Expanding In-Home Services for the Elderly Program (EISEP)

EISEP Eligibility:
- At least 60 years old
- Functionally impaired in at least one ADL (Activities of Daily Living) or two IADL (Instrumental Activities of Daily Living).

Activities of Daily Living are self-care tasks such as bathing, dressing, toileting, continence, transferring and eating. Instrumental Activities of Daily Living (IADL) include:
- Housekeeping, shopping, preparing meals, managing money, laundry, using transportation, telephoning and getting outside of the home.
- Ineligible for the same or similar services under other public programs
- Able to be maintained safely at home
- Have one or more informal caregiver providing continuing care
- For those who may be eligible for Medicaid, services are available while the application is pending.

Revised January 2019

A Foundation for Aging in Place

Many people want to age in place at home and not in a nursing home. But, with advanced age comes illness and disabilities, nonmedical in nature, nevertheless limiting. For older adults who struggle with the most basic tasks of daily living, there’s the Expanded In-home Services for the Elderly Program (EISEP). This program was established in 1987 to address the non-medical needs of senior citizens who are not eligible to receive support from Medicaid and other programs. As with other NYS Area Agency on Aging programs, EISEP provides services that allow older New Yorkers the opportunity to age in place with dignity and respect.

Services Provided Under EISEP

Non-medical in-home services, case management, non-institutional respite and ancillary services are provided under EISEP and fall into two categories: Personal Care Levels 1 and 2.

**Personal Care Level 1** services include assistance with: light housekeeping, meal preparation, escort assistance, running errands and food shopping.

**Personal Care Level 2** services include assistance with: all tasks listed under Personal Care Level 1 plus bathing, grooming, dressing, toileting, transferring and ambulation, feeding, eating and the self-administration of medication.

Case Management

Case management is an essential element of the EISEP program. Case managers not only assist clients, but also their families. Case management includes an in-home assessment, care plan development, arrangement of services, information and referral, client monitoring and follow up.

- Non-medical in-home services such as housekeeping, personal care, respite, case management.
- EISEP services support and supplement informal care provided by clients’ families.
- Clients are required to share the cost of services based on income.

Respite

Many seniors are cared for at home by informal caregivers – family, friends and neighbors. EISEP supports these individuals, as well by complementing and supplementing the care they provide and giving them a respite. EISEP supports the ability of caregivers to continue in this role. Non-institutional respite care is available through social adult day programs and companion/supervision services.

Ancillary Services

An individual may have unique needs that should be addressed in order for the person to remain at home safely. An example of ancillary services is providing PERS (Personal Emergency Response Systems).
Demographics

<table>
<thead>
<tr>
<th></th>
<th>Personal Care II</th>
<th>Personal Care I</th>
<th>Home Delivered Meals</th>
<th>Adult Day Services</th>
<th>Case Mgt.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average Age</strong></td>
<td>84</td>
<td>82</td>
<td>81</td>
<td>82</td>
<td>81</td>
</tr>
<tr>
<td><strong>Age 75+</strong></td>
<td>86%</td>
<td>79%</td>
<td>73%</td>
<td>82%</td>
<td>75%</td>
</tr>
<tr>
<td><strong>Age 85+</strong></td>
<td>54%</td>
<td>44%</td>
<td>42%</td>
<td>45%</td>
<td>43%</td>
</tr>
<tr>
<td><strong>Female</strong></td>
<td>82%</td>
<td>78%</td>
<td>65%</td>
<td>66%</td>
<td>69%</td>
</tr>
<tr>
<td><strong>Live Alone</strong></td>
<td>65%</td>
<td>78%</td>
<td>61%</td>
<td>26%</td>
<td>61%</td>
</tr>
<tr>
<td><strong>Low Income</strong></td>
<td>55%</td>
<td>56%</td>
<td>40%</td>
<td>31%</td>
<td>42%</td>
</tr>
</tbody>
</table>

**Economic Status**

EISEP is designed to serve those who are not eligible for Medicaid and to prevent or delay their spending down to Medicaid. Just under half – 40% -- of the EISEP clients have incomes at or below 150% of the federal poverty level.

**Multiple Services**

The assessment process is a comprehensive review of a person’s needs and circumstances. It is often found that the service the initial inquiry was placed for is not the only service that is needed. In many instances, a package of services is needed to address the unique circumstances of an individual. Seniors receiving personal care services through EISEP have multiple needs: 59.8% receive three to five services, and an additional 13.2% receive six or more services.

**Seniors Receiving Personal Care Services Have Multiple Needs:**

<table>
<thead>
<tr>
<th>Number of Chronic Conditions</th>
<th>Personal Care II</th>
<th>Personal Care I</th>
<th>Home Delivered Meals</th>
<th>Adult Day Services</th>
<th>Case Mgt.</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 1</td>
<td>3.5%</td>
<td>4.4%</td>
<td>11.1%</td>
<td>15.0%</td>
<td>8.6%</td>
</tr>
<tr>
<td>2 to 3</td>
<td>16.2%</td>
<td>17.5%</td>
<td>24.4%</td>
<td>29.7%</td>
<td>22.6%</td>
</tr>
<tr>
<td>4 to 5</td>
<td>29.6%</td>
<td>31.6%</td>
<td>31.3%</td>
<td>27.4%</td>
<td>32.4%</td>
</tr>
<tr>
<td>6 +</td>
<td>50.7%</td>
<td>46.5%</td>
<td>33.2%</td>
<td>27.9%</td>
<td>36.4%</td>
</tr>
</tbody>
</table>

**Quality of Life**

Of the seniors who benefit from EISEP services: all are considered to be frail or disabled; typically, 40% percent are at 150% of federal poverty guidelines and are considered low-income. Almost 29% are minorities.

**Impact on the Lives of Seniors**

Mrs. S had mild to moderate early onset Alzheimer’s Disease and her husband was her caregiver. She was 61 years old at the time and he was 67. They had been happily married for 38 years.

Mrs. S and her husband had two adult children, both of whom live out of state so they were not able to help with her care. She and her husband were interested in Home Delivered because she could no longer cook. They were also interested in the Social Adult Day Care Program. A COMPASS assessment was completed and Mrs. S began attending the Social Adult Day Care Program (SADC) and both began receiving Home Delivered meals.

Her husband brought her to SADC in the mornings on the days she attended SADC and then OFA would transport her home in the afternoons. She thoroughly enjoyed attending the SADC program and this provided much needed respite for her husband. Her husband also was provided with information on Caregiver Services available to him through OFA. He was (and remains) a very caring and attentive caregiver who made sure his wife was engaged in her community and led a full life. They went to local plays together, attended ball games, concerts and also went on trips together with the local Senior Center.

Her husband was able to arrange in home respite for his through Catholic Charities and Eddy Alzheimer’s Services. The respite care was available several times a week in home (Mr. S had also utilized some private hire aides to help at home as their income allowed). The in home respite care made it possible for him to participate in social activities that gave him some much needed contact with friends. Using these services he was able to keep his wife home, safely, for quite some time. As the disease progressed and Mr. S found it very difficult to care for his wife at home and she was placed in a Nursing Home four years after we met her.

Estimated Savings: $104,268.50 (SADC, CM, HOM cost for a year= $8881.60 and Nursing Home cost for a year= 113,150).

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