

**ALASKA COMMISSION ON AGING
SEPTEMBER 27-29, 2005
SOLDOTNA SENIOR CENTER SOLDOTNA AK
[Approved - December 1, 2005]**

TUESDAY, SEPTEMBER 27, 2005

CALL TO ORDER

Chair, Frank Appel, called the meeting to order at 9:00 a.m.

ROLL CALL

Members in attendance: Frank Appel, Sharon Howerton-Clark, Banarsi Lal, Betty Keegan, Ed Zastrow, Iver Malutin, Myldred Thomas and Patricia Branson. A quorum was present.

Members not in attendance: Michael Black, June Burkhart (excused due to illness) and Rod Moline.

ACoA Staff: Linda Gohl, MaryAnn VandeCastle and Sherrie Stears. Nancy Karacand was excused.

ADOPTION OF THE AGENDA: Motion: To approve agenda; motion passed unanimously.

ADOPTION OF THE MINUTES FROM MAY 17-19, 2005, MEETING: Motion: To adopt minutes of May 17-19, 2005 meeting as written; motion passed unanimously.

ETHICS DISCLOSURES: None reported. There is a new Ethics video (also available on their web site) provided by Department of Law. Members will be e-mailed the link to this site and ACoA staff will mail the video to those members requesting it.

ACTION: Motion was made and accepted to include the ethics reporting memo in each member's quarterly packet for their individual reporting and signature - motion passed unanimously.

RECOGNITION OF GUESTS: Nancy Burke, AMHTA Program Officer; Margaret Lowe, AMHTA Board Member; Kay Branch, ANTHC; Jim McCall, AHFC Senior Housing Officer; Renee Graham, Frontier Community Services; Marjorie VanKooten, Anne Engbers and Jacquie Greenman with the Cooper Landing Senior Citizens; Jan Fena, Director of Soldotna Senior Center and Jim Fisher; Judy Warren, Sterling Senior Center; and Rosemarie Mei.

ALASKA MENTAL HEALTH TRUST AUTHORITY – SHARON HOWERTON-CLARK VICE-CHAIR REPORT: September 7th consisted of normal board meeting agenda with a Focus Area Budget presentation for the following groups:

1. Bring the Kids Home
2. Housing
3. Trust Beneficiary Group Initiatives
4. Disability Justice

Then the Partner Board Budgets were presented:

1. Governor's Council on Disabilities and Special Education (GCDSE)
2. Alaska Commission on Aging (ACoA)
3. Alaska Mental Health Board (AMHB)
4. Alcohol Board and Drug Abuse (ABADA)

Brian Rogers gave an overview of the FY'07 Budget.

On Friday, they presented an update on the new Trust Authority building. The old Family Resource Center will be renovated and will house their new offices as well as having space available to providers for meetings. The building should be ready for moving into by next summer.

After two (2) day of budget presentation the Board did a blanket approval of the entire FY'07 budget. ACoA will receive:

- 125,000 Geriatric Education
- 80,000 Co-occurring Disorders
- 75,500 ACoA Planner I position
- 7,500 Rural Outreach

ACoA CHAIR, FRANK APPEL, REPORT: Only one proposal was received for Alzheimer's in the Trust Beneficiary Group Initiatives Project Request for Proposals (RFP); this was Eastern Aleutian Tribes and they were awarded \$100,000. ACoA staff will work with AMHTA staff to change the RFP for the coming year, gearing it to also include our beneficiary group and allow local providers to apply on behalf of the beneficiaries. Senior caregivers are less likely to form a group to apply for grants.

As the ACoA Chair and as stated in statute AS 44.29.500, Frank will serve on the Pioneer Home Advisory Board and attend their meetings.

NEW MEMBER ORIENTATION – LINDA GOHL:

- New Member Power Point Presentation
- ACoA Organization Chart
- DHSS Organization Chart (will be updated)
- Ethics Information for Boards and Commissions
- New board members should look at ACoA standing committees and let Frank Appel know if they are interested in serving on one or more
- Alaska has the second fastest growing senior population in the United States
- Seniors in Ketchikan have 17% more disposable income than the rest of Alaska
- University of Alaska, Institute for Social and Economic Research (ISER) is preparing a study on the economic wellbeing of Alaska's seniors for use in the State Plan and Advocacy – available in November
- Legislature must reauthorize the ACoA every four (4) years - "Sunset Review"; Legislative Budget and Audit makes a recommendation based on document review, meeting attendance, etc. to the legislature. The last review was in 2003 for July 1, 2004 through June 30, 2008.

ACoA COMMITTEE REPORTS:

EXECUTIVE COMMITTEE REPORT – FRANK APPEL, CHAIR: the committee has reviewed the ACoA operating budget, recommendations for the AMHTA budget and GF/MH request. The Trust Memorandum of Agreement (MOA) will be finalized at the December meeting.

PLANNING COMMITTEE REPORT – BANARSI LAL, CHAIR: White House Conference on Aging (WHCoA) has been the committee's primary concern the past 10 months; the final resolutions have been prepared and will be submitted to the National WHCoA Committee by October 1, 2005. (See attachment)

Motion: To accept all 28 resolutions - motion passed unanimously.

LEGISLATIVE COMMITTEE REPORT – ED ZASTROW, CHAIR: in August discussed with ACoA staff how to improve advocacy efforts and have more consumers participate in the legislative teleconferences.

Attended the AMHTA Advocacy Summit held September 7, 2005, where it was decided that the following issues would be the target of this year's advocacy:

- Housing
- Dental Care
- Maintaining existing Medicaid/Medicare services

According to Nancy Burke, the report from this summit will be available in the next 2-3 weeks.

GERONTOLOGY, EDUCATION, MANPOWER DEVELOPMENT & TRAINING COMMITTEE REPORT – BARNARSI LAL, CHAIR: attended a statewide University of Alaska Geriatric Education Center (GEC) meeting on this 5 year project, ending September 2008, directed by Dr. Rosellen Rosich. **NOTE:** will provide agenda and handouts to ACoA staff

Providers feel that GEC has been very beneficial but more training is needed in rural areas, perhaps utilizing the University of Alaska satellite sites. Historically there has not been much available and GEC is a good opportunity to increase training. However, some federal funding for the GEC is specifically for training professionals, social workers, etc. They may be able to partner with other organizations to address the overall need for geriatric care. The Full Lives Conference in April put emphasis on gerontology and is good 'hands on' training for care providers.

ACoA COMMITTEE GOALS – FRANK APPEL, CHAIR: **Motion:** To accept the following ACoA Committee Goals for FY06 - motion passed unanimously.

Executive Committee

- Make recommendations on memorandum of agreement with AMHTA.
- Develop a strategy for rural visits/outreach
- Develop a Commission policy manual
- Annual Report (calendar year 2003 and 2004)

Planning Committee

- Prepare and submit the WHCOA comprehensive report
- Develop preliminary planning strategies for the state plan
- Develop and collect data that supports the state plan and informs ACOA legislative advocacy activity
- Prepare recommendations on reauthorization of the Older Americans Act

Legislative Advocacy Committee

- Develop an advocacy network to marshal support for legislative goals
- Improve the marketing of legislative teleconferences
- Arrange for the up front coordination of advocacy strategies with AMHTA

Bylaws Committee

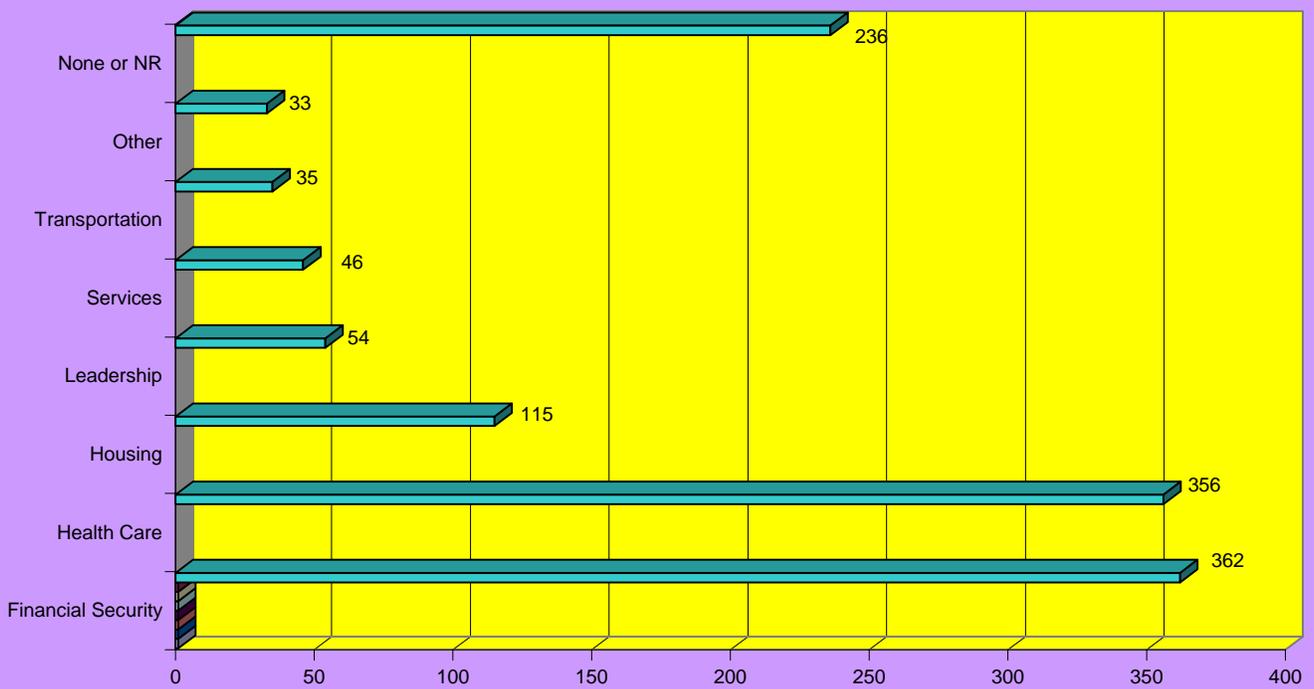
- Revise the Bylaws to reflect recent changes

ACoA ALASKA SURVEY of SENIOR CONCERNS: 1449 surveys have been entered into the database to be analyzed. Some preliminary findings shown in the following charts are:

Senior Responders by Income



Seniors' Top Concern Today



ALASKA MENTAL HEALTH TRUST AUTHORITY REPORT: Nancy Burke gave a short history of the Mental Health Trust settlement in Alaska. The Trust is both a foundation and state funding entity outside of legislative control.

AMHTA Advocacy Summit issues to target this year:

- Housing – AHFC can use covenant to ensure affordable housing, however, as the covenant period expires many are going back to market rate (HUD financed low-interest loans for low income apartments.)
- Dental Care – have been unable to get dental included in Medicaid state budget for FY06; need to advocate for funding in FY07. Form a coalition to advocate for a Dental Therapist Program (model project and training is available in New Zealand)
- Move state to functional assessment of Alzheimer's patients in their environment so that it is not just a medical diagnosis, i.e., HBC waiver for intermediate level of care

RURAL LONG TERM CARE (RLTC) PROJECT COORDINATOR: It is proposed that this position will be housed in Anchorage in the GCDSE office and supervised by the Director of ACoA. This is an important position as it is the rural outreach connection to all Alaskans. This must be a self-motivated and self-directed person who can work with many entities; e.g., ACoA, AMHTA, DSDS, grantees and native health corporations. This is a Trust funded project and position currently under DSDS.

Linda will distribute the job description and hiring information to the Executive Committee, poll the members and report back.

DSDS REPORT – PATRICK SIDMORE, POLICY & PROGRAM REVIEW UNIT: Rod Moline has been named the new DSDS Director. DSDS supports moving the RLTC position out of the division and to ACoA. In the past, the RLTC couldn't work with grantees to provide technical assistance due to conflict of interest or regulatory restraints.

DSDS Grants: New grant cycle began July 2005. There was an increase in funding for meals and rides. Adult Day funding has been revamped to be more in line with the services provided.

- Base of \$75,000 + 3 year look back at number of hours provided in the past
- Were 100 assessments per month for Medicaid Waivers, now 200 per month
- Assessments are completed an average of 2-3 weeks (rural more than 30 days; call DSDS and they will help rectify)

Assisted Living Homes (ALH):

- Need more Quality Assurance monitoring
- Federal audits have started and legislative mandated audits of Medicaid providers
- Providers need technical assistance, start monthly forums with DSDS, ACoA and AgeNet

Personal Care Attendants (PCA): there was much public comment and some changes to the proposed regulations, with no final decision. Department of Law will decide if the changes will require public notice.

- Federal audit began 2-3 weeks ago
- The Legislature fully funded the PCA program, but the legislature has 14 points that need to be addressed, such as:
 - ✓ A contractor to do assessment, not the PCA agency, using the new PCAT tool
 - ✓ DSDS to pre-authorize number of units of care; time limitations per specific task

- ✓ Each care provider to be linked within the Medicaid system to individual receiving care
- ✓ DSDS or its contractor will provide training for PCA attendants
- ✓ All PCA's must have CPR and first-aid certification

Adult Protective Services (APS): Requesting 2 new positions funded through GF/MH (as submitted by ACoA to the AMHTA).

Medicare part D:

- Online application available
- 70 trained personnel and volunteers to assist consumers with application (a 2 hour process)
- 11 companies offer 27 different plans for Alaska
- Of the 11 companies, 7 are eligible for subsidy plans/dual eligibility (Medicaid health care and Medicare)

Long Term Care (LTC) Nursing Facilities: Clients whose Social Security checks are payable to the facility will now receive \$ 100.00 per month (increased from \$ 75.00) for personal allowance.

Long Term Care (LTC) Study: Contract was awarded to Public Consulting Group of Boston/Anchorage. The preliminary DRAFT due 12/5/05; final DRAFT due 1/20/06 and FINAL by 2/10/06.

Data Collection: New software, Care Connections, will merge SAMS (grants) and the Medicaid waiver databases to provide federal reporting information.

ACoA ADMINISTRATIVE AND PROJECT REPORTS:

ACoA Budget: Linda provided an overview and spreadsheet of the ACoA FY06 budget. An updated ACoA budget will be provided in each quarterly meeting packet to members.

Motion: To accept the ACoA budget - motion passed unanimously.

Real Choice Systems Change Grant (RCSG): ACoA staff activity concerning this grant will be sent bi-monthly to members. This is the final year of this 4 year grant.

- Common Ground IV Aging Network Forum will be held in June 2006 at the Anchorage Senior Center (more on this at the ACoA December meeting)
- ACoA Planning Committee should meet in October

Housing Statewide Assessment: The Denali Commission, AMHTA, and DSDS have provided funds to AHFC to develop an RFP for a housing needs assessment and inventory study.

PUBLIC COMMENT:

NOTE: When you call in **DO NOT** place the call on **HOLD** – if you have to take another call, **HANG UP** and call back when you are able. To avoid any transmitting complications ACoA will provide the phone for future meetings.

Pauline Richards, Executive Director, Traumatic Brain Injury (TBI) Board: Noted nursing home staff has difficulty identifying people with brain injury and lack the training needed to deal

with these issues. Resources for training are inadequate. Public Health can request that Jennifer Lewis, TBI Implementation Project with Division of Behavioral Health, provide training. Licensing should also be made aware of her service.

James Fisher, "Voice of the Kenai": Monitors the legislative teleconferences; feels that it is under-used and provides information not available anywhere else. Requested that ACoA put its positions in the form of formal resolutions (these could be numbered for tracking purposes) for people to use when contacting their legislators and post minutes or notes of legislative teleconferences on ACoA web site. Also, suggested getting a written commitment from participants before session, to provide more consistent participation. Thank you to ACoA for providing the legislative teleconferences.

Ken Duff, Executive Director, Frontier Community Services: Earlier remarks about the PCA program changes were one-sided. In what other system is assessment taken out of the hands of the provider? Using a contractor to provide the assessment will create a redundancy in services because the provider must work with the client to come up with a treatment plan. External entity will be an additional expense. Some providers have come up with poor plans based on their assessment, but that should be a quality assurance issue. The PCAT tool is not individualized enough. Representative Cissna said that there was no legislative intent in the new regulations; however, it was placed in the budget at the 11th hour. They will be sent out for public comment if the changes are deemed significant by Department of Law.

ALASKA HOUSING FINANCE CORPORATION (AHFC) – JIM McCALL, HOUSING RELATIONS MANAGER: Topics and projects of interest:

- Completed weatherization of 614 units
- 8% reduction in Voucher (Section 8) Program, new regulations in October, 2005
- Renovation of MacKay Building (4 floors of the 14 story building) will provide 58 units of state licensed, senior assisted living facility
- Provided loans/grants for Cooper Landing 6 unit independent living complex, 6 units in Sterling and 10 units in Fairbanks
- Aging and Disabilities Resource Centers (ADRC) has expanded from Kenai Peninsula and Southeast to include Anchorage, Fairbanks and Kotzebue and should make access to LTC easier statewide
- Greater Opportunities for Affordable Living (GOAL) Grants; \$24,000,000 is available this year – of the 16 applications received only 4 were for senior housing
- Taking the lead on the Denali Commission, \$100,000. comprehensive assessment for rural and urban housing needs
- Nominated Linda Gohl as an ADRC partner to attend the National AOA & CMS meeting for the ADRC Project in Washington DC in November, 2005

Effects of Katrina on AHFC:

- 26-28 AHFC employees were deployed to Houston for 30 days
- 6 families from Louisiana to relocate to Alaska – will automatically go to the top of the wait list – so longer waiting period for Alaskans, already 2-3 years for senior housing
- IRS is removing 3 year provision for first time home buyers – AHFC will adopt, if finalized

ALASKA NATIVE TRIBAL HEALTH CONSORTIUM (ANTHC) – KAY BRANCH: The Alaska Native Elder Health Advisory Committee, formed by ANTHC, has 13 members. Iver Malutin represents ACoA and either Renee Gayhart or Jon Sherwood will represent DHSS. This

committee was formed for oversight and information gathering for the project of LTC elder needs assessment. However, they are expanding the role to work with tribal providers. They do not dictate the services provided, but offer recommendations:

- Expand tribal PCA programs
- Integrate statewide elder care planning into tribal health system – website with resources, chat lines, questions & answers, etc.
- Begin comprehensive elder health exams
- Carefully plan for new nursing and assisted living homes
 - ✓ Define needs
 - ✓ Determine best locations for new facilities
 - ✓ Facility in Anchorage for non-acute care, before return to villages
- Medication management and oversight
- Elder abuse needs to be addressed and openly talked about
- No funding or planning for LTC for Indians under the Indian Health Service (IHS); some tribes are now using gaming money
- November 1, 2005, American Indian/Alaska Native LTC Conference, in New Mexico, with a site visit to a nursing home on Laguna Pueblo Reservation and presentations on innovative programs
- Program of All-inclusive Care for the Elderly (PACE) – model is centered around the belief that it is better for the well-being of seniors with care needs and their families to be served in the community whenever possible. PACE serves individuals who are aged 55 or older, certified by their state to need nursing home level 4 care, able to live safely in the community at the time of enrollment and live in a PACE service area. Although all PACE participants must be certified to need nursing home level of care to enroll in PACE, only about seven percent of PACE participants reside in a nursing homes nationally. If a PACE enrollee does need nursing home care, the PACE program pays for it and continues to coordinate his or her care. Centers for Medicare & Medicaid Services (CMS) describes PACE as a unique capitated managed care benefit for the frail elderly provided by a not-for-profit or public entity that features a comprehensive medical and social service delivery system. It uses a multidisciplinary team approach in an adult day health center supplemented by in-home and referral service in accordance with participants' needs.

The ANTHC elder needs assessment will be available (online and hardcopy to ACoA) September 30, 2005.

ALASKA PIONEER HOME REPORT – ED ZASTROW, CHAIR: The Pioneer Home Advisory Board will do a northern tour (Fairbanks, Anchorage and Palmer) this year. Will provide an update on occupancy, wait list, etc. at the next ACoA meeting. They look at quality of life, care, mechanics, etc. The major concerns are:

- \$ 2,500,000 budgeted for deferred maintenance projects that are not being done
- Rising fuel costs
- Request for 3 CNA positions (AMHTA included \$150,000. in FY07 GF/MH budget)
- More disabled people in the homes – level of care has increased
- More severe mental problems, nurses are having to restrain patients – homes were not designed for this
- Staff needs training in mental health issues

NEW STATE PLAN FOR SERVICES - LINDA GOHL, ACoA EXECUTIVE DIRECTOR: The new state plan will be a task for the ACoA Planning Committee. We are still awaiting approval

from Administration on Aging (AOA) to extend the current plan from 2006 to 2008, to get us back in sync with federal and state fiscal years. We will proceed as follows:

- ACoA staff will research for the December meeting
- Have a detailed work plan with assignments by the March, 2006 meeting
- Submit a draft by March 2007, to go into effect July 1, 2007

ADJOURNED: 4:15 p.m.

SITE VISITS: On Monday, September 26, 2005 ACoA Commissioners and staff visited Cooper Landing where seniors are in the process of building a 6-unit independent living complex, with plans for 2 more 6-unit independent living complexes and a 12-unit assisted and independent living combination. They have a contract with the borough to clean up the dumpster areas each Monday in Hope, Moose Pass and Cooper Landing, providing revenue for their organization. Each Wednesday they use their van to take seniors to Soldotna for doctor appointments and shopping. They are very committed.

Commissioner Lal offered to provide technical assistance for future housing development from the AMHTA Rural Outreach Contractor, Thea Agnew.

WEDNESDAY, SEPTEMBER 28, 2005

SITE VISITS

Group 1

Patricia Branson (driver)	Kenai Peninsula Independent Living Council (KILC -ADRC) 9-10 AM
Banarsi Lal	Forget-Me-Not Adult Day Program
MaryAnn VandeCastle	Kenai Senior Center 10:30 thru 1:30 Lunch/site visit
Nancy Burke (AMHTA)	Nikiski Senior Center site visit (1/2 hr from Soldotna)

Group 2

Patrick Sidmore (DSDS)	Soldotna Senior Center 9:00-10:30; depart for Sterling
Betty Keegan	Sterling Senior Citizens Lunch/site visit.
Myldred Thomas	Frontier Community Services 2:30 or 3 p.m.
Kay Branch (driver)	

Group 3

Sharon Howerton (driver)	Ninilchik Senior Center 10:30 thru 1:00 Lunch/site visit
Iver Malutin	Anchor Point Senior Center site visit
Ed Zastrow	Homer Senior Center site visit (1 1/2 hrs from Soldotna)
Sherrie Stears	

Group 4

Linda Gohl (driver)	Seward Senior Center depart 8:00 AM
Frank Appel	Lunch with Seniors/site visit; return to Soldotna
Chazz and Judy	Cooper Landing Senior Housing Project
Kawabori (AoA)	

THURSDAY, SEPTEMBER 29, 2005

CALL TO ORDER

Chair, Frank Appel, called the meeting to order at 9:00 a.m.

ROLL CALL

Members in attendance: Frank Appel, Sharon Howerton-Clark, Banarsi Lal, Betty Keegan, Ed Zastrow, Iver Malutin, Myldred Thomas, Patricia Branson and Patrick Sidmore for Rod Moline. A quorum was present.

Members not in attendance: Michael Black and June Burkhart (excused due to illness).

ACoA Staff: Linda Gohl, MaryAnn VandeCastle and Sherrie Stears. Nancy Karacand was excused

RECOGNITION OF GUESTS:

Chazz Kawabori, Regional Director, US Administration on Aging (AoA); Kay Branch, ANTHC; Patrick Reinhart, State Independent Living Council (SILC); Jim McCall, AHFC Senior Housing Officer; Ken Duff, Frontier Community Services; Jan Fena, Director of Soldotna Senior Center and Jim Fisher; Judy Warren, Sterling Senior Center; Fred Lau, Homer Senior Center and Leigh Hagstrom-Sanger, Nikiski Senior Center.

Community support from individuals, local businesses, schools, churches and law enforcement agencies was very evident at each of the sites visited on Monday and Wednesday.

SITE VISIT REPORTS:

Group 1

Kenai Peninsula Independent Living Council – has ADRC grant and is working to bridge gaps between systems

Kenai Senior Center – Independent living complex (12 years old) – Were to joined the seniors for lunch but ran out of food, so the commissioners ate off-site

Forget-Me Not Adult Day – toured the facility

Nikiski Senior Center – plans for a complex on the lake front, needs adult day services program but are offering limited services at the senior center

Group 2

Soldotna Senior Center – modernized kitchen with walk-in cooler/freezer; pull tab business helps to finance facility and program operations

Sterling Senior Citizens – over 200 members; expanding their kitchen; 9 unit senior housing complex (with plans to expand); monthly and holiday food baskets; – Joined the seniors for lunch

Frontier Community Services – private non-profit, serves Cordova to Tyonek, but primarily the Central Peninsula; full spectrum of community services, with 400 employees; funding is Medicaid and state grants.

Group 3

Ninilchik Senior Center – original fishing village has winter population of 10; a total budget of \$185,000 with 3 full time and 2 part time employees; troopers bring confiscated game to be distributed to seniors; integrating middle school with seniors through quilting projects; influx of people from Anchorage and Florida retiring in the area; and good community support. – Joined the seniors for lunch

Anchor Point Senior Center – in operation since 1982 without an executive director and is all volunteer; annual budget of \$ 110,000; operate The Helping Hands Store (all items are donated; nothing is priced - you just make a cash donation if you can), they also have a “burn room” where those who have lost their belongings and or homes to fire, may resupply; quilting and other crafts are donated and sold at the center; preparing an area wide disaster relief plan; they have a contingency fund to assist with winter fuel costs for all area residents; senior center and store are located on 5 acres and they own another 5 acres to expand the complex and build assisted and independent living housing.

Homer Senior Center – has it all – assisted/independent living, respite, meals, transportation, care coordination, etc; \$2,500,000 budget with \$90,000 going to workman’s comp insurance.

Group 4

Seward Senior Center – older facility (not user friendly or easily accessible - seniors deserve better) with remodeled kitchen; serves 100 of the 300 seniors in the community; exercise and crafts program, with Christmas Carnival; computer lab; good monthly newsletters, with useful information; and Medicaid training. – Joined the seniors for lunch

A continuing theme throughout all the visits is the amount of paperwork to apply for and maintain grants. They cost more to get than they are worth! Therefore, some centers do not even bother to apply.

NEEDS TO BE ADDRESSED FROM SITE VISITS:

1. Special legislative appropriation regarding assistance with heating and fuel costs for senior centers;
2. Grant writing assistance for providers;
3. ACoA staff will develop core questions for future site visits to provide continuity in the information gathered;
4. Consider inviting legislators to ACoA Rural Outreach Annual Meeting

ACoA COMMISSIONER ACTIVITIES REPORTS

Banarsi Lal: Participated in reviewing the applications for the vacancy on the AMHTA board. There were 2 applicants; Laraine Derr was selected as the Trust’s recommendation to the Governor for consideration.

Betty Keegan: Wrangell Senior Services has a new director, Sharlene “George” Joseph. Betty and Banarsi both participated in the Older Worker Recognition selection process. Vince Doran, a civil engineer, age 85, was selected. There were many qualified applicants; some were disqualified because of the “continuing education” criteria not being appropriate in some situations. Couldn’t they honor both professional and working class?

NOTE: Linda will let Jeff Kemp know about this concern.

Sharon Howerton-Clark: Traveled in the Lower 48 and visited some senior centers. They don’t have as much as Alaska and there is no legislative advocacy. Chugiak Senior Center would like to participate in our legislative teleconferences. Tok Senior Center covers an extensive area; they go to Northway with meals and have had the same executive director for 28 years.

Iver Malutin: is a tour guide for seniors in Kodiak. People can't believe the Kodiak Center; he would like to make regular stops there as part of his tour.

Ed Zastrow: Ketchikan Senior Center is inadequate; there is a proposal for the center and the Ketchikan Arts & Humanities to co-occupy the old Whitecliff School building. The senior center will be updated and larger. This would create a lot of interplay between the two groups.

Patricia Branson: Providers have the AgeNet Association, which sent a letter to ACoA re: AgeNet's Legislative Priorities for the coming year; AgeNet and lobbyist John Bittney will participate in ACoA legislative teleconferences; ACoA should invite legislators to Rural Outreach meeting; AgeNet works with ACoA, Senior Advocacy Coalition (SAC) and AARP to forward senior issues.

NOTE: Add AgeNet report to each ACoA agenda

US ADMINISTRATION on AGING – DR. CHAZZ KAWABORI: US AoA advocates for older Americans. Has visited many senior centers through out Region X; Anchorage was a model for best facility in Region X. Transportation is a statewide issue that is also a national issue. However, transportation challenges are different in Alaska than in the Lower 48. A rural community in Alaska is more isolated than how 'rural' is defined in King County, Washington.

Congratulations to WHCoA Delegates! There will be 1200 delegates this year; versus 4000 at the last one. Three of our resolutions should be recognized nationally.

1. Access to health care
2. Senior employment
3. Health care reform

Alaska State Plan extension has been approved by AOA through June 30, 2008. However, changes can be made at any time. There is a need for more collaboration with senior centers, tribal entities, Title III and VI resource centers geriatric education, housing, transportation, etc; winter might be a good time to get participation from most groups. Team approach = Greater synergy!

Legally Title III and VI must work together. Title VI funding goes to tribes directly; about 1/3 of Title III dollars cover the same population as the Title VI. Alaska is stellar in working these programs with each other and could become the "National Model". ACoA and DSDS will be given as much flexibility as is needed. We can get statewide Older Americans Act (OAA) waivers of any requirement from AoA with the support of state legislature. These waivers would allow us to provide best services as we think best.

CMS and AoA Regions are pushing for enrollment in the Medicare Part D; 42 million people are eligible. Each enrollment takes approximately 3 hours. Who will help with enrolling eligible Alaskans? Those who already have a private insurance plan that covers prescriptions will not need to enroll.

There is no information on the OAA Federal fiscal year 2006 budget; it will probably be on a continuing resolution' (1/12th of last year's budget per month) in October. Nutrition counts for 75% of the budget.

NOTE: Linda will forward info from national groups that monitor AoA budget to ACoA Members

AGING and DISABILITY RESOURCE CENTER (ADRC) PROJECT REPORT – PATRICK REINHART, STATEWIDE INDEPENDENT LIVING COUNCIL (SILC) EXECUTIVE DIRECTOR:
The SILC board is made up of 12 members; 2 state representatives from Department of Labor/VocRehab and DSDS are non-voting; 2 providers and 8 consumers make up the voting members. Alaska is the only grant with project description to establish one-stop information and referral centers at independent living centers; in all other states the grant went to either state unit on aging or local agencies on aging under state government. The ADRC's have discovered that they need more connection to senior centers and providers; there is no 'wrong door' for information and referral.

The five (5) centers in Anchorage, Fairbanks, Kotzebue, Kenai and Southeast have 800 numbers and are small 1-2 people offices in the communities that have offices. The goal is for the ADRC to have all the information available. A supplemental grant has been written to get all providers in regions together. Better lines of communication need to be developed to avoid duplication of services, possibly by having service providers on an Advisory Board.

The ADRC project must be included in the next State Plan for senior services and must be carried forward by the State Unit on Aging. ADRC's will not be 'going after' Title III funds. A work group will be started to discuss the sustainability of this project.

Linda Gohl distributed a letter recently to senior centers and other senior services providers which outlined the ADRC project and future plans to include senior center directors on the ADRC workgroup.

Alaska Mobility Coalition, Patrick Reinhart is the director of this non-profit; ACoA is a member. The Transportation Bill in Congress has been reauthorized. There will be a 400% increase in federal funding for rural transportation in Alaska over the next four (4) years. We need data on transportation issues to form an infrastructure for transportation advocacy.

NOTE: Patrick would like to join the ACoA Legislative teleconferences.

FUTURE ACOA MEETINGS:

- December 1-2, 2005 ACoA Business Meeting in Anchorage
- March 7-9, 2006 Legislative and Business Meeting in Juneau
- June 19-23, 2005 Common Ground Conference and business meeting in Anchorage
- September and December 2006 meetings will be discussed in December 2005

Motion: To Adjourn - motion passed unanimously

ADJOURNED at 10:50 a.m.