

# Final Report

Aging Services Policy Review Group

5/31/2009  
Citizens League

# Introduction

---

Founded in 1952, the independent, non-partisan Citizens League is one of the nation's premier citizen-based "good government" organizations. The organization is distinguished by its pioneering process that involves citizens in studying public issues and developing policy solutions.

Based in Saint Paul, the Citizens League focuses on public policy issues at the local, metropolitan and state levels. Over the years, the Citizens League has been one of the most effective agents of change in Minnesota public policy, and its impact can be seen in areas such as public finance, regional government, education, transportation and health care.

The 2,000-plus members of the Citizens League contribute their time and money not as agents of special interest groups or single-issue devotees, but as citizens who are concerned about the quality of life in Minnesota and the Twin Cities.

Citizens League members don't all think alike, but they do share some common beliefs, such as:

- Effective government depends on uninhibited discussion and ensuring that special interest groups are challenged;
- Issues must be probed beyond the narrow confines of partisanship;
- Results need to be more than just talk - League members want to see things happen.

The Citizens League operates using Civic Operating Guidelines. One such guideline is *Defining a Problem*. People who are affected by a problem help to define the problem in keeping with the League's mission and principles. All Minnesotans have the capacity to help define policy issues. They do so according to the current realities of the particular policy question and the civic ideas in the League's mission and principles. It is the League's goal to involve representatives from a broad range of groups and institutions that are affected by a policy question.

More information about the Citizens League can be obtained at <http://www.citizensleague.org>.

In 2009 the Citizens League chartered three policy review groups on charter schools, energy, and aging services. Each group analyzed past Citizens League policy reports and studies and developed a report based on findings. This report is the result of the work completed by the Aging Services Policy Review Group (ASPRG).

# Methodology

---

The Citizens League solicited participation in the ASPRG through its membership. Potential participants attended an orientation meeting. The Citizens League selected co-conveners to lead the process from participants.

Citizens League staff initially reviewed past policy reports and categorized them into policy review groups. Policy reports classified as “relevant to aging services” included:

- Report #386: Meeting the Crisis in Institutional Care (1984) available at [www.citizensleague.org/publications/reports/386.Report.Meeting%20the%20Crisis%20in%20Institutional%20Care.PDF](http://www.citizensleague.org/publications/reports/386.Report.Meeting%20the%20Crisis%20in%20Institutional%20Care.PDF)
- Report #394: Reshaping Long-Term in the Metro Area (1986) available at [www.citizensleague.org/publications/reports/394.Statement.Reshaping%20Long-Term%20Care%20in%20the%20Metro-Area.PDF](http://www.citizensleague.org/publications/reports/394.Statement.Reshaping%20Long-Term%20Care%20in%20the%20Metro-Area.PDF)
- Report #451: Minnesota’s Budget Problem: A Crisis of Quality, Cost and Fairness (1993) available at [www.citizensleague.org/publications/reports/451.Report.Minnesota's%20Budget%20Problem%20A%20Crisis%20of%20Quality%20Cost%20and%20Fairness.PDF](http://www.citizensleague.org/publications/reports/451.Report.Minnesota's%20Budget%20Problem%20A%20Crisis%20of%20Quality%20Cost%20and%20Fairness.PDF)
- Report #454: Choose Reform Not Declining Quality (1995) available at [www.citizensleague.org/publications/reports/454.Report.Choose%20Reform%20Not%20Declining%20Quality.PDF](http://www.citizensleague.org/publications/reports/454.Report.Choose%20Reform%20Not%20Declining%20Quality.PDF)
- Report #461: A New Wrinkle on Aging (1998) available at [www.citizensleague.org/publications/reports/461.Report.A%20New%20Wrinkle%20on%20Aging.PDF](http://www.citizensleague.org/publications/reports/461.Report.A%20New%20Wrinkle%20on%20Aging.PDF)
- Report #463: Seniors with Disabilities in 2030 (1999) available at [www.citizensleague.org/publications/reports/463.Report.Seniors%20with%20Disabilities%20in%202030.pdf](http://www.citizensleague.org/publications/reports/463.Report.Seniors%20with%20Disabilities%20in%202030.pdf)

Co-conveners randomly assigned participants into four reading groups on April 1, 2009. Each group reviewed two of five previously commissioned Citizens League policy reports related to aging services. All group members read the two-page letter from the Citizens League to the Metropolitan Council.

Each participant within a group completed a review sheet which outlined the article and highlighted the major themes and topics discussed. On April 16, 2009 the participants met to discuss the policy reports. At this meeting, participants outlined common themes, and

developed action steps. One member of each group summarized their assigned policy reports. Summaries were analyzed and results were utilized in the “historiography” section of this report.

Upon completion of the historiography, the ASPRG met on May 5, 2009 to further discuss recommendations. Larhae Knatterud, Director of Aging Transformation at the Minnesota Department of Human Services, presented information on the demographic and economic impact of an aging society and the State’s Transform 2010 framework.

Participants spent the remainder of the meeting brainstorming ideas, which form the “recommendations” section of this report.

The co-conveners drafted a final report and provided a draft to each ASPRG participant who in turn reviewed it and provided comments. The ASPRG submitted the final report to the Citizens League in June 2009.

## Historiography

---

The participants noted several universal themes within the historical documents provided by The Citizens League. These reports highlighted a number of key issues that are very much alive in the context of the current policy discussion of aging services. The Citizens League could use this history to inform new studies that are more focused on specific aspects of aging services.

Specific themes included:

1. The evolution of the definition of “aging services” from a primarily institutional-based health care system to a broader definition which encompasses a wide range of domains including health care, financial, community, social, workplace, and familial.
2. Beginning in 1984, reports outlined the importance of personal responsibility in financial planning, the cost of care, and the role of family support. Particular emphasis was placed on personal financial responsibility for long-term care.

*Meeting the Crisis in Institutional Care* (1984) focused on care choices and financing options for populations receiving institutional care including the elderly, people with mental disabilities, people with chemical dependencies and youth in the juvenile justice system. With respect to aging services, several key issues can inform current policy on aging services. The authors of the report noted that the need exists to find alternatives to residential care for many aging individuals including finding alternative providers such as personal care attendants (PCAs), social workers, family members and volunteers. The authors also recommended finding ways

for individuals to access appropriate levels of care and allowing individuals greater options for living independently. The report also recommended developing more private funding mechanisms for long-term care including long term care insurance and reverse mortgages. In recent years, the Minnesota Legislature debated both of these private funding ideas.

*Reshaping Long-term Care in the Metropolitan-Area: Recommendations for Change* (1986) was a Citizens League letter that advised the Metropolitan Council of the feasibility of separating payments for housing and services costs. The Council successfully addressed this issue.

*Minnesota's Budget Problem: A Crisis of Quality, Cost and Fairness* (1993) was a report commissioned to outline a philosophical position on the role of State government as it related to developing policy and funding programs. Chapter five of the report related specifically to long-term health care for seniors. The Chapter outlined six recommendations; some are not as relevant or have been realized, and some are still relevant. Those that are not as relevant in contemporary policy frameworks or that have been implemented include creating regional purchasing bodies with the authority to purchase services for older adults; encouraging regionally based health plans; and allowing Medicaid recipients to select health plans of their own choice (citizen markets). Those that are still relevant include supporting family caregivers along with other types of informal support which are flexible and cost less in public dollars; creating incentives for purchasing long-term care insurance which lessen the impact on Medicaid payments; and advocating for changes in federal policy to support the implementation of state policy.

*Choose Reform, Not Declining Quality* (1995), made recommendations for controlling rising health care costs by reforming the long term care system. Cost containment was a focus of this report, and many of the recommendations were actually adopted in public policy such as a capitated payment system and an expansion of managed care. However, these cost controls have fallen out of favor and today's policy makers are looking for alternative measures to manage the rising cost of care. Additionally, the authors recommended deregulation to give providers more freedom in meeting client needs. Because of rising costs, the authors made several recommendations to finance the care system. Specifically, providing incentives to individuals to take greater responsibility in accessing private funding options such as long-term care insurance and reverse mortgages for seniors. The authors also recommended that the state find ways to clarify goals of the long term care system and create a system to measure accountability and service results. Consumer choice was an additional theme in the report; the authors noted that it is important to provide care choice within the context of the managed care system.

*A New Wrinkle on Aging* (1998) was completed by a study committee under a contract with Project 2030, a project of the Minnesota Department of Human Services and the Minnesota Board on Aging. The report focused on three aspects of the services and other systems that needed to undergo change in order to support the major increase in older people that was going to occur in Minnesota by 2030. The aspects were life cycle communities, workforce and long term care. Life cycle communities: the report called for a number of steps that would

further the development of communities that would support residents as they age. It describes such features as more compact development for higher density (smart growth), more housing and transit options, as well as accessible community and housing design. Recommendations are made for a number of public agencies to take action to move in these directions. Workforce: the report called for changes in retirement expectations, and the way we work to accommodate a redefinition of retirement and work. Retirement should be determined in a more flexible way, since people are different and should be able to work as long as they want and are able, instead of having a predetermined age or time limits. The report also called for a change in how work is defined and structured so that employment options like part-time, consulting, job sharing, etc. become more standard and are offered by employers, enabling older adults to work and also have time for retirement pursuits. Long-term care: the report calls for a change in how we think of long-term care. For example, shifting thoughts to functional wellness and changing systems to a more preventive/wellness mode. In addition, the report called for changes in long-term care that expand the choices and options available to older persons when they need assistance. Changes are also needed in the end-of-life provisions, such as medical self-directives, so that people can make their wishes known and make sure that they are followed.

*Seniors with Disabilities in 2030: Getting Ready for the Aging Boom* (1999) contained several policies and recommendations relevant to a contemporary analysis of aging services. The report recommended shifting the focus of the health care system away from acute and toward chronic or preventative, a sentiment widely discussed at the federal and state level in recent years, but has yet to fully materialize. Additionally, the report recommended finding ways to increase the number of long-term care options for seniors through deregulation and efforts to overcome the labor shortage faced by long-term care facilities. The report also discussed a need to improve transportation options for seniors, particularly in Greater Minnesota.

## Recommendations

---

After reviewing historical policy statements and reports, the Aging Services Policy Review Group developed recommendations for Citizens League initiatives related to aging services.

The ASPRG offers the following statements, subsequent recommendations, and action steps.

Historically, Citizens League policy reports heavily related to aging services that met the needs of frail elderly, focusing on healthcare and institution-based living. The scope of today's policy has expanded to build on the assets of older adults, responding to their desires for self-determination and independent living. The focus is on deinstitutionalization and "aging in place" in community, with the development of home and community based services to help older adults remain active. The ASPRG recommends the Citizens League:

1. **Support** the expansion of services for older adults from primarily healthcare and institution-based living to a broader paradigm encompassing a wide range of domains including lifelong learning, caregiving, home and community based services, health promotion and disease prevention, continuing employment, civic engagement, etc.

Life expectancy has doubled in the last century. Older adults are living longer, and are more active and healthy than ever before. The definition of what it means to be “old” has changed drastically and now includes three generations of “old.” The ASPRG recommends the Citizens League:

2. **Recognize and build on** the assets older adults offer as vital and active members of communities.
3. **Explore** implications of the vast diversity among older adults, including concepts of lifecycle, midlife, lifelong, multi-generational interdependence and cultural identity. Consider reorienting services to fit individual needs regardless of age.
4. **Examine** the impact of language when referring to older adults and naming services.

The population is aging. There are a number of factors for this demographic shift including the increased life expectancy, lower birth rate, and aging of the baby boom generation. Understanding these factors and their economic impact to society is critical in the development of aging services policy. The ASPRG recommends the Citizens League:

5. **Utilize** the League’s influence to raise awareness of the contemporary realities of an aging society including the demographic and economic impacts of the baby boom generation within the context of social and economic change.

Many governmental, non-profit, and corporate stakeholders currently work to raise awareness of an aging society, garner consensus on issues, and develop policy related to aging services and older adults. Much of the work supports the Mission of the Citizens League. The ASPRG recommends the Citizens League:

6. **Frame** research and policy in aging services beyond older adults to include all ages. Further policy solutions should be intergenerational.
7. **Demonstrate** integrative leadership by deliberately expanding community participation in relevant dimensions of older adult services and current initiatives already widely supported by citizenry such as Transform 2010 and the Citizens League’s MAP 150 project.
8. **Shift** from consideration of aging services to promotion of healthy aging lifelong.

The majority of support and care for older adults is provided informally by otherwise unpaid family and friend caregivers. The social and financial impact of this care cannot be overstated. The ASPRG recommends the Citizens League:

9. **Acknowledge** the social and financial impact of caregiving on older adults, aging services, and society at large.
10. **Encourage** the integration of caregiving into the paradigm of services for older adults.

Research and contemporary thinking highlights the importance of community and individual health promotion and disease prevention interventions. Early intervention, appropriate intervention strategies, and evidence based health promotion are all fundamental concepts that support healthy communities. These in turn impact economic and productivity variables. The ASPRG recommends the Citizens League:

11. **Investigate** the role of productivity, as well as financial and economic factors related to health promotion and disease prevention within the context of a rapidly aging society.

Based on historical policy assessment the ASPRG suggests the following action steps:

1. The Citizens League could study policies adopted around the nation and in Minnesota to help guide the creation and regulation of what will likely be a burgeoning market for financial planning. This would include looking at what consumer protections need to be in place.
2. The Citizens League could examine the delivery and financing of aging services in Minnesota pertaining to cost and quality in the health care system. This issue continues to be a major part of the policy debate. Past Citizen's League studies provide a good background to inform future focus.
3. The Citizens League could take an overall look at healthcare and aging services that still need to be met in the 21<sup>st</sup> century. Relevant issues that will likely need further study include consumer choice, measuring outcomes, and cost containment. Further, the Citizens League should work to prioritize the competing needs in aging services.

## Acknowledgements

---

Citizens League volunteer participants comprised the Aging Policy Services Review Group. The participants reviewed past policy statements, researched contemporary sources of information, and wrote the final report. Group members included:



### Co-Conveners

Sheila Graham, Student, Saint Paul College

Rajean P. Moone, Ph.D., Aging Services Consultant

### Participants

James R. Boyle, President, James R. Boyle + Associates

Katie Devlaminck, Law student, University of MN Law School

Scott Halstead, Retired

Laurie L. Halverson

Jan Hively, Ph.D.

LaRhae Knatterud, MN Department of Human Services

Melinda Ludwiczak, Hennepin County Library

Lynne Megan, TSE, Inc.

Bob Scroggins

Rochelle Schultz Spinarski, Rural Health Solutions