Our Mission

We are committed to developing, financing, and compassionately administering programs, in a fiscally responsible way, to provide older Hoosiers and their families with a system of long term care services and supports that enables them to have informed choice and opportunity to live as safely and independently as possible within their communities and families.
Challenge of the Baby Boomer Generation

- Boomers born 1946 to 1964 are now age 46 to 68
- By 2030, Americans 65+ will number 71.5 million twice their number in 2000
- At that point 1 in every five Americans will be an older adult
- Fastest growing segment of the population is the 85+ group
The Aging Network

U.S. Department of Health and Human Services

Administration on Aging
  Central Office and Regional Offices

State Units on Aging (56)

Area Agencies on Aging (629)

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Local Service Provider Organizations (30,000)

Tribal Organizations (244)

CONSUMERS

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Role of Indiana’s Area Agencies on Aging (AAAs)

- There are 16 AAAs
- All 16 are certified as Aging and Disability Resource Centers (ADRCs)
- The ADRCs are the entry point for our HCBS programs
- AAAs administer Title III, SSBG, and CHOICE dollars contracted out by the Division of Aging
Role of Indiana’s Area Agencies on Aging (AAAs)

- The AAA network served nearly 90,000 older adults with direct HCBS in federal fiscal year 2013
- More unidentified individuals served – more than 300,000 in total
Role of Indiana’s Area Agencies on Aging (AAAs)

- The network provided more than 2.4 million congregate and home delivered meals
- More $60 million in service expenditures for older adults (excluding waiver dollars) including more than $4 million in client contributions
HCBS Services

- Attendant/home health aide
- Homemaker
- Personal emergency response systems
- Medication setup
- Home modifications

- Skilled nursing
- Respite
- Home delivered meals
- Medication dispensers
- Assistive devices (common one is lift chairs)
More HCBS Services

- Transportation
- Legal assistance
- Outreach
- Information and assistance
- Health and wellness programs
- Congregate meals
- Structured family care
- Vehicle modifications
- Pest control
- Caregiver support services
Community Based Alternatives

- Other community based alternatives
  - Adult day services
  - Adult family care
  - Assisted living
Possible Funding Sources

- Private pay
- Insurance (long term care insurance)
- Medicare
- County nurses
- Medicaid
- Medicaid Waiver
- CHOICE
- SSBG
- Title III
- Older Hoosier
- Family Caregiver
Division of Aging Administered Funding Sources

- Older Americans Act – Title III
- CHOICE began in 1992
- Waivers were begun in 1981
  - Aged and Disabled waiver
  - Traumatic Brain Injury waiver
- SSBG – Social Services Block Grant
- Other grants
Older Americans Act

- Authorized in 1965
- Reauthorized most recently in 2006
- Represented the beginning of “civil rights” for seniors
Prior to 1965

- No Medicare
- No Medicaid
- More than 30% of those age 60+ were living at or below the poverty level
- Essentially no nursing homes
- You could be fired from a job for simply reaching a certain age: 40, 50, 60
- No pension protection
Older Americans Act

- In the 41 years since
  - Medicare
  - Medicaid
  - Once Medicaid was available to pay for care, nursing homes popped up all over the place
  - Now about 12% of those age 60+ are living at or below the poverty level
  - Social Security has seen significant increases with regular cost of living increases
What is a Waiver?

- State gets approval to allow people to “waive” their right to enter a nursing facility in favor of home and community based services.
- Center for Medicare and Medicaid (CMS) give this approval.
- Federal funds plus state matching dollars (about a 70%/30% split, federal to state).
What is a Waiver?

- Must be Medicaid eligible
- Must meet nursing facility level of care
- Currently there is no waiting list for the Aged and Disabled Waiver
- In fiscal year 2014, we served over 15,000 people on this waiver.
- The TBI waiver is limited to serving 200 people annually.
CHOICE

- Entirely state funded
- Does not require nursing facility level of care
- Does not require Medicaid eligibility
- Services similar to waiver
- No assisted living
- No adult family care
- No structured family care
Currently a pilot program has been approved by the legislature to begin January 2015

- No additional funding
- Reduce eligibility criteria
- Increased flexibility in services
- New cost sharing structure
- Increased focus on case management/options counseling
- Needs based assessments