

# Aging and Disability Resources Pierce County Community Connections

## 2016-2019 Area Plan Executive Summary August 2015



This Area Plan is a requirement of the State of Washington, Department of Social & Health Services – Aging & Long Term Services Administration (DSHS/AL TSA) as authorized by the Federal Older Americans Act.

## Community Opportunity

The goal of the Area Plan is to carry out a local planning process that engages and involves the community in identifying needs and concerns of older adults and persons with disabilities in Pierce County and to create a long range plan for addressing these issues. The 2016-2019 Area Plan was developed with consideration for the following impacting factors and assumptions:

- **Rapidly increasing aging population:** A 2% increase in the number of persons 60 years of age or older between 2010 and 2015, representing 18% of the total Pierce County population with projected 60+ population growing to nearly 21% by 2020
- **Federal sequester:** Federal cuts to non-defense, discretionary programs, including an 11.6% cut to Older Americans' Act funded services for Washington State, were first implemented in 2013. Further reductions are expected each year through 2023 unless Congress moves to eliminate the sequester
- **Diminishing public resources:** Federal and State funding allocations to Pierce County were reduced as the result of adjustments to the State funding formula based on 2010 U.S. Census data. Adjustment is phased in over a three-year period, continuing through 2016
- **Health system transformation:** The need to plan for new models of service and reimbursement as the result of Washington State's move to performance-based contracting, as well as the impact this may have on Area Agencies on Aging
- **Shift to evidence-based, person-centered models of services and supports:** An ongoing and more focused movement at both the national and state levels to provide long term services and supports that are proven to result in improved health, better care and lower costs

Pierce County Community Connections Aging & Disability Resources' (ADR) planning process for the 2016-2019 Area Plan began in the winter of 2015 and involved a broad approach to gathering input from Pierce County residents, service providers, and other interested stakeholders. Input was collected through a series of community meetings, focus groups and review of other local social service plans and statistical data. This Area Plan also incorporates findings from a larger Community Connections Departmental community needs assessment initiated in December 2013 and completed in 2015.

Information collected was used to develop and refine local priorities and to guide decisions about funding services. Community input also helped determine areas for focused coordination, advocacy and program development over the next two to four years.

Residents and other stakeholders consistently commented on:

- The desire to remain in their own homes as long as possible and to have supportive persons and/or services available to help when needed
- The impact of mobility and transportation issues on one's ability to remain independent in the community
- The need for accessible and affordable housing options and housing-related assistance programs
- The importance of programs that promote and help educate residents about healthy living, including physical exercise, nutrition and self-management of chronic conditions

## Plan Components

The Area Plan is built upon ADR program’s mission to ensure Pierce County residents have available a range of community-based services that allow older adults and adults with disabilities to remain at home as long as possible, with the ultimate vision to create and sustain livable communities for people of all ages throughout Pierce County.

The Area Plan includes pertinent information about the local planning and priority setting process, targeted population data, and services currently available in the community. Goals and objectives focus on person or family-centered approaches, evidence-based models of supports and services, and creative collaborations to address identified needs in five focused areas:

2016-2019 Area Plan Issue Areas and Goals	
<p><b>Long Term Services and Supports (LTSS)*</b></p> <ul style="list-style-type: none"> <li>• Provide a network of effective person-centered care management and other community based services and supports that enable older adults and adults with disabilities to receive needed care in their own home</li> </ul>	<p><b>Delay of Medicaid-funded LTSS*</b></p> <ul style="list-style-type: none"> <li>• Provide community information and education about a broad range of long term services and supports (LTSS)</li> <li>• Provide tailored supports and services to family/informal caregivers, enabling care receivers to remain in their own home for as long as possible</li> <li>• Provide supports and services for families and caregivers impacted by Alzheimer’s / Dementia</li> <li>• Provide evidence-based interventions that promote both mental and physical health in older adults</li> </ul>
<p><b>Service Integration &amp; Systems Coordination*</b></p> <ul style="list-style-type: none"> <li>• Improve health and reduce avoidable health care costs of older adults and adults with disabilities who face multiple chronic conditions and health challenges, by providing person-centered coordination of health and community supports</li> </ul>	<p><b>Service to Older Native Americans*</b> (*Federally recognized tribes)</p> <ul style="list-style-type: none"> <li>• Ensure interagency communication and collaboration to promote access to supportive services for older Native Americans</li> </ul>
<p><b>A Livable Community for All Ages</b></p> <ul style="list-style-type: none"> <li>• Improve mobility for seniors and persons with disabilities in Pierce County</li> <li>• Maintain or improve the physical and/or psycho-social well-being of older persons in Pierce County by providing or securing appropriate nutrition services</li> <li>• Ensure older adults and persons with disabilities have access to available housing assistance programs</li> </ul>	

\*Issue areas mandated by Washington State DSHS / ALTSA

## Key Intended Results

Over the next four years, ADR expects to accomplish several key outcomes critical to our mission and essential to the long range vision of a livable community for persons of all ages. ADR intends that:

- Residents of Pierce County will be empowered to plan for, find and access the long term services and supports they will need to remain as independent as possible for as long as possible
- Families will have expanded capacity to care for their loved ones at home as long as they choose, with less reliance on formal support systems
- The quality, responsiveness and availability of critical services, such as home care and other in-home supports, nutrition, transportation and health promotion programs will be improved
- Local health and social services systems will be well coordinated to ensure persons transitioning between care settings will have the tools, services and supports necessary to maintain their health and avoid costly re-hospitalizations

At the conclusion of this Area Plan period, ADR, along with Washington State and the nation as a whole will be actively involved in shaping the new healthcare landscape under federal healthcare reform, as well as the statewide health system transformation. ADR will continue to face ongoing challenges in responding to local needs and priorities that will require us to be more creative and focused in how we develop and provide publicly funded long term services and supports.

ADR's position as a trusted leader in the local aging and disability service network and the willingness of our many community partners and volunteers to work with ADR to maximize local resources, will improve program effectiveness and expand service access to those Pierce County residents requiring assistance to remain at home.



# Area Plan Budget Summary

## Impacting Factors

- Federal Sequester – Federal cuts to non-defense, discretionary programs, including the Older Americans’ Act were first implemented in 2013. Further reductions are expected each year through 2023 unless Congress moves to eliminate the sequester.
- State Funding Formula Adjustments – Beginning in fiscal year 2013, Federal and State funding allocations to Pierce County were reduced as the result of adjustments to the State funding formula based on 2010 U.S. Census data. Adjustment is phased in over a three-year period.
- Health Home Care Coordination for dually-eligible Medicare / Medicaid beneficiaries – During the 2015 Washington State Legislative session, funding for this service was not continued beyond December 31, 2015. Although advocacy is currently happening at the State level to extend this service through at least June 2016, funding currently projected in ADR’s proposed 2016 budget may not be realized.
- Medicaid Caseload Growth – ADR projects increased funding to address anticipated growth in the Medicaid LTSS client caseload and management of related service contracts.
- Section 1115 Global Medicaid Waiver – If approved by the Centers for Medicare and Medicaid Services, the Section 1115 Global Medicaid Waiver will allow the State to reinvest a portion of Medicaid savings into targeted services that are designed to delay or reduce the need for Medicaid LTSS, including additional supports for eligible family caregivers.
- State Medicaid Payment Redesign – Under the Healthier Washington Health Care Transformation plan, the State is currently testing new payment models for state-supported health care, which will result in a move away from the current fee-for-service structure to performance-based contracting that “pays for value versus volume”.

## Major Revenue Sources

- Older Americans Act – Federal
- Senior Citizens Services Act – State
- Family Caregiver Support – State / Federal
- Medicaid – State / Federal

## Discretionary versus Non-Discretionary Funding

Generally, revenue to Community Connections / Aging and Disability Resources comes from the State and Federal governments in two forms:

<b>Discretionary</b> – Funds that are provided with the flexibility to be spent on local needs, determined at the local level. Examples of discretionary funded services include Foot Care, Counseling Services, and Transportation.	<b>Non-Discretionary</b> – Funds that are earmarked for a specific program or purpose. ADR does not have a choice on how to spend these funds. Examples include Family Caregiver Support and some nutrition program funds.
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**PIERCE COUNTY AGING AND DISABILITY RESOURCES  
PROJECTED REVENUES 2016 – DRAFT**

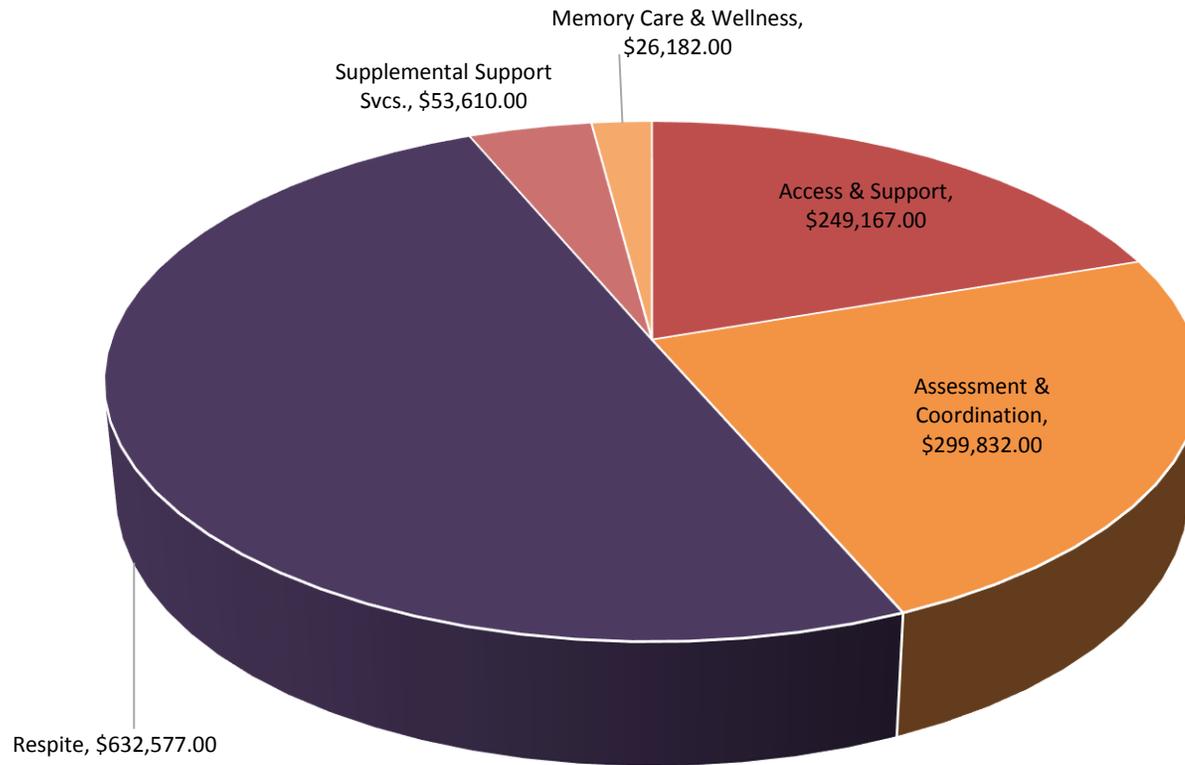
As presented Aug. 13, 2015

Discretionary Revenues	2015 Total Revenue (includes carry-over & transfers)	2016 Projected Revenue	Net Change	Comments
Title III-B (Supportive Services)	\$782,941	\$684,278	(\$98,663)	Decrease due to changes in the DSHS/ALTSA funding formula based upon 2010 census data
Title III-C1 (Nutrition – Senior Mealsites)	\$818,316	\$794,642	(\$23,674)	
Title III-C2 (Nutrition - Home Delivered)	\$345,450	\$260,731	(\$84,719)	
SCSA (Supportive Services)	\$824,861	\$800,439	(\$23,849)	
<b>Subtotal of Discretionary</b>	<b>\$2,771,568</b>	<b>\$2,540,090</b>	<b>(\$230,905)</b>	
Non-Discretionary Revenues	2015 Total Revenue (includes carry-over & transfers)	2016 Projected Revenue	Net Change	Comments
Title III-D (Health Promotion)	\$57,189	\$35,545	(\$21,644)	Decrease due to changes in the DSHS/ALTSA funding formula based upon 2010 census data
Title III-E (Family Caregiver Support)	\$301,553	\$271,379	(\$30,174)	
Title VII-B (Elder Abuse)	\$6,529	\$6,340	(\$189)	
Home Care Aide-(Insurance + Training)	\$950,000	\$950,000	\$0	
Madigan Foundation – Kirby Fund	\$10,000	\$10,000	\$0	
Family Caregiver Support (State)	\$1,155,636	\$1,088,785	(\$66,851)	Decrease due to changes in the DSHS/ALTSA funding formula based upon 2010 census data
Title XIX-Contract Management	\$513,169	\$641,158	\$127,989	Increased funding provided due to anticipated growth in the number of TXIX/Medicaid contracts
Title XIX-Case Mgmt & Nursing	\$7,133,273	\$8,014,825	\$881,552	Increase due to projected growth in TXIX/Medicaid caseload

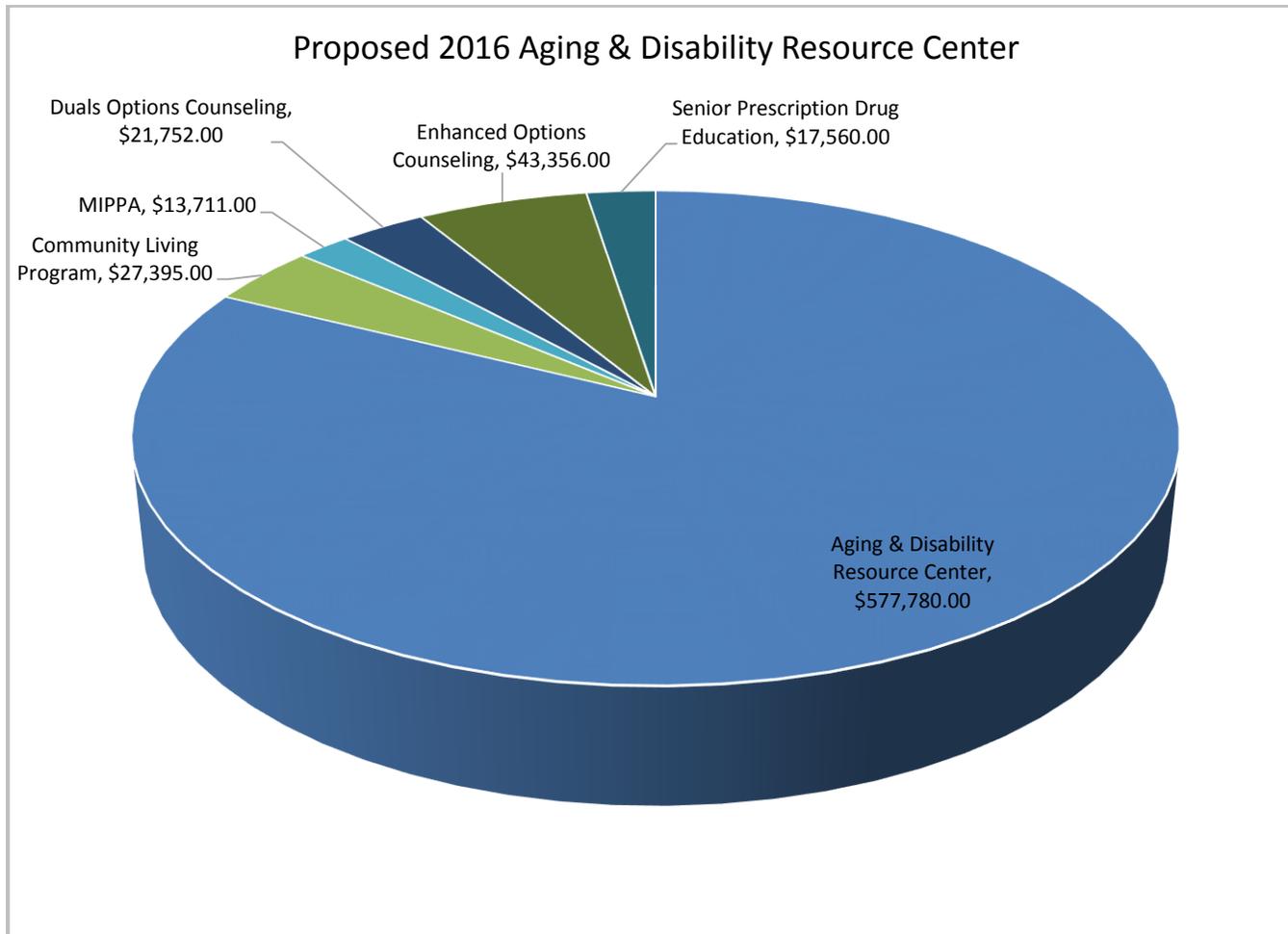
Non-Discretionary Revenues	2015 Total Revenue (includes carry-over & transfers)	2016 Projected Revenue	Net Change	Comments
Title XIX-Admin Claim	\$84,345	\$84,345	\$0	
Senior Drug Education	\$17,560	\$17,560	\$0	
Kinship Caregiver Support/Navigator (State)	\$234,368	\$231,468	(\$2,900)	Decrease due to changes in the DSHS/ ALTSA funding formula based upon 2010 census data
Pierce County General Fund	\$17,500	\$17,500	\$0	
MSC Long Term Care Ombudsman	\$105,392	\$104,212	(\$1,180)	
Ombudsman Attorney General's grant	\$13,032	\$1,062	(\$11,970)	Grant ending effective Feb. 2016
Senior Farmer's Market Admin (State)	\$8,700	\$8,700	\$0	
Senior Farmer's Market Admin (Federal)	\$2,080	\$2,080	\$0	
Nutrition Services Incentive Program	\$138,978	\$134,957	(\$4,021)	Decrease due to changes in the DSHS/ ALTSA funding formula based upon 2010 census data
Medicare Improvements for Patients and Providers Act	\$14,903	\$14,903	\$0	
DUALS Options Counseling	\$29,609	\$21,752	(\$7,857)	2015 revenue includes carry over funds from previous year and additional funding added by DSHS/ ALTSA during SFY 2015.
ADRC Enhanced Options Counseling grant	\$90,840	\$43,356	(\$47,484)	2015 revenue includes carry over funds from previous year and additional funding added by DSHS/ ALTSA during SFY 2015.

Non-Discretionary Revenues	2015 Total Revenue (includes carry-over & transfers)	2016 Projected Revenue	Net Change	Comments
Medicaid Health Homes contracts	\$68,497	\$198,333	\$129,836	
Optum Health Homes contract	\$428,416	\$538,463	\$110,047	
Chronic Disease Self-Management Education grant	\$43,027	\$0	(\$43,027)	Grant ended effective Aug. 2015
Veteran's Project	\$36,000	\$45,000	\$9,000	
Univ. WA Reducing Disability in Alzheimer's Disease (RDAD) grant	\$11,830	\$0	(\$11,830)	Grant ended effective Dec. 2015
Caregiver Conference (Speaker fees)	\$10,000	\$10,000	\$0	
<b>Subtotal of Non-Discretionary</b>	<b>\$11,482,426</b>	<b>\$12,491,723</b>	<b>\$1,009,297</b>	
<b>GRAND TOTAL</b>	<b>\$14,253,994</b>	<b>\$15,032,943</b>	<b>\$778,949</b>	

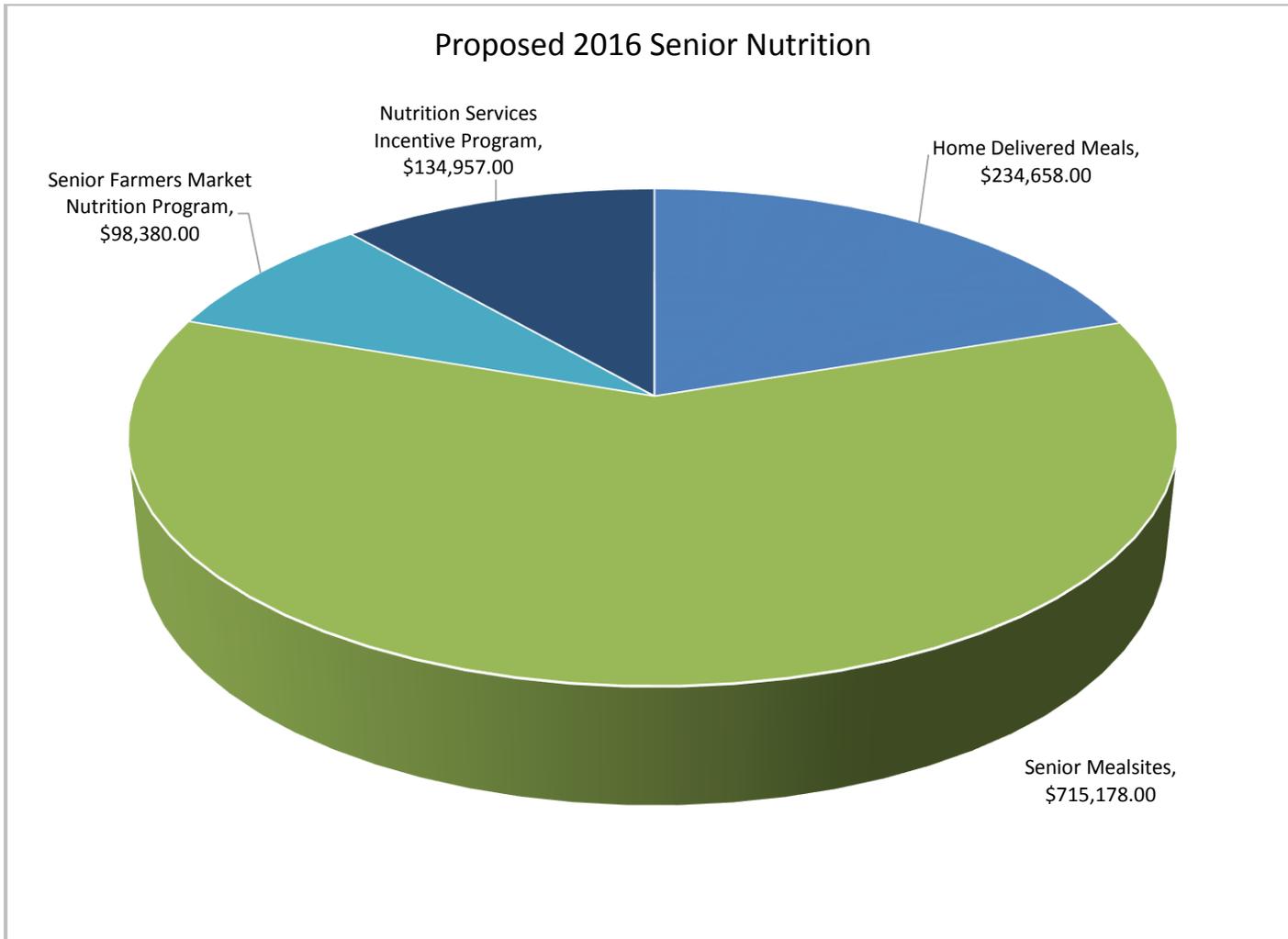
### Proposed 2016 Family Caregiver Support Program



**Fund Sources:** Older Americans Act Title III E, State Family Caregiver Support, Senior Citizens Service Act (SCSA), Kirby Fund – Madigan Foundation

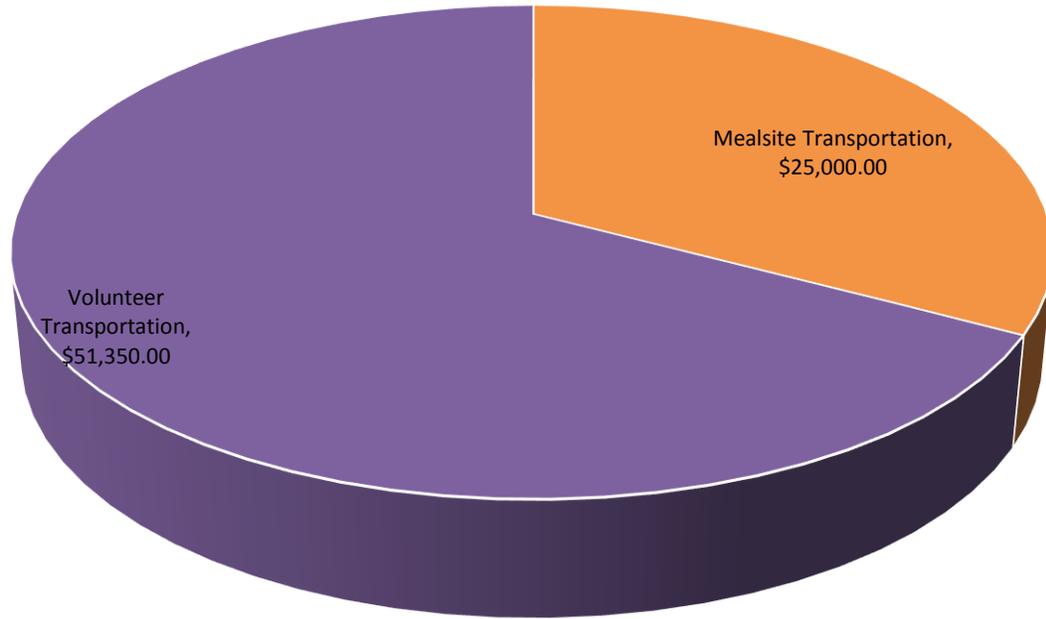


**Fund Sources:** Older Americans Act Title III B, SCSA, Duals Options Counseling Grant, Enhanced Options Counseling Grant, Medicare Enrollment Assistance Grant, Senior Prescription Drug Education Grant, Title XIX



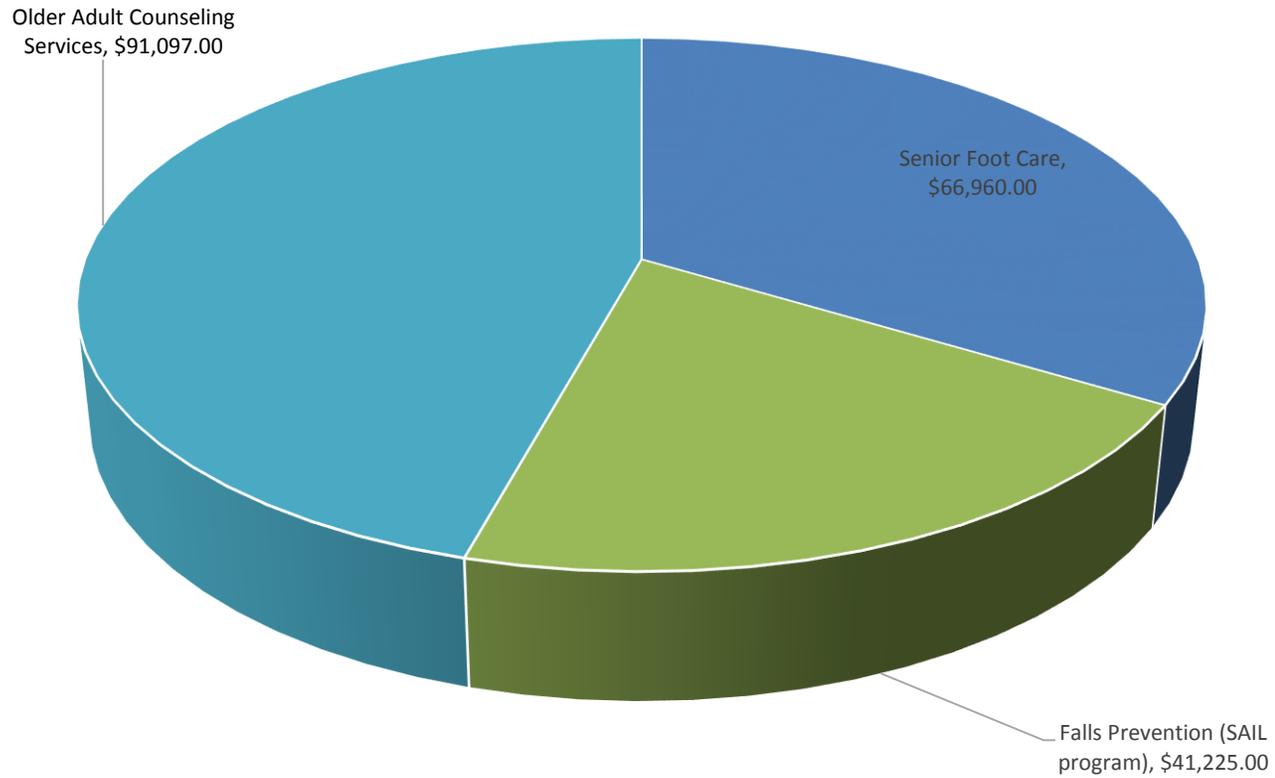
**Fund Sources:** Older Americans Act Title C1 and C2, Nutrition Services Incentive Program, State General Fund, United States Department of Agriculture Senior Farmers Market Nutrition Program

### Proposed 2016 Transportation



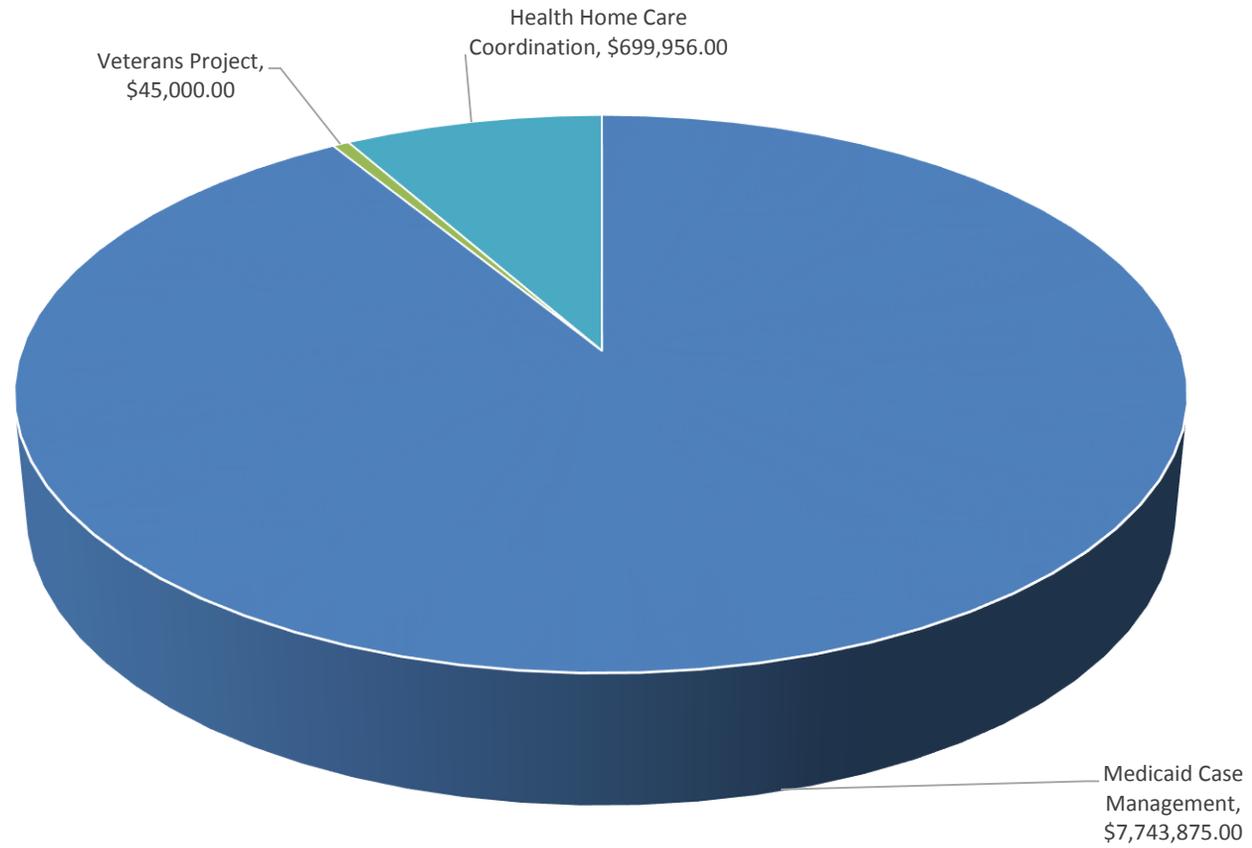
**Fund Sources:** Older Americans Act Title III B and SCSA

### Proposed 2016 Health Promotion/Disease Prevention



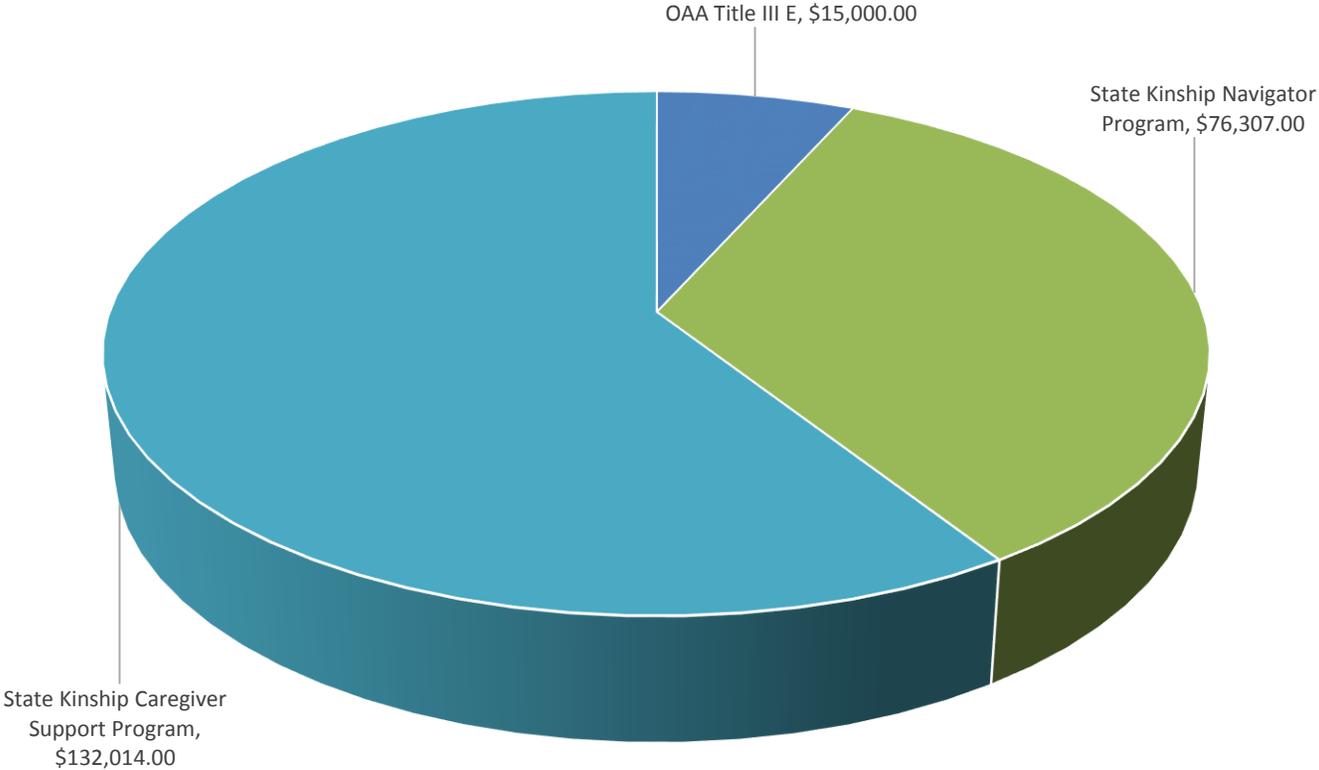
**Fund Sources:** OAA Title III D and III B, SCSA

### Proposed 2016 Case Management & Nursing Services



**Fund Sources:** Title XIX, Veteran Directed Home Services Program, Optum Health, Community Health Plan of Washington, Molina Healthcare of Washington

### Proposed 2016 Kinship Caregiver Support Program



### Proposed 2016 Other Services

<b>SERVICE</b>	<b>AMOUNT</b>	<b>FUND SOURCE(S)</b>
Adult Day Health	\$69,725	SCSA
Senior Centers	\$175,000	Pierce County General Fund
Legal Aid	\$75,271	OAA Title III B
Long-Term Care Ombudsman	\$113,845	Attorney General Grant, OAA Title VII B, State Long-Term Care Ombudsman Program
Caregiver Conference (Speaker Fees)	\$10,000	State Family Caregiver Conference
<b>Total Direct Services Funding</b>	\$13,215,360	
<b>Total Administration &amp; Program Coordination</b>	\$1,817,584	