Live Well with Juniper Podcast

Episode 1 Transcript

[Music]

Welcome to Live Well with Juniper. I'm your host, Rachel Bremness. Juniper is a program of Trellis and all about optimizing health as we age. Here we talk about all things wellness and aging in Minnesota. Each week, I'll have guests join me to share wellness expertise, resources, and Juniper behind the-scenes info with you.

Before I introduce today's guest, I want to take a moment during our inaugural episode here to explain a bit of the motivation behind the podcast. There are a few different reasons for the podcast at this moment in time. First, we are in the midst of a software transition with Juniper and we wanted a way to stay connected with class participants during this transition. Second, we have so many wonderful classes and class leaders. We are excited that this podcast can serve as a way for listeners to get to know our classes and leaders a little bit better. And third and final, there are so many wellness topics that Juniper participants care about, but we just don't have a class for. This podcast is a way to share that wellness information through guest experts.

For our first episode, we are going to be talking about changes happening with Juniper, including our website change. Joining me for that conversation is Mark Cullen, the VP of strategy and business development at Trellis. He has led the Juniper team for over eight years. Over that time, he has raised millions of dollars in grants for Juniper and forged several partnerships with healthcare, including Blue Cross Blue Shield, Health Partners, Prime West, Mayo, and Tria. Welcome, Mark.

[Mark] Hey, thanks Rachel.

[Rachel] So, before we dive into our content today, could you please introduce yourself a little bit more to our listeners? tell us about yourself, where you grew up, where you went to school, anything interesting and relevant that you would like to share.

[Mark] Yeah. Well, first I'm just uh glad uh to be with you this morning to be the first guest on our new podcast and thank you for doing this podcast and leading us in this way. So, I so appreciate it. I grew up in small towns uh in South Dakota and I've always been interested in the way that people come together to create community. I sometimes joke that where I grew up the towns were so small that you didn't really get elected mayor. It was more like your turn. And so you know that's sort of the DNA that I grew up with. And that to be honest with you, you know, I live in the Twin Cities now. My neighborhood is far larger than any of these towns I grew up in. But the same principles are true. It, you know, it's really about finding a way to take care of your neighbor. If you share a fence line, find a way to get along. You know, if you need to shuttle kids to and from activities and kind of raise the neighborhood kids together, that still happens in small towns and in big towns, too. And we help each other through the joys and challenges of life, right? So, you know, weddings and you know, births alongside, you know, when parents pass away or when spouses pass away or when life throws health challenges in your way. You know, neighborhoods and communities are about helping each other and so I think that's been a place that I've liked to spend my time and honored to have a career that allows me to do that. It's a real privilege to help build healthier communities. I know this sounds corny, but it's true.

[Rachel] So, what is a VP of strategy in business development? What do you do for Juniper?

[Mark] Yeah. So, you know, my role is really about holding the vision for what Juniper can become and then guiding us along that path. And so I guide us by building relationships with health care providers, insurers, public organizations and funders who care about building better and healthier communities. And then I try to make sure that we have the resources we need to make that vision come forward. And so it's really been an honor to think about how we can help communities in the Twin Cities, but also communities throughout Minnesota and to try to think about balancing the needs of more urban communities with the needs of rural communities that as I mentioned a minute ago really at their core aren't that different.

[Rachel] Absolutely. But sometimes the logistics and the needs are different.

[Mark] That's right.

[Rachel] So that's where we need to be flexible. So in your own words, how would you describe Juniper?

[Mark] You know, I think Juniper is about people. We're focused on helping people stay in their communities by offering help through life's more challenging times. So, you might be a participant in a Juniper class there to encourage the person next to you, you know, say you can do it. Let's stay engaged. Let's take charge of our health. Let's do it

together. Right? So, building those social connections in the class. So important that we encourage and support each other. You might be a class leader who volunteers time to teach people about ways to better manage chronic disease or to teach people about how our bodies change as we age. And you know, the way that we find balance while we're standing up from a chair or walking, you know, these things are part of life. It's just, you know, our bodies just change. That's part of what happens. You might be a community- based organization that delivers uh food to people who after a hospital stay when they return home. or you might be a neighbor who shovels somebody's driveway after they've just had surgery. So, Juniper is about people and we do this by aggregating services to make them easier to find and then to be sure that they're available for people when they need the most. And so, as an aggregator of evidence-based classes, we help coordinate a network of organizations who are offering those classes and then we advertise those classes that people know where they can find them. And then we do this kind of same thing for these other direct care services where we're serving people in their own homes with a goal to help them stay there in the community with their family and friends and their social support network that is so important to all of us including people who are aging.

[Rachel] Absolutely. I remember at my very first job coming out of school I was helping people navigate resources in the community. So, looking for fall prevention classes or looking for help for their loved one or parents or friend who needed some help in the home, be it home delivered meals, house cleaning, someone to mow the lawn, etc., and how difficult it can be to navigate depending on where you live and to find those resources. So, having an aggregator is just a complete game changer.

[Mark] Yeah. You know, Rachel, I've worked in this space now for gosh, over 20 years. Thinking about how we support community organizations and the people who live in those communities and when, you know, speaking in my own personal experience, you know, when you find yourself in the position where you know you need help, even if you've been working in this as long as you and I have, it is still challenging. It is still almost impossible to do on your own. And in part because of where you're placing your energy, where your worries are. You know, we all need a little help during life. And sometimes it's your turn to be the helper and sometimes it's your turn to receive the help. And so it's something that we all need. And your experience helping people navigate. And you know, my experience with the same and then having to navigate some things as a for a family member really taught me the sort of you know there are seasons in life and we will both be on both sides of those seasons at different points in our lives.

[Rachel] Absolutely. So we have three significant shifts happening with Juniper right now and we've shared written communication with participants through our flourish

email as well as with class leaders. But I think the information always sinks in better when we can talk through it.

[Mark] Yeah.

[Rachel] Which I'm so glad we can do today. And these three shifts are our software transition, the sunset of certain programs, and changes to available funding. So let's start with the software transition because we're in the midst of that, right? In fact, and Juniper is going to have a brand new website, but currently we're between websites. So can you walk us through the timeline for the website change briefly?

[Mark] Yeah, I thought if you forgive me just a little bit of a more lengthy explanation, you know, the he purpose of the website. So the purpose of the website is really twofold. One is the front end of the website, the part that the public sees so that they understand what Juniper is and how to find help. And then there's a back end of the site where we collect information about the help we provide so that we can start to articulate the difference we're making in people's lives. And we need to be able to do that through data so that we can say how many people we've helped and the effect we've had on their lives and to be able to really measure it. And so the website is really twofold. Now when we created our first website, the site that everybody has come to know, you know, it was 2018.

[Rachel] Yeah.

[Mark] And software changes fast. And we're all seeing all kinds of different software changes. The one that no one will stop talking about, right, is generative AI.

[Rachel] Yes.

[Mark] Right. Which we're not integrating now. And that's we're not going there right at this point. You know, I mean, I think that's beyond where we are right now. But my point is that these things change very quickly. And what was possible in 2018 is different than what's possible in 2026. And so, you know, today we're looking forward to a more modern website that allows us to connect to other sites that allows us to, you know, they'll say optimize this word optimize outreach to people so that they can find us more easily. You know, just different features that the website can have that will make these things easier and which should be a little easier to navigate. We've also been we we're very aware as is everyone else the importance of software security and so uh our new website will make easier for us to protect people's information as we gather it. So those are things that are really sitting top of mind the security the ease of use and the ability to exchange information and analyze information so that we can really true truly prove the kind of benefit that we're having in people's lives.

[Rachel] Definitely. Yeah. So, I our current website, there are no classes on the website as of the end of 2025.

[Mark] That's right.

[Rachel] And when do we anticipate the new site will be ready?

[Mark] Oh, you know, like any good construction project, there are timelines and delays just like anything else, right? We're really uh thinking that by April 1st, we will have something to share. There could be delays. I know you and our team are testing the site in earnest this week and so, you know, we're at this point ahead of schedule. But, you know, things can happen. So, but we're we know that it's important to get the site back up and live as quickly as possible. We're working very hard to do that.

[Rachel] We absolutely are because typically an organization would have the new website ready before sunsetting the old one.

[Mark] That's right. that is the way you would like to do it. That isn't how it has quite played out for Juniper. Why didn't we do that here?

[Mark] Yeah, you know, we were looking at various ways to enhance our existing site and we were wrestling with upgrades and new feature development that would have been frankly very costly to do on our old architecture and with our older software. Again, because it was created in 2018 and while we obviously made enhancements and updates and those kinds of things, you know, that you often see companies totally tearing down a site and rebuilding it as technology evolves over time.

[Rachel] Yes.

[Mark] And so we were looking at ways to do to add those features and to do it in a in a way that made sense both financially and from the perspective of the site's users either participants or our partners uh that are providing services throughout Minnesota and then our own team as we thought about those needs combined with this vision about going beyond classes. So, you know, Juniper started with classes, health promotion classes focused on chronic disease management and fall prevention. But we have always thought that things like chore services and home modifications and meals delivered in community were just as powerful prevention tools as the classes, but they were harder to operationalize. And in order to operationalize them, we needed a set of software features that our past site just couldn't produce. And we spent time with vendors trying to scope whether it was possible to include those pieces in a new site and in the end determined that it was time to move on. But by the time we made that decision, we had about five months left in the year and an opportunity to really grow into 2026. And so the timeline kind of frankly swamped us and so we end up with this gap.

[Rachel] Yes. Yeah. And the reason the I would call them the home and community based services.

[Mark]Yeah.

[Rachel] Right. The home delivered meals, lawn care, house cleaning, etc. The reason are those are a relevant factor right now is because of the pilots that we're currently doing thanks to a bill that was passed by the Minnesota legislature in 2024 to support the piloting.

[Mark] That's right.

[Rachel] services. And we'll probably need to do a whole another episode on that sometime later in 2026 once we have some evidence to share about how those have been going.

[music plays]

[Rachel] I know from being on the team that another factor that played into our decision around the timing of this website change was that Medicare and Medicaid are considering integrating services into Medicare programs that focus on better managing chronic disease and that could be things like the evidence-based health promotion classes that Juniper offers. Do we have any updates on their progress towards that?

[Mark] Yeah, you know, the state and federal governments for a long time have been thinking about ways to integrate community care into health care. And we've tried as a country various ways to do this. You see most traction around this kind of thing in the Medicaid program. And now with you know the way that the demographic you know the aging population has shifted you see Medicare considering these kinds of things as well in the Medicare program. And so they've had various, you know, pilots and demonstrations come out of the Centers for Medicare and Medicaid innovation, which is sort of their, you know, it's the arm of Medicare. People generally call it Medicare, right? But it's technically called the Centers for Medicare and Medicaid Services, but that's where this arm, this innovation arm called the Centers for Medicare and Medicaid innovation exists to test new models of care and new ways to pay for that care. And so one of the things that they're considering doing is to think about the way that we could integrate classes, evidence-based health promotion classes into care and combine it with things like physical activity, food delivery, uh, and dementia care. And so they have a new pilot called Elevate that they announced at the end of 2025 with a competition to begin sometime in 2026. And as we sit here on the morning of January 13th, 2026, that competition has not yet started and they haven't given us the details for us to know exactly what the competition will entail. So we're eagerly awaiting that detailed

information. If the competition's rules line up in a way that we think we could add value both to our communities and our partners and to this to understanding better from the perspective of for example Medicare the kind of difference that that social care can make in a person's life and maybe it can also reduce the cost of care for public payers and programs and frankly Minnesota and American families. If we think we can add value there, then we'll apply. And so we're eagerly waiting to find out what the competition's details will be and we'll let our partners know just as soon as we do about our decision to apply.

[Rachel] Absolutely. and having software that allows us to make enhancements more nimbly and that can have evidence-based health promotion classes as well as these other types of services will only help us if we choose to apply as far as being a competitive candidate.

[Mark] That's right. Yeah. When we look at past competitions like this, we know that two factors those being the ability to share information back to Medicare so that they can do analysis to prove whether this works and then for our own ability to do analytics so that we can measure the impact of services as they're being delivered and adjust our delivery to maximize the benefit for our neighbor. You know to be able to do those two things in real time is essential in 2026.

[Rachel] And it's kind of exciting the prospect of being part of an effort that might change the history on Medicare and benefits and how those are off how the all of that is delivered in our country.

[Mark] Yeah. You know, you've heard me say to you and to others that many of these programs were created as a part of the Great Society programs in the Johnson administration in the mid 1960s and we are now closer to 2065 than we are 1965. And so the idea that it's time to modernize these programs to build them in a way that makes sense for today's needs and the way that we live in community today. You know, it's a really exciting opportunity for all of us.

[Rachel] Absolutely. Absolutely. So, thanks for talking through the software changes. Another change happening with Juniper is the sunset of different programs of certain programs, which is one that I think I can address. So, moving into 2026, Juniper will not continue to offer Living Well with Chronic Conditions, Living Well with Chronic Pain, or Living Well with Diabetes. It, which it was a difficult decision for us to make. We've been wrestling with this for quite some time, but it came down to a few pretty good reasons. First, just declining interest in the programs. Over the past five years, we've seen fewer class leaders desiring to offer these classes, smaller class sizes, so fewer participants interested in the classes. So that was an indicator for us. Although we know that those that take the class benefit tremendously just overall there was less there seemed to be less interest in those programs. And then another factor which some people don't

realize is since these programs are evidence-based health promotion programs, many of them have licenses and licensing entities that require reporting and there's fees associated with those licenses. So due to the declining interest in Living Well with Chronic Conditions, Living Well with Diabetes, and Living Well with Chronic Pain, it just didn't make sense for Juniper to continue with the license fees and associated reporting as we work to respond to the needs and interests of our community here in Minnesota.

[Mark] Yeah, I think that's right. You know, being responsive to what community members want is has got to be core to all of this and to be able to be nimble. So, you know, while today those programs weren't popular enough to keep in the menu, that might be different, you know, a few years from now, we'll work to keep identifying new programs that could add value for Minnesotans and families throughout our state.

[Rachel] Definitely. And then the final change that we are feeling as we move into 2026 is changes to available grant funding. And what changes, Mark, would you say have happened over the last year or so?

[Mark] Yeah, I think for a lot of us that sit in this you know traditional nonprofit community-based space, the last year has brought a lot of uncertainty. And uncertainty isn't necessarily bad. Discomfort means change. And so that's part of what we're feeling. We're feeling the beginning of a lot of change. And so, you know, it's not a secret that the traditional sources of community-based funding are either flat or declining generally. It is harder to raise grant dollars. Charitable donations are flat or declining throughout the country. So, the way that we've thought about resourcing community is changing and the way that we talk about the value of resourcing community will also change as we move forward. At the federal level, it's encouraging honestly to see the discussion of prevention and investing in care in new ways. We talked about the way Centers for Medicare and Medicaid Services are thinking differently than they ever have about integrating care, but the uncertainty caused by reorganizing federal agencies, pausing funding for certain programs uh and the time it takes for those agencies to build new strategies to address care needs has make predicting the resource levels and when the competitions will happen and you know getting the dollars out and then into the community has frankly been challenging. You know at the state level. And we were disappointed during the last legislative session that our community care hub bill that we advocated for in partnership with many community organizations throughout the state and not just community-based nonprofits, but also lots of advocates who were showing up at, you know, to talk to their legislator from a personal capacity from public organizations who saw alignment with their missions. You know there was a lot of momentum there. In the end we didn't get it across the finish line in part because of the state's out what they call the out years right so it's you know the years three or five years from now and the way that people are predicting the state's budget will look and so you know thinking about who we will be five years from now

from a state budget perspective and making investments today to make those out years better you know that's a tricky thing for a legislature to do in the way that the legislature thinks about investing today for benefit tomorrow. And I there's a lot more detail around, you know, how we might think about dynamic budgeting and ways to, you know, predict savings and then accrue those savings over time.

But, you know, they think the point is that Minnesota, like the federal government, will have to think about these questions differently in part because the state's budget is driven in a large measure by the cost of health care and the growing number of older adults that need that care. We're living lives, our lives longer and generally healthier, although healthy days are a question, right? As we live longer relative to the life expectancy of the average person when many of these social care programs were created during the 60s. And so, you know, it's we have to think about these questions in a different way. And so, while we often talk about the growing Baby Boomer population and its consumption of these public resources through the Medicare and Medicaid and Social Security programs, collectively sometimes called entitlements. We know that generations like mine are right on their heels. And so what we're building is a new infrastructure for modern care needs that we want to be durable for the Baby Boomer generation and for generations like yours and mine, Rachel, that will come. So Juniper class leaders, you know, receive funding from a variety of places, right? Our partner organizations, they receive funding from a variety of places. Some of it state, some of it federal, some of it charitable donations. And we're working hard to, you know, monitor all three, apply for funding where we can find it and get those dollars out into the community so that we can measure that change. And our partner organizations and those class leaders in particular are critical in that strategy.

[Rachel] Absolutely. And as I thought about this change, I think participants will most likely feel this impact either as a slight decrease in available classes as organizations and class leaders try to figure out their budget and how far it will stretch with the available grant funding they have and or some classes might start introducing a cost. What can participants do to help advocate for Juniper and for future funding opportunities to help keep classes available and affordable?

[Mark] You know, we've seen over 30,000 Minnesotans take a Juniper class since we began.

[Rachel] That's amazing.

[Mark] It's an incredible number. I believe we are the largest such community care hub offering these classes in the country. Both by geography and by the number of people that we've helped in that in that time. It's incredible to have an asset like this in Minnesota. And we've touched together with the with our partners those class leaders in particular we've touched the lives of all these Minnesotans and I think one way that

people can help is to think about making Juniper sustainable for the next 30,000 people that want to take a class. So donating to Juniper to make these classes more available. Advocating with your elected officials you know for increased investments in this kind of stuff. You know use the states tails right the budget the way to look in the future years as a way to say hey we do need to invest in prevention and here's some evidence-based programs that show promise. And then I think you know simply just being there to help your neighbor and talk about it. The social connection piece, we see it over and over again. We saw the last surgeon general write a whole book about social connection. Dr. Zeke Emmanuel, who was one of the architects of the Affordable Care Act and is an oncologist and, you know, a public health intellectual, just released a new book on this topic and the importance of social connection, being there for your neighbor and for each other and advocating for the change that you want to see. I think are maybe some of the most important things that people can do.

[Rachel] Thank you for that.

[Music plays]

[Rachel] Before we close out, Mark, is there anything else that you would like to share with our listeners today?

[Mark] Yeah, thanks for asking. I mean, I think, you know, for me, it's a thank you. Uh it's a thank you to our partners, to the organizations and the participants, all the people that have helped make Juniper what it is and help us bring change to our communities and help people in the way that we've done over the last several years and in earnest in the last few years with all of the change that we've seen since the pandemic and all the rest. I'd love to just ask that people stay in touch. You can call me, email me with your ideas. It'd be great if you could help us think about people in your life that might care about these things too and might be positioned to help us navigate the journey ahead. And then I think I would just say that I'm so excited for where we're going next and so grateful for all the folks who have gotten us along this path and I hope they're excited too. And so let's go forward together.

[Rachel] Thank you, Mark. We can be sure to share your contact information too in the notes so that people can reach out with their great ideas. And thank you so much for joining me today. And thank you to everyone who has listened to our very first episode of our Juniper podcast. If you're interested in Juniper classes but haven't signed up for our waitlist, I encourage you to do so. Go to your juniper dot org, click on the teal button that says a note about class availability and you'll be taken to a page where you can access our waitlist. We will also include a link to the waitlist in the episode notes. By signing up for our waitlist, you'll be notified when our new website is ready and when classes are available. I'm Rachel Bremness and you've been listening to Live Well with Juniper. If you like our podcast, please support us with a donation or be sure to

subscribe wherever you listen to podcasts. Don't forget to share with friends. Until next time, be well.