

Department of Health and Human Services

**OFFICE OF
INSPECTOR GENERAL**

**COST SHARING FOR OLDER
AMERICANS ACT SERVICES**



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OBJECTIVES

To assess the extent to which States have implemented cost sharing under the Older Americans Act (OAA).

To determine whether States implementing cost sharing under the OAA do so in accordance with requirements designed to protect low-income individuals' access to services.

BACKGROUND

The Administration on Aging (AoA) has asked the Office of Inspector General to assess States' implementation of cost sharing. In 2000, amendments to the OAA allowed States to implement cost sharing for certain OAA services. Cost sharing provides a mechanism for States to expand services to a growing number of Americans 60 years of age and older. However, there is a general concern that cost sharing could negatively impact participation of certain individuals, particularly those with low incomes. This study is intended to provide relevant information to AoA and to Congress as they consider any changes to cost sharing during the current reauthorization of the OAA.

The OAA was enacted in 1965 and authorized a range of social service and nutrition programs. It also created AoA, which carries out its responsibilities by coordinating with State Units on Aging (State Units), Area Agencies on Aging (area agencies), tribal organizations, and local service providers. AoA distributes funds to States through Title III, Grants for State and Community Programs on Aging. Title III-B funds supportive services, Title III-C funds nutrition services, Title III-D funds disease prevention services, and Title III-E funds the National Family Caregiver Support Program.

The amendments to the OAA include a number of requirements for States that choose to implement cost sharing. These requirements are intended to ensure that low-income older individuals can obtain services. Pursuant to the OAA, States and area agencies must develop cost-sharing plans. The OAA further provides that States require area agencies and local service providers to exclude individuals with incomes at or below the Federal poverty line from cost sharing; not deny services to individuals who do not pay; account for payments; and inform recipients about cost sharing. Also, States must establish sliding scales for cost sharing based on income. Additionally, AoA must determine the impact of cost sharing on participation rates.

This study looks at the extent to which States have implemented cost sharing and whether they have implemented it in accordance with statute requirements. We based this study on data gathered from multiple sources: a written survey completed by State Unit representatives from all 50 States, Puerto Rico, and the District of Columbia; a review of relevant State documents regarding cost sharing implementation, program revenue, and participation; structured interviews with State Unit representatives, area agency officials, and State data officials; and a review of AoA's National Aging Program Information System/State Program Reports (NAPIS/SPR) and individual State data. AoA collects participation data for many of the OAA services through the NAPIS/SPR. AoA uses the NAPIS/SPR data to plan and manage activities performed and services provided under the OAA.

FINDINGS

States' implementation of cost sharing for OAA services is limited.

Twelve States have implemented cost sharing for at least one OAA service. None of these States has implemented cost sharing for all OAA services for which cost sharing is allowed. Further, in at least 6 of the 12 States, fewer than 350 individuals participate in cost sharing in each of these States.

The States that have implemented cost sharing do not always follow OAA requirements for cost sharing that are designed to protect low-income individuals' access to services.

The States that have implemented cost sharing do not always follow key OAA requirements. Nine States have not developed cost-sharing plans to ensure that the participation of low-income individuals receiving services will not decrease with the implementation of cost sharing. Five States permit individuals with incomes at or below the Federal poverty line to cost share. Six States either deny services to individuals who do not pay or make cost sharing appear mandatory. Three States have not established sliding scales as required by the OAA. Six States do not have policies for accounting for cost-share payments. Finally, none of the States has created the required written materials that explain cost sharing to recipients.

AoA has provided limited guidance to States and State officials are often confused about features of cost sharing under the OAA.

AoA has provided limited guidance to States on implementing cost sharing in

accordance with the OAA. AoA conducted an initial training session for its regional offices. However, the training did not cover key requirements such as the plans States are required to develop and the written materials that explain cost sharing that States must create. In addition, we found that AoA officials have limited information about how States are implementing cost sharing. For instance, they have little knowledge about States' plans regarding cost sharing, their sliding scales, accounting for cost-share payments, or informing recipients about cost sharing. Finally, we found that officials from States and area agencies often are confused about cost sharing for OAA services.

AoA's participation data cannot be used to determine the impact of cost sharing on participation rates. AoA is required to conduct an annual evaluation of cost sharing to determine its impact on the participation rates of individuals targeted by the OAA. AoA collects participation data for many OAA services through the NAPIS/SPR. We found that States report data in the NAPIS/SPR differently and that the demographic data in the NAPIS/SPR are incomplete. As a result, data in the NAPIS/SPR do not present a complete picture of participation and, therefore, cannot be used to measure any impact cost sharing might have on overall participation or on participation of low-income individuals and other subgroups specified in the OAA.

RECOMMENDATIONS

Based on these findings, we recommend that AoA:

Ensure that States' cost-sharing practices comply with requirements designed to protect low-income individuals' access to services. AoA should address State and area agency practices that permit low-income individuals to participate in cost sharing. AoA should also address State and area agency practices that deny services to older individuals due to income or failure to make a cost-share payment, as well as practices that make cost sharing appear mandatory. In addition, AoA should address the States' lack of cost-sharing plans, sliding fee scales, policies for accounting for payments, and written material that explain cost-sharing.

Provide additional guidance to States about implementing cost sharing in accordance with the OAA. AoA should provide additional guidance to States regarding how to implement cost sharing in accordance with OAA requirements. The guidance should address issues such as (1) developing plans to ensure that the participation of

low-income individuals will not decrease with the implementation of cost sharing; (2) excluding low-income individuals from cost sharing; (3) prohibiting the denial of services; (4) establishing sliding scales; (5) developing procedures to account for cost-sharing payments; and (6) preparing written materials to inform recipients about cost sharing. AoA should also develop additional strategies to keep States informed about these issues.

Improve the quality of the NAPIS/SPR data so that any effects of cost sharing can be measured. AoA should improve the quality of its data to measure any future impacts cost sharing may have on participation rates, as required by the OAA. During the course of this study, AoA has addressed some of the data problems. Specifically, the NAPIS/SPR now retains records with missing data elements; the NAPIS/SPR now collects some demographic data for recipients of Title III-E services; and AoA is no longer required to approve waivers to States. However, AoA has not addressed the differences in State reporting.

When addressing these differences, AoA needs to give clear and consistent instructions to States and consider whether to continue directing States to report information for all services, including those funded solely by State or local entities. If the NAPIS/SPR includes data about non-OAA-funded services, then AoA needs to consider how it will determine any effects of cost sharing on participation in OAA programs and services, as required by the OAA.

In addition, the inconsistency of AoA's participation data has implications beyond cost sharing. This study focuses only on cost sharing, but the differences in data reporting raise questions regarding how AoA can use the data to effectively plan and manage activities funded under the OAA. This broader issue affects AoA's capacity to manage all aspects of these services, not only cost sharing.

AGENCY COMMENTS

AoA provided comments on the draft report. In general, AoA agrees with our findings that cost sharing is limited and that States are confused about cost sharing. AoA states that it has taken many steps to educate the Aging Network on cost sharing and does not agree with our finding that it has provided limited guidance to States. AoA also states that our observations about NAPIS/SPR are outside the scope of the study and that it has made several improvements to NAPIS/SPR over

the last 5 years. In response to our recommendations, AoA notes that it will follow up on our observations and correct instances of noncompliance with the provisions of the OAA. AoA also plans to provide additional guidance to States on an ongoing basis and post more information on its Web site.

OFFICE OF INSPECTOR GENERAL RESPONSE

Where appropriate, we have made changes to the report based on AoA's comments.

Because the OAA requires AoA to determine the impact of cost sharing on participation rates, and NAPIS/SPR is the only data AoA has on participation, we believe that it is necessary to include NAPIS/SPR in any discussion about whether cost sharing has had an impact on participation rates.

We recognize that AoA has made several improvements to NAPIS/SPR over the last 5 years, many of which are noted in the report. However, despite these improvements, we found that the States that cost share report participation data in the NAPIS/SPR differently and include different populations in their counts. This issue is important because it has potential implications beyond cost sharing. These data provide essential information for AoA, including performance outcome information required by the Government Performance and Results Act and the Performance Assessment Rating Tool.

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OBJECTIVES

To assess the extent to which States have implemented cost sharing under the Older Americans Act (OAA).

To determine whether States implementing cost sharing under the OAA do so in accordance with requirements designed to protect low-income individuals' access to services.

BACKGROUND

The Administration on Aging (AoA) has asked the Office of Inspector General (OIG) to assess States' implementation of cost sharing. The year 2000 amendments to the OAA allowed States to implement cost sharing for certain OAA services. AoA defines cost sharing as a method of allowing a recipient to share in the cost of the service received. Cost sharing provides a mechanism for States to expand services to a growing number of Americans 60 years of age and older. However, there is general concern that cost sharing could negatively impact participation of certain individuals, particularly those with low incomes.

This study looks at the extent to which States have implemented cost sharing and whether they have implemented it in accordance with the OAA. It is intended to provide relevant information to AoA and to Congress as they consider any changes to cost sharing during the current reauthorization of the OAA.

The Older Americans Act

The OAA was enacted in 1965 to improve the quality of life for older individuals. It created AoA and authorized a range of social service and nutrition programs. AoA distributes funds to States through Title III, Grants for State and Community Programs on Aging. The funds under Title III are divided as follows:

- Part B funds supportive services, such as transportation, personal care, homemaker, chore, adult day care, and legal assistance.
- Part C funds nutrition services, such as congregate and home-delivered meals and nutrition education.
- Part D funds disease prevention and health promotion services.
- Part E funds the National Family Caregiver Support Program, which was created in 2000 to provide services to family caregivers.

These services include respite care to temporarily relieve caregivers from their responsibilities, as well as supplemental services which complement the care provided by caregivers and include such services as home modifications, emergency response systems, and transportation.

States' allotments are based on the number of residents 60 years and older. All older individuals are eligible to receive OAA services, but States must assure that preference is given to those in greatest economic or social need, particularly minority older individuals and older individuals residing in rural areas.

The Administration on Aging

AoA administers the grants under the OAA. AoA carries out its responsibilities by coordinating with State Units on Aging (State Units), Area Agencies on Aging (area agencies), tribal organizations, and local service providers. AoA is required under the OAA to provide technical assistance and consultation to States with respect to programs for older individuals.¹ In 2004, AoA's budget was \$1.37 billion. AoA has 10 regional offices that assist States in serving the older population.

Each State and U.S. Territory has a State Unit. It is "primarily responsible for the planning, policy development, administration, coordination, priority setting, and evaluation of all State activities related to the objectives of this Act."² Most State Units divide the State into planning and service areas and designate a public or private nonprofit agency or organization as the area agency for each area. These agencies develop and implement area plans for their respective planning and service area. Some smaller States, such as Delaware and Rhode Island, are not divided into planning and service areas and do not have area agencies.

Cost Sharing Amendments to the Older Americans Act

Amendments to the OAA in 2000 allow States to cost share for certain services under Title III. Prior to 2000, States were not allowed to charge fees to individuals using services funded by the OAA.³ However, States were allowed to solicit and collect voluntary contributions from recipients of OAA services.

¹ 42 U.S.C. § 3012(a)(6).

² 42 U.S.C. § 3025(a)(1)(c).

³ States were allowed to charge fees to recipients of State or locally funded services.

As stated in the year 2000 amendments, States are allowed to implement cost sharing for all services except for those explicitly excluded.⁴ Services that States are allowed to cost share include, but are not limited to, Part B personal care, homemaker, chore, adult day care, assisted transportation, and transportation; Part D disease prevention and health promotion; and Part E respite and supplemental services.

Requirements for States that Cost Share

The OAA places a number of requirements on States that choose to implement cost sharing.⁵ These requirements are intended to ensure that cost sharing does not discourage low-income older individuals from obtaining services. Key components of these requirements are listed below.

Development of plans. The OAA requires States and area agencies to develop plans before implementing cost sharing. These plans should be designed to ensure that the implementation of cost sharing will not decrease the participation of low-income older individuals (with particular attention to low-income minority individuals and older individuals residing in rural areas) receiving OAA services.

Exclusion of low-income older individuals. States may not permit cost sharing by individuals with incomes at or below the Federal poverty line.

No denial of services. States must require that area agencies and local service providers not deny services to an older individual due to the individual's income or the individual's failure to make a cost-share payment.

Sliding scales. States are required to establish a sliding scale based solely on individual income and the cost of delivering services. States cannot consider any assets, savings, or other property owned by older individuals when creating their sliding scales.

Accounting and use of cost-share payments. States must ensure that area agencies and service providers establish appropriate procedures to safeguard and account for cost-share payments. States also must

⁴ The year 2000 amendments specifically state that certain services, such as information and assistance, outreach, elder abuse prevention, and meals, are excluded from cost sharing.

⁵ 42 U.S.C. § 3030c-2.

require area agencies and service providers to use collected cost-share payments to expand the service for which the payments were given.

Informing recipients. States must create written materials that explain the criteria for cost sharing, the sliding scale, and the stipulation that services cannot be denied to an older individual due to income or failure to make a cost-share payment. States must require the area agencies and service providers to widely distribute the written materials.

The area agencies in States that implement cost sharing may request a waiver to the State's cost sharing policies when a significant proportion of individuals receiving services in the area have incomes below the threshold established by the State or when cost sharing poses an unreasonable administrative or financial burden on the area agency.

The OAA also requires AoA to conduct a comprehensive evaluation of cost sharing to determine its impact on participation rates. This evaluation should be conducted no later than 1 year after the enactments of the year 2000 amendments to the OAA and annually thereafter. AoA must take corrective action if it finds cost sharing has had a disparate impact upon low-income or minority older individuals or older individuals residing in rural areas.⁶

National Aging Program Information System and State Performance Reports

AoA collects participation data for many OAA services through the National Aging Program Information System/State Performance Reports (NAPIS/SPR). The NAPIS/SPR contains overall participation and demographic data for certain Title III-B services such as personal care, homemaker, chore, adult day care, and assisted transportation services. For services under Title III-E, the National Family Caregiver Support Program, the NAPIS/SPR includes participation data but not demographic data. The NAPIS/SPR does not contain any data on the number of people participating in cost sharing for any of these services. AoA uses the NAPIS/SPR data to plan and manage activities performed and services provided under the OAA.

The State Units gather data from their area agencies and then submit the data to AoA. Some States and area agencies collect additional information on participation not required for the NAPIS/SPR. For example, an area agency may collect demographic data on recipients of

⁶ 42 U.S.C. § 3030c-2(d).

caregiver support services. AoA conducts a number of checks on the data that States submit to the NAPIS/SPR.

Prior Studies

OIG conducted two studies about cost sharing for AoA prior to the year 2000 amendments to the OAA. The first report in October 1990, “Cost Sharing for Older Americans” (OEI-02-90-01010), assessed States’ experiences with State programs for older individuals that provided services on a cost-sharing basis. It found that recipients responded positively to cost sharing, cost sharing was seen as effective and efficient, and extending cost sharing to Title III had strong support.

The second report in May 1996, “Cost Sharing Under the Older Americans Act” (OEI-05-95-00170), described States’ practices of cost sharing for State services and discussed potential implementation issues for the expansion of cost sharing to OAA services. This study found that 36 States reported having some kind of cost-share program for at least 1 State-funded service for older individuals. States varied greatly in terms of which services they cost shared, and how responsibilities were distributed among the State Units, area agencies, and service providers. The study also stated that AoA needed to pay special attention to fee schedules, income declaration and verification, billing and collection activities, and policies on payment default before cost sharing is implemented.

METHODOLOGY

We based this study on data gathered from multiple sources: a written survey completed by State representatives from all 50 States, Puerto Rico, and the District of Columbia; a review of relevant State documents regarding cost-sharing implementation, program revenue, and participation; a review of the NAPIS/SPR and individual State data; and structured interviews with State Unit representatives, area agency officials, and State data officials. For the purposes of this report, we refer to the District of Columbia and Puerto Rico as States.

Scope

This study focuses on States’ implementation of cost sharing for OAA-funded services. This study does not include States’ experiences in implementing voluntary contributions for OAA services or their experiences in implementing cost sharing for State-funded services.

This study addresses Part B and Part E and does not address Part D. Initial research indicated that cost sharing for Part D was rarely, if ever, used. Part C services are excluded from cost sharing.

Written State Survey

We conducted a written survey of State Unit representatives from all 50 States, Puerto Rico, and the District of Columbia to identify the States that have implemented cost sharing for services funded by the OAA. We received responses from all. As discussed below, we reviewed documentation from each State reporting cost sharing to verify their responses.

Document Review

We reviewed all cost-sharing plans, policies, and procedures for the States that have implemented cost sharing. We identified the services that are cost shared. We also determined how each State has implemented cost sharing and has addressed the requirements for States that choose to cost share. We focused our review on how States determine eligibility; establish sliding scales; collect, account for, and use payments; and inform recipients. We also reviewed relevant financial and service reports from States and area agencies, when available, and any written materials States and area agencies use to explain cost sharing to recipients. Finally, we reviewed training materials produced by AoA and information from AoA's Web site.

NAPIS/SPR and State Data

We analyzed all available participation data from the NAPIS/SPR for each of the cost-sharing States. As noted earlier, the NAPIS/SPR contains statewide participation data for OAA services. It does not contain the number of individuals participating in cost sharing. We also collected and analyzed all available participation data for cost-shared services from each of the States, including available area agency data.

Structured Interviews with State and Area Agency Officials

We conducted structured interviews with officials from the State Units in each of the cost-sharing States. We focused our discussions on the services that are cost shared and how the State and area agencies have implemented cost sharing for these services. We paid particular attention to how each State has addressed the requirements regarding eligibility, sliding scales, accounting for payments, and informing recipients about cost sharing. We also discussed any guidance the State has provided to its area agencies. We conducted 12 interviews from

I N T R O D U C T I O N

February to March 2005. In this study, we refer to the State Unit representatives we interviewed as “State officials.”

We also conducted structured interviews with area agency officials from a purposive sample of area agencies in the States that have implemented cost sharing. We interviewed officials from all cost-sharing area agencies in States that had three or fewer cost-sharing area agencies. We interviewed officials from three selected cost-sharing area agencies in States that had more than three cost-sharing agencies. We selected the area agencies based on States’ estimates of the number of people participating in cost sharing. Specifically, we selected one area agency with high participation, one in the middle, and one with low participation. The interviews focused on the area agencies’ experiences with implementing cost sharing for OAA services. In total, we interviewed officials from 21 area agencies. We conducted these interviews from March to May 2005.

We also conducted structured interviews with data officials from all cost sharing States to determine what types of data States report to the NAPIS/SPR. These interviews were conducted from May to June 2005.

Standards

Our review was conducted in accordance with the “Quality Standards for Inspections” issued by the President’s Council on Integrity and Efficiency and the Executive Council on Integrity and Efficiency.

► FINDINGS

States' implementation of cost sharing for OAA services is limited

Twelve States have implemented cost sharing

Twelve States have implemented cost sharing for at least one OAA service in at least one part of their State. These 12 States are Alabama, Arizona, Arkansas, Delaware, District of Columbia, Michigan, Minnesota, Montana, Ohio, Puerto Rico, Rhode Island, and Virginia. The 12 States receive approximately \$97.5 million through Title III-B and Title III-E, which is about 19 percent of Title III-B and Title III-E total grant dollars.⁷

Half of these 12 States have implemented cost sharing in all or nearly all areas of their State.⁸ Two other States have implemented it in only one area agency in their State, while the remaining four States have implemented it in about half of their area agencies.

None of the 12 States has implemented cost sharing for all allowed OAA services

None of the 12 States has implemented cost sharing for all OAA services for which cost sharing is allowed. Eight of the twelve States each cost share for one or two different OAA services. The other 4 States each cost share for between 6 and 11 different services.

States most commonly cost share for respite services, homemaker services, or supplemental services. Table 1 lists the Title III-B and Title III-E services that are cost shared, as well as the number of States and area agencies cost sharing for them. Nine States cost share for respite services, which offer temporary relief for caregivers. Five States cost share for homemaker services and five States cost share for supplemental services, which complement the care provided by caregivers. Multiple States and area agencies also cost share for adult day care, chore, personal care, and transportation.

⁷ Calculations used fiscal year 2004 Final Allocation for Title III – Grants for State and Community Programs on Aging.

⁸ Note that 3 of the 12 States do not have area agencies. These States are the District of Columbia, Delaware, and Rhode Island.

F I N D I N G S

Cost-Shared
Services Funded by
Titles III-B and III-E

Table 1: Cost-Shared Services Funded by Titles III-B and III-E			
	Service	Number of States that Cost Share for Service	Number of Area Agencies that Cost Share for Service
Title III-B	Homemaker	5*	31
	Adult Day Care	5*	19
	Chore	5	16
	Personal Care	3	27
	Transportation	3	13
	Home Maintenance/Repair	3	14
	Medical Assessment	1	8
	Care/Medication Management	1	3
	Assisted Transportation	1	5
	Visiting	1	1
	Socialization/Recreation	1	1
	Respite III-B	1	1
	Title III-E	Respite III-E	9**
Supplemental Services		5*	23
Counseling		3	3
Adult Day Care		1	4
Safety Services		1	2
Transportation		1	2
Assisted Transportation		1	1

* Includes one State that does not have area agencies.

** Includes two States that do not have area agencies.

Source: Office of Inspector General analysis of State and area agency documents and interviews, 2005.

Six of the twelve States report limited participation in cost sharing

The number of people participating in cost sharing is limited in at least six States. Officials from 3 States each estimate having 55 or fewer individuals who participate in cost sharing, and officials from 2 more States each estimate having about 350 individuals who participate in cost sharing.⁹ An official from a sixth State could not give an estimate for the number of individuals cost sharing statewide, but AoA data indicate that it could not be high. This State cost shares for only 1 service and the total participation for that service is about 130 individuals.

The other six States likely have higher numbers of individuals cost sharing. These States are larger and cost share for more services in more areas of their States. An official from 1 of these States estimates that a total of 1,878 individuals participate in cost sharing statewide. Officials from the other five States could not provide estimates.

The States that have implemented cost sharing do not always follow OAA requirements for cost sharing that are designed to protect low-income individuals' access to services

The States and area agencies that have implemented cost sharing do not always follow key OAA requirements that are intended to ensure that individuals with low

incomes can obtain OAA services. Table 2 presents the number of cost-sharing States that have practices that conflict with key requirements.

⁹ Statewide counts may be duplicative because recipients may be receiving multiple services.

Table 2: Cost-Sharing States with Practices Not in Accordance with the OAA Requirements													
State or Area Agency Practice	Cost-Sharing States												
	A	B	C	D	E	F	G	H	I	J	K	L	Total
Has not developed cost-sharing plan that addresses participation of low-income individuals		X		X	X	X	X	X	X	X	X		9
Permits individuals with incomes at or below the Federal poverty level to cost share				X		X		X		X	X		5
Denies services or makes cost sharing appear mandatory		X	X			X			X	X		X	6
Has not developed a sliding scale for all services				X						X	X		3
Does not have a policy for accounting of cost-share payments		X		X		X	X			X	X		6
Has not created written materials that explain cost sharing	X	X	X	X	X	X	X	X	X	X	X	X	12

Source: Office of Inspector General analysis of State and area agency documents and interviews, 2005.

Nine States have not developed cost-sharing plans that address the participation of low-income individuals

The OAA requires States and area agencies to develop plans prior to implementing cost sharing. These plans should be designed to ensure that the implementation of cost sharing will not decrease the participation of low-income older individuals receiving OAA services.¹⁰ Four of the twelve States have not developed any plans that address cost sharing. Five more States have cost-sharing plans or policies but they do not specifically address the participation of low-income individuals. The remaining three States have policies that specifically state that their respective cost-sharing program is designed to ensure that participation of low-income individuals will not decrease.

¹⁰ 42 U.S.C. § 3030c-2(c)(2).

Five States permit individuals with low incomes to cost share

The OAA prohibits States from permitting cost sharing by individuals with incomes at or below the Federal poverty line.¹¹ However, five States permit individuals with incomes below the Federal poverty line to cost share. Specifically, four States have fee schedules indicating that individuals with incomes at or below the Federal poverty line are expected to make cost-share payments. Another State excludes these individuals from participating in cost sharing for one OAA service in the State but not for another.

Half of the 12 States either deny services or make cost sharing appear mandatory

Pursuant to the OAA, States that cost share must require that area agencies and local service providers not deny an older individual services due to income or failure to make a cost-share payment.¹² However, two States deny services due to an individual's income or failure to make a cost-share payment. An area agency in one State has a policy to suspend services when payments are not made. An official from another State reports that the practice in her State is to deny services when recipients do not pay, although exceptions are sometimes made.

An additional four States have collection methods that make cost sharing appear mandatory. In these States, recipients sign cost-sharing agreements. The agreements contain phrases such as "payment required" and "bills are due" and do not explain that services will not be denied for nonpayment. One area agency calls the cost-share payment a "copayment." This agency also bills the recipient if he or she misses a scheduled service.

Three States have not established sliding fee scales for all of their cost-shared services

The OAA requires States that cost share to establish a sliding scale to determine payment rates.¹³ One State has not developed any scales. The official from this State says she was not aware that States were allowed to develop such scales. In this State, recipients are not charged for the first year of service. They are charged half the cost for the second year of service and the entire cost thereafter. Two other States

¹¹ 42 U.S.C. § 3030c-2(a)(3).

¹² 42 U.S.C. § 3030c-2(a)(5)(E).

¹³ 42 U.S.C. § 3030c-2(a)(4).

use a sliding scale for some, but not all, of OAA services for which they cost share.

Half of the 12 States do not have policies for the accounting of cost-share payments

Pursuant to the OAA, States that cost share must ensure that area agencies and service providers establish appropriate procedures to safeguard and account for cost-share payments.¹⁴ Six of the twelve States that cost share do not have procedures specifically for the accounting of cost-share payments. Officials from the area agencies in these six States report that they have not received any specific guidance from their State about accounting for cost-share payments.

None of the States has created the required written materials on cost sharing

Pursuant to the OAA, States that cost share must create written materials that explain the criteria for cost sharing, the sliding scale, and the fact that services cannot be denied to an older individual due to income or failure to make payment. States must require the area agencies and service providers to widely distribute the written materials.¹⁵

None of the 12 States that cost share have created the written materials to explain cost sharing to recipients. State officials in all 12 States expect their area agencies or providers to inform recipients about cost sharing. The area agency officials whom we interviewed report that the area agencies or providers inform recipients about cost sharing during the intake process or prior to providing the service. However, only 1 of the 21 area agencies we interviewed had written materials that provided detailed information about cost sharing for recipients.

AoA has provided limited guidance to States and State officials are often confused about features of cost sharing under the OAA

AoA has not provided States with comprehensive guidance on cost sharing

AoA has provided limited

guidance to States on implementing cost sharing in accordance with the OAA. AoA conducted for its regional offices an initial training session that included training materials that were distributed to them to share

¹⁴ 42 U.S.C. § 3030c-2(a)(5)(B).

¹⁵ 42 U.S.C. § 3030c-2(a)(5)(G).

with States. However, the training did not cover key requirements, such as the plans States are required to develop and the written materials that explain cost sharing that States must create. AoA also posted a few frequently asked questions about cost sharing on its Web site; however, the information has since been removed.¹⁶ A table comparing the 1992 and 2000 amendments to the OAA is currently available on AoA's Web site, but it is difficult to find. The information does not readily come up in searches and only appears at the end of several different menu prompts. Lastly, AoA officials report that they provide technical assistance to individual regional offices or States when questions arise.

In addition, based on our interviews, we found that AoA officials have limited information about how States are implementing cost sharing. For instance, they have little knowledge about States' plans regarding cost sharing, their sliding scales, accounting for cost-share payments, or informing recipients about cost sharing.

Officials from some State and area agencies do not fully understand cost sharing

Officials from several States and area agencies are confused about features of cost sharing for OAA services. Based on our written survey of all States and subsequent interviews with State and area agency officials and our review of relevant documentation, we found that officials from 13 of 52 States did not correctly understand the status of cost sharing in their State. Specifically, officials in eight States confused State-funded services with those funded by the OAA. Officials in three States confused voluntary contributions or their voucher and reimbursement programs with cost sharing. Additionally, officials in two States could not identify which area agencies in their States have implemented cost sharing.

¹⁶ There are currently two questions about cost sharing posted on AoA's Web site but they are very general.

AoA’s participation data cannot be used to determine the impact of cost sharing on participation rates

AoA is required to conduct an annual evaluation of cost sharing to determine its impact on participation

rates, with particular attention to low-income and minority older individuals and older individuals residing in rural areas.¹⁷ AoA collects participation data for many OAA services through the NAPIS/SPR. As mentioned previously in this report, the NAPIS/SPR does not contain information specific to cost sharing but it does contain the total number of people participating in many of the services that are cost shared. AoA uses the NAPIS/SPR data to plan and manage activities performed and services provided under the OAA.

We found that States report data in the NAPIS/SPR differently and that the demographic data in the NAPIS/SPR are incomplete. As a result, the data in the NAPIS/SPR do not present a complete picture of participation and, therefore, cannot be used to measure any impact that cost sharing might have on overall participation or on participation of low-income individuals and other subgroups specified in the OAA.

States report participation data in the NAPIS/SPR differently

Interviews with data officials in the 12 cost-sharing States show that States report participation data in the NAPIS/SPR differently. Specifically, data officials in seven States say that they include recipients of services funded solely by State or local entities in addition to recipients of OAA-funded services. In contrast, data officials in the other five States say that they do not include recipients of services funded solely by State or local entities when reporting to the NAPIS/SPR.

The differences in reporting may be due to conflicting instructions that AoA provides to States. AoA officials report that they instruct States to count all recipients receiving services through the State Units, whether the services are OAA-funded or not. They note that reporting participation in this way is in line with the mission of the OAA to leverage these funds with other State and local money. At the same

¹⁷ 42 U.S.C. § 3030c-2(d).

time, AoA's Web site instructs States to count recipients of services that are funded in whole or in part by the OAA.¹⁸

Demographic data in the NAPIS/SPR are incomplete

At the time we reviewed the data, we found that the demographic data in the NAPIS/SPR were incomplete. Although AoA has taken steps to resolve this issue, the NAPIS/SPR data do not currently provide a complete picture of participation for subgroups of the population. Therefore, the data cannot be used to measure whether cost sharing has had any impact on participation for the subgroups specified in the OAA, including low-income individuals.

Specifically, we found that the original design specifications for the NAPIS/SPR required States to omit the demographic data for recipients missing any data element. Consequently, States had to delete all characteristics for a record that was missing an element such as race, ethnicity, disability status, or rural residence. AoA officials believe that this design specification resulted in significant undercounting of clients in the client-detail tabulations. These officials also report that they have no way of determining which characteristics were most affected by the design specification.¹⁹ Although AoA has changed the design specifications and the NAPIS/SPR now retains records with missing data elements, AoA officials stated that they “. . . do not believe that any of the quantitative program data now available can be employed to make inferences about the impact of cost sharing on program participation by vulnerable individuals.”²⁰

We also found that the data in the NAPIS/SPR do not include demographic information for all States. AoA was required to grant States waivers from submitting demographic data for Title III-B services.²¹ AoA officials report that they have not received this information from more than 40 States in any fiscal year. As of 2005, however, AoA is no longer required to approve the waivers.

¹⁸ U.S. Administration on Aging, Instructions For Completion of Title III and VII SPR. Available online at http://www.aoa.gov/prof/agingnet/napis/spr/spr_guidance/newn97.asp. Accessed August 10, 2006.

¹⁹ Letter from AoA to Office of Evaluation and Inspections (January 24, 2005).

²⁰ Ibid.

²¹ AoA was required to grant States waivers from submitting demographic data for recipients of Title III-B services by the initial Office of Management and Budget conditions of approval for the NAPIS/SPR data collection and the Paperwork Reduction Act of 1995.

F I N D I N G S

Further, the NAPIS/SPR does not include demographic data for Title III-E services. States have not been required to report demographic data for any Title III-E services, which include respite and supplemental services, two of the most commonly cost shared services. AoA officials report that States must now report certain demographic data for recipients of Title III-E services.

States report that area agencies commonly have problems collecting accurate participation data

State data officials in the nine cost-sharing States with area agencies report that area agencies commonly have problems collecting and reporting accurate participation data. The data officials note problems with limitations of their data systems, difficulties interpreting data definitions and requirements, and an inability to collect complete data. Data officials in these States report that they often have to estimate the number of persons served by the area agencies due to the problems their agencies experience collecting accurate data. AoA officials acknowledge that the NAPIS/SPR data are not consistently available for area agencies.²²

²² Letter from AoA to Office of Evaluation and Inspections (January 24, 2005).



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States' use of cost sharing for OAA-funded services is limited. Of the States that cost share, not all have followed OAA requirements for cost sharing that are designed to ensure that low-income individuals have access to services. To date, AoA has provided limited guidance to States about implementing cost sharing. Also, AoA's participation data cannot be used to determine the impact of cost sharing on participation for low-income individuals and other groups targeted by the OAA. Based on these findings, we recommend that AoA:

Ensure that States' cost-sharing practices comply with requirements designed to protect low-income individuals' access to services. AoA should address State and area agency practices that permit low-income individuals to participate in cost sharing. AoA should also address State and area agency practices that deny services to older individuals due to income or failure to make a cost-share payment, as well as practices that make cost sharing appear mandatory. In addition, AoA should address the States' lack of cost-sharing plans, sliding fee scales, policies for accounting for payments, and written material that explain cost sharing.

Provide additional guidance to States about implementing cost sharing in accordance with the OAA. AoA should provide additional guidance to States regarding how to implement cost sharing in accordance with OAA requirements. The guidance should address issues such as (1) developing plans to ensure that the participation of low-income individuals will not decrease with the implementation of cost sharing; (2) excluding low-income individuals from cost sharing; (3) prohibiting the denial of services; (4) establishing sliding scales; (5) developing procedures to account for cost-sharing payments; and (6) preparing written materials to inform recipients about cost sharing. AoA should also develop additional strategies to keep States informed about these issues.

Improve the quality of the NAPIS/SPR data so that any effects of cost sharing can be measured. AoA should improve the quality of its data to measure any future impacts cost sharing may have on participation rates, as required by the OAA. During the course of this study, AoA has addressed some of the data problems. Specifically, the NAPIS/SPR now retains records with missing data elements; the NAPIS/SPR now collects some demographic data for recipients of Title III-E services; and AoA is no longer required to approve waivers to

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States. However, AoA has not addressed the differences in State reporting.

When addressing these differences, AoA needs to give clear and consistent instructions to States and consider whether to continue directing States to report information for all services, including those funded solely by State or local entities. If the NAPIS/SPR includes data about non-OAA-funded services, then AoA needs to consider how it will determine any effects of cost sharing on participation in OAA programs and services, as required by the OAA.

In addition, the inconsistency of AoA's participation data has implications beyond cost sharing. This study focuses only on cost sharing, but the differences in data reporting raise questions about how AoA can use the data to effectively plan and manage activities funded under the OAA. This broader issue affects AoA's capacity to manage all aspects of these services, not only cost sharing.

AGENCY COMMENTS

AoA provided comments on the draft report. In general, AoA agrees with our findings that cost sharing is limited and that States are confused about cost sharing. AoA states that it has taken many steps to educate the Aging Network on cost sharing and does not agree with our finding that it has provided limited guidance to States. AoA also states that our observations about NAPIS/SPR are outside the scope of the study and that it has made several improvements to NAPIS/SPR over the last 5 years. In response to our recommendations, AoA notes that it will follow up on our observations and correct instances of noncompliance with the provisions of the OAA. AoA also plans to provide additional guidance to States on an ongoing basis and post more information on its Web site. The full text of the comments is included in Appendix A.

OFFICE OF INSPECTOR GENERAL RESPONSE

Where appropriate, we have made changes to the report based on AoA's comments.

Because the OAA requires AoA to determine the impact of cost sharing on participation rates, and NAPIS/SPR is the only data AoA has on participation, we believe that it is necessary to include NAPIS/SPR in

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any discussion about whether cost sharing has had an impact on participation rates.

We recognize that AoA has made several improvements to NAPIS/SPR over the last 5 years, many of which are noted in the report. However, despite these improvements, we found that the States that cost share report participation data in the NAPIS/SPR differently and include different populations in their counts. This issue is important because it has potential implications beyond cost sharing. These data provide essential information for AoA, including performance outcome information required by the Government Performance and Results Act and the Performance Assessment Rating Tool.

A P P E N D I X

Agency Comments



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Assistant Secretary
Administration on Aging

Washington D.C. 20201

JUN 22 2006

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OFFICE OF INSPECTOR
GENERAL

TO: Daniel R. Levinson
Inspector General

FROM: Edwin L. Walker *Edwin L. Walker*
Deputy Assistant Secretary for Policy and Programs

SUBJECT: Administration on Aging Comments in Response to
OIG Draft Report: "Cost Sharing for Older Americans Act Services,"
OEI-02-04-00290

Summary of Comments

The Administration on Aging (AoA) recognizes the critical importance of assessing program implementation, and more importantly, program performance carried out under the Older Americans Act. In recognition of the requirements of the Older Americans Act (OAA), and the evident circumstance that implementation of cost sharing under the OAA was very limited, AoA requested the Office of Inspector General (OIG) to undertake an evaluation of cost sharing for OAA services.

In commenting on the findings of the OIG related to cost sharing under the OAA, AoA wants to acknowledge the difficulty of the task we requested the OIG to perform. AoA knew that implementation of cost sharing under the OAA was very limited, and felt that it would remain so even though cost sharing for related state-funded programs was common. We believe that the OIG work confirmed that implementation of cost sharing under the OAA is and will remain very limited. Very few states have implemented it for OAA funded programs, and for those who have implemented it at all, the level of implementation was usually very limited both in terms of coverage across the state and of services included. It should be noted that the OAA does not require states to implement cost sharing, so this outcome does not violate the intent of the OAA in any way. We had hoped to learn more about the barriers that have caused states to choose not to take advantage of this new provision. However, that type of analysis did not occur. As a result, the review did not provide the type of information that would serve AoA and the aging network to help to modify program requirements of the Act in a way that would allow the OAA to be modernized, and allow the network to take advantage of the positive aspects of cost sharing, while protecting the needs of elderly individuals at greatest social and economic risk.

AoA appreciates the observations of the OIG related to concerns about compliance by the States with the cost sharing provisions of the OAA. However, we do not believe that the

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study was adequate to make generalizations about the impact of state and local actions across OAA programs. Data provided by the OIG on the number of individuals participating in cost sharing clearly indicate that implementation has not been extensive enough to have had a significant effect on any broad OAA client population group. The OIG data indicate that cost sharing under the OAA is not occurring to any significant degree for any program activity. AoA will follow up on the observations of the OIG to correct instances of non-compliance with the provisions of the OAA where they may exist. We also believe that if further implementation of cost sharing occurs, it will require ongoing confirmation of compliance with the provisions of the OAA.

We appreciate that the study was able to correct many of its earlier observations associated with the National Aging Program Information System (NAPIS). We believe that the difficulties the study encountered reflected limitations with the methodology and the limits of implementation of cost sharing, and not problems with the NAPIS system. The NAPIS data system is, in fact, well managed and coordinated. AoA works very closely with representatives of state and area agencies on aging to ensure that the data collected under the NAPIS system is focused on characteristics and data that support critical and necessary program management activity. In the past five years, AoA, the states, area agencies, national associations of states and area agencies, and highly experienced OAA program data vendors have put significant effort into the improvement of OAA program data, and this significant and extensive collaboration will continue.

State implementation of cost-sharing

Based on AoA's experiences in working with the states to implement cost sharing and other provisions under the Act, we believe that many of the conclusions of the study about State execution of the cost-sharing provisions do not adequately reflect the complexity of the issue under the Older Americans Act, nor do they give a complete picture of how the states are implementing cost-sharing.

First, a required element under the OAA of State and Area plans is that they ensure the participation of low-income individuals throughout their respective plans in ALL OAA services, including those that are cost shared (see State plan attachments A&B). AoA does not believe it is necessary or effective for States at this time to set up a separate plan related to cost-sharing, because there is little evidence of plans to make it extensive, and because broader program data indicate significant protections of client populations. The data below indicate that States and AAAs are effectively addressing the targeting of services to individuals with low-incomes throughout their respective State and Area plans

10% of U.S. elders are poor; 28% of OAA clients are poor.

16% of elders are minority; 22% of clients are minority.

24% of U.S. elders reside in rural areas; over 27% of OAA clients are rural.

Second, under the Older Americans Act, States, AAAs and providers are required to allow older individuals to contribute to the cost of their services. This requirement often creates difficulties for States attempting to implement cost sharing. On the one hand, the cost sharing provision does not allow for charging fees to low-income individuals, while

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other provisions require title III providers to give all participants the opportunity to voluntarily contribute to the cost of their services. Melding these provisions together under a system where participants self declare their incomes can get tricky and takes extra planning. This is an issue that AoA is trying to address further in follow-up guidance to Regional AoA offices and State agencies on aging. AoA plans to expand previous “frequently asked questions” related to cost-sharing, post the information on its website, and provide additional guidance to the States on an ongoing basis for States that are cost sharing.

Third, many States have cost sharing provisions under their own state-funded programs or from other sources. When discussing cost sharing activities with States, it is AoA’s experience that States sometimes confuse the cost sharing protocols of other funding sources with those of OAA programs, particularly given the finding that in 6 of the 12 states which implement cost sharing under the OAA, fewer than 350 individuals participate. These data indicate that the larger issue may not be confusion by States when implementing cost sharing, but rather that cost sharing under the OAA barely exists at all.

Fourth, many States have indicated that they want to be able to use cost sharing to expand dwindling resources for a growing population of seniors, and that they want to be able to merge OAA programs with their own successful, State funded cost sharing programs. If States are incorrectly implementing cost sharing under the OAA, one of the main reasons may be because cost sharing provisions under the OAA do not generally meld well with their own cost sharing programs.

AoA guidance to the States on cost-sharing.

While we appreciate the OIG’s recommendations for how AoA can improve the level of training on cost sharing under the OAA, we do not support the report’s conclusion that little guidance has been provided. Since the enactment of cost sharing under the OAA, AoA has taken several strategies and actions to educate the aging services network on this provision, including the following activities:

- AoA developed a PowerPoint presentation, and conducted a videoconference during the first six months following the enactment of the provision. (4/2001)
- Regional Offices used the PowerPoint presentation with the States in their region during planned training sessions, and made copies of the presentation available to State Agencies.
- AoA conducted a conference call with Regional AoA offices dedicated to the discussion of cost sharing; cost sharing questions were fielded by AoA during other conference calls, as needed. (2/6/02)
- AoA followed up the conference call with an email to Regional offices giving further direction on cost sharing and providing a copy of the statutory language. (2/7/02)
- AoA developed “frequently asked questions” (FAQs) on all of the changes in the 2000 amendments, including cost sharing, and made those FAQs available on the website for over two years. As mentioned above, AoA plans to expand the FAQs and post again on the website.

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- AoA worked with the Regional Offices to conduct a survey of States related to their cost sharing activities. (9/2004)
- Regional Offices have continued to provide technical assistance on cost sharing (along with comprehensive TA on the entire OAA) during orientation training with new State agency staff, and during provider, AAA, and State agency training conferences/meetings, as appropriate.
- AoA continues to work with Regional Offices to respond to cost sharing inquiries, as needed. (11/2000 to present) Documentation of case-by-case guidance is maintained at Regional Offices of AoA in trip reports and email correspondence.

Quality of the NAPIS/SPR Data

The specific intent of the study requested was to better understand cost sharing under the OAA, and not to provide anecdotal observations about the overall data and information available from NAPIS/SPR. On this latter point, the report went well beyond the intent of the study and the constraints of its own methodological design, and led to observations that failed to incorporate significant relevant data. AoA expresses the following serious concerns about the validity of the study methodology and conclusions regarding NAPIS/SPR, although we do recognize that the report now acknowledges the correction of some of those observations.

- There is no valid basis for making generalizations about an enterprise-wide, national information system in a study that addresses the limited implementation of cost sharing. Given the timing of the legislative provision, the fact that implementation was discretionary, and the clear effect that implementation was severely limited, there should have been no expectation that reporting on cost sharing would be incorporated into NAPIS.
- In the 12 states where some level of cost sharing was implemented, the number of persons participating in cost sharing (a total number of participants is not provided, but individual states reportedly range from 55 persons to 1,878 persons) is a very small fraction of the total number of persons served under the OAA in these same states (over 1.4 million persons).
- Approximately 50% of these states have implemented cost sharing in only limited areas of the state and none has implemented cost sharing for all of the allowable Title III services.
- The NAPIS/SPR has never been, nor will it be, designed as a client tracking system. It is designed to provide broad aggregated program and management information to AoA, consistent with what has been deemed acceptable and adequate, and approved by the Office of Management and Budget (OMB) for AoA. SUAs, AAAs and providers frequently collect and maintain additional client level information for local management purposes, but this data is not to be confused with the aggregated NAPIS/SPR format allowed for AoA by OMB.

While the report offered a broad recommendation for AoA to "...improve the quality of its data..." it failed to identify the very specific and extensive data improvement efforts that have characterized the NAPIS system over the last five years. AoA, the National Association of State Units on Aging, a major national NAPIS data vendor, other

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experienced data consultants, and numerous individual states and area agencies have been actively engaged in the modernization and improvement of the NAPIS data system over the last five years, and that effort continues. In the recent, significant, and OMB-approved revision of the NAPIS data requirements (and reporting systems) that have taken effect for the FY 2005 reporting period, AoA and its data improvement partners sought formal input from the entire aging network of states and area agencies no fewer than four times. AoA and its data improvement coalition have continued to pursue the long-term modernization of data programs through the NAPIS Data Management Study, which again has pursued input and participation in a variety of media from aging network entities.

The study failed to identify these efforts and initiatives because these efforts are significantly beyond the scope of the study the OIG was engaged to perform. AoA has formally occupied significant professional entities that are qualified to guide the Agency and the Network in pursuing improvements to these important data operations, and AoA will look to these entities for recommendations related to the improvement of the NAPIS system. To effectively manage and report on program activities, AoA has greatly enhanced access to timely, accurate, and integrated data and information. AoA has taken several important steps to ensure the availability of this essential information: (1) development of the National Aging Program Information System and the State Program Report (1995) as revised and implemented for FY 2005 reporting, (2) provision of software support and training (State Reporting Tool – SRT) to facilitate state submission of the SPR to ensure timely and accurate SPR information, and (3) extensive procedural guidance on the use of these tools and continually updating responses to Frequently Asked Questions (FAQ) from the Aging Network. NOTE: The instructions discussed in the last paragraph on page 15 and footnote #18, reference the previous version of NAPIS/SPR. The FY 2005 NAPIS/SPR (<http://www.aoa.gov/prof/agingnet/NAPIS/docs/SPR-Modified-Form-11.08.04.pdf>) and FAQs (http://www.aoa.gov/prof/agingnet/NAPIS/SPR/SPR_guidance/NAPIS-FAQs03032006.doc) are the most recent and correct versions of these documents. These developments clearly provide detailed reporting information and instructions regarding the inclusion of services funded through the OAA, state general revenue and other sources.

The SPR provides essential information on the characteristics of clients including: demographic and disability data; the types and levels of service, such as the numbers of persons serviced and the units of service provided by the network on aging; expenditures of OAA funds and from other sources; and administrative information about SUAs and AAAs, including staff levels and responsibilities, as well as the number of volunteers providing support. The OIG report (page 16) states that "...data in the NAPIS/SPR do not include [client] demographic data information for all states." While some states have not previously reported client demographic data, 11 of the 12 states that have implemented cost sharing have submitted some level of client demographic information. As required under former OAA statutory authority, the 12th state received a waiver of demographic reporting responsibility. Such waivers were required by OMB conditions of approval for the former version of the NAPIS system.

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The SPR data provides essential information for AoA. These data have provided significant performance outcome information required by the Government Performance and Results Act (GPRA) and the Performance Assessment Rating Tool (PART). AoA's ability to recently receive a PART score of 81, and OMB highlighting of the quality of AoA performance measures in the FY 2005 President's Budget is based to a considerable degree on obtaining necessary management information from NAPIS/SPR.

As part of continuous quality improvement and to further refine the data reporting processes in the Aging Network, AoA entered into a cooperative agreement with the National Association of State Units on Aging (NASUA) to identify ways for AoA, SUAs, and AAAs to improve the efficiency and effectiveness of reporting and to reduce the burden of information collection. The study is focused on cost-effective ways to:

1. Define the common data requirements necessary for policy and management decision making, including state and local initiatives (including advocacy) so as to limit federal requirements to a sub-set of state and local requirements
2. Eliminate the need for elderly individuals and caregivers to provide identifying information repeatedly to various service providers
3. Improve data collection methods and systems so as to insure obtaining unduplicated counts of individuals across service providers and geographic locations
4. Reduce the expense of reporting system fragmentation by taking advantage of network economies of scale for information systems development and management without compromising competition in the marketplace

While still in the draft stages, the report will assist AoA in furthering the integrity of data and information supplied by the Aging Network.

ATTACHMENT A

**Listing of State Plan Assurances and Required Activities
Older Americans Act, As Amended in 2000**

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and required activities.

This attachment, along with requirements listed in the State Plan Guidance Program Instruction (PI) and attachment B State Plan Provisions and Information Requirements, make up the package of instructions for development of State Plans.

ASSURANCES

Sec. 305(a)- (c), ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas and include proposed methods of carrying out the preference in the State plan.

(a)(2)(F) The State agency shall provide assurances that the State agency will require use of outreach efforts described in section 307(a)(16).

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out,

directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

States must assure that the following assurances (Section 306) will be met by its designated area agencies on agencies, or by the State in the case of single planning and service area states.

Sec. 306(a), AREA PLANS

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

(A) services associated with access to services (transportation, outreach, information and assistance, and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i) Each area agency on aging shall provide assurances that the area agency on aging will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low-income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan.

(4)(A)(ii) Each area agency on aging shall provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will--

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals and older individuals residing in rural areas within the planning and service area.

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

- (I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;
- (II) describe the methods used to satisfy the service needs of such minority older individuals; and
- (III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on—

- (I) older individuals residing in rural areas;
- (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (IV) older individuals with severe disabilities;
- (V) older individuals with limited English-speaking ability; and
- (VI) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);

and inform the older individuals referred to in (A) through (F), and the caretakers of such individuals, of the availability of such assistance.

(4)(C) Each area agency on aging shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—

- (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--
(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) Each area agency on aging shall provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

Sec. 307, STATE PLANS

(7)(A) The plan shall provide satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

(7)(B) The plan shall provide assurances that--

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;
- (ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide assurances that the State agency will carry out, through the Office of the State Long-Term Care Ombudsman, a State Long-Term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

(10) The plan shall provide assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

(11)(A) The plan shall provide assurances that area agencies on aging will--

- (i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
- (ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
- (iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest

such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

(11)(D) The plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals;

(11)(E) The plan contains assurances that area agencies on aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

- (A) public education to identify and prevent abuse of older individuals;
- (B) receipt of reports of abuse of older individuals;
- (C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (D) referral of complaints to law enforcement or public protective service agencies where appropriate.

(13) The plan shall provide assurances that each State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

(14) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area--

- (A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and
- (B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--
 - (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

- (A) older individuals residing in rural areas;
- (B) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (C) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (D) older individuals with severe disabilities;
- (E) older individuals with limited English-speaking ability; and
- (F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and inform the older individuals referred to in clauses (A) through (F) and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who--

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

(19) The plan shall include the assurances and description required by section 705(a).

(20) The plan shall provide assurances that special efforts will be made to provide technical assistance to minority providers of services.

(21) The plan shall

- (A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

(23) The plan shall provide assurances that demonstrable efforts will be made--
(A) to coordinate services provided under this Act with other State services that benefit older individuals; and

(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

(24) The plan shall provide assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

Sec. 308, PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS

(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

Sec. 705, ADDITIONAL STATE PLAN REQUIREMENTS (as numbered in statute)

A P P E N D I X

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

(2) The State plan shall provide an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

(3) The State plan shall provide an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

(4) The State plan shall provide an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

(5) The State plan shall provide an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for—

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except—

(i) if all parties to such complaint consent in writing to the release of such information;

- (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or
- (iii) upon court order.

REQUIRED ACTIVITIES

Sec. 307(a), STATE PLANS

- (1)(A) The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and
- (B) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

- (2) The State agency:

- (A) evaluates, using uniform procedures described in section 202(a)(29), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

- (B) has developed a standardized process to determine the extent to which public or private programs and resources (including volunteers and programs and services of voluntary organizations) have the capacity and actually meet such need;

- (4) The State agency conducts periodic evaluations of, and public hearings on, activities and projects carried out in the State under titles III and VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities, with particular attention to low-income minority individuals and older individuals residing in rural areas. *Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.*

- (5) The State agency:

- (A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

- (B) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

A P P E N D I X

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

(8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency—

- (i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;
- (ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or
- (iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

Signature and Title of Authorized Official

Date

ATTACHMENT B

STATE PLAN PROVISIONS AND INFORMATION REQUIREMENTS

The following provisions and information requirements are listed in the indicated sections of the Older Americans Act, as amended in 2000. State Plans may address the provisions and information requirements in a format determined by each State.

This attachment, along with requirements listed in the State Plan Guidance Program Instruction (PI) and attachment A, State Plan Assurances and Required Activities, make up the package of instructions for development of State Plans. Italicized notes are provided for the State agency's convenience as links to referenced citations.

Section I. State Plan Information Requirements

Information required by Sections 102, 305, 307 and 705 that must be provided in the State Plan:

102(19)(G) – (required only if the State funds in-home services not already defined in Sec. 102(19)) The term "in-home services" includes other in-home services as defined by the State agency in the State plan submitted in accordance with Sec. 307.

Section 305(a)(2)(E)

The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority individuals and older individuals residing in rural areas and include proposed methods of carrying out the preference in the State plan;

Section 307(a)

(2) The plan shall provide that the State agency will:
 (C) Specify a minimum proportion of the funds received by each area agency on aging in the State to carry out part B that will be expended (in the absence of a waiver under sections 306(b) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2) (*Note: those categories are access, in-home, and legal assistance*).

Section (307(a)(3)

The plan shall:

(A) include (and may not be approved unless the Assistant Secretary approves) the statement and demonstration required by paragraphs (2) and (4) of section 305(d) (concerning distribution of funds); *(Note: the "statement and demonstration" are the numerical statement of the intrastate funding formula, and a demonstration of the allocation of funds to each planning and service area)*

(B) with respect to services for older individuals residing in rural areas:

(i) provide assurances the State agency will spend for each fiscal year of the plan, not less than the amount expended for such services for fiscal year 2000.

(ii) identify, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services).

(iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.

Section 307(a)(8) (Include in plan if applicable)

(B) Regarding case management services, if the State agency or area agency on aging is already providing case management services (as of the date of submission of the plan) under a State program, the plan may specify that such agency is allowed to continue to provide case management services.

(C) The plan may specify that an area agency on aging is allowed to directly provide information and assistance services and outreach.

Section 307(a)(10)

The plan shall provide assurance that the special needs of older individuals residing in rural areas are taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

Section 307(a)(15)

The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared--

(A) identify the number of low-income minority older individuals in the State; and

(B) describe the methods used to satisfy the service needs of such minority older individuals.

Section 307(a)(21)

The plan shall:

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title (*title III*), if applicable, and specify the ways in which the State agency intends to implement the activities .

Section 705(a)(7)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(7) a description of the manner in which the State agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6). (*Note: Paragraphs (1) of through (6) of this section are listed below*)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;

(2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle;

(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;

(4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter;

(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5);

(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3--

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

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(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except—

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order.



A C K N O W L E D G M E N T S

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