Approved	3-2	9	-89	
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MINUTES OF THE HOUSE COMMITTEE ON _	PUBLIC HEALTH AND WELFARE .
The meeting was called to order byMarvin L.	Littlejohn at Chairperson
1:30 a.m./p/m/. on March 21,	
All members were present except:	

Committee staff present:

Emalene Correll, Research Bill Wolff, Research Norman Furse, Revisor Sue Hill, Committee Secretary

Conferees appearing before the committee:

Ester Wolf, Secretary of Department on Aging
Lynden Drew, Department on Aging
Julie Walter, Department on Aging, Manhattan, Kansas
Ralph Turner, Silver Hair Legislator, Lawrence, Kansas
Linda Lubensky, Kansas Home Care Association
Irene Hart, Sedgwick County, Kansas - Department on Aging
Basil Covey, Retired Teachers Association, Chairman Legislative Committee
Betty Londeen, Executive Director, South Central Kansas Area on Aging
Arnie J. Neufeld, Director McPherson County Council on Aging,
(Printed testimony in form of letter to Governor Hayden)

Ila Majors, Older Women's League William E. Richards, Sr., Chairman Legislative Committee, Jayhawk Area

Agency on Aging, Tri-County Council
Annice White, Director of Johnson County Area Agency on Aging
Carolyn Middendorf, R.N., M.N./ Assistant Professor at Washburn
University School of Nursing/ Representing Ks. Nurses Association

Chair called meeting to order, drawing attention to SB 198. It was noted a vote had not been taken on offered amendment on SB 198. Motions were repeated to amend, Rep. Amos moved to amend SB 198 as proposed by Staff, seconded by Rep. Green. No discussion, Vote taken, motion carried.

On the bill as a whole, Rep. Scott moved to report SB 198 out favorably as amended, seconded by Rep. Branson. No discussion. Vote taken, motion carried.

Chair drew attention to Hearings scheduled this date on SB 60, SB 15.

HEARINGS BEGAN ON SB 60.

Ester Wolf, Secretary of Department on Aging offered hand-out, (Attachment No.1), i.e., booklet entitled, Kansas State Advisory Council on Aging Report for fiscal Years 1986-1987. (Attachment No.2), testimony of Ms. Wolf. She noted SB 60 is one the Governor endorsed in his State of State Address, and will establish a program of in-home services. She spoke to the operation of this program, Administration/Selection of Sites/Cost Sharing/Service Development/Long Term Care Services. She detailed these Departments, noting the Grant of only \$250,000 is modest, but will significantly increase the amount of funding their Department has had in providing for in-home services. They will have the authority to build a system of services which will not require the impoverishment of recipients and which will allow them to purchase services as needed. We hope, she said in a year to show this was a good investment. She answered questions, i.e., yes, several reasons we choose not to follow guidelines in regard to pilot programs, cost sharing, etc.

CONTINUATION SHEET

MINUTES OF THE	HOUSE	COMMITTEE ON	PUBLIC F	HEALTH	AND	WELFARE	
room <u>423</u> –\$Statehou	use at 1.30	h/m//pm.on	March 21.	_			198.9

HEARINGS CONTINUED ON SB 60:-

Secretary Wolf continued:

is because of lack of funding/there are four bills on Long Term Care in the Federal Governmental process, and we along with SRS and $\rm H\&E$ are trying to work together to intergrate with those bills, and are hopeful this will give us the flexibility to design programs that will That is the reason the broadness of the bill.

Lynden Drew, Department on Aging answered questions along with Ms. Wolf, i.e., yes, we anticipate using the guidelines given in testimony, but there are still details that will need to be implemented in a working plan; we find it difficult to set up Case Management when we still have nothing to manage; our Department uses the figure 10,000 people or less to define "Rural"; yes, there is an emphasis put on the house-keeping/homemaker services since the health/medical functions as they are being dealt with in other legislation this Session.

Julie Walter, North Central-Flint Hills Area Agency on Aging, (Attachment No.3) noted she was speaking in behalf of Monda Spool the Area Executive Director. They feel SB 60 will serve as an initial step for state funding of in-home services for Kansans. She detailed reasons why their Agency thinks SB 60 is a needed, i.e., currently Kansas offers few alternatives to Institutionalization; older Kansans value their independence; In-home services now available are under-funded, many restrictions apply. She detailed in-home services now available in Kansas. She offered recommendations based on experience of administering in-home services projects, i.e., funding of in-home services should have a high priority; maximize funding for in-home services; minimize administrative costs; if funds are limited, fund a few quality projects. No questions.

Ralph Turner, Silver Hair Legislator, (Attachment No. 4), commended the Governor for proposing the Senior Care Program. He noted the high cost of Institutional care, i.e., \$22,000 per year. He agrees that Older Kansans should have the opportunity to live independent, meaningful and dignified lives in their own home-Community for as long as possible. It is his hope that every community will have a system of services to help these older citizens. He urged for support of SB 60.

Linda Lubensky, Executive Director, Kansas Home Care Association, (Attachment No. 5), stated Kansas has long exhibited a strong Institutional bias, and failed to recognize most individuals prefer to remain in their own homes when possible. The need for long term care services in our state is growing rapidly. Now the State realizes in-home services are less expensive and the favored alternative. It is the hope of their Association that with the passage of SB 60, it will be a step toward stronger programs for long term care programs will begin. She asked for support. We feel, she said the dollars appropriated is not enough, but it is a start. The state need to take a major role in providing this necessary care, not just for Seniors, but for the functionally disabled as well. She answered a few questions.

Irene Hart, Sedgwick County Department on Aging, (Attachment No. 6), stated the need for Senior Care Act is acute, and she cited 3 specific cases of elderly who need long-term care and who would be able to pay a portion of the cost of such care. She detailed a study that had been conducted for a Governor's Association. She noted the Department on Aging is the appropriate administrator of such a program, and she urged for favorable consideration of SB 60.

Basil Covey, Kansas Retired Teacher's Association (Attachment No. 7) offered strong support for SB 60, and commended the bill. It is their hope larger funds will be forthcoming.

CONTINUATION SHEET

MINU'	TES OF THE	HOUSE	COMMITTEE ON	PUBLIC HEALTH	AND WELFAR	Ε
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room	423-SStatehous	se at 1:3	$0 = 4 \frac{m}{h} \ln n$	March 21.		19 89

HEARINGS CONTINUED ON SB 60:--

Betty Londeen, Executive Director/South Central Kansas Area Agency on Aging, (Attachment No. 8) spoke to support of SB 60. She noted Elk and Chautauqua Counties are most probably the poorest counties in our state, and the elderly make up 30% of their population. These elderly need and deserve assistance with in-home services to help them to remain in their own homes as long as possible. County Health Departments do not have the funding to offer what services are needed. She noted Rice County is doing an outstanding job with limited funds they have. Staff members go the extra mile in helping their elderly, many going into homes that need cleaning; complete paper work, follow up on problems with social security, food stamps, and whatever is needed while they are there helping with the in-home chores. Other Counties bordering theirs have informed her they all have waiting lists of persons in need. She directed attention to letter to Governor Hayden from Arnie J. Neufeld. It will be recorded as (Attachment No.9).

Ila Majors, Older Women's League (Attachment No.10) detailed progression of legislation that has been presented in earlier years working towards the care of the elderly in Kansas. Currently SB 60 proposed by the Governor, with some funding should help further in the progression of services for the elderly to keep them in their own homes as long as possible by offering in-home services. We know now that to stay in your own home is less costly than Institutional care.

William E. Richards, Sr., Former Acting Secretary of Ks. Department on Aging, Currently Chair of Legislative Committee, Jayhawk Area Agency on Aging, (Attachment No. 11), stated the avoidance of stigma of Welfare and the pride of self-reliance are important to the independence and dignity of older Kansans who have disabilities, but wish to remain in their own homes and communities. SB 60 is a step in the right direction towards providing funding that will allow programs of in-home services to be established. He urged for passage of SB 60. He cited a personal experience of that of his elderly mother who still lives alone and can pay for some of the in-home services that are available. Many can share the cost of such services, many want to, in order that they may stay at home.

Annice White, Johnson County Area Agency on Aging, (Attachment No. 12) spoke of her personal experiences with her Mother who lives in Texas independently in her own home. She is attempting to arrange in-home services for her Mother. In Kansas the time is here to begin a statewide program for our aging parents and relatives. She asked for support for SB 60.

Carolyn Middendorf, Assistant Professor of Washburn University School of Nursing, (Attachment No. 13) spoke to the support of SB 60, and its implementation. If SB 60 is passed, they believe (Ks. Nurses Association), that matching funds must be made available. Current numerous projects in place need to be expanded under this act, and more money will be needed for services. They suggest a need for Case Management; Evaluation of the plan after implementation. They feel there will also be a need for funding for Administration implementing these projects.

A spokesperson for AARP offered their support for SB 60. Carol Renzulli, Lawrence Coalition of Citizens with Disabilities also stated their organization's support for SB 60.

Chair announced there would not be time to begin hearings on $\underline{\mathbf{SB}}$ 15 this date.

HEARINGS CLOSED ON SB 60.

Meeting adjourned.

GUEST REGISTER

HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE

Date March 21, 1989 Organization Address Wichita

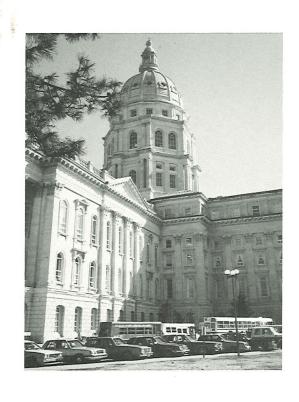
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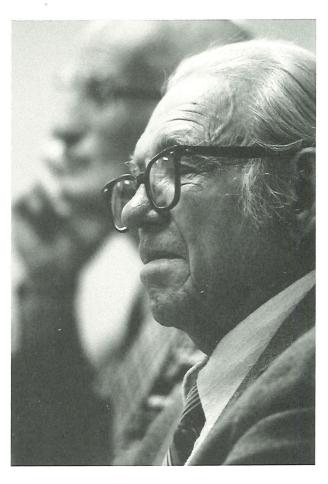
Name organization Barbara Miller SRS

Address Jopeka

KANSAS STATE ADVISORY COUNCIL ON AGING

REPORT FOR FISCAL YEARS 1986-1987









Prepared in cooperation with the Kansas Department on Aging

TABLE OF CONTENTS

Chapter	Page
DEDICATION	1
INTRODUCTION	3
LEGISLATIVE PRIORITIES AND ACHIEVEMENTS	4
1986 NEEDS HEARING—WICHITA STATE UNIVERSITY	6
1987 NEEDS HEARING—WASHBURN UNIVERSITY	9
THE AGING NETWORK	12
SERVICES AND PROGRAMS FOR OLDER KANSANS	14
APPENDICES	17
Total 60+ Population of Kansas Counties	19
Percent of Population 65 Years and Over, 1980	20
Kansas Area Agencies on Aging	21
Data by Planning and Service Areas—FY 1986 and 1987	
Table #1: Total Meals Served and Cost Per Meal	22
Table #2: Priority Service Expenditures	23
Table #3: Title III-B Actual Expenditures	24
Services Available by County and Aging Services Mill Levies	
PSA 01—Wyandotte-Leavenworth	25
PSA 02—Central Plains	26
PSA 03—Northwest Kansas	27
PSA 04—Jayhawk	29
PSA 05—Southeast Kansas	30
PSA 06—Southwest Kansas	31
PSA 07—Mid-America Council on Aging	33
PSA 08—North Central/Flint Hills	34
PSA 09—Northeast Kansas	36
PSA 10—South Central Kansas	37
PSA 11—Johnson County Human	3.8

This report is dedicated to
Howard L. Brown
of Osawatomie, Kansas
who faithfully served on the
Kansas State Advisory Council on Aging
for five years.

Howard's death on July 13, 1987 came two weeks after he last phoned the Department on Aging to ask what he could do to help support the passage of a certain piece of legislation.

He remained to the end a devoted advocate for Older Kansans and a prime example of the Spirit of Kansas.

It is to his memory and the love of his wife, Dora, that the Advisory Council on Aging dedicates this report.

KANSAS STATE ADVISORY COUNCIL ON AGING

Report for Fiscal Years 1986 and 1987

Created in 1977 by the Kansas Act on the Aging, K.S.A. 75-5901, et seq., the State Advisory Council serves the Governor, the Legislature and the Department on Aging as advocate on behalf of more than 400,000 Older Kansans.

The Council consists of nineteen members, appointed by the Governor or Legislative leaders. Appointments are for three years; however, members are eligible for reappointment. By statutory mandate, ten of the Council's members must be 60 years of age or older. Members represent various geographical, social and ethnic groups. Each of the state's eleven Planning and Service Areas is represented by a member on the Council.

During Fiscal Years 1986 and 1987, the following persons served on the State Advisory Council on Aging:

Senator Eugene Anderson Wichita

Bea Bacon

Shawnee Mission

Charles M. Barnes*

Dodge City

Elena Bastida-Barreto

Wichita

Kenneth F. Betterton

Leawood

Meryl Billingsley

Hutchinson

Howard Brown

Osawatomie

Senator Roy Ehrlich

Hoisington

Margaret Gebhardt

Bonner Springs

John R. Grace

Topeka

Representative Elaine Hassler

Abilene

Representative Henry Helgerson, Jr.

Wichita

Marjorie Jantz

Prairie Village

Lu lanzen

Hillsboro

Florence Johnson

Ellis

Forrest Neil McQuarie

Chanute

Helen Miller

Topeka

Margaret Mullikin

Wichita

Hattie Norman

Topeka

Representative Alfred Ramirez

Bonner Springs

Kenneth Speed

Holton

Representative Thomas Walker

Newton

^{*} Chair

LEGISLATIVE PRIORITIES AND ACHIEVEMENTS

Priority legislative issues of the State Advisory Council on Aging in 1986 and 1987 were:

- Division of Assets
- Transportation
- Long Term Care Insurance
- In-Home Services

Division of Assets

First addressed by the Kansas Alzheimer's and Related Diseases Task Force in 1985, Division of Assets legislation was actively supported by the State Advisory Council and many other aging organizations. The legislation allows couples to divide their income and assets and to prevent forced pauperization of the well spouse when their partner requires long term care. The legislation, Senate Bill 264, was unanimously passed by the 1988 Kansas Legislature. The Division of Assets law was the major legislative victory of the Kansas Aging Network during the 3 year period it was under consideration.

Transportation

Citing the need for increased funding for transportation assistance for elderly and handicapped Kansans, the State Advisory Council has continued to support enabling legislation. The issue was studied in the 1987 Kansas Legislature and has remained important to the Advisory Council and the Silver Haired Legislature, among other aging organizations.

Long-Term Care Insurance

Another issue originally addressed by the Kansas Alzheimer's and Related Diseases Task Force in 1985, the need for adequate coverage of institutional and in-home long term care services has been closely followed through the legislative process by the State Advisory Council on Aging. In 1987, the Kansas Legislature unanimously passed Senate Bill 132 which authorized the Insurance Commissioner to implement rules and regulations for long term care insurance policies sold in Kansas. The regulations specify that no policy may exclude or limit benefits to persons on the basis of organic brain disease, including Alzheimer's disease. The regulations became effective January 1, 1988.

In-Home Services

Through House Resolution No. 5052, the 1986 Kansas Legislature directed the Secretaries of Aging, Health and Environment and Social and Rehabilitation Services to develop a comprehensive plan for the provision of community alternative long term care services for the elderly. The State Advisory Council had long supported the need for expansion and funding for such services. Four members of the Advisory Council were appointed to serve on the 5052 Advisory Committee. The final report of the Committee, "Long Term Care Services for Older Kansans: A Comprehensive Plan," was released in December 1986.

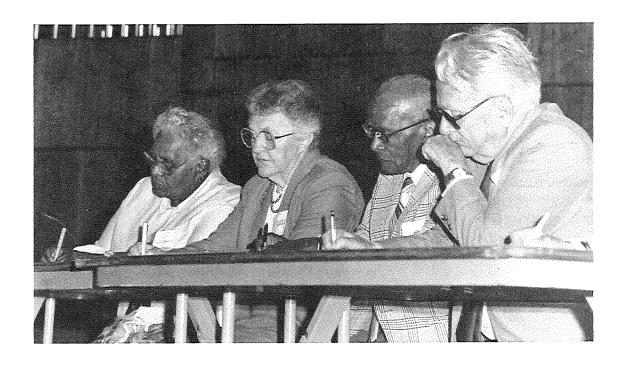
Achievements

In addition to the focus on legislative issues of importance, the State Advisory Council on Aging played an active role in two major aging-related commissions: the Alzheimer's and Related Diseases Task Force and the Long Term Care 5052 Advisory Committee. Members of the Council served on both of these commissions.

In 1986, with the assistance of members of the Advisory Council on Aging, the Kansas Legislature authorized the continuation of the Kansas Department on Aging for another 8 years. The Department and the Advisory Council were created in 1977 by the Kansas Act on the Aging, K.S.A. 75-5901, et. seq.

In 1986, the Advisory Coouncil on Aging, in cooperation with the Kansas Association of Area Agency on Aging Directors, initiated a Legislators Lunch Express. The Council and

the AAA Directors had both been concerned about dwindling budgets for nutrition programs and agreed it would be appropriate to invite State Legislators to see firsthand the value of nutrition programs. During one week in January, 49 legislators participated in home-delivered meal routes and/or attended congregate meal centers in 9 of the State's 11 Area Agencies. The success of the effort prompted the Advisory Council and the AAA Directors to conduct another Legislators Lunch Express in November 1986; this gave legislators an additional opportunity to participate in meals programs in their districts. Everyone involved with the project agreed that it provided an excellent way for elected officials to witness the importance of congregate and home-delivered meals for Older Kansans.



State Advisory Council members Hattie Norman, Florence Johnson, Ken Speed and Neil McQuarie are shown at the 1987 Hearing on the Needs of Older Kansans.

1986 NEEDS HEARING WICHITA STATE UNIVERSITY MAY 22, 1986

STATE ADVISORY COUNCIL ON AGING HEARING ON THE NEEDS OF OLDER KANSANS

The State Advisory Council received oral testimony from nine persons at their annual hearing in 1986. The Council also received written testimony from several persons who were unable to attend. The following issues were addressed:

- Attendant Care
- Long Term Care Services
- Guardianship
- Legal Services
- 24-Hour Licensed Nursing Care
- Access to Services
- Determination of Needs at the Local Level
- Adequate Notice of Insurance Premiums Prior to Cancellation
- Control of Nursing Home Costs
- Increase State's Capacity to Monitor Care in Nursing Homes
- Insurance Rates for Non-Profit Agencies

A portion of the Needs Hearing was devoted to discussion of the results of the 1986 Issues Questionnaire. The annual survey was completed by more than 300 persons who attended the conference. Results of the survey follow.

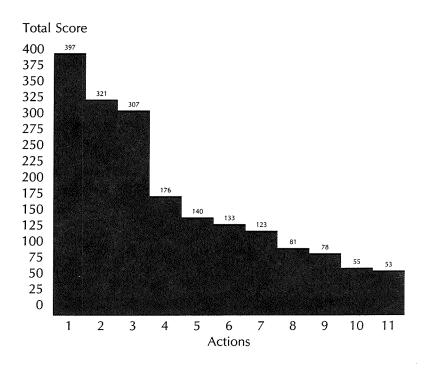


Chairperson Charles Barnes opened the Needs Hearing. Council members prepared to listen to conferees. Members of the audience listened to testimony and later asked questions of the State Advisory Council.



STATE SUPPORT

Respondents chose three actions, in terms of priority, they believed the State should initiate to help older adults. The combined results are ranked by total score (1st priority = 3 points; 2nd = 2 points; 3rd = 1 point).



Actions

- 1. Enact a Division of Assets law to prevent spouses of nursing home residents from being forced into poverty.
- 2. Increase funding for home and community base long-term care services.
- 3. Require health insurance companies to include coverage of long term care and Alzheimer's Disease.
- 4. Limit the amount that nursing homes can charge private pay residents more than public pay residents.
- 5. Increase funding for nutrition services.

- 6. Increase funding for employment services.
- 7. Improve consumer representation in utility rate cases.
- 8. Increase funding for transportation services.
- 9. Limit the market share of for-profit health care providers.
- 10. Increase the spending money (personal needs allowance) of public pay nursing home residents.
- 11. Increase funding for legal services.

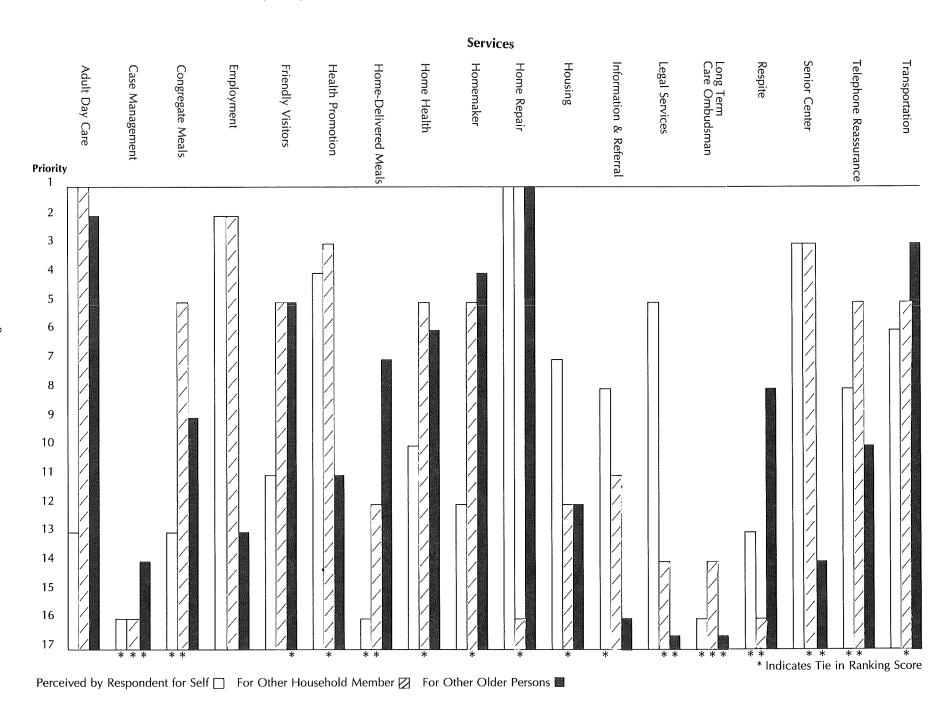
UNMET NEEDS FOR SERVICES

Respondents indicated those aging services which they, other household members, and other older persons in general had an unmet need for at the current time. Respondents said they personally had an unmet need for home repair services, followed by employment services and senior center services. When asked to indicate the unmet service needs of other

household members respondents first chose adult day care services, then employment services, followed by a tie for third between health promotion and senior center services. Other older persons were perceived as needing home repair services first, followed by adult day care and transportation.

See chart next page

UNMET NEED FOR SERVICES Perceived by Respondent for Self, Other Household Member and Other Older Person



1987 NEEDS HEARING WASHBURN UNIVERSITY MAY 22, 1987

STATE ADVISORY COUNCIL ON AGING HEARING ON THE NEEDS OF OLDER KANSANS

Oral testimony was presented by eleven people during the hearing. The State Advisory Council also received written testimony from persons who were unable to attend. The following issues were addressed:

- Ways to Improve Nursing Home Care
- Legal Services for Older Kansans
- Needs for Low-Income and Frail Elderly
- Transportation Needs for Elderly and Handicapped
- Need for In-Home Services
- Programs Needed to Challenge Elderly Citizens
- Use of Volunteers in Provision of In-Home Services
- Division of Assets Legislation
- Silver Haired Legislature Income Tax Checkoff

The results of the 1987 Issues Questionnaire were presented at the Needs Hearing. Nearly 400 conference participants completed the questionnaire. Results of the survey follow.



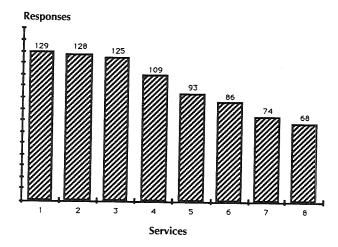
John Grace, Acting Chairperson, opened the Needs Hearing with Esther Wolf, Secretary, and Ron Harper, Assistant Secretary of KDOA.



Council members Marjorie Jantz, Lu Janzen and Helen Miller listened as persons testified before the Council.

AGING SERVICES CONSOLIDATION

Which, if any, of the following services should be consolidated under KDOA? (The graph below reflects the number of responses made in each category.)

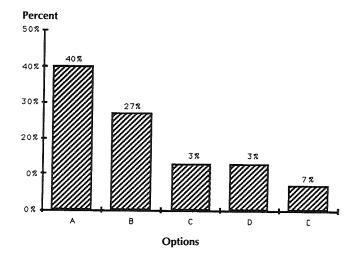


Services

- 1. Transportation
- 2. Nursing Home Complaint Services
- 3. Homemaker
- 4. Health Promotion
- 5. Nursing Home Reimbursement
- 6. Nursing Home Licensure
- 7. Case Management
- 8. Make no changes at this time

UTILITY ISSUES

Which one of the following options is preferable to you as a way to improve consumer representation in utility regulatory matters.

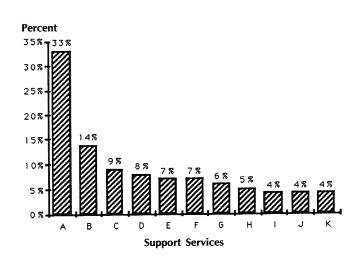


Options

- A. Establish a non-governmental advocate (e.g. a Citizens Utility Board) for consumers.
- B. Establish an office within the Kansas Corporation Commission to provide advice and assistance to participants in rate cases.
- C. Establish a governmental advocate (e.g. a RUCO) for consumers.
- D. Make no changes at this time.
- E. Liberalize existing compensation rules which allow reimbursement of expenses associated with participation in certain utility rate cases.

CAREGIVERS

70% of the respondents are currently providing or have provided care to an older person for an extended period of time. The following is an indication of what form of caregiver support was or would have been of greatest benefit.

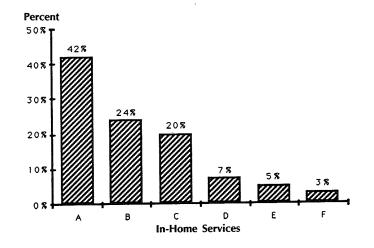


Support Services

- A. Home Health Care
- B. Adult Day Care
- C. Information and Referral Services including caregiver training
- D. Long Term Care Insurance
- E. Other
- F. No caregiver support was necessary
- G. Respite Care
- H. Local Support Group
- I. Unpaid leave from work with health and pension benefits protected
- J. Hospice Care
- K. Dependent Care Tax Credit

IN-HOME SERVICES

91% of the respondents indicated a preference for use of funds for in-home services over case management. Those respondents indicated that the following in-home services are most important to be funded.



In-Home Services

- A. Home-Health Services
- B. Home Delivered Meals
- C. Homemaker
- D. Home Repair
- E. Friendly Visitor
- F. Telephone Reassurance

THE AGING NETWORK

The Kansas Department on Aging, the state's Area Agencies on Aging, and numerous aging organizations are major participants in the Kansas Aging Network. All of these entities are concerned with the well-being of the state's elderly and function to serve them.

THE KANSAS DEPARTMENT ON AGING

In 1977 the Kansas Legislature saw the need to establish a single state agency to receive and disburse federal funds for aging programs and to act as advocate on behalf of Older Kansans. The Department on Aging was created by K.S.A. 75-5903, et seq., to not only administer federal and state funds but to serve as a central source of information on services and programs for the state's older population and to be representative of their interests.

The Department is directed by the Secretary of Aging. The Secretary is appointed by, and serves at the pleasure of, the Governor of the State of Kansas. The Kansas Department on Aging has three divisions—Administrative Services; Program Operations; and Planning, Policy and Advocacy.

The Secretary and staff of the Department on Aging are guided by the following Mission Statement:

The purpose of the Kansas Department on Aging is to serve the elderly and to assist Older Kansans to live independently with self-sufficiency and dignity to the maximum feasible extent.

- To develop a coordinated system of services for Older Kansans, especially those in greatest economic and social need;
- 2. To develop legislation, policies, and plans that serve the interests and needs of Older Kansans;
- 3. To develop adequate resources for those services, plans and policies;
- 4. To administer funds effectively and efficiently so the mission is met; and
- 5. To insure older people are full participants in all processes.

AREA AGENCIES ON AGING

There are eleven federally-established Planning and Service Areas in Kansas and each PSA is served by an Area Agency on Aging. Administrative staff, area policy boards, and county councils on aging form the AAA network.

While the Kansas Department on Aging has oversight responsibility of the AAAs, it is through the Area Agencies that the majority of aging services are funded and implemented. The AAAs receive the majority of their federal funds from Title III of the Older Americans Act. The eleven agencies contract with, or make subgrants to, service providers under state approved area plans. Area Agencies also receive state funds for nutrition and access to nutrition services. Additionally, some AAAs have county aging services mill levy funds.

AGING ORGANIZATIONS

On the national, state and local level, Kansans are members of many aging-related organizations. These organizations form a grassroots network which can not be replaced by public or private agencies. Through these aging groups, members are motivated to work for more and better services and programs for people whose need is current and for those who are not yet considered part of the aged population.

Kansas has many fine, well-established organizations that are dedicated to serving the state's elderly. Following is a listing of some of them:

Active Prime Timers

Alzheimer's Disease and Related Disorders Association

American Association of Retired Persons

American Diabetes Association Kansas Affiliate

Care and Concern

Concerned Girls and Women of Kansas City, Kansas

Cooperative Extension Service

Greater Kansas City Section—National Council of Jewish Women

Kansans for the Improvement of Nursing Homes

Kansas Activity Directors Association

Kansas Adult Day Care Association

Kansas Association of Area Agency on Aging Chairpersons

Kansas Association of Area Agency on Aging Directors

Kansas Association of Home Health Agencies

Kansas Association of Homes for the Aging

Kansas Association of Nutrition and Aging Service Programs

Kansas Chapter Arthritis Foundation

Kansas Citizens Council on Aging, Inc.

Kansas Coalition on Aging

Kansas Grandparent Care Network, Inc.

Kansas Green Thumb

Kansas Health Care Association

Kansas Hospital Association

Kansas Legal Services

Kansas Medical Society

Kansas Medical Society Auxiliary

Kansas Minority Coalition on Aging

Kansas Nutrition Council

Kansas Retired Officers Association

Kansas Retired Senior Volunteer Program Directors

Kansas Retired Teachers Association

Kansas Senior Center Directors Association

Kansas Silver Haired Legislature

Kansas State Advisory Council on Aging

Kansas State Nurses Association

League of United Latin American Citizens

Mid-America Congress on Aging

National Association of Housing and Redevelopment Officials—Kansas Chapter

National Association of Retired Federal Employees

National Association of Retired and Veteran Railway Employees

National Caucus for the Black Aged in Kansas

National Council of Hispanic Elderly

National Council of Senior Citizens

National Silver Haired Congress

Office for Services to the Aging—Catholic Archdiocese of Kansas City

Older Kansans Information and Referral Services Association

Older Women's League

Project Ayuda

Public Assistance Coalition of Kansas

Senior Organized Citizens of Kansas

Telephone Pioneers, Sunflower Chapter

SERVICES AND PROGRAMS FOR OLDER KANSANS

The Kansas Department on Aging, the eleven Area Agencies on Aging and a significant number of service providers and volunteers throughout the state are committed to meeting the needs of the aging community. Services and programs vary by community, county and area of the state; however, a wide range is available to Older Kansans statewide. Following is a short description of some of the major services and programs which currently exist.

Employment—programs designed to train older workers, link prospective workers to businesses and resources and provide employers with pre-screened, productive employees.

The Older Kansas Employment Program (OKEP) was authorized and funded in 1982. OKEP operates in Manhattan, Chanute and Wichita. The Job Training Partnership Act (JTPA) complements OKEP in these three communities and has allowed for the expansion of services to Topeka, Hutchinson, Hays, Dodge City, Garden City, Salina and an area of Southeast Kansas. Residents 55 or older are eligible to participate in the programs.

In Fiscal Year 1986, the Older Kansans Employment Program enrolled 598 participants and placed 446. The same year through JTPA, 746 persons were enrolled and 440 were placed. During FY 1987, 793 persons were enrolled in OKEP and 580 were placed, and 640 were enrolled in JTPA with 339 placed. OKEP is administered by the Department on Aging. The Department of Human Resources jointly administers the JTPA program with KDOA.

KDOA also administers the Senior Community Service Employment Program through a grant with Midway Chapter, American Red Cross, Wichita. The U.S. Department of Labor funds two Senior Community Service Employment Programs in the State: Green Thumb serves rural Kansas and Project Ayuda serves urban Kansas. SCSEP provides subsidized employment to persons meeting income guidelines.

Home and Community Based Services—a program of in-home and community services for Medicaid eligible elderly, physically disabled, and mentally retarded clients who would otherwise require adult care home placement.

A variety of services including case management, homemaker, home health aide, personal care, adult day care, habilitation, respite care and hospice care, are available to clients in the Home and Community Based Services (HCBS) program. Local and state agencies such as County Health Departments, Home Health agencies, Area Agencies on Aging, and Social and Rehabilitation Services provide HCBS services to clients.

During FY 1987, an average of 960 persons a month were served under the HCBS program. Approximately one-half of the clients were 60 years of age or older. The average monthly cost per person for HCBS services during the 12-month period was \$333.42. The HCBS program represents a significant cost savings to the Department of Social and Rehabilitation Services compared to the cost of maintaining persons in adult care facilities. The average total savings for one month during Fiscal Year 1987 was \$371,317.00.

Homemaker—services provided by trained workers to elderly and handicapped individuals unable to perform general household activities.

During Fiscal Year 1987 an average of 7,214 persons received 562,404 hours of Homemaker services. On the average, 95.5 percent of the total number of service hours were for clients 60 years of age and older. Approximately 3,543 persons were enabled through the provision of Homemaker services to avoid placement in an adult care home; 96 percent of those persons were 60 years of age or older.

The demand for Homemaker services continues to increase with the growing elderly population who are both financially eligible and in need of services. The average monthly number of persons on the waiting list to receive Homemaker services during FY 1987 was 187; in FY 1985 it was 150.

Information and Referral/Assistance—a service designed to provide people with information about where to go for the help they may need.

Information and Referral services are a key component of the state's Area Agencies on Aging. In addition to providing basic information, the services may also include linkage of the client and the resource to ensure that the desired service is delivered to the client.

Follow-up of more complex requests for services, which involves contacting the client and the provider, is considered by many Area Agencies as Information and Assistance.

Older Kansans review information available at KDOA's resource booth at the 1987 Governor's Conference on Aging, held at Washburn University, Topeka.



Legal Services—legal and/or protective services offered to persons 60 years and older who need advice and counsel in order to deal with their affairs and safeguard their rights.

Legal Services for Older Kansans are available statewide. In July 1986, the eleven Legal Service Projects provided assistance to 348 persons and conducted 6 community education presentations, which were attended by 145 persons. A year later in July 1987, 432 Older Kansans received assistance through the Legal Services Projects. Legal Services staff gave 9 presentations for the benefit of 510 persons.

The Department publishes a Legal Guide for Senior Citizens which addresses laws and programs affecting Older Kansans.

Low Income Energy Assistance Program (LIEAP)—program assists low income households in meeting energy costs.

The program is offered in two phases, Winter Heating and Summer Cooling. During Fiscal Year 1986, 68,646 households were assisted through LIEAP. The average winter benefit was \$230 and the average summer program benefit was \$122. Nearly half (49 percent) of the 1986 winter recipient households had an older adult (60+) in the home. More than half of the elderly households had incomes below the poverty level. More than half of the summer program recipients were over age 75.

Long Term Care Ombudsman—program which receives, investigates and resolves complaints concerning older residents in adult care facilities, and provides training and education services.

In Fiscal Year 1986, the Ombudsman Program received 654 complaint issues from 319 individuals and had 783 requests for information and referral. The number of complaint issues increased during Fiscal Year 1987 to 921. The number of individuals presenting complaints was 482 and the number of information and referral requests was 801 in FY 1987.

Meals—Congregate and In-Home—services for persons age 60 and older to receive at least one hot meal a day at a congregate meal site or in their own home.

Data for congregate and home-delivered meals served during Fiscal Year 1986 and 1987 are presented in the Appendix.

Transportation—services that assist persons in getting around in their community and remaining in their homes with access to needed services.

A concern of elderly and handicapped Kansans is obtaining transportation where public transportation services are unavailable, insufficient or inappropriate. This concern is a major one in rural Kansas. The Kansas Public Transit Association reports that over 100 agencies provide rural transit in nearly every one of the state's 105 counties. In rural areas of the state, persons age 65 and over represent 90 percent of the ridership. However, there is an even greater need for transportation services. In a survey of Kansas transit providers conducted in 1987, nearly one-half reported they were unable to meet all of the requests they have for transportation services. Only a few are able to provide evening and weekend services due to budget constraints. Rural elderly and handicapped Kansans often must rely on transportation services to obtain their meals and keep medical appointments. Unfortunately, people do not eat or see their doctor only from 8 to 5 Monday through Friday.

There are three Urban Mass Transportation Administration programs which provide federal money to Kansas through the Department of Transportation (Section 9, Section 16(b)(2) and Section 18). The funding for these programs has been reduced by over 30 percent since 1981. Kansas does not provide any direct state assistance for public transit.

Other Services and Programs—There are many other services available to Older Kansans. Some of these are provided on a limited basis, and others are offered statewide. Included among this group of "Other" services and programs are:

Adult Day Care Services
Alternate Care Program
Case Management Services
Chore Services
Community Services Block Grant Program
Elderhostel Program
Guardianship Program
Home Sharing Program
Hospice Services
LIVELY Program
Mental Health Services
Respite Care Services
Retired Services

Retired Senior Volunteer Programs Senior Centers Senior Companion Program

Support Groups
Talking Books

Temporary Emergency Food Assistance Program Visiting Programs Volunteer Information Provider Program

Weatherization Program



Health checks were provided at both the 1986 and 1987 Governor's Conference on Aging.

APPENDICES

TOTAL 60+ POPULATIONS OF KANSAS COUNTIES

A 11	3,637	Greeley	345	Osborne 1,85	1
Allen	2,316	Greenwood	2,649	Ottawa 1,60	
	3,617	Hamilton	589	Pawnee 1,88	3
Atchison	1,675	Harper	2,262	Phillips 1,98	2
Barber	5,844	Harvey	6,036	Pottawatomie 2,85	5
Barton	4,174	Haskell	485	Pratt 2,38	7
Bourbon	3,291	Hodgeman	537	Rawlins 1,01	4
Butler	7,609	Jackson	2,335	Reno 11,95	6
Chase	956	Jefferson	2,892	Republic 2,36	57
	1,639	Jewell	1,506	Rice 2,94	13
Chautauqua Cherokee	5,070	Johnson	30,941	Riley 4,77	75
Cheyenne	969	Kearny	488	Rooks 1,76	8
Clark	760	Kingman	2,111	Rush 1,30)6
Clay	2,636	Kiowa	965	Russell 2,28	38
Cloud	3,497	Labette	5,735	Saline 8,03	39
Coffey	2,249	Lane	550	Scott 1,03	36
Comanche	763	Leavenworth	7,343	Sedgwick 50,53	31
Cowley	7,831	Lincoln	1,312	Seward 2,10)2
Crawford	9,442	Linn	2,255	Shawnee 24,93	30
Decatur	1,241	Logan	739	Sheridan 72	21
Dickinson	4,984	Lyon	5,417	Sherman 1,40	03
Doniphan	2,007	Marion	3,858	Smith	10
Douglas	6,908	Marshall	3,547	Stafford 1,70	64
Edwards	1,169	McPherson	5,686	Stanton 30	00
Elk	1,282	Meade	1,078	Stevens 82	29
Ellis	3,619	Miami	4,306	Sumner 5,58	89
Ellsworth	1,915	Mitchell	2,072	Thomas 1,3	74
Finney	2,776	Montgomery	9,711	Trego 1,0	63
Ford	4,030	Morris	1,865	Wabaunsee 1,6	46
Franklin	4,707	Morton	491	Wallace4	07
Geary	2,910	Nemaha	2,790	Washington 2,5	69
Gove	<i>7</i> 76	Neosho	4,297	Wichita 4	68
Graham	909	Ness	1,180	Wilson 3,1	54
Grant	748	Norton	1,789	Woodson 1,3	90
Gray	853	Osage	3,313	Wyandotte 27,9	11
•					

Source: 1980 Census, STF 1-A

PERCENT OF POPULATION 65 YEARS AND OVER, 1980

CHEYENN	E RA	WLINS	DECATUR	NOPTON	PHILLIPS	SMITH	JEWELL	REPUBLIC	WASHINGTON	MARSHILL	NEMAHA	BPOWN	$\neg \setminus$	
19,	6	18.9	21.7	21.4	20.7	24.2	22.5	24.7	24.0	20.1	19.5	21.7	16.8	
SHERMAN		OMAS	SHERIDAN	GRAHAM	POOKS	OSBORNE	мітсней	CLOUD	CLAY RILE) POTAWAT	OMIE JACK	-	15.1 (r ∽
13.;	3	12.4	15.8	17.8	19.8	24.7	20.5	22.5	21.3	14.9	, 15			RIH (1
WALLACE	IOGA		COAF	IRIGO	ELUS	PUSSELL	11NCOIN 25.4	21.4	DICKINSON	5.5	SHAV	WNEE .	14.3 9	.6 WYAN
14.2		16.6	16.6	19.5	10.1	19.6	EUSWORTH	SALPNE	19.5	คลา	8.5	12.0	000GLAS 7.5	лониson 7.6
REELEY	WICHITA	SCOTT	LANE	NESS	PUSH	BARTON	22.8	12.2		22.7	ION	16.6	FRANKLIN	WAME
13.5	11.3	12.9	17.0	20.4	22.2	13.7	Rif. E	M' buib?OM	MARION	CHASE	11.8	10.0	16.6	15.2
MILTON	KEARNY	FINNEY		HODGEMAN	PAWNEL	STATION	19.1	16.3	22.5	21.9	1	19.3	ANDERSON	21.3
18.2	9.8	8.2	GRAY	17.6	16.8	24.0	Мио	15.	2 Buitte	GREIN	w000	MOSGOC	ALLEN	BOURBON
NOIN		<u> </u>	12.5	fOPD	EDWARDS	PRAIT	13.7	SEDGWII		1 -		23.1	18.2	20.2
9.3	GRANT 7.4	HASKELL 9.0	12.5	12.3	RIOWA	17.9	KINGMAN	9.6	6		l.	vicson	NEOSHO	CRAWFOR
ION I			MEADE	CIARK	18.3	BARBER	17.6	SUMNEP	COWLEY	2 ELK	6.4	20.1	17.5	19.4
9.4	STEVENS	SEWARD	1 17 -		COMANCHE	1	HARPER			_		MONT - GOWERY	LABETTE	CHEROKEE
7.4	12.2	8.6	17.7	22.9	22.9	19.4	22.7	16.9	16.	9	AUQUA	17.6	17.0	17.3

Source: U.S. Department of Commerce, Bureau of the Census, 1980 Census of Population and Housing,
Summary Characteristics for Governmental Units and Standard Metropolitan Statistical Areas, Kansas (PHC80-3-18).

State: 13.0%

The Kansas Aging Network

There are eleven Area Agencies on Aging (AAA's) in Kansas, each encompassing a designated geographical area.

These agencies have the primary task of planning and coordinating services and programs for persons aged 60 and over in their areas.

Area Agencies are funded through the Older Americans Act and the State of Kansas.

Contact your Area Agency for more information:

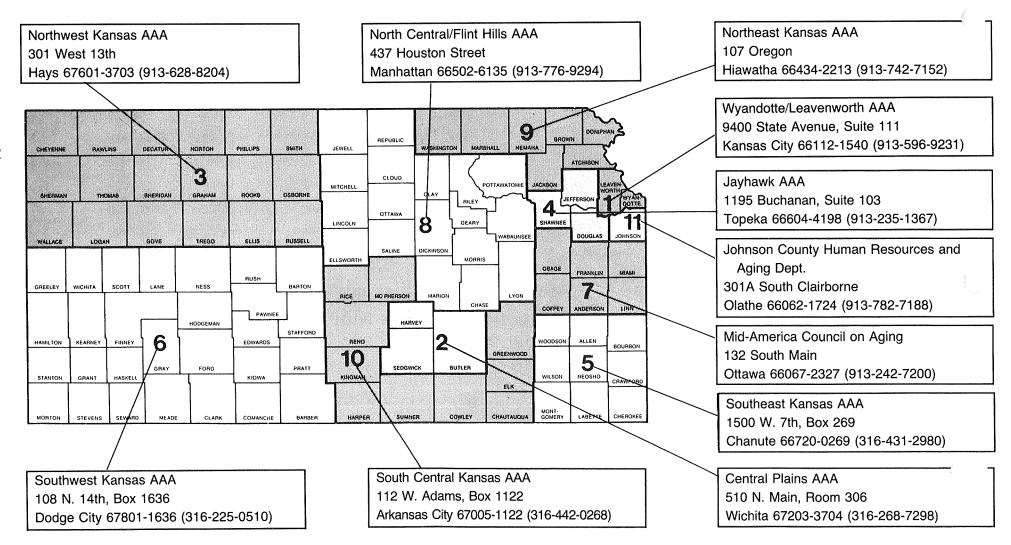


TABLE #1
TOTAL MEALS SERVED AND COST PER MEAL BY PSA

FY 1987

FY 1986

	Congregate	Home- Delivered	Total	Cost Per Meal *	Congregate	Home- Delivered	Total	Cost Per Meal *
PSA 01	232,555	133,664	366,219	\$2.35	221,562	147,716	369,278	\$2.28
PSA 02	275,082	326,069	601,151	2.61	278,815	329,296	608,111	2.75
PSA 03	159,694	35,326	195,020	2.70	163,035	45,169	208,204	2.70
PSA 04	172,408	67,885	240,293	2.85	179,190	<i>77,</i> 555	256,745	2.89
PSA 05	246,972	137,331	384,303	2.69	246,232	150,509	396,741	2.75
PSA 06	254,843	63,820	318,663	2.87	255,696	61,299	316,995	2.93
PSA 07	155,132	125,355	280,487	2.66	161,353	130,496	291,849	2.66
PSA 08	336,300	151,353	487,653	2.85	359,059	153,489	512,548	2.91
PSA 09	126,538	63,609	190,147	2.96	130,786	67,503	198,289	3.04
PSA 10	308,432	108,440	416,872	2.90	321,907	118,272	440,179	3.04
PSA 11	101,905	42,637	144,542	3.32	102,020	60,101	162,121	3.58
State Tota	l 2,369,861	1,255,489	3,625,350	\$2.75	2,419,655	1,341,405	3,761,060	\$2.83

^{*} Does not include In-Kind or Transportation

TABLE #2
PRIORITY SERVICE EXPENDITURES BY PSA

FY 1986						FY 1987					
	Access ‡	In-Home *	Legal **	Other ***	Total	Access ‡	In-Home *	Legal **	Other ***	Total	
PSA 01	171,805	19,957	54,254	70,831	316,847	175,210	20,633	40,450	79,933	316,226	
PSA 02	121,093	117,789	40,832	168,691	448,405	93,782	117,925	41,203	156,967	409,877	
PSA 03	79,839	26,300	41,614	108,544	256,297	73,624	26,054	45,461	102,897	248,036	
PSA 04	245,735	29,319	35,842	227,097	537,993	238,212	30,619	30,050	249,303	548,184	
PSA 05	222,794	25,626	8,048	60,030	316,498	192,256	21,527	8,108	98,173	320,064	
PSA 06	83,211	31,383	23,783	92,293	230,670	88,038	32,424	23,983	83,523	227,968	
PSA 07	175,621	6,952	5,944	96,866	285,383	197,028	6,019	7,125	97,129	307,301	
PSA 08	130,933	33,535	33,753	190,754	388,975	90,423	64,442	33,123	216,308	404,296	
PSA 09	158,916	27,592	20,645	60,445	267,598	151,15 <i>7</i>	22,477	17,275	45,653	236,562	
PSA 10	82,983	30,803	4,644	136,914	255,344	101,322	5,131	5,273	166,967	278,693	
PSA 11	132,580	162,439	45,749	19,666	360,434	125,721	116,106	36,893	56,820	335,540	
State Total	1,605,510	511,695	315,108	1,232,131	3,664,444	1,526,773	463,357	288,944	1,353,673	3,632,747	
‡ Access S	Services		me Servic		* Legal		r Services				
Escort Informatio Outreach Transporta	n & Referral	Teleph	keeping one Reass al Care		egal Services	Newspa _l Senior C Assessm Case Ma	ation	Re Shi Ho ion Pla ty Tre ig Co Or ing Re	ogram Deve creation opping ospice acement eatment ompanion Si mbudsman epair/Mainte Renovation	itter	

TABLE #3
TITLE III-B ACTUAL EXPENDITURES

			FY 1	<u>986</u>	FY 1987						
	Program Income	Other Resources	Third Party In-Kind	Federal Title III-B	Total	Program Income	Other Resources	Third Party In-Kind	Federal Title III-B	Total	
PSA 01	8,436	103,827	2,984	201,600	316,847	11,084	112,037	2,144	190,960	316,225	
PSA 02	1,353	128,011	3,306	315,735	448,405	2,976	96,035	2,687	308,180	409,878	
PSA 03	1,596	46,101	26,125	207,175	256,297	1,514	27,232	12,630	206,660	248,036	
PSA 04	36,661	273,868	15,5 <i>77</i>	211,887	537,993	40,334	262,074	14,966	230,811	548,185	
PSA 05	32,257	34,743	7,698	241,801	316,498	40,467	32,785	16,794	230,018	320,064	
PSA 06	6,125	7,849	17,223	161,190	230,670	4,956	8,194	17,404	197,415	227,969	
PSA 07	25,902	89,135	16,037	154,309	285,383	24,903	73,406	18,009	190,983	307,301	
PSA 08	13,245	77,213	21,558	276,960	388,976	33,707	60,432	16,356	293,802	404,297	
PSA 09	37,534	44,421	4,845	170,798	267,598	39,183	29,992	4,862	162,525	236,562	
PSA 10	18,246	27,007	14,212	195,889	255,344	15,316	32,001	15,454	215,922	278,693	
PSA 11	26,517	156,520	12,233	165,163	360,434	24,878	162,383	580	147,700	335,541	
TOTAL	207,872	988,695	141,798	2,302,507	3,664,445	239,318	896,571	121,886	2,374,976	3,632,751	

PSA 01

Wyandotte-Leavenworth AAA

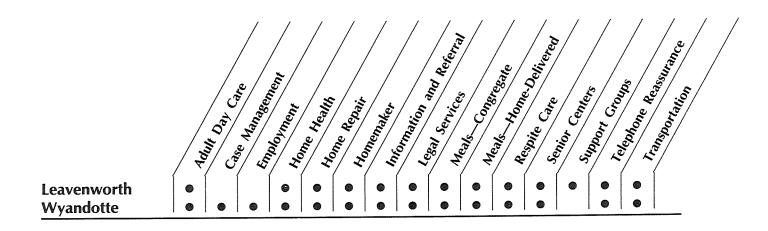
9400 State Avenue Kansas City, Kansas 66112 Art Collins, Director 913-596-9231

1980 Census

Population 60+: 35,254

% of State's 60+: 8.6%

SERVICES AVAILABLE BY COUNTY*



AGING SERVICES MILL LEVY **

		1986	1987
Leavenworth		\$ 86,237	\$ 95,213
Wyandotte		389,571	415,527
/	TOTAL	\$475,808	\$510,740

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

Central Plains AAA 510 North Main, Room 306 Wichita, Kansas 67203 Irene Hart, Director 316-268-7298

1980 Census

Population 60+: 64,176 % of State's 60+: 15.6%

SERVICES AVAILABLE BY COUNTY*

	Aduit Day (Find Day) Find Day
Butler Harvey Sedgwick	

AGING SERVICES MILL LEVY **

		1986	1987
Butler		\$ 158,879	\$ 138,067
Harvey		47,909	36,406
Sedgwick		921,610	1,025,459
	TOTAL	\$1,128,398	\$1,199,932

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

Northwest Kansas AAA 301 West 13th Street Hays, Kansas 67601 Ellene Davis, Director 913-628-8204 1-800-432-7422

1980 Census Population 60+: 25,723 % of State's 60+: 6.2%

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Phillips				•		•	•	•		•		•			
Rawlins					•	•		•	•				•		
Rooks				•	•	•		•					•		
Russell				•	•	•	•	•		•	•		•		
Sheridan	•				•		•	•		•			•		
Sherman	•				•			•	•	•	•	•	•		
Smith				•	•	•		•	•	•			•		
Thomas					•	•	•	0	•	•	•	•	•		
Trego				•	•	•	•	•		0			•		
Wallace					•	•								ı	

	AGING	AGING SERVICES MILL LEVY **						
		1986	\$ 1987					
Cheyenne		\$ -0-	-0-					
Decatur		-0-	-0-					
Ellis		- 0-	42,834					
Gove		-0-	-0-					
Graham		-0-	-0-					
Logan		-0-	-O -					
Norton		29,286	26,891					
Osborne		-0-	-O -					
Phillips		-0-	-0-					
Rawlins		17,213	15 <i>,</i> 017					
Rooks		42,373	34,385					
Russell		-0-	9,662					
Sheridan		-0-	-O -					
Sherman		22,035	27,463					
Smith		-0-	-0-					
Thomas		41,428	50,664					
Trego		-0-	-O -					
Wallace		-0-	-0-					
	TOTAL	\$152,335	\$206,916					

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

PSA 04

Jayhawk AAA

1195 Buchanan, Suite 103 Topeka, Kansas 66604 Donna Kidd, Director 913-235-1367

1980 Census

Population 60+: 34,730 % of State's 60+: 8.4%

	Adult Day Che Management Home Menth Management Home Menth Management Home Menth Ment
Douglas Jefferson Shawnee	

AG	ING SERVICE	S MILL	LEVY **
			k .
			400

		1986	1987
Douglas		\$186,331	\$188,081
lefferson		12,030	22,915
Shawnee		497,939	512,629
	TOTAL	\$696,300	\$723,625

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

PSA 05

Southeast Kansas AAA 1500 West 7th Street P.O. Box 269 Chanute, Kansas 66720 Jerry Williams, Director 316-431-2980 1-333-2051 (Toll-Free in AAA) 1980 Census Population 60+: 46,610 % of State's 60+: 11.3%

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Allen										ĺ	ĺ	ĺ	ĺ	ĺ		
Bourbon			•	•	•	•			•	•						
Cherokee	•		•	•	•	•		•	•	•					•	
Crawford	•	•	•	•	•	•	•	•	•	•	•	•	•			
Labette	•			•	•	•		•	•	•	•	•			•	
Montgomery	•		•	•	•	•		•	•	•	•	•	•	•		
Neosho				•	•		•	0	•	•			•			
Wilson				•	•			•	•	•	•	•	•			
Woodson			•						•	•		•				

AGING	SERVICES	MILL	LEVY **	

		1986	1987
Allen		\$ 39,864	\$ 28,143
Bourbon		44,298	42,260
Cherokee		1,388	5,818
Crawford		81,174	89,177
Labette		-0-	-0-
Montgomery		57,964	61,016
Neosho		31,833	32,116
Wilson		22,406	22,549
Woodson		29,535	23,246
	TOTAL	\$308,462	\$304,326

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

Southwest Kansas AAA 108 N. 14th Street P.O. Box 1636 Dodge City, Kansas 67801 Dave Giest, Director 316-225-0510 1-800-742-9531

1980 Census Population 60+: 37,401 % of State's 60+: 9.1%

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Pawnee				0 0	• •	0 0	•	• •			
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Rush			• •	0 6		-	•			•	
Scott			• •		0						
Seward		•									
Stafford			•								
Stanton											
Stevens											
Wichita	1 1	🕢		🕶 6			'			*	

	AGI	NG SERVIC	ES MILL L	EVY **
		198	6	1987
Barber		\$ 2,02	22 \$	61,691
Barton		-0-	•	-0-
Clark		-0-		-0-
Commanche		-0-		-0-
Edwards		-0-		-0-
Finney		136,80)9	184,019
Ford		-0-		-0-
Grant		-0-		165,448
Gray		43,38	34	39,267
Greeley		8,25	54	9,606
Hamilton		19,14	15	18,155
Haskell		93,10)7	98,192
Hodgeman		11,36	51	12,302
Kearny		41,37	77	45,269
Kiowa		-0-		-0-
Lane		-0-		-0-
Meade		45,50	00	43,029
Morton		30,42	24	20,756
Ness		56,14	-6	23,063
Pawnee		21,10) <i>7</i>	22,392
Pratt		-0-		13,141
Rush		-0-		-0-
Scott		- 0-		-0-
Seward		126,80	2	134,727
Stafford		-0-		-0-
Stanton		-0-		-0-
Stevens		-0-		126,905
Wichita		-0-		14,348
	TOTAL	\$635,43	37 \$1	,032,312

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

Mid-America Council on Aging 132 South Main

Ottawa, Kansas 66067

Shirley Higdon, Director 913-242-7200

1980 Census

Population 60+: 19,146 % of State's 60+: 4.6%

SERVICES AVAILABLE BY COUNTY *

	7	O TO	Se Manago,	Thoman Thent	Tome Health	Tome Repair	John Markey 100 Markey	monmation .	Service Referen	weak Cong	rieds Siegale Republic	"copie die Colivered"	enior Confe	sus dipoort	refenhane R.	ransportation registration
Anderson		•							•			•		•	•	
Coffey		•	•	•	•	•	•	•	•	•		•			•	
Franklin		•	•	•	•	•	•	•	•	•		•	•		•	
Linn		•	•	•	•	•	•	•	•	•		•		•	•	
Miami		•	•	•	•	•	•	•	0	•	•	•	•	•	•	
Osage		•		•		•	•		•			•		1		

	AGIN	IG SERVICES MI	LL LEVY **	
		\$ 1986	1987	
Anderson		-0-	\$ 18,296	
Coffey Franklin		-0- 32,017	-0- 32,185	
rrankiin Linn		53,730	47,350	
Miami		64,550 32,891	68,706	
Osage	TOTAL	\$183,189	43,568 \$210,104	
	TOTAL	ψ.05/.05	Ŧ = ' - ' · -	

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

North Central/Flint Hills AAA 437 Houston Street

Manhattan, Kansas 66502

Monda Spool, Director 913-776-9294 1-800-432-2703

1980 Census

Population 60+: 54,211 % of State's 60+: 13.1%

SERVICES AVAILABLE BY COUNTY*

	/	James	Gse Manap	inployment L	Tome Health	Tome Reps.	Tomomake.	infomation /	Cost Service Reference	Meds Far	Meals Heade	Respite Garage	Somior Constant	Support Support	'clephone "coups	ransportation reason and
Chase				•							ĺ					
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Geary				•					•							
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Lincoln				•		•	•	•	•	•						
Lyon		•		•		•	•	•	•	•						
Marion						•	•	•	•	•		•			•	
Mitchell				•	•	•		٠	•	•	•	•	•		•	
Morris Ottawa						•	•	•	•	•		•	•		•	
Pottawa tomie	•			•			•		•	•		•	•		•	
Republic									•	•						
Riley									•	•		•			•	
Saline	•	-	•	•		•	•		•	•		0	0	98		
Wabaunsee				•		•		•	•	•		•	•		•	

	AGIN	NG SERVICES MIL	.L LEVY **
		1986	1987
Chase		\$ 12,821	\$ 12,892
Clay		36,618	36,392
Cloud		50,160	49,879
Dickinson		52,291	<i>57,</i> 769
Ellsworth		60,224	26,518
Geary		43,254	44,447
Jewell		-0-	-0-
Lincoln		-0-	-0-
Lyon		82,083	73,531
Marion		33,113	31,210
Mitchell		17,876	17,944
Morris		16,939	16,341
Ottawa		36,676	37,360
Pottawatomie		-0-	-0-
Republic		-0-	- 0-
Riley		93,006	125,634
Saline		136,521	162,006
Wabaunsee		17,916	21,426
	TOTAL	\$689,499	\$713,349

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

PSA 09

Northeast Kansas AAA 107 Oregon Hiawatha, Kansas 66434

Anna Mae Shaffer, Director 913-742-7152

1980 Census Population 60+: 20,156 % of State's 60+: 4.9%

SERVICES AVAILABLE BY COUNTY*

	Z.	Case Manage Care	Thomas Samon, to the same of t	Homo Houlin	Ho. Hopair	Toplander of the state of the s	mormation 1	Seal Service Referen	les so sear	Meals Bale	Spire Grandeliver	Somor Somor	Sia Hodan	oundays 1	ransportation reassurance
Atchison						•			 		1				ĺ
Brown		•	•				•	•	•		•	•	•		
Doniphan			•				•	•	•		•	•	•		
Jackson		•	•		•	•	•	•	®		•	•	•	•	
Marshall		•	•		•	•	•	•	•		•	•	•	•	
Nemaha	•	•	•		•	•	•	•	•	•	•	•	•		
Washington			•				•		•		•	•	•		

	AGIN	NG SERVICES MI	LL LEVY **
		\$ 1986	1987
Atchison		-0-	\$ 49,986
Brown		37,840	48,684
Doniphan		28,418	28,422
Jackson		27,175	29,702
Marshall		-0-	34,469
Nemaha		-0-	-0-
Washington		- 0-	-0-
	TOTAL	\$93,432	\$191,262

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

PSA 10

South Central Kansas AAA

112 West Adams P.O. Box 1122 Betty Londeen, Director 316-442-0268 1-800-362-0264

1980 Census

Population 60+: 43,948 % of State's 60+: 10.7%

Arkansas City, Kansas 67005

SERVICES AVAILABLE BY COUNTY*

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Chautauqua		•		•		•	•	•	•	•		•			•	
Cowley	•	•	•	•	•	•	9	•	•	•	•	•	•		•	
Elk				•		•	•	•	0	•		•		•	•	
Greenwood				•	0	•	•	•	0	0		•	•	•	•	
Harper		•	•	•	0	0		•	•	•		0		•	•	
Kingman		0		•	•	•	•	•	•	•						
McPherson	•		•	0	•	•	•	•	•	•	•	•	0	•	•	
Reno			•	•	•	•	•	•	•	•	•	•	•	8		
Rice		0	•	•	•	•		•	•	•		•		•	•	
Sumner					0		•	0	•		İ	9			🚳	1

	AGING SERVICES MILL LEVY **									
		1986	1987							
Chautaugua		\$ 25,230	\$ 20,625							
Cowley		106,528	106,070							
Elk		21,611	19,892							
Greenwood		49,988	44,802							
Harper		45,653	60,292							
Kingman		40,659	40,162							
McPherson		15,322	134,721							
Reno		245,161	242,698							
Rice		59,207	56,735							
Sumner		82,124	85 <i>,</i> 667							
	TOTAL	\$691,484	\$811,666							

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

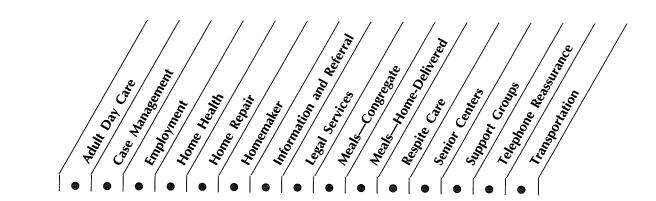
Johnson County Human Resources and Aging Dept. 301A South Clairborne Olathe, Kansas 66062

Trish Moore, Director 913-782-7188

1980 Census

Population 60+: 30,941 % of State's 60+: 7.5%

SERVICES AVAILABLE BY COUNTY*



Johnson

AGING SERVICES MILL LEVY **

1986

1987

Johnson

\$-0-

\$-0-

^{*} Reported in: Long-Term Care Services For Older Kansans: A Comprehensive Plan, December, 1986

^{**} Amount to be generated. Source: Kansas Government Journal

Kansas State Advisory Council on Aging Report for Fiscal Years 1986-1987

Published by: Kansas Department on Aging

SAC Report Committee: John Grace, Helen Miller and Hattie Norman

Editor: Suellen Weber

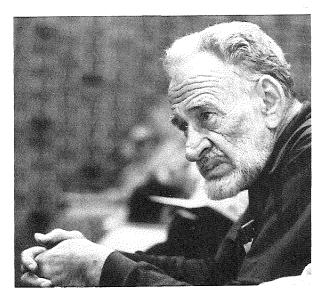


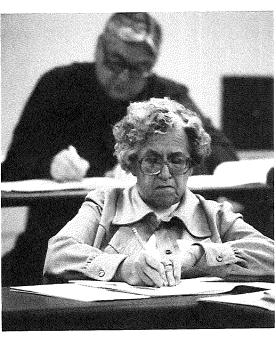




K A N S A N S









A D V O C A T E S



TESTIMONY ON SB 60, THE KANSAS SENIOR CARE ACT by

Kansas Department on Aging

Before

House Public Health and Welfare Committee

March 21, 1989

Mr. Chairman and members of the committee, my name is Esther Wolf, Secretary of Aging. It is a privilege to speak to you on behalf of Governor Hayden and the citizens of Kansas.

The bill you have before you is one that Governor Hayden endorsed in his State of the State address, and it is a concept that the citizens of Kansas have requested. The Kansas Department on Aging asks for your support of SB 60 to establish a program of in-home services.

The bill is a simple one; is contained on one page. You will remember, Mr. Chairman, that in 1986 we began our work on division of assets with a one page bill. The issue before you today may be just as important.

PROGRAM OPERATION

Other witnesses today will speak on the need for this program. I want to devote my time to its operation. Here is how I foresee the Governor's program in operation:

Administration - The Kansas Department on Aging would grant funds to three area agencies on aging which would provide assessment and contract for homemaker and personal care services within their planning and service areas.

Kansas has eleven area agencies on aging. They are responsible for the administration of Older Americans Act programs, which include in-home services. The area agencies on aging do not usually operate the programs directly; they contract for services with community-based organizations.

<u>Selection of Sites</u> - Every area of the State needs long term care services. We can make a measurable impact on this need by concentrating the funding available in SB 60 in three pilot locations.

The Department plans to select sites by their geographical location and by their stage of program development. We plan to locate one project in a rural area and one project in an urban area. We also plan to target an area which currently has minimal services, as well as an area which has a well-developed mix of services. With

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only three pilot locations, we will decide how to best select sites based on population and services.

Our goal is to test the viability of the Senior Care Program under different circumstances. All areas of the State will be considered for a project.

<u>Cost Sharing</u> - Recipients and area agencies should share the costs of the program. Cost-sharing increases the impact of the program and reduces the stigma of welfare.

The Department plans to offer grants only to area agencies on aging which can match the State money with local resources. There must be a local commitment to make this program a success. The State money serves as an incentive for local effort.

The Department also plans to offer services on a sliding-fee scale. One of the important advantages of the Senior Care Program is the availability of services which it will provide to people who do not meet the income and resource tests of existing programs, such as home and community based services provided under Medicaid. By offering the services on a sliding-fee scale, we make the services more acceptable. People who want to use the services and who want to pay for the services can use and pay for the services. This arrangement also generates income for the program.

I want to emphasize the concept of independence. The Senior Care Program intends to offer independence to Older Kansans who have disabilities. Those Kansans who want to be independent probably prefer not to be dependent on the State for their care. We do not want to foster dependency. By offering Older Kansans an opportunity to contribute to the cost of these services, we are maintaining their dignity.

<u>Service Development</u> - If SB 60 is passed the Department plans to fund two services -- homemaker and personal care services. These services are the two essential services identified in December, 1986 by the Secretaries of SRS, Health and Environment and Aging in <u>Long Term Care Services for Older Kansans: A Comprehensive Plan</u>. We will target our resources by devoting our funding to these two services.

Attached are tables from a survey at the 1987 Governor's Conference on Aging which show the preferences of Older Kansans. The top three choices were home health services, home delivered meals, and homemaker services.

SRS has a successful homemaker program known now as the Home Care Worker Program. Some area agencies on aging use Older Americans Act funds to purchase homemaker services from SRS so that people above the income eligibility standards can be served. With the

Senior Care Program the Department intends to increase the availability of homemaker services.

Personal care services are also purchased by some area agencies using Older Americans Act money. Area agencies on aging commonly contract with home health agencies for these services. Personal care services, however, need to be more available.

The Department intends to collect base line data before the start of the program in each selected area. This data should measure the need for services. After implementation, the Department intends to collect data on the program's impact on families, recipients, and communities. This data should test the validity of our assumptions about necessary services and the effectiveness of our program in providing homemaker and personal care services.

I am pleased to note in passing that home delivered meals are also going to be more available pursuant to the Governor's 1990 proposed budget. Low-income home delivered meals will increase by 33 percent and all other meal programs by 4.45 percent.

CONCLUSION

Even though the \$250,000 provided for SB 60 is a modest amount of money, it will significantly increase the amount of funding the Department will be providing for in-home services in Kansas. Older Americans Act funds now only purchase \$400,000 of in-home care statewide.

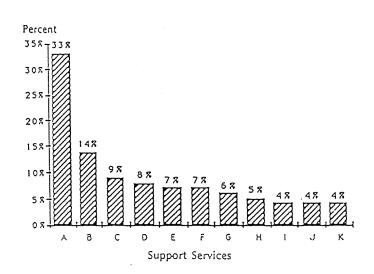
State funding will allow us to move around the restrictions of federal funding that hamstring the development of a long-term care system in Kansas. State funding will not be tied to income and resource tests which are a part of the Medicaid and SRS programs. State funding will not be tied to the restrictions in the Older Americans Act which prohibit the pricing of services. We can therefore build a system of services which will not require the impoverishment of recipients and which will allow them to purchase services as needed.

By this time next year, the Department intends to show that the State's investment in a Senior Care Program enhanced the well-being of Older Kansans. It is an investment worth making.

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CAREGIVERS

70% of the respondents are currently providing or have provided care to an older person for an extended period of time. The following is an indication of what form of caregiver support was or would have been of greatest benefit.

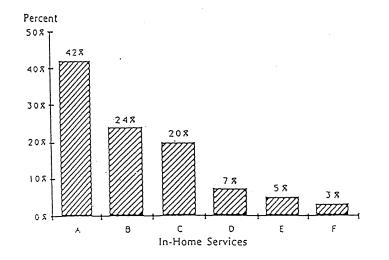


Support Services

- A. Home Health Care
- B. Adult Day Care
- C. Information and Referral Services including caregiver training
- D. Long Term Care Insurance
- E. Other
- F. No caregiver support was necessary
- G. Respite Care
- H. Local Support Group
- I. Unpaid leave from work with health and pension benefits protected
- J. Hospice Care
- K. Dependent Care Tax Credit

IN-HOME SERVICES

91% of the respondents indicated a preference for use of funds for in-home services over case management. Those respondents indicated that the following in-home services are most important to be funded.



In-Home Services

- A. Home-Health Services
- B. Home Delivered Meals
- C. Homemaker
- D. Home Repair
- E. Friendly Visitor
- F. Telephone Reassurance

Testimony before the House Public Health and W fare Committee March 21, 1989
Julie Govert Walter, Public Affairs Director
North Central-Flint Hills Area Agency on Aging
Manhattan, KS 66502
913-776-9294

Good morning. My name is Julie Govert Walter. I am speaking on behalf of Monda Spool, the executive director of the North Central-Flint Hills Area Agency on Aging, a private, non-profit agency which serves 55,000 Kansans age 60 and over who live in an 18-county service area.

I am delighted to have this opportunity to testify this afternoon in support of Senate Bill 60 -- a proposal which our agency believes would be an initial step for state funding of inservices -- services that would enable older Kansans with chronic health conditions to remain living independently in their own homes longer.

I'd like to highlight why I believe state funds are necessary to provide in-home services:

1. Older Kansans value their independence.

Most older Kansans enjoy good health. They garden, travel as they please and participate in their communities.

But many older Kansans have chronic long-term health problems or disabling conditions which prevent them from living independently in their own homes. Some have severe health problems, such as Alzheimer's Disease which equire round-the-clock attention.

Another group of senior Kansans -- a sizable number of older Kansans -- have health conditions that are only mildly limiting. These seniors may need help with bathing, grooming or other types of personal care. Or they may need help with their shopping or with other household chores -- tasks which everyone knows must be done if one is to live at home.

It is this last group of seniors who risk being inappropriately institutionalized. These seniors fear being burdens to their families and friends, yet they also fear having to leave their homes.

2. Kansas offers few alternatives to institutionalization.

Older Kansans with chronic, long-term health problems or disabilities have really only one main alternative: the nursing home.

Currently federal funds use in Kansas provides an institutionally-biased health care system.

In 1986 our state spent \$96 million on long-term care and more than \$88 million of this went for nursing home care. A state-by-state study released in 1988 by George Washington University ranks Kansas as 46th in the nation in the amount of state dollars spent for long-term care.

In 1986, Kansas spent a total of \$400,000 on long-term health services -- about \$1.20 for every person over age 65. That same year Colorado spent \$42.90 per older person; Missouri spent \$41.90; Oklahoma spent \$16.30 and Nebraska spent \$1.80. These states, with the exception of Nebraska, have a sliding fee scale option. This means that in Missouri, a person who meets medical eligibility requirements but not the income requirements, may recieve the services he or she needs to live independently at home on an ability-to-pay basis.

3. In-home services now available are under-funded, many restrictions apply.

Here's a review of in-home services now available in Kansas:

SRS Services

Only those Kansans who meet SRS medical and income requirements may take advantage of Home and Community Services and Homemaker services. Often only those who are already in poor health begin to recieve these in-home services. An individual in a rural area is lucky if all the needed services are available in his or her county. The Homemaker program's budget is anticipating a \$900,000 shortfall if FY 1990. This budget cut will reduce the number of hours received by those already receiving these services and will mean that many Kansans in medical and economic need of these services will never get significant help from this program.

County Health Departments:

A survey conducted by our agency in August shows that 15 percent of those older Kansans who received in-home help in 1987 used services provided through county health departments. Sixty-two percent of all seniors who received this help were age 75 or older.

Two-thirds of the county health officials who completed the survey indicated that eligibility requirements for Medicare, Medicaid and SRS were the biggest barriers to providing in-home services. Shortages of qualified staff was the second most important barrier.

Funding restrictions of Medicare and Medicaid mean that the services provided are available only on a short-term basis. And often the in-home services available in larger, more urban counties are unavailable in rural counties.

Older Americans Act Supportive Service Grants:

During the last three years, the North Central-Flint Hills Area Agency on aging has provided almost \$193,000 in federal III-B funds for in-home services benefiting older Kansans at risk of being institutionalized.

In-home services are a priority for our Agency. Since FY 1987 an average of 20 percent of all III-B dollars has been allocated for in-home services.

2

Most of the stunds went to supplement ersonal care services provided through health departments. Other services funded included hospice, chore and case management services.

Our agency has successfully built partnerships with health departments and home health agencies who know the need for in-home services, but can't meet these demands because of Medicare and Medicaid restrictions, tight budgets or staff shortages.

Please refer to the addenda submitted with this testimony for a detailed summary of our Agency's response to the need for in-home services in our area.

Recommendations based on experience of administering in-home services projects:

Given that our agency has a successful record of administering funds for programs providing in-home services to senior Kansans, I respectfully submit these recommendations and observations.

1. Funding of in-home services should be a priority for state legislators.

Currently our long-term care system is lop-sided -- heavily favoring institutional care over providing services that could keep older Kansans living where they want to live -- in their own homes.

2. Maximize funding for direct in-home services -- specific core services targeted to meet the daily-living needs of homebound Kansans -- and minimize administrative costs.

By funding in-home services through the Kansas Department on Aging as proposed in S.B. 60, the state utilizes the state-wide network of area agencies of aging. This has the potential to allow funds from federal, state and local sources to converge so that the state can get more services for every dollar spent.

3. If funds are limited, fund a few quality projects

Currently state funds are allocated on a formula basis. But allocating few dollars throughout the state would be like fighting a tiger with a toothpick. The limited budget dollars currently under review would have a greater impact if used for specially targeted projects. These projects would be required to meet these criteria:

- a. Measuring unique service delivery characteristics
- b. Provide performance models to deliver in-home services.
- c. Target specific services of high priority for an atrisk population.

I suggest that if only a very restricted pool of funds are available for in-home services, the state should fund special projects which would model service delivery in the state. For example, dollars could be assigned to fund in-home services in a very rural area which would allow the state to learn more about the challenges and the delivery costs unique to in-home service programs serving rural older Kansans. The state could fund a program for in-home services for older Kansans who reside in one of Kansas' larger cities to learn the nuances of this type of program.

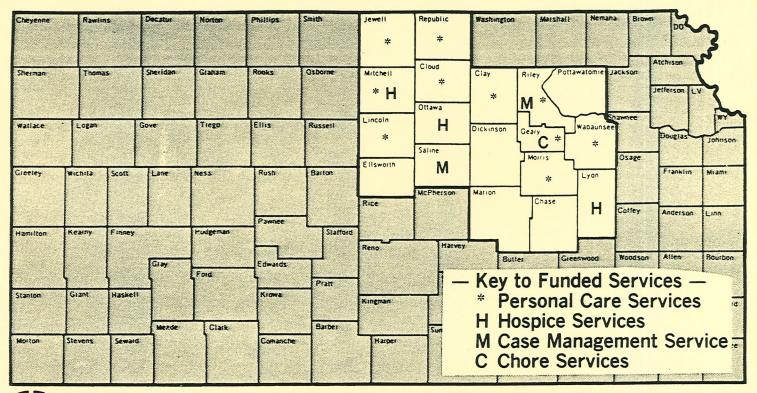
The services provided through these programs should be tracked and evaluated on performance-based criteria. With information the Kansas Legislature and the Department on Aging could expand in-home service delivery in Kansas based on experiences and results of the already funded projects.

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In-Home Service Fact Sheer





North Central-Flint Hills AREA AGENCY ON AGING 437 Houston St. Manhattan, Kansas 66502 1-800-432-2703

Summaries of In-Home Services Provided with Title III-B Funds

1987 SUMMARY OF IN-HOME SERVICES PROVIDED WITH TITLE III-B FUNDS

Service	Hours of Service Provided	Number of Unduplicated 60+ Clients Served	Number of Grant Awards
Personal Care	6,683 hours	329 clients	7
Hospice	712 hours	53 clients	2*
Case Management	3,129 hours	220 clients	2
Chore Services	1,038 hours	50 clients	1
TOTAL	11,562 hours	652 clients	12 grant awards

^{*} One grant award went toward start-up funds for Hospice
of the Flint Hills in Lyon County.

1988 SUMMARY OF IN-HOME SERVICES PROVIDED WITH TITLE III-B FUNDS

	Hours or	Number of	
	Service	Unduplicated 60+	Number of
Service	Provided	Clients Served	Grant Awards
			OH 43
Personal Care-	5,806.5 hours	366 clients	8 tm a
Hospice	3,669.5 hours	54 clients	3 00 21 9
Case Management	3,388.25 hours	232 clients	2 3 19
Chore Services	564 hours	34 clients	1 130 m
TOTAL	10,428.25 hours	686 clients	14 grant awards



Funding Summaries

1987 FUNDING SUMMARY

Service	Federal III-B	Local Match	Total Combined Funds
Personal Care	\$43,537	\$17,838	\$61,375
Hospice	11,170	3,723	14,893
Case Management	17,000	12,172	29,172
Chore Services	4,000	1,333	5,333
TOTAL	\$75,707	\$35,066	\$110,773

In 1987, 25 percent of Area Agency on Aging Title III-B funds were used to fund in-home services for seniors in north-central Kansas.

Total III-B funds: \$302,610

1988 FUNDING SUMMARY

Service	Federal III-B	Local Match	Total Combined Funds	
Fersonal Care	\$43,500	\$14,501	\$58,001	
Hospice	12,500	8,182	20,682	
Case Management	12,000	9,173	21,173	
Chore Services	2,500	833	3,333	
TOTAL	\$70,500	\$32,689	\$103,189	

In 1988, 21 percent of Area Agency on Aging Title III-B funds were used to fund in-home services for seniors in north-central Kansas.

Total III-B funds: \$328,878

1989 FUNDING SUMMARY

Service	Federal III-B	Local Match	Total Combined Funds
Personal Care	\$42,210	\$13,738	\$54,948
Hospice	2,375	792	3,167
Case Management	2,000	667	2,667
Chore Services	1,055	352	1,407
TOTAL	\$46,640	\$15,549	\$62,189

In 1989, 15.3 percent of Area Agency on Aging Title III-B funds will be used to fund in-home services for seniors in north-central Kansas.

Total III-B funds: \$305,504

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North Central-Flint H
AREA AGENCY ON AGING
437 Houston St.
Manhattan, Kansas 66502
1-800-432-2703

In-Home Services:

Programs Funded by the North Central-Flint Hills Area Agency on Aging

These programs received III-B Older Americans Act funds through the Grants Program of the North Central-Flint Hills Area Agency on Aging, 1987-1989.

	<u>1987</u>	1988	1989
Total III-B Funds	\$302,610	\$328,878	\$305,504
Total III-B Funds Allocated to In-Home Service Programs	\$ 75,707 (25 percent)	\$ 70,500 (21 percent)	\$ 46,640 (15 percent)

		III-B Allocation	
Programs Funded	1987	1988	1989
Personal Care:			
Clay Co. Health Dept. Cloud Co. Health Dept. Junction City/Geary Co. Health Dept.	\$ 5,000 7,000 6,000	\$ 3,500 5,000 5,000	Ø* \$ 5,000 5,000
Jewell Co. Health Dept. Lincoln Co. Health Dept. Republic Co. Health Dept. Homecare (Riley Co.) Mitchell Co. Health Dept. Morris Co. Home Health Wabaunsee Co. Health Dept.	6,000 6,000 6,000 7,537 Ø Ø	7,500 6,000* 6,000 5,000* 5,000 Ø*	4,105 4,000* 2,990* 5,000 3,046 5,000 7,069
TOTAL	\$43,537	\$43,500	\$41,210
Percentage of Total III-B Dollars	14.4%	13.2%	13.5%
Hospice Services:			
Hospice of the Flint	\$ 8,670	\$ 5,000	Ø
Hills (Lyon Co.) Ottawa Co. Health Dept. Hospice of N.C. Kansas	2,500 Ø	2,500	\$ 2,375 Ø
TOTAL	\$11,170	\$12,500	\$ 2,375
Percentage of Total III-B Dollars	3.7%	3.8%	.8%
Case Management Services:	\$ 7,000	\$ 5,000	\$ 2,000
Riley County HELP Saline Co. CARE Management	10,000	7,000	Ø
TOTAL	\$17,000	\$12,000	\$ 2,000
Percentage of Total III-B Dollars	5.6%	3.6%	.7% DH
Chore Services:			atta
Geary Co. Chore Service	\$ 4,000	\$ 2,500	\$ 1,055*
TOTAL	\$ 4,000	\$ 2,500	\$ 1,055
Percentage of Total III-B Dollars	1.3%	.8%	.3%

^{*} Denotes programs which received Title III-D federal funds in 1988 and 1989. These funds are used to target in-home services. These funds totalled \$6,749 in FY88 and \$6,810 in FY89.

Requests for Information About In-Home Services

In FY88 the Area Agency's Community Services for Aging Program received a total of 1,006 requests for information about aging services. Of these questions, 482 were inquiries related to in-home services. The breakdown:

Kind of Inquiry	Number of Requests
Home Health Services	99
Friendly Visiting	236
Support Services	128
Chore Services	19

- * Eighteen percent of the 2,684 questions and cases handled by Community Services for Aging related to in-home services.
- * Forty-eight percent of the 482 questions and cases regarding aging services related to in-home services.

Requests for Home Companions (July 1988-Dec. 1988)

Between July 1, 1988 and Dec. 31, 1988 the Area Agency's Older Kansans Employment Program received 593 job listings and placed 504 older workers in the workforce. Of these listings 12 percent were for home companion help. About eight percent of the older workers placed in jobs took home companion work.

2+4W 38, attm 38, 3-21-9 3-1:308m

TESTIMONY ON SENATE BILL 60

BEFORE HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE MARCH 21, 1989

MR. CHAIRMAN AND MEMBERS OF THE COMMITTEE - I AM RALPH J. TURNER, DELEGATE FROM DOUGLAS COUNTY TO THE KANSAS SILVER HAIRED LEGISLATURE. I HAVE SERVED THREE TERMS IN THE SILVER HAIRED LEGISLATURE AND JUST COMPLETED A SECOND TERM AS PRESIDENT OF THE BOARD OF DIRECTORS OF THE KANSAS SILVER HAIRED LEGISLATURE, INC. I AM ALSO SECRETARY OF THE JAYHAWK AREA AGENCY ON AGING BOARD OF DIRECTORS.

THROUGH THE YEARS THE OLDER KANSANS CARE CONCEPT HAS BEEN THE NUMBER ONE PRIORITY OF THE KANSAS SILVER HAIRED LEGISLATURE. WE ARE VERY GLAD THAT THE GOVERNOR PROPOSED THE SENIOR CARE PROGRAM.

THE GOVERNOR IN HIS MESSAGE STATED, "THERE ARE MANY OLDER KANSANS WHO FACE DIFFICULTIES IN MAINTAINING AN INDEPENDENT LIFESTYLE IN THEIR LATER YEARS."

"THIS DIFFICULTY OFTEN LEADS TO INAPPROPRIATE OR PREMATURE INSTITUTIONALIZATION OF SENIOR CITIZENS, AND FREQUENTLY EXHAUSTS THE FINANCIAL RESOURCES OF THOSE INVOLVED." (AS YOU ARE AWARE THE COST OF INSTITUTIONAL CARE IS HIGH, \$22,000.00 PER YEAR) THE GOVERNOR WENT ON TO SAY, "I AM RECOMMENDING THE IMPLEMENTATION OF THE SENIOR CARE PROGRAM, TO DEVELOP AND DELIVER A COORDINATED SYSTEM OF HOMEMAKER AND PERSONAL CARE SERVICES. THIS IS A \$250,000 PILOT PROGRAM WITH A 50-50 MATCH PROVISION, FOR KANSANS 65 YEARS OF AGE OR OLDER WHO HAVE FUNCTIONAL LIMITATIONS WHICH RESTRICT THEIR ABILITY TO REMAIN IN THEIR HOMES AND MAINTAIN AN INDEPENDENT LIFESTYLE.

THIS IS IN LINE WITH THE OBJECTIVES OF THE ADMINISTRATION ON AGING FOR IMPLEMENTATION OF THE OLDER AMERICANS ACT FOR FY 1989 WHICH READS AS FOLLOWS:

ALL OLDER PEOPLE SHOULD HAVE THE OPPORTUNITY TO LIVE INDEPENDENT, MEANINGFUL AND DIGNIFIED LIVES IN THEIR OWN HOME AND COMMUNITY FOR AS LONG AS POSSIBLE TODAY AND IN THE FUTURE. EVERY COMMUNITY SHOULD HAVE A SYSTEM OF SERVICES AND OPPORTUNITIES TO HELP OLDER PEOPLE SERVE AND BE SERVED WHERE THEY LIVE. OLDER PEOPLE, THEIR FAMILY AND FRIENDS MUST BE FAMILIAR WITH THE SYSTEM AND FEEL THAT IS RESPONDS TO THEM.

FOR THE PAST FIFTEEN YEARS I HAVE DONE VOLUNTEER WORK IN THE FIELD OF AGING. I HAVE FOUND THAT KANSANS 65 YEARS AND OLDER PREFER TO REMAIN IN THEIR HOMES AND MAINTAIN AN INDEPENDENT LIFESTYLE. I HOPE YOU WILL VOTE YES ON THE \$250,000 AND HELP MAKE THIS POSSIBLE. THANK YOU FOR YOUR ATTENTION AND THE OPPORTUNITY TO APPEAR BEFORE THE COMMITTEE.

Ralph J. Turner 1429 Kasold Drive Lawrence, KS 66044 04hW 324 0thm 1-9 1:30 mm



Kansas Home Care Association · 4101 West 13th Street · Lawrence, Kansas 66046 · (913) 841-2833

To:

House Public Health and Welfare Committee

From:

Linda Lubensky, Executive Director, KHCA

Date:

March 21, 1989

Subject:

S.B. 60, Kansas Senior Care Act

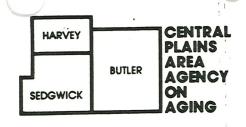
On behalf of the Kansas Home Care Association, I would like to express my appreciation for the opportunity to testify before you today in support of S.B. 60, the Kansas Senior Care Act.

The Kansas Home Care Association represents licensed providers of in-home services across the state. Consequently, our members are intimately aware of the benefits of long term care support services that enable individuals to remain independently in their homes and communities rather than being institutionalized. We are equally aware of the limitations within our current health system that continue to make such services unavailable to many in need.

Kansas has long exhibited a strong institutional bias, which has failed to recognize that most individuals prefer to remain in their homes, when possible, and that the cost of institutionalization is usually substantially more than home care. Moreover, as Kansas has a proportionally high percentage of senior citizens, it is particularly important that our state support those programs which address their long term care needs appropriately and cost effectively. In 1986, more than \$876,000,000 was spent nationwide on state-financed long term care programs. Even though more than 1.1% of the nation's 65+ population live in our state, Kansas spent less than .05% of the nation's total expenditure, ranking 46th among the states. Compounding the Kansas long term care problem is the fact that the SRS Homemaker program is facing the possibility of a \$900,000 cut, which would result in a loss of services to over 500 individuals. And, lacking these necessary support services, how many of these individuals, many of whom will be seniors, will find institutionalization their only option.

The need for long term care services within our state is extensive, and growing rapidly. We know that any comprehensive means of addressing the situation will involve national, state, local and private sector involvement. S.B. 60 would enable the state, through its Department on Aging, to build and develop a program that would, not only provide for some of the need, but would provide the insight, the experience, and the data upon which a comprehensive program could be developed for future years.

1: 30 pm



Sedgwick County, Kansas Department on Aging

Room 306

COUNTY COURTHOUSE, 510 N. MAIN

WICHITA, KANSAS

• TELEPHONE (316) 268-7298 INFORMATION & ASSISTANCE (316) 268-7824

Testimony For SB60

Good morning. My name is Irene Hart and I'm Director of the Sedgwick County Department on Aging. We operate the Central Plains Area Agency on Aging (covering Harvey, Sedgwick, and Butler Counties; administer aging mill levy funds in Sedgwick County; and provide special assistance to older persons through casework, outreach, and case management.

In Sedgwick County particularly, we have established the groundwork for a system of community-based care. If you have questions regarding implementation of the proposed Senior Care Act, I may be able to provide an answer based on our own experiences in Sedgwick County.

The two points I'd like to make today are in relation to 1) the need for the Senior Care Act; and 2) support for SB60 in its current language.

Need for Senior Care Act

You all have seen the statistics about the increasing numbers of older persons, and particularly of the very old, so I will not go into that data. Instead, I'll tell you about three different situations of persons living in Butler and Sedgwick Counties.

3-21-9 3-21-9

- 1. A 98 year old person on the waiting list for mill levy-funded homemaker/personal care assistance. The person is income eligible and meets functional criteria. She is twenty-seventh on the waiting list. Her daughter-in-law, who is in poor health, can only help on the weekends.
- 2. An 82 year old person is in a nursing home because of a broken ankle. She has decided to stay in the nursing home, because she does not have access to personal care services due to the waiting list.
- 3. A county-funded homemaker program provides assistance only in two-hour blocks of time, so that limited resources may be spread to as many persons as possible. The program is unable to provide four to six hour blocks of time for needed respite services to overburdened caregivers. The lack of respite care has resulted in several recent nursing home placements.

In all these situations, the persons would be able to pay a portion of the cost of the care, but are unable to pay the full market price of that care. (Trained aides and homemakers cost \$8 - \$10 per hour through private agencies.) In all situations, county funds have been maximized - there simply isn't enough mill levy funds to assist the people who are in desperate need.

Support for SB60

The National Governors Association performed a study of

successful community-based long-term care programs. Six stamet their criteria, and the system in each state was thoroughly analyzed. I'll give you a summary of their general findings.

- The states did not experience run-away costs in total long term care spending. Each state had some form of the following cost control mechanisms: A) targeting; B) case management, or C) income eligibility.
- All systems were tightly managed in financial eligibility, assessment, and case management, but provided flexibility in services and in selection of actual service providers.
- 3. All systems were built upon the use of non-medical, in-home services.
- 4. State general revenues were essential in building the system; filling gaps in assistance for the poor and near-poor.
- 5. Each state built their system incrementally, either with a total plan, phasing in counties, or statewide phasing in services and population groups.

Aging is the appropriate administrator, working operationally through the Area Agencies and their local subcontracting agencies and organizations. SB60 maximizes the effectiveness of state funds by leveraging local funds. It provides sufficient flexibility to meet needs of individuals, but provides for accountability to the state. And it provides a resource for frail and vulnerable older Kansans who, with all their heart, desire to remain at home in dignity.

I urge your favorable consideration of SB60. Thank you.

2 - 21 - 9 1:30 pm



Kansas Retired Teachers Association

YOUNG STILL SERVING

1988 - 1989



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District 4 Russel Lupton 2008 Hart Dodge City, KS 67801 Phone 316-227-3335

District 5 Dr. Lawrence Bechtold 1106 S. Governeour Rd. Wichita. KS 67207 Phone 316-684-2350

District 6 Leon Foster R.R. 1 • Box 4 Independence, KS 67301 Phone 316-331-7459 Members of the House Public Health and Welfare Committee:

March 21, 1989

My name is Basil Covey and I represent the Kansas Retired Teachers Association.

We support SB 60 that enacts the Kansas senior care act.

Long term care needs have been topics of discussion in the six districts in Kansas for several years.

Retired teachers have expressed their greatest fear during illness is they will have to leave their home of long tenure.

Long term care is expensive and a couple's resources may be exhausted sooner if one has to go to an institution for health care.

We commend the Senators sponsoring SB 60 and hope that this will serve as a beginning of a program for in-home care. SB 60 is written in short understandable language but gives the essentials features of a workable program.

We understand there may be limited funds for the program, but we encourage the department on aging to work on the program knowing that elderly citizens in Kansas welcome it.

We urge the Committee to give SB 60 a favorable vote.

Thank you.

Basil Covey
Chairman

Legislative Committee

pH+W attm #7 3-21-9 1:300m

APPOINTIVE OFFICERS

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Legislative Chairman Basil Covey 3119 W. 31st St. Ct. Topeka, KS 66614 Phone 913-272-5914

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Necrology Chairman Mrs. Mary Ellen Sissman 801 E. 6th Eureka, KS 67045 Phone 316-583-6614

> NRTA Coordinator Dr. George Goebel 711 Crest Dr. Topeka, KS 66606 Phone 913-272-3418

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District 4 Laurence Stanton 406 La Vista Dodge City, KS 67801

District 5 Fayette Fields 1956 N. Tyler Rd. Wichita, KS 67212 District 6

James McCollam Box 6 Weir, KS 66761 Mr. Chairman and Members of the Committee, thank you for this opportunity to speak to you on behalf of the older folks in a ten county area in South Central Kansas about the need for inhome services in their area.

Elk and Chautauqua counties are probably the poorest counties in the State of Kansas. Their elderly population reaches very close to 30% of their total population. These people need and deserve our assistance with inhome services to help them live in their rural communities as long as possible. Rural Chautauqua County had no inhome service provider. The County Health Department is providing inhome medical services for their elderly, so they could see the need for non-medical assistance. They did not have the financial means to provide this service so the Area Agency on Aging is funding a part time worker under the Health Department to provide this service. Needless to say, this is by no means meeting the need of the entire county. Service providers in Elk County are few and far between, so the Elk County Council on Aging has incorporated to be able to receive funds to be the service provider to provide the services that are needed in Elk County. One of the services that this council is providing is inhome services, however, the only funds that are available to them for this service are the very limited Older American Act Funds that they receive from the Area Agency. Again, these funds cannot begin to meet their need for in-home services.

SHOW #8 altin #8 3.21-9

The Rice County Council on Aging is doing an outstanding job with the limited funds that they have in providing in-home services. Staff of this project goes the extra mile in helping their elderly live in their own homes. Other service providers in Rice County will not go into homes that are too dirty or are infested with cockroaches. One gentlemen who insisted that he did not want to move into a nursing home, but who lived in a filthy, cockroach infested home, was convinced by Rice County Staff members to leave his home temporarily while they cleaned it. including the County Director, called in the exterminators, rolled up their sleeves, and cleaned the house so that this gentleman could return to live his few remaining days in his own home. Rice County Council on Aging has a waiting list of elderly that they cannot serve because funds are not available to hire additional staff. Staff of this county council on aging, as well as staff of other county councils on aging in this area, will also complete LIEAP forms, Homestead and Sales Tax Forms, followup on social security problems, food stamp problems, medicare or medicaid problems and other things as needed while they are in the home helping with their in-home chores.

Lois McClure, a retired school teacher in rural Kingman County, contacted a federally funded agency in Kingman County to request in-home services. Two months passed before someone from the agency contacted her to inquire about services she may need. This lack of responsibility prompted the Kingman County Council on

Aging to initiate action to provide this service. Their lack of funds also prevents them from meeting the need in this area.

Reno County Department on Aging Director informed us yesterday morning that they too have a waiting list of in-home clients that need their services. Other communities in our area follow this same pattern of need.

The McPherson County Council on Aging expressed their desire to be a part of this presentation, so they have asked that their correspondence to The Governor of Kansas, dated October 25, 2988, be included in this report. It is, therefore, attached.

In conclusion, we do urge you to consider, very seriously, this need for in-home services in the State of Kansas, and to take such actions that will help solve these problems.

Betty B. Londeen, Executive Director South Central Kansas Area Agency on Aging P.O. Box 1122 Arkansas City, KS 67005

24.30 pm

McPHERSON COUNTY COUNCIL ON AGING

112 E. EUCLIO MCPHERSON, KANSAS 67460

October 25, 1988

Honorable Mike Hayden Governor of Kansas State Office Building Topeka, Kansas 6612

Dear Governor:

Enclosed is a consensus statement signed by membership and Board representatives of the McPherson County Council on Aging and affiliated members of Board of Directors of other Senior Citizen organizations throughout McPherson County.

This statement encourages you as Governor and members of the legislature to include funding for a long term care support system in Kansas with the development of the 1989-90 budget. A copy of this statement has been sent to our incumbent representatives namely - Harold Dyck, Dale Sprague and LeRoy Fry, also Senator Joe Harder as well as the candidates who are seeking their office.

We feel that some priorities must be established in dealing with chronic long term in home needs of our older residents. We are now faced weekly with requests for in-home services which we cannot provide or arrange with existing agencies and their resources. The type of services requested are in addition to those now provided out of the senior centers in the county. They include: personal care services - such as assisting clients with bathing, ambulation, grooming, shampooing hair; light housekeeping; food preparation; shopping and errands; laundry & mending; respite care; house and yard chore services; checkbook & money management; and night support. These services simply are not available through home health care supplemented by Medicare since they are not classified as skilled needs. Neither are they available through the SRS network except for the homemaker program which implements a means test and the extremely limited few who are served under the Medicaid waiver HCBS (Home & Community Based Service) program.

We utilize our case management/outreach program to assess clients' needs and try to arrange private providers to meet their needs but they (providers) are hard to find with the often small resources that vulnerable elderly persons can afford to pay. The result is that there are a tremendous number of older persons who are having difficulty in maintaining basic functional aspects of their daily lives and who are seeing their independent community living threatened. Statistics reveal (see enclosed material) that there are currently six (6) million persons aged 80 and beyond in the U.S. and this number is expected to reach nearly 20 million by the year 2030. This age

7

group has already increased by 141% in the past fifteen (15) years compared to 3% of the general populace. With this dramatic increase in the older old come naturally many chronic problems dealing with functional activities of everyday living. Although it might be somewhat of an oversimplification, there appears to be two basic philosophical methods to meet these needs. One is to increase nursing home construction tremendously both nationally and statewide. This seems to be a very negative goal since older persons have a great desire to remain active, independent, tax paying members of their communities and since nursing homes are currently having a terrible time staffing their existing institutions, not to mention the ultimate result of the terrific increase in the use of Medicaid. The second basic choice is to begin Federal and State financing of a support system that would pay providers to supply needed long term care in-home services on a sliding fee/ability to pay basis matched with local funding. This process has already begun in part federally with the passage of the Medicare Catastrophic bill earlier this year (although in reality this legislation does not address chronic in-home service needs).

It is to this goal that we encourage you, as Governor, and the legislature to take a long hard look at what should not be a problem in this state and country, but which rather should be a right of older individuals who have established our heritage. The right to live in dignity and independence with some support as long as is physically and medically possible. The right to take pride in this independence as they seek to remain contributing members of their communities while paying their way to the extent they can.

Thank you for taking time to read this letter. We will eagerly await a legislature response.

Sincerely,

Arnie J. Neufeld Director - MCCA

arnie of Menfeld

attrit 9
3-21-9
3-21-9
1:30 pm

Older Domen's League

March 21, 1989

For the third time I come before this committee asking for support for an in-home-care bill. About 5 years ago, as a member of the KS State Legislative Committee of AARP, I first asked your committee to support an across-the-state, full scale in-home-care bill. That was HB 2491. That bill was flawed and went nowhere. Two years ago, as a member of the Older Women's League, I helped present HB 2226 calling for three demonstration sites, and among other things had a sliding-fee scale based on the ability to pay, to be administered by the Secretary of KDOA. In drawing up the bill we had the work of members of AARP, KCOA, KDOA, SHL, OWL, nurses, social workers and teachers. We worked with one of your legislators for months trying to draw up a bill that was well thought out. By instituting the program we wanted to find the problems as we tried out the program and we were looking for data. We wanted answers to such questions as:

- 1. Is the cost actually less than institutionalization?
- 2. How much demand would there be for services?
- 3. Are there problems about finding the necessary workers?
- 4. Are there problems which differ one from other in various locations in the state.

We tried constantly to network with other groups and among our efforts was a visit to the Governor's office by an AARP member, a SHL member, and an OWL member. (By the way, the SHL has had a bill for in-home-care every year since their formation).

The bill had a great hearing in the Old Justice room. We felt that we had been successful but the bill was not brought out for a vote in this committee.

3-21-9 3-21-9

Now SB 60 seeks to implement what is in the Governor's budget. am amount for \$250,000 for in-home-care.

As I listened to Secretary Wolf detail for the Senate Health and Welfare Committee what she planned to do if the Governor's budget allowence was passed, I heard such things as three pilot programs, a sliding fee scale, and what I find most satisfactory, a call for matching funds for each pilot site.

Homemaking services are needed most and after that personal care. Secretary Wolf plans to start these services first. Kansans deserve a dignified old age. We need to offer them an alterative to institutionalization. If you were to ask almost any elderly person how they wanted to live at the end of their lives. they would no doubt say, "I want to stay in my home". My mother is 98. My sister and I have provided care for her in her own apartment. After six years whe has spent about \$10,000 of her savings. That, with her Social Security, has given her day and night help. She is using her money faster now, but now she is failing and needs more help.

With the increase in the number of elderly we have to face this problem. Kansas particularly needs to face up to the facts. rank 7the among the states in the percentage of 85+ population that is institutionalized but we rank 46th for state funded programs for the elderly and 41st for all kinds of programs for the elderly (KDDA statistics). We can't get much lower than that, yet funding for state programs for the elderly is often cut.

It is time that we faced reality. We either take care of our a nursing home or whether they will stay in their \mathcal{M}^{2} own homes. If they stay in their homes, they need some help to do 3.21^{-1}

that and it probably will cost the state less to keep them in their homes than to pay for institutionalization.

At any rate, we need to try out the system and find what are the advantages and the disadvantages of the program for in-home-care.

I ask for your vote for SB 60.

Ila major

#10

#10 pg3 3-21-9 1:30 TESTIMONY ON SB 60, THE KANSAS SENIOR CARE ACT
BY
LEGISLATIVE COMMITTEE, JAYHAWK AREA AGENCY ON AGING,
TRI-COUNTY ADVISORY COUNCIL.

Mr. Chairman and members of the Committee, my name is William E. Richards, Sr., Chairman, Legislative Committee, Jayhawk Area Agency on Aging(JAAA), Tri-County Advisory Council, and member of the JAAA Board of Directors. I am, also, the former Acting Secretary of the Kansas Department on Aging, and initiated that Department's organization in 1977.

The avoidance of the stigma of Welfare and the pride of selfreliance are important to the independence and dignity of Older Kansans who have disabilities, but, who want to remain in
their own homes and communities, and who can afford to share
in the cost of homemaker and personal care services. Currently,
the options of this target group are restricted by the income
and resource eligibility standards mandated by the Home and Community Based Services provided under Medicaid and other SRS programs, and the prohibition against the pricing of services provided through the Older Americans Act(which, over time, can become excessively expensive for recipients).

The provision of State funding will allow the Department of Aging to establish a program of in-home services(a long-term care system) devoid of Federal funding restrictions that hamstring development of these much needed programs for Older Kansans. SB 60 is a step in the right direction!

Your favorable consideration and approval for passage of SB60, by the Mansas House of Representatives, is strongly recommended.

Delivered to: Public Health and Welfare Committee, Kansas House of Representatives, Tuesday, March 21, 1989.

PHW #11 attm #11 3-21-9 1:30 pm



March 21, 1989 House Public Health and Welfare Committee Hearing on SB60

My name is Annice White and I am Director of the Johnson County Area Agency on Aging, Public Service Area (PSA) #11. I appreciate the opportunity to speak to this committee today. However, I would like to speak to you today, not as the Area Agency Director, but as a long distance caregiver.

I have the sole responsibility of my ailing, elderly mother who lives in Fort Worth, Texas. Yesterday, she was admitted to the hospital. I will be leaving tomorrow morning to try to set up services and to assure that her needs will be met.

In today's world, this is not unusual. Our agency in Johnson County receives many calls from adult children seeking services for their elderly parents/loved ones who live in our county. I may be fortunate in that there may be long term care community based services available in my mother's area. If this is not the case, the long frustrating process begins with many calls and contacts to the Area Agency on Aging, home health agencies, county departments, state offices, etc. The determination of choices will be limited to my mother's income level, my income level or a combination of both.

I have learned that currently the aging network in Texas is requesting \$14 million to provide in-home services to the elderly. As a caregiver, I am pleased that they are looking at the needs of their elderly which will be of tremendous benefit to my mother and my family.

In Kansas, the time has come to begin a statewide program for our aging parents and relatives. I share the concerns of not only those in Kansas who have similar experiences, but also of those who like myself are long distance caregivers. I therefore, would ask for your support of SB60, the Kansas Senior Care Act.

Thank you for giving me the opportunity to speak to you today and appreciate your time and consideration.

21-89 1:30



FOR FURTHER INFORMATION CONTACT:

TERRI ROBERTS, J.D., R.N.
EXECUTIVE DIRECTOR
KANSAS STATE NURSES' ASSOCIATION
820 QUINCY, SUITE 520
TOPEKA, KANSAS 66612
(913) 233-8638
March 21, 1989

S.B. 60 SENIOR CARE ACT

Representative Littlejohn and members of the House Public Health and Welfare Committee, my name is Carolyn Middendorf, R.N., M.N., and I am presently an assistant professor at Washburn University School of Nursing. I have been in the field of nursing for fifteen years and am currently the Legislative Chairperson for the Kansas State Nurses' Association.

The Kansas State Nurses' Association supports Senate Bill 60 and its implementation. The bill is broadly constructed to enable the Secretary of the Kansas Department on Aging flexibility to structure the program. The Governors' budget allocation for Senate Bill 60 is \$250,000, and if Senate Bill 60 is passed, we believe that additional state monies must be appropriated to adequately fund this very important piece of legislation. We recognize this plan calls for local matching funds, also. There are currently numerous projects in place that need to be expanded under this act, and more money is needed for services. We would also support, because there is adequate evidence to suggest, a need for case management, in addition to the in-home services that will need expanding. These will all provide greater opportunities to keep older adults in their homes longer.

Additionally, Senate Bill 60 calls for a report to the 1990 Legislature regarding the implementation of the Senior Care Act. Evaluation is essential to determine if the objectives and intent of the legislation has been met. Again, we would encourage this committees support of that provision and appropriate funding for a reflective and useful analysis/evaluation of this initiative back to the 1990 Legislature.

We, too, will be monitoring the implementation and supporting the Department in this effort as we view it as a very positive step in addressing long term care needs for older Kansans.

Thank you for an opportunity to speak in support of Senate Bill 60, KSNA has been working with the Task Force on Long Term Care over the past nine months to generate support for such activity within the State.

PH+W 13 attnut-9 1:30 pm