



# OLR RESEARCH REPORT

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## AREA AGENCIES ON AGING

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You asked for information on area agencies on aging (AAA). Specifically, you want information on (1) the requirements under federal law concerning their boundaries, duties and responsibilities, funding sources, and governance structure and (2) Connecticut's AAAs, including the areas they serve and their funding under the federal Older Americans Act of 1965 (OAA).

### SUMMARY

Congress passed the OAA in response to policymakers' concerns regarding the lack of community services for seniors (i.e., individuals age 60 and older). Title III of the act provides funding to states for the development and enhancement of comprehensive, coordinated, community-based systems that provide a continuum of services to seniors, especially those with the greatest economic or social need (42 USC § 3021 *et seq.*). To receive Title III funding, states must designate regional public or nonprofit agencies (known as AAAs) as one-stop service centers.

Federal law sets most requirements affecting AAAs. But, the state Department on Aging (SDA) is responsible for distributing federal funds to AAAs and approving their area plans (i.e., four-year regional plans).

By statute, Connecticut has designated five AAAs, all of which are private, nonprofit entities governed by a board of directors and federally-mandated advisory board. They use federal, state, and private funds to evaluate and plan for seniors' needs, provide information and referral services, and oversee the coordinated delivery of support services.

## **FEDERAL REQUIREMENTS**

### ***Geographic Boundaries***

To receive OAA funding, states must delineate geographic boundaries for elderly planning and service regions and designate one AAA to serve each region. These boundaries must be based on several factors, including:

1. seniors' geographic distribution and characteristics (e.g., income, English proficiency);
2. the distribution of resources available to provide services; and
3. existing boundaries within the state for planning or administering supportive services programs (42 USC § 3025).

### ***Duties and Responsibilities***

Federal law requires AAAs to plan, coordinate, evaluate, and broker senior services to:

1. maintain maximum independence and dignity in a home environment for those capable of self-care with appropriate supportive services,
2. remove individual and social barriers to their economic and personal independence,
3. provide the most vulnerable with a continuum of care, and
4. secure appropriate managed in-home and community-based long-term care services (42 USC § 3021).

To facilitate these goals, the federal government provides funding to AAAs for:

1. supportive services (e.g., transportation, information referral, legal assistance, case management, and adult day care) (Title III-B);

2. nutritional services (i.e., congregate and home-delivered meals) (Title III-C);
3. disease prevention and health promotion services (e.g., medication management, education, and health screenings) (Title III-D); and
4. family caregiver support (e.g., counseling, training, and respite care) (Title III-E).

**Advocacy, Evaluation, and Planning Responsibilities.** AAAs are responsible for (1) assessing the priorities and needs of seniors residing in their region and (2) advocating for, and increasing public awareness of, their issues. To do this, they must solicit input from seniors and monitor and evaluate policies, programs, and community actions that affect them (45 CFR § 1321.61). Additionally, AAAs must submit an area plan every four years and administer it after receiving SDA approval. Among other things, these plans must:

1. provide for a comprehensive and coordinated system of supportive and nutrition services;
2. designate a service delivery focal point in each community (e.g., senior center);
3. provide a grievance procedure for seniors who are dissatisfied with, or denied, services;
4. detail how AAAs will coordinate activities, and develop long-range emergency preparedness plans, with local and state emergency response and relief entities; and
5. provide assurances that special emphasis will be placed on outreach to seniors (a) in rural areas, (b) with the greatest economic and social need, (c) with severe disabilities, (d) with limited English proficiency, (e) with neurological disorders, or (f) at risk of institutional placement (42 USC § 3026).

**Grant Making and Service Delivery.** Through a request for proposals process, AAAs award subgrants to, or contract with, regional service providers. These providers offer direct services (e.g., adult day care, counseling, education, in-home, and legal services) at local sites (e.g., senior centers, congregate meal sites, town halls). In many cases, subgrants serve as seed money and recipients must find other funding sources as their operations grow.

Additionally, AAAs may provide direct services, such as personal care, counseling, case management, and health screenings. For example, three of the Connecticut's AAAs contract with the Department of Social Services to administer the Connecticut Home Care Program for Elders (CHCPE) in their regions. (CHCPE seeks to reduce the need for costly nursing home care by providing clients with home health care and assistance with daily living activities.)

### ***Funding***

The federal government awards grants to states based on their proportionate share of seniors. States are required to match a portion of these grants with funds or in-kind services (e.g., volunteers' time or free office space) from non-federal sources (25% match for administration costs and family caregiver support services; 15% for other services). States distribute grants to AAAs based on their own formulas. Under the OAA, these formulas must take into account seniors' geographic distribution and social and economic need, paying particular attention to low-income minority seniors (42 USC § 3025).

### ***Governance Structure***

Federal law requires each AAA to establish an advisory council, responsible for advising its governing body on: developing and administering the area plan; conducting public hearings; representing seniors' interests; and reviewing and commenting on community policies, programs, and actions that impact seniors (45 CFR § 1321.57). (Connecticut's AAAs are governed by boards of directors.) Federal law requires the advisory councils to include:

1. more than 50% seniors, including minority individuals;
2. representatives of seniors;
3. health care provider representatives (including veterans' health care, if appropriate);
4. support services provider representatives;
5. people with leadership experience in the private and volunteer sectors;
6. local elected officials; and
7. members of the general public (45 CFR § 1321.57).

## CONNECTICUT'S AAAS

State law establishes five elderly planning and service regions, each with its own AAA, to carry out federal OAA requirements. State law specifies AAAs are responsible for:

1. representing seniors in their regions;
2. developing and administering an area plan;
3. coordinating and assisting local public and nonprofit agencies in developing senior programs; and
4. receiving and distributing federal, state, and local funds for these purposes ([CGS § 17b-421](#)).

### ***State Planning and Service Regions***

Map 1 and Table 1 provide information on the boundaries of the state's AAAs.

**Map 1: AAA Boundaries**



Source: Connecticut Department on Aging

**Table 1: Municipalities Served by Connecticut's AAAs**

<b><i>Region</i></b>	<b><i>AAA</i></b>	<b><i>Municipalities Served</i></b>
Western	<a href="#">Western Connecticut AAA</a> (WCAA)	Barkhamsted, Beacon Falls, Bethel, Bethlehem, Bridgewater, Brookfield, Canaan, Cheshire, Colebrook, Cornwall, Danbury, Goshen, Harwinton, Kent, Litchfield, Middlebury, Morris, Naugatuck, New Fairfield, New Hartford, New Milford, Newtown, Norfolk, North Canaan, Prospect, Redding, Ridgefield, Roxbury, Salisbury, Sharon, Sherman, Southbury, Thomaston, Torrington, Warren, Washington, Waterbury, Watertown, Winchester, Wolcott, and Woodbury
North Central	<a href="#">North Central AAA</a> (NCAA)	Andover, Avon, Berlin, Bloomfield, Bolton, Bristol, Burlington, Canton, East Granby, East Hartford, East Windsor, Ellington, Glastonbury, Farmington, Enfield, Granby, Hartford, Hartland, Hebron, Manchester, Marlborough, New Britain, Newington, Plainville, Plymouth, Rocky Hill, Simsbury, Somers, South Windsor, Southington, Stafford, Suffield, Tolland, Vernon, West Hartford, Wethersfield, Windsor, and Windsor Locks

Table 1: -Continued-

Eastern	<a href="#">Eastern Connecticut AAA</a> (dba Senior Resources) (ECAAA)	Ashford, Bozrah, Brooklyn, Canterbury, Chaplin, Chester, Clinton, Colchester, Columbia, Coventry, Cromwell, Deep River, Durham, Eastford, East Haddam, East Hampton, East Lyme, Essex, Franklin, Griswold, Groton, Haddam, Hampton, Killingly, Killingworth, Lebanon, Ledyard, Lisbon, Lyme, Mansfield, Middlefield, Middletown, Montville, New London, North Stonington, Norwich, Old Lyme, Old Saybrook, Plainfield, Pomfret, Portland, Preston, Putnam, Salem, Scotland, Sprague, Sterling, Stonington, Thompson, Union, Voluntown, Waterford, Westbrook, Willington, Windham, and Woodstock
South Central	<a href="#">AAA of South Central Connecticut</a> (SCCAA)	Ansonia, Bethany, Branford, Derby, East Haven, Guilford, Hamden, Madison, Meriden, Milford, New Haven, North Branford, North Haven, Orange, Oxford, Seymour, Shelton, Wallingford, West Haven, and Woodbridge
Southwestern	<a href="#">Southwestern Connecticut AAA</a> (SWAA)	Bridgeport, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, Norwalk, Stamford, Stratford, Trumbull, Weston, Westport, and Wilton

**Funding**

The majority of AAAs’ budgets come from federal funding under Title III of the OAA. (AAAs also receive funding from other federal, state, and private sources (see Appendix A).) In Connecticut, the SDA is responsible for distributing Title III funds. It distributes one-half of these grants among the five AAAs equally. It distributes the other half under a formula that takes into account the number of seniors living in each region and whether they are:

1. members of a racial or ethnic minority,
2. at or below the poverty threshold,
3. unable to perform basic activities without assistance,
4. living in rural communities, or
5. members of a racial or ethnic minority and also have incomes below the poverty threshold.

Table 2 lists the amount of Title III funding each AAA received under this formula in FFY 13.

**Table 2: FFY 13 Federal Funding Under Title III of the OAA**

<b>AAA</b>	<b>Title III Funding</b>
SWAA	2,615,465
SCCAA	2,562,815
ECAAA	2,521,577
NCAA	3,205,620
WCAA	2,508,165
<b>Total</b>	<b>13,413,642</b>

Source: Connecticut Department on Aging

## **FURTHER INFORMATION**

Appendix A provides information on other federal and state grants that AAAs receive. Further information on AAAs is available from the:

- National Academies Press  
([http://www.nap.edu/openbook.php?record\\_id=9059&page=251](http://www.nap.edu/openbook.php?record_id=9059&page=251))
- National Association of Area Agencies on Aging (<http://www.n4a.org/>)
- Administration on Aging  
([http://www.aoa.gov/AoARoot/AoA\\_Programs/OAA/Introduction.aspx](http://www.aoa.gov/AoARoot/AoA_Programs/OAA/Introduction.aspx))
- State Department on Aging  
(<http://www.ct.gov/agingservices/cwp/view.asp?a=2509&q=312998>)

**APPENDIX A**

**Table 1: FFY 2013 Federal Funds**

AAA	<i>Title III State &amp; Community Programs on Aging<sup>1</sup></i>	<i>Title VII Elder Abuse<sup>2</sup></i>	<i>Nutrition Services Incentive Program<sup>3</sup></i>	<i>Storm Sandy Disaster Assistance<sup>4</sup></i>	<i>Title V Senior Employment<sup>5</sup></i>	<i>State Health Insurance Assistance Program - CHOICES<sup>6</sup></i>	<i>Senior Medicare Patrol<sup>7</sup></i>	<i>Aging and Disability Resource Center<sup>8</sup></i>	<i>Chronic Disease Self Management<sup>9</sup></i>	<i>Congregate Housing for Seniors<sup>10</sup></i>	<i>Longterm Care Partnership<sup>11</sup></i>	<i>Total Federal Award</i>
	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Federal</i>	<i>Private</i>	
<b>SWAA</b>	2,615,465	10,000	259,468	0	74,712	93,733	56,400	39,300	7,577	0	1,200	<b>3,157,855</b>
<b>SCCAA</b>	2,562,815	10,000	182,078	5,384	281,381	95,733	50,900	39,300	51,657	0	1,200	<b>3,280,448</b>
<b>ECAAA</b>	2,521,577	10,000	262,691	8,592	0	93,258	50,900	40,107	8,040	151,001	1,200	<b>3,147,366</b>
<b>NCAA</b>	3,205,620	10,000	313,266	0	0	93,733	50,900	27,701	44,241	0	3,200	<b>3,748,661</b>
<b>WCAA</b>	2,508,165	13,000	318,525	0	0	96,233	50,900	39,300	7,281	203,637	1,200	<b>3,238,241</b>
<b>Total</b>	<b>13,413,642</b>	<b>53,000</b>	<b>1,336,028</b>	<b>13,976</b>	<b>356,093</b>	<b>472,690</b>	<b>260,000</b>	<b>185,708</b>	<b>118,796</b>	<b>354,638</b>	<b>8,000</b>	<b>16,572,571</b>

Source: Connecticut Department on Aging (footnotes added by OLR)

<sup>1</sup> Services designed to help seniors maintain their independence and remain in the community (home and community based supportive services, congregate and home-delivered meals, in-home services for the frail elderly, and disease prevention and health promotion services)

<sup>2</sup> Elder rights protection programs (Long-term Care Ombudsman Office; programs that prevent elder abuse, neglect, and exploitation; counseling and outreach programs)

<sup>3</sup> Supplements OAA funding for nutrition services

<sup>4</sup> A one-time grant following Hurricane Sandy (funding to purchase shelf stable meals and reimbursements for Title III funds used to provide emergency support and transportation services)

<sup>5</sup> Helps seniors get back into the workforce by providing subsidized, on the job training experiences (Senior Community Service Employment Program)

<sup>6</sup> Health insurance information and counseling program for seniors

<sup>7</sup> Recruits and trains retired professionals and other seniors on how to recognize and report health care fraud; provides seniors increased awareness and understanding of healthcare programs to help them protect themselves against Medicare and Medicaid fraud; helps seniors resolve fraud complaints with state and federal fraud control entities

<sup>8</sup> Information hub linking older adults, persons living with disabilities, and caregivers to services and support

<sup>9</sup> Evidence-based chronic disease self-management programs targeted at older adults with chronic conditions

<sup>10</sup> Keeps seniors living in specific HUD-funded housing out of long-term care institutions by providing meals and supportive services

<sup>11</sup> Joint effort by state government and private industry to create an option to help people plan to afford future long-term care without depleting all of their assets



**Table 2: SFY 2013 State Funds**

<b>AAA</b>	<b>CHOICES State Maintenance<sup>1</sup></b>	<b>State Part D<sup>2</sup></b>	<b>State Title III Match<sup>3</sup></b>	<b>State Nutrition<sup>4</sup></b>	<b>Alzheimer Day Care<sup>5</sup></b>	<b>Administration AAAs<sup>6</sup></b>	<b>Elderly Health Promotion<sup>7</sup></b>	<b>Congregate Housing<sup>8</sup></b>	<b>Alzheimer Respite<sup>9</sup></b>	<b>Total State Award</b>
<b>SWAA</b>	3,372	76,000	46,450	498,885	33,597	11,957	-	-	419,219	<b>1,089,480.00</b>
<b>SCCAA</b>	3,350	76,000	45,526	429,053	32,908	11,712	-	-	419,219	<b>1,017,768.00</b>
<b>ECAAA</b>	3,505	76,000	44,832	478,165	32,391	11,528	-	57,455	419,219	<b>1,123,095.00</b>
<b>NCAA</b>	3,371	76,000	56,607	588,138	41,177	14,656	-	-	419,217	<b>1,199,166.00</b>
<b>WCAA</b>	5,128	76,000	44,601	501,701	32,219	11,467	75,822.00	76,162	419,220	<b>1,242,320.00</b>
<b>Total</b>	<b>18,726</b>	<b>380,000</b>	<b>238,016</b>	<b>2,495,942</b>	<b>172,292</b>	<b>61,320</b>	<b>75,822</b>	<b>133,617</b>	<b>2,096,094</b>	<b>5,671,829.00</b>

Source: Connecticut Department on Aging

<sup>1</sup> State support for the state's health insurance information and counseling program for seniors

<sup>2</sup> Medicare Part D supplemental funds

<sup>3</sup> Title III federal match requirement

<sup>4</sup> State's 13 elderly nutrition programs (congregate and home-delivered meals)

<sup>5</sup> Supplements salaries of staff working with individuals with Alzheimer's disease in adult day care settings

<sup>6</sup> Funding for AAA administration

<sup>7</sup> Health screening services, geriatric assessments, follow-up care, and other programs related to health promotion and wellness

<sup>8</sup> Congregate Housing Program federal match requirement

<sup>9</sup> Direct services and information for families of individuals with Alzheimer's Disease

**Table 3: Federal and State Funding Total**

<b>AAA</b>	<b>Total Federal Funds</b>	<b>Total State Funds</b>	<b>Grand Total</b>
<b>SWAA</b>	3,157,855	1,089,480	<b>4,247,335</b>
<b>SCCAA</b>	3,280,448	1,017,768	<b>4,298,216</b>
<b>ECAA</b>	3,147,366	1,123,095	<b>4,270,461</b>
<b>NCAA</b>	3,748,661	1,199,166	<b>4,947,827</b>
<b>WCAA</b>	3,238,241	1,242,320	<b>4,480,561</b>
<b>Total</b>	<b>16,572,571</b>	<b>5,671,829</b>	<b>22,244,400</b>

Source: Connecticut Department on Aging

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