



MAGIC

Minnesota Association of
Geriatrics Inspired Clinicians



THE SOCIETY
FOR POST-ACUTE AND
LONG-TERM
CARE MEDICINE™

MINNESOTA LEGISLATIVE
TASK FORCE ON AGING

NOVEMBER 14, 2023

CATHY LAURING, APRN, CNP
PRESIDENT, MAGIC

GEORGE SCHOEPHOERSTER,
MD, PAST PRESIDENT MAGIC



Minnesota Association of Geriatrics Inspired Clinicians (MAGIC)

Mission

The purpose of MAGIC is to promote Quality Care through Advocacy and Education for Aging Adults and Persons with Complex Health Needs throughout Minnesota

Vision

MAGIC is the Recognized, Prominent and Respected Leader for Aging Adults and those with Complex Health Needs in Minnesota



MAGIC

- Clinical specialty society representing medical directors, physicians, nurse practitioners, physician assistants, and other geriatric focused clinicians
- State Affiliate:
 - American Geriatrics Society
 - Society for Post Acute & Long-Term Care

Clinical
Resources

Continuing
Education

Advocacy &
Education

MAGIC Supports Multidisciplinary Team

Grounded in multidisciplinary care - celebrates our professional differences and broad experience, skill and perspective as strengths.

Pride in delivering care consistent with our MN older adults' values and preferences.

At the heart, the care team starts with the older adult, their family, and adds geriatrics focused primary care providers and/or a geriatrician, pharmacists, psychologists, and other community service organization supports.



Leadership

Heidi Holste, Executive Director

President
Cathy Lauring, APRN,
CNP

President Elect
Simon Mittal, MD

Secretary/Treasurer
Sandra Turbes, MD

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Emily Downing, MD

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C, MS

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MSN, MHA, RN, PHN,
LNHA, LALD

Teresa McCarthy,
MD, MS, CMD

Rajean Moone, PhD,
LNHA, LALD

Kelli Petersen, APRN,
CNP

Hanna Reimen, DO

Alison Romstad, DNP

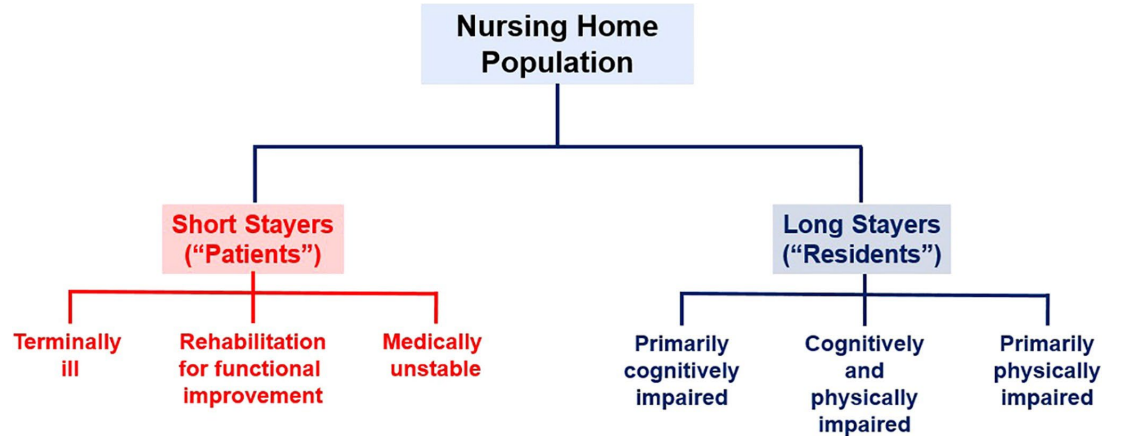
Nicole Siddons, DNP,
APRN, FNP-C

Care Delivery of Geriatrics in Minnesota

COMMUNITY-BASED, ASSISTED LIVING AND INDEPENDENT LIVING

- Focus on health promotion and well care
- Lack of providers specializing in geriatrics (exacerbated in rural areas)
- Larger role needed in MN assisted living communities as acuity changes

FACILITY-BASED (NURSING HOMES)



J American Geriatrics Society, Volume: 67, Issue: 11, Pages: 2225-2228, First published: 28 August 2019, DOI: (10.1111/jgs.16127)



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Nursing Homes Medical Care and Older Minnesotans

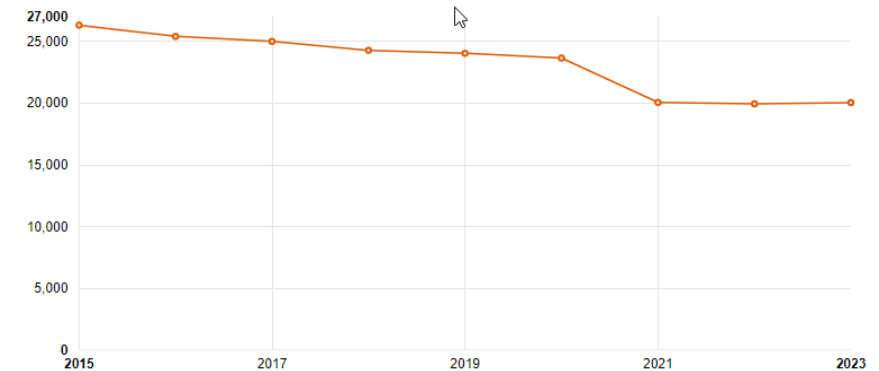
Long-Term Care

Subacute Transitional Care

Post-Acute Care

**56% of people ages
57–61 will stay in a
nursing home at least
one night in their
lifetime**

**KFF: Total number of residents in a certified
nursing home facility in Minnesota**



7% of MN older adults live in
congregate settings

- 2.5% in Long-term Care
- 4.5% in Assisted Living settings

(Genworth Cost of Care⁷ , 2019; AHCA National
Center for Assisted Living⁸)

Successes and recommendations

Support healthy
aging & community
connections

Ensure skilled
workforce in
geriatrics across the
continuum of care

Innovate in long
term care

Support healthy aging and community connections

Successes

- Partner in age-friendly ecosystem and Multi-Sector Blueprint for an Age-Friendly MN work
- Clinical care delivered to older Minnesotans in their place of residence

Recommendations

- Bolster capacity at MDH beyond federal grant initiatives
- Coordinate services and care across health care continuum, especially in MN rural areas
- Incentive geriatrics education and careers
- Promote interest in geriatrics among primary care providers

Ensure skilled workforce in geriatrics across the continuum of care

Successes

- Standardize guidelines and NH Standing Orders (MAGIC Alliance for Clinical Excellence – MAGIC ACE)
- Annual clinical conference focused on improving geriatrics expertise
- Geriatric Workforce Enhancement Program (GWEP) collaboration with schools, public health and state advocates in aging

Recommendations

- Include clinicians to be at the table with MDH and DHS
- Expand Medical Director Role
 - Explore mandatory Medical Director certification
 - Explore state registry

Innovate in long-term clinical care

Successes

- UMN/Hennepin Health MN Geriatrics Extension for Community Healthcare Outcomes (ECHO model)
- National Academies of Sciences, Engineering, and Medicine (NASEM) Report to transform nursing home care

Recommendations

- Leverage Medical Directors who are underutilized
- Leverage geriatric focused primary care providers (physicians, nurse practitioners, physician assistants)
- Broader use of telemedicine

Contact Us

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