



Ohio Association of Area Agencies on Aging
Advocacy. Action. Answers on Aging.

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TESTIMONY BEFORE
THE OHIO SENATE
FINANCE SUBCOMMITTEE ON HEALTH AND MEDICAID

Wednesday May 17, 2017
Beth Kowalczyk, Chief Policy Officer
Ohio Association of Area Agencies on Aging

Chairman Hackett, Vice Chair Tavares, and members of the Committee, thank you for the opportunity to testify on H.B. 49 today. I am Beth Kowalczyk, Chief Policy Officer for the Ohio Association of Area Agencies on Aging (o4a).

Our Association represents the twelve regionally-based Area Agencies on Aging (AAAs) in Ohio (ten of which are nonprofit organizations) that fund, plan, and coordinate services for, as well as advocate for, older adults and their families throughout Ohio. The Area Agencies on Aging were established under the federal Older Americans Act in 1973 to serve as the “on the ground” organizations charged with assisting older persons to live with independence and dignity in their homes and communities. The Area Agencies on Aging have over 40 years of experience serving their communities.

Last week Cindy Farson, Director of the Central Ohio Area Agency on Aging, testified on the subject of managed long term services and supports, and articulated o4a’s concerns based on three years’ experience with MyCare Ohio, which includes an MLTSS component. The Area Agencies on Aging have a long history of doing what’s best for older Ohioans and the providers who serve them, and advocating for and proposing solutions. That is why we have been supportive of an evaluation to determine how the problems of MyCare Ohio are to be resolved, so that when the time comes to move to MLTSS, consumers receive at least as good care as they currently receive under PASSPORT with minimal disruption in services.

That is why we are also currently engaged with the Department of Medicaid and the Ohio Association of Health Plans in ongoing discussions about how to address the problems that we all agree must be addressed before moving forward. Our goal is the best outcome for consumers and the providers who serve them, and we will continue to work towards that goal.

The Area Agencies on Aging’s other budget priorities include a cost-effective investment to enable more older Ohioans to remain independent in their homes. The Senior Community Services block grant works in tandem with federal Older Americans Act dollars, and local dollars where available, to enable Area Agencies on Aging to provide meals, transportation, personal care, home modification and other critical senior services for individuals who do not qualify for Medicaid either functionally and/or financially.

At its peak, the Senior Community Services block grant was at \$15 million per year; unfortunately, since 2014 it has remained at half that level, at \$7 million per year. The Administration's budget proposed level funding in the next two years, and the House actually cut the program by 1.5%, which would amount to a potential loss of 1,399 meals and 332 trips, at least as estimated by one of our Area Agencies on Aging. By restoring funding for the Senior Community Services line item to SFY 2001 levels -- Ohio can ultimately prevent or delay the entry into Medicaid. A small investment in this program will reap considerable benefits in health outcomes and Medicaid savings.

Also, we are appreciative of the House's inclusion of a modest increase in Adult Protective Services funding, from \$2.6 million to \$2,850,000 million per year (an additional \$250,000 each year). Unfortunately, this is still far less than what is needed to ensure that seniors in all counties are protected from elder abuse, neglect and exploitation. The APS line item is the only dedicated funding available to Ohio counties to combat elder abuse. Currently, each county receives only \$30,000 per year from this allocation, and the increase from the House budget would make that \$32,840 per county per year. For all but 3 counties, \$30,000 per year was an increase, and for some, a substantial one. This results in an inequity for seniors who may live in counties who are unable to identify additional local resources to support APS work.

Based on a 2010 study of family violence by the Ohio Family Violence Prevention Project, the number of likely elder abuse incidents ranged from 90,000 – 110,000 in one year. For Ohio's adult protective services system to be able to respond to the needs of the ever-growing senior population, we are advocating for at least an investment of \$65,000 per county to support a full time APS worker in each county, and total funding of \$10 million per year would enable counties to more fully support APS activities, from screening, investigation and prosecution, to providing case management and emergency services to stabilize victims and prevent recurrence, and to work with local interdisciplinary teams, and engage in educational and outreach activities.

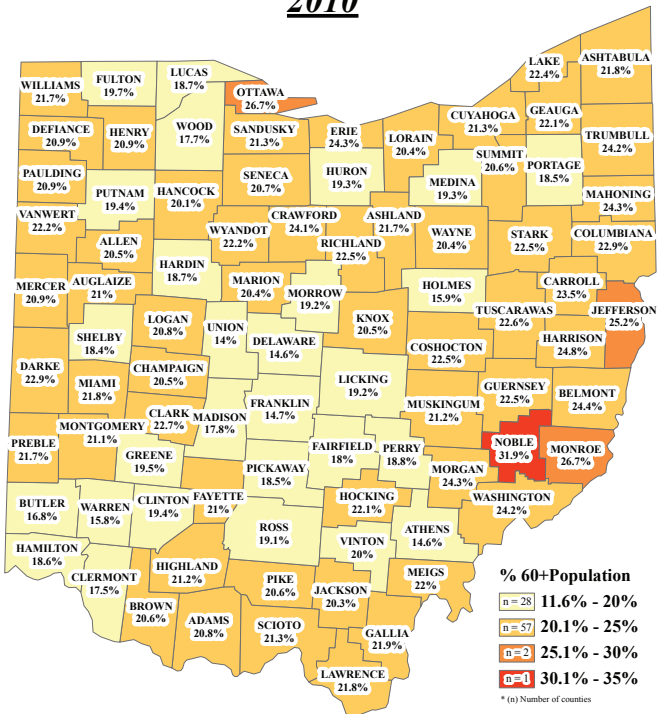
Failure to invest in APS will result in more costs down the road – in health care and Medicaid. Nationally, one in ten financial abuse victims will turn to Medicaid as a direct result of their funds being stolen from them. Victims of elder abuse are four times more likely to be admitted to a nursing home and three times more likely to be admitted to a hospital.

Ohio's 60+ population is growing. By 2030, adults 65 years and older will make up nearly 25% of Ohio's population, up from 14% today. The fastest growing segment, age 85+, is most likely to need long term services and supports. Cognitive impairment and the need for help with activities of daily living make seniors more vulnerable to abuse. Smaller cost effective investments in programs that can delay or divert from Medicaid services will enable the state to be better positioned to meet the growing needs of vulnerable older Ohioans.

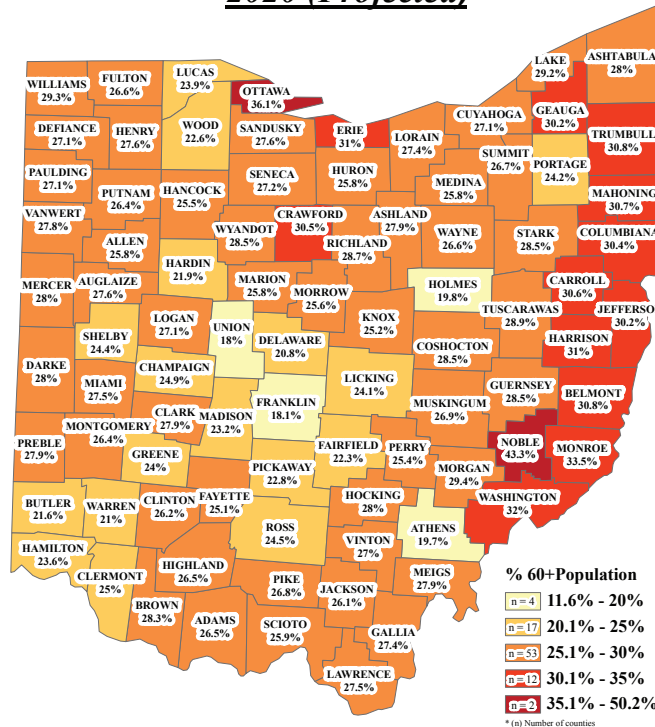
In addition to our specific budget priorities, we are deeply concerned about the shortage of home care workers and the ability of PASSPORT and assisted living waiver providers to provide quality services to seniors and persons with disabilities. The rates have not kept up with the cost of doing business. Restrictions on rate increases have been added in the House budget and will adversely impact access to quality services. Adequate reimbursement rates and direct care worker wages are critical to ensuring access to quality home and community based services for seniors and persons with disabilities.

Ohio's 60+ Population by County

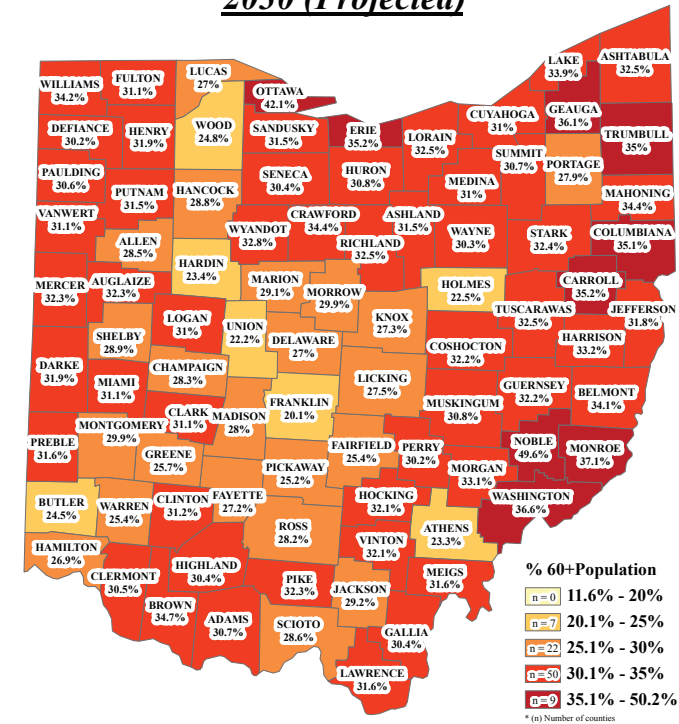
2010



2020 (Projected)



2030 (Projected)



Suggested citation: Scripps Gerontology Center 2015, Ohio 60+ population 2010-2030

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Notes:

Classification of percentages and color-coding are done using the natural break (Jenks) method, which is similar to quintile based on the 2000 - 2020 data. A gray-scale version for color-blind viewers is available upon request.

Data source

2010 data: 2010 U.S. Census Bureau (2011). Census Summary file 1 & Investigative Reporters and Editors, Inc. (2011). CENSUS.IRE.ORG online database
 2020 & 2030 data (projected): Mehdi-zadeh, S. et al. (2004). Profile and Projections of Ohio's 60+ population: A county by county study, Scripps Gerontology Center, Oxford, Ohio

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