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CACL Fall Newsletter 2015



Fall 2015 Newsletter



University of New Hampshire

Promoting Person-Centered Options for
Living & Aging in Our Communities



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About CACL

CACL is a collaboration between the [Institute on Disability \(IOD\)](#) and the [Institute for Health Policy and Practice \(NHIHPP\)](#) at

Collaborating to Create Elder Friendly Communities in New Hampshire

CACL recently published an environmental scan (commissioned by the NH Endowment for Health) that informs the work of the Elder Health Coalition. The report is a research-based environmental scan focused on six areas of elder health needed to support the creation of elder friendly communities. The six areas, identified by the Elder Health Coalition as critical to the development of elder friendly communities, are Living Arrangements, Family Caregivers, Social and Civic Engagement, Physical and Mental Well-being, Advocacy, and Fundamental Needs. The report, titled "Collaborating to Create Elder Friendly Communities in New Hampshire: A Scan of the Current Landscape," provides a unique perspective as it balances the medical and social determinants of elder health in New Hampshire. [Read the full report here](#)

CACL International Relations

In September, Susan Fox, Co-Director of the Center on Aging and Community Living, travelled to South Korea and Japan with a delegation of service providers, professionals, teachers, and researchers from the [American Association on Intellectual and Developmental Disabilities](#). The goal of the delegation was to research the supports provided for people with intellectual and developmental disabilities in Japan and South Korea. The delegation met with leading disability professionals, academic researchers, families and self-advocates in Japan and South Korea. They also participated in a day-long symposium at Ewha University in Seoul, South Korea.



Coincidentally, on October 6, CACL hosted delegates from South Korea who were interested in the economic impacts of a rapidly aging society and how those issues are being addressed in New Hampshire. Of particular

interest to the delegates, CACL discussed aging in place and the [Senior Leadership Series](#). The visit was informative to both the Korean delegates and CACL staff and raised many possibilities for future collaborations.

the University of New Hampshire (UNH). CACL constructively engages partners within and outside the University in applied research that advances sustainable, person-centered options for aging and community living.

Contact Us!

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Susan Fox Elected to Serve on NASHP Steering Committee

CACL's Co-Director, Susan Fox, was recently elected to the [National Academy of State Health Policy](#) (NASHP) to serve on their Steering Committee on Long Term and Chronic Care. In this role, she helped plan and moderate a session at the NASHP annual conference in Dallas, TX



on October 20th. The session was titled, "New in the Community, Managed LTSS Plans Meet Community Providers." NASHP is an independent academy of state health policymakers who work to support state and federal officials to advance excellence in health policy. NASHP is a non-profit, non-partisan organization that works collaboratively with state and federal officials, providers, researchers, and consumers to develop and implement new approaches and policies to achieve quality, affordable, health care and advance a culture of health across the states.

New CMS Rules Impact NH's HCBS Waiver Services

The Centers for Medicare & Medicaid Services (CMS) issued a final rule in January 2014 to ensure that Medicaid's home and community-based services programs provide full access to the benefits of community living and offer services in the most integrated settings.

This rule impacts the four 1915(c) waivers in New Hampshire: 1) developmental disability services; 2) in-home supports for children with developmental disabilities; 3) acquired brain disorder services; and 4) services for seniors and adults with chronic illnesses.

In this final rule, CMS is moving away from defining home and community-based settings by "what they are not," and toward defining them by the nature and quality of individuals' experiences. The home and community-based setting provisions in this final rule establish a more outcome-oriented definition of home and community-based settings, rather than one based solely on a setting's location, geography, or physical characteristics. The changes related to clarification of home and community-based settings will maximize the opportunities for participants in HCBS programs to have access to the benefits of community living and to receive services in the most integrated setting and will effectuate the law's intention for Medicaid HCBS to provide alternatives to services provided in institutions.



Linda Bimbo, CACL director of program operations, has had the opportunity to participate on NH's Transition Framework Team, which is developing a State Transition Plan for New Hampshire. The plan will outline how NH determines compliance with the regulatory requirements for home and community-based settings and will describe to CMS how NH will comply with the new requirements. The UNH Institute on Disability is coordinating this process on behalf of NH DHHS. [Learn More](#)

Items of Interest

- In conjunction with AARP NH, CACL hosted a White House Conference on Aging Viewing Party on July 13. The agenda included panels, armchair conversations, and remarks from President Obama and addressed themes such as retirement security, healthy aging, and elder justice. [Learn More](#)
- In a recent Stateline article, read about how some states are taking steps to ensure that the estimated 42 million Americans who care for a family member are properly prepared to perform some necessary medical tasks once left to professionals. [Learn More](#)
- In the article, *Medicare's Part D Drug Benefit at 10 Years: Firmly Established But Still Evolving*, learn about the challenges ahead for Medicare Part D. [Click here to read the full article](#)
- Results from a Health Affairs study, *US Prevalence and Predictors of Informal Caregiving for Dementia*, show that informal caregivers play an integral role in the provision of care for older adults providing on average 171 hours of informal care per month for individuals with dementia and 89 hours for individuals with cognitive difficulties. [Learn More](#)
- *For Some States, A Focus on Older Workers*, an article by Stateline, describes a novel phenomenon: ageism in the hiring process. [Click here to read the full article](#)

Upcoming Events

- The Northern New England Geriatric Education Center hosts the New England Rural Roundtable on November 5 and 6. [More information here](#)
- Attend the New Futures Advocacy Training on November 17th. [More information here](#)
- Attend the Dartmouth Aging Resource Center event *Understanding Your Long Term Care Options* on November 17th. [Learn More](#)
- Attend *Patient Engagement through Mindfulness* on January 12, 2016 at Plymouth State University-Graduate School hosted by the Southern NH Area Health Education Center [Learn More](#)

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