

**PENNSYLVANIA  
DEPARTMENT OF AGING**

# **LONG-TERM CARE COUNCIL**

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**EST. 2015**

## **Proposed Creation of the Department of Health & Human Services**

### **Outreach Committee**

As the Outreach Committee of the Pennsylvania Long-Term Care Council, we have been charged to answer the following questions:

- 1) Should the Council support the proposed unification of the Department of Health and Human Services?** As the Outreach Committee, we have not taken a position on the unification of the Departments of Aging, Drug and Alcohol Programs, Health, and Human Services into a new, unified Department of Health and Human Services (DHHS). However, we would like to submit the following guiding principles for the Wolf administration and the Pennsylvania General Assembly to consider as this proposal moves forward.

We support the concept of improving access to information about long-term services and supports (LTSS) for Pennsylvanians of all ages. To accomplish this, we feel any unification of state agencies must meet the following principles regarding outreach:

- A single source of information, education, and materials for consumers, families, and providers, as well as partner agencies and local governments which empower these local entities to serve as the first point of local contact for the public, must be established within the new department.
  - There must be ease of access to answers about LTSS for consumers, families, providers, and partner agencies.
  - Outreach efforts must accommodate all forms of communication and be done in a culturally competent manner that is inclusive of the LGBT community and other populations based on race, ethnicity, geographic location, etc. It is critical that this is done in a manner that adheres to the rules of effective communication (e.g., ADA compliant, appropriate reading level, etc.).
- 2) If so, should the Department of Aging remain a standalone agency?** From the perspective of outreach on LTSS, our committee takes no position on whether the Department of Aging should remain a standalone agency. However, outreach efforts, whether in a unified agency or a standalone Department of Aging, must acknowledge the unique concerns of older Pennsylvanians regarding LTSS and seek to provide information, education, and materials to older Pennsylvanians that recognize these unique concerns.

## Access Committee

As the Access Committee of the Pennsylvania Long-Term Care Council, we have been charged to answer the following questions:

**1) Should the Council support the proposed unification of the Department of Health and Human Services?** As the Access Committee, we have not taken a position on the unification of the Departments of Aging, Drug and Alcohol Programs, Health, and Human Services into a new, unified Department of Health and Human Services (DHHS). However, we would like to submit the following guiding principles for the Wolf administration and the Pennsylvania General Assembly to consider as this proposal moves forward:

- Implement a system for continuous legislative oversight, including but not limited to:
  - A timetable for implementation
  - A transition plan with performance benchmarks to be evaluated
  - Performance measures to evaluate the plan ongoing
  - Ensure that the General Assembly takes a leading role in evaluating whether Pennsylvania Department of Aging (PDA) programs are diffused or “lost” within the new, unified department
- Place the Pennsylvania Long Term Care Council under the Office of Aging Commissioner
- Ensure that the commonwealth’s long-term services and supports (LTSS) system is easy to navigate
  - Develop a single point-of-contact/1-800 phone number for consumers such as the 211 system
  - Utilize the development of Community HealthChoices to assist in streamlining consumer and caregiver access to programs, services, and providers
- Improve the quality of customer services provided by the commonwealth
  - Invest in staff by providing training on programs and services that the commonwealth offers including eligibility criteria, program options, Community HealthChoices, etc. to ensure their abilities to assist consumers and caregivers in accessing what they need
- Ensure that all communication across the LTSS system is coordinated
  - Develop an IT infrastructure that can communicate across all LTSS programs and produce data that is coordinated and accurate
  - Streamline overlapping rules, regulations, and licensure requirements across all LTSS programs
- Ensure that the commonwealth has done its due diligence in obtaining the objectives of unification
  - Design an internal organizational structure that recognizes the importance of LTSS
  - Review the work of other states in the developing a more accessible LTSS system to ensure that the commonwealth is on the cutting edge of LTSS
  - Establish an ombudsman to help with the transition or a DHHS Quality Assurance “Czar” within the Governor’s office and located at DHHS to identify and resolve problems from planning to implementation to ongoing

operations to ensure the new department evolves as planned and adjusts as necessary

- Ensure that consumers and other stakeholders have meaningful input throughout the process of unification
  - As the new department evolves, all operations, as well as proposed changes to policies and procedures, must be transparent and engage stakeholders in a meaningful way.
  - Stakeholder efforts to address policy and to advocate with the highest level of government must not be diluted.
  - Feedback should be timely and responsive
- Assure the integrity of programs
  - Staff must be familiarized with the independent living philosophy and ensure all programs are person centered
  - Care must be taken to make certain that groups and core PDA programs do not lose their identity or are buried in a huge bureaucracy.
  - When combining functions to increase efficiency, we must ensure that program knowledge is not lost.
  - Programs must retain dedicated funding and dedicated line item appropriations.
  - Lottery funds must be used to support traditional Lottery-funded programs to help older Pennsylvanians live in the community and not be diverted for other purposes.
- Conflicts of interest must be satisfactorily addressed.
  - Combining functions raises the threat of conflicts. There are a number of federally funded programs, including the Long-Term Care Ombudsman and Developmental Disabilities Council, which require separation of function as a condition for receipt of federal funds.
  - Placing payment, programs, and licensure in one agency has the potential to create conflict; firewalls should be in place.
  - Ensure that all processes and programs are aligned with the federal managed care rules as not to limit consumer access to choice and services

**2) If so, should the Department of Aging remain a standalone agency?** We believe having a Commissioner on Aging is the right choice assuming the unification moves forward due to the concern of seniors' loss of access directly to the Governor and his front office staff.

### **Quality Committee**

As the Quality Committee of the Pennsylvania Long-Term Care Council, we have been charged to answer the following questions:

**1) Should the Council support the proposed unification of the Department of Health and Human Services?** As the Quality Committee, we have not taken a position on the unification of the Departments of Aging, Drug and Alcohol Programs, Health, and Human Services into a new, unified Department of Health and Human Services (DHHS). However, we would like to submit the following guiding principles for the Wolf

administration and the Pennsylvania General Assembly to consider as this proposal moves forward.

The unification must:

- First and foremost, maintain representation of seniors, their unique needs, and issues by a cabinet level position.
- Ensure preservation of Lottery Fund utilization for the exclusive use of programs and services for older Pennsylvanians.
- Seek to simplify the bureaucratic processes that have created lengthy timeframes for consumers to begin receiving services. This should include further consideration of presumptive eligibility.
- Simplify and modernize the consumer and provider navigation experience of disparate and confusing systems administered by separate agencies providing similar services.
- Streamline the bureaucratic processes that overwhelm providers with administrative functions that take away valuable staff and resources from providing care.
- Ensure that consistent data is collected and analyzed across all appropriate agencies to: measure and improve quality across all services provided to seniors and individuals with disabilities, improve transitions of care, and streamline access to services.
- Ensure better communication among commonwealth staff at all levels to tear down the silos that currently exist and allow for a more efficient state government.
- Allow for innovation in care and services, including collaboration with other states, to enhance the quality of long-term services and supports.
- Ensure that Pennsylvanians have access to quality services should they need them. In order to ensure this access to quality services, DHHS must provide sufficient funding to providers.

**2) If so, should the Department of Aging remain a standalone agency?** We believe having a Commissioner on Aging is the right choice assuming the unification moves forward due to the concern of seniors' loss of access to the Governor's Office.

### **Workforce Committee**

As the Workforce Committee of the Pennsylvania Long-Term Care Council, we have been charged to answer the following questions:

**1) Should the Council support the proposed unification of the Department of Health and Human Services?** As the Workforce Committee, we have not taken a position on the unification of the Departments of Aging, Drug and Alcohol Programs, Health, and Human Services into a new, unified Department of Health and Human Services (DHHS). However, we would like to submit the following guiding principles for the Wolf administration and the Pennsylvania General Assembly to consider as this proposal moves forward:

- The Commonwealth should use the unification as an opportunity to shift resources and focus on the delivery of LTSS services by re-auditing all regulations, policies, and inspection, licensure, and reporting requirements, etc. to reduce duplicative work and fragmentation.
- The Commonwealth should use the unification as an opportunity to expose the caregiving workforce crisis and do everything in its power to help make this critical profession a living wage job. Special attention should also be focused on addressing the needs and challenges of informal caregivers.
- The Commonwealth should use the unification as an opportunity to standardize training and development of the care delivery workforce by coordinating these efforts within DHHS. We further recommend an executive level position be established to focus efforts on fulfilling the workforce needs of these critical caregiving professions across all populations of care. This should include standard cultural competencies inclusive of the LGBT community and other populations based on age, race, ethnicity, geographic location, etc., as well as a greater focus on recruitment and retention of direct care workers to ensure that the workforce is empowered and equipped to serve Pennsylvanians.

**2) If so, should the Department of Aging remain a standalone agency?** We believe having a Commissioner on Aging is the right choice assuming the unification moves forward due to the concern of seniors' loss of access to the Governor's Office.