



BAY AREA
SENIOR HEALTH POLICY FORUM

NOVEMBER 30, 2011 | ST. MARY'S CATHEDRAL, SAN FRANCISCO

PROCEEDINGS

PRESENTED BY

ON LOK LIFEWAYS
CENTER FOR ELDERS' INDEPENDENCE

SPONSORED BY

THE CALIFORNIA HEALTHCARE FOUNDATION
THE HEALTH TRUST
INSTITUTE ON AGING
THE HERITAGE
AGING SERVICES OF CALIFORNIA
EPISCOPAL SENIOR COMMUNITIES

Bay Area Senior Health Policy Forum Mission

TO INSPIRE, EDUCATE AND ENGAGE ADVOCATES, PROVIDERS, POLICYMAKERS AND OTHER STAKEHOLDERS IN OUR EFFORT TO STRENGTHEN THE SAFETY NET FOR BAY AREA SENIORS

Suggested Citation:

Bay Area Senior Health Policy Forum (2011). San Francisco.

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Proceedings Prepared

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BAY AREA SENIOR HEALTH POLICY FORUM

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ACKNOWLEDGEMENTS

On Lok Lifeways and the Center for Elders' Independence are deeply grateful to the many people and organizations that helped to plan and present the 2011 Bay Area Senior Health Policy Forum. As forum hosts we would like to extend a very special thanks to our sponsors for their dedication to improving the lives and health of vulnerable seniors and for their generous financial support that made the forum possible: The California Healthcare Foundation, The Health Trust, Institute on Aging, The Heritage, Aging Services of California, and Episcopal Senior Communities. We would also like to thank our wonderful in-kind donation sponsors: Clif Bar, Peet's Coffee & Tea, Honest Tea, Bristol Farms, and Earl's Organic Produce.

A heartfelt thank you is due to Belva Davis, the forum's gracious Emcee, and the exceptional morning plenary speakers: Assemblywoman Nancy Skinner; Secretary Diana Dooley, California Health and Human Services Agency; Joanne Handy, President and Chief Executive Officer, Aging Services of California; Jean Fraser, Chief, San Mateo County Health System; Anne Hinton, Executive Director, San Francisco Department of Aging and Adult Services; Warren Lyons, Chief Strategy and Integration Officer, Alameda County Medical Center (note: Warren Lyons filled in for Wright Lassiter, Chief Executive Officer, Alameda County Medical Center, who was unable to make the event); Lee Pullen, Director, Santa Clara County Department of Aging and Adult Services; Melanie Bella, Director, Federal Coordinated Health Care Office, Centers for Medicare & Medicaid Services; and, David Ishida, Regional Administrator, Administration on Aging. A big thank you also goes to Will Durst who entertained attendees with his wit and humor during the forum's luncheon!

We are also indebted to our inspirational afternoon workshop speakers, who generously shared their time and expertise: Jodi Reid, Executive Director, California Alliance for Retired Americans; Wendy Peterson, Director, Senior Services Coalition of Alameda County; Kim Klein, Nonprofits Talking Taxes, Compass Point; David Sayen Regional Administrator, Centers for Medicare & Medicaid Services, Region IX; Joanne Handy, President and Chief Executive Officer, Aging Services of California; Bob Edmondson, Chief Executive Officer, On Lok Lifeways; Kathleen Kelly, Executive Director, Family Caregiver Alliance, National Policy Center on Caregiving; Ramona Davies, Co-Director of Community Services Northern California Presbyterian Homes and Services; Cindy Kauffman, Vice President of Operations, Institute on Aging; Susan Poor, Senior Policy Advisor, NCB Capital Impact and Village To Village Network; Jerry Brown, Executive Director, Bethany Center Senior Housing; Jim Hill, President, Hill & Company Communications; Anne Ahola Ward, Circleclick.com; Ali Aalaei, Doctorbase.com and ARI Law; John Sung Kim, Doctorbase.com; Bob Trevorow, Executive Director, San Francisco Senior Center; Marty Lynch, Chief Executive Officer, Lifelong Medicare Care; Nina Maruyama, Officer, Compliance & Regulatory Affairs, San Francisco Health Plan; and, Ingrid Lamirault, Chief Executive Officer, Alameda Alliance for Health.

The success of the forum is directly attributable to the following indomitable members of the forum planning group, that we had the privilege of chairing:

- **On Lok Lifeways:** Eileen Kunz, Nancy Ko, Laura Byrne, Jenny O'Toole, Ian McCuaig and Valorie Villela
- **Center for Elders' Independence:** Greg Garrett, Angelin Barrios and Dianna Garrett
- **Health Trust:** Lori Andersen
- **Bethany Center:** Jerry Brown
- **Aging Services of California:** Joanne Handy
- **San Francisco Department of Aging and Adult Services:** Anne Hinton
- **Community Living Campaign:** Marie Jobling
- **Senior Services Coalition of Alameda County:** Wendy Peterson
- **NCB Capital Impact and Village to Village Network:** Susan Poor

Each of these individuals contributed mightily to the development and presentation of the forum. Thanks must also go to the following individuals who managed many behind-the-scenes details and successes:

- **On Lok Lifeways:** Kat Chang and George Gee
- **Center for Elders' Independence:** Crystal McCloud and Marilyn Bryan

A small cadre of consultants deserve tremendous thanks for their unique expertise: Laurie Earp, Earp Events & Fundraising, for a fabulous job organizing and coordinating the many moving parts of the forum; Jim Hill and Linda Goldsmith, Hill & Company Communications, for a terrific public relations and communication plan; and Monique Parrish, LifeCourse Strategies, for assistance with agenda development and preparation of these proceedings.

Last, a sincere thank you must be given to forum attendees who, on behalf of improving the safety net for Bay Area seniors, generously shared their passion, ideas, and commitment to action. Thank you!

Bob Edmondson, CEO
On Lok Lifeways

Peter Szutu, President and CEO
Center for Elders' Independence

EXECUTIVE SUMMARY

Over 250 enthusiastic and committed consumers, senior service providers, senior advocates, and policymakers from the San Francisco Bay Area and beyond attended the second Bay Area Senior Health Policy Forum in San Francisco, California on Wednesday, November 30, 2011, hosted by On Lok Lifeways and the Center for Elders' Independence. Bob Edmondson, Chief Executive Officer, On Lok Lifeways, and Peter Szutu, President and Chief Executive Officer, Center for Elders' Independence, jointly moderated the daylong forum dedicated to protecting and enhancing the safety net for Bay Area seniors.

In their welcoming remarks, Mr. Edmondson and Mr. Szutu highlighted the importance and urgency of bringing interested stakeholders together to support the forum's mission: *To inspire, educate, and engage advocates, providers, policymakers, and other stakeholders in our effort to strengthen the safety net for Bay Area seniors.* In response to recent dramatic cuts in programs and supports for California seniors and the need for stakeholders to work together to protect these vital services, the moderators outlined two primary goals for the 2011 Bay Area Senior Health Policy Forum: 1) to inspire attending stakeholders to continue to work effectively together; and, 2) to achieve the forum mission of strengthening and protecting the broader safety net for Bay Area Seniors.¹

Belva Davis, Bay Area award-winning journalist and author, emceed a series of dynamic morning plenary presentations given by individuals working on senior issues at the federal, state, and local levels. In the afternoon, attendees participated in five concurrent workshops: *Engaging our Stakeholders in Policy Change; Federal and State Strategies to Reform Healthcare Financing and Delivery; New Approaches to Senior Housing with Services; Connecting Your Community through Social Media; and, Innovative Partnerships – Local Responses to the Changing Environment.*

The workshops inspired rich discussions and thoughtful recommendations. To safeguard and improve the safety net for seniors, the recommendations covered a wide range of actionable objectives: promote grassroots models for activating and engaging seniors in advocacy and local policy-making; use social media as an effective advocacy and information tool; endorse development of a uniform assessment tool and single point of entry for long-term services and supports; and encourage agencies providing senior services to focus on technology preparedness. At the conclusion of the conference, the following strategic priority areas with key recommendations emerged as the forum's 2012 focus:

¹ The safety net is defined as local, state, and federal services and programs designed to meet the health and social needs of the poor, uninsured, and underserved.

**2011 BAY AREA SENIOR HEALTH POLICY FORUM
STRATEGIC PRIORITY AREAS AND RECOMMENDATIONS**

1. *Engage and activate stakeholders [consumers, providers, advocates, public officials] to preserve the health and social service safety net for older adults.*

Key Recommendations:

- Contact *Nonprofits Talking Taxes* to set up training sessions addressing solutions to California's fiscal crisis (www.nonprofitstalkingtaxes.org) and California Alliance for Retired Americans for assistance organizing seniors. (www.californiaalliance.org); each stakeholder to have one conversation with another person about taxes, revenue, and California's budget crisis.
- Advocate for a simple majority vote in the Legislature to raise taxes and approve the state budget.
- Use social media to engage stakeholders to support the safety net.

2. *Build partnerships with managed care and other organizations to safeguard and enhance health and home and community-based services (HCBS) for older adults.*

Key Recommendations:

- Educate managed care programs about community-based services; establish an education-information exchange; and, explore opportunities to obtain funding for prevention and the expansion of social and non-medical supports for older adults.
- Advocate with federal and county agencies for senior housing with supportive services.
- Collaborate with HCBS providers to implement financially viable supportive housing models.

3. *Promote effective technology solutions that support and enhance the safety net for seniors.*

Key Recommendations:

- Work statewide and across counties to develop effective and appropriate data collection tools that facilitate improved services for older adults.
- Work toward a HCBS uniform assessment tool and single point of entry for older adults.
- Explore incentives for aging providers to use health information technology.

In their closing comments, Mr. Edmondson and Mr. Szutu encouraged attendees to pursue these priority areas and recommendations in 2012, and affirmed their commitment to providing opportunities for attendees to communicate and share their progress with one another.

INTRODUCTION

Improving the quality of life for all Bay Area seniors inherently requires protecting those most vulnerable. Members of the Bay Area Senior Health Policy Forum share this moral imperative. The first Bay Area Senior Health Policy Forum in 2009, attended by providers, policy makers, advocates, older adults and family members, and other stakeholders, asserted the need to protect the safety net for older adults.² Recognizing the importance of working together to achieve this goal, attendees endorsed the following three guiding principles and priorities:

- **Education and Collaboration**: Sharing knowledge and bringing together providers, advocates, policymakers, and other stakeholders to inform senior health policy.
- **Strengthening Relationships**: Forging and maintain ties across Bay Area programs and geography.
- **Engagement**: Building support and inspiring stakeholders in our effort to strengthen the safety net for Bay Area seniors.

Building on the work of the 2009 forum and the forum mission, ***To inspire, educate, and engage advocates, providers, policymakers, and other stakeholders in our effort to strengthen the safety net for Bay Area seniors***, a second Bay Area Senior Health Policy Forum was held Wednesday, November 30, 2011 in San Francisco, California. Over 250 enthusiastic and committed consumers, senior service providers, senior advocates, and policymakers from the San Francisco Bay Area and beyond attended the daylong meeting. Hosted by On Lok Lifeways and the Center for Elders' Independence, two primary goals framed the 2011 forum: 1) to inspire attending stakeholders to continue to work effectively together; and, 2) to achieve the forum mission of strengthening and protecting the broader safety net for Bay Area Seniors.

Bob Edmondson, Chief Executive Officer, On Lok Lifeways, and Peter Szutu, President and Chief Executive Officer, Center for Elders' Independence, co-moderators of the forum, along with Belva Davis, Bay Area award-winning journalist and author, emcee of the morning plenary presentations, encouraged attendees to engage in the forum's morning plenaries addressing activities and policies impacting seniors at the state, county, and federal levels and afternoon workshops: *Engaging our Stakeholders in Policy Change*; *Federal and State Strategies to Reform Healthcare Financing and Delivery*; *New Approaches to Senior Housing with Services*; *Connecting Your Community through Social Media*; and, *Innovative Partnerships – Local Responses to the Changing Environment*. The following proceedings present brief summaries of the plenary presentations and workshops, and the forum 2012 selected priority areas and recommendations to strengthen and protect the broader safety net for Bay Area seniors.

² The safety net is defined as local, state, and federal services and programs designed to meet the health and social needs of the poor, uninsured, and underserved.

COUNTY, STATE AND FEDERAL PERSPECTIVES

Emcee Belva Davis opened the morning plenary sessions addressing activities and policies impacting seniors at the state, county, and federal levels. Prior to introducing the first of the three speaker panels – state perspectives on meeting the health and social service needs of seniors – she shared her personal commitment to increasing seniors' access to programs that promote quality of life and dignity, and encouraged attendees to learn more about the crisis in the safety net for senior services and what they can do to help.

STATE PERSPECTIVES

The three state perspectives panel speakers included: Assemblywoman Nancy Skinner; Diana Dooley, Secretary of the California Health and Human Services Agency; and Joanne Handy, President and Chief Executive Officer of Aging Services of California.

Assemblywoman Skinner, who represents the state's 14th Assembly District, began her presentation by underscoring the unprecedented dismantling of health and human services programs in California. She emphasized that the state's financial crisis is heavily influenced by several factors: California's Proposition 13 property tax rate and two-thirds vote requirement for the Legislature [for a balanced budget and tax increases]; and the unwillingness of Republican legislators to balance the state budget with spending cuts and tax revenue. She then explained that the confluence of these challenges had enabled a minority of legislators to control the state's budget process and tax revenue options. Assemblywoman Skinner recognized that although she and her Republican colleagues, whom she respects, share different core values, current California law limits her ability to assert her core value of protecting the safety net. She noted that change could only come in the current political climate by increasing revenues via ballot initiatives or eliminating the state's two-thirds vote requirement.

Secretary Dooley, appointed to lead the California Health and Human Services Agency (CHHS) by Governor Jerry Brown, acknowledged the tremendous fiscal and resource challenges facing California. Providing context to these challenges, she clarified the following: there is not \$13 billion of waste, fraud, and abuse the state could address to solve its financial problems; there are consequences to the state's spending; the state budget has to be balanced; and, the Brown Administration is committed to working with all constituents. Secretary Dooley did assert however, that she and the Governor are committed to empowering Californians at every level to address the state's crises. In light of this, the Brown Administration is developing a ballot revenue measure for the November 2012 election. Other efforts include working on realignment with counties to help them successfully address needs in their communities and focusing on the development of coordinated health and social service delivery systems for the state. Joanne Handy who, in addition to directing Aging Services of California, is a recognized national policy leader in the aging and home care fields, offered a provider's perspective on changes impacting California's older adults. She remarked that the elimination of the state's Adult Day Health Care (ADHC) Medi-Cal optional benefit in the 2011-12 state

budget was an unimaginable possibility a year ago. Acknowledging the behind-the-scenes efforts by Secretary Dooley and her staff on behalf of the recent ADHC settlement, Ms. Handy highlighted the settlement as an example of how the united efforts of people and organizations with leadership from Disability Rights California and others can influence decisions and policy to protect the safety net. This unified approach, she noted, is needed to address the 50 percent reduction in funding for the ADHC replacement program, *Community-Based Adult Services* (CBAS); trigger cuts the state will impose to the In-Home Supportive Services (IHSS) and the Program of All-inclusive Care for the Elderly (PACE), if state revenue projections are not met in January 2012; and, significant Medi-Cal cuts to skilled nursing and home health services.

Ms. Handy also introduced key findings from The SCAN Foundation's 2011 Poll of California Voters and results from the State Long-Term Services and Supports Scorecard, developed by the AARP Public Policy Institute in collaboration with The SCAN Foundation and The Commonwealth Fund, which benchmarks Long-Term Services and Support (LTSS) performance in every state. The California poll highlighted that the public is both concerned about and financially unprepared for long-term care and skilled nursing facility costs. Findings from the LTSS Scorecard revealed that while California performed well on measures of *Affordability and Access* (attributed to California's current Medi-Cal coverage policies) and *Choice of Setting and Provider* (attributed to consumer-directed service availability through IHSS), the state did not perform as well in the domain of *Quality of Life and Quality of Care*. Ms. Handy concluded her presentation underscoring that the state has an opportunity to improve care and services for older people who are dual eligibles through the development of a comprehensive, coordinated managed care program committed to consumer choice, independence, and dignity.

The follow-up question and answer discussion explored the state's priorities and interest in pursuing waivers, as well as opportunities to change the two-thirds voting requirement. Secretary Dooley noted that education, corrections, and roads are current priorities for Californians. She did acknowledge, however, that CHHS is devoted to preserving the independence of California residents, in accordance with the *Olmstead* decision. As such, the Administration is committed to pursuing all waivers that are appropriate to meeting the principles of independence, choice, and dignity. With respect to changing the two-thirds vote requirement, Assemblywoman Skinner noted the only way to change this law is through the ballot. Last, Joanne Handy encouraged big picture thinking to resolve problems and a focus on the greatest good for the greatest number.

COUNTY PERSPECTIVES

The next panel of speakers addressed senior issues from the county perspective. Speakers included, Jean Fraser, Chief of the San Mateo County Health System; Anne Hinton, Executive Director of the San Francisco Department of Aging and Adult Services; Warren Lyons, Chief Strategy and Integration Officer for the Alameda County Medical Center; and, Lee Pullen, Director of the Santa Clara County Department of Aging and Adult Services.

Ms. Fraser informed attendees that San Mateo County's effort to keep seniors healthy was informed by a study conducted several years earlier in which the county examined what would happen if "the county did nothing to change the future." The study revealed that without any health interventions, the county would experience dramatic increases in older adults and an unprecedented demand for doctors to meet the health needs of this expanded population. In response to the study's findings, the county decided to launch an aggressive health promotion campaign. Using several guiding principles including the **8 to 80 Rule**, which builds streets, sidewalks, and public spaces that allow an 8-year-old and an 80-year-old to safely use and cross the street, San Mateo began focusing on improving the health and quality of life of its residents and communities. In a companion effort, the county began focusing on long-term care integration to create: 1) one place to go for help; 2) one uniform assessment for all services; 3) options to keep people in the most integrated and least restrictive setting; and, 4) a responsive system for doctors and community agencies to refer patients who need help before they decline and need hospital care. Ms. Fraser urged attendees to take action now to change the health of all Californians.

Anne Hinton remarked that while San Francisco is home to some of the most creative programs serving and benefiting older adults in the country, e.g., PACE/On Lok, the IHSS worker training program, etc., the city is bracing for significant demographic changes in the next decade. To prepare for this population swell, and address current needs among older adults, San Francisco is focusing on a number of initiatives including a 10-year plan to address dementia, "San Francisco's Strategy for Excellence in Dementia Care, " and the Community Living Fund (CLF). CLF was created by the City of San Francisco to reduce unnecessary institutionalization by providing older adults and adults with disabilities with options for how and where they receive services. San Francisco also sponsors the Diversion and Integration Program (DCIP), another innovative program supporting diversion and discharge from Laguna Honda Hospital, with the goal of placing individuals in the most integrated setting appropriate to their needs and preferences. Last, Ms. Hinton reported San Francisco is working on a funding proposal for the Community Care Transitions Program, under the Affordable Care Act, to provide care transition support to adults with community support needs and high rates of acute hospital readmissions.

Warren Lyons discussed Alameda County Medical Center's focus on senior health care – Alameda County Medical Center is a key health care safety net provider, one of 17 acute care public hospitals in California. To address the growing health needs of older adults served by the medical center, the Alameda County Board of Supervisors formed a health committee. Based on feedback from a series of public hearings, the committee decided to focus on enhancing coordination between Alameda County Medical Center and Federally Qualified Health Centers (FQHCs) to better serve low-income vulnerable seniors. Mr. Lyons underscored that this strategic direction is supported in California's Section 1115 Medicaid Waiver, which aims to create more accountable, coordinated systems of care for low-income seniors, people with disabilities and dual eligibles – low-income elderly and persons with disabilities enrolled in both Medicare and Medicaid. In addition, he noted

the medical center is partnering with FQHCs to apply for a federal Workforce Development grant to train workers to provide care for older adults and persons with disabilities. Mr. Lyons emphasized that health care is moving from volume to value and that managed care is an optimal vehicle for coordinating care and health and social service support, and preventing avoidable hospital readmissions.

Lee Pullen profiled Santa Clara County's active efforts to support the health and independence of its growing senior population. Mr. Pullen explained that Santa Clara County, like other counties across the state, has been struggling with severe budget deficits. Among the senior programs slated for elimination recently was the elder abuse program, a challenge that galvanized the community. Consumers and advocates demanded the preservation of this program and others serving seniors. As a result, there was a 75 percent restoration to many county programs serving older adults, although core program structures were changed. The support from the community to keep seniors in their own homes as independent as possible and free from abuse prompted a rethinking and a redesign of the county's senior service programs. In response, the Department of Aging and Adult Services reached out to a number of community partners including the Health Trust, the Aging Services Collaborative of Santa Clara Valley, and many others to understand and address the needs of older adults. Mr. Pullen concluded the most valuable lesson learned from his county's experiences was the importance of early engagement of stakeholders and early identification of priorities.

In the follow-up question and answer discussion Jean Fraser responded that counties can and should improve coordination across programs; she underscored that San Mateo County has integrated Aging and Adult Services into the county public health department, which in turn is coordinating with the Health Plan of San Mateo (a managed care plan). Regarding a question about banks and foreclosure, Ms. Fraser reported that San Mateo banks were working with Board and Care homes to avoid foreclosure. Addressing a question about cultural diversity, Anne Hinton affirmed San Francisco County's commitment to providing culturally competent services and programs. Last, Lee Pullen encouraged every county to offer the best services possible for residents, whether they are 8 or 80 years old.

FEDERAL PERSPECTIVES

The final panel for the morning session addressed federal perspectives. The featured speakers included Melanie Bella, the Director of the Federal Coordinated Health Care Office (Medicare-Medicaid Coordination Office) at the Centers for Medicare & Medicaid Services (CMS) and David Ishida, Regional Administrator for the Administration on Aging (AoA).

Ms. Bella opened her presentation describing the primary purpose of the Medicare-Medicaid Coordination Office: *to improve quality, reduce costs, and improve the beneficiary experience for individuals eligible for Medicare and Medicaid (dual eligibles)*, and following core objectives:

- Ensure dually eligible individuals have full access to the services to which they are entitled.
- Improve the coordination between the federal government and states.
- Develop innovative care coordination and integration models.
- Eliminate financial misalignments that lead to poor quality and cost shifting

Providing context to the challenges and opportunities of the new Medicare-Medicaid Coordination Office, Ms. Bella reported that nine million Americans are dual eligibles and over one million reside in California. She further noted that the dual eligible population accounts for disproportionate shares of spending: dual eligibles were 21 percent of the Medicare fee-for-service (FFS) population in 2006, and accounted for 36 percent of total Medicare spending. In 2007, 15 percent of the 58 million people with Medicaid coverage were dual eligibles, accounting for 40 percent of total Medicaid benefit spending. In response to these statistics, the Medicare-Medicaid Coordination Office is working on initiatives in three specific areas: program alignment; data analytics; and models and demonstrations.

Addressing program alignment, Ms. Bella noted that it is essential the current FFS system for dual eligibles with multiple payers and misaligned payment incentives be replaced with a flexible system for states and providers that encourages comprehensive care coordination. Regarding data and analytics, the Medicare-Medicaid Coordination Office is working closely with states to increase current access to Medicare data and design, and develop a more effective database system for CMS. Fifteen states (including California) were selected to receive up to \$1 million to design new models for serving dual eligibles. Ms. Bella underscored that the Medicare-Medicaid Coordination Office expects stakeholder engagement and financial alignment to be paramount in the design and delivery of any model or demonstrations. Lastly, Ms. Bella addressed the Integrated Care Resource Center (ICRC), a new technical assistance resource center to assist states in delivering coordinated health care to high-need, high-cost beneficiaries. This resource will

provide technical assistance to states at all levels of readiness to better serve beneficiaries, improve quality and reduce costs.

Mr. David Ishida presented an overview of the many services of the United States Administration on Aging (AoA) and highlighted AoA's mission and vision which emphasizes comprehensive, coordinated, cost-effective care to support the health and independence of all seniors. He further noted that AoA's new strategic direction is focused on building a community based long-term care system to meet AoA's mission and vision. Elements of this new direction include promoting a Medicaid nursing home diversion strategy, continuing all of AoA's major initiatives and programs, supporting Aging and Disability Resource Centers (ADRCs - serve as single points of entry into the long-term services and supports system for older adults and people with disabilities) and participation in the Community-Based Care Transitions Program (Section 3026, Affordable Care Act, which provides funding to test models for improving care transitions for high risk Medicare beneficiaries). He also highlighted AoA's partnership with the Veteran's Department to enhance home and community-based services for older Veterans, and the Administration's emphasis on evidence-based disease prevention and health promotion services, and elder justice.

The follow-up question and answer discussion addressed collaboration between the Medicare and Medicaid programs, the role of Medicaid waivers, the elimination of ADHC in California, allowing case managers to bill for discharge planning, language access, and age eligibility for PACE programs. Ms. Bella responded to the question of Medicare and Medicaid collaboration. She reported the two programs were moving forward with their joint commitment to improve coordination. She also noted that while some people have suggested eliminating Medicaid and placing everyone on Medicare, there are strengths to both programs. On the question of Medicaid waivers, Ms. Bella stated that CMS encourages states to be creative in the use of waivers to direct Medicaid funding to areas that are not traditional. She cautioned however that waivers must be balanced with other state programs and funding.

Mr. Ishida responded to the question of why his office did not "prevent elimination of the ADHC program," noting that his office did not have authority over the State Medicaid Plan. Ms. Bella then addressed current payment policies that do not allow case managers to bill for discharge planning. She explained that CMS anticipates having new models of care coordination and funding through its demonstration projects (e.g., medical homes) that will inform future policies. In response to the question addressing language access, Mr. Ishida commented that a key focus of OAA is engaging minority, low-income, limited English-speaking communities. Finally, Ms. Bella shared that CMS and the Medicare-Medicaid Coordination Office are discussing regulatory and statutory changes to serve persons with disabilities in PACE by changing the age of eligibility.

* The morning plenaries were followed by lunch and entertainment by political satirist, Will Durst.

CONCURRENT WORKSHOPS

The afternoon concurrent workshops addressed multiple issue areas and strategies relevant to advancing policy reform to strengthen the broader safety net for seniors. Each workshop featured a panel of experts and a follow-up discussion. Attendees were encouraged to actively participate in the exchange of ideas and to begin to think about opportunities to promote change in their communities and around the state. The following are brief summaries of each workshop's discussion highlights, priority issue(s), and actionable recommendations.

Workshops

- *Engaging our Stakeholders in Policy Change*
- *Federal and State Strategies to Reform Healthcare Financing and Delivery*
- *New Approaches to Senior Housing with Services*
- *Connecting Your Community Through Social Media*
- *Innovative Partnerships – Local Responses to the Changing Environment*

Never doubt that a small group of thoughtful committed people can change the world. Indeed, it is the only thing that ever has.
-Margaret Mead

ENGAGING OUR STAKEHOLDERS IN POLICY CHANGE

This workshop facilitated by Wendy Peterson, Director, Senior Services Coalition of Alameda County, presented practical strategies to engage individuals and nonprofits in policy change to strengthen the safety net for seniors.³ The workshop presented an overview of civic engagement; the power of the senior voting block; and, opportunities for stakeholders to form unified messages and become effective advocates.

Speakers: Jodi Reid, Executive Director, California Alliance for Retired Americans (CARA); Kim Klein, Nonprofits Talking Taxes, Compass Point.

Discussion Highlights

Workshop speakers presented successful models of engaging stakeholders in policy change. Jodi Reid discussed CARA's grassroots model of activating and engaging seniors in advocacy by educating them about the policies that directly impact their lives and involving them in local policy-making ("nothing about us without us"). Wendy Peterson emphasized the power inherent in a coalition dedicated to promoting change, and shared core elements of building a coalition. Kim Klein reported that the 1.3 million people in California who work for nonprofits represent a powerful voting base with the potential for increasing revenue in support of safety net services. She highlighted that nonprofits have multiple stakeholders to engage in advocacy – volunteers, colleagues, Board members, family, and consumers – and shared a training that helps community members have conversations about the commons and sparks their participation in civic engagement. In conclusion, attendees agreed that organizing and educating constituents was paramount and that all forum stakeholders should consider taking advantage of the training and services offered by Nonprofits Talking Taxes and CARA.

PRIORITIES

1. Nonprofits must organize boards, staff, volunteers, clients and community to engage in advocacy. Everyone is a messenger.
2. The message: Taxes are the way we contribute to the common good and fund the services our communities need.

RECOMENDATIONS

- a. Contact *Nonprofits Talking Taxes* to set up training sessions (www.nonprofitstalkingtaxes.org).
- b. Contact the *California Alliance for Retired Americans* for assistance organizing seniors (www.californiaalliance.org).
- c. Make it your goal to be a messenger: start by having one conversation about taxes & revenue.

³ Workshop Recorder: Lenore MacDonald.

FEDERAL AND STATE STRATEGIES TO REFORM HEALTHCARE FINANCING AND DELIVERY

Greg Garrett, Director of Government Affairs, Real Estate and Business Development, Center for Elders' Independence, facilitated this workshop exploring the impact of the Affordable Care Act, California's 1915(c) Medi-Cal Waiver program, and state budget cuts to California's long-term care and supports system.⁴

Speakers: David Sayen Regional Administrator of the Centers for Medicare & Medicaid Services, Region IX; Joanne Handy, President and Chief Executive Officer of Aging Services of California; Bob Edmondson, Chief Executive Officer, On Lok Lifeways; Kathleen Kelly, Executive Director, Family Caregiver Alliance, National Policy Center on Caregiving

Discussion Highlights

A number of salient issues were covered in this workshop from CMS's Triple Aim (better care for individuals; better health for populations; and, reducing per-capita costs), to the opportunities for elder care stakeholders to create well-run comprehensive managed care programs for dual eligibles. During the discussion, participants identified the need for improved understanding between FFS and managed care providers. Each would benefit from knowing the other's scope of practice, mechanisms for addressing risk, and value. Participants also emphasized that nonprofit organizations, like PACE providers, with their community experiences, history, and mission, are in a strong position to create a value proposition for managed care. Additionally, participants endorsed development of a home and community-based services (HCBS) uniform assessment tool and single point of entry, and technology preparedness on the part of LTSS providers.

ISSUE PRIORITIES

1. Seize the opportunity to create an effective and comprehensive managed care system that is responsive to chronically ill seniors and dual eligibles.

RECOMMENDATIONS

- a. Bridge the cultural and educational gap between fee-for-service and managed care providers through an education-information exchange, a first step to creating a *win:win* for both parties (*education is a form of advocacy*).
- b. Work toward establishing a uniform assessment tool and single point of entry for all long-term services and supports.
- c. Promote regional collaboration to achieve technology preparedness: work statewide and across county lines to develop and promote effective technology solutions that support and enhance the safety net for seniors.

⁴ Workshop Recorder: Oya Autry

NEW APPROACHES TO SENIOR HOUSING WITH SERVICES

Susan Poor, Senior Policy Advisor, NCB Capital Impact & Village To Village Network, and Jerry Brown, Executive Director, Bethany Center Senior Housing, facilitated this workshop dedicated to assessing four innovations that cost-effectively address the concept of senior housing with services. The following housing models were presented in this workshop: *The Well Elder Program of Northern California Presbyterian Homes and Services*, *the Institute on Aging's collaboration with Bridge Housing*, *Bethany Housing's Ruth's Table Program*, and *the Village model*.⁵

Speakers: *Ramona Davies, Co-Director of Community Services Northern California Presbyterian Homes and Services; Cindy Kauffman, Vice President of Operations, Institute on Aging; Susan Poor, Senior Policy Advisor, NCB Capital Impact & Village To Village Network; and, Jerry Brown, Executive Director, Bethany Center Senior Housing.*

Discussion Highlights

The four innovative senior housing models presented in this workshop supported five critical characteristics: 1) aging in place (i.e., receiving the services and supports an individual needs, and chooses, regardless of the individual's residential setting); 2) aging in the community (i.e., connected to services, social and non-medical supports and the larger community that supports aging in place); 3) a person-centered focus; 4) affordable housing; and, 5) culturally competent service coordination. To expand these models, participants discussed advocating with the Department of Housing and Urban Development (HUD) and other federal and county agencies for affordable, supportive housing for seniors. Additional recommendations included urging collaboration among and between HCBS providers to implement financially viable supportive housing models, and exploring opportunities to obtain money from medical services for prevention programs and social/non-medical supports.

ISSUE PRIORITIES

1. Increase research on senior housing with services models.
2. Educate the public and providers about innovative senior housing with services options.

RECOMMENDATIONS

- a. Create opportunities to connect older adults to prevention programs and social/non-medical supports through medical settings.
- b. Advocate with federal, state, and county agencies for senior housing with supportive services.
- c. Advocate for a simple majority vote in the Legislature for passage of revenue enhancing measures to replace the current two-thirds majority vote requirement.

⁵ Workshop Recorder: Jean Johnson-Fields

ENGAGING YOUR COMMUNITY THROUGH SOCIAL MEDIA

This workshop facilitated by Jim Hill, President, Hill & Company Communications, addressed the meteoric rise in social media and how companies and organizations are using social media as an effective way of communicating with new stakeholders and maintaining relationships with existing ones.⁶ The workshop also explored social media and compliance risks.

Speakers: Jim Hill, President, Hill & Company Communications, Anne Ahola Ward, Circledclick.Com, Ali Aalaei, Doctorbase.com and ARI Law, and John Sung Kim, Doctorbase.com.

Discussion Highlights

This workshop provided a compelling behind-the-scenes examination of social media. As a result, participants learned how many of the current social media giants (e.g., Facebook, Twitter, and LinkedIn) use innovative customer relations' strategies to build and maintain brand loyalty. Participants also learned how many social media companies, and their users, can track consumer engagement. Anne Ahola Ward explained that Facebook uses the following EdgeRank equation to determine Facebook *News Feeds* stories for top billing: **Affinity** (level of interaction the content gets) + **Weight** (e.g., a "Comment" is weightier than a "Like") + **Time Decay** (the older the posting, or edge, the less important it becomes) = EdgeRank. Participants were given the following advice: do not mix individual with company profiles; be concise in communications – simple messages are more likely to get a response; what you measure improves; and, understand and apply all relevant privacy and protected speech regulations when using social media.

ISSUE PRIORITIES AND ASSOCIATED RECOMMENDATIONS

1. Health Insurance Portability and Accountability Act (HIPPA) Compliance.
 - a. Be aware of HIPPA and all privacy regulations associated with social media and educated about the use of https, which refers to a secure web address.
2. Be aware of and knowledgeable about the identified "target audience."
 - a. **Check settings** – be cautious about who you want to "Friend;" don't ask employees to become a "Friend."
 - b. **Craft a strategy** for reaching stakeholders before launching the social media effort.
3. Carefully manage the brand and reputation of the social media campaign.
 - a. **Be proactive** versus "do nothing."
 - b. **Select appropriate metrics** to monitor effectiveness of engagement.
 - c. **Start out small** – take baby steps – and keep the effort simple.

⁶ Workshop Recorder: Laura Byrne

INNOVATIVE PARTNERSHIPS – LOCAL RESPONSES TO THE CHANGING ENVIRONMENT

Eileen Kunz, Director of Policy, Regulatory Affairs and Compliance, On Lok Senior Health Services, facilitated this workshop, which profiled several local organizations responses to changes in federal and state policy related to services for seniors and people with disabilities.⁷ Speakers described pioneering efforts to improve care transitions, implement medical homes, enroll seniors and people with disabilities in managed care, and improved care coordination for dual eligibles.

Speakers: Bob Trevorrow, Executive Director, San Francisco Senior Center; Marty Lynch, Chief Executive Officer, LifeLong Medical Care; Nina Maruyama, Compliance Officer, San Francisco Health Plan; Ingrid Lamirault, Chief Executive Officer, Alameda Alliance for Health.

Discussion Highlights

Each workshop presenter discussed innovative programs to protect the safety net amidst the changing health and social service environment. Bob Trevorrow described San Francisco Senior Center's Homecoming Transitional Care Program (a partnership between community-based organizations- CBOs, and area hospitals) which assists low-income isolated seniors make the transition from hospital to home care by offering post-discharge services. Marty Lynch discussed LifeLong Medical Care's integration of mental health and behavioral health in primary care and commitment to adult day health services under CBAS. Ingrid Lamirault and Nina Maruyama described Medi-Cal managed care and the vital role and commitment of Alameda Alliance for Health and the San Francisco Health Plan (non-profit managed care organizations) to their members and their communities. In the follow-up discussion, participants identified connecting with managed care as a priority. For related recommendations they suggested: bolstering data collection, working toward a uniform patient assessment, promoting health information technology incentives, and supporting interdisciplinary teams.

ISSUE PRIORITIES

1. Translate the value of community-based services to managed care – look for opportunities to build relationships and trust; explore coordination of carve-outs with different health plans.

RECOMMENDATIONS

- a. Bolster data collection – create a uniform language (CBO's collect valuable data that could be shared with other CBO's and health plans).
- b. Create and use a uniform assessment instrument.
- c. Promote Health Information Technology incentives for aging providers.
- d. Support interdisciplinary teams.

⁷ Workshop Recorder: April Wong.

CONCLUDING PRESENTATION

Bob Edmondson and Peter Szutu reconvened attendees for the concluding presentation. During the wrap-up, facilitators from each workshop summarized presentation and discussion highlights, and identified priority issues and recommendations. The following strategic priority areas with key recommendations emerged as the forum's 2012 focus:

2011 BAY AREA SENIOR HEALTH POLICY FORUM STRATEGIC PRIORITY AREAS AND RECOMMENDATIONS

1. *Engage and activate stakeholders [consumers, providers, advocates, public officials] to preserve the health and social service safety net for older adults.*

Key Recommendations:

- Contact *Nonprofits Talking Taxes* to set up training sessions addressing solutions to California's fiscal crisis (www.nonprofitstalkingtaxes.org) and California Alliance for Retired Americans for assistance organizing seniors. (www.californiaalliance.org); each stakeholder to have one conversation with another person about taxes, revenue, and California's budget crisis.
- Advocate for a simple majority vote in the Legislature to raise taxes and approve the state budget.
- Use social media to engage stakeholders to support the safety net.

2. *Build partnerships with managed care and other organizations to safeguard and enhance health and home and community-based services (HCBS) for older adults.*

Key Recommendations:

- Educate managed care programs about community-based services; establish an education-information exchange; and, explore opportunities to obtain funding for prevention and the expansion of social and non-medical supports for older adults.
- Advocate with federal and county agencies for senior housing with supportive services.
- Collaborate with HCBS providers to implement financially viable supportive housing models.

3. *Promote effective technology solutions that support and enhance the safety net for seniors.*

Key Recommendations:

- Work statewide and across counties to develop effective and appropriate data collection tools that facilitate improved services for older adults.
- Work toward a HCBS uniform assessment tool and single point of entry for older adults.
- Explore incentives for aging providers to use health information technology.

In closing, Mr. Edmondson and Mr. Szutu encouraged attendees to pursue these priority areas and recommendations, and affirmed their commitment to providing opportunities for attendees to communicate and share their progress with one another.

APPENDIX A: FORUM AGENDA



BAY AREA SENIOR HEALTH POLICY FORUM

NOVEMBER 30, 2011 | ST. MARY'S CATHEDRAL, SAN FRANCISCO

PROGRAM

WELCOME TO THE 2011 BAY AREA SENIOR HEALTH POLICY FORUM!

On behalf of our planning committee who have been working over the last year to develop today's program, we extend a warm welcome to you.

This is the time to come together. Senior service providers, senior advocates and policymakers from across the greater Bay Area can find a common voice for vitally needed health policies for California's seniors.

California's over-65 population is rapidly increasing and will double in the next 25 years. The economic and political environments are forcing our organizations and communities to experience funding cuts and dwindling resources which are needed to provide services to Bay Area seniors. We must strengthen the safety net for them now!

Building upon our first Bay Area Senior Health Policy Forum, held in Oakland in 2009, with over 200 participants, we have expanded our outreach to more Bay Area counties. We look forward to this morning's presentations from representatives at the federal, state, and county levels who will discuss current policy and funding initiatives. Our afternoon workshops, facilitated by Bay Area leaders, will explore new innovations and collaborations between partners to address a stronger future, even in the face of current challenges. What can each of us do to effectuate the needed changes?

The needs are real and the environment potentially daunting. Together, we can find answers. We are pleased you are here and that we have an opportunity to strengthen our resolve, knowledge, and advocacy skills.

Sincerely yours,

Robert Edmondson, CEO
On Lok Lifeways

Peter Szutu, President and CEO
Center for Elders' Independence

TO INSPIRE, EDUCATE AND ENGAGE ADVOCATES, PROVIDERS, POLICYMAKERS AND OTHER STAKEHOLDERS IN OUR EFFORT TO STRENGTHEN THE SAFETY NET FOR BAY AREA SENIORS

CONFERENCE SCHEDULE

8:00am **REGISTRATION | LIGHT BREAKFAST AND NETWORKING**

9:00am **WELCOME & MORNING PLENARY**

BELVA DAVIS | Emcee, Author, Award-Winning TV Reporter

ROBERT EDMONDSON | CEO, On Lok Lifeways

PETER SZUTU | CEO, Center for Elders' Independence

9:15am **STATE PERSPECTIVES**

ASSEMBLYMEMBER NANCY SKINNER

California State Assembly

SECRETARY DIANA DOOLEY

California Health and Human Services Agency

JOANNE HANDY

CEO, Aging Services of California

10:15am **MORNING BREAK**

10:30am **COUNTY PERSPECTIVES**

JEAN FRASER

Chief, San Mateo County Health System

ANNE HINTON

Director, San Francisco Department of Aging and Adult Services

WRIGHT LASSITER

CEO, Alameda County Medical Center

LEE PULLEN

Director, Santa Clara County Department of Aging and Adult Services

11:30am **FEDERAL PERSPECTIVES**

MELANIE BELLA

Director, Medicare-Medicaid Coordination Office, CMS

DAVID ISHIDA

Regional Administrator, Administration on Aging

12:30pm **LUNCH AND ENTERTAINMENT**

WILL DURST | Political Satirist

1:30pm **AFTERNOON WORKSHOPS**

■ Engaging our Stakeholders in Policy Change *Room A*

■ Federal and State Strategies to Reform Healthcare Financing and Delivery *St. Francis Room*

■ New Approaches to Senior Housing with Services *Patrons Hall (Main Room)*

■ Connecting Your Community through Social Media *Room B*

■ Innovative Partnerships – Local Responses to the Changing Environment *Room C*

3:00pm **AFTERNOON BREAK**

3:10pm **CONCLUDING PRESENTATION**

4:00pm **WINE AND CHEESE NETWORKING RECEPTION**

MORNING PLENARY PANEL



MELANIE BELLA is the Director of the Medicare-Medicaid Coordination Office at the Centers for Medicare and Medicaid Services (CMS). This office, officially the Federal Coordinated Health Care Office, was established by the Affordable Care Act (Section 2602). As Director, Ms. Bella leads the work of this office charged with more effectively integrating benefits for individuals eligible for both Medicare and Medicaid and improving coordination between the federal government and states for such beneficiaries. Prior to joining CMS, Ms. Bella was the senior vice president for policy and operations at the Center for Health Care Strategies (CHCS). She led the organization's efforts to integrate care for complex populations, including people with multiple chronic conditions, disabilities, serious mental illness, and dual eligibles. In addition, she directed a unique leadership training institute to help Medicaid directors enhance the skills they need to transform their state programs into national models for high-quality, cost effective care. Prior to CHCS, Ms. Bella served as Medicaid director for the state of Indiana from 2001 through 2005. During her tenure, one of Ms. Bella's most notable accomplishments was spearheading the creation of the Indiana Chronic Disease Management Program. She earned a master's in business administration from Harvard University and a bachelor's degree from DePauw University.



BELVA DAVIS is an award-winning journalist who has covered Bay Area politics for four decades. Her recently published memoir, *Never In My Wildest Dreams: A Black Woman's Life in Journalism*, recount her near half century in media. She was the first African American woman hired to work on television in the western United States and is one of 500 journalists nationally to be profiled in the NEWSEUM, the world's first interactive museum of news. She is the host of KQED Television's Friday night current affairs program "This Week in Northern California." Davis has earned eight local Emmys for her reporting and three honorary Doctorates, including one from Sonoma State University, for her television work and community service. She is the recipient of numerous community service awards for her volunteer work on behalf of a wide variety of causes. As the National Equal Employment Opportunities chair of AFTRA, the television union, she spent countless hours advocating for women, minorities, and the disabled. Belva Davis is a trustee of the Fine Arts Museums of San Francisco, the Museum of the African Diaspora, the War Memorial Center for the Performing Arts, and the Institute on Aging. She is also a member of the San Francisco Chapter of Links Inc and an honorary member of Alpha Kappa Sorority.



SECRETARY DIANA DOOLEY was appointed to lead the California Health and Human Services Agency by Governor Jerry Brown. As CHHS Secretary, Dooley oversees twelve departments and one board, while also serving on many boards and commissions such as the newly created California Health Benefit Exchange Board. Prior to leading CHHS, Ms. Dooley was President and Chief Executive Officer of the California Children's Hospital Association, which advocates for children's health on behalf of the eight, nonprofit regional children's hospitals in California. Ms. Dooley is active in civic and community affairs, having served on the Boards of Directors of the UC Merced Foundation, Blood Source of Northern California and The Maddy Institute at California State University, Fresno. She is also a past president of Planned Parenthood, the Visalia Chamber of Commerce and the Central California Futures Institute.

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JEAN S. FRASER is the Chief of the San Mateo County Health System. The System encompasses all health-related functions for the County, including the county hospital (San Mateo Medical Center), eleven clinics, Behavioral Health and Recovery Services, Environmental Health, and all traditional public health functions, as well as Aging & Adult Services. Ms. Fraser has been the Chief since January 2009. Prior to joining San Mateo County, Ms. Fraser was the Chief Executive Officer of San Francisco Health Plan (SFHP), a county-created health plan providing affordable health coverage to 53,000 low and moderate income families. Prior to joining SFHP, Ms. Fraser was with the San Francisco City Attorney's Office, where she was the managing attorney of the team advising the San Francisco Departments of Public Health and Human Services. Ms. Fraser holds a law degree from Yale Law School, and a bachelor's degree from Yale University.



JOANNE HANDY is the President and CEO of Aging Services of California, which represents the nonprofit senior living field of CCRCs, assisted living, senior housing and community-based services. Aging Services is the founding sponsor of AgeTech California, a partnership of the senior living and home care fields advancing the use of technologies by providers. Until 2009, she was the President of the Visiting Nurse Association of Boston, the nation's oldest and one of the largest VNAs on the east coast. She is recognized as a national policy leader in the aging and home care fields, having served until 2010 on the national Board of Directors of AARP, representing 36 million Americans 50 years and older. She is the former Chair of the American Society on Aging, the largest gerontological professional association in the country. She was appointed as a delegate to the White House Conference on Aging. She was a Kellogg International Leadership Fellow and is the author of several publications spanning the areas of geriatrics, home care, management, and marketing.



ANNE HINTON is Executive Director of the San Francisco Department of Aging and Adult Services. In this capacity she has responsibility for In-Home Supportive Services, Adult Protective Services, Public Guardian, Public Conservator, Public Administrator, Representative Payee, Veterans Services, Information and Referral, and the Partnership for Community Based Care and Support and the Community Living Fund. In addition the Department funds 45 community service providers for programs such as congregate meals, senior centers, home delivered meals, case management, family caregiving, etc. The Department of Aging and Adult Services serves older adults as well as younger disabled adults. Her career spans more than 30 years including positions as the Director of Home Care, Care Management and Fiduciary Services Department for the Institute on Aging, the Director of Aging Services for San Francisco Catholic Charities and Director of the South San Francisco Senior Services. Ms. Hinton has experience as a lecturer/teacher in the field of Gerontology. She is a member of the Board of the National Association of Area Agency on Aging and has served on other boards, professional associations and committees whose focus is long term care.



DAVID A. ISHIDA has worked in the field of aging since 1972. Mr. Ishida is the Regional Administrator for the Administration on Aging, United States Department of Health and Human Services, Regions IX & X where he has jurisdiction for Arizona, California, Hawaii, Nevada and the flag territories of the Outer Pacific – American Samoa, Guam and the Commonwealth of the Mariana Islands and the states of Alaska, Idaho, Oregon and Washington. Mr. Ishida's professional career has focused on working with the elderly population, particularly low income and minority seniors, and the providers who serve them. Mr. Ishida worked

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DAVID A. ISHIDA (continued)

for the City & County of San Francisco Commission on the Aging (Area Agency on Aging) where he was the Executive Director. He was instrumental in the development of the Case Management Plan for Senior Services and Community-Based Long-Term Care and the Senior Services Plan 1994-2000. Prior to his employment with the AAA, Mr. Ishida worked in San Francisco's Japantown for Kimochi, Inc. Japanese American Senior Services. Mr. Ishida has been involved in a number of national, state and local aging organizations and foundations in various capacities. Mr. Ishida received his Bachelor of Arts degree in Interdisciplinary Social Sciences and a Master of Arts degree in Gerontology from San Francisco State University.



WRIGHT LASSITER, III serves as the Chief Executive Officer of Alameda County Medical Center. Mr. Lassiter joined Alameda County Medical Center in September 2005, and has worked with the Board of Trustees to define and fulfill the Medical Center's vision of superior clinical results, strong patient loyalty, positive financial performance, and being a leading Bay Area employer of health care professionals. He serves as an Interim Chancellor at Dallas County Community College District since May 2006. Mr. Lassiter served as Senior Vice-President for Operations at JPS Health Network in Fort Worth, Texas, where he managed 25 ambulatory health centers and many specialty, ancillary and support services; oversaw construction and facility management; and led planning of a 108-bed hospital expansion. Earlier, he served as Vice President, Operations at Methodist Health System in Dallas. Mr. Lassiter is a Member of the American College of Health Care Executives and the National Association of Health Service Executives. He holds a Bachelor of Science in Chemistry, with honors, from LeMoyne College; and a Master of Healthcare Administration from Indiana University, graduating at the top of his class.



LEE PULLEN the Director of the County of Santa Clara's Department of Aging and Adult Services. Lee holds a Master of Science degree in Clinical Psychology at San Francisco State University and began his work in the field of aging as a mental health counselor with San Francisco's Institute on Aging. He then transitioned into the public social services sector, serving in Marin County before joining Santa Clara in 2009. Lee has been an advocate for state legislation that provides protections for dependent adults and is currently overseeing a county-community wide strategic planning endeavor to prioritize services for seniors and develop a comprehensive system of support.



ASSEMBLYMEMBER NANCY SKINNER Elected to the State Assembly in 2008 and re-elected in 2010, Assemblymember Nancy Skinner has been involved throughout her career in efforts to promote energy conservation. During the oil crisis of the late 1970s, Ms. Skinner and others successfully lobbied the City of Berkeley to establish an Energy Office and a citizen's Energy Commission. In 1984 Ms. Skinner was elected to the Berkeley City Council and became responsible for many of Berkeley's groundbreaking environmental policies. An early champion of integrating economic development with environmental protection, Ms. Skinner authored the legislation to establish Berkeley's Community Energy Services Corporation, which continues to provide energy efficiency services to small businesses and homeowners throughout the East Bay. During her time in the Assembly, Ms. Skinner has carried major legislation governing energy storage, net energy metering, renewable energy, and energy upgrade financing. A nationally renowned leader in the fight against global warming, Ms. Skinner founded ICLEI-Local Governments for Sustainability. As Executive Director of ICLEI's US office, Ms. Skinner launched the Cities for Climate Protection program — the US movement of mayors and cities working to reduce greenhouse gas emissions.

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AFTERNOON WORKSHOPS

WORKSHOP #1

ENGAGING OUR STAKEHOLDERS IN POLICY CHANGE

A hands-on, interactive workshop on practical strategies to help nonprofits leverage the energy of their stakeholder communities — from grassroots to grass tops. We will explore proven models that nonprofits can use to help staff and stakeholders begin the process of civic engagement, tap into the power of the senior voting block, and partner to form unified messages and enable effective advocacy.

- PRESENTERS:**
- **Jodi Reid** *California Alliance for Retired Americans, CARA*
 - **Wendy Peterson** *Senior Services Coalition of Alameda County*
 - **Kim Klein** *Klein & Roth Consulting*

FACILITATOR: Wendy Peterson

WORKSHOP #2

FEDERAL AND STATE STRATEGIES TO REFORM HEALTHCARE FINANCING AND DELIVERY

Presenters will lead an in-depth discussion on Federal and State initiatives stemming from the Affordable Care Act, California's 1115 Medi-Cal Waiver, and State Budget cuts, and how these changes affect the long-term care industry and consumers. Attendees will learn where local organizations fit within the changing environment.

- PRESENTERS:**
- **David Sayen** *Centers for Medicare & Medicaid Services*
 - **Joanne Handy** *Aging Services of California*
 - **Shawn Bloom** *National PACE Association*
 - **Kathy Kelly** *Family Caregiver Alliance/National Center on Caregiving*

FACILITATOR: Greg Garrett

WORKSHOP #3

NEW APPROACHES TO SENIOR HOUSING WITH SERVICES

Over ninety percent (90%) of older adults wish to stay in their homes and communities as they age. To do this successfully, a variety of services and supports must be available to ensure their well-being as they experience transitions in health status, mobility, relationships, and connections to their communities. This workshop will look at four innovations that cost-effectively address the concept of housing with services: The Well Elder Program of Northern California Presbyterian Homes and Services, the Institute on Aging's collaboration with Bridge Housing, Bethany Housing's Ruth's Table program, and the Village model.

- PRESENTERS:**
- **Ramona Davies** *Northern California Presbyterian Homes and Services*
 - **Cindy Kauffman** *Institute on Aging*
 - **Susan Poor** *NCB Capital Impact and Village to Village Network*
 - **Jerry Brown** *Bethany Center Senior Housing, Inc.*

FACILITATORS: Susan Poor & Jerry Brown

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WORKSHOP #4

CONNECTING WITH YOUR COMMUNITY THROUGH SOCIAL MEDIA

Social media has experienced a meteoric rise over the past few years. Many companies and organizations are now using social media as an effective way of communicating with new stakeholders and maintaining relationships with existing ones. This workshop will explore the latest strategies, tools and trends in social media as well as some of the compliance risks.

- PRESENTERS:**
- **Jim Hill** *Hill & Co. PR*
 - **Anne Ahola Ward** *CircleClick.com*
 - **Ali Aalaei** *DoctorBase.com and ARI Law*
 - **John Sung Kim** *DoctorBase.com*

FACILITATOR: Jim Hill

WORKSHOP #5

INNOVATIVE PARTNERSHIPS- LOCAL RESPONSES TO THE CHANGING ENVIRONMENT

This workshop will examine how local organizations are responding to changes in federal and state policy environments. Panelists will describe initiatives related to improving care transitions, implementing enhanced medical homes, enrolling seniors and people with disabilities in managed care, and better coordinating care for Medicare and Medi-Cal beneficiaries.

- PRESENTERS:**
- **Bob Trevorrow** *San Francisco Senior Center*
 - **Marty Lynch** *Lifelong Medical Care*
 - **Ingrid Lamirault** *Alameda Alliance for Health*
 - **Nina Maruyama** *San Francisco Health Plan*

FACILITATOR: Eileen Kunz

THANK YOU TO OUR PLANNING COMMITTEE:

LORI ANDERSEN | The Health Trust **JERRY BROWN** | Bethany Center
GREG GARRETT | Center for Elders' Independence **JOANNE HANDY** | Aging Services of California
ANNE HINTON | San Francisco Department of Aging and Adult Services
MARIE JOBLING | Community Living Campaign **EILEEN KUNZ** | On Lok Lifeways
WENDY PETERSON | Senior Services Coalition of Alameda County
SUSAN POOR | NCB Capital Impact and Village to Village Network

And key staff from the following organizations:

ON LOK LIFEWAYS | CENTER FOR ELDERS' INDEPENDENCE
30TH STREET SENIOR CENTER | EARP EVENTS AND FUNDRAISING



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