**MARYLAND COMMISSION ON AGING**
**MEETING MINUTES**
**April 16, 2025**
**10:00 am – 12:00 pm (Virtual)**

**Commission Members Present**
Rose Maria Li, MBA, PhD (Chair)
Mae Anne Beale
Paula Blackwell, MBA, MHA
Roseanne Hanratty, MSPH, MA
The Honorable Benjamin F. Kramer
Jay S. Magaziner, PhD, MSHyg.
George Rebok, PhD
David Roth, PhD
Allen Y. Tien, M.D.
Diane L. Ty, MBA

**Commission Members Absent**
John G. Haaga, PhD
Barry Robert Liden, Esq.

**Maryland Department of Aging (MDoA)**
Secretary Carmel Roques (Non-Voting Representative)
Vanessa Arndt, Program Manager, Senior Care, IIIB
Colleen Doyle, Digital Communications Manager
Jonathan Jenkins (JJ), IT and Data Officer, Senior Call Check
Lisa O'Connor, Executive Assistant to the Deputy Secretary
Isabella Shycoff, Division Director, Housing Services
Liz Woodward, Assistant Secretary, Planning

**Maryland Department of Planning**
Krishna Akundi, Manager, State Data Analysis Center

**Members of the Public**
Ella Blue
Kanard Brooks
Ann Ciekot
Mike Kavounis
Sandy Morse
Megan Peters

**Welcome and Introductions**

Dr. Rose Li opened the meeting and introduced new members, Rosanne Hanratty and Mae Beale.

**Opening Statements from Secretary Carmel Roques**

- MDOA is making progress on finalizing status for those on the Commission and expects to introduce new commissioners in the near future.
- Senator Ben Kramer provided assistance with the Senior Call Check and Social Connections Program. The legislation on this has passed and it will allow for expansion of the existing program and improve engagement with older people who need a health check and may be experiencing social isolation.
- Additional legislation was passed related to the Senior Care program which allows existing funding to be combined and used with more flexibility. Associated additional data collection will be useful for future decision making.
- Legislation also passed regarding the Commodities Food Program which transferred ownership of program to DHS who is already implementing the SNAP program and other food security programs. The food program will be able to grow and become more accessible to those who need it.
- The U.S. Department of Health and Human Services (DHHS) has eliminated the Administration for Community Living (ACL) which will become some other division in the DHHS. There are uncertainties around where that will land, whether the Older Americans Act will be renewed, and future funding. The issues are being elevated at the State and Federal level.

**Approval of Minutes**

Minutes for the November 6, 2024 were unanimously approved.

**MDOA Data Dashboard Presentation**

- Secretary Roques introduced the Maryland Department on Aging's data dashboard, part of the Longevity Ready Maryland (LRM) plan.
- Liz Woodward, Assistant Secretary for Planning, MDOA, Jonathan Jenkins, IT and Data Officer from MDOA, and Krishna Akundi, Maryland Department of Planning presented the dashboard, highlighting its ability to provide demographic data and program impact.
- Discussion focused on improving interactivity, data gaps (e.g., ADLs, IADLs), and potential future integrations (e.g., transportation, AARP data).
    - Designed to report and provide key performance indicators on what is happening in the plan.
    - Landing page provides a clean way of seeing what aging looks like in Maryland.
    - Census related data primarily populates the dashboard currently.

- Conversations are ongoing with West Health regarding their national dashboard. The Maryland Open Data Portal is an additional source of data, and other partnerships can be pursued.
- The goal for Jonathan's team is to understand what information is needed so that it can be effectively supplied via the dashboard.

**Questions and Comments**

Q: Is the dashboard interactive in that I can ask a question, and it can give me an answer, or does it only give answers to questions you've built a screen for?
A: We are considering with the dashboard the possibility of an overlay showing what services are available in a given area so you can map where the gaps are. This would require a partnership and reaching out to other organizations and having them share their resources.

Q: There was previous data available that included how many people experience limitations in daily living activities; will the dashboard provide this data?
A: No, ADLs are not covered effectively on the dashboard. There is some data within American Community Survey that might address this point.

Q: Is the ACS still going to be funded?
A: The US Census Bureau is fully funded and required to be funded at least for the 2030 survey.

Q: I am curious as to what tools or technology platforms you are using. This platform is coming from Tableau currently, and the State already has access to Power BI and Salesforce which has integrations with Tableau. We are all struggling to transmit information seamlessly through a single platform. Tien suggested that analysts look at Elasticsearch; V8 was just released, and it is in the public domain). For overlaying information like events over demographics and time trends, you are limited by your choice of graphic display tools. D3 is the base for a lot of things and could be a tool for this.
A: We at the department probably don't own a database resource big enough to take in that type of information. Specialists are currently trying to find good ways to make this work.

Q: Is there a way to relate transportation needs and resources regarding who is driving and who is reliant on public transportation to understand service provision?
A: Transportation information is based on national information about who commutes. We've already started building a relationship with the Department of Transportation to integrate data. The information may not include far rural areas and there may not be information in all counties to capture.

Q: Is there any integration or usefulness to integrate with AARP's data collection?
A: There is some AARP related information for in-home care costs and nursing home costs that is directly from AARP surveys. We are trying to ensure that we have county specific information so we can get hyper specific, and we are in conversation with them for those kinds of needs.

**SOAR Bill Update**

- Secretary Roques introduced the SOAR Bill, which streamlines programs for older adults and addresses the delivery system for three separate State funded programs. There was difficulty in collecting data that would determine if they were actually filling the gap and preventing people from moving to poverty and institutional care, as well as addressing funding for a fast-growing population over 60.
- Isabella Shycoff, MDOA and Vanessa Arndt, MDOA presented on the bill's passage and its key provisions.
    - The program's budget, benefits, and its phased implementation were discussed.
    - SOAR consolidates three State funded MDOA programs that support older adults where they live to effectively serve more older Marylanders.
    - The goal is to delay the need for institutional care, saving significant costs compared to nursing home placements.
    - Key provisions include repeals SALS and Congregate Housing statutes and combining them with Senior Care, repeals inactive State Interagency Committee on Aging Services and make local ones optional, redefines program to administer a system to provide services and supports empowering older adults to age in place, and expands existing list of services to include assisted living subsidies and provide flexibility to adjust services in the future.
    - Key benefits include empowering AAAs by providing autonomy and flexibility to meet client needs and manage programs at the local level, modernizing processes and improving coordination of programs, services, and data, increasing efficiency and reducing administrative burden, extending reach to allow AAAs to serve more clients, aligning priorities to better support federal and state priorities, and creating incentives for high performing AAAs to receive additional funding.
    - The progress timeline covers three phases: (I) creating statutory authority, (II) building out program design, and (III) implementation. First workgroup begins in May 2025 to include congregate housing providers, AAA program managers, directors, and partners. Phase III would be the actual implementation of SOAR which will begin in FY27.
    - Aligns with Governor Wes Moore's priorities and with Federal priorities to use money efficiently, along with gathering additional data to make a better case for expanding his program and asking for more money.
    - SOAR has received a technical assistance grant and envisions dashboard creation with review of national models.
    - MDOA wants to determine the highest and best uses of state dollars by providing light touch interventions in addition to screening that is already done

using Inner Eye tool, comprehensive person-centered assessments, and case management care coordination.
- Payment toward limited support services, ADLs, personal care, chores, emergency response systems.
- Implementation of cost-sharing model to supplement state grant funding.
- The best practice is to shift program-specific focus to a more holistic view of the older adult through the continuum of care.
- Adults served include older adults and people with disabilities in the community, those who need assistance with ADLs/IADLs based on results of standardized assessments, adults with dementia and/or related disorders, and those adults who are "pre-Medicaid" and do not yet qualify for Medicaid based on current financial or functional assessment criteria.
- Desired outcomes include promoting aging in the community, contributing to a Longevity Ready Maryland, prevent or delay nursing home placement, save money for the state, promote independence, improve quality of life, and decrease social isolation.
- There will be standardized data tools that will report on outcomes.
- Next steps include identifying essential outcome data elements to collect, optimal system design elements, effective advocacy strategies to expand funding, and factors and considerations in funding formula adjustments.

**Questions and Comments *(summarized)***

Q: You have a wonderful opportunity to harmonize across all the AAAs to measure impact. Is there a way to use this to really try to measure how many people are actually helped and measure it the same way across all the AAAs? What do the decision makers really need to know and what makes the most convincing case?

A: Yes, there is a way. There has not been one central person or way that the MDOA has centralized its data collection. We are most of the way there. We have this last quarter and there are new measures that will be introduced in FY26 and are being piloted right now.

Q: I am finding that by being involved with many of the seniors in my area and other areas that it is difficult for some of the seniors to access services who really need it. It shouldn't be so difficult to get to services and people do not want to have to go through so much red tape and paperwork. That and the transportation piece we really need to make accessible.

A: One of the MDOA's priorities is giving people easier access to information and support in navigating the bureaucracy to actually get to the service they need. This is something across state government we're very focused on and we have initiatives we're working on with other agencies to streamline accessibility issues. I think Maryland Access Point is very underutilized and it is the front door to all programs and services and there are live human beings trained to help people through the process. We are working on making people aware of this and aware of their local senior center and AAAs, as the state agency itself does not deliver programs. We still need more

communication, and we need more people talking about Longevity Ready Maryland. Maryland Access Point and partnerships are putting the information out there but there is always more work to be done.

Q: We have all seen similar things, and it speaks to what Vanessa Arndt presented in her slide about optimal system design. The key part should be measurement-based referral workflow. It is a directory of services but really it is to bring people on board to realize they're part of a team including transportation services, home repair services, etc. There should be basic measures to track when there is a request sent, if there was a response, how long it took. System design is that referral connectivity component.
A: The goal is to have such a system in place.

**New Business and Announcements**

- Rose Li announced two upcoming events:
  - University of Massachusetts Webinar on April 22: Harnessing the Power of Technology to Change the Way We Age, Alex Glazebrook (OATS from AARP)
  - In-person meeting on June 12th in Bethesda on Economics of Alzheimer's Disease and Related Dementias that is open to the public: https://www.nber.org/conferences/nber-coordinating-center-economics-adadrd-prevention-treatment-and-care-summer-2025

**Future Meetings & Commissioner Involvement**

- Rose Li welcomed suggestions for future meeting topics.
- Secretary Roques proposed outreach for Commissioners to participate in subgroups for various initiatives.
- Mae A Beale requested copies of presentations for public speaking.
- Sandy Morse emphasized direct outreach to seniors.
- Allen Tien suggested using technology (e.g., Blue Sky) for engaging with seniors.

**Longevity Ready Maryland Update**

- Secretary Roques gave an update on the Longevity Ready Maryland plan, which is awaiting Federal approval in June. It will go to Governor Moore in July. Thousands of people have had the opportunity to learn about the plan and provide comment.
- Governor Moore's support for the plan was highlighted.
- The plan will guide state aging policies and priorities.

**Adjournment**

- The meeting was adjourned at approximately 12:00 pm

**Next Meeting**

June 18, 2025