

Written Testimony from Stephanie Klinzing

Legislative Task Force on Aging

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To: Members, Legislative Task Force on Aging

From: Stephanie Klinzing, former MN Legislator, county commissioner, Greater Minnesota mayor, and former MN Board on Aging member. Current member of Minnesota Housing Board of Directors.

As if we didn't have enough evidence that there is a crisis regarding older adults being able to access needed services and programs, the recent reports about growing wait times to see physicians is adding more.

This is being called a public health crisis by health experts from all over the country and Minnesota. Several reasons have risen to the top that also elevate the need for drastic reform in how we set policy, coordinate across agencies, and fund aging adult programs and service in Minnesota.

Reason #1: Physician shortage caused by a large number of primary care doctors retiring. Nearly 45 percent of U.S physicians are over 55 years old. Fewer students are entering medical school due to high tuition and debt.

Reason #2: Increasing demand for medical services driven by the growing number of 65+ population The number of Americans over 65 is expected to grow by more than 42% by 2034, which is just 10 years away. Fewer students are entering medical school due to high tuition and debt.

So this begs the question. Does anyone in Minnesota have this aspect of the crisis in mind and are we being proactive about doing something about it?

The fact that we are in a crisis in many areas of aging in Minnesota is not lost on most of us who have worked and served for years in setting aging policy and determining service delivery. Counting myself among this group as a former member of the Minnesota Board on Aging and an 18-year elected public official, I am extremely disappointed that the recently approved "MBA Recommendations to the Legislative Task Force" doesn't reflect this same level of concern.

After careful consideration of the recommendation, the conclusion can be reached that it consists mostly of a rearrangement of existing structures, groups, and policies. If the status quo were working, we wouldn't be in the current crisis. I'll borrow someone else's quote to describe my feeling about the MBA recommendation, "We are on the Titanic and we are focused on rearranging the deck furniture." Even worse, it seems that the authors of the recommendation were intent on protecting the self-interests of groups and individuals as opposed to taking the bold steps necessary to solve the crisis now before more people suffer.

The MBA recommendation all but misses the intent of a bi-partisan majority of the Legislature in passing the bill that created the Task Force; i.e. to recommend to the Legislature the "governmental entity" that will plan, lead and implement policies and funding for aging Minnesotans. Although a "governmental entity" is mentioned several times in the document, most of the recommendation is focused on how existing agencies, boards, and committees, along with existing service providers, can be rearranged and reauthorized to solve what ails the current system.

This is no time for supporting the status quo, guessing, or throwing stuff at the wall to see if it sticks. What we are facing is a worsening future that has been extensively documented (in detail) for many years.

By supporting the bill that set up the Task Force, Legislators were most likely responding to concern for constituents living through the crisis. Or, they may have personally witnessed problems with our current aging system while helping parents and grandparents or, even, themselves through the growing service gaps and policy confusion.

As I have written in other statements to the Task Force, there are no easy answers to the current and future challenges we face as a large percentage of the state's population ages beyond 65 years. And we should not be accepting recommendations that suggest that there are. I have personally demonstrated this by resigning my governor-appointed position on the MBA because I can't support the board's action that doesn't seem to grasp the magnitude of the risks to elders and seems to pit the special interests of a few over the needs of our most vulnerable population.

I believe that we will only stem the crisis through a top-of-government, comprehensive, coordinated, "all hands on deck" strategy. The establishment of a MN Department on Aging is the big, bold step needed. The question is: "Can we get beyond the forces advocating the status quo?" The large and growing population of Minnesota elders are hoping the answer is "yes."