

AGENDA

HCESP Advisory Council Meeting

September 25, 2025 | 2:00 pm – 3:30 pm

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

<https://zoom.us/j/96395916900?pwd=xaT0pJnn8Y9a9yeARDuVjAMrYj00gY.1>

Meeting ID: 963 9591 6900 | Passcode: 452730

CALL TO ORDER	2:00	Janice Hunter
APPROVAL OF MINUTES ❖ July 14, 2025 Minutes (Action Needed)	2:00-2:05	Janice Hunter
QUARTERLY REPORTS ❖ Program Dashboard & Financial Report ❖ Program Update Report ○ Farmers Market Redemption Rate	2:05-2:20 2:20-2:30	Ken Wilson & Ronnie Spears Jennifer Heck
OLD BUSINESS ❖ PACE Update	2:30-2:40	Ken Wilson
NEW BUSINESS ❖ Draft 2026 Budget (Action Needed) ❖ Service Specification Changes (Action Needed) ○ Medical Recovery and Extended Care Services ❖ Advocacy Updates – State & Federal	2:40-2:50 2:50-3:00 3:00-3:15	Ronnie Spears Ronnie Spears Nan Cahall
HEARING THE PUBLIC	3:15-3:20	Janice Hunter
ADJOURNMENT (Action Needed)	3:20	Janice Hunter

NEXT MEETING: December 4, 2025

MINUTES
HCESP ADVISORY COUNCIL MEETING
MONDAY, JULY 14, 2025 @ 2:00 P.M.

ATTENDANCE

Members Present:	COA Staff:	Guests:
Angele Blackshear Viola Brown Randi Burlew Janine Gage Janice Hunter Holly Mundon Dimity Orlet (virtual)	Ken Wilson Stephanie Seyfried Ronnie Spears Jennifer Lake Alyssia Kelly Shelby Stout	
Excused:	Facilitator:	Scribe:
Holly Mundon	Janice Hunter	Christina Adams
Absent:		

CALL TO ORDER

The July 14, 2025 meeting of the HCESP Advisory Council was called to order by Janice Hunter at 2:01 p.m.

APPROVAL OF MINUTES

Janice Hunter called for a motion to approve the February 27, 2025 Hamilton County Elderly Services Program (HCESP) Advisory Council minutes as presented.

Motion: Viola Brown made a motion to approve the minutes.

Second: Randi Burlew seconded the motion.

Action: The February 27, 2025 minutes were unanimously approved.

QUARTERLY REPORTS

Program Dashboard & Financial Report (Jan-Mar 2025)

Ken provided an overview of the January-March 2025 Program Dashboard (please see the handout for full report). There were 4,025 clients enrolled in the Elderly Services Program (ESP) at the end of the first quarter. Enrollments in the program will be increasing as managed enrollment, which was implemented in May of 2023 to keep cost down and stay within budget, was lifted the week of July 7, 2025. There was a drop in the cost per client in the first quarter following a three year rise. There were 410 new enrollments into Fast Track Home (FTH) in the first quarter which is a record high. Of the 410 new enrollments, only 92 clients transferred to ESP at the end of the 60 days in FTH. The number of clients transferring to ESP was down due to managed enrollment protocols. The home care assistance (HCA) workforce has improved so there has been an increase in the number of clients receiving HCA. Currently there are only 26 clients that are waiting for a provider.

The STEPS to Stability Program provides one-time services to clients and includes home modification and utility assistance. In the first quarter, there were 40 new home modifications and 957 clients who received Duke Energy electric and gas utility credits.

Randi asked if we have other resources to direct clients to for utility assistance, particularly in the winter months. Ken noted that HEAP is the primary resource but this program will be eliminated from the federal budget beginning in October 2025. Stephanie added that there are other resources such as Saint Vincent De Paul and Community Action Agency that provide utility credits when funding is available.

Janice asked if we are aware of additional cuts to federal funding. Ken shared that funding for home delivered meals was not cut. At this time, we do not know what the impact to Medicaid will be at the state level. Some other cuts are also unknown at this time.

There were 50 clients in the first quarter who were assisted with accessing their Medicare benefits. In 2024, \$91,051 of program funding was saved by clients using their Medicare benefit when possible. An adjustment to the Medicare Benefit Cost Savings section of the report was made because the cost savings to the program was not being captured accurately. The 2025 cost savings to date will be reported at the next meeting.

Ronnie reviewed the January-March 2025 Financial Report (see handout for full details). This report is actuals for January through March 2025 and the remaining months have been projected. Overall, we are projecting to be within 0.3% of the budget. Projections were based on managed enrollment being lifted in July 2025 and the census increasing.

Program Update Report

Jennifer Lake reviewed the Program Update report (please see handout for full details). Two new adult day service (ADS) providers have been added; Restoration Adult Day Services and Margaret's Heart Adult Day Services. In May, Providers Services hosted a home care assistance (HCA) partnership meeting. This was an opportunity to discuss ways to improve HCA services and allow providers to ask questions and make recommendations.

Jennifer noted that our business relations partners have a quarterly or bi-annual call, depending on which service, with providers. This is an opportunity to get feedback and/or concerns from providers. Business relations partners have been meeting with home52 Transportation providers to discuss lowering rates as gas prices have fallen since rates were put in place. Many transportation providers have lowered their rates.

The Center for Respite Care was awarded a contract following the release of an RFP for medical recovery and extended care services in Hamilton County. This service provides holistic medical care to people experiencing homelessness. COA began overseeing this contract following a request from Hamilton County.

The Seniors Farmers Market Nutrition program benefits became available to qualified participants on May 15. In Hamilton County, 847 participants enrolled to receive the benefit.

Randi asked if we are tracking how many of the 847 participants are using the benefits. Jennifer noted that we have access to the 3rd party portal that ODA uses and can see the amount of benefits redeemed. Jennifer checked the portal and found to date, there are 1,155 applicants that have been approved for benefits and just over \$57K in benefits has been issued of which approximately \$5K has been redeemed. This redemption total is not real time so there may be additional benefits redeemed that are not yet reflected in the total. This is the second year since ODA took over the program. Prior to this, COA

managed the program and had more control over the application process, benefit distribution, etc. Some of the farmers that participated previously have stopped since ODA implemented the electronic process. We will be following up with ODA on the low redemption rate to understand any barriers.

Action: Jennifer Heck to follow up with ODA on the low redemption rate of Senior Farmers Market Nutrition Program benefits, or if we are seeing a timing issue.

OLD BUSINESS

Community Access Workgroup

Alyssia Kelley shared an update from the Community Access Workgroup (please see handout for full details). As follow-up to the previous meeting, Provider Services confirmed that Wesley Community Meals on Wheels uses Language Line to accommodate clients who need translation. Provider contracts state that providers must be able to communicate effectively with clients. Provider Services is considering sending a quarterly survey to determine which providers use translation services and/or have bilingual staff.

Randi asked if we received demographic information from providers when they report back on how many clients they have served or if we track this by provider. Alyssia shared that the demographic data is tracked based on information collected from the client during intake.

Two Community Access Workgroup members attended a Su Casa Health Fair in April where they provided information about COA services to 20 families.

Randi asked if Su Casa provided feedback on what is preventing the Hispanic population from utilizing services. Alyssia noted that currently the biggest factor is that the population is afraid to provide identifying information, e.g., social security number, so they are not seeking out services.

Randi asked what is the exposure risk to an individual who seeks services with COA. Ken noted that the data is secure with COA. However, there are some federal reporting that we must provide for services that are partially federally funded, i.e., home delivered meals.

Randi commented that it would be beneficial to be transparent with individuals about any risk to providing identifying information to COA and what data safety measures are in place.

Randi asked if there ways that COA can change service delivery to individuals who are fearful or uncomfortable providing identifying information. Ken noted that this is a question that the Community Access Workgroup can explore.

Action: Community Access Workgroup to explore service delivery options for individuals who are hesitant to provide identifying information.

PACE Update

Ken provided a PACE update. PACE is a joint venture between COA and TriHealth. We recently received approval from the Centers for Medicare and Medicaid Services (CMS) and are now working with the state to receive approval. The program is tracking to be operation on September 1, 2025. The committee is invited to the PACE open house on August 27, 2025 from 3:00-5:00 p.m.

Annual Report

Ken shared the 2024 HCESP annual report (see handout for details).

Janice asked if the annual report could be distributed to senior centers. Ken noted that the annual report is useful information for anyone who would like to know more about the program and/or would like to see the data, and the report can be distributed.

Five-Year Levy Projections

Ronnie reviewed the five-year levy projections (see handout for details). In 2024, collections were increased by approximately \$650K, and this increase was projected for the remaining three years of the levy cycle. We are projecting to have a fund balance of \$7.9M which would cover approximately three months of services.

Randi asked if the fund balance is a reserve should the levy not pass. Ken shared that the balance is a reserve but it is also cash flow in case collections drop as we saw in 2008 during the housing crisis. Our goal, in agreement with the county, is to have a fund balance that would cover three to six months of services.

Fixed Cost Sharing Proposal

Ken reviewed the Fixed Cost Sharing Proposal (please see handout for full details). Our contract with the county requires clients who can afford to do so pay a cost share for their services. This is consistent across the counties that ESP serves. The current cost share model needs to be updated as it has been in place for nearly 20 years. The goals of the revised model being proposed are to simplify the process, maintain or increase cost sharing revenue, and ensure an appropriate cost sharing amount that addresses economic hardships. All revenue from cost sharing is reinvested back into the program to provide more services. This new model has been piloted in Hamilton County for one year for new enrollments. This model is a fixed rate versus a variable rate where the client's cost share amount will be a flat predictable amount.

Randi asked if the fixed flat rate is based on a threshold or if there are tiers. Ken shared that a scale adjusted to the federal poverty level guidelines is used to determine a client's cost share, taking their income and the number of people in the household into consideration.

Janice requested a motion to approve Fixed Cost Sharing Proposal.

Motion: Janine Gage made a motion to approve the Fixed Cost Sharing Proposal.

Second: Angele Blackshear seconded the motion.

Action: The Fixed Cost Sharing Proposal was unanimously approved.

Ken added that a report will be provided one year after implementation.

Laundry Service Evaluation

Stephanie reviewed the Laundry Service Evaluation report (see handout for details). This service was launched during the pandemic when there was a shortage of aides providing home care assistance. Instead of having a home care aide go into a client's home to do their laundry, we contracted with local laundromats to pick up laundry from a client's home, launder it, and return it to the client's home. This

program continues to grow and is very well received by clients. Additionally, this program provides a cost savings as it is more cost efficient than a home care assistance aide doing the laundry in a client's home.

Randi commented that since a small sample size was used for the evaluation, it may be worth continuing to monitor the laundry service program to be sure it is representative of the greater sample.

TLRC Mid-Point Review

Ken provided an update on the TLRC Mid-Point Review (see handout for details). The Hamilton County Tax Levy Review Committee (TLRC) is a group of volunteers that is appointed by the Hamilton County Commissioners. The committee does a review of the levy when we are going on the ballot. In April 2025, the mid-point review was completed as this was halfway through the five-year levy cycle. The committee appreciated the detail that went in to this report which included projections made at the start of the levy cycle in 2022 and how these are in line with what is happening at the mid-point of the levy cycle.

Janine asked how we can increase lobbying efforts as hardships will increase for older adults who will be affected by the federal funding cuts. Ken shared that Nan Cahall, Director of Government Relations, meets with federal and state representatives and is working on this. Ken would like Nan to attend the next meeting to give an update on her work and how we can all become engaged to provide community education about how the federal funding changes will impact older adults.

Action: Nan to attend next meeting to provide an update and information on providing community education.

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 3:38 p.m.

Motion: Viola Brown 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

September 25, 2025



**Hamilton County ESP
Program and Financial Report
Quarter 2, 2025 (April - June 2025)**

Highlighted Findings

1. Traditional ESP Census Trends

- A. Compared to last year (Quarter 2, 2024), census has decreased by -835 clients (from 4,727 to 3,892) or -17.66%.
- B. Compared to last quarter (Quarter 1, 2025), census has decreased by -133 clients (from 4,025 to 3,892) or -3.30%.

* **Note:** Managed Enrollment ended for Hamilton County on July 7th, 2025.

2. Fast Track Home Census Trends

- A. Average length of stay decreased by -1 day when compared to Quarter 1, 2025) (from 56 to 55).
- B. New Enrollments decreased by -4 compared to Quarter 1, 2025 (from 410 to 406).
- C. Total clients who transferred to ESP from FTH increased by 25 clients from Quarter 1, 2025 (from 101 to 126).

3. Financials

- A. Total Revenue: The amount projected to be drawn down from the levy is \$28.7 million as of the second quarter as compared to \$28.7 million in the budget. The variance is under budget by \$2,611 or 0.0%.
- B. Total Expenses: The expenses as of the second quarter are \$29.9 million as compared to \$29.8 million in the budget. The variance is over budget by \$98,262 or 0.3%.
- C. Purchase Services: The purchased services expenses are under by \$15,506 or 0.1% as compared to budget.

Quarter-End Census by Program

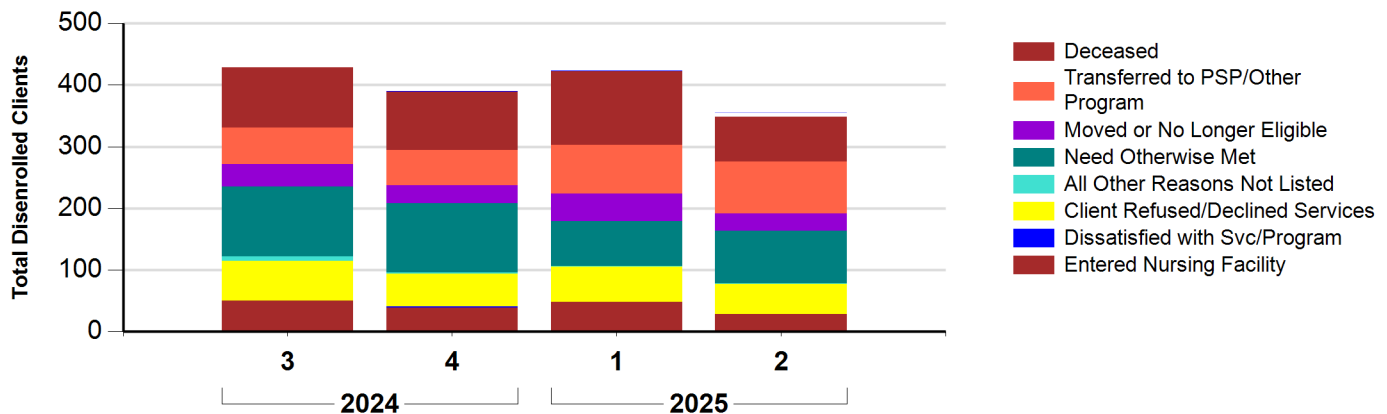
Year	2024		2025	
Quarter	3	4	1	2
ESP	4,523	4,301	4,025	3,892
FTH	249	240	260	219
Medicaid Programs	3,386	3,436	3,640	3,675
Passport	528	571	553	570
Assisted Living	123	136	139	150
Molina	1,219	1,206	1,305	1,305
Aetna	1,516	1,523	1,643	1,650

Quarter-End Census, New Enrollments, and Disenrollments

Year	2024		2025	
Quarter	3	4	1	2
Quarter-End Census	4,523	4,301	4,025	3,892
New Enrollments	226	175	136	222
Disenrollments	428	389	422	353

Disenrollment Outcomes

Year	2024		2025	
Quarter	3	4	1	2
Client Refused/Declined Services	65	53	57	49
Deceased	97	95	119	77
Dissatisfied with Svc/Program	0	2	0	0
Entered Nursing Facility	50	39	48	28
Moved or No Longer Eligible	36	29	45	29
Need Otherwise Met	113	112	73	85
Transferred to PSP/Other Program	60	57	79	84
All Other Reasons Not Listed	7	2	1	1
Total	428	389	422	353



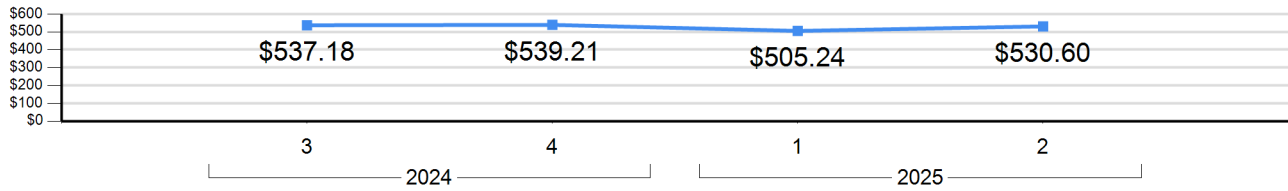


Hamilton County ESP

Quarter 2, 2025 (April - June 2025)

TRADITIONAL ESP SERVICE TRENDS

Average Monthly Cost per Client



Distinct Clients Served by Service Group¹

Year	2024		2025	
Quarter	3	4	1	2
Adult Day Service	56	51	51	53
Consumer Directed Care	447	436	405	391
Electronic Monitoring	2,238	2,118	2,084	1,975
Home Care Assistance	2,063	1,995	1,893	1,840
Home Delivered Meals	2,680	2,539	2,415	2,346
Home Medical Equipment	122	89	101	104
Home Modification	48	31	35	25
Laundry Service	131	134	122	119
Other Services	137	137	107	98
Transportation	720	689	613	625
All Services (Unduplicated)	4,588	4,374	4,152	3,974

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

Year	2024		2025	
Quarter	3	4	1	2
Adult Day Service	1,346	1,236	1,027	1,085
Consumer Directed Care	38,239	37,489	27,716	29,871
Electronic Monitoring	6,723	6,024	5,643	5,704
Home Care Assistance	75,484	75,416	68,126	68,335
Home Delivered Meals	185,213	187,966	158,426	166,107
Home Medical Equipment	174	123	137	138
Home Modification	48	32	37	30
Laundry Service	792	1,110	902	951
Other Services	1,933	1,903	1,490	1,290
Transportation	10,428	9,564	7,721	7,858

Dollars Paid by Service Group (Purchased Services)

Year	2024		2025	
Quarter	3	4	1	2
Adult Day Service	\$61,792	\$173,271	\$89,862	\$91,027
Consumer Directed Care	\$748,448	\$766,402	\$567,041	\$588,320
Electronic Monitoring	\$151,089	\$107,398	\$106,858	\$108,849
Home Care Assistance	\$1,959,565	\$2,019,376	\$1,807,691	\$1,831,998
Home Delivered Meals	\$1,676,365	\$1,721,680	\$1,450,658	\$1,515,363
Home Medical Equipment	\$45,823	\$31,539	\$32,866	\$37,250
Home Modification	\$103,252	\$42,374	\$24,530	\$51,505
Laundry Service	\$58,916	\$60,303	\$53,212	\$42,899
Other Services	\$103,432	\$112,911	\$86,103	\$70,910
Transportation	\$476,874	\$435,527	\$340,346	\$342,868
All Services	\$5,385,557	\$5,470,780	\$4,559,167	\$4,680,990

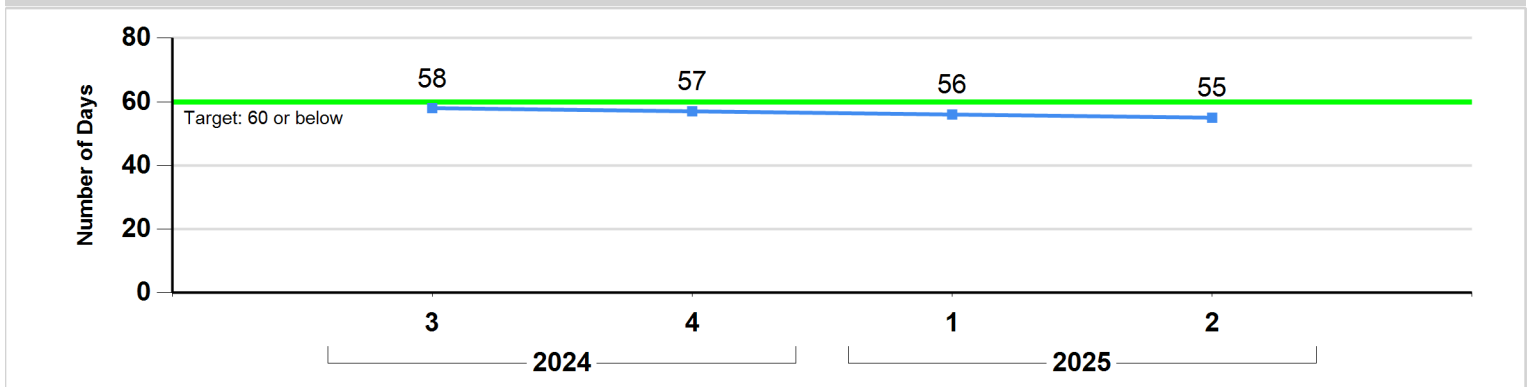
Total Clients Served, New Enrollments, Disenrollments

	2024		2025	
	Quarter 3	Quarter 4	Quarter 1	Quarter 2
New Enrollments	401	384	410	406
Disenrollments	393	389	393	453
Clients Transferred to ESP	210	151	101	126
	53.44%	38.82%	25.70%	27.81%

Enrollment by Setting

	2024		2025	
Enrollment Setting	Quarter 3	Quarter 4	Quarter 1	Quarter 2
Spousal Meals	9	8	16	9
Drake Rehab	7	5	3	3
Mercy Anderson Rehab	0	0	1	0
Community	9	3	1	4
Mercy Hospital Network	80	79	103	96
Premier Health Atrium	0	0	1	0
The Christ Hospital	43	40	35	40
TriHealth Hospital Network	78	57	79	69
University of Cincinnati Hospital Network	53	43	45	41
Veterans Admin - VA	7	5	0	5
Other Hospital	42	59	44	58
Skilled Nursing Facilities	46	45	53	43
Rehabilitation Facilities	21	31	23	33
Skilled HHC	1	1	0	0
Not Captured	5	8	6	5
Total	401	384	410	406

Average Length of Stay



Distinct Clients Served by Service Group

Year	2024		2025	
Quarter	3	4	1	2
Electronic Monitoring	130	122	131	168
Home Care Assistance	147	163	203	230
Home Delivered Meals	314	290	293	326
Home Medical Equipment	108	138	150	168
Home Modification	59	68	51	69
Independent Living	2	1	0	2
Laundry Service	26	31	13	14
Transportation	50	39	46	66
All Services (Unduplicated)	468	468	473	515

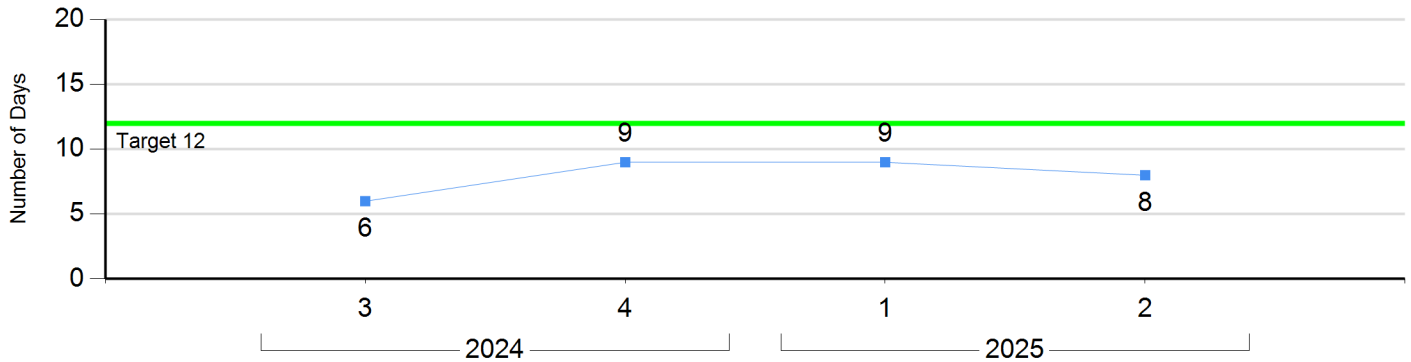
Units Billed by Service Group *Reference: Please see page 9 for unit of measure descriptions by service.*

Year	2024		2025	
Quarter	3	4	1	2
Electronic Monitoring	207	182	164	217
Home Care Assistance	1,479	1,686	2,019	2,329
Home Delivered Meals	7,561	7,522	7,653	8,225
Home Medical Equipment	197	224	284	294
Home Modification	60	71	55	75
Independent Living	6	10	0	3
Laundry Service	65	104	67	58
Transportation	273	210	220	375

Dollars Paid by Service Group (Purchased Services)

Year	2024		2025	
Quarter	3	4	1	2
Electronic Monitoring	\$4,708	\$3,453	\$3,294	\$4,448
Home Care Assistance	\$35,311	\$44,060	\$53,620	\$62,373
Home Delivered Meals	\$68,004	\$68,327	\$69,407	\$75,195
Home Medical Equipment	\$17,230	\$23,359	\$23,632	\$25,646
Home Modification	\$27,910	\$30,787	\$23,156	\$35,819
Independent Living	\$608	\$979	\$0	\$309
Laundry Service	\$3,503	\$5,298	\$3,494	\$2,996
Transportation	\$14,719	\$11,945	\$16,598	\$20,258
All Services	\$171,993	\$188,273	\$193,212	\$227,044

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	3	2,844	32	1%	77%	22%
2024	4	2,879	33	1%	79%	20%
2025	1	2,696	26	1%	78%	21%
2025	2	3,065	23	1%	81%	18%

Home Delivered Meals - Client Satisfaction Survey Results

Year	2024		2025	
Quarter	3	4	1	2
Overall Satisfaction	98.30%	98.48%	98.59%	98.68%
Good Choice of Meals Available	94.65%	96.15%	96.37%	96.46%

Medical Transportation - Client Satisfaction Survey Results

Year	2024		2025	
Quarter	3	4	1	2
Overall Satisfaction	99.78%	96.80%	98.75%	96.99%
Service Returns Client Home Promptly	100.00%	95.65%	95.00%	95.60%

Home Care Assistance - Client Satisfaction Survey Results

Year	2024		2025	
Quarter	3	4	1	2
Overall Satisfaction	96.47%	95.90%	94.77%	95.75%
Aide is Dependable	94.77%	93.15%	92.15%	94.89%

Referrals				
Year	2024	2024	2025	2025
Quarter	Q3	Q4	Q1	Q2
Number of Members Assisted	58	48	54	36
Over the Counter (OTC)	56	46	50	36

Number of Qualified Customers to Receive Service through Insurance				
Year	2024	2024	2025	2025
Quarter	Q3	Q4	Q1	Q2
Emergency Response Service	28	19	14	14
Medical Transportation (Estimated Average)	47	33	40	13

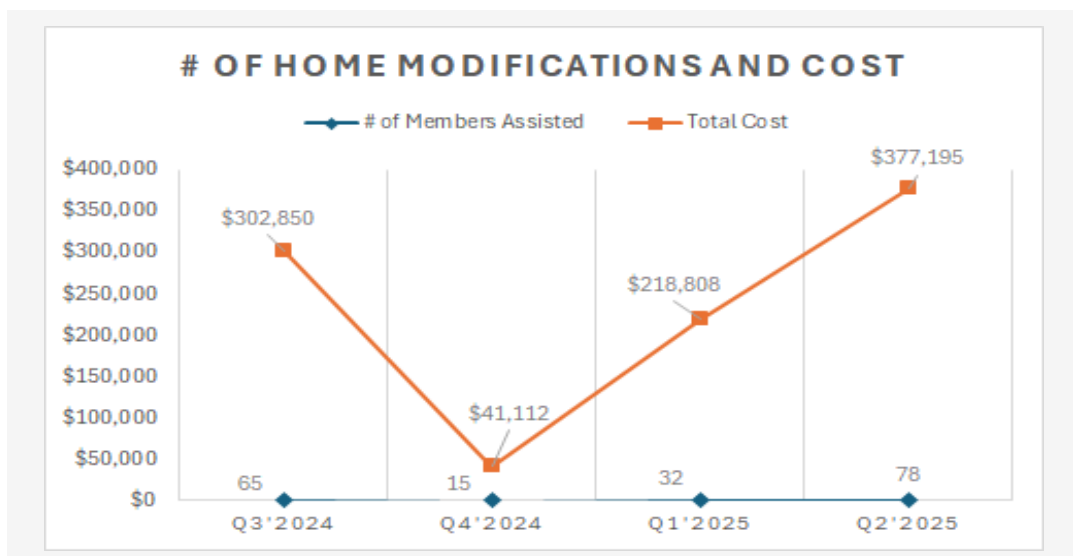
Total Cost Savings by Quarter				
Quarter _ Year	Q3_2024	Q4_2024	Q1_2025	Q2_2025
Total Cost Savings(as of qtr. end date)	\$23,109	\$16,027	\$16,718	\$11,085

Total Annual Cost Savings	2024	2025
	\$91,264	\$27,804

Steps to Stability Clients Served and Cost

Home Modification

Year	2024	2024	2025	2025
Quarter	Q3	Q4	Q1	Q2
Number of Members Assisted	65	15	32	78
Total Cost	\$302,850	\$41,112	\$218,808	\$377,195



Duke Energy - Electric and Gas Utility Credits

Year	2024	2024	2025	2025
Quarter	Q3	Q4	Q1	Q2
Number of Members Assisted	1	0	951	947
Total Cost	\$500*	\$0	\$478,000	\$469,000

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



Hamilton County ESP

Quarter 2, 2025 (April - June 2025)

Based on Actual and Projected Revenue & Expenses as of June 30, 2025

	Annual Projected	Annual Budget	Budget Variance	% Budget Variance
Revenue				
Tax Levy Appropriations	\$28,709,072	\$28,711,683	(\$2,611)	0.0%
Federal & State Funding				
Title III B - Supportive Services	\$73,824	\$0	\$73,824	
Title III C2 - Home Delivered Meals	38,104	201,826	(163,722)	-81.1%
Title III E - Caregiver Support	150,512	148,810	1,702	1.1%
Alzheimer's	19,582	15,591	3,991	25.6%
Nutrition Services Incentive Program (NSIP)	29,854	253,521	(223,667)	-88.2%
Senior Community Services	48,088	146,540	(98,452)	-67.2%
Other Federal (ARPA HC Utilities)	519,863	0	519,863	100.0%
Client Contributions				
Client Donations	2,525	3,649	(1,124)	-30.8%
Co-Pays Received	348,565	360,462	(11,896)	-3.3%
Total Revenue	\$29,939,990	\$29,842,082	97,908	0.3%
Expenses				
Operating Expenses				
Administrative	\$1,827,323	\$1,818,296	(\$9,027)	-0.5%
Intake & Assessment	239,214	208,960	(30,254)	-14.5%
Fast Track Home Case Management	1,376,692	1,446,187	69,495	4.8%
Case Management	4,284,216	4,140,234	(143,982)	-3.5%
Total Operating Expenses	\$7,727,446	\$7,613,677	(\$113,769)	-1.5%
Purchased Services				
Home Care Assistance	\$7,515,247	\$7,198,839	(\$316,409)	-4.4%
Respite Services	49,861	50,000	139	0.3%
Consumer Directed Care	2,326,993	2,637,953	310,960	11.8%
Laundry Service	212,053	234,367	22,314	9.5%
Independent Living	256,014	260,928	4,914	1.9%
Minor Home Modifications	249,999	454,228	204,229	45.0%
Pest Control	10,642	38,753	28,111	72.5%
Major House Cleaning	9,550	70,911	61,361	86.5%
Home Medical Equipment	236,779	267,233	30,454	11.4%
Emergency Response Systems	442,916	450,985	8,069	1.8%
Home Delivered Meals	6,338,184	6,620,197	282,012	4.3%
Adult Day Service	451,346	502,302	50,956	10.1%
Behavioral Health Services	0	0	0	0%
Adult Day Transportation	87,581	125,349	37,768	30.1%
Medical Transportation	1,101,135	1,333,517	232,028	17.4%
Non-Medical Transportation	329,923	408,384	78,461	19.2%
ARPA Hamilton County Utility Program	519,863	0	(519,863)	-100.0%
Transportation Coordination	274,459	274,459	0	0.0%
Steps to Stability(Utilities HM Program)	1,500,000	1,000,000	(500,000)	-50.0%
Senior Homeless Medical	300,000	250,000	(50,000)	-20.0%
Guardian Gap Program	0	50,000	50,000	100.0%
Gross Purchased Services	\$22,212,545	\$22,228,405	\$15,506	0.1%
Gross Program Expenses	\$29,939,990	\$29,842,082	(\$98,262)	-0.3%
Client Census	4,238 *	4,479	241	5.4%
Cost of Services per Client	383.77	394.99	11.22	2.8%

* 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

September 2025

Adult Day Services (ADS)

Vebcom is a new ADS ESP Provider, providing both Intensive and Enhanced Adult Day services as well as transportation to clients residing in Hamilton County.

- Facility located in Butler County at: 7161 Dixie Highway Fairfield Ohio 45014

Electronic Monitoring Systems (EMS)

No change since last report

Environmental Services

A PASSPORT certified pest control provider, Go2-Pros Pest Control has been identified as an additional agency to procure for ESP Environmental Services. Go2-Pros is currently undergoing precertification for pest control and chore services.

Independent Living Assistance (ILA)

No change since last report

Home Care Assistance (HCA)

No change since last report

home52 Transportation

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

The request to extend the rates for home52 providers has been made. The new rate structure will be from 10/1/25 through 9/30/26. The home52 providers will submit a bid rate sheet to cover this time.

Home Delivered Meals (HDM)

No change since last report

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.

As of 8/22/25 Janz Medical Supply remains on hold as they have not yet submitted requested documentation for their annual Structural Compliance Review (SCR). Several communications have been made to Janz from COA's Provider Services. They will remain on hold until evidence of compliance with the SCR is received, or further steps are determined.

Medical Recovery and Extended Care Services (MRECS) RFP

Center for Respite Care, Inc. was contracted for MRECS services effective 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)

No change since last report

Senior Farmers Market Nutrition Program

Benefits continue to be redeemed for the 2025 SFMNP. To date, Hamilton County residents have redeemed over \$8,000 in benefits at 8 different market locations throughout Hamilton County. Applications can still be completed until September 30th and benefits are available to be redeemed through November 30th.

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	January-25
Hillebrand Home Health	Annual	August-25
Home Care by Blackstone - Assisted Care by Blackstone	Annual	February-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 Mullaney'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	January-25
Up and Walk Transportation	Annual	June-25
Wesley/Meals on Wheels of Southwest OH & Northern KY	Annual	March-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.

Services with a capacity problem:

The following services have been identified as having a capacity problem. Per Section 4 (a) of our contract, COA is requesting a waiver of competitive bidding requirements so that we can recruit new providers for the following services:

1. Home Care Assistance
2. Environmental Services
3. Minor Home Modifications & Repairs
4. Adult Day Services

Hamilton County Elderly Services Program
Draft Budget
January 1, 2026 - December 31, 2026

			<u>% Change</u>		
	<u>2026 Proposed</u>	<u>2025 Budget</u>	<u>2025</u>	<u>2026 Budget</u>	<u>2026 Budget</u>
	<u>Budget</u>		<u>Projected</u>	<u>to 2025</u>	<u>to 2025</u>
				<u>Projected</u>	<u>Budget</u>
Revenue					
Hamilton County Levy					
Levy Appropriations	30,468,263	28,711,683	29,262,725.61	4.1%	6.1%
Total County Levy Funding	<u>30,468,263</u>	<u>28,711,683</u>	<u>29,262,726</u>	<u>4.1%</u>	<u>6.1%</u>
Client Cost-share	417,191	360,462	348,565	19.7%	15.7%
Client Donations	2,909	3,649	2,525	15.2%	-20.3%
 Title III and State Funding	 939,282	 766,289	 879,828	 6.8%	 22.6%
Total Title III and State Funding	<u>939,282</u>	<u>766,289</u>	<u>879,828</u>	<u>6.8%</u>	<u>12.9%</u>
Interest Income	-	-	-		
Total Revenue	31,827,645.60	\$ 29,842,082	30,493,644	4.4%	6.7%
Expenses					
Client Services					
Intake & Assessment	405,843	\$ 208,960	\$ 239,214	69.7%	94.2%
Transportation Coordination	282,693	\$ 274,459	\$ 274,459	3.0%	3.0%
FTH Case Management	1,474,500	\$ 1,446,187	\$ 1,376,692	7.1%	2.0%
Care Management	4,663,209	\$ 4,140,234	\$ 4,284,216	8.8%	12.6%
Provider Services	21,610,250	\$ 20,653,946	\$ 20,138,086	7.3%	4.6%
Steps to Stability	1,151,670	\$ 1,000,000	\$ 1,500,000	-23.2%	15.2%
Senior Homeless Medical	250,000	\$ 250,000	\$ 300,000	-16.7%	0.0%
Guardianship Gap Program	50,000	50,000	-		0.0%
Total Client Services	<u>29,888,165</u>	<u>28,023,786</u>	<u>28,632,530</u>	<u>4.4%</u>	<u>6.7%</u>
COA Administration	<u>1,939,481</u>	<u>1,818,296</u>	<u>1,861,114</u>	<u>4.2%</u>	<u>6.7%</u>
Total Expenses	31,827,645.60	\$ 29,842,082	\$ 30,493,644	4.4%	6.7%

Average Daily Census for 2026 is projected to increase by 8.5% from 2025 year end Projections



Council on Aging of Southwestern Ohio
4601 Malsbary Rd
Blue Ash, Ohio 45242
(513) 721-1025
(800) 252-0155
www.help4seniors.org

Draft Budget Highlights
For the Hamilton County Elderly Services Program
For the Program Year January 1, 2026 – December 31, 2026

Budget Highlights:

With managed enrollment lifted as of July 2025, the 2026 budget reflects growth and expansion of services to meet the needs of older adults. The budget represents an increase in tax levy appropriations of \$1,756,191 (6.1%) and an increase in census to 4,598 clients by the end of the year. We are budgeting to serve 8,402 clients in 2026, which is an increase of 908 (or 12.1%) clients compared to 2025. Intake and assessment staff have been fully allocated to focus on the increased needs to support census growth, which has resulted in 69.7% increase budget as compared to projections.

Client Census:

- Program year 2025 – with managed enrollment ending in July of 2025, we are projecting to end the program year with a census of 4,238 clients served (Fast Track 255 clients and Traditional ESP 3,983 clients). This represents a net decrease in growth of 303 clients (or 6.7%) compared to program year 2024. We estimate the total number of clients served during the year to be 7,494.
- Program year 2026 – We are expecting to end the year with an increased census of 4,598, as the program grows meeting the needs of older adults in the county. This represents a net increase in growth of 360 clients (or 8.5%). The total number of clients served during the year is estimated to be 8,402.

Tax Levy Revenue:

- The amount of Tax levy money needed in 2026 is \$30.5 million, which is an increase of \$1.8 million or 6.1% when compared to 2025 projected spending.

Client Cost-share:

- The updated cost-share model that has been piloted in Hamilton County since 2024 will be fully implemented effective October 2025. As a result of the new cost-share model, combined with census growth, we are budgeting \$417,191, which is \$68,626 (or 19.7%) higher than our current projection of \$348,565 for 2025.

Client Donations:

- Donations are collected for home delivered meals. Donations are budgeted to be \$2,909 in 2026. This is an increase of \$384 from 2025 projections.

Title III and State Funding:

- Traditional Title III Funding is expected to remain at last year's award amounts. In 2025 funding was impacted by the need for additional one-time funding in 2024. This funding was needed to support the continued growth that was happening as managed enrollment was beginning. In 2026 we are budgeting additional one-time funding to support growth in the program. In 2025 we also received \$519,863 in ARPA funding from Hamilton County for utility assistance program. We are expecting a reduction of \$2,027 in Alzheimer's funding in 2026. Overall, the total Title III and State Funding budgeted for 2026 is increasing by 59,454 (or 6.8%) as compared to the current 2025 projection.

Provider Services:

- The budget for provider services assumes no change to the current service package. The 2026 budget shows an increase of 7.3% or \$1.5 million dollars when compared to current spending projections. We do have a rate increase scheduled in the final year of our home care assistance contract. It will be going out to bid in the spring of 2026.

Intake & Assessment:

- Spending is projected to grow to \$405,843 in 2026, which is an increase of \$166,628 (or 69.7%) from 2025 projected spending. This increase reflects staffing changes required to support the growth in census and the return to open enrollment.

Transportation Coordination:

- Transportation Coordination is budgeted at \$282,693 in 2026, which is an increase of \$8,234 (3.0%) from 2025 projected spending.

Case Management:

- The budgeted amount reflects the staffing needs based on the number of clients in the program.

Guardianship Gap Program:

- This is funding for older adults in Hamilton County who do not have the capacity to make their own decisions, and do not have a family member to be their power of attorney. This program will work with other agencies in the county to help find and provide guardianship to older adults in need. Services for this program were originally budgeted to begin in 2025 but were delayed and will begin on January 1, 2026.

Steps to Stability:

- Steps to Stability aims to address short-term needs of older adults. In 2026, we are budgeting to provide home modification and utility assistance to older adults in Hamilton County. This service is budgeted to be \$1.2 million in 2026.

COA Administration:

- Budget amount is based on a 6.5% rate in our contract with Hamilton County and is based on all services except the Guardianship Gap Program.

Hamilton County Elderly Services Levy
Medical Recovery and Extended Care Services

CONDITIONS OF PARTICIPATION
&
SERVICE SPECIFICATIONS

EFFECTIVE: July 1, 2025
Hamilton County

MEDICAL RECOVERY AND EXTENDED CARE SERVICES
Hamilton County Elderly Services Levy
CONDITIONS of PARTICIPATION and SERVICE SPECIFICATIONS

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**MEDICAL RECOVERY AND EXTENDED CARE SERVICE (MRECS)
CONDITIONS OF PARTICIPATION**

CONDITION 1: Provider Qualifications

- 1.1. The Provider must comply with all Conditions of Participation, the Elderly Service levy Agreement, relevant Service Specification(s), monitoring and reporting requirements, billing requirements, and show evidence of whether the provider furnishes services directly or by sub-contracting the services. (Providers having multiple services, one of which is considered to be of the highest advanced level, will be held to the highest COP requirements.)
- 1.2. The Provider must be a formally organized business or service agency, registered in good standing with the Ohio Secretary of State.
- 1.3. The Provider must have a physical facility located in Hamilton County from which to conduct business. COA must be notified of any change in location prior to the relocation.
- 1.4. The Provider must designate and utilize a locked storage space for the maintenance of client and employee records and have a process to backup computer files including electronic verification.
- 1.5. The Provider shall not allow a staff person or volunteer to furnish a service to a client if the person is the client's spouse, parent, stepparent, legal guardian, power of attorney, or authorized representative.
- 1.6. The Provider must provide supervision to any volunteer.
- 1.7. The provider, if terminating, being purchased by or merging with another entity, must furnish written notice to COA at least ninety (90) days prior to action. The Provider must supply COA with the communication to be shared with clients and receive authorization from COA of the content, prior to informing clients.

CONDITION 2. REPORTING

- 2.1. The Provider must notify the assigned care manager, and when there is not a care manager, the COA Provider Services manager within twenty-four (24) hours of becoming aware of an incident, which includes but is not limited to, any event that may result in harm to property or person.
- 2.2. A major unusual incident (MUI) is any alleged, or actual occurrence of an incident/event that could adversely affect the health or safety of a client, the credibility of Provider's staff or organization, or any incident in which COA or Provider may have liability. MUIs include but are not limited to: abuse; neglect; suspicious accident; death from abuse, neglect, serious injury, or any reason other than natural causes; criminal or suspected criminal acts; a police, court/legal, or public complaint which has the potential to be reported to the media or elected officials or any in

which COA or Provider may have liability; lawsuit or potential lawsuit. In case of an MUI, and at any time the provider must report an incident to a licensure board, they are to notify COA's Provider Services manager or their designee.

- 2.3. If contacted by the news media regarding a major unusual incident, the Provider is not to respond to the media inquiry but must contact COA's Communication Director by phone or email within one (1) hour.
- 2.4. The Provider must report any suspicion of abuse, neglect, and/or exploitation to the Hamilton County Adult Protective Services according to section 5101.61 of the Ohio Revised Code and to COA's Provider Services manager or their designee.
- 2.5. The Provider must notify COA's Provider Service manager or their designee of any interruption in service to all or to a significant number of clients served by the Provider.
- 2.6. The Provider must furnish the names of all entities with 5% or more ownership of the agency.
- 2.7. The Provider must coordinate any community outreach activities including those involving the news media with COA's Communication Director prior to planning such activities. Outreach is defined as activities or services that specify or highlight COA.

CONDITION 3: DOCUMENTATION

- 3.1 Provider shall have written documents which support their operation of business and for which they abide by and address the following areas:
 - 3.1.1 Statement defining the purpose of its business or service agency.
 - 3.1.2 Entities with a governing board must have written bylaws; and, if the provider is incorporated, the provider must have articles of incorporation.
 - 3.1.3 Written table of organization which clearly identifies lines of administrative, advisory, contractual, and supervisory authority and responsibility to the direct care level.
 - 3.1.4 Follow-up and investigation of client complaints and grievances.
 - 3.1.5 Written process for use of a Client Release of Information form to release client specific information to sources outside of their system.
 - 3.1.6 Written procedure for documenting an escalation of client incidents including reporting timelines.
 - 3.1.7 Confidentiality policy aligned to HIPAA regulations
 - 3.1.8 Written statement supporting compliance with 45 C.F.R. 80.4 (October 2024 edition) regarding the provision of goods and services. No person in the United States shall; on the grounds of

race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity receiving federal financial assistance from the Department of Health and Human Services.

3.1.9 Written statement supporting compliance with the "Equal Employment Opportunity Act of 1972 " federal wage-and-hour laws, and workers' compensation laws regarding the recruitment and employment of people.

3.1.10 Provider shall furnish COA's Provider Services Department annually with the following:

3.1.10.1 Certificate of Insurance evidencing the required coverage.

3.1.10.2 Statement Provider has paid all applicable federal, state, and local income and employment taxes.

CONDITION 4. BILLING

4.1 The Provider must bill using a format established and approved by COA for the units of service authorized and delivered.

4.2 The Provider must agree to accept reimbursement for service(s) authorized at the rate agreed upon with COA.

4.3 The Provider must maintain dated documentation to support services delivered and billed.

4.4 The Provider may not bill or solicit a donation from any client for authorized service(s) delivered.

**MEDICAL RECOVERY AND EXTENDED CARE SERVICE (MRECS)
SERVICE SPECIFICATIONS**

1.0 OBJECTIVE

- 1.1 Medical Recovery and Extended Care Services (MRECS) is a community-based service, is designed to provide comprehensive medical recovery, extended care services and shelter-based care management for the homeless population, 60+ years old, residing in Hamilton County.
- 1.2 Care is provided in structured, comprehensive and continually supervised components that are provided in a protective setting and delivered based on individualized care plans.

2.0 CLIENT ELIGIBILITY

- 2.1 Clients who are eligible for MRECS must be:
 - a. Age sixty (60) or older and is a resident of Hamilton County who is:
 - i. Experiencing homelessness and,
 - ii. Experiencing an acute diagnosis or exacerbation of a chronic diagnosis.
 - b. The individual must be ambulatory, independent with activities of daily living and be continent.
 - c. The individual must not be a registered sex offender.
 - d. An individual's age and/or residency is determined using one of the following:
 - i. Drivers' license, state ID or vehicle registration
 - ii. Voter registration
 - iii. Rent receipts for rent paid within sixty (60) days of when the services are rendered
 - iv. Mortgage book
 - v. Utility bill, credit card bill or bank statement
 - vi. Confirmation of address if a home visit is made by the provider
 - vii. Copy of most recent Hamilton County Property Tax Bill
 - viii. Letter from management, mortgage company or person providing the client with shelter, including homeless shelters
 - ix. Credit report
 - x. Other documentation establishing residency reasonably acceptable to the county

3.0 UNITS OF SERVICE

- 3.1 A unit of service is an overnight bed stay.

- 3.2 A unit of service must include, but is not limited to, facility operating expenses, administrative costs, meals/snacks, materials, supplies and labor expenses.

4.0 BILLING

- 4.1 Provider shall bill via invoice by the 15th of the month after the month of provided service and email invoice to: COA_AP_Invoices@help4seniors.org.

- 4.2 Invoice will outline the following:

- a. ~~Total number of overnight bed stays~~Direct Case Management Services
- b. ~~Direct Medical Services and Programming~~
- c. ~~Personnel Costs for Services~~
- d. ~~Non-Personnel Costs for Care~~
- e. ~~Facility Operating Expenses~~
- f. ~~Indirect costs for Program Administration~~
- g. ~~A Total number of 24-hour stays provided~~
- h. ~~A total number of 24-hour stays provided to Hamilton County Senior Residents.~~
- i. ~~Hamilton County Services Senior Percentage~~

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- 4.3 The Provider must maintain a detailed census.

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5.0 SERVICE REQUIREMENTS

- 5.1 Medical Screening/Assessment: The Provider is required to obtain client medical records from the referral source, or through records release if client is a walk-in. Additional medical screens may be determined as necessary based on the medical records review and may include:

- a. Medical evaluations
- b. Appropriate lab testing
- c. Medication administration
- d. Nursing care
- e. Health education
- f. Coordination of medical service
- g. Coordination of mental health and substance abuse services.

- 5.2 Extended Care services will be provided for eligible individuals which will include:

- a. A bed
- b. Access to showers
- c. Access to laundry facilities
- d. Three meals per day
- e. Socialization opportunities
- f. Clothing as needed
- g. Transportation to appointments as needed.

- 5.3 Case Management services for each individual, to include but not be limited to:

- a. Individualized client centered care planning
- b. Collaboration with client in the planning and coordination of services and appointments with appropriate medical professionals and agencies
- c. Develop a formal plan of transition with a focus on self-sufficiency and permanent housing
- d. Monitor individual stays at the facility and provide intervention as needs are identified.

6.0 FACILITY REQUIREMENTS

- 6.1 The facility and the Provider's main office must be located within Hamilton County, Ohio.
- 6.2 The Provider must assure the facility is locked to outsiders and those that walk-in for service evaluation can only access the guest welcome area.
- 6.3 The Provider shall provide common areas accessible to the individual, including dining area (or areas) and an activity center (or centers). A multi-purpose common area may serve as both a dining area and an activity center.
- 6.4 The facility must have at least one (1) toilet for every ten (10) clients present that it serves and at least one (1) wheelchair-accessible toilet.
- 6.5 The Provider must store clients' medications in a locked area that maintains the temperature requirements of the medications.
- 6.6 The Provider must store toxic substances in an area that is inaccessible to the clients.
- 6.7 The facility must comply with the ADA Accessibility Guidelines for Buildings and Facilities in appendix A to 28 C.F.R. Part 36.
- 6.8 The facility must have appropriate licensure through the state of Ohio Department of Health.

7.0 NUTRITION REQUIREMENTS

- 7.1 The Provider shall provide education to clients on healthy choices to support clients in making appropriate food choices when purchasing food.
- 7.2 The Provider shall ensure meals/snacks are available.
- 7.3 The Provider shall allow individuals access to the kitchenette and to communal food for personal consumption.
- 7.4 The Provider shall allow personal storage and access for client bought food items for personal consumption.

8.0 STAFFING REQUIREMENTS

- 8.1 At least two staff must be present in the facility when one (1) or more clients are in attendance. At least one (1) of the two (2) staff must be paid as direct care staff and at least one (1) staff person's present must be certified in CPR.
- 8.2 The staff to client ratio must be at least one (1) staff to ten (10) clients at all times.
- 8.3 The Provider shall have an LPN, under the direction of a Physician, present or on-call when off site.
- 8.4 The Provider shall have a Physician on call 24 hours a day, seven days a week.
- 8.5 The Provider will assist clients as needed, with referrals for diagnosis and treatment of mental health and substance abuse disorders.
- 8.6 The Provider will have a trained individual to oversee medication support for the client to gain an understanding of their medication and medication regimen, aiding in client independence with their medication compliance.
- 8.7 The Provider shall contract or employ a licensed healthcare professional whose scope of practice includes health assessments. to assess and create all medical plans.

9.0 CLIENT SERVICE MANAGEMENT

- 9.1 The Provider must initiate an initial intake assessment of the client within the first two (2) days of attendance and complete the assessment within thirty (30) calendar days.
- 9.2 The initial intake assessment must include the following components:
 - a. A health assessment completed for each client within two (2) calendar days of first attendance, conducted by a licensed healthcare professional whose scope of practice includes health assessments. The health assessment must identify the client's risk factors, diet, medications, and the professional's name and phone number.
 - b. A Psychosocial assessment completed for each client within five (5) calendar days of first attendance, conducted by a licensed professional whose scope of practice includes psychosocial assessments. The assessment must identify the clients' risk factors, medications and the professional's name and phone number.
 - c. A substance abuse assessment for each client within seven (7) calendar days, when identified as necessary from the health assessment. The substance abuse assessment must be completed by a licensed professional whose scope of

practice includes substance abuse. The assessment must identify the client's risk factors and the professional's name and phone number.

- 9.3 A care plan must be developed by a licensed healthcare professional whose scope of practice includes health assessments for each client within the client's first fourteen (14) calendar days of attendance. The care plan must document the following elements:
- a. Interests, preferences and social rehabilitation needs;
 - b. Health needs.
 - c. Specific goals, objectives and planned interventions to meet the identified goals; and
 - d. A description of the client and/or caregiver involvement in development of the care plan.
- 9.4 The Provider must obtain the care plan at least every ninety (90) days for each client that receives medications/treatments, nursing services.

10.0 PERSONNEL QUALIFICATIONS

- 10.1 The Provider must document and retain evidence that staff possess the following qualifications:
- a. Appropriate, current and valid licensure for staff positions requiring licensure.
 - b. Each personal care aide must meet at least one of the following training or certification requirements prior to client contact:
 - i. Possess a high school diploma or high school equivalency diploma;
 - ii. Be listed on the Ohio Department of Health's Nurse Aide Registry;
 - iii. Successfully complete the Nurse Aide Competency Evaluation Program conducted by the Ohio Department of Health under Section 3721.31 of the Revised Code;
 - iv. At least two years of employment in a supervised position to furnish personal care, to furnish activities, or to assist with activities; or
 - v. The successful completion of a vocational program in a health or human services field.
- 10.2 Provider will conduct free database reviews and BCII criminal records check for all staff, applicants and existing employees, including administration positions: Executive Director, Program Administrator, Accounting officer, or any other officer responsible for major decisions and/or the financial obligations for the provider. Refer to ESP Free Database Reviews and BCII Criminal Records Check document on

COA website.

- 10.3 Every employee shall have a personnel file which includes, but is not limited to:

10.3.1 A resume or application outlining work history and training.

10.3.2 Written job description

10.3.3 Documentation signed and dated by staff member indicating receipt of an employee handbook.

10.3.4 Documentation signed and dated by staff member indicating completion of orientation prior to providing service to MRECS clients. The Provider must ensure orientation includes:

10.3.4.1 Employee position description and expectations.

10.3.4.2 Agency personnel policies.

10.3.4.3 Reporting procedures and policies, with timelines.

10.3.4.4 Agency table of organization.

10.3.4.5 Lines of communication.

10.3.4.6 MRECS Code of Ethics.

10.3.5 Evidence of performance appraisals per agency policy, signed and dated by the staff member.

- 10.4 The Provider must have signed a current contract with any agency or individual with whom they subcontract to provide direct care services to MRECS clients. The Provider must incorporate requirements identified in the COA Provider Agreement (Agreement) with COA as part of any subcontract.

- 10.5 The Provider must, upon request of COA, furnish evidence that all subcontractors and their employees who provide services to individuals 60+ and are billing the elderly service levy meet applicable personnel requirements.

- 10.6 Outlined volunteer responsibilities provided to the volunteer.

11.0 DIRECT-CARE STAFF TRAINING:

- 11.1 The Provider must provide orientation to all direct care staff prior to the staff member furnishing any service. The Provider shall train the staff members on:

- a. Expectation of employees;
- b. The employee code of ethics;
- c. An overview of personnel policies;

- d. Incident reporting procedures;
 - e. Agency organization and lines of communication;
 - f. Task based training; and
 - g. Universal precautions for infection control procedures.
- 11.2 Licensed staff will remain in compliance with all licensure requirements.
- 11.3 The Provider must retain records showing compliance with staff orientation and in-service/continuing education requirements. The documentation must include:
- a. The instructor's name, title, qualifications, and signature;
 - b. The date and time of instruction;
 - c. The content of the instruction; and
 - d. The name and signature of the direct care staff member completing the training.