

get \$47.6 million to support the training of residents, medical students, physician assistants, dentists, and others who practice in underserved areas, while another \$1.5 million will support state professional licensing boards in “reducing barriers to telemedicine.”

“Health care reform cannot happen without an adequate supply of well-trained, well-distributed providers,” HHS Secretary Kathleen Sebelius said in a

statement. “These ARRA funds provide targeted investments in primary care, nursing, faculty development, and equipment purchases that will shore up the workforce as we prepare for reform.” The funds will be awarded through a competitive process overseen by HRSA.

“Our health professions programs have been significantly under-funded these past few years,” said HRSA Administrator Mary Wakefield, RN. “These funds

will help us begin to rebuild the infrastructure that is so essential to producing the number of skilled health professionals the nation needs.”

Another \$300 million of HRSA funds will go to the National Health Service Corps, which provides scholarships and loan repayment for primary care providers who serve in health professional shortage areas.

—Meg LaPorte

# LTC Reform Policy Options Offered

## Researchers Target Home And Community Services For Expansion

**E**xpanding home- and community-based services (HCBS) for Medicaid recipients is a major focus of a report released recently by researchers at Georgetown University in an effort to include long term care in the larger health care reform debate.

Released by the SCAN Foundation, the report offers four distinct policy options for improving access to long term care for people of low-income and limited financial resources and strengthening long term care protections for the broader population.

“With recent polling data indicating widespread public support for long term care reform, the options presented in the...report provide federal policy makers a succinct guidebook for enacting meaningful reform that will benefit the growing population of people aged 65 and older,” said Bruce Chernof, MD, president and chief executive officer of The SCAN Foundation.

According to a summary of the report, the first two options would improve long term care for people with low incomes and limited financial resources and modernize Medicaid by tailoring services better to individual needs and using resources more effectively.

The third and fourth options are aimed at strengthening long term

care protections for the broader population—one with better coordination of medical and long term care for Medicare enrollees and the other by

establishing insurance protection for people of all ages and incomes.

Following are some additional details about the first two options: ➤

## Oversized Puppy Brings A Smile



**Resident Bernice Westlund gets a hug from Clifford the Big Red Dog during the grand opening of the Gables Care Center at Boutwells Landing, a full-continuum senior care community in Stillwater, Minn. The center features eight neighborhoods with private suites built around common rooms, including kitchen, living, family, and dining rooms, where residents are served by staff, who, among other things, make tailored breakfasts, administer medication, and lead chat circles to help residents plan their days.**

- Require or provide strong financial incentives for states to expand HCBS;
- Enhance the federal matching rate to states to help finance expansions;
- Make HCBS eligibility available on an equal footing with nursing facility care;
- Give states the option of extending benefits to a broader population to include people who do not meet disability criteria for nursing facility services;
- Combine Medicare and Medicaid funding that promotes efficiency gains by enabling savings in one program to be used to pay for services covered by the other; and

‘Two options would improve care for people with low incomes and limited financial resources.’

- Monitor quality in order to ensure dual eligibles are serviced.
- The third proposal promotes the development of demonstrations of care coordination models that address the need to coordinate both medical and long term care for Medicare enrollees who need both. It includes:
- A primary care “medical home” model;
  - Explicit responsibility for coordinating long term care as well as medical care, including the use of care coordinators who would determine long term care needs, assist in the location of care options, and plan transitions among care settings; and
  - Authority to expand successful care coordination demonstrations without new legislation.

Under the paper’s fourth proposal, a public insurance program would be established in order to ensure long term care for the broad population. The program would be financed by

participants through premiums or taxes and would spread the risk across a broad population and offer protection to participants of all ages and incomes, the report recommends.

The insurance could be designed to provide a core benefit that would be supplemented with private resources, including private long term care insurance and Medicaid.

Some of the key elements of this option are:

- Ensure high participation among potential enrollees to spread risk widely to produce adequate revenue to pay benefits and keep enrollees’ contributions affordable;
- Provide meaningful benefits to ensure that people can obtain the services and supports they need and want; and
- Establish a financing mechanism that generates revenue dedicated to pay for future benefits.

—Meg LaPorte



## GREEN SCENE

### Sustainability Boosts Employee Recruitment

Can being green assist providers in the challenges of recruiting and retaining staff? Absolutely. As assisted living and long term care administrators compete for key employees, green practices should be a part of the conversation.

Companies and facilities that do embrace green practices should make sure current and potential employees know what they are doing to keep their building greener, healthier, and more environmentally friendly.

Improvements in lighting, air quality, and other high-performance features have been proven to improve morale, increase productivity, and reduce absenteeism. According to a report by the U.S. Environmental Protection Agency, building-related illnesses cost organizations 10s of billions of dollars every year, and the average worker spends nearly 90 percent of his or her time indoors.

Employee recruiting and retention advantages go beyond personal health. According to the 2006 Cone Millennial Cause Study, a strong case is made that Millennials—individuals born between 1979 and 2001—search for employment opportunities with organizations that are environmentally responsible.

According to the research, 83 percent of Millennials will place more trust in companies that are socially and environmentally responsible.

Further research demonstrates that this affinity goes beyond the younger members of the workforce. According to a poll conducted by Mortgage Lenders Network USA, 94 percent of Americans prefer a work environment that is intentionally designed to be energy efficient and ecologically sound.

Green solutions can enhance business, reduce expenses, improve the work environment, produce a healthier facility for residents and staff, and impact recruitment and retention of valued employees. When current or prospective employees are weighing their employment options, educating them about what green practices are in place gives the recruiter the upper hand.

*Paul J. Hoffman, owner and president of Hoffman LLC, a Wisconsin-based firm that integrates a single source of responsibility for planning, architecture, and construction management, is a frequent author and speaker on the subject of sustainability. For more information, go to: [www.hoffman.net](http://www.hoffman.net).*