

Kansas Area Agencies on Aging (AAAs) are the leaders in serving older adults, individuals with disabilities, and caregivers in all 105 counties of the state. Research shows that malnutrition, social isolation, transportation and home safety are key risks to an individual’s continued independence. To help address these challenges, AAAs provide information, assess needs and coordinate services with providers of Long-Term Services and Supports (LTSS). For 2021, AAAs will primarily focus on the Senior Care Act, enacted in 1989 by the legislature to create a coordinated system of services to help older Kansans avoid premature nursing home stays.

Senior Care Act

Goal: Assist older Kansans at risk of institutionalization with services to help them remain in their homes.

1. A “smart-dollar” program.

We are requesting an additional \$4,000,000 in General Revenue for FY22. Our justification is based on several factors, including increasing demand with more eligible individuals, higher operating costs, and sustainability. As a point of reference, the federal CARES funding is sufficient for FY21, although notably, the AAAs primarily expended funds to provide meals, not other services funded by the Senior Care Act. To provide an acceptable level of service, capacity must meet the growing need as a result of the public health crisis and the impact on the older population.

2. Benefits to taxpayers.

The demands associated with long-term care might pose the greatest challenge for public resources. SCA services divert older Kansans from early enrollment in Medicaid (KanCare). The FE waiver costs substantially more than SCA services, and, upon entering a nursing facility, resources are spent down within two years to access Medicaid.

- ♦ Based on a sliding fee scale, clients have a stake in their care and feel better about receiving services by contributing a portion of their income.
- ♦ A client’s fee is based on income and liquid assets.
- ♦ Clients receive SCA services an average of 30 months.
- ♦ Maximum monthly expenditure per client is \$1,445.
- ♦ Area Agencies on Aging must match state funds.

3. Program eligibility is comparable to the FE waiver.

- ♦ Must be 65 years old or older
- ♦ Meet the Medicaid nursing facility threshold score
- ♦ Be financially eligible for Medicaid waiver services and those delivered in nursing facilities

4. A Plan of Care (POC) directs needs-based services.

An initial and annual functional assessment determines authorized services, which may include attendant care, homemaker services, case management, and/or respite care. An assessment may also be performed upon any significant change in the client’s condition.

5. How can an additional \$4M help older Kansans?

- ♦ Helps lessen fear related to living in a nursing facility.
- ♦ Enhances quality of life for a client receiving SCA services and remaining connected to the community.
- ♦ Strengthens the “Safety Net” for older Kansans and persons with disabilities.
- ♦ Responds to the need in rural communities, where there are fewer service alternatives.
- ♦ Reinforces the most effective and efficient delivery systems in Kansas.
- ♦ Assures older Kansans of their right to choose services in their home compared to a nursing facility.

Monthly Senior Care Act Cost Comparison

Nursing Facility (POC)	\$5,549
Senior Care Act (POC)	\$280
Program Savings per Client	\$5,269
Average Timespan on SCA (# of months)	30
Total Savings per Client	\$158,070

We support a nutrition program that responds to the needs of older Kansans. The AAAs received FFCRA and CARES funding to respond to the nutritional needs during the pandemic. With this substantial one-time increase, the recommended state budget cuts the program by \$850,000 for FY22. To meet the growing demand, funding must be restored during FY23 to ensure access to nutrition for older adults living in the community.

We support expansion of KanCare. Expanding Medicaid will actively respond to the social determinants of health by improving economic conditions for older Kansans with severely limited finances. Individuals aged 60 - 65, who are ineligible for Medicare and fall in the “coverage gap,” will then have better access to health care, safe and affordable housing, good nutrition, and reliable transportation.

We support the Older Kansans Employment Program (OKEP). This resource assists with addressing the workforce shortage and responds to the social determinants of health impacting many older Kansans. OKEP provides skills and career assessment, job-matching, specialized training and job search assistance to Kansans age 55 and older regardless of income and facilitates development of job opportunities for older Kansans in private industry. When there is an economic down-turn, older adults are the first employees to experience termination of employment.

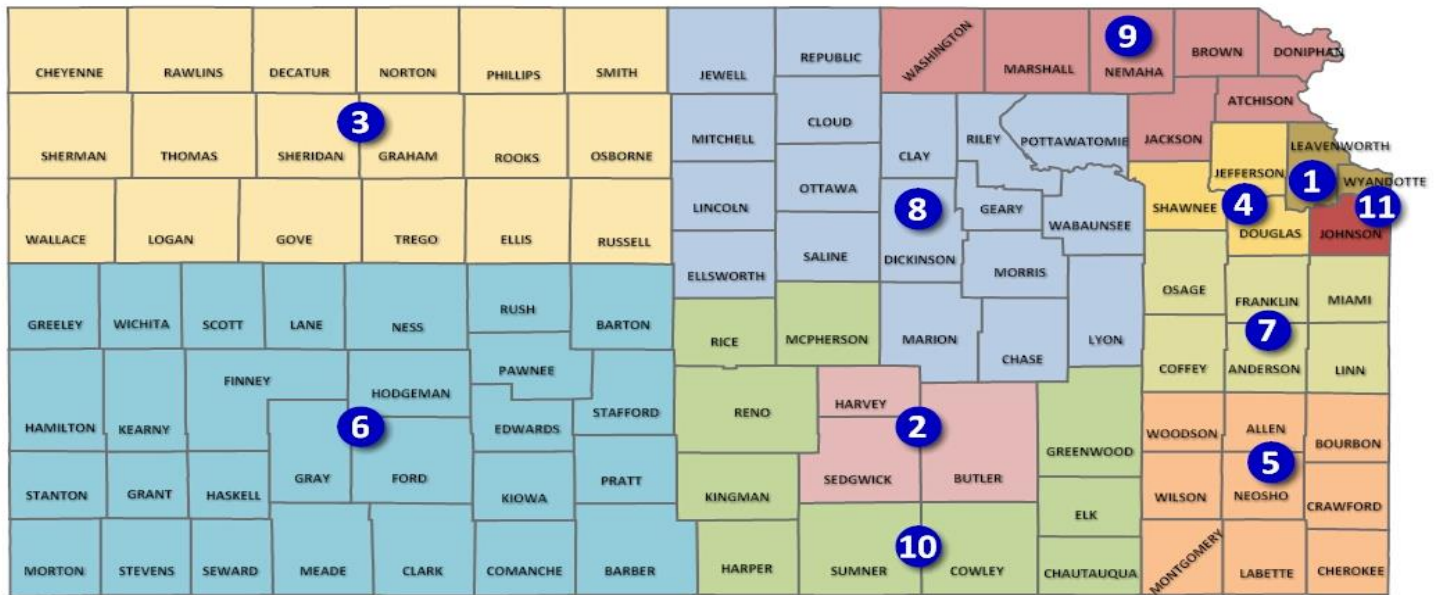
We support and advocate for today’s older adults to maintain Medicare, as we know it. Choice is vital to living and participating in the community, and we support future Medicare beneficiaries receiving today’s coverage and not being forced into private plans.

The Area Agencies on Aging in Kansas are part of a national network of 629 AAAs and 246 Title VI organizations, which are the designated leaders on aging issues at the local level. Area Agencies on Aging were established under the Older Americans Act (OAA) in 1973 to respond to the needs of seniors and caregivers in every local community. In Kansas, Area Agencies on Aging are the “single points of entry,” that coordinate the delivery of publicly funded community-based services for older adults and caregivers. The AAAs are locally administered and use federal, state and local funding resources to provide five broad categories of services: Information and Access Services, Community Services, In-Home Services, Housing, and Elder Rights. Service delivery decisions are made at the community level often in the private homes of the older adults who need services.

The AAA’s primary responsibilities include the following:

- Serve as a community planning agency to improve community services to seniors
- Act as an advocate for older adults
- Provide services which help older adults remain in the community and avoid unnecessary or premature moves from their homes
- Promote person-directed care
- Develop coalitions and networks of support for older adults and their caregivers to avoid or reduce the need for publicly funded services
- Coordinate services in its geographic area and manage its service area effectively and efficiently
- Help older adults live happier and more active lives through prevention and intervention

Comments? Questions? Please feel free to contact your local AAA Director, or:
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Talking Points

1. The Area Agencies on Aging deliver unbiased, conflict-free services to older adults and are required by the federal Older Americans Act to “serve as the public advocate for the development or enhancement of comprehensive and coordinated community-based systems or services in each community throughout the planning and service area.”
2. A transformation of mind-set and policy must occur to support delivery models inclusive of physical, behavioral, and social services as well as community engagement and collaboration. This means that our system of care must work across siloed sectors with separate funding streams to enhance administrative processes and reduce difficulties to access care.
3. Comprehensive and coordinated community-based systems or services should respond to the social determinants of health by improving economic conditions for older Kansans with severely limited finances for costs related to health care, housing, nutrition, and transportation.
4. Almost one-fifth of Americans 65 and older are struggling with poor health, according to a recent report from the Centers for Disease Control and Prevention. One in five reported “a lot of difficulty” and an additional four in 10 have “some difficulty” in at least one category including vision, hearing, mobility, communication, cognition and self-care. Such limitations likely add to health care expenses (<https://www.cdc.gov/nchs/data/abus/abus18.pdf>). However, older adults and persons with disabilities must have more choice and control over their services to remain in their home as long as possible.
5. According to The Center for Economic Development and Business Research, there are 496,510 Kansans aged 65 and older; increasing to almost 700,000 in ten years. To ensure older adults have access to equal opportunity, the system of care must be coordinated with the Area Agencies on Aging taking a major role. A robust infrastructure will be needed to address the significant demographic shift that will push for equitable policy and opportunities.
6. The public health crisis has intensified fear associated with living in a congregate setting. More than one-quarter of the COVID-19 deaths have occurred in a nursing facility. Older adults must have access to quality services diverting them from conditions that increase their vulnerability to infections or secondary complications.