7 Steps for Success in Legislative Meetings

Presented by
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7 Steps for Success in Legislative Meetings

- Requesting Your Meeting
- Preparing for Your Meeting
- Introducing Yourself (Your Organization)
- Stating the Issue and Why It is Important
- Presenting the Evidence
- Offering a Solution and Making the Ask
- Expressing Your Gratitude
1. Requesting Your Meeting

• Call the Legislator’s District Office
• Identify yourself (your center’s name & location)
  • Note you live (operate a center) in the District
• Ask for the Scheduler
• Tell the Scheduler you wish to discuss:
  • Adult Day Services
  • A Medicare Option to Institutional Care
• Be Flexible on Date and Time
  • Members of Congress Represent @ 700k People
  • Senators Represent the Entire State
2. Preparing for Your Meeting

• Learn About the Legislator
  • Review their Bio, Website, Press Statements

• Decide Who Will Attend
  • 2 to 4 People is Optimal
  • Include a Client if Possible

• Agree on Talking Points
  • Three is Optimal – Time is Limited

• Plan the Steps of Your Meeting
  • Who Will Lead – Who Will Take Each Point
  • Who Will Keep the Meeting Focused
  • Who Will Conclude – Make the Ask!
3. Introducing Yourself (Your Organization)

• State Your Name(s) Clearly & Offer a Handshake
  • Provide business cards for yourself / organization
• Ask if He / She is Familiar with Adult Day Services
• Note You Live (Operate a Center) in the District
  • Serve X Number of the District’s Residents
  • Employ X Number of People in the District
• Provide a BRIEF explanation of:
  • The Clients You Serve (Aged / Dementia / Disabled)
  • The Services You Provide (Therapies / Meals / Baths)
4. Stating the Issue and Why It is Important

- Medicare Population Is Growing Rapidly (Baby Boomers & Medical Interventions)
- Seniors are Living Longer But With Greater Frailty (https://www.prb.org/aging/)
  - HHS Estimates 52% of Seniors 65+ will require Long-Term Care Services
    - Impairment with Activities of Daily Living (ADLs)
    - Severe cognitive impairment (Alzheimer’s or other dementia)
- Many Seniors & Their Families Default to Institutional Care
  - Nursing Home Care is a Medicare / Medicaid Entitlement
    - Growth from 1.3 million in 2010 to 2.3 million in 2030 (https://www.prb.org/aging/)
  - Nursing Home care is the most expensive Long-Term Care
  - Medicare Limits Access to an Affordable Alternative to Institutional Care
Presenting the Evidence/Cost of Care

<table>
<thead>
<tr>
<th>Service</th>
<th>2018 National Median</th>
<th>2014 Median Annual Rate</th>
<th>5-Year Annual Growth</th>
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<tbody>
<tr>
<td></td>
<td>Daily</td>
<td>Monthly</td>
<td>Annual</td>
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<tr>
<td>Homemaker</td>
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<tr>
<td>Home Health Aide</td>
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<td>Adult Day Services</td>
<td>$72</td>
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<tr>
<td>Assisted Living (1 Bedroom Single)</td>
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<tr>
<td>Nursing Home (Semi-Private)</td>
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<td>Nursing Home (Private)</td>
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6. Offering A Solution & Making The Ask

• Modernize Medicare with Adult Day Health Care v. Institutional Care
  • Leverages Family Care and Assets to Provide a Skilled Nursing Facility (SNF) Level of Care in a Home and Community Based Setting (HCBS)
  • Provides Medicare / Medicaid Cost Avoidance at a Ratio of nearly 5:1 v SNF and 2.5:1 v Assisted Living (See previous table of Genworth statistics)
  • Lengthens Period of Spend Down Before Requiring Medicaid Support

• If Avoiding Cost in Medicare While Continuing to Provide Quality Service Makes Sense to You, Will You:
  • Introduce Legislation to Authorize ADHC as a Medicare Benefit Choice in Lieu of Institutional Care
  • Designate a Member of Your Staff to Work With Us
7. Say “Thank You”

- You Can Never Say “Thank You” Too Often!
  - Thank you for recognizing the value of Medicare to Seniors and for meeting with us!
  - Thank you for your interest in preserving Medicare
  - Thank you for seeking ways to Modernize Medicare to Avoid Costs and Continue to Provide Quality Services
  - Thank you for designating staff to work with us!
- After the meeting promptly mail a “Thank You”
- Follow-Up promptly with requested materials
- Thank the Legislator for things not related to ADHC