

Testimony to the Senate Public Health and Welfare Committee In Opposition of HB 2114 March 23, 2021

Chairman Hilderbrand and members of the Committee, as the Director of k4ad, I represent the network of eleven Area Agencies on Aging covering all 105 Kansas counties.

In 1973, the Older Americans Act created the system of Area Agencies on Aging at the community level. As "boots on the ground," AAAs respond to unique community needs with the provision of programs and services, including serving as an advocate and focal point for older individuals. In 1997, the State of Kansas designated the Area Agencies on Aging as the "single point of entry" for information and services, creating a "one stop shop." Regardless of the funding source originating from federal, state, or local government (i.e., Older Americans Act, Senior Care Act, Medicaid), the Area Agencies on Aging are an objective, trustworthy resource.

Before the official designation of the Area Agencies on Aging, Kansas legislators created an Advisory Council on Aging, with K.S.A. 75-5911 appointing 15 members representing "different geographical, social and ethnic groups," consisting of 6 legislators and 11 potential cabinet members or organizations appointed by the Governor, with at least "one member being licensed by the state and actively engaged in the administration of adult care homes within the state." The statute also mandates that "at least ½ of the council be 60 years of age or older." The statute authorized the council to meet at least twice a year, or as needed by the Secretary, or upon written request by the council, although not more than 12 times a year.

Although statute does not sunset the advisory council, it currently lacks appointed members to fulfill statutory duties. Before creating a new task force, it makes sense to review the powers and duties of the advisory council, and perhaps amend the functions and appointees in HB 2114.

Advisory Council on Aging Powers and Duties (KSA 75-5914)

- 1) Provide advocacy for the aging in the affairs of the department, the governor's office and other public and private, state and local agencies affecting the aging;
- 2) Review and comment upon reports of the department to the governor and the legislature;
- 3) Prepare and submit to the governor, the legislature and the secretary an annual report evaluating the level and quality of all programs, services and facilities provided to the aging by state agencies;
- 4) Review and comment upon the comprehensive state plan prepared by the department;
- 5) Review and comment upon disbursements by the department of public funds to public and private agencies;
- 6) Recommend candidates to the governor for appointment as secretary of aging for the department on aging;
- 7) Consult with the secretary regarding the operations of the department;
- 8) Serve as the advisory committee to the governor and the department on aging as required and defined in the rules and regulations, part 903.50(c), issued under the federal older Americans act of 1965 (public law 89-73) and amendments thereto;
- 9) Review and comment to the state long-term care ombudsman upon the policies and procedures of the office of long-term care ombudsman; and
- 10) Consult with the state long-term care ombudsman regarding needs for ombudsman services for aged Kansas residents.

Kansas Senior Care Task Force Powers and Duties (HB 2114)

- 1) Study of the provision of care for seniors in the state who suffer from Alzheimer's disease, dementia or other age-related mental health conditions;
- 2) Study of the administration of antipsychotic medications to adult care home residents;
- 3) Study of the safeguards to prevent abuse, neglect and exploitation of seniors in the state of Kansas;
- 4) Study of adult care home surveys and fines
- 5) Study the funding and implementation of the Senior Care Act, KSA 75-5926 through 75-5936;
- 6) Study the senior daycare resources in the state of Kansas; and
- 7) Recommend improvements regarding the well-being of seniors in the state of Kansas, including recommended changes to state statutes, rules and regulations, policies and programs.

The Senior Care Task Force responsibilities duplicate the duties of the Advisory Council on Aging. It is essential that empirical data is utilized to modify the existing infrastructure in preparation for the seismic growth of the aging population. The Advisory Council on Aging and HB 2114 powers and duties include the study of programs delivered to the aging, including funding and implementation of the Senior Care Act. Without knowledge of the historical and present value of the Senior Care Act, the Task Force could potentially recommend statutory amendments that erode the 1989 legislature's intent to ensure Kansans 60 years of age and older have access to in-home support services prior to exhausting financial resources or premature institutionalization.

Consumer participation is essential to understanding the impact of program decisions. Person-centered care requires actual consumer participation, or the genuine intent of studying aging-related issues may be considered dubious. The Senior Care Task Force appears to focus more on institutional care, although according to an AARP study, "90 percent of people age 65 and over would prefer to stay in their own homes as they get older — and not go to a nursing home or assisted living facility." Further, according to The National Academics of Sciences Engineering Medicine, "the majority of older adults over the age of 65 (93.5%, or 33.4 million) live in the community, not in nursing homes or other institutions. We support the advisory council or task force that will review and strengthen a coordinated system of care in Kansas that is reflective of the community-based population. However, without actual consumer participation, there cannot be a full understanding of the diverse needs.

Healthy aging is impacted by Social Determinants of Health. There must be a targeted focus on person-centered care, transportation, various public services, social isolation, caregiving, and demand for supportive services that far outpace capacity. The continued growth of the older population and mounting capacity concerns necessitate a systematic review of aging-related services delivered in the community. HB 2114 includes the power to make recommendations "regarding the well-being of [older Kansans], yet the powers and duties and members are so broadly defined, that consensus may be difficult to achieve within the time constraints of the task force.

As AAAs are the leading experts on aging issues within their communities, the reasons are compelling why there is opposition to this bill. We ask the Committee to consider this bill's overarching goal, which cannot be achieved because of the broad duties and powers. Without true consumer participation, an ongoing disconnect will further impact the outcome of the Senior Care Task Force.

Thank you for your commitment to older Kansans who wish to live at home with essential supports and services. The AAAs offer an open invitation to each of you and your constituents to learn more about planning for long term supports and services.

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