



COMMUNITY CARE SERVICES PROGRAM 2009 - 2010 ANNUAL REPORT



The mission of the Area Agency on Aging is to promote dignity, safety, independence and accessibility for seniors and individuals with disabilities.

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TESTIMONIALS



Forever Angels Adult Day Care



Ethel Richard

*“Over four million people in the U.S. have Alzheimer's disease. Caring for someone who has Alzheimer's disease can be overwhelming, exhausting and stressful. People with Alzheimer's change and so do their needs. They often require care beyond what you can provide on your own. Wanting to take care of my mother and working full time looked like a no win situation for me. **"Forever Angels" Adult Day Care Services (706 554-9379) located at 831 Academy Avenue in Waynesboro (Burke County)** is a God send to my family. There is a friendly, homelike environment with many activities planned for each day. The staff is so professional and caring! (They have a nurse on duty every day) My mother is very happy every day that she goes. It has given us such peace of mind knowing that she is safely and lovingly cared for as I work. Waynesboro is very blessed to have "Forever Angels" in our town. I encourage anyone who needs this service to take advantage of this great community asset.” – Cindy Cope, Caregiver for Ethel Richard*

AutumnCare Adult Day Care, Inc.

3654 Dewey Gray Circle Augusta, GA 30909

706-863-9888



"The program has been very beneficial for both myself and my mother. As a mother of four and an Army wife my schedule is very busy. The program allows for me to be able to do the daily activities that are needed to maintain a safe healthy home environment for my mother and children by reducing the stress on me. My mother enjoys being at the center where she is given the opportunity to socialize with others and participate in the many activities all in a safe environment. I am not having to take her with me and making her day stressful with getting in and out of the car as I run my errands. She is not left at home where there would be no one to assist her. Without the program, life would be so much more difficult." – Kishara Vasquez Caregiver for Addie Williams, 70 years old, Columbia County

PROVISIONS OF COMMUNITY CARE SERVICES ACT

This Annual Report reflects State Fiscal Year 2009 activities completed by the CSRA Regional Commission Area Agency on Aging for Planning and Service Area Eight and other agencies. It is prepared in accordance with provisions set by the Community Care and Services for the Elderly Act for the following:

- **CSRA ELECTED OFFICIALS**
- **DEPARTMENT OF HUMAN SERVICES COMMISIONER**
- **DEPARTMENT OF COMMUNITY HEALTH COMMISIONER**
- **DEPARTMENT OF HUMAN SERVICES DIVISION OF AGING SERVICES DIRECTOR AND COMMUNITY CARE PROGRAM STAFF**
- **SERVICE PROVIDERS**
- **ADVOCATES FOR OLDER ADULTS, CAREGIVERS AND PERSONS WITH DISABILITIES**

The General Assembly, in enacting the Community Care and Services for the Elderly Act, indicated its intent (O.C.G.A. §49-6-60 [et seq. 49-6-64]) as follows:

- To assist functionally impaired elderly persons in living dignified and reasonably independent lives in their homes or with their families or caregivers through the development, expansion and coordination of various community-based services;
- To establish a continuum of care for such elderly persons age 60 and older in the least restrictive environment suitable to their needs;
- To maximize use of existing community social and health services to prevent unnecessary placement of individuals in long-term care facilities; and,
- To develop innovative approaches to program management, staff training, and service delivery that result in cost avoidance, cost effectiveness and program efficiency.

“100 Years and Still Smiling.” Female (Augusta) PSS, ERS

“She has been my client for three years. She has had the same aide for 12 years. She has a daughter who is 20 years younger than she is. She is my client, and she will be 100 years old in July. There will be a party at the high rise to celebrate her birthday. As a case manager, I celebrate her life, and smile. What could be more fun than a care plan review visit with a 100 year old client, and her 80 year old daughter, who is her primary caregiver? I asked my client “what is the button for that you wear around your neck?” Her delightful response was “you think I am stupid or something! I push the button if I fall or if I need help.” 100 years and still active

The aide walks with my client every day in the high rise hallways, and outside on moderate days. 100 years and still exercising

My client has problems with swallowing, so she has been eating number two baby food for five years. When she joins the lunch group, she just eats the ice cream. 100 years and still enjoying an ice cream social every day

The neighbors watch over her, and she enjoys visiting. 100 years and still belonging to a community

The 80 year old daughter enjoys her mother’s independence, and reports that the doctor said “don’t change anything, don’t change the services, keep her at home”. 100 years and still living at home

The apartment is filled with heirloom furniture. The high rise staff has utilized the pictures of the apartment for marketing. The entire picture, the woman of 100 years, the heirloom furniture, the 80 year old caregiver, the in home services, all paint a picture for marketing the success of the Community Care Services Program. 100 years and still smiling” – An Anonymous CCSP Care Coordinator

COMMUNITY CARE SERVICES PROGRAM

Success: The Community Care Services Program Makes a Difference

The Community Care Services Program (CCSP) continues to be less costly than nursing home care in Georgia.

- **A long-term service resource option** to eligible individuals and their families/caregivers, the CCSP is a resource and not a substitution of individual and family responsibility.
- **The CCSP supports personal choice and responsibility and promotes consumer independence.**
- **Comprehensive care coordination** may involve multiple stakeholders: the consumer, family members, care coordinator, Department of Family and Children Services, physician, transportation, and service provider(s). In order to provide improved client outcomes in service delivery and quality of life, care coordinators collaborate with consumers and access other community resources to develop each consumer care plan.
- **This programmatic cooperation is efficient and results in ongoing taxpayer cost savings.**



“I have literally lived around the globe through out my life, and what I receive from CCSP in the CSRA is the best care in the world.” – Ruth Pearson 95 years old with daughter Anne Washburn, Richmond County, receiving PSS – ResCare HomeCare, Inc., ERS – Life Alarm Service, Inc., and HDMs

INTRODUCTION

CSRA AREA AGENCY ON AGING Your Aging and Disability Resource Connection (ADRC)

Who We Are: The CSRA Area Agency on Aging serves as an action center for aging and disability issues in east central Georgia by identifying community priorities, allocating and developing resources, building public-private partnerships, connecting CSRA residents to aging solutions that fit their lives.

By the year 2030, approximately 70 million adults over the age of 60 will reside in the USA—more than twice the number in 1990. Currently, Georgia ranks 15th among all states in the number of 60+ residents; and, within the 14 counties of east central Georgia, over 14% of the population is 60 or older.

The Area Agency on Aging (AAA), a division of the CSRA Regional Commission, is working aggressively to meet the needs of older adults in the CSRA with a blend of technically enhanced regional strategy development and old-fashioned community organizing.

The mission of the Agency is to promote dignity, safety, independence and accessibility for seniors and individuals with disabilities. The Agency is responsible for the local administration of the Community Care Services Program (CCSP) which has successfully completed its 27th year of operation. CCSP provides a wide range of community-based services designed to delay or prevent more costly nursing home placement. These services include telephone screenings, in-home assessments, care coordination by an RN or a social worker, home health services, adult day care, alternative living services, out-of-home respite care, personal support services, home delivered meals, emergency response systems, disease management, and caregiver support. Consumer-directed care was recently added to the array of services offered through CCSP.

The CSRA Lead Agency has served as an Aging and Disability Resource Center (ADRC) since 2004. The ADRC initiative was designed to streamline access to long-term care for older adults and individuals with disabilities. We are the single point of entry for individuals with long-term care needs regardless of their age or disability.

Fiscal Year 2009 marked the end of another exciting and productive year for the Lead Agency. You are encouraged to review the material contained in this report to find out how the Gateway/ ADRC might better serve your community. The Gateway/ADRC provides a variety of services and support to improve the lives of senior and disabled citizens in all 14 counties of the CSRA.

Recognizing the importance of networking with community organizations to maximize resources, the Lead Agency's primary goal for SFY 09 was to increase public awareness and access to aging and disability resources. There was a decline in the CCSP Waiting list in SFY 08. Efforts were implemented to raise awareness through radio broadcasts, newspaper ads, increased presentations, and direct mailings. As a result of our marketing efforts, Gateway referrals increased by 11% over SFY 08 and 28% more consumers were screened for CCSP. The number of consumers choosing not to participate in the program increased nearly 50% over SFY 08. The primary reasons cited were the inability to cost share and estate recovery. Due to the inability to admit new clients throughout the year, the program experienced a decline in overall participation by nearly 20% over SFY 08.

The CCSP program continued its' quality improvement efforts around maintaining or expanding length of stay, reducing nursing home admissions, promoting flu vaccinations, and reducing serious injuries resulting from falls.

CCSP continues to prove to be a cost-effective alternative to nursing home placement, saving \$17,000 per year in Medicaid expenditures for each consumer receiving community-based services. CCSP provides community-based services to Medicaid eligible consumers with a desire to remain in their home or community as opposed to entering a nursing facility. Consumers must meet the same medical, functional, and financial criteria as required for placement in a nursing facility. A physician certifies that the consumer's needs may be met by the CCSP and available community resources. The Gateway/ADRC manages the intake/screening process, waiting list, and care coordination for the CCSP and Non-Medicaid Home and Community-Based Services (HCBS) programs. Services are coordinated between Medicaid and non-Medicaid programs to avoid duplication. To help older and disabled consumers find resources, staff has access to an extensive database of nearly 24,000 aging and disability resources. Those looking for resources should contact the Gateway/ADRC at (706) 210-2000 or 888-922-4464.

"I'd rather do anything than be at the nursing home. I didn't like it when I was there, and hope to GOD, I never have to go back. I don't wish that for anybody." – Female 73 years old, Warren County, receiving ERS, HDM, PSS

STATISTICAL HIGHLIGHTS - SFY 2009

- The CCSP served 988 consumers;
- Each CSRA consumer served by the CCSP instead of a nursing facility saved Georgia \$17,048, a Medicaid dollar savings of over \$16 million;
- The Medicaid expenditure to support a consumer in the CCSP averaged 29% of the Medicaid cost to maintain a person in a nursing facility;
- Sixty-five percent of CCSP consumers paid a portion of the cost for their service(s);
- Eighty percent of CCSP served were age 60 or older;
 - 11 consumers were 100 years of age or older (1%)
 - 145 were age 90 or older (15%)
 - 201 were under age 60 (21%)

The average age was 72 years old

74% were female

63% were non-white

26% lives alone

25% completed 8th grade or less

60% had finances at or below poverty

- Personal Support Services was utilized by 70% of consumers. It was the most frequently used CCSP service, followed by Emergency Response and Home-Delivered Meals. Adult Day Health and Consumer-Directed Personal Support Services (Same as personal support services except the consumer hires and supervises worker of choice) were the least used services.
- The average community length of stay for enrolled CCSP consumers was 55 months, nearly two months longer than SFY 08 and 6 months longer than the State's average of 49 months.

“I would not be able to fulfill my mother’s wish to be able to stay at home and die at home, rather than in a nursing home. I want the best care for mom, and I feel blessed to have this program.” – Caregiver 67 years old for a bedridden female 93 years old, Hancock County, receiving PSSX

CCSP ACCOMPLISHMENTS IN SFY 2009

Quality Initiatives – Partnerships and Activities:

- ***A Comprehensive Approach!***

CCSP care coordinators, AAA staff, and other aging network partners participated in the Money Follows the Person (MFP) Initiative, a 5-year demonstration project funded by CMS. It shifted Medicaid long-term spending from institutional care to home-and community-based services through programs such as CCSP, SOURCE, ICWP and MR/DD. At least 29 consumers were transitioned from the nursing home back to the community. Due to state budget cuts, the CCSP no longer participates in the grant. However, MFP served as a stimulus for the creation of a work team which included staff representing agencies such as SOURCE, adult protected services, and service providers. The work team enhanced our working relationship by fostering communication and collaboration. The team focused on the practical solutions to challenges facing consumers who wanted to leave the nursing home.

- ***Disease Management through Prevention and Education***

CCSP care coordinators continue to provide individualized education to diabetic consumers and those at risk for diabetes regarding disease management and prevention. Length of stay and nursing home disposition rates are just two of the quality indicators used by the CSRA to measure case management efficiency. The CSRA is proud to report that Length of Stay in the program increased by 2 months over last year. We believe improved disease management and increased collaboration with consumer's healthcare team has significantly impacted our results.

Additionally, when appropriate, care coordinators are educating Medicaid recipients on the availability of assistance to manage chronic diseases through entities such as United Healthcare and APS Healthcare. AAA's dietitian who is also a certified diabetic educator assists in disease management efforts by providing nutrition education to CCSP providers upon request.

- ***Getting the Word Out!***

One of the challenges of caregivers is not having the knowledge about available resources such as the CCSP and other programs that can provide assistance to older adults. AAA's Caregiver Specialist works directly with caregivers of CCSP and non-Medicaid consumers to help identify resources to ease the burden of caregiving. Additionally, the CCSP care coordinators and AAA staff participated in the TCARE project aimed at reducing caregiver burden and stress.

- ***Increasing Access***

To raise awareness about aging and disability resources, media coverage was increased through articles published in the *Senior News Courier* and *Generations Magazine*. AAA also partnered with a local radio station, WKZK to conduct a weekly broadcast, called the “*Talking It Up Show*” which focused on senior needs and resources. As a result of increased publicity, Gateway referrals increased by 11% over SFY 08.

- ***Increase Participation in CCSP Network Meetings!***

The CSRA continues its success into SFY 09 with CCSP Network Meeting participation at approximately 80-100 individuals at each meeting. The AAA Lead Agency contributes the success to providing a variety of topics and issuing certificates along with one continuing education hour for participation.



- ***Increasing Safety!***

Care coordinators have participated in numerous training relating to reducing falls. Our goal is to reduce serious injuries as a result of falls by 20%. SFY 09 served as our baseline year.

- ***CCSP Consumer Satisfaction Surveys***

The AAA Lead Agency completes annual satisfaction surveys on CCSP and non-Medicaid services and providers. The SFY 09 surveys focused on personal care, home-delivered meals, and provider satisfaction. Performance slightly improved in personal support services, decreased slightly in the meals program, and maintained with CCSP providers. The primary problem was aides not staying the full allotted time as ordered on the care plan. AAA staff facilitated a discussion of the survey results at the March, 2009 network meeting. Suggestions for improvements were discussed.

Consumer Satisfaction Survey Anonymous Comments

1. *“It is a satisfying feeling for me and my family, as I live alone.”*
2. *“The lifeline button is the best thing an older person can have.”*
3. *“The aide is always on time and she does a good job. I really am pleased.”*
4. *“I recently had a scheduling problem and my coordinator, with the help of her supervisor, solved and corrected it within 48 hours.”*

PROGRAM STRUCTURE AND ADMINISTRATION

Consumers receive CCSP services through the cooperation and partnership of the following state and local agencies and private businesses:

The Division of Aging Services (DAS) of the Department of Human Services has the primary responsibility for development and administration of the CCSP. Coordination of the various entities working together to deliver quality consumer focused and cost effective services to consumers is the priority of the CCSP.

The Division of Medical Assistance (DMA) of the Department of Community Health reimburses service providers and monitors services for appropriateness.

The Division of Family and Children Services (DFCS) in the Department of Human Services determines consumer Medicaid eligibility and cost share for services.

The Division of Department of Behavioral Health and Developmental Disabilities (DBHDD) of the Department of Human Services provides consumer psychological and psychiatric evaluations and therapeutic services.

Area Agencies on Aging (AAA) contract with the Department of Human Services' Division of Aging Services to serve as Lead Agencies or regional managers of the CCSP. The twelve AAAs serve as the local "Gateway to Community Resources" for consumers and their families, service providers, and potential service providers. The AAA manages service benefit allocations, assuring the CCSP does not exceed budget limitations.

Care coordinators work with consumer physicians, assess consumers for CCSP eligibility, and develop a comprehensive individualized plan of care, link consumers to service providers and families and consumers to other community-based services, and monitor quality consumer care. Care coordinators assure reliable, cost effective, consumer-focused service delivery, avoiding duplication and over utilization of services.

Providers enrolled in the CCSP deliver services ordered by the consumer's care coordinator and physician. The Division of Aging Services recommends service provider applicants for enrollment in the CCSP.

PROGRAM SAVINGS AND COSTS

EXPENDITURES

CCSP PROGRAM EXPENDITURES SFY 2006 – SFY 2009				
CATEGORY	SFY 2006	SFY 2007	SFY 2008	SFY 2009
Consumer Services Benefits	\$8,301,395	\$7,726,900	\$9,559,174	\$7,631,728
Care Coordination Services	\$1,411,810	\$1,478,274	\$1,135,953	\$1,866,355
AAA Administration	\$513,815	\$546,314	\$641,320	\$585,583
TOTAL	\$10,227,020	\$9,751,492	\$11,336,447	\$10,083,647

*Does not include Division of Aging administration costs

Figure 1 – In SFY 2009 the CCSP reimbursed provider agencies over \$7 million for consumer services provided, yet AAA administrative costs were only 5.8% of the total expenditure for the CCSP.

OTHER SERVICES

CARE COORDINATION COST – SFY 2009		
DOLLARS EXPENDED	CONSUMERS SERVED	AVG. COST PER CONSUMER
\$1,866,335	988	\$1,889

Figure 2 – Comprehensive care coordination is the foundation of providing consumer-centered care to CCSP consumers. Care coordination assures that enrolled consumers receive cost-effective, appropriate, and coordinated services.

MEDICAID SAVINGS

In SFY 2009, the average annual benefits cost to the CCSP for a consumer's services was \$9,184.* If the consumers had received Medicaid reimbursed care in a nursing facility, the average annual cost to taxpayers would have been \$26,232 per consumer. The CCSP provided a region wide taxpayer savings of over \$16 million.

ANNUAL SAVINGS PER CONSUMER SERVED IN CCSP INSTEAD OF IN A NURSING FACILITY				
SFY 2006	SFY 2007	SFY 2008	SFY 2009	Average Savings 2006-2009
\$19,104	\$12,706	\$16,128	\$17,048	\$16,247

*Does not include care coordination or administration costs

Figure 3 The above chart illustrates the cost effectiveness of CCSP.

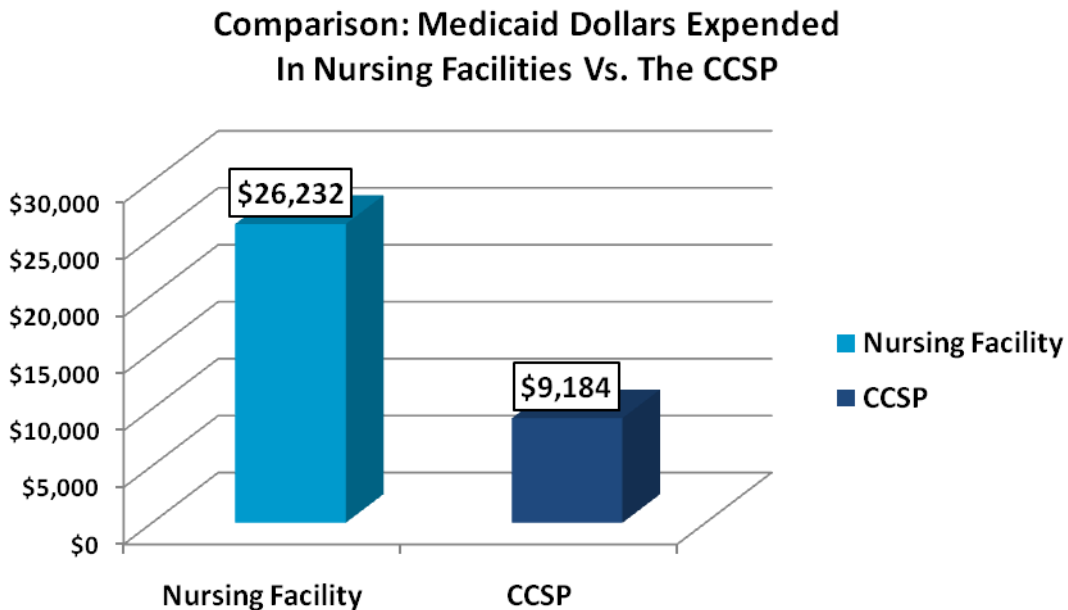


Figure 4 For SFY 2009, CCSP Medicaid per-consumer expenditure has averaged 35% of nursing facility Medicaid expenditure. *Source: DCH-DSS Analysis Unit, 10/09/2009-Medstat DataProbe.*

CONSUMER ASSESSMENTS AND WAITING LIST

ASSESSMENTS

Community Care Services Program (CCSP) consumers must meet the same medical, functional, and financial criteria as consumers receiving nursing home care under Medicaid.

Area Agencies on Aging staff conduct telephone interviews to screen consumers for potential service eligibility.

- Consumers are prioritized for assessment based on the results of the telephone screening. Consumers with high impairment levels and unmet needs are the first to enter services.
- A face-to-face assessment determines the consumer's need for services.
- Care coordinators determine consumer medical and functional eligibility.
- Eligibility - Staff at the Division of Family and Children Services determine consumer financial eligibility for Medicaid.

The CCSP care coordinators visit consumers at least every four months or more frequently as needed to assure they remain eligible for services and services are addressing the consumer's needs.

ASSESSMENTS COMPLETED – SFY 2009	
Initial telephone screening conducted by AAA Lead Agency staff	638
Average number on monthly waiting list	4
Initial face-to-face assessments completed	412

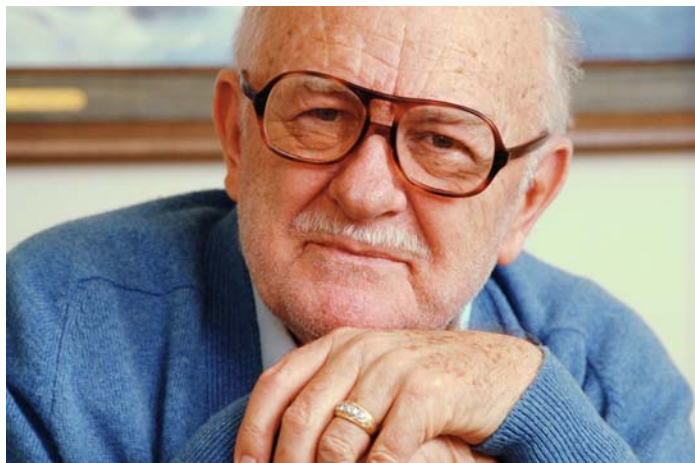
Figure 5 – State budget cuts contributed to the growth in a significant waiting list for CCSP services. More than 163 clients was waiting for services by June 30th, compared to the end of SFY 08 in which only 17 consumers were on the wait list.

GEORGIA'S CCSP WAITING LIST

By 2030, there will be over 71 million older persons in the United States, more than twice the number in 2000. People 65 and older represented 12.4% of the population in the year 2000, and will represent 19.7% by the year 2030². “The elderly population in Georgia will increase by 143% between 2000 and 2030 versus a total population increase in Georgia of 46.8%.”²

CSRA WAITING LIST SFY 2006-2009	
SFY	AVG. COUNT ON CONSUMER WAIT LISTS
2006	182
2007	95
2008	15
2009	163

Figure 6 – The number of consumers on the CCSP Waiting List increased substantially due to budget cuts which prevented admissions to occur throughout the year.



Georgia had the tenth fastest growing elderly population (ages 60+) in the United States during 1990-2000. Over the 20th century (1900-1999), the number of Georgians ages 60 and above increased ten-fold, compared to a four-fold growth in the population overall.

² U.S. Bureau of the Census, “US Interim State for Five-Year Age Groups and Selected Age Groups by Sex: July 1, 2004 to 2030” <http://www.census.gov/population/projections/DownldFile2.XLS>

³ Georgia’s Aging Population: What to Expect and How to Cope? Dr. Glen Landers et al, Fall 2005

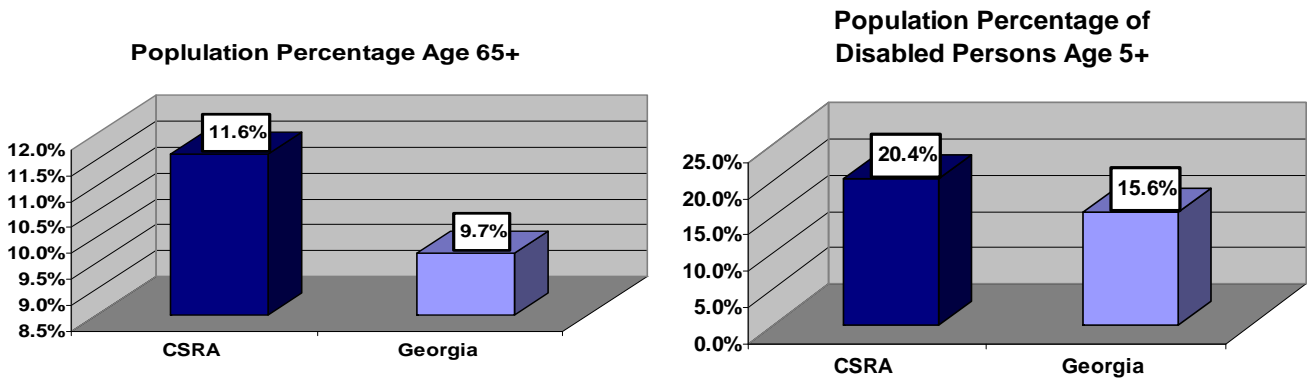


Figure 7 – These graphs show the population percentage of persons 65 or older (figures based from 2006) and the population percentage of disabled persons five or older (figures based from 2000). Information gathered from www.quickfacts.com.

PROJECTION OF POTENTIAL CCSP CONSUMERS			
Year	2015	2020	2025
Estimated Number of Potential CCSP Consumers	54,007	65,337	80,003

Figure 8 – The above projections calculate the number of consumers who may need CCSP services over the next 20 years. Projections are based on U.S. 2000 Bureau of the Census population statistics: older Georgians served by Medicaid who has chronic conditions, no spouse, who is not in nursing facilities, or, who are eligible for services provided by the Division of Mental Health, Developmental Disabilities and Addictive Diseases.

SUMMARY

Growth projections for Georgia seniors with chronic conditions clearly suggest that there will continue to be a substantial demand for home and community based services as well as the probability of a significant impact on future Medicaid expenditures.

“I’m 92 and Merritt is 94. We appreciate any help we can get, and the aides know what to do when they get here. I can fix a little something but the meals help when I don’t feel like moving.” – Female 92 years old, Richmond County, receiving HDM, PSS, PSSX

CONSUMER DEMOGRAPHICS

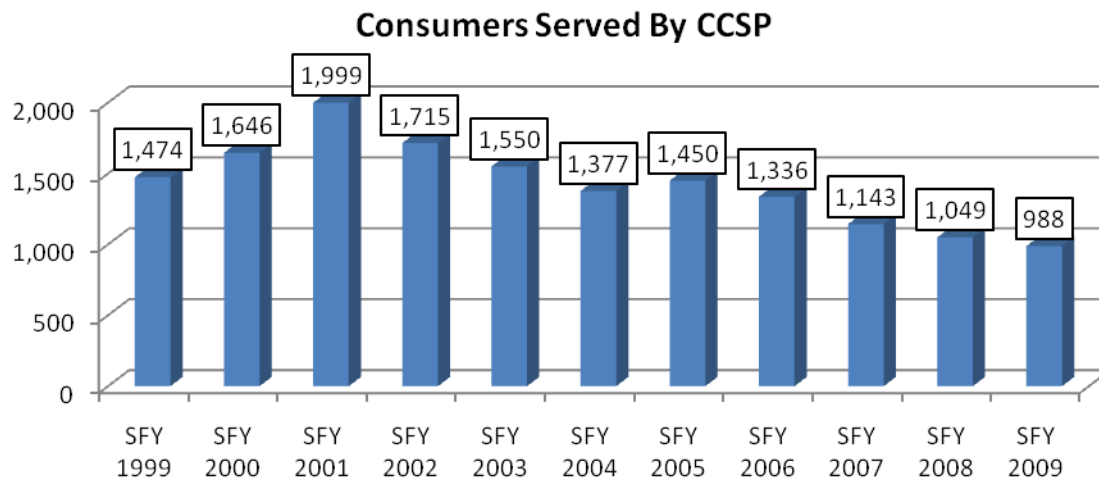


Figure 9 – The above illustrates nearly a 50% decline in consumers served over ten years ago. The decline in enrollment was impacted by Estate Recovery, and the availability of three local SOURCE programs which allowed immediate admission with no wait time.



“With additional issues that have arisen in our lives as caregivers over the past couple of years, the services our mother receives through CCSP has done a great deal to relieve stress in our lives, knowing while we can’t be there, she is taken care of.” – Luther Jordan and Janice Millhouse, caregivers of Louise Jordan 85 years old, Richmond County, receiving ERS – Lifeline Systems, HDM, PSS – ResCare HomeCare, Inc.

PROFILE OF CCSP CONSUMERS – SFY 2009	
Unduplicated consumer count	988
Consumers 100 years of age or older	1%
Consumers 90 years of age or older	15%
Consumers 80 years of age or older	26%
Consumers 70 years of age or older	22%
Consumers 60 years of age or older	79%
Consumers under 60 years of age	21%
Average age of consumers	72
Percentage of consumers who are female	74%
Percentage of consumers who are minorities (non-white)	63%

Figure 10 – In SFY 2009, the CCSP served 988 consumers. Seventy-four percent were female. Twenty-two percent were over the age of 70, and 26% of consumers were 80 or older. Twenty-one percent of consumers served were younger than age 60. The number of consumers 100 years or older was 11.

**AVERAGE LENGTH OF STAY
& DISPOSITION OF CONSUMER DISCHARGES - SFY 2009**

Average Consumer Length of Stay	55 months
Disposition of Discharged Consumers:	
- Death	37%
- Nursing facility placement	32%
- Hospice/ Other Waiver Programs/ Ineligible/ Moved From Service Area/ No Service in 60 Days/ Requested Termination/ Other/ refused service/no longer eligible	31%

Figure 11 – The above chart shows the average time a person remains in the CCSP. The CSRA is proud of our efforts to improve the case management of CCSP consumers. The average time a consumer stays on the CCSP increased by 6 months over the State’s average of 49 months. The primary reason for discharge was death followed by nursing home placement. Our performance goal was to have no more than 35% of consumers enter a nursing home. Although our discharge rate to nursing home increased by 15%, the performance goal was met. Terminations from the program exceeded admissions by 15%. Two hundred and sixteen consumers were referred to CCSP but not enrolled. The primary reasons consumers were not able to enroll are because they had not received a formal disability determination (23%) followed by not choosing to cost share.

CONSUMERS BY PAYMENT SOURCE - SFY 2009

Consumers receiving SSI Medicaid	34%
Consumers receiving Medical Assistance Only (MAO) potentially Medicaid	64%
Consumers whose Cost Share covered all service costs	<1%

Figure 12 – Thirty-four percent of CCSP consumer care is fully paid by Medicaid, because the consumer’s income is less than the federal Supplemental Security Income (SSI) level. Sixty-four percent of consumers receive partial Medicaid payment for their services. According to their income levels Medical Assistance Only (MAO) consumers pay a portion of the cost of their services known as Cost Share. Services for the remaining <1% are provided at no cost to Medicaid because the consumer pays the entire cost of the CCSP services.

CCSP SERVICES

UTILIZATION AND EXPENDITURES

CONSUMERS SERVED AND CCSP MEDICAID FUNDS EXPENDED BY SERVICE TYPE – SFY 2009				
CCSP SERVICE	CONSUMERS SERVED*	%TOTAL Consumers*	FUNDS EXPENDED	% TOTAL FUNDS**
Adult Day Health (ADH)	69	7.52%	\$672,567	7.08%
Alternative Living Services (ALS)				
- Family Model	98	10.68%	\$812,546	8.56%
- Group Model	130	14.16%	\$1,057,052	11.13%
Emergency Response Services (ERS)	450	49.02%	\$134,397	1.42%
Home Delivered Meals (HDM)	442	48.15%	\$821,072	8.65%
Personal Support Services (PSS, PSSX)	639	69.61%	\$5,875,112	61.87%
Skilled Nursing	26	2.83%	\$66,565	0.70%

* Duplicated consumer count. Consumers may receive more than one service.

** Percentages are rounded.

Figure 13 – The above outlines by CCSP service the number of consumers served and expenditures of CCSP Medicaid dollars.

“They keep me straight with my medicine and getting my bath. I can’t eat the meals but the girls cook for me every now and then. Everything’s alright.” – Male 74 years old, Screven County, Receiving SN, PSS, ERS

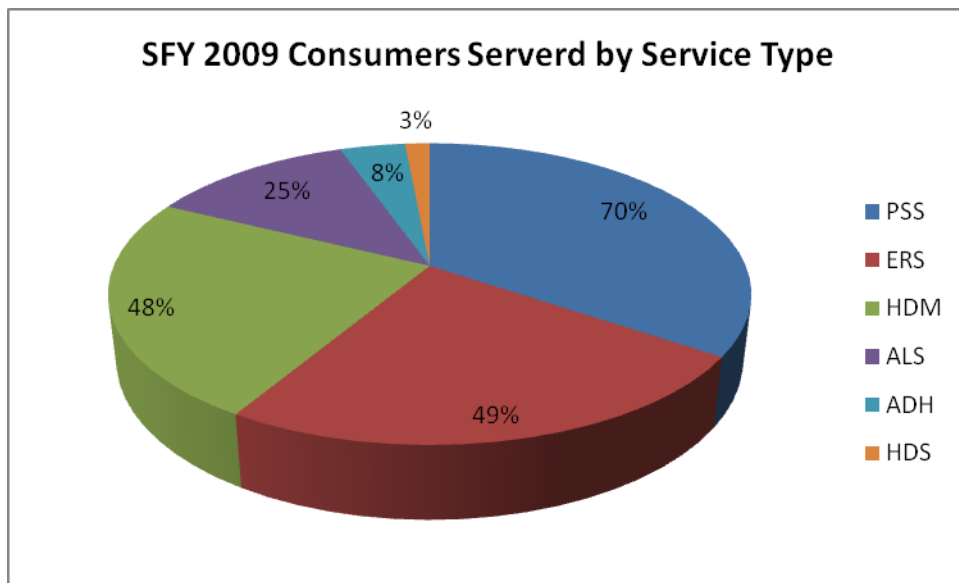


Figure 14 – This graph displays by service type the percentage of CCSP consumers who receive each service. Consumers may receive more than one service.

Personal Support Services increased by 1% over SFY 08 and it continues to be utilized by most consumers. Home Delivered Meals usage increased slightly.

*NOTE: Home Delivered Services includes consumers receiving Skilled Nursing Services.

SUMMARY

Seventy percent of CCSP consumers use Personal Support Services (PSS), the provision of personal assistance, stand-by assistance or supervision of consumers with inability to perform activities such as feeding, dressing, bathing, toileting, transferring or walking, or light housekeeping. It may also provide respite care to the caregiver.

Forty-nine percent of CCSP consumers use the cost-efficient Emergency Response Services (ERS).

“I use my button when I take my walk around the block. I have to rest from time to time, but I can call for help if I needed it. They respond fast when you call them. It’s like my American Express card. I don’t leave home without it.” – Male 77 years old, Burke County, receiving ERS

PROVIDERS OF SERVICE

PROVIDERS BY SERVICE TYPE* - SFY 2009	
Adult Day Health	7
Alternative Living Services – Family Model	5
Alternative Living Services – Group Model	29
Emergency Response Services	9
Home Delivered Meals	2
Home Delivered Services	7
Out-of-Home Respite Care Services	2
Personal Support Services	25

* Some providers provide more than one service.

Figure 15 – This chart reports the number of providers enrolled in each CCSP Medicaid service.

The Community Care Services Program manages, coordinates, and provides services to consumers by partnering with 86 public and private licensed CCSP enrolled businesses and agencies. The CCSP supports and grows small local businesses.



“I have been on the Community Care Services Program since 2003 and have enjoyed every moment of it. I can’t say one bad thing about it. I am completely satisfied. They are taking care of all my needs from the PSS aides to my case manager. My wife and I would not be able to manage without the services provide by the program.” – Stanley Polkosnik 81 years old, receiving ERS – Lifeline Systems, HDM, PSSX – ResCare HomeCare, Inc.

CCSP SERVICE DEFINITIONS

Care Coordination

The care coordinator screens and assesses the consumer's medical, functional and social problems/needs to determine the appropriateness for Community Care and, with input from the client, caregiver, and physician develops a specific plan of care for each consumer admitted to the CCSP.

The care coordinator brokers/monitors provider services for consumers by planning, arranging, coordinating, and evaluating the service delivery to assure that appropriate, quality services are provided in a timely and cost effective manner and assures that consumer costs are contained.

Adult Day Health (ADH)



ADH provides care in a community-based day program for consumers who are functionally or cognitively impaired. ADH provides consumers a variety of activities, health, therapeutic and social services in a group setting: nursing care, special therapeutic services, personal care services, planned therapeutic activities, dietary services, transportation, and social work services.

"I am thankful everyday for being able to come to The Homeplace in Millen. The people here are like my family and I love them all. Thank you CCSP for helping me find this place that I call home." – Willie Huntley, 49 years old, receiving ADH

Alternative Living Services (ALS)

ALS provides twenty-four hour supervision, medically-oriented personal care, periodic nursing supervision, and health-related support services in a residential setting other than the consumer's home. This service is provided in state licensed personal care homes.

“Nothing beats being at your own house. I can’t say nothing bad about this home. We eat good and they keep it clean. I’ll tell anybody to try it before they put their family in a home.” – Female 79 years old, Wilkes County, receiving ALS

Emergency Response System (ERS)

ERS provides an in-home electronic support system for two-way communication between isolated consumers and a communication control center twenty-four hours a day, seven days a week.

Home Delivered Meals (HDM)

HDM ensures improved nutrition to enhance consumer health and well-being. Consumers may receive home delivered meals only in conjunction with another CCSP service.

Home Delivered Services (HDS)

HDS Medicaid Home Health Services (HHS) provides traditional home health on an intermittent basis to consumers in their homes. Services include skilled nursing; physical, speech and occupational therapy; home health aide and medical social services.

Personal Support Services (PSS)

PSS provides a range of support services for CCSP consumers. Services include assistance with activities such as light housekeeping, running essential errands, and basic personal care needs including feeding, dressing, bathing, toileting, and transferring.

Extended Personal Support Services (PSSX)

PSS-X provides personal support services in a home setting that includes respite care for the full time caregiver over an extended period of time.

“How likely is it that both of your parents will be diagnosed with Alzheimer’s disease? I wouldn’t be able to care for them at home without the help. I’m appreciative for everyone although I may not say it enough.” – Caregiver for female 88 years old, Columbia County, receiving ADH, PSSX

Consumer-Directed Personal Support Services Option

Consumer-Directed Personal Support Services Option is the same as personal support services except the consumer hires and supervises worker of their choice. Clients enrolled in the option are required to choose a Financial Management Services provider that will issue paychecks and adhere to federal and state tax laws on behalf of the client.

HELP . . .

Is Only a Phone Call Away

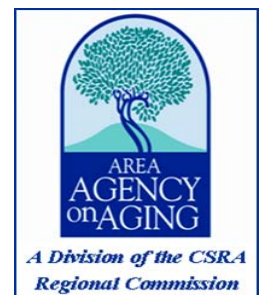


The Area Agency on Aging

A Division of the CSRA Regional Commission
3023 River Watch Parkway, Suite A-Augusta, GA 30907

(706) 210-2018 OR TOLL FREE (888) 922-4464

- Assistive Devices and Home Modifications
- Emergency Response Systems
- Relief for Family Caregivers
- Assistance with Bathing and Dressing
- Understanding Medicare
- Resolving Nursing Home Problems
- Assistance Getting Free and Low-Cost Prescription Drugs
- Referrals for In-home Care
- Protection From Fraud
- Adult Day Care
- Meals on Wheels
- Light Housekeeping
- Transportation





Aging & Disability Resource Connection

A Division of the CSRA Regional Commission

Visit us online at <http://www.AreaAgencyonAging.com>

FREQUENTLY ASKED QUESTIONS

What is the Area Agency on Aging?

The Area Agency on Aging, a division of the CSRA Regional Commission, coordinates, funds, and connects people with senior services in 14 counties of east central Georgia.

What is the CSRA Regional Commission?

The CSRA Regional Commission (RC) is a nonprofit public agency that helps area counties and cities effectively serve aging citizens, use land wisely, write grants for local improvements, strengthen local economies, preserve historic properties, support small and start-up businesses with loans, and use computerized map information to plan for growth.

The CSRA RC, created in 1974 by the state of Georgia, is funded primarily through membership dues paid by the local governments that we serve. Like the state's 12 other RC's, we are led by a Commission of Directors consisting of area county and city officials.

What are the responsibilities of the Agency on Aging?

- 1) We study the changing needs of our community's senior citizens and family caregivers and develop a yearly plan of action to get the right mix of aging services to the people who need them most.
- 2) We act as a "pass-through" agency for public funds by:
 - a) requesting proposals from organizations that offer aging services,
 - b) awarding public funds to responsible organizations that meet critical needs, and
 - c) making sure that awardees effectively use public funds to improve the lives of older CSRA residents.
- 3) We operate the Gateway – an easy one-call help center to connect senior citizens and caregivers with the information and aging services that they need.

What communities does the Area Agency on Aging serve?

The CSRA Regional Commission serves 14 counties and 46 cities in east central Georgia. Counties include Burke, Columbia, Glascock, Hancock, Jefferson, Jenkins, Lincoln, McDuffie, Richmond, Screven, Taliaferro, Warren, Washington, and Wilkes.

Are there other Area Agencies on Aging?

Area Agencies on Aging form part of an aging network led by the U.S. Administration on Aging and state units on aging. The 12 Area Agencies on Aging within Georgia receive guidance from the Georgia Department of Human Services' Division of Aging Services. Most Agencies on Aging are divisions within Regional Commissions.

What are the major programs of the Area Agency on Aging?

The Area Agency on Aging funds and monitors a wide variety of organizations that provide services to senior citizens in areas such as nutrition, wellness, lifelong learning, recreation, and senior volunteerism. In addition, we operate the following programs:

Your Gateway to Community Services

At the Area Agency on Aging, we use powerful database tools to operate a one-call service center for people who need aging services assistance. Our trained specialists provide information about local and national resources and help CSRA residents get services that allow individuals to age with dignity and independence.

The Community Care Services Program (CCSP)

CCSP is a Medicaid-funded program that makes free and low-cost home services available to people at risk for nursing home placement. The program is available to senior citizens and legally disabled individuals who meet income and health requirements.

Home and Community Based Services (HCBS)

Through the HCBS program, we assist people aged 60 and above who need services such as home delivered meals, adult day care, homemaker services, respite, and counseling. HCBS is funded in accordance with the Older Americans Act.

Disability Services

The Area Agency on Aging collaborates with Walton Options for Independent Living to manage Operation Independence, a program that connects senior citizens and people with disabilities with equipment, devices, ramps, and home-modification services.

GeorgiaCares

GeorgiaCares helps consumers trim prescription drug costs. Staff and trained volunteers help older adults identify and apply for discount programs offered through pharmaceutical companies. The GeorgiaCares team also provides education about Medicare and health insurance options for older adults.

Caregiver Support

The Area Agency on Aging helps CSRA residents care for loved ones by offering caregivers services such as respite, adult day care, homemaker assistance, training, and support. Caregivers are linked to support groups and other resources that may provide a barrier against caregiver stress.

Elder Rights and Advocacy

Several CSRA organizations partner with the Area Agency on Aging to protect the rights of older people through programs such as Elder Legal Services, HICARE (health insurance counseling and referral), ombudsman services (services to protect residents in long-term care facilities), and a range of advocacy projects.

Major Programs, cont.

Health and Wellness

The Health and Wellness Program for older adults features a variety of senior fitness classes, education about nutrition and the safe usage of medications. The program also provides training for organizations that seek to establish grassroots senior wellness programs.

Community Capacity Building

The Area Agency on Aging produces networking newsletters and hosts training forums to help aging service organizations, faith communities, and other groups find creative, effective new ways to meet the needs of elders and their families.

Our Network's Available Services at-a-Glance

Advocacy • wellness • public education, • home-delivered meals, • congregate meals at senior centers • supplemental food • transportation • legal assistance • recreation • counseling • care coordination • respite services • emergency response services • homemaker assistance • adult day care and adult day health • and personal care help (such as bathing and dressing assistance)

Organizations that Provide Aging Services through Our Gateway System

- Augusta Area Alzheimer's Association
- AutumnCare Adult Day Center, Inc.
- CSRA Private Duty
- City of Sylvania
- DHR Coordinated Transportation
- Excell Homecare Services
- Family Counseling Center
- Georgia Legal Services
- Glascock County Board of Commissioners
- Golden Harvest Food Bank
- Grovetown Senior Center
- The Homeplace Adult Daycare
- Jud C. Hickey Center for Alzheimer's Care
- McDuffie County Board of Commissioners
- Shiloh Comprehensive Community Center
- ResCare HomeCare
- Walton Options for Independent Living, Inc.
- Washington Area Faith in Action

How can people get more information about senior services in the CSRA?

For assistance, contact the Area Agency on Aging: Your Aging and Disability Resource Connection at (706) 210-2018 or (888) 922-4464 or www.areaagencyonaging.com.

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3023 River Watch Pkwy., Ste. A
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RC Message Center	706-210-2005	AAA Fax	706-210-2024
CSRA Business Lending Fax	706-210-2031	Georgia Cares GA Cares Toll Free	706-210-2029 800-669-8387

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