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## SECTION B – PLANNING AND SERVICE AREA PROFILE

### Section B-1 Population Profile

#### **People Over Age 60:**

According to updated 2010 U.S. Census data\*, there are currently 98,726 total people age 60 and above in our Planning and Service Area (PSA), which is a 20% increase from the original 2010 Census data. Of those over 60, 15,209 or 15%, are considered to be at or below the Elder Economic Security Standard Index (EESSI). See Section B, page three, for further discussion of the EESSI.

Of those people over age 60, 39,578 or 40% live in the rural counties of Lewis and Mason. Thurston County is made up of an urban core of Olympia, Lacey and Tumwater and several outlying rural communities. According to the 2013 Census update, these rural communities in Thurston County include approximately 30,000 people over 60, which is 31% of the PSA. In total, approximately 70,000 or 71% of people over age 60 in our PSA live in rural areas.\*\*

According to Census forecasting, by the year 2019, the population of people over age 60 in our PSA will grow to 112,252, an increase of 14%. By the year 2020, the over 60 population will grow to 115,701, an increase of 17% over current figures.

Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons aged 60 or above	20,617	18,961	59,147	98,726
Number of persons aged 60 or below EESSI	3,770	3,467	7,971	15,208

#### **Minority Racial or Ethnic Status:**

Updated 2010 Census data also reports 8,531 or nearly 9% of people over age 60 in our PSA are also considered to be of minority racial or ethnic status, and 3,360 or 3% have limited English proficiency. The number of people estimated to be over age 60 and also of minority status has increased by 72% since the 2010 census. Of those who are over age 60 and considered a minority, 925 or 11% are at or below 100% Federal Poverty Level (FPL).

Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons aged 60 or above and minority	1,263	1,079	6,189	8,531
Number of persons aged 60 or above with limited English proficiency	681	607	2,072	3,360
Number of persons aged 60 or above and at or below 100% FPL and minority	90	81	754	925

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## Native Americans:

There are five Tribes within our PSA: Chehalis Tribe, Cowlitz Indian Tribe, Nisqually Indian Tribe, Skokomish Tribe, and Squaxin Island Tribe. All five Tribes have their own Title VI Programs. According to updated 2010 Census data, there are 1,071 American Indian and/or Alaska Native persons in our region who are over age 60, which is 1% of the 60+ population in our service area.

Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons aged 60 or above and American Indian/Alaska Native	305	260	506	1,071
Native American Tribes	(1) Cowlitz	(2) Skokomish, Squaxin Island	(2) Chehalis, Nisqually	(5) Total

## Disabilities and Cognitive Impairment:

Within our PSA there are 32,046 people who are over the age of 18 with a disability. Of that number, 20,333 or 63% are over age 60.

Adults over age 18 with cognitive impairments total 19,652, which breaks down to include 8,724 people over age 60 (44%) and 10,901 under age 60 (56%). 7,212 people over age 70 have been diagnosed with dementia. This is an increase of 33% over original 2010 census figures. By 2020, that number is expected to increase to 8,591, which is a 19% increase over current figures.

A large number of adults need assistance with Instrumental Activities of Daily Living (IADLs) such as housework, shopping, meal preparation, and transportation. 21,203 adults in our PSA need assistance with IADLs. Of that number, 12,669, or 60% are people over age 60.

Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons aged 18 or above and disabled	6,719	6,165	19,162	32,046
Number of persons aged 60 or above and disabled	4,500	4,009	11,824	20,333
Number of persons aged 18 or above with cognitive impairment	4,011	3,664	11,977	19,652
Number of persons aged 60 or above with cognitive impairment	1,980	1,751	4,993	8,724
Number of persons aged 70 or above with dementia	1,632	1,390	4,190	7,212

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Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons aged 18 or above with IADL	4,458	4,049	12,697	21,203
Number of persons aged 60 or above with IADL	2,853	2,493	7,323	12,669

### Medicaid

The number of people who are on Medicaid programs changes monthly, but as of June 2014, there were 629 people living in Skilled Nursing Facilities, 745 people living in community residential facilities, and 1,954 people using in-home Medicaid services within our PSA. It is expected that the number of people using in-home services will increase by 10% by 2020.

Characteristic	Lewis	Mason	Thurston	Total PSA
Number of persons using Medicaid skilled nursing facility services	151	124	354	629
Number of persons using Medicaid community residential services	224	31	490	745
Number of persons using Medicaid in-home services	573	307	1,074	1,954

\*Census data and long range forecasts provided by David Mancuso, PhD, Senior Research Supervisor, DSHS Research and Data Analysis Division, Forecasts of the Aging Population, Dementia, Prevalence and Use of Long Term Care Services through 2020 in Washington State, June 2015.

\*\*Cities population data obtained from the updated 2010 U.S. Census and the Washington State Office of Financial Management, Forecasting Division.

### **Elder Economic Security Standard Index**

Many believe the Federal Poverty Level, as published by the U.S. Department of Health and Human Services, is an inadequate standard to use when discussing the economic viability of our aging population. A more verifiable measure to use is the Elder Economic Security Standard Index (EESSI).

In March 2011, The Washington Association of Area Agencies on Aging, in partnership with Wider Opportunities for Women, released data that provides information on the costs that older adults face in retirement – in every county in the state of Washington. The original report can be found at <http://www.wowonline.org/resources/>. A 2013 update can be found at <http://www.wowonline.org/elder-economic-security-initiative/>.

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This is especially important to review when identifying the impact of transportation, housing and medical costs of our seniors. The key findings for the State of Washington in the EESI are:

1. In Washington, elders cannot meet their basic living expenses if they live at the federal poverty level (which in 2015 is \$11,770 for one person, and \$15,903 for a couple) or the level of the average Social Security benefit. This is true of elders statewide, whether they rent or own a home.
2. Housing costs (mortgage or rent, taxes, utilities and insurance) put a heavy burden on some elder households, representing as much as half of their total expenses.
3. The Elder Index shows the significance of health care costs for Washington elders who must purchase supplemental health and prescription drug coverage to Medicare.
4. Even elders who are currently making ends meet face an uncertain future if their life circumstances change, such as loss of a spouse/partner or a decline in health status.
5. The need for home and community-based long term care can more than double an elder's expenses, significantly increasing the income needed to meet basic needs.

The following are the updated Economic Security Standard Indexes for Lewis, Mason and Thurston Counties.

## Lewis County Monthly Expenses – Good Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Good	Good	Good	Good	Good	Good
<b>Housing</b>	\$369	\$654	\$1,045	\$369	\$654	\$1,045
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$261	\$261	\$261	\$403	\$403	\$403
<b>Health Care</b>	\$391	\$391	\$391	\$782	\$782	\$782
<b>Miscellaneous</b>	\$255	\$255	\$255	\$403	\$403	\$403
<b>Index per Month</b>	\$1,528	\$1,813	\$2,204	\$2,420	\$2,705	\$3,096
<b>Index per Year</b>	\$18,336	\$21,765	\$26,448	\$29,040	\$32,460	\$37,152

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## Lewis County Monthly Expenses – Poor Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Poor	Poor	Poor	Poor	Poor	Poor
<b>Housing</b>	\$369	\$654	\$1,045	\$369	\$654	\$1,045
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$261	\$261	\$261	\$403	\$403	\$403
<b>Health Care</b>	\$564	\$564	\$564	\$1,128	\$1,128	\$1,128
<b>Miscellaneous</b>	\$255	\$255	\$255	\$403	\$403	\$403
<b>Index per Month</b>	\$1,701	\$1,986	\$2,377	\$2,766	\$3,051	\$3,442
<b>Index per Year</b>	\$20,412	\$23,832	\$28,524	\$33,192	\$36,612	\$41,304

## Mason County Monthly Expenses – Good Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Good	Good	Good	Good	Good	Good
<b>Housing</b>	\$418	\$677	\$1,258	\$418	\$677	\$1,258
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$261	\$261	\$261	\$403	\$403	\$403
<b>Health Care</b>	\$482	\$482	\$482	\$964	\$964	\$964
<b>Miscellaneous</b>	\$283	\$283	\$283	\$450	\$450	\$450
<b>Index per Month</b>	\$1,696	\$1,955	\$2,536	\$2,698	\$2,957	\$3,538
<b>Index per Year</b>	\$20,352	\$23,460	\$30,432	\$32,376	\$35,484	\$42,456

## Mason County Monthly Expenses – Poor Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Poor	Poor	Poor	Poor	Poor	Poor
<b>Housing</b>	\$418	\$677	\$1,258	\$418	\$677	\$1,258
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$261	\$261	\$261	\$403	\$403	\$403
<b>Health Care</b>	\$590	\$590	\$590	\$1,180	\$1,180	\$1,180
<b>Miscellaneous</b>	\$283	\$283	\$283	\$450	\$283	\$283
<b>Index per Month</b>	\$1,804	\$2,063	\$2,644	\$2,914	\$3,173	\$3,754
<b>Index per Year</b>	\$21,648	\$24,756	\$31,728	\$34,968	\$38,076	\$45,048

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## Thurston County Monthly Expenses – Good Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Good	Good	Good	Good	Good	Good
<b>Housing</b>	\$509	\$743	\$1,272	\$509	\$743	\$1,272
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$265	\$265	\$265	\$410	\$410	\$410
<b>Health Care</b>	\$405	\$405	\$405	\$810	\$810	\$810
<b>Miscellaneous</b>	\$286	\$286	\$286	\$438	\$438	\$438
<b>Index per Month</b>	\$1,717	\$1,951	\$2,480	\$2,630	\$2,864	\$3,393
<b>Index per Year</b>	\$20,604	\$23,412	\$29,760	\$31,560	\$34,368	\$40,716

## Thurston County Monthly Expenses – Poor Health

Household	Single Elder	Single Elder	Single Elder	Elder Couple	Elder Couple	Elder Couple
<b>Housing Status</b>	Owner w/o mortgage	Renter, 1 bedroom	Owner w/ mortgage	Owner w/o mortgage	Renter, 1 bedroom	Owner w/mortgage
<b>Health Status</b>	Poor	Poor	Poor	Poor	Poor	Poor
<b>Housing</b>	\$509	\$743	\$1,272	\$509	\$743	\$1,272
<b>Food</b>	\$252	\$252	\$252	\$463	\$463	\$463
<b>Transportation</b>	\$265	\$265	\$265	\$410	\$410	\$410
<b>Health Care</b>	\$576	\$576	\$576	\$1,152	\$1,152	\$1,152
<b>Miscellaneous</b>	\$286	\$286	\$286	\$438	\$438	\$438
<b>Index per Month</b>	\$1,888	\$2,122	\$2,651	\$2,972	\$3,206	\$3,735
<b>Index per Year</b>	\$22,656	\$25,464	\$31,812	\$35,664	\$38,472	\$44,820

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## **Section B-2 Targeting Services**

Through outreach, services and advocacy, Lewis-Mason-Thurston Area Agency on Aging (LMTAAA) targets vulnerable adults with the greatest social and economic need, as well as minority and rural populations. Special efforts are made to ensure that programs are designed, located and offered in a manner responsive to individuals with special physical, mental, language and cultural needs.

LMTAAA strives to uphold ALTSA's vision to support client centered planning and we turn no one away who seeks our help, even with limited funding in our Information and Assistance (I&A) program for those consumers under the age of 60. We receive our largest proportion of clients with disabilities under the age of 60 within our Case Management services, who are transferred to us after initially being screened and assessed by Home and Community Services staff. We collaborate with HCS on an ongoing basis to provide seamless services.

Direct services such as Information and Assistance and Family Caregiver Support are continuously reaching individuals in targeted populations. LMTAAA Assistance Specialists regularly visit congregate meal sites, senior centers and Tribal centers offering information and assistance to older adults who gather there. The Assistance Specialists also look for opportunities to participate in community events where minority groups gather, such as the ethnic festivals, Tribal health fairs and ethnic nutrition sites. Assistance Specialists regularly meet with other service providers in each county who serve seniors with social and economic needs, to share resources and provide information. The Family Caregiver Support Program specifically targets caregivers in all of the program's core service areas, including kinship support. Staff is proactive in outreach efforts to minority populations, rural populations and individuals with high social and economic needs (see section C-1 Family Caregivers and Kinship Caregivers issue area). Additionally, LMTAAA has three bi-lingual employees (Korean and Vietnamese,) who are available as needed for translation and interpretation.

LMTAAA participates in year-round community activities, public forums, and other outreach events through our I&A and Family Caregiver Support programs. These events bring us into contact with people across all categories of age, race, ethnicity, and gender, etc. We have reached out to SAGE and the Rainbow Community Center in order to develop a relationship that enables us to provide information and support to the LGBT community.

LMTAAA has also developed relationships with many organizations that provide services and information to minority and limited English-speaking populations, such as the Vietnamese Senior Association of Olympia and Vicinity, Korean and Spanish speaking elders groups at the Lacey Senior Center, and the Cielo Project. The AT&T Language Line and paid interpreter service contracts are in place to allow LMTAAA staff to communicate with non-English speaking clients. LMTAAA has also developed working relationships with all of the area's Tribes, as well as the South Puget Intertribal Planning Agency (see Section C-4, Older Native Americans issue area/Policy 7.01

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Plan). Through partnerships with these organizations, LMTAAA can better serve targeted populations and can become aware of the needs of these individuals.

Many of the region's organizations that serve rural, minority and limited English-speaking populations have been recipients of funding through LMTAAA's Small Projects Support Program, which offers funding to support special projects and services for seniors. Additionally, Medicaid contract procurement processes are always open, and non-Medicaid procurement processes are publicly announced in newspapers in Lewis, Mason and Thurston Counties and specifically mailed to organizations that are identified as women or minority-owned.

Within our three-county region, Lewis and Mason Counties are considered rural. Within Thurston County, the metropolitan tri-city area of Olympia, Lacey and Tumwater are surrounded by smaller rural communities. Extra efforts are made to provide all services to all of the outlying areas of our counties. LMTAAA Information and Assistance staff have also continued to provide a presence in the eastern, most rural part of Lewis County by traveling to the area at least once a month to provide outreach at senior centers, service organizations and/or community events. The LMTAAA office in Shelton provides the same services to all parts of Mason County, which uniquely surrounds Hood Canal, causing geographic isolation in many parts of the county. LMTAAA Advisory Council has member representation from eastern Lewis and northern Mason County, the two more rural areas, which provides valuable input about the unique needs of those areas.

LMTAAA subcontracts with organizations that provide congregate and home-delivered meals to seniors who are geographically isolated, or are part of a minority community. There are meal sites in the rural communities of Belfair (Mason); Rochester, Tenino and Yelm (Thurston); and Packwood, Morton, Winlock, Toledo and Pe Ell (Lewis) and an ethnic meal site in Olympia which caters specifically to Vietnamese elders.

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## Section B-3 AAA Services

The Lewis-Mason-Thurston Area Agency on Aging (LMTAAA) provides services to all eligible individuals without regard to race; color; creed; national origin; religion; gender; age; marital status; Vietnam era or disabled veteran status; or the presence of any sensory, mental, or physical handicap.

Services that may be provided by or through LMTAAA include the following. All services are available in all three counties unless noted otherwise.

### Non-Medicaid Services

**Adult Day Care** is provided to adults with disabilities who live in the community in order to delay or prevent the need for more costly and restrictive institutional care. Participants attend centers during the day to receive care designed to meet their physical, cognitive and emotional needs. Adult Day Care is not a medical service. Rather, it provides opportunities for socialization and stimulating activities. In many instances, it also enables the participants' family a much needed respite from their caregiving duties. This service is available in Thurston and Mason Counties. There is no qualified day care provider available in Lewis County.

**Aging Network Case Management** provides non-core case management services to clients 60 and over who are identified as requiring additional services beyond the scope of I&A services. Clients are referred to a Case Manager who works with the clients to address their needs.

**Chronic Pain Self-Management Program (CPSMP)** provides workshops, using the evidence-based Stanford University model, to help adults more effectively manage pain associated with a variety of medical conditions, in order to live as independently as possible in their local communities. Workshops are provided once a week, for six weeks, in community settings such as senior centers, churches, libraries and hospitals. Workshops are facilitated by trained leaders and are available in Mason and Thurston Counties through the grant period, which ends 3/31/16.

*2018-2019 Update: This grant ended 3/31/16.*

**Family Caregiver Support Program** services include assessment, information, assistance, training, respite, counseling, and supplemental services for unpaid family caregivers providing assistance to family members with long-term care needs, as well as grandparents or other relatives raising a child.

**Homemeds** program is an evidence-based computerized tool that addresses a client's medication use. RN staff operate by referral and by file review to determine high risk clients with multiple medications and provide a home visit to review the medications. Information is gathered that is not readily available to prescribers, such as adverse effects, clients' use of over-the-counter medications, herbal remedies, duplication possible from multiple prescribers or hospital/ER visits, and adherence issues. Information is provided to the prescriber as well as the client, including a printed

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comprehensive medication list along with potential areas of concern. Follow up with the prescriber is encouraged to resolve any identified problems.

***2018-2019 Update:** Due to insufficient funding, this program was discontinued December 31, 2016.*

**Information and Assistance (I&A)** provides older adults with the information and services they need or are interested in learning more about. Information is provided on a one-on-one basis and can be provided over the phone or in person. The assistance provided includes information giving, service referral, advocacy and assistance, and helping with application processes. I&A also provides a gateway into the Case Management program for those requiring more intensive assistance. The I&A program links people to medical services, arranges for prescription drug coverage and supports a number of other specific activities that promote individual health and disease management. I&A staff additionally work with with the Statewide Health Insurance Benefit Advisors (SHIBA) staff and volunteers to provide Medicare Part D education and assistance with enrollment. These services are available in Lewis, Mason and Thurston Counties. Medicare Improvements for Patient and Providers Act (MIPPA) funding is used to fund I&A provision of medication education, Medicare Part D outreach, and coordination with local pharmacists to provide medication presentations during outreach activities.

***2018-2019 Update:** Funding for Medicare Part D Outreach and coordination with pharmacists has been discontinued.*

The **Kinship Caregiver Support Program** provides emergency services for basic needs to grandparents and other relatives raising children, who are at or below 200% of the Federal Poverty Level. Needs are identified and goods and services are paid for directly by the provider. Families can only be served once per year for a maximum benefit in goods and/or services.

The **Kinship Navigator Program** provides assistance to grandparents and other relatives raising children with understanding and navigating the system of services for children living with relatives. The program helps locate support services for the kinship caregiver, connects families with community resources, and prevents children from entering foster care.

**Kinship Legal Services** is a short term startup project providing access to free legal assistance in order to facilitate grandparents and other relatives age 55 and older raising a relative's child(ren), pursuing a legal arrangement for the children in their care, and to prevent the children from entering the formal foster care program. The program offers free Kinship Legal Clinics and one-on-one consultations with a legal team.

**Legal Services** assist older adults in advocating for their rights, benefits and entitlements. Services range from advice and drafting of simple legal documents to representation in complex litigation on non-criminal and non-fee generating cases. Cases may be taken on individually or may be as part of a class action lawsuit. Other legal service activities include professional consultation and disseminating information

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about legal issues to older persons, service groups and bar associations through lectures, group discussions and the media.

The **Long Term Care Ombudsman Program (LTCOP)** recruits, trains and certifies volunteers who are assigned to long term care residential facilities to protect resident rights and advocate on behalf of the residents. The LTCOP helps to investigate and resolve problems that affect an individual or groups of residents and can promote legislative and/or administrative changes that improve the quality of life for persons living in long term care facilities.

**Medication Management and Support** includes activities, information and referrals designed to link older people with affordable prescription drugs, and assist them to find and use discount drug programs. It provides forums to address utilization and produces and distributes education materials.

**Nutrition Services: Congregate Meals** are provided to help meet the dietary needs of older adults who may be nutritionally at risk by providing nutritionally sound and satisfying meals in congregate settings. Congregate meals are served on various days at 14 sites throughout the region. These services are intended to maintain or improve the health status of individuals, support their independence, provide a means of socialization and prevent premature institutionalization. Additional services include nutrition education.

**Nutrition Services: Home-Delivered Meals** are provided to help meet the dietary needs of homebound older adults who may be nutritionally at risk by providing nutritionally sound and satisfying meals to the home setting. Home-Delivered meals are provided to those individuals who are homebound and unable to prepare meals for themselves. Meals are delivered hot, frozen and/or chilled. These services are intended to maintain or improve the health status of individuals, support their independence, prevent premature institutionalization and allow earlier discharge from hospitals and residential care facilities. Additional services include nutrition education.

The **Senior Farmers Market Nutrition Program (SFMNP)** provides fresh produce to older persons with an income at or below 185% of Federal Poverty Level. SFMNP checks, valued at \$40, are distributed on a first come/first serve basis to eligible participants. SFMNP checks are redeemable at authorized farmers markets and/or farm stands for the purchase of fresh fruits and vegetables.

**Transportation** is provided to medical appointments, social services, adult day care, shopping, and other essential errands for older adults who do not have alternative ways to access these types of community services. Personal assistance for those with limited physical mobility may be provided.

**Volunteer Support** is provided to agencies that provide volunteer support services, specifically United Way, Retired and Senior Volunteer Program (RSVP), and the Senior Companion Program. These programs rely heavily on volunteers and could not operate

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without them. Funds are used to reimburse volunteers for mileage when providing services, as well as retention activities.

***2018-2019 Update:** The Senior Companion Program, which was operated in Thurston County through the YWCA of Grays Harbor, is no longer offered in our region.*

## Medicaid Services

**Care Transitions** is provided under the Coleman model, an evidence-based program to assist persons to have a safe and effective discharge from the hospital to home. LMTAAA staff participate in a Safety Net meeting, operated by CHOICE Regional Health as a roundtable discussion with community partners and local physicians. Care Transitions is a component of the contracts with Health Homes and is executed on a referral basis throughout Lewis, Mason and Thurston Counties.

***2018-2019 Update:** Due to insufficient referrals and revenue, this program was discontinued 12/31/16.*

**Case Management** provides in-depth assistance to adults with disabilities who have multiple needs and significant social and health issues. Case Managers conduct comprehensive assessments with and on behalf of clients, in order to develop and implement a care plan that enables the person to remain in his/her own home. Case Managers authorize and manage formal support services and assist to coordinate with informal support systems for a comprehensive plan of care. They maintain regular contact with clients and their care providers to monitor the quality of the care plan. Documentation is maintained to establish eligibility for services.

The **Homecare Referral Registry** develops and maintains a current listing of qualified Individual Providers (IPs) that may be accessed by Medicaid consumers with in-home personal care needs. It serves as a system to match those who require care and those who are looking to provide care. This service is available to IPs and clients in Lewis, Mason, and Thurston Counties.

**Nurse Consultation** is aimed at high-risk older adults and adults with disabilities who are medically unstable and referred by a Case Manager to coordinate their health care and provide consultation to support the care plan. The individual's special needs or circumstances determine the frequency and amount of service.

**Home and Community Based Services** are those provided through Community First Choice (CFC), Medicaid Personal Care, COPES, and Roads to Community Living (RCL), and include the following.

- **Personal Care** services support individuals who are unable to independently manage at least three or more activities of daily living (ADLs). In-home caregivers provide assistance with such things as locomotion, dressing, bathing, eating, toileting, transfers and medication management. Some household tasks may be available to those needing assistance with ADLs to maintain a safe and

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healthy environment. These services are available in Lewis, Mason and Thurston Counties.

- **Personal Emergency Response Systems (PERS)** secure help in an emergency through an electronic device that is either connected to the client's phone or operates using cellular signals and is programmed to signal a response center staffed by professionals who immediately summon help.
- **Skills Acquisition Training** provides instruction to clients who need assistance with ADLs.
- **Relief Care** provides back-up care to clients when the scheduled home care provider is unavailable.
- **Community Transition Services** provide support to clients moving from residential facilities and institutional settings to community settings.
- **Adult Day Care** provides out-of-home day care activities for disabled clients and relief to their informal caregivers.
- **Home Delivered Meals** provide nutrition meals to homebound individuals who are unable to prepare meals for themselves.
- **Medical Equipment and Supplies** provides items that assist clients in coping with medical conditions so that they can continue to function in their own homes.
- **Client Training** teaches clients a variety of skills required to be able to continue to live in their homes.
- **Skilled Nursing** provides RN services in the client's home to protect and promote the client's health and welfare.
- **Transportation** provides rides to medical appointments, social services, adult day care, shopping, and other essential errands for older adults who do not have alternative ways to access these types of community services.
- **Home Modifications** are minor physical adaptations to a client's own home to ensure safety and enable independent functioning.
- **Transition Planning** includes services that assist in the stabilization of the new community setting for those transitioning from residential facilities and institutions.
- **Transitional Mental Health** provides mental health services to clients transitioning from residential facilities or institutions to community settings.
- **Challenging Behavior Consultation** provides services to individuals who need help managing difficult behaviors that interfere with their ability to function in a community setting.
- **Substance Abuse Consultation** provides professional supports, such as substance abuse counseling, for individuals who require these services in order to transition to the community or in order to live successfully while in the community.

**(NEW)** The **Medicaid Transformation Demonstration** is a new system of care focused on outcomes, supporting families in caring for loved ones, delaying or avoiding the need for more intensive Medicaid-funded long term services and supports (LTSS) where possible, creating better linkages to a reformed healthcare system and continuing its commitment to a robust Medicaid LTSS system for those that need it. This program

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is being developed and rolled out in 2017 in partnership with DSHS Aging and Long Term Supports Administration.

## **Section B-4 Non-AAA Services**

There are a multitude of services provided by other entities that provide important supports to our community, including older adults, adults with disabilities, and family caregivers. These services are provided by for-profit, non-profit, governmental and private organizations. We consider all to be an important part of the network of services available to those in need in our region. Our service area has a large array of services. While we have identified no specific service gaps, there is an issue of limited capacity across existing services.

The vast majority of the services listed below are offered and available locally within each of our three counties. Two services, as noted with an asterisk, are physically located solely within Thurston County, but available to residents throughout the region for those who are willing and able to travel.

- ✚ Adult Protective Services
- ✚ Alcohol and Drug Abuse Programs
- ✚ Alzheimer's Support Groups
- ✚ Case Management (private)
- ✚ Conflict Resolution Services
- ✚ Crisis Intervention Hotlines
- ✚ Cultural Services and Services for persons with limited English proficiency (LEP)
- ✚ Dental Clinics
- ✚ Disability Services
- ✚ Education and Counseling Programs
- ✚ Employment Services
- ✚ Energy Assistance
- ✚ Exercise classes and other opportunities for physical activity
- ✚ Financial Planning /Management
- ✚ Food Banks
- ✚ Guardianship Services
- ✚ Health Fairs/Health Screening
- ✚ Homeless Programs
- ✚ Home Health Care
- ✚ Home Health and Oxygen Equipment
- ✚ Home Repair
- ✚ Hospitals/Medical Clinics
- ✚ Housing Services
- ✚ Information and Assistance/Referral Programs
- ✚ Insurance Counseling
- ✚ Legal Assistance
- ✚ Medical and Health Services
- ✚ Medical Equipment Banks

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- ✚ Mental Health Services
- ✚ Nurse Consultation
- ✚ Nutrition Programs
- ✚ Older Gay/Lesbian Services\*
- ✚ Personal Emergency Response Systems
- ✚ Senior Centers
- ✚ Senior Companion Program\*
- ✚ Senior-focused Newspapers
- ✚ Support/Issue Groups
- ✚ Telephone Reassurance Program
- ✚ Transportation
- ✚ Tribal Services
- ✚ Utility Bill Assistance
- ✚ Veterans Services
- ✚ Volunteer Chore Services
- ✚ Volunteer Opportunities

LMTAAA has prioritized, through our Information and Assistance Program, the widespread distribution of information about these community resources. We have published the *Resource Directory* of Lewis, Mason and Thurston Counties for more than to fifteen years. Approximately 10,000 copies of the 2017-2018 edition have already been printed. Distribution of these directories occurs throughout our region at various service clubs and organizations, senior centers, support groups, health fairs and by individual request. The information is also available online at <http://lmtaaa.org/senior-resource-directory/>.