



Martin O'Malley Governor Anthony G. Brown Lt. Governor

Gloria Lawlah Secretary

# A Message from the Secretary

We are pleased to present this annual report of the Maryland Department of Aging (MDoA), which describes our accomplishments and services during 2009 and represents our budget presentation for Fiscal Year 2011.

Maryland is facing many challenges. The national economic downturn has had a significant impact on Maryland's older adult population. We have seen sharp increases in the number of requests for services such as home-delivered meals, transportation, information and referral services,



affordable housing, and home heating. Even though these are tough times, we are making progress and remain committed to finding new and innovative ways to ensure that our seniors are able to stay healthy, remain in their homes, and engaged in community life. This is not only good for seniors, it is also good for Maryland taxpayers.

This year, with the help of economic stimulus funds made available through the American Recovery and Reinvestment Act (ARRA), more than 21,000 additional individuals are expected to be provided meals through the Congregate Nutrition and Home Delivered Meals Services Programs. A number of our local offices on aging have used the funds to open new congregate meal sites, purchase shelf-stable emergency meals and hire staff for their meal programs, while others have been able to eliminate their waiting lists for home-delivered meals. These grants are supporting our senior population as well as the many businesses around the State that provide food services to them.

By aggressively pursuing grant-funded opportunities, we have been able to develop new initiatives, to continue our work to help older persons manage chronic diseases and to expand the Aging and Disability Resource Center (ADRC) Program, known as Maryland Access Point (MAP). We now have a total of ten local MAP sites providing more efficient access to information and services for seniors, persons with disabilities, and their caregivers. For our most vulnerable seniors in long-term care settings, we have undertaken a significant retooling of our Long Term Care Ombudsman Program. While much work remains to be done, there has been measurable progress toward improving and enhancing this vital program that protects residents of nursing homes and assisted living facilities throughout the State.

The mission of the Maryland Department of Aging is to enable older citizens to age with choice, independence and dignity. MDoA works in partnership with the 19 Area Agencies on Aging to provide leadership and advocacy to Maryland's seniors and their families through information, education, and services. This document illustrates how MDoA, the aging network, and many of Maryland's executive departments work collaboratively to improve the overall quality of life for older adults and for all citizens of Maryland.

Sincerely,

Gloria Lawlah



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MARYLAND DEPARTMENT OF AGING

# **ORGANIZATION**

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- Organization
- Vision, Mission and Goals
- Organizational Chart

## **ORGANIZATION**

## **History**

- In 1959, MDoA 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 Maryland Department of Aging (MDoA) operations: Human Services Article, Title 10, Annotated Code of Maryland, and the federal Older Americans Act of 1965, as amended. The major duties assigned to MDoA 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**

MDoA 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 MDoA 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 MDoA 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 MDoA is based on the AAAs having met State and federal statutory and regulatory requirements. State and federal funds are allocated to AAAs based on formulas developed by MDoA in cooperation with the AAAs.

AAAs receive additional funds through county and municipal support and other public/private 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 number 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

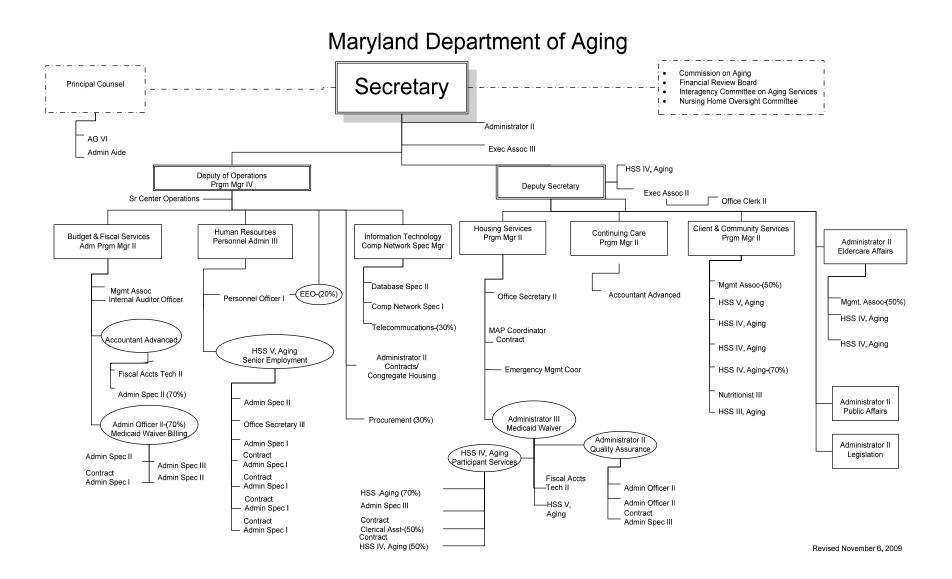
The Maryland Department of Aging, partnering with the Area Agencies on Aging and other organizations, provides leadership, advocacy and access to information and services for Maryland seniors, their families and caregivers.

# **Key Goals**

To ensure that older citizens are treated with dignity and respect, MDoA, through leadership, advocacy and community partnerships, has established four goals. Programs and services administered by MDoA 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 Empower older Marylanders, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.
- Goal #2 Enable older Marylanders to remain in their own homes with a high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.
- Goal #3 Empower older Marylanders to stay active and healthy through Older Americans Act services and the prevention benefits under Medicare.
- Goal #4 Ensure the rights of older Marylanders and prevent their abuse, neglect and exploitation.

# **ORGANIZATION**



MARYLAND DEPARTMENT OF AGING

# **DEMOGRAPHICS**

- Facts and Figures
- Maryland 60+ Population Projections by Jurisdiction 2000-2030
- Maryland's 60+ Population Projections by Age & Gender
- Maryland's 2000 Population by Jurisdiction & Age
- Maryland's 2000 Minority Population 60+ by Jurisdiction & Age
- Maryland's 2000 Population in Poverty by Jurisdiction
- Maryland's 2000 Population in Rural Status 60+

## **Facts and Figures**

In the State of Maryland, several demographic trends shape the Maryland 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 171,609 by the year 2030.
- 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 25.5% of Maryland's projected population of 6.7 million by the year 2030.
- 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. In 2030, these remain the top jurisdictions for individuals over 60; Calvert, Charles and St. Mary's counties are each projected to increase their 60+ populations by over 230%. In addition, Howard, Frederick, Carroll, Cecil and Queen Anne's counties over 60 populations are projected to increase by more than 150%.
- The greatest number of the State's minority seniors lives 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.
- 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.

Sources: U. S. Census, 2000; MD Department of Planning Population Projections, Revised January 2010.

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

						% Change <b>2000-</b>
Jurisdiction	2000	2005	2010	2020	2030	2030
Allegany Co.	17,105	17,151	17,912	20,752	22,177	29.7%
Anne Arundel Co.	67,510	78,060	91,803	120,625	144,368	113.9%
Baltimore City	110,961	110,718	118,102	141,597	148,684	34.0%
Baltimore Co.	140,313	145,772	161,049	206,245	227,742	62.3%
Calvert Co.	9,149	11,535	14,436	22,740	30,276	230.9%
Caroline Co.	5,264	5,706	6,610	9,340	11,740	123.0%
Carroll Co.	21,770	25,572	30,999	44,202	56,028	157.4%
Cecil Co.	12,254	14,287	17,088	25,178	32,463	165.0%
Charles Co.	13,547	16,951	20,375	31,188	45,315	234.5%
Dorchester Co.	7,008	7,527	8,406	11,313	12,980	85.2%
Frederick Co.	25,355	30,036	36,972	57,399	75,626	198.2%
Garrett Co.	5,962	6,510	7,351	9,836	11,360	90.5%
Harford Co.	30,352	36,211	43,963	61,967	74,365	145.0%
Howard Co.	26,606	34,139	44,010	65,182	81,730	207.2%
Kent Co.	4,677	5,274	6,012	8,080	9,642	106.2%
Montgomery Co.	130,647	150,796	181,808	258,699	311,468	138.4%
Prince George's Co.	90,558	109,992	136,232	192,387	235,077	159.6%
Queen Anne's Co.	7,105	8,503	10,229	14,807	18,787	164.4%
St. Mary's Co.	10,876	13,712	17,034	27,930	38,935	257.9%
Somerset Co.	4,563	4,863	5,373	7,010	7,605	66.7%
Talbot Co.	8,832	9,985	11,477	14,965	17,383	97.0%
Washington Co.	24,225	25,866	28,635	38,390	46,154	90.5%
Wicomico Co.	14,018	15,498	17,874	23,487	26,575	89.6%
Worcester Co.	12,379	14,204	16,071	21,457	25,447	105.6%
State of Maryland	801,036	898,868	1,048,415	1,433,776	1,709,927	113.5%

Source: U.S. Census, Maryland Department of Planning, Revised January 2010

# Maryland's 60+ Population Projections by Age & Gender, 2000-2030

Year	Age	Male	Female	Total	% of Total State Population
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%
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2005	60-64	119,637	133,001	252,638	4.5%
	65-69	86,395	98,791	185,186	3.3%
	70-74	65,776	81,341	147,117	2.6%
	75-79	52,886	74,465	127,351	2.3%
	80-84	36,307	60,627	96,934	1.7%
	85+	28,379	61,263	89,642	1.6%
	Total	389,380	509,488	898,868	16.0%
2010	60-64	150,264	172,077	322,341	5.6%
	65-69	107,884	124,365	232,249	4.0%
	70-74	74,130	88,793	162,923	2.8%
	75-79	52,579	69,771	122,350	2.1%
	80-84	37,580	58,571	96,151	1.7%
	85+	37,659	74,742	112,401	1.9%
	Total	460,096	588,319	1,048,415	18.1%
2020	60-64	189,840	217,218	409,183	6.4%
2020	65-69	154,045	184,294	340,209	5.3%
	70-74	120,784	148,585	270,739	4.3%
	75-79	77,266	98,746	176,687	2.8%
	80-84	44,073	61,727	106,255	1.7%
	85+	50,228	86,970	138,405	2.1%
	Total	636,236	797,540	1,433,776	22.6%
				, ,	
2030	60-64	173,116	200,849	376,883	5.5%
	65-69	182,486	212,964	397,964	5.9%
	70-74	152,593	185,831	340,694	5.1%
	75-79	110,746	145,285	257,834	3.9%
	80-84	72,383	102,065	175,698	2.6%
	85+	66,044	105,565	173,355	2.6%
	Total	757,368	952,559	1,709,927	25.6%

Source: U.S. Census Bureau, State Interim Population Projections by Age & Sex 2004-2030 Maryland Department of Planning, Revised January 2010

Maryland's 2000 Population by Jurisdiction & Age

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

Source: U.S. Census 2000; MD Department of Planning. Rounding may affect totals.

Maryland's 2000 Minority Population 60+ By Jurisdiction & 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.

# Maryland's 2000 Population in Poverty by Jurisdiction Total Poor and Minority Poor

County	Total Poor 60+	% Total Poor	Minority Poor 60+	% Minority Poor
Alleganv	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%
Total	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

# Maryland's 2000 Population – Rural Status – 60+(2000)

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

MARYLAND DEPARTMENT OF AGING

# **ACCOMPLISHMENTS**

- Aging and Disability Resource Center / Maryland Access Point
- ARRA
- Continuing Care Retirement Communities
- Empowerment Zone
- Evidence Based Health Initiatives
- Legal Assistance Program
- Maryland Senior Health Insurance Program and Maryland Senior Prescription Drug Assistance Program
- Medicaid Waiver for Older Adults
- Money Follows the Person
- Nursing Home Diversion Initiative / Community Living Program
- NGA Policy Academy
- Ombudsman Program Improvements
- Pots on the Patio Initiative
- Senior Centers
- Senior Information and Assistance Program
- Senior Medicare Patrol—Rural and Tribal Initiative
- Special Events

## Aging and Disability Resource Center/Maryland Access Point

One of the major long term care reform initiatives of the Department involves a collaborative effort with the Departments of Health and Mental Hygiene, Human Resources, and Disabilities, as well as advocates for senior consumers and persons with disabilities. In Maryland, the Aging and Disability Resource Center (ADRC) Program is known as Maryland Access Point (MAP). A goal of the program is to provide the public with faster and more efficient access to information and services for seniors, persons with disabilities, their caregivers, and the professionals who support their care. In 2009, the Department received a federal grant to expand this program to two additional sites and to fund the development and implementation of a person-centered hospital discharge planning process, to be piloted in six counties. At this time, there are nine local MAP sites covering ten counties and one-half of the State's population. A new web-based searchable database of long term support information is under development and will be launched later this year.

#### **ARRA**

Beginning in July, stimulus funds were made available through the American Reinvestment and Recovery Act (ARRA). More than 21,000 additional individuals are expected to be provided meals through the Congregate Nutrition and Home Delivered Meals Services Programs. A number of local offices on aging have used the funds to open new congregate meal sites, purchase shelf-stable emergency meals and hire staff for their meal programs, while others have been able to eliminate their waiting lists for home-delivered meals. These grants are supporting the senior population as well as the many businesses around the State that provide food services to them.

#### **Continuing Care Retirement Communities**

The Secretary of Aging appointed a 21-member Continuing Care Advisory Committee ("CCAC") consisting of senior living professionals and consumers to study the issues impacting the Continuing Care Retirement Community industry and to make recommendations for changes to the existing statutes (Sections 10-401 through 10-499 of the Human Services Article of the Annotated Code of Maryland) which would strengthen the continuing care law. The CCAC members are from various continuing care stakeholder groups: providers, residents, financial experts, attorneys, and consumer advocates.

## **Empowerment Zone**

The Statewide Empowerment Zones for Seniors Commission was established as a result of legislation enacted by the 2007 Maryland General Assembly. The law established a Commission to recommend a plan to develop a program for empowerment zones for older adults in Maryland. The program would direct technical, financial and regulatory supports to local communities to enhance aging in place services and facilitate personal independence and civic and social engagement of older adults in the community.

Based on research, interviews with state and national aging in place experts, and its own deliberations, the Statewide Empowerment Zones for Seniors Commission recommended that Maryland adopt a modified version of Florida's Communities for a Lifetime program as a model for its statewide initiative. The appeal of the Communities for a Lifetime model is that it encourages <u>all</u> communities in the state to assess the needs of their older adult residents and to develop plans that address gaps in their current services and delivery systems. The Commission further recommended the title "Maryland Communities for a Lifetime" (MCFAL) to replace "Senior Empowerment Zone" as it conveys that communities that support aging in place are good communities for residents of all ages and good for residents as they age.

A copy of the full report and recommendations may be found at: <a href="http://www.mdoa.state.md.us/documents/Commission%20Report%207-1-09%20Final2.pdf">http://www.mdoa.state.md.us/documents/Commission%20Report%207-1-09%20Final2.pdf</a>

#### **Evidence Based Health Initiatives**

Health Promotion is a vital component of the MDOA's goal of empowering older Marylanders to stay active and healthy. The growth of the older population coupled with escalating health and long term care costs has created incentives for state and local officials to implement evidence-based (EB) prevention programs such as the Chronic Disease Self Management Program (CDMSP), developed by Stanford University School of Medicine. These initiatives help reduce the cost of chronic conditions and help patients improve the quality of their lives. The program, known in Maryland as "Living Well - Take Charge of Your Health," features a series of sixweek classes that train people to manage chronic conditions.

In 2006, the Maryland Department of Aging (MDOA) partnered with the Department of Health and Mental Hygiene, Governor's Office of Community Initiatives, Office of Service and Volunteerism, the Rural Maryland Council, John's Hopkins Hospital, Towson University and three health insurance companies, Kaiser Permanente, Carefirst, and Care Improvement Plus on a three-year \$700,000 grant from the U. S. Administration on Aging. The overall goal of the project was to encourage older people to take charge of their health by participating in the Chronic Disease Self Management Program (CDSMP) in six areas (Howard, Montgomery, Prince Georges, Baltimore, Worcester and Upper Shore) and the Active for Life program in Montgomery County. Since the inception of the grant, 84 Living Well workshops have been conducted with 744 graduates.

For FY 2010, the Administration on Aging funded a \$200,000 continuation grant to sustain the program in the six original areas as well as expand the program to Calvert and Cecil counties.

Additionally in FY 2009, MDoA received a \$492,596, three-year grant from the Harry and Jeanette Weinberg Foundation to expand the Living Well program to four additional jurisdictions: Baltimore City, Somerset, Queen Anne's and Washington Counties, and to support Senior Center EB programming in eight areas.

Visit http://www.mdoa.state.md.us/programs.html for more information on the Living Well program.

#### **Legal Assistance Program**

The Legal Assistance Program completed work on a three-year grant from the U. S. Administration on Aging to provide services for people seeking information on advanced directives and assisted living services. In partnership with the Legal Aid Bureau, Inc., a legal needs survey was conducted of Maryland's senior population and elder law service providers, resulting in the development of an Online Resource Center for operators of small assisted living facilities in Maryland, families of residents, Helpline attorneys, and other Legal Aid and MDoA staff. The Online Resource Center will provide advocates with important assisted living information and an advanced directive guide, which will be available in English, Spanish, Korean, and Chinese. The Online Resource Center and other information is available at the People's Law Library website at http://www.peoples-law.org/housing/assisted\_living/assist.htm.

#### **Maryland Phone-A-Thon**

On December 17, 2009, the Maryland Department of Aging's Senior Health Insurance Assistance Program (Maryland SHIP) and WJZ-TV sponsored a live Phone-A-Thon to promote the annual open enrollment period for Medicare Part D, prescription drug coverage. Governor Martin O'Malley and Secretary of Aging Gloria Lawlah were featured the week prior in television spots, urging viewers to tune in on December 17<sup>th</sup> from 12 noon to 4 pm. During the December Phone-A-Thon, approximately 1,200 calls were taken by the 21 phone bank volunteers. Most of the calls received were from Baltimore City and County.

The Annual Enrollment Period (November 15<sup>th</sup> to December 31<sup>st</sup>) of each year is the time where Medicare beneficiaries can make changes to their choice of Medicare Part D prescription drug plan options. The goal of the Phone-A-Thon was to encourage beneficiaries who needed help with their decisions to seek assistance through their local SHIP program. Also highlighted during the initiative were assistance programs for low income beneficiaries including the Maryland Senior Prescription Drug Assistance Program, that can help pay for the monthly premiums and up to \$1,200 of prescription drug expenses during the Part D coverage gap or "donut hole".

## Maryland Senior Health Insurance Program and Maryland Senior Prescription Drug Assistance Program

During the 2008 General Assembly Session, legislation proposed by Governor O'Malley was enacted that added \$4 million annually for the Maryland Senior Prescription Drug Assistance Program (SPDAP) to provide assistance to enrollees whose drug expenses place them into the coverage gap, or "donut hole." SPDAP is a program administered by the Maryland Health Insurance Plan (MHIP) that subsidizes the Medicare Part D premium up to \$25/month for approximately 25,000 enrollees. The additional donut hole benefit helps Medicare Part D beneficiaries with limited income and significant drug expenses, by providing up to \$1,200 per person in annual state subsidies to reduce their out of pocket costs in the donut hole (approximately 30% or 7,500 of Maryland SPDAP participants). The SPDAP donut hole assistance became available in January 2009.

The MDoA Senior Health Insurance Assistance Program (SHIP) has been working closely with Maryland SPDAP to ensure that eligible Medicare beneficiaries understand this new benefit, and

select and enroll in plans that are appropriate to their needs. Through joint training activities, cosponsored educational and enrollment events, and targeted publicity, Maryland SHIP staff and volunteers have been able to assist Medicare beneficiaries become aware of and enroll in Medicare Part D plans and the SPDAP or federal "Extra Help" program as appropriate.

#### **Medicaid Waiver for Older Adults**

The Waiver for Older Adults (WOA) provides services and other long-term supports to low income individuals aged 50 and older, who would otherwise reside in nursing homes. In 2009, the waiver served over 3571 individuals.

Accomplishments for the year include:

- 1. Maintaining a sustained enrollment of 3100 individuals for the year.
- 2. Conducting 15 regional and statewide training sessions for providers and case managers aimed at improving their ability to support participants in the program.
- 3. Expanded the opportunity for Medicaid nursing home residents to learn about and receive assistance to apply for home and community waivers through MDoA/AAA participation in the Money Follows the Person (MFP) demonstration project.

## **Money Follows the Person (MFP)**

MDoA is working in partnership with the Departments of Health and Mental Hygiene and Disabilities to implement a five year federally funded program to identify individuals in nursing homes who wish to transition back into the community. Eligible individuals transition into one of several Medicaid Home and Community-Based Services Waivers. This initiative requires coordination with the local AAA in the community where the person wishes to reside as well as statewide coordination of training and program support.

#### **Nursing Home Diversion Initiative/Community Living Program**

The Nursing Home Diversion/Community Living Program is a three-year initiative funded by the U. S. Administration on Aging. The initiative has enabled MDoA, in partnership with five AAAs and other long-term care stakeholders, to develop a tool to identify individuals at risk of Medicaid spenddown and nursing home placement and assist them through a flexible self-directed benefit program.

#### **NGA Policy Academy**

Maryland has been participating in an initiative of the National Governors Association to promote civic engagement of older adults. MDoA is the lead agency for this initiative, with team members from the Governor's Office on Service and Volunteerism, the Governor's Grants Office, AAAs, several universities, and consumers. The Maryland team has established three goals:

- Goal 1: Greater labor market participation among older Marylanders
- Goal 2: Greater participation by older Marylanders in volunteer activities
- Goal 3: Greater participation by older Marylanders in lifelong learning activities

#### **Ombudsman Program Improvements**

MDoA retained independent, national experts to thoroughly examine the Maryland Long-Term Care Ombudsman Program and offer recommendations for improving the Program. Since the completion of the report in 2009, MDoA has undertaken a significant retooling of the Long Term Care Ombudsman Program in order to implement many of those recommendations. While more work remains to be done, there has been measurable progress toward improving and enhancing this vital program that protects residents of nursing homes and assisted living facilities throughout the State. Accomplishments to date include submitting Departmental legislation to align the federal and State Ombudsman statutes, creating a new professional staff position in the Office of the State Long Term Care Ombudsman, training local Ombudsmen and volunteers, establishing a steering committee and workgroups to provide ground level guidance on the strategic plan to implement the recommendations for improving the Program, and implementing a funding formula to reallocate local ombudsman funds. The new formula allocates funds with more emphasis on workloads (e.g., the number of nursing homes and total number of long term care beds, including assisted living beds) and the geographic size of the local program.

#### Pots on the Patio Initiative

"Pots on the Patio/ Gardens in the Yard", an intergenerational initiative highlighted the value of a healthy, green lifestyle and underscored the importance of providing seniors with access to fresh fruits and vegetables. On July 29th, Secretary of Aging Gloria Lawlah visited the Boys and Girls Club of Laurel, MD where she was joined by several of its youth members, young ladies from the Lovely Ladies of Laurel organization, and seniors from the Phelps Senior Center, the Laurel Senior Friendship Club, and the Laurel Lakes Senior Apartments for the kickoff of the "Pots on Patio/Garden in the Yard" initiative. The intergenerational event complimented the "Maryland Grow It, Eat It" campaign, which was presented in April 2009 by First Lady Katie O'Malley to encourage Marylanders to grow their own affordable and healthy food.

Follow-up events included a "Healthy, Smart, Green and Growing" Recipe Contest held in August, where contestants brought their healthy vegetable and fruit dishes to Behnkes' Nursery Garden Center in Prince George's County for judging. The winning entries were highlighted at the Intergenerational Harvest Party held on September 14th where participants from the July event came together again to harvest their produce and to begin a fall planting.

#### **Senior Centers**

Through the Senior Citizens Activities Centers Capital Improvement Grants Program, Howard County received a State grant in the amount of \$800,000 (\$400,000 in FY 2009 & FY 2010) for the construction of the new North Laurel Senior Center that will replace the Savage Senior Center. The new facility will have 7,300 square feet of dedicated senior center space, and 2,920 square feet of shared space with the Howard Recreation and Parks Department. The new facility will also offer space for the Senior Center Plus Program, a social day care program for frail elderly persons.

## **Senior Information and Assistance Program**

The Senior Information and Assistance (I&A) Program provides a single point of entry into the aging network system to obtain information about benefits and programs for older Marylanders, their families and caregivers. Individuals contacting the Program receive information in order to make informed choices about services, referrals to appropriate agencies, assistance in obtaining services and benefits, and follow-up assistance. 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. In 2009, the I&A program provided one-on-one assistance to over 54,000 seniors.

#### Senior Medicare Patrol – Rural & Tribal Initiative

Work continues under the SMP Integration Grant that was awarded in 2008 by the U. S. Administration on Aging (AoA) to provide outreach and education to isolated or hard-to-reach Medicare beneficiaries, including tribal elders. The grant expanded the reach of the SMP program statewide and facilitated strategic partnerships with the Aging and Disability Resource Centers (MAPs) and the Rural Maryland Council to develop effective marketing materials and messaging to reach and educate older Marylanders about Medicare fraud issues.

## **Special Events**

In May 2009, the Maryland Department of Aging co-sponsored and participated in the 17<sup>th</sup> Annual Maryland Centenarian's luncheon. This year's luncheon recognized 85 centenarians from around the state. The event was held at Martin's West. Other co-sponsors included the Social Security Administration and Baltimore City Commission on Aging and Retirement Education (CARE). Maryland has 1500+ centenarians residing in the state.

Also in May, MDoA hosted the 2nd Annual Governor's Leadership in Aging Awards, which honored individuals and groups for their contributions in the areas of visual and performing arts and health and fitness. A lifetime achievement award was presented to Dr. Levi Watkins, a world renowned cardiologist with Johns Hopkins Hospital.

The Maryland Department of Aging participated in a new community service project, *Stockings for Seniors*. Twenty-one employee teams decorated stockings which were stuffed with goodies for 25 needy senior residents of Chase House in Baltimore. The stockings were delivered by MDoA carolers and distributed to the selected seniors.

MARYLAND DEPARTMENT OF AGING

# **GRANTS**

- Evidence Based Health Promotion for Seniors
- Farmers' Market Nutrition Program
- Medicare Improvements for Patients and Providers Act (MIPPA) Grant
- Nursing Home Diversion Grant/ Community Living Initiative
- Person Centered Hospital Discharge Grant
- Empowering Individuals to Navigate their Health & Long Term Care Support Options
- Senior Community Service Employment Program
- Senior Health Insurance Assistance Program
- Senior Medicare Patrol
- SMP Integration Grant

#### **Evidence-Based Health Promotion for Seniors**

Evidence-based health initiatives are programs adapted from tested models that encourage older individuals to adopt habits that can improve their health and well-being. The goal of this grant is to reduce rates of disability, improve mental and cognitive function, and lower health care costs. Research has shown that older adults who increase physical activity, adopt healthy eating habits, and take steps to minimize the risk of falling, can live longer and healthier lives. Evidence based health promotion programs include classes in falls prevention, exercise programs to increase strength, flexibility and balance, and classes that promote more effective chronic disease management.

MDoA received a three-year grant for Evidence-Based Prevention Programs from the U. S. Administration on Aging. This grant allows MDoA to implement the Chronic Disease Self Management Program (CDSMP), which is known in Maryland as *Living Well – Take Charge of Your Health*. The CDSMP was developed at Stanford University and is an accountability program where people with chronic diseases are taught to take control of their own health by adopting healthy lifestyles.

Six AAA/community provider partnerships have participated, covering eight counties (Baltimore, Howard, Caroline, Kent, Talbot, Montgomery, Prince George's, and Worcester). Montgomery County is providing an additional evidence-based program called Active for Life, which focuses on helping people age 55 and over to stay active.

Each local partnership includes a community service provider (including community colleges, hospitals, commissions on aging, and in-home service providers), the Area Agency on Aging, local health department, and a variety of additional partners including churches, insurance companies, low-income housing providers, and health care providers.

Towson University Center for Productive Aging performed an evaluation of the grant. The National Council on Aging provides additional technical assistance. A continuation grant received in 2009 expanded the program to two additional counties: Cecil and Calvert.

Additional funding awarded by The Harry and Jeanette Weinberg Foundation, Inc. allows four new jurisdictions, Baltimore City, Somerset, Queen Anne's and Washington counties, to implement the chronic disease self-management program.

Funding Source: U. S. Administration on Aging (AoA)

Project Period:

Year 1-September 30, 2006-July 31, 2007 Year 2-August 1, 2007-July 31, 2008 Year 3-August 1, 2008-July 31, 2009

Continuation Year: August 1, 2009 – July 31, 2010

Amount: \$950,000

Funding Source: The Harry and Jeanette Weinberg Foundation, Inc.

Project Period:

Year 1-October 23, 2008-October 22, 2009

Year 2-October 23, 2009- October 22, 2010 Year 3-October 23, 2010- October 22, 2011

Amount: \$492,596 (\$176,612 in 2008, \$176,612 in 2009, and \$139,372 in 2010)

#### **Farmers' Market Senior Nutrition Program**

The Senior Farmers' Market Nutrition Program (SFMNP) is a program operated by the United States Department of Agriculture, Food and Nutrition Service. The purposes of the SFMNP are to:

- 1) Provide fresh, nutritious, locally grown fruits, vegetables and herbs from farmers' markets, roadside stands, and community supported agriculture (CSA) programs to low-income seniors; and
- 2) Development of new and additional farmers' markets, roadside stands, and CSAs.

Maryland has participated in the program since its inception in 2001, which is administered by the Maryland Department of Agriculture (MDA). MDoA recommends the allocation amounts to each jurisdiction, provides technical support, and conducts compliance reviews. AAAs approve eligible seniors, issue checks, and provide nutritional education.

To participate in the SFMNP, applicants must provide proof of age (60 years or older) and Maryland residency and valid documentation of participation in a means-tested qualifying program. Eligible seniors receive a book of five \$3.00 SFMNP checks (total benefit level is \$15) to purchase locally grown produce from authorized farmers at approved farmers' markets.

Funding Source: U. S. Department of Agriculture (USDA)

Project Period: Annually, June 1 - October 31

Amount: \$246,000 in 2009

## **Legal Services Grant**

The Legal Assistance Program completed work on a three-year grant from the U. S. Administration on Aging to provide services for people seeking information on advanced directives and assisted living services. In partnership with the Legal Aid Bureau, Inc., a legal needs survey was conducted of Maryland's senior population and elder law service providers, resulting in the development of an Online Resource Center for operators of small assisted living facilities in Maryland, families of residents, Helpline attorneys, and other Legal Aid and MDoA staff. The Online Resource Center will provide advocates with important assisted living information and an advanced directive guide, which will be available in English, Spanish, Korean, and Chinese. The Online Resource Center and other information is available at the People's Law Library website at:

http://www.peoples-law.org/housing/assisted\_living/assist.htm.

Funding Source: Administration on Aging (AoA) Project Period: September 30, 2006-May 31, 2009

Amount: \$100,000 annually

## Medicare Improvements for Patients and Providers Act (MIPPA) Grant

The purpose of the MIPPA grant, a jointly funded project of the U. S. Centers for Medicare & Medicaid Services (CMS) and the Administration on Aging (AoA), is to demonstrate how State Health Insurance Counseling Programs (SHIPs), State Agencies on Aging, Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs) can coordinate outreach activities to educate and provide application assistance to low income Medicare beneficiaries who may be eligible for the Low Income Subsidy (LIS) to help with Medicare Part D prescription expenses, Medicare Savings Programs (MSP), the Qualified Medicare Beneficiary (QMB), the Specified Low Income Medicare Beneficiary (SLMB) and Qualified Individual Program(QI-1) to help with Medicare Part B expenses.

Funding Source: Jointly - Administration on Aging (AoA) and

Centers for Medicare and Medicaid Services (CMS)

Project Period: June 1, 2009-May 31, 2011 Amount: AoA \$119,341 CMS \$132,159

## **Nursing Home Diversion Grant/Community Living Initiative**

The Nursing Home Diversion/Community Living Program grant is a three-year initiative funded by the U. S. Administration on Aging. The initiative has enabled MDoA, in partnership with five AAAs and other long-term care stakeholders, to develop a tool to identify individuals at risk of Medicaid spend down and nursing home placement and assist them through a flexible self-directed benefit program.

Funding Source: Administration on Aging (AoA) Project Period: September 30 2007 – July 1, 2010

Amount: \$500,000

#### **Person Centered Hospital Discharge Grant**

In June 2009, the Centers for Medicare and Medicaid Services awarded the Department a thirty-nine month grant to develop two new Maryland Access Point (MAP) sites and to develop a pilot program to target hospital patients at high risk of being discharged to a long term nursing home placement and to provide those patients expanded counseling and services that will support their being discharged to the community. Two new MAP sites will be established in the Area Agencies on Aging serving Carroll, Wicomico, Dorchester and Somerset Counties. These two AAA sites and an additional four MAP sites (Worcester, Howard, Washington and Anne Arundel) are participating in developing the Person Centered Hospital Discharge pilot.

Funding Source: Centers for Medicare and Medicaid Services (CMS)

Project Period: October 1, 2009 - December 31, 2012

Amount: \$1,100,000

## **Empowering Individuals to Navigate their Health & Long Term Care Support Options**

In September 2009, the U.S. Administration on Aging awarded a thirty-six month grant to expand and strengthen the Maryland Access Point program. Under the grant, two new MAP sites will be developed and a five year strategic plan will be designed. In addition, the grant will allow the development of infrastructure to promote statewide operational consistency and to develop a quality assurance system and an evaluation.

Funding Source: Administration on Aging (AoA) Project Period: October 1, 2009 – September 30, 2012

Amount: \$749,316

## Senior Community Service Employment Program (SCSEP)

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. A federal grant from the U.S. Department of Labor and authorized under Title V of the Older Americans Act pays for participants to work 20 hours per week in positions that provide workers with the experience and skills to find unsubsidized employment. The goal of the program is to enhance employment opportunities for older workers and to promote older workers as a solution for businesses seeking a trained, qualified, and reliable workforce.

Funding Source: U.S. Department of Labor as authorized under Title V of the OAA

Project Period: Annually Amount: \$1,436,940 for 2009

## **Senior Health Insurance Assistance Program**

MDoA's Senior Health Insurance Assistance Program (SHIP), has been in operation since 1987, and has been designated by the Governor as the agency to receive funds under the Health Insurance Information, Counseling, and Assistance Grants Program (Section 4360 of the Omnibus Reconciliation Act of 1990, P.L.101-508).

The mission of Maryland SHIP is to offer locally-based assistance and counseling for problems Medicare beneficiaries encounter regarding health insurance. In fulfilling the mission, SHIP provides services, using trained volunteer counselors, in five general areas: (1) health insurance claims assistance and problem resolution to Medicare beneficiaries and/or their caregivers regarding Medicare, Medicare Part D Prescription Drug Plans, Medicare supplements, Medicaid programs, managed care plans, and long term care insurance; (2) information and assistance to Medicare beneficiaries and/or their caregivers in selecting appropriate health insurance products; (3) public education activities, printed materials, and media coverage on health insurance issues; (4) referrals and assistance to other appropriate community services and to governmental organizations; and (5) assistance with health insurance claims, reconsiderations, grievances and appeals.

SHIP funds are granted to all 19 AAAs to operate the program at the local level. The Maryland SHIP is a volunteer-based program, using approximately 135 trained volunteers as counselors or in support positions.

Funding Source: Centers for Medicare and Medicaid Services (CMS)

Project Period: April 1, 2008-March 31, 2009

April 1, 2009-March 31, 2010 Renewed Annually

Amount: \$484,120

#### **Senior Medicare Patrol (SMP)**

In June 1997, the Maryland Department of Aging received a federal grant from the U. S. Administration on Aging to develop a project to curb Medicare and Medicaid fraud, waste, abuse, and errors. This grant is part of a nationwide initiative called Senior Medicare Patrol (SMP).

The purpose of the SMP 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, abuse or errors. SMP has been successful in recruiting and training retiree volunteers to act as health insurance educators. One hundred and forty-two volunteers have been involved in SMP activities this past year. Activities included public speaking engagements and instructing Medicare beneficiaries in monitoring health care expenditures and identifying potential discrepancies.

MDoA collaborates with partners at the local Area Agencies on Aging, the Rural Maryland Council, Maryland Insurance Administration, Maryland Attorney General's Office, AARP, and other state and private agencies to identify, recruit and train SMP volunteers who educate the hard to reach populations of Maryland in fraud prevention, detection and reporting. Currently, there are 13 AAAs operating a SMP project, (Anne Arundel, Baltimore, Carroll, Harford, Howard, Montgomery, Prince George's, Upper Shore Aging [Kent, Caroline and Talbot], Frederick, St. Mary's, Mac, Inc. [Dorchester, Somerset, Wicomico, and Worcester], Queen Anne's counties, and Baltimore City.

Funding Source: Administration on Aging (AoA)

Project Period: July 1, 2008-June 30, 2009

July 1, 2009-June 30, 2010

Amount: \$180,000 Renewed Annually

## **SMP Integration Grant**

In 2008, the Maryland Department of Aging received the Senior Medicare Patrol (SMP) Integration Grant from the Administration on Aging (AoA) to provide outreach and education in rural Maryland among isolated or hard-to-reach Medicare beneficiaries including tribal elders. The purpose of the grant was to expand the reach of the SMP program to include each county of Maryland, and strategically partner with the Aging and Disability Resource Centers, (ADRCs) known as Maryland Access Points or MAPs, and other partners to help develop effective

marketing materials and messaging to reach and educate older Marylanders about Medicare fraud issues. This initiative concludes June 30, 2010.

Funding Source: Administration on Aging (AoA) Project Period: October 1. 2008 - September 30, 2010.

Amount: \$100,000 (Renewable for one year)

MARYLAND DEPARTMENT OF AGING

# **COMMUNITY SERVICES**

- Health Promotion & Disease Prevention
- Senior Centers
- Senior Community Service Employment Program
- Senior Nutrition—Congregate Meals

## COMMUNITY SERVICES

# 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.

Thousands of seniors across the state have benefitted from the Chronic Disease Self Management classes called, "Living Well – Take Charge of Your Health." Many seniors have made positive comments regarding their improved health, fitness, diet, and accomplishments from goal setting. One participant at the Annapolis Senior Center stated, "I have learned more from coming here than I knew about diabetes in the 20 years that I have had it and it keeps me more honest about taking care of it."

**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 serving older individuals with the greatest social and economic need.

<b>Eligibility</b> Individual Couple	Monthly Income Test None	Annual Asset Test None	Notes: There are many types of classes for people of all abilities, including those with arthritis and other physical or medical problems.
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Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Health Screening Sessions	53,247	53,780	54,318
Health Education Sessions	27,107	27,891	28,170
Physical Fitness & Exercise Sessions	149,924	151,423	152,937
Health Services	13,000	13,130	13,261
Number of Participants	64,910	66,857	68,863

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$557,541	\$561,152	\$561,152
State	\$-0-	\$-0-	\$-0-
Local Contributions/Program Income	\$266,308	\$266,308	\$229,068
Total	\$823,849	\$827,460	\$790,220

#### **CONTACT PERSON:**

Judy Simon, Program Manager 410-767-1090, JSimon@ooa.state.md.us

# COMMUNITY SERVICES Senior Centers

**Program Description:** Senior Centers serve as focal points in the community for education, recreation, socialization, nutrition and health screening to improve the quality of life for seniors. They are also points of contact for seniors and their families to obtain information about services. 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.

Howard County received a State grant in the amount of \$800,000 (\$400,000 in FY 2009 & FY 2010) from the Senior Citizens Activities Centers Capital Improvement Grants Program for the new construction of the North Laurel Senior Center that will replace the Savage Senior Center. The new facility will have 7,300 square feet of dedicated senior center space, and 2,920 square feet of shared space with the Howard Recreation Department. The new facility will also offer space for the Senior Center Plus Program (a social day care program for frail elderly persons).

## **Program Eligibility Criteria**

**Senior Center Capital Improvement Funds:** Title 10, Subtitle 5 of the MD Human Services Article limits each grant to a maximum of \$800,000. State funds must be matched by non-State funds on a dollar-fordollar basis (in-kind matches are not permitted).

**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 funding sources to maintain programming.

Program Data	<b>FY 2009 (Actual)</b>	FY 2010 (Est.)	FY 2011 (Est.)
Capital Improvement Program			
Total Senior Centers	117	118	118
New Construction	4	5	1
Renovation	1	1	1
Operating Fund Program			
Seniors Benefiting from Operating	1868	1868	1868
Funds			

Capital Funds	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
State	\$1,845,000	\$1,683,000	\$500,000
Local	22,731,109	23,718,619	1,506,050
Total	24,576,109	25,598,619	2,006,050
<b>Operating Funds</b>	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
State	\$500,000	\$500,000	\$455,000
Local	\$760,736	\$760,736	\$760,736
Total	\$1,260,739	\$1,260,739	\$1,215,736

#### **CONTACT PERSON:**

Wiley Finch, Program Manager, 410-767-1115, wgf@ooa.state.md.us

#### **COMMUNITY SERVICES**

# **Senior Community Service Employment Program**

**Program Description:** The Senior Community Service Employment Program (SCSEP) provides training and employment assistance to eligible workers 55 years and older through participating 501(c)(3) non-profit agencies or government entities (Host Agencies) that provide a community service to the general or senior population. While in the program, qualified older workers update and enhance their skills through opportunities for training provided by their host agencies. Participants receive a minimum stipend (\$7.25 an hr.) for 20 hours of training per week, 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, the host agencies also reap the benefits of services performed by the participants. Ultimately, participants are placed in permanent employment at the prevailing wage either with their host agency or with a non-profit, government or private sector employer.

Participant O. trained at the Upper Shore DLLR office right alongside the SCSEP Employment Specialist for a little less than 3 months. This training enabled them to secure a full time position as a Case Worker with Upper Shore Aging, Inc. making approximately \$25,000 per year and plan to pursue a degree in social work. Participant H. trained for 1 year with Community Services of Central Maryland and was hired full time as a Career Development Specialist by the Baltimore City DLLR office at \$19 an hour.

	<b>Program Eligibility Criteria:</b> Eligible participants are those who are unemployed, meet the					
	income test, are 55 years of age or older and in need of employment and training assistance.					
Annual Income Test		Annual Asset Test	Notes:			
	\$13,538.00		For families with more than			
	\$18,213.00	N/A	8 persons, add \$3,740 for			
	\$22,888.00		each additional person.			

Program Data:	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Number of Training Positions	163	163	163
Number of Participants Trained	231	281	253
<b>Program Funding:</b>	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Federal	\$2,586,980	\$1,615,764	\$1,615,764
State	\$0	\$0	\$0
Total	\$2,586,980	\$1,615,764	\$1,615,764

#### **CONTACT PERSON:**

Carlene Forbes, Program Manager, 410-767-1276, cforbes@ooa.state.md.us

## **COMMUNITY SERVICES**

# 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. Meals are served in a variety of congregate settings, including senior centers and senior housing sites. There are 260 meal sites, 183 are in low-income areas. The 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.

Mr. Jones was unsure about going to the new senior center to have lunch. After going to the meal site for just one week, he began to make new friends and join in the activities at the center. Now, Mr. Jones is exercising in the senior center's fitness center, meeting friends over lunch and says, "I can't imagine why I had any doubts about going to the meal site. This place is incredible!"

**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 serving older individuals with the greatest social and economic need.

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

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Number of Meals	1,431,492	1,388,547	1,360,776
Number of People Receiving Meals	28,076	27,233	26,688
Attendance at Nutrition Education	18,093	17,550	17,199
Waiting List: There are 12,657 elders who would benefit from an additional meal.			

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$6,696,393	\$6,930,061	\$6,930,061
State	\$1,201,933	\$1,201,933	\$1,201,933
Local Contributions	\$3,179,275	\$3,179,275	\$3,179,275
Total	\$11,077,601	\$11,311,269	\$11,311,269

#### **CONTACT PERSON:**

Judy Simon, Program Manager, 410-767-1090, JSimon@ooa.state.md.us

MARYLAND DEPARTMENT OF AGING

# HOUSING AND LONG TERM CARE PROGRAMS

- Congregate Housing Services Program
- Continuing Care Retirement Communities
- Continuing Care Communities Inventory
- Medicaid Waiver for Older Adults
- National Family Caregivers Support Program
- Senior Assisted Living Group Home Subsidy Program
- Senior Care
- Senior Center Plus
- Senior Nutrition-Home-Delivered Meals

# HOUSING AND LONG TERM CARE PROGRAMS Congregate Housing Services Program

**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.

Mr. D is a highly intelligent seventy-three year-old resident, who is a retired Psychology Instructor. Currently, Mr. D resides at Pinewood Village in Glen Burnie, Maryland. Mr. D has been diagnosed with coronary artery disease, diabetes, chronic obstructive pulmonary disease (COPD), hypertension, hypercholesterolemia, obesity, venous stasis dermatitis, Congestive Heart Failure (CHF), Gastroesophageal Reflux Disease (GERD), and chronic migraines. On December 12, 2008, Mr. D began receiving ICHSP services from the Housing Commission of Anne Arundel County. After years spent living in four different assisted living homes, Mr. D is able to live independently in his own apartment. Through the ICHSP program, he receives individualized supportive services and no longer requires a higher level of care. At Pinewood Village, Mr. D receives weekly housing keeping, laundry, personal assistance, and daily meals. Since his admission to CHSP, Mr. D continues to express that being a participant on the program has restored his dignity and he now has a place to call home.

**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.

Eligibility	Monthly Income Test	Annual Asset Test	Notes:
			Subsidies are provided to eligible
Individual	\$ 2,521	\$ 27,375	participants who are age 62 and older, and
Couple	\$ 3,296	\$ 35,587	whose net monthly income is insufficient to pay the full monthly fee for CHSP services.

**Unmet Need:** There are 184 seniors on the waiting list and 28 facilities interested in starting a CHSP.

Program Data	FY 2009 Actual	FY 2010 (Est.)	FY 2011 (Est.)
Number of Residents Receiving Services	735	600	600
Number of Buildings Receiving Services	30	30	30
Program Funding	FY 2009 Actual	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$1,186,307	\$716,580	\$716,580
State	\$1,522,927	\$1,527,077	\$1,527,077
Local Contributions	\$561,638	\$801,310	\$801,310
Total	\$3,275,022	\$3,017,511	\$3,017,511

#### **CONTACT PERSON:**

Janice MacGregor, Contract Administrator, 410-767-1087, jlm@ooa.state.md.us

# HOUSING AND LONG TERM CARE PROGRAMS Continuing Care Retirement Communities Continuing Care at Home

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

CCRCs are specific types of retirement housing that offer 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 assisted living or nursing care in an on-site health care center at no additional fee, or may be limited to priority admission to the health care center, with additional fee-for-service charges. The scope of services varies among CCRCs. These services are offered under a written continuing care agreement that requires payment of an entrance fee and monthly fees.

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, 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.

Mr. B. is 86 and his wife of 60 years has just died. His six children and Mr. B. have decided that it would be better for him to give up his home and all its problems, such as yard work, snow removal, housekeeping, etc. The six adult children, who live in different states surrounding Maryland, have decided, after much research, that it would be better for Mr. B. to only move a few miles from his home and move into a CCRC that provides the full continuum of care. It would also provide him the companionship that Mr. B. and his adult children believe he needs. After looking at many of the options available in Baltimore County, Mr. B. moved into an apartment at a CCRC.

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est. )
Facilities	35	36	35
Units	15,879	16,014	15,837
Special Funds	\$328,578	\$346,450	\$356,108

#### **Contact Persons:**

Debra A. Roane, Chief, Continuing Care, 410-767-1267, dar@ooa.state.md.us Martha C. Roach, Continuing Care Analyst, 410-767-1067, mroach@ooa.state.md.us

**Continuing Care Communities Inventory** 

Ginger Cove Roland Park Place Baltimore City Wesley Home Augsburg Lutheran Home Baltimore County Augsburg Lutheran Village Blakehurst Broadmead Baltimore County Blakehurst Broadmead Baltimore County Charlestown Baltimore County Baltimore County Baltimore County Baltimore County Charlestown Baltimore County Glen Meadows Baltimore County Maryland Masonic Homes Baltimore County Mercy Ridge Baltimore County North Oaks Baltimore County North Oaks Baltimore County Dake Crest Village Baltimore County Baltimore County  Asbury~Solomons Island Calvert County Carroll Lutheran Village Carroll County Buckingham's Choice Frederick County Frederick Home Goodwill Retirement Village Vantage House Howard County Asbury Methodist Village Montgomery County Bedford Court Montgomery County Montgomery County Brooke Grove Montgomery County Montgomery County Montgomery County Brooke Grove	349	88 88 02 34 34 110 08 49 82 13	1 55 1 71 2 0 4 123 0 0 4 44 5 79 4 210 8 72 4 31 0 88 0 0 8 37 8 224 6 41 8 22 0 48
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Augsburg Lutheran Village  Blakehurst  Boaltimore County  Broadmead  Charlestown  Baltimore County  Baltimore County  Baltimore County  I, Bedenwald  Baltimore County  Baltimore County  Baltimore County  Baltimore County  Maryland Masonic Homes  Baltimore County  Mercy Ridge  Baltimore County  North Oaks  Baltimore County  North Oaks  Baltimore County  I, Baltimore County  Pickersgill Inc.  Baltimore County  Presbyterian Home  Baltimore County  Carroll County  Carroll Lutheran Village  Carroll County  Fairhaven  Carroll County  Frederick Home  Goodwill Retirement Village  Howard County  Carrol County  Vantage House  Howard County  Heron Pt. of Chestertown  Asbury Methodist Village  Montgomery County  Brooke Grove  Montgomery County  Montgomery County  Montgomery County  Montgomery County	138     13       345     2°       373     2°       926     1,5       448     28       267     20       232     3       4457     40       232     18       895     1,5       177     100       378     30       398     39       428     3	38	0 0 4 44 5 79 4 210 8 72 4 31 0 88 9 0 8 37 8 224 5 41 8 22
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Glen Meadows  Maryland Masonic Homes  Baltimore County  Mercy Ridge  Baltimore County  North Oaks  Baltimore County  Oak Crest Village  Baltimore County  Baltimore County  1,  Pickersgill Inc.  Baltimore County  Presbyterian Home  Baltimore County  Asbury~Solomons Island  Calvert County  Carroll Lutheran Village  Carroll County  Buckingham's Choice  Frederick County  Frederick Home  Goodwill Retirement Village  Vantage House  Howard County  Asbury Methodist Village  Montgomery County  Montgomery County  Bedford Court  Montgomery County  Montgomery County  Montgomery County  Montgomery County  Montgomery County	267 20 232 3 457 40 232 18 895 1,52 177 100 378 30 398 39 428 3.	02 34 34 110 08 49 82 13 28 143 0 136 0 78 00 30 98 0	4 31 0 88 0 0 3 37 3 224 5 41 8 22 0 48
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Pickersgill Inc.  Presbyterian Home  Asbury~Solomons Island  Carroll Lutheran Village  Fairhaven  Buckingham's Choice  Frederick County  Goodwill Retirement Village  Vantage House  Heron Pt. of Chestertown  Asbury Methodist Village  Bultimore County  Carroll County  Carroll County  Frederick County  Frederick County  Garrett County  Howard County  Kent County  Asbury Methodist Village  Montgomery County  Brooke Grove  Baltimore County  Carroll County  Frederick County  Frederick County  Frederick County  Montgomery County  1,  Montgomery County  Montgomery County	177 100 378 36 398 398 428 33	0 136 0 78 00 30 98 0	5 41 8 22 0 48
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		67 65	
	310 1,94		
		21 44	
•		61 32	
		92	
	879 11,51		
Continuing Care Retirement Communities (Planned)	11,5	1,,,,	, 2,371
Expansions			
William Hill Manor Talbot County	47	3 44	4 0
Asbury Methodist Village Montgomery County		43	
Goodwill Retirement Village Garrett County	43	0 43	
New	43	0 45	,
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<i>5</i>	3()4 17	83 10	
•		32 21	
Total Units 1,	203 18	92 226	

<sup>\*</sup>ILU=Independent Living Units \*\*\*AL=Assisted Living Beds \*\*\*Comp=Comprehensive Care Beds

# HOUSING AND LONG TERM CARE PROGRAMS 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.

Mr. M's Waiver case manager was so thrilled to learn that through all the diligent efforts of the various agencies involved in the application and eligibility determination process for the waiver that he would be able to be discharged from the nursing home in time for Christmas. She went to tell him in person and related what happened: "I ran through the parking lot and into the nursing home to find him and ask him what his favorite Christmas carol was." He said, "I don't know, I've been listening to them all." I said, "How do you like, 'I'll Be Home for Christmas?" He got tears in his eyes and hugged me. The nursing home social worker was elated and a man that I don't even know behind the receptionist's desk reached out and shook my hand. Then I called the worker at DSS and she announced the news to those around her. I heard a cheer go up!" This a great outcome for Mr. M. and many others made possible by the staff and resources of the Medicaid Waiver for Older Adults.

**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.

term care admission criteria (nursing home level of care), and meet financial and technical requirements.					
Financial	Monthly Income Test \$2022 as of 1/1/10 (300% of SSI maximum)			Annu	al Asset Test \$2000
<b>Eligibility</b> Individual					
Program Data:		FY2009 (Act.)	FY20	)10 (Est.)	FY2011 (Est.)
Number of Provider	·s	5104	•	4675	4675
Number of Participa	rticipants – Unduplicated Count 3571			3750	3750

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 3,150 participants and currently supports 3091. There are over 15,200 names on the registry. Generally 75% of those who apply for this waiver are determined ineligible. If this holds true for those currently on the registry, more than 10,200 people in need of long-term support services may have no alternative to placement in a nursing home.

Program Funding:	FY2009 (Act.)	FY2010 (Est.)	FY2011 (Est.)
Federal (Administration and Case Management)	\$3,097,396	\$3,100,000	\$3,600,000
State (Administration and Case Management)	\$2,156,007	\$2,181,054	\$2,241,784
Total	\$ 5,253,403	\$5,281,054	\$5,841,784

#### **CONTACT PERSON:**

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

#### **ELDERCARE AFFAIRS**

## National Family Caregiver Support Program

**Program Description:** The National Family Caregiver Support Program (NFCSP) provides services to family and other non-compensated caregivers in recognition of the 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, support services and individualized counseling; respite care to enable temporary relief from caregiving responsibilities; and supplemental services that may include other services not identified here.

A female family caregiver called for any type of assistance that the Saint Mary's National Family Caregiver Support Program (NFCSP) could provide her with that would help her take care of her husband. She mentioned that he was in need of 24 hour care and could not leave him due to him being at risk for wandering. The caregiver requested an aide who could watch her husband for a few hours so she could run errands. Besides caring for her husband she was also responsible for her 90 year old mother who lived next door. The Saint Mary's NFCSP helped her with a grant for her husband, as well as one for her mother. Together with the Program Manager, the caregiver worked out a plan where her sisters would provide care to her mom and an aide would come in to assist with her husband once a week. With this assistance, the caregiver was able to attend the 3rd Annual Caregivers Breakfast that was held in Saint Mary's County in November. She was most grateful for the on going respite allowing her time to take care of herself.

**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 55 who are caring for a child age 18 or under and Grandparent or relative caregivers, providing care for adult children with a disability, who are between 19 and 59 years of age. The caregivers must be age 55 and older and cannot be the child's natural or adoptive parent. This program is also for caregivers of a person with Alzheimer's disease or a related disorder.

Eligibility	Monthly Income Test   Annual Asset Test   Notes: Respite and supplemental services may be a supplemental service.						
Individual	None		None		provided to caregivers who are caring for		
Couple				someone	with physica	l and mental di	sabilities that
1				restrict t	heir ability to	perform norma	ıl daily tasks.
Program Data FY2009 (Actu			(Actual)	FY201	0 (Est.)	FY201	1 (Est.)
Number Served*/Units of Service People		Units	People	Units	People	.Units	
Education, Tra	n, Training or Support 6,282 14,106		8,250	10,200	8,600	10,760	
Respite		1,776	89,142	2,252	10,383	2,578	10,500
Supplemental	Services	2,355	84,292	1,485	84,950	1,625	86,025
Access Assista	ance	36,156	46,750	31,750	56,102	32,975	57,325
Information		44,292	13,182	44,257	45,727	45,125	45,650

\*Includes both family and grandparent caregivers served.

Program Funding	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Federal	\$2,401,413	\$2,365,535	\$2,365,535
State	\$55,431	\$53,067	\$53,067
Local Contributions	\$423,476	\$570,232	\$570,232
Total	\$2,880,320	\$2,988,834	\$2,988,834

#### **CONTACT PERSON:**

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

## HOUSING AND LONG TERM CARE PROGRAMS Senior Assisted Living Group Home Subsidy Program

**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 Maryland 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 \$650/month. Subsidies are paid from State general funds.

Mrs. S. is an 84 year old female who has been an assisted living resident for 4 years and a subsidy recipient for 2 years. Prior to her placement, she resided with her daughter. Her daughter remains very supportive, visiting often and providing her mother with needed personal care supplies. Mrs. S. is an insulin-dependent diabetic with high blood pressure along with a history of paranoia and agitation. Ms. S. is incontinent of bowel and bladder and needs assistance with ambulation and transferring. Due to her diabetes, she has a chronic ulcer on her left heel. She is currently dependent on the staff of the assisted living facility to assist her with carrying out her activities of daily living, including bathing, toileting, dressing and grooming.

**Program Eligibility Criteria**: Eligible residents are low to moderate income persons residing in or accepted for admission to assisted living facilities, 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	Monthly	Annual Asset   Notes: Provides financial assistance for a limited	
Eligibility	Income Test	Test	of eligible Assisted Living Group Home residents 62 and
Individual	\$2,521	\$11,000	older whose net monthly income is insufficient to pay the
Couple	\$3,296	\$14,000	full monthly cost of a quality assisted living placement.

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Number of Residents Receiving Subsidies	508	309	

**Waiting List**: There are currently 295 persons on a waiting list for a subsidy. In 2008, a MetLife Mature Market Survey of Assisted Living Costs estimated the national average monthly cost for assisted living was \$3,031, with an average statewide cost of \$3,775. 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 of it without financial assistance.

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$3,216,703	\$3,166,056	\$2,983,436
State	\$284,029	\$284,029	\$284,029
Local Contributions	\$3,500,732	\$3,3450,085	\$3,450,085
Total	\$3,216,703	\$3,166,056	\$2,983,436

#### **CONTACT PERSON:**

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

# COMMUNITY SERVICES Senior Care Program

**Program Description:** The Senior Care Program provides coordinated, community-based, inhome 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.

EB is an 86-year-old man who lives alone. He suffers from Hypertension, Cardiovascular disease, Arthritis, Depression, hearing and vision loss, Lung Cancer and bladder incontinence. He needs assistance with bathing, dressing, eating and chores. He receives a monthly income from Social Security. His wife was recently placed in a nursing home and he now must pay her portion of the household income towards nursing home expenses. Senior Care provides monthly for a Personal Emergency Response System, medications, medical supplies, and four hours of weekly Personal Care and Chore services. He also receives home delivered meals.

**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 Individual Couple	\$2,521 \$3,296	\$11,000 \$14,000	<b>Notes:</b> Functional/Medical eligibility is determined as having a moderate or seve rating on the State assessment tool.	
<b>Program Data</b>		FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Number of Clie Gapfilling Serv	ents Served with ices	2,604	2,604	2,604
Number of Clients Waiting for Services at end of Fiscal Year		2,053	2,053	2,053
Number of Waiting List Clients who Enter Nursing Facilities		143	143	143
<b>Waiting List</b> : The Senior Care waiting list decreased this year partially due to additional funding. In FY09 approximately 8 percent of the individuals on the waiting list were placed in nursing homes.				
Program Funding		FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal		\$940,891	\$940,891	\$940,891
State		\$7,143,078	\$7,166,384	\$7,266,384
Local Contribut	tions	\$541,146	\$541,146	\$541,146
Total		\$8,625,115	\$8,648,421	\$8,748,421

#### **CONTACT PERSON:**

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

## HOUSING AND LONG TERM CARE PROGRAMS 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 medical day care services. The program 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.

MAC, Inc. (the Lower Eastern Shore Area Agency on Aging has opened a new Senior Services Center, that will incorporate a senior activity center, a senior nutrition and wellness center, and a replacement for the former Riverside Place Facility (a State certified Senior Center Plus Program Site, for persons with Alzheimer's Disease and other cognitive/memory impairments). The Senior Center Plus Program Area will utilize approximately 3,957 gross square feet of activity space. Previously, Riverside Place could only service 10 persons daily, four times a week, due to space limitations (creating a waiting list for the service). The new facility will allow MAC, Inc. to address the increased need for this service.

**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 (IADLs) without substantial assistance or supervision

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

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Persons Enrolled	401	420	420
Number of Sites	47	48	48

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$0	\$0	\$0
State	\$458,990	\$450,000	\$450,000
Local Contributions	\$0	\$0	\$0
Total	\$458,990	\$450,000	\$450,000

#### **CONTACT PERSON:**

Wiley Finch, Program Manager, 410-767-1115, wgf@ooa.state.md.us

## COMMUNITY SERVICES

## 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 2,600 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.

Mrs. Temple came home from several weeks in a rehabilitation hospital after falling down and having surgery. Her daughter brings dinner over each night and Mrs. Temple can get around enough to put together some cereal and juice for breakfast. "What a god-send" she remarked when a volunteer knocked at her door delivering a hot lunchtime meal. "My family works during the day and without this meal I don't know what I would do."

Mrs. Temple's daughter is relieved that someone is checking in with her mother each day. "It's such a relief to know someone will be there to give her lunch and make sure she's safe."

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

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)		
Number of Meals	1,274,134	1,248,651	1,211,191		
Number of People Receiving Meals	7,654	7,501	7,276		
Number of Volunteers 2,682 2,629 2,550					
Waiting List: There are an estimated 711 homebound elderly who are on a waiting list to receive meals.					

<b>Program Funding</b>	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$2,585,381	\$3,492,059	\$3,492,059
State	\$647,193	\$647,193	\$647,193
Local Contributions	\$1,620,330	\$1,620,330	\$1,620,330
Total	\$4,852,904	\$5,759,582	\$5,759,582

#### **CONTACT PERSON:**

Judy Simon, Program Manager, 410-767-1090, JSimon@ooa.state.md.us

## BUDGET PRESENTATION FISCAL YEAR 2011 ANNUAL REPORT 2009

MARYLAND DEPARTMENT OF AGING

## **INFORMATION SERVICES**

- Aging and Disability Resource Centers/ Maryland Access Point
- Senior Health Insurance Assistance Program
- Senior Information and Assistance Program

# HOUSING AND LONG TERM CARE PROGRAMS Aging and Disability Resource Centers/Maryland Access Point

**Program Description**: In October 2003, Maryland was one of the first 12 states to be awarded an \$800,000 federal grant to pilot Aging and Disability Resource Centers. In 2006, the program received a federal continuation grant of \$400,000; in 2008, it received a federal combined expansion grant of \$1.1 million to add two new ADRC sites and develop a person centered hospital discharge program; and in 2009, it received a federal grant to expand to two more sites and develop a sustainability and infrastructure plan. At this time, there are nine local ADRC sites covering ten counties and one half of the state's population. A statewide searchable data base and website is under development.

In Maryland, the ADRC Grant Program is known as Maryland Access Point (MAP). It is a partnership between the Maryland Department of Aging, and the Departments of Health and Mental Hygiene, Human Resources, and Disabilities, as well as advocates for senior consumers and persons with disabilities. A goal of the program is to provide the public with faster and more efficient access to information and services for seniors, persons with disabilities, their caregivers, and the professionals who manage their care. Pilot sites are operating in Anne Arundel, Howard, Washington, and Worcester Counties. Two new sites are under development are in Baltimore City and Prince George's County.

As one consumer stated: "MAP has become my first point of service outreach. It's the best thing to make life easier for seniors. No matter who answers the phone you are made to feel safe, that you will get helped as best possible. Thank you for bringing it here!"

**Program Eligibility Criteria**: Older adults and persons over the age of eighteen with disabilities are eligible for the program.

Eligibility	Monthly Income Test		<b>Annual Asset Test</b>	Notes:
N/A	N	T/A	N/A	N/A
Program Data: Numbe	r of contacts	<b>FY 2009 (Actual)</b>	FY 2010 (Est.)	FY 2011 (Est.)
Howard County		17,948	18,430	19,000
Worcester County		1,000	1,105	1,300
Anne Arundel County		3,500	4,500	4,700
Washington County		1,951	2,856	3,000
Prince George's Coun	ty		15,300	16,000
Baltimore City			142,000	150,000
Carroll County			500	1,500
MAC Inc. (Wicomico	& Dorchester)		500	1,500
Montgomery County			500	3,000
Program Funding		FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal		\$61,433	\$277,750	\$277,750
State		\$0	\$250,000	\$250,000
Local Contributions		\$0	\$0	\$0
Total		\$61,433	\$527,750	\$527,750

#### **CONTACT PERSON:**

Stephanie Hull, Director, 410-767-1107, sah@ooa.state.us.md

#### COMMUNITY SERVICES

### Senior Health Insurance Assistance Program

**Program Description:** The Senior Health Insurance Assistance Program (SHIP) provides seniors and adults with disabilities on Medicare with information and assistance on health insurance issues including Medicare, 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 on a variety of health insurance related topics, most notably, the Medicare Part D prescription plans and outreach to homebound seniors and Medicare beneficiaries with disabilities.

Special attention this year has been on outreach to Medicare beneficiaries who have limited income and resources, with efforts to assist them with enrollment in assistance programs particularly relevant to the Medicare Part D Prescription Drug Program. These assistance programs include the "Extra Help" Program (also called LIS, Low Income Subsidy), the Maryland Senior Prescription Drug Assistance Program (Maryland SPDAP) and Medicare Savings Programs (Qualified Medicare Beneficiary Program, QMB, and Specified Low Income Medicare Beneficiary Program, SLMB).

<b>Program Eligibility Criteria</b> : Eligible individuals are those who reside in Maryland and have Medicare Part A						
and/ or Part B.						
Eligibility	<b>Monthly Income Test</b>	Annual Asset Test	Notes: There are no age			
Individual	None	None	requirements to receive			
Couple			assistance from SHIP.			

	FY 2009 (Actual)		
Program Data	April 08-Mar 09	FY 2010 (Est.)	FY 2011 (Est.)
Number of Contacts for:			
Medicare	5,947	6,244	6,556
Medicaid	6,342	6,672	7,005
Prescription Assistance	33,477	35,151	36,908
Long Term Care	319	335	352
Number of Clients Served	25,647	26,929	28,275
Number Attending Events	13,020	13,671	14,355
Number of Volunteers	140	145	150
Number of Volunteer Hours	9,882	10,376	10,895

**Waiting List**: There are 13 full time staff and 140 volunteers available to counsel 740,000 Medicare beneficiaries. The main challenge is keeping up with training, presentations and enrollment events while providing health insurance information, assistance and outreach to homebound seniors and persons with disabilities.

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$557,944	\$518,856	\$518,856
State	\$0	\$0	\$0
Local Contributions	\$216,381	\$216,381	\$216,381
Total	\$774,325	\$735,237	\$735,237

#### **CONTACT PERSON:**

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

#### **COMMUNITY SERVICES**

## Senior Information and Assistance Program

**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. R is a 62 year old widow, who called Senior Information and Assistance to request help following a water main break that resulted in the loss of her washer, dryer and refrigerator. She also had a BGE turn-off notice. Mrs. R is the custodial grandparent of five grandchildren, ages three months to thirteen years. The household income is under \$700 per month and the family receives Section 8 and Food Stamps. With the help of the I&A Program, she was able to receive a Caregiver's grant for household expenses, and a Senior Expo grant to help with the turn-off notice and replacement of lost food. Also the household was placed on the list for Commodity Food delivery and the Santa's Helpers charity.

Program Eligibility Criteria: Eligible clients must be 60 years and older. Persons can access the						
program through tele	phone and walk-in service, a	ppointments, written corre	spondence and home visits.			
Eligibility	Eligibility Monthly Income Test Annual Asset Test Notes: Persons needing					
			more in-depth assistance			
Individual	None	None	will be assessed to determine			
	None	None	his/her specific need for			
Couple			services, programs and			
			benefits.			

Program Data	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Information Units of Service	877,266	877,266	877,266
Number of Referrals	112,701	112,701	112,701
Follow-up Units of Service	64,695	64,695	64,695
Assistance Units of Service	162,604	162,604	162,604
Number of Assistance Clients	54,272	54,272	54,272
<b>Program Funding</b>	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Federal	\$1,571,130	\$1,308,400	\$1,308,400
State	\$769,571	\$744,572	\$692,615
Local Contributions	\$641,344	\$2,277,740	\$2,277,740
Total	\$2,982,045	\$4,330,712	\$4,278,755

#### **CONTACT PERSON:**

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

## BUDGET PRESENTATION FISCAL YEAR 2011 ANNUAL REPORT 2009

MARYLAND DEPARTMENT OF AGING

# PROTECTION OF OLDER ADULTS

- Long Term Care Ombudsman Program
- Public Guardianship
- Senior Legal Assistance Program
- Senior Medicare Patrol Project

# PROTECTION OF OLDER ADULTS Long-Term Care Ombudsman Program

**Program Description:** Long-term care ombudsmen are advocates for residents of long-term care facilities (nursing homes and 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.

Two female residents in an assisted living facility filed numerous complaints with the Ombudsman Program because they felt constrained. They could not enter parts of the facility and were required to stay in their rooms after a certain hour. The unhappy residents were labeled as "complainers." The Ombudsman successfully advocated for the residents and assisted them in finding another facility. The residents are now able to assist in meal preparation, have access to the entire facility, launder their own clothes if they desire, and determine their own schedules. There have not been any complaints from theses residents at their new home.

<b>Program Eligibility Criteria</b> : Eligible individuals are residents of any age who reside in long-term care facilities.					
Eligibility Individual Couple	Monthly Income Test None	Annual Asset Test None	Notes:		

	FFY2008	FFY2009	FFY2010	FFY2011
Program Data	(Actual)	(Estimate)*	(Estimate)	(Estimate)
Number of Complaints	4,463	4,563	4,663	4,773
Number of Abuse Cases	422	442	464	489
Number of Volunteers	98	108	119	132
		FFY2009	FFY2010	FFY2011
Program Funding		(Actual)**	(Estimate)	(Estimate)
Federal		\$470,897	\$461,271	\$461,271
State		\$1,785,365	\$1,785,365	\$1,724,998
Local Contributions		\$198,445	\$798,387	\$798,387
Total		\$2,454,707	\$3,045,023	\$2,984,656

<sup>\*</sup>Federal Fiscal Year 2009 final data is not available

#### **CONTACT PERSON:**

Patricia Bayliss, Chief Administrator, Elder Care Affairs Unit, 410-767-1091 pbayliss@ooa.state.md.us

<sup>\*\*</sup>As of September 30, 2009

# PROTECTION OF OLDER ADULTS Public Guardianship Program

**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. The program provides protection and advocacy on behalf of the disabled older adult through case management provided by guardianship specialist of the program.

Mr. W, an eighty-three year old man was taken to a local hospital after he suffered from a stroke. As Mr. W began recovering he had difficulty expressing himself and appeared to be confused. Two psychiatrists examined Mr. W and concluded his impairment was significant enough that his decision making capacity was not intact. The psychiatrists documented the results of their evaluation. Hospital staff began searching for any of Mr. W's family members and/or friends. Unable to locate anyone the hospital petitioned for public guardianship. The director at the local AAA was appointed as his guardian of person. A case manager from the AAA was assigned to the case and began working with Mr. W. When he was ready to be discharged from the hospital the case worker assisted in locating an appropriate setting for Mr. W to reside. The case worker continues to ensure Mr. W's needs are met and advocates on his behalf.

**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	<b>Monthly Income Test</b>	<b>Annual Asset Test</b>	Notes:
Age 65 and older	None	None	

Program Data	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Total Number of Guardianship Wards	789	852	920
Number of New Cases	195	195	195
Group Education Sessions Provided	99	99	99
Individual Consultations (post- guardianship)	22,482	22,482	22,482
Number of Public Guardianships Avoided	323	323	323
Program Funding	FY2009 (Actual)	FY2010 (Est.)	FY2011 (Est.)
Federal	\$0	\$0	\$0
State	\$642,692	\$642,692	\$642,692
Local Contributions	\$352,068	\$384,765	\$384,765
Total	\$994,760	\$1,027,457	\$1,027,457

#### **CONTACT PERSON:**

Phoenix Liss, Program Manager, 410-767-4665, pliss@ooa.state.md.us

# PROTECTION OF OLDER ADULTS 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, nutrition, public/disability benefits, health care, protective services, abuse, housing, utilities, consumer protection, employment, age discrimination/civil rights, and advocacy for institutionalized persons. The Maryland Department of Aging in partnership with the Legal Aid Bureau, Inc. received an extension on a three-year grant obtained through the Administration on Aging to provide additional services for people seeking information on advanced directives and assisted living services.

A sixty-nine year old, Ms. H contacted the local Senior Legal Assistance service providers' office after learning that her bank account had been frozen. She had no access to her money in order to cover the cost of her housing, food or medication. The attorney reviewed Ms. H's case and discovered that her bank account only contained a pension and social security income which are exempt from garnishment. The attorney assisted Ms. H in getting her funds released.

**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. Preference is given to older persons with the greatest economic or social need.

Eligibility	<b>Annual Income Test</b>	Annual Asset Test	Notes:
Age 60 and older or	None	None	None
caregiver of such a person			

Program Data	FY 2009(Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Hours of Service Provided	13,103	13,627	14,172
Number of Persons Served	4,158	4,324	4497

Program Funding	FY 2009(Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$503,560	\$408,560	\$408,560
State	\$2,677	\$2,677	\$2,677
Local Contributions	\$305,783	\$305,783	\$305,783
Total	\$503,560	\$408,560	\$408,560

#### **CONTACT PERSON:**

Phoenix Liss, Legal Service Developer, 410-767-4665, pliss@ooa.state.md.us

# PROTECTION OF OLDER ADULTS Maryland Senior Medicare Patrol Project

Program Description: The purpose of the Maryland Senior Medicare Patrol (SMP) 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. SMP has been successful in recruiting and training retiree volunteers to act as health insurance educators. Activities include public speaking engagements and instructing Medicare beneficiaries in monitoring health care expenditures, identifying potential discrepancies, and identifying issues having the potential for fraud concerning the selection of Medicare Prescription Drug Plans and Medicare Advantage plans. Thirteen Area Agencies on Aging (AAAs) currently operate the SMP project, including Anne Arundel, Baltimore, Carroll, Frederick, Harford, Howard, Montgomery, Prince George's, Queen Anne's and St. Mary's Counties, Baltimore City, MAC, Inc. (Dorchester, Somerset, Wicomico and Worcester Counties) and Upper Shore Aging (Kent, Caroline, and Talbot Counties).

The SMP Integration Grant continued in FY 2009 to expand the reach of the program to educate rural, isolated senior Marylanders and tribal elders who are Medicare beneficiaries using the SMP fraud prevention message as well as strategically partner with AAAs, and Aging and Disability Resource Centers (ADRCs) in outreach initiatives. This collaboration resulted in the statewide implementation of SMPs as well as targeted outreach and marketing materials that expanded Maryland's SMP outreach into each county in Maryland. Launched in FY 2008, AoA funded the SMP Integration Grant for 2 years. The initiative will end on June 30, 2010.

Program Data	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Number of People Served			
One-to-one Counseling Sessions with	403	413	420
Beneficiaries or their Caregivers			
Education & Outreach			
Number Beneficiaries that Attended Group			
Education Sessions	4,937	4,947	4,955
Number of Media & Community Outreach Events	95	100	105
Issues & Inquiries			
Number of Issues & Inquiries Resolved	3,883	3,890	3,893
Volunteers & Volunteerism			
Number of Active Volunteers	143	146	147
Volunteer Hours	11,520	11,761	11,842

Program Funding	FY 2009 (Actual)	FY 2010 (Est.)	FY 2011 (Est.)
Federal	\$176,982	\$239,023	\$144,023
State	\$0	\$0	\$0
Local Contributions/Program Income	\$21,232	\$16,839	\$16,839
Total	\$198,214	\$255,862	\$160,862

#### **CONTACT PERSON:**

A. Cassaundra Brown, SMP Coordinator, 410-767-1278, acb@oooa.state.md.us

## BUDGET PRESENTATION FISCAL YEAR 2011 ANNUAL REPORT 2009

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## **APPENDICES**

- A. Area Agencies on Aging
- **B.** Commission on Aging
- C. Eligibility Levels for Federal and State Programs
- **D. Senior Centers**
- E. Senior Information and Assistance

## **AREA AGENCIES ON AGING**

## Appendix A

<b>County/Jurisdiction</b>	<b>Contact Person</b>	Address	Telephone/Fax/Email/Web
ALLEGANY	Renee Kniseley Director	Allegany Co. Human Resources Development Commission, Inc. 125 Virginia Avenue Cumberland, MD 21502	301-777-5970 301-783-1890 - FAX rkniseley@allconet.org
ANNE ARUNDEL	Carol R. Baker Director	Anne Arundel County Department of Aging 2666 Riva Road - Suite 400 Annapolis, MD 21401	410-222-4464 410-222-4360 - FAX crbaker@aacounty.org
BALTIMORE CITY	Janie McCullough Interim Executive Director	Baltimore City Commission on Aging and Retirement Education 10 North Calvert Street, Suite 300 Baltimore, MD 21202	410-396-4932 410-545-1539 - FAX Janie.mccullough@baltimorecity.gov
BALTIMORE COUNTY	Joanne Williams Director	Baltimore County Department of Aging 611 Central Avenue Towson, MD 21204	410-887-2108 410-887-2159 - FAX jwilliams@baltimorecountymd.gov
CALVERT	Susan Justice 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 justicsa@co.cal.md.us
CAROLINE KENT TALBOT	Gary Gunther Executive Director	Upper Shore Aging, Inc 100 Schauber Road Chestertown MD 21620	410-778-6000 410-778-3562 – FAX ggunther@uppershoreaging.org
CARROLL	Jolene G. Sullivan, Director Department of Citizen Services	Carroll County Bureau of Aging 125 Stoner Avenue Westminster, MD 21157	410-386-3600 410-244-3453 - FAX jsullivan@ccg.carr.org
CECIL	Greg Bayor Director	Senior Services and Community Transit of Cecil County 200 Chesapeake Blvd, Suite 2550 Elkton, MD 21921	410 996-8435 410-996-5295 410-620-9483 - FAX gbayor@ccgov.org

## **AREA AGENCIES ON AGING**

## Appendix A

<b>County/Jurisdiction</b>	<b>Contact Person</b>	Address	Telephone/Fax/Email/Web
CHARLES	Dina Barclay Chief	Charles County Aging and Community Centers 8190 Port Tobacco Road Port Tobacco, MD 20677	301-934-0129 301-934-0126 - FAX barclayd@charlescounty.org
DORCHESTER SOMERSET WICOMICO WORCESTER	Margaret Bradford Executive Director	MAC, Inc. 909 Progress Circle, Suite 100 Salisbury, MD 21804	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 ctrue@fredco-md.net
GARRETT	Adina Brode Director	Garrett County Area Agency on Aging 104 E. Center Street Oakland, MD 21550-1328	301-334-9431 ext. 138 or 143 301-334-8555 - FAX abrode@garrettcac.org
HARFORD	Karen Winkowski Director	Harford County Office on Aging 145 N. Hickory Avenue Bel Air, MD 21014	410-638-3025 410-879-2000 ext. 3331 410-893-2371 - FAX kawinkowski@harfordcountymd.gov
HOWARD	Sue Vaeth Administrator	Howard County Office on Aging 6751 Columbia Gateway Dr - 2nd Floor Columbia, MD 21046	410-313-6410 (Main) 410-313-6540 - FAX svaeth@howardcountymd.gov
MONTGOMERY	Odile Saddi Director	Montgomery County Area Agency on Aging Division of Aging and Disability Services 401 Hungerford Drive, 4 <sup>th</sup> Fl. Rockville, Maryland 20850	240-777-3000 (General) 240-777-1436 – FAX odile.saddi@montgomerycountymd.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 tmgrant@co.pg.md.us

## **AREA AGENCIES ON AGING**

## Appendix A

County/Jurisdiction	n Contact Person	Address	Telephone/Fax/Email/Web
QUEEN ANNE'S	Catherine Willis Director	Queen Anne's County Department on Aging Kramer Center 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 P.O. Box 653 41780 Baldridge Street Leonardtown, MD 20650	301-475-4200 301-475-4503 - FAX lori.harris@co.saint-marys.md.us
WASHINGTON	Susan MacDonald Executive Director	. Washington County Commission on Aging Inc./AAA 140 West Franklin St., 4th Floor Hagerstown, MD 21740	301-790-0275 301-739-4957 – FAX 1-866-802-1212 sjm@wccoaging.org http://www.wccoaging.org/index.aspx

#### **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 Maryland Department of Aging 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.

Mr. Stuart P. Rosenthal
Dr. Young Dae Cha
Mr. Richmond T. P. Davis
Ms. Queen L. Gladden
Mr. W. Lee Hammond
Ms. Maria V. Jimenez
Ms. Louise Lynch
Ms. Paula Martin
Ms. Irene B. Reid
Delegate Barbara Frush
Ms. Sharonlee Vogel
\* Reappointed

#### **Term**

July 1, 2007 - June 30, 2011\*
July 1, 2006 - June 30, 2010\*
July 1, 2006 - June 30, 2010\*
July 1, 2007 - June 30, 2011
July 1, 2005 - June 30, 2009\*
July 1, 2005 - June 30, 2009
July 1, 2006 - June 30, 2010
July 1, 2007 - June 30, 2011
July 1, 2007 - June 30, 2011
July 1, 1995
July 1, 2005 - June 30, 2009

#### **County of Residence**

Montgomery County
Montgomery County
Montgomery County
Charles County
Wicomico County
Montgomery County
Frederick County
Prince George's County
Baltimore City
Prince George's County
Howard County

## **Appendix C**

	Monthly (or Annual)	Annual Asset	
Federal/State Program	Income Test	Test	Notes
Federal Poverty			Next expected change: Approx
Guidelines			1/23/10
	\$ 902.50		(Date of publication of changes
Individual	(\$10,830 per year)		in the Federal Register.)
	01014		
G1-	\$1214		
Couple	(\$14,570 per year)		D. M. I'. D. (A. I.D.
Qualified Medicare	(Apply \$20 income disregard		Pays Medicare Part A and B
Beneficiary Program	– see note at bottom of page)		premiums, co-payments, and
(QMB)			deductibles.
Individual	\$ 902	\$4000	Next expected change: 3/1/10
Couple	\$1214	\$6000	reat expected change. 3/1/10
Special Low-Income	(Apply \$20 income disregard	ΨΟΟΟΟ	Similar to QMB but pays only
Medicare Beneficiary	- see note at bottom of page)		the Part B premium.
Program (SLMB)	see note at oottom of page)		the fact B promain.
Trogram (SEIVIE)			Next expected change: 3/1/10
I Individual	\$ 903 - \$1083	\$4000	
Couple	\$1215 - \$1457	\$6000	
1			
II Individual	\$1084 - \$1218	\$4000	
Couple	\$1458 - \$1639	\$6000	
Maryland Primary Adult	(After applying evaluations		For Marylanders ages 19-64, who
Maryland Primary Adult Care (PAC) Program	(After applying exclusions and disregards)		do not qualify for Medicare, the
Care (FAC) Flogram	and disregards)		PAC Program provides free
Individual	\$1046	No asset test as	primary care doctor visits, free
Couple	\$1040	of 4/1/09	mental health visits (psychiatric or
Couple	\$1214	01 4/ 1/09	counseling), and low-cost or free
			prescription drugs.
			Dogg not soughit-lt ED
			Does not cover hospital stays, ER visits, or specialty care.
			visits, or specially care.
			Call 1-800-226-2142 (toll-free)
			for application & information.
			N
			Next expected change: 3/1/10

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.

## **Appendix C**

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Supplemental Security Income (SSI)  Individual Couple	(Apply \$20 income disregard  – see note on previous page)  \$674 \$1011 (Represents 5.8% increase in Consumer Price Index for 2009)	\$2000 \$3000	Effective: 1/1/09
Medicare Part D (Prescription Drug) Low- Income Subsidy (also known as EXTRA HELP)  Individual	\$902.50 or less	(See note at bottom of page) \$ 8,100	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-
Couple (100% poverty & below)  Individual Couple (up to 135% poverty)	\$1214.17 or less ("full subsidy") \$902.51 - \$1218.38 \$1214.18 - \$1639.13	\$12,910 \$12,510 \$25,010	pays.  You will automatically receive EXTRA HELP if you have Medical Assistance, QMB, SLMB, or SSI; no need to apply.
Individual Couple (up to 150% poverty)	\$1218.39 - \$1353.75 \$1639.14 - \$1821.25	\$12,510 \$25,010	Apply through Social Security Administration (1-800-772- 1213 or www.ssa.gov) or Local Department of Social Services.  Next expected change: 1/1/10

Note: Annual asset figures, provided by Centers for Medicare and Medicaid, include \$1500 (for one person) or \$3000 (for a couple) for funeral/burial, if beneficiary indicates the need to use some of his/her assets for that purpose.

	Monthly (or Annual)	<b>Annual Asset</b>	
Federal/State Program	Income Test	Test	Notes
State of Maryland Senior Prescription Drug Assistance Program (SPDAP)			For persons enrolled in a Medicare Prescription or Medicare Advantage Prescription Drug plan AND have a household income from 136% to 300% of federal poverty guidelines,
Individual	\$32,490/yr.	No test	SPDAP pays up to \$25 per month toward the cost of the premium
Couple	\$43,710/yr.	No test	for their chosen plan. This does not apply to individuals who are 100% Low Income Subsidy (LIS) or eligible for full federal EXTRA HELP as determined by the Social Security Administration. Proof of 6 months MD residency is required.
			Beginning on 1/1/09, SPDAP began offering a new coverage gap or "donut hole" subsidy of up to \$1200 per year for persons whose drug costs total more than \$2700 per year with household income from 150% to 300% of federal poverty guidelines. Not all Medicare Prescription or Medicare Advantage Plans are participating in the coverage gap subsidy.
			For further information or applications, call 1-800-551-5995 or go to www.marylandspdap.com
			Next expected change: Approx 1/23/10
Maryland Energy Assistance Program (MEAP)			Provides eligible low-income Marylanders assistance with home heating bills; EUSP
Individual	\$1579.37	No test	assists with electric bills.
Couple	\$2124.79	No test	
	(represents 175% of poverty level)		Only one application is required for both MEAP and

E. L. 1/6/ / D.	Monthly (or Annual)	Annual Asset	Nicken
Federal/State Program  Electric Universal Service	Income Test	Test	Notes  EUSP. Both programs are
Program (EUSP)  Individual  Couple	\$1579.37 \$2124.79 (represents 175% of poverty level)	No test No test	administered by the Office of Home Energy Programs (OHEP), DHR.  Effective: 7/1/09
Food Supplement Program (formerly Food Stamp Program)  Individual Couple	\$903 \$1215 (net income)	\$3000 \$3000	A household's first \$141 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, <i>may</i> be considered a separate household.  Effective: 4/1/09
Medical Assistance (Medicaid)			Requires documentation of disability; individuals can "spend down" to this income
Individual Couple	\$350 \$392	\$2500 \$3000	level to be eligible.
Medicaid Waiver for Older Adults	\$2022 (represents 300% of SSI)	\$2000	Assisted living and in-home services for individuals age 50 and older who meet Medicaid institutional eligibility rules; additional medical, financial,

	Monthly (or Annual)	Annual Asset	
Federal/State Program	Income Test	Test	Notes
			and technical eligibility
			requirements apply.
			Next expected change: 1/1/10
Senior Care Program			Case managed, in-home
_			services program for
Individual	\$2521	\$11,000	individuals 65 and older.
Couple	\$3296	\$14,000	
			Next expected change: 7/1/10
Senior Assisted Living			Provides financial assistance
Group Home Program			for a limited number of eligible
Subsidy			Assisted Living Group Home
			residents age 62 or older.
Individual	\$2521	\$11,000	
Couple	\$3296	\$14,000	Next expected change: 7/1/10
Congregate Housing			Provides financial assistance
Services (CHSP) Subsidy			for a limited number of
			Congregate Housing residents
Individual	\$2521	\$27,375	in selected sites for individuals
Couple	\$3296	\$35,587	62 and older whose net
			monthly income is insufficient
			to pay the full monthly fee for
			Congregate Housing Services.
			Next expected change: 7/1/10
Senior Community			Federally subsidized
Service Employment			employment for persons ages
Program (SCSEP)			55 and over.
Individual	\$13,538 per yr.	No test	
			Next expected change: 1/23/09
Couple	\$18,213 per yr.	No test	

	Monthly (or Annual)	<b>Annual Asset</b>	
Federal/State Program	Income Test	Test	Notes
Accessible Homes for Seniors  Individual	\$57,500 per yr.  (Washington MSA – Calvert, Charles, Frederick, Montgomery, & Prince George's Counties)  \$46,000 per yr.  (all other jurisdictions)	No test	Provides zero-interest loans to modify a home space for senior (age 55 or older) living. Loan payments are deferred for 30 years or until the sale or transfer of ownership of the home.  If the senior resides in the home of a relative, eligibility is based on the owner's income.
Couple	\$65,750 per yr. (Washington MSA)  \$52,550 per yr. (all other jurisdictions)	No test	This program is a joint initiative of the MD Dept. of Housing & Community Development and the MD Dept. of Aging. Application available by calling 800-756-0119 or at www.mdhousing.org.
Employed Individuals with Disabilities (EID) Program  Individual  Couple	(Approximate countable income per month)  Up to \$2707  Up to \$3642  (represents 300% of poverty level)	Less than \$10,000 in countable resources	The EID Prog. provides health insurance for qualified employed persons ages 18-64 who are disabled. Persons with private health insurance or Medicare may still qualify for EID. Participants pay a monthly premium from \$0-\$55, depending on income.  The EID Program is funded by the Maryland Medical Assistance Program (DHMH). Certain income and assets that count for other Medical Assistance programs do not count toward EID income limits.  The MD Dept. of Disabilities (MDOD) partners with DHMH to promote the program. See www.mdod.state.md.us.  Call MDOD at 443-514-5034 or 1-800-637-4113 for assistance with

	Monthly (or Annual)	Annual Asset	
Federal/State Program	Income Test	Test	Notes
			likelihood of eligibility and completion of application by telephone.  Next expected change: 3/1/10
Medical Assistance (Medicaid) – Spousal Impoverishment Protection Standards	For spouse in the community:	For spouse in the nursing home: \$2500	Refers to protection of some of the income and assets of a spouse remaining in the community when the other spouse has entered a nursing home.
	Basic Maintenance and Shelter Allowance \$1750  Maximum Maintenance and Shelter Allowance	Minimum Community Spouse's Asset Share \$21,912  Maximum Community	All non-exempt assets (savings and checking accounts, stocks, bonds, etc.) owned by either spouse, jointly or separately, are pooled as of date nursing home spouse enters the nursing home. Effective 1/1/09, the community spouse may keep \$21,912 or ½ the assets, whichever is greater, but not more than \$109,560. The couple's remaining assets are used to pay for nursing home care or
	Shelter Allowance \$2739	Community Spouse's Asset Share: \$109,560	other expenses, until the nursing home spouse's assets reach the Medicaid eligibility level of \$2500. The community spouse's income will be evaluated to determine how much, if any, of the nursing home spouse's monthly income can be allowed for the community spouse's monthly maintenance allowance.
			Call 410-767-5800 or 1-800-492-5231 for questions on any aspect of the eligibility determination process.
2009 State of Maryland Homeowners' Property Tax Credit Program	Plan is based on relationship between property taxes and income; combined gross household income cannot exceed \$60,000.	Net worth is less than \$200,000 (excluding property on which you are	Allows a credit against the homeowner's 2008 property tax bill if property taxes exceed a fixed percentage of the person's gross income.
	For application, with further explanation, call 410-767-4433 (Balto. metro area) or 1-800-944-7403 (other areas) or see www.dat.state.md.us.	seeking credit and cash value of IRAs or qualified retirement savings plans).	No age restrictions.  Credit applicable only to dwelling which is your permanent residence.

	Monthly (or Annual)	Annual Asset	
Federal/State Program	Income Test	Test	Notes
			Homeowners age 70 and older, who have not applied for the program previously, should call 410 767-4433 or 1-800-944-7403.
2009 State of Maryland Renters' Tax Credit Program	Plan is based on relationship between rent and income.  For application, with further explanation, call 410-767-4433 (Balto. metro area) or 1-800-944-7403 (other areas) or see www.dat.state.md.us.	Net worth is less than \$200,000	Provides tax credit up to \$750 a year for renters who meet certain requirements on rent paid in calendar year 2008.  For persons age 60 and over, persons who are 100% disabled, or persons under age 60, not in subsidized housing, who have one or more dependents under age 18 in their home.
Weatherization Assistance Program			Apply no later than 9/1/09.  Operated by the Maryland Department of Housing and
(WAP)	\$1805	No test	Community Development, WAP enables low-income
Individual Couple	\$2428 (represents 200% of poverty level)	No test	households to reduce home energy consumption and maintenance costs through installation of energy- conserving materials.
			Examples of improvements: health and safety items, hot water system, lighting retrofit, insulation, furnace cleaning.
			Priority is given to low-income homeowners who are elderly, disabled, have families with children, and/or have the

	Monthly (or Annual)	Annual Asset	
Federal/State Program	<b>Income Test</b>	Test	Notes
			highest energy consumption. Eligible renters may also apply.  Apply through your local energy assistance office or through Maryland Energy Assistance Program. Call 1-800-352-1446 or 1-800-638-7781.

#### Appendix D

#### **Allegany County**

Angela Brailer

**HRDC** Cumberland Senior Center

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**HRDC** Frostburg Senior Center

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Appendix D

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Renee Deiaco

North Carroll Senior & Community Center

2328 Hanover Pike Hampstead, MD 21074

410-386-3900 410-374-1395 (Fax)

northcarrollsc@ccg.carr.org

Karen Larrimore

South Carroll Senior & Community Center

5928 Mineral Hill Road

Eldersburg, MD

410-386-3700

410-795-4186 (Fax)

southcarrollsc@ccg.carr.org

Paul Garver

Taneytown Senior & Community Center

220 Roberts Mill Road Taneytown, MD 21787

410-386-2700 410-751-0338 (Fax)

taneytownsc@ccg.carr.org

**Ruth Martin** 

Westminster Senior & Community Center

125 Stoner Avenue Westminster, MD 21157

410-386-3850

410-386-3841 (Fax)

westminstersc@ccg.carr.org

sheldonk@charlescounty.org robeyf@charlescounty.org

#### Appendix D

# **Cecil County**

Linda Tull Linda Tull

Elkton Center Perryville Senior Center

200 Chesapeake Blvd., Suite 1700 710 Broad Street Elkton, MD 21921 Perryville, MD 21903

410-996-5295 410-420-9483 (Fax)

ltull@ccgov.org

# **Charles County**

Kathy Cooke Ann Walter

Kathy Sheldon Waldorf Senior Center Florence Robey 3090 Crain Highway Richard R. Clark Senior Center Waldorf, MD 20604

1210 E. Charles Street 301-638-4420 LaPlata, MD 20646 301-638-1931 (Fax)

301-934-5423 walter@charlescounty.org

301-934-5425 (Fax) cookem@charlescounty.org

Joan Boggs Kathy Sheldon

Indian Head Community CenterNanjemoy Senior Center100 Cornwallis SquareSenior Center ProgramsIndian Head, MD 206404375 Port Tobacco Road

Indian Head, MD 20640 4375 Port Tobacco Road 301-743-2125 Nanjemoy, MD 20662 301-743-7422 (Fax) 301-246-9612

boggs@charlescounty.org 301-246-9031 (Fax)

sheldonk@charlescounty.org

# **Dorchester County**

Michael Foster Mary J. Thorpe
MAC Senior Center Hurlock Senior Center

2450 Cambridge Beltway 6210 Shiloh Church and Hurlock Road

Cambridge, MD 21613 Hurlock, MD 21643

410-221-1920 410-943-1106

410-221-1917 (Fax) 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 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

Susan Hofstra Urbana Senior Center 9020 Amelung Street Frederick, MD 21704 301-600-7020 301-600-7021 (Fax)

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

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

TTY – Dial 711 in MD or 1-800-201-7165 shofstra@fredco-md.net

# **Garrett County**

Suzanne Carley 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) scarley@garrettcac.org

Suzanne Carley Grantsville Senior Center 125 Durst Court Grantsville, MD 21536 301-895-5818 301-895-4237 (Fax) scarley@garrettcac.org

**Appendix D** 

Tiffany Weeks
Flowery Vale Health & Fitness Center for
Older Adults
204 South Street, P. O. Box 248
Accident, MD 21520
301-746-8050
301-334-8555 (Fax)
tyoder@garrettcac.org

#### **Harford County**

Margaret Kennedy Aberdeen Senior Activity Center

7 West Franklin Street Aberdeen, MD 21001 410-273-5666

410-273-3469 (Fax)

Andrea Pomilla

McFaul Activities Activity Center

525 West MacPhail Road Bel Air, MD 21014

410-638-4040

Terri Glenn

Havre de Grace Senior Activity Center

351 Lewis Lane

Havre de Grace, MD 21078

410-939-5121

410-939-5125 (Fax)

Chuck Burkhardt

Edgewood Senior Center 1000 Gateway Road Edgewood, MD 21040

410-612-1623

410-671-7855 (Fax)

Linda Reading

Highland Senior Activity Center

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

Joyce Trageser

Forest Hill/Hickory Satellite Senior Activity

Center

2213 Commerce Drive Forest Hill, MD 21050

410-638-3025 410-420-1371 (Fax)

#### **Howard County**

Linda Ethridge Bain Center

5470 Ruth Keeton Way Columbia, MD 21044

410-313-7213 Fax: 410-313-7465 baincenter@howardcountymd.gov lethridge@howardcountymd.gov

Jeanne Slater

Elkridge Senior Center 6540 Washington Blvd. Elkridge, MD 21075

410-313-5192 Fax: 410-313-4929 elkridgesc@howardcountymd.gov jslater@howardcountymd.gov

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Meridy McCague, Acting Director

East Columbia 50+ Center 6600 Cradlerock Way Columbia, MD 21045

410-313-7680 Fax: 410-313-7688 Eastcolumbia50+@howardcountymd.gov mmccague@howardcountymd.gov

Carla Buehler

Ellicott City Senior Center 9401 Frederick Road Ellicott City, MD 21042

410-313-1400 Fax: 410-313-1407 ecsc@howardcountymd.gov cbuehler@howardcountymd.gov

**Edith Bennett** 

Savage Senior Center 9525 Durness Lane Laurel, MD 20723

410-880-5915 Fax: 410-880-5918 savagesc@howardcountymd.gov ebennett@howardcountymd.gov

Regina Jenkins

Glenwood 50+ Center

2400 Route 97

Cooksville, MD 21723

410-313-5440 Fax: 410-313-4846 glenwoodsc@howardcountymd.gov rjenkins@howardcountymd.gov

#### **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 Lola Skolnik

Holiday Park Senior Center

3950 Ferrara Drive

8700 Piney Branch Road
Wheaton, MD 20906

Silver Spring, MD 20901

240-777-4999 301-431-5708 240-777-6975

carol.fuentevilla@montgomerycountymd.gov lola.skolnik@montgomerycountymd.gov

Tony Edghill Jill Hall

Damascus Senior Center
9701 Main Street
Damascus, MD 20874
Rockville Senior Center
1150 Carnation Drive
Rockville, MD 20850

270-777-6995 240-314-8800

 $anthony. edghill@montgomery countymd. gov \\ jhall@rockvillemd. gov$ 

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Silver Spring Senior Source 1400 Fenwick Lane Silver Spring MD 20910 301-754-3404

**Betty Timer** Margaret Schweinhaut Senior Center 1000 Forest Glen Road Silver Spring, MD 20901 301-681-1255 240-777-8085 betty.timer@montgomerycountymd.gov Grace Whipple Gaithersburg/Upcounty Senior Center 80-A Bureau Drive Gaithersburg, MD 20878 301-258-6380

# **Prince George's County**

Jean McConnell Berwyn Heights Senior Center 8603 57th Avenue Berwyn Heights, MD 20740

301-474-0018

Kathy White **Bowie Senior Center** 14900 Health Center Drive Bowie, MD 20716 301-809-2300 301-809-2321 (Fax) kwhite@cityofbowie.org

Regina Jackson Gwendolyn Britt Senior activity Center 4009 Wallace Street North Brentwood, MD 20722

301-699-1238

Regina.Jackson@pgparks.com

John Lee Camp Springs Senior Activity 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 khaseley@greenbeltmd.gov

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

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

Jareasch Brown Evelyn Cole Senior Activity Center 5702 Addison Road Seat Pleasant, MD 20743 301-386-5525

# **Queen Anne's County**

Linda Conley

Sudlersville Senior Center 605 Foxxtown Drive

Sudlersville, MD 21668

410-438-3159

410-778-5444

410-438-3016 (Fax)

lconley@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

Centreville Senior Center

104 Powell Street

Centreville, MD 21617

410-758-0848

410-758-4487 (Fax)

tbeville@qac.org

**Dawn Cornelius** 

Kent Island Senior Center

891 Love Point Road

Stevensville, MD 21666

410-604-3801

410-604-3810 (Fax)

dcornelius@qac.org

#### St. Mary's County

Kathy Mather

Garvey Senior Activity Center

41780 Baldridge Street, P.O. Box 653

Leonardtown, Maryland 20650

301-475-4200, ext. 1063

301-475-4503 (Fax)

katherine.mather@stmarysmd.com

Joyce Raum

Loffler Senior Activity Center 21905 Chancellors Run Road

Great Mills, MD 20634

301-737-5670, ext 1656

301-737-5683 (Fax)

joyce.raum@stmarysmd.com

Marie Noelle Lautieri

Northern Senior Activity Center

29655 Charlotte Hall Rd

Charlotte Hall, MD 20622

301-475-4002 X 1002

301-475-4034 fax

marienoelle.lautieri@stmarysmd.com

#### **Somerset County**

Connie Cox Jean Harrison

Crisfield MAC Senior Center
P.O. Box 705, 110 Lorrie Quinn Drive
Princess Anne Senior Center
11916 Somerset Avenue

Crisfield, MD 21817 Princess Anne, MD 21853 410-968-2065 410-651-3517

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#### **Talbot County**

Jessie Caldwell Talbot Senior Center 108 Maryland Avenue, Suite 102 Easton, MD 21601 410-822-2869 410-820-9563 (Fax)

#### **Washington County**

Kathy Fisher Senior Center (*temporary site*) at Girls Inc. 626 Washington Ave. Hagerstown, MD 21740 301 671-2368

#### **Wicomico County**

Ivy McKenize Tracy Melvin

Salisbury-Wicomico Senior Services Center
909 Progress Circle
Willards MAC Senior Center
Hearn and Canal Streets

Salisbury, MD 21804 Willards, MD 21874 410-742-8569 410-835-3475

# **Worcester County**

Carole Sweeney Carole Sweeney

Sylvia Dixon
Ocean City Senior Center
Berlin Senior Center
104 41<sup>st</sup> Street, P.O. Box 504

107 Williams Street Ocean City, MD 21842 Berlin, MD 21811 410-289-0824

410-641-0515 410-632-2613 (Snow Hill Fax)

410-641-0515 410-632-2613 (Snow Hill Fax) 410-632-2613 (Snow Hill Fax)

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Linda Parks
Nancy Kudla
Pocomoke Senior Center
400-B Walnut Street
P. O. Box 434
Pocomoke, MD 21851
410-957-0391
410-632-2613 (Snow Hill Fax)

Linda Parks 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 Appendix E

County/ Jurisdiction	Contact	Address	Telephone
Allegany	Vacant	Human Resources Development Commission, Inc. Area Agency on Aging 19 Frederick Street Cumberland, Maryland 21502	301-777-5970 ext.110 TTY: 1-800-735-2258 FAX: 301-722-0937
Anne Arundel	Sandy Berkeley	Anne Arundel Co. Dept. of Aging 2666 Riva Road Annapolis, Maryland 21401	410-222-44257 1-800-492-2499 TTY: 410-222-4464 FAX: 410-222-4346 sberkeley@yahoo.com
<b>Baltimore City</b>	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	Betty Evans	Baltimore County Dept. of Aging 611 Central Avenue Towson, Maryland 21204	410-887-2594 TTY: 410-887-4202 FAX: 410-887-2015 bevans@baltimorecountymd.gov
Calvert	Tunya Taylor	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
Caroline	Irene Garrettson	Upper Shore Aging, Inc. Caroline Senior Center 403 S. 7 <sup>th</sup> Street, Suite 127 Denton, Maryland 21629	410-479-2093 410-479-2535 FAX: 410-479-1879 irenegar@intercom.net
Carroll	Debbie Frame	Carroll County Bureau on Aging 125 Stoner Avenue Westminster, Maryland 21157	410-386-3800 410-386-3850 (Mt. Airy) 410-848-4049 (Westminster) TTY: 410-848-3555 FAX: 410-840-0436 dframe@ccg.carr.org
Cecil	Mary Kahoe	Cecil County Department of Aging 200 Chesapeake Blvd., Suite 1700 Elkton, Maryland 21921	410-996-5295 FAX: 410-620-9483 mkahoe@ccgov.org
Charles	Theresa Mason	Charles County Area Agency on Aging Department of Community Services 8190 Port Tobacco Road Port Tobacco, Maryland 20677	301-934-9305, x5118 301-870-3388 TTY: 1-800-735-2258 FAX: 301-934-5624 masont@charlescounty.org
Dorchester	Mary Handley	Senior Information & Assistance Delmarva Community Services, Inc. P. O. Box 637 Cambridge, Maryland 21613	410-221-1930 FAX: 410-221-1917 maryh@dcsdct.org

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County/ Jurisdiction	Contact	Address	Telephone
Frederick	Eleanor Jenkins	Senior Information & Assistance Frederick Co. Department of Aging 1440 Taney Avenue Frederick, Maryland 21702	301-600-1604 TTY – 301-694-1672 FAX: 301-631-3554 ejenkins@fredco-md.net
Garrett	Lynda Weeks	Senior Information & Assistance Mary Browning Senior Center 104 E. Centre Street Oakland, Maryland 21550	301-334-9431 (Oakland) 301-746-8824 (Accident) FAX: 301-334-8555 lweeks@garrettcac.org
Harford	Mark Carroll	Senior Information & Assistance Harford Co. Area Agency on Aging Bel Air Senior Center 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@harfordcountymd.gov
Howard	Pam Bilal	Senior Information & Assistance Howard Co. Area Agency on Aging 6751 Columbia Gateway Dr., 2 <sup>nd</sup> Fl. Columbia, Maryland 21046	410-313-5980, 1-800-506-5806 FAX: 410-313-5970 pbilal@co.ho.md.us
Kent	Stephanie Lindsey	Senior Information & Assistance Upper Shore Aging, Inc. Kent Senior Center 118 North Cross Street Chestertown, Maryland 21620	410-778-2564 FAX: 410-758-9994 slindsey@intercom.net
Montgomery	Jennifer Long	Senior Information & Assistance Montgomery County Division of Aging and Disability Services 401 Hungerford Drive, 3 <sup>rd</sup> Floor Rockville, Maryland 20850	240-777-3000 TTY: 240-777-4575 FAX: 240-777-1495 jennifer.long@ montgomerycountymd.gov
Prince George's	Deborah McBroom	Senior Information & Assistance Prince George's County Area Agency on Aging 6420 Allentown Road Camp Springs, Maryland 20748	301-265-8450 TTY: 301-277-0076 FAX: 301-248-5358
Queen Anne's	Joyce Groh	Senior Information & Assistance Queen Anne's County Area Agency on Aging 104 Powell Street Centreville, Maryland 21617	410-758-0848 TTY: 410-758-2126 FAX: 410-758-4489 cwillis@qac.org
St. Mary's	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. 1050 FAX: 301-475-4503 debbie.barker@co.saint- marys.md.us

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County/ Jurisdiction	Contact	Address	Telephone
Somerset	Sheree	Senior Information & Assistance	410-651-0020
	Marshall	Commission on Aging-MAC, Inc.	FAX: 410-651-3350
		11916 North Somerset Avenue	
		Princess Anne, Maryland 21853	
Talbot	Peggy	Senior Information & Assistance	410-822-2869
	Vance	Talbot County Senior Center	FAX: 410-820-9563
		400 Brooklets Avenue	Tsc2@goeaston.net
		Easton, Maryland 21601	
Washington	Elizabeth	Senior Information & Assistance	301-790-0275, x211
	Church	Washington County Commission on	TTY: 1-800-735-2258
		Aging, Inc	FAX: 301-739-4957
		140 W. Franklin St., 4 <sup>th</sup> Floor	lchurch@wccoaging.org
		Hagerstown, Maryland 21740	
Wicomico	Teri	Senior Information & Assistance	410-543-0388
	Davidson	Pine Bluff – MAC, Inc.	FAX: 410-742-0525
		1504 Riverside Drive	tld@macinc.org
		Salisbury, Maryland 21801	
Worcester	Debbie	Senior Information & Assistance	410-632-1289
	Ritter	Worcester Co. Commission on Aging	FAX: 410-632-2613
		Snow Hill Road	dritter@intercom.net
		P.O. Box 159	
		Snow Hill, Maryland 21863	



301 W. Preston St., Suite 1007 Baltimore MD 21201 410-767-1100 410-339-7943 (fax) www.mdoa.state.md.us.