

Alaska Commission on Aging 2008 Legislative Priorities

Top Priorities:

- ***FACES (Family And Community Elder Supports) budget increment*** for Senior Home- and Community-Based Services Grants (***not in*** Governor's budget) - \$1.5 million in operating budget, \$2 million in capital budget. ***This is not a new program***, but rather an increment to the existing grant program, and methods of allocating the funding would remain the same. A long-range plan for program spending, the Alaska State Plan for Senior Services, FY 2008-FY 2011, is in place.

Senior grants provide a wide range of supportive services to help seniors safely continue living at home. Services range from home-delivered meals, congregate meals, and ride programs to transport seniors to medical appointments and shopping, to care coordination, chore assistance, respite care, adult day care, and other services in every region of the state.

FACES' \$2 million in capital funding is a small effort toward helping senior centers and other senior services providers complete some of their long-deferred renovations and repairs. Many need kitchen upgrades as they serve more seniors in their meal programs, and vehicle repairs or upgrades for their senior transit programs. A number of facilities are in need of repair, expansion, or remodeling in order for them to continue to safely and efficiently serve their area's seniors.

Grant services fill a substantial gap in the continuum of care. In Alaska, many seniors of modest income are not eligible for Medicaid health care or waiver services, either because their incomes are a little too high or because their medical condition is not considered severe enough to meet strict "level of care" requirements (for example, individuals with a primary diagnosis of Alzheimer's disease and related disorders – ADRD – are not eligible for the Medicaid waiver). Grant programs assist all seniors, regardless of income and condition, who would benefit from services. Seniors pay on a sliding fee scale for some of the services; others ask for contributions only.

While the number of older Alaskans is growing by five or six percent per year (faster than any other state except Nevada), funding for senior grants has increased by less than 10 percent over the past decade. Senior care providers are facing growing demand for services, in addition to rising fuel and food costs, deteriorating facilities and equipment, and greater difficulty recruiting and retaining staff at the wages they can afford to pay. Both operating capacity and capital resources for these programs must

increase if Alaska is to meet the needs of today's older Alaskans, to say nothing of the pipeline-era baby boomers who will soon be aging in place. We must begin now to build this capacity.

- **Alaska Commission on Aging “sunrise” legislation** (SB 188, SB 209, and HB 276), **and ACOA statute changes** (SB 243, HB 279) to bring the Commission’s powers and duties into alignment with its mission since 2003 (planning, advocacy, public awareness, and interagency coordination) and eliminating grant management for which Senior and Disabilities Services (SDS) is now responsible. A 2007 Legislative Audit sunset review of the Alaska Commission on Aging found that the Commission helps older Alaskans lead dignified, independent and productive lives and recommended extension of the Commission’s sunset date of June 30, 2008 to June 30, 2016. SB 188, SB 209, and HB 276 have been introduced to accomplish this. The review’s only critical finding was a recommendation that the Commission’s enabling statutes be modified to reflect the actual mission of the Commission since 2003, when State Unit on Aging responsibilities were transferred to the Department of Health and Social Services. SB 243 and HB 279 are designed to clarify the Commission’s and Department’s current roles.
- Funding for **Community Health Centers (CHCs)** (\$350,000 to the Alaska Primary Care Association, *in* Governor’s budget, under Senior and Disabilities Services). Many Alaskan seniors today have difficulty locating a primary care physician willing to accept Medicare patients. This inability to access primary care has rapidly become a crisis for seniors in many communities across the state. Community health centers play an invaluable role by accepting all patients, including a growing number of seniors. A large proportion of CHCs’ patients are uninsured or under-insured, low-income, and members of one or more of the Trust’s beneficiary populations. However, in some parts of the state, CHCs may be the only providers willing to see Medicare patients. In 2005, the CHCs served 5,468 Alaskans age 65 and over – that is, more than 13 percent of Alaskans in that age group, and a 12 percent increase over the number of seniors served in 2004.
- **AHFC Housing Trust** funding (\$10 million, *in* Governor’s budget, under Dept. of Revenue). Gov. Palin established the Alaska Council on the Homeless in 2007. Funding for the Housing Trust (to be administered by the Council on the Homeless) will provide supportive housing for homeless individuals in Alaska. The high incidence of homelessness among Trust beneficiaries is linked to challenges associated with disabling conditions, economic instability, the need for supportive programs, and the need for accommodations required to meet special needs. Seniors comprise eleven percent of Alaska’s homeless population.

Important Budget Items:

- ***Senior Benefits Program funding*** – \$20,345,400, ***in*** Governor’s budget, under Public Assistance. By FY 2009, the Division of Public Assistance expects that 11,000 seniors will receive income assistance through this program.
- ***ADRCs (Aging and Disability Resource Centers)*** – a total of \$250,000, ***in*** Governor’s budget, under Senior and Disability Services (SDS). These regional centers for long-term care information and assistance were previously funded under a federal program. They have been based primarily in the Statewide Independent Living Centers through FY 2008. Beginning in FY 2009, program management will be moving to SDS. The regional offices provide a one-stop shop for seniors and those with disabilities to learn about helpful programs and services for which they may be eligible.
- ***Trust Mini-Grants*** - \$260,300, ***in*** Governor’s budget, under Senior and Disability Services. The mini-grants, funded by the Alaska Mental Health Trust Authority, provide up to \$2,500 for Trust beneficiaries (including individuals with Alzheimer’s disease and related disorders - ADRD) to pay for costs that are not covered by other funding source. Items and services purchased through the mini-grants have included dental care, special equipment, supplies, home modifications, glasses, hearing aides, therapy, and medical equipment.
- ***SOAR (Senior Outreach, Assessment and Referral) Project*** - \$300,000, ***in*** Governor’s budget, under Behavioral Health). This new project targeted specifically to seniors will provide outreach, assessment and referral in ways most likely to be effective with seniors who have a mental illness or substance abuse problem.
- ***Healthy Body, Healthy Brain Campaign*** - \$150,000, ***not in*** Governor’s budget. This funding would allow the Alaska Commission on Aging and Public Health to expand the Healthy Body, Healthy Brain Campaign, an effort to promote public awareness of the link between lifestyle choices and the risk of developing Alzheimer’s disease and related disorders, to extend \$10,000 grants to fifteen senior services organizations statewide for offering evidence-based programs to directly encourage adoption of healthy lifestyles.

- **Senior Crisis Response Services** - \$500,000, **not in** Governor's budget. This program would provide training for assisted living home managers to become eligible for licenses allowing them to care for mentally ill seniors (to increase the number of such homes statewide), provide staff training in managing challenging client behaviors, and create a multi-disciplinary team which would be prepared to intervene in behavioral crises, evaluating the client and either working with staff to resolve problems or helping locate an appropriate alternative placement. A recent Commission survey of licensed assisted living homes found that 75% of assisted living homes would take advantage of such a program. Just 30 facilities had turned away a total of over 99 mentally ill seniors in the past two years. Others are serving clients with a diagnosed or undiagnosed behavioral health problem, but report a wide range of common difficulties, including verbal abuse, combative behavior, mistreatment of staff, substance abuse, medication-seeking, refusal to take prescribed medications, and tormenting other residents.

Other Priorities:

- **Energy Assistance** – The Commission will be monitoring various bills to provide additional funding to help older Alaskans and others with rising energy and fuel costs.