



## **REGIONAL PLAN EXECUTIVE SUMMARY Fiscal Year 2019**

### **INTRODUCTION & FRAMEWORK**

Kentuckiana Regional Planning and Development Agency (KIPDA) serves as the designated Area Agency on Aging in accordance with the regulations set forth in Title III of the Older Americans Act of 1965, as amended. In 2007, KIPDA's designation was modified to serve as the Area Agency on Aging and Independent Living (AAAIL) with an expansion of services through the Department for Aging and Independent Living. KIPDA now serves not only older adults, but persons of varying ages and disabilities to remain independent in our communities. KIPDA is responsible for administration of federal and state funded programs for the elderly, caregivers, family members, grandparents, persons with disabilities and the general community in the Kentucky counties of Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer and Trimble, which comprise the KIPDA AAAIL service area.

The 2019 KIPDA Regional Plan will be a new plan to extend through June 30, 2021. This plan is designed to describe the provision of services to older adults, caregivers, family members, grandparents, persons with disabilities and the general community throughout the region. With KIPDA's comprehensive network of service providers and KIPDA Area Agency on Aging and Independent Living staff, a variety of programs and services are available to serve the citizens of the Region. The network of providers is selected through a competitive procurement process, which occurs on established procurement cycles and as needed when funds become available from surplus or other sources. This plan also serves to identify demographic trends in the region that may impact future service need; and describes how the AAAIL plans to address needs.

All funds for the following programs come from Title III & Title VII of the Older Americans Act, CMS and State General Funds. KIPDA also seeks additional sources of funds to support and expand its mission to help persons of all ages remain independent, healthy and safely within our communities. During the last several fiscal years KIPDA has sustained Federal and State funding reductions. The Federal Sequestration efforts to reduce the Federal debt impacted Federal funds significantly in 2014. In FY 2015 and FY 2016, a portion of sequestered funds were restored at the federal level. During fiscal year 2017 and 2018, State funding reductions impacted KIPDA's overall budget with an overall reduction for that biennium. The budget for the next biennium is not yet established and all amounts represented are estimates and will be finalized once allocations are received. Further, State General funded programs have sustained reductions over the last decade which impacts the amount of service available for persons in need in addition to waitlists which have been managed over many years.

The projected annual budget for all social service programs administered by KIPDA through the Division of Social Services during FY 2019 is anticipated to be approximately **\$8,706,051; excluding PDS Medicaid Waiver.** PDS accounts for approximately \$8,000,000 in Medicaid funds which are to be used for PDS client service expenses, Service Advisor, Case Management, and Financial Management services. Final budget amounts for providers and contracts will be presented prior to July 1, 2018 after allocations are received and procurement is complete.

Of all of the Federal and State funds received to administer and implement services for older adults, persons with disabilities, and special projects in the KIPDA region, approximately **9%** of all funds are retained for administration and **91%** of all funds are utilized to provide direct services for clients and special populations throughout our communities. KIPDA provides direct services through information and referral, assessment and case management services, SHIP counseling and facilitation of disease prevention and health promotion interventions. Each year, nearly **55,000** persons receive information and assistance about the services available and assistance in accessing services. Approximately **31,266** persons received direct care and services in fiscal year 2017.

The Older Americans Act, Section 301. (a)(1), states, "...the purpose of this title is to encourage and assist State agencies and Area Agencies on Aging to concentrate resources in order to develop greater capacity and foster development and implementation of comprehensive and coordinated systems to serve older individuals by entering into new cooperative arrangements...for the planning, and for the provision of, supportive services, and multipurpose senior centers." Likewise, the Department for Aging and Independent Living allocate State General funds to assure a comprehensive, coordinated system of care is available and accessible throughout the Commonwealth to older adults, caregivers, family members, grandparents, persons with disabilities and the general community. This network of services is intended to be designed to facilitate an individual's ability to secure and maintain maximum independence and dignity in a home environment with appropriate supportive services; remove individual and social barriers to economic and personal independence; provide a continuum of care for vulnerable persons with disabilities and older individuals; and secure the opportunity for persons with disabilities and older individuals to receive managed in-home and community-based long-term care services. KIPDA has implemented both traditional and newer innovative approaches to providing care and delivering services in the community through cooperative and collaborative efforts with state and local governments, schools and universities, community organizations and innovative products. As technological advancements for care become affordable, KIPDA makes every attempt to consider how these applications can improve the lives of older adults, caregivers and persons with disabilities. The goal is to create, maintain and continuously develop a strong network of programs and services that will enrich our communities in a variety of ways.

KIPDA is currently in a procurement cycle for the Title III C program, Nutrition Program for Older Persons. During this plan cycle, all of the other programs will go through procurement. The information presented in this Executive Summary represents information known at the time this document is completed.

Overall, KIPDA's Division of Social Services' Plan provides for: Support Services, Nutrition Services, In-Home Care, Caregiver, Alzheimer's support, Participant Directed Services through the Medicaid Waiver, State Health Insurance Program, Transportation, Financial Management, Legal Services, and support for Grandparents Raising Grandchildren. Special initiatives are also included and over the next year, are expected to continue to change with anticipated changes to the **ACA Assister program related to implementation of KY Health**, and continuation of the Geriatric Workforce Enhancement Program grant and a new grant initiative. KIPDA anticipates engagement with other projects, grants, and partnerships, including the Behavioral Health Workforce Education and Training grant through a partnership with the University of Louisville.

## **MISSION**

The mission of KIPDA Area Agency on Aging and Independent Living is to promote and ensure meaningful, timely, *person-centered services* are available for all older adults, caregivers, family members, grandparents, persons with disabilities and the general community to improve their health, safety and overall well-being, and to provide leadership to the network serving persons who are aging or persons with disabilities through planning and coordination.

An overarching goal of such comprehensive services is to improve individuals' health, safety and overall well-being. Positive outcomes, such as increased dignity, self-worth, empowerment, and informed decision-making, are at the core of KIPDA's service to the community. KIPDA values the benefits associated with natural and community support networks and, as a result, makes a good faith effort to assist community members in maintaining and/or establishing those connections. KIPDA has a professional mission to empower individuals to recognize their undeniable place in the community. In support of KIPDA's multifaceted mission, KIPDA programs and initiatives involve open collaboration with the community, consumers, families, advocacy networks, community agencies, local government, state government, and federal government.

## **VISION**

KIPDA Area Agency on Aging and Independent Living will be a leader in the nation in the coordination, planning and implementation of a comprehensive and coordinated system of care and support to older citizens, caregivers, family members, grandparents, persons with disabilities and the general community of this region by facilitating their ability to live in the environment of their choice; and will foster and embrace environments and practices that promote healthy aging, wellness and prevention.

## **REGIONAL PROFILE**

As the Area Agency on Aging and Independent Living (AAAIL), KIPDA is responsible for administering federal and state funded programs for the citizens of the Kentucky counties of Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer and Trimble, which comprise the KIPDA AAAIL service area. According to the Kentucky Data Center, Population data provided in the 2016 projection data using the 2010 census indicates 20.8% of all persons living in the KIPDA Region are 60 years old and above and 21.9% of all persons in Kentucky who are 60 and above live in the KIPDA Region. Further, 17% of all persons in Kentucky who are 60 and above live in Jefferson County. Also, according to the Kentucky Data Center 2016 Population Projections, 21% of persons 60 and older live in the rural counties in the KIPDA region and 79% live in Jefferson County. Approximately, 9% of older persons in the region are low income and 17% of low income seniors are minorities. Minority seniors represent 15.85% of the total senior population in the KIPDA region. The population in the region is very diverse and represents a wide range of demographics, needs and interests, for persons with disabilities and older adults.

There is also a higher concentration of other populations served through KIPDA administered programs. For example, more than 20% of all Medicare beneficiaries reside in the KIPDA region (primarily Jefferson County). Kentucky's caregiver numbers are continuing to increase. The Legislative Research Commission estimated in 2014 that Kentucky has approximately 753,000 caregivers (family member or other person caring for someone 50+). It is estimated that in the KIPDA region approximately 21% of the state's caregivers reside in the KIPDA region. Additionally, of all the caregivers statewide, Kentucky Youth advocates estimate that approximately 53,000 grandparents raising their grandchildren (2017). Further, the

number of individuals with Alzheimer's disease continues to increase and will grow exponentially as the older adult population increases. Kentucky has the second highest percentage of people with disabilities in the entire nation. The Kentucky Data Center's KIPDA Region Profile indicates that 14.8% of the population in the region has a disability; and 27.8% of persons 50 and older in the region has a disability.

The immigrant population in the KIPDA region has become more diverse. Latin American immigrants account for just 37% percent of the Louisville's immigrants, compared to 55 percent nationally. By contrast, Louisville has a higher share than the national average of immigrants from Africa (15 percent vs. 2 percent) and Asia and the Pacific (35 percent vs. 26 percent). KIPDA has a high share of refugees, due to its large federal refugee resettlement program. Approximately 15 percent of KIPDA's immigrants are refugees (individuals granted legal status due to persecution or a well-founded fear of persecution in their home countries). That is twice the national share of 7 percent. Educational attainment and income vary widely across the different immigrant groups. The fastest-growing immigrant group, Latin Americans, have the lowest educational attainment. Persons from Latin American and Africa are also the poorest while the median income for Asian and European immigrants exceeds that for native-born Louisville residents. The largest minority population in Shelby County is Hispanics. According to the 2010 Census, the Hispanic population in Shelby County was 8.7% compared to 3.4% for Kentucky. Awareness of the linguistic and cultural make-up of cities, counties, and communities within the KIPDA region will be necessary to successfully serve future older adult populations.

It is vital to be aware of the wide educational achievements among current older adult populations while keeping in mind that as the Baby Boomers age, educational competencies have changed greatly. The current American Community Survey estimates are indicative of the differences among the metropolitan and rural counties in education levels. Of persons over the age of 50 in Jefferson County, 40.4% have completed some level of education beyond a high school diploma; an average of 13.4% for outer counties.

Diversity in the KIPDA region extends far beyond economic, social, and educational markers. In the next several decades, the number of lesbian, gay, bisexual or transgender (LGBT) adults age 65 and above is expected to double in America. LGBT adults face unique challenges in our community as they age. For example, the LGBT older adult population is only half as likely as their heterosexual counterparts to have close family to rely on for help, which means that they must rely on the services of professional health care providers.

At the same time, fear of discrimination, harassment, or hostility can prevent many LGBT older adults from seeking out the care they need. The prevalence of social isolation is high since they are less likely to feel welcome in the places where many older adults socialize, such as senior centers, volunteer centers, and places of worship. The presence of social isolation can result in depression, delayed care-seeking, poor nutrition, and premature mortality.

Another quickly growing demographic group to consider is the Caregiver population. It is estimated that there are 753,000 informal caregivers in Kentucky taking care of or assisting in the care of one or more family members or acquaintances. Approximately 97,000 older adults in the KIPDA region have been diagnosed with Alzheimer's disease or related dementia; requiring a caregiver. As the number of older adults increase, especially the number of people in the 85+ age range, the number of caregivers will also increase. In the KIPDA region, 18% of adults are rearing a grandchild under the age of 18, KIPDA is aware that this statistic is growing due to the economy and other social issues such as addiction and violence; resulting in various challenges to our communities. It is expected that more adult children in their 60s or 70s with chronic conditions of their own are also caring for a parent age 90 years and older. Additionally, approximately 40% of KIPDA's adult population reports one or more disability. The Center for Personal

Assistance Services projects a 78% increase in Kentucky adults needing assistance with their activities of daily living between now and 2030.

KIPDA partnered with the University of Louisville, Institute for Sustainable Health and Optimal Aging to conduct the required needs assessment of the region for this Regional Plan Cycle. The ISHOA utilized the AARP Age-Friendly Community Survey created by The World Health Organization's (WHO) Global Age-Friendly Cities research team for this needs assessment. This survey allowed the research team to identify eight areas that influence the quality of life of those in a community, particularly older adults. The eight areas or domains are: Outdoor Spaces and Buildings; Housing; Transportation; Social Participation; Respect and Social Inclusion; Civic Participation and Employment; Communication and Information; and Community and Health Services. This survey was created in order to help communities establish a baseline with regard to older adults being able to age in place, and conduct a community needs assessment to identify and prioritize areas of focus. KIPDA's Regional Plan and Needs Assessment information was presented to the public through Public Hearings that were held in four locations throughout the region. Information from the needs assessment and public hearings are available in a separate report.

KIPDA AAAIL and its provider/service network and partners must continuously plan, develop and implement programs and services that meet the varied needs and interests of this community. The information from the Needs Assessments and comments garnered from the Public Hearings will facilitate identifying and targeting areas of need for older adults, persons with disabilities, caregivers, and the community. The network must be progressive and forward thinking, acknowledging limitations in funding and resources, but considering and taking advantage of every opportunity to move forward in its development.

KIPDA has not received its allocations for FY 2019 and this plan has been developed using FY 2018 allocations for the purpose of planning for the next fiscal year. It is hope that allocations will remain stable into FY 2019. The KIPDA Board of Directors will approve contracts for services at actual funding levels once KIPDA has received its allocations and prepared to recommend specific funding amounts.

Listed below is an overview of the programs and services supported by funds from the Department for Aging and Independent Living, the Administration on Aging and other funds and resources utilized for support.

### **AGING AND DISABILTY RESOURCE CENTER**

The Kentucky Department for Aging and Independent Living states that the vision and mission of the Aging and Disability Resource Center (ADRC) is a natural progression to facilitating the transformation of long-term care in Kentucky. The ADRC includes the following:

- Operational Call Center
- Intake and Assessment Capacity
- Information, Assistance and Referral Services
- Resource Counseling
- Options Counseling
- Benefits Counseling
- Eligibility Determination

- I & R Resource Data Base
- Resource Data Available to Upload into State Data System
- Aging and Disability Advisory Council
- Other Activities and Tasks as Necessary

KIPDA Area Agency on Aging and Independent Living utilizes a portion of its funds from each service area to cover the cost of operating its ADRC. The ADRC Coordinator and **four (4) full time staffs are** available to answer direct calls from the public. Prescreening services for various programs and services are available for persons who wish to pursue eligibility determination for Federal and State-funded programs. **In the event a particular service is not available through KIPDA's resources or a the service includes a waitlist; impacting the person's ability to receive immediate care or services and access to those services, referrals for alternate community service options are provided, including referrals to those options.** KIPDA expanded and redesigned its ADRC to shift from a call center model to include a component for more intensive consumer assistance and follow up model that would address the needs of individuals who call with complicated situations and **request** support for a reasonable solution. Now, KIPDA houses both a call center for immediate information and an ADRC which provides for more intensive assistance.

The ADRC serves as a major point of entry for the community seeking Medicaid Waiver. ADRC staff have been trained in the states Medicaid Waiver Management Application (MWMA) system which is the data base for applying for all Medicaid Waivers. KIPDA's ADRC has also started a major partnership with the Veteran's Administration Medical Center in Louisville. KIPDA and staff from the VAMC worked together to start a coalition that focuses on helping Veterans access services and care they need facilitating their ability to continue living in the community and environment of their choice. The Coalition's name is the Kentuckiana Veteran Community Integration Coalition. Through the work of the Coalition, KIPDA, the VAMC, and the University of Louisville Institute for Sustainable Health and Optimal Aging has worked together to create an online training for ADRC staff and other professionals working in human services, especially those working with older adults and who may encounter veterans routinely in their work. ADRC staff and VA staff engage in cross training activities with the goal of making it easier for Veterans to access what they need. KIPDA, the VAMC, the ISHOA and other partners plan to continue to work on behalf of Veterans with the goal to facilitate their access to needed services, helping them to age in place successfully.

Planning staff are also engaged in the functions of the ADRC, primarily as Resource and Options Counselors, but serve in other capacities as well. Funding to support this effort is accessed through current resources. Separate funding is not available at this time to support this vital service.

### **SENIOR CENTERS AND OTHER SUPPORT SERVICES**

KIPDA redesigned its focus for senior centers over three years ago to include not only services and activities within the senior center or satellite centers, but to also include programs and services that occur in the community and access made available to older adults to participate in those opportunities. Such opportunities include music and art education, educational opportunities to use technology and access to the library system or fitness for health and wellness. As the demographics of our communities continue to shift and change, our programs and service network must adjust to meet the needs and provide opportunities for its citizens. KIPDA strives to maintain the momentum of creating a progressive network of opportunities and assure the availability of services to all members of the community and particularly older persons and persons with disabilities. Supportive services are part of this network of opportunities and services. The

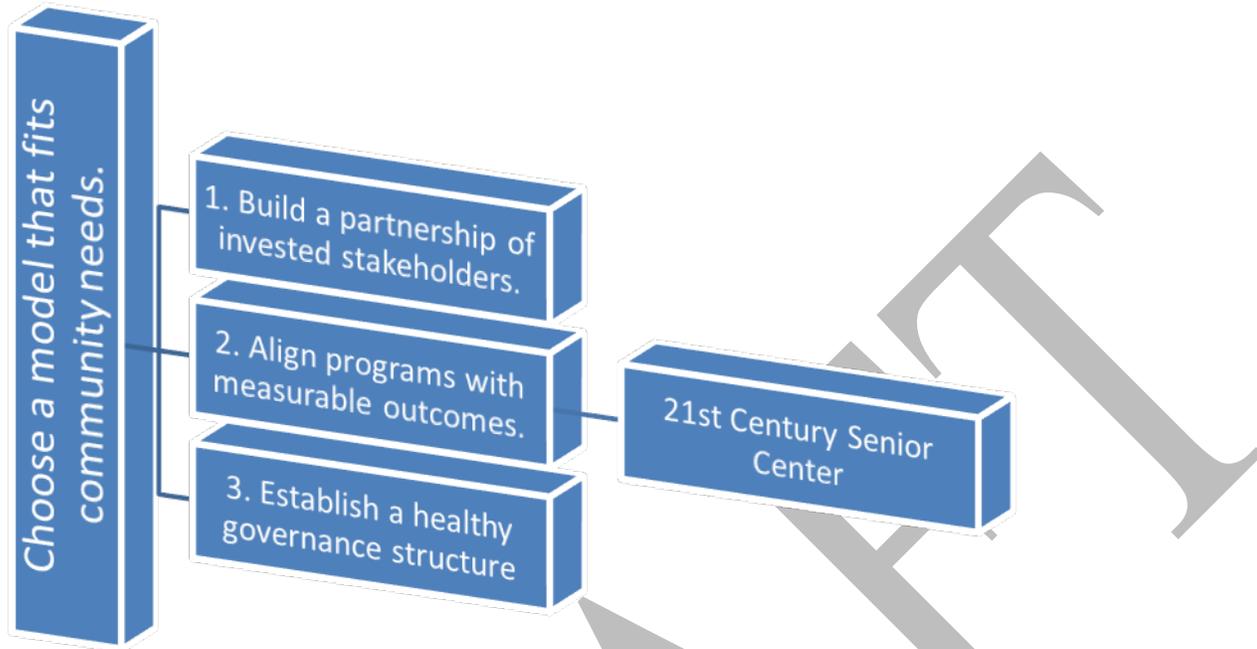
senior center and supportive service options are currently being procured by KIPDA and as a result of procurement, the locations or facilities offering senior center services could change. These centers and activities will be presented to the KIPDA Board of Directors for consideration of contract awards once the procurement process concludes. It is anticipated that approximately **\$438,369** will be available in Federal and State funding to support the activities offered for older adults in the centers. General services include but are not limited to: advocacy, counseling, education, employment, friendly visiting, health promotion, home management, information and assistance, outreach, personal care, recreation, respite, telephone reassurance and transportation.

The older adult and disability population living in our communities today is diversified. The service network has a responsibility to offer services and opportunities that will engage this population regardless of their functionality, activity level or interest. The network promotes the concept of healthy, positive and active aging for all persons, optimizing the opportunities for health, participation, and security in order to enhance quality of life. The word active implies the ability to continue participation in social, economic, cultural, spiritual, and civic affairs. It is not just the ability to be physically active. It implies healthy aging where “health” is defined more globally to include physical, mental, and social wellbeing. An active aging framework will include policies and programs that promote mental health and social connections as well as the improvement of physical health status and life long learning. An active aging framework engages the entire community including persons with limited English proficiency.

KIPDA has designed a system to support senior centers and encourage each to implement a diverse revenue stream to support their day-to-day operations. Older Americans Act funding that is currently available for senior center services provides a portion of the resources needed to operate a center daily. Service providers are expected to utilize resources outside of the senior centers, including the establishment of partnerships and collaborations to share resources, ideas, and partners. Each senior center funded through KIPDA has secured various funding sources to extend programs and services through growth, while ensuring accessibility to all who want to participate. A diverse set of funding sources is essential to long term survival and sustainability.

The Framework utilized for the development of Senior Center Models included those with demonstrated evidence of effectiveness and is aligned with the needs of older adults living in the community, geographic area and/or county to be served.

## FRAMEWORK FOR DEVELOPING A 21<sup>ST</sup> CENTURY SENIOR CENTER



1. Build broad partnerships made up of stakeholders willing to commit resources and expertise. Focus on how the stakeholders might be interested in becoming revenue partners.
2. Needs and priorities of local residents are an important part of shaping the decision to select one model over another. Additionally, the centers must also complement what already exist in the community and must be able to deliver measurable outcomes to the participants, agencies, foundations and others that invest in their work.
3. A healthy governance structure can ensure that a center is constantly re-evaluating community needs and adjusting programs. Consider board membership that includes persons from stakeholder groups, funders, banks, center participants and invest in training leadership.

### **ADDITIONAL SUPPORTIVE SERVICES THROUGH TITLE III-B:**

#### **TRANSPORTATION**

Transportation services include senior center and community access services, non-emergency medical transportation and transportation services offered through a voucher. Transportation providers will be expected to make available, transportation covering the KIPDA region. The project amount available from Federal and State funds to support this effort in FY 2017 is approximately **\$382,391**. KIPDA will also continue to partner with TARC on the continued implementation of a Senior Travel Training Project at approximately **\$4,015**, to support public transit options for older adults.

## **HEALTH PROMOTION AND DISEASE PREVENTION**

The Administration on Aging made a dramatic shift in the requirements for expending Title III-D Health Promotion and Disease Prevention Programs that requires Title III-D to only be used for disease prevention and health promotion programs and activities which have been demonstrated through rigorous evaluation to be evidenced based and effective. The Administration for Community Living (ACL) will implement a fully evidence-based approach to all services offered through this funding stream. Based on the history of the program and the degree of change needed to transition to the optimal-level of evidence-based implementation, each program will need to be assessed based on the criteria established ACL.

Approximately **\$124,856** of both Federal and State funding is anticipated to be available to support the Title III-D evidence-based projects in the KIPDA region. These services are currently being bid through a competitive procurement process. Once the process is completed, final recommendations for service providers and projects will be presented to the KIPDA Board of Directors for consideration.

During fiscal year 2018, KIPDA plans to also continue the implementation of previous evidence-based programs such as: Chronic Disease Self-Management, Diabetes Self-Management, Arthritis Exercise programs, Home Meds, Falls Prevention programs, smoking cessation programs and other newer initiatives approved by ACL and DAIL.

## **LEGAL SERVICES**

The Legal Aid Society, Inc., 425 Muhammad Ali Blvd., Louisville is recommended to continue to provide Legal Services to persons 60 and older in the region. The funding for FY 2018 is projected to be, **\$30,000**. The Legal Aid Society, Inc. will provide legal assistance to seniors age 60 and older with an emphasis on providing services for low-income seniors. Additionally, consideration of legal service options for caregivers and grandparents raising grandchildren will be reviewed and considered based on the final review of proposals and service options available to support clients in these target groups. It is anticipated approximately **\$15,250** will be available to support the cost of these services for caregivers and grandparents.

## **FINANCIAL MANAGEMENT**

During fiscal year 2016, Guardiacare, Inc. merged with ElderServe. This merger process is complete. The Financial Management program is formerly being administered by ElderServe (although the Guardiacare is still associated with the Financial Management program).

There are varying needs older adults have and KIPDA is committed to continuing financial management for the most vulnerable of our population. However, there are significant needs in terms of helping older adults our younger older adults to plan for sustaining oneself financially given the increasing costs of housing, utilities, food and medications. KIPDA is evaluating the best model and method for integrating this service into its overall menu of services in the region. During FY 2018, approximately **\$45,000** will be allocated to support the cost of the financial management service and potentially, a portion of the financial planning service.

## **LONG TERM CARE OMBUDSMAN SERVICES/ELDER ABUSE PREVENTION SERVICES**

Catholic Charities, has served as the Long Term Care Ombudsman agency for over 20 years. KIPDA is in the process of procuring for this service and anticipates selecting one eligible and capable entity to serve in this capacity for the next four (4) years. Long Term Care Ombudsman and Elder Abuse Prevention services and public awareness is supported through Federal and State general funds in the amount of **\$231,485** annually. The Federal funds are appropriated through the Older Americans Act and State Long Term Care Ombudsman services are supported through State General funds.

The purpose of these programs is to ensure that a team of trained Ombudsmen are available to advocate on behalf of older adults residing in long term care facilities. The Ombudsmen advocate for residents rights and the prevention of Elder Abuse. Responding to and resolving complaints are the primary function of the ombudsman's job. Residents are informed about the means of obtaining services to assist in protecting their health, safety, welfare, and rights through Ombudsman Posters in every long-term care **facility and a team of volunteers who visit long-term care facilities and personal care homes on a regular basis.**

**In-service training is provided to Certified Ombudsmen, quarterly, which includes** training on these issues to become more informed and educate families and the public through a variety of presentations to residents' councils, family councils, and facility staff as well as civic groups about long term care issues. Members of the LTC Advisory Council and volunteer ombudsman also spread the word through informal gatherings or other committee meetings they attend. In addition to the presentations, there are occasional articles in the LG&E Connection, Communiqué, local newspapers, newsletters of facilities, senior centers and non-profit agencies, etc. The AAAIL publicizes the program through its brochures, newsletter, weekly radio show, its ADRC and presentations. The website [www.medicare.gov](http://www.medicare.gov) is constantly publicized to the general public and is used by staff to obtain information on the latest licensure report, etc.

Title VII funds are used to expand the local ombudsman services by allowing the ombudsman staff to visit every long-term care facility in the KIPDA region at least once a year. Staff promotes awareness and education of elder abuse prevention in the community, family care homes, personal care homes and nursing facilities by doing in-services at the facility's request and speaking to groups (i.e. health fairs, civic and church groups, etc.) at their request. The District Ombudsman, ombudsman staff and certified volunteers will be providing these services.

## **NUTRITION PROGRAM FOR OLDER PERSONS**

The Nutrition Program for the Elderly is funded through the Older Americans Act, Title III-C and NSIP (Nutrition Services and Incentive Program). The program is implemented region-wide in accordance with KAR 910 1:190. In FY 2015, KIPDA conducted its competitive procurement for nutrition services for older persons and the selected caterers and service providers will continue to deliver this service over the next year. One primary change that has occurred over the last year is the implementation of client assessments to be conducted by service provider staff with specific **credentials that meet DAIL's** regulatory requirements. KIPDA staff will review assessments and determine final approval for enrollment of clients to receive home delivered meals. This modification impacted the design and cost of the service which will be demonstrated in the proposed meal prices:

Meal Contractors (Preparation of Eligible Meals): Masterson's Food and Drink and Jewish Community of Louisville

Service Delivery Component (eligibility determination, assessment for home delivered and serving or delivering meals): Louisville Metro Government, Multipurpose Community Action Agency and Tri-County Community Action Agency.

Numerous congregate sites have been established throughout the region with targeted locations to also package and initiate the delivery of meals for homebound persons. The service includes both congregate and home delivered meals from approved sites and coordinates with other supportive services at the sites including required monthly nutrition education programs, and nutrition counseling as necessary. Currently, the nutrition program provides hot, cold, shelf stable and frozen meals. To be considered reimbursable, all meals served in the III-C nutrition program must meet the new Kentucky Menu Planning Guidelines, comply with temperature rules, and be served within Kentucky's three hour rule.

It is projected that a total of \$1,471,322 is anticipated to be available to carry out both the congregate and home delivered meal services during FY 2019. Nutrition Services Incentive Program (NSIP) funds is an additional source of funds that historically has been available for the purchase of additional meals and is anticipated to continue in FY 2019 at approximately \$219,926 available to purchase approximately 300,000 meals. NSIP funds are intended to expand nutrition services to eligible populations. It is the goal of KIPDA to assure that the NPE-for both congregate and home-delivered meals-is accessible to all eligible populations throughout the region. Some NSIP funds will be targeted to support expanding the NPE to eligible populations who could not otherwise gain access to meals (i.e. clients who live outside the three hour rule and/or live in an area where volunteer deliverers are not available).

The Nutrition Program for the Elderly, funded through Kentucky General Funds, provides seven-day frozen meal packs to eligible Homecare clients region wide. Approximately \$253,000 of Homecare funds will be allocated for meals. KIPDA case managers assess and prioritize these clients and Masterson's food and Drink will deliver meals weekly. These meals meet the new Kentucky Menu Planning Guidelines and are the only ones currently served in the region that do so. Masterson's will produce, package, freeze, and deliver meals in its USDA inspected facilities.

### **FAMILY CAREGIVER PROGRAM and KENTUCKY CAREGIVER PROGRAM**

Older Americans Act funds are appropriated for the **Title III-E National Family Caregiver Program** for the purpose of developing a comprehensive system of services and care to family caregivers. Although development continues, KIPDA has established its provider network serving family caregivers through a variety of programs and services such as support groups, training and education through community and workplace initiatives, information and referral, counseling and respite.

In addition to its provider network, KIPDA also manages a supplemental services program to meet the individual needs and purchase of supplies or respite for caregivers in need, up to a specified amount annually. It is anticipated that \$285,832 of federal funds will be available to continue supporting these projects. Additional State funds are anticipated to be added to this program to support additional services for caregivers and assist in providing the required 25% match to fully utilize the Federal funds.

The State funds the **Kentucky Caregiver program** for the purpose of assisting grandparents with the primary responsibility of raising their grandchildren. It is projected in FY 2019 that \$242,435 of State General funds will be available to support the needs of eligible grandparents. The goal of the Kentucky Caregiver Program also known as the KIPDA Grandparent Raising Grandchildren Program is to provide Supplemental and Supportive services to eligible grandparents who are providing full-time care in the absence of both parents for a grandchild related by birth, marriage or adoption.

The KY Caregiver program includes a voucher program which awards grants to eligible grandparents for the purchase of their grandchild's **immediate needs e.g., clothing, furniture**, respite services and medical/dental services (if eligibility criteria are met). Supportive services includes information and access to a variety of community services, counseling, support groups, and training that are available to eligible grandparents. KIPDA has also established a provider agreement with Legal Aid Society to provide legal assistance to grandparents who are seeking guardianship, custody and/or adoption.

Eligibility criteria for the Kentucky Caregiver Program is outlined in the State Regulation KAR 1:260 which states that a grandparent seeking services must meet the following: (a) be a Kentucky resident, (b) be the primary caregiver for the grandchild, (c) be related to the grandchild by birth, marriage or adoption, (d) shall not reside in the same household with the grandchild's parents, (e) not receive a monthly payment from Kinship Care program and (f) not exceed an annual household income of 150% of the federal poverty level.

**HEMOCARE**

Kentuckiana Regional Planning and Development Agency (KIPDA) is responsible for implementing a comprehensive and effective in-home services program for home-bound seniors pursuant to KRS 194A.050, 205.204(2) and KAR 910 1:180. The intent of the HomeCare Program is to prevent unnecessary institutionalization of functionally impaired older persons and maintaining those eligible for services in the least restrictive environment, excluding residential facilities. HomeCare is a program aimed at identifying and serving elderly Kentucky citizens who are either at risk of becoming institutionalized in a long-term care setting or who are currently in such a facility and have a desire to return to their home and community. A key element of HomeCare is that each client is accepted into the program only after undergoing an assessment, using a standardized instrument, being certified by the assessment agency, and being case managed by a qualified individual who has sole authority to order HomeCare services. Another key element of the program is each client has the opportunity to choose an in-home service provider from a network of providers of Homecare Services for the majority of the primary in-home services.

The following services are available through the HomeCare Program: assessment, case management, homemaker, chore, personal care, respite, escort (transportation), and home delivered meals. It is anticipated that funding to support the Homecare Program for FY 2019 will be **\$3,497,568**; this amount reflects the current fiscal year budgeted amount. Reductions would significantly impact KIPDA's ability to continue to add clients waiting for services, which averages 461 persons monthly.

The following is a list of providers or vendors recommended to continue services for homebound seniors for fiscal year 2018:

<b>Provider</b>	<b>Services</b>	<b>Counties Served</b>
<b>ElderServe, Inc.</b>	Homemaker, Personal Care, Escort, Respite, Chore	Louisville-Metro (Jefferson County)
<b>Help At Home</b>	Homemaker, Personal Care, Escort, Respite, Chore	Region-wide
<b>Lifeline</b>	Homemaker, Personal Care, Escort, Respite, Chore	Region-Wide
<b>Tri-County</b>	Homemaker, Personal Care, Escort, Respite, Chore	Henry, Oldham, Trimble

<b>Guardian Medical Monitoring</b>	Emergency Personal Response Systems	Region-Wide
<b>Home Delivery Incontinent Supplies, Inc.</b>	Incontinent Supplies for seniors with bladder problems/ incontinence.	Region-Wide
<b>Masterson's Food and Drink</b>	Home Delivered Meals	Region-Wide

**\*The Homecare program operates through an assessment process and once eligible, clients have a choice of providers from which to choose their services. Therefore, providers are not guaranteed a set contract amount or maximum number of units. Units are ordered according to client care plan.**

**IN-HOME EMERGENCY SERVICES PROGRAM**

The In-Home Emergency Services Program is designed to provide temporary/short term services to persons sixty (60) years of age or older who live at home. Services include homemaking, chore services, personal care, escort, home delivered meals, respite, and Adult Day Care. The services will not extend beyond eight (8) weeks. These services do not require medical supervision, but are directed at maintaining, strengthening or safeguarding the functioning of the client in order for them to remain in their home. This program's intent is to prevent deterioration of health, interference in continuum of care and premature nursing home placement. Clients shall be monitored on a regular basis to ensure quality of care and the need for emergency services. During Fiscal Year 2019, it is anticipated that approximately **\$20,000** will be designated to provide emergency in-home services.

**ADULT DAY CARE**

The Department for Aging and Independent Living no longer supports the Adult Day Care Program with State funds. However, KIPDA continues to support persons needing ADC services who were receiving them during the state's funding transition; and new clients as appropriate and necessary to support the health, safety and welfare of the older adult.

In an effort to continue to support the needs of caregivers who need daily care for their loved one or to provide supervised care for older persons as they decline, KIPDA expects to continue to provide funding to adult day care centers where KIPDA clients remain enrolled. After consultation with the adult day care network (KIPDA and non-KIPDA providers), all expressed the need for adult day care support for older adults who do not qualify for Medicaid and are lower income and cannot afford to pay the private pay daily fee for this service. This target population is left without a safety net and KIPDA remains committed to supporting this service as funds will allow.

Adult Day Services are provided to an eligible adult in a supportive and therapeutic program of supervision and care during a part of the day, but for less than twenty-four (24) hours, including, but not limited to, personal care services, self-care training, social activities, and recreational opportunities. Adult Day Care providers are funded at a unit price (per ½ hour of service) at **\$8.00** per unit for health model and Alzheimer respite services and **\$8.00** per unit for social model adult day care services. The service is currently supported through Federal Title III B funds.

KIPDA anticipates allocating approximately **\$50,000** toward Adult Day Care Support during Fiscal Year 2019. Current providers serving active KIPDA clients include: ElderServe, Inc., Ferncreek-Highview Ministries, and, Southwest YMCA serving Jefferson County. As needs for this service continue to increase, KIPDA will consider expanding this provider base and will increase funding availability if possible.

### **PARTICIPANT DIRECTED SERVICES WAIVER**

The Participant Directed Services (PDS) allows eligible Medicaid waiver members to choose their own providers for non-medical waiver services. PDS is being offered for Kentucky Medicaid Waiver members who currently receive or become eligible to receive services through the Home and Community Based waiver (HCB), Supports for Community Living waiver (SCL), and the Acquired Brain Injury waiver (ABI). A Support Broker is required for all members participating in PDS. The Service Advisor acts as the Case Manager for members who choose PDS and will be responsible for monitoring on a monthly basis. The Support Broker will train the participants and their employees. Financial management is required for all individuals participating in the consumer directed option. An individualized budget will be provided to the member to negotiate services under PDS.

### **STATE HEALTH INSURANCE PROGRAM**

The State Health Insurance Program (SHIP) provides information, counseling, and assistance to seniors, people with disabilities, their family members, and their caregivers. SHIP's goals are to help consumers understand Medicare, Medicaid, Low-Cost Prescription Programs, Long-Term Care Insurance, etc. SHIP provides benefits counseling by telephone or in person, provides presentations to community groups, and provides printed materials and information and referrals to appropriate resources. Over the past fiscal year, KIPDA has also dedicated staff to increasing the number of volunteers and redesigning the volunteer training program. These initiatives will continue into Fiscal Year 2019.

The KIPDA Counseling Corps is the foundation of the SHIP services. The KIPDA Counseling Corps (volunteer/in-kind/staff counselors) includes a variety of counselors throughout the region, members of the community, Advisory Council Members, all KIPDA Social Services staff, health providers, community ministry staff, housing managers, etc.

KIPDA continues to develop a comprehensive, coordinated approach for information, assistance, referral, benefits counseling and legal services for all seven counties in the region. KIPDA and its volunteer network are available during working hours and continue to make available staff to assist beneficiaries outside of working hours as requested and at public events. No less than 3 volunteers will be maintained in each county to ensure adequate access to counseling and assistance is available as well from SHIP trained counselors at each focal point in the region. KIPDA receives SHIP and MIPPA funds to support the effort. MIPPA funds are provided specifically for targeting and serving low-income Medicare Beneficiaries. The projected amount of funds available to provide benefits counseling and SHIP assistance for 2019 is **\$196,198.**

### **KIPDA GERIATRIC WORKFORCE ENHANCEMENT GRANT:**

KIPDA AAAIL has been awarded a contract through the University of Louisville to support components of this initiative which is designed to train healthcare professionals and community based professionals to consider the overall healthcare needs of persons with chronic diseases to better manage and respond to treatment in order to improve overall health outcomes. The counties included in this initiative are Henry, Shelby and Bullitt counties. Four counties in the Barren River will also be covered with assistance by the Area Agency on Aging and Independent Living serving that part of the state. KIPDA funding is anticipated

to be \$472,271 for general grant implementation from July 1, 2017 to June 30, 2018. An additional amount of \$13,120 is available to support a caregiver training component for caregivers of loved ones with Alzheimer 's disease. An additional component to GWEP grant includes adding behavioral health component to the initiative. The ISHOA who administers this grant accessed another grant to support this effort. It is the Behavioral Health Workforce Education and Training Program. KIPDA will also partner with the ISHOA on this grant.

### **ASSISTER PROGRAM:**

Over the past five (5) years, KIPDA has implemented healthcare insurance enrollment, education and outreach assistance on behalf of the Kentucky Health Benefit and Information Exchange. As this office and initiative at the State-level continues to evolve, KIPDA continues to provide assister services to a sixteen county region. KIPDA anticipates this work will continue through fiscal year 2019. .

### **COMMUNITY PROJECTS 7 PARTNERSHIPS**

KIPDA Social Services is engaged with many community initiatives, partnerships, collaborative efforts, task forces and groups, and more; working together with community members to address the needs and issues impacting the community; working together with community members to make each community as healthy and accessible as possible. An area of concern and need that has been identified by the KIPDA Region's community members, including the KIPDA Board of Directors is the impact substance abuse is having on the citizens of region and their families.

Drug overdose is an ongoing public health issue in the Commonwealth of Kentucky, and more specifically, the KIPDA Region. According to 2013 CDC data, Kentucky had the 2nd highest age-adjusted drug overdose fatality rate in the United States, at 23.7 deaths per 100,000 population. The total number of drug overdose deaths increased approximately 7% from 2013 to 2014. However the number of deaths has continued to increase and 2015 statistics show that Kentucky has dropped from 2nd to the 3rd highest rate of deaths but the percentage of KY fatalities have increased to 29.9 per 100,000. Opioids, prescription and illicit, are the main driver of drug overdose deaths. Opioids were involved in 33,091 deaths across the United States in 2015 and 1,069 were Kentucky resident drug overdose deaths. These deaths represented overdoses by illicit and/or prescription drugs that were inflicted intentionally or unintentionally. The Kentucky Office of Drug Control Policy data reports that Jefferson County ranked the highest in the counties for heroin related overdose deaths with 131 deaths in 2015. From 2012 to 2015 there have been 65 overdose deaths in Bullitt, 843 in Jefferson, 29 in Shelby, 19 in Oldham, 6 in Spencer, 5 in Trimble, < 5 in Henry.

A recent research letter in the journal JAMA Pediatrics reports that Kentucky had more than twice the national rate of drug-dependent babies in 2013, the most recent comparable year - 15.1 cases per 1,000 live births when the U.S. rate was 7.3. The surge of increased drug use and overdose deaths has increased the placement of children from the homes of substance abusing parents with relative caregivers (typically, grandparents) and foster placement. According to Kentucky Youth Advocates, 2013 statistics showed Kentucky had the highest percentage of children being raised by relatives; 56,000 children across the Commonwealth. Five percent of children in the KIPDA region are currently being raised by grandparents.

The substance abuse crisis has impacted the lives of all citizens in the KIPDA Region. This epidemic needs the attention of all community service entities in the region. KIPDA is considering all options for helping our communities address the substance abuse issues impacting them. Currently, KIPDA is collaborating and partnering with community coalitions who have an active mission in drug education and prevention in their communities; working with local officials and the judicial system; and seeking grant funding to help support a variety of community efforts.