

Area Agencies on Aging

Local Leaders in Aging and Community Living



National Association of Area Agencies on Aging

n4a's primary mission

is to build the capacity of its members—Area Agencies on Aging (AAAs) and Title VI Native American aging programs—to help older adults and people with disabilities live with dignity and choices in their homes and communities for as long as possible.

This brochure features

an overview of the latest data gathered from AAAs nationwide to provide a snapshot of the evolving role these vital agencies play in the planning, development, coordination and delivery of aging and other home and community-based services in nearly every community in the United States.

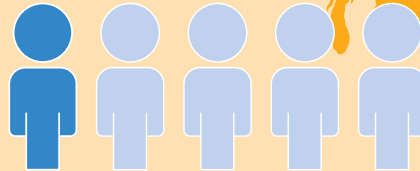
For more information, including detailed AAA survey data, visit www.n4a.org.



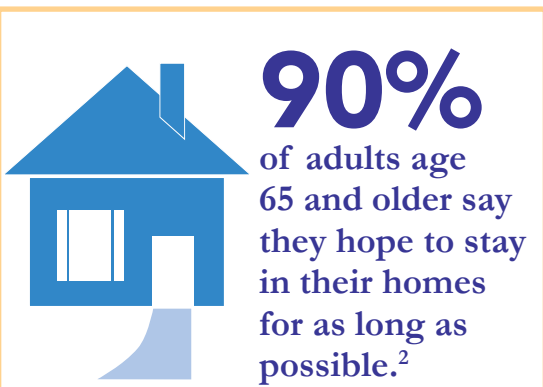
An Aging Nation

Over the next two decades, the proportion of the U.S. population over age 60 will dramatically increase as the baby boomers reach this milestone. By 2030, more than 70 million Americans will be 65 and older, twice the number in 2000.¹

By 2030, **1 in 5** Americans will be 65 or older.



Just as this demographic shift occurs, there will be a corresponding increase in the need and demand for fiscal, health and social supports to ensure a sound quality of life for millions of older Americans.



We know that the aging of our nation's population will challenge federal entitlement programs, such as Social Security, Medicare and Medicaid, but there is less awareness that this shift will also significantly increase demand for home and community-based services (HCBS), like those offered by Area Agencies on Aging (AAAs).

Because HCBS costs a fraction of the cost of institutional care options like nursing homes and skilled care facilities, bringing services to people where they live helps them save their own and government dollars, making this a more sensible approach from a fiscal and human perspective.

AAAs play a critical role in ensuring the development of HCBS options in every community! Here's how they do it ...

¹ U.S. Census Bureau, National Population Projections, 2008, www.census.gov/population/www/projections/summarytables.html.

² AARP, A State Survey of Livability Promises and Practices, December 2011, <http://assets.aarp.org/rgcenter/ppi/liv-com/ib190.pdf>.

Historical Basis for AAAs

Building on a successful model pioneered in the southeastern region of the U.S., Area Agencies on Aging (AAAs) were formally established in the 1973 Older Americans Act (OAA) as the “on-the-ground” organizations charged with helping vulnerable older adults live with independence and dignity in their homes and communities.



All AAAs play a key role in:

Planning

Developing

Coordinating

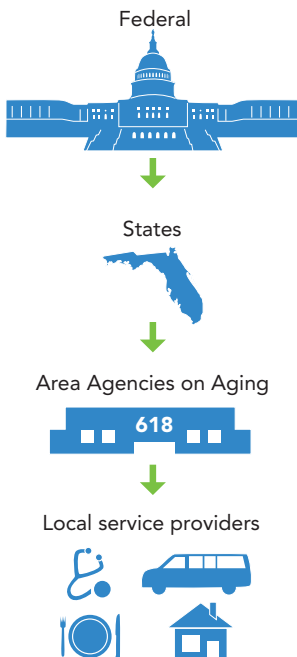
Delivering

A WIDE RANGE OF LONG-TERM SERVICES AND SUPPORTS
to consumers in their local planning and service area (PSA)

The OAA was intentionally designed to mandate that AAAs use the flexibility granted by the Act to ensure that local needs and preferences are taken into consideration and that the resulting local delivery system is tailored to the community.



Funding and Coordination of the Aging Network



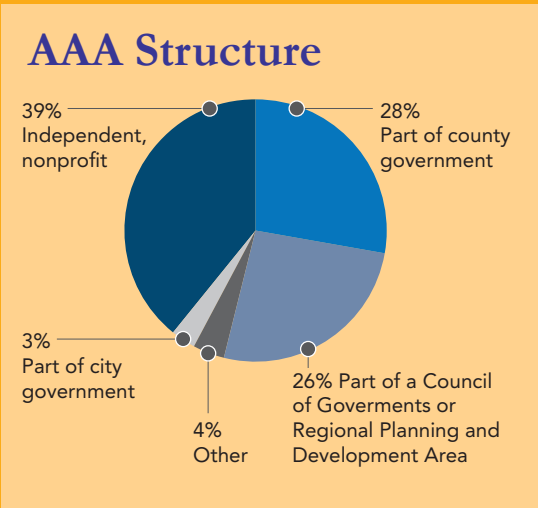
After getting input from consumers, service providers and other interested stakeholders, **the AAA develops an Area Plan** outlining needs and proposed recommendations, then updates it every few years to reflect emerging trends. AAAs are also tasked by the OAA to serve as advocates for older adults, enabling the agency's leaders to engage on local and state issues beyond the programs and services they fund or deliver.

AAAs contract with local service providers to deliver many direct services, such as meals, transportation and in-home services. However, most agencies are direct providers of Information and Referral/Assistance, case management, benefits/health insurance counseling and family caregiver support programs.

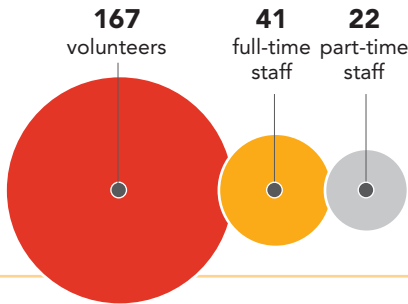
Nationwide Network with a Local Flavor

In 2014, there were 618 AAAs serving older adults in virtually every community in the nation. In the few states without a AAA infrastructure—those with small populations or sparsely populated land areas—the state serves the AAA function.

The OAA is foundational for all AAAs, but since the law calls for local control and decision-making, AAAs adapt to the unique demands of their communities to provide innovative programs that support health and independence. That’s why no two AAAs are exactly alike.



Average AAA Workforce

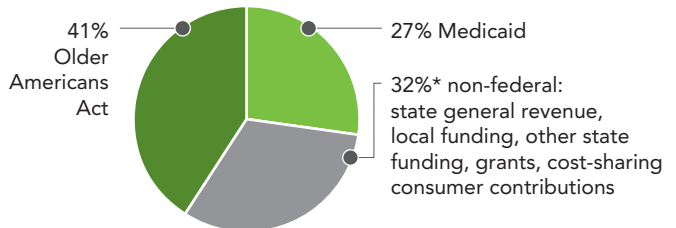


AAAs vary widely in size as each state determines how many areas to establish, which then directly affects the number of operating AAAs. For example, Wisconsin has 3 AAAs, but New York has 59.

Average AAA Budget By funding source, 2013

\$9.4 million

(Ranges from \$138,000 to \$292 million)



*Ranked by most frequently cited

AAAs Serve Communities

One of the OAA's foundational principles is that the programs and services created to help support consumers in their homes and communities are customized to meet their individual needs. There's nothing one-size-fits-all about AAAs or what they offer their clients!



The roles that all AAAs fulfill are:

assess community needs and develop and fund programs that respond to those needs;

educate and provide direct assistance to consumers about available community resources for long-term services and supports;

serve as portals to care by assessing multiple service needs, determining eligibility, authorizing or purchasing services and monitoring the appropriateness and cost-effectiveness of services; and

as custodians of the public interest, demonstrate responsible fiscal stewardship by maximizing use of public and private funding to serve as many consumers as possible.

Speaking of fiscal stewardship, AAAs also leverage federal dollars, building on modest OAA funding to expand the economic support and development of each community for HCBS. **The U.S. Administration on Aging estimates that for every \$1 of federal OAA investment, an additional \$3 is leveraged.**

The most common sources of non-OAA funding leveraged by AAAs for additional programs include:

68%

State General Revenue

55%

Local Funding

52%

Medicaid Waiver

47%

Other State Funding

40%

Consumer Cost-Sharing

Many Names, Many Partners: One Mission

While only designated AAAs can use the Area Agency on Aging name, not all AAAs include “Area Agency on Aging” in their operating name.

For example, a nonprofit AAA may be called “Senior Resources” or a county-based AAA may use “ABC County Office on Aging.” There are many other well-known programs and services that are administered by AAAs directly or in partnership with other agencies and entities. But no matter what program or service—like SHIP or ADRC—a AAA offers, they remain AAA-affiliated.



Programs and Services

Percent of AAAs	Designated as ...	Their role ...
72%	Aging and Disability Resource Centers (ADRCs)	Help all consumers connect to services regardless of age or disability.
62%	State Health Insurance Assistance Programs (SHIPs)	Provide direct health insurance counseling to older adults (e.g., selecting a Medicare Part D plan).
Percent of AAAs	Serve as ...	Their role ...
57%	Local Long-Term Care Ombudsman	Funded by OAA, act as a resource for consumers living in nursing homes and other institutions.

Partnerships

AAAs, on average, have 11 informal and 5 formal partnerships with other entities. These are some of the most common. By percentage of AAAs:

Adult Protective Services	85%	Disability service organizations	75%
Transportation agencies	84%	Public Housing Authority	75%
Medicaid agencies	83%	Faith-based organizations	66%
Advocacy organizations	82%	Community health care providers	60%
Emergency Preparedness agencies	79%	Businesses	46%
Hospitals	79%	Managed Care/HMO networks	42%
Mental Health organizations	77%		

A Network on the Move

While their fundamental mission has not changed over time, the scope of core services provided by all AAAs has broadened to address client and community needs.

Today, AAAs operate a complex service delivery system that provides access, community-based, in-home and elder rights services.

Did you know?

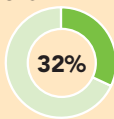
Evidence-Based Health and Wellness: 90% of AAAs now offer these tested and proven approaches to supporting older adults' health. (That's up from just over half in 2007.)

Nursing Home Diversion Programs: Two-thirds of AAAs are involved in institutional transition and diversion programs, which help seniors remain in their homes or return to the community.

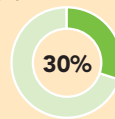
Integrated Care: Over half of all AAAs are involved in an integrated care delivery system of some kind, which is an approach that combines delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion across multiple systems,

including HCBS. AAAs are especially involved in these types of initiatives:

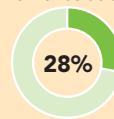
Veteran-Directed
HCBS



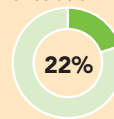
Medicaid Managed
Care



State Duals
Demonstration



Section 1115 Medicaid
Demonstration Waiver



Care Transitions: Whether with federal funding or through local partnerships, AAAs have moved rapidly into care transitions services, to help consumers make smooth transitions from hospital (or other institution) to home, generally with an emphasis on reducing preventable readmission or complications for the patient.

Livable Communities are good places to grow up and grow old. More than 70 percent of AAAs are working with local government, business, nonprofit and consumer partners to develop livable communities for all ages. Common livable communities practices AAAs have adopted include:

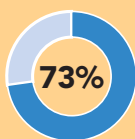
- addressing housing, transportation, land use and other development issues with other public entities (81%)
- coalitions to promote coordination across service areas (54%)
- projects to promote aging in place (50%)

AAAs Serve a Broad Range of Consumers

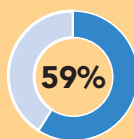
While all AAAs serve adults age 60 and older and their caregivers, they also serve younger consumers, such as ...

Percentage of AAAs that serve consumers under age 60, by category:

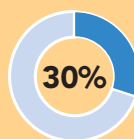
Consumers with a disability or chronic illness



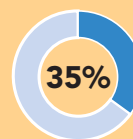
Caregivers of all ages



Veterans of all ages



Others



Part of the AAAs core work is to create local information and referral/assistance (I&R/A) hotlines to help consumers find aging and other HCBS programs.

Utilizing these resources and a portfolio of other outreach tools including public education, staff and volunteers, ADRCs and SHIPs, AAAs are then able to assist clients in matching solutions to an array of needs, thereby strengthening a customer's ability to age in place with maximum health, safety and independence.



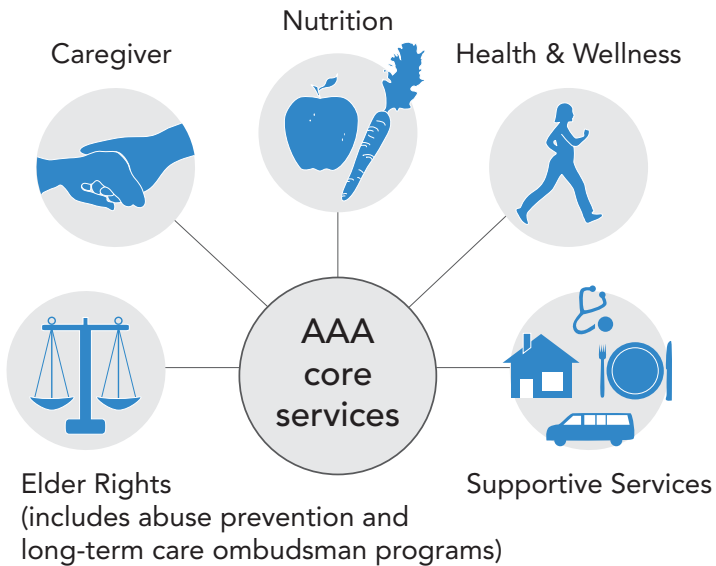
The national Eldercare Locator toll-free hotline helps consumers connect to these local resources!

800.677.1116
www.eldercare.gov

For OAA services, AAAs are charged by Congress to target services to those with the most economic or social need, but there is no means test and, if funding is available, anyone age 60 and older can access OAA services. For non-OAA services such as Medicaid HCBS waiver programs, AAAs serve all eligible consumers.



All AAAs offer five core services under the OAA:



The average AAA offers more than a dozen additional services! The most common non-core services offered by AAAs are:

- Evidence-Based Health Promotion Services (90%)
- Insurance Counseling (85%)
- Case Management (82%)

How to Connect With Your Local AAA

All AAAs have local hotlines or websites to provide consumers with information and assistance, so if you know the name of your local AAA, start there.

Alternatively, you can find a AAA by zip code via the Eldercare Locator's website (www.eldercare.gov) or you can speak with an information specialist by calling 800.677.1116. The Eldercare Locator is a free national service funded by the U.S Administration for Community Living and administered by n4a.



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