

# **State of Alaska FY2002 Governor's Operating Budget**

Department of Administration  
Home and Community Based Care  
Component

## **Component: Home and Community Based Care**

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### **Component Mission**

Maximize the independence of older Alaskans.

### **Component Services Provided**

Through the Alaska Commission on Aging, provide grants to local and regional non-profit or government agencies for services to help keep frail seniors at home.

- Therapeutic services delivered at adult day care centers
- In-home respite care
- Case management/care coordination services
- Alzheimer's Disease education and family support
- Day treatment for mentally ill seniors
- Substance abuse treatment for the elderly

Grants provide community-based services, targeted to those with limited income and high care needs. Mental Health funds are for grants for certain designated supportive services for persons with Alzheimer's Disease and Related Disorders (ADRD), and their caregivers; care coordination/case management, adult day care, in-home respite care, and family support and education. General funds assist in funding long-term care services to older Alaskans who are not affected with ADRD. MHTAAR funds provide additional services for the rapidly growing number of seniors who are Mental Health Trust beneficiaries by virtue of mental illness, alcoholism and other addictions they experience. Services to address their needs include day treatment for the chronically mentally ill and substance abuse treatment.

### **Component Goals and Strategies**

- To assist the frail and chronically ill seniors to remain in their homes and/or communities as long as possible. The following strategies will be used: Locate seniors at-risk of institutional placement through outreach, community education and collaboration with other service delivery systems. Assist these seniors and their caregivers to secure appropriate community-based care. Explore innovative options for delivering respite services that extend caregivers' ability to continue providing in-home care to older Alaskans. Expand work with the alcohol treatment community to more effectively meet the treatment needs of older Alaskans. Continue to reduce barriers to mental health care of the elderly and provide appropriate treatment.

### **Key Component Issues for FY2001 – 2002**

- Older Alaskans with long-term care needs are not able to adequately meet those needs through home and community-based services in Alaska. This is due to two factors:
  - Rapid growth in the Alaskan senior population, and thus in the need for long-term care services. Alaska has the second most rapidly growing senior population in the country.
  - No recent general fund increases for home and community based long-term care services for those seniors unable to qualify for Medicaid long-term care waivers.
- Older Alaskans and their caregivers greatly prefer home and community-based long-term care over institutional care. This approach is also highly cost effective.

### **Major Component Accomplishments for FY2000**

Number of adult day care clients served: 466

Number of adult day care hours provided:	238,923
Number of in-home respite care clients:	404
Number of in-home respite care hours:	108,303
Number new communities where services are provided:	75
Number of care coordination clients:	1,229

**Statutory and Regulatory Authority**

AS 44.21; AS 47.65; Ch. 48, SLA 1987

**Key Performance Measures for FY2002**

**Measure: The percentage of Alaskans with Alzheimer's disease and related disorders who are served through home-based and community-based programs.**  
*(Added by Legislature in FY2001 version.)*

**Status of FY2001 Performance Measures**

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> <li>The percentage of Alaskans with Alzheimer's disease and related disorders who are served through home-based and community-based programs.</li> </ul>			X		

## Home and Community Based Care

### Component Financial Summary

*All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
<b>Non-Formula Program:</b>			
<b>Component Expenditures:</b>			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	3,598.6	4,142.5	4,795.0
78000 Miscellaneous	0.0	0.0	0.0
<b>Expenditure Totals</b>	<b>3,598.6</b>	<b>4,142.5</b>	<b>4,795.0</b>
<b>Funding Sources:</b>			
1004 General Fund Receipts	1,101.4	1,101.4	1,101.4
1037 General Fund / Mental Health	1,871.6	1,871.6	1,871.6
1092 Mental Health Trust Authority Authorized Receipts	625.6	1,169.5	1,822.0
<b>Funding Totals</b>	<b>3,598.6</b>	<b>4,142.5</b>	<b>4,795.0</b>

**Home and Community Based Care**

**Proposed Changes in Levels of Service for FY2002**

We are proposing the following new projects in our MHTAAR increments:

- Start up of Family Caregiver Support services
- Start up of ADRD training for in-home care providers
- Start up of adult day quality enhancement

**Summary of Component Budget Changes**

**From FY2001 Authorized to FY2002 Governor**

*All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
<b>FY2001 Authorized</b>	<b>2,973.0</b>	<b>0.0</b>	<b>1,169.5</b>	<b>4,142.5</b>
<b>Adjustments which will continue current level of service:</b>				
-Rural Respite Video Training Program	0.0	0.0	-56.1	-56.1
<b>Proposed budget increases:</b>				
-Substance Abuse Treatment for Seniors	0.0	0.0	33.6	33.6
-Innovative Respite	0.0	0.0	75.0	75.0
-Family Caregiver Support	0.0	0.0	300.0	300.0
-ADRD Training for In-Home Providers	0.0	0.0	250.0	250.0
-Adult Day Quality Improvement	0.0	0.0	50.0	50.0
<b>FY2002 Governor</b>	<b>2,973.0</b>	<b>0.0</b>	<b>1,822.0</b>	<b>4,795.0</b>