

AGENDA

HCESP Advisory Council Meeting

June 26, 2025 | 2:00 pm – 3:30 pm

COA, Board Room, 4601 Malsbary Road, Blue Ash, OH 45242

<https://zoom.us/j/96290067341?pwd=ajEaLbIb6KleH5taDNJMfDsm5twyON.1>

Meeting ID: 962 9006 7341 | Passcode: 114999

CALL TO ORDER	2:00	Janice Hunter
APPROVAL OF MINUTES ❖ February 27, 2025 Minutes (Action Needed)	2:00-2:05	Janice Hunter
QUARTERLY REPORTS ❖ Program Dashboard & Financial Report ❖ Program Update Report	2:05-2:15 2:15-2:25	Ken Wilson & Ronnie Spears Jennifer Heck
OLD BUSINESS ❖ Community Access Workgroup ❖ PACE Update	2:25-2:35 2:35-2:40	Shelby Stout, Maria Tirado Rodriguez, & Alyssia Kelley Ken Wilson
NEW BUSINESS ❖ Annual Report ❖ Five-Year Levy Projections ❖ Fixed Cost Sharing Proposal (Action Needed) ❖ Laundry Service Evaluation ❖ TLRC Mid-Point Review	2:40-2:50 2:50-3:00 3:00-3:10 3:10-3:20 3:20-3:25	Ken Wilson Ronnie Spears Ken Wilson & Ronnie Spears Stephanie Seyfried Ken Wilson
HEARING THE PUBLIC	3:25-3:30	Janice Hunter
ADJOURNMENT (Action Needed)	3:30	Janice Hunter

NEXT MEETING: September 25, 2025

MINUTES
HCESP ADVISORY COUNCIL MEETING
THURSDAY, FEBRUARY 27, 2025 @ 2:00 P.M.

ATTENDANCE

Members Present:	COA Staff:	Guests:
Angele Blackshear (virtual) Viola Brown Randi Burlew Janine Gage Janice Hunter Holly Mundon Dimity Orlet Susan Van Amerongen (virtual)	Ken Wilson Suzanne Burke Ronnie Spears Alyssia Kelly Maria Tirado Rodriquez Shelby Stout Jennifer Lake	
Excused:	Facilitator:	Scribe:
	Janice Hunter	Christina Adams
Absent:		

CALL TO ORDER

The February 27, 2025 meeting of the HCESP Advisory Council was called to order by Janice Hunter at 2:04 p.m.

APPROVAL OF MINUTES

Janice Hunter called for a motion to approve the December 5, 2024 Hamilton County Elderly Services Program (HCESP) Advisory Council minutes as presented.

Motion: Janine Gage made a motion to approve the minutes.

Second: Dimity Orlet seconded the motion.

Action: The December 5, 2024 minutes were unanimously approved.

QUARTERLY REPORTS

Program Dashboard & Financial Report (Oct-Dec 2024)

Ken provided an overview of the October-December 2024 Program Dashboard (please see the handout for full report). This report covers all of 2024. At the end of the 4th quarter, there were 4,301 individuals enrolled in the Elderly Services Program (ESP) and 240 individuals in Fast Track Home (FTH). The census decreased by 222 individuals over the quarter and decreased by 913 (17.5%) over the prior year. This decrease was due to managed enrollment which only enrolls high risk individuals into the program. The average monthly cost per client increased slightly from the 3rd quarter (\$537.18) to \$539.21. This increase was due to Home Care and Home Delivered Meal provider rate increases.

Janice asked if the Electronic Monitoring Service decrease was due to fewer participants. Ken shared this decrease was due to a provider rate reduction that began October 1, 2024. In addition, there are fewer clients receiving the service due to managed enrollment. Another factor is Medicare Advantage plans that cover this benefit for eligible clients.

Janine asked what the average cost is for one-way transportation. Ronnie shared the average cost is approximately \$45 per one-way trip.

Dimitry asked if the individuals who were moved on to their Medicare Advantage plan for electronic monitoring were assisted by our front door staff (ADRC). Ken noted the ADRC staff assist individuals in determining if they have a Medicare Advantage plan and if so, how to access their benefits.

There were 382 new enrollments into FTH in the 4th quarter. The percentage of clients who transferred from FTH to ESP dropped from 51.91% in the 3rd quarter to 36.25% in the 4th quarter. We have been working to reduce this number to reduce cost.

When reviewing the Enrollment Setting section of the report, Ken noted he is going to get a more specific breakdown on the individuals listed as “Other Hospital.”

Action: Ken to follow up on the number of individuals listed as “Other Hospital” under enrollment setting and report at the next meeting.

Steps to Stability Program (previously Hamilton County Home Modification and Utility Assistance Program). This program provides one-time services for eligible low-income older adults. The program budget is \$1M through Hamilton County. We were awarded some additional funding from the county this year through ARPA, but this funding is not reflected in this report as it covers 2024. In January, we provided the commissioners with an update on the Steps to Stability Program. At that meeting, we announced that we would be opening the application process for Utility Assistance and Home Modifications. Word about the application process opening spread quickly and the entire program budget was used in less than four days. This was not anticipated and overwhelmed our call center. We will have a different approach prepared for the next utility assistance application process.

Janine asked if the \$500 utility assistance credit is one time and if so, can the credit be dispersed over months to cover colder or hotter months when energy bills are higher. Ken noted that it is a onetime credit, and for future funding, we will evaluate the amount of the credit and the eligibility to best utilize the funds to meet the need.

Randi asked if we know what the average amount of the monthly utility bill for individuals who receive this credit. Ken shared that this will vary depending on an individual’s housing. This is something else that can be evaluated when future funding becomes available.

Janine asked if home52 Transportation has explored partnering with Metro Access for a cost savings. Shelby shared that Metro Access is considered during the client application process. If Metro Access is not an option based on a client’s need, home52 Transportation service is awarded. Suzanne added that home52 Transportation provides door-to-door service. Metro Access provides curb-to-curb service. If a client does not need assistance beyond curb-to-curb service, they must use Metro Access. If a client has limitations that requires through the door service, they will qualify for home52 Transportation. home52 Transportation drivers are trained on transferring clients to and from the vehicle, and they take a client

into the lobby of the medical care facility. With the support of the commissioner's, we continue to have conversations with SORTA about why they are not providing transportation for the whole continuum to include the frail elderly. home52 Transportation has had to fill the gap for individuals who cannot use curb-to-curb transportation due to limitations. SORTA provides the minimum ADA requirements. Sister Keli added that in addition to an individual having to get to the curb for pick up, Metro Access only covers within one mile of a bus route. Additionally, an individual's trip must fit within the Metro Access schedule.

Ronnie reviewed the October-December 2024 Financial Report (see handout for full details). This is actuals through calendar year 2024.

Randi asked what impacts are predicted regarding the recent shifting of federal funding priorities. Ken shared that there are many unknowns at this time. Suzanne noted that if Medicaid funding is cut, the state will not fill the gap, so the state will roll back their eligibility criteria. We will continue to advocate for seniors. Ronnie added that federal funding that has been awarded to us to date has been drawn down.

Program Update Report

Jennifer Lake reviewed the Program Update (please see handout for full details).

Maximum Reimbursement Rates

These rates are negotiated through a competitive bidding process and are effective October 1, 2024 through September 30, 2025.

2024 Provider Monitoring Summary

This is a summary of annual audits (structural compliance reviews) that were conducted on Hamilton County providers. Two providers had unsupported units which means that when we conducted verification of their billing, they were unable to provide evidence of a client's signature or service delivery, so we recouped that money. There was an Adult Day Service provider who had issues with their kitchen. Our nutrition business relations partner worked with that provider to bring them into compliance. A Home Care agency was missing training documents in their employee file and this was corrected. We were able to evidence all issues of noncompliance with Hamilton County providers.

Services with a Capacity Problem

Services identified as having a capacity problem are Home Care Assistance, Environmental Services, Minor Home Modification & Repairs, and Adult Day Service. A waiver of competitive bidding requirements is being requested so that new providers can be recruited in between the RFP schedule.

Janice asked for a motion to approve a waiver of competitive bidding for the four services with a capacity problem; Home Care Assistance, Environmental Services, Minor Home Modification & Repairs, and Adult Day Service.

Motion: Janine Gage made a motion to approve the request for a waiver of competitive bidding for the four services with a capacity problem.

Second: Randi Burlew seconded the motion.

Action: The request for a waiver of competitive bidding for the four services with a capacity problem was unanimously approved.

Provider Quality Report

Jennifer reviewed the Provider Quality Report (see handout for full details). This report is developed from the satisfaction scores that the care managers obtain from their clients when assessments are performed. Our Business Intelligence department compiles this data into this report that includes market share data, distinct clients served, and billable units. Also included in this report are client satisfaction (SASI) scores. Provider Services uses these scores to work with providers to maintain a level of desired performance. If a provider demonstrates a decline for more than one quarter, they are put on a quality action plan. Business Relations meets with providers are met with on a quarterly basis or more often as needed.

OLD BUSINESS

Community Access Workgroup

Maria Tirado Rodriguez and Alyssia Kelly shared a Community Access Workgroup update (please see handout for full details). The average age of HCESP clients is 77 years of age and has not been affected by managed enrollment. There was an increase in the number black clients in the 3rd and 4th quarter of 2024. Communications representatives in the workgroup confirmed that outreach efforts were focused on the black community.

Randi commented that it would be helpful to look at how the percentages are changing across quarters in this data. Maria shared that this data is available and can be provided.

Action: Maria to provide this data in the next report.

Clients who identify as Hispanic or Latino are less than 1% of the total clients that we serve. This disparity may be due to the lack of adequate outreach materials, cultural differences, and fear or distrust of hospitals or government agencies.

Randi asked if we have considered doing outreach to older adults in the Hispanic population to identify and understand the barriers. Maria shared that this has been discussed, and we are changing our outreach materials.

Alyssia provided an overview of the workgroup's next steps and shared they have applied for a Building Capacity for Equitable Data and Evaluation grant which is for 18-months, and up to \$40,000.

COA has partnered with Su Casa on a health fair taking place on April 6, 2025 at Julie Billiar Parish/Fenmont Center. Translators will be provided if needed. Janine Gage shared that she would like to participate in this event.

Randi asked if we have any information about service providers for the Hispanic community and when we send out an RFP, are providers required to have a Spanish speaking staff member. Also, do we have referral resources for this community. Alyssia shared that this is an issue and will be discussed in the workgroup along with who we already partner with and how these partners currently support the community.

Suzanne added that the utilization of AddnAide presents an opportunity for individuals to select a caregiver that speaks Spanish.

Randi asked if Provider Services could explore for upcoming RFPs, the idea of bonus points for providers who have materials available in different languages or having a person onsite who can communicate with clients in Spanish about their services.

Janice asked if providers use translation services for clients. Shelby noted that our care managers utilize this service, and we can look into whether our providers are using translation services.

Action: Shelby to determine if providers utilize translation services.

Jennifer Lake added that we do have a number of providers that have staff that speak the native language of their clients. Clients tend to gravitate toward providers who offer this.

Center for Respite Care Census

Ronnie shared the Center or Respite Care census following discussion at the December meeting. This report (January-June 2024) provides a breakdown of the \$250K fund and the monthly total number of bed nights provided to Hamilton County older adults experiencing homelessness.

NEW BUSINESS

Fixed Copayment Proposal

Ronnie and Ken reviewed the Fixed Copayment Proposal (please see handout for full details). Copayments collected are reinvested in the program to serve more older adults. Copayment collections have been declining, and COA is evaluating changes to the copayment process. Goals of the changes being considered are to simplify the process and reduce complexity, maintain or increase copayment revenue, and ensure the process addresses individual hardships appropriately. Multiple models were tested, and the current model uses a flat fixed monthly cost versus a percentage copay. This model is being piloted with new enrollments in Hamilton County.

Randi asked if this is a monthly copay versus a per visit copay. Ken noted that this is a fixed monthly copayment. Ronnie added that 25.6% of Hamilton County ESP clients have a copay and the average monthly copay amount is \$56.15.

Ken noted that a significant change in this new model is that housing expenses are considered as a hardship. Additionally, medical expenses above 7.5% of a client's income will be deducted (versus all medical expenses) as a hardship.

Randi asked if the average copayment amount will be increasing from \$56.15 to \$87.25 with this new model, and what percent of individuals will have a higher copay. Ronnie shared that this change is for new enrollees into Hamilton County ESP. Ken noted those enrolled prior to this change will not have a change in the way that their copayment is determined. This fixed copayment proposal is a recommendation for new enrollees and is being presented to the Advisory Council today for feedback. A more detailed plan will be brought back to the Advisory Council to be voted on in June.

Randi asked if we can look at the impact of affordability and what the median income is for the percentage of clients who have a copay. Ken noted that most clients do not have a copay. With the proposed scale, approximately 60% of clients will not have a copay based on their income. Ken shared that we can look at the median income for the percentage of clients with a copay.

Action: Ken to determine the median income for clients with a copay.

Updated Sliding Fee Scale

Ronnie reviewed the Updated Sliding Fee Scale. This scale is adjusted to the federal poverty level guidelines and is used to determine a client's copayment, taking their income and the number of people in the household into consideration.

Janice requested a motion to approve the Updated Sliding Fee Scale.

Motion: Viola Brown made a motion to approve the Updated Sliding Fee Scale.

Second: Randi Burlew seconded the motion.

Action: The Updated Sliding Fee Scale was unanimously approved.

ESP to Waiver Referral Guidelines

Shelby shared the ESP to Waiver Referral Guidelines and PASSPORT/Waiver planning for clients currently enrolled in ESP (see report for details). These guidelines will be shared with ESP staff. Over the past year, we have been working to ensure that we are utilizing our levy funds as payor of last resort. We have been identifying clients that are eligible for waiver services and would benefit more from a waiver program. We have also been identifying clients who have services available through their insurance or could benefit from community resources to fill the need that we are currently providing.

Dimity asked if these guidelines are for ESP only. Shelby noted that these guidelines are for ESP. Fast Track Home will also make referrals that we will follow, but typically because the program is for sixty days only, a client will move in to ESP during the transition.

Confidentiality & Conflict of Interest Forms

Conflict of Interest and Confidentiality forms were provided in member packets. These forms are required to be completed annually.

HEARING THE PUBLIC

No individuals from the public were present.

ADJOURNMENT

With no further business, Janice asked for a motion to adjourn the meeting at 3:25 p.m.

Motion: Randi Burlew made a motion to adjourn the meeting.

Second: Janine Gage seconded the motion.

Action: The meeting was adjourned at 3:25 p.m.

NEXT MEETING

June 26, 2025



**Hamilton County ESP
Program and Financial Report
Quarter 1, 2025 (Jan - Mar 2025)**

Highlighted Findings

1. Traditional ESP Census Trends

- A. Compared to last year (Quarter 1, 2024), census has decreased by -978 clients (from 5,003 to 4,025) or -19.55%.
- B. Compared to last quarter (Quarter 4, 2024), census has decreased by -276 clients (from 4,301 to 4,025) or -6.42%.

* **Note:** Managed Enrollment was initiated for Hamilton County in May of 2023.

2. Fast Track Home Census Trends

- A. Average length of stay decreased by -1 day when compared to Quarter 4, 2024 (from 57 to 56).
- B. New Enrollments increased by 28 compared to Quarter 4, 2024 (from 382 to 410).
- C. Total clients who transferred to ESP from FTH decreased by -57 clients from Quarter 4, 2024 (from 149 to 92).

3. Financials

- A. Total Revenue: The amount projected to be drawn down from the levy is \$28.7 million through the first quarter, as compared to the budgeted amount of \$28.7 million, with no variance.
- B. Total Expenses: The projected expenses as of the first quarter are \$29.9 million as compared to \$29.8 million in the budget. The variance is under budget by \$97,984 or 0.3%.
- C. Purchase Services: The purchased services expenses are under by \$50,920 or 0.2% as compared to budget.

Quarter-End Census by Program

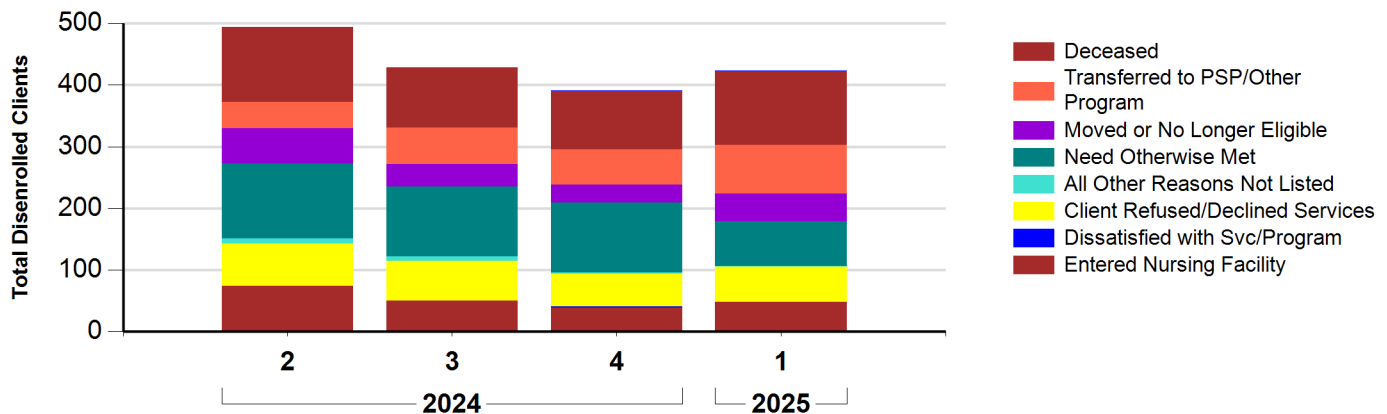
Year	2024			2025
Quarter	2	3	4	1
ESP	4,727	4,523	4,301	4,025
FTH	255	249	240	260
Medicaid Programs	3,324	3,386	3,436	3,640
Passport	524	528	571	553
Assisted Living	114	123	136	139
Molina	1,166	1,219	1,206	1,305
Aetna	1,520	1,516	1,523	1,643

Quarter-End Census, New Enrollments, and Disenrollments

Year	2024			2025
Quarter	2	3	4	1
Quarter-End Census	4,727	4,523	4,301	4,025
New Enrollments	217	226	175	135
Disenrollments	494	428	391	423

Disenrollment Outcomes

Year	2024			2025
Quarter	2	3	4	1
Client Refused/Declined Services	69	65	53	57
Deceased	122	97	95	119
Dissatisfied with Svc/Program	0	0	2	0
Entered Nursing Facility	74	50	39	48
Moved or No Longer Eligible	57	36	29	45
Need Otherwise Met	122	113	113	73
Transferred to PSP/Other Program	42	60	57	79
All Other Reasons Not Listed	8	7	2	1
Total	494	428	391	423

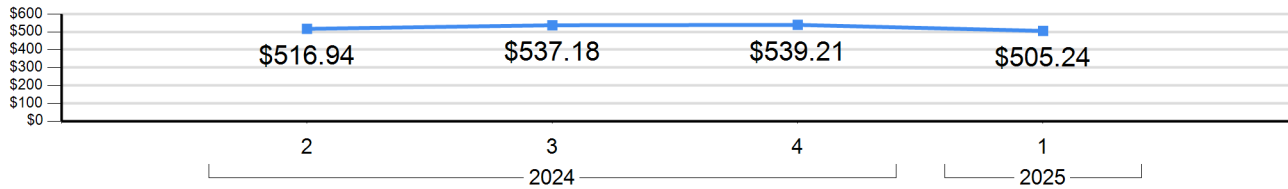


Hamilton County ESP

Quarter 1, 2025 (January - March 2025)

TRADITIONAL ESP SERVICE TRENDS

Average Monthly Cost per Client



Distinct Clients Served by Service Group¹

Year	2024			2025
Quarter	2	3	4	1
Adult Day Service	60	56	51	51
Consumer Directed Care	449	447	436	405
Electronic Monitoring	2,351	2,238	2,118	2,084
Home Care Assistance	2,042	2,063	1,995	1,893
Home Delivered Meals	2,803	2,680	2,539	2,415
Home Medical Equipment	137	122	89	101
Home Modification	6	48	31	35
Laundry Service	133	131	134	122
Other Services	143	137	137	107
Transportation	726	720	689	613
All Services (Unduplicated)	4,838	4,588	4,374	4,152

Units Billed by Service Group *Please see the notes page for unit of measure descriptions by service.*

Year	2024			2025
Quarter	2	3	4	1
Adult Day Service	1,472	1,346	1,236	1,027
Consumer Directed Care	45,159	38,239	37,489	27,716
Electronic Monitoring	7,053	6,723	6,024	5,643
Home Care Assistance	77,023	75,484	75,416	68,126
Home Delivered Meals	194,019	185,213	187,966	158,426
Home Medical Equipment	174	174	123	137
Home Modification	6	48	32	37
Laundry Service	897	792	1,110	902
Other Services	2,261	1,933	1,903	1,490
Transportation	11,559	10,428	9,564	7,721

Dollars Paid by Service Group (Purchased Services)

Year	2024			2025
Quarter	2	3	4	1
Adult Day Service	\$148,640	\$61,792	\$173,271	\$89,862
Consumer Directed Care	\$843,017	\$748,448	\$766,402	\$567,041
Electronic Monitoring	\$146,598	\$151,089	\$107,398	\$106,858
Home Care Assistance	\$2,005,374	\$1,959,565	\$2,019,376	\$1,807,691
Home Delivered Meals	\$1,755,111	\$1,676,365	\$1,721,680	\$1,450,658
Home Medical Equipment	\$39,982	\$45,823	\$31,539	\$32,866
Home Modification	\$18,212	\$103,252	\$42,374	\$24,530
Laundry Service	\$54,395	\$58,916	\$60,303	\$53,212
Other Services	\$151,849	\$103,432	\$112,911	\$86,103
Transportation	\$524,851	\$476,874	\$435,527	\$340,346
All Services	\$5,688,028	\$5,385,557	\$5,470,780	\$4,559,167

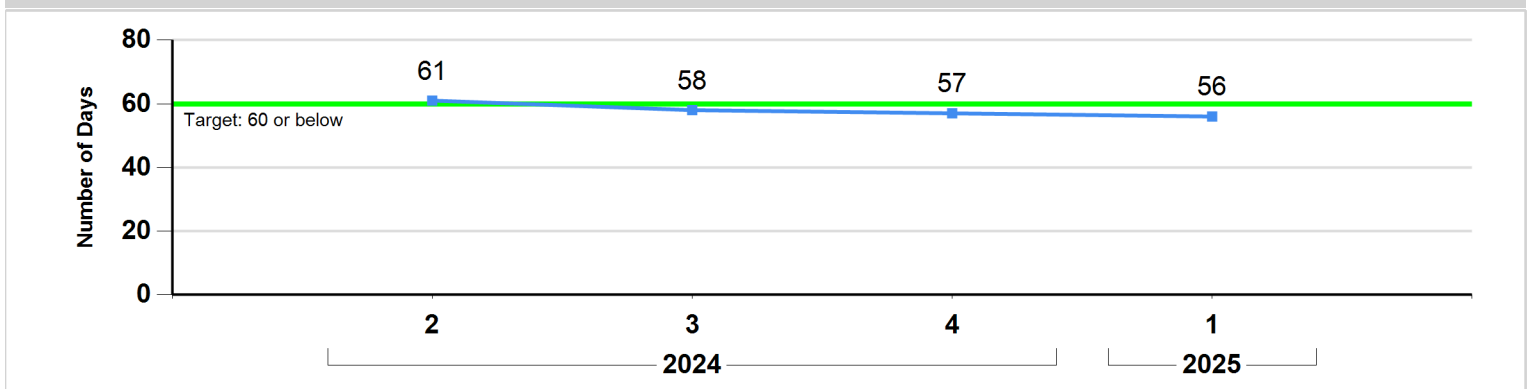
Total Clients Served, New Enrollments, Disenrollments

	2024			2025
	Quarter 2	Quarter 3	Quarter 4	Quarter 1
New Enrollments	387	399	382	410
Disenrollments	397	393	389	393
Clients Transferred to ESP	177	207	149	92
	44.58%	52.67%	38.30%	23.41%

Enrollment by Setting

	2024			2025
Enrollment Setting	Quarter 2	Quarter 3	Quarter 4	Quarter 1
Spousal Meals	16	9	8	16
Drake Rehab	4	7	5	3
Mercy Anderson Rehab	2	0	0	1
Fort Hamilton	1	0	0	0
Community	28	9	2	1
Mercy Hospital Network	65	80	78	102
Premier Health Atrium	0	0	0	1
The Christ Hospital	37	42	40	35
TriHealth Hospital Network	53	78	57	79
University of Cincinnati Hospital Network	47	53	43	45
Veterans Admin - VA	8	7	5	0
Other Hospital	14	40	59	44
Skilled Nursing Facilities	74	46	45	53
Rehabilitation Facilities	27	22	31	23
Skilled HHC	1	1	1	0
Not Captured	10	5	8	7
Total	387	399	382	410

Average Length of Stay



Distinct Clients Served by Service Group

Year	2024			2025
Quarter	2	3	4	1
Electronic Monitoring	160	130	122	131
Home Care Assistance	74	147	163	203
Home Delivered Meals	327	314	290	293
Home Medical Equipment	133	108	138	150
Home Modification	52	59	68	51
Independent Living	2	2	1	0
Laundry Service	29	26	31	13
Transportation	61	50	39	46
All Services (Unduplicated)	500	468	468	473

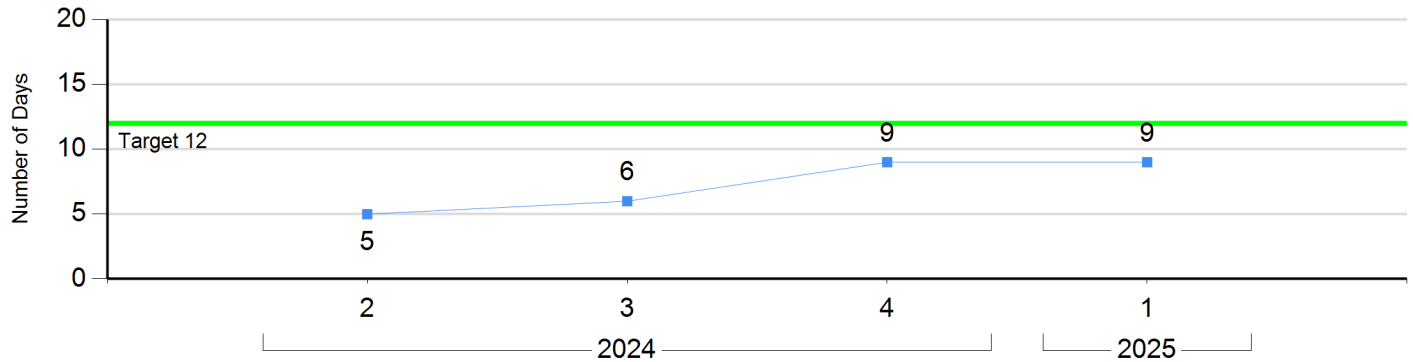
Units Billed by Service Group *Reference: Please see page 9 for unit of measure descriptions by service.*

Year	2024			2025
Quarter	2	3	4	1
Electronic Monitoring	244	207	182	164
Home Care Assistance	851	1,479	1,686	2,019
Home Delivered Meals	9,332	7,561	7,522	7,653
Home Medical Equipment	230	197	224	284
Home Modification	52	60	71	55
Independent Living	7	6	10	0
Laundry Service	138	65	104	67
Transportation	306	273	210	220

Dollars Paid by Service Group (Purchased Services)

Year	2024			2025
Quarter	2	3	4	1
Electronic Monitoring	\$5,685	\$4,708	\$3,453	\$3,294
Home Care Assistance	\$21,501	\$35,311	\$44,060	\$53,620
Home Delivered Meals	\$84,065	\$68,004	\$68,327	\$69,407
Home Medical Equipment	\$20,900	\$17,230	\$23,359	\$23,632
Home Modification	\$21,385	\$27,910	\$30,787	\$23,156
Independent Living	\$656	\$608	\$979	\$0
Laundry Service	\$7,192	\$3,503	\$5,298	\$3,494
Transportation	\$17,052	\$14,719	\$11,945	\$16,598
All Services	\$178,436	\$171,993	\$188,273	\$193,212

Average Number of Days from Intake Call to the Enrollment Assessment¹



Home Care Provider Network Referrals and Capacity

Year	Quarter	#Clients in Need of HCA & CDC or AddnAide	#Clients Not Matched with a Provider	% of Clients Not Matched with a Provider	% of Clts Receiving Traditional HCA	% of Clts Receiving CDC or AddnAide
2024	2	3,047	92	3%	78%	19%
2024	3	2,844	32	1%	77%	22%
2024	4	2,879	33	1%	79%	20%
2025	1	2,696	26	1%	78%	21%

Home Delivered Meals - Client Satisfaction Survey Results

Year	2024			2025
Quarter	2	3	4	1
Overall Satisfaction	98.38%	98.30%	98.48%	98.56%
Good Choice of Meals Available	95.46%	94.65%	96.15%	96.30%

Medical Transportation - Client Satisfaction Survey Results

Year	2024			2025
Quarter	2	3	4	1
Overall Satisfaction	99.35%	99.78%	96.80%	98.75%
Service Returns Client Home Promptly	100.00%	100.00%	95.65%	95.00%

Home Care Assistance - Client Satisfaction Survey Results

Year	2024			2025
Quarter	2	3	4	1
Overall Satisfaction	95.90%	96.47%	95.90%	94.94%
Aide is Dependable	94.16%	94.77%	93.15%	92.44%

Steps to Stability Clients Served and Cost

Home Modification

Year	2024	2024	2024	2025
Quarter	Q2	Q3	Q4	Q1
Number of Members Assisted	54	65	15	40
Total Cost	\$248,667	\$302,850	\$41,112	\$146,761

Duke Energy - Electric and Gas Utility Credits

Year	2024	2024	2024	2025
Quarter	Q2	Q3	Q4	Q1
Number of Members Assisted	540	1	0	957
Total Cost	\$138,466	\$500*	\$0	\$478,500

Water Utility Credits

Year	2024	2024	2024	2025
Quarter	Q2	Q3	Q4	Q1
Number of Members Assisted	21	8	0	0
Total Cost	\$11,225	\$3,793	\$0	\$0

* In quarter 3, 2024, all funds for the Duke Energy Utility Credit assistance had been exhausted.

ESP Cost Savings Analysis

Referrals				
Year	2024	2024	2024	2025
Quarter	Q2	Q3	Q4	Q1
Number of Members Assisted	70	58	48	50
Over the Counter (OTC)	65	57	46	49

Services Awarded				
Year	2024	2024	2024	2025
Quarter	Q2	Q3	Q4	Q1
Emergency Response Service	41	28	19	14
Medical Transportation	45	48	34	40

Total Cost Savings				
Quarter _ Year	Q2_2024	Q3_2024	Q4_2024	Q1_2025
Total Cost Savings(as of qtr. end date)	\$27,934	\$21,657	\$12,585	TBD

Total Annual Cost Savings	2024	2025
	\$91,051	TBD



Hamilton County ESP

Quarter 1, 2025 (January - March 2025)

Based on Actual and Projected Revenue & Expenses as of March 31, 2025

	Annual Projected	Annual Budget	Budget Variance	% Budget Variance
Revenue				
Tax Levy Appropriations	\$28,711,683	\$28,711,683	\$0	0.0%
Federal & State Funding				
Title III B - Supportive Services	\$27,065	\$0	\$27,065	
Title III C2 - Home Delivered Meals	125,604	201,826	(76,222)	-37.8%
Title III E - Caregiver Support	61,644	148,810	(87,166)	-58.6%
Alzheimer's	3,898	15,591	(11,693)	-75.0%
Nutrition Services Incentive Program (NSIP)	78,278	253,521	(175,243)	-69.1%
Senior Community Services	44,206	146,540	(102,335)	-69.8%
Other Federal (ARPA)	520,492	-	520,492	
Client Contributions				
Client Donations	2,089	3,649	(1,561)	-42.8%
Co-Pays Received	365,107	360,462	4,646	1.3%
Total Revenue	\$29,940,066	\$29,842,082	97,984	0.3%
Expenses				
Operating Expenses				
Administrative	\$1,822,962	\$1,818,296	(\$4,666)	-0.3%
Intake & Assessment	171,892	208,960	37,068	17.7%
Fast Track Home Case Management	1,493,347	1,446,187	(47,160)	-3.3%
Case Management	4,172,540	4,140,234	(32,306)	-0.8%
Total COA Expenses	\$7,660,741	\$7,613,677	(\$47,063)	-0.6%
Purchased Services				
Home Care Assistance	\$7,525,955	\$7,248,839	(\$277,116)	-3.8%
Consumer Directed Care	2,332,934	2,637,953	305,019	11.6%
Laundry Service	219,609	234,367	14,758	6.3%
Independent Living	208,532	260,928	52,396	20.1%
Minor Home Modifications	255,507	454,228	198,721	43.7%
Pest Control	6,889	38,753	31,864	82.2%
Major House Cleaning	18,235	70,911	52,676	74.3%
Home Medical Equipment	251,225	267,233	16,008	6.0%
Emergency Response Systems	447,071	450,985	3,913	0.9%
Home Delivered Meals	6,558,065	6,620,197	62,131	0.9%
Adult Day Service	388,834	502,302	113,467	22.6%
Adult Day Transportation	95,307	125,349	30,042	24.0%
Medical Transportation	1,134,602	1,333,517	198,915	14.9%
Non-Medical Transportation	351,927	408,384	56,458	13.8%
ARPA Hamilton County Utility Program	520,492	0	(520,492)	0.0%
Transportation Coordination	226,925	274,459	47,534	17.3%
Steps to Stability(Utilities HM Program)	1,437,215	1,000,000	(437,215)	-43.7%
Senior Homeless Medical	250,000	250,000	0	0.0%
Guardian Gap Program	50,000	50,000	(0)	0.0%
Gross Purchased Services	\$22,279,325	\$22,228,405	(\$50,920)	-0.2%
Gross Program Expenses	\$29,940,066	\$29,842,082	(\$97,984)	-0.3%
Client Census	4,360 *	4,479	119	2.7%
Cost of Services per Client	381.07	394.99	13.92	3.5%

* projected year end census

1. Census Trends

- A. Quarter-End Census by Program is a client count based on a one-day snapshot of clients with a status of 'Enrolled' or 'Suspended' on the last day of the quarter. It is used as an approximation of how many clients are being served on any given day.
1. The Service Trends section shows the client count based on billing data. This shows the number of clients whom services were delivered and invoiced. Given these differences, the quarter-end census and the client count for all services will not match.
- B. New Enrollments are calculated by taking the total number of clients who have an enrollment date during the quarter and an approved care plan.
- C. Disenrollment Outcomes
1. All Other Reasons Not Listed includes: Dissatisfied with Service/Program, Refused Cost, Share/Verification, Health/Safety, and Unable to Meet Client Need.
 2. Client Non-Compliant includes: Declined Call/Visit, Delinquent Balance, Refused, Transfer to Passport/Other Program and Unable to Contact.
 3. Adding the difference between *New Enrollments* and *Disenrollments* in a given quarter to the previous *Quarter-end Census* may result in a discrepancy due to the timing of census reporting and back dating client enrollments and disenrollments.

2. Service Trends

- A. Average Monthly Cost per Client is based on the average monthly cost of Intake and Assessment, Administration, Care Management and Provider Services divided by the quarter-end census.
- B. Clients Served by Service Group is based on billing data. These numbers represent the unduplicated client counts within each service group and overall. The All Services client count will not equal the sum of the service group subtotals because many clients receive more than one service.
- C. Home Care includes homemaking, personal care, companion, and respite services.
- D. Other Services includes Environmental Services, Adult Day Transportation and Independent Living Assistance.
- E. Dollars Paid by Service Group represents the total from the financial system. Clients Served and Units Billed represent when service was provided, dollars paid represents when services were paid.

3. FTH Census Trends

- A. Clients Enrolled in ESP is calculated by taking the clients who disenrolled from Fast Track Home within the quarter then determining the clients who have an active registration with the traditional ESP.
- B. Community Enrollment may include emergency referrals to ESP FastTrack service such as: Community Paramedicine, APS referral or other agency referral for FTH specific services.

4. FTH Service Trends

- A. Other Services includes Pest Control.

5. Unit of Measure Descriptions by Service

- A. Adult Day - Number of Days
- B. Consumer Directed Care - Number of Hours
- C. Electronic Monitoring - Number of Months
- D. Home Care - Number of Hours
- E. Home Delivered Meals - Number of Meals
- F. Medical Transportation - Number of Trips

6. **N/A:** This is displayed on a case-by-case basis, but is most frequently related to a rate or unit change. The metric should display data in subsequent quarters after the change has taken effect.

7. Benefit Cost Savings:

OTC Medicare cards help cover the cost of over-the-counter drugs for seniors enrolled in certain Medicare Advantage plans. Not every Medicare Advantage plan offers this benefit, and limitations vary between the plans that do.

Hamilton County Program Update Report

June 2025

Adult Day Services (ADS)

Margaret's Heart and Restoration ADS are new ESP Providers providing both Intensive and Enhanced Adult Day services as well as transportation to clients residing in Warren County.

- Restoration Adult Day Services - 7 Triangle Park Drive, Cincinnati, Ohio 45246
- Margaret's Heart Adult Day Services- 651 Old State Route 74 Cincinnati, OH 45245

Electronic Monitoring Systems (EMS)

No change

Environmental Services

No change

Independent Living Assistance (ILA)

No change

Home Care Assistance (HCA)

An HCA Partnership meeting was held 5/21/25. We were able to come together to discuss the best practices and ways to improve the HCA service. Providers came to the table with valuable questions/comments/recommendations for the program to discuss further. The meeting successfully brought together the HCA providers and COA so that we can continue to develop the HCA service to better meet current needs.

home52 Transportation

Business Relations Partners are in the process of meeting with home52 transportation providers to discuss lowering rates and other key program needs.

Home Delivered Meals (HDM)

No change

Home Medical Equipment (HME)

On 4/16/25 Janz Medical Supply was placed on hold for new referrals due to a lack of communication and not fulfilling their current orders.

We have trained new Janz staff on the use of the CareDirector Provider Portal and the steps to complete billing. We will continue to monitor their progress.

Medical Recovery and Extended Care Services (MRECS) RFP

This RFP resulted in one submission: Center for Respite Care, Inc. The Center for Respite Care, Inc. successfully passed all Go/No Go criteria and scored an overall 90.5/100 for all other criteria.

Contract start date is July 1, 2025.

As a reminder, this is a unique service within Hamilton County which provides quality holistic medical care to people experiencing homelessness who need a safe place to heal, while assisting them in breaking the cycle of homelessness. Previously, the Hamilton County Commissioners had funded this program separately with levy funding and recently requested COA oversee the contract.

Minor Home Modifications and Repairs (MHM)

Agencies interested in becoming MHM providers have received education and instructions on how to become contracted with ESP.

Senior Farmers Market Nutrition Program

Senior Farmers Market applications went live April 15th with benefits available May 15th to all qualifying participants. Applications for 2025 SFMNP are online only this year in order to streamline the benefit process and allow participants to redeem benefits faster. Hamilton County has 847 participants enrolled for benefits with \$816 redeemed to date.

2025 Provider Monitoring Schedule

HAMILTON COUNTY ESP PROVIDER MONITORING SCHEDULE

(Please find below the list of Hamilton County Providers of ESP Services and the tentative dates for annual review for 2025.)

Hamilton County ESP Providers	Review Type	Review Tentative Date
360 Total Care	Annual	May-25
A Best Home Care	Annual	October-25
A Miracle Home Care	Annual	August-25
Active Day Cincinnati	Annual	December-25
Always There Healthcare	Annual	May-25
Amaramedical Health Care Services	Annual	January-25
American Ramp Systems	Biennial	November-25
Arrow Heating Cooling and Home Maintenance, LLC	Annual	November-25
Bayley Adult Day	Annual	August-25
Bernens Medical Pharmacy	Biennial	December-25
Bethesda Medical Transportation	Annual	August-25
Cincinnati Medical Transport	Biennial	November-25
Comfort and Care Home Health Agency	Annual	September-25
Custom Home Elevator	Biennial	August-25
Day Share, Senior Services	Annual	December-25
Deupree Community MOW	Annual	June-25
Eastern Personnel Services	Annual	October-25
Elite Xpress Transportation LLC	Biennial	December-25
Guardian Medical Monitoring	Biennial	November-25
Help at Home (Prime Home Care)	Annual	February-25
Hillebrand Home Health	Annual	August-25

Home Care by Blackstone - Assisted Care by Blackstone	Annual	March-25
Home First Non-Medical	Biennial	December-25
I Care Transportation LLC	Annual	August-25
Interim HomeStyles of Greater Cincinnati	Annual	September-25
Janz Medical Supply (fka Mullany's)	Annual	June-25
Jewish Family Service of the Cincinnati Area	Annual	March-25
Kemper Shuttle (Universal Work & Power)	Biennial	January-25
LCD Home Health Agency	Annual	July-25
Lincoln Heights Outreach	Annual	August-25
Mayerson Jewish Community Center	Annual	April-25
MedAdapt Ltd.	Biennial	May-25
Milt's Termite & Pest Control	Biennial	July-25
Northwest Adult Day Service	Annual	October-25
Nova Home Care Company	Annual	October-25
Ny's Transportation	Biennial	January-25
Otterbein Lebanon Adult Day Service	Annual	June-25
Partners In Prime	Annual	June-25
Premier Transportation	Annual	April-25
PWC People Working Cooperatively, Inc.	Biennial	May-25
Quality Care	Annual	September-25
Queen City Medical Transport	Biennial	May-25
Right at Home	Annual	June-25
Senior Helpers of Southern Ohio (SH of Southern Ohio)	Annual	August-25
Shaddai Transportation	Annual	July-25
Superior Home Care	Annual	May-25

T and R Transportation	Annual	May-25
Timmons Tender Care	Annual	October-24
Up and Walk Transportation	Annual	June-25
Wesley/Meals on Wheels of Southwest OH & Northern KY	Annual	April-25
Western Hills Home Care	Annual	June-25

2025 Draft Request for Proposals (RFP) Schedule

COA is not proposing to issue any RFPs for the remainder of 2025.

We will continue to monitor client service needs as the year progresses to determine if any additional RFPs need to be published this upcoming year.

Community Access Analysis Report – Elderly Services Program

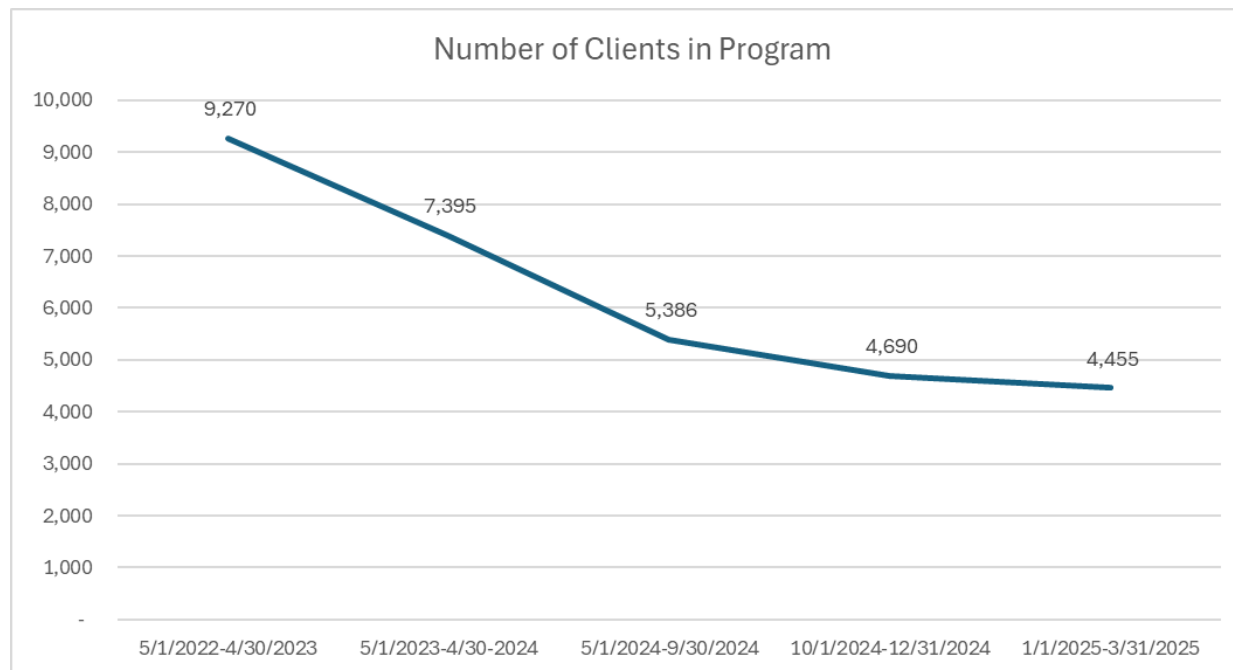
Council on Aging - 6/26/2025

Community Access Workgroup Members:

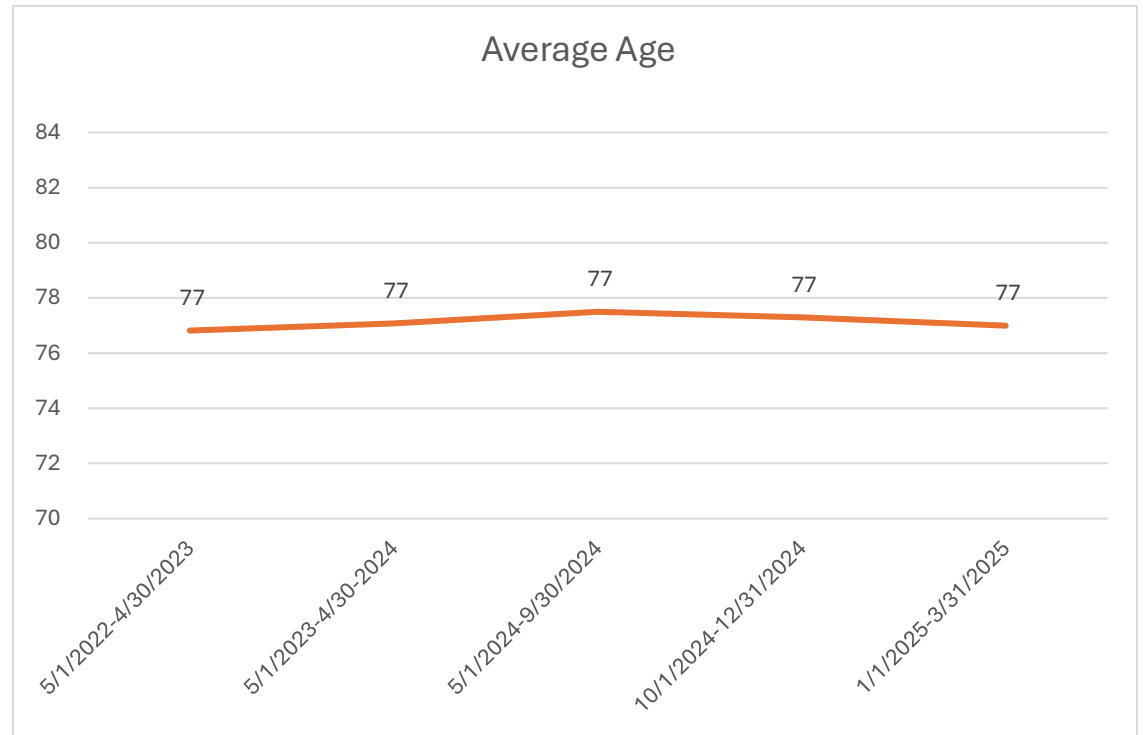
- Maria Tirado Rodriguez – HCESP CC
- Shelby Stout – ESP Manager
- Paula Smith – Communications
- Megan Kelley – Business Analyst
- Nancy Cahall – Government Relations
- Alyssia Kelley – ESP Supervisor
- Tonya Smart – FTH Manager
- Lisa Kruse – Communications
- Kim Clark – Community Business Operations

Data Before & After Managed Enrollment:

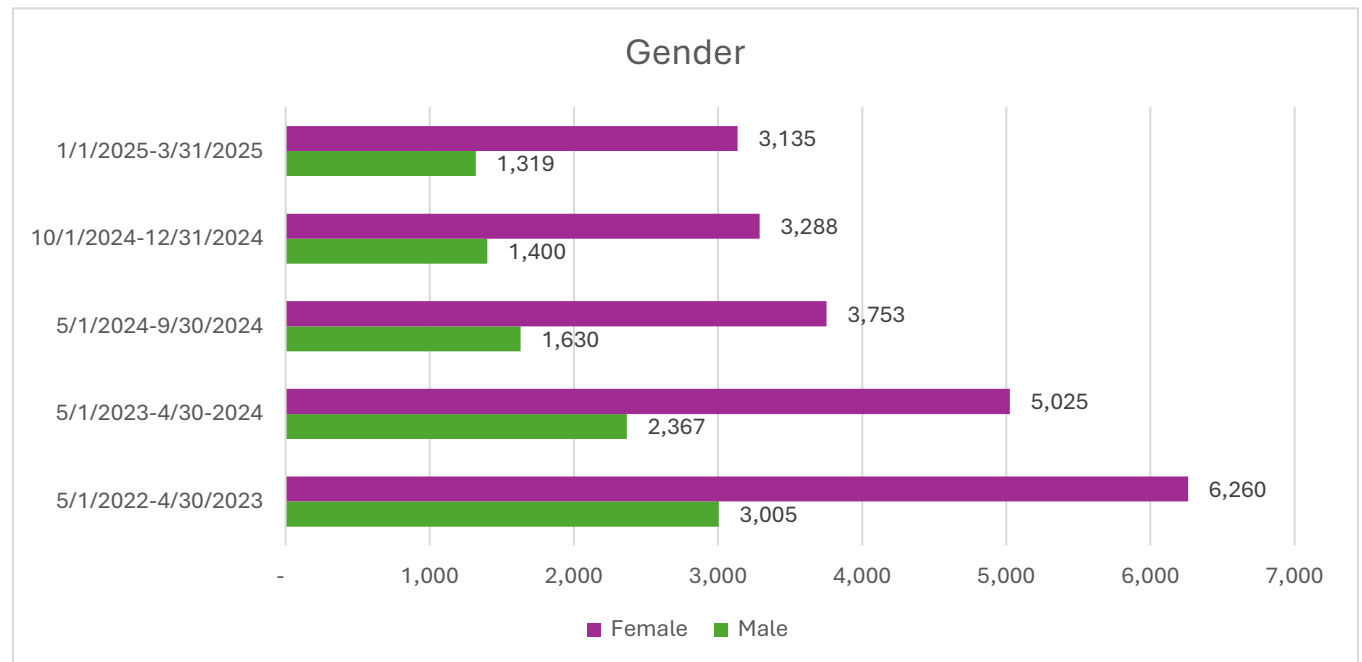
- Number of clients: As expected, Managed Enrollment has decreased the number of clients in HCESP
- As we begin to expand our criteria for Managed Enrollment, the number of Clients in HCESP is expected to increase



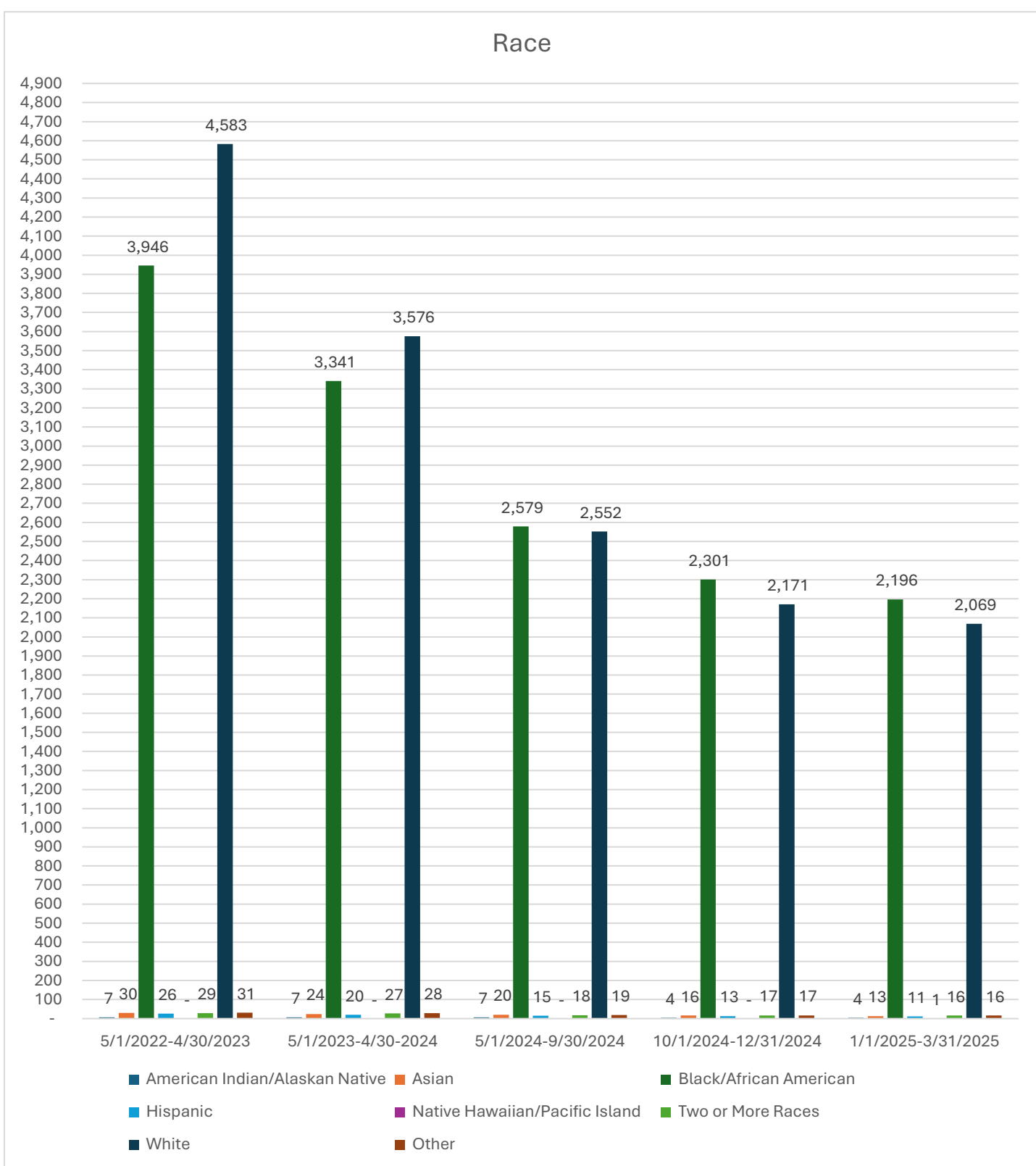
- Age: The average age of a client in HCESP has not been affected by Managed Enrollment
- Average age continues to be 77



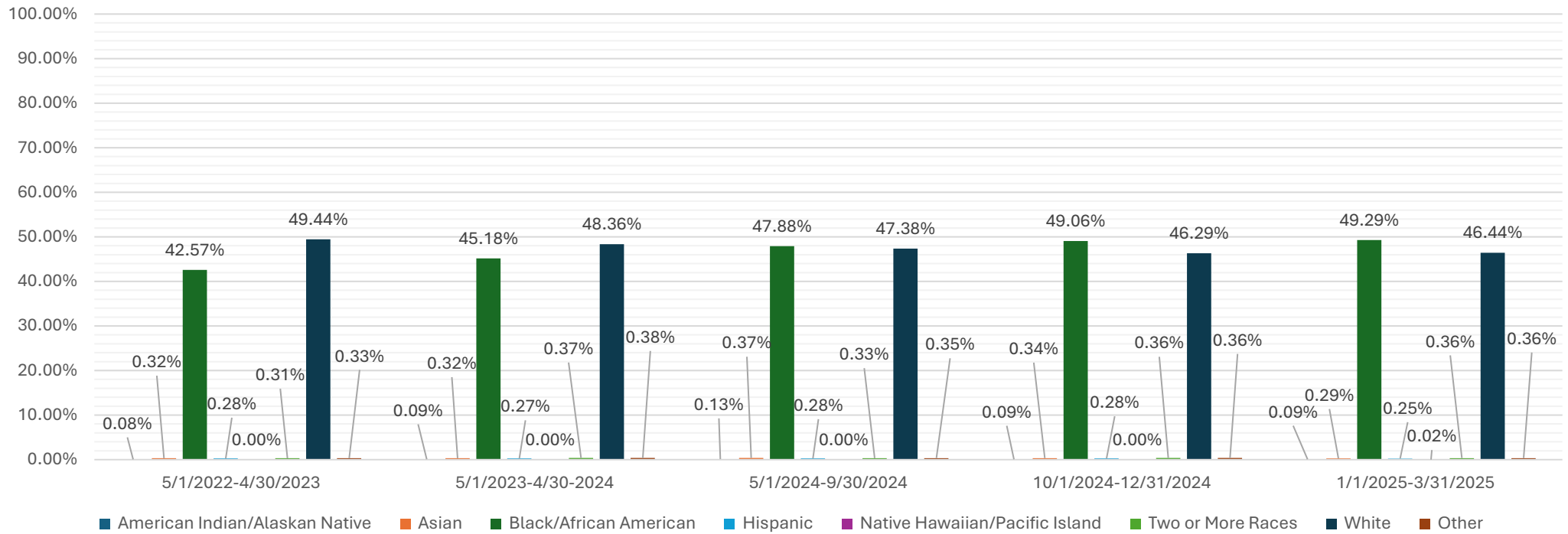
- Gender: HCESP has always had and continues to have a higher number of female vs male identifying clients



- Race: Majority of HCESP clients identify as Black / African American or White. Together, these two races make up over 95% of clients. All other races – American Indian / Alaskan Native, Asian, Hispanic, Native Hawaiian / Pacific Islander, Biracial, Multiracial, and Other, fall under 1% of total clients in HCESP
- American Indian / Alaskan Native – No changes
- Asian – Decreased
- Black / African American – Increased
- Hispanic – Decreased
- Native Hawaiian / Pacific Island – Increased by 1 client
- Biracial – No changes
- White – No changes
- Other – No changes

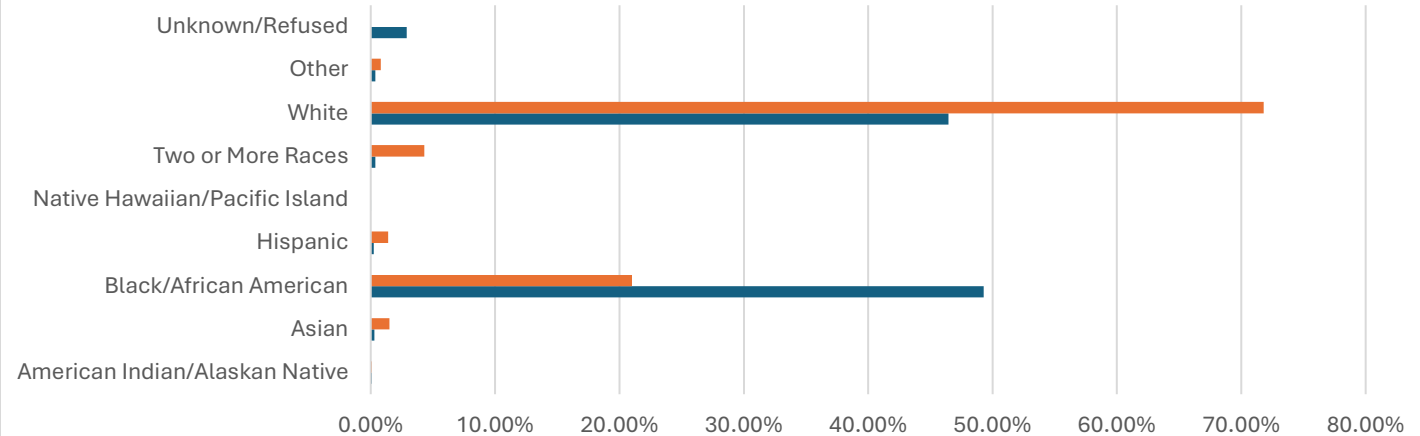


Race



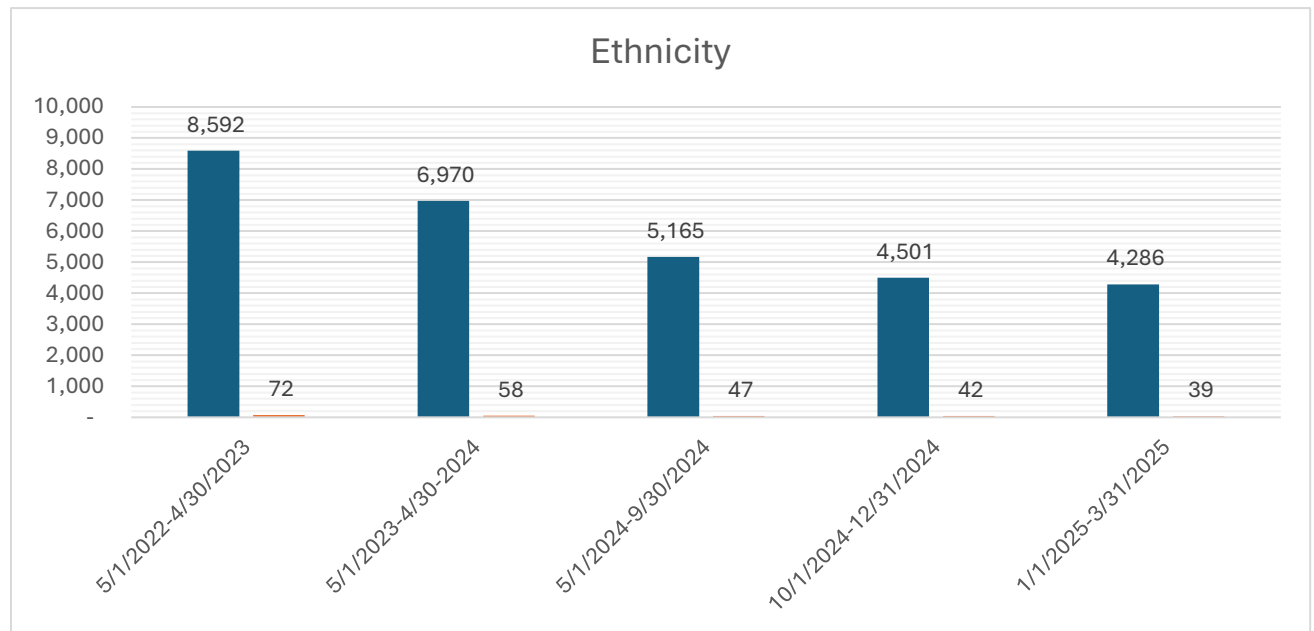
- Compared to the general 60+ Hamilton County population data

Race

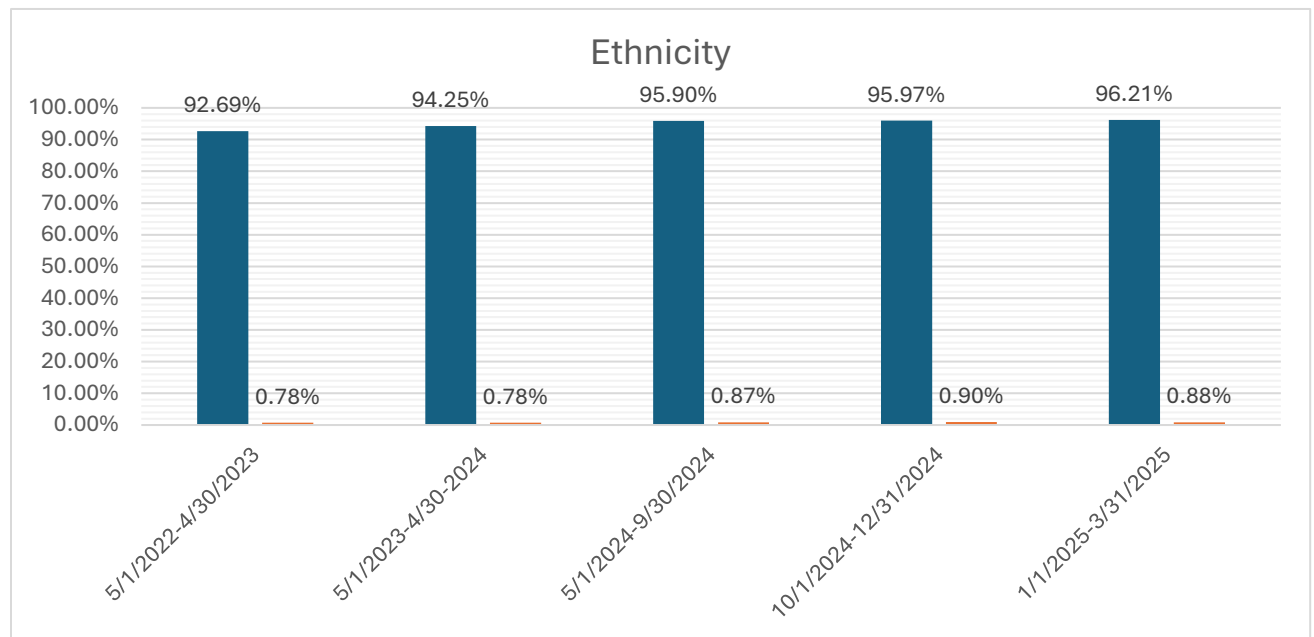


	American Indian/Alaskan Native	Asian	Black/African American	Hispanic	Native Hawaiian/Pacific Island	Two or More Races	White	Other	Unknown/Refused
Population	0.10%	1.50%	21.00%	1.40%		4.30%	71.80%	0.80%	
ESP	0.09%	0.29%	49.29%	0.25%	0.02%	0.36%	46.44%	0.36%	2.90%

- Ethnicity: Measured as “Hispanic or Latino” or “Non-Hispanic or Latino”
- Hispanic or Latino identifying clients have remained under the 1% of HCESP clients



- We are researching data on how to best approach clients with conversations and questions on race and ethnicity in a way that will make both staff and clients feel comfortable and valued



Providers & Language Services

- Provider Services confirmed that Wesley Community MOW uses Language Line for translation purposes.
- Contracts state that providers must be able to communicate effectively with clients.
- Provider Services will discuss the possibility of completing a quarterly survey to see which providers use translation services and/or have bilingual staff.
- Care Coordinators will communicate language needs to the provider when making a referral.
- Provider Services has sent out a survey to providers regarding their language services and bilingual staff. The survey was due back by the end of May.

Grant Update

- Building Capacity for Equitable Data and Evaluation
 - 18-month grant for up to \$40,000 in funds
 - Aims to strengthen organizational capacity for equitable data and evaluation
 - Address health disparities and inequities by focusing on vital conditions for health such as housing, transportation, and lifelong learning
 - Ensure fair access to the resources and conditions needed for health and wellbeing
 - Shift mindsets and practices around data and evaluation to center equity
 - Support nonprofit and government organizations in adopting equitable data approaches
- Not short-listed
 - We continue to keep options open regarding grant opportunities to support our continued work on community engagement.

Agency Partnership - Su Casa:

- Health Fair 4/6 at St. Julie Billiart Parish / Fenmont Center: The event went well. We had about 20 families stop at our table and get information. We encouraged everyone to take at least one card with our contact information for the future even if they didn't have any current needs.
- We are strengthening our relationship with Su Casa
 - Presentations
 - Alert for future events

Next Steps

- We plan to continue monitoring data quarterly over time to track the success of our efforts as well as prevent any unintentional impact related to process or policy changes on the population we serve.
- We are working to close the gap by increasing outreach activities to underserved populations and creating community partnerships to support our efforts.



2024

**ANNUAL
REPORT**

Hamilton County
*Elderly Services
Program*



Welcome

As chair of the Hamilton County Elderly Services Program (ESP) Advisory Council, I am pleased to share our program's 2024 Annual Report. In 2024, ESP and the senior services tax levy that funds it, served 8,321 of our friends, neighbors and loved ones.

It continues to be a challenging time for ESP, but this advisory council is committed to our goal of serving as many people as possible with the funding available to us. In the face of rising demand for services, increasing costs and shrinking federal funding, we continue to work with ESP's administrator, Council on Aging (COA), to find innovative ways to meet this goal.

In 2024, as we continued to manage enrollment into ESP to focus on serving individuals most at risk for nursing home placement, we found several opportunities to offset or reduce costs to the levy, which ultimately helped us stretch tax dollars further to serve more people. For example, Hamilton County's \$2.5 million share of Ohio's Healthy Aging grants was administered by COA at no administrative cost, which helped offset costs for critical services delivered through ESP. While the Healthy Aging grant offered a one-time boost to our program that helped to meet the needs of more than 3,600 individuals, other initiatives are having a longer-term impact on our bottom line:

- A competitive bidding process for Electronic Monitoring Service allowed COA to leverage regional volume and lower costs. This process resulted in \$768,300 in savings for our program, bringing in a monthly service rate of \$19 – a rate 42% lower than the Medicaid rate.
- ESP's laundry delivery service is growing in popularity and is saving about \$35 per week per client, compared to traditional laundry service provided by home health aides.
- Following ESP's payor of last resort model, we saved \$91,051 in 2024 by helping clients access benefits provided and paid for by Medicare.

- COA-led advocacy with Ohio's Common Sense Initiative relieved regulatory burdens impacting home-delivered meals clients and providers, resulting in 7% savings for Hamilton County ESP.

Also in 2024, COA launched STEPS to Stability, a program designed to meet the emergent needs of older adults who can't access support through other available programs. Thanks to \$1 million in funding allocated to the program by Hamilton County commissioners, STEPS to Stability provided utility assistance and home modifications and repairs to more than 1,000 county residents.

All of this work comes at a critical time. In recent years, in-home care costs in ESP have been low because there were not enough workers to meet the demand. This trend is now reversing, resulting in higher costs while federal funding returns to pre-pandemic levels.

Looking ahead, this advisory council will work with COA to begin easing some of the eligibility requirements put in place to manage the program's enrollment, and we will continue to identify and implement innovative solutions to help us meet the growing needs of our county's older adults.

On behalf of this advisory council and the thousands of older adults and families served by our program, thank you for your continued support of the Hamilton County Elderly Services Program.



Janice Hunter

Chair, Hamilton County
Elderly Services Program
Advisory Council

ESP is a Community Partnership

Hamilton County Commissioners

Denise Driehaus, President
Stephanie Summerow Dumas, Vice President
Alicia Reece, Commissioner

Hamilton County Elderly Services Program Advisory Council

Janice Hunter, Chair; Dimity Orlet, Vice Chair; Angele Blackshear (Sister Keli);
Viola Brown; Randi Burlew; Janine Gage; Holly Mundon; Susan Van Amerongen

Administered by Council on Aging

4601 Malsbary Road, Blue Ash, OH 45242
(513) 721-1025, (800) 252-0155 www.help4seniors.org





2024

Client Stats

Hamilton County ESP clients are caught in the middle: with income too high to qualify for Medicaid, but too low to pay for private in-home care. They need help with basic activities like personal care and transportation. Between raising a family and going to work, family members help as much as they can, but ESP fills in gaps in care so our older neighbors and loved ones can continue to live independently in their homes and communities. ESP is a program that benefits our entire community.

8,321 Clients Served


68%
FEMALE


32%
MALE



59%
LIVE ALONE



\$293
MONTHLY
OUT-OF-POCKET
MEDICAL EXPENSES



77%
AGE 70+ (38 100+)



\$1,918
MEAN MONTHLY
INCOME



481
AVERAGE DAYS
ON THE PROGRAM

Demographic data includes individuals enrolled in ESP and FastTrack Home only.



Success Stories

To read these full success stories and more,
scan the code with your mobile device or visit
www.help4seniors.org/hcesp2024

513Relief Bus, COA receive national innovation award for work to connect residents with resources

2024 marked the second year of COA's partnership with Hamilton County's innovative 513Relief Bus. The partnership celebrated several highlights in 2024, including receipt of a national innovation award and collaboration to host a special Healthy Aging Day party for Hamilton County older adults and caregivers.



Healthy Aging grant serves more than 3,600 older adults

In 2023, Hamilton County commissioners received \$2.5 million from Ohio's Healthy Aging grant to help at-risk older adults remain in their homes and communities. COA worked with county leaders to develop a plan that would use the grant to address urgent, unmet needs, including home repairs and modifications, food assistance and help accessing benefits. COA successfully delivered the services supported by the grant, serving more than 3,600 older adults.



home52 Transportation recognized by National Aging and Disability Transportation Center

Michelle was a long-time user of public transportation – until health complications make it impossible for her to get to the bus stop. She got help from home52 Transportation, a specialized transportation service designed to meet the unique needs of older adults and individuals with disabilities. home52 Transportation was selected for inclusion in the 2023 National Aging and Disability Transportation Center's (NADTC) Innovations Showcase.



Innovative service prevents simple need from becoming a big barrier to independence

Michelle was a long-time user of public transportation – until health complications make it impossible for her to get to the bus stop. She got help from home52 Transportation, a specialized transportation service designed to meet the unique needs of older adults and individuals with disabilities. home52 Transportation was selected for inclusion in the 2023 National Aging and Disability Transportation Center's (NADTC) Innovations Showcase.



Competitive bidding yields big savings for ESP

As ESP's administrator, Council on Aging's goal is to contract with the highest quality providers at the lowest possible price to serve as many individuals as possible with the tax dollars available. A competitive bidding process completed in 2024 for Electronic Monitoring Systems is yielding more than \$760,000 in savings for Hamilton County ESP.



New program targets unmet needs of older adults

STEPS to Stability is a new program designed to address one-time and immediate needs of older adults who do not qualify for help through existing programs. In 2024, the STEPS to Stability program provided \$1 million in utility assistance and home repairs and safety modifications to more than 1,000 income-eligible older adults in Hamilton County, including Brenda, whose front windows were destroyed by a mulch fire. "I didn't know what I was going to do," Brenda said. "I did not think I would qualify, I had been told 'no' so many times."



Expenses + Revenue

How tax dollars are spent

ESP would not exist without the generous support of voters. A county tax levy in place since 1992 provides 85% of ESP's funding. The current 1.6-mill property tax levy was approved by 78% of voters in 2022 and was estimated at that time to cost \$33.97 per \$100,000 of property valuation annually. COA's goal is to ensure the highest quality services at the lowest cost in order to serve as many people as possible with the tax dollars available.

As the Area Agency on Aging for southwestern Ohio, including Hamilton County, COA leverages state and federal funding to cover 8% of ESP expenses. Additional funding comes from voluntary client donations and client co-payments.

Revenue

Federal and State (via Council on Aging)	\$2,598,392
Healthy Aging Grant	\$1,881,828
Client Donations and Co-payments	\$445,494
Hamilton County Elderly Services Levy	\$28,018,931
TOTAL REVENUE	\$32,944,646

Expenses

SERVICE	CLIENTS SERVED	SERVICE UNITS	COST
Care Management	6,123	58,457 months	\$4,876,509
Home-Delivered Meals ¹	4,082	795,375 meals	\$7,233,383
Electronic Monitoring Systems	3,171	27,860 months of rentals	\$588,709
Home Care Assistance	2,929	312,307 hours	\$8,163,784
FastTrack Home Care Transitions	1,809	7,785 months	\$1,412,674
Transportation	1,140	44,081 one-way trips	\$2,309,125
STEPS to Stability ^{1,2}	1,099	1,337 repairs and utility credits	\$862,429
Home Medical Equipment	912	1,618 items	\$260,843
Consumer-Directed Care ¹	651	164,360 hours	\$3,147,069
Minor Home Repairs	337	356 repairs	\$488,267
Laundry Service	239	4,240 jobs	\$243,181
Independent Living Assistance ³	143	2,686 hours	\$288,014
Adult Day Services	79	5,584 days	\$504,977
Adult Day Transportation	79	5,548 one-way trips	\$137,463
Environmental Services ⁴	42	117 jobs	\$77,796
Overnight Respite ⁵	34	222 nights	\$76,595
Medical Recovery and Extended Care Services	23	1,159 bed nights	\$250,000
Kinship Meals ⁵	9	1,815 meals	\$22,770
Administration	N/A	N/A	\$1,879,800
Intake and Assessment	N/A	N/A	\$121,258
TOTAL EXPENSES			\$32,944,646

Additional Expenses

Hamilton County Commissioners distributed funds from the senior services levy to the following services and organizations: Care for Caregivers, \$170,447; Hamilton County Job and Family Services Adult Protective Unit, \$400,000; Hamilton County Veterans Service Commission, \$163,451.

¹ Services funded in whole or in part by Healthy Aging Grant

² Funded in part by senior services tax levy. For 2024, program included home repairs and utility assistance.

³ Help with benefit applications and organizing personal and household records

⁴ Pest control, major housekeeping and waste removal

⁵ Service funded in whole or in part by Federal Older Americans Act, drawn down by Council on Aging

What is ESP?

The Elderly Services Program (ESP) helps eligible county residents age 60 and older remain safe and independent in their homes, providing help with activities of daily living (bathing, cleaning, cooking, transportation and more), and filling gaps in care that may already be provided by family caregivers.

ESP offers flexible care to meet clients' changing needs. Eligibility and care needs are determined during an in-home assessment by a professional care manager who coordinates and monitors clients' care. Income is not an eligibility factor for ESP, but some clients have a co-payment based on their income and assets.

The program is operated by Council on Aging (COA) via a contract with Hamilton County Commissioners, who appoint a board to advise on program needs and policies. Provider agencies deliver ESP services via competitive contracts with COA. In some cases, clients may hire their own service providers. Clients, caregivers and taxpayers round out the partnership. ESP is a compassionate and cost-effective alternative to nursing home care.

Cost to Taxpayers

\$521

Monthly costs for
ESP services

VS

\$6,000+

Monthly costs for
nursing home care

What is COA's Role in ESP?

As the program's operator, COA provides: eligibility assessments; care management; program development; provider management; data analytics; financial services; information technology; quality improvement and community engagement. As a state-designated Area Agency on Aging, COA provided these additional services to county residents in 2024:

78,165

requests for information and referral fulfilled

1,972

individuals in Hamilton County were provided support to transition from one care setting to another

4,837

Hamilton County residents received home- and community-based services through Medicaid-funded programs

\$4.5 million

in Title III funding allocated to local organizations for congregate meals, legal assistance, wellness education, caregiver support, transportation and other supportive services

Hamilton County ESP services are funded by a special tax levy.

ESP does not supplant care provided by families but rather secures the necessary additional care the family is unable to provide. ESP expects families to take responsibility to care for family members to the fullest extent possible.

LATEST COA PROJECTION: May 2025						
	Year 1 2023 Actuals	Year 2 2024 Actual	Year 3 2025 Projected	Year 4 2026 Projected	Year 5 2027 Projected	5-Year Total
Revenue						
Beginning Fund Balance	26,634,426	21,731,120	20,349,955	17,965,458	13,970,697	26,634,426
Levy Revenue (Cash Basis)	27,129,420	27,773,502	27,773,502	27,773,502	27,773,502	138,223,428
COA Levy Draw	30,461,910	28,018,931	28,711,683	30,468,263	32,537,183	150,197,970
Title III and State Funding (Accrual Basis)	2,094,161	2,335,372	340,694	1,074,053	1,074,053	6,918,332
Other Revenue	62,717	-	-	-	-	62,717
Client Donations (Accrual Basis)	3,263	3,512	2,089	2,451	2,689	14,004
Client Co-Payments (Accrual Basis)	472,867	441,982	365,107	401,933	432,621	2,114,511
Total Revenue to support ESP	33,094,917	30,799,797	29,419,574	31,946,700	34,046,546	159,307,534
Total Available Revenue (incl. previous year carryover)	56,396,854	52,285,488	48,831,348	47,217,397	43,253,561	173,967,418
COA Operational Expenses						
Provider Services ESP (Accrual Basis)	23,617,511	22,330,080	18,992,433	20,088,652	22,540,523	107,569,198
Healthy Aging Grant	(610,914)	(1,881,828)	-	-	-	(2,492,742)
Provider Services FTH (Accrual Basis)	838,829	728,559	802,260	835,896	855,287	4,060,831
Intake & Assessment (Accrual Basis)	56,049	121,258	171,892	177,049	182,361	708,609
Care Management (Accrual Basis)	4,887,480	4,876,509	4,172,540	4,674,142	5,268,431	23,879,102
FTH Care Management	1,119,042	1,412,674	1,493,347	1,538,147	1,584,292	7,147,501
On-Demand Transportation	167,043	220,316	226,925	233,733	240,745	1,088,763
Steps to Stability*	1,000,000	862,429	1,437,215	2,152,334	1,000,000	6,451,978
Senior Homeless Medical	-	250,000	250,000	250,000	250,000	1,000,000
Program Management (Accrual Basis)	2,019,878	1,879,800	1,822,962	1,946,747	2,074,907	9,744,293
Total COA Operational Expenditures	33,094,917	30,799,797	29,369,574	31,896,700	33,996,546	159,157,534
Job and Family Services (Cash Basis)	400,000	400,000	400,000	400,000	400,000	2,000,000
Veteran's Services (Cash Basis)	184,726	163,451	250,000	250,000	250,000	1,098,177
Levy Administration (Cash Basis)	531,484	401,838	546,316	400,000	500,000	2,379,638
Patient navigation	59,682	-	-	-	-	59,682
Senior Homeless Medical	250,000	-	-	-	-	250,000
Care for Caregivers	269,360	170,447	250,000	250,000	250,000	1,189,807
Total Levy Expenditures	34,790,169	31,935,533	30,815,890	33,196,700	35,396,546	166,134,838
Adjustment	(14,734.63)					
Actual & Estimated Fund Balance	21,621,419	\$20,349,955	\$18,015,458	\$14,020,697	\$7,857,016	7,857,016
Year Ending Client Census (Includes FTH)	5,468	4,541	4,360	4,720	5,080	
Annual Clients Served	8,988	8,216	7,289	7,125	7,485	

Assumptions:

Census has been projected to level off by the end of July, at a level of 3,950 and grow on average 30 clients each month after (based on averages prior to restricted enrollment). FTH census is projected to be on average 260 clients/month.

Levy revenue for 2025-2027 is projected at the level of 2024 actuals (provided by county auditor).

Title III funds blended into the program included additional ARPA funding in 2023 and 2024. Starting in 2025 the blending will be at pre-pandemic levels annually, estimated to be \$1,074,053. The 2025 funding is reduced to reflect some blending in Q4 2024 as well as reduced NSIP award.

Annual non-COA expenditures have been extended through this cycle, using average values from current cycle, as well as projections from the 2024 auditor sheet.

Steps to Stability program replaces the Utilities and Home Modifications program. The estimated additional clients served through the expansion of the program is reflected in the projections for the remainder of the cycle.

Intake & Assessment expenses are based on budgeted salaries; Care Management expenses are based on a PMPM cost + EMR cost.

Provider Services are forecasted on a Cost per Client basis.

Home Delivered Meals - the increase in Cost per client reflect the weighted average yearly increase prices, as submitted in the most recent RFP bids; this calculated increase was applied in Q4, starting with 2024.

HCA rates are calculated based on cost per client, with consideration given to utilization of service (# clients using service) and intensity (# of units per client using service); Every October the estimated cost is increase based on a weighted average of the RFP bids for this service.

Consumer Directed Care has a projected CPC 5% increase yearly, applied in Q1.

Adult Day Services and Transportation are projected at pre-pandemic utilization levels, with cost adjusted to reflect the new RFP bids

Transportation coordination is projected at \$226,926 in 2025; the remaining years are projected at estimated cost if no grants were available (to date, we have reduced this cost with ARPA and OKI funding).

EMRS RFP was successful in identifying a high quality provider that would save the levy ~\$350K , which allows us to increase the number of clients served over this cycle; New pricing took effect Oct 2024.

In 2023 and 2024, COA received the Healthy Aging grant, with the amount allocated to Hamilton County of \$2,492,742. COA used this grant to reduce the Provider services cost to the county, and in effect lowered Admin cost base, which also reduced the Program Management cost to the county.

Fixed Cost Sharing Proposal – Hamilton County ESP June 2025

Background:

The Council on Aging has evaluated changes to improve the cost-sharing process over the past two years. Our agreement with the county requires that older adults above a certain income threshold share in their service costs. All collected payments are reinvested in the program to provide more services. However, collections have been flat or declining. Scripps Gerontology evaluations suggest considering changes to the process for simplification.

The goals are:

1. Simplifying the process,
2. Maintaining or increasing cost sharing revenue,
3. Appropriate cost sharing amount that addresses economic hardships

The Current Process:

Cost sharing is determined by the case manager during the in-home assessment. Income and expenses are reviewed and inputted into the Care Director system, assets are calculated based on a formula, and a cost sharing % is calculated. A monthly invoice is mailed from COA to the client for payment. 100% of the payments are re-invested into the ESP program as another source of revenue that allows us to serve more county residents.

With this proposal, this process will largely remain the same, but with streamlined steps and improved calculation methodology to ensure a proper cost share amount based on their economic means to contribute towards the cost of the services they are receiving.

The Current Model:

1. The cost sharing amount that clients pay represents a percentage of actual costs applied to payments made to providers. This process results in substantial monthly fluctuations in invoice amount due to various factors.
2. The basis for the cost sharing model is rooted in the federal poverty guidelines, starting at 150% of poverty and increasing to 400% and above at 5% increments.
3. The calculations are hard-coded into Care Director, making it challenging to quickly determine the bill amount for discussion purposes at the time of enrollment.
4. Does not contemplate hardships related to the cost of housing.

5. 100% of out-of-pocket medical expenses are deducted from income.
6. Liquid assets (savings, IRA, investments, etc.) are calculated based on a formula that calculates an estimated value in the cost sharing calculation. The cost sharing amount is based on monthly income + estimated asset value minus any ongoing medical expenses. This calculation creates confusion and difficulty in explaining how it is derived. It also underestimates liquid asset values in most situations.
7. The cost sharing amount is established upon program enrollment and evaluated annually and every time the service plan is modified.

The Proposed Model:

1. The cost share amount that clients pay is a flat predictable amount.
 - a. The change is going from a variable amount to a fixed amount.
 - b. This addresses many of the current issues.
 - c. Predictable amount works better for older adults living on a fixed income, is more understandable, and easier to collect.
2. The basis for the cost sharing model is identical with the exception of 10% increments instead of 5%. See attached table.
 - a. Minor change that decreases the number of steps from 20 down to 10.
3. The calculations are made in an excel workbook that includes skip logic so that information that doesn't impact the cost sharing amount is not requested.
 - a. Process change that saves time.
 - b. Expedites program enrollment with clarity about cost share amount.
 - c. Easily modified on the fly as the care manager talks to the family about increasing or decreasing a service, adding a housing hardship, etc.
 - d. Future adjustments to factors and thresholds can easily be modified.
4. Allows for the deduction of excessive (above 25% of income) housing expenses that includes rent, mortgage, and property taxes.
 - a. Added factor that addresses approximately 10% of applicants who have an excessive amount of their income spent on housing costs.
 - b. Housing affordability is an increasing economic issue with older adults.
 - c. 10% of applicants in the pilot had a housing expense deduction.
5. Deducts medical expenses that are in excess of 7.5% of income.

- a. This reduces the amount of time spent collecting medical expense information and only focuses on those (7%) who have excessive expenses.
 - b. 7% of applicants in the pilot had a medical expense deduction.
6. Liquid assets (savings, IRA, investments, etc.) that are above 6 months of nursing home care (\$55,800) are calculated into the cost share. 10% of the asset value above \$55,800 is applied to the monthly income.
 - a. 10% of applicants in the pilot had an asset adjustment. This is typically Savings and IRA accounts.
 - b. Older adults with sufficient savings should contribute toward the cost of their services.
7. The cost sharing amount is established upon program enrollment. It is only re-evaluated when there is a significant change event such as an additional service, or in the rare event that there is a new source of income or assets.
 - a. Significant savings in administrative time and effort. The cost sharing amount is locked in for the time they are enrolled in the program. Only adjusted when there is a significant change in services or income.

Proposed Implementation:

- Fall 2025 implementation after CareDirector build and staff training.
- All existing cost sharing clients would be converted into a fixed amount based upon their current average monthly cost sharing bill.
- The new process and calculation would apply to all new program enrollments starting Fall 2025.

The existing pilot with this proposed cost sharing model has not generated complaints or problems with new enrollments.

Case Examples from the pilot results:

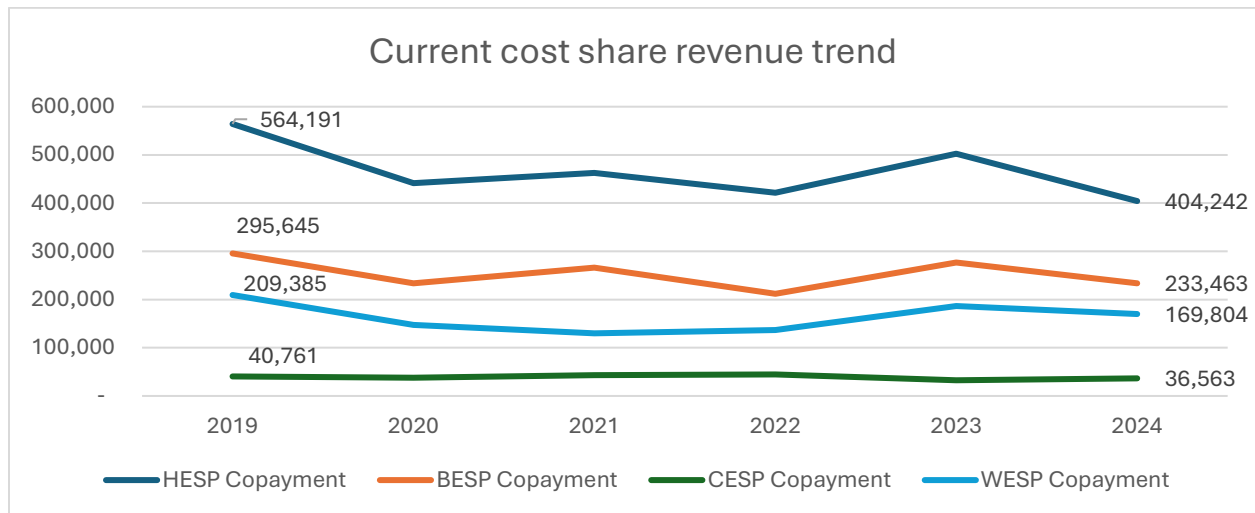
- 54% of the new enrollments did not have any cost share because their monthly income was below \$2,042 (one person) \$2,761 (two person) per month.
- Mr. S has \$6,334 in monthly income, and lives with his wife. He does not have any assets, or hardship with housing or medical expenses. He receives home care assistance and medical transportation. His care plan authorization is \$526 per month, and his monthly cost share is **\$201.23**.

- Mr. C has \$2,856 in monthly income, \$120,000 in (assets) in his bank accounts, and lives alone. He receives home care assistance, and an emergency response service for a care plan authorization of \$570.65 a month. His monthly cost share amount is **\$257.99**, which is adjusted \$103.19 higher because of his assets.
- Mrs. P has \$5,068 in monthly income, does not have any assets, and lives with her spouse. She receives home care assistance and medical transportation at a monthly authorization of \$755.31. She has extensive out of pocket medical expenses which deducts \$1,338 per month from her income. Her monthly cost share is **\$166.38** per month which is \$166 less because of her medical expense hardship deductions.
- Mrs M. has \$1,921 in monthly income and lives alone. She has \$530,000 in assets. She receives home care assistance with a care plan cost of \$546.65. Her monthly cost share is **\$491.99**. Without the assets, she would not have any cost share.

Supplemental Data:

County Comparison with Current Cost Share process:

County:	% w/ cost share:	Avg amount / month:	Annual Revenue:
Butler	35.1%	\$26.41	\$233,463
Clinton	33.9%	\$33.09	\$36,563
Hamilton	25.6%	\$56.15	\$404,242
Warren	33.7%	\$30.63	\$169,804
Total:	30.4%	\$36.57	\$844,072



Results to date (Hamilton County Pilot):

Category:	Baseline:	New Scale:	Implication
% with a cost share	26%	46%	Higher Revenue
Avg monthly amount collected	\$56.15	\$114.46	Higher Revenue
% with asset adjustment	2%	11%	Improved calculation, Higher Revenue
% clients with medical deduction*	43%	7%	More efficient and Higher Revenue
% clients with housing expense deduction*	0.9%	10%	More efficient, Lower Revenue,
% who have tax filing	NA	32%	Lower Effort and Accuracy

**These %s are dropping b/c of some adjustments to improve the process beginning in mid-January 2025.*

	1 Person		2 People		3 People		4 People		5 People	
<i>FPL (100%)</i> >>>	\$ 15,650		\$ 21,150		\$ 26,650		\$ 32,150		\$ 37,650	
Copay	Min	Max	Min	Max	Min	Max	Min	Max	Min	Max
0%	\$ -	\$ 2,042	\$ -	\$ 2,761	\$ -	\$ 3,478	\$ -	\$ 4,196	\$ -	\$ 4,913
10%	\$ 2,043	\$ 2,385	\$ 2,762	\$ 3,224	\$ 3,479	\$ 4,062	\$ 4,197	\$ 4,900	\$ 4,914	\$ 5,738
20%	\$ 2,386	\$ 2,729	\$ 3,225	\$ 3,689	\$ 4,063	\$ 4,648	\$ 4,901	\$ 5,607	\$ 5,739	\$ 6,566
30%	\$ 2,730	\$ 3,074	\$ 3,690	\$ 4,155	\$ 4,649	\$ 5,234	\$ 5,608	\$ 6,314	\$ 6,567	\$ 7,394
40%	\$ 3,075	\$ 3,418	\$ 4,156	\$ 4,620	\$ 5,235	\$ 5,821	\$ 6,315	\$ 7,022	\$ 7,395	\$ 8,223
50%	\$ 3,419	\$ 3,762	\$ 4,621	\$ 5,085	\$ 5,822	\$ 6,407	\$ 7,023	\$ 7,729	\$ 8,224	\$ 9,051
60%	\$ 3,763	\$ 4,106	\$ 5,086	\$ 5,550	\$ 6,408	\$ 6,993	\$ 7,730	\$ 8,436	\$ 9,052	\$ 9,879
70%	\$ 4,107	\$ 4,451	\$ 5,551	\$ 6,016	\$ 6,994	\$ 7,580	\$ 8,437	\$ 9,144	\$ 9,880	\$ 10,708
80%	\$ 4,452	\$ 4,795	\$ 6,017	\$ 6,481	\$ 7,581	\$ 8,166	\$ 9,145	\$ 9,851	\$ 10,709	\$ 11,536
90%	\$ 4,796	\$ 5,139	\$ 6,482	\$ 6,946	\$ 8,167	\$ 8,752	\$ 9,852	\$ 10,558	\$ 11,537	\$ 12,364
100%	\$ 5,140	\$ 9,999,999,999	\$ 6,947	\$ 9,999,999,999	\$ 8,753	\$ 9,999,999,999	\$ 10,559	\$ 9,999,999,999	\$ 12,365	\$ 9,999,999,999

Laundry Program Service Evaluation
Council on Aging of Southwestern Ohio

Executive Summary

The purpose of the evaluation was to assess the cost-effectiveness of implementing a laundry delivery service for older adults compared to hiring home health aides to assist with laundry tasks. Key findings indicate the laundry delivery service provided substantial cost savings while effectively meeting the needs of care recipients. By offering an alternative solution amid the ongoing shortage of paid home health aides, this program has demonstrated a practical, scalable approach to addressing essential daily living tasks for older adults, contributing to both financial efficiency and client satisfaction.

Council on Aging of Southwestern Ohio (COA) collaborated with laundry service providers, including Happy Nest, Queen City Laundry, and The Laundry Spot, leveraging their geographic coverage and operational efficiency. Costs ranged from \$1.90 to \$2.50 per pound, significantly undercutting the \$25.52 per hour cost of home health aide-assisted laundry. The pilot program has expanded across Hamilton, Butler and Warren counties, serving 240 clients as of December 31, 2024. Without this service alternative, quarterly laundry costs would exceed \$146,995.20, highlighting its fiscal efficiency. By replacing home health aide-assisted laundry with the laundry delivery program, COA has achieved substantial savings, totaling \$265,851.80:

- \$79,871.20 in Quarter 3 (2023)
- \$63,396.20 in Quarter 4 (2023)
- \$73,353.20 in Quarter 1 (2024)
- \$49,231.20 in Quarter 2 (2024)

Furthermore, client satisfaction is high regarding the laundry service program. Through an eight-question telephonic survey, 97.7% of participants interviewed expressed total satisfaction with the program, highlighting its impact on their daily lives and overall convenience.

Background and Context

COA began piloting a laundry delivery service in April 2022 as part of its FastTrack Home program in Hamilton County. Funded by the county's senior services levy tax, this initiative was launched in response to the growing shortage of home health aides, exacerbated by the COVID-19 pandemic and a broader decline in home health and personal care aides, who have left the field for other opportunities. With 55% of clients in Hamilton and Warren counties unmatched with a homecare provider, COA sought to find innovative solutions to meet their needs. Often, older adults do not need a home health aide to perform all tasks for them. Rather, they might need specific tasks completed weekly or at regular intervals due to a lack of transportation or chronic pain. Home care services, while valuable, can be expensive when used solely for a task like laundry, creating an opportunity for more specialized, cost-effective solutions. Hence, the laundry delivery service program was created to aid older adults who need help, but not full-time home care services.

COA conducted research on local companies offering laundry delivery services. While many companies specialize in commercial services, few cater to residential clients. COA identified Happy Nest, a national laundry delivery service, which partners with local laundromats to provide services based on geographic areas determined by zip codes. Happy Nest's model requires clients to physically place their laundry in a bag for outside pickup and delivery.

Happy Nest created a "parent account" for COA, allowing COA to send client information using a general template, with Happy Nest managing the account activities. In late September 2022, the pilot program expanded to include Elderly Services Program (ESP) clients in Hamilton and Warren counties. At the time, COA also contracted with Queen City Laundry, another laundry delivery provider serving most of Hamilton County. The average cost of Happy

Nest's service is \$1.90 per pound, while Queen City Laundry's average cost ranges from \$2.37 to \$2.49 per pound, with pricing dependent on the client's zip code. Most recently, COA has contracted with The Laundry Spot, a provider primarily serving Butler County, costing \$2.50 per pound.

- **Happy Nest:** \$1.90 per pound (serving Butler, Hamilton and Warren counties)
- **Queen City Laundry:** \$2.37 - \$2.49 per pound (primarily serving Hamilton County)
- **The Laundry Spot:** \$2.50 per pound (primarily serving Butler County)

While it may seem like a basic, mundane task, regular laundry service is vital for older adults who cannot manage the task on their own. Laundry can be a physically demanding task, impacted by the volume of work to be done and the location of the laundry appliances within the older adult's home. Without proper support to complete the task, these individuals may experience a decline in their personal hygiene (especially those with incontinence issues), discomfort or even health complications. Additionally, the absence of assistance could increase their likelihood of needing more intensive care services or entering long-term care facilities prematurely. By providing targeted help with laundry, this program helps older adults maintain their independence and quality of life, preventing or postponing further functional decline.

Moreover, this laundry service program frees up time for paid home health aides to focus on more important tasks while in the home and even to redirect this limited workforce to clients who have more intensive and varied care needs.

Methodology

The comparison between the laundry delivery service and home health aide-assisted laundry was conducted using a structured methodology that focused on key service models and

performance metrics. The two models compared were: (1) *a third-party laundry delivery service that manages the full laundry process, including pick-up, washing, folding, and delivery to the client*, and (2) *a home health aide (or other paid home health aide) who provides in-home laundry services as part of their broader caregiving responsibilities*. Key metrics used to evaluate these models included the cost per week and per month for each service. Additionally, the time home health aides spent on laundry tasks was compared to the operational efficiency of the delivery service. Finally, participant satisfaction rates were assessed to determine the overall impact of each model on the quality of care provided. These metrics provided a comprehensive evaluation of the cost-effectiveness, time efficiency and client satisfaction associated with each approach.

Cost Analysis

Laundry Service Providers

Happy Nest

- Cost per Pound: **\$1.90**
- Average Load Size: **6.5 pounds** (average of 6-7 pounds)
- Direct Cost per Load: **\$12.35**
- Total Cost per Month (assuming 4 loads per month): **\$49.40**

Queen City Laundry

- Cost per Pound: **\$2.37 - \$2.49**
- Average Load Size: **6.5 pounds**
- Direct Cost per Load:
 - Low Estimate: **\$15.40**

- High Estimate: **\$16.19**
- Total Cost per Month (assuming 4 loads per month)
 - Low Estimate: **\$61.60**
 - High Estimate: **\$64.74**

The Laundry Spot

- Cost per Pound: **\$2.50**
- Average Load Size: **6.5 pounds**
- Direct Cost per Load: **\$16.25**
- Total Cost per Month (assuming 4 loads per month): **\$65.00**

Paid Home health aide

- Average Wage: **\$25.52**
- Laundry Task Duration: **2 hours**
- Direct Cost per Load: **\$51.04**
- Total Cost per Month (assuming 4 loads per month): **\$204.16**

Outcome

The laundry delivery service saves approximately:

- **\$142.76/month** when using Happy Nest.
- **\$130.52 - \$127.60/month** when using Queen City Laundry.
- **\$139.16/month** when using The Laundry Spot.

	Happy Nest	Queen City Laundry	The Laundry Spot	Paid Home Health Aide
Cost per Pound	\$1.90	\$2.37-2.49	\$2.50	N/A
Average Load Size	6.5 pounds	6.5 pounds	6.5 pounds	N/A
Direct Cost per Load	\$12.35	\$15.40-16.19	\$16.25	\$51.04
Total Cost per Month	\$49.40	\$61.60-64.74	\$65.00	\$204.16
Savings vs. Paid Home Health Aide	\$142.76	\$127.60-130.52	\$139.16	N/A

2023-2024 Data

In Hamilton County, information for the program begins in Quarter 3 of 2023 with 112 clients, spending \$44,987. Client numbers increased to 149 in Quarter 4, with spending rising to \$57,296. In 2024, Quarter 1 saw a slight reduction to 143 clients, with spending at \$47,961, and in Quarter 2, the client base decreased further to 133, with expenses rising to \$54,395.

In Butler County, the program started modestly with just 2 clients in Quarter 3 of 2023, spending \$2,440. By Quarter 4, the program expanded to 12 clients, spending \$5,576. Growth continued in 2024 with 18 clients in Quarter 1 and spending of \$4,777, followed by an increase to 27 clients and a spending rise to \$6,567 in Quarter 2.

Warren County launched with 45 clients in Quarter 3 of 2023, spending \$19,697. The program expanded to 62 clients in Quarter 4, with spending at \$20,727. In 2024, the client count

rose to 72 in Quarter 1, with spending at \$20,904. Quarter 2 saw the highest increase, with 80 clients and spending reaching \$36,802.

The table provided illustrates the data in client numbers and spending, showing significant growth in both metrics across all counties.

	Hamilton County Clients	Hamilton County Spending	Butler County Clients	Butler County Spending	Warren County Clients	Warren County Spending
Q3 (2023)	112	\$44,987	2	\$2,440	45	\$19,697
Q4 (2023)	149	\$57,296	12	\$5,576	62	\$20,727
Q1 (2024)	143	\$47,961	18	\$4,777	72	\$20,904
Q2 (2024)	133	\$54,395	27	\$6,567	80	\$36,802

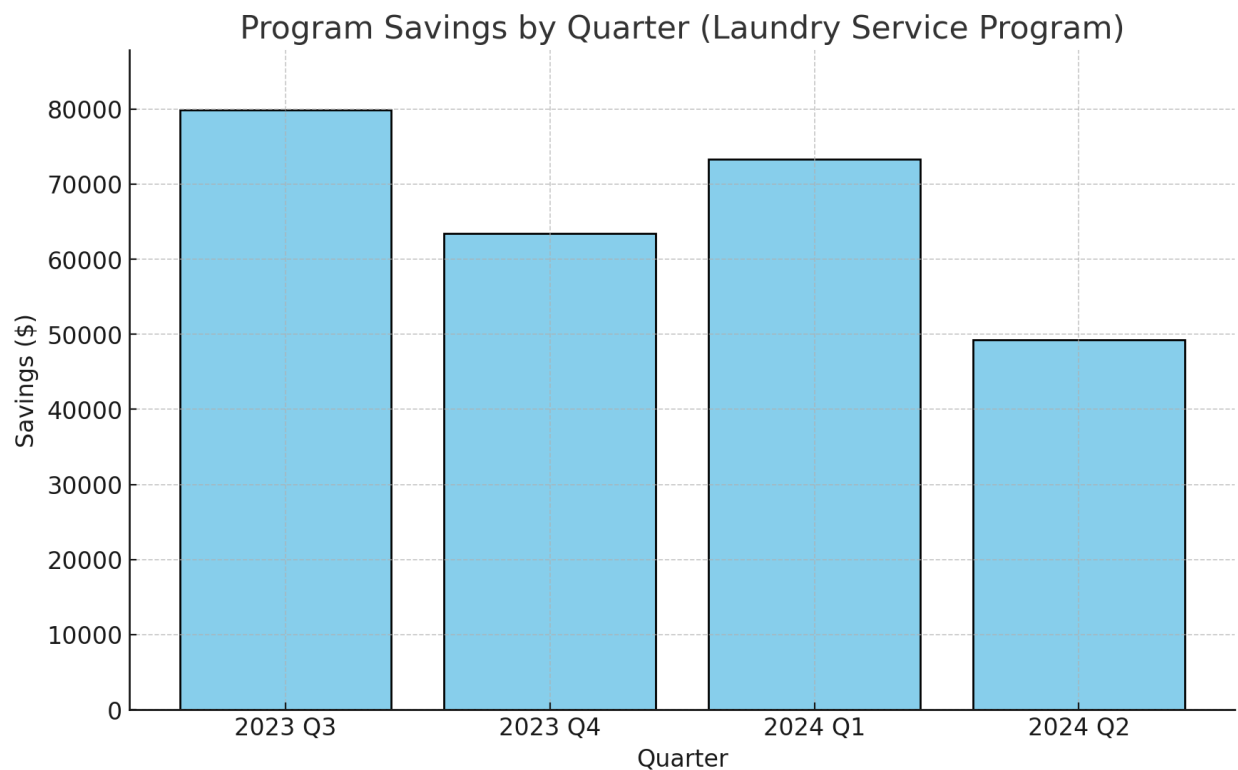
Total Savings

There are approximately 240 clients enrolled in the Elderly Services Program's laundry service delivery program, across three counties. Without this program, a paid home health aide would be required to perform laundry services for these clients. Under current guidelines, home health aides are allotted up to 2 hours weekly for off-site laundry tasks, earning \$25.52 per hour, which totals \$51.04 per client per week.

If each of the 240 clients received weekly laundry assistance from a home health aide, the program would incur costs of \$12,249.60 weekly. On a monthly basis, this would amount to

\$48,998.40. Extrapolated over a quarter, the expenses would reach \$146,995.20, or \$587,980 over the year.

Utilizing the laundry service delivery program, the Elderly Services Program saved approximately \$79,871.20 for Quarter 3 (2023), \$63,396.20 for Quarter 4 (2023), \$73,353.20 for Quarter 1 (2024), and \$49,231.20 for Quarter 2 (2024). By operating the laundry service delivery program, the Elderly Services Program effectively offsets these costs, reducing quarterly spending substantially compared to the alternative of using home health aides to provide this service. It demonstrates significant program savings while maintaining essential support for older adult clients across Hamilton, Butler and Warren counties.



Non-Cost Analysis

The non-financial benefits of both laundry delivery services and home health aide-assisted laundry programs significantly enhance the overall value provided to clients. Laundry

delivery services offer convenience through a streamlined pick-up and drop-off process, freeing up time for home health aides to focus on other tasks or to serve clients with more intensive needs. home health aide This service not only facilitates independence, but also serves as a preventive measure, reducing the need for additional home care assistance.

In contrast, home health aide-assisted laundry may provide some level of personalized support; however, clients are responsible for the costs associated with laundry supplies, such as detergent and dryer sheets, along with the costs of washing and drying. This financial responsibility can place an additional strain on clients, potentially limiting their ability to afford necessary resources. Therefore, while home health aide-assisted laundry may offer direct support, it is essential to consider the cumulative cost of laundry-related expenses, highlighting the potential financial strain on clients compared to the streamlined, cost-effective approach of laundry delivery services.

Satisfaction and Quality of Services

Sixteen older adults, all utilizing Queen City Laundry, were selected at random to participate in a telephonic, eight-question survey designed to evaluate the laundry program's services. The questions gauged how reliable the service is, the convenience of the service, and if the service allows participants to remain independent at home. Out of the 16 participants, 11 older adults responded, resulting in a response rate of 68.75%. Among the respondents, 97.7% expressed satisfaction with the program, highlighting its impact on their daily lives and overall convenience. The high satisfaction rate underscores the program's effectiveness and its positive reception among the participants. The only complaint recorded from the survey respondents was “white clothing does not come back as bright white anymore,” and the client felt the laundromat could use more bleach.

Key Quotes from Respondents

Accessibility:

- "I had back surgery, and this service allows me to avoid going up and down stairs, bending, crouching, falling, etc."

Special Needs and Care:

- "Without the service, I would have nothing clean to wear. I also have sensitive skin, and they asked what powder and detergent to use, along with the dryer sheets, just so my skin won't be irritated."
- "I had a stroke and was able to go home, but I was unable to do laundry due to loss of function. This service allowed me to be home. I think having this service is better than having a home health aide due to the caregiving staffing shortages."

Service Satisfaction:

- "I can't raise my arms past my waist, so this is a great service for me. They literally put the clothes in my closet for me, and they don't accept tips. It really takes the edge off everything, I would do a free commercial for them."

Program Preference:

- "I would prefer the laundry service over the home health aide due to a home health aide not being as efficient."

Conclusion

COA's laundry service program has proven to be an innovative and cost-effective solution, addressing the unique needs of older adults while alleviating home health aide burdens. By leveraging partnerships with professional laundry providers, the program has demonstrated substantial financial savings, operational efficiency and overwhelmingly positive client

satisfaction. With a 97.7% satisfaction rate among survey respondents and over \$250,000 saved in utilizing the service, the program has reinforced its role in enabling older adults to maintain their independence and quality of life and in helping COA serve as a good steward of taxpayer dollars.

This initiative highlights COA's commitment to adapting to the challenges posed by workforce shortages and evolving care needs. By focusing on specialized support rather than comprehensive caregiving, the laundry service program offers a scalable model for meeting essential needs in a resource-efficient manner. As the program continues to grow and evolve, it sets a precedent for innovative approaches in aging services, ensuring older adults receive the assistance they need while preserving their dignity and autonomy.

Senior Services Update

Tax Levy Review Committee
April 2025





Our Philosophy

Council on Aging's Guiding Principle:

Provide the highest quality services, at the lowest possible cost, to serve as many Hamilton County residents as possible.

"I want everyone to know Council on Aging has blessed me and is still blessing me. I really appreciate you all and everything you do for me."

Bonita, ESP client, Northside

Five Year Levy Plan Review 2023-2025

- **Part I: Updates to the 2022 Analysis**
 - During the 2022 review, we provided a detailed analysis of the \$21 Million variance from the original five-year plan. We documented and explained how most of the variance was a unique deviation created by the pandemic which impacted both expenses and revenues.
 - We will compare what we said in 2022, and what has materialized since.
- **Part II: Current Levy Plan Initiatives**
 - Managed enrollment
 - Initiatives to lower cost and improve quality
- **Part III: The Future**
 - Copayment modernization
 - STEPS to Stability
 - Federal impact

Part I: Updates to the 2022 Analysis

1. Five Year Levy Plan Update
2. Home Care Assistance
3. Home Delivered Meals
4. Transportation
5. Adult Day Services

Senior Services

Tax Levy: 1.60 Mills

Fund 003-006

LEVY PLAN	Year 1 2023	Year 2 2024	Year 3 2025	Year 4 2026	Year 5 2027
Beginning carryover	26,634,426	22,618,039	19,895,052	16,615,426	11,715,333
REVENUES (Total)	26,459,830	26,595,944	26,732,057	26,868,170	27,004,283
Tax Levy	26,459,830	26,595,944	26,732,057	26,868,170	27,004,283
EXPENDITURES (Total)	30,476,217	29,318,931	30,011,683	31,768,263	32,621,245
Council on Aging	27,826,217	26,768,931	27,461,683	29,218,263	29,971,245
Utility and Home Modifications	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
Senior Homeless Medical	250,000	250,000	250,000	250,000	250,000
Care for Caregivers	250,000	250,000	250,000	250,000	250,000
Job and Family Services	400,000	400,000	400,000	400,000	400,000
Veteran's Services	250,000	250,000	250,000	250,000	250,000
Levy Administration	500,000	400,000	400,000	400,000	500,000
Ending Carryover	22,618,039	19,895,052	16,615,426	11,715,333	6,098,371

*levy revenues above Auditor estimates may be used for increased COA expenses if needed

ACTUALS	Year 1 2023 Act	Year 2 2024 Act	Year 3 2025	Year 4 2026	Year 5 2027
Beginning carryover (a)	31,791,910	26,289,433	20,743,154	20,403,079	20,403,079
REVENUES (Total)	27,129,420	27,773,502	26,943,691	-	-
Tax Levy	27,129,420	27,773,502	26,943,691		
EXPENDITURES (Total)	32,631,898	29,570,763	27,283,765	-	-
Council on Aging (a&b) (670018)	30,936,646	28,435,027	25,837,449		
Senior Homeless Medical	250,000				
Care for Caregivers	269,360	170,447	250,000		
Patient Navigation	59,682				
Job and Family Services (670001)	400,000	400,000	400,000		
Veteran's Services (670004)	184,726	163,451	250,000		
Levy Administration (670020)	531,484	401,838	546,316		
Ending Carryover	26,289,433	24,492,172	20,403,079	20,403,079	20,403,079
Less Year End Encumbrances		3,749,018			
Available Cash Balance		20,743,154			

(a) Council on Aging is paid 2 months in arrears. The expenditures represent actual expenditures for that budget year regardless of when actually paid by the County.

(b) COA budget includes \$250,000 annually for senior homeless medical

Original 2 Year Levy Plan vs. Actual

	Senior Services Levy Of Hamilton County (2023-2024)		
	2 Year Planned	2 Year Actuals	Variance
Beginning carryover	26,634,426	31,791,910	5,157,484
REVENUES (Total)	53,055,774	54,902,922	1,847,148
Tax Levy	53,055,774	54,902,922	1,847,148
EXPENDITURES (Total)	59,795,148	62,202,661	2,407,513
Council on Aging	56,595,148	59,371,673	2,776,525
Senior Homeless Medical	500,000	250,000	-250,000
Care for Caregivers	500,000	439,807	-60,193
Patient Navigation	0	59,682	59,682
Job and Family Services	800,000	800,000	0
Veteran's Services	500,000	348,177	-151,823
Levy Administration	900,000	933,322	33,322
Ending Carryover	19,895,052	24,492,171	4,597,119

	Senior Services Levy Of Hamilton County (2023-2024)		
	2 Year Planned	2 Year Actuals	Variance
Beginning Fund Balance	26,634,426	26,634,426	-
Levy Collection	53,055,774	54,902,922	1,847,148
COA Levy Draw	57,095,147	58,480,840	1,385,693
Title III and State Funding	3,211,039	4,492,250	1,281,211
Healthy Aging Grant		2,492,742	2,492,742
Client Donations	3,715	6,775	3,060
Client Co-Payments	681,946	914,849	232,903
Total COA Operational Revenue	60,741,848	66,387,456	5,645,608
Total COA Operational Expenses			
Provider Services	42,191,470	47,514,979	5,323,509
Information and Assistance	362,922	177,307	(185,615)
Care Management	9,673,692	9,763,989	90,297
FTH Care Management	2,300,084	2,531,715	231,631
Transportation Coordination	419,349	387,359	(31,990)
Home Modification program	2,000,000	1,862,429	(137,571)
Senior Homeless Medical	250,000	250,000	-
Program Management	3,544,331	3,899,677	355,346
Total COA Operational Expenditures	60,741,848	66,387,456	5,645,608
Job and Family Services (Cash Basis)	800,000	800,000	-
Veteran's Services (Cash Basis)	500,000	348,177	(151,823)
Levy Administration (Cash Basis)	900,000	933,322	33,322
Patient navigation	-	59,682	59,682
Senior Homeless Medical	250,000	250,000	-
Care for Caregivers	500,000	439,807	(60,193)
Total Non COA Programs	2,950,000	2,830,988	(119,012)
Total 2023 Adjustment		124,435	
Total 2024 Cash basis Adjustment*		4,142,217	
Total Levy Program	63,691,848	73,485,097	9,793,249
Ending Fund Balance	19,895,053	24,492,172	4,597,120

Council on Aging ESP Program Detail

* The adjustment was made to reflect cash basis. Timing of payments vs. incurred expenses.

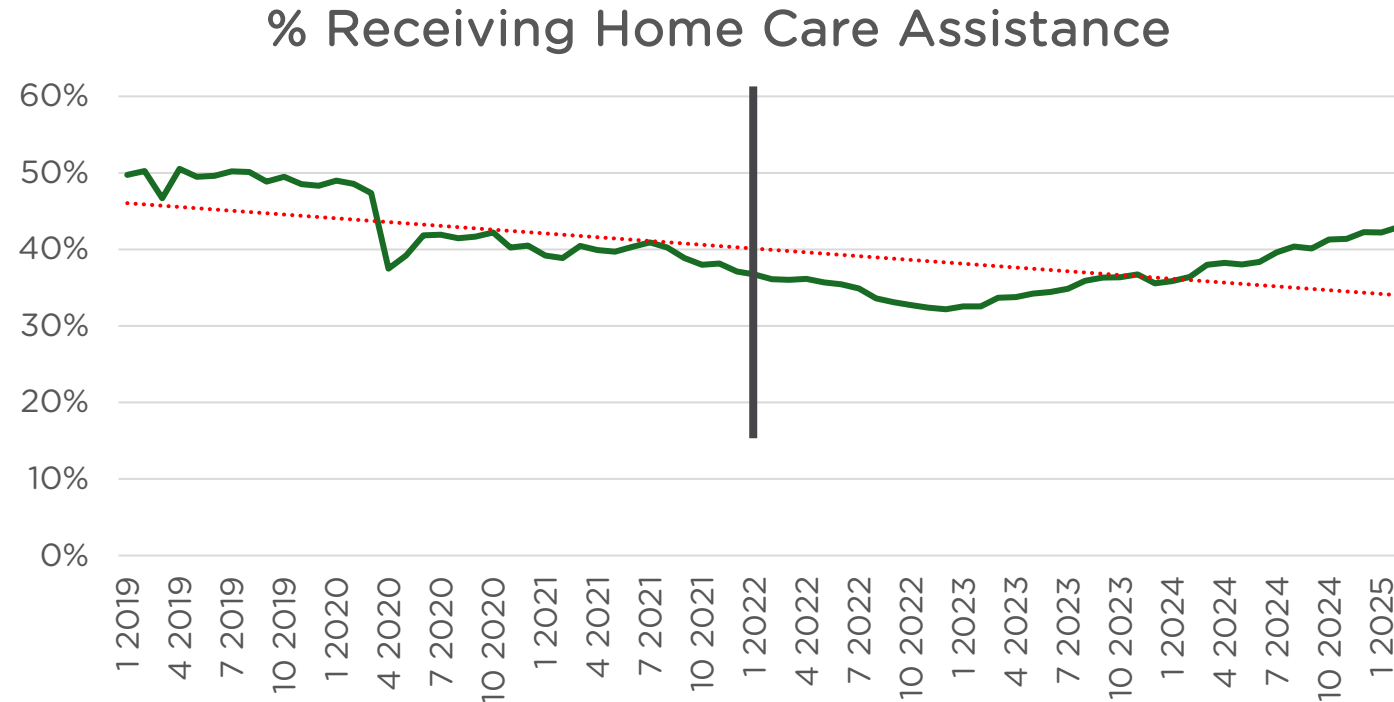
Home Care Staffing Crisis

- Home Care is the #1 cost driver representing more than 25% of all costs.
- During 2022, home care utilization had declined to 36%.
- We pointed out that 2,775 clients needed home care assistance. Of these individuals, 25% (685) were going without care because of staffing shortages.
- We saw dramatic improvement in home care utilization during 2023 and 2024 driven by four primary factors:
 1. Managed enrollment into the program starting in May 2023 allowed us to catch up on the backlog of need.
 2. Wage increases for home care workers, and indirect impact of Medicaid rates going up in January 2024 as a result of advocacy.
 3. AddnAide expansion of the consumer directed care option.
 4. Initiation of an innovative solution – laundry delivery service.



Pamela, 76, Mt. Washington, receives her weekly laundry delivery from Queen City Laundry.

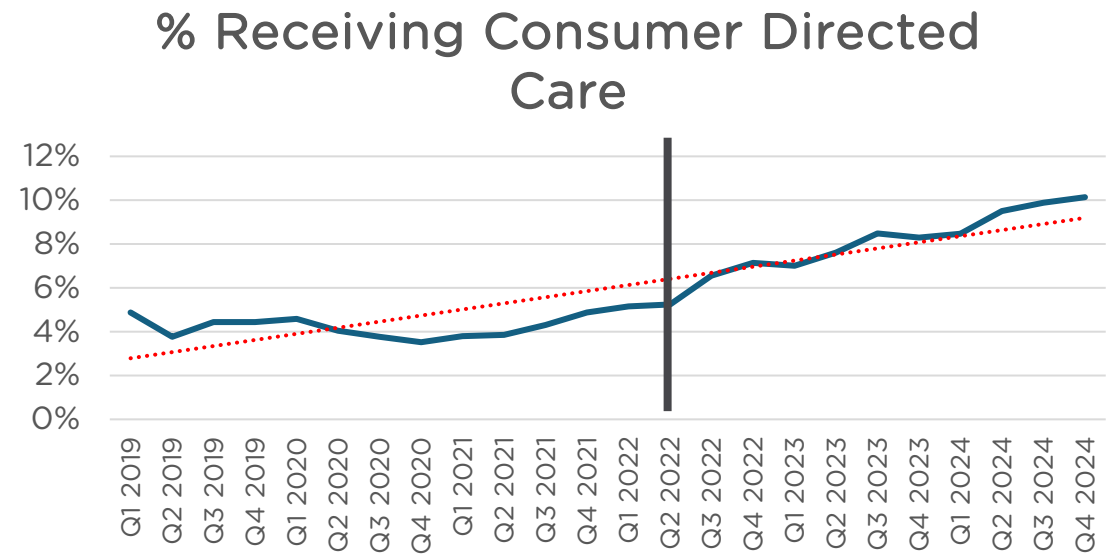
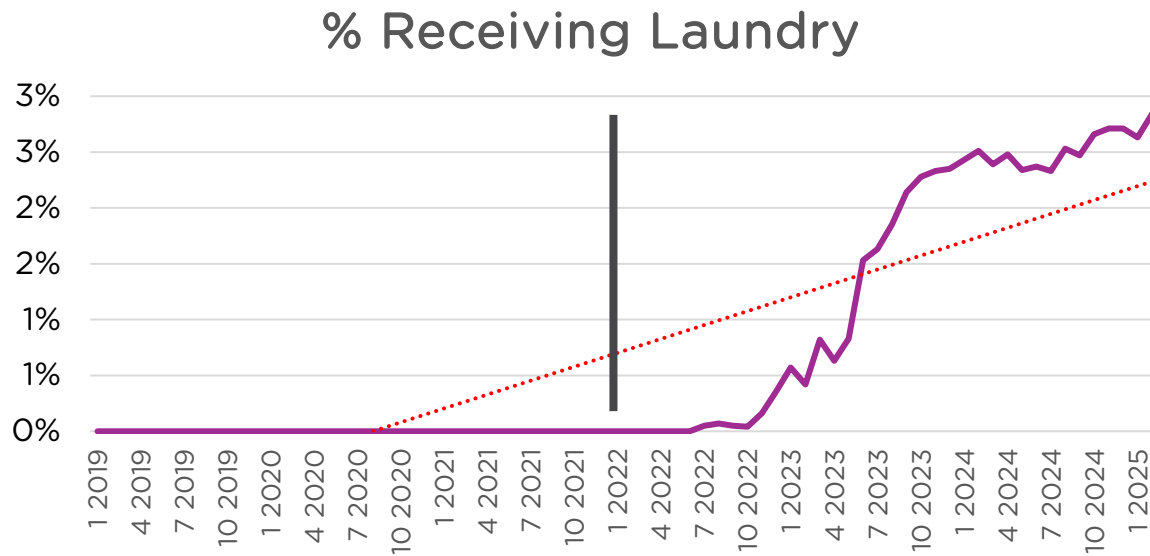
Home Care Assistance Staffing Crisis



In 2022, we said:

During 2017 when the levy was originally sized, 59% of clients were receiving home care assistance. This had declined to 36% leaving a \$7.8M variance.

Home Care Assistance Staffing Crisis

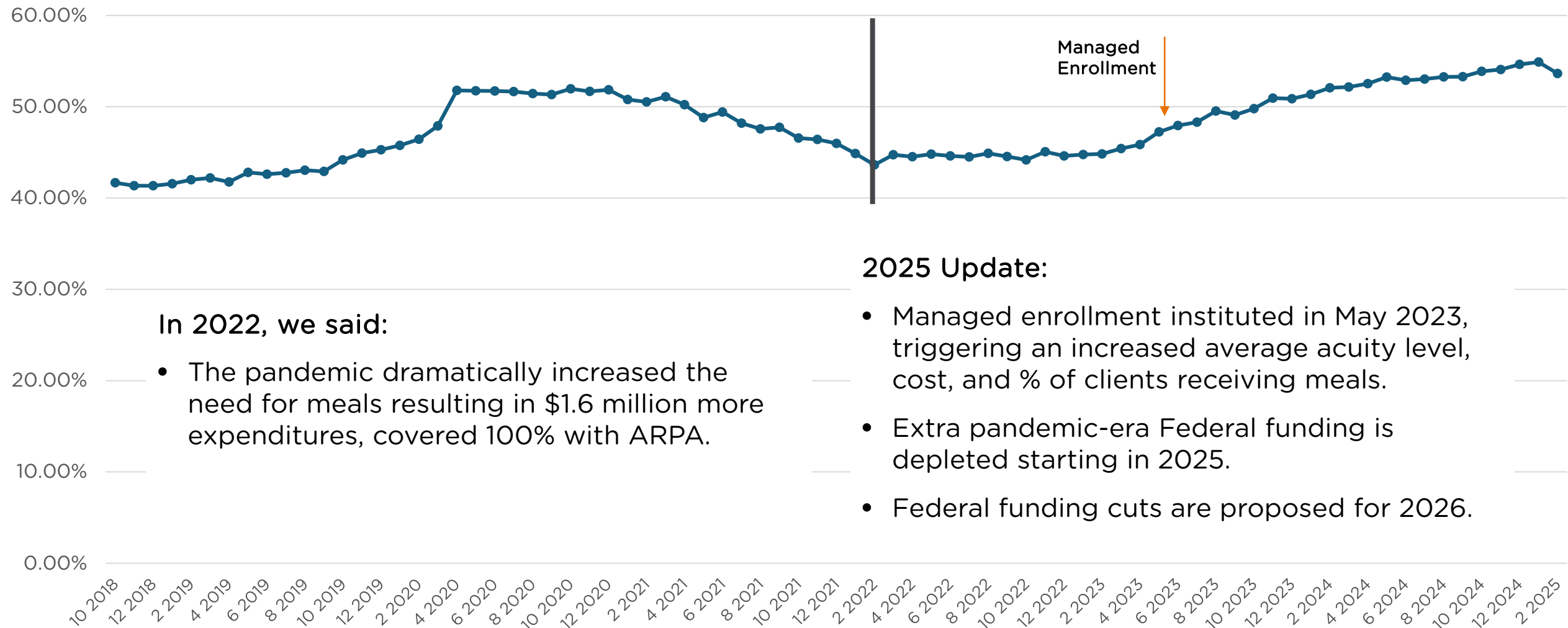


2025 update:

Improvements in the workforce, AddnAide expansion, and laundry delivery improved utilization to 56%.

Home-delivered Meal Utilization

% Receiving HDM



In 2022, we said:

- The pandemic dramatically increased the need for meals resulting in \$1.6 million more expenditures, covered 100% with ARPA.

2025 Update:

- Managed enrollment instituted in May 2023, triggering an increased average acuity level, cost, and % of clients receiving meals.
- Extra pandemic-era Federal funding is depleted starting in 2025.
- Federal funding cuts are proposed for 2026.

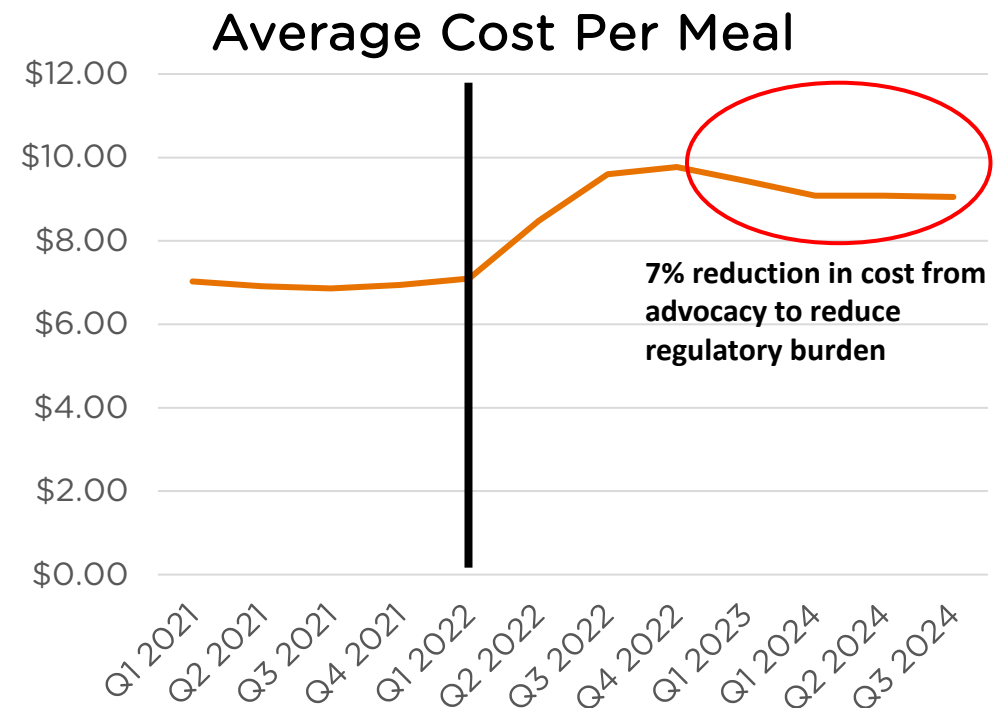
Home-delivered Meal Cost

In 2022, we said:

- We highlighted significant increases in inflation in food costs that had not shown up on our financials yet but were resulting in an estimated 35% rate increase.

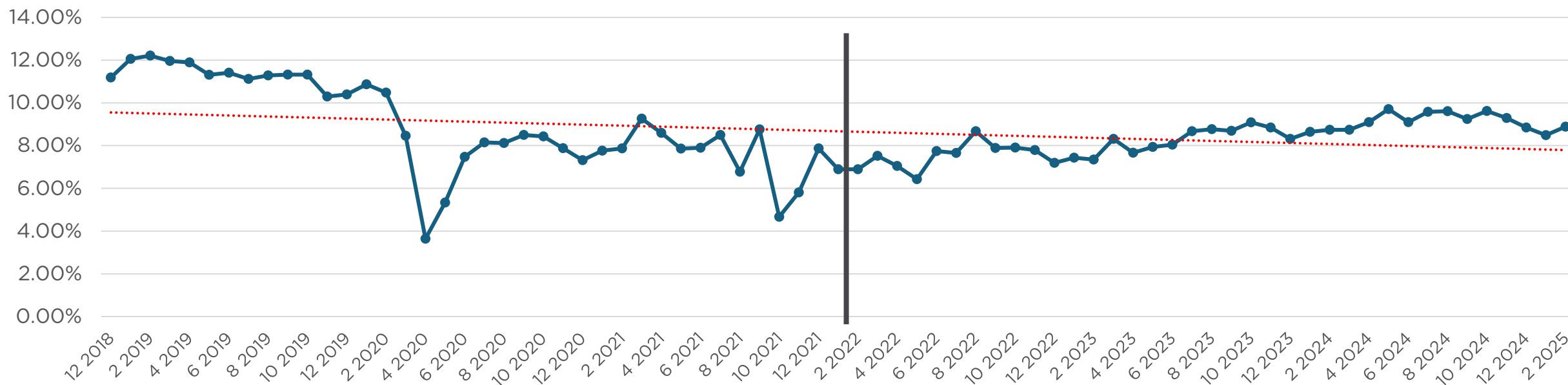
2025 Update:

- Meal costs increased 42% during 22/23.
- Led advocacy with Governor's Common-Sense Initiative (CSI) to relieve regulatory burdens impacting meals.
- 7% reduction in home-delivered meal costs during 2024.



Transportation

% Clients Using Transportation



In 2022, we said:

- Transportation was disrupted during COVID surges, and medical appointment cancellations.
- During 2021, some Medicare Advantage plans began offering some transportation benefits. We had a benefits analyst ensuring the use of Medicare first (payor of last resort).

2025 Update:

- Transportation has returned to normal levels. However, we have continued to shift costs to Medicare Advantage plans for older adults who qualify for those benefits.

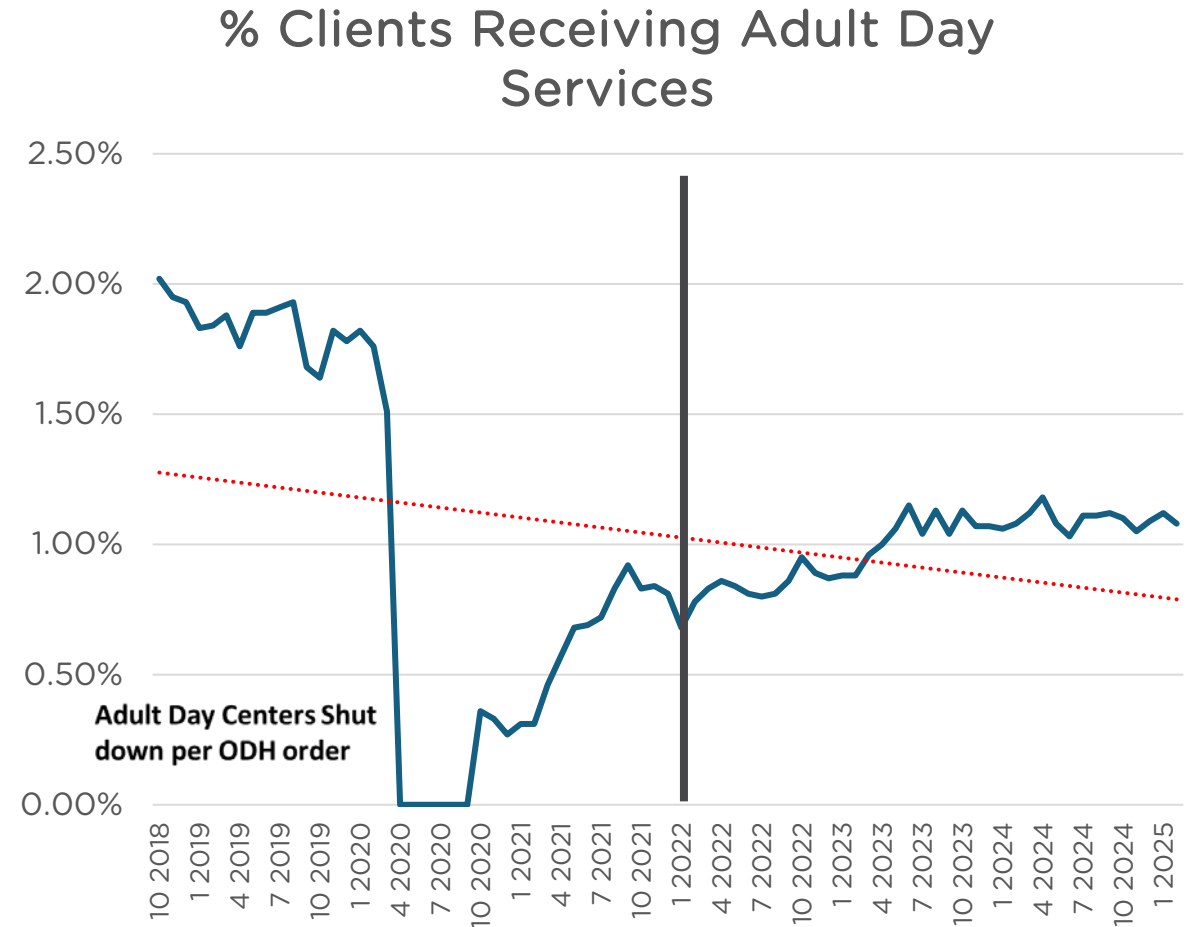
Adult Day Services

In 2022, we said:

- \$1.3 million less expenditures resulting from the pandemic's disruption plus an additional \$186,870 less expenditures on adult day transportation.

2025 Update:

- Adult day capacity has improved to 60% of pre-pandemic levels. Never fully recovered. Many centers never re-opened.
- We supplemented the gap with the new overnight respite service.



Managing Costs

Competitive Bidding

- New contract with regional volume discounts led to a 20% reduction in the cost of electronic monitoring systems - \$768,300 savings to Hamilton County over 5 years!
- Fall detection devices, emergency monitoring, Automated Medication Dispensers
- Our \$19 rate compared to the Medicaid rate of \$32.95 and the market rate of \$37.50!

Laundry Delivery Savings

- Costs \$16.25 per week for laundry delivery vs. \$51.04 per week for home care aide
- Very high satisfaction rate

Medicare Advantage Plans

- Plans began offering some benefits, but older adults often do not know about the benefits or how to access them.
- COA works with older adults to identify available benefits and help them access them.
- Saved ESP \$95,051 during 2024 in transportation and electronic monitoring expenses.

Part II: Current Levy Plan Initiatives

1. Healthy Aging Grants
2. Managed Enrollment
3. Electronic Monitoring RFP
4. Laundry Delivery

Healthy Aging Grants

- \$2,492,742 from the Ohio Department of Aging to the Board of County Commissioners.
- Awarded Fall 2023 and must be spent by September 2024
- Funding used to offset levy expenditures for:
 - home delivered meals
 - utilities and home modifications
 - AddnAide
 - assisting older adults with access to their Medicare benefits
- 100% of funds expended.
- 100% required reports and targets met
- 100% of funding went to direct care
- Thank you letter from Mrs. J – repaired bathroom shower



Healthy Aging Impact

Please excuse the
lateness of my
letter. I had
personal emergencies
that delayed my
correspondence,
Thank You Again.

Rose [REDACTED]

Council On Aging
4601 Malsbary Road
Blue Ash, Ohio 45242

Dear Ms. Jenny Federle:

Pursuant to our past communications,
I am a Senior Citizens, physically disabled.
In past years, I have benefited from
quality services from The Council On Aging.

For numerous years, I needed help to
repair the pipes for my Bathroom
Shower. I requested help from the
Council On Aging and communicated my needs
to You!

Upon communicating my shower repair
needs to You, I received a very positive
response. You insured that I had
quality technicians to remove the
damaged pipes and replace them with
new pipes. Additionally, during the repair
process, the holes in the downstairs
ceiling and all repairs were completed.

I appreciate the quality services that
I received from the knowledgeable
technicians. Consequently, I now have
a fully operating Bathroom Shower!

Additionally, You aided me with the
expenses of one month of my Duke
Bill. I can now pay, more easily, each
month in a timely manner, because
of help from The Council On Aging.

I highly appreciate Your Superb,
Outstanding, and Caring Responses
to my Home Requests, as a
Representative of The Council On Aging!

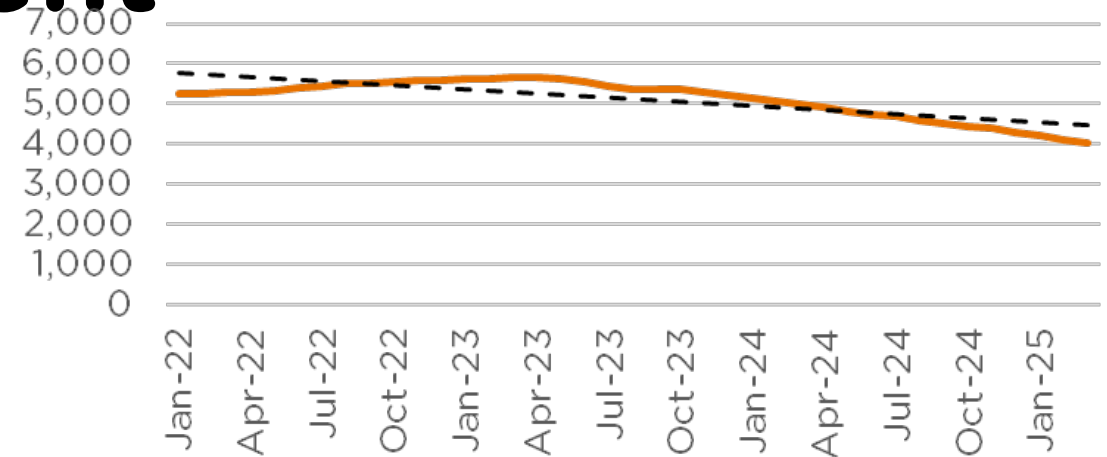
Thank You, Again!

Respectfully,
Rose [REDACTED]
cc: Ken Wilson

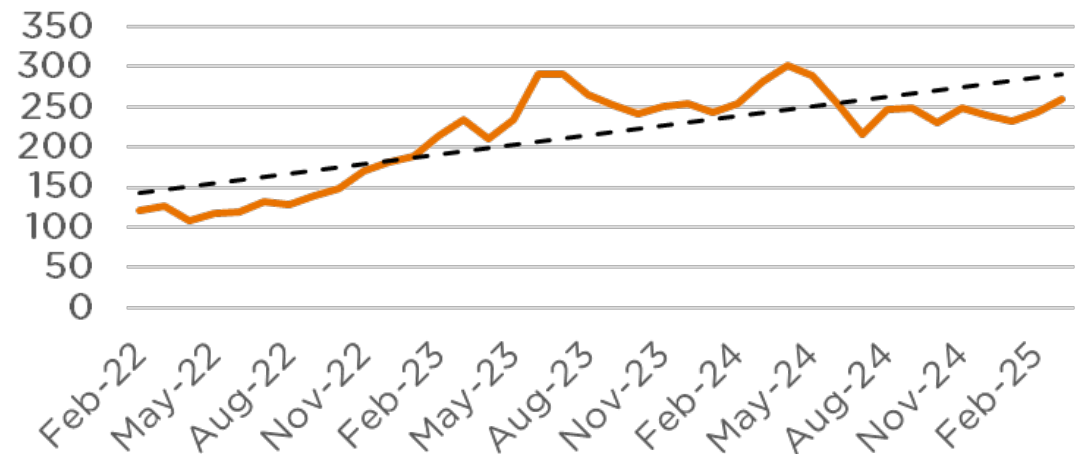
Managing Enrollment

- Since 5/1/2023: instituted tighter enrollment criteria on ESP to keep the levy within budget.
- Targeting enrollment toward higher acuity older adults.
- FastTrack Home has remained open to all.
- Quarterly: 260 new enrollments per quarter into ESP plus 406 new enrollments into FastTrack Home!

ESP Monthly Census Trend 2022 - 2025



FastTrack Home Monthly Enrollment Trend 2022 - 2025



Managed Enrollment Criteria

Receiving
cancer
treatments

Receiving
dialysis

Enrolled in
hospice

Active with
Adult Protective
Services

Emergency
Home Delivered
Meals

Nursing home
level of care but
not Medicaid
eligible

Discharged from a
hospital or nursing
home within the last
7 days
(Fast Track Home)

Cognitive
Impairment
requiring
24/7 care

We are in the process of increasing enrollments beginning this month.

Part III: Future

1. STEPS to Stability
2. Copayment Modernization
3. Federal Funding Impact

STEPS to Stability

- New program name
- Aims to address short-term needs of older adults
- Stretches tax dollars to impact more older adults
- Currently encompasses assistance with utilities and home modifications
- In the future may include other services such as a package of meals or transportation



Co-Payment Modernization

- 26% of ESP clients currently have a copay based on their income and assets. We are working on modernizing the calculation and process with the following goals:
 1. Reducing complexity
 2. Increasing copayment revenue
 3. Addressing individual hardships appropriately
- We have been piloting a new tool and will be making recommendations later this year. Some early results:
 - 40% have a copay (up from 26%)
 - The average collection amount increased from \$56 to \$87 per month
 - 11% had a housing cost deduction (more than 25% of their income on rent/mortgage)

Federal Funding Impact

- The Administration on Community Living was dissolved
- In a leaked Health and Human Services Plan:
 - Home-delivered Meal and Congregate meal cuts
 - Wellness and Ombudsman program funding eliminated
- Possible Medicaid reductions
- Possible Medicare Advantage Plan benefit changes



Questions/Discussion

