



## Life Plan Community Weekly: Recap of LeadingAge Updates

August 26, 2022

**LeadingAge Coronavirus Update Calls Next Week. Monday, August 29, 3:30 PM ET - Ben Oseroff, co-author of a study on homebound Americans** will join us on Monday to discuss his profile of homebound older adults, their needs and ways to address them. **On Wednesday, August 31, at 3:30 PM ET, hear from David Putrino, Director of Rehabilitation Innovation for the Mt Sinai Health System,** and an Associate Professor of Rehabilitation Medicine at the Icahn School of Medicine at Mt Sinai, who will talk about the dangers of working while having COVID. If you haven't registered for LeadingAge Update Calls, [you can do so here](#). You can also find previous call recordings [here](#). Note that to access recordings of the calls you need a LeadingAge password. Any staff member of any LeadingAge member organization can set up a password to access previous calls and other "members only" content

### **Study Finds Discrimination Barrier to Advance Care Planning for Sexual, Gender**

**Minorities.** [Investigators](#) at the University of Colorado School of Medicine utilized the Advance Care Planning Engagement Survey to capture experiences of discrimination within sexual and gender minority (SMG) adults. Results found most SGM participants already talked to someone about their end-of-life wishes or were planning to do so, but further interviews found those conversations occurred outside the clinical setting. Those who did not have or plan to have these conversations did not feel they were necessary or felt discriminated against. Researchers recommended health systems could support clinician sensitivity training including guidance on documentation and requirements.

**Study Finds Home Dialysis Costs Medicare Less.** A study from researchers at Baylor University's College of Medicine [analyzed](#) Medicare beneficiaries starting dialysis between 2008 and 2015. They found patients who treated themselves at home using peritoneal dialysis cost about \$91,716 compared to \$108,656 for those who used hemodialysis at a facility, an 11% difference. Researchers did say the savings may diminish over time as more patients with conditions like diabetes and obesity require dialysis, often those individuals have more complications with home peritoneal dialysis.

### **Congress Considers Strategies To Improve Medicare And Medicaid Integration For Dual-Eligible**

**Individuals.** At the end of July, Senators Rob Portman (R-OH) and Sherrod Brown (D-OH) introduced [legislation](#) to create a new state option to fully integrate the financing and delivery of care for individuals eligible for full Medicaid and Medicare benefits. This legislation is among the most ambitious of a number of bills introduced this session that seek to improve Medicare and Medicaid integration for dual-eligible individuals. Health Affairs, in this [article](#), highlights the Portman-Brown bill and other recent legislative proposals related to integrated care for dual-eligible individuals, including support for states in undertaking planning and activities to improve the coordination of care, opportunities to expand the Program of All-Inclusive Care for the Elderly (PACE), and a proposal to create a federal structure for Medicare premium and cost-sharing subsidies for low-income individuals.

**Taking Public Health Action for Family Caregivers Webinar.** The National Alliance for Caregiving and the National Association of Chronic Disease Directors will host a webinar, *Taking Public Health Action for Family Caregivers*, to share insights into caregiving issues relevant to public health and outline actions public health professionals can take to protect the health of family caregivers. This webinar will also act as a release for their new report, *Chronic Disease Family Caregiving Through a Public Health Lens: The Framework for Family Caregiving and Public Health*. This webinar will be held on Wednesday, September 14, 2022 from 10:00 a.m to 11:00 a.m ET. [Click here](#) to register.

**Final Segment of State Policy Roadmap for Family Caregivers Released:** On August 25<sup>th</sup>, the [National Academy for State Health Policy](#) (NASHP) released the final component of the [State Policy Roadmap for Family Caregivers](#). The goal of this publication is to provide a guide for state officials to better understand the state policy landscape for supporting family caregivers, and to identify opportunities for innovation in their states. The sections of this tool for states include:

- Public Awareness and Outreach
- The Direct Care Workforce
- Financial and Workplace Security
- Family Caregiver Services and Supports
- Using Research, Data, and Evidence-Informed Practices to Support Family Caregivers
- Engagement of Family Caregivers in Health Care Systems

[View the entire roadmap.](#)

**Drug Deaths Spiked Among Seniors in Last Decade.** The 10<sup>th</sup> annual America's Health Ranking's Senior Report from UnitedHealth Foundation, [found](#) drug deaths among Americans over age 65 soared 100% during the decade, suicide rates increased 13% and depression increased 9%. The report also highlights disparities for older adults of color. Between 2019 and 2020, the early death rate for Americans of color rose more sharply than the national average of 17% (48% for Hispanic populations, 32% for American Indian/Alaska Native populations, 31% for Asian populations, and 29% for Black populations). The report notes that decades of progress to reduce early deaths by race were upended by the COVID-19 pandemic with COVID becoming the third leading cause of death among older adults in 2020. The report also ranks the healthiest and least healthy states for older adults. Utah, Vermont, Minnesota, Connecticut and Colorado top the list for healthiest states with Oklahoma, West Virginia, Kentucky, Louisiana, and Mississippi bringing up the rear for least healthy states.

#### FROM CDC:

1. **Healthcare Workers – Health, Stress, and Mental Health.** CDC's National Institute of Occupational Safety and Health (NIOSH) has [launched a multi-year initiative](#) to improve the mental health and well-being of the nation's health workforce. For many of the 20 million health workers in the U.S., already challenging work conditions (long work hours, heavy workloads, and exposure to human suffering and death) have intensified during the COVID-19 pandemic. These conditions have led to new and worsening mental health concerns, including burnout, compassion fatigue, depression, anxiety, substance use disorders, and suicidal ideation. This initiative emphasizes the importance of intervening *before* work stress negatively impacts mental health. NIOSH Director Dr. John Howard and U.S. Surgeon General Dr. Vivek Murthy kicked-off the initiative with the webinar [Protecting Health Worker Mental Health: A Call-to-Action](#).

Resources:

- [Healthcare Workers: Work Stress & Mental Health](#)—Why health workers are more likely to experience mental health problems

- [Healthcare Workers: Work Stress & Mental Health Resources](#)—Resources for stress, fatigue, burnout, substance use and suicide
2. **CDC COVID-19 All-State, Tribal, Local, and Territorial (STLT) Update Call:** The CDC COVID-19 All-STLT Update Call will occur on the third Monday of each month from 2:00–2:30 PM ET. **The next call will be on Monday, September 19<sup>th</sup>, from 2:00–2:30 PM ET.** If you have any questions, please contact [eocevent382@cdc.gov](mailto:eocevent382@cdc.gov).  
**Upcoming Calls:** September 19<sup>th</sup>, October 17<sup>th</sup>, November 21<sup>st</sup>, and December 19<sup>th</sup>  
[Register now](#) for this call series.
  3. **Vaccine Planning for the Fall.** On August 16<sup>th</sup>, CDC released the [CDC Fall COVID-19 Vaccination Operational Planning Guide](#) on the [COVID-19 Vaccination Program Operational Guidance](#) webpage. This operational planning guide includes details about the anticipated bivalent COVID-19 booster. **NEW**
  4. ***Morbidity and Mortality Weekly Report (MMWR) — Summary of Guidance for Minimizing the Impact of COVID-19 on Individual Persons, Communities, and Health Care Systems — United States, August 2022*** — Individual risk for medically significant COVID-19 depends on a person’s risk for exposure to SARS-CoV-2 and their risk for developing severe illness if infected. Exposure risk can be mitigated through nonpharmaceutical interventions, including improving ventilation, use of masks or respirators indoors, and testing. The risk for medically significant illness increases with age, disability status, and underlying medical conditions but is considerably reduced by immunity derived from vaccination, previous infection, or both, as well as timely access to effective biomedical prevention measures and treatments. CDC’s public health recommendations change in response to evolving science, the availability of biomedical and public health tools, and changes in context, such as levels of immunity in the population and currently circulating variants. You can learn more here: [Morbidity and Mortality Weekly Report](#)
  5. **Healthcare-associated infections prevention workshop** — CDC and FDA have just announced the speakers list ahead of their co-sponsored public meeting on **August 30**, Drug Development Considerations for the Prevention of Healthcare-Associated Infections. Registered attendees will hear experts discuss research and development needs for products, such as [decolonization tools](#), that could help prevent healthcare-associated infections (HAIs), including antimicrobial-resistant HAIs. Speakers will also discuss ideas for research study designs that could provide evidence on potential products, as well as clinical results that may be relevant to assessing their efficacy. Prevention therapeutics and agents that stop the spread of dangerous germs (pathogens) will be critical to the nation’s success against [antimicrobial resistance](#). [Register Here](#)