



SNOHOMISH COUNTY COUNCIL ON AGING LEGISLATIVE AGENDA 2017-2018



Mission: The Snohomish County Council on Aging (COA) is a citizens' advisory group charged with advising Snohomish County Long Term Care and Aging (LTCA), the Human Services Department, and the County Executive on matters of policy and implementation of the Snohomish County Area Plan on Aging in order to advise and advocate for maximum independence and dignity for older (age 60 and older) residents of Snohomish County and all individuals receiving services administered by the Aging and Disability Services Division. The COA's major legislative priorities for 2017-2018 include:

I. PRESERVE WASHINGTON STATE'S LONG TERM CARE SYSTEM AND SENIOR INDEPENDENCE

- A. Provide community-based options that help older adults remain as independent as possible in the community.
- B. Fully fund the Senior Citizens Services Act (SCSA).
- C. Retain Medicaid as an entitlement program which allows for enrollment increases during economic downturns and do not convert to block grants.
- D. Support unpaid family caregivers.

II. RESPOND TO THE NEEDS OF A GROWING OLDER POPULATION

- A. Sustain adequate funding for the Older Americans Act.
- B. Maximize the transportation resources available to older adults and people with disabilities through greater collaboration among transit, planning agencies, the Aging Network, and disability organizations.
- C. Expand options for safe, accessible, and affordable housing for older adults and people with disabilities.
- D. Support Family Caregivers and loved ones by developing Dementia Friendly Communities.

III. EMPOWER AND PROTECT OLDER ADULTS

- A. Reinvest \$2 million of shared Medicare savings to coordinate care for people on Medicare and Medicaid who have the greatest chronic health problems—by avoiding hospital and nursing home visits, care coordination has reduced per capita Medicare costs by 6%, saving \$21 million dollars in the first year.
- B. Preserve the Long Term Care Ombudsman program's ability to advocate on behalf of older adults and people with disabilities who live in nursing homes, assisted living facilities, and adult family homes.
- C. Protect vulnerable older adults from all forms of elder abuse.
- D. Provide geriatric mental health services that meet the unique needs of seniors.

IV. PROMOTE THE ECONOMIC SECURITY OF OLDER ADULTS

- A. Preserve Social Security.
- B. Adopt the Elder Economic Security Index.

- C. Maintain Medicare as a social insurance program that helps protect people from the risks of illness and disability.
- D. Increase access to financial literacy programs to encourage people of all ages to save for retirement.

I. PRESERVE WASHINGTON STATE'S LONG TERM CARE SYSTEM AND SENIOR INDEPENDENCE

Almost 90 percent of people over age 65 wish to age-in-place by staying in their home for as long as possible. ¹ Washington State began reducing its dependence on nursing homes in the early 1990s and creating a system of home and community-based services for low-income seniors and younger adults with disabilities. Caring for people at home costs about one-third of the cost of nursing home care.

Since 1995, area agency on aging case management has saved Washington State over **3.5 billion dollars** in Medicaid spending by promoting home and community-based care as the participant-preferred and cost-effective service alternative to institutional care. Currently, over 4,000 Snohomish County low-income seniors and adults with disabilities receive in-home care and case management services.

- A. PROVIDE COMMUNITY-BASED OPTIONS THAT HELP OLDER ADULTS REMAIN IN THEIR HOMES AND AVOID NURSING HOMES.**
 - Encourage seniors to remain independent and assist them in utilizing their talents, skills, and experiences.
 - Preserve mobile home communities.
- B. FULLY FUND THE SENIOR CITIZENS SERVICES ACT (SCSA).**
 - In 1977 the Washington State Legislature passed the Senior Citizens Services Act (SCSA) to establish community-based services that help seniors stay home for their long term care. Currently funded at \$8.4 million dollars per year, SCSA helps over 323,000 older adults annually by funding transportation, personal care services, home-delivered meals and other vital services.
 - Although the 60+ population continues to grow, the per capita amount of SCSA funds has been decreasing since 1998.
- C. RETAIN MEDICAID AS AN ENTITLEMENT PROGRAM WHICH ALLOWS FOR ENROLLMENT INCREASES DURING ECONOMIC DOWNTURNS AND DO NOT CONVERT TO BLOCK GRANTS.**
 - Continue to means-test program applicants.
 - People with Medicaid must be able to plan on a sustainable level of benefits.
 - Provide for access to comprehensive health care including primary, specialty, and acute care, prescription drugs, mental health, substance abuse, and prenatal care.
- D. SUPPORT UNPAID FAMILY CAREGIVERS**

- Increase support to unpaid family caregivers enabling them to provide quality and sustained levels of care for seniors.
- Enable Area Agencies on Aging to provide a full complement of services for our seniors and their caregivers.
- Support family caregivers to reduce the mental, physical and emotional stress and exhaustion from their efforts to keep seniors in their homes rather than placed in state-funded facilities. These efforts reduce state costs greatly.
- Support includes, but is not limited to, the development of dementia friendly communities.

II. RESPOND TO THE NEEDS OF A GROWING OLDER POPULATION

Every day almost 10,000 Baby Boomers turn 65. By 2030, Washington State’s elderly population is forecast to reach 1,675,800 persons or one-fifth of the state’s total population. By 2025, almost 25% of Snohomish County’s population will be age 60+ or nearly a quarter of a million people.²

A. MAINTAIN FUNDING OF THE OLDER AMERICANS ACT.

- The Older Americans Act (OAA) of 1965 created a network of federal, state, and local agencies and organizations that provide services to older persons living in their homes and communities. Local Area Agencies on Aging like Snohomish County Long Term Care & Aging (LTCA) serve a defined geographic area and work with a citizens’ advisory board such as the Snohomish County Council on Aging to plan and contract with providers in order to create a local system of services for older adults.
- The OAA provides older adults with much-needed services that include congregate and home-delivered meals, case management, legal services, transportation and caregiver support. For years, OAA funding has not kept pace with inflation or the growing population of individuals eligible for services, yet demand by at-risk older adults in need of supportive services has risen and will continue to rise with the growth of the aging population.

B. MAXIMIZE THE TRANSPORTATION RESOURCES AVAILABLE TO OLDER ADULTS AND PEOPLE WITH DISABILITIES THROUGH GREATER COLLABORATION AMONG TRANSIT, PLANNING AGENCIES, THE AGING NETWORK, AND DISABILITY ORGANIZATIONS.

- The average older man will outlive his ability to drive a car by 6 years while the average older woman will outlive her ability to drive by 11 years.³

- Advocate for paratransit services that are easily utilized, comprehensive, reliable, and with a simplified application process for people who may be eligible for the program.
 - Work to restore Sunday and holiday service and to reinstate canceled bus routes that affect riders of all ages.
 - Provide travel training to older adults and people with disabilities who want to learn how to use the public transportation system.
- C. EXPAND OPTIONS FOR SAFE, ACCESSIBLE, AND AFFORDABLE HOUSING FOR OLDER ADULTS AND PEOPLE WITH DISABILITIES.**
- Develop housing options for older adults who cannot get beds in the county's overcrowded shelters.
 - Improve community-based living options such as adult family homes.
 - Protect and preserve existing subsidized senior housing.
 - Adopt policies and create incentives to encourage sustainable, universal design features in new construction and remodeling projects.

III. EMPOWER AND PROTECT OLDER ADULTS

Many older people continue to play important roles in their communities as employees, volunteers, elected and appointed officials, citizens, and family members. Older adults who are socially isolated and not connected to their communities are particularly vulnerable. Programs that empower and connect older adults to services, other people and their communities are vital.

- A. PROTECT VULNERABLE OLDER ADULTS FROM ALL FORMS OF ELDER ABUSE.**
- Reinvesting \$2 million of the shared Medicare savings in health home care coordination in HCA will assure seniors and people with disabilities can improve health and avoid expensive hospital and nursing home stays.
 - Fund Adult Protective Services, LTC Ombudsman, and other programs that protect older individuals from harm, whether physical, sexual, emotional abuse, neglect, abandonment, financial exploitation or self-neglect.
 - Older individuals face a higher risk of becoming a victim of elder abuse if they have dementia; are socially isolated; are in poor physical health; or if the perpetrator and/or the victim has mental health or substance abuse issues.
- B. PROVIDE GERIATRIC MENTAL HEALTH SERVICES THAT MEET THE UNIQUE NEEDS OF SENIORS.**

- An estimated 20% of people age 55 years or older experience some type of mental health concern with the most common being anxiety, severe cognitive impairment and mood disorders such as depression or bipolar disorder.⁴
- Guarantee reasonable access to mental health services to all seniors.
- Expand successful Snohomish County programs already serving seniors such as Geriatric Depression Screening, Senior Peer Support, and Hope Options.
- Early identification and treatment of mental health problems helps individuals maintain independence and avoid severe illnesses which require expensive institutionalized care.

IV. PROMOTE THE ECONOMIC SECURITY OF OLDER ADULTS

Almost 3.5 million older adults or 9% lived below the poverty level in 2010. However, this overall number conceals that older minorities experience higher rates of poverty than whites and more older women than older men live in poverty. Approximately 6.8% of elderly whites were poor while 18% of elderly African-Americans, 14.6% of older Asians, and 18% of elderly Hispanics lived in poverty. In 2010, 10.7% of older women lived in poverty compared to 6.7% of older men.⁵

An older adult may live above the federal poverty level but still experience economic insecurity. An estimated 20 million Americans aged 60+ are considered to be economically insecure, living at or below 250% of the federal poverty level (approximately \$27,225 per year for a single person).⁶ These older Americans struggle to meet daily expenses and live modestly but can easily be pushed into poverty by high medical costs, the loss of a spouse or the need to raise a grandchild.

A. PRESERVE SOCIAL SECURITY

- More than half of Washington residents age 65 and older rely on Social Security for 50% or more of their income. For 25% of older Washingtonian residents, Social Security is their only source of income.⁷
- Ensure Social Security's long term solvency.
- Guarantee inflation protection and progressive benefits.
- "Do No Harm" to the vulnerable groups that rely on Social Security.
- Oppose privatization and the establishment of private accounts.
- Educate and encourage seniors to plan and save for retirement with Social Security, private savings, pensions and investments.

B. PROMOTE THE ELDER ECONOMIC SECURITY INDEX

- This index identifies the basic costs of living by state and by county rather than a survival existence for seniors. Living expenses differ depending on whether

the older adult is single or part of a couple, a renter or home owner, and healthy or in poor health.

- In Snohomish County, an older adult (age 65+) who rents a one bedroom apartment would need \$2,176 per month or \$26,112 per year to cover basic living expenses while an older couple (both age 65+) still paying a mortgage would need \$3,652 per month or \$43,824 per year to live modestly.⁸
- Target older adults on the basis of greatest economic need but educate all older adults and people planning for retirement about the need for economic security.

C. MAINTAIN MEDICARE AS A SOCIAL INSURANCE PROGRAM THAT HELPS PROTECT PEOPLE FROM THE RISKS OF ILLNESS AND DISABILITY.

- Ensure the long term financial stability of the Medicare program.
- Standardize benefits and cost-sharing across Medicare Advantage plans and Part D prescription drug plans to reduce confusion and make it easier for people with Medicare to understand costs and benefits.
- Continue efforts to revise Medicare reimbursement policy including reductions in geographical inequities.

¹ AARP Public Policy Institute and National Conference of State Legislatures, *In Brief 190: Aging In Place*, December 2011. <http://assets.aarp.org/rgcenter/ppi/liv-com/ib190.pdf>

² *Helping Seniors Thrive, Not Merely Survive: Snohomish County Area Plan on Aging 2012-2015*, Snohomish County Human Services Long Term Care and Aging, 34-35. www.co.snohomish.wa.us/documents/Departments/Human_Services/Aging/Area_Plan/B-1nowtrmrk.pdf.

³ Daniel J. Foley et al, "Driving Life Expectancy of Persons Aged 70 Years and Older in the United States," *American Journal of Public Health* 92, August 2002, Issue 92, No. 8 (2002):1284-1289.

⁴ Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. *The State of Mental Health and Aging in America Issue Brief 1: What Do the Data Tell Us?* Atlanta, GA: National Association of Chronic Disease Directors: 2008.

⁵ All statistics in this paragraph taken from *A Profile of Older Americans: 2011*, Administration on Aging, U.S. Department of Health and Human Services.

http://www.aoa.gov/AoAroot/Aging_Statistics/Profile/2011/docs/2011profile.pdf

⁶ *Economic Security Fact Sheet*, National Council on Aging, Washington, D.C. Updated February 2012.

⁷ *Social Security: 2012 Washington Quick Facts*, AARP, 2012.

⁸ *Snohomish County Area Plan on Aging 2016-2019*, Section B, P.3.

<http://www.snohomishcountywa.gov/DocumentCenter/View/7118>

For more information on the Snohomish County Council on Aging or the 2017-2018 Legislative Agenda, please contact: Aime Fink, Supervisor

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