



Accessing Community Resources for People Aging with HIV

2022 National Ryan White Conference on HIV Care and Treatment

August 25, 2022

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Vision: Healthy Communities, Healthy People



Disclosures 1

• CDR Cathleen Davies has no relevant financial or non-financial interests to disclose.





Learning Objectives

By the end of this session, participants will be able to:

- Learn about the community aging resources and partnerships that RWHAP recipients and providers need to identify and cultivate.
- Explain how to identify and develop partnerships with community aging resources.
- Understand the experience of RWHAP recipients, providers, and people aging with HIV in identifying and utilizing community aging resources.





Health Resources and Services Administration (HRSA)

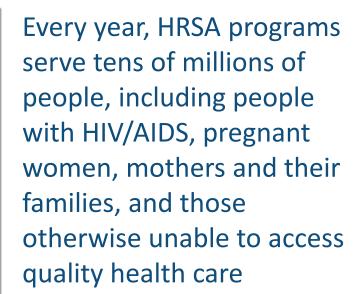
Overview



Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged



HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities







HRSA's HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.





HRSA's Ryan White HIV/AIDS Program (RWHAP) Overview

- Provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV.
- Funds grants to states, cities, counties, and local community-based organizations to improve health outcome and reduce HIV transmission.
 - Recipients determine service delivery and funding priorities based on local needs and planning process.
- Provided services to nearly 562,000 people in 2020—more than half of all people with diagnosed HIV in the United States.
- 89.4% of RWHAP clients receiving HIV medical care were virally suppressed in 2020, exceeding national average of 65.5%ⁱ.





Contact Information

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The Administration for Community Living: Aging and HIV

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Office of Policy Analysis and Development

Administration for Community Living





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Agenda



- An overview of ACL and its network of programs and services;
- ACL's programs and services serving people aging with HIV;
- Partnering with the ACL aging network: Case examples.

ACL Mission and Vision



Mission

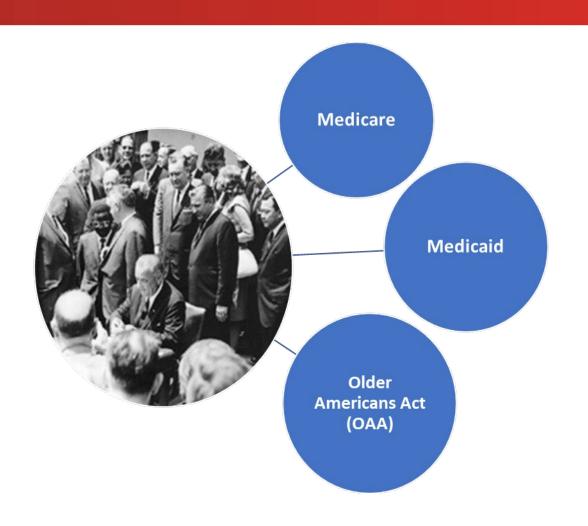
Maximize the independence, well-being, and health of older adults, people with disabilities, and their families and caregivers

Vision

All people, regardless of age and disability, live with dignity, make their own choices, and participate fully in society

1965: Three Important Programs Enacted





"Every State and every community can now move toward a coordinated program of services and opportunities for our older citizens." President Lyndon B. Johnson, July 1965



OAA - Seven Titles Title I: Objectives



- Title II: Establishes Administration on Aging (AoA) and National Aging Service Network
- Title III B: Supportive Services & Senior Centers
- Title III C: Nutrition Services
- Title III D: Disease Prevention and Health Promotion
- Title III E: National Family Caregiver Support Program

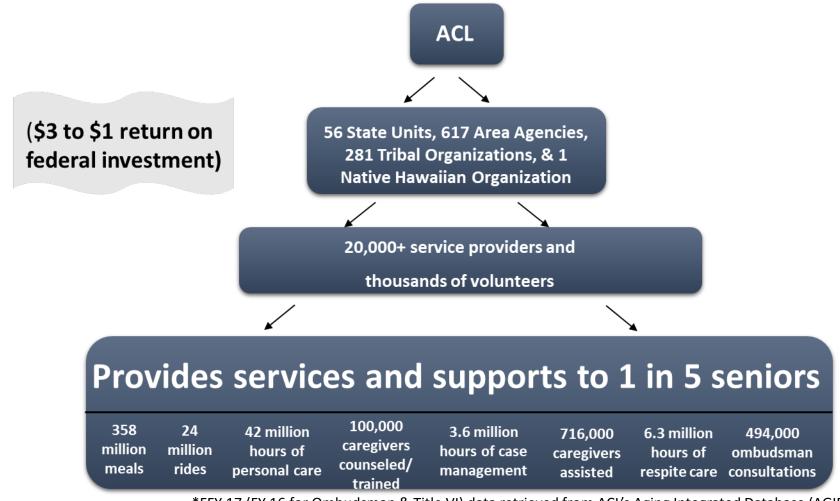
OAA - Seven Titles (Cont'd)



- Title IV: Discretionary Projects and Programs (Program Innovations, Training, Demonstrations)
- Title V: Community Service Employment for Older Americans (Administered by the Department of Labor) – Subsidized Employment & Training for Low Income Seniors 55 and over
- Title VI: Programs and Services for American Indians, Alaska Natives & Native Hawaiian Elders
- Title VII: Vulnerable Elder Rights Protections

The Aging Network's Community-Based Services Helps 11 Million Older Adults And Their Caregivers Remain At Home





^{*}FFY 17 (FY 16 for Ombudsman & Title VI) data retrieved from ACL's Aging Integrated Database (AGID): https://agid.acl.gov/Default.aspx

The Older Americans Act

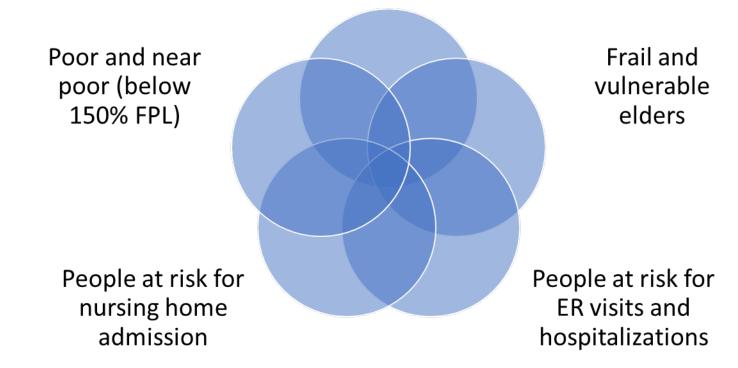


...assures that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

Who We Serve Through the Aging Network



Virtually ALL adults 60 and older are eligible for OAA services



Who We Serve cont'd



- The aging network's communitybased services provide supports to 1 in 5 seniors
 - 358 million meals
 - 24 million rides
 - 42 million hours of personal care
 - 100,000 caregivers counseled/ trained
 - 3.6 million hours of case management
 - 6.3 million hours of respite care
 - 494,000 nursing home ombudsman consultations

A Person-Centered Approach



Personal Care

Access/Services/
Information

Transportation

Home Health Aide

Chore/ Housekeeping

Congregate Meals

Grocery Shopping

Benefits Counseling

"What will I need to stay healthy in my own home as I get older?"

Meal Preparation

Adult Day Care

Home Delivered Meals

Financial Plan/ Management

Legal Assistance

Socialization/ Senior Center Home Modification Medication Management

Older Adults Equity Collaborative









Collaborating to Ensure Access and Equity in Aging Services Programs







New State Plan Guidance



- New State Plan Guidance issued August 2021
- Encouraged states to take a broad approach to ensuring services are reaching older adults in greatest social need in line with recent EOs by President Biden (e.g., LGBTQ+)
- Requires states to include in future state plans how they are serving older adults living with HIV/AIDS

Chronic Disease Self Management Programs (CDSMP): Positive Self-Management Program (PSMP)



- Stanford developed suite of Chronic Disease Self Management Programs <u>CDSMPs</u> (see also <u>Center for Health Aging</u>)
- Positive Self Management Program specifically designed for people managing HIV/AIDS
- Helps participants learn how to establish mutual support and increase their confidence in managing their health and maintaining active and fulfilling lives
- 2½ hour weekly session for 6 weeks, facilitated by two (2) trained leaders, who are also people living with HIV/AIDS

Engaging Individuals Living with HIV/AIDS



- Central Maine Area Agency on Aging (ME)
 - Working with MaineGeneral Health to provide PSMP for the state's population of people living with HIV/AIDS.
- Council for Jewish Elderly (IL)
 - 2021 Falls Prevention grantee has proposed to implement two falls prevention programs (<u>Bingocize</u> and <u>OTAGO</u>) to reach over 1,300 older adults in Illinois and New York living with HIV and low-income, minority, and LGBTQI+ communities
- Open Hand Atlanta (GA)
 - Offering the CDSMP to people living with HIV/AIDS, in conjunction with their signature nutrition education programs and services.
 - Contracts with Ryan White HIV/AIDS Program Medical Providers.
 - 291,798+ meals to 539 people living with HIV/AIDS in 2020
- Project Open Hand (CA)
 - Sister organization with Open Hand Atlanta, with both organizations belonging to the Food is Medicine Coalition.
 - Provides medically tailored meals to clients living with HIV/AIDS.

State Health Insurance Assistance Program (SHIP)



Mission

Our mission is to empower, educate, and assist Medicare-eligible individuals, their families, and caregivers through objective outreach, counseling, and training, to make informed health insurance decisions that optimize access to care and benefits.

- **54 Grantees**: One every state, DC, PR, & USVI (2/3 in State Units on Aging; 1/3 in Dept of Insurance)
- Provide **one-on-one assistance** to Medicare beneficiaries who prefer or need information, counseling, and enrollment assistance beyond what they are able to receive on their own through other sources
- Built on over **3,300 local partnerships** with AAAs, CILs, senior centers, and other community organizations to host 14,000 team members (approx. 50% are volunteers)

Find your local SHIP: www.shiphelp.org

Opportunities to Partner



- Outreach & Education
 - SHIP grantees are available to conduct community outreach and education
- One-on-One Assistance and Issue Resolution
 - SHIP grantees are available to provide one-on-one assistance to Medicare beneficiaries on any questions and/or issues they may have pertaining to Medicare benefits and access
- Cross Training
 - Ryan White case managers can become SHIP counselors and SHIP counselors can be trained on Ryan White funded programs

Partnership Example: Iowa



- Partnership between IA SHIP and ADAP began in 2013/2014
 - Initiated by the Ryan White program as they began seeing an uptick in clients who were aging into Medicare
- Started with a referral relationship that grew into cross training for Ryan White Field Benefit Specialists
 - Larger Ryan White programs now have fully trained and certified SHIP counselors
 - Currently have 6 trained ADPD field benefit specialists and one volunteer coordinator at Ryan White
 - Smaller programs have a referral process to send clients to the One Iowa (SHIP site and nonprofit targeting the LGBTQIA community)

Example: Area Agency on Aging Region One, Maricopa County AZ



- HIV Care Connections
 - Case management
 - Central eligibility
 - Insurance cost sharing assistance
 - HOPWA support
 - PrEP and PEP
 - Transportation
- 5,000 unduplicated clients per year
 - 48% over the age of 50
 - 30% over the age of 60

- Programs include....
 - SHIP
 - Long Term Care Ombudsman
 - Title IIIB Legal Services
 - Congregate and home delivered meals
 - Family Caregiver Respite
 - Chronic Disease Self Management
 - Positive Self Management starting in the fall
 - Senior HelpLine Information and Referral
 - Grocery shopping and deliver

Con't: Area Agency on Aging Region One



- Central Eligibility Office that captures all Ryan White beneficaries at application and renewal, including older adults
- Case managers screen for all benefits, including OAA-funded, and can seamlessly integrate service delivery for client
- Decades of aging expertise in house to ensure service and supports are person centered ->
 - Prepare in advance for Medicare eligibility and enrollment and triple eligibility (Medicare, Medicaid, Ryan White)
 - Proactively manage medical care and multiple co-morbidities
 - Ensure people aging with HIV are connected with appropriate services early including psycho-social and behavioral health
 - Collaborate with medical providers, HIV service organizations, government entities and community resources

Resources from ACL + Contact



- Information on all ACL programs and services: <u>acl.hhs.gov</u>
 - Chronic Disease Self Management & Education Programs
 - State Health Insurance Assistance Partnership (SHIP)
- ACL HIV/AIDS webpage
- Older Adults with HIV/AIDS: A Growing Population (blog for National Aging and HIV Awareness Day)
- Eldercare Locator (acl.gov)

Contact:





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Area Agencies on Aging: Local Leaders in Aging and Community Living

Amy Gotwals,

Chief of Public Policy and External Affairs





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Connecting You to Community Services





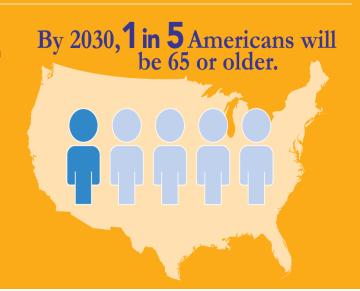






An Aging Nation

Over the next two decades, the proportion of the U.S. population over age 60 will dramatically increase as the baby boomers reach this milestone. By 2030, more than 70 million Americans will be 65 and older, twice the number in 2000.1



AGING AND HIV

Thanks to effective **HIV treatment**, the number of **older adults** living with HIV is **increasing**.



Older Americans Act (OAA) of 1965, P.L. 89-73, July 14, 1965





Lyndon Johnson signing the OAA, July 14, 1965.

All Area Agencies on Aging (AAAs) play a key role in:



Planning

Developing

Coordinating

Delivering

A WIDE RANGE OF LONG-TERM SERVICES AND SUPPORTS

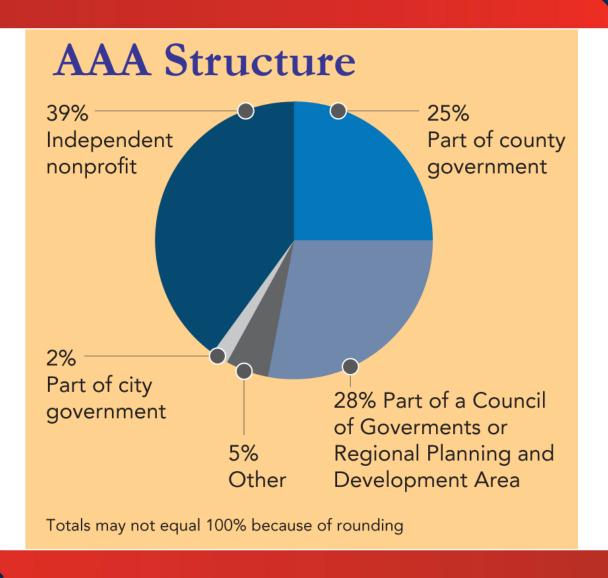
to consumers in their local planning and service area (PSA)

Nationwide Network with a Local Flavor



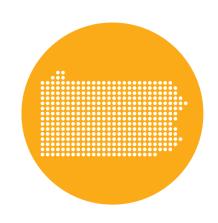
- There are 617 AAAs serving older adults in virtually every community in the nation.
- In a few small or sparsely populated states, the state serves the AAA function (NH, DE, RI, ND, SD, WY, NV).
- The OAA is foundational for all AAAs, but because the law calls for local control and decision-making, AAAs adapt to the unique demands of their communities to provide innovative programs that support the health and independence of older adults.







AAAs vary widely in size as each state determines how many service areas to establish, which then determines the number of operating AAAs. For example, Wisconsin has 3 AAAs, but New York has 59.

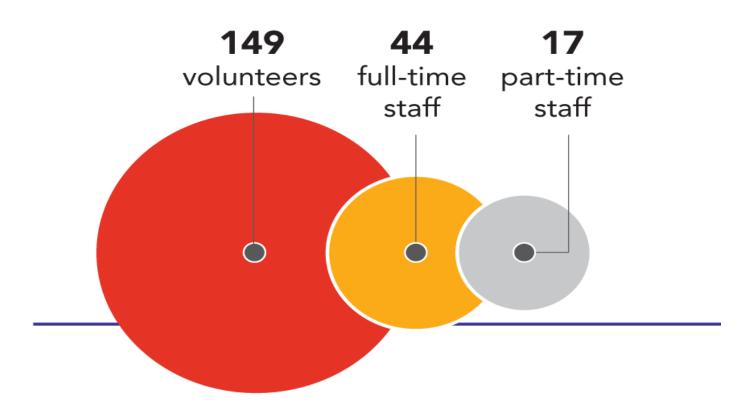






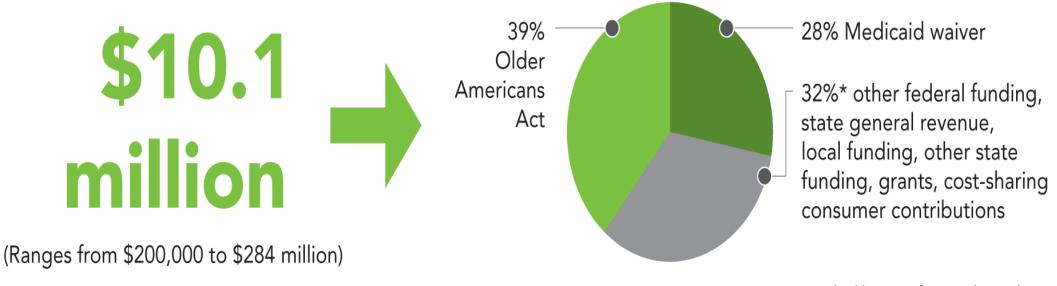


Average AAA Workforce





Average AAA Budget By funding proportion, 2016



^{*}Ranked by most frequently cited



All AAAs offer five core services under the OAA:

NUTRITION







ELDER RIGHTS

includes abuse prevention and long-term care ombudsman programs



OAA CORE SERVICES



SUPPORTIVE SERVICES

Information and referral
In-home services
Homemaker & chore services
Transportation
Case management
Home modification
Legal services

The average AAA offers more than a dozen additional services.

The most common non-core services offered by AAAs are:

- Insurance Counseling (85%)
- Case Management (82%)
- Senior Medicare Patrol (44%)

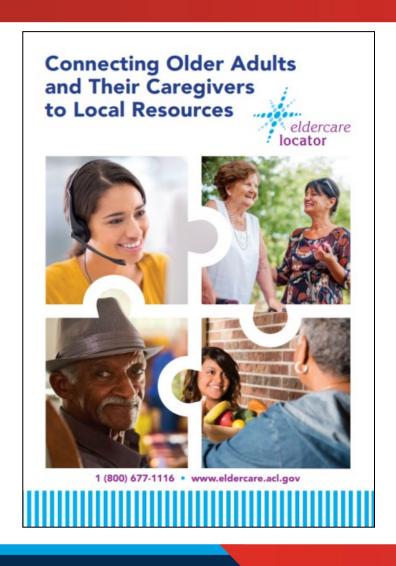
Outreach



- A core role of AAAs is to create local information and referral/assistance (I&R/A) hotlines to help consumers find aging and other HCBS programs.
- With these resources and a portfolio of other outreach tools including public education, staff and volunteers, Aging and Disability Resource Centers (ADRCs) and State Health Insurance Assistance Programs (SHIPs), AAAs are able to assist clients match services and solutions to their individual needs, enabling consumers to age in place with increased health, safety and independence.

The Eldercare Locator National Call Center

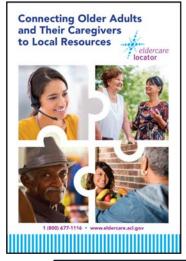


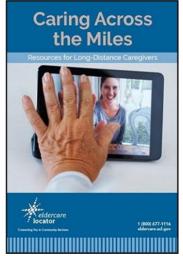


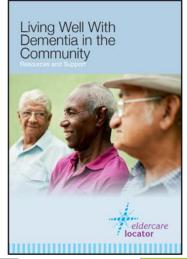
800.877.1116Monday-Friday,
9:00 am ET to 8:00
pm ET

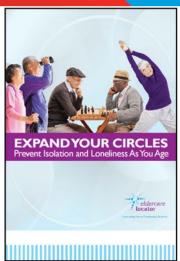
eldercare.acl.gov

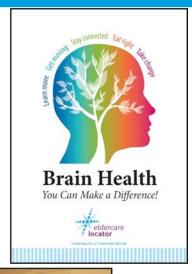


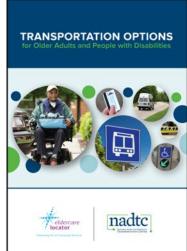


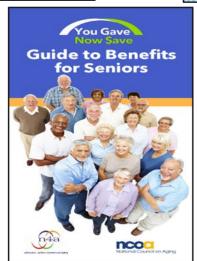


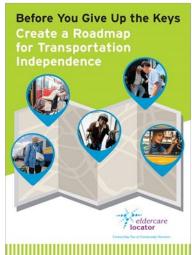


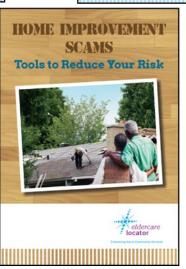












And now...DIAL!



 Also from ACL with leadership from disability groups and support from USAging

DIAL@usaginganddisability.org

https://acl.gov/DIAL



Many Names, Many Partners: One Mission 1



While only designated AAAs can use the Area Agency on Aging title, not all AAAs include "Area Agency on Aging" in their operating name.

For example, a nonprofit AAA may be called "Senior Resources Alliance" or a county-based AAA may use "ABC County Office on Aging."

Many Names, Many Partners: One Mission 2



There are many other well-known programs and services that are administered by AAAs directly or in partnership with other agencies and entities.

But no matter what program or service a AAA offers—such as serving as a State Health Insurance Assistance Program (SHIP) or an Aging and Disability Resource Center (ADRC)—it remains a AAA.

Many Names, Many Partners: One Mission 3



Other AAA Roles

Percent of AAAs	Designated as	Their role
77%	Aging and Disability Resource Centers (ADRCs)	Help all consumers connect to services regardless of age or disability.
68%	State Health Insurance Assistance Programs (SHIPs)	Provide direct health insurance counseling to older adults (e.g., selecting a Medicare Part D plan).
Percent of AAAs	Serve as	Their role
59%	Local Long-Term Care Ombudsman	Funded by OAA, act as a resource for consumers living in nursing homes and other institutions.

Many Names, Many Partners: One Mission 4



Partnerships

AAAs on average, have 11 informal and 5 formal partnerships with other entities.

These are some of the most common. By percentage of AAAs

Partnership	
Adult Protective Services	85%
Transportation agencies	84%
Medicaid agencies	83%
Advocacy organizations	82%
Emergency preparedness agencies	79%
Hospitals	79%
Mental health organizations	77%
Disability service organizations	75%
Public Housing Authority	75%
Faith-based organizations	66%
Community health care providers	60%
Businesses	46%
Managed Care/HMO networks	42%



The most common sources of non-OAA funding leveraged by AAAs for additional programs include:

State General Revenue

Medicaid

65% 56%

Local Funding

45%

Other State Funding

Emerging Sources

Transportation

16% 15%

Veterans

Health care payer

Non-OAA Sources of Federal Funds



- Medicaid waivers
- State Health Insurance Assistance Program (SHIP)
- Federal Block Grants: Community Services Block Grant, Social Services Block Grant, Community Development Block Grant
- Low Income Home Energy Assistance Program (LIHEAP)
- Demonstration/other \$ from ACL (falls prevention, Chronic Disease Self Management Education Programs, ADRCs)
- Veteran-Directed Home and Community Based Services programs
- Senior Corps programs (Corp. for National & Community Service)
- Demos under Centers for Medicare and Medicaid Services (CMS)

A Network on the Move



Evidence-Based Health and Wellness: Ninety-three percent of AAAs now offer these tested and proven approaches to supporting older adults' health. (That's an 85 percent increase since 2007.) Starting in October 2016, all Older Americans Act Title III D funds must be used for evidence-based programs, so that number will rise.

70%

Livable Communities: Livable Communities are good places to grow up and grow old. Seventy percent of AAAs are involved in efforts to make their communities more livable and/or dementia-friendly.

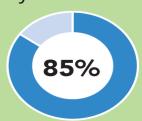


AAAs Serve a Broad Range of Consumers

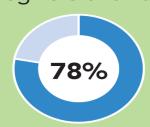
While all AAAs serve adults age 60 and older and their caregivers, they also serve younger consumers, including...

Percentage of AAAs that serve consumers under age 60, by category:

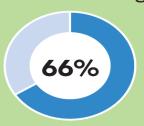
Consumers with a disability or chronic illness



Caregivers of all ages



Veterans of all ages





Most commonly offered services to people under age 60 include:

Assessment for long-term care service eligibility

Information and referral/assistance/outreach

Fiscal intermediary for self-directed services

Options counseling

Care transitions services

Reaching Your AAA



- Look it up via <u>usaging.org</u> or <u>eldercare.acl.gov</u>
- Make sure you know all that your local AAA can offer to you and members of your community (e.g., meals, rides, home modification, home health, caregiver respite, etc.)
 - Check their website or just call!
 - Start with the director or perhaps director of programs, community outreach or partnerships
 - Get to know the I&R and case management staff
 - Many programs won't be branded with AAA or OAA, but the AAA should know about all aging programs in their area
 - Advocacy opportunity: Advisory Councils





USAging

Leaders in Aging Well at Home

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Advocacy and Services for Elders

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Advocacy & Services for LGBTEIders

We refuse to be invisible®







The nation's largest and oldest organization dedicated to improving the lives of LGBT older people.

Distrust of Mainstream Institutions















The SAGE Centers



The SAGE Centers are full-time centers for lesbian, gay, bisexual and transgender (LGBT) older people in different neighborhoods in New York City



SAGE Center Programs and Services





- Daily Meals & Nutrition
- Benefits Counseling & Legal Assistance
- Health Education & Support
- Fitness
- Arts & Culture

Care Management Services





- Case Management
- Caregiving
- Friendly Visiting
- SAGEVets
- SAGEPositive

NYC LGBT-Friendly Elder Housing

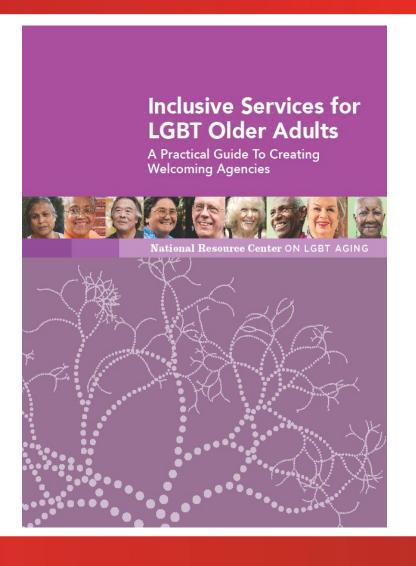




Crotona Park, Bronx and Fort Greene, Brooklyn

National Resource Center on LGBT Aging





SAGECare



SAGE CARE

▲ Important Update: SAGECare Training and Credentialing

Please watch this important message from Tim Johnston, PhD, Senior Director of National Projects.



LTC Equality Index





DEMOGRAPHICS

There are currently between 1.5 and 3.8 million adults over the age of 65 in the United States who identify as lesbian, gay, or bisexual¹ (LGB) and this number is projected to double by 2030.2 According to the 2010 census report, 99.3% of counties in the U.S. are home to LGB individuals, and estimates from The Williams Institute indicate that there are hundreds of thousands of older adults who are transgender.

While older lesbian, gay, bisexual and transgender (LGBT) adults confront the same issues everyone else does when choosing aging services — where to live, how

to afford rising costs of housing and healthcare, and how to stay with loved ones — the reality of life in long-term care for LGBT people can be drastically different from their non-LGBT peers. Stigmatization, lack of identity-affirming treatment and experiences of discrimination and violence can lead to avoiding necessary services, chronic stress and increased social isolation among LGBT older adults. Additionally, approximately 20 percent of LGBT older adults. Additionally, approximately 20 stigma and have experienced more LGBT-related discrimination than their white counterparts, leaving them more acrisis of not seeking or receiving the services they need.

CONCERNS OF LGBT OLDER ADULTS REGARDING LONG-TERM SERVICES AND SUPPORT

A recent national survey of LGBT older adults by AARP found that more than 60 percent of those surveyed were concerned about how they would be treated in a longterm care setting, including fear that they might be refused or receive limited care; be in danger of neglect or abuse; or face verbal or physical harassment, and being forced to hide or deny their identity once again.4 Many of today's LGBT elders, particularly those who have faced severe prejudice in their lives, have chosen to remain closeted to service providers. This in turn often leads to service providers that do not realize that they are serving LGBT individuals, so they don't take measures to make their facilities LGBT inclusive. The AARP survey found that more than 82 percent of respondents would be more comfortable if long-term care communities took actions to intentionally affirm LGBT adults.

"WITHIN THE NEXT TWO WEEKS I WILL BE GOING INTO ASSISTED LIVING. DUE TO MY FINANCIAL SITUATION, I WILL HAVE TO SHARE A ROOM WITH ANOTHER MAN. THE THOUGHT OF GOING BACK INTO A CLOSET IS MAKING ME ILL. FRANKLY, I'M AFRAID OF TELLING ANYONE THAT I'M GAY."

-Anonymous, 73 years old, Sylmar, CA



(over)



National LGBT Elder Hotline

Older?

LGBT?

Need someone to talk to?

The SAGE Hotline is open 24/7 in English & Spanish:

877-360-LGBT









National Resources for LGBT Older People & Older People Living with HIV





Prepare for COVID-19 - a fact sheet with tips and resources to assist with planning



COVID-19 Resources
Listing – a growing list of resources across the aging network



Residents' Rights and the LGBT Community – fact sheet detailing resident rights for LGBT people in long-term care.



My Personal Directions – a form to help ensure wishes are in writing to help ensure quality of care when living in long-term care and health settings.

SAGEConnect





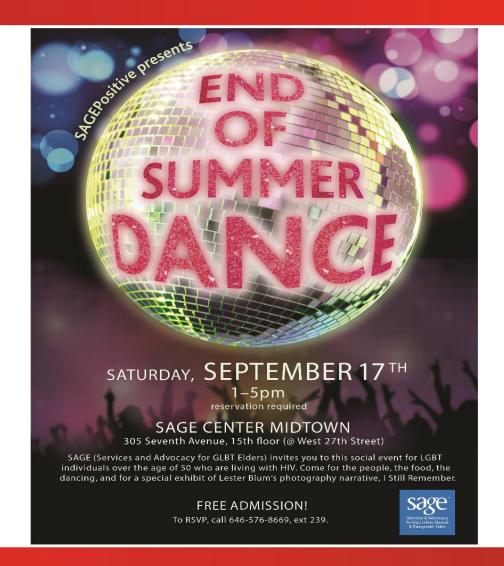
www.sageusa.org/sageconnect/

SAGEPositive

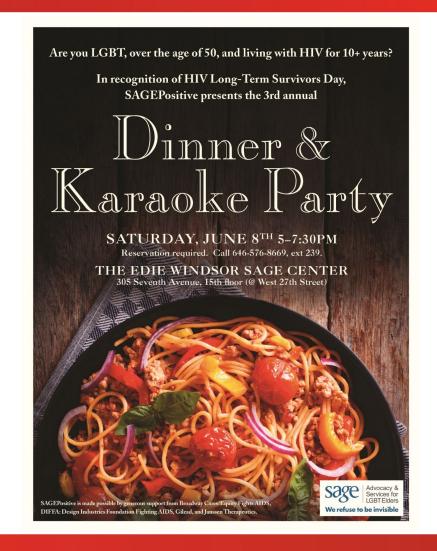


How SAGE cares for older long-term survivors of HIV.

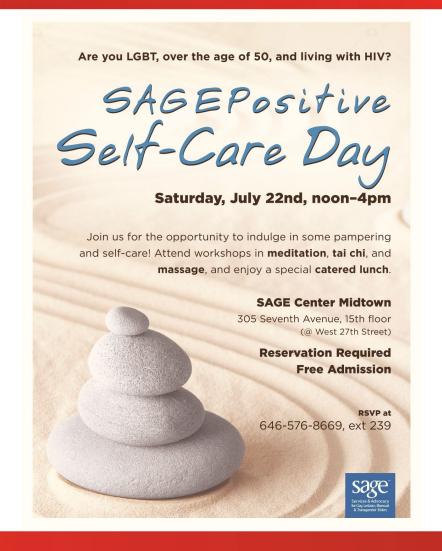
















What do the new OAA language and the ACL guidance say?

The 2020 reauthorization of the OAA requires the aging network to:

- Engage in outreach to LGBTQ+ older people
- 2. Collect data on their needs
- 3. Collect data on whether **you** are meeting those needs

This language is found in §3026 Area Plans and §3027 State Plans.

§3027 states:

(30) The plan shall contain an assurance that the State shall prepare and submit to the Assistant Secretary annual reports that describe —

(A) data collected to determine the services that are needed by older individuals whose needs were the focus of all centers funded under subchapter IV in fiscal year 2019;

(B) data collected to determine the effectiveness of the programs, policies, and services provided by area agencies on aging in assisting such individuals; and

(C) outreach efforts and other activities carried out to satisfy the assurances described in paragraphs (18) and (19) of section 3026(a) of this title.

Updated Older Americans Act Language & New ACL Guidance on LGBTQ+ & HIV Inclusion 2



What do the new OAA language and the ACL guidance say?

The Administration for Community Living's August 5, 2021 Guidance for Developing State **Plans on Aging** details how and why ACL believes that LGBTQ+ older people and people living with HIV are the greatest social need populations.

This guidance applies to all state plans set to take effect on or after October 1, 2022. ACL states:

"As you develop your State Plans, ACL encourages states and AAAs to take a broad approach to ensuring services are reaching older adults in greatest social need in line with recent Executive Orders by President Biden. These populations include: individuals who are Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders, and other persons of color, members of religious minorities, lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons, persons with disabilities, and persons who live in rural areas."

"To the extent possible, states should describe how greatest economic and social need are determined, the number and percentage of such individuals in the state and the data sources used for this determination, and the number and percentage of such individuals receiving OAA services."

"State Plans must include measurable objectives that address State Plan requirements within each topic area below that is applicable to your state..."

Resources



- www.sageusa.org
- https://www.lgbtagingcenter.org/
- https://www.sageusa.org/what-we-do/national-lgbthousing-initiative/
- atax@sageusa.org

Contact Aaron Tax





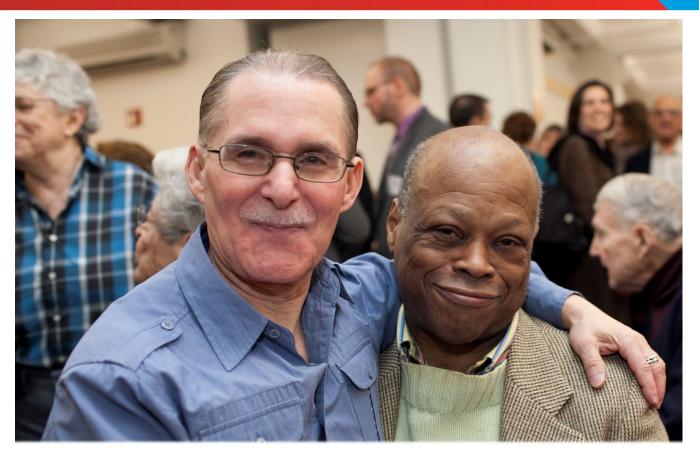
Aaron Tax

Director of Advocacy

SAGE

Email: atax@sageusa.org





Thank you!

Q&A



Any Questions?





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