



O4AD
Quarterly Business Meeting
February 17, 2010

Preparing for
OAA Reauthorization

A presentation by:
Barry Donenfeld, Executive Director
NorthWest Senior & Disability Services
Salem, Oregon

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.

Margaret Mead



Every step toward the goal of justice requires sacrifice, suffering and struggle, the tireless exertions and passionate concern of dedicated individuals.

Martin Luther King, Jr.

The background of the slide is a photograph of the Oregon State Capitol building. In the center, the Oregon Pioneer statue stands atop a tall column. A large Oregon state flag is flying in the foreground, partially obscuring the lower part of the statue and the building. The sky is a clear, light blue.

Why is Reauthorization Important?

Authorization process

Reauthorization is the process by which Congress prescribes changes, additions, and deletions to a program. Through this process, legislation is developed that adjusts the current programs to meet changing needs. This is the time to amend the Older Americans Act.

Appropriations process

Appropriations are the Congressional steps taken to fund programs.

OAA Reauthorization

- OAA last reauthorized October 17, 2006
- When reauthorized (usually every 5 years), the OAA is often amended with new initiatives, programs, or enabling language. These amendments may or may not get funded through the appropriations process.

Older Americans Act First Authorized in 1965

Established Aging Network of:

**Dept. of Health and Human Services
Administration on Aging
State Units on Aging (SUA's)
Area Agencies on Aging (AAA's)
Contractors and Service Providers**

Chronology

1961: First White House Conference on Aging

1965: OAA signed as part of “Great Society” legislation

Medicare, Title XVIII, a health insurance program for the elderly and Medicaid, Title XIX, a medical assistance program for low-income, are also established.

1967: Gov. Tom McCall appointed first Committee on Aging and University of Oregon hosts the first Office on Aging in Oregon.

Chronology (continued)

1969: Program on Aging moves to Salem with \$110,000 for 30 projects. OAA amendments allow demonstration projects such as Foster Grandparents and Senior Volunteer Program.

1971: Second White House Conference on Aging – Oregon receives 1 of 6 AAA demonstration grants in the nation.

1972: New Older Americans Act legislation establishes the national senior nutrition program

Chronology (continued)

1973: OAA Comprehensive Services Amendments creates AAAs and authorize grants to community agencies for multi-purpose senior centers.

1975: AAA's are first designated in Oregon and Oregon Legislature passes OPI. Federal amendments authorize grants to Tribal organizations and adds transportation, legal services and home repairs as priority services.

1981: Oregon Senior Services Division is formed by combining Office of Elderly Affairs and the LTC Unit of AFS, allows AAAs option to provide LTC services.

Chronology (continued)

1981: Third White House Conference on Aging.

OAA Reauthorized – emphasizes supportive services to help older persons remain independent in their own communities.

1987: OAA Reauthorized- adds distinct appropriations for in-home services for frail elderly, long-term care ombudsman, assistance for special needs, health education and promotion, prevention of elder abuse, and outreach for SSI, Medicaid and food stamps. Emphasis given to serving those in greatest economic and social need, including low-income minorities.

Chronology (continued)

1992: OAA Reauthorized – increased focus on caregivers, intergenerational programs, protection of elder rights and calls for 1995 White Conference on Aging.

1995: White House Conference on Aging.

2000: OAA Reauthorized – Modernization establishes Family Caregiver Support Program.

2005: White House Conference on Aging.

2006: OAA Reauthorized for 5 years. Emphasizes consumer information for long-term care planning, especially for those at risk of institutionalization, and evidence-based prevention programs. Authority provided for states to develop ADRC's.

Demographics



Some Key Indicators

Comparative Data: Oregon and Entire USA

	OR	USA
• Population, 2008 estimate	3,790,060	304,059,724
• Population, %change 2000-2008	10.8%	8%
• Persons 65+, %, 2007	13%	12.6%
• Persons with a disability, age 5+, 2000	16.5%	15.1%
• Median household income, 2007	\$48,735	\$50,740
• Persons below poverty, 2007	13%	13%
• Land area, 2000 (square miles)	95,996.79	3,537,438.44
• Persons per square mile, 2000	35.6	79.6

U.S. Census Bureau Quickfacts

**U.S. Census Bureau – American Community Survey 2005-07*

Shift in the Age of Oregon's Population

- 2008 Census: age 65+ makes up nearly 12.6% of the population (462,314).
- By 2030 that number is projected to increase to 20%.
- The number of people with disabilities will increase due to advances in medical science and the prevalence of disabilities as we age.
- 26.1% of those over the age of 75 will have a disability that prevents them from going outside their home to shop or go to the doctor

Advocacy History





The Dawn of a New Day and a New Way

Building on Advocacy in the Older Americans Act, which gives unique federal authority to advocate, Oregon's advocacy community helped create Oregon's cost-effective, long-term care system.

Advocates strongly influenced the creation and passage of SB 955 (also known as ORS 410) in 1981: the landmark legislation that created Oregon's system with its emphasis on home and community-based care.

SAC & DSAC Advocacy

- **Advocacy is the coordinated effort to:**
 - Exert influence, and
 - Educate specific groups or individuals on the needs of seniors and people with disabilities
- **Some examples of advocacy are:**
 - Educating elected officials and the public on the needs of seniors and people with disabilities
 - Encouraging appropriate funding levels
 - Recommending new programs or services, and
 - Working with other organizations to meet the needs of seniors and people with disabilities
 - May interact with other advocacy groups such as the Governor's Commission on Senior Services or Oregon Disability Commission

SAC AND DSAC ROLES IN OREGON

- Represent the interests of older people and people with disabilities in the local AAA activities
- Recommend basic policy guidelines and evaluate the effectiveness of the AAA on meeting the needs of older adults and people with disabilities in the planning and service area
- Advise the AAA on questions of policy, budget, and services, and the development of the agency's services or Area Plan
- Act as advisors – not the Board of Directors

In Oregon, Our Senior Advisory Councils (SAC):

- Provide Area Agencies on Aging (AAA) with advocacy, guidance, advice, and support for the needs of older adults.
- Act as a link between seniors and AAAs
- Are required by law:
 - Older Americans Act (Federal)
 - Oregon Revised Statutes (State)
- Ensure that programs and service delivery meet local needs.

Fruits of SAC and DSAC Advocacy

- Senior Advisory Council and Disability Services Advisory Council members, with other advocates, helped Oregon develop an array of community-based, cost-effective, services available for publicly-funded and private-pay seniors and people with disabilities.
- Costs have been contained by involving family, friends, and community organizations.
- Some services have a sliding fee structure for those who can contribute to the cost of their care.

Oregon's Consumer Friendly Values ⁽¹⁾

- Landmark legislation established broad policy direction for services to seniors with a philosophy rooted in the Older Americans Act (OAA)
- Required at-home support of frail older adults wanting to receive LTC services at home
- Nursing Homes were to be placement of last resort: in Oregon, you need special permission to go to a nursing home
- Stated that Oregon's seniors were entitled to health, honor and dignity
- Older adults could make choices about their own care, assuring a broad array of Home & Community-Based Care (HCBC) services and supports
- Created one state Division to manage OAA, Oregon Project Independence (OPI) and Medicaid Long-Term Care programs

(1) 1981 Senate Bill 955 (Covered seniors only at this point in time)

ORS 410 and OAA

OAA: “Freedom, independence and the free exercise of individual initiative in planning and operation of community-based services and programs provided for their benefit ...”

ORS 410: “Involve older adults in the decision making process for programs effecting their lives.”

ORS 410 and OAA

OAA: “The best possible physical and mental health which science can make available and without regard to economic status.”

ORS 410: “Foster both preventive and primary health care, including mental and physical health care, to keep older citizens active and contributing members of society.”

ORS 410 and OAA

OAA: “... protection against abuse, neglect and exploitation.”

ORS 410: Protect the older citizen and person with disabilities from physical and mental abuse and from fraudulent practices.

The image shows the Oregon State Capitol building in Salem, Oregon. In the foreground, a large Oregon State flag is flying on a tall pole. The flag is blue with a yellow border and features the state seal in the center. The words "STATE OF OREGON" are written in yellow across the flag. The Capitol building is visible in the background, featuring a prominent golden statue on top of its dome. The sky is a clear, light blue.

Key Components of OAA

Key Components of OAA

Older Americans Act (OAA):

- Federal legislation that provides for a comprehensive array of community-based services to sustain older adults, age 60 and older, in their own homes and communities, including funding for congregate and home-delivered meals, family caregiver supports, legal services, transportation, information and referral, advocacy, elder abuse awareness, disease prevention and health promotion, advocacy, and services for older Native Americans.

Key components of OAA

Congress passed the Older Americans Act (OAA) in 1965 in response to concern by policymakers about a lack of community social services for older persons.

The original legislation established authority for grants to States for community planning and social services, research and development projects, and personnel training in the field of aging.

More Key Components of OAA

OAA became a major vehicle for the organization and delivery of social and nutrition services to older adults and their caregivers.

Authorizes service programs in a network of 56 State agencies on aging, 629 area agencies on aging, about 20,000 service providers, and 244 Tribal organizations.

Also includes community service employment for low-income; training, research, and demonstration activities in aging; and elder rights protections.

More Key Components of OAA

- **Services developed at the local level**
- **Programs Administered by Area Agencies on Aging (AAA's) and State Units on Aging**
- **Supportive Services, including nutrition programs and community supports for to help older adults, age 60 and older.**
- **Emphasis on planning and advocacy.**



**OAA Provides For
Area Agencies on Aging
Oregon AAA Models**

AAA Service Delivery Models

Oregon's Two Models

Type B: Contracts with the state to provide Medicaid, Oregon Project Independence, and Older Americans Act Programs.

There are 6 Type B AAAs. Four are Transfer AAAs, which means the staff is employed by the AAA. Two are Contract AAAs, which means the staff is employed by the state.

This option is available to AAAs that are part of a unit of local government.

Type A: Contracts with the state to provide Oregon Project Independence, and Older Americans Act Programs only.

This option is available to AAAs that are private, non-profit or part of a unit of local government.

Oregon currently has 17 Area Agencies on Aging (AAA)

The eleven Type “A” Area Agencies on Aging:

Provide services under the Older Americans Act and Oregon Project Independence. A type “A” AAA serves only older adults.

Look a lot like most AAAs throughout the US.

There are eleven Type “A” AAAs in Oregon:

- Seven are sponsored by private, nonprofit organizations:
 - Baker-Grant-Union-Wallowa
 - Columbia
 - Crook-Deschutes-Jefferson
 - Harney
 - Klamath-Lake
 - Malheur
 - Morrow-Umatilla
 - Coos-Curry
- One is sponsored by a consortium of counties:
 - Hood River-Sherman-Wasco-Gilliam-Wheeler
- Two are sponsored by a county:
 - Clackamas
 - **Washington**

The Type “B” Area Agency on Aging Model

- **Type “B1” AAAs** administer the Older Americans Act, Oregon Project Independence, Medicaid and Food Stamps. Type B1 AAAs serve only older adults, but there are currently no B1 AAAs in Oregon.
- **Type “B2” AAAs** administer the Older Americans Act, Oregon Project Independence, Medicaid and Food Stamps to both older adults and adults with physical disabilities.

- The four “B2” Transfer (employ their own staff) AAAs are:
 - Multnomah (sponsored by the county)
 - Lane (sponsored by a Council of Governments)
 - Linn Benton-Lincoln (sponsored by a Council of Governments)
 - Clatsop-Marion-Polk-Tillamook-Yamhill (ORS 190 Organization)
- The two “B2” Contract (manage State staff) AAAs are:
 - Douglas County (sponsored by the county)
 - Jackson-Josephine Counties (sponsored by a Council of Governments)

A broad range of services are available and/or coordinated by Oregon Type B AAAs:

**Adult Day Care
Case Management Services
Elder Abuse Awareness
Family Caregiver Support
Health Insurance Assistance
Information and/or Assistance
Home Care
Personal Care
In-Home Volunteers
Language Translators
Legal Assistance
Medication Management
Mental Health Counseling
Nutrition Services (congregate
and home delivered meals)**

**Public Education/Outreach
Long-Term Care Ombudsman Prog.
Adult Foster Home Care/Licensing
Assisted Living Facility Care
Guardianship/Conservatorship
Medicaid Eligibility/Financial Asst.
Medical Transportation
Miscellaneous Medical Services
Nursing Home Care
Protective Services
Pre-Admission Screening
Private Admission Assessments
Residential Care Facility Care
Risk Intervention Service
Home Modifications/Special Needs**



OAA Services

OAA Services Include

- Nutrition Programs: Home-delivered and Congregate meals
- Family Caregiver Support Programs
- Funds for disease prevention and health promotion, programs for prevention of elder abuse
- Services to help older adults remain independent

Information & Referral(I & R) Information & Assistance (I & A)

- Oregon's front door to services
- Development of expert staff for new ADRC's
- Make referrals to AAA/MSO staff for eligibility for Medicaid long-term care and financial programs and Oregon Project Independence

I & R //// I & A

(Continued...)

- Help older adults and people with physical disabilities locate community resources, including Older Americans Act services, and services in other states or communities
- Make necessary referrals to AAA/MSO adult protective services

Principles of Oregon's LTC System Assist Development of ADRC's (the new national model)

- Local planning
- Client choice
- Client/advocate-driven system
- Services provided at the least expensive, less intrusive level
- Single entry point
- Quality assurance and monitoring

The background image shows the Oregon State Capitol building in Salem, Oregon. A large, blue Oregon state flag is flying in the foreground, partially obscuring the building. The flag features the state seal and the words "STATE OF OREGON" in gold. The Capitol building's dome and the statue of Oregon on top are visible in the background against a clear blue sky.

OAA increases in the President's proposed 2010-11 budget:

President's 2010-11 Budget Includes:

- Title III B, \$48 million (13% increase).
- Title III E, Family Caregiver Program \$48 million (31% increase).
- Title III C, Nutrition, \$4.8 million for congregate (1% increase, \$3.2 million for home-delivered (1.5% increase).
- Title III D, Preventive health - level funded
- Title VII Elder Abuse and LTC ombudsman increase of \$1.4 million (6.4% increase)

Source: n4a

President's 2010-11 Budget (continued)

Nationally, these are not large amounts of money.
For example:

- Title III C, Nutrition, \$4.8 million nationally for congregate (1% increase) for Oregon translates to:

About \$48K for ALL of Oregon – or not enough to feed one (1) more person a year in rural areas and only about seven (7) more people a year in Multnomah County.

The image shows the Oregon State Capitol building in Salem, Oregon. In the foreground, a large Oregon State flag is flying on a tall pole. The flag is blue with a yellow border and features the state seal in the center. The words "STATE OF OREGON" are written in yellow across the flag. In the background, the Capitol building is visible, featuring a prominent golden statue on top of its dome. The sky is a clear, light blue.

Inter-active Table Exercise



**Each table is to develop and agree
upon two (2) suggestions for:**

**“fixing,” enhancing, improving,
expanding or changing OAA.**

**Barry Donenfeld, Executive Director
NorthWest Senior & Disability Services
PO Box 12189
Salem, OR 97309**

503-304-3456

barry.donenfeld@state.or.us

www.NWSDS.org

