

Council on Aging Independence. Resources. Quality of life.

2013 Annual Report

Dear Friends,

To say that the field of aging services is in a state of rapid change is an understatement! Many funders are focused on the "Triple Aim," a framework to optimize health system performance that was developed by the Institute for Healthcare Improvement. The goals are: improving patient care, improving health outcomes and reducing costs. This focus is translating into new initiatives in Ohio – mainly the implementation of MyCare Ohio – the state's new Integrated Care Delivery System.

Throughout 2013, COA worked with the two health plans serving our area, Aetna and Molina, to prepare for the enrollment of "dually eligible" people (individuals eligible for both Medicare and Medicaid) into MyCare Ohio. Ohio targeted this population because they are older and more frail than other groups and their care is more expensive. Once people are enrolled in MyCare Ohio, COA will provide care management and/or waiver service coordination for those who need long-term care via PASSPORT, the Assisted Living Waiver or the Ohio Home Care Waiver.

Meanwhile, we still administer PASSPORT in accordance with the directives of the Ohio Department of Aging. To that end, COA was Ohio's top performer in reducing unnecessary nursing home placements via PASSPORT. This is a tribute to our care management teams and the provider network as we show we can achieve our mission of helping individuals to remain independent at home.

Our Care Transitions team has been working hard to empower older adults to be more knowledgeable about their health in an effort to avoid being readmitted following a hospitalization. Our performance yielded a visit to COA by evaluators for the Centers for Medicare and Medicaid Services who were collecting best practice information. Also, our Care Transitions Manager, Kim Clark, and I were invited to speak at the Community Care Transitions Program National Collaborative meeting to promote the need to meet performance targets.

Finally, we continue to develop ways to ensure that seniors participating in our county levy programs receive the highest quality products at the lowest cost possible so that we can serve as many individuals as possible with the tax dollar. As an example, we used data from our client satisfaction survey to encourage home-delivered meal providers to offer more meal choices. They responded and subsequent surveys showed a jump in client satisfaction! Recently, we issued a proposal for emergency monitoring services aimed at contracting with a single technology partner. This will allow us to take advantage of new technology while reducing costs.

The strength of our region's aging and disability network positions us to demonstrate to the rest of the country that we can help adults improve their health outcomes, reduce costs through process improvement and innovation, and help frail seniors and other adults with disabilities to remain independent at home for as long as they can safely do so. We appreciate all you do to make this possible.

Suzanne Burke CEO, Council on Aging



Bill Thornton
Chairman,
Board of Trustees





"Aging is the great unifier. We all have the goal of wanting to live long healthy lives in good company." Kathy Greenlee, Administrator, U.S. Administration for Community Living

Our Mission

Enhance people's lives by assisting them to remain independent at home through a range of quality services.

Our Role in Your Community

Preserve independence for seniors and people with disabilities

Home and community-based services; transitions from hospitals and nursing facilities; care coordination and care management

Connect individuals, families, caregivers and professionals to information and resources COA's Aging and Disability Resource Network

Enhance quality of life

Advocacy; Older Americans Act; wellness initiatives

Council on Aging

Preserving independence, connecting to resources, enhancing quality of life

We are in your community every day working with seniors, other individuals with disabilities and their families. We're in hospitals, in nursing homes, assisted living facilities and in thousands of homes throughout our five-county region. In 2013, COA:

- Helped 19,831 people to remain independent in their homes through programs such as PASSPORT, the Assisted Living Waiver, and the county-based Elderly Services Program
- Assessed **5,283** high-risk, hospitalized Medicare patients for Care Transitions interventions designed to help prevent the need to return to the hospital
- Contracted with and monitored nearly 200 provider organizations that deliver services such as meals, homemaking and personal care; 1.97 million home-delivered meals; **2.16** million hours of other in-home services

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

COA's Aging and Disabilities Resource Network responded to 35,203 requests for information and referral in 2013, a 20 percent increase over 2012

We plan and oversee community services funded by the federal Older Americans Act, including in 2013:

- 198,939 congregate meals, primarily in senior centers
- 299,347 transportation trips for medical and senior center activities (including 159,505 trips funded by the Older Americans Act), a seven percent increase over 2012

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

More than 100 advocacy meetings with elected officials and candidates, including home visits with COA clients

"In the name of my mother and on behalf of our entire family, I want to express our sincere appreciation for the assistance mom has received from Council on Aging... Mom's (care manager) truly exemplifies kindness, consideration and compassion, all qualities that have endeared her to mom and our family." Dale T. Foley

kindness, consideration and compassion

Use your Smartphone's QR Code reader to access additional content throughout our annual report. visit our YouTube channel to hear from our clients and learn more about our role in the community

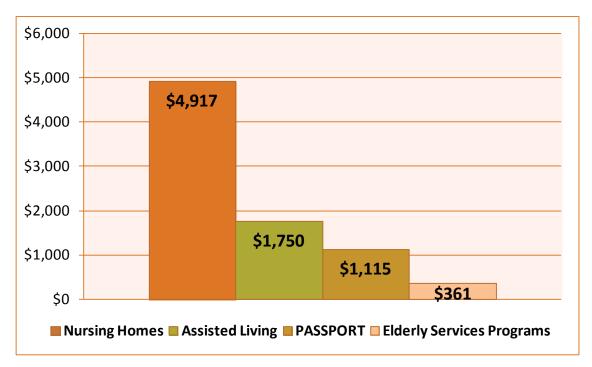


Home & Community-based Care Compassionate, cost-effective alternatives to nursing home care

Home and community-based care via PASSPORT, the Assisted Living Waiver or the Elderly Services Program is much less costly for taxpayers than providing care in a nursing home. The charts on this page show the number of area older adults enrolled in publicly-funded home and community-based programs and compare the average cost per month of each to nursing home care.

	Elderly Services Program		PASSPORT Program		Assisted Living Waiver Program	
	Clients Served	% Change	Clients Served	% Change	Clients Served	% Change
Butler	4,097	+2%	600	+2%	400	+18%
Clermont	N/A	N/A	371	-2%	0	0%
Clinton	531	+3%	123	-8%	7	+17%
Hamilton	7,047	-3%	2,199	+1%	345	+10%
Warren	2,474	+3%	236	-2%	65	-13%
Total	14,149	5%	3,529	.2%	817	+11%

Elderly Services Program, PASSPORT, and Assisted Living clients by county in FY 2013 and percent change since FY 2012. The enrollment decline in the Elderly Services Program is due to waiting lists in Clinton and Hamilton counties.



Average cost per month of local home and community-based care options compared to nursing home care. **Source:** Miami University Scripps Gerontology Center and Council on Aging



LOSER ABUSE HAPPENS
IN HOMES
AND NUISING HOMES
AND NUISING HOMES
SPEAK UP
FOR OUR SENIORS

COA staff wear purple in support of National Elder Abuse Awareness Day, June 2013

Community Transitions Helping people move from nursing homes to their own homes

Dennis

Dennis was only 62 when he moved to a nursing home. Disabled by rheumatoid arthritis, he had been doing his best to manage on his own, but when his two sons got into trouble and he lost his home, he eventually had no other choice.

A former roofer, his resources were slim. He had been relying on disability payments for years after scaffolding collapsed and he fell from the roof of a three-story barn.

After he had been living in the nursing home for a while, a social worker recognized that he did not need to be there permanently and she referred him to Home Choice, a program that transitions nursing home residents back into the community and homes of their own.

That got the ball rolling. Easter Seals found an apartment and arranged everything that goes with it (security deposit, first month's rent, furniture, and so on) and Council on Aging set up in-home care services via PASSPORT and arranged for skilled nursing visits. After months of preparation, Dennis was ready to move to his new home a couple weeks before Christmas. Altogether, he had been in the nursing facility for about a year and a half.

"It was the best Christmas present I could have had," Dennis said. "It put feeling back in my heart."

(Through PASSPORT, Dennis receives home-delivered meals, an emergency response device, homemaking, and transportation.)

"I felt alive again. When Bruce (from Easter Seals) and Mary Beth (from Council on Aging) and a few of the others brought my furniture into my apartment, it tickled me to death. I just couldn't believe it."

Dennis, a Community Transitions client, reviews his medications with a visiting nurse





John and Rowena

For years, John and Rowena battled health problems. He had multiple sclerosis and was losing his ability to function on his own. She had edema and nearly died. A vibrant couple who had careers as a chef (John) and social services administrator (Rowena), they found themselves with no option but to move to a nursing facility.

As Rowena's health improved, her doctor said she could leave the nursing home. But by this time, she had no home to return to and she wanted John to come with her. She had heard about the Home Choice program and, with the help of the nursing home, started the process of transitioning out.

The Center for Independent Living Options found and set up the apartment and Council on Aging enrolled the couple in



Rowena and John, with son Michael, center

PASSPORT. Both John and Rowena have many health problems and require a broad array of services.

"I was not worried about leaving the nursing home," Rowena said. "I had been dealing with home health aides and wraparound services for my husband for a long time, so I felt confident I could do well. But it takes a village to make this work for us - from home health aides, to family members, to house calls from physicians and nurses, to Council on Aging, and even a friend who comes by almost daily. It takes a little bit of everybody to help us stay here and - to my estimation - living well."

How Community Transitions Works

- Begins with a referral, often from nursing home staff or residents themselves.
- Nursing facility residents who have no home to return to may qualify for Home Choice. This Ohio program funds community transitions services such as finding an apartment, paying security deposit, buying furniture and household supplies, and opening a bank account.
- Residents may also qualify for PASSPORT or the Elderly Services Program via Council on Aging. These inhome care services enable them to live independently with support.
- All services housing transitions, in-home care, skilled nursing, and others must be coordinated and ready by move-in day, a process that can take months.
- The result is individuals living independently once again at a fraction of the cost to live in a nursing home.

In FY 2013, Council on Aging assessed 290 nursing home residents for Community Transitions. Of these, 190 were able to leave nursing homes and move to homes of their own. Of those who returned to the community, 145 enrolled into PASSPORT.

"There has to be careful coordination by all the organizations involved so that when clients leave a nursing home, they go into a situation that is safe, comfortable and meets their needs. For me, professionally and personally, it is very rewarding to go into a facility, meet someone who has lost the means to return home, and have programs that can give home back to them."

Laurie, COA Community Transitions Specialist

In-home Care Programs Elderly Services Program

Dee

Tucked onto a bookshelf in Dolores' snug apartment is an envelope with the nickname "Dee" written in large script and embellished with swirls and curlicues. Inside is a handwritten note from a graduate student in Speech-Language Pathology at University of Cincinnati Medical Center. "You have shown amazing determination," the note says, "and continue to improve on all your skills." It ends with some quotes meant to inspire Dee to keep going: "The only limits you have are the limits you believe."

Dolores – or Dee as she prefers to be called – had a stroke in early 2012 which left her barely able to speak. Through a lot of effort, her speech has returned, but she has aphasia, a condition caused by damage to the brain which limits the ability to articulate thoughts. Dee's sentences often pour out in a confusing jumble. She's a gregarious person though, kind and friendly, and taken to calling people, "honey."

"I used to be pretty smart," she said, sweeping her arm toward a wall of books. "But, honey, not so much now."

Referred by hospital social workers after her stroke, Dee enrolled in the Hamilton County Elderly Services Program. She receives homemaking help and not along ago, her care manager arranged transportation so she could visit her 98-year-old mother who lives in a nursing home.

The help is a comfort, especially to Dee's two daughters, who live in other cities. "I can't say enough good things about Council on Aging," said Dee's daughter, Vicky. "I don't know what we would have done without your organization."

Although she doesn't receive a lot of services, it's enough to keep Dee in the apartment where she has lived for years, a place crammed with her special things and decorated with plaid curtains and matching chair cushions she sewed herself.

Her artistic side, in fact, is something she'd like to return to. Showing off a few sketches, she said, "I would like to get to the drawing again, honey. I just want to do something. If you've worked all your life, you don't want to sit around. I won't be able to do everything I did before, but so, I'm 80 years old — I still have a chance."





How In-home Care Programs Work

- The Elderly Services Program (funded primarily by county tax levies) and PASSPORT (funded by Medicaid) prevent unnecessary nursing facility placement by providing an array of long-term care services in the home. Services include home-delivered meals, homemaking, personal care, transportation, medical equipment, respite for caregivers, emergency response devices, and more.
- Eligibility is determined via in-person assessment by a Council on Aging social worker and each client is
 assigned a care manager who develops, coordinates, and monitors a plan of care. Services are adjusted
 with changing needs. The goal is to preserve each client's independence in his or her home for as long
 as possible.
- In the Elderly Services Program, only one-fourth of clients leave the program each year because they are hospitalized or need to move to a nursing home. Most of the remainder are able to stay in their homes until they die, enroll in another home or community-based program, or have their needs met in another way.

Care Transitions

Preventing unnecessary hospital readmissions

Jack

When Cathy, a Council on Aging health coach, met Jack, he had recently come home from the hospital where he had undergone a femoral artery bypass. The surgery removed a blood vessel from his right arm and grafted it into his right leg to restore circulation that had been lost to vascular disease.

The purpose of Cathy's visit was to help Jack avoid an unnecessary and costly return to the hospital. But the situation didn't look good. "I could see he was in a lot of pain," Cathy said. "His incision sites were red and there was edema in his right arm and leg."

A former auto body repairman who has had plenty of scrapes from jagged metal, Jack shrugged these things off "I've got a high tolerance for pain" he said "It only he



Jack, COA Care Transitions client

off. "I've got a high tolerance for pain," he said. "It only hurt when I moved."

But it's precisely that attitude that made Jack a good candidate for Council on Aging's Care Transitions program. The program uses trained health coaches, such as Cathy, to visit at-risk patients in their homes soon after hospital discharge. Their job is to empower patients to manage their conditions and connect with their doctors to prevent a revolving door to the hospital, a far too common experience for individuals on Medicare – and expensive for taxpayers. Their tools are basic, but effective, including medication management, keeping a Personal Health Record, and involving the primary care physician as soon as possible after discharge.

In her visit with Jack, Cathy saw red flags all over the place. Because he had left the hospital on his own, without a formal discharge, he had no pain medication and no arrangements for skilled in-home services, such as a nurse and physical therapy. Cathy also learned that he was lenient in his diabetes control and had not yet met with his primary care doctor.

With Jack's permission, Cathy made a referral to a skilled nursing service for further wound care, medication management, diabetes education, and physical therapy. When she called him a week later, he had seen his doctor, received antibiotics and pain medications, had his arm and leg wrapped to control swelling, and was undergoing physical therapy.

Nearly two months later, he had not returned to the hospital and was doing much better. At one time resigned to his health problems, he saw hope returning to his life.

"Before, I never checked my sugars (for diabetes control), but now I do at least once a day," Jack said. "It seems like I've got a lot more energy and I'm not out of breath as much. It used to be, if the doctor couldn't do anything for me, I just didn't care. It was like, why bother? Now, I feel like I want to try to do stuff. I want them to fix my left leg now."





How Care Transitions Works

- Health coaching for older adults who have been hospitalized for serious and usually chronic conditions, such as heart failure.
- The program is based on a model developed by Eric Coleman, M.D. of the University of Colorado.
- Council on Aging has a contract with the U.S. Centers for Medicare and Medicaid Services (CMS) to deliver care transitions to patients at: The Christ Hospital; Clinton Memorial Hospital; Mercy Health – Fairfield Hospital; Jewish Hospital – Mercy Health; and University of Cincinnati Medical Center.
- In the first nine months of 2013, 1,669 patients completed the 30-day program (64 percent of total who started). Of those who started Care Transitions, 12 percent were readmitted to one of the participating hospitals within 30 days of discharge. This rate is significantly lower than the national readmission rate for Medicare patients, which is approximately 20 percent.
- Council on Aging's program has been recognized for effectiveness by CMS and its former manager, Kim Clark, shares best practices as a faculty member of the program's national learning initiative. In late 2013, the Cincinnati USA Regional Chamber of Commerce Women Excel program honored Care Transitions as runner up for Best New Product of the Year.

Aging and Disability Resource Connections The Front Door

Aging and Disability Resource Connections (ADRC)

Council on Aging serves as a visible and trusted place where people turn for objective information on the full range of long-term care services and supports available in their communities.

ADRC HIGHLIGHTS

Our call center and Elderly Services Program intake lines in Butler, Clinton, and Warren counties received nearly **35,000** information and referral requests in 2013, an increase of 26 percent over 2012.

Council on Aging is one of 12 regional Aging and Disability Resources Networks (ADRN) in Ohio. An ADRN is a web of social service and health organizations who work together to make it easier for people to access the help they need. We have established partnerships with numerous organizations through contracts, written protocols, and/or staff cross-training.

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

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



search our resource directory



ADRC Call Center Staff

This inquiry is typical of those our call center staff hear every day:
"My father had a heart attack and multiple strokes all over his brain. He is currently in a rehabilitation center. He had paralysis on one side, but is doing extremely better. We are looking for information on how we can bring him home and get care in the home. Any information can help!"

Community Outreach

Council on Aging has an active outreach program that includes speaking to community groups, elected officials, and specialized audiences, such as hospital social workers. Annual events including Forum on Aging and Own Your Future provide education for professionals in the field of aging and help people plan for their retirement and long-term care needs.

Older Americans Act A promise to older adults

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

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

In FY 2013, Title III provided funding for the following essential services, among others:

- 198,939 congregate meals served at various sites (mostly senior centers) in five counties, a five percent decline from FY 2012
- **159,505 transportation trips** in senior center vans and buses for medical appointments, shopping, recreation, and the like, a 10 percent decrease from FY 2012 (total transportation from all funding sources: 299,347 trips, a seven percent increase over FY 2012)
- Health and wellness activities, which have become an important mission of senior centers



Photo Credits: Jewish Family Services Holocaust Survivors Celebration (top left); Exercise Program at Middletown Area Senior Center (top right); Clermont Senior Services Senior Transportation (middle left); Warren County Community Services Fall Senior Picnic (middle right); Middletown Area Senior Center Congregate Meal Picnic (bottom left); Hyde Park Center for Older Adults Congregate Meal Veterans Day Celebration (bottom right).

Advocacy Elected officials learn the issues firsthand by visiting clients

Most of the state legislators representing our five-county region, as well as many local elected officials, have visited Council on Aging clients where they have seen firsthand the value of in-home care. In addition, we meet regularly with elected officials to keep them educated on issues of importance to older adults and caregivers. In FY 2013, we participated in **64 meetings** with elected officials, legislative aides and candidates; and coordinated **50 visits** by elected officials and candidates in the homes of COA clients.



"I highly support the PASSPORT program and home and community-based programs. They enhance our lives, our communities and they save money." State Representative Louis Blessing, III

Pictured clockwise from top left: State Representative Cliff Rosenberger (R-House District 91, Clinton County) with COA staff and board members; State Representatives Wes Retherford (R-House District 51, Butler County) and Tim Derickson (R-House District 53, Butler County) with COA Board member Charlene Himes; State Representative Dale Mallory (D-House District 32, Hamilton County) with COA CEO Suzanne Burke; State Representative Ron Maag (R-House District 62, Warren County) with COA CEO Suzanne Burke; State Representative John Becker (R-House District 65, Clermont County) with COA Board member Risa Prince and Board Chair Bill Thornton; State Representative Louis Blessing, III (R-House District 29, Hamilton County) with PASSPORT client Ella, 89.

Accomplishments Year in Review

MyCare Ohio Extensive planning began for COA's role in Ohio's new Integrated Care Delivery System. Called MyCare Ohio, the system is for people who are eligible for both Medicare and Medicaid. In our region, these "dually eligible" people will enroll in one of two managed care health plans. Through agreements with these plans, COA will provide care management and coordination services for enrolled individuals who need long-term care via PASSPORT, the Assisted Living Waiver or the Ohio Home Care Waiver. Once enrollment begins in 2014, MyCare Ohio is expected to serve more than 19,000 people in our region per month.



Hamilton County Levy In November 2012, the Hamilton County Senior Services Levy won a smashing victory at the polls. Nearly 75 percent of voters approved a renewal of the levy, which provides 90 percent of funding for the county's Elderly Services Program. The program helps more than 7,000 frail older adults to remain independent in their homes.

PASSPORT Effectiveness Council on Aging was Ohio's top performer in reducing unnecessary nursing home placements via PASSPORT, Ohio's in-home care program

for low income seniors. The Ohio Department of Aging's goal was to limit the number of PASSPORT clients who moved permanently to a nursing home to less than 26 percent. We averaged 22 percent for the period as a result of our work to prevent nursing home placements and to transition residents out of nursing homes and back into the community.

Improving Home-delivered Meals COA's provider quality management system worked with several providers of home-delivered meals to improve client satisfaction. Preliminary results were immediate and dramatic. One provider improved their client satisfaction scores by 20 points in one quarter, primarily by offering more meal choices.

Forum on Aging More than 500 people attended our annual two-day training and networking event. We are grateful for solid support from our sponsors who help make the event possible.

Seamless System of Care COA presented a summit by drawing together some 75 health care leaders, elected officials, and provider organizations to discuss how to build on our region's assets to develop a seamless system of care for the frail elderly.

Care Transitions The program continued to grow and gain national and local honors. After receiving recognition for our performance, a planning and evaluation team for the Centers for Medicare and Medicaid Services visited COA to learn about our best practices. Manager Kim Clark was invited to join the faculty of the Community Care Transitions Program's national learning initiative. The Women Excel program of the Cincinnati USA Regional Chamber of Commerce honored the program as runner up in the category of Best New Product of the Year.



Awards

Sharon Fusco, Director of Business Results and Innovation, was honored by the Ohio Association of Area Agencies on Aging for her work leading a team which developed price models to help Area Agencies on Aging calculate the actual costs of their services. Armed with this information, the organizations – most of them non-profits – are better positioned to offer their skills and products to managed care health plans, hospitals, and other entities trying to deliver better care at lower costs.

Council on Aging's Business Intelligence Team was honored with the Practitioner of the Year award from the Ohio Association of Gerontology and Education. The team was recognized for delivering meaningful, accurate, and timely information, analysis, and tools to support data-driven decision making at COA.

Boards and Advisory Councils

Membership as of 9/30/13

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Debbie Hauenstein Geraldine Bess Maddox

Christy Quincy Cynthia Stever **David Stiles**

Mindy Wendling

James White Gene Willeke

Service Providers | Year Ending September 30, 2013

A Best Home Care, Inc. A Miracle Home Care Abbore Care, Inc. Absolute HomeCare Acare Home Health

Acclaim Home Health Services Inc.

Active Day of Cincinnati

ActivStyle, Inc.

ADT Security Services Inc.

Advanced Medical Equipment, Inc.

Afinity Healthcare Solutions Algo Termite & Pest Control

All Gone Termite & Pest Control, Inc.

Ally Home Healthcare, LLC

Alternative Home Health Care Alzheimer's Association of Greater

Cincinnati

Amaramedical Health Care Services, Inc.

Amen Med-Care, LLC

Amenity Home Health Care, LLC

Ameribest Home Care American Ramp Systems

American-Mercy Home Care, LLC

Angels Above & Beyond Home Health

APlus Health Care, LLC

Assisted Care by Black Stone **Assistive Solution**

Bathblest Renovations Bayley Adult Day Berkeley Square Bernens Medical

Best Choice Home Care

Best Choice Transportation, LLC BetterLiving Home Health and Medical

Supplies

Blessings Home Health Care, LLC BlueGreen Home Health Care

Bridgeway Pointe

Brightstar Healthcare Cincinnati Brightstar Healthcare Dayton

Brookwood Retirement Community

Butler County Care Facility

C.A.R.E., LLC

Cambridge Home Health Care Cape May Retirement Village Caring Hearts Adult Day Care Carriage Court of Kenwood

Catholic Charities of Southwestern Ohio

Charter Home Services

Cincinnati Area Senior Services, Inc.

Cincinnati Home Care

Cincinnati Recreation Commission Clermont County Community Services, Inc.

Clermont Senior Services, Inc.

Clinton County Adult Day Center, Inc.

Clinton County Community Action

Program

Close to Home, II LLC Clossman Catering LLC

Colerain Township Community Center

Colonial At Home

Comforcare Senior Services - Edinburgh Comforcare Senior Services - TriCounty

Comfort and Care Home Health Agency

Comfort Keepers #172 Comfort Keepers #178 Comfort Keepers #200 Committed to Care

Comprehensive Health Care Services **Cottingham Retirement Community**

Critical Signal Technologies, Inc.

Custom Home Elevator & Lift Co. Inc.

Day Share Senior Services

Deaconess Medical Monitoring

Deupree Community Meals on Wheels

Diversicare of Bradford Place Duraline Medical Products, Inc.

Emerson Heating & Cooling Company

Errands and Services, LLC

Evergreen Retirement Community

Everyday Homecare, LLC Everyday Living Inc. Fairfield Pavilion

First Choice Medical Staffing of Ohio, Inc. First Community Health Services, LLC

Friendly Care Agency Garden Manor Terrace, Inc.

Global Meals Grab Bar Man

Gracious International Care Service

Guardian Medical Monitoring, Inc.

Halsom Home Care Hardy Plumbing Harrison Senior Center

Healing Springs Med-Care, LLC Heartland of Woodridge (ALF) #502 Helping Hands Healthcare, Inc.

Hillebrand Home Health Home Care Delivered, Inc. Home Care Network, Inc.

Home First

Home Healthcare by Black Stone

Home Helpers

Homefront Nursing, LLC HomeSense Enterprises, LLC

Hyde Park Center

Interim HomeStyles of Greater

Cincinnati. Inc.

International Elderly Care Group International Quality Healthcare Corp.

Service Providers | Year Ending September 30, 2013

Jewish Family Service Judson Care Center Judson Home Care L.L. Peet Construction Services Liberty Retirement Community of Middletown

Life Alert Emergency Response, Inc. Life Care Home Health LLC Littleton Respiratory Homecare Llanfair Retirement Community

Lorraine Surgical Supply Loveland Health Services

Mari Elders

Marquis Mobility, Inc. Mason Christian Village Mason Health Care Center Maxim Healthcare Services, Inc. Mayerson JCC (Jewish Community Center) Meda-Care Transportation, Inc.

MedAdapt Ltd. **Medical Service Company**

MedScope American Corporation Mercy Franciscan @ West Park Mercy Neighborhood Ministries Middletown Area Senior Citizens, Inc.

Millenium Nursing Agency Milt's Termite & Pest Control Mom's Meals

MSI (Medical Supply, Inc) Mt. Healthy Christian Village Mt. Pleasant Retirement Village

Mullaney's Pharmacy & Home Health Care N Services, Inc.

North College Hill Senior Center North Fairmount Senior Center Nurses Care. Inc.

Otterbein Lebanon Adult Day Service Otterbein Lebanon Assisted Living Oxford Senior Citizens, Inc.

Oxford Seniors Community Adult Day

Service Partners in Prime **Pennington Construction People Working Cooperatively** Personal Home Assistance, LLC Personal Touch Home Care of Ohio, Inc.

Philips Lifeline Prime Home Care, LLC

Pro Seniors, Inc.

Quaker Heights Care Community

Quality Care

Queen City Med Mart Inc. ResponseLink of Cincinnati RMS Home Medical Equipment

RN and Associates Rural/Metro Helpline S P Contracting

Safeway Safety Step

Scarlet Oaks Retirement Community

Senior Deserved Day Senior Independence Senior Resource Connection Sincere Home Health Care Source One Medical

Southwest Transportation Services, LLC

Spring Hills Middletown St. Joseph Construction Stay Well Home Health, LLC Sterling House of Fairfield Suites of Hawthorn Glen Superior Home Care, Inc. Sycamore Senior Center Synergy Homecare

SYNERGY HomeCare of South Dayton

The Courtyard at Seasons The Inn at Renaissance Village The Lodge Retirement Community

The Scooter Store - Dayton

The Terrace

The Visiting Nurse Association The Woodlands of Hamilton The Woodlands of Middletown, LLC

Thermal-Shield, Inc **THS Healthcare Services** Tri County Visiting Nurses, LLC Tri-State Maintenance Twin Towers Adult Day Stay Twin Towers Residential Care United Hearts Home Care

Universal Transportation Systems (UTS) Victoria Retirement Center

VNA Healthtrends

VRI

Warren County Community Services, Inc. Wesley Community Services

West College Hill Neighborhood Services Westover Retirement Community

Boards and Advisory Councils

Membership as of 9/30/13

Clinton County Citizens for Elderly Services, Inc.

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Warren County Citizens for Elderly Services, Inc.

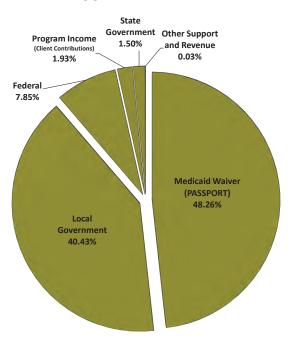
Deanna Webster

Chuck Peckham, Chair Dr. Don Juszczyk, Vice Chair Ann Munafo, Secretary Tom Ariss Mark Clark Dave Gully Nick Nelson Robert Olson

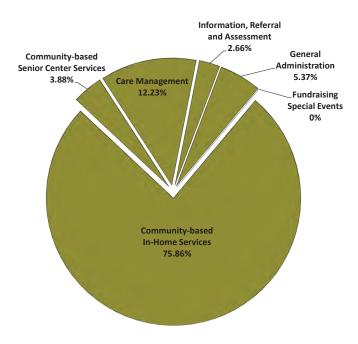
COA's home and community-based services are delivered via contracts with a variety of organizations.

Statement of Financial Activities Year Ending September 30, 2013

Support and Revenue



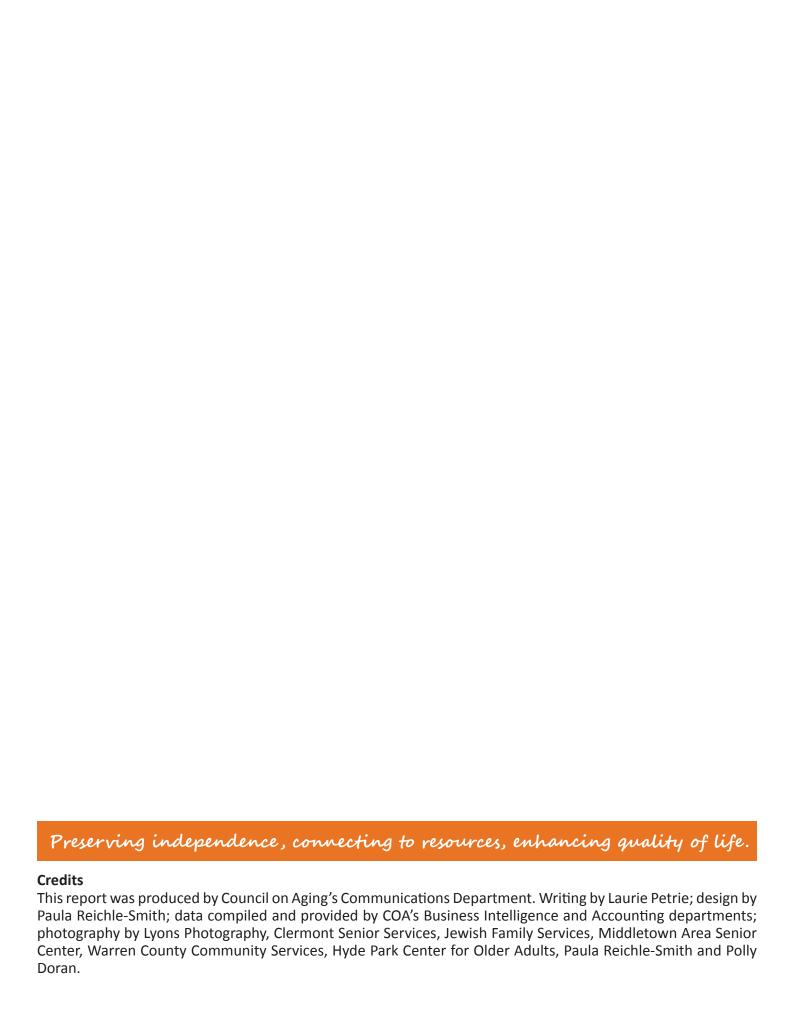
Expenses



Support and Revenue		
Medicaid Waiver (PASSPORT)	\$48,780,989	48.26%
Local Government	\$40,860,563	40.43%
Federal	\$7,936,153	7.85%
Program Income (Client Contributions)	\$1,943,533	1.93%
State Government	\$1,520,938	1.50%
Other Support and Revenue	\$35,163	0.03%
Total Support and Revenue	\$101,077,339	100%

<u>Expenses</u>		
Community-based In-Home Services	\$76,848,517	75.86%
Care Management	\$12,385,254	12.23%
General Administration	\$5,433,949	5.37%
Community-based Senior Center Services	\$3,933,989	3.88%
Information, Referral and Assessment	\$2,698,625	2.66%
Fundraising/Special Events	\$36	0.00%
Total Expenses	\$101,300,370	100%

Change in Net Assets	
Change in Unrestricted Net Assets	(\$223,031)
Unrestricted Net Assets, Beginning of Year	\$1,296,815
Unrestricted Net Assets, End of Year	\$1,073,784





"(Going home from the nursing home) was the best Christmas present I could have had. It put feeling back in my heart."

Dennis, Community Transitions client



Council on Aging of Southwestern Ohio

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