

Testimony
House Bill 1012 – Department of Human Services
Senate Appropriations
Senator Holmberg, Chairman
March 4, 2009

Chairman Holmberg, members of the Senate Appropriations Committee, I am Linda Wright, Director of the Aging Services Division of the Department of Human Services. I am here today to provide you an overview of the Division's budget for the Department of Human Services.

Programs

The Aging Services Division provides home and community based service options to maintain individuals in their homes and communities and assists in protecting the health, safety, welfare and rights of residents of long-term care settings and vulnerable adults in the community. This includes administration of Older Americans Act federal funds, the Telecommunications Equipment Distribution Program, State Funds to Providers, the Long-Term Care Ombudsman Program, the Guardianship Program for Vulnerable Adults, the Senior Community Service Employment Program, Qualified Service Provider Training, support for the Governor's Committee on Aging, Model Legal Systems Grant, and Aging and Disability Resource-LINK.

The Aging Services Division is a federally designated single planning and services area, which requires the Division to carryout the responsibilities of the State Unit on Aging and the Area Agency on Aging as set forth in the Older Americans Act (OAA). Among the requirements in the 2006 reauthorization of the OAA is the following: "require state agencies to promote the development and

implementation of a state system of long-term care that enables older individuals to receive long-term care in home and community based settings in accordance with the individual's needs and preferences."

Caseload / Customer Base

- In 2000, 118,985 (18.5 percent) of the population in North Dakota was 60 years of age or older.
- In 2020, it is projected that 170,117 (27 percent) of the population in North Dakota will be 60 years of age or older.
- In 2000, only one county (McIntosh) had more than 40 percent of its population age 60 or older.
- In 2020, 22 counties will have more than 40 percent of their population aged 60 or older.
- In 2020, three counties (Divide, Hettinger and McIntosh) will have more than 50 percent of their population age 60 or older.
- In 2000, 14,726 (2.3 percent) of North Dakota residents were age 85 or older.
- In 2020, it is projected that 20,106 (3.2 percent) of North Dakota residents will be age 85 and older.
- McIntosh County ranks number one in the nation among 3,142 counties for the highest percent of the population age 65 and older.

Please refer to the attached updated Graying of North Dakota brochure for additional information.

- In Federal Fiscal Year (FFY) 2008, 31,979 older persons received Older Americans Act funded services, which

include home-delivered meals, congregate meals, outreach, health maintenance services, national family caregiver program services, legal services, in-home safety, senior companion services, vulnerable adult protective services, and long-term care ombudsman services. See Attachment 1 for additional information about Older Americans Act services.

FFY 2008 Program Utilization

Older American Act – Title III Programs	
SERVICE	UNITS OF SERVICE
Assistive Safety Devices	1,731 devices
Congregate Meals	732,015 meals
Home-Delivered Meals	540,319 meals
Health Maintenance	140,258 units
Information & Assistance	1,900 units
Legal Assistance	4,370 units
Outreach	94,339 units
Senior Companion	5,204 units

Vulnerable Adults Program	
New cases	486
Closed cases	468
Information/referral	360
Brief Services	257
Hours	6,839

Family Caregiver Support Program	
Unduplicated Caregivers Served	551
Unduplicated Grandparents Served	14
Respite Care Provided	47,230 hours

Long-Term Care Ombudsman Program	
Number of Complaints	1,091
Number of Cases Opened	732

- The Qualified Service Provider (QSP) training program under contract with Lake Region State College has trained 227 QSPs from July 2006 through June 2008 for provision of in-home care. The training is provided by 69 nurses statewide and is not a mandatory requirement to become a QSP. Due to the fact that a health care professional must sign off on the documentation of competency when a QSP enrolls to provide services, many QSPs choose to participate in the training program. The documentation of competency is then signed by the nurse trainer. As of February 2009, there were 1,713 QSPs statewide which includes 143 agencies. Family home care or family personal care is provided by 362 QSPs, which basically means that those QSPs provide services to only one client (a family member).
- The Senior Community Service Employment Program will provide on-the-job training to 71 low-income individuals over the age of 55. The Division is contracting with Experience Works (formerly Green Thumb) to provide direct service to the enrollees. Experience Works serves an additional 275 enrollees in North Dakota through a national contract with the Department of Labor.

Program Trends / Major Program Changes

- As the result of a cooperative agreement with the Department of Transportation (DOT), transit services are no longer funded by the Older Americans Act and are funded by DOT. We continue to have on-going communication with DOT and receive statistical data from them regarding the number of rides provided to older persons.
- The increasing costs of providing services, including raw food costs, and meeting the new federal dietary requirements for congregate and home delivered meals; transportation costs and other inflationary increases, along with fairly flat federal funding, have increased the burden on contract providers to meet expenses in providing services to older persons.
- The information and referral services provided by the Division, formerly known as the Senior Info Line has expanded its database and changed its name to the Aging and Disability Resource-LINK. In addition to phone calls and e-mail inquiries, the Resource-LINK web site receives about 700 hits or "visits" per month. The attached brochure provides additional details about the Aging and Disability Resource-LINK.
- The development of Aging and Disability Resource LINK "No Wrong Door" model continues as a goal for the Department, as included in the Executive budget. In addition to \$600,000 in general funds, House Bill 1012 also contained revisions to N.D.C.C. 50-06-29. The House Appropriations Committee removed this statutory change from HB 1012 and included the establishment of an ADRC in HB 1476. That bill failed to pass the House. HB 1476 included language that would have allowed the Department not only to establish community-based Aging and Disability Resource Center services, but also would have allowed the Department to secure

funding from a variety of sources including federal grants, foundation funds, general funds and other funding sources. The Department has developed draft language that would revise the current state law allowing the Department to pursue other funding sources and implement the Aging and Disability Resource Link model. Without this change in statute, the Department cannot pursue future federal grants or other funding opportunities.

ADRCs have been developed in 45 states, as required by the Older Americans Act, and serve as integrated points of entry into the long-term care system, commonly referred to as “no wrong door” or “one stop shop”, and are designed to address many of the frustrations consumers and their families experience when trying to access needed information, services and supports. Many long-term care studies that have been conducted in North Dakota, beginning with the “Drayton study” in 1987, have recommended establishment of a “one stop shop” or “no wrong door.” Please refer to attachments A through H for additional information about ADRCs.

The Aging and Disability Resource Link model is accountable for outcomes and follow-up with each consumer.

The service deliver model is a process. It does not replace the functions of agencies such as County Social Service Offices, Human Service Centers, Independent Living Centers, Older Americans Act Programs, etc., but instead brings the agencies together to build on existing services; to cross-train staff; to educate and inform the public; to network and enter into collaborative agreements; to more

effectively serve older persons, and persons with physical disabilities and their families by providing needed information, assessment, eligibility help, benefits counseling, and options for services.

The [Aging and Disability Resource Link model](#) does not create another layer of bureaucracy; but instead addresses gaps while avoiding duplication and improving consumer access to needed services.

The model establishes partners and access points in service areas.

Overview of Budget Changes

Description	2007 - 2009 Budget	Increase/ Decrease	2009 - 2011 Budget	House Changes	To Senate
Salary and Wages	1,171,458	164,309	1,335,767	(10,202)	1,325,565
Operating	11,499,804	1,494,919	12,994,723	(629,170)	12,365,553
Capital Payments	194	(194)	-	-	-
Grants	1,598,290	(5,910)	1,592,380	-	1,592,380
Total	14,269,746	1,653,124	15,922,870	(639,372)	15,283,498
General Funds	1,480,994	1,701,713	3,182,707	(622,056)	2,560,651
Federal Funds	12,378,752	51,219	12,429,971	(15,084)	12,414,887
Other Funds	410,000	(99,808)	310,192	(2,232)	307,960
Total	14,269,746	1,653,124	15,922,870	(639,372)	15,283,498
FTE	10.00	-	10.00	-	10.00

Budget Changes from Current Budget to Executive Budget:

The salary and wages line item has a net increase of \$164,309 due to the following:

- \$121,143 of which \$91,857 is general funds for the Governor's salary package.
- \$19,601 in general funds for the cost to continue the second year salary increase.
- \$23,565 to maintain current FTEs.

The operating line item increased by \$1,494,919. The major increases are:

- \$35,500 increase, of which \$8,875 is from the general fund for office rent at Prairie Hills Plaza. The Division relocated from the Capitol to Prairie Hills Plaza in November 2007.
- \$29,971 increase, of which \$700 is from the general fund for increased travel costs for staff and Volunteer Community Ombudsmen.
- \$30,000 increase, of which \$9,980 is from the general fund for the training of Qualified Service Providers to meet the actual cost of the training.
- \$106,400 in general funds for the inflationary rate increase for direct service providers.
- \$600,000 in general funds to establish Aging and Disability Resource Center services. This is offset by an \$840,000 decrease, of which \$40,000 is from the general fund, to remove appropriation authority from last session for a federal grant (that was not received) to establish Aging and Disability Resource Center services.

- \$900,000 from the general fund to increase the reimbursement to Older Americans Act service providers to assist in meeting the actual costs of providing services.
- \$627,445, of which \$2,021 is from the general fund for increases in operating fees and services related to:
 - Ombudsman Activities - (\$23,567)
 - Telecommunications Equipment Distribution – \$14,100
 - Preventive Health – (\$3,700)
 - Title III B Community Services - \$57,458
 - Congregate Nutrition - \$88,780
 - Home Delivered Nutrition - \$118,340
 - Alzheimer’s Demonstration Project – (\$226,725)
 - Nutrition Services Incentive Program - \$453,654
 - Single Point of Entry – (\$30,000)
 - Family Caregiver Support - \$172,994

Grants decreased by \$5,910 due to the following:

- A decrease of \$15,000 in other funds for the Telecommunications Equipments Distribution program
- An increase of \$50,000 in federal funds for the Model Legal Systems for Seniors grant
- A decrease of \$250,000 of federal and other funds for the closeout of the Alzheimer’s Disease Demonstration grant
- An increase of \$209,090 of federal funds for the Senior Employment grant

House Changes:

The House underfunding of salaries for anticipated savings from vacant positions and employee turnover for this area of the budget is \$3,350 – general fund and \$6,852 – federal funds for a total of \$10,202.

The House reduced 50 percent of the department-wide travel increase. Aging Services share of this decrease is \$13,970 total funds; \$3,506 – general fund; \$8,232 - federal funds; and \$2,232 - other funds.

The House reduced the inflationary increase for providers from 7% and 7% to 6% and 6% resulting in a decrease of \$15,200 in general funds.

The House removed \$600,000 general funds for the establishment of Aging and Disability Resource Center services.

This concludes my testimony. I would be happy to answer any questions.