

KANSAS DEPARTMENT ON AGING

Annual Report

Kathleen Sebelius, Governor

Kathy Greenlee, Secretary



SFY 2008 - July 1, 2007 - June 30, 2008

A Letter from Secretary Greenlee

January 2009



As you review KDOA's annual report, you will see the many ways KDOA touches the lives of Kansas seniors and their families. From helping to fund senior nutrition programs to inspecting nursing home care for safety and quality to helping seniors understand their Medicare options, KDOA plays a vital role for Kansas seniors.

We also have a major role in advocating for the programs and services that seniors need and depend on.

We do this through educational programs, through testimony at the Legislature, through interaction with our stakeholders, including senior services-related organizations. In Kansas, seniors are an important constituency. The 65-and-older population comprises more than 13 percent of the state's population, and in several Kansas counties, seniors represent one-fourth of the population.

Our goal at KDOA is to help seniors enjoy the best possible lifestyle they can. One way we do that is by promoting the Lifelong Communities Initiative. So far, four Kansas communities – Great Bend, Dodge City, Chase County and Topeka – have earned Lifelong Community designation by providing improvements and services that make their communities more accessible. Many of the improvements benefit not only seniors but citizens of all ages. I'm please that more cities are working toward that designation.

Although we strive to keep people in their own homes as long as possible, we also know that in-home services are not always the best option. Sometimes, an adult care home, whether it be assisted living or a nursing home, becomes necessary. KDOA plays an important role in this area, too, through its licensing, inspection and certification duties.

Beyond that, we also encourage those homes to adopt a new culture, away from the institutional models of the past toward creating a homey atmosphere. I'm pleased that Kansas has earned a reputation for being a leader in this area. At KDOA, we recognize outstanding achievements in this through our PEAK Awards. PEAK stands for Promoting Excellent Alternatives in Kansas nursing homes.

A handwritten signature in black ink that reads "Kathy Greenlee". The signature is written in a cursive, flowing style.

Secretary of the Kansas Department on Aging

Front Cover Photograph: Kansas Silver Haired Legislators meet for their annual session
Photo courtesy of Irv Hoffman, Silver Haired Legislator, Lenexa, Kansas

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KDOA Organizational Chart and Directory

Senior Staff

Secretary Kathy Greenlee.....	785-296-5222
Deputy Secretary, Martin Kennedy.....	785-296-6681
Chief Counsel, Joann Corpstein.....	785-368-7228
Administrative Services Commissioner, Alice Knatt.....	785-296-6464
Acting Licensure, Certification and Evaluation Commissioner, Greg Reser.....	785-291-3374
Public Affairs Director, Barbara Conant.....	785-296-6154
Program and Policy Commissioner, Bill McDaniel.....	785-296-0700

Other Helpful Numbers

Executive Assistant, Traci Ward.....	785-296-5222
Human Resources Director, Carmen Sellens.....	785-296-6361
Nursing Facility Complaint Toll-Free Hotline.....	1-800-842-0078
Long-Term Care Consultant Vera VanBruggen.....	785-296-1246
Senior Health Insurance Counseling for Kansas Hotline.....	1-800-860-5260
KDOA TTD.....	785-291-3167
KDOA Toll Free.....	1-800-432-3535
KDOA Fax.....	785-296-0256

Choices in Consumer Services

Goal: Make an array of high-quality supports and services available to Kansas seniors and other individuals.

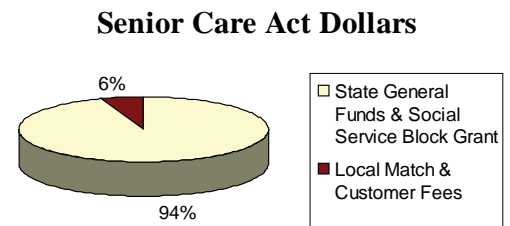
Senior Care Act

Purpose:

The Senior Care Act provides for the development of a coordinated system of in-home services for people age 60 and older who face difficulties in self-care and independent living to prevent inappropriate or premature institutionalization of persons who have not yet exhausted their financial resources. According to last year's Quality Assurance Review of customers, **41% reported services received were the primary reason they were able to stay in their home.**

Dollars:

Although this program is funded through State General Funds, it also includes local funding and customer co-payments. Each customer is charged a fee taken from a sliding scale based on the customer's family size, monthly income and liquid assets. Depending on those factors listed, the fee can be anywhere from a small donation to 100% of the cost of the services. State General Funds along with a Social Services Block Grant provided **\$7,559,539** and with adding local match and customer fees the total amount for Senior Care Act expenditures in FY 2008 equaled **\$8,013,389**.



Number of persons who received Senior Care Act services during FY 2008:

There were 6,069 seniors statewide who received one or more services during the SFY 2008. Approximately 3,008 seniors received one or more services per month. The chart below shows the most common types of services and number of customers served during FY 2008.

Service	Acronyms	SFY 2008
Case Management – Senior	CMGTS	4,509
Assessment	ASMT	4,119
Homemaker	HMKR	3,096
Attendant Care	ATCR	1,310
Other	All Other Services	2,360

Home and Community Based Services - Frail Elderly (HCBS-FE)

Purpose:

The Home and Community-Based Services for the Frail Elderly program provides Medicaid eligible customers with the opportunity to receive cost-effective community based services as an alternative to nursing facility care.

Persons served:

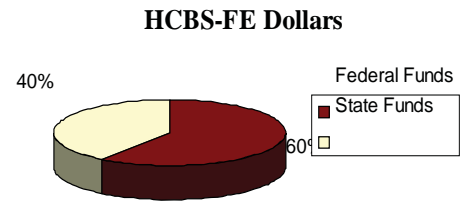
An average of 5,765 seniors a month received services, such as adult day care, sleep cycle support, installation and rental of personal emergency response equipment, wellness monitoring, attendant care services levels I and II, assistive technology, nursing evaluation visit, medication reminder, and oral health services.

Service providers:

Through FY 2008, the average monthly number of HCBS/FE providers increased slightly to 339 unduplicated active providers per month from 336. With the implementation of the dental program in 2008, dental providers have increased to 24.

Dollars:

In FY 2008, \$65,740,826 was expended for services. The average cost per customer for HCBS/FE services was \$950 per month. Of this amount for services, approximately 60% is federally funded and 40% is state funded.



Targeted Case Management

Purpose:

Targeted Case Management (TCM) provides long-term case management to Medicaid eligible frail elders who are seeking assistance to remain in their homes or community. TCM services include developing and updating plans of care, resource development, assisting the customer in acquiring needed services, ensuring that public and private resources are being used efficiently. As of April 2008, assessment and re-assessment became a part of TCM services for Title XIX Medicaid eligible individuals, which had previously been a separate component funded through Medicaid Administration. The service is funded as a Medicaid State Plan Service expense rather than an expense to the Home and Community-Based Services/Frail Elderly waiver.

Persons Served:

TCM SFY 08 served a monthly average of 4,540 customers.

Dollars:

In FY 2008, the average cost per customer per month for TCM was \$99, which breaks down to approximately 2.28 hours of service delivery per customer per month. The total cost of TCM services was \$5,276,487. These services are broken down with an approximate match of 60% federal funds and 40% state funds.

Client Assessment Referral and Evaluation Program (CARE)

Purpose:

The Client Assessment Referral and Evaluation provides an assessment to identify customer preferences on long-term care service options to determine appropriate placement in long-term care facilities and collects data regarding individuals being assessed for possible nursing facility placement. The CARE program complies with Federal PASRR laws, evaluates needs for community services, provides information and education regarding long term care choices, and diverts over 19% of long term care residents to community living. A savings of \$1,778 per month is realized for each individual utilizing Medicaid services and able to return to the community after a nursing facility stay.

Persons served:

A total of 12,926 Level I assessments were completed for individuals; 151 individuals received more than one assessment due to a significant change in their physical and/or mental health condition. A total of 510 Level II assessments were completed. Of those, 410 were for persons with mental illness, and 100 with mental retardation/developmental disability. Follow-up contact is made 30 days after receiving the CARE assessment. In SFY 2008, at the 30-day follow-up, 2,359 individuals (19.4%) had been diverted from nursing home care.

Diversion emphasis:

The CARE program had a diversion rate at 30 days for SFY '08 of 19.4%, compared to SFY '07 of 14.5%. This achievement means that in Kansas nearly 1 in 5 persons who enter a nursing facility are able to return to the community.

Dollars:

In SFY 2008, the average contracted cost for a Level I assessment was **\$89** and the total assessment costs were **\$1,153,847**. The average costs for a Level II assessment was **\$282**. Total Level II assessment costs were **\$144,000**.

During SFY 2008, the average monthly Medicaid payment for a resident in a nursing facility was **\$2,831**. During the same time, the average monthly Medicaid payment for a person served by the Home and Community-Based Services-Frail Elderly (HCBS-FE) waiver program was **\$950**. Approximately 61% of the Medicaid cost is federally funded, while 39% is state funded. Although additional costs are incurred for HCBS-FE customers, the potential overall saving from those individuals who were diverted from more costly nursing facility care for an entire year is approximately **\$29.8 million**.

Money Follows the Person

Purpose:

The Money Follows the Person Project allows funds for persons living in nursing homes to be transferred to the Home and Community Based Services (HCBS) Frail Elderly (FE) or Physically Disabled (PD) waiver program upon relocation to the community. Qualifications for this program require a 90-day continuous stay.



Persons served:

Twelve people moved from nursing homes to the HCBS-FE waiver program and 17 people moved to the HCBS-PD waiver program.

Dollars:

The state general funds were transferred from the nursing home budget (KDOA) to the HCBS-Physically Disability waiver budget (SRS) twice a year. The total state general fund transfer in SFY 2008 was **\$94,910** for the Frail Elderly Waiver and **\$140,759** for the PD Waiver, for a total of **\$235,669**.

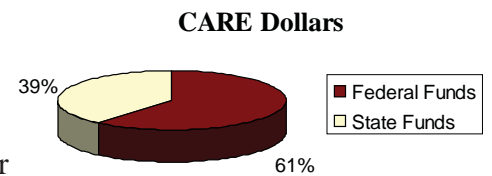
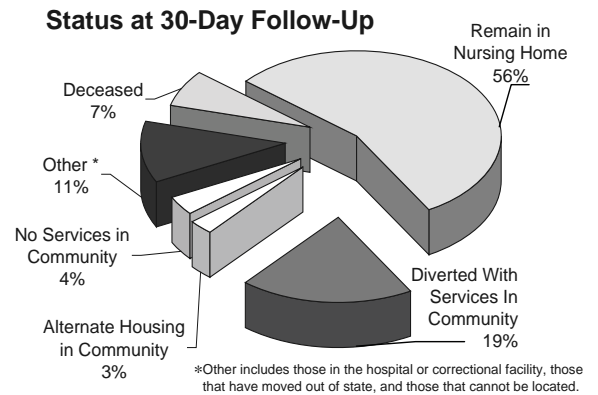
Nursing Facility Rate-Setting

Purpose:

KDOA is responsible for setting Medicaid rates for nursing homes. At the end of SFY 2008, 323 Medicaid certified nursing homes provided 24-hour skilled nursing care. The Medicaid rates are case mix adjusted based on the acuity level of Medicaid residents.

Persons served:

Services were provided to an average of 10,581 Medicaid eligible residents each month during the year, a decrease of 0.7% from the previous year. Approximately 92% of all nursing facility residents were over age 65,

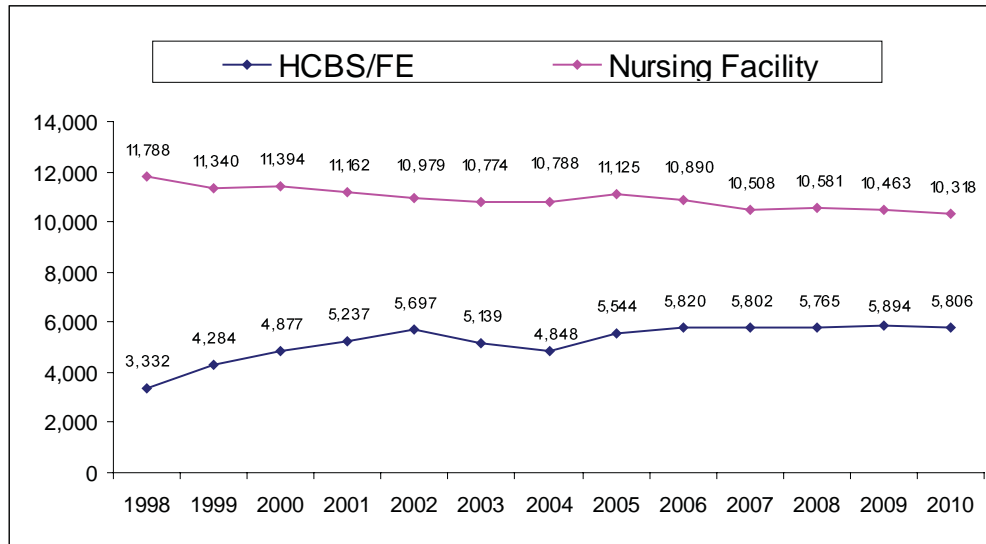


and about 72% were female. The average age of female nursing home residents was 85, and the average age for male residents was 80. The combined average age was 83.

Dollars:

The total nursing home expenditure in SFY 2008 was \$355.5 million (\$143.4 million state funds), a 3.3% increase from the previous year. The budget is approximately 60% federally funded and 40% state funded.

Kansas LTC Medicaid Average Caseload



Demographics of those served (Resident Acuity Level Profile as of July 1, 2009):

CATEGORY	RESIDENT CASE MIX		
	EXAMPLES OF PATIENT CHARACTERISTICS	PERCENT TOTAL RESIDENTS	PERCENT MEDICAID ONLY
Rehabilitation	Rehabilitation therapy received	11.16%	6.79%
Extensive Services	In past 14 days, received intravenous medication, tracheotomy care, required ventilator/respirator, or in past 7 days received intravenous feeding	5.73%	4.34%
Special Care	Multiple sclerosis, cerebral palsy, quadriplegia, or respiratory therapy	8.49%	8.67%
Clinically Complex	Comatose, have burns, septicemia, pneumonia, internal bleeding, dehydration, dialysis, or receive chemotherapy	20.05%	22.22%
Cognitive Impairment	Alzheimer's disease or other types of dementia	12.47%	13.32%
Behavior Problems	Resists care, combative, physically and/or verbally abusive, wandering, or delusional	1.26%	1.64%
Physical Function	Restricted physical functions	40.84%	43.02%

Senior Health Insurance Counseling for Kansas (SHICK)

Purpose:

More than 400 Senior Health Insurance Counseling for Kansas volunteers, working through 15 regional Sponsoring Organizations across the state, help Kansans understand their Medicare benefits. SHICK counselors provide information and assistance with Medicare claims and appeals, Medicare Prescription Drug Coverage (Part D), Medicare supplemental insurance (Medigap) policies, and long term care financing and options. SHICK counselors also help eligible consumers access the assistance programs offered by pharmaceutical companies to reduce medication costs.



Number of persons served during GFY 2007:

SHICK services are available to all Kansas Medicare beneficiaries at no cost to the customer. The SHICK program provided counseling services to 21,902 Kansans and reached 1,077,888 people thru media and outreach events in the 2007 grant year.

Dollars:

SHICK is funded by a grant from the Centers for Medicaid and Medicare Services (CMS). CMS provided a SHIP Basic grant of **\$378,512** for the 2007 grant year.

SMP

Purpose:

The Kansas SMP program (formerly Senior Medicare Patrol) educates Medicare and Medicaid beneficiaries and providers on how to recognize and report health care error, fraud and abuse. Kansas SMP collaborates with community-based organizations across the state to recruit retired professionals and train them as volunteer educators.

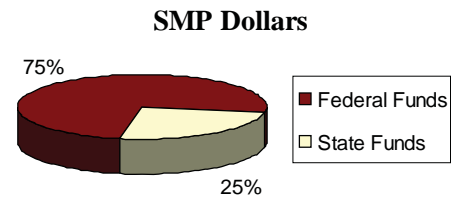


Persons served:

SMP trained 65 new volunteers in grant year 2007. Staff and volunteers provided education about health care fraud and abuse to nearly 6,000 people through community education and media events. Kansas SMP also helped process 106 fraud inquiries.

Dollars:

Kansas SMP is funded by a grant from the Administration on Aging (AoA), with 75% federal funds being matched with 25% state funds. In grant FY 2007, AoA provided **\$63,930** and the state provided **\$21,311**.



Lifelong Communities Initiative

Purpose:

The quality of life for senior citizens in Kansas communities is enhanced through participation in the Lifelong Communities Initiative. KDOA assists communities to plan for and better serve seniors in the six Lifelong areas: Business, Community Service, Health Care, Housing, Transportation and Government. The Initiative was previously recognized as a “Program Champion” by the U.S. Administration on Aging (AoA). The honor is designed to highlight programs and initiatives that demonstrate principles of the AoA strategy to modernize health and long term care for senior citizens and those with disabilities.



Communities designated lifelong:

This year Topeka was officially named a Lifelong Community. In 2007, Dodge City, Great Bend and Chase County were officially named Lifelong Communities. Communities are recognized for innovation in providing community service projects for seniors. Projects that benefit seniors benefit everyone in a community.

A Lifelong Communities Tool Kit was developed to help Kansas communities become familiar with how to participate in the Initiative. The Tool Kit contains the community assessment tool, template for action plans and implementation of community projects. Technical assistance is provided to each community throughout the process by KDOA staff.

The four-step process involves the follows:

- 1) Obtain support from local government;
- 2) Complete community assessment tool;
- 3) Develop and implement action plan;
- 4) Verification, designation.

Dollars:

KDOA does not have a budget line item for this Initiative. Money needed to participate in the Initiative is driven by the community's action plan. Minimal expenses are covered through the administrative budget.

Nursing Facility Audits and Quality Review

Purpose:

The KDOA auditors perform desk reviews and field audits on nursing home cost reports to ensure that reimbursement rates for Medicaid residents are in compliance with state and federal regulations and policies. The auditors perform financial compliance reviews of other programs funded by KDOA as required.

Audits done:

In SFY 2008, 327 Medicaid cost reports were desk reviewed and 42 nursing home field audits were completed. Also, field work was completed on two nursing home chains. Because nursing home rates are determined from a rolling three year period, field audit work involves reviewing several years of cost data. The single audit reports were also reviewed for the 11 Area Agencies on Aging (AAA) and other large service providers.

Savings:

Nursing home cost reports were reduced \$3.3 million as a result of desk review adjustments.

Program of All-inclusive Care for the Elderly (PACE)

Purpose:

The Program of All-inclusive Care for the Elderly (PACE) is a form of long term managed care. The provider accepts a capitated rate in the form of a monthly premium to provide all Medicaid/Medicare long term care and medical services. The capitated rates are paid by KDOA, Kansas Health Policy Authority (KHPA)) and the federal Centers for Medicare and Medicaid Services (CMS).

Persons served:

Kansas has PACE projects operated by Via Christi Health Systems in Wichita and Midland Care Connection in Topeka with an average of 204 participants. The average cost per customer per month is \$1,325.

Dollars:

The total PACE expenditures for KDOA was \$3.2 million (\$1.3 million in state funds). The budget is approximately 60% federally funded and 40% state funded.

Aging and Disability Resource Center (ADRC)

Purpose:

The Aging and Disability Resource Center (ADRC) grants create streamlined access to program information, application processes and eligibility determination for all aging and disability services. In Kansas, the ADRC project is collaborating closely with the Social and Rehabilitation Services Real Choice Systems Transformation project as well as other projects that are focused on improving access to community services.

Progress:

The Kansas ADRC has pilot sites in Wichita (Central Plains Area Agency on Aging and Independent Living Resource Center) and in Hays (Northwest Kansas Area Agency on Aging, Living Independently in Northwest Kansas, and Southeast Kansas Independent Living Resource Center). Staff members from the pilot site agencies are working with staff from KDOA, KHPA and SRS as well as community organizations, service providers and consumers to develop tools that will improve access to services. Work teams are developing a searchable online database of available resources; a referral and assessment process that will speed up referrals between partner agencies; and a web-based interface that will help streamline the Medicaid application process.

Dollars:

ADRC is funded by a combined grant from the Administration on Aging (AoA) and the Centers for Medicare and Medicaid Services (CMS). AoA provides 56% of the funding, CMS provides 39%, and the state provides 5%. In the 2007 grant year, AoA provided **\$146,125**; CMS provided **\$103,875**; and the state provided **\$13,158**.

Older Americans Act - Title III-E Family Caregiver Support Program

Purpose:

The Family Caregiver Support Program provides a multifaceted system of support services to assist caregivers. Each Area Agency on Aging determines which services are needed within its planning and service area. Services may include: assistance, information, respite, counseling, support groups, training, and supplemental service (attendant/personal care, bathroom items, chore, flex service, homemaker, transportation, and repair/maintenance/renovation). No fees are charged to the caregiver for services.

Grant Award:

\$1,398,920 (Federal only)

Older Americans Act - Title III-B Access, Community and In-Home Services

Title III-B of the Older Americans Act (OAA) provides for Access, Community and In-Home services.

- **Access Services** provide seniors with community services, such as Information and Assistance (receiving current information from KDOA and AAAs regarding opportunities and services), Case Management (determining types and amounts of services needed), Legal Services (provides seniors access to the system of justice by offering advice and representation by an attorney) and Transportation (assisting an individual to get to a location where services are provided).
- **In-Home Services** help seniors remain in their homes and communities and include attendant care services, homemaker services, respite care and adult day care.
- **Community Services** are designed for seniors with the ability to travel to the point of service and encourage seniors to remain active members of the community. Services are provided either directly by the AAA or under contract or grant by other agencies.

Dollars:

Expenditures reported for FFY 08 as of December 31, 2008, were estimated at \$4,204,881. This includes OAA, program income, match, in-kind and mill levy.

III-B Access Services

Service	Persons Served
Information & Assistance*	85,737
Transportation*	601
Outreach*	3,017
Case Management	1,075
Assessment (Abbrev & Full)	719

OAA III-B In-Home Services

Service	Persons Served
Attendant Care	283
Homemaker	653
Visiting*	192
Telephoning*	1,000

OAA III-B Community Services

Service Name	Persons Served
Legal Assistance*	2,527
Screening*	774
Advocacy/Representation*	299
Public Education/Training*	26,879
Newsletter*	180,890
Recreation*	513
Repairs/Maint/Renovation*	150
Shopping*	122
Supervision*	70
Material Assistance	184

Data as of 1/21/09

* From Manually Reported Data

Prevention of Elder Abuse, Neglect and Exploitation (PEANE) Special Project Grants

Purpose:

The Special Project Grants, awarded to a variety of agencies and organizations, are designed to provide either education/training or research for the prevention of elder abuse, neglect, exploitation; or a study of the nature or extent of financial exploitation of the elderly. The grant period is May 1, 2008, through April 30, 2009.

Persons served:

Participants include professionals in the fields of social work, health care, law enforcement, local government services and caregiving.

Dollars:

Title VII FY 08 state award was \$45,843.

Culture Change in Long Term Care

Goal: Enhance Kansans' expectations toward person-directed options in the community and adult care settings.

Promoting Excellent Alternatives in Kansas (PEAK)

Purpose:

The Promoting Excellent Alternatives in Kansas (PEAK) program promotes and supports culture change in nursing homes as they pursue person-directed care in the areas of resident control, staff empowerment, home environment, and community involvement. The two components of PEAK are recognition and education. KDOA has partnered with Kansas State University's Center on Aging to provide the education component, which includes developing resources and training nursing home staff in how to begin and sustain the culture change journey.



PEAK Awards:

Since 2002, KDOA has recognized homes for their achievements in person-centered care. The 2008 PEAK winners were:

- Atchison Senior Village, Atchison.
- Brandon Woods Retirement Community, Lawrence.
- Brewster Health Center, Topeka.
- Brookside Retirement Community, Overbrook.
- Cheney Golden Age Home, Cheney.
- Greeley County Long-Term Care Unit, Tribune.
- Johnson County Nursing Center, Olathe.
- Minneapolis Good Samaritan Center, Minneapolis.
- Parkside Homes, Hillsboro.
- Village Shalom, Overland Park.

Dollars:

There are no funds budgeted for the PEAK Nursing Home initiative. Fund raising is conducted annually to cover the cost of the recognition. The Civil Monetary Penalty fund was used to provide a small cash gift to the homes recognized.

Long Term Care Division

Purpose:

The Long Term Care Division professional staff, which consists of two registered nurses, a registered licensed dietitian, and an environmental specialist, serve as consultants to consumers, adult care home providers, health care facility surveyors and other stakeholders in the long term health care industry. Consultation is provided through individual technical support and participation in workforces. Division staff are also responsible for the development of state adult care home regulations and conducting physical environment inspections of adult care homes following construction projects.

2008 activities:

Staff presented 45 education programs attended by 2,000 individuals. Topics included regulatory updates, care practices and culture change initiatives.

Division staff continued to assist adult care homes transitioning to person-centered care both in practice and in their physical plant. Staff met with 30 adult care home owners/providers to review regulatory requirements for construction and remodeling projects. In addition, 35 onsite licensure inspections were conducted.

Through the Workforce Enhancement Grant, monies totaling \$298,475 were awarded to eight entities to provide education for unlicensed staff in free standing nursing homes and long term care units of hospitals.

Dollars:

In FY 2008, \$500,924 was budgeted from Medicare, Medicaid, state general funds and fee funds. Expenditures were \$499,688.

Mental Health and Residential Care Facilities Division

Purpose:

The Mental Health and Residential Care Facilities Division evaluates intermediate care facilities, assisted living facilities and other “state licensed only” facilities for state licensure and federal certification. These facilities serve several thousand elderly, physically impaired, developmentally disabled and chronically mentally ill individuals who reside in a variety of institutional and community-based settings.

State licensing:

Of the 9,417 beds in state-licensed facilities, 5,762 are within licensed Assisted Living Facilities, 1,551 are in Residential Health Care Facilities, and 790 are encompassed by state institutions for the mentally ill and developmentally disabled. The remaining 1,314 beds are in community-based facilities including boarding care homes, Homes Plus and adult day care centers.

Quality review:

The division also administers the Quality Review Program responsible for collecting field data for use in determining compliance with state and federal regulation by the Area Agencies on Aging (AAAs) and service provision through the state general fund, the Older Americans Act and the Home- and Community-Based Services/Frail Elderly waiver. On-going reviews are completed on a statewide, statistically significant sample of customers.

Dollars:

In FY2008, \$1,526,776 was budgeted from Medicare, Medicaid, Older Americans Act, state general fund and fee funds. Expenditures were \$1,415,560.

Licensure and Certification Division

Purpose:

The Licensure and Certification Division promotes excellence in the health care and living conditions of the 18,314 individuals residing in nursing homes through the application of federal and state regulatory standards. Through initial licensure processes and ongoing annual surveys, state surveyors review a variety of aspects of nursing home care. Federal and state regulations assure that residents receive care that meets accepted standards. Other regulations assure that residents’ rights are protected and they are protected from abuse, neglect and exploitation. In addition, the surveyors examine the physical environment to assure facilities provide safe

and sanitary conditions for residents. Fire and safety inspections are provided under contract by the State Fire Marshal.

This division is also responsible for surveyor training and orientation; survey quality improvement efforts; policy and procedure development; survey management; enforcement activities; complaint intake; referral and investigation management. Many of the activities of the Division are performed under contract to the federal Centers for Medicare and Medicaid Services (CMS).

The Division is required to survey all nursing facilities within an overall 12-month average, with no individual facility exceeding 15 months.

Nursing home complaints:

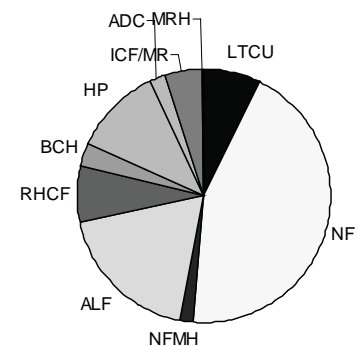
KDOA investigated 6,310 complaints about adult care homes, including some for abuse, neglect and/or exploitation of residents.

Dollars:

In FY2008, \$5,187,461 was budgeted for licensure and certification programs, including complaints, from Medicare, Medicaid, state general funds and fee fund. Expenditures were \$5,093,180.

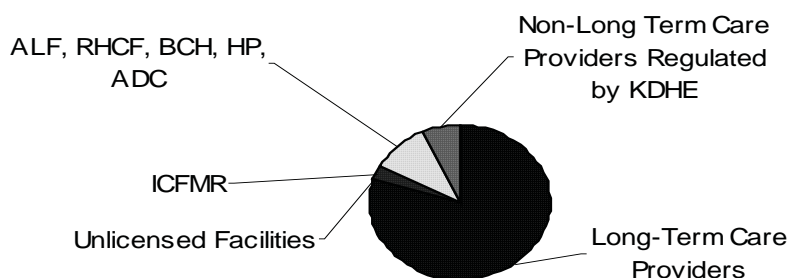
Kansas Facilities by Category		SFY 2008
Certified Long Term Care Units	LTCU	47
Nursing Facilities	NF	293
Nursing Facilities for Mental Health	NFMH	11
Assisted Living Facilities	ALF	123
Residential Health Care Facilities	RHCF	47
Boarding Care Homes	BCH	18
Home Plus	HP	77
Adult Day Care	ADC	12
Intermediate Care Facilities for Mentally Retarded	ICF/MR	31
Mental Retardation Hospitals	MRH	2
TOTAL		661

Kansas Facilities by Category



Number of Complaint Intakes	SFY 2008
Long-Term Care Providers	5,031
Unlicensed Facilities	-
ICFMR	186
ALF, RHCF, BCH, HP, ADC	648
Non-Long Term Care Providers Regulated by KDHE	445
TOTAL	6,310

Number of Complaint Intakes - SFY 2008



Partnership Loan Program and Partnership Grant Program

Purpose:

The Partnership Loan Program supports the expansion of services and housing alternatives for senior Kansans by providing low interest loans. The Partnership Grant Program uses interest income from the PLP loans to fund competitive matching grants for the benefit of long term care programs.

PLP Projects:

Since the inception of the PLP, 10 housing projects with a total of 150 units have been funded. They are located in Anthony, Caldwell, Dighton, Eskridge, Holyrood, Newton, Norton, Hutchinson, Wilson and Winchester. The PLP focuses on rural communities lacking adequate housing options for seniors and more recently, innovation in the long term care environment. In FY 2007, KDOA financed Green House® projects in Newton and Hutchinson. These group homes for elders, built to residential scale, provide the necessary clinical care found in nursing homes in a more social environment. Residents and staff benefit from the homes' person-centered approach to daily living.

PGP Projects:

A grant was awarded in FY 2007 from the PGP to establish a long term care home telehealth pilot project in Southeastern Kansas. A second grant was awarded in FY 2008 to extend the pilot for an additional year and increase the number of participants. This proactive care model, involving technology and telecommunications, provides participants with chronic diseases the opportunity to take an active role in their health care by helping to identify the need for preventive intervention before situations become acute. KU Medical Center has signed a research contract to determine the effectiveness in terms of cost and quality of life for this type of care delivery system on a frail elderly population living in a community environment.

Dollars:

Total funds distributed or committed for distribution from program inception through SFY08: Partnership Loan Program, \$5,638,491; Partnership Grant Program, \$486,609.

Healthy Aging

Goal: Help Kansas seniors achieve healthier, more active lives through prevention and intervention.

Older Americans Act - Title III-C Nutrition Program

Meals are provided to eligible participants on a contribution basis in a congregate setting (Title III-C(1)), or within a homebound individual's place of residence (Title III-C(2)).

Persons served:

There were 24,911 congregate customers (67%) provided with 1,564,311 meals and 12,323 home delivery customers (33%) provided with 1,827,515 meals in FFY 2008.

Demographics of those served:

Characteristics of persons receiving meals are shown in the following table:

Characteristics	Congregate	Home Delivered
Male	36%	32%
Female	64%	68%
Lives alone	44%	54%
Aged 60 and under	6%	1%
Aged 61 to 74	38%	27%
Aged 75 to 84	38%	38%
Aged 85 or older	18%	34%

Dollars:

\$17,811,494 from all sources was spent to provide meals to seniors in FFY 2008.

Senior Farmers Market Nutrition Program

Purpose:

The Senior Farmers Market Nutrition Program promotes better nutrition among low-income seniors age 60 and up and expands the revenue base for farmers marketing fresh, locally grown produce at organized farmers markets, roadside stands and community supported agriculture farms.



People served:

- 5,217 low-income seniors (benefit as checks) and 5,299 low-income seniors (benefit as bundles) served through two food assistance programs each received fresh fruits, vegetables and herbs. The food assistance programs were the Commodity Supplemental Food Program (CSFP), the Emergency Food Assistance Program (TEFAP).
- 143 growers received \$161,030 (federal) and \$12,192 (state).

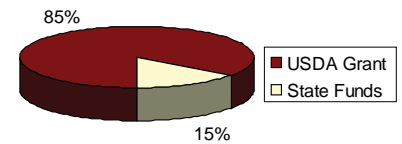
Locations:

The program was available in 18 Kansas counties: Atchison, Bourbon, Cowley, Dickinson, Douglas, Finney, Harvey, Johnson, Leavenworth, Lyon, McPherson, Reno, Republic, Riley, Saline, Sedgwick, Shawnee and Wyandotte.

Dollars:

The program was funded under a **\$188,580 USDA grant** and **\$33,157** in state funds for 2008.

Senior Farmers' Market Nutrition Program Dollars



Seniors Together Enjoy Physical Success (STEPS)

Purpose:

The Seniors Together Enjoy Physical Success (STEPS) program funded community fitness classes addressing unique physical needs of seniors age 60 and over. Instructors are nationally certified and trained in fitness for seniors. STEPS is a component of the Governor’s Healthy Kansas Initiative. Participants are assessed before they begin classes and throughout to evaluate overall strength and balance.



Persons served:

In 2008, STEPS classes were offered in Concordia, Cottonwood Falls, Dodge City, Garden City, Great Bend, Haysville, Hiawatha, Oberlin, Osawatomie, Topeka (YMCA and YWCA), and Winfield. Each location can have up to 25 participants.

Dollars:

This project is a three-year grant for the period of 2006 through 2008 and is funded by The Sunflower Foundation: Health Care for Kansans. The total grant amount is \$150,000.

Older Americans Act - Title III-D Disease Prevention and Health Promotion Services

Title III-D of the Older American Act provides Disease Prevention and Health Promotion Services grants to Area Agencies on Aging. These grants support any of the 15 health-related services, such as health risk evaluations, screening, nutrition counseling, health promotion programs, physical fitness and exercise programs, home injury control screening and the screening for the prevention of depression.

Budget/Funding Source/Actual Expenditures:

\$210,530 from all sources was expended for health-related services in FFY 2008.

**Number of estimated persons served during FY 2008:
(as of 1/21/09):**

Services	Persons Served
Screening	1,435
Nutrition Education	132
Health Promotion Programs	2,543
Physical Fitness and Exercise Programs	1,062
Medication Management Education	3,736
Information on Age-Related Disorders	721

Sources of Funding

Following are the Kansas Department on Aging's major program groups and sources of funding:

Medicaid programs

- Nursing homes
- Program of All-inclusive Care of the Elderly (PACE)
- Client Assessment Referral and Evaluation (CARE)
- Home and Community-Based Services for Frail Elderly (HCBS/FE)
- Targeted Case Management (TCM)

Older Americans Act (OAA) programs

- III-B Access, In-home and Community Services
- III-D Disease Prevention and Health Promotion
- III-E National Family Caregiver Support Program
- VII Allotments for Vulnerable Elder Rights Protection Activities

Older Americans Act (OAA) Nutrition Programs

- III-C Nutrition
- Match and Non-Match
- U.S. Department of Agriculture

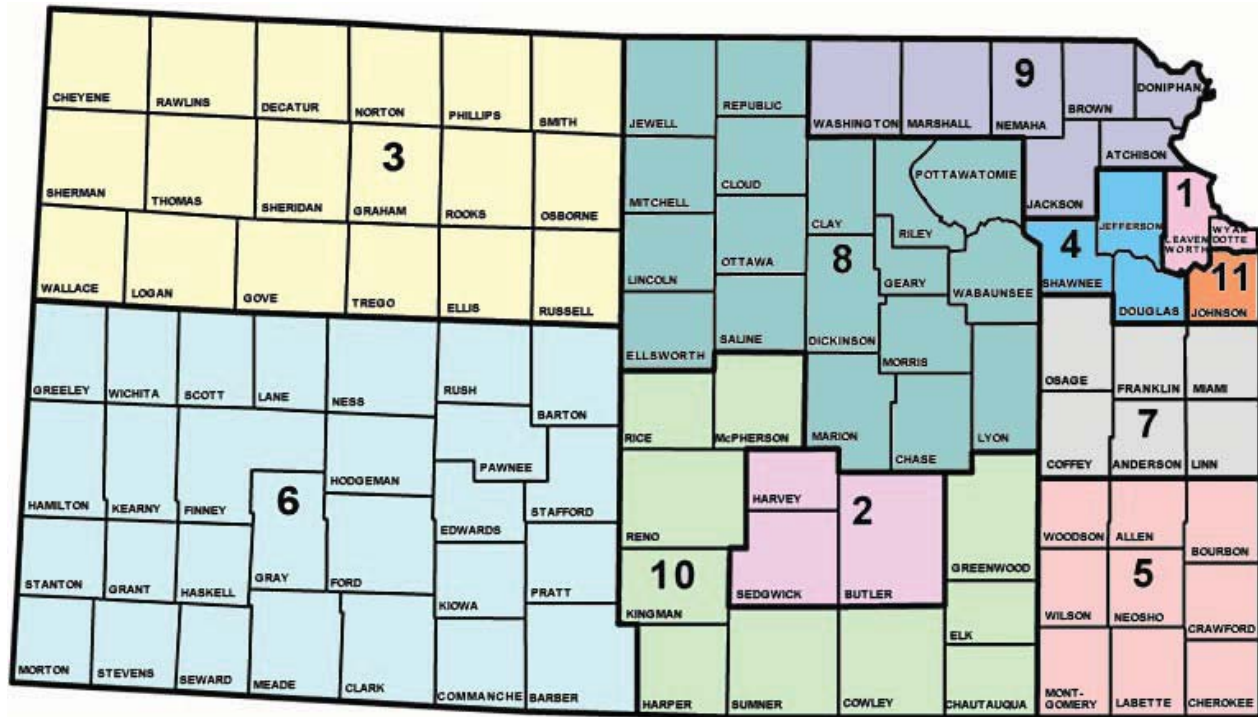
State funded Programs

- Senior Care Act (SCA)

Other

- Senior Health Insurance Counseling for Kansas (SHICK) – Centers for Medicare & Medicaid Services (CMS)
- Seniors Farmers Market Nutrition Program – U.S. Department of Agriculture (USDA)
- SMP – Administration on Aging grant with 25% matching state funds
- Aging and Disability Resource Center – Grants from the Administration on Aging and Centers for Medicare and Medicaid Services, with 5% matching state funds
- Seniors Together Enjoy Physical Success (STEPS) – Grant from The Sunflower Foundation: Health Care for Kansans
- Partnership Grant Program (PLP) – Kansas Intergovernmental Transfer
- Partnership Loan Grant (PGP) – Interest from Partnership Loan Program loans

Area Agencies on Aging



The Department on Aging administers many of its programs through grants and contracts of state and federal funds to the 11 Area Agencies on Aging (AAAs) and other providers serving designated geographical areas. For programs not funded by Medicaid, the AAAs may directly provide services or award sub-grants and contracts to other community organizations to provide services. In FY 2008, the AAAs provided services through the following programs:

- Older Americans Act (OAA);
- Congregate Meals;
- Home Delivered Meals;
- In-Home Services for the Frail Elderly;
- Disease Prevention and Health Promotion;
- Elder Abuse Prevention;
- Home and Community Based Services for Frail Elderly (HCBS-FE);
- Targeted Case Management (TCM);
- State-funded Case Management;
- Senior Care Act (SCA);
- Client Assessment, Referral, and Evaluation (CARE) program; and
- Family Caregiver Support Program.

Each AAA serves a Planning and Service Area (PSA), required under the Older Americans Act, and has a director, staff members, and a local advisory board. Employees of the AAA are not state employees but are employed by each AAA's governing body, which can be a governmental entity or nonprofit organization.

Area Agencies on Aging Directory

PSA 01

Wyandotte-Leavenworth AAA

Ruth Jones, director
1300 N. 78th St., Suite 100
Kansas City, KS 66112-1540
913-573-8532 / 1-888-661-1444
Fax: 913-328-4577

PSA 02

Central Plains AAA

Annette Graham, director
2622 W. Central, Suite 500
Wichita, KS 67203-3725
316-660-7298 / 1-800-367-7298
Fax: 316-383-7757

PSA 03

Northwest KS AAA

Greg Hoover, director
510 W. 29th St., Suite B
Hays, KS 67601-3703
785-628-8204 / 1-800-432-7422
Fax: 785-628-6096

PSA 04

Jayhawk AAA

Jocelyn Lyons, management team leader
2910 SW Topeka Blvd.
Topeka, KS 66611
785-235-1367 / 1-800-798-1366
Fax: 785-235-2443

PSA 05

Southeast KS AAA

John Green, director
1 W. Ash
Chanute, KS 66720-1010
620-431-2980 / 1-800-794-2440
Fax: 620-431-2988

PSA 06

Southwest KS AAA

Dave Geist, director
236 San Jose Dr.
Dodge City, KS 67801-1636
620-225-8230 / 1-800-742-9531
Fax: 620-225-8240

PSA 07

East Central KS AAA

Elizabeth Maxwell, director
132 S. Main
Ottawa, KS 66067-2327
785-242-7200 / 1-800-633-5621
Fax: 785-242-7202

PSA 08

North Central Flint Hills AAA

Julie Govert-Walter, director
401 Houston
Manhattan, KS 66502
785-776-9294 / 1-800-432-2703
Fax: 785-776-9479

PSA 09

Northeast KS AAA

Jim Beckwith, director
526 Oregon
Hiawatha, KS 66434-2222
785-742-7152 / 1-800-883-2549
Fax: 785-742-7154

PSA 10

South Central KS AAA

Jodi Abington, director
304 S. Summit
Arkansas City, KS 67005
620-442-0268 / 1-800-362-0264
Fax: 316-442-0296

PSA 11

Johnson County AAA

Linda Wright, director
11811 S. Sunset, Suite 1300
Olathe, KS 66061-7056
913-715-8800 / 1-888-214-4404
Fax: 913-715-8825

2008 Annual Report of the State Advisory Council on Aging

The 15 members of the State Advisory Council on Aging represent diverse geographical, social and ethnic groups and by statute, at least half of the membership must be 60 years of age or older. The council meets at least twice a year. It serves in an advisory capacity to KDOA, the Governor and other public and private, state and local agencies affecting aging issues as required by the federal Older Americans Act and has the duty to review and comment on KDOA activities.

State Advisory Council members:

- Trish Moore, Overland Park, chair
- Rep. Bob Bethell, Alden
- Leo Bracciano, Lawrence
- Rita Griffith, Overland Park
- Sen. David Haley, Wyandotte
- Irv Hoffman, Lenexa
- Barbara Hutchinson, Circleville
- Luella “Lu” Janzen, Hillsboro
- Patrick Lawless, Jr., Osage City
- John Lehman, Sabetha
- Bill Moriarity, Hays
- Rep. Shirley Palmer, Fort Scott
- Sen. Vicki Schmidt, Topeka
- Jean Taylor, Topeka
- Larry Turner, Wichita

The State Advisory Council on Aging (SAC) met quarterly in SFY 08. Secretary Kathy Greenlee provided agency updates at each of the meetings.

On September 7, 2007, Teresa Schwab, Executive Director with Oral Health Kansas, and Bill McDaniel, Commissioner, Program & Policy, the Kansas Department on Aging, presented to SAC Members on dental services.

On December 7, 2007, Irv Hoffman, President of the Kansas Silver Haired Legislature, provided information to members on the outcome of the 2007 Kansas Silver Haired Legislative Session.

On March 7, 2008, Cindy Hermes from the Kansas Insurance Department discussed the Long-Term Care Partnership Program; and Barbara Conant, Director of Public Affairs with KDOA, gave a legislative review and review of KDOA’s SFY 2007 Annual Report.

On June 6, 2008, KDOA’s McDaniel and Angie Reinking, Money Follows the Person Project Manager with the Kansas Department of Social and Rehabilitation Services, presented to the group on that project.

Several of the SAC members attended the 2008 Governor’s Conference on Aging Services. They also provided input regarding Older Americans Act programs to ensure that they were consistent with the statute mandates.

Council members were active in representing senior interests in their communities.

2008 Report of the Kansas Silver Haired Legislature

The Silver Haired Legislature is a body of individuals age 60 and older who are elected by their peers to develop bills and resolutions that are of interest to Kansas elders and their families. The Silver Haired Legislature then will work with the Kansas Legislature to get its bills and resolutions introduced and passed.

SHL officers are:

President: Irv Hoffmann
Vice President: Rosalie Seemann
Treasurer: Bill Dean
Secretary: Ted Hutchcraft
Speaker: Jim Snyder
Speaker Pro Tem: Mary Ann Flunder
Floor Leader: Carlton McNair



The following bills and resolutions were approved during its 26th annual session October 1 and 2, 2008, at the Ramada Hotel & Convention Center located at 420 SE 6th Avenue in Topeka, Kansas:

SHL Bill No. 2501 - Resolution to urge the Kansas Legislature to enact legislation during the 2008 regular session to help combat predatory payday lending practices and predatory practices by consumer loan agencies and Income Tax Refund Advance lending practices that adversely affect elderly and other residents of Kansas.

SHL Bill No. 2502 - Resolution supporting increased funding for home and community based services and nutrition programs.

SHL Bill No. 2503 - Resolution requesting cities, counties and other municipalities with traffic signals to adjust or otherwise provide for timing of traffic lights at crosswalks for seniors and persons with disabilities to allow adequate pedestrian crossing times.

SHL Bill No. 2504 - Bill providing for mandatory reinstatement of certain insurance policies.

SHL Bill No. 2505 - Bill imposing an excise tax on wind generated electricity with proceeds to the Senior Services Trust Fund for senior services funding.

In other business, the Silver Haired Legislature handed out its Caring Award to all the employees of the Kansas Department on Aging for “their exceptional concern for seniors of Kansas.”

Awards also were presented to:

- Mary Ann Flunder, Kansas City, KS, Verna Devine, Iola, and Dorothy Zook, Hesston, for exceptional contributions to the SHL.
- Marva Williams, who serves as KDOA’s liaison to the SHL, for outstanding contributions to the SHL.
- Silver Haired Legislators Mel Henderson, Leawood, and Rosalie Seeman, Levant, for meritorious service.



Silver Haired Legislators, Irv Hoffman and Jim Snyder present the Caring Award to KDOA at a staff meeting. KDOA employee Heidi Burris accepted the award on behalf of the department.

A list of Silver Haired legislators can be found on the KDOA website at:
http://www.agingkansas.org/Advocacy_Legislation/Legislative/silver/2008roster.htm



DEPARTMENT ON AGING

New England Building

503 S. Kansas Avenue

Topeka, KS 66603

1-800-432-3535

www.agingkansas.org