

BUDGET PRESENTATION FISCAL YEAR 2012 ANNUAL REPORT 2010



DEPARTMENT OF AGING



MARTIN O'MALLEY
GOVERNOR

ANTHONY 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 2010 and represents our budget presentation for Fiscal Year 2012.

The aging of Maryland's population presents many challenges. The national economic downturn continues to have a significant impact on Maryland's older adult population. Many older workers find themselves downsized out of jobs long before they are ready to retire. We continue to see increases in the number of requests for services. Even though these are tough times, we remain committed to finding new and innovative ways to ensure that our seniors are able to stay healthy, remain in their homes and are actively engaged in their communities. This is not only good for seniors, it is also good for Maryland taxpayers.



Our older adult population is growing in size as well as living longer. They are increasingly diverse and by 2030, racial and ethnic minorities will account for more than 40 percent of the U.S population. This year we will witness the first of the baby boomers turn 65. This "new longevity" as some refer to it, is impacting everything from housing to health care and everything in between. Our long term care landscape is undergoing major changes in the wake of landmark legislation and court decisions that continue to underscore the rights of individuals with disabilities to live in the least restrictive settings.

By aggressively pursuing grant-funded opportunities, we are developing new initiatives to help older persons navigate their health and long term support options, manage chronic diseases, and engage in meaningful community life. Expansion of the Aging and Disability Resource Center (ADRC) Program, known as Maryland Access Point (MAP), is revolutionizing the way older adults and persons with disabilities access information and services. A major milestone was the successful launch of the MAP website in December 2010. For our most vulnerable seniors in long-term care settings, we have undertaken a significant retooling of our Long Term Care Ombudsman Program, a vital program that protects residents of nursing homes and assisted living facilities throughout the State. We also participated in the first of what we hope will be many groundbreaking ceremonies for the Green House model and other examples of "culture change" that are beginning to redefine facility-based long term care with a new emphasis on the resident.

The Maryland Department of Aging envisions Maryland as a place where all citizens can age with choice, dignity, opportunity and independence. MDoA, in partnership with the 19 Area Agencies on Aging, provides 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,

A handwritten signature in black ink that reads "Gloria Lawlah". The signature is fluid and cursive, with the first name being more prominent.

Gloria Lawlah
Secretary

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MARYLAND DEPARTMENT OF AGING

ORGANIZATION

- **History**
- **Statutory Base**
- **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. |

The organizational chart for the Department of Aging is structured as follows:

- Secretary**
 - Principal Counsel**
 - Commission on Aging
 - Financial Review Board
 - Interagency Committees on Aging Services
 - Nursing Home Oversight Committee
 - AG VI**
 - Admin Aide**
 - Deputy of Operations** (Prgm Mgr IV)
 - Budget & Fiscal Services** (Adm Prgm Mgr II)
 - Mgmt Assoc
 - Internal Auditor Officer
 - Accountant Advanced
 - Fiscal Act Tech II
 - Admin Spec. II
 - Accountant Trainee Contract
 - Admin Officer II (70%) Medical Waiver Billing
 - Admin Spec II
 - Admin Spec I Contract
 - Information Technology** (Comp Network Spec Mgr)
 - Database Spec II
 - Comp Network Spec I
 - Telecommunications (30%)
 - Admin Spec II
 - Admin Spec I
 - Human Resources** (Personnel Admin III)
 - Personnel Officer I EEO (20%)
 - Senior Employment HSS V
 - Admin Spec II
 - Office Secretary III
 - Admin Spec I
 - Contract Admin Spec I
 - Contract Admin Spec I
 - Contract Admin Spec I
 - Contract Admin Spec I
 - Long Term Supports & Services** (Prgm Mgr II)
 - Office Secretary II (50%)
 - Contract MFP/Waiver
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 - Contract MFP/Waiver
 - Continuing Care** (Prgm Mgr II)
 - Accountant Advanced
 - Fiscal Acts Tech II
 - HSS V, Aging
 - Client & Community Services** (Prgm Mgr II)
 - Mgmt Assoc (50%)
 - HSS V, Aging
 - HSS IV, Aging
 - HSS IV, Aging
 - HSS IV, Aging (70%)
 - MIPPA Specialist Contract
 - HSS III, Aging
 - Nutritionist III
 - EBHP Coord Contract
 - Deputy Secretary**
 - HSS IV, Aging
 - Exec Assoc II
 - Office Clerk II
 - Admin Officer II
 - Admin Officer II
 - Contract Admin Spec II
 - Administrator II**
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BUDGET PRESENTATION FISCAL YEAR 2012 ANNUAL REPORT 2010

MARYLAND DEPARTMENT OF AGING

DEMOGRAPHICS

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- **Maryland's 2000 Population in Rural Status 60+**

DEMOGRAPHICS

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 between the ages of 80-84 are the fastest growing segment of the population.** This cohort will grow in number, statewide, from 96,799 in 2005 to 219,255 by the year 2040.
- **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 25.8% 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 2005, 66% of Maryland's seniors resided in Baltimore City and Anne Arundel, Baltimore, Montgomery and Prince George's counties. In 2040, the top jurisdictions with the fastest rate of growth for individuals over 60 are Calvert, Charles, Frederick and St. Mary's counties. Each are projected to increase their 60+ populations by over 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 December 2010.

DEMOGRAPHICS

Maryland's 60+ Population Projections by Jurisdiction, 2005-2040

Jurisdiction	2005	2010	2020	2030	2040	% Change 2005-2040
Allegany Co.	17,127	17,725	20,392	21,720	21,774	27.13%
Anne Arundel Co.	78,088	92,695	120,290	142,972	139,412	78.53%
Baltimore City	110,745	121,232	146,503	152,262	149,843	35.30%
Baltimore Co.	145,828	161,345	208,053	230,842	223,222	53.07%
Calvert Co.	11,537	14,455	22,970	30,403	28,773	149.40%
Caroline Co.	5,706	6,628	9,025	11,166	11,663	104.40%
Carroll Co.	25,567	31,032	44,254	56,109	54,649	113.75%
Cecil Co.	14,280	17,150	24,898	31,729	34,518	141.72%
Charles Co.	16,941	20,480	30,992	44,884	46,018	171.64%
Dorchester Co.	7,526	8,512	11,351	13,012	12,582	67.18%
Frederick Co.	30,036	37,266	57,624	75,622	75,113	150.08%
Garrett Co.	6,507	7,322	9,792	11,321	11,376	74.83%
Harford Co.	36,216	44,204	62,117	75,572	74,284	105.11%
Howard Co.	34,170	44,750	65,120	82,140	81,599	138.80%
Kent Co.	5,262	6,060	8,160	9,739	10,129	92.49%
Montgomery Co.	150,223	183,429	258,367	315,888	313,812	108.90%
Prince George's Co.	109,960	137,473	192,853	233,444	231,367	110.41%
Queen Anne's Co.	8,504	10,339	14,907	18,842	18,519	117.77%
St. Mary's Co.	13,713	17,228	27,929	38,956	39,518	188.18%
Somerset Co.	4,852	5,415	6,933	7,452	7,382	52.14%
Talbot Co.	9,986	11,353	14,775	17,152	16,467	64.90%
Washington Co.	25,863	28,590	38,275	45,719	47,113	82.16%
Wicomico Co.	15,517	17,630	23,210	26,255	27,549	77.54%
Worcester Co.	14,203	15,940	21,001	24,730	24,732	74.13%
State of Maryland	898,357	1,058,253	1,439,791	1,717,931	1,701,414	89.39%

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

DEMOGRAPHICS

Maryland's 60+ Population Projections by Age & Gender, 2005-2040

Year	Age	Male	Female	Total	% of Total State Population
2005	60-64	119,579	132,933	252,512	4.5%
	65-69	86,335	98,756	185,091	3.3%
	70-74	65,749	81,331	147,080	2.6%
	75-79	52,880	74,310	127,190	2.3%
	80-84	36,306	60,493	96,799	1.7%
	85+	28,398	61,287	89,685	1.6%
	Total	389,247	509,110	898,357	16.0%
2010	60-64	150,082	172,511	322,593	5.6%
	65-69	108,966	125,729	234,695	4.1%
	70-74	75,466	90,022	165,488	2.9%
	75-79	52,822	70,214	123,036	2.1%
	80-84	37,375	57,517	94,892	1.6%
	85+	39,196	78,353	117,549	2.3%
	Total	463,907	594,346	1,058,253	18.6%
2020	60-64	187,922	215,781	403,703	6.4%
	65-69	152,743	183,330	336,073	5.3%
	70-74	121,301	149,860	271,161	4.3%
	75-79	78,678	100,205	178,883	2.8%
	80-84	45,006	62,240	107,246	1.7%
	85+	52,193	90,532	142,725	2.3%
	Total	637,843	801,948	1,439,791	22.8%
2030	60-64	173,189	200,988	374,177	5.6%
	65-69	182,469	212,609	395,078	6.0%
	70-74	152,171	185,634	337,805	5.1%
	75-79	110,514	145,490	256,004	3.8%
	80-84	72,975	103,541	176,516	2.6%
	85+	68,931	109,420	178,351	2.7%
	Total	760,249	957,682	1,717,931	25.8%
2040	60-64	142,441	163,919	306,360	4.4%
	65-69	142,459	169,574	312,033	4.5%
	70-74	140,190	172,718	312,908	4.5%
	75-79	132,015	167,961	299,976	4.3%
	80-84	91,673	127,582	219,255	3.2%
	85+	97,044	153,838	250,882	3.6%
	Total	745,822	955,592	1,701,414	24.5%

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

DEMOGRAPHICS

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
<i>Anne Arundel Co.</i>	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.

DEMOGRAPHICS

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.

DEMOGRAPHICS

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

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

DEMOGRAPHICS

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

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MARYLAND DEPARTMENT OF AGING

ACCOMPLISHMENTS

- **Aging and Disability Resource Center /
Maryland Access Point**
- **Alzheimer's Disease Report to the General Assembly**
- **ARRA**
- **Continuing Care Retirement Communities**
- **Grandparents Resource Guide**
- **Maryland Phone-A-Thon**
- **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**
- **Ombudsman Program Improvements**
- **Senior Centers**
- **Senior Community Service Employment Program**
- **Senior Farmers' Market Nutrition Program**
- **Senior Information and Assistance Program**
- **Special Events**

ACCOMPLISHMENTS

Aging and Disability Resource Center/Maryland Access Point

The Aging and Disability Resource Center (ADRC) Program is one of the major initiatives of the Department to reform long term care and 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 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 manage their care through the development of a network of MAP sites at the local level. At this time, there are ten local MAP sites covering twelve counties and over 80% of the State's population. Six of the sites are also piloting a person-centered hospital discharge planning process

On December 1, 2010, the Maryland Access Point website was launched.

www.marylandaccesspoint.info. The web site provides information on long term supports and services, service providers, advocacy assistance, and directs consumers and users to their local MAP partners for aging and disability services and information.

In 2010, the Maryland Department of Aging received three new U. S. Administration on Aging ADRC/MAP federal grants totaling \$1.3 million dollars under the Affordable Care Act. The grants are to: (1) develop statewide options counseling standards for MAP sites for individuals seeking information and assistance with long term supports and services; (2) implement a collaborative program between the Baltimore City MAP and the Johns Hopkins Physicians Practice to expand the nationally recognized Guided Care Program; and (3) to expand the Medicare Improvements for Patients and Providers Act (MIPPA) program through local MAP sites,

Alzheimer's Disease Report to the General Assembly

The Senate Budget and Taxation Committee and the House Appropriations Committee charged the Department of Health and Mental Hygiene and the Department of Aging to establish a workgroup to:

- Examine the extent of Alzheimer's Disease and Related Disorders (ADRD) in Maryland;
- Identify best practices in the treatment of ADRD;
- Assess existing service and resource capacity issues for individuals with ADRD; and
- Make recommendations to address any issues identified by the workgroup as a result of its assessment of current service and resource capacity for individuals with ADRD.

The report of the Workgroup was completed and forwarded to the Joint Chairmen in December 2010.

ARRA

ARRA Grant: More than 17,000 additional individuals received meals through the Congregate Nutrition and Home Delivered Meals Services Programs with funding made available under the American Recovery and Reinvestment Act. The funds enabled local offices on aging to end waiting lists for home-delivered meals as well as purchase shelf-stable emergency meals that were distributed in the days preceding the 2010 blizzards that disrupted normal meal delivery. Funds were also used to open new congregate meal sites and hire staff for meal programs. These grants provided support to the senior population as well as the many businesses around the State that provide food services to them. A video showing the benefits of these funds was produced by Maryland Public Television and may be viewed at <http://www.youtube.com/watch?v=K3iP9CynjpA>

ACCOMPLISHMENTS

Continuing Care Retirement Communities

In 2009, 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 (CCRC) industry and to make recommendations for changes to the existing statutes which would improve and sustain an optimal regulatory environment for CCRCs and their residents. The CCAC members included various continuing care stakeholder groups: providers, residents, financial experts, attorneys, and consumer advocates. After a year of deliberations, a final report was delivered to the Secretary in November of 2010.

Grandparent Resource Guide

The *Resource Guide for Grandparents and Other Relatives Raising Children* was updated and reprinted in 2010. It is designed to help informal caregivers, as well as relatives of children in the “formal system” (children who have come to the attention of the child welfare system) learn what services could benefit their families and how to find services. Professionals and others who help “grandfamilies” navigate the complex public service delivery system will also find the guide useful. A copy of the guide is available on the MDoA website through the following link:

<http://www.mdoa.state.md.us/Publications/REVISED%20grandparents%20guide%202009%20ONLINE.pdf>

Maryland Medicare Part D Phone-A-Thon

On December 9 and December 21, 2010, the Maryland Department of Aging’s Senior Health Insurance Assistance Program (Maryland SHIP) sponsored two live Phone-A-Thons 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 in television spots the week prior on Baltimore’s WJZ, urging viewers to tune in. On December 21st, Congresswoman Donna Edwards, Secretary Lawlah and the directors of Departments of Aging in Virginia and Washington DC were featured in the Washington DC region on WUSA Channel 9 with J.C. Hayward. This was the first year that the Phone-A-Thons were conducted in both of the state’s two largest television markets. Over 2,200 calls were taken by the 26 phone bank volunteers.

The Annual Enrollment Period (November 15th to December 31st) 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 additional coverage during the Part D coverage gap or “donut hole.”

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

The MDoA Senior Health Insurance Assistance Program is responsible for explaining and promoting the new Medicare benefits that will be available in 2011 due to the implementation of the federal Affordable Care Act (health reform). These benefits include the elimination of deductibles and co-payments for most of Medicare’s preventive health benefits, and 50% discounts for brand name drugs and 7% discounts for generic drugs for individuals who fall into the Part D “donut hole.” Maryland SHIP also worked closely with Maryland SPDAP to ensure that eligible Medicare beneficiaries understand the new SPDAP benefits for 2011, and select and enroll in plans that are appropriate to their needs. Through joint training activities, co-sponsored educational and enrollment events, and

ACCOMPLISHMENTS

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 2010, the waiver served over 3,571 individuals. The growth in enrollment figures is due in large part to MDoA’s participation in the Money Follows the Person Demonstration project. The program conducted fifteen regional and statewide training sessions for providers and case managers improving their ability to support participants in the program and has also posted a directory of waiver enrolled providers on the MDoA website, making it easier for participants to identify and select their own waiver services providers.

Money Follows the Person

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 of January 2011, 312 nursing home residents have transitioned to the Waiver for Older Adults under this initiative. A 2010 Memorandum of Understanding between the Maryland Department of Health and Mental Hygiene and the Maryland Department of Aging provides \$3 million to fund activities in support of the Money Follows the Person Demonstration through December 2011. This funding is allocated to the Department to support the MFP program through local Area Agencies on Aging and to expand the MAP program and website.

Nursing Home Diversion Initiative/Community Living Program

The Nursing Home Diversion/Community Living Program known as the Community Living Program is a U.S. Administration on Aging grant. This program supports the development of 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. It has enabled the Department to work with the federal Veterans Administration to plan for a Veteran Directed Home and Community-Based Services Program that provides a flexible benefit. Both programs require the services of a Fiscal Intermediary to process payments to providers on behalf of participants. A contract was awarded in 2010 to a Fiscal Intermediary. Both programs will be implemented in early 2011.

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 the passage of 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, and establishing a Steering Committee, Ombudsman

ACCOMPLISHMENTS

Coordination Team and workgroups to provide guidance on program operations. A new funding formula was implemented allocating 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. A Strategic Plan has been developed focusing on strengthening the Ombudsman Program infrastructure in 2011 and promoting volunteer involvement in 2012 to more effectively and efficiently serve the 47,000 people living in long term care facilities.

Senior Centers

Through the Senior Citizens Activities Centers Capital Improvement Grants Program, the Baltimore County Department of Aging received a State grant in the amount of \$500,000 (\$250,000 in FY 2009 & FY 2010) for the construction of the new Arbutus Senior Center. The facility has 8,000 square feet of dedicated senior center space, and is attached to a newly constructed 25,000 square foot Baltimore County library. The Arbutus senior center will provide a fully functional, multi-service senior center in the Arbutus area where no senior center existed. The facility also provides a commercial kitchen for the Eating Together Program and will serve as the gateway for senior citizens, caregivers, and community leaders to obtain services and resources for older adults closer to their homes.

Senior Community Service Employment Program

Thanks to the American Recovery and Reinvestment Act (ARRA) Grant, in FY 2010 the Senior Community Service Employment Program was able to serve an additional 76 low-income older adults, bringing the total number of participants who received training at local non-profit community and government agencies to 270. The training they receive helps participants to enhance their skills and gain the experience they need to help them find jobs and improve their quality of life.

Senior Farmers' Market Nutrition Program

The Senior Farmers' Market Nutrition Program (SFMNP) is a program funded by the United States Department of Agriculture, Food and Nutrition Service and overseen by the Maryland Department of Agriculture. MDoA is responsible for direct administration of this program to seniors.

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) Develop 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 two books of five \$3.00 SFMNP checks (total benefit level is \$30) to purchase locally grown produce from authorized farmers at approved farmers' markets.

ACCOMPLISHMENTS

Sixteen thousand low-income seniors across the state benefitted from this program in 2010, for a total distribution of over \$240,000 in farmers market checks.

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 2010, the I&A program provided one-on-one assistance to over 54,000 seniors.

Special Events

Centenarian's Luncheon

In May 2010, the Maryland Department of Aging co-sponsored and participated in the 18th Annual Maryland Centenarian's luncheon in conjunction with the Maryland Centenarians Committee. Celebrating its 18th year, this year's luncheon recognized 103 centenarians from around the state with an overall attendance of 545 people. The event was held at Martin's West, with co-sponsors including the Social Security Administration, Baltimore City Commission on Aging and Retirement Education (CARE), the Beacon, and the Community College of Baltimore County-Catonsville. Maryland has more than 1,500 centenarians residing in the State.

Annual Governor's Leadership in Aging Awards

Also in May, MDoA hosted the 3rd 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 distinguished service award was presented to AARP Maryland for outstanding leadership on behalf of Maryland seniors.

Summit on Civic Engagement of Older Adults

On September 16, 2010, the Maryland Department of Aging hosted the Governor's Summit on Civic Engagement at the University of Maryland, Baltimore SMC Campus Center. The event featured a keynote address by Marc Freedman, founder and CEO of Civic Ventures, renowned for leading the call to engage millions of baby boomers in encore careers that combine personal meaning, financial security and social contribution. The goal of the summit was to develop strategies to promote community service among older Marylanders. State and local leaders from throughout the aging network, non-profits, foundations, education administrators, and retiree, volunteer, labor, and faith-based organizations came together to hear about models for engaging older persons in community service, including a presentation from the national director of the Experience Corps Program.

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MARYLAND DEPARTMENT OF AGING

GRANTS

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

GRANTS

Affordable Care Act

Maryland Department of Aging received more than \$1.3 million in grants to help seniors and individuals with disabilities and caregivers better understand and navigate their health and long term care options.

The grants are made possible by the *Affordable Care Act*, signed into law by President Obama on March 23, 2010. Maryland's grant awards complement the President's highly successful *Community Living Initiative* which focuses on better servicing those individuals with disabilities who need ongoing services and support programs in the community. The Maryland Department of Aging, in partnership with local offices on aging, will administer the funds that will reach communities across the state through three key programs designed to support choice, independence and dignity:

- **Medicare Outreach and Assistance in Low Income Programs and Prevention** will provide outreach and assistance to Medicare beneficiaries on their benefits, including client education and enrollment in the Qualified Medicare Beneficiary Program, Specified Low-Income Medicare Beneficiary Program, Part D Low- Income Subsidy Program; coverage for preventive services; and additional federal assistance for individuals who fall into the Medicare Part D "donut hole."
Funding Source: U.S. Administration on Aging
Project Period: September 30, 2010 – September 30, 2012
Amount: \$595,551
- **ADRC Options Counseling** will strengthen Aging and Disability Resource Centers (ADRCs), known in Maryland as Maryland Access Point, by building their capacity to provide options counseling to individuals seeking information and assistance on long term supports and services. Options counseling programs help people understand, evaluate, and manage the full range of long term services and supports available in their community. Under this grant, Howard County will work to develop and test standards and to develop a method for incorporating these standards in all long term supports and services programs and among all MAP partners including the Money Follows the Person Demonstration.
Funding Source: U.S. Administration on Aging
Project Period: September 30, 2010 – September 30, 2012
Amount: \$500,000
- **Evidence Based Care Transition** will help older persons or persons with disabilities remain in their own homes after a hospital, rehabilitation or skilled nursing facility stay, breaking the cycle of readmission to the hospital that occurs when an individual is discharged into the community without the social services and supports they need. This program supports frail adults in the community by providing a Guided Care Nurse that works with the individual upon hospital discharge to assist the individual to remain stable in the community. The program has demonstrated savings as a result of reductions in readmission, emergency admissions and other acute episodes. The program is a collaboration between MDoA, the Baltimore City MAP and the Johns Hopkins Community Physicians Practice.
Funding Source: U.S. Administration on Aging
Project Period: September 30, 2010 – September 30, 2012
Amount: \$197,660

GRANTS

American Recovery & Reinvestment (ARRA) Congregate and Home Delivered Nutrition Services

The American Recovery and Reinvestment Act of 2009 (ARRA) contained key investments that helped older Americans maintain their health and independence. The legislation included \$100 million nationwide for meals and nutrition services under the Older Americans Act (OAA).

These funds assisted communities and the aging services networks that have been hard hit by rising food costs and reductions in local funding. Demand for services has increased as a result of the economic downturn and the continuously growing number of needy older adults. The funds provided meals to seniors in need of food, restored nutrition services that have been cut, and created or restored jobs that had been eliminated or reduced.

	Congregate Meals	Home Delivered Meals
Number of seniors served with grant funds in 2010:	14,054	3,305
Number of meals served with grant funds in 2010:	49,282	31,475
Funding Source: U.S Administration on Aging		
Project Period: March 2009 through September 30, 2010		
Amount: \$1,054,986 for congregate nutrition services, \$519,378 for home-delivered nutrition services		

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 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. The grant funding has allowed the development of two new MAP sites in Montgomery and St. Mary's Counties and it has provided additional funding support to two other MAP sites.

Funding Source: U.S. Administration on Aging

Project Period: October 1, 2009 – September 30, 2012

Amount: \$749,316

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.

GRANTS

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 2009, \$176,612 in 2010, and \$139,372 in 2011)

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: U.S. Administration on Aging (AoA) and Centers for Medicare and Medicaid Services

Project Period: June 1, 2009-May 31, 2011

Amount: AoA \$119,341, CMS \$132,159

GRANTS

Money Follows the Person Demonstration Project

Medicaid Waiver for Older Adults/Money Follows the Person: Under an agreement with DHMH, the Maryland Department of Aging has played a significant leadership role in implementing the federal "Money Follows the Person" initiative, coordinating efforts of local offices on aging to provide education and application assistance to nursing home residents throughout the State and transitional case management services to facilitate their return to community living. Since 2008, 766 persons have transitioned from institutional facilities into community-based long term supports and services, including 300 who have enrolled in the Medicaid Waiver for Older Adults.

Funding Source: Maryland Department of Health and Mental Hygiene

Project Period: July 1, 2010 – December 30, 2012.

Amount: \$3,000,000

Nursing Home Diversion Grant/Community Living Initiative/Veteran Directed Home and Community Based Service Program

The Nursing Home Diversion/Community Living Program grant was initially a three-year initiative funded by the U. S. Administration on Aging; however, the grant has received an extension through December 2011. 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. The program also has made it possible to develop a Veteran Directed Home and Community Based Services Program which will provide a flexible benefit to veterans who have disabilities and are living in the community. In 2010, a Fiscal Intermediary was retained to provide personnel payroll and vendor purchases by individuals participating in the Community Living and Veterans Programs.

Funding Source: Administration on Aging (AoA)

Project Period: September 30 2007 – December 31, 2011.

Amount: \$500,000

Person Centered Hospital Discharge Grant

In June 2009, the Centers for Medicare and Medicaid Services awarded the 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 added in the Area Agencies on Aging serving Carroll, Wicomico, 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. The program is operational in two counties and will be implemented in another four counties in 2011.

Funding Source: Centers for Medicare and Medicaid Services

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

Amount: \$1,100,000

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

GRANTS

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: \$1,567,038

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, 2009-March 31, 2010 Renewed Annually

Amount: \$666,003

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 were involved in SMP activities in 2010. Activities included public speaking engagements and instructing Medicare beneficiaries in monitoring health care expenditures and identifying potential discrepancies.

GRANTS

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 an 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: U.S. Administration on Aging (AoA)

Project Period: July 1, 2008-June 30, 2009
July 1, 2009-June 30, 2010

Amount: \$300,000 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 concluded June 30, 2010.

Funding Source: Administration on Aging (AoA)

Project Period: October 1, 2008 - September 30, 2010.

Amount: \$100,000

BUDGET PRESENTATION FISCAL YEAR 2012 ANNUAL REPORT 2010

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.

Many seniors who participate in our "Living Well," Chronic Disease Self Management Program have made positive comments regarding their improved health, fitness, diet, and accomplishments from goal setting. One senior hugged a program leader and exclaimed quietly "this program has changed my life; I would have never imagined that I would have been able to do what I'm doing now." Others seniors have completed workshops and requested to take it again while others say they do not want to lose touch with other participants thereby creating a phone list of all program participants.

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.

Eligibility 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 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Health Screening Sessions	43,507	42,500	43,000
Health Education Sessions	18,461	20,000	22,500
Physical Fitness & Exercise Sessions	184,378	185,500	187,00
Health Services	17,910	16,500	16,000
Number of Participants	55,456	56,250	57,500

Program Funding	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	361,152	361,152	361,152
State	73,064	73,064	73,064
Local Contributions/Program Income	257,341	257,341	257,341
Total	647,348	647,348	647,348

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.

Baltimore County received a State grant in the amount of \$500,000 (\$250,000 in FY 2009 and FY 2010) from the Senior Citizens Activities Centers Capital Improvement Grants Program for the new construction of the Arbutus Senior Center located in an area of Baltimore County where no senior center existed. The new fully functional multi-service senior center facility will have 8,000 square feet, of dedicated senior center space and will be attached to a 25,000 square foot library. This Center will also include a commercial kitchen for the Eating Together Program.

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-for-dollar 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	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Capital Improvement Program			
Total Senior Centers	118	118	118
New Construction	5	1	2
Renovation	1	1	1
Operating Fund Program	1,868	1,868	1,868
Seniors Benefiting from Operating Funds			

Capital Funds	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
State	1,683,000	500,000	500,000
Local	6,658,225	7,600,000	7,600,736
Total	8,341,225	8,100,736	8,100,736
Operating Funds			
State	450,000	500,000	500,000
Local	981,224	981,224	981,224
Total	1,431,224	1,481,224	1,481,224

CONTACT PERSON:

Cassandra Brown, Program Manager, 410-767-1278, acb@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/hr.) for 20 hours of training per week, paid through 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.

Cathy began her training through the SCSEP program in late August 2009. Because she had past experience in dance and exercise (she was a professional dancer and choreographer for 35 years and taught dance both in the United States and Europe), she was placed with Flowery Vale Health and Fitness Center in Accident, MD. At Flowery Vale she helped the center manager with center operations, client intakes, and taught exercise classes to center clients who were 55 or older. After almost a year, she was offered a part time position teaching exercise classes for several senior centers in Allegany County. Shortly thereafter, she applied for and was offered a second part-time position in a federally-funded program through the Garrett County Area Agency on Aging that was designed to help people of all ages learn effective techniques to self-manage their physical symptoms and get more out of life. Cathy credits her SCSEP experience with giving her the connections and experience she needed to significantly increase her income and her quality of life.

Program Eligibility Criteria: 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.

Eligibility	Annual Income Test	Annual Asset Test	Notes:
Individual	\$13,538		
Couple	\$18,213	N/A	For families with more than 8 persons, add \$3,740 for each additional person.

Program Data:	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Number of Training Positions	197	170	170
Number of Participants Trained	270	225	225
Program Funding:	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Federal	1,567,038	1,647,028	1,647,028
State	118,009	55,603	55,603
Total	1,685,047	1,702,631	1,702,631

CONTACT PERSON:

Sandra Cobb, Interim Program Manager, 410-767-1084, scobb@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 approximately 260 meal sites. 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.

Mrs. C enjoys eating the Korean meals served once a week at her local senior center. She also comes on the other days of the week, for the regular meal, but this is her favorite day to go to the senior center. The meal site is lively with conversation and music; today, there will even be some Korean dancers performing!

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	Monthly Income Test	Annual Asset Test	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 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Number of Meals	1,529,285	1,528,000	1,526,500
Number of People Receiving Meals	34,906	34,300	33,900
Number of Volunteers	1,782	1,775	1,770
Waiting List: There are 14130 elders who would benefit from an additional meal.			

Program Funding	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	7,953,005	6,968,930	6,968,930
State	1,109,475	1,109,475	1,109,475
Local Contributions	2,359,096	2,359,096	2,359,096
Total	11,421,576	10,437,501	10,437,501

CONTACT PERSON:

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

BUDGET PRESENTATION FISCAL YEAR 2012 ANNUAL REPORT 2010

MARYLAND DEPARTMENT OF AGING

LONG TERM SUPPORTS and SERVICES

- **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 Nutrition-Home-Delivered Meals**

LONG TERM SUPPORTS and SERVICES

Congregate Housing Services Program (CHSP)

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

After three years in a skilled nursing home, Mrs. R., age 70, moved into Glen Square Apartments, an independent living facility with CHSP services in Anne Arundel County. Mrs. R. has diabetes with a history of partial amputations of both feet, chronic wounds, Chronic Obstructive Pulmonary Disease (COPD), is obese and has a colostomy. She arrived with no support services in place, no furniture, and no income. Once admitted to CHSP, she began receiving two meals per day, weekly assistance with housekeeping/laundry, and personal assistance such as escort services to agencies in the community. Mrs. R. has begun to attend the wound care center several times per week, and now has an electric wheel chair and a furnished apartment. Mrs. R. is able to maintain her medical appointments. She receives transportation services from the Department of Aging and monthly case management services from the Department of Health. Mrs. R. is very grateful to be at Glen Square. She is appreciative of the staff and the support services. She states she "never wants to leave."

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:
Individual	\$ 2,637	\$ 27,375	Subsidies are provided to eligible participants who are age 62 and older, and whose net monthly income is insufficient to pay the full monthly fee for CHSP services.
Couple	\$ 3,448	\$ 35,587	

Unmet Need: There are 224 seniors on the waiting list and 27 facilities interested in starting a CHSP.

Program Data	FY 2010 Actual	FY 2011(Est.)	FY 2012 (Est.)
Number of Residents Receiving Services	705	735	735
Number of Buildings Receiving Services	30	27	26
Program Funding	FY 2010 Actual	FY 2011 (Est.)	FY 2012 (Est.)
Federal	\$716,580	972,782	972,782
State	\$1,499,621	1,527,077	1,527,077
Local Contributions	\$801,310	588,550	588,550
Total	\$3,017,511	3,088,409	3,088,409

CONTACT PERSON:

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

LONG TERM SUPPORTS and SERVICES

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. and Mrs. L. lived in Havre DeGrace with their small cocker spaniel. They both grew up in the Parkville area of Baltimore County and agreed that they wanted to live in a CCRC in that area. They didn't know where to start their research. They called the Maryland Department of Aging and were directed to the websites of the different CCRCs in Baltimore County where they can could receive information on the specific CCRC, including size of community, entrance fees, monthly fees, and most important, the pet policy. After visiting several CCRCs and comparing the prices, the amenities, and the pet policies, they chose their new home. They chose an apartment because they did not want the added problems of snow removal and home maintenance plus they wanted the companionship of other seniors their age and access to the full continuum of care if needed.

Program Data	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Facilities	35	36	35
Units	16,010	16,010	16,010
Special Funds	385,251	343,660	363,352

Contact Persons:

Martha C. Roach, Continuing Care Analyst, 410-767-1067, mroach@ooa.state.md.us

Continuing Care Communities Inventory

CONTINUING CARE COMMUNITIES (OPERATING)		Total	ILU *	AL **	Comp ***
BayWoods of Annapolis	Anne Arundel County	192	147	39	192
Ginger Cove	Anne Arundel County	349	243	51	349
Roland Park Place	Baltimore City	278	166	41	278
Wesley Home	Baltimore City	32	0	32	32
Augsburg Lutheran Home	Baltimore County	187	0	64	187
Augsburg Lutheran Village	Baltimore County	138	138	0	138
Blakehurst	Baltimore County	345	277	24	345
Broadmead	Baltimore County	373	278	16	373
Charlestown	Baltimore County	1,908	1,537	164	1,908
Edenwald	Baltimore County	455	288	88	455
Glen Meadows	Baltimore County	281	202	48	281
Maryland Masonic Homes	Baltimore County	231	33	110	231
Mercy Ridge	Baltimore County	457	408	49	457
North Oaks	Baltimore County	232	182	13	232
Oak Crest Village	Baltimore County	1,898	1,525	173	1,898
Pickersgill Inc.	Baltimore County	177	0	136	177
Presbyterian Home	Baltimore County	58	0	36	58
Asbury-Solomons Island	Calvert County	378	300	30	378
Carroll Lutheran Village	Carroll County	398	398	0	398
Fairhaven	Carroll County	428	314	35	428
Buckingham's Choice	Frederick County	304	217	45	304
Frederick Home	Frederick County	29	0	29	29
Goodwill Retirement Village	Garrett County	56	30	21	56
Vantage House	Howard County	292	222	26	292
Heron Pt. of Chestertown	Kent County	275	192	45	275
Asbury Methodist Village	Montgomery County	1,307	858	164	1,307
Bedford Court	Montgomery County	354	218	76	354
Brooke Grove	Montgomery County	50	40	5	50
Friends House	Montgomery County	135	32	21	135
Ingleside at King Farm	Montgomery County	314	242	46	314
Maplewood Park Place	Montgomery County	267	207	29	267
National Lutheran Home & Village	Montgomery County	444	144	0	444
Collington	Prince George's County	474	367	65	474
Riderwood Village, Inc.	Prince George's & Montgomery	2310	1,948	230	2310
William Hill Manor	Talbot County	299	121	44	299
Fahrney-Keedy	Washington County	113	61	32	113
Total Units		16,010	11,527	2,027	2,414
CONTINUING CARE COMMUNITIES (PLANNED)					
Expansions					
Asbury Methodist Village	Montgomery County	43	43	0	0
New					
Lutheran Village at Miller's Grant	Howard County	272	240	20	12
Homewood at Frederick, MD	Frederick County	341	165	56	120
Ravenwood/Robinwood	Washington County	336	105	147	84
The Village at Carsins Run	Harford County	203	183	10	10
Total Units		1,195	736	233	226

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

LONG TERM SUPPORTS and SERVICES

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.

Ms. M's health had been failing, resulting in frequent hospitalizations and time spent in and out of nursing homes. English was not her first language which made her stays in the nursing homes difficult. When she was hospitalized again, she very much wanted to be discharged to her home. The problem was she couldn't go home without supports and services, she couldn't afford to pay for them and the hospital wanted to discharge her. Fearing she would once again have to spend time in a nursing home, her family contacted the Baltimore County Department of Aging Waiver Unit. Their staff was able to expedite her Waiver enrollment to coincide with her hospital discharge, allowing her to return to her home with the supports and services she needed and most importantly to her and her family, avoiding another nursing home stay. Quoting her daughter, "You made it possible for me to satisfy my deepest desire which was to take care of my mother in my home until her last breath."

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

Financial Eligibility Individual	<i>Monthly Income Test</i> \$2022 as of 1/1/10 (300% of SSI maximum)		<i>Annual Asset Test</i> \$2000	
Program Data:		FY2010 (Act.)	FY2011 (Est.)	FY2012 (Est.)
Number of Providers		5,530	5,530	5,530
Number of Participants – Unduplicated Count		3,587	3,590	3,590
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 3,750 participants per year (unduplicated count). The unduplicated count for FY 10 was 3,587. There are over 18,000 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 13,500 people in need of long-term support services may have no alternative to placement in a nursing home.				
Program Funding:		FY2010 (Act.)	FY2011 (Est.)	FY2012 (Est.)
Federal (Administration and Case Management)		2,828,000	3,600,000	3,600,000
State (Administration and Case Management)		1,886,054	2,241,784	1,886,054
Total		4,714,054	5,851,784	5,156,054

CONTACT PERSON:

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

LONG TERM SUPPORTS and SERVICES

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 care giving responsibilities; and supplemental services that may include other services not identified here.

Ms. A, a female senior resides in Montgomery County and takes care of her 86 year old mother who has dementia. Ms. A has been working full time and takes advantage of the services that are available to assist her with caring for her mother. Her mother receives Medicaid and is eligible for the waiver that would cover the cost of attending an adult day care. Her mother also receives help from an aide that comes in through the Medical Assistance Personal Care Program. When Ms. A comes from work she relieves the aide. When she retired a few years ago and encountered financial obstacles personally along with her mother not receiving any income, Montgomery County's Division of Aging and Disability Services assisted her in applying for benefits. She and her mother were placed in subsidized housing with the Housing Opportunities Commission. Ms. A received Energy Assistance along with a grant from the National Family Caregiver Support Program which helped pay the cost of renewing her mother's Permanent Residency with immigration.

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 Individual Couple	Monthly Income Test None	Annual Asset Test None	Notes: Respite and supplemental services may be provided to caregivers who are caring for someone with physical and mental disabilities that restrict their ability to perform normal daily tasks.			
Program Data		FY2010 (Est.)		FY2011 (Est.)		FY2012 (Est.)
Number Served*/Units of Service		<i>People</i>	<i>Units</i>	<i>People</i>	<i>Units</i>	<i>People</i>
Education, Training or Support		5,126	11,467	6,045	12,192	6,280
Respite		2,252	92,432	2,578	93,865	2,993
Supplemental Services		2,368	84,950	2,625	86,025	2,733
Access Assistance		24,750	46,102	26,975	48,325	28,024
Information		132,096	15,782	133,957	16,850	135,469

*Includes both family and grandparent caregivers served.

*Numbers listed are estimates. Actual numbers will not be available for 2010 until April 2011.

Program Funding	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Federal	2,374,464	2,374,464	2,374,464
State	16,430	16,430	16,430
Local Contributions	422,538	422,538	422,538
Total	2,813,432	2,813,432	2,813,432

CONTACT PERSON:

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

LONG TERM SUPPORTS and SERVICES

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 a 88 year old widow, who has a history of dementia, Type II diabetes, coronary artery disease, thyroid disease and depression. She started receiving assisted living services as a private pay client. However, after five years, she had depleted most of her funds, necessitating a re-location to a less costly facility. During her assisted living stay, her health continued to decline. When she was no longer able to navigate steps in the assisted living facility, she was transferred to a nursing home. While in the nursing facility, she applied for the Medicaid waiver but her monthly income was slightly above the amount allowed for enrollment in the waiver. Thanks to the SALGHS subsidy, Mrs. S. was able to leave the nursing home and move to an enrolled SALGHS assisted living facility. Mrs. S. and her family are pleased with her new housing arrangement.

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 Eligibility	Monthly Income Test	Annual Asset Test	Notes: Provides financial assistance for a limited number of eligible Assisted Living Group Home residents 62 and older whose net monthly income is insufficient to pay the full monthly cost of a quality assisted living placement.
Individual	\$2,637	\$11,000	
Couple	\$3,448	\$14,000	

Program Data	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Number of Residents Receiving Subsidies	508	480	480
Waiting List: There are currently 183 persons on a waiting list for a subsidy. In 2010 a MetLife Mature Market Survey of Long-term Care Costs estimated the national average monthly cost for assisted living was \$3,293 with an average statewide cost of \$4,122. 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 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	0	0	0
State	2,983,436	2,983,436	2,834,264
Local Contributions	399,999	415,905	415,905
Total	3,383,345	3,399,341	3,250,169

CONTACT PERSON:

Martina Paye, Program Manager, 410-767-0755, mpaye@ooa.state.md.us

LONG TERM SUPPORTS and SERVICES

Senior Care Program

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

AS is a 72 year old man who resides with his daughter and son-in-law. He suffers from Hypertension, Hypercholesterolemia, short term memory loss, and incontinence. He ambulates independently with a walker, but has frequent falls and needs assistance transferring from a seated to standing position. AS requires help with bathing, meal preparation, eating, housecleaning and transportation. AS receives monthly income from Social Security. Senior Care provides gapfilling funds for medications, incontinent supplies, nutrition supplements and five days of Medical Adult Daycare. He has also received assistive devices including an adjustable toilet safety bar, transfer bench and shower wand.

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

Eligibility	Monthly Income Test	Annual Asset Test	Notes: Functional/Medical eligibility is determined as having a moderate or severe rating on the State assessment tool.	
Individual	\$2,637	\$11,000		
Couple	\$3,448	\$14,000		
Program Data		FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Number of Clients Served with Gapfilling Services		3,650	3,650	3,650
Number of Clients Waiting for Services at end of Fiscal Year		2,511	2,511	2,511
Number of Waiting List Clients who Enter Nursing Facilities		255	255	255
Waiting List: The Senior Care waiting list increased this year partially due to the State imposed moratorium on new client enrollments.. In FY10, approximately 10% percent of the individuals on the waiting list were placed in nursing homes.				
Program Funding		FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal		2,825,408	2,825,408	2,825,408
State		7,133,418	7,266,384	7,266,384
Local Contributions		519,500	541,146	541,146
Total		10,478,326	10,632,938	10,632,935

CONTACT PERSON:

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

LONG TERM SUPPORTS and 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 thousands of 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.

Mr. and Mrs. G. greet the home delivered meals volunteer driver with warm smiles. Since Mr. G. was diagnosed with Alzheimers, Mrs. G. needs to stay at home with him to keep him from needing to go to a nursing home. They are both grateful for the hot meal and friendly conversation delivered right to their home.

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

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

Program Data	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Number of Meals	1,289,502	1,290,000	1,300,000
Number of People Receiving Meals	6,950	6,900	7,025
Number of Volunteers	2,405	2,400	2,350
Waiting List: There are an estimated 541 homebound elderly who are on a waiting list to receive meals.			

Program Funding	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	4,069,975	3,505,249	3,505,249
State	739,651	739,651	739,651
Local Contributions	1,659,037	1,659,037	1,659,037
Total	6,468,663	5,903,937	5,903,937

CONTACT PERSON:

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

BUDGET PRESENTATION FISCAL YEAR 2012 ANNUAL REPORT 2010

MARYLAND DEPARTMENT OF AGING

INFORMATION SERVICES

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

INFORMATION SERVICES

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 (ADRC). The ADRC initiative is a joint effort of the federal Center for Medicare and Medicaid Services and the Administration on Aging (AoA) the purposes of which are to (1) provide trusted “single-points-of-entry” for information and services to support older adults and younger persons with disabilities in the community and (2) develop new programs that help divert people from inappropriate institutional placement. The following table describes federal grants that have continued to expand the Maryland ADRC program known as Maryland Access Point (MAP).

Year	Project Name	Grantor	Award Amount
2004	ADRC Development	AoA and CMS	\$800,000
2006	ADRC Continuation	AoA	\$400,000
2007	Nursing Home Diversion aka Community Living Program	AoA	\$500,000
2008	Empowering	AoA	\$700,000
2009	ADRC Expansion and Person Centered Hospital Discharge	AoA and CMS	\$1,100,000
2010	Evidence Based Care Transitions	AoA	\$400,000
2010	MIPPA	AoA	\$584,935
2010	Options Counseling	AoA	\$500,000

Since 2009, the MAP program has been a central component in Maryland’s rebalancing efforts, especially the Money Follows the Person Demonstration Project which has provided nearly \$4 million dollars to support program education, application assistance and transition case management by Area Agencies on Aging and MAP sites and to support the development of a statewide web-based searchable data base for information and services for long term supports.

The MAP program is administered by MDoA as a partnership with the Departments of Health and Mental Hygiene, Human Resources, and Disabilities, with local Area Agencies on Aging and MAP sites and Centers for Independent Living as well as advocates for senior consumers and persons with disabilities. Local MAP sites are operating in Anne Arundel, Howard, Washington, Worcester, Wicomico, Dorchester and Prince Georges Counties and Baltimore City. Three new sites are under development in St. Mary’s, Montgomery and Baltimore County. An effort is underway to expand the program statewide by the end of Fiscal Year 2012.

CONTACT PERSON:

Stephanie Hull, Chief of Long Term Supports and Services 410-767-1107, sah@ooa.state.us.md

INFORMATION 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.

The focus on the program this year has been on outreach and education to Medicare beneficiaries on the Affordable Care Act (federal health care reform), particularly regarding the changes in 2011 related to the Medicare Part D “donut hole” closure, and improvements to Medicare’s preventive and wellness benefits. Additionally, special outreach initiatives have focused on individuals who have limited income and resources. Efforts have been made to assist them with enrollment in assistance programs relevant to the Medicare Part D Prescription Drug Program. These assistance programs include the “Extra Help” Program the Maryland Senior Prescription Drug Assistance Program and Medicare Savings Programs.

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

Eligibility Individual Couple	Monthly Income Test None	Annual Asset Test None	Notes: There are no age requirements to receive assistance from SHIP.
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Program Data	FY 2010 (Actual) April 09-Mar 10	FY 2011 (Est.)	FY 2012 (Est.)
Number of Contacts for:			
Medicare	5,189	5,448	5,720
Medicaid	6,508	6,833	7,175
Prescription Assistance	30,885	32,429	34,050
Long Term Care	396	416	437
Number of Clients Served	25,583	26,862	28,205
Number Attending Events	15,215	15,976	16,775
Number of Volunteers	140	145	150
Number of Volunteer Hours	10,000	10,500	11,000
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 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	584,259	666,003	666,003
State	0	0	0
Local Contributions	21,323	21,323	21,323
Total	605,582	687,326	687,326

CONTACT PERSON:

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

INFORMATION 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.

Ms. A is a disabled grandmother who is caring for her grandchildren, but does not have the benefit of legal custody. Her daughter refuses to relinquish custodial rights to her mother. Ms. A has had two heart attacks and is diagnosed with other health problems that prevent her from working. She doesn't have medical insurance, and has lost her Social Security benefit. Additionally, she has not visited a doctor and is therefore unable to get much needed prescriptions. The I&A case manager began working with Ms. A, and has successfully helped her to get Medical Assistance, Food Stamps, and Temporary Disability Assistance. She is also working with Social Security to reinstate the SSDI.

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

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

Program Data	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Information Units of Service	582,782	582,782	582,782
Number of Referrals	108,203	108,203	108,203
Follow-up Units of Service	56,127	56,127	56,127
Assistance Units of Service	110,187	110,187	110,187
Number of Assistance Clients	51,099	51,099	51,099
Program Funding	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Federal	1,448,133	1,467,859	1,467,859
State	692,613	692,615	692,615
Local Contributions	754,439	754,439	754,439
Total	2,895,185	2,914,913	2,914,913

CONTACT PERSON:

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

**BUDGET PRESENTATION FISCAL YEAR 2012
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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 the 47,000 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, promote residents' rights 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.

A family member contacted the Office of the State Ombudsman worried that his loved one had been physically hurt in a facility and was not getting the care needed. Information was provided and the local ombudsman program immediately visited the resident.

"I just wanted to follow up thanking you for your quick response concerning my loved one. Your information was valuable and helped to get the problem resolved. Your turning my letter over to the local ombudsman was a great help also. She contacted my family quickly and visited my loved one at the facility. The person who hurt my loved one is no longer there. It is comforting to know that we have advocates. My loved one would be so appreciative if she knew of your assistance."

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

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

Program Data	FFY2009 (Actual)	FFY2010 (Estimate)*	FFY2011 (Estimate)	FFY2012 (Estimate)
Number of Complaints	3,281	2500	2700	3200
Number of Abuse Complaints	424	424	424	424
Number of Volunteers	98	98	105	148
Program Funding	FFY2010 (Actual)**	FFY2011 (Estimate)	FFY2012 (Estimate)	
Federal	589,122	586,339	586,339	
State	1,203,198	1,231,435	1,231,435	
Local Contributions	153,271	153,271	153,271	
Total	1,945,591	1,971,045	1,971,045	

*Federal Fiscal Year 2010 final data is not available; change in definition from 2009, not a decrease in work.

**As of September 30, 2010

CONTACT PERSON:

Alice H. Hedt, State Long-Term Care Ombudsman, 410-767-1108
ahedt@ooa.state.md.us

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.

Adult Protective Services (APS) received a call concerning the welfare of an elderly woman. During the investigation the APS worker encountered a seventy-four year old woman who was disoriented. She was taken to the local hospital where she was evaluated and provided with minor medical care she was in need of. During her evaluation two psychiatrists met with the woman to examine her decision making capacity. Both psychiatrists concluded her impairments were significant and she lacked the capacity to make informed decisions. When attempting to locate any family members it was discovered that the woman had recently been widowed and had no children or siblings. The hospital petitioned for a public guardian to be appointed to make decisions on the woman's behalf. The director at the local AAA was appointed as guardian of person. A case manager from the AAA was assigned to the case and when the client was ready to be discharged from the hospital the case worker assisted in locating an appropriate setting. The case worker continues to ensure the client's needs are met and advocates on her 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	Monthly Income Test	Annual Asset Test	Notes:
Age 65 and older	None	None	

Program Data	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Total Number of Guardianship Wards	809	828	848
Number of New Cases	192	192	192
Group Education Sessions Provided	98	98	98
Individual Consultations (post- guardianship)	19,252	19,252	19,252
Number of Public Guardianships Avoided	327	312	297
Program Funding	FY2010 (Actual)	FY2011 (Est.)	FY2012 (Est.)
Federal	0	0	0
State	658,267	642,692	642,692
Local Contributions	384,765	384,765	384,765
Total	1,043,032	1,027,475	1,027,475

CONTACT PERSON:

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

A seventy-two year old man's funds were garnished to satisfy a judgment against his daughter from a bank account they held jointly. She was unwilling to file a motion to exempt his funds hence he contacted the local Senior Assistance service provider for help. After reviewing the case the attorney revealed that the only monies being deposited into the account were the man's social security funds which are exempt from garnishment. The attorney challenged the garnishment in court and was successful in having the man's funds returned to him.

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	Annual Income Test	Annual Asset Test	Notes:
Age 60 and older or caregiver of such a person	None	None	None

Program Data	FY 2010(Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Hours of Service Provided	14,632	15,217	15,826
Number of Persons Served	4,079	4,242	4,412

Program Funding	FY 2010(Actual)	FY 20110 (Est.)	FY 2012 (Est.)
Federal	351,451	346,953	346,953
State	175,718	175,718	175,718
Local Contributions	414,373	414,373	414,373
Total	941,542	937,044	937,044

CONTACT PERSON:

Patricia Bayliss, Chief Administrator, Elder Care Affairs Unit, 410-767-1091,
pbayliss@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 ended on June 30, 2010.

Program Data	FY 2010 (Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Number of People Served			
One-to-one Counseling Sessions with Beneficiaries or their Caregivers	545	553	555
Education & Outreach			
Number Beneficiaries that Attended Group Education Sessions	1,3014	1,350	1,400
Number of Media & Community Outreach Events	683	689	695
Issues & Inquiries			
Number of Issues & Inquiries Resolved	4,257	4,300	4,325
Volunteers & Volunteerism			
Number of Active Volunteers	128	133	135
Volunteer Hours	3,257	3,300	3,325

Program Funding	FY 2010(Actual)	FY 2011 (Est.)	FY 2012 (Est.)
Federal	180,000	180,000	180,000
State	0	0	0
Local Contributions/Program Income	69,180	69,180	69,180
Total	249,180	249,180	249,180

CONTACT PERSON:

Donna Smith, Chief, Client & Community Services, 410-767-1271, dms@ooa.state.md.us

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MARYLAND DEPARTMENT OF AGING

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

COUNTY/JURISDICTION	CONTACT	AREA AGENCY ADDRESS	TELEPHONE
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@garrettccac.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 th 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
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@gac.org
ST. MARY'S	Lori Jennings-Harris Director	St. Mary's County Department of Aging P.O. Box 653 41780 Baldrige Street Leonardtown, MD 20650	301-475-4200 301-475-4503 - FAX lori.harris@co.saint-marys.md.us
WASHINGTON	Susan MacDonald Executive Director	The Washington County Commission on Aging, Inc. 140 West Franklin St., 4th Floor Hagerstown, MD 21740	301-790-0275 301-739-4957 - FAX 1-866-802-1212 sjm@wccoaging.org

AREA AGENCIES ON AGING

Appendix A

COUNTY/JURISDICTION	CONTACT	AREA AGENCY ADDRESS	TELEPHONE
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@alliconet.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	Francine Childs Executive Director	CARE Services Baltimore City Health Department 1001 E. Fayette Street Baltimore, MD 21202	410-396-4932 410-545-1539 - FAX francine.childs@baltimorecity.gov
BALTIMORE COUNTY	Joanne Williams Director	Baltimore County Department of Aging 611 Central Avenue Towson, MD 21204	410-887-2109 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 Schaubert 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	Bob Dermott Acting 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 ssct@ccgov.org
CHARLES	Dina Barclay Chief	Charles County Aging and Senior Programs 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

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.

Membership	Term	County of Residence
Mr. Stuart P. Rosenthal	July 1, 2007 - June 30, 2011*	Montgomery County
Ms Muriel Cole	July 1, 2009 – June 30, 2013*	Kent County
Mr. Richmond T. P. Davis	July 1, 2006 - June 30, 2010*	Montgomery County
Ms. Queen L. Gladden	July 1, 2007 – June 30, 2011	Charles County
Ms. Maria V. Jimenez	July 1, 2009 – June 30, 2013*	Montgomery County
Ms. Louise Lynch	July 1, 2006 – June 30, 2010	Frederick County
Ms. Paula Martin	July 1, 2007 – June 30, 2011	Prince George's County
Ms. Irene B. Reid	July 1, 2007 – June 30, 2011	Baltimore City
Delegate Barbara Frush	July 1, 1995	Prince George's County
Ms. Sharonlee Vogel	July 1, 2009 - June 30, 2013*	Howard County

* Reappointed

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Federal Poverty Guidelines			No new updates at this time (Date of publication of changes in the Federal Register.)
Individual	\$ 902.50 (\$10,830 per year)		
Couple	\$1,214 (\$14,570 per year)		
Qualified Medicare Beneficiary Program (QMB)	(Apply \$20 income disregard – see note at bottom of page)		Pays Medicare Part A and B premiums, co-payments, and deductibles. Next expected change: 3/1/11
Individual	\$ 902	\$4000	
Couple	\$1214	\$6000	
Special Low-Income Medicare Beneficiary Program (SLMB)	(Apply \$20 income disregard – see note at bottom of page)		Similar to QMB but pays only the Part B premium. Next expected change: 3/1/11
Individual	\$ 903 - \$1083	\$4000	
Couple	\$1215 - \$1457	\$6000	
Individual	\$1084 - \$1218	\$4000	
Couple	\$1458 - \$1639	\$6000	
Maryland Primary Adult Care (PAC) Program	(After applying exclusions and disregards)		For Marylanders ages 19-64, who do not qualify for Medicare, the PAC Program provides free primary care doctor visits, free mental health visits (psychiatric or counseling), and low-cost or free prescription drugs.
Individual	\$1046	No asset test as of 4/1/09	<i>Does not cover hospital stays, ER visits, or specialty care.</i>
Couple	\$1214		Call 1-800-226-2142 (toll-free) for application & information. Next expected change: 3/1/11

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
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.			
Supplemental Security Income (SSI)	(Apply \$20 income disregard – see note on previous page)		SSA has started a Compassionate Allowance Initiative for individuals with early-onset (younger-onset) Alzheimer's disease. <i>This benefit is for early-onset (younger-onset Alzheimer's disease and related dementias for those generally diagnosed under the age of 65 years old. It does not affect those who are currently receiving full Social Security retirement benefits. This will also affect people with Frontotemporal dementia (FTD), Pick's disease, Creutzfeldt-Jakob disease, mixed-dementia and primary progressive aphasia. *When asked by the SSA claims representative what the disabling condition is, the applicant must specify "early-onset Alzheimer's disease." It is strongly recommended that applicants apply in person at their local SSA office. You will need to submit an application and other documents at your local office. The Alzheimer's Association has prepared a checklist to assist individuals with the application process. See checklist at: http://www.alz.org/documents/national/SSDI_checklist.pdf The applicant should apply for SSDI as well if they are receiving early retirement benefits because they may become eligible for Medicare before they turn 65.</i>
Individual Couple	\$674 \$1011 (Represents 5.8% increase in Consumer Price Index for 2011)	\$2000 \$3000	
Medicare Part D (Prescription Drug) Low-Income Subsidy (also known as EXTRA HELP)		(See note at bottom of page)	This financial assistance is only for Medicare beneficiaries who have a Medicare D prescription drug plan. Benefits vary depending on income level; assistance may help with cost of premiums, deductibles, co-pays.
Individual Couple (100% poverty & below)	\$902.50 or less \$1214.17 or less ("full subsidy")	\$ 8,100 \$12,910	You will automatically receive EXTRA HELP if you have Medical Assistance, QMB, SLMB, or SSI; no need to apply.
Individual Couple (up to 135% poverty)	\$902.51 - \$1218.38 \$1214.18 - \$1639.13	\$12,510 \$25,010	Apply through Social Security Administration (1-800-772-1213 or www.ssa.gov) or Local Department of Social Services.
Individual Couple	\$1218.39 - \$1353.75 \$1639.14 - \$1821.25	\$12,510 \$25,010	

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
State of Maryland Senior Prescription Drug Assistance Program (SPDAP) Individual Couple	 \$32,490/yr. \$43,710/yr.	 No test No test	<p>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, SPDAP pays up to \$35 per month toward the cost of the premium 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.</p> <p>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.</p> <p>For further information or applications, call 1-800-551-5995 or go to www.marylandspdap.com</p>
Maryland Energy Assistance Program (MEAP) Individual Couple	 \$1579.37 \$2124.79 (represents 175% of poverty level)	 No test No test	<p>Provides eligible low-income Marylanders assistance with home heating bills; EUSP assists with electric bills.</p> <p>Only one application is required for both MEAP and EUSP. Both programs are administered by the Office of Home Energy Programs (OHEP), DHR.</p>
Electric Universal Service Program (EUSP) Individual Couple	 \$1579.37 \$2124.79 (represents 175% of poverty level)	 No test No test	<p>Effective: 7/1/09</p>

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Food Supplement Program (formerly Food Stamp Program)			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.
Individual	\$903	\$3000	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.
Couple	\$1215 (net income)	\$3000	Effective: 4/1/09
Medical Assistance (Medicaid)			Requires documentation of disability; individuals can "spend down" to this income level to be eligible.
Individual	\$350	\$2500	
Couple	\$392	\$3000	
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, and technical eligibility requirements apply.
Senior Care Program			Case managed, in-home services program for individuals 65 and older.
Individual	\$2521	\$11,000	Next expected change: 7/1/11
Couple	\$3296	\$14,000	
Senior Assisted Living Group Home Program Subsidy			Provides financial assistance for a limited number of eligible Assisted Living Group Home residents age 62 or older.
Individual	\$2521	\$11,000	Next expected change: 7/1/11
Couple	\$3296	\$14,000	

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Congregate Housing Services (CHSP) Subsidy Individual Couple	 \$2521 \$3296	 \$27,375 \$35,587	Provides financial assistance for a limited number of Congregate Housing residents in selected sites for individuals 62 and older whose net monthly income is insufficient to pay the full monthly fee for Congregate Housing Services. Next expected change: 7/1/11
Senior Community Service Employment Program (SCSEP) Individual Couple	 \$13,613 per yr. \$18,388 per yr.	 No test No test	Federally subsidized employment for persons ages 55 and over.
Accessible Homes for Seniors Individual Couple	 \$57,500 per yr. (Washington MSA – Calvert, Charles, Frederick, Montgomery, & Prince George’s Counties) \$46,000 per yr. (all other jurisdictions) \$65,750 per yr. (Washington MSA) \$52,550 per yr. (all other jurisdictions)	 No test 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. 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 .

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
Employed Individuals with Disabilities (EID) Program	(Approximate countable income per month)	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.
Individual	Up to \$2707		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.
Couple	Up to \$3642 (represents 300% of poverty level)		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 likelihood of eligibility and completion of application by telephone.
Medical Assistance (Medicaid) – Spousal Impoverishment Protection Standards	For spouse in the community: Basic Maintenance and Shelter Allowance \$1750 Maximum Maintenance and Shelter Allowance \$2739	For spouse in the nursing home: \$2500 Minimum Community Spouse's Asset Share \$21,912 Maximum Community Spouse's Asset Share: \$109,560	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. 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 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.

ELIGIBILITY LEVELS FOR SELECTED FEDERAL AND STATE PROGRAMS

Appendix C

Federal/State Program	Monthly (or Annual) Income Test	Annual Asset Test	Notes
2009 State of Maryland Homeowners' Property Tax Credit Program	<p>Plan is based on relationship between property taxes and income; combined gross household income cannot exceed \$60,000.</p> <p>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.</p>	Net worth is less than \$200,000 (excluding property on which you are seeking credit and cash value of IRAs or qualified retirement savings plans).	<p>Allows a credit against the homeowner's 2008 property tax bill if property taxes exceed a fixed percentage of the person's gross income.</p> <p>No age restrictions.</p> <p>Credit applicable only to dwelling which is your permanent residence.</p> <p>Apply no later than 9/01/11. Homeowners age 70 and older, who have not applied for the program previously, should call 410 767-4433 or 1-800-944-7403.</p>
2009 State of Maryland Renters' Tax Credit Program	<p>Plan is based on relationship between rent and income.</p> <p>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.</p>	Net worth is less than \$200,000	<p>Provides tax credit up to \$750 a year for renters who meet certain requirements on rent paid in calendar year 2008.</p> <p>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.</p> <p>Apply no later than 9/1/11.</p>
Weatherization Assistance Program (WAP)			Operated by the Maryland Department of Housing and Community Development, WAP enables low-income households to reduce home energy consumption and maintenance costs through installation of energy-conserving materials. Priority is given to low-income homeowners who are elderly, disabled, have families with children, and/or have the 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.
Individual	\$1805	No test	
Couple	\$2428	No test	
	(represents 200% of poverty level)		

Allegany County

Cumberland Senior Center
19 Frederick Street
Cumberland, MD 21502
301-724-8626

Frostburg Senior Center
27 S. Water Street
Frostburg, MD 21532
301-689-5510

George's Creek Senior Center
7 Hanekamp Street
Lonaconing, MD 21539
301-463-6215

Westernport Community Center
33 Main Street
Westernport, MD 21562
301-359-9930

Anne Arundel County

Annapolis Senior Center
119 South Villa Avenue
Annapolis, MD 21401
410-222-1818

Arnold Senior Center
44 Church Road
Arnold, MD 21012
410-222-1922

Brooklyn Park Senior Center
202 Hammonds Lane
Brooklyn Park, MD 21225
410-222-6847

Catherine O'Malley Senior Center & Annex
1275 & 1270 Odenton Road
Odenton, MD 21113
410-222-6227 or 410-222-0140 (Annex)

Pasadena Senior Center
4103 Mountain Road
Pasadena, MD 21122
410-222-0030

Robert A. Pascal Senior Center
125 Dorsey Road
Glen Burnie, MD 21061
410-222-6680

South County Senior Center
27 Stepneys Lane
Edgewater, MD 21037
410-222-1927

Baltimore City

Action In Maturity
3900 Roland Avenue
Baltimore, MD 21211
410-889-7915

Allen Center
Grace United Church of Christ
1404 South Charles Street
Baltimore, MD 21230
410-685-6224

Forest Park Senior Center
4801 Liberty Heights Avenue
Baltimore, MD 21207
410-466-2124

John Booth Senior Center
229 1/2 S. Eaton Street
Baltimore, MD 21224
410-396-9202

Sandtown Winchester Senior Center
1601 Baker Street
Baltimore, MD 21217
410-396-7724

Cherry Hill Senior Life Center
606 Cherry Hill Road, Suite 201
Baltimore, MD 21225
410-354-5101

Edward A. Myerberg Northwest Senior Center
3101 Fallstaff Road
Baltimore, MD 21209
410-358-6856

Greenmount Senior Center
425 E. Federal Street
Baltimore, MD 21202
410-396-3552

Harford Senior Center
4920 Harford Road
Baltimore, MD 21214
410-426-4009

Hatton Senior Center
2825 Fait Avenue
Baltimore, MD 21224
410-396-9025

Oliver Senior Center
1700 N. Gay Street
Baltimore, MD 21213
410-396-3861

Senior Network of North Baltimore
5828 York Road
Baltimore, MD 21212
410-323-7131

Southwest Senior Center
100 South Calhoun Street
Baltimore, MD 21223
410-566-1311

Waxter Center for Senior Citizens
1000 Cathedral Street
Baltimore, MD 21201
410-396-1324

Baltimore County

Arbutus Senior Center
855A Sulphur Spring road
Baltimore, MD 21227
410-887-1410

Catonsville Senior Center
501 N. Rolling Road
Baltimore, MD 21228
410-887-0900

SENIOR CENTERS

Appendix D

Ateaze Senior Center
7401 Holabird Avenue
Dundalk, MD 21222
410-887-7233

Bykota Senior Center
611 Central Avenue
Towson, MD 21204
410-887-3094

Edgemere Senior Center
6600 North Point Road
Baltimore, MD 21219
410-887-7530

Fleming Senior Center
641 Main Street
Baltimore, MD 21222
410-887-7225

Jacksonville Senior Center
3605A Sweet Air Road
Phoenix, MD 21131
410-887-1841

Landsdowne/Baltimore Highlands
Senior Center
424 Third Avenue
Baltimore MD 21227
410-887-1443

Liberty Senior Center
3525 Resource Drive
Randallstown, MD 21133
410-887-0780

Mt. Carmel Senior Center
17038 Prettyboy Dam Road
Parkton, MD 21120
410-887-1923

Parkville Senior Center
8601 Harford Road
Baltimore, MD 21234
410-887-5338

Cockeysville Senior Center
10535 York Road
Cockeysville, MD 21030
410-887-7694

Essex Senior Center
600 Dorsey Avenue
Baltimore, MD 21221
410-887-0267

Pikesville Senior Center
1301 Reisterstown Road
Pikesville, MD 21208
410-887-1245

Rosedale Senior Center
1208 Neighbors Avenue
Baltimore, MD 21237
410-887-0233

Reisterstown Senior Center
12035 Reisterstown Road
Reisterstown, MD 21136
410-887-1143

Seven Oaks Senior Center
9210 Seven Court Dr.
Perry Hall, MD 21236
410-887-5192

Victory Villa Senior Center
403 Compass Road
Baltimore, MD 21220
410-887-0235

Woodlawn Senior Center
2120 Gwynn Oak Avenue
Baltimore, MD 21207
410-887-6887

Calvert County

Calvert Pines Senior Center
450 W. Dares Beach Road
Prince Frederick, MD 20678
410-535-4606, 301-855-1170

Southern Community Center
20 Appeal Lane
Lusby, MD 20657
410-586-2748

North Beach Senior Center
9010 Chesapeake Avenue
North Beach, MD 20714
410-257-2549

Caroline County

Caroline Senior Center
403 S. 7th Street
Suite 127
Denton, MD 21629
410-479-2535

Federalsburg Senior Center
118 N. Main Street
Federalsburg, MD 21632
410-754-9754

Carroll County

Mt. Airy Senior Center
703 Ridge Avenue
Mt Airy, MD 21771
410-795-1017, 301-829-2407

Taneytown Senior Center
220 Roberts Mill Road
Taneytown, MD 21787
410-756-4557

North Carroll Senior & Community Center
2328 Hanover Pike
Hampstead, MD 21074
410-386-3900

Westminster Senior Center
125 Stoner Avenue
Westminster, MD 21157
410-848-4049
410-876-3363 - Baltimore Line

South Carroll Senior & Community Center
5928 Mineral Hill Road
Eldersburg, MD 21784
410-386-3700

Cecil County

Buckworth Senior Center
214 North Street
Elkton, MD 21921
410-996-5295

Perryville Senior Center
300 Cherry Street
Perryville, MD 21903
410-996-5295

Charles County

Richard R. Clark Senior Center
1210 E. Charles Street
La Plata, MD 20646
301-934-5423

Indian Head Senior Center
100 Cornwallis Square
Indian Head, MD 20640
301-743-2125

Waldorf Senior Center
3092 Crain Highway
Waldorf, MD 20601
301-638-4420

Nanjemoy Senior Center
Senior Center Programs
4375 Port Tobacco Road
Nanjemoy, MD 20662
301-246-9612

Dorchester County

MAC Senior Center
2450 Cambridge Beltway
Cambridge, MD 21613
410-221-1920

North Dorchester MAC Senior Center
6210 Shiloh Church and Hurlock Road
Hurlock, MD 21643
410-943-1106

Frederick County

Brunswick Senior Center
12 East A Street
Brunswick, MD 21716
301-834-8115

Emmitsburg Senior Center
300 South Seton Avenue
Emmitsburg, MD 21727
301-600-6350

Frederick Senior Center
1440 Taney Avenue
Frederick, MD 21702
301-600-3525 (Activities)
301-600-1048 (Meal Reservations)

Thurmont Senior Center
806 East Main St
Thurmont, MD 21788
301-271-7911

Urbana Senior Center
9020 Amelung Street
Frederick, MD 21704
301-600-7020

Garrett County

Mary Browning Senior Center
104 East Center Street
Oakland, MD 21550
301-334-9431
1-888-877-8403, ext. 131 (Toll Free)

Grantsville Senior Center
125 Durst Court
Grantsville, MD 21536
301-895-5818

Flowery Vale Senior Center
204 South Street
Accident, MD 21520
301-746-8824

Harford County

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

Edgewood Senior Center
1000 Gateway Road
Edgewood, MD 21040
410-612-1622

Bel Air Senior Center
525 W. McPhail Rd.
Bel Air, MD 21014
410-638-4040

Highland Senior Center
708 Highland Road
Street, MD 21154
410-638-3605

Havre de Grace Senior Center
351 Lewis Lane
Havre de Grace, MD 21078
410-939-5121

Veronica "Roni" Chenowith Activity Center
1707 Fallston Road
Fallston, MD 21047
410-638-3260

Howard County

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

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

East Columbia Senior Center
6600 Cradlerock Way
Columbia, MD 21045
410-313-7680

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

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

Glenwood Senior Center
2400 Route 97
Cooksville, MD 21723
410-313-5440

Kent County

Amy Lynn Ferris Adult Activity Center
200 Schaubert Road
Chestertown, MD 21620
410-778-2564

Montgomery County

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

Long Branch Senior Center
8700 Piney Branch Road
Silver Spring, MD 20903
301-431-5708

Damascus Senior Center
9701 Main Street
Damascus, MD 20872
301-235-1801

Rockville Senior Center
1150 Carnation Drive
Rockville, MD 20850
301-309-3025

Margaret Schweinhaut Senior Center
1000 Forest Glen Road
Silver Spring, MD 20901
301-681-1255

Holiday Park Senior Center
3950 Ferrara Drive
Wheaton, MD 20906
301-468-4448

Silver Spring Senior Source
1400 Fenwick Lane
Silver Spring, MD 20910

Prince George's County

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

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

Bowie Senior Center
14900 Health Center Drive
Bowie, MD 20716
301-809-2300

Langley Park Senior Activity Center
1500 Merrimac Drive
Hyattsville, Maryland 20783
301-408-4343

Oasis Senior Center
3500 East West Highway
Prince George's Plaza
Hyattsville, MD 20782
301-559-6575

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

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

Phelps Senior Center
701 Montgomery Street
Laurel, MD 20707
301-776-6168

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

Queen Anne's County

Crumpton Senior Center
2200 Dudley Corner Road
P. O. Box 58
Crumpton, MD 21628
410-778-5444

Kramer Senior Center
104 Powell Street
Centreville, MD 21617
410-758-3900

SENIOR CENTERS

Appendix D

Grasonville Senior Center
4802 Main Street
P.O.Box 147
Grasonville, MD 21638
410-827-6010

Kent Island Senior Center
891 Love Point Road
Stevensville, MD 21666
410-604-3801

St. Mary's County

Garvey Senior Center
41780 Baldrige Street
P.O. Box 653
Leonardtown, Maryland 20650
301-475-4200, ext. 1050

Loffler Senior Activity Center @ SAYSF
Bible Church
46544 Rue Purchase Road
Lexington Park, MD 20653
301-737-5670
240-725-0290

Northern Senior Activity Center
P. O. Box 653
Leonardtown, MD 20650
301-475-4002 X 1002

Somerset County

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

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

Talbot County

Talbot Senior Center
400 Brookletts Avenue
Easton, MD 21601
410-822-2869

Washington County

Potomac Towers Senior Center
11 W. Baltimore Street
Hagerstown, MD 21740
301-733-6911

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

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

Wicomico County

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

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

Worcester County

Northern Worcester County MAC Senior Center
10129 Old Ocean City Blvd.
Berlin, MD 21811
410-641-0515

Pocomoke Senior Center
400-B Walnut Street
Pocomoke, MD 21851
410-957-0391

Ocean City Senior Center
104 41st St.
Ocean City, MD 21842
410-289-0824

Snow Hill MAC Senior Center
4767 Snow Hill Road
Snow Hill, MD 21863
410-632-1277

Revised 11/29/10

SENIOR INFORMATION & ASSISTANCE

Appendix E

<i>County</i>	<i>Contact Person</i>	<i>Address</i>	<i>Telephone</i>
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	410-222-4257 1-800-492-2499 TTY: 410-222-4464 FAX: 410-222-4346 sberkeley@yahoo.com
Baltimore City	Thelma Winn	CARE Service@BHCA 201 E. Baltimore Street 15 th Floor Baltimore, MD 21202	410-396-2273 FAX: 410-385-0381 Thelma.winn@baltimorecity.gov
Baltimore Co.	Stacey Hendricks	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 County 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 th Street, Suite 127 Denton, Maryland 21629	410-479-2093 410-479-2535 FAX: 410-479-1879 irenegar@intercom.net
Carroll	Deborah Frame	Carroll County Bureau on Aging 125 Stoner Avenue Westminster, Maryland 21157	410-386-3800 (410-386-3850 Mt. Airy) (410-848-4049 Westminster) FAX: 410-840-0436 TTY: 410-848-3555 dframe@ccg.carr.org
Cecil	Mary Kahoe	Cecil County Department of Aging 200 Chesapeake Boulevard, 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 ext. 5118 301-870-3388 TTY: 1-800-735-2258 FAX: 301-934-5624 masont@govt.co.charles.md.us

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
Frederick	Eleanor Jenkins	Senior Information & Assistance Frederick County Department of Aging 1440 Taney Avenue Frederick, MD 21702	301-600-1604 TTY: 301-694-1672 FAX: 301-631-3554

SENIOR INFORMATION & ASSISTANCE

Appendix E

Garrett	Lynda Weeks	Senior Information & Assistance Mary Browning Senior Center 104 E. Center Street Oakland, Maryland 21550	Oakland: 301-334-9431 Accident: 301-746-8824 FAX: 301-334-8555 lweeks@garrettcac.org
Harford	Kathy Bond	Senior Information & Assistance Harford Co. Area Agency on Aging Bel Air Senior Center 145 N. Hickory Avenue Bel Air, Maryland 21014	Harford: 410-638-3025 Baltimore: 410-879-2000 ext. 3331 or 3380 FAX: 410-893-2371 mmcarroll@harfordcountymd.gov
Howard	Pam Bilal	Senior Information & Assistance Howard Co. Area Agency on Aging 6751 Columbia Gateway Dr-2 nd Fl. Columbia, MD 21046	410-313-5980, 1-800-506-5806 FAX: 410-313-6593 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 rd Floor Rockville, Maryland 20850	240-777-3000 TTY: 240-777-4575 FAX: 240-777-1495
Prince George's	Deborah Mc Broom	Senior Information & Assistance Prince George's County Area Agency on Aging 6420 Allentown Road Camp Springs, MD 20748	301-265-8450 TTY: 301-277-0076 FAX: 301-248-5358

Queen Anne's	Jane Anthony	Senior Information & Assistance Queen Anne's Co. Area Agency on Aging 104 Powell Street Centreville, Maryland 21617	410-758-0848 TTY: 410-758-2126 FAX: 410-758-4489 cwillis@qac.org
Somerset	Sheree Marshall	Senior Information & Assistance Commission on Aging-MAC, Inc. 11916 North Somerset Avenue Princess Anne, Maryland 21853	410-651-0020 FAX: 410-651-3350 No email
St. Mary's	Debbie Barker	Senior Information & Assistance St. Mary's Co. 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
Talbot	Margaret Vance	Senior Information & Assistance Talbot County Senior Center 400 Brooklets Avenue Easton, Maryland 21601	410-822-2869 FAX: 410-820-9563 tsc2@goeaston.net
Washington	Elizabeth Church	Senior Information & Assistance Washington County Commission on Aging, Inc. 140 W. Franklin Street 4 th Floor Hagerstown, Maryland 21740	301-790-0275 x211 TTY: 1-800-735-2258 FAX: 301-739-4957

SENIOR INFORMATION & ASSISTANCE

Appendix E

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Worcester	Terry Cullen	Senior Information & Assistance Worcester Co. Commission on Aging 4767 Snow Hill Road P. O. Box 159 Snow Hill, Maryland 21863	410-632-1289 FAX: 410-632-2613 tcullen@worcoa.org

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