

# Health & Community Services for Aged Persons

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## Mission

To provide leadership, stewardship, and collaboration necessary to ensure delivery of a broad array of services for older adults, based upon the principles of independence, quality, dignity, privacy, and personal choice.

## Summary of Activities

Through the Division of Disability, Aging, and Rehabilitative Services (DDARS) at the **Family and Social Services Administration (FSSA)**, the Bureau of Aging and In-Home Services (BAIHS) provides a broad array of services to older Hoosiers.

In-home services are funded through the CHOICE (Community and Home Options to Institutional Care for the Elderly and disabled ) program and include homemaker, attendant care, respite care, home health services and supplies, transportation, adult day care, home-delivered meals, and other appropriate services such as minor home modification and adaptive aids and devices. The statewide In-Home Services Program is nationally recognized for its single point of entry system that works in concert with the 16 local Area Agencies on Aging (AAA). This program provides a comprehensive and coordinated alternative to institutional placement. The system is customer-friendly and the local offices are “close to home” – an important concern for a person in need of assistance.

BAIHS also provides an additional range of community-based services including: congregate meals, information and referral, legal services, preventive health services, adult guardianship, adult protective services, ombudsman, senior employment, pre-admission screening and annual resident review, assisted living through the Room and Board Assistance (RBA) and Assistance to Residents in County Homes programs, and money management and representative payee programs.

Residential services for the aged also include services provided in nursing facilities, the cost of which is supplemented for lower-income Hoosiers through the federal / state Medicaid program. In 1999, Indiana provided services to 52,526 individuals in nursing homes. This compares with 9,431 served through the CHOICE program and 2,498 served in the community through Medicaid. State and federal funding for individuals served in nursing facilities totaled \$761.5 million in FY 1999, compared to \$49.3 million for CHOICE and the Medicaid community services combined. However, the number of individuals served through CHOICE and the Medicaid community services has increased by over 50% since 1994, growing from 7,791 clients for both programs in 1994 to 11,929 in 1999.

## External Factors

Through changes in technology, increased experience with community settings, and increased demand for independence, more elderly individuals are able to live at home. As a result, staff and service providers are focusing on delivery of services outside of institutions in less restrictive and safer environments.

The trend in costs for in-home services for the elderly is upward as CHOICE appropriations and expenditures have risen since its statewide inception on July 1, 1992. The numbers of individuals served has also risen. The potential for increase is much greater than current resources can meet. Additional providers are also needed to provide the services.

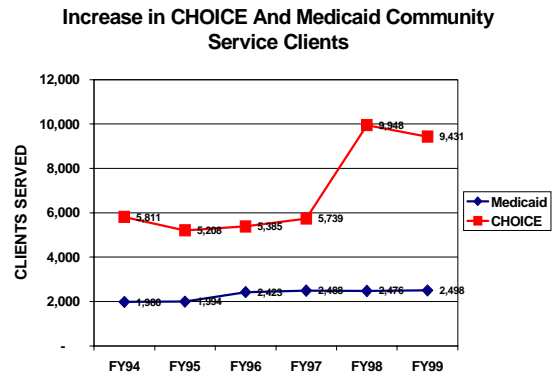


## Evaluation and Accomplishments

FSSA uses a quality improvement process (QIP) tool to evaluate the effectiveness of DDARS in providing community and residential services to older adults. QIP, a consumer feedback report, measures client satisfaction for the services delivered. The majority of QIP scores are satisfactory or above.

Consumers access services through a single point of entry in their local community at the nearest AAA. BAIHS maintains a single phone number that will direct callers to their local AAA. BAIHS is in the final stages of implementing an updated data system that links the AAAs and the central office and will allow for data entry at the local level.

Funding increases in CHOICE, the Medicaid waiver, and the personal needs allowance have enhanced opportunities to serve more people. Community and in-home services have been provided to thousands of individuals in order for them to remain in their own homes and communities.



## Plans for the Biennium

Over the next biennium, BAIHS plans to increase the number of individuals receiving services based on resources available. Essential to this effort is strengthening quality assurance to integrate customer satisfaction surveys, enhancing protective services for adults, expanding the adult guardianship program statewide, and increasing ombudsman services for long-term care facilities and in-home services. BAIHS also plans to implement the electronic data exchange between the central office and the AAAs.

The Governor's Long-Term Care Task Force is exploring other community-based service alternatives including a Medicaid waiver for assisted living and adult foster care.

<u>Program: 0345</u>	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003
<b>Appropriation (All Funds)</b>	<b>\$854,778,795</b>	<b>\$870,986,759</b>	<b>\$843,758,579</b>	<b>\$910,824,479</b>	<b>\$927,127,753</b>
<b>Expenditures</b>	<b>\$837,496,502</b>	<b>\$803,186,001</b>	<b>\$828,046,724</b>		

**Sources of Funds  
FY 2001 (Approp)**

■ General   
 ■ Dedicated   
 ■ Federal   
 ■ Other

**Uses of Funds  
FY 2001 (Approp)**

■ Personal Services   
 ■ Distributions   
 ■ Capital   
 ■ Other