

CALLING A SPADE, A SPADE

GEMA G. HERNÁNDEZ

TELLING THE TRUTH

**MADE THE FORMER SECRETARY OF THE
FLORIDA DEPARTMENT OF ELDER AFFAIRS
A "CONTROVERSIAL" ADVOCATE**

Here is a selection of her incisive articles in her struggle to defend the rights elders.

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WE NEED AN INDEPENDENT VOICE

...to represent the needs of elders.

By Gema G. Hernández

In 1992, the people of Florida voted to create a *Department of Elder Affairs* and the *Department of Veterans Affairs*. This was the first time in the history of the State that Floridians, young and old decided to modify the Constitution of the State by adding two administrative agencies to be part of the permanent structure of our state government. This bold move was for the sole purpose of providing a strong voice to these two groups of people with unique needs, our elders and our veterans. The fact that these are the only two departments mentioned in the constitution of the state clearly indicates the importance Floridians have given to their role.

The idea behind the creation of both departments was to make sure that the needs of veterans and elders will not be lost in the bureaucratic maze of other departments. The People of Florida felt that by raising the agencies that deal with issues affecting elders and veterans to a cabinet level position, the administrators of the agencies will be free to truly represent the interests of the groups without fear of retaliation from other political appointees or fear that their voices will be silent. This was the idea, now comes the reality.

Since the creation of the Department of Elder Affairs there have been three Secretaries who have administered the department, each with their unique vision, style and personal experiences. Some secretaries have direct experience with elders and with care-giving issues; others do not. Each secretary has served and continues to serve at the pleasure of the Governor. In reality they are representing the Governor's views and not the views of elders, and regardless of whether or not budget decisions and policies benefit or affect elders, they have no choice but to support them.

Maintaining the needs of elders at the forefront of the Department of Elder Affairs agenda has not been a priority of some elected officials. In some cases the elected official that supervises the head of Elder Affairs has been more preoccupied with his own religious agenda than with protecting issues dear to some elders like the right to die. This conflict between the purpose for which the Department of Elder Affairs was created and the way the Department of Elder Affairs has been reduced to a third or fourth level priority has been painfully obvious in the last five years.

One example of the lack of independence that the head of elder affairs has is in the budget preparation. The budget is a critical document that should reflect the needs of the group. It is supposed to be an independent assessment done by the Secretary for the purpose of requesting financial and human support for elders and caregivers. Since the inception of the department, and particularly in the last 2 years, the department's budget has been prepared, massaged, and put together by the office of the Governor. As a matter of fact, the Governor's budget is the Department's budget. This issue caught the attention of some legislators who requested that Secretaries sign an affidavit stating that the budget was done independently of the Governor's budget. Unfortunately, this request has been lately forgotten, since the Republican Party has assumed full control of both the House and the Senate. The Secretary is therefore at liberty to ditto the Governor's interpretation as to the financial resources required to provide quality care to our frail elders.

Another example of the lack of autonomy the Secretary has can be seen in the lack of funding two critical programs have experienced in the recent years. One program, Community Care for the Elder is the only program without an income eligibility criterion. This means that it is the only program that provides assistance to the middle class. CCE, as the program is commonly known, has received almost no funding in the last few years. The second program provides financial support to caregivers to purchase the extra box of diapers or the brand name medication not covered by medical plans, but needed to maintain the quality of life of

the frail elder. This program is called Home Care for the Elders. Despite the request from the Department of Elder Affairs Advisory Board, funding has not been forthcoming to this area. Instead, the Secretary of elder affairs has requested and funded the Destination Florida program, an advertising campaign to attract more wealthy elders to our state. Destination Florida as we know is the brainchild of one of the biggest contributors to the Republican Party, a very well to do developer that would like to expand his Continuing Care Retirement Communities in the State if not in the nation. Money has also been diverted to fund this marketing campaign and to fund dancing and singing demonstrations in our state capital.

If the purpose of the Department of Elder Affairs is to make sure the needs of elders are being heard the present system is not addressing this issue. On the contrary, the department is being used to detract the attention of the public to other non-critical issues in the elder's and caregiver's life. When, may I ask, shall we continue to support a system that is addressing the goals and objectives of the people of Florida?

What we need is to create an independent mechanism to achieve that goal, and the only way this can be done is to make the position of Secretary of the Florida Department of Elder Affairs an elected position. This way the incumbent cannot use the excuse that the Governor told him or her to do it. This way whoever occupies this position can take full responsibility for his or her action. If he or she cuts programs it is not because the Governor ordered him or her to do it, but because he or she has chosen to do it.

If elders want to have control over the department's vision, mission and objectives they need to make this an elected position, free from pressures and totally accountable to the public. As long as politicians have control over the appointment of that individual, this will defeat the purpose for which the department was created. It will force the individual to look the other way and to ignore the demands for action.

If we continue the existing format, elders will lose time and time again because when there is a need to request a budget increase that need will be superceded by other budget requests and other political agendas. Making the position of Secretary an elected position will provide parity to the department's main objective that of giving voice to the 2.3 million elders in our State. If you think this is a good idea let us start a petition and see where this will take us.

THE ROLE OF VOLUNTEERS

By Gema G. Hernández

Elders have the opportunity to give their communities one of the most precious gifts we have to offer, that of our time. Giving a program, a neighbor, a child the attention they need is a magnificent way to enhance our quality of life, it gives us the opportunity to leave behind a memory, and as long as that memory is alive we in turn become immortal.

For many years I have been involved in volunteerism, both on a personal basis, and in designing programs to recruit and train volunteers. The last program I was involved with was able to increase the number of volunteers from under 30,000 statewide in 1998 to 52,890 statewide when I left in 2001, and from under 2.0 million hours of services to 2.6 million hours of volunteer services. As a result, I have learned a lot from talking to those volunteers, they are our most precious commodity and as such should they be treated. From my experiences with elder volunteers I have learned what I call the seven most important rules in volunteerism. I first published these rules in 1996 in an article titled: The Gift of time: The creation of the Pro Salud Clinic and they continue to be relevant today seven years later.

Rule #1: Research the options available to you. Do not volunteer to the first agency or program that contacts you. The key in finding that perfect match between your heart and your gift of time is to know what is available in your community. Volunteer work is like giving a voice to your heart. Your heart cannot speak unless you find the right agency and the right volunteer job. This is also the only way that your voluntary work will renew itself on an ongoing basis.

Rule #2: There is no end to the creative avenues of volunteers. Therefore, first consider the skills you have to offer and make sure those skills match the skills needed for the task. Second, you may not like to use the skills that you have used for the last 30 years and instead you

want to learn a new skill. Decide which of the two avenues you want to follow, identify this ahead of time and if what you would like to do is to learn a new skill, investigate only those organizations who offer training in that area.

Rule #3: Combine your personal goals, aspirations and desires with the opportunities that exist in your community and consider only those volunteer opportunities that would help you achieve those goals. Remember, some elders volunteer to achieve self-actualization and this can only be reached if we fulfill our personal goals and desires.

Rule #4: Never over commit. Volunteers need to realistically consider what they can offer the organization in term of hours, length of commitment and number of activities they can perform. Remember your family; they also need you at home. Don't get physically and emotionally tired because of the number of hours you are volunteering or because of the long-term commitment you promised the agency. It is better to commit only for a few hours and only for a short period of time until you find the right balance in your new life.

Rule #5: Consider the legal ramifications of your voluntary activities. Your volunteer work should be without fear of liability exposure. This is an extremely important point because elders do not realize they can be personally liable for their voluntary activities. As an elder volunteer you need to make sure your nest egg is well protected. You need to have immunity from liability from any personal injury, wrongful death, property damage and other loss which could include relocation to a new place based on your endorsement. Please remember that:

- Volunteer immunity laws protect the agencies and not the volunteer
- Unless you are an agent of the State of Florida, the state immunity laws will not protect you.

- Good Samaritan Laws protect volunteers in the medical or health care field and engineers in relief efforts in case of disasters, but not other types of volunteers.

- Cases that have been brought against non-profit boards of directors and volunteers are based on federal laws which may be unaffected by your state immunity.

Immunity for liability doesn't mean that someone can't sue you and force you to incur expenses that will not be covered by the agency.

Rule #6: Interview the agency before you begin your voluntary work. Make sure the agency's values are similar to yours, but most importantly make sure the agency has a general liability coverage that includes all the situations where you are going to be involved. Some agencies recommend you obtain personal liability insurance. This is not the best situation for you and unless you are totally sold on this agency and this activity I recommend you look for a better volunteer situation. Make sure you are given a job description listing all the activities you are being asked to perform and make sure none of those activities are activities for which the state requires licensing.

Inquire about training involving not only the job, but the agency in general. The more you know the better equipped you will be to be of service to your community.

Rule #7: If you are not prepared to live up to the responsibilities of the job you should not seek the role of volunteer.

I am proud of the hours and services elders volunteers offered the community during my tenure as Secretary 1999-2001. The hours of services they gave were added value to the increased funding our

program received, not a replacement for funding. But we took very seriously the volunteers and their contributions and never used them or devalued in anyway what they offer the programs. As long as volunteers are added value and not replacement, value the expansion of volunteer programs should continue.

TOP TEN REASONS WHY ELDERS SHOULD MOVE TO FLORIDA

By Gema G. Hernández

Elders in the North and East of the Mississippi River have begun watching a campaign created by the *Florida Department of Elder Affairs* to attract more wealthy elders to Florida. Yes, you read it right; the campaign is not paid by the Department of Tourism or by private developers in need to sell their continuous retirement communities. It is paid by the agency responsible for providing services to frail elders. While I have not actually watched the commercial, I know it cost \$100,000 this year to produce.

I also know that this cost does not include the fact that an office for Destination Florida has been created at the Department of Elder Affairs' headquarters making the investment in the campaign closer to \$200,000 to coordinate and direct. It is confusing to see that for the Governor's next year's budget it is asking for \$600,000 for Destination Florida and for \$700,000 for a Nursing Home Diversion program. What is wrong with this picture?

The fact that both budget requests are so close in amount tells me that there must be a shortage of elders in the state and therefore, for Florida to maintain the number one spot in the nation with the most elders, Florida needs to recruit new elders.

If after watching this attractive campaign you are intrigued with the idea and you would like to move to Florida consider my top ten reasons why you should:

Reason Number 10: I like to drive and if I move to Florida I will have to drive all the time. There is no effective transportation system in place so

I need to keep my car and my insurance in good standing. In addition, I need to keep my eyeglass prescription up to date because I will be forced to take an eye test on a yearly basis. The fact that the buses in Florida take me nowhere I want to go and their routes are at least three miles from my home once every hour making the simplest trip outside my home becomes an adventure.

Reason Number 9: I like to conserve water and since there are water shortages in Florida I don't have to worry about taking a bath every day or watering my plants. This is particularly good in the summer months when I will be forced to consume water unless of course there is no water to consume.

Reason Number 8: My favorite food is peanut butter sandwiches, and I know that if I end up in an Adult Day Health Care Program this is what I will eat. This is a good financial plan for the company that has received an exclusive Medicaid contract with the state and is a good thing for me because eating a peanut butter sandwich every day is good for me.

Reason Number 7: I don't like to pay State income taxes. I would rather pay excessive local taxes that support the local economy. Not only would I have to pay exorbitant amounts of real estate taxes, but now I also will have to pay additional city and county taxes to support health care programs for indigents.

Reason Number 6: I have always wanted to learn another language. This is really my opportunity to learn Spanish, Creole or Vietnamese. Every place I go, every phone number I call will force me to try my new language because the person at the other end of the line will not be able to understand me. I wish the government programs do the same and provide bilingual information to those elders in need.

Reason Number 5: I don't like Health Maintenance Organizations and the fact that in most of the counties in Florida there is no HMO or for that matter any other Managed Long Term Care program, will definitely

force me to find private providers that only accept private insurance. I would rather have no services than to belong to a HMO, and if I move to Florida I will be forced to do that.

Reason Number 4: I like to attend Senior Centers where Viagra sponsors their Ambassador for a Day Program. I also would like to be able to sing and dance at the Capitol and in Florida there is one day a year that I can do it.

Reason Number 3: I don't mind the monthly unexpected increases in the maintenance fees of my Continuing Retirement Community. After all, I need to use all my savings as soon as possible before I die. I know that even though the Retirement Community has no liability insurance it really does not matter because Tort reform has already capped damages resulting from negligence claims.

Reason Number 2: To make sure I never go to a Nursing Home I prefer to live in a state that has a moratorium in the number of Nursing Home beds and has program eligibility criteria so strict that only when I am about ready to die I can qualify for services. Having this in place will definitely force my family to take care of me whether they like it or not.

Reason Number 1: I like to live in the State that does not recognize aging is a normal developmental process by minimizing the needs of frail individuals and maximizing the lack of need of the well to do elders.

If your reasons for moving to Florida are similar to mine pack your bag and your money and move down here. Do what Ponce de Leon did and discover the Fountain of Youth, and if you are one of those unlucky elders that happens to need help, don't worry we can always send you back.

MODERNIZATION OF MEDICARE

By Gema G. Hernández

Elders all over the country are asking questions about how the new Medicare coverage is going to impact their wallets and their quality of life. The information presented by the media on this subject has been somewhat confusing. Even organizations that have traditionally advocated for elders have no unified position that clearly explains to the public what elders have gained or lost with these changes. To add to the existing confusion, the President's budget further increases uncertainties about the challenges elders would face paying for their prescription drugs and health needs.

A careful review of the new Medicare law shows that it does little to reduce the escalating costs of prescription drugs. The new Medicare plan fails to address the fundamental problem of drug prices. It prohibits the federal government from using Medicare's purchasing power to leverage the cost of medication. This means that Pharmaceutical companies will not be placed in any financial jeopardy. On the contrary, they will be able to further increase prices with no opposition from their giant customer, the federal government. It stands to reason that if the federal government is not going to use its purchasing power to reduce costs, the cost of prescription drugs will continue to escalate, reaching new heights after 2006 when the new Medicare plan goes into effect.

It is difficult to understand why the new Medicare program did not follow the Department of Veteran Affairs format, which effectively negotiates drug prices based on the total number of participants they serve. In the case of Medicare, the Center for Medicare and Medicaid Services (CMS) was not as forceful, perhaps because it was not in the future best interests of the political appointees that prepared the plan, to limit or curtail their future employment opportunities. Since the plan has been adopted, some CMS employees have secured excellent new jobs as CEOs and CFOs of the same companies they used to regulate.

To further complicate matters, the President's budget does not provide funds to implement the authorized Medicare Modernization Act estimated to cost 50 million. Specifically, if no money is secured how is this plan going to be implemented? In addition, if there is no mechanism in place to objectively compare the effectiveness of the various pharmaceutical plans and products the public will never know if savings, any savings, have been obtained resulting from the new Medicare program. It is also important to note that the proposed research to compare pharmaceutical programs was never intended to include the option of looking at the cost of prescription drugs purchased in Canada. The fact that the administration eliminated that comparison is already predisposing the outcomes to determine which course of action represents true savings.

It is important to notice that while the administration's emphasis is in the need to streamline federal and state agencies as a way to reduce costs, the new Medicare plan supports expansion, if not the actual creation, of private prescription drug plans (PPD). These PPD plans will be responsible for negotiating prescription drug prices. Indirectly, elders are being forced to participate in a private prescription drug plan because this is the only way they will be able to reduce the cost of their medication. Directly, the administration is creating another layer, removing the elder consumer from negotiating and obtaining the best price.

Elders will also be facing higher deductibles to be paid out of their limited income. According to the Congressional Budget Office, the projected rate of drug price inflation will cause the deductible to rise from \$250 in 2006 to \$445 in 2013. Despite the verbal commitment of the administration to provide funding for Medicare, the average elder will soon be worse off, with their prescription drug spending rising from 8.8% of median income in 2006 to 12.3% by 2013 when the baby boom generation starts its retirement years.

It is clear that for the Medicare plan to work 32% of all elders must be enrolled in the Medicare Managed Care plan over the next ten years. The enrollment plan is now at a level of 9% mainly because many elders do not like the Managed Care approach to health care. They see this as a way of rationing health care and limiting options to select doctors, providers and hospitals.

In addition, Managed Care programs have been withdrawing from a number of geographical areas where the number of elders is not large enough or where the government reimbursement rate is not appealing to Managed care organizations. The administration has not considered them in their plans. How, we may ask, is the administration intending to reach the 32% goal without forcing elders to accept what they have already rejected.

For those elders living in rural areas the new Medicare plan has no room for them either. For minority populations, what I like to call, culturally distinct elders, the system is so complex and so culturally inflexible, that without education and information they will never understand the options and their rights. There are no plans to educate the elders because the more they read the fine print, the more they understand the Modernization of Medicare the less they like what they see.

AND THE BEAT GOES ON!

By: Gema G. Hernández,

The time has come for people to see the truth, and the truth is simple and is transparent. The truth is that since 1995, \$7 billion have been lost to Medicaid fraud in the state of Florida and every attempt to stop the existing accounting practices and to change the way the cost of services is being estimated have met with great opposition by some elected officials. Enron, World Com and the rest of the private sector are not the only ones with cavalier accounting practices, which lend themselves to mismanagement and abuses. Enron, World Com and the private sector have caught the attention of the media because of the implications on the Stock Market, but the accounting challenges do not stop there.

Just like in the case of Enron, no one is truly looking at the real numbers, and year after year monitors give agencies a clean bill of financial health after just a couple of hours' visit. This clean bill of financial health is used as a shield to protect the company from public scrutiny. But just like Enron, sooner or later the mirage will begin to disappear and a more transparent picture will emerge.

Even in cases when agencies are fined \$300,000 for creative billing practices, those agencies are forgiven and given opportunities not to decrease, but to increase their government contracts. This is happening now 2004 in West Palm Beach, Florida with the Nursing Home Diversion contracts and with the Managed Long Term Care program

In the meantime, while the eyes of the nation are on Enron, Martha and WorldCom, some agencies in the not for profit sector are receiving a bonanza. They control a big block of voters (the elders and the caregivers) and their political clout with the current administration has made them untouchable. It is time to ask our elected officials when it

will be the right time to audit those books in an objective fashion, without political protection. When do you think will be time to think about frail persons waiting to receive services or waiting to get the additional meal so critical to their survival? What about them? What about the widow who now finds herself in a nursing home, perhaps several years prematurely because there is a waiting list for community based services in her area? What about that widow? Who is holding hearings in Florida to determine if the existing accounting practices for some not for profit and for profit entities are capturing and properly recording the true cost of services?

Who is demanding that independent auditors look at expenditures allocated to allowable and non-allowable expenses to verify that those expenditures truly belong there? The answer to those questions is very simple, no one is holding hearings, investigating or even asking the right questions. You see, when it comes to our elders, to our disabled adults, our veterans or to our children, no one is taking the time to protect them unless it is election time.

What the public doesn't realize is that for every Medicaid dollar the system overpays a service provider, for every Medicaid dollar accounting methodologies allow for non service related activities, one person is experiencing hunger every day or one person may be dying alone without the services he or she needs to live and die with dignity.

In a system that allows \$4 Billion of Medicaid overpayments, double payments, payments for services not given, payments given to dead individuals or payments for non service related activities, too many people are being affected, too many people are suffering as a direct result of lack of accountability and proper fiscal controls.

The Medicaid overpayment is not a secret. Senator Burt Saunders in Florida acknowledged the problem in an interview with the Ft. Myers

News Press where he is quoted as saying “there are potentially hundreds of million of dollars lost in Medicaid fraud, and we should do everything we can to recoup those dollars”. If this problem is so well known, why is there no hearing? Why not bring the issue to the general public so it can be transparent and clear? It took Governor Bush almost one year after the General Accounting Office identified Medicaid abuses to him to quasi admit there is a problem in Florida.

COMPASSION — TOO MUCH TO EXPECT?

Compassion as a value and its lack of application to the real world

By Gema G. Hernández

On April 23, 2001 my granddaughter Avery was pronounced dead. As I began to emotionally deal with her loss, not known to me, at that same time and on that same day the Governor's staff began calling all Area Agencies on Aging in Florida to see if they can find information to detract changes to the Medicaid waiver program in the state.

My proposal was simple, more accountability and more options for elders and less control in the hands of private entities. The changes I was proposing would have curtailed cost in the provision of community care services and would have reduced if not stop Medicaid fraud in Florida. The proposed changes were going to impact some very well connected agencies that have been financially benefiting on a CEO's and president's levels from government grants and earmarked legislative allocations.

The proposed changes were going to curtail the financial bonanza to these CEOs and presidents, which included fancy cars, excellent retirement benefits, super salaries and extravagant bonuses at the end of each year. The Governor's staff selected this very emotional moment in my life to begin to undermine my leadership and vision. The timing of their activities was cruel and very uncaring.

It was also cruel and uncaring that while I was consoling my daughter in Atlanta for the death of Avery, Governor Bush's staff used my absence to start calling agencies and legislators to send a signal that the administration did not support the recommended changes. Their behavior is particularly significant because it came from a group of individuals who were selected by the Governor to carry his compassionate agenda, the same group of individuals that identified

Compassion as an important community value in the programs they oversee.

While compassion is something the Governor emphasizes, his staff, as proven by my personal experience, ignores that value. These are a group of followers whose political tactics always included the human side of the story. But when it comes to take in consideration that human side of the equation the actions do not support the rhetoric. As important as the fact that his followers behave differently, it is also the cooperation they received from some agencies should be disturbing to the general public because it comes from agencies in the “caring business.”

These are not agencies that make their living selling products to clean floors but agencies and people that supposedly have dedicated their lives and their work to do “good” or at least not to cause harm. These are agencies in the business of helping older people, therefore the disrespect they showed for my grief should be duly noticed.

I did not realize this was going on, I had more important things to worry about. It was not until two weeks later when I returned to work that I received a call from a reporter, who, after I told him what had happened, apologized for his bad timing and left me alone to grieve for my personal loss, showing more sensitivity than the rest of the world at that time.

You don’t recover for such a loss in days or weeks, and while I was still recuperating from the loss of Avery and still emotionally weak from this tragic experience, the Governor’s staff had other plans for me. A copy of a letter from one of the Area Agencies director is included at the end of this article. Memos and letters were exchanged. The record is there to be examined.

The staff’s denial of what was going on was expected. They told me the phone calls and data collection was not intended to undermine my

leadership. Even the Governor defended the interviews as a good tool to evaluate political effectiveness of what I was proposing, but appeared upset with how it was done and when it was done.

However, when I asked if any other Secretary serving the people of Florida had been the subject of an evaluation by the people they were supposed to regulate the answer was *NO*. To my knowledge even today no other secretary before or after me was ever the subject of such evaluation from the same agencies they were supposed to monitor and regulate.

Some individuals reading this portion of my book would say that it was an unfortunate situation, but was not done on purpose. Maybe I would have agreed with that analysis if this was the only time such cruel behavior was exhibited by the members of the Bush team, but unfortunately it was not.

The second incident came just five months later. On August 13, 2001 my doctor notified me that my latest total body scans revealed two dark spots in my lungs, one in my right lung and a second one in my left lung. The doctor recommended further testing and a possible consultation with an oncologist.

The doctor was not optimistic with the prognosis of my case. On August 14, one day before my birthday, I took time from presenting at the Florida Council on Aging in Broward County to seek the opinion of my father in law, a medical doctor in Miami. I also took time to share this information with my employer and with one of my staff members.

I shared with the person overseeing the operations of the Department of Elder Affairs on behalf of the Governor the information I got from my doctor. She was more concerned with how soon I will know whether my condition was terminal or not than to comfort and support me in my moment of need. No sensitivity or compassion for what I was facing was demonstrated at that time or in subsequent conversations.

Her only comment was to keep her posted as soon as possible. Instead, when it was time for her to tell me that the administration needed to find a way out for me, “an exit plan” as she put it, she remembered my illness and wanted to use this as the “foolproof exit plan”, one exit plan that will not create any bad press for the Governor. My illness and my prognosis as the reason was my departure will not be questioned by the media and will give the governor a way out.

This same rationale to use my illness as a “foolproof exit plan” was mentioned by Lt Governor Frank Brogan when he met with me to let me know that my services to the people of Florida were no longer required. Coming from Brogan this was truly a shock because his first wife Mary had died one year earlier of breast cancer. I thought that of all the entire Governor’s staff, he, Brogan, would be more sensitive to my prognosis and situation. But I was mistaken, he was not as proven by what was to follow.

Three days after my announced departure, a writer from the Sun Sentinel, Steven Goldstein, wrote an article about my departure that angered the Governor’s staff to a point that in a press conference Governor Bush publicly terminated my employment while I was out of town seeking medical treatment without ever notifying me in person. Privately he did more than that.

Brogan, acting on behalf of the administration cancelled my sick leave that I had requested prior to my termination. Still without ever talking to me my health insurance coverage was suddenly terminated. It is my assumption that all the above was done because I talked to the media and in my statement to the press contradicted the administration’s story about my departure. This is in my opinion their ultimate act of compassion. These acts are coming from individuals that administer programs for frail people and control the destiny of our State.

While the experience has been traumatic it has shown me how strong my values are. My actions and words are truly in synchronicity with my Christian values.

In times like this when we need every single dollar to educate our children, every single dollar to prevent the placement of elders and disabled adults in nursing homes, we cannot afford to look the other way and allow the practice to continue. We must ask our elected officials to do not only what is right but what is ethical.

Four Billion dollars in Medicaid fraud may or may not have an immediate effect on the Stock Market, but it sure has an effect in the lives of hundreds of Floridians old and young, living in rural and metropolitan areas, and for their sake and for ours we need to stop the practice from continuing, we need to stop the beat from going on and on and on.

SUPPORT OUR OLDER WORKERS!

By Gema G. Hernández

It is appropriate to begin a new year by looking into our crystal ball to predict what some of the most pressing issues affecting elders are and how as a society we should be addressing those issues at the state and national levels. From where I am sitting, the future of our own individual aging looks promising. More and more people are following the principles of Positive Aging. Even Congress passed in 2003 the *Positive Aging Act*, cementing the basis for future expansions of such initiative and making sure elders are recognized for their personal and spiritual values.

While the future of aging for individuals looks rosy, the general picture of aging in our society looks confusing. Let us look at some of the confusing parts where answers are needed. The first area that comes to mind is the role of elders in the workforce. Elders in the workforce are an endangered species. They are endangered because some of the individuals entrusted with the responsibility to care for them are not really interested in such action, as proven by the lack of older workers in their workforce.

By choice some older workers are selecting not to retire, therefore they would like to keep their present jobs. For these elders, mandatory retirement is a serious challenge because they are not ready to detach themselves from their jobs. Other elders cannot afford to retire due to financial need, so working is extremely important for them. The need for this group of elders to keep their jobs is happening at a time when ageism is at its highest level in government, profit and not for profit work places.

More companies and agencies are refusing to hire older workers or keep older workers in their payrolls. We have become so accustomed to young faces that wrinkles are not welcome even in programs designed to help elders. Until we come to terms with our own ageism we are not

going to be able to protect and defend older workers. I don't see this situation disappearing in the next three years, and unless it does, the displacement of older workers by younger workers and the denial of jobs to older workers will continue even though the older workers' skills, knowledge and experience will help our agencies do more with less.

While older workers may not be encouraged to apply for jobs in the private and government sectors they are definitely encouraged to donate their wisdom, skills and talent to the organizations. This is an intriguing concept because as we increase the emphasis and value of older volunteers we decrease the value and opportunities for older workers in the workplace.

We should examine our employment patterns and determine the consequences of continuing to hire younger workers to recruit older volunteers so they can serve older people. This is an important issue to resolve not only for the future of aging but for the self esteem of older workers.

The fact that elders have a better understanding of the needs of other elders is the same premise used to hire individuals that have an affinity for certain groups. That affinity is important to add value to what we are offering. If I am facing my own mortality and dealing with my own challenges, by default I am more in tune now that I am 57 to deal with those issues because I may have the my same or similar needs.

I am sure that I am now better able to protect the civil rights of an elderly person who wants to stay at home, an elderly person who lives alone in a remote rural area who refuses to leave his or her house to move to an Assisted Living Facility than someone that is just out of college living in a metropolitan area with no impediments in their daily living.

Connected to our ambivalence to hire and retain older workers we also need to support caregivers in the workplace. If we continue to focus on

family responsibilities without giving the families a mechanism to keep up their own needs we will be weakening the family units and silently encouraging the same thing we are trying to avoid. The key of intergenerational programs begins with the mandate to offer working caregivers protection and options. This is an important step in creating Communities for a Lifetime. Without this important piece all other intergenerational programs will not make the transformation possible

While elders in the workforce may not be at the top of the priority list in any government program, it is an important issue that should be addressed by all. An excellent way to encourage elders to continue their important contributions to their communities is by offering them jobs and by removing mandatory retirement from our policies. In a society that values money, positions and status, forcing elders just to option and recognition in volunteering is not enough.

THE MONEY TO FOLLOW THE INDIVIDUAL ACT

By Gema G. Hernández

Maryland House Bill 478 signed into law on May 13, 2003, also known as “The money to follow the Individual Act”, provides the option of allowing elders or individuals with disabilities, including veterans to use the money government has earmarked for payment to Nursing Homes to be used by the elder or the frail person to pay for community based services instead.

This gives elders and their caregivers the opportunity to choose whether they want the payment to go to the Nursing Home or use the payment to pay for services to stay in the home and community they love.

In Michigan the MICHoice program got political momentum when several organizations advocating for elders and individuals with disabilities sued the State of Michigan under the Michigan Poverty Law Program to make sure elders and individuals with disabilities would have a choice in where they would like to spend their last days, weeks or years. The program has caught the attention of 10,000 frail individuals that are now eligible for this program.

The above examples demonstrate that if elders empower and organize themselves they will prevail. The passage of the Medicare Prescription Law program is an example of first, the importance elders have on election time, and second, of the lack of attention elders place on important legislative actions that will sooner or later impact their quality of life. We Floridians did not pay attention to the Medicare Reform nor are we paying attention to the future needs of our cohort.

The good news for us Floridians is that it appears we really have very few frail elders in the State as proven by the lack of enrollment in Nursing Home Diversion programs. All along, I thought that in our 67 counties and 11 Area Agencies on Aging we had in excess of 1,400 frail

elders who, without frequent and intense community based services, will be forced to go to the Nursing Home. I was mistaken. The number or lack of numbers of elders in need of Nursing home diversion proves my theory wrong.

It is important to know that since the State received additional dollars on July 2003 to pay for 1,400 new clients through the Medicaid program to receive services, the program has not been able to identify, recruit or reach that number. For residents of Palm Beach and Orlando the news of lack of need for the community-based services should be good news.

This means the county is meeting the needs of the most vulnerable and frail. The fact that there were no frail individuals in Palm Beach and Orlando has forced the government to expand the program to other areas in the hope that the total number of elders applying and qualifying for services goes beyond the highest number recruited so far for this program of 400.

The bad new for us Floridians is that is the program does not reach its goal of 1,400 new frail clients. The program will disappear, meaning it will not be funded anymore due to the lack of apparent need for services. We don't want Florida to be the first state to lose the Nursing Home Diversion Program, therefore, we need to do our best and help identify frail individuals so they can qualify for the program before the deadline.

If you know an elder in need or services, an elder that is in the process to be placed in a nursing home, or better yet, if you have an elderly family member that is in the Nursing Home but would like to move back to the community, please call your area agency on aging, call your community care for the elder program and make sure you register that frail person in the Nursing Home Diversion program. You can also call the Department of Children and Family services, which has access to those applying for services.

If Michigan and Maryland can institute such a program, why cannot Florida? Let us make “the Money to follow the individual legislation” our new year’s resolution. This way if the Nursing Home Diversion Program is not able to find 1,400 new elders in need of services at least we will have that option open in the future. **Have a Happy and Healthy New Year!**

FIFTEEN YEARS LATER

In 1988, Congress passed the most comprehensive Long Term Care coverage for Medicare recipients. The coverage included in-home services so frail individuals will not have to go to a Nursing Home prematurely. The law was called the Medicare Catastrophic Law and for elders it was a ray of sun in a cloudy future.

There were two problems with the law. First, few people became aware of the advantages and coverage the Medicare Catastrophic Law will provide and therefore did not get involved in the political fight to keep this law in the books. The second problem was the fact that AARP opposed the Medicare Catastrophic Law because for those retirees whose investment and pension plans exceed \$25,000 a year of net income, the law established a co-payment of \$750 a year for long term care coverage.

Even in 1988, \$750 a year was a very reasonable price to pay for personal care, in home services and home health support. For those retirees with less than \$25,000 a year of income there was no co-payment. Twenty five thousand a year in 1988 is the equivalent of forty thousand a year in today's cost of living.

Therefore, the overwhelming majority of elders would have received those services as part of their Medicare benefit package. It was a good proposal, unfortunately, AARP decided against the Medicare Catastrophic Program because in the mind of the American Association of Retired People it placed a burden on seniors, a burden that should have been spread to all age categories.

The burden, if we can call having Long Term Care coverage for \$750 a year a burden, would have impacted only 17% to 20% of elders the majority of which were well to do. The lack of information, the apathy and the inertia of the general population allowed AARP to convince Congress to repeal the Medicare Catastrophic Law. I clearly remember

telling my class at that time that the repeal of the Medicare Catastrophic Law will close forever the chances of Medicare Recipients receiving Long Term Care services as part of the Medicare Package. I am sad to confirm that my original analysis of the situation was correct.

Now, 15 years later, AARP finds itself pushing for a Medicare reform that will put a higher burden on the shoulders of our elders while increasing the retirees' need to buy Medigap insurance and providing employers with a way out of supporting health benefits for their retirees. Once again, the lack of information and general misinformation has precipitated the passage of the most comprehensive Medicare reform in the history of the program.

These changes by the way are not to the best interest of retirees and elders. Let us read the fine print and forget about the political message. Read the bottom line and determine if this is what you want. The fact the AARP is supporting such a plan should not be an indication it is good for elders. If we read the fine print of what AARP is supporting we will find a plan that will eventually benefit those companies that sell Medigap insurance, of which AARP is the premier company.

Perhaps it is coincidental that of all the leadership organizations fighting for the rights of seniors only AARP supports the latest version of the Medicare prescription drug program and only AARP sells products that will benefit from the proposed changes in the Medicare program.

Let us look at what has been approved by Congress. For example, for those of us lucky enough to have health benefits after retirement paid by our former employer, those benefits will be impacted by the proposed Medicare plan. Employers like ITT, Federal and State retirees, IBM, FPL and others will have the option to enroll their retirees in the Medicare Prescription Drug program.

This means in dollars and cents that retirees will be responsible to cover the financial gap, between \$2,250 to \$3,600 of prescription drug costs

per year. An elderly couple could in a given year be responsible for \$7,200 in prescription drug costs, something that at this time your former employer may be covering at no cost to you. Of course, we can open a medical savings account and save money there, but at the rate the return in our investment is going and the limited increases in Social Security cost of living, chances are there is no extra money to open a Medical Savings account.

If you reside in an area of the country where there is no HMO or Managed Care to provide services, the Medicare prescription drug program might not reach you at all because the program has been designed to privatize Medicare by 2010 and to expand not limit the financial strength of the private companies over public goods.

In the event this column reaches you after the fact the new Medicare program is passed by the Senate there is always the possibility of asking for a repeal of the Medicare Reform program like it was done in 1988. What is being decided is not something trivial or temporary. This will set the guidelines and protections for the rest of our lifetimes. We owe it to our kids to mend the safety net that our parents left to us and the Medicare Program is at the heart of that safety net.

MY APPRECIATION

By Gema G. Hernández

I want to express my deepest appreciation to the House of Representative for passing House Bill 9149. This bill encourages cities and counties to create elder friendly environments and to promote intergenerational alliances.

My appreciation also goes to Jeb Bush for believing in the vision I published in 1998 under the titled Creating Communities for Life: Elder Ready, Children Friendly and Family Focused (© 1998).

His willingness and ability to incorporate this program into his agenda deserves acknowledgement. To his credit his experience as a developer and real estate investor gave him the advantage point needed to see the value of building communities for the entire life cycle. Governor Bush also deserves my appreciation for making sure the Communities for a Lifetime Program continues to be the flagship of the Florida Department of Elder Affairs after my departure.

Communities for Life © 1998 is the way to go but before we begin to attract thousands of elders to any State let us make sure we implement the first phase of the program as originally designed by the author. Let us invest in services, eradicate long waiting list, criminalize elder abuse and protect older drivers from poorly designed streets.

Only then when there are no waiting lists for services, elders are protected from abuse and exploitation and the Nursing Home Diversion program is fully operational should we begin to divert funding to attract more wealthy retirees and elder drivers to our wonderful State of Florida

GRAY IS GREEN FOR WHITE

By: Gema G. Hernández

To support Governor Bush's Destination Florida plan Department of Elder Affairs' Secretary Terry White began a Gray is Green informational campaign designed to promote Florida as the heaven on earth for financially well to do retirees. We owe elders and mature adults a true and accurate picture of the 2004 financial realities of elder care programs in the State.

My concern with the plan is not the premise that elders are assets but what Florida intends to take away from the elders. The human value of our elders is not being questioned. What is being questioned is why after so many years of asking elders to sacrifice for the country, for the family, for the community we are now asking them one more time to do it again by investing in Florida's economy with no safety net to protect their investment.

I think it is time for Florida to provide all its residents with the security, the purpose, the dignity they deserve and not the other way around. If we want to bring affluent elders to Florida to increase State revenues we owe them an advertising campaign that follows truth in advertisement guidelines and discloses all the gaps and challenges they will face once they move to the Sunshine State.

We owe elders a full disclosure of the cost of living, escalating real estate taxes, construction lien laws, diminishing water supplies, the lack of Medicare HMO plans in 44 out of the 67 counties, increasing monthly maintenance fees in Continuous Retirement Communities, and severe shortage of personnel in Nursing Homes and Assisted Living Facilities. We owe them an explanation why there is an exodus of elders in their late seventies back to their states of origin. Why are these elders leaving? Could it be that these elders after having spent 25, 30, 35 years

in Florida spending their income here find themselves with no services and no help from the State government.

It is sad to see that in times of need instead of trying to protect our frail elders' quality of life Elder Affairs has diverted crucial dollars to pay for the commission meetings, travels and is now asking for more taxpayer dollars to support public relations and advertising. The report ends asking legislators for more money to attract affluent Boomers to Florida.

Elders are people with needs, desires and dreams. They need to be valued not just for their economic power, or for the "green" in their pockets but for their knowledge, wisdom and compassion. They need to be respected for their human value. The more we paint a perfect picture of elders the less society will be inclined to meet their needs because according to Mr. White's new reality our elders have no needs to be met.