



## FLHSA SAGE COMMISSION CHARTER

### **Background:**

Following the critical work of the Community Health System 2020 Commission, one of the most important follow-on efforts is the future health care and service needs of our region's burgeoning aging population. FLHSA is convening the Sage Commission to examine the system of integrated services necessary for older adults (age 65 and over).

The Commission's work will be conducted in the context of the following factors:

- The growth of the aging population;
- The inappropriate use of hospitals by older adults, as identified by the 2020 Commission.
- The lack of an integrated method for forecasting health care and service needs for the aging;
- The barriers that exist to older adults obtaining the right care, at the right place and that inhibit wellness and functional ability;
- Fragmented financing systems that prevent access to affordable care and services;
- The inappropriate use of higher cost, long-term care resources; and
- The need to attract a well-qualified workforce to address the needs of the elderly.

### **Study Purpose, Scope, and Process:**

#### *Purpose:*

The Sage Commission is to:

- Articulate a vision of person centered aging services for the year 2020 and beyond;

This vision will be articulated in a written plan which will:

- Identify the range of integrated services needed to help older adults in the Finger Lakes region maintain independence and obtain quality health care;
- Present trends which demonstrate changes in the health status of older adults and their utilization of services;
- Identify consumer preferences and future policy directions for senior services;
- Identify the programs and services which are needed to:
  - Optimize the health and functional status of older adults;
  - Reduce premature/unnecessary morbidity and mortality;
  - Reduce disparities across sub-populations.
- Include a method for simultaneously forecasting the needed capacity for each of the major service components;

- Identify the barriers to achieving the major elements of the vision;
- Specify advocacy work that may be required to make the proposals achievable.
- Serve as a guide for programmatic and financial investments for the community;
- Propose actionable strategies to achieve the vision; and
- Propose a system for measuring and monitoring the performance of the aging service system to:
  - Facilitate timely identification of problems, and
  - Hold the stakeholders accountable.

*Scope:* The plan should address the health status and needs of the adult population 65 and over who reside in the 9-county Finger Lakes region, with special attention given to ways to minimize disparities in health status and improve access to appropriate care.

*Process:*

FLHSA will convene a Sage Commission of approximately 35 people who reflect the diversity and wisdom of those who use, provide, and pay for older adult and aging services in the nine-county region. The Task Force will have a chair and a co-chair. Members of the Commission will be asked to serve on, and in some cases, facilitate its associated work groups.

**Roles & Accountability:**

FLHSA Board of Directors:

- Approves the study charter,
- Approves the Commission composition,
- Determines whether the Commission has met its charter by accepting the report.

FLHSA Staff:

- Proposes Commission and work group membership;
- Provides staff support to the Commission and workgroups;
- Provides information, data, and written materials as needed;

Work Groups:

- Provide expertise on specific subject matter to the Commission members and staff;

Consultants:

- Selected, engaged and charged with providing a model to forecast and simultaneously simulate needs for elements of the senior service system under

alternative scenarios which

- maximize consumer choices for programs which address care needs,
- quantify work force needs, and
- forecast costs.
- Propose a financing scheme that is judged to be feasible at a cost which is sustainable in 2020 and beyond for both individuals and third party payers.

The Commission will use a number of work groups reflecting major system elements which will:

- Further articulate the vision for each system element;
- Define the disparities between the “preferred state” and the current status of that element;
  - Identify 3-5 priority steps to move the element toward the preferred state, taking into account: impact, feasibility, and organizations with primary responsibility.

### **Stage 1 – First 6 Months**

**Time Frame: Stage 1** First 6 months’ Deliverables:

- A vision statement which describes the desired health system for older adults which should be in place by 2020.
- Identification of values that will inform the system of services.
- Identification/quantification of vulnerable/underserved populations.
- Identification of the elements of the system.
- Identification of major vulnerabilities/stresses on aging services
  - Determination if any of the vulnerabilities requires immediate action;
  - If so, what type of action is required by whom;

**Time Frame: Stage 2** The next 12 months’ Deliverables (months 7-18):

- Identification of the capacity needed for the various health system elements (including the range of need for the various elements that may substitute for one another);
- An articulation of the disparities between the vision and the current reality;
- A list of actionable priorities for each of the major system elements to move the community toward the vision.
- A design for measuring and monitoring the performance of the aging service system which will facilitate timely self-correction.