



Western Reserve Area Agency on Aging

WRITTEN TESTIMONY

OHIO HOUSE OF REPRESENTATIVES

Finance Health and Human Services Subcommittee

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Respectively Submitted By:

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Thank you Chairman Mark Romanchuk, Ranking Member Emilia Sykes and members of the House Finance Subcommittee on Health and Human Services for the opportunity to testify before you in support of increasing the Senior Community Services Block Grant (ALI 490-411).

My name is E. Douglas Beach, Chief Executive Officer of the Western Reserve Area Agency on Aging (Western Reserve AAA). Western Reserve AAA is designated by the State of Ohio to serve older adults 60 years and over in Cuyahoga, Geauga, Lake, Lorain and Medina Counties. It is our mission to provide choices for people to live independently in the place they want to call home.

The Senior Community Services Block Grant funds community-based services to assist older adults to live independently in their own homes and communities for as long as possible. The Ohio Department of Aging uses these funds to draw down federal Older Americans Act dollars. These federal and state dollars fund an array of community based services for individuals age 60 and older such as transportation, personal care, and meals through the Area Agencies on Aging. Area Agencies on Aging conduct needs assessments and have the flexibility to direct these dollars where they are needed most.

One of the most needed services is home delivered meals. Home delivered meals are administered through the Area Agencies on Aging with local and regional meal providers and enable older Ohioans to live at home and access healthy, nutritious food. In light of a rapidly growing aging population, increasing costs and decrease in funding, meal programs face unprecedented challenges to meet the growing demand and need for meals. Wait lists are common, and to keep costs down and meet the need, the number of meals, frequency of

delivery, and whether the meals are hot and delivered daily or shipped frozen once a week are less desirable options that were explored.

The elderly, one of our most vulnerable populations, should be protected from the plight of food insecurity. According to the USDA, food insecurity means a household-level economic and social condition of limited or uncertain access to adequate food. In 2014, nearly 8 percent (3.47 million) of Americans age 65 and older were living in food insecure households. Food insecurity is a growing reality. According to current estimates, the share of food-insecure older adults will increase 50 percent by 2025 when the youngest of the Baby Boom generation reaches age 60.

As an advocate, I am deeply concerned that a report, *The State of Senior Hunger in America 2014*, ranked Ohio number one in the Midwest and 10th nationwide for food insecurity among our older adults. Too many older adults in Ohio are left behind, alone and hungry, struggling to stay independent and healthy. In our planning and service area, over 460,107 people are 60 and older, 131,165 live alone and over 42,098 live in poverty. For many of these seniors, they are at greater risk of food insecurity simply due to lack of resources.

What is clear is that nutrition programs are necessary for the health and well-being of our older adult population. Many older adults have to make difficult tradeoffs between eating, buying medications or paying bills. When diverting money from food to pay for other necessities, food-insecure older adults are more likely to be in fair or poor health, experience depression, or have limitations in their Activities of Daily Living (ADLs) which are those fundamental activities, such as eating, dressing, and bathing, that individuals typically can

perform independently. They may also lack transportation, have mobility limitations or experience financial barriers to obtaining nutritious foods.

Home delivered meals program enable seniors to eat nutritious meals on a regular basis, and allows them to preserve their dignity, health, and quality of life during their later years. Additionally, by giving seniors the nutrition they need on the front end, these programs also save the state dollars on the back end by reducing burdensome medical costs and ease stress on families trying to care for their aging loved ones. A Brown University study, *More than a Meal*, found that states that invest more in delivering meals to seniors' homes have lower rates of such "low-care" seniors in nursing homes, saving Medicaid dollars.

Meals as well as other home and community based services, is one of the simplest, yet most effective programs to help low-income seniors stay in their homes and out of hospitals and nursing homes. Malnutrition costs the U.S. an estimated \$157 billion annually — \$51.3 billion for those 65 or older. Western Reserve AAA alone has served 602,108 fewer meals in 2015 than 2002.

Another benefit of the services funded through the block grant is combatting senior isolation. Senior isolation is something that is only just recently being recognized as having serious health impacts. Prolonged social isolation can equal the health risks of smoking 15 cigarettes a day. Daily visits from meal providers, access to transportation for social events and interaction, personal care services, adult day services and care coordination are all ways we can address senior isolation. For example, in a recent national study, those who received daily-delivered meals experienced the greatest improvements in health and quality

of life indicators over the study period compared to those who received frozen meals once a week and those who did not receive meals at all.

The Senior Community Services Block Grant (ALI 490-411) has been reduced from \$15,974,463 in SFY 2001 to \$7,310,844 in SFY 2016, a 54% funding reduction. HB 49 proposes that the Senior Community Services Block Grant is flat funded for the next two years, further eroding our ability to serve more older adults. We ask you to restore this flexible funding to \$15 million per state fiscal year, to better position the state and our communities in meeting the growing needs of vulnerable older Ohioans. To measure its impact, we recommend that Scripps Gerontology Center conduct a program evaluation for \$150,000 each fiscal year. This evaluation will assess the effectiveness and efficiency of non-Medicaid interventions through the Senior Community Services Block Grant along with improved health outcomes and subsequent additional Medicaid savings.

Thank you members of the Finance Subcommittee on Health and Human Services for the opportunity to offer testimony in support of increasing the Senior Community Services Block Grant funding.