

NYS Aging Services Network

- Comprised of 59 county based area agencies on aging (AAAs)
- Over 1,200 community-based partner organizations (subcontractors)
- Provides cost-effective, non-medical long-term services and supports in the homes and communities of at-risk older adults

Older Adults Social, Intellectual & Economic Contributions to NYS

- Older adults and baby boomers generate 63% (\$380 billion) of all the personal household income in NYS
- Almost 500,000 individuals ages 60+ provide 119 million hours of service at an economic value of \$3.35 billion annually
- No Wrong Door/NY Connects statewide advertising campaign will result in a significant increase in the demand for community-based services

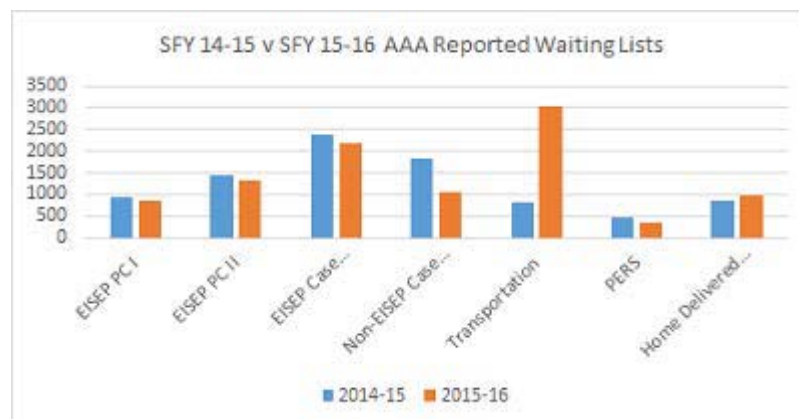
Modernizing Long Term Care Services and Supports for Older New Yorkers A Plan for the Future of New York

In 2015, 20 percent (3.7 million) of New York State residents are 60 years of age or older for the first time in history, and due to longer life and the aging of the baby boom generation, the “age wave” will accelerate during the next three decades. With more people living longer than ever before, the State faces both a challenge and an opportunity. By 2025, 51 counties will have 25% or more of their population over the age of 60.

The aging services structure has remained relatively unchanged since the Older Americans Act was enacted in 1965. The Older American Act provides funds to states primarily for care and services for those over the age of 60; however the aging network’s portfolio has expanded to assist other populations. Currently, State and Federal funding in the amount of \$207 million leverages an additional \$235 million in resources from local government, private fundraising, participant contributions and cost-sharing for aging services. The NYS Office for the Aging partners with 59 local Area Agencies on Aging (AAAs) that contract with 1,200-plus organizations locally to deliver cost-effective aging services (non-clinical long term services and supports) to at-risk older adults living in their homes and communities.

The increase in the older adult population, coupled with health care delivery changes including the expansion of NY Connects into a fully functioning NWD system, requires the aging services network to modernize to meet increasing demand and continue to be a vital component of New York State’s continuum of care for New York’s growing older population. The aging services network should be incentivized the same way New York’s health care system is being incentivized through value based payment reform.

The Association on Aging in NY, LiveOn NY, and Lifespan, all nonprofits dedicated to supporting the work of the aging services network, have developed a \$177 million comprehensive multi-year plan to help modernize New York’s aging services network. The community-based services – transportation, personal home care, home delivered meals, case management, and caregiver support – provided by the aging services network and the State’s area agencies on aging allows New Yorkers to preserve their independence longer and delays nursing home admissions (NHDM, 2011). The plan, with the following infrastructure improvements, seeks to ensure an increasing number of older New Yorkers receive the services they need to remain independent.



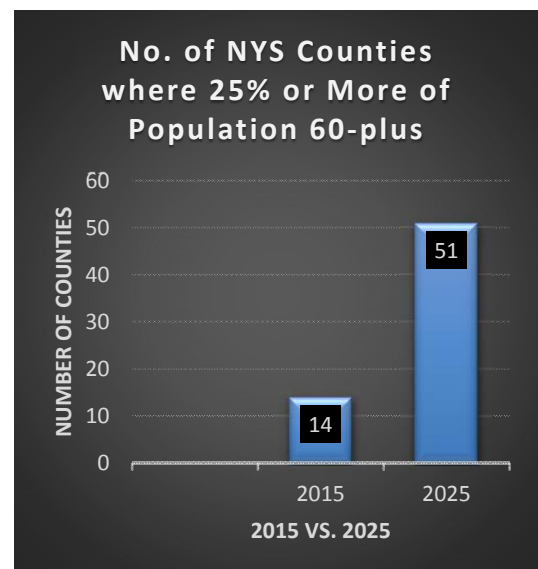
Modernizing New York's Aging Network – A \$177 million Plan for the Future of New York

- **NY Connects NWD Sustainability - \$28 million annually**
The federal BIP (Balancing Incentive Program) grant provides funds to expand and enhance NY Connects so that it becomes New York's No Wrong Door (NWD) for information and assistance for long term services and supports for both Medicaid and non-Medicaid individuals. The roll-out of the State's NWD has begun, but a fully functional, reliable NWD system for accessing unbiased information and assistance on long term services and supports will depend on a commitment of funding -- \$28 million annually – by New York State.
- **Community Services for the Elderly (CSE) – Additional \$15 million annually without local match**
Community Services for the Elderly (CSE) funds are used for a wide array of programs and services: transportation, adult day services, in-home care, personal emergency response systems, among others. The additional \$7.5 million added over the past two years has helped reduce waiting lists and ensure older New Yorkers receive critical community based-services, but waiting lists still exist and will likely grow as a result of demand generated by both an aging population and the expansion of NY Connects/NWD. There are over 9,700 older adults on waiting lists.
- **New York Elder Caregiver Support Program - \$25 million annually**
The New York Elder Caregiver Support Program, offered through the State's area agencies on aging (AAAs), provides a multifaceted system of support services for informal caregivers of older adults. Among the services offered are: respite (a top workforce issue), with home care and adult day care; one-on-one counseling; support groups; training; and education through public presentations at the community level. The additional funding proposed would build on the existing Elder Caregiver Support Program and provide for enhanced services for the four million-plus family caregivers in New York State whose voluntary unpaid care is worth an estimated \$32 billion annually.

- **Elder Abuse - \$10 million annually**
The hidden crisis of elder abuse is under-recognized, under-reported and under-prosecuted. According to one New York State study, 260,000 cases of elder abuse go unreported each year, and for every one case of elder abuse reported, 23 cases are unreported. Financial exploitation is the most common form of elder abuse with only one out of 44 cases reported. Preliminary reports from an OCFS study found the costs to investigate, prosecute, and provide services to victims costs NYS \$1.5 billion annually.

Community-based programs are on the front lines for connecting with elder abuse victims. They educate older adults about elder abuse prevention; provide social and legal services; link victims to resources, such as law enforcement and APS; work with families; help victims access public benefits; and run victim support groups. New York State currently provides less than \$1 million statewide for elder abuse services.

The Rochester-based Enhanced Multi-Disciplinary Team (EMDT) model program has recovered more than \$500,000 for financial elder abuse victims - more than the previous 10 years combined. Funding to expand EMDTs is needed statewide.



Source: Woods & Poole Economics, Inc., 2014 State Profile

- **Aging Services Workforce Investment - \$35 million over 2-3 years**

New York State's aging services network has historically relied on volunteers to deliver its Health Insurance Information Counseling Assistance Program, Long Term Care Ombudsmen Program and Home Delivered Meals program. While volunteers are and will always be critically important to the aging network service delivery system, volunteers cannot be a substitute for professional staff. The aging services workforce needs to be strengthened and expanded.

In addition, 700 senior centers across NYS provide integral health and wellness programs, such as evidenced-based preventative health programs, but these centers lack funding support from the Federal and State governments. They need funding to sustain and enhance their staffing and programs as well as strengthen their infrastructure to serve the increased needs – and numbers – of older New Yorkers.

- **Network Staff Core Competencies Training -\$500,000 annually**

To support a growing number of older adults, caregivers and persons of all ages with disabilities, ensuring that the aging services network meets basic core competencies is a priority. These funds will help to develop a comprehensive core competencies training program for those working in the network.

- **Expand Pool of Case Managers Statewide by 500 over 2-3 years – \$35 million**

Individuals receiving services through the aging network are assessed to determine a care plan and cost sharing. With a shift in demographics from young to old, and a concentration on data analysis, area agencies on aging will require a new and expanded pool of case managers and Licensed Master Social Worker (LCSW) professionals.

- **Targeted EISEP - \$25 million annually without local match**

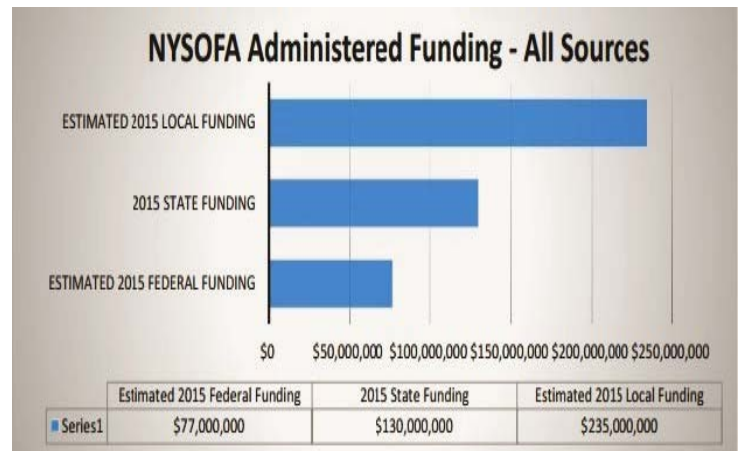
The Targeted Expanded In-home Services for the Elderly Program (TEP) will build on the successful EISEP system and provide communities with enhanced tools to divert nursing home placement through intensive case management, additional home care, community-based services and maximization of family supports, targeting older New Yorkers who are at imminent risk of Medicaid spend-down and nursing home placement.

- **Transportation – \$2.5 million annually**

Many AAA and nonprofit aging network partners utilize a volunteer based assisted transportation program while others have incorporated a system of paid drivers and mobility managers. Adequate funding is needed to expand and enhance these existing systems and ensure they are able serve the growing demand for rides for older New Yorkers. In order to achieve the state's goals of proper discharge planning, care transitions, reduction of hospital readmissions, and population health; it is important seniors are able to get to their medical appointments. Waiting lists for transportation have increased dramatically over the past year. In addition there are maintenance and operation needs on existing vehicles. As we look towards the future, there are also many innovative transportation and mobility models that could be explored by localities.

- **Technology Upgrades - \$1 million annually**

The aging network's IT systems are aging and in need of software and technology upgrades. State-of-the-art program management software should be utilized throughout the aging services network in order to increase efficiency and better coordinate services.



Source: 2015-19 New York State Plan on Aging (NYSOFA)

Aging Network Prevents Nursing Home Admissions

NYSOFA received a Community Living Program grant to target New Yorkers at risk of nursing home placement and at risk of spending down to Medicaid. The results are as follows:

- **89% of 114 participants did NOT** enter a nursing home during the program period
- The **actual monthly cost for all 114 participants was \$253,764** – compared to **\$788,538** if these individuals had spent down to Medicaid and either entered a nursing home or received home care.

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