



Testimony to the Aging Committee

Presented by Mag Morelli, President, LeadingAge Connecticut

February 25, 2014

Regarding

- **Senate Bill 173, An Act Concerning an Income Tax Deduction for Long Term Care Insurance Premiums**
- **Senate Bill 175, An Act Concerning a Study of Emergency Power Needs in Public Housing for the Elderly**
- **Senate Bill 179, An Act Concerning the Alzheimer's Disease and Dementia Task Force's Recommendations on Training**
- **House Bill 5222, An Act Concerning a Study of Funding and Support for Home and Community-based Care for Elderly Persons and Persons with Alzheimer's Disease**
- **House Bill 5223, An Act Increasing Funding for Elderly Nutrition**
- **House Bill 5225, An Act Increasing Eligibility for the Connecticut Home Care Program for the Elderly**
- **House Bill 5226, An Act Increasing the Personal Needs Allowance for Certain Long Term Care Facility Residents**
- **House Bill 5227, An Act Concerning Aging**
- **House Bill 5228, An Act Expanding Eligibility for the Alzheimer's Disease Respite Program**
- **House Bill 5229, An Act Concerning the Expansion of a Small House Nursing Home Pilot Program**

Good morning Senator Ayala, Representative Serra, and members of the Aging Committee. My name is Mag Morelli and I am the President of LeadingAge Connecticut, a membership organization representing over 130 mission-driven and not-for-profit provider organizations serving older adults across the continuum of long term care, services and supports and including senior housing.

Our members are sponsored by religious, fraternal, community, and governmental organizations that are committed to providing quality care and services to their residents and clients. Our member organizations, many of which have served their communities for generations, are dedicated to expanding the world of possibilities for aging.

On behalf of LeadingAge Connecticut, I would like to testify on several of the bills that are before you today and offer the Committee our assistance as you consider these various issues.

Senate Bill 173, An Act Concerning an Income Tax Deduction for Long-Term Care Insurance Premiums

LeadingAge Connecticut supports this effort to encourage individuals to purchase long term care insurance and to take personal responsibility for the financing of their future long term care expenses.

Senate Bill 175, An Act Concerning a Study of Emergency Power Needs in Public Housing for the Elderly

LeadingAge Connecticut represents many affordable senior housing organizations throughout the state including several state-assisted housing developments. We recognize and appreciate the fact that the issue of emergency power needs for such housing sites has been an ongoing concern for this Committee. We support the proposed study of emergency power needs in senior housing as outlined in this bill and offer our support and assistance to both the Committee and to the Commissioner of Housing.

Senate Bill 179, An Act Concerning the Alzheimer's Disease and Dementia Task Force's Recommendations on Training

LeadingAge Connecticut was pleased that four highly qualified dementia care specialists from member organizations were appointed to serve on the Alzheimer's Disease and Dementia Task Force. We supported the creation of the task force and applaud its important work. The report that was produced by the task force should serve the state well as we move forward in planning the future needs of our aging citizens.

The bill before you today is very well intended and we support the underlying concept that enhanced training throughout the field of aging services would be beneficial to those we serve who are suffering from Alzheimer's Disease and other dementia related conditions. We do, however, have some specific comments regarding the proposal as it is written which we have outlined below. We submit these comments and offer our assistance with this proposal in an effort to bring forth workable and appropriate training recommendations.

- In Section 1, the bill recommends that each nursing home establish a dementia care committee and appoint a designated staff person to oversee the implementation of dementia related care and training in the facility. While a committee may be appropriate for some nursing homes, it seems to be an excessive requirement. We would support the appointment of the designated staff person, but would not be inclined to support the mandating of a full committee for every nursing home.
- The phrase "training and education on Alzheimer's disease and dementia symptoms and care" is used throughout the statute. This phrase is somewhat vague as to what type of training is intended and what will be viewed as acceptable. This may be intentional so as to allow for a broad and flexible array of training opportunities and we would be very supportive of that concept. However, it may be also be the case that the interpretation of

this requirement will be solely dependent upon the regulatory authorities charged with enforcing it. We therefore would like to reserve our right to make additional comments once we hear from the Department of Public Health and other interested provider groups.

- There are different requirements for newly licensed administrators and those who are licensed by endorsement. We would recommend that those who are newly licensed be afforded the same opportunity to receive training within the prescribed time limit as those who are licensed through endorsement, until such time as the training programs are able to ensure their curriculum is in compliance with the mandate.
- It is our understanding that the dementia training could be incorporated into currently mandated units of training which we believe would be an extremely beneficial method of training. The needs and perspectives of the residents and clients with dementia could be incorporated into the training curriculum for mandated topics such as fear of retaliation, infection control and fire safety.
- In Section 7 we would object to the expanding the authority to grant Connecticut nursing home administrator CEUs to a national organization, the National Council of Certified Dementia Practitioners. National organizations are specifically not included in this statute and should instead be working through the National Association of Long Term Care Administrator Boards (NAB) which provides accreditation for nursing home administrator courses on a national level.
- The Committee should recognize that increased training will require additional resources on the part of the organizations and workers who are mandated to meet them. Every effort should be made to make the training affordable and accessible.

House Bill 5222, An Act Concerning a Study of Funding and Support for Home and Community-based Care for the Elderly and Alzheimer's Patients

We support this proposed study and would offer our assistance to the Commission on Aging if they are indeed charged with conducting the study. As we move toward rebalancing our long term care system and enhancing our home and community based network, we must look to strengthen the resources available in the community to individuals and their caretakers in need of dementia care services and supports. We would assume that this study would enhance and not duplicate the work that was accomplished last year by the Alzheimer's Task Force.

House Bill 5223, An Act Increasing Funding for Elderly Nutrition

Thank you for raising this bill that acknowledges the need to increase funding for elderly nutrition programs. The costs associated with the delivery of congregate and home delivered meals have dramatically increased over the last several years while the rate has not been increased since 2007. It is critical that we increase the rate and ensure an adequate level of service because affordable, nutritious meals for seniors are essential for their health and well-being. For many, the meal they receive at the congregate meal sites or through home delivery is the only nutritious meal they can afford. That is why we strongly support an increase in funding.

Helping people to stay in the community is a basic goal of our state's long term care plan and a strong elderly nutrition program is central to the success of that goal. We urge the Committee to support the elderly nutrition program and the other community based services offered through

the Connecticut Home Care Program for Elders. The Connecticut Home Care Program for Elders is the heart and soul of our rebalancing plan and it is vital that we address the need for a rate increase for all of the providers within the program.

House Bill 5225, An Act Increasing Eligibility for the Connecticut Home Care Program for the Elderly

House Bill 5228, An Act Expanding Eligibility for the Alzheimer's Disease Respite Program

LeadingAge Connecticut believes in the principle of ensuring choice for persons seeking long term services and supports and we know that a strong and balanced continuum of care that provides the right care, in the place, at the right time will lead to a more efficient and effective care delivery system. It is for these reasons that we strongly support both the Connecticut Home Care Program for Elders and the Alzheimer's Respite Care Program.

While we would always support expansion of these programs, we are right now very concerned about the ability to serve those currently enrolled in the programs. Unfortunately, the funding for both programs was affected by budget rescissions in 2012 and many elderly clients had their services reduced as a result. We encourage the Committee to place a priority on restoring the funding to these programs so that the elderly that are currently eligible and enrolled can receive the services and supports they need to remain in the community.

House Bill 5226, An Act Increasing the Personal Needs Allowance for Certain Long Term Care Facility Residents

LeadingAge Connecticut supports the effort to increase the personal needs allowance for nursing home residents. The additional amount of allowance can enhance an individual's personal experience and quality of life as a resident of a skilled nursing facility.

House Bill 5227, An Act Concerning Aging

LeadingAge Connecticut supports efforts to enhance the quality of data available to the state regarding the needs of our older adults. We would offer our assistance to the Commissioner on Aging, Commissioner of Social Services and the Commission on Aging if they are indeed charged with conducting the study.

House Bill 5229, An Act Concerning the Expansion of a Small House Nursing Home Pilot Program

As the state moves forward to redesign and rebalance our system of long term care, it is the perfect time to expand the opportunity to develop small house nursing homes. The small house nursing home is specifically designed to be resident centered and it creates the modern day nursing home environment that consumers are demanding and that the state is encouraging. Sometimes known as the "Green House" nursing home, this model is in great demand across the country. We strongly support this bill which would advance this model of nursing home care and expand the possibilities of aging in Connecticut.

As we have stated earlier in our testimony, Connecticut has initiated a long term services and supports rebalancing strategic plan that includes resources to assist in the repurposing,

modernizing and/or downsizing of existing nursing home facilities. Many of the nursing homes in our state have an outdated physical plant design as a result of our long standing nursing home moratorium. It is important that we move to *modernize* the nursing homes that will fit within the strategic plan so that we can create a modern-day nursing home environment that will meet consumer demand and market need. That is why we support the expansion of the small house nursing home pilot program.

Thank you for this opportunity to provide this testimony and I would be happy to answer any questions.

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