MARYLAND
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Department of Aging

Annual Report
January - December 2006

MARYLAND

Department of Aging

"Dignity, Opportunity, Choice & Independence for Older Marylanders"

Annual Report
January - December 2006

Budget Presentation
Fiscal 2008

Martin O'Malley
Governor

Anthony Brown
Lt. Governor

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ORGANIZATION

History

- In 1959, the Department originated as the *State Coordinating Commission on the Problems of the Aging* (Chapter 1, Acts of 1959).
- It was renamed *Commission on the Aging* in 1971 (Chapter 595, Acts of 1971).
- The *Governor's Coordinating Office on Problems of the Aging* was established by the Governor in 1974.
- In 1975, the *Commission on the Aging* and the *Governor's Coordinating Office on Problems of the Aging* merged to form the *Office on Aging*, a cabinet-level agency (Chapter 261, Acts of 1975).
- In July 1998, the Office was restructured as the *Department of Aging*, a principal executive department (Chapter 573, Acts of 1998).

Statutory Base

Two statutes serve as the primary base for the Department's operations: Article 70B, Annotated Code of Maryland and the federal Older Americans Act of 1965, as amended. The major duties assigned to the Department under these statutes are to:

- Administer programs mandated by the federal government;
- Establish priorities for meeting the needs of Maryland's senior citizens;
- Evaluate the service needs of Maryland's senior citizens and determine whether or not programs meet these needs;
- Serve as an advocate for seniors at all levels of government; and
- Review and formulate policy recommendations to the Governor for programs that have an impact on senior citizens.

Organization

The Maryland Department of Aging (the Department) receives State general funds as approved by the General Assembly and federal funds through the Older Americans Act and other sources to carry out its mission.

The partnership between the Maryland Department of Aging and the 19 local Area Agencies on Aging (AAAs) provides programs and services for seniors statewide. AAAs are local government or non-profit organizations designated by the Department under federal statutory authority to provide for a range of services to meet the needs of older Marylanders. Each AAA is required to submit a plan for the delivery of services. Approval from the Department is based on AAAs having met State and federal statutory and regulatory requirements. State and federal funds are allocated to AAAs based on formulas developed by the Department in cooperation with the AAAs.

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AAAs receive additional funds through county support and individual contributions. AAAs provide services to seniors either directly or through contracts with other public or private organizations. While programs such as information and assistance and nutrition are available to all seniors, the increase in the numbers of seniors and limited public funds necessitate that services be directed first to those seniors in greatest social and economic need and those who may be at risk of institutionalization.

Vision

The Maryland Department of Aging envisions Maryland as a State where all people are able to age with dignity, opportunity, choice and independence.

Mission

The Maryland Department of Aging, partnering with the Area Agencies on Aging and other organizations, provides leadership, advocacy and access to information and services for Maryland seniors, families and caregivers.
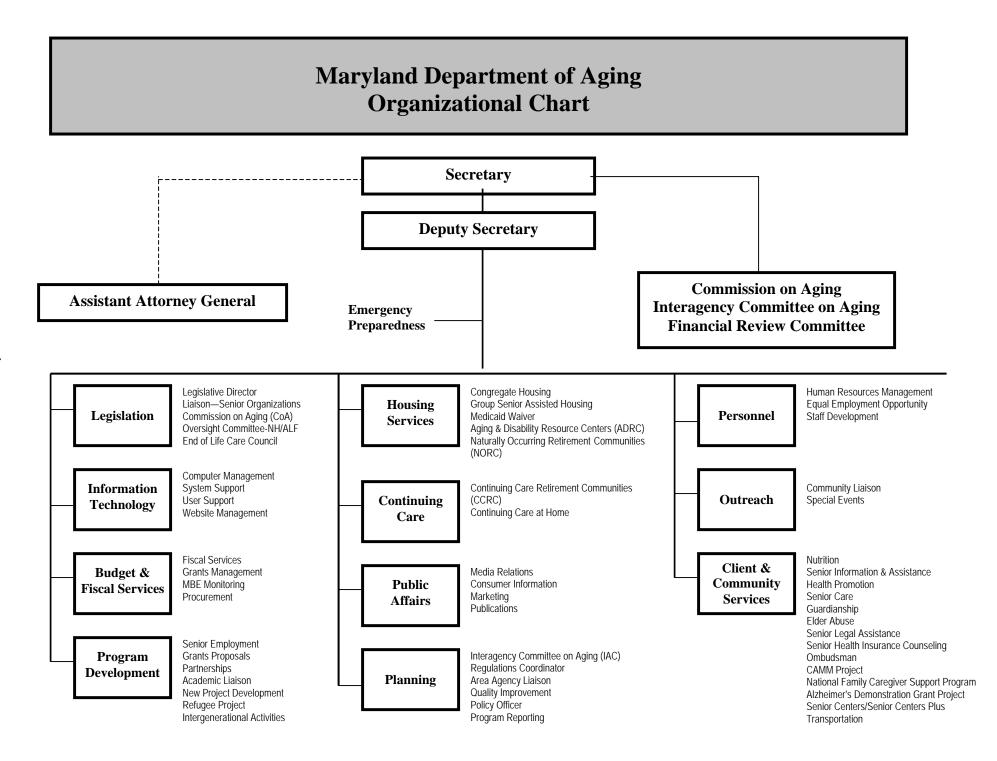
Key Goals

To ensure that older citizens are treated with dignity and respect, the Maryland Department of Aging, through leadership, advocacy and community partnerships, has established eight goals. Programs and services administered by the Department are the vehicles for achieving the goals, which allow for flexibility and change in the way programs can be structured for future generations of seniors. The goals are:

Goal #1   To enable seniors to be maintained in the most appropriate living arrangements within the community for as long as possible.

Goal #2   To ensure that vulnerable seniors are treated with dignity, and to the extent possible with the available resources, protected against abuse, exploitation and consumer fraud.

Goal #3   To enhance the quality of nutrition, health education, physical fitness and socialization activities offered to Maryland seniors.

Goal #4   To improve access to services, resources and information for seniors and caregivers through interagency initiatives, enhanced technology and public/private partnerships.

Goal #5   To promote the well-being of seniors by providing a broad range of employment opportunities and by promoting volunteerism.

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Goal #6   To enhance the quality of programs and services by improving data collection and analysis, research, policy development and training.

Goal #7   To promote integrity and confidence in Continuing Care Retirement Communities (CCRCs) in Maryland and to monitor the viability of existing CCRCs and the feasibility of planned CCRCs.

Goal #8   To develop innovative programs to meet the needs of baby boomers entering the ranks of seniors.

Maryland Department of Aging
Organizational Chart

Secretary

Deputy Secretary

Assistant Attorney General

Emergency
Preparedness

**Commission on Aging
Interagency Committee on Aging
Financial Review Committee**

Legislation
Legislative Director
Liaison—Senior Organizations
Commission on Aging (CoA)
Oversight Committee-NH/ALF
End of Life Care Council

Information Technology
Computer Management
System Support
User Support
Website Management

Budget & Fiscal Services
Fiscal Services
Grants Management
MBE Monitoring
Procurement

Program Development
Senior Employment
Grants Proposals
Partnerships
Academic Liaison
New Project Development
Refugee Project
Intergenerational Activities

Housing Services
Congregate Housing
Group Senior Assisted Housing
Medicaid Waiver
Aging & Disability Resource Centers (ADRC)
Naturally Occurring Retirement Communities (NORC)

Continuing Care
Continuing Care Retirement Communities (CCRC)
Continuing Care at Home

Public Affairs
Media Relations
Consumer Information
Marketing
Publications

Planning
Interagency Committee on Aging (IAC)
Regulations Coordinator
Area Agency Liaison
Quality Improvement
Policy Officer
Program Reporting

Personnel
Human Resources Management
Equal Employment Opportunity
Staff Development

Outreach
Community Liaison
Special Events

Client & Community Services
Nutrition
Senior Information & Assistance
Health Promotion
Senior Care
Guardianship
Elder Abuse
Senior Legal Assistance
Senior Health Insurance Counseling
Ombudsman
CAMM Project
National Family Caregiver Support Program
Alzheimer's Demonstration Grant Project
Senior Centers/Senior Centers Plus
Transportation

Accomplishments

Among the many accomplishments of the Maryland Department of Aging was the success of the outreach, education, and assistance strategy developed by the Department for the new Medicare Prescription Drug Program. Staff of the Maryland Department of Aging and the 19 Area Agencies on Aging played a key role in helping nearly 200,000 of the 754,000 Maryland Medicare beneficiaries to understand and enroll in the Medicare Part D Prescription Drug Program. Close to 80% of Maryland's Medicare beneficiaries are enrolled in some type of plan with drug coverage.

ACCOMPLISHMENTS *for 2006*

Medicare Prescription Drug Program
The 19 Area Agencies on Aging (AAAs) and the staff of the Maryland Department of Aging played a key role in helping nearly 200,000 of the 754,000 Maryland Medicare beneficiaries to understand and enroll in the Medicare Prescription Drug program - the biggest enhancement in Medicare since its establishment 41 years ago. CMS reports that close to 80% of Maryland's Medicare beneficiaries are enrolled in some type of plan with drug coverage, exceeding their target of 70%. Seeing the need for continued education, training and outreach, Governor Ehrlich and the legislature approved an allocation of $2 million in State funds to help the Department and the AAAs with outreach, education, assistance - and a considerable amount of problem solving - in 2006

The Department used some of this funding to provide media outreach in specified areas, putting ads in busses and at bus stops, and advertising in community newspapers. In addition, the Department provided grants to three community groups, LatinLink, the Korean Resource Center and the Asian-American Anti-Smoking Foundation, to provide outreach and education to Medicare beneficiaries who do not speak English as their first language.

Strategic Plan
The MDoA contracted with the University of Maryland Institute for Governmental Service and Research to assist with development of a strategic plan for the Department. Beginning in July, focus groups were held across the State with seniors, frail elderly, Area Agency on Aging directors, the Maryland Commission on Aging, and departmental staff. An MDoA Steering Committee, comprised of senior staff, identified themes, priorities, goals and strategies and developed action plans to guide the work of the Department over the next several years. Along with a revised mission and vision for the Department, the values identified by the plan will direct programs and services to achieve measurable results, accountability, and efficiency for improved outcomes for the citizens of Maryland.

Accessible Homes for Seniors
This initiative, jointly sponsored by the Department of Housing and Community Development and the Department of Aging, offers zero-interest loans to income eligible households (maximum income of $42,504-$51,240) to be used for home modifications to enable seniors to "age in place." Installation of grab bars, lever handles on doors, wider doorways and first-floor bathrooms are examples of such modifications.

Evidence Based Health Initiatives
The Department of Aging, in collaboration with a wide range of State agencies and community organizations, was one of 16 states to receive a three-year, $900,000 federal grant to promote proven strategies to educate and train seniors to adopt healthier lifestyles and to manage chronic diseases. These organizations will assist with planning and implementing programs shown to have positive health outcomes for participants, including fewer hospitalizations.

ACCOMPLISHMENTS *for 2006*

Naturally Occurring Retirement Communities (NORCs)
The Maryland Department of Aging's FY2007 budget included $500,000 in new funding to expand two NORC initiatives, one in Northwest Baltimore and one in Montgomery County. NORC is the term given to communities characterized by unusually high-density older adult populations that were not specifically planned as aging communities, but evolved over time as residents aged in place. The NORC is an innovative and cost-effective mechanism to serve a large number of people in a specific geographic area. The continuation and expansion of these projects will make available best practices and guidelines that could benefit other communities in the State that seek to replicate these models.

Caregiver Grant Program
Working with the Department of Health and Mental Hygiene, the Department of Disabilities and advocates, the Department of Aging is implementing the Family Caregiver Assistance Grant Program approved by the General Assembly during the 2006 Session. The new law authorizes the Department to award grants of up to $500 to eligible family caregivers. The Department is trying to identify funds to implement this program in the FY2008 budget.

Homeowner Tax Credit
Tax relief is extended to seniors with incomes up to $55,000 and homes valued up to $300,000. This relief will add approximately 4,000 to the 46,189 recipients currently receiving this credit. In addition, the maximum tax credit allowed under the Renters' Property Tax Relief Program increases from $600 to $750.

Senior Assisted Living Group Home Subsidy Program (SALGHS)
More than 500 seniors received subsidized assisted living placements through the statewide SALGHS program. A combination of residents' personal income and $2.3 million in State general funds allowed frail elders no longer able to live on their own to live in a supervised residence where their daily needs are met. Without subsidy assistance, many of these seniors might be placed in nursing homes, which could cost over $68,000 a year. The average SALGHS resident costs the State less than $4,000 annually.

$1.1 million in additional funds were allocated in the FY2007 budget to subsidize the cost of assisted living in group homes with 4-16 residents with low to moderate-incomes. The new funds are targeted to persons on the waiting list for this program.

Senior Care Programs
Additional funds of $750,000 in the FY2007 budget will reduce the waiting list by 13%. The program provides coordinated, in-home services to seniors who need help with daily tasks so that they can remain in the community.

ACCOMPLISHMENTS *for 2006*

Senior Nutrition

The MDoA, through the 19 Area Agencies on Aging, served more than 1.57 million meals at senior centers and other nutrition sites. Senior Centers with large ethnic populations served special ethnic meals to attract participants. The socializing that occurs is as important as the nutritious meals for seniors who might otherwise be isolated and suffer from depression.

More than 1,400,000 meals were delivered to the homes of frail seniors. Trends show that persons receiving meals use the meal services for a longer period of time because they are able to stay in their own homes as they age. These Marylanders are "aging-in-place."

An additional $400,000 in funds was provided to expand the senior nutrition program.

Senior Farmers' Market Nutrition Program

The MDoA, working with the Maryland Department of Agriculture and the AAAs, provided coupons to more than 9,000 low-income seniors for the purchase of fresh fruits and vegetables at Maryland farmers' markets. The U.S. Department of Agriculture provided a grant for this program. Seniors received education materials and information through a partnership with the "5 A Day Program" at the Maryland Department of Health and Mental Hygiene.

Senior Center Plus

Senior Center Plus is a supervised social day care program held in a non-residential setting and is designed to promote socialization, improve mental and physical functioning and address the nutritional needs of frail seniors. Currently, twenty of the twenty-four jurisdictions in Maryland have at least one Senior Center Plus Site for a total of 43 sites. Additional sites are anticipated in 2007.

Senior Centers

Through the Senior Citizens Activities Centers Capital Improvement Grants Program the State has provided in excess of $26,600,000 in capital improvement grants to local governments for senior center development since the program's inception in 1979. The Department awarded $150,000 in operating funds to twenty-five senior centers in seven jurisdictions for innovative program development during FY2006.

Senior Information and Assistance (I&A) Program

In 2006, the Senior I&A workers located in the 19 Area Agencies on Aging received extensive Medicare Part D prescription drug training with the Center for Medicare and Medicaid and the Senior Health Insurance Program. They responded to thousands of calls and walk-ins and scheduled appointments for one-on-one assistance for seniors who needed help signing up for a prescription drug program. Annually, the I&A program provides actual one-on-one assistance to over 30,000 seniors who require aging services, including housing, health care, income management, and more.

ACCOMPLISHMENTS *for 2006*

Older Adult Waiver Program
The Older Adults Waiver (OAW) provides personal services and other long term supports to low-income older adults who otherwise would reside in nursing homes. The Waiver served over 3,400 individuals in FY2006, and funding for an additional 175 slots was included in the FY2007 budget.

Revisions were made to the program's Quality Assurance Plan. This plan identifies key areas of program focus and accountability essential to assuring that quality supports and services are provided to participants either in their homes or in assisted living facilities. In addition, a quality assurance manager was added to the Waiver staff to oversee the development of strategies and processes to continually evaluate and improve the Older Adults Waiver Program's effectiveness.

A Reportable Events Policy was developed and implemented statewide. This policy provides a process to ensure the timely identification, documentation, resolution and monitoring of specific incidents involving Waiver participants. Every reportable event is monitored at the State level to ensure process continuity and follow through. Information on these incidents is tracked and trends that may need to be addressed are identified.

Congregate Housing Services Program (CHSP)
The Congregate Housing Services Program celebrated its 30th anniversary in 2006. Celebrations were held in sites across the State, beginning in June at Friendship Station in Anne Arundel County. In FY2006, almost 800 frail, low-income seniors received services through the Congregate Housing Services Program. A combination of participants' co-payments, $1,498,836 in State general funds, $746,875 in federal nutrition funds and $1,125,913 in provider/local contributions allowed these seniors to remain in their apartments with in-home services. State subsidies are available for eligible residents who require financial assistance.

Senior Employment Program
The U.S. Department of Labor awarded a $1,202,943 grant to MDoA to support the Senior Community Service and Employment Program (SCSEP). This program trains 168 participants through community service in government and 501(c)(3) non-profit agencies.

The successful implementation of a new U.S. Department of Labor (DOL) Data Collection System incorporated management reports to determine service strategies to fill needs of participants and gaps in service.

The Customer Service Surveys sent to participants, host agencies and employers yielded an 85% approval rating on the federal American Customer Satisfaction Index (ACSI).

ACCOMPLISHMENTS *for 2006*

Continuing Care Retirement Communities (CCRCs) and Continuing Care at Home (CCAH)

CCRCs are a special type of retirement housing that offers a range of independent living, assisted living and health services. MDoA certifies CCRCs based on a review of organizational, financial, and contractual documents. The CCRC industry in Maryland grew in 2006 from 15,227 units to 15,633.

King Farm Presbyterian Retirement Community, Inc. - Montgomery County

On November 16, 2006, King Farm Presbyterian Retirement Community, Inc. (doing business as Ingleside at King Farm) broke ground and will begin construction in 2007 on a new CCRC to consist of 242 independent living units, 35 assisted living units and 45 comprehensive care beds.

Homewood at Frederick, MD Inc. – Frederick County

MDoA is evaluating the feasibility study of Homewood at Frederick, MD Inc. (doing business as Homewood at Crumland Farms) to offer continuing care agreements to its residents. Homewood at Crumland Farms consists of 165 independent living units, 56 assisted living units and 120 comprehensive care beds.

Goodwill Mennonite Home, Inc. – Garrett County

On July 11, 2006, MDoA issued an initial certificate of registration to Goodwill Mennonite Home, Inc. (doing business as Goodwill Village). Goodwill Village consists of 30 independent living units, 21 assisted living units and 19 comprehensive care beds, which will be registered as continuing care beds.

General German Aged People's Home of Baltimore, dba Edenwald – Baltimore County

On July 1, 2006 the MDoA issued an initial certificate of registration for the addition of 54 independent living units, 12 assisted living units, a wellness center and renovations to the existing healthcare center. Upon completion of the expansion Edenwald will consist of 283 independent living units, 56 assisted living units, and 72 comprehensive care beds.

Grants

Maryland Statewide Legal Assistance Project:
A Collaborative Effort to Expand Maryland Legal Services
Amount: $100,000 (each year for a three-year period)
Terms: 2006-2009
Funded by: Department of Health and Human Services, Administration on Aging

ACCOMPLISHMENTS *for 2006*

This three-year demonstration grant will allow the Maryland Department of Aging to increase the coordination between the aging network and Maryland legal services providers and to expand the scope and accessibility of critical services to seniors, particularly those who are most isolated because of poverty or cultural and linguistic differences. Specifically, the grant will improve services to English, non-English speaking, and low-English proficiency elders concerning advance directives by partnering with Asian-American and Hispanic-American advocacy groups, healthcare, and faith-based entities. It will also provide information and assistance to residents of assisted living facilities.

Empowering Older People To Take More Control of their Health Through Evidence-Based Prevention Programs: A Public/Private Collaboration
Amount: $300,000 (each year for a three-year period)
Term: 2006-2009
Funded by: Department of Health and Human Services, Administration on Aging

The Maryland Department of Aging will partner with the Department of Health and Mental Hygiene, and other State agencies, selected area agencies on aging, and private organizations to encourage older people to take charge of their health by providing the Chronic Disease Self-Management Program (CDSMP), in six jurisdictions, and the Active for Life program in Montgomery County. Local partnerships are integral to this grant and include aging services provider organizations, local health departments, health care providers, and faith-based organizations. CDSMP classes, to be known in Maryland as "Living Well - Take Charge of Your Health," will be available to participants in a variety of settings including senior centers, churches and health centers.

Maryland Senior Mediation Project
Amount: $40,000
Term: 2006-2007
Funded by: The Maryland Mediation and Conflict Resolution Office (MACRO)

MACRO continues to support the Maryland Department of Aging's efforts to establish a Senior Mediation Services Program in Maryland. Last year, through a grant award of $49,000 from MACRO, the Maryland Department of Aging began to develop senior mediation services to assist seniors and their families to make decisions and prevent or resolve conflicts and to promote public understanding of such services. This year MDoA will establish screening, intake and referral protocols and systems to increase the use of such services.

Aging and Disability Resource Center Grant
Amount: $1,200,000
Term: 2003-2008
Funded by: Department of Health and Human Services, Administration on Aging
               and the Centers for Medicare & Medicaid Services (CMS)

ACCOMPLISHMENTS *for 2006*

In Maryland, the Aging and Disability Resource Center (ADRC) Grant Program is known as Maryland Access Point, or MAP. It is a partnership between the Maryland Department of Aging, the Department of Health and Mental Hygiene, the Department of Human Resources, the Department of Disabilities, and advocates for senior consumers and persons with disabilities. This project underscores the importance of providing the public with more efficient access to information and quicker access to services for seniors, persons with disabilities, their caregivers, and the professionals who manage their care. Two pilot sites are now operating in Howard and Worcester Counties and a new website will be launched in 2007 that will create the first comprehensive, searchable database of public and private long-term support resources in the State. The website will make it easier for consumers to locate the information they seek. Planning is also under way for the website to enable consumers and caregivers to access applications for publicly funded, long-term support electronically and to apply for services on-line. Other mechanisms to expedite access to services are also being studied.

Alzheimer's Disease Demonstration Grant to States Program
Amount: $290,000 (each year for a three-year period)
Term: 2005-2008
Funded by: Department of Health and Human Services Administration on Aging

The Maryland ROSE (Respite, Outreach, Support, and Education) Project will seek to improve the ability of rural and Hispanic caregivers to care for individuals with Alzheimer's disease (or related disorders) and to assist them in developing a natural support network through a coordinated effort of partnering agencies. Partners on this project include: the Alzheimer's Association of Central Maryland, the Washington County Commission on Aging, Upper Shore Aging Inc. and the Baltimore City Commission on Aging and Retirement Education.

Targeted Outreach and Linkage to Older Refugees in Maryland Initiative
Amount: $65,000
Term: 2004-2007
Funded by: Maryland Office for New Americans (MONA)

Partnering with Catholic Community Services of the Archdiocese of Washington, this initiative will identify persons age 60 and over in Montgomery County who entered Maryland as refugees, and link these seniors with benefits and services available through Montgomery County Aging and Disability Services and other public and private resources. Linkage with English language and citizenship classes is a vital component of the project.

ACCOMPLISHMENTS *for 2006*

Special Events

Long-Term Care Awareness Initiative
As a 2006 participant in CMS's initiative, "Own Your Own Future," Governor Ehrlich sent letters to 670,000 Marylanders between 50 and 70 years of age, urging them to plan for their long-term future. With the number of seniors in Maryland steadily increasing and living longer, it is important to plan *ahead* for long-term needs. MDoA sponsored two seminars in September and October at the University of Maryland Baltimore County in collaboration with the Maryland Insurance Administration and the University of Maryland at Baltimore County on specific ways to prepare, e.g., long-term care insurance, reverse mortgages, advance directives and home modifications. The seminars drew more than 250 people with additional requests for seminars in other parts of the State.

Special Older American Month Events
On May 2, 2006, MDoA presented the *Governor's Conference on Vital Aging II*, a conference for professionals and consumers. More than 600 nurses, social workers, occupational and physical therapists, aging network professionals, family and professional caregivers, seniors, elder housing administrators, government officials and exhibitors attended the conference. Dr. Joseph Coughlin, director, Age Labs, Massachusetts Institute of Technology, delivered the keynote address. The conference highlighted innovative resources for professionals and seniors in a format of expert panels, exhibits, a health fair, and an opportunity to receive one-to-one assistance regarding the Medicare Prescription Drug Program. The conference provided education and networking opportunities for hundreds of professionals, caregivers and seniors. There were free health screenings for blood pressure, diabetes and depression conducted by the Coppin University Helene Fuld School of Nursing.

The Maryland Department of Aging joined the Maryland Centenarians Committee, Inc. in hosting the *14th Annual Maryland Centenarians Recognition Luncheon* on May 11, 2006 at Martin's West in Baltimore County. This Older Americans Month celebration pays tribute to Maryland citizens who have reached or surpassed the landmark age of 100. More than 500 guests celebrated with over 50 centenarian honorees. The Maryland Department of Aging has co-sponsored this event since 1993. Currently, there are more than 1,000 centenarians in Maryland.

Demographics

Garrett County citizens celebrate a century of living and giving. The centenarians were honored with Governor's citations.

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The Social Security Administration estimates that there are more than 700 Maryland citizens age 100 and older.

The number of older Marylanders is increasing. By the year 2030, it is projected that over 1.6 million Maryland citizens will be over the age of 60.

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Seniors at the Frederick County Carnival get ready for the open road.

Seniors at Leafy House in Montgomery County enjoy an arts and crafts project.

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The geographic distribution of Maryland's senior population will change as the overall population distribution changes over the next 30 years.
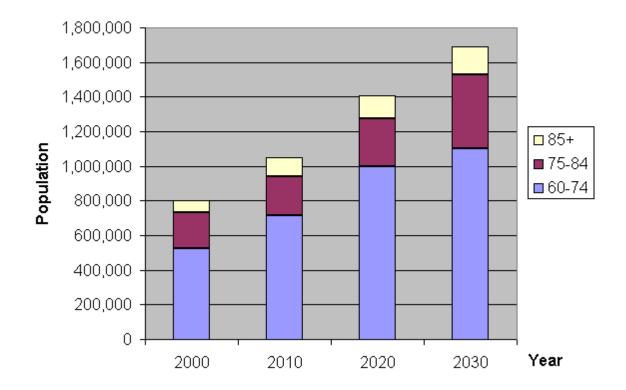
DEMOGRAPHICS

Facts and Figures

In the State of Maryland, several demographic trends shape the Department of Aging's goals and priorities for service to seniors.

- **Individuals over the age of 85 are the fastest growing segment of the population.** This cohort will grow in number, statewide, from 66,902 in 2000 to 164,975 by the year 2030. A graphic representation of this increase is provided on page 14.

- **The number of older Marylanders is increasing.** Of the nearly 5.3 million people in Maryland in 2000, 15% (801,036) were over the age of 60. The percentage is expected to increase to 25.2% of Maryland's projected population of 6.7 million by the year 2030. The tables on pages 15 and 16 provide further information on the growth of the 60+ population.

- **The geographic distribution of Maryland's senior population will change as the overall population distribution changes over the next 30 years.** In 2000, 67.4% of Maryland's seniors resided in Baltimore City and Anne Arundel, Baltimore, Montgomery and Prince George's counties. By 2030, the number of seniors in these jurisdictions is expected to fall to 61.5% as the senior population in Baltimore County and Baltimore City declines; Anne Arundel will stay the same and the senior population in Montgomery and Prince George's is expected to increase. The senior population in many of the outer suburban jurisdictions, such as Howard, Frederick and Charles, is also expected to increase.

- **The greatest numbers of the State's minority seniors live in Baltimore City.** In 2000, 32.3% of 60+ minority individuals lived in Baltimore City. The two counties with the next highest percentage of minorities are Prince George's County with 24.4% and Montgomery County with 15.7%. Of the population of older minority Marylanders who were 85+, 35% lived in Baltimore City, 19% in Prince George's County and 14% in Montgomery County in 2000. See table on page 18.

- **Low-income older individuals are concentrated in the Baltimore Metropolitan area**. A smaller number of poorer individuals aged 60 and over reside in Western Maryland and on the Eastern Shore. In 2000, 63,978 older Marylanders lived in poverty as defined by the federal poverty guidelines. See table on page 19.

Sources: U. S. Census, 2000; MD Department of Planning Population Projections, Revised 10/2006.

DEMOGRAPHICS

Elderly Population in Maryland by Age Group, Age 60+, Years 2000-2030

	2000	2010	2020	2030
60-74	523,014	714,895	995,541	1,101,459
75-84	211,120	223,988	278,956	426,387
85+	66,902	112,875	131,996	164,975
Total	**801,036**	**1,051,758**	**1,406,493**	**1,692,821**

Source: U.S. Census 2000; Maryland Department of Planning Projections (10/2006)

DEMOGRAPHICS

Maryland's 60+ Population Projections by Jurisdiction, 2000 - 2030

Jurisdiction	2000	2005	2010	2020	2030	% Change 2000-2030
Allegany Co.	17,105	17,138	17,755	19,945	20,878	22.1%
Anne Arundel Co.	67,510	78,014	92,973	119,380	143,319	112.3%
Baltimore City	110,961	108,768	115,263	134,544	141,469	27.5%
Baltimore Co.	140,313	146,272	165,237	205,311	229,354	63.5%
Calvert Co.	9,149	11,708	14,754	22,731	30,946	238.2%
Caroline Co.	5,264	5,781	6,741	9,693	12,533	138.1%
Carroll Co.	21,770	25,953	31,799	44,631	57,474	164.0%
Cecil Co.	12,254	14,476	17,742	25,578	33,293	171.7%
Charles Co.	13,547	17,004	20,940	31,925	45,718	237.5%
Dorchester Co.	7,008	7,562	8,677	11,831	13,903	98.4%
Frederick Co.	25,355	30,139	37,811	57,049	77,309	204.9%
Garrett Co.	5,962	6,599	7,576	9,989	11,556	93.8%
Harford Co.	30,352	36,239	44,451	61,330	74,471	145.4%
Howard Co.	30,352	36,239	44,451	61,330	74,471	145.4%
Kent Co.	4,677	5,293	6,145	8,144	9,699	107.4%
Montgomery Co.	130,647	149,686	179,481	247,732	296,949	127.3%
Prince George's Co.	90,558	108,162	131,056	182,081	230,001	154.0%
Queen Anne's Co.	7,105	8,620	10,352	14,835	18,854	165.4%
St. Mary's Co.	10,876	13,706	17,412	28,131	38,965	258.3%
Somerset Co.	4,563	4,930	5,599	7,428	8,161	78.9%
Talbot Co.	8,832	9,929	11,418	14,912	17,400	97.0%
Washington Co.	24,225	26,147	29,499	38,988	46,808	93.2%
Wicomico Co.	14,018	15,400	17,527	23,051	26,453	88.7%
Worcester Co.	12,379	14,082	16,461	22,185	26,433	113.5%
State of Maryland	**801,036**	**895,620**	**1,051,758**	**1,406,493**	**1,692,821**	**111.3%**

Source: U.S. Census, Maryland Department of Planning, November 2006

DEMOGRAPHICS

Maryland Population Projections by Age and Gender 2000-2030

	Age	Male	Female	Total	% of Total Pop
2000	**60-64**	96,399	105,330	201,729	3.8%
	65-69	77,449	90,793	168,242	3.2%
	70-74	66,542	86,501	153,043	2.9%
	75-79	51,439	77,052	128,491	2.4%
	80-84	30,253	52,376	82,629	1.6%
	85+	18,710	48,192	66,902	1.3%
	Total	340,792	460,244	801,036	15.1%
2005	**60-64**	118,536	132,219	250,755	4.5%
	65-69	84,693	98,221	182,914	3.3%
	70-74	65,176	82,007	147,183	2.6%
	75-79	52,952	75,846	128,798	2.3%
	80-84	36,284	61,294	97,578	1.7%
	85+	27,086	61,306	88,392	1.6%
	Total	384,727	510,893	895,620	16.0%
2010	**60-64**	150,251	172,456	322,707	5.5%
	65-69	105,721	124,055	229,776	3.9%
	70-74	72,638	89,774	162,412	2.8%
	75-79	52,427	72,190	124,617	2.1%
	80-84	38,019	61,352	99,371	1.7%
	85+	36,361	76,514	112,875	1.9%
	Total	455,417	596,341	1,051,758	17.8%
2020	**60-64**	187,782	215,264	403,046	6.4%
	65-69	148,987	180,857	329,844	5.2%
	70-74	115,770	146,881	262,651	4.1%
	75-79	74,223	99,065	173,288	2.7%
	80-84	42,689	62,979	105,668	1.7%
	85+	44,168	87,828	131,996	2.1%
	Total	613,619	792,874	1,406,493	22.2%
2030	**60-64**	174,970	203,976	378,946	5.6%
	65-69	178,265	212,030	390,295	5.8%
	70-74	147,501	184,717	332,218	4.9%
	75-79	106,698	145,703	252,401	3.8%
	80-84	69,728	104,258	173,986	2.6%
	85+	57,830	107,145	164,975	2.5%
	Total	734,992	957,829	1,692,821	25.2%

Source: U.S. Census 2000 and the Maryland Department of Planning Projections (October, 2006)

DEMOGRAPHICS

Maryland's 2000 Population by Jurisdiction and Age

	% of Total 60+	60+	65+	75+	85+
Allegany	2.14%	17,105	13,429	6,669	1,667
Anne Arundel	8.43%	67,510	48,820	20,985	4,440
Baltimore	17.52%	140,313	110,335	54,762	12,757
Calvert	1.14%	9,149	6,627	2,948	664
Caroline	0.66%	5,264	4,031	1,915	492
Carroll	2.72%	21,770	16,267	7,728	2,011
Cecil	1.53%	12,254	8,995	3,859	807
Charles	1.69%	13,547	9,402	3,974	902
Dorchester	0.87%	7,008	5,423	2,551	629
Frederick	3.17%	25,355	18,836	8,752	2,088
Garrett	0.74%	5,962	4,461	2,072	558
Harford	3.79%	30,352	22,160	9,254	1,888
Howard	3.32%	26,606	18,468	8,098	2,143
Kent	0.58%	4,677	3,708	1,804	466
Montgomery	16.31%	130,647	98,157	48,054	12,983
Prince George's	11.31%	90,558	61,951	25,138	5,686
Queen Anne's	0.89%	7,105	5,227	2,232	517
St. Mary's	1.36%	10,876	7,825	3,489	775
Somerset	0.57%	4,563	3,503	1,571	388
Talbot	1.10%	8,832	6,897	3,347	821
Washington	3.02%	24,225	18,690	8,887	2,246
Wicomico	1.75%	14,018	10,823	4,931	1,189
Worcester	1.55%	12,379	9,351	3,797	829
Baltimore City	13.85%	110,961	85,921	41,205	9,956
Total	**100.00%**	**801,036**	**599,307**	**278,022**	**66,902**

Source: U.S. Census 2000; MD Department of Planning, Population - Prepared 11/20/03. Rounding may affect totals

DEMOGRAPHICS

Estimates of Maryland's 2000 Minority Population 60+
By Jurisdiction and Age

	% of Total Minority 60+	60+	65+	75+	85+
Allegany	0.19%	366	260	125	87
Anne Arundel	4.35%	8,613	5,894	2,280	526
Baltimore	8.51%	16,836	11,315	4,378	1,109
Calvert	0.73%	1,454	1,037	447	112
Caroline	0.42%	835	639	306	72
Carroll	0.38%	761	510	215	46
Cecil	0.33%	648	457	167	33
Charles	1.54%	3,037	2,044	776	165
Dorchester	0.77%	1,522	1,173	540	128
Frederick	0.87%	1,728	1,175	487	123
Garrett	0.03%	61	46	14	5
Harford	1.33%	2,625	1,837	651	160
Howard	2.68%	5,292	3,432	1,245	301
Kent	0.38%	750	553	243	70
Montgomery	15.67%	31,005	20,685	7,802	1,860
Prince George's	24.37%	48,218	30,045	10,360	2,404
Queen Anne's	0.45%	893	688	318	94
St. Mary's	0.91%	1,809	1,328	568	134
Somerset	0.58%	1,143	858	384	102
Talbot	0.56%	1,111	850	400	127
Washington	0.38%	744	527	217	56
Wicomico	1.44%	2,851	2,122	927	232
Worcester	0.81%	1,603	1,193	544	153
Baltimore City	32.31%	63,922	47,560	20,049	4,465
Total	**100.00%**	**197,827**	**136,228**	**53,443**	**12,504**

Source: U.S. Census 2000, Summary File #1, prepared by the MD Department of Planning 11/03. Note: Minority status is determined to be all persons who are Hispanic or some race other than white alone. Rounding may affect totals.

DEMOGRAPHICS

**Maryland's Population in Poverty By Jurisdiction,
Total Poor and Minority Poor 2000**

County	Total Poor 60+	% Total Poor	Minority Poor 60+	% Minority Poor
Allegany	1,593	2.49%	69	0.24%
Anne Arundel	3,550	5.55%	1,109	3.93%
Baltimore County	8,535	13.34%	1,572	5.57%
Calvert County	480	0.75%	182	0.65%
Caroline County	634	0.99%	221	0.78%
Carroll County	1,011	1.58%	94	0.33%
Cecil County	838	1.31%	51	0.18%
Charles County	964	1.51%	494	1.75%
Dorchester County	920	1.44%	351	1.24%
Frederick County	1,331	2.08%	134	0.48%
Garrett County	777	1.21%	7	0.02%
Harford County	1,729	2.70%	327	1.16%
Howard County	1,470	2.30%	491	1.74%
Kent County	381	0.60%	139	0.49%
Montgomery County	6,746	10.54%	3,188	11.30%
Prince George's Co.	5,897	9.22%	4,019	14.25%
Queen Anne's County	539	0.84%	175	0.62%
St. Mary's County	794	1.24%	272	0.96%
Somerset County	768	1.20%	397	1.54%
Talbot County	868	1.32%	234	0.83%
Washington County	2,247	3.51%	111	0.39%
Wicomico County	1,192	1.86%	443	1.57%
Worcester County	767	1.20%	273	0.97%
Baltimore City	20,182	31.55%	13,990	49.60%
Totals	**63,978**	**100.00%**	**28,203**	**100.00%**

Source: U. S. Census 2000 Sample Data. Minority Poor 60+ Estimates Prepared by Maryland Department of Planning, Planning Data Services 8/2000

DEMOGRAPHICS

Maryland Total Population – Rural Status – 60+

County	Total Rural	% Rural	60+ Rural	% 60+ Rural
Allegany	19,390	25.9%	4,301	25.1%
Anne Arundel	27,564	5.6%	4,638	6.9%
Baltimore County	46,978	6.2%	8,437	6.0%
Calvert County	34,134	45.8%	4,509	49.3%
Caroline County	23,325	78.3%	3,811	72.4%
Carroll County	64,842	43.0%	9,764	44.9%
Cecil County	45,045	52.4%	6,750	55.1%
Charles County	40,672	33.7%	6,200	45.8%
Dorchester County	18,124	59.1%	4,023	57.4%
Frederick County	55,815	28.6%	8,329	32.8%
Garrett County	24,798	83.1%	4,692	78.7%
Harford County	48,726	22.3%	8,183	27.0%
Howard County	31,291	12.6%	4,336	16.3%
Kent County	14,195	73.9%	3,269	69.9%
Montgomery County	24,589	2.8%	3,931	3.0%
Prince George's County	20,652	2.6%	3,421	3.8%
Queen Anne's County	24,428	60.2%	4,689	66.0%
St. Mary's County	53,614	62.2%	7,887	72.5%
Somerset County	12,778	51.6%	2,995	65.6%
Talbot County	21,308	63.0%	5,959	67.5%
Washington County	41,879	31.7%	6,989	28.9%
Wicomico County	26,658	41.5%	4,420	31.5%
Worcester County	17,012	36.6%	3,633	29.3%
Baltimore City	0	0.0%	0	0.0%
Maryland	737,818	13.9%	125,166	15.6%

Source: U.S. Census 2000, Prepared by Maryland Department of Planning, Planning Data Services 11/20/03.

Client & Community Services

Senior Information & Assistance

The program is a single point of entry into the aging network system.

In FY2006, an estimated 589,615 persons received help to make informed choices about services, referrals to appropriate agencies, assistance in obtaining services and benefits and follow-up.

There are approximately 120 Senior Information and Assistance sites located across the State.

Grandparents and grandchildren enjoy the activities at an annual intergenerational summer camp held at Calvert Pines Senior Center in Calvert County.
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Senior centers serve as focal points for education, recreation, socialization, nutrition and health screening to improve the quality of life for Maryland's seniors.

Promoting physical fitness and overall health is a focus of the Client and Community Services Health Promotion and Disease Prevention Program.

National Family Caregiver Support Program

The NFCSP provides services to family and other non-paid caregivers in recognition of the tremendous work that they do in caring for their loved ones.

Health Promotion and Disease Prevention

Program Description: Health Promotion and Disease Prevention programs are aimed at increasing independence for seniors by providing education and essential services to promote overall health, physical fitness, and mental acuity. The Area Agencies on Aging (AAAs) provide educational sessions on current health topics as well as fitness activities that include dance, exercise and fitness centers. Medication management programs target the needs of homebound seniors who would otherwise not have access to nurses or pharmacists. This program helps to ensure that medications are being taken and stored properly and safely.

The A*erobics Class* at the Hatton Senior Center for Active Adults in Baltimore City has been offered continuously for many years. The committed instructor is an energetic senior who started facilitating classes at the Hatton Center when it opened in 1985. She still brings her vinyl records and a record player for musical accompaniment and her selections are absolutely fabulous. Fifty percent of the current class is composed of original members and the mean age of the class participants is 77. The oldest class member is age 87 and the youngest is age 69. See what dedication to exercise can do?

Program Eligibility Criteria: Eligible individuals are those who are age 60 and over. In accordance with the Older Americans Act, there are no income or asset restrictions but preference is given to serve older individuals with the greatest social and economic need.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: There are many types of classes for people of all abilities, including those with arthritis and other physical and medical problems.
Individual Couple	None	None	

Program Data:	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Health Screening Sessions	63,866	65,143	66,446
Health Education Sessions	56,445	57,574	58,725
Physical Fitness and Exercise Sessions	155,967	159,086	162,268
Number of Participants	72,819	74,275	75,761
Program Funding:			
Federal	$363,898	$366,068	$366,898
State	--	--	--
Local Contributions	70,931	74,324	74,324
Total	$434,829	$440,392	$441,222

CONTACT PERSON: Joseph Gennusa, Program Manager, 410-767-1090, jvg@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
Long-Term Care Ombudsman Program

Program Description: Long-term care ombudsmen are advocates for residents of long-term care facilities (nursing homes, board and care homes, assisted living facilities). Paid and volunteer ombudsmen work in every jurisdiction to advocate on behalf of individuals and groups of residents, and provide information to residents and their families about the long-term care system. They provide an on-going presence in long-term care facilities, monitoring care and conditions and providing a voice for those who are unable to speak for themselves.

Ms. R, a woman in her 70s, entered a long-term care facility for rehabilitation. While at the facility she lost her dentures, which resulted in weight loss because she was unable to eat. The family made several attempts to advocate on Ms. R's behalf without success. They finally contacted the local Ombudsman Program, who successfully advocated for the resident. The nursing home then set up a dental appointment for Ms. R and paid for a set of new dentures. As a result, Ms. R began to regain weight.

Program Eligibility Criteria: Eligible individuals are residents of any age who reside in long-term care facilities.

Eligibility	Monthly Income Test	Annual Asset Test	Notes:
Individual Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Complaints	4900	4851	5336
Number of Abuse Cases	869	956	1051
Number of Volunteers	147	162	162
Program Funding:			
Federal	$467,000	$436,655	$436,655
State	1,291,802	1,291,802	1,291,802
Local Contributions	241,301	287,028	287,028
Total	$2,000,103	$2,015,485	$2,015,485

CONTACT PERSON: Patricia Bayliss, State Ombudsman, 410-767-1091, plb@ooa.state.md.us

National Family Caregiver Support Program

Program Description: The National Family Caregiver Support Program provides services to family and other non-paid caregivers in recognition of the tremendous work that they do in caring for their loved ones. The NFCSP provides five categories of services: Information about available services; assistance to access these services, including case management; education, training and support services including individualized counseling; respite care to enable temporary relief from caregiving responsibilities; and supplemental services that include other services not identified above.

> Mrs. W is a 75 year-old woman caring for her 76 year old husband, who suffered a stroke while on vacation in 2000. He also suffers from Macular Degenerative Disease and is blind in one eye. She is the primary caregiver and Mr. W is in need of assistance with all daily activities such as eating, bathing, and using the toilet. The Caregiver Support Program provides an aide for respite for Mrs. W on a weekly basis. Mrs. W runs errands, shops and has time for herself without leaving her husband unattended. This program has made a difference in how she handles her day-to-day responsibilities.

Program Eligibility Criteria: There are two categories of caregivers who benefit from these services: Caregivers caring for someone 60 years of age or older, including persons not related by blood or marriage; and grandparents and other relative caregivers over the age of 60 as the primary caregiver for a child or children age 18 or younger. In accordance with the Older Americans Act, there are no income or asset restrictions but preference is given to serve older individuals with the greatest social and economic need.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Respite and supplemental services may be provided to caregivers who are caring for someone with physical and mental disabilities that restrict their ability to perform normal daily tasks.
Individual Couple	None	None	

Program Data:

Number of Caregivers Served/Units of Service*	FY2006 (Actual)		FY2007 (Est.)		FY2008 (Est.)	
	People	Units	People	Units	People	Units
Education, Training or Support	10,966	2,911	5,483	2,620	5,483	2,620
Respite	2,031	81,154	2,031	81,154	2,031	81,154
Supplemental Services	888	28,675	888	28,675	888	28,675
Access Assistance	71,830	81,635	71,830	81,635	71,830	81,635
Information	125,297	35,347	125,297	35,347	125,297	35,347

* Units of service are defined as: Education/Training/Support = 1 session; Respite = 1 hour; Supplemental Services = 1 item; Access Assistance = 1 contact; Information = 1 activity

Program Funding:			
Waiting List: There are 334 caregivers awaiting respite services, and 14 who are waiting for supplemental services. The waiting list for respite services has begun to grow each year.			
Federal	$2,429,417	$2,408,956	$2,407,846
State	39,476	39,476	39,476
Local Contributions	333,601	649,449	649,449
Total	$2,802,494	$3,097,881	$3,096,771

CONTACT PERSON: Felicia French, Program Manager, 410-767-0705, fvf@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
Public Guardianship

Program Description: The Public Guardianship program serves adults 65 years and older who have been deemed by a court of law to lack the capacity to make or communicate responsible decisions concerning their daily living needs. The law requires that the Secretary of the State Department of Aging or a director of a local Area Agency on Aging (AAA) be appointed by the court as a guardian of person when there is no other person or organization willing and appropriate to be named. When the local director of the AAA is named as guardian of person, the local guardianship coordinators manage the guardianship responsibilities and duties. The goal of the program is to provide protection and advocacy on behalf of the disabled older adult.

> Ms. S has been a ward of the public guardianship program for six years. The Guardianship coordinator accompanied Ms. S to an eye doctor appointment. The staff at the doctor's office was confused by some of Ms. S' answers, so the guardianship coordinator intervened to successfully complete the vision test and office visit. Guardianship coordinators routinely accompany wards to office visits, which helps to reduce repetitive lab tests, unnecessary health care, and hospitalizations. This type of guardianship intervention often results in savings to the client's finances and/or the Medical Assistance Program

Program Eligibility Criteria: The program serves seniors who are 65 years and older who have been deemed by a court of law to lack the capacity to make or communicate responsible decisions concerning their daily living needs.

Eligibility Age 65 and older	Monthly Income Test None	Annual Asset Test None	Notes:

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Total Number of Guardianship Wards	756	771	787
Number of New Cases	188	181	194
Group Education Sessions Provided	77	77	77
Individual Consultations (pre- and post- guardianship)	10,281	10,068	10,269
Number of Public Guardianships Avoided	338	393	455
Program Funding:			
Federal	--	--	--
State	$642,691	$642,692	$642,692
Local Contributions	290,865	339,098	339,098
Total	$933,556	$981,790	$981,790

CONTACT PERSON: Priscilla Campbell, 410-767-1088, pcamp@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
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CONTACT PERSON: Priscilla Campbell, 410-767-1088, pcamp@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
Senior Care

Program Description: The Senior Care Program provides coordinated, community-based, in-home services to seniors with disabilities. Senior Care provides "Gapfilling" funds for services for seniors who may be at risk of nursing home placement. Senior Care clients are provided with case managed access to existing publicly and privately financed services. When needed services are not available through other means, Senior Care will provide Gapfilling services that may include personal care, chore service, adult day care, financial assistance for medications, medical supplies, respite care, home delivered meals, emergency response systems, medical transportation and other services.

Ms. M is an 87-year-old woman who lives alone in an apartment. She has received Senior Care services since her husband died in 1990. Her diagnoses include Chronic Obstructive Pulmonary Disease, Chronic Heart Failure, Osteoporosis, Anxiety Disorder and Depression. She needs help with bathing, dressing, laundry and shopping. In FY2006, Senior Care paid $240 for personal care and chore services. She also receives home delivered meals and a housing subsidy. These services have helped her remain in her home.

Program Eligibility Criteria: Eligible individuals are Maryland residents who: are age 65 or older; need assistance with bathing, dressing, chores, etc.; have a medical condition or disability that places him or her at risk of having to enter a nursing home; and have an income not greater than 60% of the State median income.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Functional/Medical eligibility is determined as having a moderate or severe rating on the State assessment tool.
Individual	$2,287	$11,000	
Couple	$2,991	$14,000	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Clients Served with Gapfilling Services	3,932	3,932	3,932
Number of Clients Waiting for Services at end of Fiscal Year	2,460	2,691	2,943
Number of Waiting List Clients who Enter Nursing Facilities	184	184	184
Program Funding:			
Waiting List: The Senior Care waiting list grows each year. In FY 06, 9% of people on the waiting list were placed in nursing homes.			
Federal	$780,770	$819,342	$819,342
State	6,478,773	7,266,384	7,266,384
Local Contributions	230,322	742,681	742,681
Total	$7,489,865	$8,828,407	$8,828,407

CONTACT PERSON: Dakota Burgess, Program Manager, 410-767-1101, drb@ooa.state.md.us

Senior Center Plus

Program Description: Senior Center Plus is a supervised social day care program held in a non-residential setting that meets Department of Aging requirements. The program is designed to promote socialization, improve mental and physical functioning and address the nutritional needs of frail seniors.

Senior Center Plus attempts to address some of the needs of seniors too frail to participate in regular senior center activities, yet not frail enough to need adult day care services. Senior Center Plus provides at least four hours of organized activities, crafts, music and movement, reality orientation and at least one meal containing one-third of the recommended dietary allowances. An important component of Senior Center Plus is to provide respite for family caregivers.

The Harbor Hospital Adult Day Health Center in Baltimore City was recently certified by the Department of Aging as a Senior Center Plus site. This facility is located on Hanover Street across from Harbor Hospital, its sponsoring agency.

This affiliation represents the Harbor Hospital Adult Day Health Center's commitment to developing a more comprehensive approach to addressing the total health needs of the frail elderly clients living in its catchment area.

Program Eligibility Criteria: Eligible individuals are those individuals age 50 and older who are unable to perform two or more instrumental activities of daily living without substantial assistance or supervision

Eligibility	Monthly Income Test	Annual Asset Test	Notes: N/A
Individual	None	None	
Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Persons Enrolled	345	372	401
Number of Sites	44	45	45
Federal	N/A	N/A	N/A
State	N/A	N/A	N/A
Local Contributions	N/A	N/A	N/A
Total			

CONTACT PERSON: Wiley G. Finch, Jr., Program Manager, 410-767-1115, wgf@ooa.state.md.us

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Individual	None	None	
Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Persons Enrolled	345	372	401
Number of Sites	44	45	45
Federal	N/A	N/A	N/A
State	N/A	N/A	N/A
Local Contributions	N/A	N/A	N/A
Total			

CONTACT PERSON: Wiley G. Finch, Jr., Program Manager, 410-767-1115, wgf@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
Senior Centers

Program Description: Senior Centers serve as focal points for education, recreation, socialization, nutrition and health screening to improve the quality of life for Maryland's senior population. They also are points of contact for seniors and their families to obtain information. Capital improvement funds are available to local governments to supplement the costs of new construction, conversions, renovations, acquisitions, and capital equipment needed to develop senior centers. Limited operating funds are also available to senior centers on a competitive basis to encourage innovative programming.

The City of Annapolis in Anne Arundel County received $600,000 in Senior Citizens Activities Centers Capital Improvement Funds in 2004 for the renovation of the Wiley H. Bates High School. The Wiley H. Bates High School Redevelopment Project reflects a concerted government and community effort to conserve a historically significant and irreplaceable 124,000 square foot facility. This redevelopment project provided 71 affordable senior apartments, a Boys and Girls Club (with athletic fields), and the Annapolis Senior Center (replacing the former senior center site).

Program Eligibility Criteria

For **Senior Center Capital Improvement Funds**, Article 70B, subsection 29b, limits each grant to a maximum of $600,000. State funds must be matched by non-State funds on a dollar-for-dollar basis (in-kind matches are not permitted).	For **Senior Center Operating Funds**, State grants must be matched 100% by the grant recipient. In-kind matches are permitted. Operating fund grants are provided for innovative programming, and are given for a period not to exceed three years. The senior center grantees must identify alternate fund sources to maintain programming.

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Capital Improvement Program			
Total Senior Centers	116	117	117
New Construction	2	2	2
Renovation	2	1	1
Operating Fund Program			
Seniors Benefiting from Operating Funds	1846	1864	1864
Capital Funds			
State	$1,393,000	$1,320,000	$1,500,000
Local	7,167,970	8,580,000	9,750,000
Total	$8,560,970	$9,900,000	$11,250,000
Operating Funds			
State	$150,000	$500,000	$500,000
Local	760,739	760,739	760,739
Total	$910,739	$1,260,739	$1,260,739

CONTACT PERSON: Wiley G. Finch, Jr., Program Manager, 410-767-1115, wgf@ooa.state.md.us

Senior Health Insurance Assistance Program (SHIP)

Program Description: The Senior Health Insurance Assistance Program provides seniors and adults of any age who have disabilities with information and assistance on health insurance issues, including Medicare and Medigap, Medicare Part D Prescription Drug plans, preparing and filing health insurance claims, Medicare Advantage Plans, programs for low-income beneficiaries and long-term care insurance policies. State and local SHIP staff and volunteers provide one-to-one assistance, and conduct educational sessions throughout the State on a variety of health insurance related topics, most notably, the new Medicare prescription plans.

Ms. S contacted the MDoA SHIP office extremely upset because she was told that she was going to be dropped by her Medicare Part D Prescription Drug Plan for non-payment of premiums. She was eligible for the federal "Extra Help" program, and stated that she would have to make a decision whether to buy food or her many prescriptions. The SHIP office contacted the Maryland Department of Health and Mental Hygiene, which verified that Ms. S still qualified for "Extra Help," and that Medicare would pay for the Prescription Drug Plan premium. A computer error was responsible for this problem. SHIP and DHMH staff provided Medicare with the necessary information for proper payment of the premium, allowing Ms. S to remain in the prescription drug plan of her choice.

Program Eligibility Criteria: Eligible individuals are those who reside in Maryland and have Medicare Part A and/or Part B.

Eligibility Individual Couple	Monthly Income Test None	Annual Asset Test None	Notes: There are no age requirements to receive assistance from SHIP.

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Contacts for			
Medicare	5,940	6,000	6,300
Medicaid	5,097	5,676	5,960
Prescription Assistance	35,077	31,856	33,449
Long Term Care	183	534	561
Number of Clients Served	26,519	22,452	23,575
Number Attending Events	49,829	24,915	26,160
Number of Volunteers	150	150	150
Number of Volunteer Hours	35,182	35,182	35,182

Waiting List: There are 174 staff and volunteers available to counsel 623,000 Medicare beneficiaries who need to make a decision on Medicare Part D. The main challenge for the SHIPs is keeping up with training requests, scheduled presentations and enrollment events while still providing health insurance information and assistance to Medicare beneficiaries, and outreach to homebound seniors and persons with disabilities.

Program Funding:			
Federal	$450,278	$420,856	$399,730
State	441,812	1,519,727	54,727
Local Contributions	43,686	268,465	268,465
Total	$935,776	2,209,048	$722,922

CONTACT PERSON: Michelle Holzer, Program Manager, 410-767-1109, mph@ooa.state.md.us

CLIENT AND COMMUNITY SERVICES
Senior Information and Assistance Program (I&A)

Program Description: The Senior Information and Assistance Program provides a single point of entry into the aging network system to obtain information concerning benefits and programs for older Marylanders, their families and caregivers. Through the program, seniors receive information to make informed choices about services, referrals to appropriate agencies, assistance in obtaining services and benefits, and follow-up. The program promotes awareness of services for the elderly through outreach and public education, and provides information about health care, Medicare/health insurance, in-home services, transportation, housing, legal services, senior centers, retirement communities, prescriptions drugs and more. There are approximately 120 Senior I&A sites located across the State.

> Mrs. B called Senior Information and Assistance to request help caring for her 76-year-old husband who has Alzheimer's disease. As his 24-hour caregiver, she is under considerable stress and needed assistance to manage her husband's care because her health is deteriorating and her sight is impaired due to cataracts. An I&A staff person made several referrals and Mr. B now attends Adult Day Care several times a week and has an aide who assists with bathing and dressing. In addition, Mrs. B's cataract surgery is scheduled, and her granddaughter has agreed to provide respite care. Mrs. B is grateful for the help from I&A staff.

Program Eligibility Criteria: Eligible clients must be 60 years and older. Persons can access the program through telephone and walk-in service, appointments, written correspondence and home visits.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Persons needing more in depth assistance will be assessed to determine his/her specific need for services, programs and benefits.
Individual Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Information Units of Service	553,898	571,947	590,583
Number of Referrals	100,215	102,256	104,301
Follow-up Units of Service	47,277	48,132	49,003
Assistance Units of Service	86,491	89,951	93,549
Number of Assistance Clients	39,541	41,913	44,428
Program Funding:			
Federal	$967,701	$1,088,770	$1,088,770
State	811,652	810,072	810,072
Local Contributions	670,989	481,959	481,959
Total	$2,450,342	$2,380,801	$2,380,801

CONTACT PERSON: Dakota Burgess, Program Manager, 410-767-1101, drb@ooa.state.md.us

Senior Legal Assistance Program

Program Description: The Senior Legal Assistance Program provides access to legal advice, counseling and representation to older Marylanders as well as legal support to local Ombudsmen, Health Insurance Counselors and Public Guardianship managers. Area Agencies on Aging contract with local attorneys and law centers to provide services. Priority is given to issues involving income maintenance, disability benefits, health care, protective services, abuse, institutionalization, guardianship and housing. In FY2006, the Department of Aging received a three-year grant from the Administration on Aging to provide additional services for people seeking information on advanced directives and for assisted living residents.

Ms. M is 72 years old and was sued by a tax sale certificate purchaser in an attempt to foreclose on her home. Although she did not have a mortgage on her home, she had very little left after expenses since she only received $1,100 monthly in Social Security benefits and had fallen behind because of unexpected medical expenses. The Senior Legal Assistance Program was able to advise Ms. M of her options to resolve this matter. She was ultimately able to secure a loan with manageable terms and apply for a property tax credit to reduce future property taxes.

Program Eligibility Criteria: Eligible residents are those who are 60 years of age or a caregiver of such person. There is no cost for legal assistance with priority issues as related to income, health-care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect and age discrimination. Preference is given to older persons with the greatest economic or social need.

Eligibility	Annual Income Test	Annual Asset Test	Notes:
Individual	$19,000	$20,000	Personal property is not
Couple	$25,000	$40,000	counted as assets

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Hours of Service Provided	10,595	11,948	12,612
Number of Persons Served	2,821	2,987	3,153
Program Funding:			
Federal	$367,413	$410,955	$410,955
State	--	--	--
Local Contributions	230,008	285,826	285,826
Total	$597,421	$696,781	$696,781

CONTACT PERSON: Priscilla Campbell, Legal Services Developer, 410-767-1088, pcamp@ooa.state.md.us

Senior Nutrition – Congregate Meals

Program Description: The Congregate Meals Program works to improve the quality of life for older persons by providing wholesome meals, nutrition education and counseling and increased social interaction. Meals are served in a variety of congregate settings, including senior centers and senior housing sites. There are 260 meal sites, 183 in low-income areas. Types of meals include traditional and non-traditional meals such as box lunches, salad bars, soup and sandwiches and culturally diverse meals. A very important benefit of congregate meals is the socialization that it encourages, particularly for seniors who do not have much interaction with family or their communities. There are 2,038 volunteers who assist with this program.

> The Congregate Nutrition Program provides participants with a nutritious meal. For 56% of the congregate meal participants, the mid-day meal provides half or more of the food they will consume that day. In fact, 46% of congregate clients get their only serving of meat, poultry or fish, and 62% get their only two servings of grains at this meal. Over half of congregate clients participate in fitness activities, use health screening and have increased social opportunities. The Congregate Nutrition Program helps participants remain independent and engaged through meals, culturally appropriate nutrition education, and physical activity and social interaction
>
> This information was provided by the National Association of Nutrition and Aging Services Programs (NANASP) Challenge Brief, 2006.

Program Eligibility Criteria: Eligible individuals are those who are age 60 or older. In accordance with the Older Americans Act, there are no income or asset restrictions, but preference is given to serve older individuals with the greatest social and economic need.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Spouses and disabled dependents of any age are able to have meals when they accompany an eligible individual.
Individual Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Meals	1,540,930	1,510,111	1,479,909
Number of People Receiving Meals	35,294	34,588	33,896
Number Attending Nutrition Education	25,069	26,072	27,115
Program Funding:			
Waiting List: There are 1,083 people on a waiting list for congregate meals.			
Federal	$5,437,171	$5,591,440	$5,591,966
State	681,419	850,598	850,598
Local Contributions	3,376,422	3,631,137	3,631,137
Total	$9,495,012	$10,073,175	$10,073,701

CONTACT PERSON: Joseph Gennusa, Program Manager, 410-767-1090, jvg@ooa.state.md.us

Senior Nutrition – Home-Delivered Meals

Program Description: The mission of the Home-Delivered Meals Program is to provide meals, nutrition assessments, and coordination of nutrition services and referrals for additional services when needed, to homebound elderly with the intent of maintaining them in their communities. The program depends on more than 5,000 volunteers who provide vital services by delivering the meals, and who are responsible for saving lives as they can identify and report on isolated seniors facing potentially dangerous situations. The program could not exist without the services of the volunteers.

The Home-Delivered Meals Program serves the most frail and most functionally impaired people. It is an important social community link and helps delay institutionalization. Three quarters of home-delivered meal participants are age 75 or over and the majority live alone. For 66% of program participants, the mid-day meal provides half or more of the day's total food intake food they will consume that day. Participants have healthier diets in comparison to other older adults. The meal is often the sole source of nutrients from key food groups for one- to two-thirds of participants. Participants value this program because it enables them to eat more balanced meals. Almost 95% of participants rate the meals as "good to excellent" and about 90% are satisfied with the food taste and its on-time home delivery.

This information was provided by the National Association of Nutrition and Aging Services Programs (NANASP) Challenge Brief, 2006.

Program Eligibility Criteria: Eligible individuals are homebound seniors who are age 60 or older. In accordance with the Older Americans Act, there are no income or asset restrictions but preference is given to serve older individuals with the greatest social and economic need.

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Spouses and disabled dependents of any age are able to have meals if they reside with an eligible individual.
Individual Couple	None	None	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Meals	1,331,932	1,305,293	1,279,187
Number of People Receiving Meals	7,982	7,822	7,666
Number of Volunteers	5,112	5,112	5,112
Program Funding:			
Waiting List: There are 857 homebound elderly who are on a waiting list to receive meals.			
Federal	$2,739,830	$2,938,699	$2,938,699
State	799,926	998,528	998,528
Local Contributions	1,105,720	1,801,609	1,801,609
Total	$4,645,476	$5,738,836	$5,738,836

CONTACT PERSON: Joseph Gennusa, Program Manager, 410-767-1090, jvg@ooa.state.md.us

Housing Services

Housing Services for Maryland's senior population include:

- Continuing Care Retirement Communities (CCRCs)

- Congregate Housing Services Programs

- Medicaid Home and Community-Based Waiver for Older Adults

- Senior Assisted Living Group Home Subsidy Program

HOUSING SERVICES
Continuing Care Retirement Communities (CCRCs)

Program Description: The Continuing Care Contract Act authorizes the Department to regulate Continuing Care Retirement Communities (CCRCs) and Continuing Care at Home (CCAH). The Department also issues certificates of registration based on a review of organizational, financial and contractual documents and provides information to the public.

CCRCs are a specific type of retirement housing that offers a combination of housing and services. The services include access to medical and nursing services or other health related benefits to individuals who have paid entrance fees and signed contracts for more than one year and usually for life. Health-related benefits may include full coverage of nursing care in an on-site nursing center at no additional fee, or may be limited to priority admission to a nursing home, with additional fee-for-service charges. The scope of services varies among CCRCs. Fees and service packages are specified in continuing care agreements.

CCAH offers a variety of services to individuals who remain in their own homes. Services include care coordination, home inspections by an occupational therapist, assistance with activities of daily living, skilled nursing services, routine assisted living services, routine comprehensive care services and assistance with home maintenance. These services are offered under a written agreement that requires payment of an entrance fee and monthly fees.

Expansions of existing communities in Carroll, Baltimore, and Montgomery Counties were completed in 2006. Completion of a new CCRC in Prince George's County occurred in 2006. Construction is scheduled to begin in 2007 on a new CCRC in Montgomery County.

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Facilities	33	34	37
Units	15,633	16,068	16,636
Special Funds	$315,982	$320,000	$350,000

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HOUSING SERVICES
Continuing Care Communities Inventory

Continuing Care Communities (Operating)		Total	ILU*	AL**	Comp***
BayWoods of Annapolis	Anne Arundel County	192	147	35	10
Ginger Cove	Anne Arundel County	349	243	51	55
Roland Park Place	Baltimore City	284	172	41	71
The Wesley, Inc.	Baltimore City	226	0	151	75
Augsburg Lutheran Home	Baltimore County	187	0	64	123
Augsburg Lutheran Village	Baltimore County	138	138	0	0
Blakehurst	Baltimore County	345	277	24	44
Broadmead	Baltimore County	364	269	16	79
Charlestown	Baltimore County	1,992	1,584	164	244
Edenwald	Baltimore County	345	229	44	72
Glen Meadows	Baltimore County	275	210	34	31
Maryland Masonic Homes	Baltimore County	233	35	110	88
Mercy Ridge	Baltimore County	455	408	47	0
North Oaks	Baltimore County	232	182	13	37
Oak Crest Village	Baltimore County	1911	1528	143	240
Pickersgill, Inc.	Baltimore County	177	0	136	41
Presbyterian Home	Baltimore County	100	0	78	22
Asbury~Solomons Island	Calvert County	378	300	30	48
Carroll Lutheran Village	Carroll County	398	398	0	0
Fairhaven	Carroll County	434	320	35	79
Buckingham's Choice	Frederick County	303	217	45	41
Frederick Home	Frederick County	29	0	29	0
Goodwill Retirement Village	Garrett County	56	30	21	5
Vantage House	Howard County	294	224	26	44
Heron Point of Chestertown	Kent County	275	192	45	38
Asbury Methodist Village	Montgomery County	1,264	815	164	285
Bedford Court	Montgomery County	355	219	76	60
Brooke Grove	Montgomery County	32	22	5	5
Maplewood Park Place	Montgomery County	259	207	22	30
National Lutheran Home	Montgomery County	429	129	0	300
Collington	Prince George's County	476	367	65	44
Riderwood Village, Inc.	Prince George's County	2,257	1,997	174	86
William Hill Manor	Talbot County	280	120	44	116
Fahrney-Keedy	Washington County	113	61	32	20
Homewood	Washington County	196	196	0	0
	Total Units	**15,633**	**11,236**	**1,964**	**2,433**

Continuing Care Retirement Communities (Planned)

Expansions					
William Hill Manor	Talbot County	1	1	0	0
Edenwald	Baltimore County	66	54	12	0
National Lutheran Home	Montgomery County	15	15	0	0
New					
Riderwood Village, Inc.	Prince George's County	132	0	0	132
Homewood at Frederick, MD	Frederick County	341	165	56	120
Brooke Grove	Montgomery County	18	18	0	0
King Farm	Montgomery County	330	250	35	45
Ravenwood	Washington County	94	46	48	0
Robinwood	Washington County	103	13	90	0
	Total Units	**1,100**	**562**	**241**	**297**

*ILU=Independent Living Units **AL=Assisted Living Beds ***Comp=Comprehensive Care Beds

Congregate Housing Services Program (CHSP)

Program Description: The Congregate Housing Services Program is a level of housing between independent living and institutionalization, which combines shelter with daily meals, weekly housekeeping and/or laundry, personal assistance as needed and service management. It provides assistance with activities of daily living to frail older persons who require help in performing personal and household functions. The Congregate Housing Services Program is offered in senior citizen apartment buildings, which serve low and moderate-income residents and may be operated by local housing authorities, non-profit organizations or housing management companies.

AB is a 78-year-old female who is unable to use her right arm. She resides in an apartment in Salisbury, MD and uses an electric wheel chair to get around due to weakness in her legs and frequent falls. She also suffers from episodes of depression. She recently returned from the hospital following heart problems and currently receives six hours a week of assistance from the CHSP operated by MAC, Inc., the Area Agency on Aging on the Eastern Shore. She receives three meals a day, weekly housekeeping and laundry, assistance with daily bath and grooming, assistance with cutting her food in the dining room and frequently receives meal delivery services. MAC's Senior Care Program also provides her with an emergency response system. Her family says she would not be able to remain in her apartment without MAC's CHSP services.

Program Eligibility Criteria: Eligible residents are those who: are at least 62 years of age; physically or mentally impaired; need assistance with one or more of the essential activities of daily living; need one or more congregate housing services available in the facility; and be able to function in the facility if provided with those services. In addition, the spouse of a participant may also receive services, provided the spouse is at least 55 years old and meets program eligibility criteria.

Subsidy Eligibility	Monthly Income Test	Annual Asset Test	Notes: Provides financial assistance for Congregate Housing residents in selected sites for individuals 62 and older whose net monthly income is insufficient to pay the full monthly fee for Congregate Housing Services. Next expected change: 7/1/07
Individual	$ 2,287	$ 27,375	
Couple	$ 2,991	$ 35,587	

Program Data:

Unmet Need: 191 seniors are on the waiting list for State subsidies. 28 facilities have notified the Department in writing that they are interested in starting a CHS program.

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Residents Receiving Services	838	754	754
Number of Buildings Receiving Services	30	29	29
Program Funding:			
Federal	$954,413	$792,615	$792,615
State	1,670,835	1,677,077	1,677,077
Local Contributions	604,840	645,395	645,395
Total	$3,230,088	$3,115,087	$3,115,087

CONTACT PERSON: Janice L. MacGregor, CHSP Manager, 410-767-1087, jlm@ooa.state.md.us

Medicaid Waiver for Older Adults

Program Description: The Home and Community-Based Waiver for Older Adults enables older adults to remain in a community setting even though their age or disability would warrant placement in a long-term care facility. The Waiver allows services, which are typically covered by Medicaid only in a nursing facility, to be provided to eligible persons in their own homes or in assisted living facilities. These services include personal care, home-delivered meals, environmental assessments and accessibility adaptations, assistive devices, respite care, behavioral consultation, family and consumer training, dietitian/nutritionist services, personal emergency response systems and Senior Center Plus. Each program participant is assigned to a case manager who works with him or her to develop a plan of care that best meets his or her needs. Services and qualified providers are identified in the plan of care, and then monitored to assure the participant's needs are being adequately and continuously addressed.

A routine procedure to remove a blockage from his right carotid artery left John fighting for his life. After a month in the hospital, he was moved to a chronic care rehab unit and after six months was transferred to a long-term care facility. His family was a driving force in his recovery and he wanted desperately to be at home, but John was paralyzed on his left side, had a feeding tube, and a Foley catheter. John was referred to the Medicaid Waiver program. Through the coordinated efforts of the LTC facility, BC/BS case managers, local and state Departments of Aging staff, family and neighbors, John's home was made accessible and services were made available. The Waiver Program provided personal care hours, allowing John's' wife to continue to work. Each month, a qualified nurse conducted monitoring and education for both John and his personal care aide. John continues to follow PT and OT and is able to transfer with minimal assistance. Six months later John is thriving, the feeding tube has been removed, and John jokes that he now needs to go on a diet. The Older Adults Waiver gave this husband, father, grandfather, and in a few months, great grandfather, the option to remain in the community and—more importantly—gave him an opportunity to be in control of his own quality of life.

Program Eligibility Criteria: Eligible individuals are those who are age 50 and older, meet Medicaid's long-term care admission criteria (nursing home level of care), and meet financial and technical requirements.

Financial Eligibility Individual	Monthly Income Test	Annual Asset Test
	$1869 as of 1/1/07 (300% of SSI maximum) or higher if medically needy and spending down through allowable expenditures for medical and remedial services to the medically needy income limit of $350/month.	$2000-$2500, depending on eligibility category

Program Data:

	F2006 Actual	F2007 (Est.)	FY2008 (Est.)
Number of Providers	4,194	4,300	4,350
Number of Participants – Unduplicated Count	3,750	3,750	3,750

Waiting List: The Waiver for Older Adults maintains a registry of individuals interested in applying for this program. This registry is required because the program is funded to support a maximum of 3,000participants at any one point in time and is currently at capacity. There are over 7,600 names on the registry. Generally 60% of those who apply for this waiver are determined eligible. If this holds true for those currently on the registry, more than 3400 people in need of long-term support services may have no alternative to placement in a nursing home.

Program Funding:			
State (Administration and Case Management)	$1,981,054	$1,981,054	$1,981,054
Federal (Administration and Case Management)	2,602,376	3,700,000	3,100,100
Total	$4,597,430	$5,695,054	$5,095,154

CONTACT PERSON: F. Warren Sraver - Waiver Manager, (410) 767-1065
fws@ooa.state.md.us

HOUSING SERVICES
Senior Assisted Living Group Home Subsidy Program (SALGHS)

Program Description: The Senior Assisted Living Group Home Subsidy (SALGHS) program provides low and moderate-income seniors with access to assisted living services in 4 to 16 bed group homes licensed by the Department of Health and Mental Hygiene as Assisted Living Programs. The Department of Aging provides subsidies to eligible residents who might otherwise be in nursing facilities to cover the difference between the participant's monthly income (less a $60/month personal allowance) and the approved monthly assisted living fee. The maximum subsidy, paid directly to the provider, is $550/month. Subsidies are paid from State general funds.

> Mrs. X is a 75 year-old woman who has received a SALGHS subsidy since moving to an Anne Arundel County assisted living facility in 1995. Prior to moving into the assisted living facility, she resided with her son and his family. She has a history of breast cancer, psychosis and depression. After undergoing a bilateral mastectomy, she required 24-hour care, which proved to be more than her working family could manage. While Mrs. X is happy with her assisted living placement, she still has difficulty walking and needs help with personal care and taking her medicines. Mrs. X tells everyone she has two families: her assisted living family, which includes the residents and staff, and her biological family, who continue to be actively involved in her life.

Program Eligibility Criteria: Eligible residents are low to moderate income persons residing in, or accepted for admission to, an assisted living facility, who are at least 62 years of age, physically or cognitively impaired, require assistance with one or more activities of daily and/or instrumental activities of living, and require 24 hour supervision.

Subsidy Eligibility	Monthly Income Test	Annual Asset Test	**Notes**: Provides financial assistance for a limited number of eligible Assisted Living Group Home residents 62 and older whose net monthly income is insufficient to pay the full monthly cost of a quality assisted living placement. Next expected change: 7/1/07
Individual	$2,287	$11,000	
Couple	$2,991	$14,000	

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Residents Receiving Subsidies	528	661	661
Waiting List: There are currently 259 persons on a waiting list for a subsidy. A MetLife Market Survey of Assisted Living Costs in 2006 estimated the national average monthly cost for assisted living was $2,968, with an average cost of $3,380 in Baltimore. According to a needs assessment conducted by UMBC, there are more than 87,000 individuals aged 60+ in Maryland with disabilities who have less than $25,000 in annual income and who may be eligible for community-based, long-term support services including assisted living. A significant number of those who would choose assisted living are unable to meet the high cost without financial assistance.			
Federal	0	0	0
State	$2,354,929	$3,454,929	$3,454,929
Local Contributions	541,621	440,731	440,731
Total	$2,896,550	$3,895,660	$3,895,660

CONTACT PERSON: Denise Adams, Program Manager, (410) 767-1269, dea@ooa.state.md.us

Senior Employment

The Senior Community Service Employment Program provides training and employment assistance to eligible older workers in order to update and enhance their skills and prepare them for permanent employment with non-profit agencies or government entities referred to as "Host Agencies."

Senior Community Service Employment Program (SCSEP)

Program Description: SCSEP provides training and employment assistance to eligible older workers through participating 501(c)(3) non-profit agencies or government entities (Host Agencies) that provide a community service to the general or senior populations. While in the Program, qualified older workers update and enhance their skills through opportunities for training provided by their Host Agencies. Participants receive minimum wage ($6.15/hr.) for 20 hours of work per week that is paid for by a federal grant from the U.S. Department of Labor (DOL) and authorized under Title V of the Older Americans Act. In return for furnishing supervision, instruction and training to the participants, Host Agencies also reap the benefits of the work they perform. Ultimately, participants are placed in permanent employment at the prevailing wage either with their Host Agencies or with non-profit, government or private sector employers.

One such SCSEP participant trained as a Senior Employment Specialist with the Maryland Department of Aging and was hired by Prince George's County Housing Authority as a Rental Assistant in March 2006 at $17.50 per hour, 40 hours per week.

Eligibility:

Family Size	Annual Income Test	Annual Asset Test	Notes: Add $4,250.00 for each additional family member. Annual Income Test represents 125% of the Federal Poverty Guideline. Next expected change: 3/1/07
1	$12,250.00	N/A	
2	$16,500.00		
3	$20,750.00		

Program Eligibility Criteria: Eligible participants are those who are unemployed income eligible persons 55 years of age or older and in need of employment and training assistance.

Program Data:

	FY2006 (Actual)	FY2007 (Est.)	FY2008 (Est.)
Number of Training Positions	168	166	166
Number of Participants Trained	196	225	225
Program Funding:			
Federal	$1,202,943	$1,190,913	$1,190,913
State	* 221,966	262,973	262,973
Total	$1,424,909	$1,453,886	$1,453,886

* Indirect Cost Rate increased from 7% to 15% beginning FY2006.

CONTACT PERSON: Karen C. Fields, Program Manager, 410-767-1276
kcf@ooa.state.md.us

Special Projects

With federal grants and assistance from the Administration on Aging, U. S. Department of Health and Human Services, the Maryland Department of Aging developed the following projects:

- Project CAMM (Curb Abuse in Medicare and Medicaid) to respond to Medicare and Medicaid fraud, waste, and abuse.

- Alzheimer's Disease Demonstration Project that assists states in establishing, planning, and operating programs for persons with Alzheimer's disease.

Project CAMM (Curb Abuse in Medicare and Medicaid)

Historical Background:
In June 1997, the Maryland Department of Aging received a federal grant from the Administration on Aging to develop a project to respond to Medicare and Medicaid fraud, waste and abuse. The Department used the grant to create the Curb Abuse in Medicare and Medicaid Project (CAMM), which is part of a nationwide initiative, "Senior Medicare Patrol Projects."

Purpose and Process:
The purpose of the CAMM project is to reduce the amount of federal and State funds lost due to health insurance fraud by increasing the public's ability to detect and report possible fraud, waste and abuse. CAMM has been successful in recruiting and training retiree volunteers to act as health insurance educators. One hundred and five volunteers have been involved in CAMM activities this past year. Activities included public speaking engagements and instructing Medicare beneficiaries in monitoring health care expenditures and identifying potential discrepancies.

Originally nine Area Agencies on Aging (Anne Arundel, Baltimore, Carroll, Harford, Howard, Montgomery, Prince George's Counties, Baltimore City and MAC, Inc. (Dorchester, Somerset, Wicomico and Worcester counties) received funds to operate local CAMM projects. Currently, there are 13 AAAs selected to operate the CAMM projects. The latest counties awarded CAMM grants are Kent, Caroline and Talbot counties (which constitute the Upper Shore Area Agency on Aging), and Frederick, St. Mary's and Queen Anne's counties.

Accomplishments:
The CAMM grant to the Department was originally for a three-year period. The Department has applied for and received additional competitive grants, the most recent extending until June 2007. In FY2006, MDoA continued to partner with local Area Agencies on Aging in reaching other ethnic populations, including Spanish, Russian, Korean, Mandarin Chinese and Vietnamese.

Outcomes:
In FY2006, The CAMM project provided 799 public educational sessions reaching 30,595 individuals, and conducting 7,441 one-on-one counseling sessions. The CAMM staff processed 677 inquiries and/or complaints. Also, in FY2006, 100 training sessions were sponsored by the CAMM project for the 365 volunteers and aging network staff. The impact of Medicare part-D prescription drug benefit impacted the activities of the CAMM program, tripling audiences and doubling complaints and inquiries into drug plan activities.

CONTACT PERSON: Michelle P. Holzer
                   Project CAMM Coordinator
                   410-767-1109
                   mph@mail.ooa.state.md.us

Alzheimer's Disease Demonstration Project

Historical Background:
The Alzheimer's Disease Demonstration Project is administered by the Administration on Aging to assist states to develop demonstration projects for planning, establishing and operating programs for persons with Alzheimer's disease and their families. Maryland was awarded a three-year federal grant for the ROSE (Respite, Outreach, Support, and Education) Project. This project will seek to improve the ability of rural and Hispanic caregivers to care for individuals with Alzheimer's disease (or related disorders) and to assist them in developing a natural support network through a coordinated effort of partnering agencies. The grant amount is $290,000 and will expire June 2008.

Purpose and Process:
The ROSE Project will work within the National Family Caregiver Support Program (NFCSP) to identify and provide services to caregivers and families that are affected by dementia. The goal of the project is to improve the ability of rural and Latino/Hispanic family caregivers to be better prepared to care for individuals with Alzheimer's disease by improving access and availability of supportive services, including caregiver training, and to empower caregivers to develop natural support networks for themselves using public and private resources through a coordinated effort of partnering agencies. Volunteers from faith-based organizations will be trained to provide in-home respite care.

Expected Outcomes:
- 225 family caregivers will be assisted in developing natural supports within their own families and communities.
- 450 family caregivers will be trained in the care of people with Alzheimer's disease at all stages of the illness and educated about accessing formal and informal supports in the community.
- A caregiver self-assessment tool will be developed to assist caregivers to identify needs and supports.
- 225 families will be provided with respite and supplemental services while learning to use a natural support network made up of family, friends and community partners.
- At least one support group will be established for caregivers in each of the identified Limited English Proficiency (LEP) populations.
- 20 faith-based and community organizations reaching 200 people will receive training in providing support for people with Alzheimer's and their families.

Contact Person: Felicia French, Project Director, 410-767-0705
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Appendices

Appendix A: Area Agencies on Aging

The Maryland Department of Aging, in partnership with the Area Agencies on Aging, provides leadership and advocacy for older Marylanders and their families through information, education, programs and services that promote and enhance *choice, independence* and *dignity*. The Maryland Department of Aging and local Area Agencies on Aging support equal opportunity and treatment for all persons regardless of age, race, color, national origin, sex or disability.

Appendix B: Commission on Aging

The advisory body to the Maryland Department of Aging charged with the responsibility to review and make recommendations to the Secretary of the Department with respect to on-going Statewide programs and activities that affect Maryland seniors.

Appendix C:

Eligibility levels for
 (a) Food Stamp Program and Maryland MEDBANK Program, and

 (b) Supplemental Security Income (SSI) and Medicaid Waiver for Older Adults.

Appendix D: Senior Centers

Appendix E: Senior Information & Assistance Offices

AREA AGENCIES ON AGING
Appendix A

County	Contact Person	Address	Telephone
Allegany	Dan H. Lewellen Director	Allegany County Human Resources Development Commission, Inc. 19 Frederick Street Cumberland, MD 21502	301-777-5970 ext.107 301-722-0937 - FAX dlewellen@allconet.org
Anne Arundel	Wayne M. Taylor Director	Anne Arundel County Department of Aging and Disabilities 2666 Riva Road - Suite 400 Annapolis, MD 21401	410-222-4464 410-222-4360 - FAX agtay100@aacounty.org
Baltimore City	John P. Stewart Executive Director	Commission on Aging and Retirement Education (CARE) 10 North Calvert Street, Suite 300 Baltimore, MD 21202	410-396-4932 410-545-1539 - FAX john.stewart@baltimorecity.gov
Baltimore	Arnold J. Eppel Director	Baltimore County Department of Aging 611 Central Avenue Towson, MD 21204	410-887-2109 410-887-2159 - FAX aeppel@baltimorecountymd.gov www.takingcareofmomanddad.net
Calvert	Bettina C. Dubas Division Chief	Calvert County Office on Aging 450 West Dares Beach Road Prince Frederick, MD 20678	410-535-4606 301-855-1170 D.C. Line 410-535-1903 - FAX dubasbc@co.cal.md.us
Caroline Kent Talbot	Carl E. Burke Executive Director	Upper Shore Aging, Inc 100 Schauber Road Chestertown, MD 21620	410-778-6000 410-758-6500 1-800-721-6651 (toll free) 410-778-3562 - FAX cburke@uppershoreaging.org
Carroll	Richard Steinberg Chief	Carroll County Bureau of Aging 125 Stoner Avenue Westminster, MD 21157	410-386-3800 1-888-302-8978 (toll free) 410-840-0436 - FAX rsteinberg@ccg.carr.org
Cecil	Susan E. Twigg Director	Senior Services and Community Transit of Cecil County 214 North Street Elkton, MD 21921	410-996-5228 410-996-5295 410-620-9483 FAX stwigg@ccgov.org
Charles	Karen Lehman Cieplak Chief of Aging	Charles County Aging and Community Services Division 8190 Port Tobacco Road Port Tobacco, MD 20677	301-934-0109 301-934-5624 - FAX lehmank@charlescounty.org
Dorchester Somerset Wicomico Worcester	Margaret Bradford Executive Director	MAC, Inc. 1504 Riverside Drive Salisbury, MD 21801	410-742-0505 410-742-0525 - FAX mab@macinc.org
Frederick	Carolyn True Director	Frederick County Department of Aging 1440 Taney Avenue Frederick, MD 21702	301-600-1605 301-600-3554 - FAX TTY Dial 711 in MD or 1-800-201-7165 ctrue@fredco-md.net

AREA AGENCIES ON AGING

County	Contact Person	Address	Telephone
Garrett	Adina Brode Director	Garrett County Area Agency on Aging 104 E. Centre Street Oakland, MD 21550-1328	301-334-9431 ext. 138 301-334-8555 - FAX abrode@garrett.cac.org
Harford	James Macgill Acting Director	Harford County Office on Aging Area Agency on Aging 145 N. Hickory Avenue Bel Air, MD 21014	410-638-3025 410-879-2000 ext. 3331 410-893-2371 - FAX jmacgill@harfordcountymd.gov
Howard	Phyllis Madachy Director	Howard Co. Office on Aging 6751 Columbia Gateway Dr 2nd Floor Columbia, MD 21046	410-313-6410 410-313-6540 - FAX pmadachy@co.ho.md.us
Montgomery	Elizabeth Boehner Director	Montgomery County Area Agency on Aging Division of Aging and Disability Services 401 Hungerford Drive, 4th Fl. Rockville, Maryland 20850	240-777-3000 240-777-1436 - FAX elizabeth.boehner@montgomery countymd.gov
Prince George's	Theresa Grant Director	Prince George's County Department of Family Services Aging Services Division 6420 Allentown Road Camp Springs, MD 20748	301-265-8450 301-248-5358- FAX tgrant@co.pg.md.us
Queen Anne's	Catherine Willis Director	Queen Anne's County Department of Aging 104 Powell Street Centreville, MD 21617	410-758-0848 410-758-4489 - FAX cwillis@qac.org
St. Mary's	Lori Jennings-Harris Director	St. Mary's County Department of Aging 41780 Baldridge Street P.O. Box 653 Leonardtown, MD 20650	301-475-4200 ext.1070 301-475-4503 - FAX lori.harris@co.saint-marys.md.us
Washington	Susan MacDonald Executive Director	Washington County Commission on Aging 140 West Franklin Street, 4th Floor Hagerstown, MD 21740	301-790-0275 1-866-802-1212 (toll free) 301-739-4957 - FAX sjm@wccoaging.org

COMMISSION ON AGING

History of the Commission on Aging:

The origin of the Commission on Aging dates back to 1959, when the General Assembly created the State Coordinating Commission on the Problems of the Aging in response to the rapidly increasing population of older persons. In 1971 the Coordinating Commission was re-designated the Commission on Aging, becoming an independent agency within the State Department of Employment and Social Services. In May 1973, the Commission was transferred to the Executive Department and charged as the State agency responsible for carrying out planning, coordination, and evaluation activities under the federal Older Americans Act. Legislation in 1975 merged the Commission on Aging into the Office on Aging to serve in both an advisory and policy making role. In 1989, legislation clarified the role of the Commission on Aging as the advisory body to the Office on Aging. Today, the Commission on Aging is the advisory body to the Maryland Department of Aging.

The Role of the Commission:

The Commission is charged with the responsibility to review and make recommendations to the Secretary of the Department with respect to ongoing statewide programs and activities.

Current Membership

The Commission consists of 13 members appointed by the Governor. The mandated membership of the Commission includes: 1 member of the Maryland Senate; 1 member of the Maryland House of Delegates; and 11 members (reflecting geographic representation) who are interested in the problems of older individuals. At least 7 members must be 55 years of age or older.

Membership	Term	County of Residence
Ms. Louise Gulyas-**Chair**	July 1, 2003-June 30, 2007	Worcester County
Ms. Jane M. Brewer	July 1, 2005-June 30, 2009	Baltimore County
Mr. John B. Burcham, Jr.	July 1, 2002-June 30, 2006	Worcester County
Dr. Young Dae Cha	July 1, 2006–June 30, 2010	Montgomery County
Mr. Richmond T.P.Davis	July 1, 2006-June 30, 2010	Montgomery County
Mr. W. Lee Hammond	July 1, 2005-June 30, 2009	Wicomico County
Ms. Lynn J. Holt	July 1, 2003-June 30, 2007	Prince George's County
Mr. Philip F. Norton	July 1, 2003-June 30, 2007	St. Mary's County
Mr. Stuart P. Rosenthal	July 1, 2003-June 30, 2007	Montgomery County
Rev. David W. Simpson	July 1, 2006-June 30, 2010	Montgomery County
Delegate Barbara Frush	July 1, 1995	Prince George's County
Senator Gloria Lawlah	July 1, 1999	Prince George's County

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS*

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Federal Poverty Guidelines			Next expected change: 2/07
Individual	$ 817 ($9,800 per year)		
Couple	$1,100 ($13,200 per year)		
Qualified Medicare Beneficiary Program (QMB)	(Apply $20 income disregard - see note below)		Pays Medicare Part A and B premiums, co-payments, and deductibles.
Individual	$ 817	$4,000	Next expected change: 3/07
Couple	$1,100	$6,000	
Special Low-Income Medicare Beneficiary Program (SLMB)	(Apply $20 income disregard – see note below)		Similar to QMB but pays only the Part B premium
			Next expected change: 3/07
I Individual	$ 818 - $ 979	$4,000	
Couple	$1,101 - $1,319	$6,000	
II Individual	$ 980 - $1,102	$4,000	
Couple	$1,320 - $1,484	$6,000	
Maryland Pharmacy Assistance Program (MPAP)	(Apply $20 income disregard – see note below)		Helps Maryland residents, *other than those who qualify for Medicare D Prescription Drug Plan*, with co-pays for medically necessary prescriptions
Individual	$ 948	$4,000	
Couple	$1,100	$6,000	
			Next expected change: 3/07
Supplemental Security Income (SSI)	**(Apply $20 income disregard – see note below)**		Effective: 1/1/07
Individual	**$623**	**$2,000**	
Couple	**$934**	**$3,000**	

Note: $20 may be subtracted from the individual's or couple's gross income; if the $20 subtraction reduces the income to the number listed on the chart, then the individual or couple probably qualifies for the benefit. *Grey highlight or boldface indicates changes effective in 2006.

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
EXTRA HELP with Medicare D Prescription Drug Program			This financial assistance is only for Medicare beneficiaries who have a Medicare D prescription drug plan. Benefits vary depending on income level; assistance may help with cost of premiums, deductibles, co-pays
Individual Couple (100% poverty & below)	Under $ 9,800/yr. Under $13,200/yr. "dual eligible" - have both Medicare *and* Medical Assistance	Under $4,000 Under $6,000	
Individual Couple (up to 135% poverty)	Under $13,230/yr. Under $17,820/yr.	Under $ 7,500 Under $11,000	Apply through Social Security Administration (1 800 722-1213 or www.ssa.gov) or Local Department of Social Services Next expected change: 3/07
Individual Couple (up to 150% poverty)	Under $14,700/yr. Under $19,800/yr.	Under $11,500 Under $23,000	
State of Maryland Senior Prescription Drug Assistance Program (SPDAP)			SPDAP is available to anyone who has a Medicare D prescription drug plan. The Program pays up to $25 toward the premium for the chosen Medicare D prescription drug plan. Applications for SPDAP are available through the Maryland Health Insurance Plan at 1-800 551-5995 or at www.marylandspdap.com Effective: 1/1/07
Individual	**$ 2,450/mo. ($29,400/yr.)**	no test	
Couple	**$ 3,300/mo. ($39,600/yr.)**	no test	
Maryland Energy Assistance Program (MEAP)			For eligible low-income Marylanders, MEAP provides assistance with home heating bills; EUSP assists with electric bills Only one application is required for both MEAP and EUSP. Both programs administered by Office of Home Energy Programs (OHEP), DHR Next expected change: 7/1/07
Individual Couple	$1,633 $2,200	no test no test	
Electric Universal Service Program (EUSP)			
Individual Couple	$1,633 $2,200	no test no test	

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Food Stamp Program Individual Couple	 **$ 817** **$1,100** **(net income)**	 $3,000 $3,000	A household's first $134 per month is not counted in determining eligibility**;** household vehicles are not counted; there are also medical and housing deductions. Persons 60 and over (and their spouses) who are unable to purchase and prepare their own meals due to a disability, and who live and eat with others in a household whose combined income does not exceed 165% of the poverty level, *may* be considered a separate household. Effective: 10/1/06
Medical Assistance (Medicaid) Individual Couple	 $350 $392	 $2,500 $3,000	Requires documentation of disability; individuals can "spend down" to this income level to be eligible
Medicaid Waiver for Older Adults	**$1,869** or higher if medically needy spending down through allowable expenditures for medical and remedial services to the medically needy income limit of $350 per month	$2,000 - $2,500, depending on eligibility category	Assisted living and in-home services for individuals age 50 and older who meet Medicaid institutional eligibility rules; additional medical, financial, and technical eligibility requirements apply. Effective: 1/1/07
Senior Care Program Individual Couple	 $2,287 $2,991	 $11,000 $14,000	Case managed, in-home services program for individuals 65 and older. Next expected change: 7/1/07
Senior Assisted Living Group Home Program Subsidy Individual Couple	 $2,287 $2,991	 $11,000 $14,000	Provides financial assistance for a limited number of eligible Assisted Living Group Home residents age 62 or older Next expected change: 7/1/07

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Congregate Housing Services (CHSP) Subsidy Individual Couple	 $2,287 $2,991	 $27,375 $35,587	Provides financial assistance for a limited number of Congregate Housing residents in selected sites for individuals 62 and older whose net monthly income is insufficient to pay the full monthly fee for Congregate Housing Services. Next expected change: 7/1/07
Senior Employment Program (Title V) Individual Couple	 $1,020.84 ($12,250 per yr.) $1,375 ($16,500 per yr.)	 no test no test	Federally subsidized employment for persons ages 55+ Next expected change: 3/07
Accessible Homes for Seniors Individual Couple	 $51,240 per year (Washington MSA - Calvert, Charles, Frederick, Montgomery, & Prince George's Counties) $42,504 (all other jurisdictions of MD) $58,560 (Washington MSA) $48,576 (other jurisdictions)	 No test No test	Provides zero-interest loan up to $10,000 to modify a home space for senior (age 55 or older) living. Loan payments are deferred for 30 years. If the senior resides in home of a relative, eligibility is based on the owner's income. Begun in May 2006, the program is jointly sponsored by Maryland Dept. of Housing & Community Development and Maryland Dept. of Aging. Application available at www.mdhousing.org. or by calling 866 602-0064.

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Baltimore County

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SENIOR CENTERS Appendix D

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410-535-4606, 301-855-1170
410-535-1903 (Fax)
marquesl@co.cal.md.us

Rebecca Cranston
Southern Pines Senior Center
20 Appeal Lane
Lusby, MD 20657
410-586-2748
410-326-0673 (Fax)
cranstrj@co.cal.md.us

Ricca Baker
North Beach Senior Center
9010 Chesapeake Avenue
PO Box 85
North Beach, MD 20714
410-257-2549
410-286-8095 (Fax)
bakerrj@co.cal.md.us

Caroline County

Carol Anne Donohue
Caroline Senior Center
403 S. 7th Street
Suite 127
Denton, MD 21629
410-479-2535
410-479-1879 (Fax)
bluesenior@dmv.com

Virgie Tilghman
Federalsburg Senior Center
118 N. Main Street
Federalsburg, MD 21632
410-754-9754
410-754-5375 (Fax)
vchic@email.com

Carroll County

Olivia Schrodetzki
Mt. Airy Senior & Community Center
703 Ridge Avenue
Mt Airy, MD 21771
410-795-1017, 301-829-2407
410-549-5429 (Fax)
mtairysc@ccg.carr.org

Angie Walz
Taneytown Senior & Community Center
220 Roberts Mill Road
Taneytown, MD 21787
410-751-1656, 410-756-4557
410-751-0338 (Fax)
taneytownsc@ccg.carr.org

Renee Deiaco
North Carroll Senior & Community Center
2328 Hanover Pike
Hampstead, MD 21074
410-386-3900
410-374-1395 (Fax)
ncsenior@ccg.carr.org

Paul G. Garver
Westminster Senior & Community Center
125 Stoner Avenue
Westminster, MD 21157
410-386-3850
410-840-0436 (Fax)
westminstersc@ccg.carr.org

Karen Larrimore
South Carroll Senior & Community Center
5745 Bartholow Road
Sykesville, MD 21784
410-549-1357
410-795-0888 (Fax)
southcarrollsc@ccg.carr.org

Cecil County

Linda Tull
Buckworth Senior Center
214 North Street
Elkton, MD 21921
410-996-5295
410-420-9483 (Fax)
ltull@ccgov.org

Tammy Hall
Perryville Senior Center
300 Cherry Street
Perryville, MD 21903
443-309-0651

Charles County

Ms. Kathy Cooke
Ms. Kathy Sheldon
Richard R. Clark Senior Center
1210 E. Charles Street
LaPlata, MD 20646
301-934-5423
301-934-5425 (Fax)
cookem@charlescounty.org
sheldonk@charlescounty.org

Marjorie Carberry
Wardorf Senior Center
3090 Crain Highway
Waldorf, MD 20604
301-638-4420
301-638-1931 (Fax)
carberrym@charlescounty.org

Ms. Ann Schultz
Indian Head Community Center
100 Cornwallis Square
Indian Head, MD 20640
301-743-2125
301-743-7422 (Fax)
schultz@charlescounty.org

Joan Wright
Nanjemoy Senior Center
Senior Center Programs
4375 Port Tobacco Road
Nanjemoy, MD 20662
301-246-9612
301-246-9031 (Fax)
wrightj@charlescounty.org

SENIOR CENTERS

Dorchester County

Michael Foster
MAC Senior Center
2450 Cambridge Beltway
Cambridge, MD 21613
410-221-1920
410-221-1917 (Fax)

Mary J. Thorpe
Hurlock Senior Center
6210 Shiloh Church and Hurlock Road
Hurlock, MD 21643
410-943-1106
410-943-3536 (Fax)

Frederick County

Cathy Lee Barnes
Brunswick Senior Center
12 East A Street
Brunswick, MD 21716
301-834-8115
TTY – Dial 711 in MD or 1-800-201-7165
301-834-5093 (Fax)
cbarnes@fredco-md.net

Linda McGinnes
Frederick Senior Center
1440 Taney Avenue
Frederick, MD 21702
301-600-3525 (Activities)
TTY – Dial 711 in MD or 1-800-201-7165
301-600-3554 (Fax)
301-600-1048 (Meal Reservations)
lmcginnes@fredco-md.net

Linda Umbel
Emmitsburg Senior Center
300 South Seton Avenue
Emmitsburg, MD 21727
301-600-6350
TTY – Dial 711 in MD or 1-800-201-7165
301-600-6354 (Fax)
lumbel@fredco-md.net

Anna Rollins
Thurmont Senior Center
806 East Main St
Thurmont, MD 21788
301-271-7911
TTY – Dial 711 in MD or 1-800-201-7165
301-271-7081 (Fax)
arollins@fredco-md.net

Susan Hofstra
Urbana Senior Center
9020 Amelung Street
Frederick, MD 21704
301-600-7020
TTY – Dial 711 in MD or 1-800-201-7165
301-600-7021 (Fax)
shofstra@fredco-md.net

SENIOR CENTERS Appendix D

Garrett County

Leona Lavin
Mary Browning Senior Center
104 East Center Street
Oakland, MD 21550
301-334-9431, ext 131
1-888-877-8403 (Toll Free)
301-334-8555 (Fax)
llavin@garrettcac.org

Christy Hoalcraft
Flowery Vale Health & Fitness Center for
Older Adults
204 South Street, P. O. Box 248
Accident, MD 21520
301-746-8824 or 301-746-8050
301-334-8555 (Fax)
christyh@gcnetmail.net

Leona Lavin
Grantsville Senior Center
125 Durst Court
Grantsville, MD 21536
301-895-5818
301-334-8555 (Fax)
llavin@atlanticbb.net

Harford County

Margaret Kennedy
Aberdeen Senior Center
7 West Franklin Street
Aberdeen, MD 21001
410-273-5666
410-273-3469 (Fax)

Anna Schammel
McFaul Activities Center
525 West MacPhail Road
Bel Air, MD 21014
410-638-4040

Chuck Burkhardt
Edgewood Senior Center
1000 Gateway Road
Edgewood, MD 21040
410-612-1623
410-671-7855 (Fax)

Thelma Blake
Highland Senior Center
708 Highland Road
Street, MD 21154
410-638-3605
410-452-0525 (Fax)

Howard County

Arlene Dinneen
Florence Bain Senior Center
5470 Ruth Keeton Way
Columbia, MD 21044
410-313-7213

Jennie Slater
Elkridge Senior Center
6540 Washington Blvd.
Elkridge, MD 21075
410-313-4930

Ms. CC Pleasants
East Columbia Senior Center
6600 Cradlerock Way
Columbia, MD 21045
410-313-7680
410-313-7688 (Fax)

Carla Buehler
Ellicott City Senior Center
9401 Frederick Road
Ellicott City, MD 21042
410-313-1400

Edith Bennett
Savage Senior Center
9525 Durness Lane
Laurel, MD 20723
410-880-5915

Kent County

Rosemarie Curlett
Amy Lynn Ferris Adult Activity Center
200 Schauber Road
Chestertown, MD 21620
410-778-2564
410-758-9994 (Fax)
rcurlett@uppershoreaging.org

Montgomery County

Carol Fuentevilla
Holiday Park Senior Center
3950 Ferrara Drive
Wheaton, MD 20906
301-468-4448
301-927-5573 (Fax)
carol.fuenteville@montgomerycountymd.gov

Tony Edghill
Damascus Senior Center
9701 Main Street
Damascus, MD 20872
240-777-6995
Anthony.Edghill@montgomerycountymd.gov

Grace Whipple
Gaithersburg/Upcounty Senior Center
80-A Bureau Drive
Gaithersburg, MD 20878
301-258-6380

Lola Skolnik
Long Branch Senior Center
8700 Piney Branch Road
Silver Spring, MD 20903
301-431-5708
301-431-5720 (Fax)
lola.skolik@montgomerycountymd.gov

Jill Hall
Rockville Senior Center
1150 Carnation Drive
Rockville, MD 20850
301-309-3025
JHall@rockvillemd.gov

Betty Timer
Margaret Schweinhaut Senior Center
1000 Forest Glen Road
Silver Spring, MD 20901
301-681-1255
301-681-1269 (Fax)
Betty.Timer@ montgomerycountymd.gov

SENIOR CENTERS

Prince George's County

Jean McConnell
Berwyn Heights Senior Center
8603 57th Avenue
Berwyn Heights, MD 20740
301-474-0018

Marilyn Milio
Bowie Senior Center
14900 Health Center Drive
Bowie, MD 20716
301-809-2300
301-809-2321 (Fax)
mmilio@cityofbowie.org

Kathy James
Oasis Senior Center
3500 East West Highway
Prince George's Plaza
Hyattsville, MD 20782
301-559-6575
301-559-2437 (Fax)
oasiskmj@aol.com

Metaxcia Donaldson
Cora B. Woods Senior Center
Brentwood Senior Multiservice Center
3601 Taylor Street
Brentwood, MD 20722
301-699-1238

John Lee
Camp Springs Senior Center
6420 Allentown Road
Camp Springs, MD 20746
301-449-0490

Karen Haseley
Greenbelt Senior Center
15 Crescent Road
Greenbelt, MD 20770
301-397-2208

Tina Jones
Langley Park Senior Center
1500 Merrimac Drive
Hyattsville, Maryland 20783
301-408-4343
301-445-4501 (Fax)
Tina.Jones@pgparks.com

Gena Wade
Phelps Senior Center
701 Montgomery Street
Laurel, MD 20707
301-776-6168
301-776-0090 (Fax)
gwade@laurel.md.us

Irving Smith
Evelyn Cole Senior Center
5702 Addison Road
Seat Pleasant, MD 20743
301-386-5525

SENIOR CENTERS

Queen Anne's County

Linda Conley
Crumpton Senior Center
2200 Dudley Corner Road
P.O.Box 58
Crumpton, MD 21628
410-778-5444
410-778-5817 (Fax)
lconley@qac.org

Dawn Cornelius
Centreville Senior Center
104 Powell Street
Centreville, MD 21617
410-758-0848
410-758-4487 (Fax)
dcornelius@qac.org

Ann Martin
Grasonville Senior Center
4802 Main Street
P.O. Box 147
Grasonville, MD 21638
410-827-6010
410-827-3299 (Fax)
amartin@qac.org

Trish Beville
Kent Island Senior Center
891 Love Point Road
Stevensville, MD 21666
410-604-3801
410-604-3810 (Fax)
tbeville@qac.org

St. Mary's County

Kathy Mather
Garvey Senior Center
41780 Baldridge Street
P.O. Box 653
Leonardtown, Maryland 20650
301-475-4200, ext. 1063
301-475-4503 (Fax)
katherine.mather@co.saint-marys.md.us

Joyce Raum
Loffler Senior Center
21905 Chancellors Run Road
Great Mills, MD 20634
301-737-5670, ext 1656
301-737-5683 (Fax)
joyce.raum@co.saint-marys.md.us

Marie Noelle Lautieri
Northern Senior Center
29655 Charlotte Hall Rd
Charlotte Hall, MD 20622
301-475-4002 X 1002
301-475-4034 fax
marienoelle.lautieri@co.saint-marys.md.us

Theda Toney
Oakley Senior Site
All Saints Episcopal Church Hall
Oakley Road
Avenue, MD 20609
alice.allen@co.saint-marys.md.us

Somerset County

Connie Cox
Crisfield MAC Senior Center
P.O. Box 705
110 Lorrie Quinn Drive
Crisfield, MD 21817
410-968-2065

Jean Harrison
Princess Anne Senior Center
11916 Somerset Avenue
Princess Anne, MD 21853
410-651-3517

SENIOR CENTERS

Talbot County

Jessie Caldwell
Talbot Senior Center
400 Brookletts Avenue
Easton, MD 21601
410-822-2869
410-820-9563 (Fax)
jcaldwell@uppershoreaging.org

Washington County

Emma Reger
Potomac Towers Senior Center
11 W. Baltimore St.
Hagerstown, MD 21740
301-790-0275 ext. 206

Martha Drennen
Southeastern Senior Center
P. O. Box 116
Keedysville, MD 21756
301-432-5624

Gere Shoemaker
Hancock Senior Center
126-128 High Street
Hancock, MD 21750
301-678-7163

Barbara Fischer
Francis Murphy Senior Site
20024 Rosebank Way
Hagerstown, MD 21740
301-313-9300, ext. 154

Kim Boden
Williamsport Senior Site
215 Otho Holland Drive
Williamsport, MD 21795
301-223-6588

Eleanor Vanhoozer
Walnut Towers Senior Site
11 W. Baltimore Street
Hagerstown, MD 21740
301-491-5953

Dottie Smith
Smithsburg Senior Site
29 Blue Mt. Estates
Smithsburg, MD 21783
301-824-2183

Wicomico County

Ivy McKenize
Pine Bluff MAC Multi-Purpose Senior Center
1508 Riverside Drive
Salisbury, MD 21801
410-742-8569

Tracy Melvin
Willards MAC Senior Center
Hearn and Canal Streets
Willards, MD 21874
410-835-3475

SENIOR CENTERS Appendix D

Worcester County

Sheryl Kleinfeller
Berlin Senior Center
107 Williams Street
Berlin, MD 21811
410-641-0515
410-632-2613 (Fax)

Bonnie Ayres
Pocomoke Senior Center
400-B Walnut Street
P. O. Box 434
Pocomoke, MD 21851
410-957-0391
410-632-2613 (Fax)

Carole Sweeney
Ocean City Senior Center
104 41st Street, P.O. Box 504
Ocean City, MD 21842
410-289-0824
410-632-2613 (Fax)

Barbara J. Finney
Snow Hill Senior Center
107 East Market Street
P.O. Box 159
Snow Hill, MD 21863
410-632-1277
410-632-2613 (Fax)

SENIOR INFORMATION & ASSISTANCE OFFICES

County	Contact	Address	Telephone
Allegany County	Amanda Paul	Human Resources Development Commission, Inc. Area Agency on Aging 19 Frederick Street Cumberland, Maryland 21502	301-777-5970 ext.110 FAX: 301-722-0937 apaul@allconet.org
Anne Arundel County	Sandy Berkeley	Anne Arundel Co. Department of Aging and Disabilities 2666 Riva Road Annapolis, Maryland 21401	410-222-4464 1-800-492-2499 FAX: 410-222-4346 agsabe81@mail.aacounty.org
Baltimore City	Thelma Winn	Baltimore City Commission on Aging & Retirement Education 10 North Calvert Street Suite 300 Baltimore, Maryland 21202	410-396-2273 FAX: 410-385-0381 thelma.winn@baltimorecity.gov
Baltimore County	Betty Evans	Baltimore County Dept. of Aging 611 Central Avenue Towson, Maryland 21204	410-887-2594 TTY: 410-887-3787 FAX: 410-887-5789 bevans@baltimorecountymd.gov www.takingcareofmomanddad.net
Calvert County	Carolyn Mohler	Calvert Co. Area Agency on Aging 450 West Dares Beach Road Prince Frederick, Maryland 20678	410-535-4606 301-855-1170 Metro D.C. FAX: 410-535-1903 ooa@co.cal.md.us
Caroline County	Irene Garrettson	Upper Shore Aging, Inc. Caroline Senior Center 403 S. 7th Street, Suite 127 Denton, Maryland 21629	410-479-2093 410-479-2535 FAX: 410-479-1879 igarrettson@uppershoreaging.org
Carroll County	Debbie Frame	Carroll County Bureau on Aging 125 Stoner Avenue Westminster, Maryland 21157	410-386-3800 TTY: 410-848-9747 FAX: 410-840-0436 dframe@ccg.carr.org
Cecil County	Mary Kahoe	Senior Services and Community Transit of Cecil County Buckworth Senior Center 214 North Street Elkton, Maryland 21921	410-996-5295 FAX: 410-620-9483 mkahoe@ccgov.org
Charles County	Theresa Mason	Charles County AAA Department of Community Services 8190 Port Tobacco Road Port Tobacco, Maryland 20677	301-609-5712 or 301-870-3388 x5118 FAX: 301-934-5624 masont@charlescounty.org
Dorchester County	Saura Lake	Senior Information & Assistance Delmarva Community Services, Inc. P. O. Box 637 Cambridge, Maryland 21613	410-221-1930 FAX: 410-221-1917 dcsi@dmv.com

SENIOR INFORMATION & ASSISTANCE OFFICES

County	Contact	Address	Telephone
Frederick County	Melanie Bryan	Senior Information & Assistance Frederick Co. Department of Aging 1440 Taney Avenue Frederick, Maryland 21702	301-600-1604 TTY – Dial 711 in MD or 1-800-201-7165 FAX: 301-600-3554 mbryan@fredco-md.net
Garrett County	Lynda Weeks	Senior Information & Assistance Garrett County Area Agency on Aging 104 E. Centre Street Oakland, Maryland 21550	301-334-9431 Ext. 140 FAX: 301-334-8555 lweeks@garrettcac.org
Harford County	Mark Carroll	Senior Information & Assistance Harford Co. Area Agency on Aging 145 N. Hickory Avenue Bel Air, Maryland 21014	410-638-3025 - Harford 410-879-2000 ext: 3331 or 3380 - Baltimore FAX: 410-893-2371 mmcarroll@co.ha.md.us
Howard County	Pam Bilal	Senior Information & Assistance Howard Co. Area Agency on Aging 6751 Columbia Gateway Drive, 2nd Floor Columbia, Maryland 21046	410-313-5980, or 1-800-506-5806 FAX: 410-313-7465 pbilal@co.ho.md.us
Kent County	Kim Porter	Senior Information & Assistance Ferris Adult Activity Center 200 Schauber Road Chestertown, Maryland 21620	410-778-2564 FAX: 410-758-9994 kporter@uppershoreaging.org
Montgomery County	Jennifer Long	Senior Information & Assistance Montgomery County Division Aging and Disability Services 401 Hungerford Drive, 3rd Floor Rockville, Maryland 20850	240-777-3000 TTY: 240-777-4575 FAX: 240-777-1495 Jennifer.long@montgomerycounty md.gov
Prince George's County	Keandre Bell	Senior Information & Assistance Prince George's County Area Agency on Aging Harriet Hunter Center 6420 Allentown Road Hyattsville, Maryland 20781	301-265-8450 TTY: 301-277-0076 FAX: 301-248-5358 kabell@co.pg.md.us
Queen Anne's County	Bonnie English	Senior Information & Assistance Queen Anne's County Department of Aging 104 Powell Street Centreville, Maryland 21617	410-758-0848 FAX: 410-758-4489 benglish@qac.org

SENIOR INFORMATION & ASSISTANCE OFFICES

County	Contact	Address	Telephone
Somerset County	Jean Harrison	Senior Information & Assistance Commission on Aging-MAC, Inc. 11916 North Somerset Avenue Princess Anne, Maryland 21853	410-651-0020 FAX: 410-651-3350
St. Mary's County	Debbie Barker	Senior Information & Assistance St. Mary's County Area Agency on Aging Garvey Senior Center P. O. Box 653 Leonardtown, Maryland 20650	301-475-4200 Ext. 1064 FAX: 301-475-4503 debbie.barker@co.saint-marys.md.us
Talbot County	Peggy Vance	Senior Information & Assistance Talbot County Senior Center 400 Brooklets Avenue Easton, Maryland 21601	410-822-2869 FAX: 410-820-9563 mvance@upppershoreaging.org
Washington County	Liz Church	Senior Information & Assistance Washington County Commission on Aging, Inc./AAA 140 W. Franklin St., 4th Floor Hagerstown, Maryland 21740	301-790-0275 FAX: 301-739-4957 lchurch@wccoaging.org
Wicomico County	Teri Davidson	Senior Information & Assistance Pine Bluff – MAC, Inc. 1504 Riverside Drive Salisbury, Maryland 21801	410-543-0388 FAX: 410-742-0525 tld@macinc.org
Worcester County	Artilda Purnell	Senior Information & Assistance Worcester County Commission on Aging MAC, Inc.- Snow Hill Senior Center 107 East Market St., P. O. Box 159 Snow Hill, Maryland 21863	410-632-1289 FAX: 410-632-2613

MARYLAND

Department of Aging

301 West Preston Street
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Baltimore, Maryland 21201

Local: 410-767-1100
Toll Free: 1-800-243-3425
FAX: 410-333-7943
TTY users call via Maryland Relay
Website: www.mdoa.state.md.us