I’m almost home.

I’m home.

I’m going home.

I’m recovering at home.

My father is home.

Council on Aging
2014 Annual Report
Independence. Resources. Quality of Life.
At Council on Aging, we live by a simple mission... to help people remain independent in their own homes.

Each year, we help make this possible for more than 20,000 older adults and people with disabilities. Each situation is unique and requires a personalized approach. That’s our niche; it’s what makes us different.

For frail seniors and others with disabilities, independence involves help and a journey. The road home may be short and straight – home-delivered meals and rides to the doctor’s office. Or, it may be a bit longer with pit stops and detours – a new home and support system after weeks, months, or even years in a nursing home. No matter the road, Council on Aging and our network of providers and community partners are there, every step of the way.

This report is full of stories that demonstrate the care and coordination that goes into helping our clients gain and preserve their independence. We hope you’ll take a few minutes to read their stories and join us on the journey.

**Our Mission**
Enhance people’s lives by assisting them to remain independent at home through a range of quality services.
Our Senior Leadership Team and Board Chairman offer thoughts on 2014.

Bill Thornton, Chairman Board of Trustees: Speaking on behalf of the board, we have been impressed that business has moved forward as well as it has, despite profound programmatic changes at the state level. At times, staff have worked at a frantic pace without all the tools to do the job, but they have persisted.

Suzanne Burke, Chief Executive Officer: Sweeping changes by the state have greatly impacted the people we serve. We continue to advocate for them so they may receive the quality services they need. We have also lived our motto which is: To provide the highest quality services, at the lowest possible cost, to serve as many individuals as possible with the tax dollar.

Ken Wilson, VP of Operations: This year has been the most challenging in my career because of the implementation of MyCare Ohio. We are committed to make the best of it and I am proud of our team. In the midst of chaos, sleep deprivation, and fear we have heroic leaders making a difference for struggling clients, families, and providers.

Chandra Mathews-Smith, VP of Operations (Medicaid): I am proud of COA’s reputation for tackling challenging issues and opportunities. Our business environment has changed dramatically, but we are committed to partnering with our community to leverage existing expertise and learn new skills so we can continue to provide the high quality, cost-effective services our customers expect.

Sharon Fusco, VP of Business Results and Innovation: I am grateful for the team’s commitment to COA and tenacity in the midst of adversity. Our organizational values came to life as people pitched in to make things work. The process was not always pretty, but people came together as a team to ensure COA’s success.

Jacqueline Hutsell, VP of Human Resources, Training, and Organizational Development: COA employees demonstrated character and flexibility as we embarked on new initiatives. The theme “We are One” resonated as we faced change and opportunity in recruitment, staffing, training, and management. I am proud to be part of this great organization and to lead an outstanding Human Resources and Training team.

Laurie Petrie, VP of Communications: Our mission remains the eye in the storm; the North Star in a whirling galaxy. We change while remaining true to the ideal of independence at home for frail seniors and people with disabilities. Our challenges are simply the natural result of exploring and developing new ways to fulfill our mission.
We are in your community every day working with seniors, other individuals with disabilities, and their families. We’re in hospitals, nursing homes, assisted living facilities, and thousands of homes throughout our multi-county region. In FY 2014, COA:

Preserved the independence of frail seniors and people with disabilities – enabling approximately 20,000 people to remain independent in their homes through programs such as MyCare Ohio, PASSPORT, Assisted Living, Ohio Home Care, and the county-based Elderly Services Program. (Note: some individuals may be counted in more than one program during the course of a year.)

Helped hospital patients recover at home – conducting Care Transitions Interventions™ with 4,203 Medicare patients who were at risk for readmission to the hospital

Ensured the highest-quality services at the lowest possible cost - Contracting with nearly 150 provider organizations that deliver services such as meals, homemaking, and personal care; 1.75 million home-delivered meals; 1.79 million hours of other in-home services

Our “front door” is your connection to information and resources for older adults, people with disabilities, their families and caregivers, and professionals who are working with them.

COA’s Aging and Disabilities Resource Network responded to 37,316 requests for information and referral, a 6 percent increase over FY 2013 and a 56 percent increase since FY 2011

We plan and oversee community services funded by the federal Older Americans Act, including:

183,143 congregate meals, primarily in senior centers, an 8 percent decrease from 2013

333,645 transportation trips for medical and senior center activities (including 154,173 trips funded by the Older Americans Act), an 11 percent increase over 2013

Through advocacy, we keep elected officials informed, engaged, and supportive:

Nearly 80 advocacy meetings with elected officials and candidates, including home visits with COA clients
Home and Community-based Care
Compassionate, cost-effective alternatives to nursing home care

Publicly-funded home and community-based care is a win-win for taxpayers and consumers alike. Whether such programs are funded via Medicaid waivers or county tax levies, they are much less costly than nursing home care. And, for most people, home is where they want to be.

<table>
<thead>
<tr>
<th>Elderly Services Program</th>
<th>Traditional Waiver Programs Combined</th>
<th>MyCare Ohio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals Served</td>
<td>% Change</td>
<td>Individuals Served</td>
</tr>
<tr>
<td>Butler</td>
<td>3,883</td>
<td>-5.2%</td>
</tr>
<tr>
<td>Clermont</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Clinton</td>
<td>471</td>
<td>-11.3%</td>
</tr>
<tr>
<td>Hamilton</td>
<td>5,650</td>
<td>-19.8%</td>
</tr>
<tr>
<td>Warren</td>
<td>2,483</td>
<td>+.4%</td>
</tr>
<tr>
<td>Other Counties</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total</td>
<td>12,487</td>
<td>-11.7%</td>
</tr>
</tbody>
</table>

Table: Individuals enrolled in Elderly Services Program, traditional waiver programs, and MyCare Ohio in FY 2014. Percent change from 2013 is not applicable for the combined traditional waiver programs or for MyCare Ohio. Also, individuals may be counted in more than one program and/or county in the course of a year.

- The number of Elderly Services Program clients served declined primarily due to: 1) managed enrollment (including a waiting list) in Clinton and Hamilton counties to keep the program within budget, and 2) disenrollment of ineligible clients in Clinton County.
- “Traditional waiver programs combined” refers to non-MyCare Ohio individuals who are enrolled in PASSPORT, Assisted Living, or the Ohio Home Care Program. Enrollment in traditional waivers has declined because most waiver clients moved into MyCare Ohio beginning in June 2014. They now receive their Medicaid waiver services as members in MyCare Ohio.
- MyCare Ohio is a managed care demonstration project for individuals who are eligible for both Medicare and Medicaid. Goal: Among a high-need, low-income population, deliver better care for lower cost by coordinating health, behavioral, and long-term care services and supports. For more information, see page 13.
- “Other Counties” refers to our service area for Ohio Home Care, which includes our traditional service area of Butler, Clermont, Clinton, Hamilton, and Warren counties, plus 16 other counties in the Dayton and Lima areas.
Transitions of Care

Community Transitions and Ohio Home Care Waiver:
Helping people move from nursing homes to their own homes.

Gregory’s story

When Gregory left home for his second heart surgery in two years, he expected to return within a few days, recover, and rebuild his strength. It didn’t happen that way. One morning he was eating breakfast in his hospital room when, “everything on the table went white.” Gregory, age 51, had experienced a massive stroke. He did not see his home again for 10 months.

Gregory moved from the hospital to HeathSouth Rehabilitation Hospital at Drake and then to Horizon Nursing and Rehab, but his progress was slowed by a stubborn infection that delayed replacing a section of his skull. A former truck driver and veteran who worked 13 years in South Korea and Somalia, Gregory today is able to talk, move his right arm, and move from bed to wheelchair with assistance.

At Horizon, his partner Kathy learned about two programs that would make it possible for her to bring Gregory home: Community Transitions and Ohio Home Care. Ohio Home Care provides home health aides to help Kathy care for Gregory five days a week, for two eight-hour shifts each day. Community Transitions enabled Gregory to qualify for Home Choice which paid for a bathtub cutout. (A family member built a wheelchair ramp and the Veterans Administration is covering installation of a stair lift).

Besides helping Gregory, the aides make it possible for Kathy to continue her work doing data entry on the third shift at Reinhart Food Service and, to sleep.

“People are surprised that I get so many hours for home health aides,” she said. “For the program to help out that much is greatly appreciated. It’s just (Gregory) and me in the mornings. When the first aide arrives at 3 (p.m.), I literally run up the stairs to get some sleep before I go to work.”

Friends since childhood, the two see themselves as a team, working with a number of professionals to help Gregory attain some level of independence.

“The future? It’s me and him together,” Kathy said. “I know he is not going to get everything back. But I hope he can get some of his mobility back and some of his independence. That’s what he really wants.”

In speaking of their struggles and accomplishments, Kathy almost always says “we.” And, Gregory tries hard to keep up his end of the deal.

“The big thing is, I don’t want to depend on her for everything,” he said. “She put her life on hold to help me out and I greatly appreciate that.”
Community Transitions
- Begins with a referral, often from nursing home staff or residents themselves.
- Nursing facility residents who have no home to return to (or who need home modifications) may qualify for Home Choice. This Ohio program funds community transitions services such as finding an apartment, paying security deposit, buying furniture and household supplies, and opening a bank account.
- Residents may also qualify for in-home care services via Council on Aging, enabling them to live independently with support.
- All services – housing transitions, in-home care, skilled nursing, and others – must be coordinated and ready by move-in day, a process that can take months. The result is individuals living independently once again, at a fraction of the cost to live in a nursing home.

In FY 2014, Council on Aging assessed 215 nursing home residents for Community Transitions. Of these, 153 were able to leave nursing homes and move to homes of their own. Most needed support from in-home care programs. Our state is a national leader in helping people move from institutions back into the community, having transitioned more than 4,000 people since 2009.

Ohio Home Care Waiver
- Medicaid program that provides in-home care for financially-eligible children or adults who have significant disabilities and/or mental health needs.
- Participants are under age 60 and would require care in a nursing home if it were not for this program.
- Beginning in January 2014, Council on Aging took responsibility for screening, enrollment and care management for people enrolled in the program in a 21-county region including Cincinnati, Dayton, and Lima. COA works with Area Agency on Aging 3 (Lima) on this contract.
- In FY 2014, COA served 1,085 individuals through the Ohio Home Care Waiver.
Clavilia and Forrest’s story

When Forrest met Clavilia more than 30 years ago, he was a widower, sitting on his Hamilton porch stoop in the middle of the day wearing a rumpled shirt, a brown paper bag in his hand. She was a single mother, working full time, and active at church. She didn't have time for a man who smoked and drank.

But, determined to win her, Forrest quit his bad habits, cleaned himself up, and returned to church. The two married in 1983 and Clavilia moved to the Hamilton home they share today.

Sitting together at the breakfast table – Forrest’s favorite spot – Clavilia enjoys talking about their many good years together. Clavilia put her heart and soul into her work with the church choir and Forrest was her biggest supporter.

For Forrest, however, those memories began to fade about 10 years ago. His needs and her own health problems led to Clavilia's decision to retire at age 72 after long careers with the Social Security Administration and a local bank.

Always the “go to” person for her friends and family, Clavilia gladly took on the full-time task of caring for a husband with Alzheimer’s disease. She managed fine for awhile, but as Forrest’s disease progressed, Clavilia knew it was time to ask for help.

In 2012, Clavilia learned about the Butler County Elderly Services Program (ESP), a taxpayer supported program that provides in-home care for eligible Butler County seniors, and called for help.

“I am so used to doing things for myself and not having to bug people,” she said. “I was in tears when I had to come to you guys.”

Through ESP, the couple receives home-delivered meals, help with housekeeping, and respite care for Forrest so Clavilia can have a few hours to herself each week.

ESP’s emergency response service has been particularly helpful. The service includes special features for people with Alzheimer’s. It alerts Clavilia if the front door is opened or if Forrest gets out of bed in the middle of the night – a recent problem for the couple.

Despite suggestions from doctors that Forrest be placed in a nursing home, Clavilia has firmly said no. “God didn’t tell me yet. Until I feel it in my heart, it’s not going to happen.”
• Funded by tax levies in Butler, Clinton, Hamilton, and Warren counties, the Elderly Services Program helps prevent unnecessary nursing facility placement by providing an array of long-term care services in the home. Services include home-delivered meals, home care assistance (such as homemaking, personal care, and caregiver respite), transportation, medical equipment, emergency response devices, and more.

• Eligibility is determined via in-person assessment and each client is assigned a care coordinator who develops and monitors a plan of care. Services are adjusted with changing needs. The goal is to preserve each client’s independence in his or her home for as long as possible.

• In the Elderly Services Program, annually, only about one-fourth of clients leave the program each year because they are hospitalized or need to move to a nursing home. Most of the remainder are able to stay in their homes until they die, enroll in another home or community-based program, or have their needs met in another way.

• Council on Aging manages the programs via contracts with county commissioners, ensuring delivery of the highest quality services for the lowest possible cost in order to serve as many seniors as possible with the tax dollars.

“I think about the way it was. Those memories bring you to today, and they’ll keep me going for tomorrow.”

Clavilia, caregiver for her husband, Forrest, who has Alzheimer’s
Robert’s story

Robert could not attend the first Aetna Consumer Advisory Council meeting because his ride didn’t show up. It was embarrassing for the Aetna team, but demonstrated one of the challenges of MyCare Ohio: changing to a new, complex system for approving and scheduling transportation for thousands of people, and getting it right.

Robert laughs about it now and by the time of the second meeting, he had his transportation. But, he hopes that as a senior and lifelong advocate for people with disabilities, he can make “some good noise” that will contribute to the success of Ohio’s new Integrated Care Delivery System, known as MyCare Ohio.

Robert, 68, receives Medicaid-funded homemaking services and some personal care through Aetna Better Health of Ohio, one of the two health plans serving our region for the MyCare Ohio project. As a contract organization for Aetna, Council on Aging provides a care coordination team for Robert. As an Aetna member, he was invited to serve on the plan’s Consumer Advisory Council. It’s a role he has played many times, as he has served on a variety of boards and committees related to the arts, services to people with disabilities and other non-profits.

In 1946, when he was eight months old, Robert contracted meningitis which resulted in partial paralysis of both his legs and his left hand. He has always used a wheel chair for mobility. A widower and father of a son, Robert is an artist, host of “Be the Change” on Citi Cable, disability rights advocate, and community volunteer. He was community relations coordinator of BRIDGES for a Just Community and worked 13 years as education coordinator for the Cincinnati Human Relations Commission. He has received numerous awards including most recently, induction into the Ohio Civil Rights Hall of Fame.

He’s working on a book of stories about his own life and those of others called *On the Wrong Side of the Door*.

“I think everyone has had the experience of being on the wrong side of the door,” he said. “The whole goal is to demonstrate that you can make it. You can make it! It may not be the normal way. I mean, my life has not been normal, but it’s been extremely successful. All I need now is money!” Robert follows this with his ever-present loud cackle of a laugh.

One of the difficulties with MyCare Ohio has been lack of timely information, Robert said. At the same time, he acknowledges the complexities of the new system make it difficult for people to understand, even if they do read the informational materials they receive. He admits that, despite receiving information, the way he learned about MyCare Ohio was when he made a transportation request and discovered the system no longer worked the same way. “It was a rude awakening,” he said.

“The biggest part of my problem – and I think this is true for a lot of people with disabilities and older people – is that we haven’t thought about insurance and don’t understand how it works. And so, we can’t make the best choices.”
MyCare Ohio is a three-year demonstration project led by the Ohio Department of Medicaid. It is a managed care plan designed to coordinate services for people who are eligible for both Medicare and Medicaid. While individuals vary, as a group, this population has complex – and costly – needs for medical, behavioral (mental health), and long-term care services. The goal of MyCare Ohio is to deliver better care at lower cost.

Most people enrolled in waiver programs – PASSPORT, Assisted Living, or Ohio Home Care – now receive those services through MyCare Ohio. They are served by two health plans selected by the state for our region: Aetna Better Health of Ohio and Molina Healthcare of Ohio. Council on Aging provides care coordination for MyCare Ohio members via contracts with these plans.

In our region, MyCare Ohio began operating June 1, 2014. For all involved - Council on Aging, providers, and consumers – it overturned familiar ways of doing business and receiving services. The complexities continue to be challenging and have led to news stories. The state, the health plans, consumer advocacy groups, and Ohio’s Area Agencies on Aging – including COA – continue to work hard to make MyCare Ohio a success.

“I know (MyCare Ohio) is an experiment and I really do hope to make some noise – some good noise. Hopefully we can come up with some good solutions.”

Robert, MyCare Ohio member serving on the Consumer Advisory Council for Aetna Better Health of Ohio
Bill’s story

Within a period of two months, Bill, age 85, went from a hospital to a nursing home, to a different hospital, followed by a different nursing home and then, finally, back to his own home. By the time he arrived home, he had accumulated more than 24 bottles of medicine. The pills had been given to him each day at the hospitals and nursing homes, so, when he was on his own, he knew little about when to take them or what each was for. Instructions he had been given were hard to read and understand. A heart bypass patient who needs to be precise about his medications, Bill was at high risk for a quick return to the hospital.

Bill’s story is not unusual. According to the Centers for Medicare and Medicaid Services, billions of dollars are spent annually on hospital re-admissions that could have been prevented. Common reasons include medication mix-ups, failure to follow-up with doctors, and being unaware or ignoring signs that a condition is worsening.

Fortunately, though, Bill was at Clinton Memorial Hospital, one of nine hospitals participating in Council on Aging’s Care Transitions program. There he met Jill, a COA health coach who checked in with him again when he was discharged to a nursing home and then finally met with him in his home.

“I think she’s an angel,” Bill said. “I was so sick when I was in the hospital and she came in there to help. And then she followed me around. Wherever I was at, there she was.”

Jill’s first priority was to get Bill’s medications in order, dispose of duplicates, and make one clear list that Bill could follow daily. They also talked about goals.

“When I was in the nursing home, my goal was to go home. And to be able to walk with a cane,” Bill said. “I’d be up walking the halls at three in the morning. You didn’t see anybody work harder than me. I wanted to go home.”
• Health coaching for older adults who have been hospitalized for serious and usually chronic conditions, such as heart failure
• Interventions are based on model developed by Eric Coleman, M.D. of the University of Colorado
• Council on Aging has a contract with the U.S. Centers for Medicare and Medicaid Services (CMS) to deliver Care Transitions to patients at: The Christ Hospital; Clinton Memorial Hospital; Mercy Health: The Jewish Hospital, Anderson Hospital, Clermont Hospital, Fairfield Hospital, and West Hospital; University of Cincinnati Medical Center; and UC Health - West Chester Hospital
• In the first nine months of 2014, 3,126 patients completed the 30-day intervention. Compared with 2013, we achieved a 62 percent increase in the number of participants and a 10 percent increase in the rate of completion. Of those who started Care Transitions, 11.2 percent were readmitted to one of the participating hospitals within 30 days of discharge. This rate is significantly lower than the national readmission rate for Medicare patients, which is approximately 17 percent. It’s also nearly 1 percent lower than in 2013.
• Council on Aging’s program has been recognized for effectiveness by CMS and the contract has been extended twice. In late 2013, the Cincinnati USA Regional Chamber of Commerce Women Excel program honored Care Transitions as runner up for Best New Product of the Year.

“I had so many bottles of medicine – new ones and old ones – it was a mess. She helped me figure it all out and we made a list and all. We got it down pat now.”

Bill, Care Transitions patient, with his Transitions Coach, Jill
Aging and Disability Resource Connections (ADRC) Council on Aging serves as a visible and trusted place where people turn for objective information on the full range of long-term care services and supports available in their communities.

A typical inquiry goes something like this:
“My mother’s health has gone for the worse. It is now hard for her to do anything for herself. She lives in another city and I need to bring her here to oversee her care, but I will need help. Can you tell me what might be available?”

Council on Aging is one of 12 regional Aging and Disability Resources Networks (ADRN) in Ohio. An ADRN is a web of social service and health organizations that work together to make it easier for people to access the help they need. We have established partnerships with numerous organizations through contracts, written protocols, and/or staff cross-training. Our ADRC department also includes assessors, who meet with people in their homes to discuss options for long-term care and determine eligibility for programs, and pre-admissions review specialists, who determine eligibility for nursing home placements.

Our call center and Elderly Services Program intake lines in Butler, Clinton, and Warren counties received 37,316 information and referral requests in FY 2014, a 6 percent increase over FY 2013 and a 56 percent increase since 2011. Our main call center includes 11 specialists, a program assistant, and a manager.

ADRC specialists are certified by the Alliance of Information and Referral Systems, a professional credentialing organization.

Our Resource and Housing Directory is an online guide to selected local, state, and national resources with more than 1,600 listings and links. Visit www.help4seniors.org for a wealth of information.
Older Americans Act Services

How Title III Works

Title III of the federal Older Americans Act authorizes funding to states and Area Agencies on Aging for planning, developing, and coordinating home and community-based services.

In southwestern Ohio, Council on Aging uses Title III funds to advocate for older adults and help them remain within their own homes and communities. Money goes to senior centers and organizations who provide services such as transportation, congregate meals, caregiver support, legal help, and wellness education. COA also combines Title III dollars with state funds and county tax levies to provide home care services to seniors who are not eligible for Medicaid waiver programs.

In FY 2014, Title III provided funding for the following essential services, among others:

- **183,143** congregate meals served at various sites (mostly senior centers) in five counties, an 8 percent decline from FY 2013
- **154,173** transportation trips in senior center vans and buses for medical appointments, shopping, recreation, and the like, a 3 percent decrease from FY 2013. (Total transportation from all funding sources: 333,645 trips, an 11 percent increase over FY 2013)
- health and wellness activities, which have become an important mission of senior centers

Photo captions page 23
Advocacy

“I am a huge advocate, and will continue to be so for COA and these programs which provide safety, support, independence, and tax savings.”

State Representative Denise Driehaus (D-HD13) pictured with COA client Mary

How it Works

Most of the state legislators representing our five-county region, as well as many local elected officials, have visited Council on Aging clients where they have seen firsthand the value of in-home care. Regular meetings with elected officials keep them up-to-date on issues of importance to older adults and caregivers.

In FY 2014:

- 68 meetings with elected officials, legislative aides, and candidates
- 10 visits by elected officials and candidates in the homes of COA clients
Care Transitions expansion
Our health coaching program – which reduces hospital readmissions – received a contract extension from the U.S. Centers for Medicare and Medicaid Service and added four hospitals, for a total of nine. Readmission rate for individuals who participate in COA Care Transitions is well below the national average. (See page 15 for details.)

Ohio Home Care contract
COA received a care management contract from the Ohio Department of Medicaid for the Ohio Home Care Program, a Medicaid waiver. The contract expands our work to include individuals under the age of 60 who live in a 21-county region in western Ohio.

High quality services at lower cost
Two separate competitive bidding processes resulted in fewer providers and favorable rates for Emergency Monitoring Systems (EMS) and Home Care Assistance (HCA). Estimated savings for EMS – nearly $3 million over 5 years. Estimated savings for HCA – more than $800,000 annually. The savings allow the tax levy-funded Elderly Services Program to serve more people.

Smooth transitions for PACE clients
When TriHealth closed its Program of All-Inclusive Care for the Elderly (PACE, known as Senior Link), COA quickly enrolled 350 of the program’s seniors into PASSPORT and other home-care programs. For our efforts, we received two letters of commendation from state legislators.

Satellite offices
COA opened offices in Wilmington (Clinton County) and Hamilton (Butler County) to provide convenient workspace for staff serving residents of those counties.

New team structure
To better serve our clients and providers, COA long-term care staff are being organized into Integrated Care Coordination (ICC) teams. Teams are self-directed and include members with different functions and areas of expertise. Clients and providers contact their team via a single phone number and email address.

MyCare Ohio implementation
This major system change has been full of problems in regions throughout the state, but the effort to make it work has been impressive. Nearly all COA staff have been involved. Work has included complex project management, extensive hiring and training, enrollment assistance, a massive assessment process, contract issues, and provider transitions.

Forum on Aging and Own Your Future
More than 600 registrants, sponsors and speakers attended Forum, our annual two-day training and networking event. We are grateful for strong support from sponsors. Nearly 100 people attended Own Your Future, our annual workshop to help people plan for long-term care.

Advancement opportunities
COA designed and implemented a successful Manager-in-Training program which provides career advancement opportunity, as well as much-needed help with fast-paced program change and new initiatives.
Service Providers

COA’s home and community-based services are delivered via contracts with the following organizations (with contracts as of 9/30/14):

A Best Home Care, Inc.
A Miracle Home Care
Absolute HomeCare
Acclaim Home Health Services Inc.
Alternative Home Care and Staffing, Inc.
Active Day of Ohio, Inc
Affinity Healthcare Solutions
Alox Transportation
Alzheimer's Association of Greater Cincinnati
Amaromedical Health Care Services, Inc.
Amenity Home Health Care, LLC
Ameribest Home Care
American-Mercy Home Care, LLC
Angels Above & Beyond Home Health
Assisted Care by Black Stone
Bayley Adult Day
Berkeley Square
Bemers Medical
Best Choice Home Care
BetterLiving Home Health and Medical Supplies
Blessings Home Health Care, LLC
Bridgeyay Pointe
Brightway Healthcare Cincinnati
Brightway Healthcare Dayton
Brookwood Retirement Community
Butler County Care Facility Adult Day Services
C.A.R.E., LLC
Caregivers Health Network
Cape May Retirement Village
Caring Hearts Adult Day Care
Carriage Court of Kenwood
Catholic Charities of Southwestern Ohio
Cincinnati Area Senior Services, Inc.
Cincinnati Home Care
Cincinnati Recreation Commission
Clermont Senior Services, Inc.
Clinton County Adult Day Center, Inc.
Clinton County Community Action Program
Close to Home, II LLC
Clossman Catering LLC
Colerain Township Senior & Community Center
Comforcare Senior Services - Edinburgh
Comforcare Senior Services - TriCounty
Comfort and Care Home Health Agency
Comfort Keepers #172
Comfort Keepers #178
Comfort Keepers #200
Committed to Care
Comprehensive Health Care Services
Cottingham Retirement Community
Day Share Senior Services
Deupree Community Meals on Wheels
Diversicare of Bradford Place
Emerson Heating & Cooling Company
Errands and Services, LLC
Everyday Homecare, LLC
Everyday Living Inc.
Fairfield Pavilion
First Choice Medical Staffing of Ohio, Inc.
First Community Health Services, LLC
Friendly Care Agency
Garden Manor Terrace, Inc.
Global Meals
Gracious International Care Service
Halsom Home Care
Harrison Senior Center
Healing Springs Med-Care, LLC
Heartland of Woodridge (ALF) #502
Helping Hands Healthcare, Inc.
Hillebrand Home Health
Home Care Network, Inc.
Home First
Homefront Nursing, LLC
Hyde Park Center for Older Adults
Interim HomeStyles of Greater Cincinnati, Inc.
International Elderly Care Group
International Quality Healthcare Corp.
Jewish Family Service
Judson Care Center
Judson Home Care
Liberty Retirement Community of Middletown
LifeSpan Care Management
Llanfair Retirement Community
MariElders
Mason Christian Village
Mason Health Care Center
Maxim Healthcare Services, Inc.
Mayerson JCC
Medical Service Company
Mercy Franciscan @ West Park
Mercy Neighborhood Ministries
Middletown Area Senior Citizens, Inc.
Millenium Nursing Agency
MSI (Medical Supply, Inc)
Mt. Healthy Christian Village
Mt. Pleasant Retirement Village
Nova Home Care
North College Hill Senior Center
North Fairmount Senior Center
Nurses Care, Inc.
Otterbein Lebanon Adult Day Service
Otterbein Lebanon Assisted Living
Oxford Senior Citizens, Inc.
Oxford Seniors Community Adult Day Service
Partners in Prime
Pennington Construction
People Working Cooperatively
Personal Touch Home Care of Ohio, Inc.
Prime Home Care, LLC
Pro Seniors, Inc.
Quaker Heights Care Community
Quality Care
Rural/Metro Helpline
Scarlet Oaks Retirement Community
Senior Deserved Day
Senior Independence
Senior Resource Connection
Southwest Transportation Services, LLC
Spring Hills Middletown
Stay Well Home Health, LLC
Sterling House of Fairfield
Suites of Hawthorn Glen
Superior Home Care, Inc.
Sycamore Senior Center
Synergy Homecare
The Courtyard at Seasons
The Inn at Renaissance Village
The Lodge Retirement Community
The Terrace
The Visiting Nurse Association
The Woodlands of Hamilton
The Woodlands of Middletown, LLC
Tri County Visiting Nurses, LLC
Twin Towers Adult Day Stay
Twin Towers Residential Care
United Hearts Home Care
Victoria Retirement Center
VNA Healthtrends
VRI
Warren County Community Services, Inc.
Wesley Community Services
West College Hill Neighborhood Services
Westover Retirement Community

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Timothy Crowley
Katherine Fields
Daniel Gahl
Nancy Green
Charlene Himes
Jane Kieninger
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Melda Fant, Vice Chair
Robert Burgett
Lisa Dehner
Patricia Hogue
Jamie Hunter
Adrienne Morris

Butler County Citizens for Elderly Services, Inc.
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Cynthia Stever, Vice President
Bart Drake, Treasurer
Kevin Kurpjeski, Secretary
Mag Baker
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Marc Bellisario
Don Eberwine
Kim Gay
Debbie Hauenstein
Geraldine Bess Maddox
Dr. Elizabeth Patterson
Mindy Wendling

Hamilton County Elderly Services Program Advisory Council
Jonathan Dever
Andrea Herzig
Martha Jean Hill
Jacqueline Kebede
Catherine Mills
Erica Riehl
Michael Robison

Warren County Citizens for Elderly Services, Inc.
Chuck Peckham, Chair
Dr. Don Juszczyk, Vice Chair
Ann Munafo, Secretary
Tom Ariss
Mark Clark
Dave Gully
Nick Nelson
Robert Olson
Statement of Financial Activities
Year ending September 30, 2014

Support and Revenue
Medicaid Waiver (PASSPORT and Assisted Living Waiver) $40,681,874 42.78%
Local Government (Elderly Services Program) $37,824,453 39.80%
Federal $8,995,918 9.50%
Other Programs and Program Income (Client Contributions, Ohio Home Care, MyCare Ohio) $6,350,140 6.70%
State Government $1,237,887 1.30%
Other Support and Revenue (Donations, Interest Income) $11,663 0.00%
Total Support and Revenue $95,101,935 100%

Expenses
Community-based In-home Services $66,559,426 71.00%
Care Management $14,352,737 15.30%
General Administration $6,068,959 6.50%
Community-based Senior Center Services $3,843,432 4.10%
Information, Referral, and Assessment $2,887,161 3.10%
Total Expenses $93,711,715 100%
Acknowledgments

Older Americans Act/Title III Photo Credits - Page 17
Oxford Seniors: Masters Games frisbee team (top left); Clinton County Senior Center: Red Hat Society visits Union Terminal (top right); Cincinnati Recreation Commission: Seniors participate in the Ohio Department of Natural Resources’ Hooked on Fishing program at Winton Woods (middle left); Cincinnati Area Senior Services: Students from Miami Christian Academy host a luau at the Over-the-Rhine Senior Center, including a sing-a-long and lunch for the seniors (middle right); Middletown Area Senior Center: an 83-year-old volunteer delivers meals to residents at Trinity Manor in Middletown (bottom left); Warren County Community Services, Inc.: social workers offer supportive services to area seniors (bottom middle); Clermont Senior Services: A staff member at the Lois Brown Dale Welcome Center greets an Adult Day client (bottom right)

Advocacy Photo Credits - Page 18
State Senator Bill Coley (R-D4, Butler County) with Council on Aging CEO Suzanne Burke, COA Board Chair Bill Thornton, and board member Charlene Himes (top left); State Representative Tom Brinkman (R-HD34, Hamilton County) with Suzanne Burke, Bill Thornton, and COA Government Relations Manager, Polly Doran (top middle); State Senator Cecil Thomas (D-D9, Hamilton County) with COA board members Jane Kieninger and Tim Crowley (top right); State Representative Jonathan Dever (R-HD28, Hamilton County) with Bill Thornton and Tim Crowley (bottom left); State Senator Shannon Jones (R-D7, Warren County) with COA VP of Program Operations Ken Wilson, Jane Kieninger, and Tim Crowley (bottom middle); Adam Rapien, District Director for Congressman Steve Stivers (R-OH15) with Bill Thornton and COA board member Sarah Boehle (bottom right)

Additional Credits
This report was produced by Council on Aging’s Communications Department. Writing by Laurie Petrie and Paula Reichle-Smith; design by Paula Reichle-Smith; data compiled and provided by COA’s Business Intelligence and Accounting departments.

Photography by: Lyons Photography, Cincinnati Area Senior Services, Cincinnati Recreation Commission, Clermont Senior Services, Clinton County Senior Center, Middletown Area Senior Center, Oxford Seniors, Warren County Community Services, Laurie Petrie, Eric Young, and Polly Doran.
“I needed to get out. I’ve been in nursing homes since 2009. Odell is a real good guy to help me.”

Thanks to his friend Odell (in wheelchair), James was able to move out of a nursing home and into an apartment. The pair were roommates at a nursing home. Odell qualified for assistance to move out of the nursing home via COA’s Community Transitions Program. Rather than go alone and leave James behind, Odell invited James to join him.