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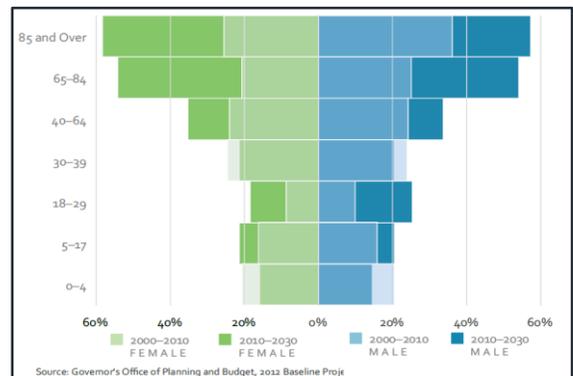
Remarks to the Health and Human Services Interim Committee
June 15, 2016

Good afternoon. Thank you for the opportunity to appear before you today and provide comment and rationale behind our recommendations to reauthorize the Utah Commission on Aging. My name is Rob Ence and I was recently appointed to be the Executive Director for the Utah Commission on Aging. With me today are Dr. Mark Supiano, Director of the Utah Center on Aging and Becky Kapp, Director of Salt Lake County Agency on Aging and who serves as Commission chair. Both are available for comment and questions today.

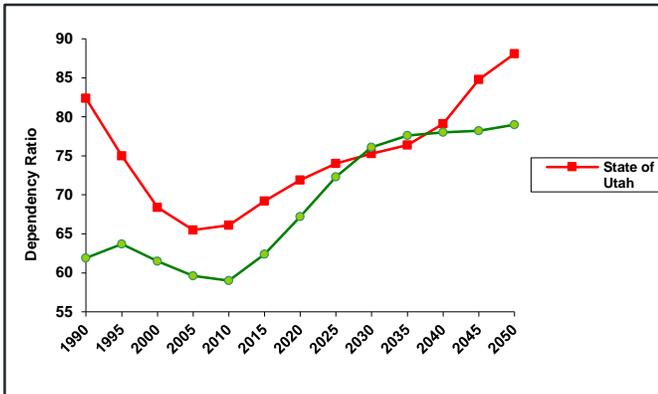
In addition to a copy of my remarks, you have in front of you two letters representing a sampling of the Commission’s supporters. These high-profile organizations and individuals play a critical role in the affairs of our state. I am unaware of any opposition to this reauthorization. You also have two documents, one representing graphically the demographic realities of our future population and the other a snapshot of recent Commission efforts.

When the Commission was created in 2005, data were presented to illustrate the future impact of aging on our state, communities, and families. The Commission was charged by Governor Huntsman with assessing and helping plan for the eventual challenges in the Utah 2030 project. We are now approaching the half-way mark of that 25-year vista and find even greater challenges ahead as we shift our focus to Utah 2050.

By 2030 the age 65 and over population will have doubled from 2005. From 2030 to 2050, the fastest growing segment of our population will be those over the age of 85. The phenomenon is illustrated by a population pyramid that inverts by 2050 (see Utah’s Aging Pyramid). This dramatic spike represents an estimated 8-fold increase in the 85+ population from 2006.



Another critical indicator is the dependency ratio. It is a measure of those working to those who are not working (young, elderly, frail, retired). The higher the ratio, the



higher the potential economic threats. Utah has one of the highest ratios in the country right now, and will mirror the national trend for the next 20 years; but then will explode above the national average through 2050. The dependency ratio will exceed the 90th percentile, essentially one worker for every one non-worker.

These realities impact every phase of our social infrastructure including housing, transportation, finance, health care, recreation, etc.

The Commission played a principal role over the past decade in assessing the readiness of state agencies, convening stakeholders, recommending policy changes, and piloting and supporting innovative programs.

A few examples illustrate the impact of the Commission’s collaborative efforts:

1. The ADRC (Aging and Disability Resource Center) grants have provided an effective coalition between the Commission, ADRC state program managers, Area Agencies on Aging, the VA Office of Rural Health, and the Utah Department of Veterans & Military Affairs. The resultant COVER to COVER Program (Connecting Older Veterans – Especially Rural) trains specialists to assist veterans, caregivers, and surviving spouses with information on VA benefits. We now have participating sites covering 20 counties. Prior to contacting the agency, 70% of eligible veterans were not connected to VA resources. This enhanced awareness and access, has contributed to an increase of 80 million dollars from the Veterans’ Administration dollars into Utah for fiscal year 2014 alone. In addition to the multiplier effect as those dollars are spent in the community, there is another direct benefit of relief to the state as Medicaid enrolled veterans are shifted to newly acquired VA benefits saving the state millions of dollars. The Commission assisted in grant acquisition, administrative support, and educational collaboration of the ADRC program managers and the AAAs. This best practice model is now being adopted in several states.
2. The Music & Memory coalition is an effort to relieve the challenges of individuals with dementia and their caregivers through personalized playlists on

iPods. Piloted by the Jewish Family Services and supported by a grant obtained by the Utah Health Care Association, the program has been launched in dozens of nursing homes and four community-based services to date. The Commission plays a leadership and convening role to assure statewide perspective and reach. Valuable business sector support from Zions Bank and Skullcandy continues to underwrite the equipment and training efforts.

3. In 2007 the Commission supported legislative efforts to create a loan repayment program for attracting needed geriatric health care providers as part of the Utah Health Care Workforce Assessment Program. There are severe shortages of geriatric health care providers across all disciplines nationally and in Utah. The data (see handout) for geriatric medicine trained physicians projected to 2030 indicates how far we have to go. After a hiatus, the program's funding was reinstated this year, and one of the University of Utah Geriatric Medicine fellowship graduates now in practice in Provo, Utah and a Geriatric PharmD working in the University of Utah Geriatric Patient Centered Medical Home Clinic have both been selected to receive loan repayment awards this year. This program promotes both recruitment and retention of geriatric health care providers who are in such demand across the state, particularly in rural areas.

4. A final synopsis of collaboration and community education spans a scope of livable community work, End of Life planning, financial preparedness and protection, and health issues. A prime example is the work around Utah's Advance Health Care Directives Bill (Utah Code Section 75-2a-117, effective 2009) and its accompanying guide and ground breaking tool-kit (see <http://aging.utah.edu/documents/utah-coa/directives/tool-kit-2012.pdf>).

The sum total of past efforts is only a beginning that serves to confirm the need for a robust Commission and informs us of future possibilities. It is also a stark reminder that our work has only begun.

As summarized in the letter of support, the Commission has met its statutory requirements in serving the public interest. The purpose and interest for which the Commission was created are still relevant and increasingly vital. We continue to be uniquely positioned to eliminate duplication among stakeholders and produce effective and efficient results. The Commission is strategically focused for the near future on selected issues relating to End of Life and health care, financial fraud and exploitation,

and livable communities where specific problems or gaps exist as we are presently convening the thought leaders in our community to find and recommend collective solutions.

The ability of the Commission to expand its reach and impact would be enabled by:

1. Permanent reauthorization
2. Additional resources to create stability and reasonable staffing
3. Ability to modify limiting provisions of the statute

I respect the work and persistence that brought us to this point in time. I am grateful for the tireless support of the many partners, agencies, and committed citizens. I appreciate the past leadership of Maureen Henry, Anne Palmer, Norma Matheson, and our current board chair, Becky Kapp. And finally the steady hand and leadership of Dr. Supiano. We are a dynamic team that is positioned to carry the Commission to a broader scope and deeper impact.

What you will get from me in my new leadership role is a commitment to be a full and attentive partner with our state and community leaders. To re-envision a thoughtful and intelligent approach to the challenges confronting our aging population. To establish our moral ownership of the issues and be accountable to you and our citizens, especially our most vulnerable populations. To deliver relevant social impact through strategic collaborations, effective use of all the media to inform and educate, and share innovative ideas and practices. And to work with you to assure that policies exist to enhance our mutual success.

Thank you for your consideration.

Respectfully submitted,

Rob Ence