

AGENDA
Eau Claire County
Aging & Disability Resource Center Board
Wednesday, April 6, 2016, 4:00 pm
Rooms 1301/1302 Courthouse, Eau Claire WI 54703

1. Call to order
2. Confirm agenda
3. Introduction
4. Public comment
5. Review February 17, 2016 ADRC Board Minutes / Discussion–Action Handout #1
6. Recognition of board members: Sue Miller, Cheryl Stahl, Gordon Steinhauer & Mark Beckfield
7. Annual Report / Discussion – Action Handout #2
8. ABLE Act Resolution – Handout #3
9. Director’s Report
 - IM/ADRC Integration Report
 - Care Wisconsin expansion - Handout #4
 - Staffing levels and workload - Handout #5
 - Health Dept Grant
10. Next meeting: May 18, 2016, 4:00 pm
11. Adjourn

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 839-4710, (FAX) 839-1669, tty: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

Eau Claire County
Aging & Disability Resource Center Board
Wednesday, February 17, 2016, 4:00 pm
Rooms 1301/1302 Courthouse, Eau Claire WI 54703

Minutes

Members Present: Gordon Steinhauer, Jason Endres, Katherine Schneider, Lauri Malnory, Tom Christopherson, Sue Miller, Stephannie Regenauer, Cheryl Stahl, Mary Pierce

Others Present: Mark Peterson, Jennifer Owen, Lisa Wells, Emily Gilbertson, Marlene Rud

Chair Miller called the meeting to order at 4:00 pm.

Confirm agenda – yes

Introductions of ADRC Board, staff and others in attendance.

Public Comment – Jennifer shared that Kaylynn Stahlbush, ADRC Volunteer Coordinator, was honored by the Rotary for all her good work. Since some ADRC Board members will not be in attendance at the March 16, 2016 ADRC Board meeting and 4 new Board appointments will be made in April, the March 16 meeting is cancelled and the next ADRC Board meeting will be April 6, 2016, 4:00 pm.

December 16, 2015 ADRC Board meeting minutes reviewed. Katherine Schneider moved approval. Motion carried.

Dementia Care Specialist Program update – Lisa Wells. Reviewed handouts; ADRC partnered with the Eau Claire City/County Health Department and submitted grant proposal for the NACCHO Medical Reserve Corp Challenge Award. Speakers Task Force on Alzheimers and Dementia – 10 bills will go to the Assembly for approval.

2015 Aging Plan Self-Assessment – Jennifer Owen. Reviewed changes in the ADRC self-assessment plan. Motion by Katherine Schneider to approve plan with modifications as reviewed. Second by Gordon Steinhauer. Motion carried.

Sub Committee meeting update – Mary Pierce. Sub Committee members reviewed Meals on Wheels and Congregate Dining surveys, evening meal invitations given out to encourage participation, discussed possibility of grocery delivery in Augusta area, emergency food boxes from Feed My People will be distributed to Meals on Wheels & Congregate Dining participants, Clearwater Quilters group made placemats and volunteer drivers will distribute to Meals on Wheels participants on their birthday. Lynne's Chatterbox restaurant will provide the February 23 evening meal due to current provider transition. Restaurant meal site is still being reviewed.

2016 ADRC Contract Compliance Plan – Jennifer Owen. Reviewed checklist for the evaluation and compliance plan requirements. ADRC is not in compliance on Courthouse signage, phone system and website.

Directors Report – Jennifer Owen. Regionalization update –ADRC Board discussed regionalization concept and feels it would not be in the best interest for Eau Claire County at this time. Family Care 2.0 public hearings will be held to solicit comments on the concept plan. Care Wisconsin will be a new Managed Care Organization in Eau Claire beginning July 1. State study of ADRC & Economic Support integration update – study is finishing, and initial info showing not a fit. ADRC workload – number of contacts, Board asked for options to discuss.

Meeting adjourned at 5:20 pm.

Respectfully Submitted,

Marlene Rud, Clerk
Aging & Disability Resource Center Board

_____Chairperson

Aging & Disability Resource Center 2015 Annual Report

Mission: To help people age 60+ and adults with disabilities secure needed services or benefits, live with dignity and security, and achieve maximum independence and quality of life.

Staff in 2015:

Jennifer Owen, Director (1.0 FTE)

Emily Gilbertson, ADRC Manager (1.0 FTE)

Becky Hinzmann, Nutrition Program Supervisor (1.0 FTE)

Jenna Belter, Dana Greicar, Dawnelle Horvath, Sue O’Branovich, Elizabeth Nett, Lisa Wells, Lisa Riley, Andrea Reischel Options Counselor (7.225 FTE)

Sue Brown, Leda Welke-Judd, Elder Benefit Specialist (2.0 FTE)

Jim Coldwell, Melissa Wendtland, Disability Benefit Specialist (2.0 FTE)

Deb Bruning, Prevention Program Coordinator (1.0 FTE)

Marlene Rud, Jessica Smith, Lindi Engedal, Resource Specialist (3.0 FTE)

Sandra Kronenberg, Lynne Braatz, Administrative Associate (2.0 FTE)

Kaylynn Stahlbusch, Volunteer Coordinator (1.0 FTE)

Doug Salter, Meal Site Worker (.375 FTE)

Kris Bertrand, Cleo Carpenter, Jerry Carpenter, Delivery Workers (1.125 FTE)

26 total employees 21.725 total FTEs

2015 Revenue and Expenditure Summary		
Expenditures	2015 Budget	2015 Actual
Personnel	\$1,709,677	\$1,696,021
Services & Supplies	\$903,767	\$865,371
Equipment	\$2,500	\$26,477
Capital Improvement	\$0	\$0
Total Expenditures	\$2,615,944	\$2,587,869
Revenues		
Federal/State Grants	\$2,091,500	\$2,106,235
Charges & Fees	\$390,205	\$370,061
Fund Balance Applied	\$29,845	\$7,179
Property Tax Levy	\$104,394	\$104,394
Total Revenues	\$2,615,944	\$2,587,869

#1 Information & Counseling

This program provides a central source of information about a broad range of community resources and benefits of interest to people age 60+ and adults with disabilities of all incomes and their caregivers. ADRC customers are helped to understand the various short and long term care options and benefits available, use their personal resources wisely, and delay or reduce the demand for public funding for services.

Outputs

	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Information & assistance; options counseling contacts	9,112	10,219	10,742	12,294
Nursing home resident contacts- private funding	N/A	N/A	119	101
Nursing home resident contacts- public funding	N/A	N/A	75	104
Disability Benefit Specialist cases	567	583	524	523
Disability Benefit Specialist information only	353	320	293	269
Elder Benefit Specialist cases	867	1,009	1772	1,993
Elder Benefit Specialist information only	474	513	248	197
Unduplicated number of people receiving assistance	3,848	3,934	4,149	5,085
Contacts for assistance ages 60+ (standard is 1,344)	6,810	7,304	7,758	8,646
Contacts for assistance ages 18-59 (standard is 768)	2,562	2,422	2,984	3,648

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
To provide ADRC customers with reliable and objective information so that they can access services and make informed choices about their short and long-term care options	95% of individuals completing satisfaction surveys will report services provided were helpful and met their needs for making information choices about short and long-term care options.	95%	N/A	96%	N/A
To provide ADRC customers with assistance in understanding and accessing public and private benefits	95% of individuals completing satisfaction surveys will report the service provided by the Elder Benefit Specialist and Disability Benefit Specialist helped them understand and access public and/or private benefits.	95%	97%	99%	97%
To provide nursing home residents with the information and assistance they need to safely relocate into the community	The ADRC will assist a minimum of 27 nursing home residents in successfully relocating back into the community annually.	27	29	38	54

#2 Elderly Nutrition

This program includes Meals on Wheels delivered throughout the county and Senior Dining sites located at the Augusta Senior Center and St. Johns Apartments. It also includes evening congregate meals at locations throughout the county, the Senior Farmer's Market Voucher Program, liquid nutritional supplement, and the large volunteer program that supports all of these services.

Outputs

	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Congregate meals served	15,190	12,262	7,847	9,200
Meals on Wheels delivered	78,622	78,881	71,858	69,544
People served	1,658	1,618	1,354	1,365
Cases of liquid supplement distributed	1,382	1,202	1,087	1,214
Emergency food packs delivered	375	375	800	400
Senior Farmers Market Vouchers issued	300	313	270	270
Total number of volunteers	656	782	508	487
New volunteers recruited, screened and trained	130	92	82	44
Hours donated by volunteers	16,786	15,614	13,760	13,605

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
To make high quality nutrition program services available to eligible individuals, countywide	85% of program participants responding to a semiannual satisfaction survey will indicate meal and service quality as very good to excellent	85%	84%	69%	75%
	100% of individuals requesting Meals on Wheels will receive services within 48 hours of the requested start date	100%	100%	100%	100%
	90% of Meals on Wheels participants will report meals helped them remain independent in their home	90%	94%	89%	91%
	90% of Meals on Wheels participants will report meals helped them remain independent in their home	90%	91%	91%	91%
To ensure an adequate number of trained volunteers are available to keep program costs down and meet increasing demand for Meals on Wheels	90% of Meals on Wheels routes will be delivered by volunteers	90%	91%	91%	91%

#3 Evidenced Based & Other Prevention Programs

This program includes a number of evidenced based programs: Stanford University Chronic Disease Self-Management 'Living Well, Stepping On fall prevention, Powerful Tools for Caregivers, Healthy Eating for Successful Living, Memory Care Connections and Strong Bones. Other prevention programs include: in home fall preventing and safety screening, memory screening and referrals, nutrition risk

screening and education activities, adaptive equipment, respite and one time or short term emergency services needed to avoid the need for nursing home placement and other more expensive interventions.

Outputs

	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Individuals participating in Chronic Disease Self Mgmt. class	11	39	42	53
Individuals participating in Stepping On class	39	59	111	115
Individuals participating in Powerful Tools for Caregivers	5	15	15	6
Individuals participating in Strong Bones class	N/A	N/A	83	160
Individuals participating in Healthy Eating class	N/A	N/A	33	36
Individuals participating in Memory Care Connections	16	4	4	3
Number of memory screens completed	33	29	55	133
Total nutrition risk screens completed	821	585	615	688
Number of individuals found to be at high risk on nutrition screen	175	97	146	194
Individuals participating in Care Transition Intervention	358	278	172	N/A
Individuals completing the Care Transition Intervention	178	144	39	N/A
Individuals receiving services through Older Americans Act	43	39	7	26
Individuals receiving services through Alzheimer's Caregiver Support program	18	14	18	27
Individuals receiving services through county levy funds	21	38	2	8

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
To provide classes, risk screenings, counseling and education to ADRC customers in order to promote healthy practices and strategies for chronic disease management, fall prevention, health care management, and caregiving.	95% of individuals responding to post class surveys will indicate information and education provided met or exceeded their expectations.	95%	100%	100%	99%
	100% of caregiving class participants responding to the survey will report an increase in confidence with dealing with increasing needs of the person they are caring for.	100%	86%	100%	100%
	90% of individuals participating in the Care Transition Intervention will increase their patient activation score from beginning to end of the intervention.	90%	96%	92%	N/A
	80% of individuals				

	participating in the Care Transition Intervention will report not being readmitted to the hospital on the 30 day post intervention follow up survey.	80%	95%	90%	N/A
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#4 Specialized Transportation

The county partners with the City of Eau Claire to provide transportation for people age 60+ and adults with disabilities who do not have access to transportation. Rides are provided for medical, nutrition, social and employment purposes. The program is funded with the Wisconsin Department of Transportation grant and levy match.

Outputs

	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Total number of trips	24,657	26,332	24,419	23,149
Trip purpose: Employment	13,254	14,255	11,115	11,073
Social	7,087	8,167	7,793	6,517
Medical	3,215	2,621	3,386	3,189
Education	365	139	142	561
Nutrition	165	189	286	161
Shopping/Personal business	568	554	948	362
Total number of trips for people age 60+	9,712	9,841	8,250	6,969
Total number of trips for adults with disabilities	14,350	16,844	16,169	16,201

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
To ensure individuals using specialized transportation are satisfied with the service	96% of users responding to a semiannual survey will indicate they are satisfied to very satisfied with specialized transportation services.	96%	90%	90%	87%

#5 Outreach & Public Education

This program promotes awareness of ADRC programs and issues relating to aging and disability including: staff presentations, website, Facebook, newsletter, resource directory, posters, ads, mailings, news releases, health fairs, and a wide variety of other educational activities. It also includes the annual Youth Transition Conference, Caregiver Town Hall Meeting, and Caring for the Caregivers conference, Final Affairs seminar, caregiver alliance activities and Medicare & You presentations.

Outputs

	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Staff presentations and educational outreach	128	76	134	184
Number of people attending presentations and events	3,665	7,590	5,143	9,557
Newsletters distributed	23,518	21,236	24,319	26,151
Posters, news releases, resource directories, brochures, etc.	33,803	45,151	59,336	41,572
ADRC website hits	60,506	50,299	57,089	26,030
ADRC Facebook page likes	126	173	252	336

Performance Goal	Outcome Measures	Benchmark	2013	2014	2015
To ensure people age 60+ and adults with disabilities are aware of and use ADRC services	100% of the marketing standards set by the ADRC contract will be met	100%	100%	100%	100%
To provide a variety of educational opportunities and informational materials to ADRC customers and professionals who work with ADRC customers	100% of individuals attending ADRC staff presentations and responding to post presentation surveys will report the information provided in the presentation met or exceeded their expectations	100%	97%	99%	99%
#6 Eligibility Determination					
This program includes administering the long-term care functional screen for people age 65+ and adults with physical and intellectual disabilities to determine their functional eligibility for publicly funded long-term care programs: Include, Respect, I Self-Direct (IRIS) and Family Care.					
Outputs					
		2012	2013	2014	2015
Adult long-term care functional screens completed		247	292	N/A	N/A
Screens reviewed for accuracy/quality assurance		108	248	203	217
Publicly funded long-term care enrollments		274	215	183	213
Medical Assistance applications the ADRC assisted with		N/A	N/A	191	155
Performance Goal	Outcome Measures	Benchmark	2013	2014	2015
To provide functional eligibility determination in an accurate and timely manner	The percentage of random screen samples will meet or exceed the Department of Health Services error free rate of 80%	80%	82%	75%	89%
To ensure people age 65+ and adults with disabilities understand the purpose of the screen and the process for functional eligibility determination for publicly funded long-term care programs	95% of individuals screened who respond to a survey will report they understand the purpose and process of functional eligibility determination.	95%	100%	100%	97%

2015 Accomplishments and Future Challenges

In 2015, the Aging & Disability Resource Center experienced another year of significant **growth** in the number of individuals utilizing the programs and services offered. The number of individuals who received assistance from the ADRC rose by 23% in 2015 while the ADRCs staffing levels actually decreased slightly. Overall customer satisfaction remains very high for the ADRC. One possible and likely explanation for the continued growth in the ADRC's customer base is the dramatic increase in the aging population attributed to the baby boomer generation. It is highly likely that demand for the ADRCs services will continue to rise as the baby boomer generation continues to grow older. Continuing to meet demand with the same staff levels will pose a significant challenge to the ADRC.

The ADRC of Eau Claire County is fortunate to be a recipient of the State of Wisconsin's **Dementia Care Specialist** grant program. This program began in mid-2014 and really gained a lot of momentum in 2015. The Dementia Care Specialist program has three priorities: 1) to create a dementia-capable ADRC, 2) to assist individuals living with dementia as well as their families and 3) to create a dementia-friendly community. One example of this program's success was the number of individuals that contacted the ADRC for memory screening as part of our initiative to promote early detection of dementia. In 2014 we conducted 55 memory screens and this number dramatically increased to 133 in 2015. This program is currently funded through 2017 and we hope to see the funding continue as part of the next State biennium budget.

The **partnership** between The Community Table, Feed My People and the Meals on Wheels program through the ADRC continues to grow with each year. In 2015, Feed My People provided emergency meal boxes to all Meals on Wheels participants so they would have access to a meal if the ADRC had to cancel Meals on Wheels because of inclement weather. The Community Table partnership has allowed the ADRC to provide home delivered meals to individuals that do not meet the Older Americans Act funding guidelines for Meals on Wheels. This partnership has helped us provide meals to seniors and adults with disabilities that would not otherwise qualify for home delivered meals.

The Aging & Disability Resource Center is primarily **funded** through State and Federal revenue sources. There were multiple changes in the state biennium budget as it relates to the public long-term care system. ADRCs are the entry point into the State's public long-term care system, currently known as Family Care. The future holds many unknowns at this point as to exactly how the new long-term care system, referred to as Family Care 2.0, will operate. It has been said that the ADRCs will maintain their role as the entry point into the system as unbiased, local entities. It is uncertain exactly when and how the transition to the new system will occur but it is likely that the ADRC will play a significant role in the transition which poses concern for workload and service demand in the coming year.

Because of the increasing aging population and demand for ADRC services, the ADRC board went through a **strategic planning** process in order to create a vision and framework for making decisions over the course of the next 3-5 years. Through the process of creating the strategic plan, 4 priorities were identified along with several goals that the board and department will keep in the forefront while making future decisions about the ADRC. The strategic planning process was also done in conjunction with the planning process for Eau Claire County's 2016-2018 Aging Plan. Many of the County's Aging Plan initiatives and goals came from suggestions in the strategic planning listening sessions shared by our customers.

FACT SHEET

TO FILE NO. 15-16/115

Fact Sheet: Supplemental Security Income Asset Limits

And Implementation of the ABLE Act

- Supplemental Security Income, or SSI, is a program for low income adults (below 100% of the federal poverty level) who have been determined to have a significant disability through the Social Security Administration (SSA).
- Funding for SSI is through a combination of State and Federal funds.
- Asset limits for the SSI program have not been updated since 1989. They are currently \$2000 for an individual and \$3000 for a couple. These asset levels limit employment and savings options for recipients due to risk of losing Medicaid for health care coverage. These SSI asset limits can prevent recipients from saving for post-secondary education, homeownership, as well as retirement.
- Data from 2014 shows there are 1,999 recipients of SSI benefits in Eau Claire County.
- ABLE Accounts are tax-advantaged saving accounts for individuals with disabilities and their families. Income earned by the accounts would not be taxed and contributions to the accounts are not tax deductible. These accounts will work much like 529 Edvest college saving accounts.
- The Federal government passed the ABLE Act allowing States the ability to set up legislation allowing ABLE Accounts. Wisconsin passed ABLE Account legislation with the 2015-2017 state budget.
- Each state is responsible for establishing and operating an ABLE program under the guidelines provided by the U.S. Department of Treasury. No accounts may be established until the Federal regulations are finalized.
- The first \$100,000 in ABLE accounts would be exempted from the SSI \$2,000 individual asset limit. If the account exceeds this limit, SSI payments would be suspended and the beneficiary will remain eligible for Medicaid.

Fiscal Impact: None.

Respectfully Submitted,

Jennifer Owen
ADRC Director

Ordinance/15-16.115 Fact

DEPARTMENT OF HEALTH SERVICES**STATE OF WISCONSIN**

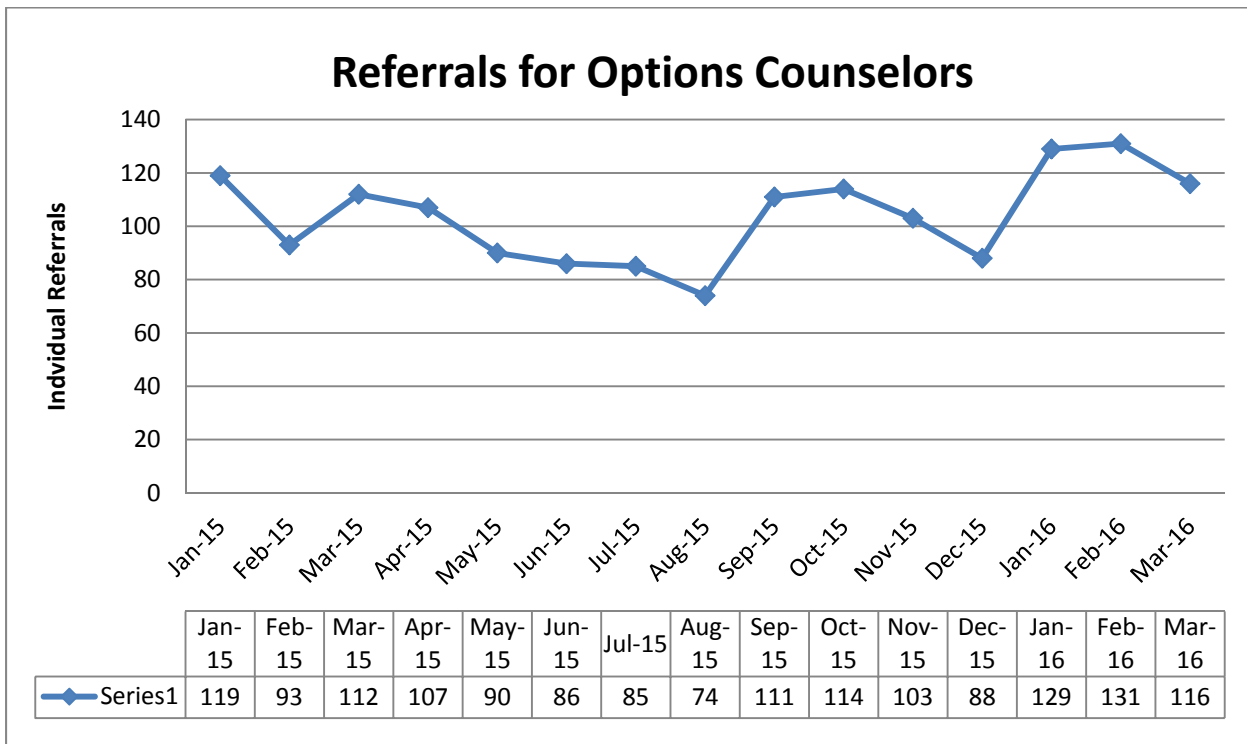
Division of Long Term Care F-00681C (12/2015)

FAMILY CARE – TWO (2) MANAGED CARE ORGANIZATION (MCO) OPTIONS**Office for Resource Center Development**

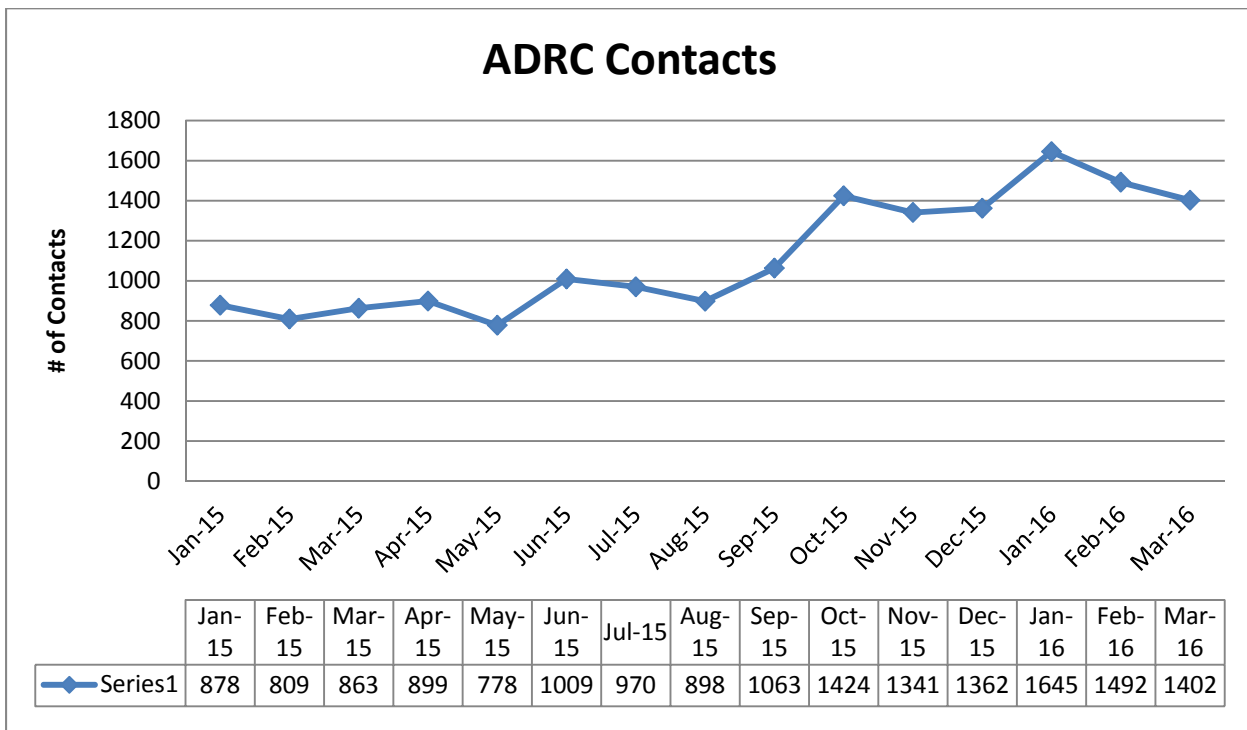
This chart may be useful in providing enrollment counseling to people in areas where two Managed Care Organizations are available. The categories found in the chart provide consumers with more detailed and factual information about each MCO that may be useful when weighing their options.

Service Detail	Care Wisconsin State Certified 2008	ContinuUs State Certified 2008
What are the Family Care Managed Care Organizations serving Eau Claire County?	325 3 rd Street South La Crosse, WI 54601-4049 Phone: 855-408 3687 450 Hewitt Street Neillsville, WI 54456 Phone: 855-830-7908 enrollsrvc@carewisc.org	28526 US Hwy 14 Lone Rock WI 53556 Phone: 608-647-4729 info@ContinuUs.org
Managed Care Organization Websites?	www.carewisc.org	www.continuus.org
What type of agency?	Private Non-Profit	Public Non-Profit
Who are the Care Managers?	Employees of Care Wisconsin	Employees of ContinuUs
What experience does the agency have working with frail elders and adults with disabilities?	Frail Elders: Since 1976 Physical Disability: Since 1997 Intellectual Disability: Since 2008	Frail Elderly: Since 2000 Physical Disability: Since 2000 Intellectual Disability: Since 2000
What counties does the MCO now serve?	Brown, Buffalo, Chippewa, Clark, Columbia, Crawford, Dodge, Door, Dunn, Eau Claire, Grant, Green, Green Lake, Iowa, Jackson, Jefferson, Juneau, Lafayette, Kewaunee, La Crosse, Marinette, Marquette, Menominee, Monroe, Oconto, Ozaukee, Pepin, Pierce, Richland, Sauk, Shawano, Sheboygan, St. Croix, Trempealeau, Vernon, Walworth, Washington, Waushara and Waukesha counties	Chippewa, Columbia, Crawford, Dodge, Dunn, Eau Claire, Grant, Green, Green Lake, Iowa, Jefferson, Juneau, Lafayette, Marquette, Pierce, Richland, Sauk, St. Croix, Washington, Waushara, and Waukesha counties
How many members will each Care Manager and Nurse be working with?	Care Manager: 1:40 Nurse:1:80	Care Manager: 1:41 Nurse: 1:72

Aging and Disability Resource Center completed on: 3/17/2016



*March 2016 data is incomplete for both charts



Possible Scenarios to Reduce Workload Strain

Scenario #1

Reallocate ADRC grant funds in order to terminate contract with Chippewa County which would increase the Options Counselor FTE by .4. This solution would be relatively seamless. We already have the full-time Options Counselor position; we would just be reallocating our ADRC funds to allow that individual to work in Eau Claire County 5 days/week as opposed to the current 3 days/week in Eau Claire and 2 days/week in Chippewa. Reallocation of funds would likely reduce our budgets in marketing, printing and/or training. The estimated cost of this scenario if implemented May 1, 2016 is approximately \$18,332.00.

Scenario #2

We currently have one Options Counselor that assists with leading Strong Bones, PALS and Healthy Eating for Successful Living. Although she does not coordinate the classes that she leads, there is still a loss of allocated time for Options Counseling when she is leading a class. A possible scenario would be to have her no longer assist with leading these classes to be fully dedicated to options counseling. However, this will then put a strain on our ability to offer our prevention programs at the current frequency that we do. There wouldn't be any direct cost associated with this scenario; but this scenario will have a significant impact on the ADRC's prevention programs.

Scenario #3

Increase the part-time Options Counselor position to full-time. We currently have a 29 hour/week Options Counselor position that could be increased to 40 hours/week. This solution would also require reallocation of ADRC contract funds in order to financially support an increase in hours and benefits. This option would also require reallocation of funds and would likely reduce our budgets in marketing, printing and/or training as well. The estimated cost of this scenario if implemented May 1, 2016 is approximately \$31,298.00.

Additional Information

On Friday, March 25, 2016 we were notified that the ADRC of Eau Claire County will be receiving a \$20,000 ADRC contract increase for 2016. These funds were requested, approved and would be used to eliminate or reduce the impact on the ADRC's marketing, training and printing budgets in order to implement one or more of these scenarios.