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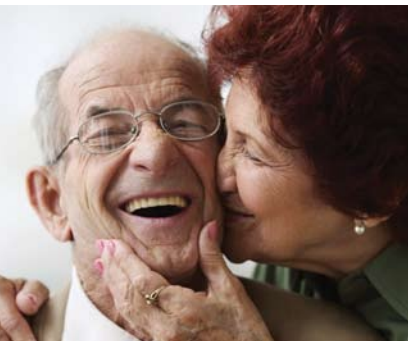

Investments in Change

Enhancing the Health and Independence of Older Adults

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

AoA
Administration on Aging

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Message from the Assistant Secretary for Aging

I am pleased to present to you *Investments in Change—Enhancing the Health and Independence of Older Adults,* a report that documents the work of the U.S. Administration on Aging (AoA) and the National Aging Services Network (the Network) that is making a positive difference in the lives of older Americans and those who care for them. Our country is at a critical juncture in its history where the numbers of people over age 65 are expected to double in the next 30 years. The good news is that older adults are living longer, healthier, and more productive lives. As a Nation, we must do everything we can to support their independence and provide opportunities for them to make meaningful contributions to our society.

This report highlights investments to:

- Provide a foundation of core home and community-based supportive services that enable older adults to remain in their own homes and communities
- Support the replication of innovative long-term care support options that provide individuals more choice and control in planning for their long-term care in the setting that is most appropriate to meet their needs
- Enhance the availability of community-based health, prevention, and wellness programs that can enable participants to adopt a more healthy lifestyle and decrease hospital admissions and the unnecessary use of other expensive health services
- Support and enhance State and local efforts to prevent and address the mistreatment of older adults

The efforts undertaken by AoA and the Network demonstrate that we can improve the lives of older persons and their caregivers by investing in our core programs and finding new and better ways of delivering services. We can innovate. We can explore. And most of all, we must listen to the people we serve as we carry out our mission to help seniors live out their lives with dignity and independence.

Kathy J. Greenlee
Assistant Secretary for Aging

Introduction

Today there are nearly 52.4 million people age 60 or older in the United States. By 2030, one in every five Americans will be age 60 or older. Individuals who are 85 and over are the fastest growing group of seniors, with their numbers expected to more than triple from 5.4 million to 19 million between 2008 and 2050. The demographic profile of America's older adults will also be more diverse in the years to come. These trends will produce challenges as well as great opportunities to harness the talents and energies of older Americans.

The mission of the Administration on Aging (AoA) is to help elderly individuals maintain their dignity and independence in their homes and communities through comprehensive, coordinated, and cost-effective systems of long-term care and livable communities across the United States.

AoA serves as the Federal agency responsible for advancing the concerns and interests of older people and their caregivers, and works with and through the National Aging Services Network (the Network) to carry out its mission by promoting the development of comprehensive and coordinated systems of home and community-based long-term care at the State and local level that are responsive to the needs and preferences of older people and their family caregivers. AoA's primary authorizing legislation is the Older Americans Act (OAA), which has played an important role for many years in shaping our Nation's health and long-term care system to help older adults learn about and access opportunities for maintaining their health and well-being in the community.

During FY2008, AoA worked with its partners at the national, state, tribal, and community levels to help strengthen the Nation's capacity to provide the opportunity for older people to fully participate in all aspects of society and community life, be able to maintain their health and independence, and remain in their own homes and communities for as long as possible. This FY2008 report highlights the investments undertaken by AoA to respond to the challenges of an aging population.

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SECTION

1

Providing a Foundation of Home and Community-Based Services

AoA's core programs provide a wide range of in-home and community-based supports that are helping older Americans remain independent, active, and at home. These programs serve as the foundation for the Network's responsibility to bring together and coordinate a variety of services and activities for older adults.

All OAA services are targeted at clients who are more vulnerable than the overall population of older Americans, and OAA clients tend to be among the oldest of the old.

HOME AND COMMUNITY-BASED SUPPORTIVE SERVICES

Home and Community-Based Supportive Services provides grants to States and Territories to fund a broad array of services such as transportation, meals, in-home services, and caregiver support services that contribute to the overall health and well-being of older adults. FY2008 data indicates the Network provided the following services:

- 29 million rides to doctor's offices, grocery stores, pharmacies, senior centers, meal sites, and other critical daily activities
- 33 million hours of assistance to seniors unable to perform activities of daily living (such as eating, dressing, or bathing) or instrumental activities of daily living (such as shopping or light housework)
- 9 million hours of care for dependent adults in a supervised, protective group setting

- 4 million hours of assistance in assessing needs, developing care plans, and arranging services for older persons or their caregivers
- 920,000 unit hours of service to seniors ranging from defense of guardianship to housing and service entitlements

NUTRITION SERVICES

The OAA Nutrition Program is designed to:

- Reduce hunger and food insecurity
- Promote socialization of older individuals including meaningful volunteer roles
- Promote the health and well-being of older individuals and delay adverse health conditions through access to nutrition and other disease prevention and health promotion services

AoA targets services to those in greatest social and economic need, with particular attention to low-income individuals, minority individuals, and those at risk of institutional care. Older adults served by OAA home-delivered meals and transportation services programs are older on average than the American elderly population over the age of 60. In FY2008, Home-Delivered Nutrition Services provided 146 million meals to more than 909,000 individuals, and Congregate Nutrition Services provided more than 94.8 million meals to more than 1.6 million seniors in a variety of community settings.

Nutrition services help millions of older adults receive the meals they need to stay healthy and decrease their risk of disability.

FAMILY CAREGIVING SUPPORT SERVICES

Families are the major provider of long-term care, but research has shown that caregiving exacts a heavy emotional, physical, and financial toll. The National Family Caregiver Support Program provides grants to States and Territories based on their share of the population age 70 and over, to fund a range of supports that assist family and informal caregivers to care for their loved ones at home for as long as possible. Almost half of all caregivers are over age 50, making them more vulnerable to a decline in their own health; one-third describe their own health as fair to poor.

These caregiver support services work in conjunction with other State and community-based services to provide a coordinated set of supports for the elderly and those who care for them. Studies have shown that caregiver support services can reduce caregiver depression, anxiety, and stress and enable them to provide care longer, thereby avoiding or delaying the need for costly institutional care.

Data shows that FY2008 funding enabled States to:

- Provide direct services to 633,372 caregivers
- Provide approximately 1.3 million contacts to caregivers, assisting them in locating services from a variety of private and voluntary agencies

- Provide more than 141,000 caregivers with counseling, peer support groups, and training to help them better cope with the stresses of caregiving
- Provide nearly 73,000 caregivers with 9.8 million hours of temporary relief—at home, in adult day care, or institutional settings—from caregiving responsibilities

Surveys found that 57% of caregivers report that AoA's support services definitely enabled them to provide care longer than otherwise would have been possible, and 77% reported that the services "helped a lot."

SERVICES FOR NATIVE AMERICANS AND NATIVE HAWAIIANS

2008 marked the 30th anniversary of Title VI: Grants to Native Americans. The program has grown from the initial 80 grants to 246 grants in 2008. Throughout its history, Title VI has provided a wide range of home and community-based supportive services that have enabled older adults to remain active in their communities. Grants are provided to eligible Tribal and Native Hawaiian organizations to promote the delivery of home and community-based supportive services, including nutrition services and support for family and informal caregivers, to American Indian, Alaskan Native, and Hawaiian elders. These programs are responsive to the cultural diversity of Native American communities and represent

an important part of the communities' comprehensive services.

FY2007 data highlights the valuable services provides by this program:

- Transportation services provided approximately 933,000 rides to meal sites, medical appointments, grocery stores, and other critical daily activity locations.
- Home-Delivered Nutrition Services provided more than 2.3 million meals to almost 21,000 homebound Native American elders, as well as critical social contacts that help reduce the risk of depression and isolation experienced by many homebound elders.
- Congregate Nutrition Services provided more than 2 million meals to more than 49,000 Native American elders in community settings, providing an opportunity for older adults to socialize and participate in a variety of activities including cultural and wellness programs.
- Nearly 34,000 units of in-home services helped Native American caregivers.
- Approximately 994,000 hours of outreach and information services empowered Native American elders and their families to make informed decisions about their care needs.
- More than 30,000 units of counseling and support group services helped caregivers caring for older adults.
- Approximately 71,000 units of respite services were provided to caregivers caring for older adults or grandparents caring for their grandchildren.

SECTION

2 Modernizing Long-Term Care

Since 2003, AoA has been supporting the replication of a variety of innovative programs that are increasing the capacity of the Network to help seniors remain healthy and independent. These innovations come directly out of the experience of States and communities in implementing the OAA core programs. AoA is supporting their replication as part of its strategy for strengthening OAA core programs nationwide.

AGING AND DISABILITY RESOURCE CENTER PROGRAM

The Aging and Disability Resource Center (ADRC) program, a collaborative effort of AoA and the Centers for Medicare & Medicaid Services (CMS), is helping States make it easier for consumers to learn about and access long-term supports and services. ADRCs are also serving as an entry point to all publicly administered long-term supports including those funded by Medicaid, OAA, and State revenue programs. The ADRC initiative is based on a model developed in Wisconsin and is part of a nationwide effort to restructure services and supports for adults and persons with disabilities.

Today there are more than 200 ADRC pilot programs operating in 47 States and Territories, with additional programs being added regularly, and AoA and CMS are committed to replicating ADRC programs in all the States and Territories. The goal is to have ADRCs serving as visible and trusted sources where people of any age, disability, or income residing anywhere in the Nation can turn to for information on, and assistance in accessing, the full range of long-term care options. ADRCs are a resource for individual

consumers, family caregivers, professionals seeking assistance on behalf of their clients, as well as for individuals planning for their future long-term care needs.

COMMUNITY LIVING PROGRAM

The Community Living Program (formally the Nursing Home Diversion Program) is helping State and Area Agencies on Aging modernize and transform the funding they receive under the OAA and other non-Medicaid sources into flexible, consumer-directed services consistent with the new long-term care provisions in the OAA. The program targets individuals who are at risk of nursing home admission and spend-down to Medicaid, and makes it easier for case managers to tailor services to the unique and changing needs of frail seniors and their family caregivers. It also gives consumers the option to direct their own care, including the option to hire their friends, neighbors, and select family members to provide their care.

There are currently 20 States participating in the Community Living Program. In FY2008, the Veterans Health Administration (VHA) joined with AoA and added $10 million to the program to expand its reach in 10 States to include veterans of all ages, including young disabled veterans returning from Iraq and Afghanistan.

CASH AND COUNSELING NEXT STEPS PROGRAM

Cash and Counseling is a model that provides individuals who are receiving publicly supported home and community-based

services with monthly budgets and the ability to determine what types of services they receive as well as the manner in which they receive them, including the ability to hire their own workers. The Cash and Counseling model, initially a three-State demonstration, is now being replicated in 11 additional States with the support of the Robert Wood Johnson Foundation, AoA, and other Department of Health and Human Services (HHS) partners.

As of December 2008, the 11 replication States have enrolled 6,620 individuals in Cash and Counseling. This is more than twice the number of individuals enrolled in December 2007. Of these 11 States, eight are implementing statewide projects, while three States are conducting pilots in limited geographic areas.

OWN YOUR FUTURE AND LONG-TERM CARE CLEARINGHOUSE

Own Your Future is a public education campaign launched in FY2006 to raise awareness among middle-aged adults about the importance of planning for future long-term needs. The campaign is a partnership between AoA, CMS, the Office of the Assistant Secretary for Planning and Evaluation, the National Governors Association, and the States.

To date, 19 States have conducted statewide campaigns that include targeted mailings to households with individuals ages 45 to 65. More than 10 million households have received mailings. Own Your Future also educates the

target audience about additional resources, such as the National Clearinghouse for Long-Term Care Information Web site: *http://www.longtermcare.gov.*

EVIDENCE-BASED DISEASE PREVENTION PROGRAMS

Through a collaboration with HHS agencies, the National Council on Aging, and more than 30 philanthropic organizations, AoA is helping the Network to implement evidence-based prevention programs that have proven effective in reducing the risk of disease, disability, and injury among the elderly. These programs empower seniors to improve their health through better exercise and nutrition and the improved self-management of their chronic conditions such as diabetes, arthritis, and heart disease. Since 2006, AoA and its partners have supported projects in 1,200 sites across 27 States that have reached more than 24,000 individuals. The three most utilized programs are Stanford University's Chronic Disease Self-Management Program, A Matter of Balance (a falls prevention program), and Enhance Fitness (a physical fitness program).

A key aspect of the Evidence-Based Disease Prevention Program initiative is to build sustained capacity for continued impact through Area Agencies on Aging, housing sites, churches, meal sites, community centers, libraries, clinics, and other locations within communities.

At-risk populations are the most important target of the program, as evidenced by the following demographics:

- 70% of participants are 70 years old or older
- 37% of participants are 80 years old or older
- 48% of participants live alone
- 30% are members of various racial or ethnic minority groups

DIABETES SELF-MANAGEMENT TRAINING PROGRAM

In partnership with the American Association of Diabetes Educators, American Diabetes Association, and Patient Education Research Center at the Stanford University School of Medicine, AoA is working to implement and sustain Stanford's Diabetes Self-Management Program in 14 community-based settings in an effort to provide outreach, education, and treatment to minority older adults who have been diagnosed with diabetes.

While enabling Medicare beneficiaries to access their Medicare Part B prevention benefits, this collaboration will work to significantly improve specific clinical measures associated with diabetes within targeted Hispanic and African-American communities, while reducing preventable hospitalizations among program participants.

ALZHEIMER'S DISEASE SUPPORTIVE SERVICES PROGRAM

The Alzheimer's Disease Supportive Services Program (ADSSP) provides competitive awards to States to expand the availability of community-level supportive services for persons with Alzheimer's disease and related disorders (ADRD) and their caregivers. In collaboration with the Network and its partner networks, the ADSSP supports efforts to create and maintain responsive, integrated, and sustainable service delivery systems for persons and families across the Nation impacted by dementias.

In FY2008, AoA awarded grants to nine States to demonstrate how existing evidence-based interventions that serve persons with ADRD and their caregivers can be translated into effective, supportive service programs at the community level. AoA also funded innovative approaches to improving the delivery of supportive services to people with ADRD and/or their caregivers in 19 States.

In these innovative projects, the grantees placed a particular emphasis on funding interventions that enhance the ability of individuals with ADRD to remain in the community and on increasing the number of interventions that meet the unique needs of persons who are in the early stages of ADRD.

SECTION

3 Enhancing Elder Rights Programs

Ensuring the rights of older adults and preventing their abuse, neglect, and exploitation continues to be a strategic priority for AoA. During FY2008, AoA enhanced the level of technical assistance provided to States to support and improve State and local efforts to prevent and address elder mistreatment.

PROTECTION OF VULNERABLE OLDER AMERICANS

AoA provides formula grants to States and Territories based on their share of the population age 60 and over. These programs have been used to train law enforcement officers, health care providers, and other professionals on how to recognize and respond to elder abuse, support outreach education efforts to increase public awareness of elder abuse, and support efforts of State and local elder abuse prevention coalitions and multi-disciplinary teams.

AoA provides Federal leadership in strengthening elder justice strategic planning and direction for programs, activities, and research related to elder abuse awareness and prevention. Partnerships are a key strategy for protecting the rights of vulnerable elders, both at home and in institutional settings.

LONG-TERM CARE OMBUDSMAN PROGRAM

Long-term care ombudsmen are advocates for residents of nursing homes, board and care homes, assisted living facilities, and similar adult care facilities. They work to resolve problems of individual residents and to bring about changes at the local, state, and national levels that will improve residents' care and quality of life.

Thousands of local ombudsman staff and volunteers work in hundreds of communities as part of statewide ombudsman programs, assisting residents and their families and providing a voice for those unable to speak for themselves. Program data for FY2008 indicates that about 9,000 certified ombudsmen volunteers devoted 800,000 hours to serving facility residents, and more than 1,300 paid ombudsman served in 572 localities nationwide. These volunteers and paid ombudsmen:

- Provided 128,400 individual consultations to long-term care facility managers and staff and participated in 21,000 resident council and 4,900 family council meetings
- Visited 79% of all nursing homes and 46% of all board and care homes, assisted living, and similar homes at least quarterly
- Conducted 7,257 training sessions in facilities on such topics as residents' rights
- Investigated more than 271,000 complaints made by 182,506 individuals and provided information on long-term care to another 327,000 people
- Resolved or partially resolved 77% of all complaints to the satisfaction of the resident or complainant

The five most frequent nursing facility complaints in FY2008 were:

- Unanswered requests for assistance
- Inadequate or no discharge/eviction notice or planning
- Lack of respect for residents, poor staff attitudes
- Quality, quantity, variety, and choice of food

- Poor administration and organization of medications

The five most frequent board and care and similar facilities complaints were:

- Quality, quantity, variety, and choice of food
- Poor administration and organization of medications
- Inadequate or no discharge/eviction notice or planning
- Equipment or building hazards
- Lack of respect for residents, poor staff attitudes

To support the program, AoA funds the National Long-Term Care Ombudsman Resource Center, which works to enhance the skills, knowledge, and management of State programs to enable them to handle residents' complaints and represent residents' interests. Additional information on the ombudsman program is available on the AoA Web site: *http://www.aoa.gov/AoARoot/AoA_Programs/Elder_Rights/Ombudsman*.

NATIONAL CENTER ON ELDER ABUSE

AoA funds and directs the National Center on Elder Abuse (NCEA), which operates as a multi-disciplinary consortium of collaborators with expertise in elder abuse, neglect, and exploitation. In FY2008, the NCEA:

- Continued its outreach by serving more than 1,700 subscribers to its newsletter

and more than 1,750 members to the Elder Abuse Listserv (an increase of approximately 16% over FY2007).

- Laid the groundwork for the Join Us in the Fight Against Elder Abuse campaign, the first national effort to raise awareness of elder abuse, neglect, and exploitation. The campaign launched in 2009.
- Responded to more than 1,200 individual public inquiries and requests for information.
- Effectively utilized technology to provide cost-effective trainings to more than 600 professionals though live Webcast forums on issues relevant to elder rights and consumer protection, and expanding the NCEA training library to more than 230 resources.

PENSION COUNSELING AND INFORMATION PROGRAM

In FY2008, the Pension Counseling and Information Program continued to promote the financial security of older individuals and enhance their choice and independence by empowering them to make wise decisions with respect to their pensions and savings plans. Currently, six regional counseling projects, covering 27 States, provide hands-on assistance in:

- Pursuing claims through administrative appeals processes
- Helping seniors locate "lost" pension plans
- Responding to queries about complex plan provisions

- Referring individuals to other professionals for assistance

There is also a National Pension Assistance Resource Center, which provides training, technical assistance, and consultation in support of Network efforts in this area. The resource center is also involved in nationwide outreach activities, online referral via PensionHelp America *(http://www.PensionHelp.org)*, and limited direct services to clients outside the counseling projects' service areas.

Since its inception in 1993, the Pension Counseling and Information Program has been highly successful, bringing nearly $100 million in pension and other retirement benefits into the hands of the workers, retirees, and their family members that the program has served. These recoveries translate into a return on Federal investment of well over five to one.

MODEL APPROACHES TO STATEWIDE LEGAL ASSISTANCE SYSTEMS

The Model Approaches to Statewide Legal Assistance Systems grant program helps States implement efficient and well-integrated service delivery systems that increase access to legal services for older adults most in need. Model Approaches projects in 13 States are currently involved in strengthening and leveraging existing legal services resources, improving stakeholder involvement, and empowering seniors to gain streamlined access to legal assistance programs. Key partners in the Model Approaches projects are senior legal helplines that offer a convenient and cost-effective way to provide older adults with free legal advice.

Examples of how senior legal helplines provide valuable assistance include:

- A Spanish-speaking 70-year-old man called the senior legal helpline in Connecticut because a lien had been placed on his home as a result of his identity being stolen. The helpline advocate assisted the client with filing identity theft reports with the police, Internal Revenue Service (IRS), Federal Trade Commission (FTC), credit reporting agencies, and debt collectors. The lien was subsequently removed from the man's home, and his IRS records and credit reports were cleansed.

- The daughter of an older woman in a nursing home contacted the senior legal helpline in Michigan for help. The nursing facility had informed them that they would no longer provide medical care for the mother. The helpline attorney provided advice on the client's rights and contacted the long-term care ombudsman and the local attorneys to assist. With all of these parties working together, the client's rights were protected and the client was able to be relocated to another facility.

NATIONAL LEGAL RESOURCE CENTER

The National Legal Resource Center (NLRC) serves as a centralized access point for a national legal assistance support system for legal and aging services networks. The purpose of the NLRC is to empower legal and aging services professionals and advocates with the resources necessary to provide high-quality legal assistance to seniors who are facing direct threats to their ability to live independently in their homes and communities. Five organizations are currently funded as collaborating organizations under the NLRC:

- National Senior Citizens Law Center *(http://www.nsclc.org)*
- National Consumer Law Center *(http://www.consumerlaw.org)*
- The Center for Social Gerontology *(http://www.tcsg.org)*
- The Center for Elder Rights Advocacy *(http://www.legalhotlines.org)*
- American Bar Association—Commission on Law and Aging *(http://www.abanet.org/aging)*

Key examples of how NLRC collaborating organizations have helped professionals and advocates to protect the rights of older consumers include:

- A staff attorney from the NCLC assisted a local attorney representing a couple in their late 70s facing foreclosure due to a predatory adjustable rate mortgage. The NCLC staff attorney found violations of Federal and State laws that were used to defend the foreclosure action.

- A staff attorney from the National Senior Citizens Law Center (NSCLC) assisted a 75-year-old woman whose Social Security retirement benefits had been unlawfully suspended. She was not allowed to appeal and went without benefits for three years, all while on oxygen 24 hours a day. NSCLC assisted local attorneys to restore her benefits and back payments. She is now able to live securely in her own home.

SMP PROGRAM

Since the mid-1990s, AoA has partnered with CMS, HHS Office of Inspector General, and U.S. Department of Justice in a Government-led effort to fight fraud, error, and abuse in the Medicare and Medicaid programs. The SMP Program seeks to empower seniors through increased awareness and understanding of health care programs and helps to protect them from the economic and health-related consequences associated with Medicare and Medicaid fraud, error, and abuse. During FY2008, close to 4,700 SMP volunteers worked to share the SMP message of "Protect, Detect, Report" with Medicare beneficiaries, family members, and caregivers.

The most recent program data demonstrates the success of the program since its inception:

- Almost 2.6 million beneficiaries have been educated during group educational sessions led by SMP staff or volunteers.
- More than 1 million one-on-one counseling sessions were held with or on behalf of a beneficiary.
- Close to 22 million people are estimated to have been reached through more than 63,000 community education events conducted by SMP staff or volunteers.
- Almost $106 million in Medicare and Medicaid funds recovered, beneficiary savings, and other savings have been attributed to these projects as a result of documented complaints.

NATIONAL CONSUMER PROTECTION TECHNICAL RESOURCE CENTER

The National Consumer Protection Technical Resource Center provides training, technical assistance, and support to SMP grantees. In FY2008, the Center continued to educate SMP project staff on issues related to Medicare and Medicaid fraud, error, and abuse, targeting hard-to-reach populations, volunteer training and support, and numerous other subjects. The Center accomplishes this through teleconferences, training Webinars, monthly newsletter, and timely consumer information alerts via the SMP network listserv.

The Center's mentoring program provided peer training and support to new SMP projects and project directors. The Center maintains a comprehensive Web site, SMP Locator, and information library for SMPs, seniors, and the general public at *http://www.smpresource.org*.

Annual Senior
Picnic

SECTION

4 Expanding Access and Outreach

AoA is committed to identifying and supporting promising practices that advance person-centered access empowering older adults, especially vulnerable seniors, to make informed choices about their care needs.

IMPLEMENTING THE MEDICARE MODERNIZATION AND IMPROVEMENT ACT

In FY2008, AoA continued its critical partnership with CMS to implement the Medicare Modernization and Improvement Act. This collaboration recognizes and utilizes the strength of the Network to provide specialized, targeted outreach to meet the needs of Medicare beneficiaries. AoA has continued to partner on a variety of outreach activities that have assisted beneficiaries in learning about and accessing new Medicare benefits, including the Limited Income Subsidy (LIS) outreach campaign and pilot programs to develop Medicare awareness among those aging into Medicare.

In partnership with the National Association of Area Agencies on Aging (n4a), AoA and CMS targeted hard-to-reach areas on the LIS Campaign through sub-contracts to 31 community-based organizations (CBOs). The CBOs were enormously successful in reaching individuals with the greatest need, and performed approximately 40,000 individual counseling sessions, provided approximately 2,000 group events, and held almost 1,500 media activities. The local programs partnered with more than 450 service providers in their local areas and developed significant media campaigns,

which have greatly increased local beneficiary and community awareness of the LIS and the overall services they provide to older adults.

In recognition of the efforts of the Network to reach out to and educate Medicare beneficiaries about all of their Medicare benefits, Congress included funding through AoA to State Units on Aging, Area Agencies on Aging, and ADRCs in the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008. The Network is partnering with the State Health Insurance Assistance Programs to provide a collaborated approach to assist in Medicare beneficiaries on LIS and the Medicare Savings Programs.

NATIONAL CENTER FOR BENEFITS OUTREACH AND ENROLLMENT

In FY2008, AoA provided funding to establish the National Center for Benefits Outreach and Enrollment. Recognizing that many older Americans are eligible for but are not receiving a variety of Federal and State benefits, the Center is designed to address this issue through a number of activities. During its first year, the Center will:

- Increase the use of Web-based decision support, screening, and enrollment tools among the aging and disability services networks, consumers, families, and caregivers
- Foster the use of cost-effective benefits outreach and enrollment strategies by aging and disability services providers to find and enroll people with limited means in public benefits
- Provide training and technical assistance to the aging and disability services networks regarding cost-effective, promising practices and other topics related to benefits outreach and enrollment
- Develop an online information clearinghouse on promising practices related to benefits outreach and enrollment

In addition, the Center is establishing community-based Benefits Enrollment Centers in 10 areas of the country designed especially to help seniors in need and people with disabilities find and enroll in all the benefits programs for which they are eligible.

ENHANCING MULTI-GENERATIONAL AND CIVIC ENGAGEMENT OPPORTUNITIES

While AoA has funded projects to support volunteer opportunities for seniors for many years, the 2006 amendments to the OAA recognized both the importance of volunteer assistance in aging programs and the talents that older persons can bring to critical local needs of national concern.

In June 2008, AoA signed a Memorandum of Understanding with the Corporation for National and Community Service (CNCS)

to help modernize the way community-based organizations utilize older adults as volunteers. The CNCS is providing AmeriCorps Volunteers in Service to America (VISTA) volunteers to assist a number of model projects, as well as research, evaluation, and planning assistance.

This collaboration became a public-private partnership in September 2008 with the inclusion of Atlantic Philanthropies to support additional grants and enhance technical assistance.

The primary focus of this effort is to:

- Identify and document program models that are effective, sustainable, and replicable
- Engage older adult volunteers in meaningful direct services, as well as administrative, technical, or developmental activities
- Develop standardized measures for effectiveness, replicability, and sustainability
- Explore the feasibility and desirability of a national registry of effective civic engagement programs

SUPPORTING AGING IN PLACE

Older adults living independently in geographically defined residential areas and building complexes, labeled Naturally Occurring Retirement Communities (NORCs), have significant potential for service efficiency and preserving independence for older

adults. AoA has provided funding to various community organizations to establish more than 40 supportive service programs for older adults living independently in these areas. Since 2002, more than 20,000 participants have been served by NORC programs. These programs:

- Enhance the ability of older adults living in a residential community to continue living independently
- Increase healthy aging behaviors through exercise, recreation, socialization, education, and culturally appropriate activities
- Identify needs of at-risk residents, facilitate access to existing community and Government resources, and create gap-filling supportive services

NATIONAL MINORITY AGING ORGANIZATIONS TECHNICAL ASSISTANCE CENTERS

The National Minority Aging Organizations Technical Assistance Centers Program seeks to reduce or eliminate health disparities among racial and ethnic minority older individuals and promote positive health behaviors that encourage healthier lifestyles. These centers also support the integration of services and systems changes to increase the capacity of the Network, enhance inter-agency collaboration, and stimulate innovation on behalf of older adults.

Grantees include:

Asociacion National Pro Personas Mayores

Project Puente —"Puente" is Spanish for "bridge"— designs community-based health interventions for Hispanic elders with limited English proficiency and their families.

National Caucus and Center on Black Aged

The Healing Zone project is seeking to eliminate health disparities among older African-Americans by building a holistic "mind-body-spirit" concept.

Boat People SoS, Inc.

The Information and Referral for Immigrant Seniors project is increasing the awareness of and access to information about positive health behaviors for Indo-Chinese (Vietnamese, Cambodian, and Laotian) seniors and families.

National Asian Pacific Center on Aging

The organization is conducting assessments, informational meetings, and interventions to improve access and availability of social and health services to Asian-American and Pacific Islander older adults in several communities around the country.

Inter-Tribal Council of Arizona

The Council is increasing access to current and newly developed health promotional materials, using updated technology, culturally competent services, and networking with aging and educational programs.

WOMEN AND RETIREMENT PLANNING PROGRAM

The National Education and Resource Center on Women and Retirement Planning, a cooperative arrangement between AoA and the Women's Institute for a Secure Retirement, is providing women with access to a one-stop gateway that makes financial education and retirement planning tools available to traditionally hard-to-reach women, including average and low-income women, women of color, women with limited English speaking proficiency, rural, and other underserved women.

Through a diverse coalition of national and local women's organizations, local Government agencies, representatives of the business and financial sectors, and the Network, women are provided access to financial expertise through workshops, publications, and Web-based presentations. The ultimate goal is to enable women to obtain information that can lead to secure retirements.

SECTION

5

FY2008 Financial Report

The AoA budget totaled approximately $1.413 billion in FY2008. Of the FY2008 total, $1.304 billion provided formula grants to States to support a wide range of home and community-based services, including supportive and transportation services, caregiver services, nutrition, health promotion, and elder rights activities. Another $33.2 million provided grants to Indian Tribes and Native Hawaiian organizations for nutrition, supportive, and caregiver services.

Complementing these core formula grants, the FY2008 budget included $57.7 million for discretionary grant programs. These discretionary funds served as a catalyst for developing new approaches and techniques that States and communities used to help seniors:

- Stay healthy, active, and independent
- Remain in their own homes and communities for as long as possible
- Prevent or delay nursing home admission
- Avoid unnecessary spend-down of their resources

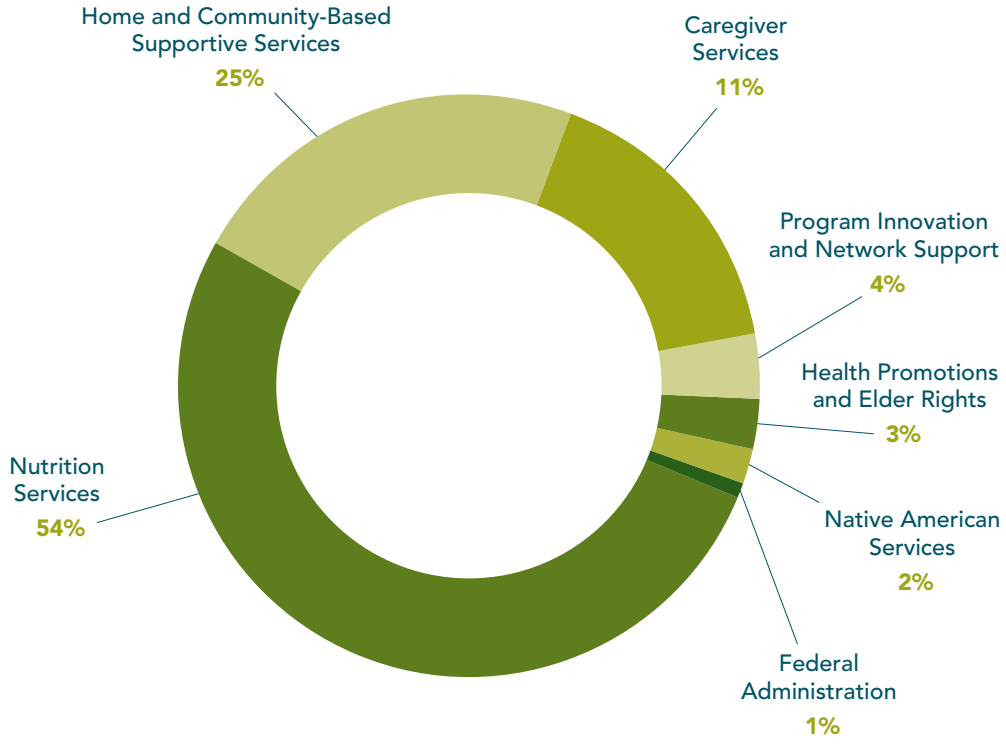
These funds also maintained support for a number of ongoing projects that provided information and technical assistance to older Americans and the Network. The AoA budget also included $18.1 million for program support, which paid for the salaries of approximately 106 Federal staff and other related administrative expenses.

The Network successfully leverages Federal funding to build coordinated service systems at the State and local levels. In FY2008, the most recent year for which data are available, States and local communities leveraged

almost $3 from other sources for every $1 of Federal funding. Funds are flexible, and States and communities can tailor their programs to address the needs of consumers at the local level.

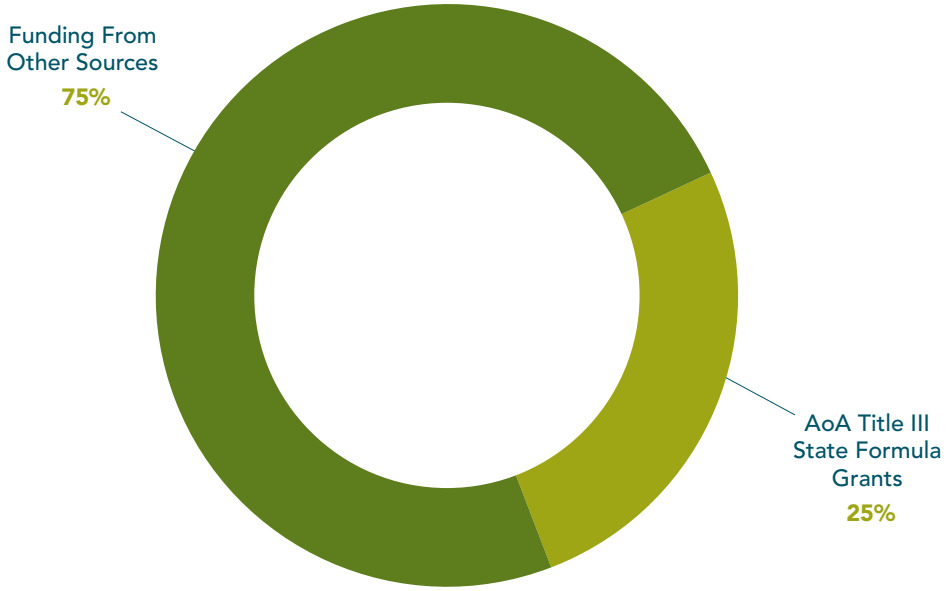
AoA is committed to being a good steward of taxpayer resources and to ensuring accountability in the use of its resources. Starting in FY2003, AoA's financial statements, policies, and procedures have been reviewed as part of the HHS consolidated "top-down" audit. In each year since then, HHS received a clean audit opinion.

FY2008 AoA Budget



Leveraged Funding

TOTAL EXPENDITURES: $3.4 BILLION



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U.S. Department of Health and Human Services
U.S. Administration on Aging

Washington, DC 20201
Phone: 202.619.0724
Fax: 202.357.3560

E-mail: aoainfo@aoa.gov
Internet: http://www.aoa.gov