

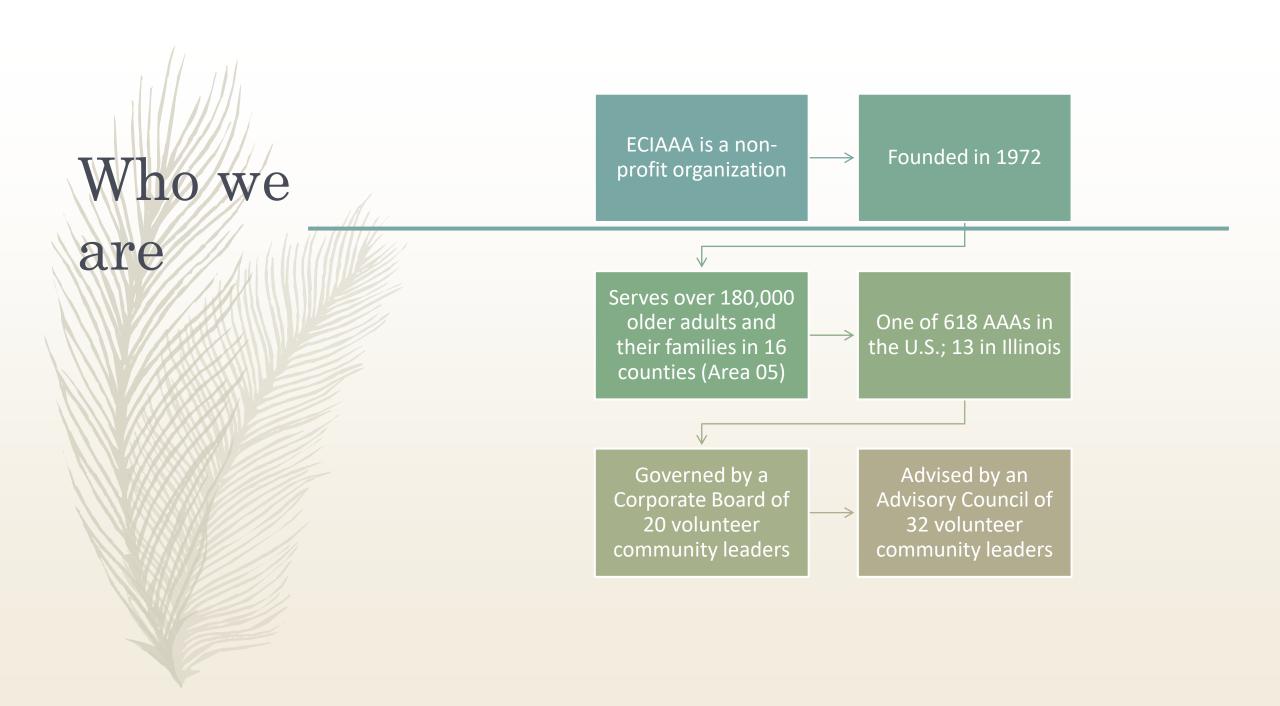
Susan C. Real, Executive Director



#0AM18 OLDER AMERICANS MONTH



ECIAAA Mission Statement: We are dedicated to enhancing the quality of life for Older Americans and their families by providing information about and access to a variety of services in their community in the 16 counties of East Central Illinois.



ECIAAA STAFF

Susan C. Real, Executive Director Susan H. Redman, Deputy Director-CFO Amanda Hyde, Planning & Grants Manager Kelly Coffee, Fiscal Manager/IT Manager John Thornburg, Grants Management Analyst

Brittany Schlink, Service Compliance Coordinator

Doug Gass, ISU Stevenson Fellow

Angie Baker, Regional Ombudsman Jen Hooker, Long Term Care Ombudsman Ryan Gannaway, Long Term Care Ombudsman

Sara Tutoky, Long Term Care Ombudsman Carolyn Wetzel, Long Term Care Ombudsman Susan Elizarraras, Project Manager CBO



Access Services

In-home Services

Community Services

Healthy-Aging Programs

Caregiver Support Programs



Federal Elder Rights Programs & APS

SHAP

SHIP

MIPPA

SMP



Long Term Care Systems Development

Senior Farmer Market Nutrition Program

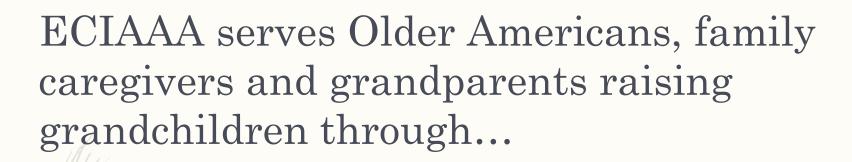
Community Based Options Demonstration Project



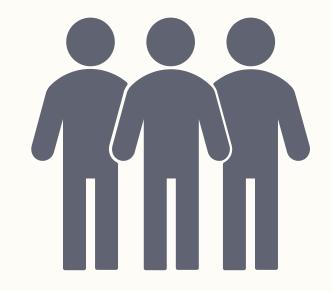
ECIAAA serves Older Americans, family caregivers and grandparents raising grandchildren through...

- Advocacy in Action
- Planning, Program Development and Coordination
- Supporting Community Programs on Aging
- Providing easy access to information, assistance, services and supports





- Developing community-based long term services and supports
- Advocacy for residents in long-term care facilities
- Responding to abuse, neglect and exploitation





Advocacy in Action!







ECIAAA Advocacy Agenda for FY 2019

ECIAAA is the regional focal point for advocacy on behalf of older Americans and caregivers in Area 05. ECIAAA is a member of n4a - the National Association of Area Agencies on Aging, and the I4A - the Illinois Association of Area Agencies on Aging. ECIAAA supports the following advocacy agenda for 2019:



Advocacy in Action – Federal Level

- Support higher federal appropriations for all Older Americans Act Programs.
- Support the preservation of the Legal Services
 Corporation, which provides legal assistance to low income older adults.
- Support the preservation of the Senior Health Insurance Program (SHIP).
- Support the preservation of the Senior Community Senior Employment Program (SCSEP).



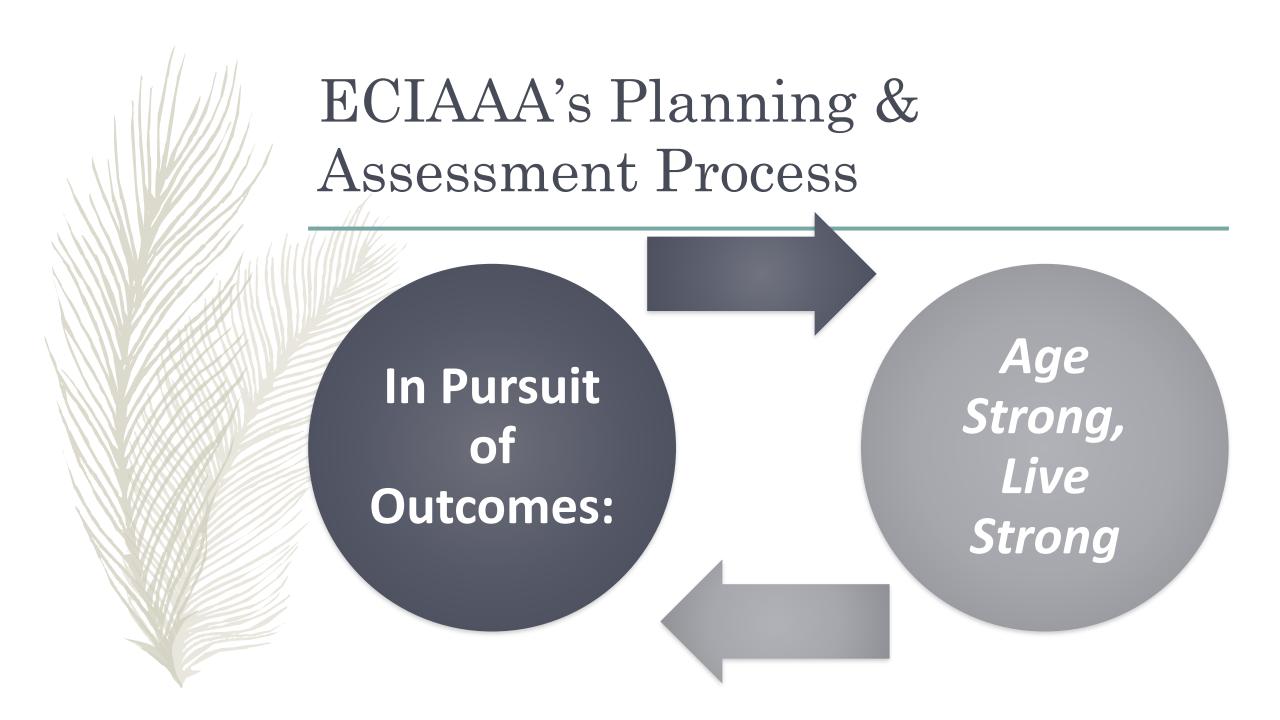
Advocacy in Action – Federal Level

- Support the preservation of the Corporation for National and Community Service, which includes the Senior Corps programs such as Foster Grandparents and RSVP.
- Support the preservation of the Low-Income Home Energy Assistance Program (LIHEAP) which provides financial assistance for utility bills.
- Support the preservation of the Community Services Block Grant program, which provides wrap-around services for older adults in many communities.



Advocacy in Action-State Level

- Support enhancements to the Community Care Program.
- Support increases in GRF allocations to implement the No Wrong Door System in PSA 05.
- Support increases to GRF allocations to home delivered meals to support program infrastructure.





ECIAAA Performance Outcomes FY 2017

- 20,225 older adults served in East Central Illinois
- \$4,392,511 expended in OAA funding and Illinois GRF monies
- Overall Cost Benefit
- If 25% of the clients served in FY 2017 were faced with nursing home costs at \$187 per day, OAA services saved the older persons and taxpayers nearly \$317 million



Older adults served by Coordinated Points of Entry/Senior Information Services are empowered to engage in services and improve their quality of life.

The Coordinated Point of Entry/Senior Information Services Program provided by the ECIAAA is resulting in older adults and disabled persons experiencing financial security, peace of mind, independence, and improving their overall health, well-being, and quality of life.



- Performance Results: Level of Service and Persons
 Served
- The CPoE/SIS provided 41,393 units/hours of service to 14,302 persons throughout the 16-county geographic service area.

Performance Outcome #1 — CPoE/Senior Information Services

Cost Benefit: CPoE/SIS Service Providers enrolled older adults in the following programs, saving East Central Illinois Medicare beneficiaries a total of \$6,902,779, to help pay on other necessities such as groceries, utilities, and home repairs.

PROGRAM	# OF ENROLLMENTS	COST SAVINGS
Medicare Part D	1,691	\$3,288,995*
SSA Extra Help (LIS)	653	\$2,612,000**
Medicare Savings Plan	623	\$1,001,784***
TOTAL		\$6,902,779



Older adults are experiencing independence and improved quality of life.

- 99% of participants contacting the CPoE/SIS found the information they were given to be helpful in resolving matters.
- Nearly 58% of the participants contacting the CPoE/SIS were seeking information and 54% requested services.
- 99% of participants were satisfied with the way their call was handled and 99.7% would recommend the service.



Older adults are experiencing independence and improved quality of life.

- Follow-up activities by Service Providers ensured that participants had a successful care transition between services and levels of care.
- The provision of Options Counseling enabled older adults to make decisions about living arrangements based upon their needs and the services that are available to them to help them continue living at home.



Caregivers are supported to enable them to continue caring for their loved ones.

The caregiver services provided by the ECIAAA are resulting in caregivers and grandparents raising grandchildren (GRG) accessing programs and services to support them in caregiving roles, and receiving counseling and/or participating in support groups to better equip them to cope with the responsibilities of caring for their loved ones. Caregiving services enable older adults to continue living in their homes.



- During FY2017, the ECIAAA budgeted \$321,984 for the federal Older Americans Act (OAA) Title III-E funds for Caregiver Advisory Services (CAS) and Grandparents Raising Grandchildren Services (GRG).
- Performance Results: Level of Service and Persons Served
- Service Providers provided a total of 7,058 units/hours of CAS service to 902 caregivers, and 2,374 units/hours of GRG services to 227 grandparents.



Cost Benefit: Although local data is not yet available to calculate costs, the AARP Public Policy Institute indicates the value of unpaid caregiving in the United States totals \$470 billion per year.

Nationwide, there are 43.5 million caregivers providing care to adults 18 years of age and older with a disability or illness. Sixteen million adult family caregivers care for someone who has Alzheimer's disease or other dementia. The value of unpaid caregiving exceeds the value of paid home care and total Medicaid spending in the same year.

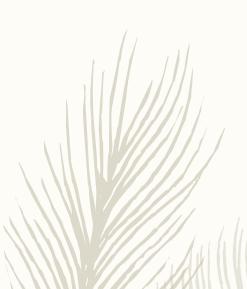


- Caregivers are enabling their loved ones to continue living at home.
- 71% of caregivers report the program has enabled them to provide care longer.
- 35% of caregivers indicate that without this service, their loved ones would be living in a nursing home.
- More than 87% of caregivers rate caregiver support services as good, very good, or excellent.
- Nearly 75% of caregivers indicate the support has helped them to be a better caregiver.



Older adults have improved food security and reduced social isolation.

Nutrition services provided by the ECIAAA are improving food security, increasing opportunities for socialization, reducing feelings of isolation, helping participants to eat healthier, make better food choices, and improve their health, promoting independence, and enabling older adults to live at home.



Performance Outcome #3 – Nutrition Services

Performance Results: Number of Meals and Older Adults.

The organizations provided a total of 774,775 meals to 12,528 older adults, 362,536 congregate meals to 9,200 older adults, and 412,239 home-delivered meals to 3,328 older adults:



Performance Outcome #3 – Nutrition Services

Cost Benefit:

Brown University's Center of Gerontology and Health Care Research in 2016 showed that the health care costs of Meals on Wheels recipients declined after they enrolled in a home-delivered meals program. Hospitalization costs fell by an average of \$362, \$1155, and \$1356 at the 30-, 90-, and 180-day time periods following enrollment. Nursing facility costs fell by \$244, \$652, and \$363 over the same time periods respectively.



Participants in the congregate and home-delivered meal programs experience improved food security.

- Nearly 59% eat at a site daily or at least weekly.
- 55% of congregate meal participants indicate the meal served at the site is their main source of food.
- 17% do not always have enough money or financial assistance to buy food.



Participants in the congregate and home-delivered meal programs experience improved food security.

- 13% in the past have had to choose between buying food and paying their medical bills, and another 12% have had to choose between buying food and paying their utility bills.
- Nearly 10% indicate they had to skip meals because they had no food or money.



Meal participants are eating healthier, making better food choices, and improving their health.

- 87% of congregate meal participants and nearly 92% of home-delivered meal recipients report they eat healthier.
- 98% like the meals served at their congregate site. 95% rate the food as good, very good, or excellent, and 85.9% of home-delivered meal recipients like the way the food tastes either most or all the time.
- 96% of the participants would refer a friend to the program.



Meal participants are eating healthier, making better food choices, and improving their health.

- Slightly more than 80% of congregate meal participants indicate they feel better and 76% report improved health.
- 66% of home-delivered meal recipients think their health has improved and indicate they feel better.
- 67% of participants indicate they make more healthful and nutritious food choices because of participating in a congregate meals program.



Performance Outcome #4 — Legal Services

Older adults receive specialized legal services to address their legal needs.

Legal services provided by the ECIAAA are promoting the independence and financial stability of older persons by increasing their knowledge and understanding of consumer, legal, medical, and financial rights and responsibilities.



Performance Outcome #4 — Legal Services

Performance Results: Level of Service and Older Adults Served

 The Land of Lincoln Legal Assistance Foundation and Prairie State Legal Services assisted 581 older adults during FY2017, providing 3,495 units/hours of legal assistance.

Cost Benefit: On average, private attorney fees are 2.4 times the cost of Service Provider fees. Funds provided by the ECIAAA enabled Service Providers to provide 1,245.8 hours of legal services to older adults. This resulted in a cost savings of \$126,614 when program cost is compared to private attorney fees.



Performance Outcome #4 — Legal Services

Older adults who work with attorneys understand the legal importance of advance directives, and benefit from peace of mind when choosing their future financial and medical decision-makers.

- Prairie State Legal Services reported that 100 percent of the cases for which they provided legal representation in negotiations, hearings, or court appearances resulted in fully favorable outcomes for clients.
- A survey of the clients Prairie State Legal Services advised indicated 98% understood the advice given.



Performance Outcome #4 — Legal Services

Older adults who work with attorneys understand the legal importance of advance directives, and benefit from peace of mind when choosing their future financial and medical decision-makers.

- The Land of Lincoln Legal Assistance Foundation provided either brief services or extended representation for 20 clients in either obtaining or maintaining health and economic benefits.
- The Land of Lincoln Legal Assistance Foundation provided either brief services or extended representation, and provided services to 67 seniors aimed at protecting their income.
- Prairie State Legal Services represented several clients in negotiations and in court to prevent eviction and maintain subsidized housing benefits.



Older Americans will have successful transitions between all services and levels of care.

Results: CRIS Healthy-Aging Center, in conjunction with Carle Foundation Hospital and Presence Health, is conducting a program aimed at providing community-based services to prevent hospital readmissions of Medicare patients within 30-days.



Older Americans will have successful transitions between all services and levels of care.

Results: During FY2017, 2,821 Medicare patients living in Champaign and Vermilion Counties were seamlessly transitioned from the hospital to in-home care. ECIAAA is awaiting evaluation information and remains committed to supporting care-transition services that bridge Medicare and human services.



Older Americans are empowered to improve their health by engaging in evidence-based, healthy aging program and services.

Results: In total, 295 older adults participated in the programs, attending a total of 3,277 individual class sessions. The programs included Chronic Disease Self-Management Program, Diabetes Self-Management Program, A Matter of Balance, Strong for Life, and Program to Encourage Active Rewarding Lives for Seniors.



Cost Benefit:

Based on healthcare costs savings as determined by the Centers for Medicare and Medicaid Services, participants in A Matter of Balance workshops saved \$70,444 in healthcare costs and, based on the cost-savings reported by BMC Public Health, participants in the Chronic Disease Self-Management Program experienced a savings of \$1,322.

ECIAAA wants to hear from you!



Have you or someone you know...

Received a home delivered meal?

Received help with a Medicare Part D application?

Attended a support group for family caregivers?

Obtained legal assistance to deal with a public housing issue?

Community-based programs serve as a lifeline for older adults, caregivers, grandparents raising grandchildren, and individuals with disabilities. State and federal funding for these services must be preserved and increased.

Your voice is vital and must be heard!



ECIAAA Conducted 12 County Conversations from January 12, 2018 through February 5, 2018.

Total Attendees – 205

Locations – Majority of the sites were local senior centers



Objective I

Presented the FY 2017 Performance Outcomes Report to Constituents on Older Americans Act Services - Legal, Nutrition, Caregiver Advisory and CPoE/Senior Information Services.



Objective II

Obtained input from participants how ECIAAA can improve the OAA services provided, and how ECIAAA can improve OAA service delivery.



Objective III

Served as an advocacy platform to inform lawmakers how vital these programs are to their constituents and that Older Americans Act services must be preserved and increased!



Questions Asked...

HOW CAN WE IMPROVE THE OAA SERVICES PROVIDED?

HOW CAN WE IMPROVE OAA SERVICE DELIVERY?

Senior Information Services/Coordinated Points of Entry (SIS/CPoE)

- 1. The PSA 05 SIS/CPoE Program needs a Statewide Brand similar to the United Way Brand/Logo which is easily recognized by the public.
- Increased federal and state funding is needed to respond to the increased demand for services.
- 3. OAA must allow Service Providers to report under NAPIS the SHAP services provided to individuals with disabilities who are under 60 years of age.

Senior Information Services/Coordinated Points of Entry (SIS/CPoE)

- 4. Reinstate "Gap-Filling" services to allow SIS/CPoE programs to provide one-time support services to clients in need.
- 5. Service Providers and participants support the current SIS/CPoE Service Program Design as implemented by ECIAAA in FY 2011.

Senior Information Services/Coordinated Points of Entry (SIS/CPoE)

- 6. SHIP Counselors provide many important services that are not available online or through IDOA's Senior Helpline.
- 7. Individuals with disabilities are a large portion of the SIS customer base. Resources are being shifted from SIS to SHAP to address the demand.
- 8. Ethnic diversity is increasing in all communities ECIAAA needs to ensure services are targeting diverse groups.

Senior Information Services/Coordinated Points of Entry (SIS/CPoE)

9.Technology needs have outpaced the availability of federal, state and local funding.

10. Long-term care facilities (ALFs, SLFs and SNFs) are relying on SIS/CPoE providers to provide benefit access services and support services to their residents.

County Conversations Summary Caregiver Advisory Services

- 1. Participants reported the need to implement online support groups and online Evidence-Based Healthy Aging classes (CDSMP & DSMP).
- 2. More Respite Services are needed, specifically Respite Services for Grandparents Raising Grandchildren.
- 3. Reinstate "Gap-Filling" services for Caregivers and Grandparents Raising Grandchildren to provide one-time support services to those in need.



Caregiver Advisory Services

- 4. Service Providers and participants support the current Caregiver Advisory Program Service Program Design as implemented by ECIAAA in FY 2002.
- Participants reported difficulty in finding affordable in- home care services for care recipients.
- 6. Participants reported the need to encourage early access to support groups the key is to have caregivers access services before the caregiver is completely worn down and desperate for help.



Caregiver Advisory Services

- 7. Caregiver Advisors reported the continued need to find legal support for Grandparents Raising Grandchildren seeking guardianship.
- 8. Caregivers & Grandparents Raising Grandchildren need more organized 'Nights Out of the House' to provide meaningful support.
- 9. Changes to the DHS system (Regional HUBS) have made Public Aid and Medicaid cases for Caregivers and GRG's much more difficult and time-consuming for the Caregiver Advisors.



Caregiver Advisory Services

10. Caregiver Advisory Programs provide services to GRGs under 55 which cannot be reported under OAA's NAPIS Reporting System.

11. Caregiver Advisory Programs report the circumstances GRGs become children caregivers have resulted in a negative stigma which prevents acceptance of services.



- 1. A need for increased funding is clearly evident however lawmakers must understand that the expectation to increase home-delivered meals comes with a cost.
- 2. Nutrition Providers must also invest in their infrastructure, such as replacement of central kitchen equipment and meal delivery vehicles, with increased funding.



- 3. Restaurant programs have been successful in increasing congregate participation, but are more expensive to operate.
- 4. Participants reported no recommendations for changes to the current service delivery design for Nutrition Services. Nutrition Providers reported the need for more volunteers.



- 5. Nutrition Providers reported that the implementation of the Dietary Reference Intake (DRI's) nutritional requirements have not affected participants' satisfaction with OAA meals.
- 6. OAA Nutrition Programs require to match their operational budgets with local donations Nutrition Providers reported the need for better communication of how important these donations are to ensure nutrition services continue.



- 7. Nutrition Providers reported a need for congregate meals on weekends and holidays.
- 8. Nutrition Providers reported a need to expand service delivery to rural areas.
- 9. Nutrition Providers requested more funding to provide more highly specialized diets to those in need.
- 10. The Nutrition Provider for Vermilion County reported that they have met their capacity for providing home-delivered meals a waiting list has been established for HDM clients.



Legal Services

- 1. Legal Service Providers are diversifying caseloads.
- 2. There is a need for GRG Guardianship assistance.
- 3. More outreach is needed to younger individuals to plan for legal issues that come with Aging.
- 4. Guardianship cases are in demand.
- 5. Denial of public benefits cases are in demand.
- 6. Uncertainty of funding at the federal level affecting OAA legal services.



Community Issues Affecting OAA Services Unmet Needs – PSA 05

- 1. Energy Assistance
- 2. Home Delivered Meals
- 3. Dentures
- 4. Residential Repair & Renovation
- 5. Mental Health Counseling
- 6. Senior Companion
- 7. Yardwork/Snow Removal

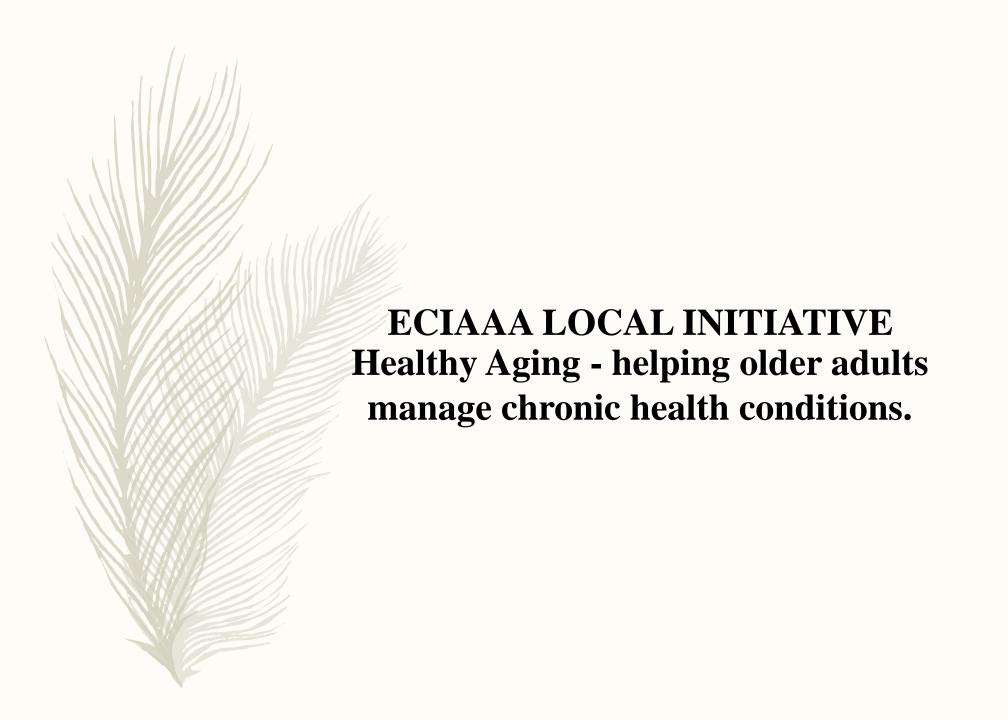


Local Funding – PSA 05

- 1. United Way Agencies are no longer prioritizing senior services in several counties.
- 2. United Way of Macon County is targeting resources to support the 211 Information System.
- United Way in McLean County has received a significant decrease in campaign donations (50%) due to competition for charitable donations.
- 4. Many municipalities are cutting social service funding.
- 5. Diversity is needed when raising local funds.

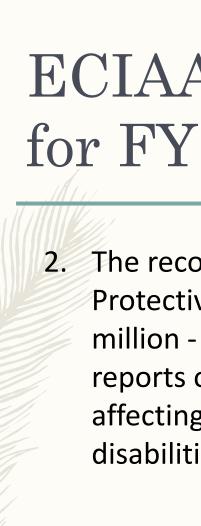


Statewide Initiative
Enhance Illinois' Existing
Community-Based Service
Delivery System to Address
Social Isolation among Older
Adults





1. The recommended Illinois General Revenue funding level for Home Delivered Meals is budgeted at \$21,800,000 – which is budgeted at the FY2018 level to maintain the provision of 6.2 million meals.



2. The recommended funding level for Adult Protective Services is budgeted at \$22.9 million - to respond to 18,372 projected reports of abuse, neglect and exploitation affecting persons 60+, and persons with disabilities ages 18 to 59.



3. The recommended funding level for the Long-Term Care Ombudsman Program (LTCOP) is budgeted at \$8.25 million.



4. ECIAAA must comply with federal Older Americans Act statutory obligations to fund categorical or specified services, e.g., III-B Support Services – including Legal Assistance, III-C Nutrition Services – including Congregate and Home Delivered Meals, and Title III-E Caregiver Support Services – which includes Caregiver Advisory and Respite Services.



5. ECIAAA must comply with a federal Administration on Aging (AoA) requirement that requires all Title III-D funds be used to fund evidence-based services that comply with AoA's Highest Level Criteria.



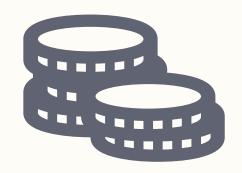
- 6. OAA allows an AAA to apply for 10% of total Title III-B and Title III-C for the cost of administration.
- 7. An AAA will apply for Title III-B funds for the cost of administrative-related direct services including: advocacy, program development, and coordination.



8. ECIAAA must stay within the 15% transferability of the AAA's allotment for III-B and III-C. ECIAAA must stay within the 15% transferability of the AAA's allotment for III-C1 and C2. If transfers exceed these required limits, the AAA must submit an acceptable justification to IDOA for the higher amount.

Contingency Planning

- In case of any contingency involving an increase or a decrease in federal and/or state funds, ECIAAA will comply with the intent of Congress and the Illinois General Assembly, and/or administrative directives from the Administration for Community Living/Administration on Aging and the Illinois Department on Aging.
- If the planning allocation is reduced for a specific revenue source, then funds would be reduced for programs and services which are directly related to that revenue source.



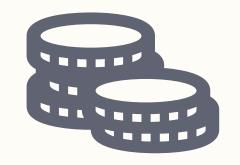


FCIAAA will give highest priority to sustain or increase federal OAA and State GRF funds for supportive services under the Area Plan for Coordinated Points of Entry/Senior Information Services, second priority to Legal Assistance, and third priority to evidence-based health aging programs.

 ECIAAA will adjust inter-fund transfers among OAA Titles III-B, C1 and C2 to sustain Coordinated Points of Entry/Senior Information Services and/or Home Delivered Meals, if necessary and feasible.

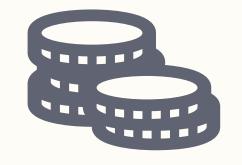


- ECIAAA will use additional GRF for home delivered meals to sustain current meal levels, keep pace with rising costs, and respond to increased demand for meals if feasible.
- Caregiver Advisory Services will be given the highest priority for OAA Title III-E funds. If ECIAAA receives cuts in federal funds for OAA Title III-E, the Agency will reduce expenditures for Respite Services.





- ECIAAA will use additional state funds for the LTC Ombudsman Program to comply with statutory requirements and program standards.
- ECIAAA will evaluate the impact of proposed cuts in federal and/or state funds on programs and services targeted to older adults and caregivers in greatest social and economic need, especially vulnerable older adults who need assistance due to limitations in their ability to carry out activities of daily living and/or being at risk due to abuse, neglect or financial exploitation.





Coordinated Point of Entry/ Senior Information Services

Service	FY 2019 Allocation
CPoE/SIS	\$1,036,670
Options Counseling (Demonstration Projects)	\$52,531
Total	\$1,089,201



NOTE: FY 2019 Funding Formula will include a base of \$5,000 per county. The remaining share will be distributed on the formula share per county.

Service	FY 2019 Allocation
Caregiver Advisory Services – Caregivers and Grandparents Raising Grandchildren	\$323,487



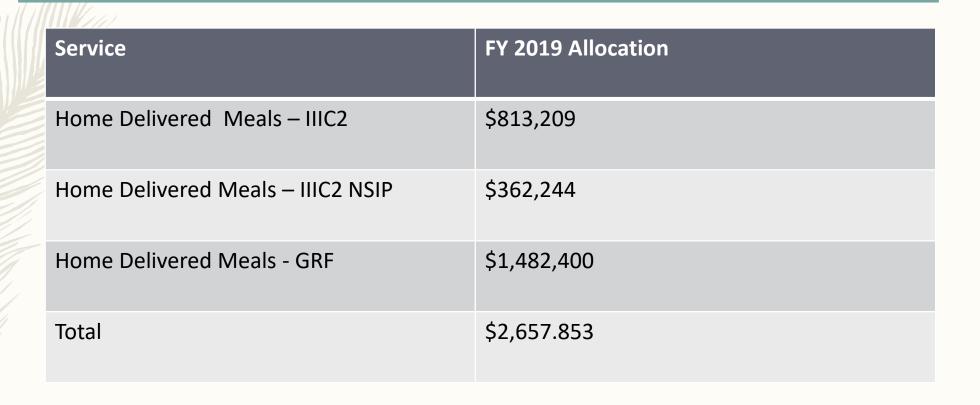
11/1/		
	Service	FY 2019 Allocation
W		
11/		
F	Respite Services	\$12,739



Nutrition Services

Service	FY 2019 Allocation
Congregate Meals – IIIC1	\$497,302
Congregate Meals – IIIC1 NSIP	\$62,224
Total	\$559,526







Legal Services & Healthy Aging-Evidenced Based Services

Service	FY 2019 Allocation
Legal Services	\$77,626 (III-B)
Chronic Disease Self-Management, Diabetes Self-Management and Strong for Life	\$22,957 (III-D)
Matter of Balance	\$24,074 (III-D)
Gerontological Counseling - PEARLS	\$36,700 (IIIB)

Request for Proposal Process FY 2019 – FY 2021

ECIAAA RFP Workshop Webinar – May 17, 2018 --10:00 – 12:00 noon

FY 2019 Applications
Due – COB June 22,
2018

Programs & Services
Committee of the ECIAAA
Corporate Board Meeting
& Applicant Testimony -August 1, 2018 -- 9:30 a.m.
- 3:00 p.m.

ECIAAA Corporate Board Meeting to Approve FY 2019 Funding Recommendations – August 15, 2018 – 9:30 – 12:00 noon

Tentative – ECIAAA FY 2019 Orientation Workshop – October 1, 2018 – 10:00 a.m.

Questions?





Thank You!

- Please send your comments to the attention of:
- Susan C. Real, Executive Director
- ECIAAA
- email: <u>sreal@eciaaa.org</u>
- Telephone: Work 309-829-2065 ext. 218
- Telephone: Cell 309-533-3232