



**Detroit  
Long  
Term  
Care  
System  
Change  
Task  
Force**



**Detroit Long Term Care System Change Task Force  
Nursing Home Management  
Meeting Minutes**

**Date:** Monday, November 24, 2008  
**Time:** 1:00 p.m.  
**Place:** Oakpointe Senior Care and Rehab Center  
18901 Meyers Road  
Detroit, MI 48235

**MEMBERS PRESENT**

Betsy Rust  
Elaine Hearn  
Kim Pinckney  
John Sczomak  
Patricia Farmer  
Toshia DeWeever  
Carl Cottrill  
Elsie Parker

**MEMBERS EXCUSED**

Jerry Gumbleton, Chair  
Kelsey Schwartz  
Catherine Kiley  
Bettye Cogburn

**STAFF**

Karen Watson, Facilitator  
Rachel McLaury, Recorder

**CALL TO ORDER**

Betsy Rust called the meeting to order at 1:00 p.m.

**MATERIAL DISTRIBUTED**

Meeting Minutes—October 31, 2008  
List of Future Subcommittee Meeting Dates  
Subcommittee Work Plan—Objectives, Action Steps and Tasks  
Detroit Area Agency on Aging Detroit Long Term Care System Change Task Force Web Page

**REVIEW AND APPROVAL OF MINUTES**

Carl Cottrill made a motion to accept the minutes of October 31, 2008, seconded by Patricia Farmer. Motion carried.

**OLD BUSINESS**

Karen Watson reminded all members about the upcoming full task force meeting taking place Monday, December 8, 2008 at Greater Grace Conference Center from 9:00 a.m. to 12:00 p.m. Ms. Watson distributed a list of dates for potential upcoming subcommittee meeting dates. The

group decided to meet the second Tuesday of each month from 1:00 p.m. to 2:30 p.m. The meetings will be held at various locations including West Oaks Senior Care and Rehab Center, Oakpointe Senior Care & Rehab Center, Detroit Area Agency on Aging and Plante and Moran.

### **NEW BUSINESS**

Ms. Watson distributed a copy of the subcommittee work plan including the goal, objective, action steps, responsible party and time frame. Besty Rust asked all members to review the mission and scope of work and be prepared to discuss at next meeting.

Ms. Rust asked the subcommittee members to discuss some of the patient care issues especially what are the problems once the residents enters the facility. The biggest problem is payment or not being reimbursed (for PPAs or coinsurance charges) by the resident's financial representative. There is miscommunication between the administrators and the hospital discharge planner. For example an administrator may take a resident thinking they are eligible for Medicare but the resident does not qualify because they did not stay the mandated three day hospital stay.

Another issue is the family takes ownership (of the patient's social security funds, etc.) and feels it's their money and not the residents. Since the family has access to the resident's money they do not want to accept any financial responsibility for the resident.

Another issue is Medicaid HMO disenrollment. Medicaid HMO only covers 45 days of skilled nursing care. So if the resident needs more than 45 days of care they would have to switch from Medicaid HMO and enroll in straight Medicaid. This can be a lengthy and slow process. It can take up to 45 days for the patient to get enrolled in Medicaid. Some administrators may have to involuntary discharge the patient after the 45 days of care.

A few suggestions the subcommittee recommended is that the long-term care connection does an assessment within 48 hours and decides the individual's eligibility and level of care. This would prevent a patient from being stuck in a nursing facility until a proper housing placement would be made. The group asked how we could get the Long-term Care Connection, discharge planners and administrators on the same page being able to communicate and have the same understanding of the process. They subcommittee wondered why Medicaid HMO does not reimburse for more than 45 days of skilled nursing care even if the residents needs it. There are some problems with working with a Medicaid HMO since a third party is involved. Ms. Rust does not know why the state does not mandate that all nursing homes have an outstation worker.

Ms. Rust asked the committee to discuss some of the patient issues that they experience in their facilities. They are a number of issues that were discussed including behavioral, low cognitive skills or aggressive behavior, dealing with residents that are alcoholics, or drug addicts and having younger and older residents mixed. Many residents that are younger do want to interact with older patients. The facilities are not set-up to meet the needs of the younger residents especially psyosocial activities. There are no case managers assisting in the transition of the younger resident back into the community.

The subcommittee asked if they could get more data on residents in nursing facilities. The committee would like to possible survey the nursing facilities to receive more demographic data on the residents especially the age of the residents.

Rachel McLaury handed out a copy of the Detroit Area on Aging System Change Task Force Web Page. She explained the website is being updated with all the subcommittee meeting dates, minutes and notifications that will be posted for review. The next meeting is scheduled for January 13, 2009 at West Oaks Senior Care & Rehab Center at 1:00 p.m.

**ADJOURNMENT**

Meeting was adjourned at 2:15 p.m.

Respectfully submitted by:

Rachel McLaury

*Moving Towards Enhancing the Quality of Care*

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