



2018 Legislative Priorities

The Minnesota River Area Agency on Aging (MNRAAA) provides advocacy, information, resources and assistance so that older adults can maintain the lifestyle of their choice.

MNRAAA's Legislative Priorities for legislative attention in 2018:

1. Protect Vulnerable Older Adults
2. Support Direct Care Workers
3. Support Caregivers
4. Support Rural Transportation Options
5. Develop Affordable Housing for Older Adults and End Older Adult Homelessness
6. Maintain Rural Health Care Providers
7. Maintain Older Workers
8. Develop Border-to-Border High Speed Internet



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PROTECT VULNERABLE OLDER ADULTS

Minnesota River Area Agency on Aging (MNRAAA) supports efforts to increase the protection and support of vulnerable older adults and urges lawmakers to make that protection a top priority during the 2018 legislative session.

Abuse, neglect and financial exploitation of vulnerable older adults occurs across Minnesota and not only in formal, licensed settings. National studies have shown almost 60% of reported abuse of older adults is by a family member.



SUPPORT DIRECT CARE WORKERS

MNRAAA supports creative solutions that will increase the number of direct care workers needed to assist older adults.

The State Demographer and Economist estimate that by 2018, Minnesota will have approximately 50,000 to 60,000 openings for direct care workers to support people with disabilities and older adults. This workforce shortage is occurring while at the same time there is an increasing number of older adults who want to remain active and independent in their own communities.



SUPPORT CAREGIVERS

MNRAAA supports efforts that address the needs of caregivers. Support is needed so that caregivers can continue supporting the growing number of older adults who require care to remain in their own homes and communities.

Family and friend caregivers, estimated at 585,000, are the foundation of Minnesota's long-term services and support system. They provide the majority of care needed for older adults to remain at home. This unpaid care is valued at \$7.86 billion a year and exceeds State Medical Assistance expenditures¹. Working caregivers have unique challenges and often struggle to balance the competing demands of work, caregiving and family. The presence of a caregiver has been shown to improve medical compliance, reduce hospital readmissions, prevent or delay premature nursing home placement, and improve quality of life for older adults.



SUPPORT RURAL TRANSPORTATION OPTIONS

MNRAAA supports efforts that will address the unique transportation needs of older adults in rural Minnesota. Locally-provided and affordable transportation will enable older adults

access to quality care, day-to-day necessities such as groceries, and activities that will reduce social isolation.

Access to medical and non-medical transportation is often limited or unavailable for older adults in rural Minnesota and door-to-door transportation is even more challenging to access. Transportation is a critical service and must be available for older adults to continue living in their own homes and communities.



DEVELOP AFFORDABLE HOUSING FOR OLDER ADULTS AND END OLDER ADULT HOMELESSNESS

MNRAAA supports the development of a range of supportive and affordable housing options for the growing older adult population. This will help older adults remain in their community, receive the support they need and avoid homelessness.

Most older adults wish to remain in their own homes for as long as possible. A growing number of older adults will be living on fixed incomes of 30 to 80 percent of the area medium income of their neighborhoods. These individuals will face the dual challenge of not being able to afford the maintenance and accessibility modification costs associated with staying in their homes and not being able to find affordable rental housing in which they can receive services.²

According to the Wilder Research *Homeless in Minnesota Findings from the 2015 Minnesota Homeless Study*, adults age 55 and older who are homeless increased by 8 percent since 2012. However, the growth in the number of homeless older adults was similar to the growth of this age group in the overall Minnesota population. In general, issues facing the aging population exist for older adults who are homeless, but are magnified due to the difficult circumstances and conditions associated with being homeless. Forty-one percent of homeless adults are on a waiting list for subsidized housing, and another 14% are unable to access a wait list because it is closed.



MAINTAIN RURAL HEALTH CARE PROVIDERS

MNRAAA supports efforts that will result in maintaining rural health care providers. This will make access to health care easier for older adults and help support the economic vitality of local communities.

Rural health care providers serve a disproportionately large number of residents who rely on public health care programs (Medicare, Medicaid and others). These programs often pay below cost and are increasingly reducing reimbursement. Despite progress toward more rural Minnesotans having health insurance, many still face unaffordable premiums, huge deductibles, narrow networks and other barriers to affordable care. This results in more uncompensated care costs impacting rural providers and facilities. Most hospitals in rural Minnesota operate in the red or with margins of less than five percent, making compliance with health care reform mandates, and investments in infrastructure more difficult or impossible to afford. Small hospitals, clinics and nursing homes continue experiencing significant financial stress.³



MAINTAIN OLDER WORKERS

MNRAAA supports new approaches for maintaining older adults in the workforce to prevent intellectual and resource reduction for employers, while also supporting older workers' economic security.

By 2020, Minnesota will have more retirees than school age children, leading to a significantly lower labor force growth rate and an increased competition for workers.



DEVELOP BORDER-TO-BORDER HIGH SPEED INTERNET

MNRAAA supports implementing legislation that will result in border-to-border high-speed internet across Minnesota so the availability of telemedicine, tele-mental health, tele-monitoring, tele-education and social interaction will expand across rural Minnesota.

Various factors account for why an older adult becomes socially isolated. Risk factors can include health problems, disability, loss of loved ones, living alone, reduced social networks, poverty, rural settings et. al.

Access to health care is challenging in parts of rural Minnesota. While about half of Minnesotans live in rural areas, only one-sixth of Minnesota's doctors practice in rural areas. In addition, healthcare workforce shortages are severe in rural areas and health care options are fewer and more widely dispersed.³

1. Valuing the Invaluable 2015 Update: Undeniable Progress, but Big Gaps Remain. AARP Public Policy Institute
2. 2017 Legislative Priorities, Minnesota Board on Aging
3. *The State of Minnesota Rural Health 2017 – Minnesota Rural Health Association*