13B55ACDF862D29/2/nMGLdLLrKU>. •

Long-Term Care Policy Simulator

The SCAN Foundation has created an online “Long-Term Care Policy Simulator,” which allows users to create their own long-term care benefit by developing a program using eight key variables: choice, age and work status, method of payment, minimum premium payment period, length of benefit, elimination period, low-income subsidy, and proportion of program funding paid through premiums. The simulator incorporates the user’s design, using the given variables, with demographic and behavioral assumptions to create a long-term care model. It is designed to help users understand how their design selections translate into estimated coverage, cost, and use of the benefit. To access the simulator: <http://www.ltcpolycysimulator.org/index.html>. •

26th National Home and Community Based Services Conference

Conference Conveners



SEPTEMBER 26–29, 2010 • ATLANTA, GEORGIA

FOR MORE INFORMATION:

www.nasua.org • Contact: Kimberly Fletcher • kfletcher@nasua.org • 202-898-2578, x131



New Paper on the State Health Insurance Assistance Program (SHIP)

On March 29, 2010 Carl O'Shaughnessy at the National Health Policy Forum released *The Basics: The State Health Insurance Assistance Program (SHIP)*. The document describes SHIP and gives a history of its funding. To access the document: http://www.nhpf.org/library/the-basics/Basics_SHIP_03-29-10.pdf. •

Issue Brief on State Strategies to Maximize Potential of Older Adults

On April 1, 2010, the National Governors Association Center for Best Practices released an issue brief entitled *Maximizing the Potential of Older Adults—Benefits to State Economies and Individual Well-Being*. This issue brief addresses how state can engage older adults through both paid employment and volunteerism and discusses potential impact to state economies. To access the brief: <http://www.nga.org/Files/pdf/1004OLDERADULTS.PDF>. •

OMBUDSMAN CORNER

The 2010 National Association of State Long-Term Care Ombudsman Conference was held in Myrtle Beach, South Carolina on April 16th- 20th. The theme for this year's conference was "Life is a Beach: Advocacy in Rough Seas." South Carolina State LTC Ombudsman Dale Watson and Tony Kester, Director of the South Carolina Lieutenant Governor's Office of Aging, welcomed the attendees and provided southern hospitality though out the event.

The opportunity to share best practices was an important part of the agenda for the thirty-four State Long-Term Care Ombudsmen in attendance. Session highlights included time for new State Ombudsman training and orientation; the impact of Health Care Reform on LTC Ombudsman programs; and priorities for Older American's Act Reauthorization. Many discussions centered on ombudsman work now and in the future. Participants and presenters emphasized the importance of working with other agencies and stakeholders to support individual choice. Mary Beth Ribar, CMS, gave a presentation on MDS 3.0 and Section Q. This session focused on transitioning residents out of nursing facilities; and how ombudsmen can be valuable assets to individuals and the system.

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Administration on Aging Assistant Secretary, Kathy Greenlee, spoke to the group at a luncheon meeting on the 19th. Greenlee's remarks included support of the Long-Term Care Ombudsman Program in the Older American's Act Reauthorization and her vision for the Aging services network.

The conference wrapped up with presentations on national policy issues, resident centered care (Culture Change), advocacy, and long-term care ombudsmen in home and community settings. Deborah Merrill, Senior Policy Advisor, for NASUA attended as a panelist for several workshops and was graciously included in discussions.

The 2011 conference will be held in Kansas City, Missouri and jointly sponsored by the Missouri and Kansas Long-Term Care Ombudsman offices. •

SCSEP CORNER

On April 26, 2010, Jane Oates, Assistant Secretary for Employment and Training at the U.S. Department of Labor, and Kathy Greenlee, Assistant Secretary for Aging at the U.S. Department of Health and Human Services, held a listening session on the reauthorization of the Older Americans Act (OAA). Specifically, they spoke with stakeholder of the Senior Community Services Employment Program (SCSEP) about the reauthorization of Title V in the OAA.

The Assistant Secretaries solicited comments from stakeholders about their thoughts on aspects of the current Title V legislation that are effective, aspects that are ineffective, and innovations. Stakeholders could call in with three minute statements, submit statements through a real-time chat system or, for those stakeholders who were unable to join the conversation, email their statements to titlelisteningessi@dol.gov. Several participants gave statements about effective and ineffective sections of Title V and their thoughts on innovations and improvements. This session also led to a hearty discussion SCSEP's role as both an aging and employment program and the challenges that AoA and DOL face in better serving this community. NASUA applauds the Assistant Secretaries for this unprecedented public conversation concerning SCSEP between AoA and ETA and looks forward to further collaboration on this subject. •

MIPPA CORNER

Health Reform Provides Funding for Outreach and Assistance for Low-Income Programs

Section 3306 of the Patient Protection and Affordable Care Act extends §119 of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA, P.L. 110-275) and provides an additional \$45 million for fiscal years 2010 through 2012.

Section 119 of MIPPA provided \$25 million for fiscal years 2008 and 2009 for beneficiary outreach and education activities for low-income programs related to Medicare, including the Part D low-income subsidy (LIS) program and the Medicare Savings Program (MSP). Funding under §119 was appropriated to State Health Insurance and Assistance Programs (SHIPs), Area Agencies on Aging (AAAs), Aging and Disability Resource Centers (ADRCs), and the Administration on Aging (AoA).

During fiscal years 2010 through 2012, SHIPs, through the CMS Program Management Account, will have access to \$15 million. Also, during the same period, AoA will receive \$15 million for AAAs, another \$10 million for ADRCs, and \$5 million for AoA to contract with the National Center for Benefits and Outreach Enrollment.

According to AoA, further information about this funding will be made available through an announcement in mid-May. Tentatively, awards are scheduled to be released September, 2010. If you have any questions or concerns, please contact Rex O'Rourke by email at rorourke@nasua.org or by phone at (202) 898-2578. •



Upcoming Events

Kansas Senior Summit 2010: The Future of Long-Term Care

*Kansas Department on Aging and Kansas Area
Agencies on Aging Association*

May 6, 2010
Maner Conference Center
Topeka, Kansas

[Click here](#) for more information

Alliance of Information and Referral Systems (AIRS)

May 23rd – May 26th, 2010
Rochester, New York

[Click here](#) for more information

NASUA Older Americans Act Reauthorization Policy Forum

National Association of State Units on Aging

June 27th – June 29th, 2010
The Westin Hotel
Washington, DC

[Click here](#) for more information



Save the date

November 16, 2010

[Click here](#) to sign up as a screening site for
November 16, 2010

[Click here](#) for more information about National
Memory Screening Day

* *Send information about your upcoming
conferences to be included in our newsletter to
kwalter@nasua.org*



The National Association of State Units on Aging

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