

**ElderSource**  
**Planning and Programs Committee Agenda**  
**December 16, 2021**  
**11:00 AM**

- I. Old Business
  - A. Minutes
    - October 21, 2021
  - B. ElderSource Programs
    - Programs Report
    - ADRC Report
- II. New Business
- III. Old Business

**Programs Committee Minutes**  
**10688 Old St Augustine Rd**  
**Thursday October 21, 2021**  
**11:00 AM**  
**Via Zoom**

**Present**

Dr. Sandy Robinson - Chair  
Darryl Banks  
Grady Williams  
Ray Parkhurst  
Vivile Dietrich

**Staff**

Nancy Tufts, VP of Planning and Programs  
Linda Levin, CEO  
James Lee, CFO  
Janet Dickinson, Planner  
Terika Scatliffe, Senior Contracts Manager  
Sherry Holmes, Administrative Assistant

**Absent**

Barbara Greene (Excused)  
Dr. Lauri Wright (Excused)  
Joseph Francis-Zimmerman  
Travis Williams-Board Fellow

**Meeting Called to Order**

Dr. Sandy Robinson called the meeting to order at 11:05 AM.

**Approval of Minutes**

A motion to approve the August 19, 2021 minutes was made by Ray Parkhurst and seconded by Vivile Dietrich. Motion was unanimously approved.

**American Rescue Plan Act (ARPA)**

Linda Levin, CEO explained that this Plan provides for three years of funding and may go beyond that time frame. Administration for Community Living (ACL) is the Federal agency overseeing the funding. The Area Agencies on Aging (AAA) and Providers in the state were asked to think of this funding as an investment, looking at technology and services, in a creative way. ARPA funding allocations were provided to the Committee.

**Motion**

A motion to accept the American Rescue Plan Act (ARPA) proposal as presented by staff was made by Ray Parkhurst and seconded by Daryl Banks. Motion passed unanimously.

*Older Americans Act (OAA) 2020 Unit Rates*

Nancy discussed the unit rate negotiations process with the committee. Based on the information provided in the meeting packet and the review done through the Contract Management Team, staff is recommending that each of the unit rates be approved for 2020 Older Americans Act.

There was discussion on whether the rates were within the allowable standard and nothing unusual showing. Nancy informed the committee that all the unit rates were justifiable and there is documentation to show in the event the Department of Elder Affairs (DOEA) has questions.

### **Motion**

A motion to accept the unit rate change proposal as presented by staff for the Older Americans Act (OAA) 2020 was made by Grady Williams and seconded by Ray Parkhurst. Motion passed unanimously.

### *Needs Assessment Proposal*

Nancy highlighted the proposal differences with UNF and HPCNEF. Overall there were concerns that UNF's process of having the Review Board look at everything would possibly delay the project from being finished within our time frame. Also, there would be a lot of staff involvement. HPCNEF had a number of positive offerings: multiple final reports, workshop based on final results, using same map process as the study they did for the hospitals, \$50 thousand reduction of fee by removing the regional survey and extension of the time period to May. There was a lot of discussion regarding the Elder Services Needs Assessment and the committee chose the HPCNEF proposal. James Lee told the committee that we will pay for the Needs Assessment out of the ARPA Administrative dollars. This is budgeted for 2022.

### **Motion**

A motion to accept the Health Planning Council (HPCNEF) revised proposal of \$91,925 as presented was made by Grady Williams and seconded by Ray Parkhurst. Motion passed unanimously.

### *2022 Older American Act (OAA) Allocations*

Nancy told the committee that we receive the Older Americans Act allocation from the Department of Elder Affairs (DOEA). She presented the allocations that will be distributed by formula to each of the providers. Dr. Robinson clarified for the committee that ElderSource does not make the decision as to what amount of funding is to be distributed but distributes funding according to our formula.

### **Motion**

A motion to accept the 2022 Older Americans Act allocations by formula was made by Grady Williams and seconded by Ray Parkhurst. Motion passed unanimously.

### **State General Revenue (SGR)**

Nancy Tufts, VP of Planning and Programs, briefly reviewed the programs dashboard with committee.

### **Surplus Deficit**

Nancy reported that we are expecting some deficits in our meals programs due to an increase in clients, as a result of COVID. The Providers are having difficulty in being able to decrease the amount of clients that are receiving meals at this point. ElderSource staff continue to work with Providers on plans to address the potential deficit.

Nancy briefly reviewed the remainder of the report. She guided the committee to the Veterans Directed Home Care Based Services (VDHCBS) Program (page 44) of the document. She noted that there are 18 Veterans in process and 68 active Veterans. Compared with last year there were 58 Veterans active and 3 Veterans in process. Nancy is very proud of the results with this program.

### **ADRC Report**

Nancy reviewed the report with the committee in Renee Knight's absence. The report detailed information on the following:

- Helpline
- Intake & Screening Team
- Medicaid Eligibility Team
- SHINE/SMP/MIPPA

There was no further business for discussion and the meeting was adjourned.

**Meeting Adjourned at 11:55 AM**

**Minutes prepared by Sherry Holmes, Administrative Assistant**

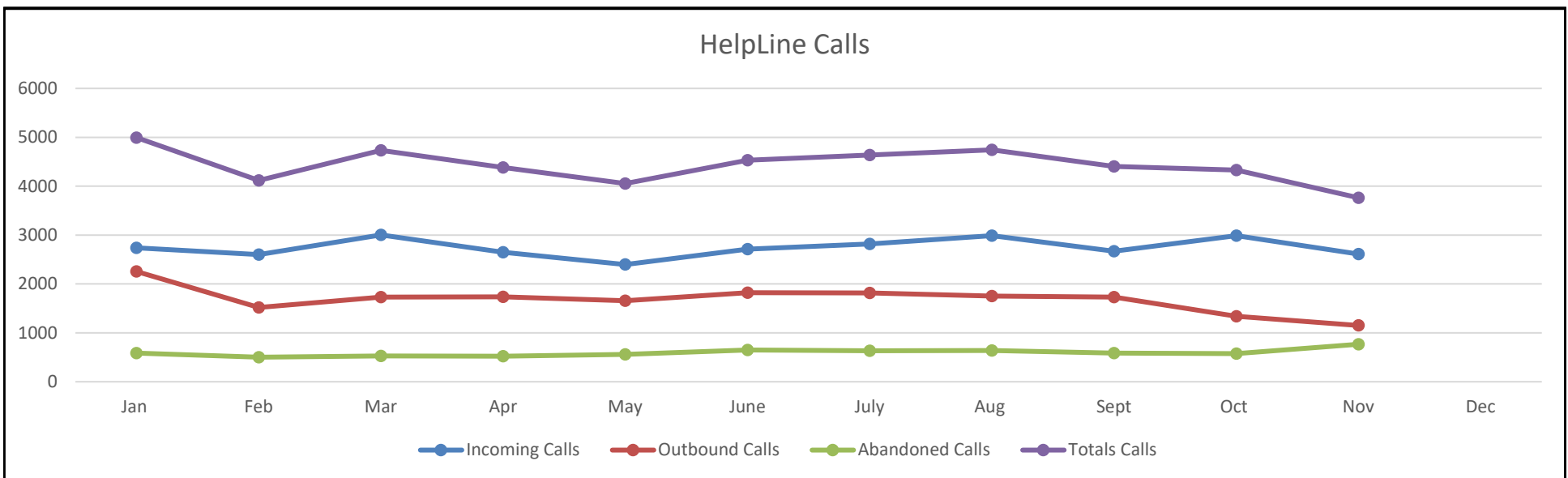
### No Wrong Door

The purpose of this program is for ElderSource to review and assess functions, services and activities for unmet needs and a growing demand for new needs due to COVID-19. These funds are used for targeting and addressing needs due to COVID-19.

Project Name	Name and Description of Project or Activity
GetSetUp	Currently 48 socially isolated seniors and/or adults with disabilities have been provided 7 months access to the GetSetUp virtual platform for unlimited classes.
Uniper	Currently 274 seniors with limited interactions outside of their homes due to COVID have been enrolled to continue to provide stimulation during this time.
Phone System	During COVID, staff have been working remotely, and will continue to work remotely. A new communication system has been purchased and is currently in operation. With staff working remotely, this new phone system has assisted with smoother interactions between us and other PSAs across the state as we continue to combat the pandemic.
Internet/Mifis	Connectivity has been challenging for some staff while working remotely. Staff continue to use Mifis as needed for those individuals with low bandwidth.
Chat	The Chat functionality is available during ADRC Helpline hours through the ElderSource website.
Volunteer Database	This grant will pay for the development of a customized database for volunteer programs.
COVID Vaccination Call Downs	A postcard is being sent out to individuals who are on a wait list for services advising them to contact their local health department or Emergency Operations Center for information on the vaccine. Homebound individuals are encouraged to contact ElderSource so that their information can be provided to the state to assist with planning for homebound vaccinations.

The ADRC HelpLine The Aging and Disability Resource Center (ADRC) HelpLine is the place to start for help if you are a senior, an adult living with a disability or a caregiver. ElderSource Customer Service Specialists are available to listen to client concerns and are trained to help them access local agencies, services and programs. They work with the clients to explain what resources are available, provide information about Medicaid programs for elders and adults with disabilities. The HelpLine processes the referrals for the assessments, schedules the assessment appointments and makes appointment reminder calls the day before the appointment. In addition, the HelpLine processes referrals for the SHINE program.

**Monthly Analysis:** November 2021 - The HelpLine is fully staffed. The call volumes remain very close to the previous months. The HelpLine made 703 referral/appointments for screenings. Hospitals, home health agencies and other community partners are back in service and making referrals. November was Medicare Open Enrollment Period (OEP) and SHINE referrals for November was 313 which is higher than the September 178. The November number of APS referrals for screening was 8.



1 \* ElderSouce changed phone systems in February 2021 with changes to the reports.

Calls Answered  
4,530

InBound Calls  
2,612

OutBound Calls  
1,151

Call Wait Time  
1:20

Abandonment  
17%

Voicemails  
536

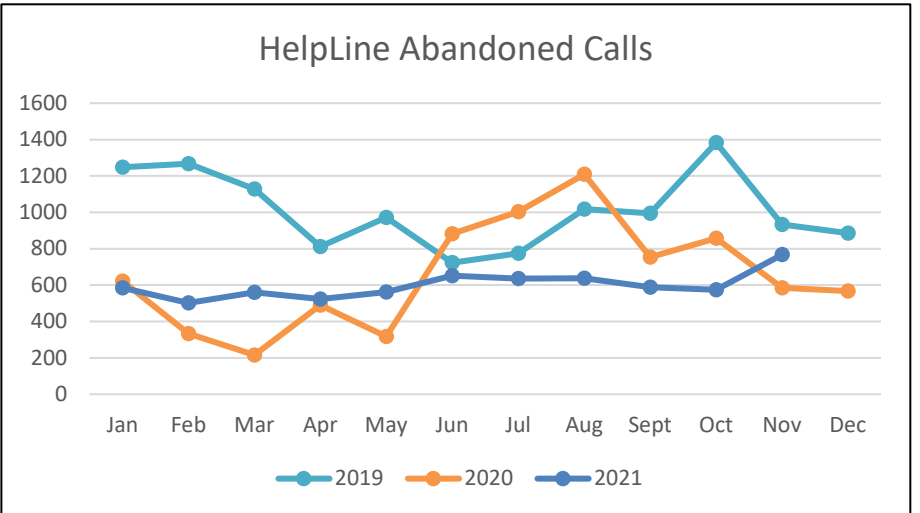
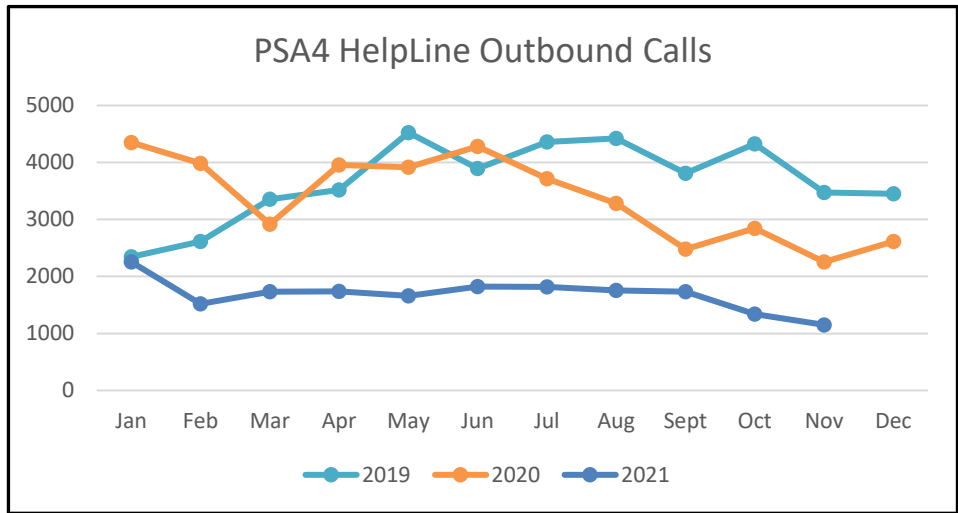
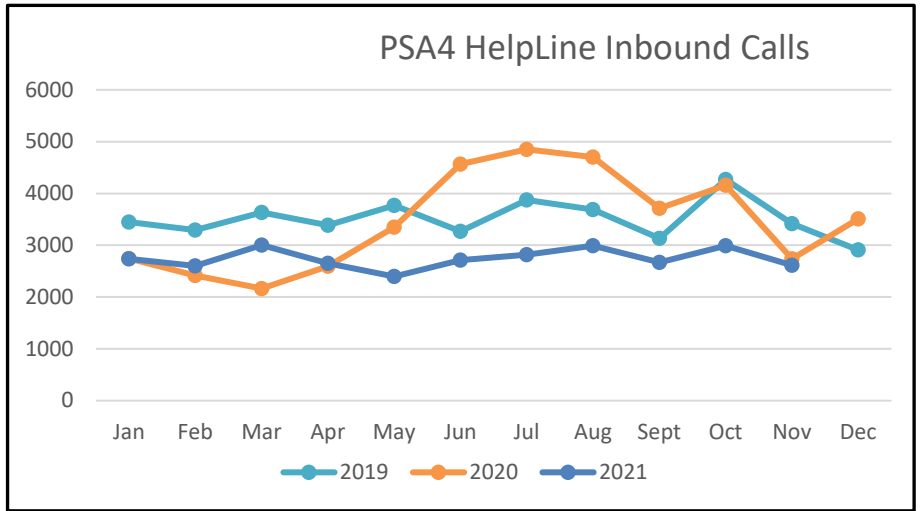
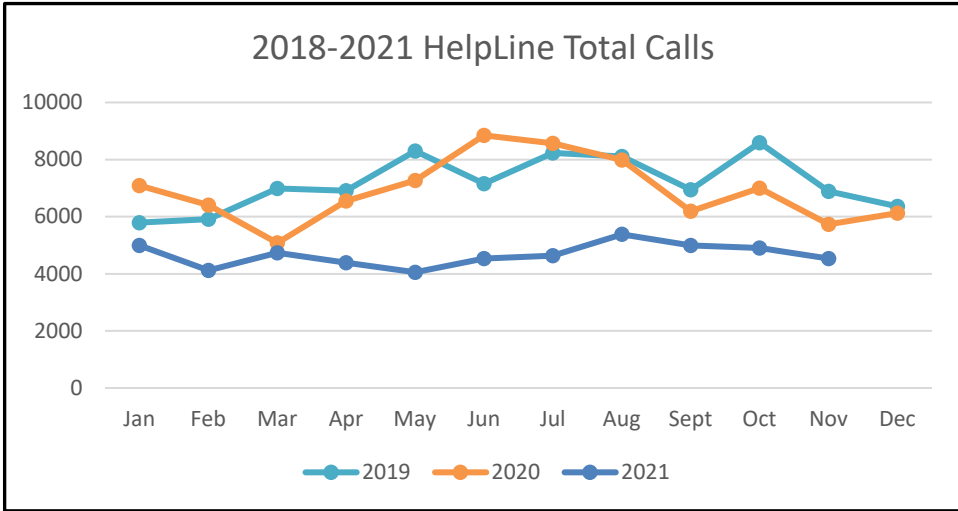
MAC Referrals  
703

SHINE Referrals  
312

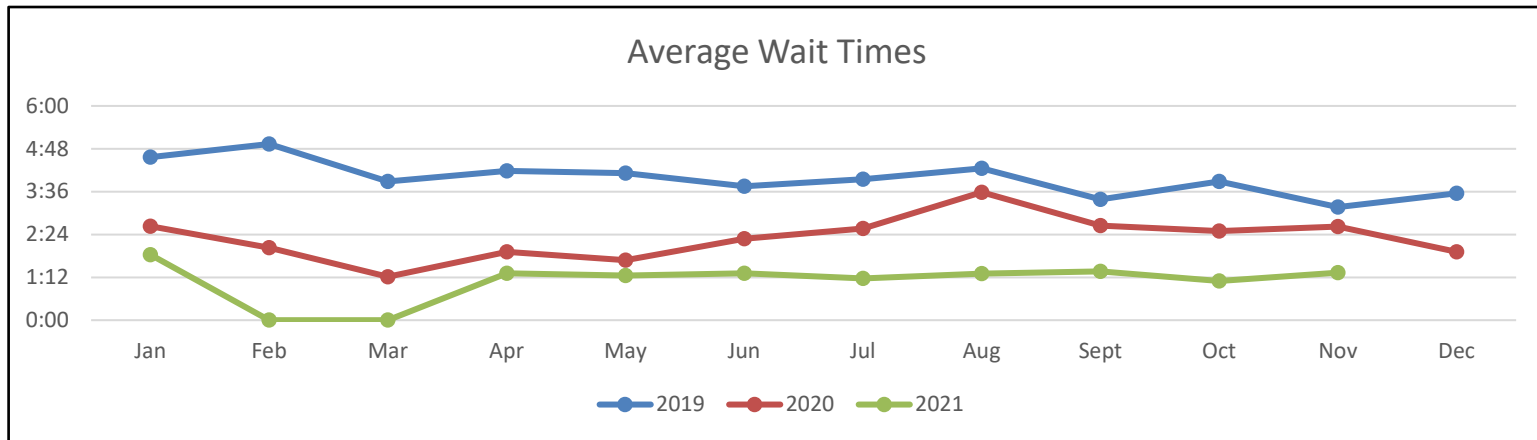
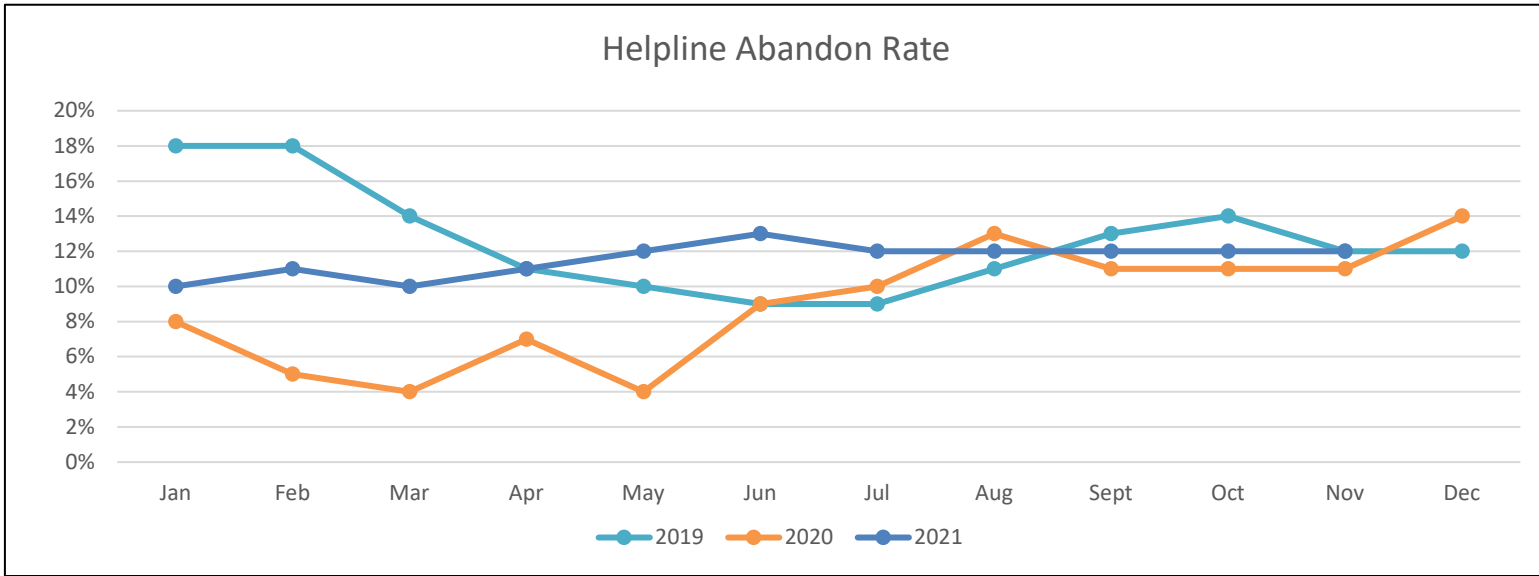
APS Referrals  
8

Silver Alerts  
0

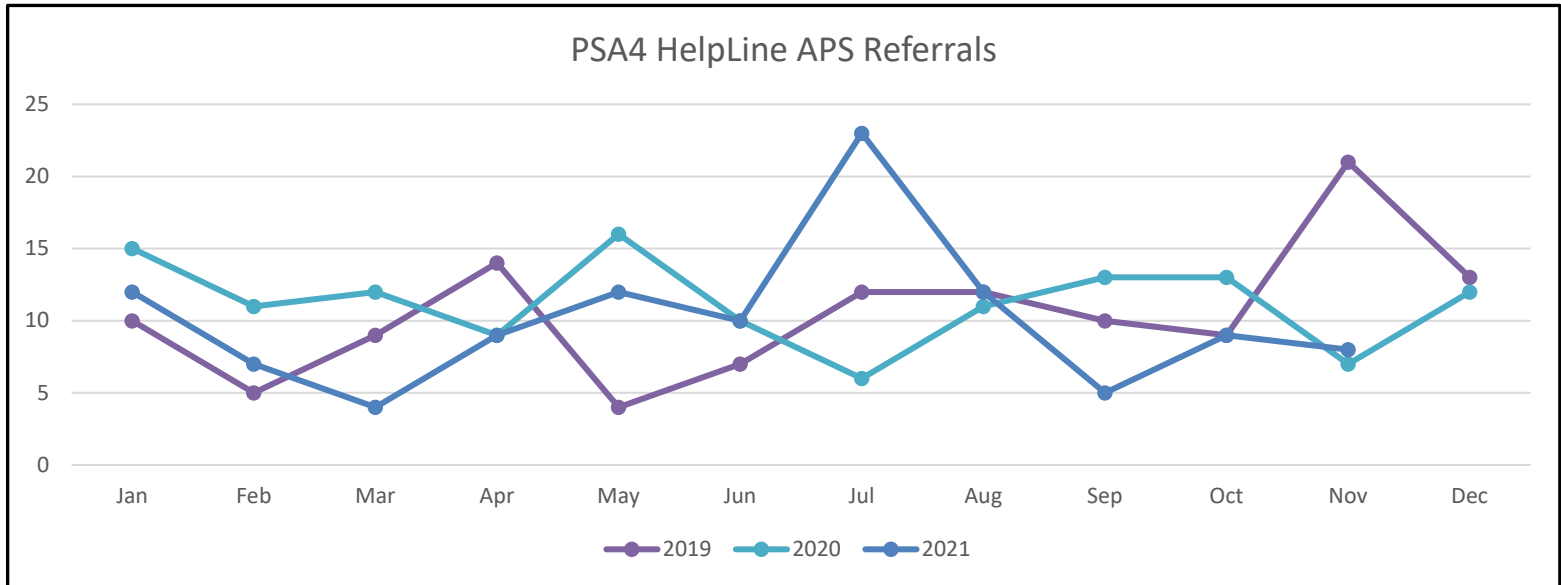
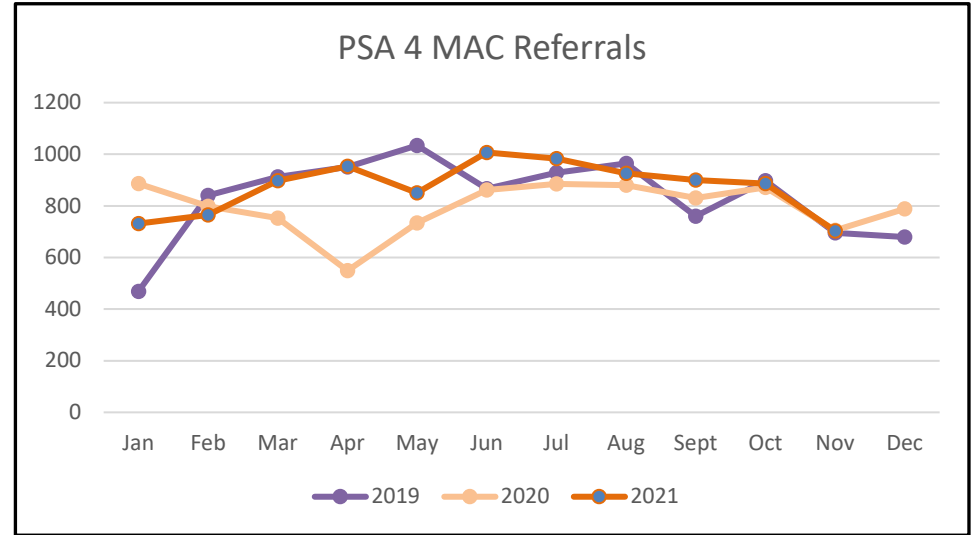
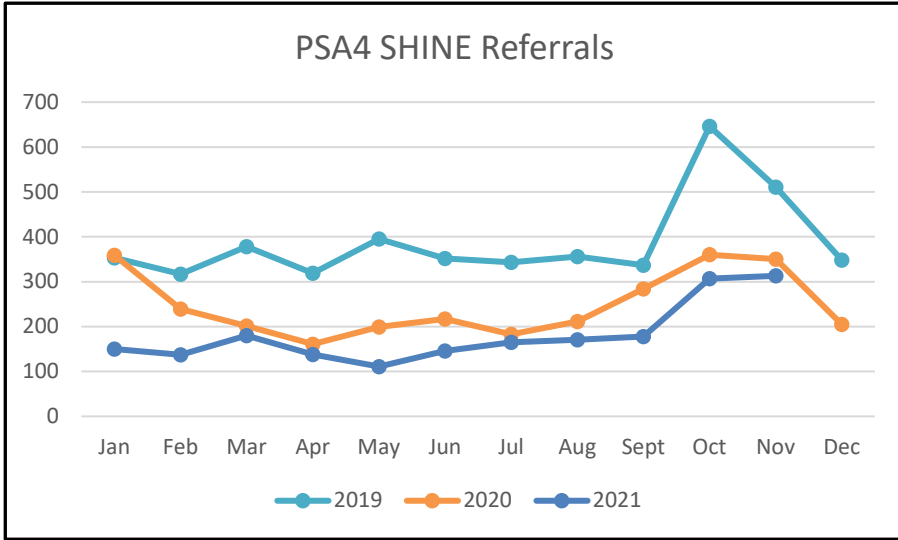
Top Reasons For Contact		
Individual Support	776	59%
Health Care	161	12%
Housing	91	7%
Utility Assistance	35	3%
Food	14	1%
Transportation	12	1%

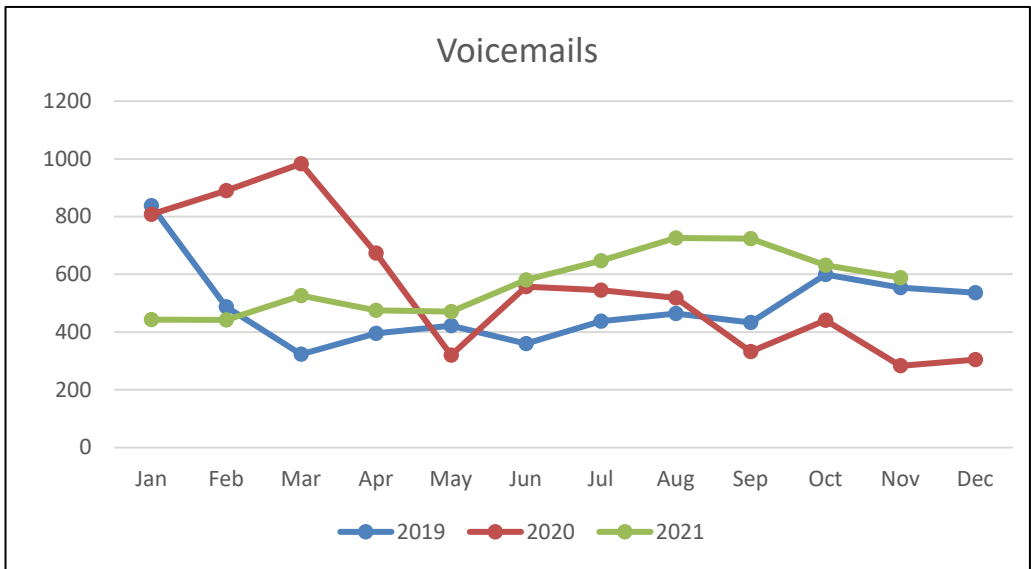
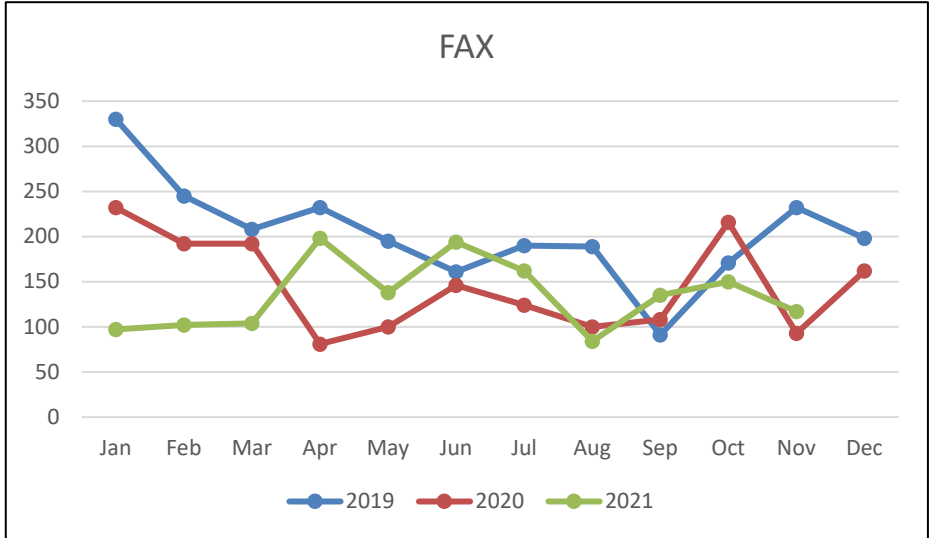
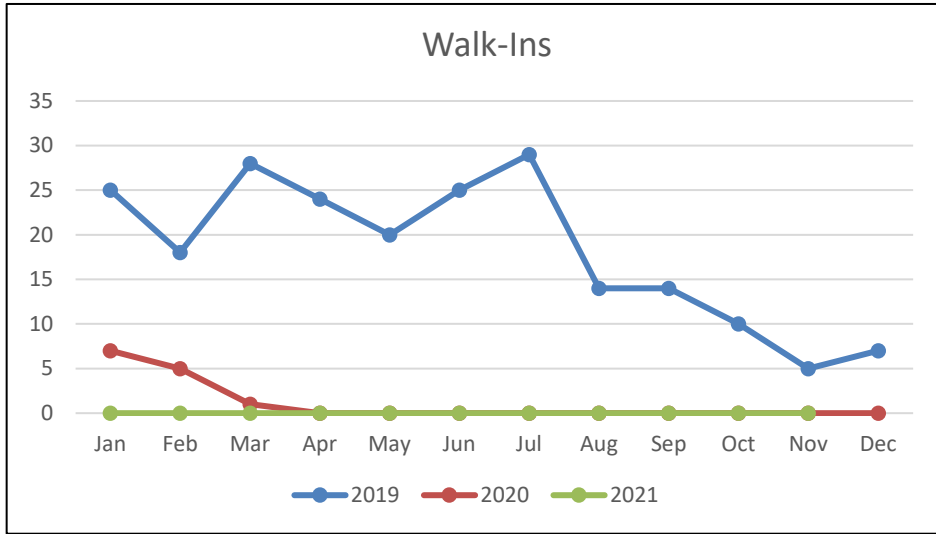






## HelpLine Referrals







## ADRC Summary December 2021

### **HelpLine**

The HelpLine is fully staffed. HelpLine operations are going smoothly with staff continuing to work remotely.

### **Intake & Screening Team**

The intake and screening team is responsible for completing the telephone assessment with clients and placement on appropriate waitlists. The team is recruiting to fill four open positions and efforts are underway to fill the positions. Several new staff are in training and are expected to start assessing clients in January. Because of the resignations and open positions, the appointment scheduling time has increased from 8-10 days to 30-35 days. In addition, the list of annual client reassessments due has a backlog. Once the team is fully staffed, the scheduling out time for initial assessments and the number of reassessments due will go back into normal timeframes.

### **Medicaid Eligibility Team**

This team is responsible for helping clients through the Medicaid long-term care eligibility process. There is one of the five EMS Specialist position open. Two of the five specialists are new and in training and it is expected they will assume a caseload in January. Once the team is fully staffed the caseload per specialist will go back to the 85-100 clients.

### **SHINE/SMP/MIPAA**

The SHINE, MIPPA and SMP grants were on target and met all contract benchmarks for October and November. Five new counselors completed the training/mentoring process and started counseling during the final days of Medicare Open Enrollment.

**Workforce Challenges:** The Intake & Screen and the Medicaid Eligibility teams have open positions. ElderSource has received very few qualified applicants.

**New Database:** eCIRTS, the new statewide database is scheduled to “go-live” on December 14, 2021. Assessments and all related client/caller information must be added into eCIRTS, which is taking the place of two database/documentation systems.

The ADRC provides access to and coordination of services to Floridians in the PSA4 service area seeking long-term care resources and assistance with Medicaid eligibility. When someone contacts the ADRC, a Specialist explains resources based on client needs or conducts a screening for long-term care services. If services are not available at the time of the screening, the client will be placed on all appropriate program waitlists. When there is funding available, the clients are released from waitlist and an ADRC Specialist will assist them through the enrollment process and the eligibility steps which must be completed.

**Monthly Analysis:** November 2021: Both the Screening/Intake team and EMS teams have open positions. The Screening/Intake team has 4 of the 13 positions vacant and the EMS team has 1 of 5 positions vacant. Both teams have added some new staff who are in training. Workforce challenges has made it difficult to hire for the open positions. The number of screenings completed has steadily declined since August. The number clients/caregivers calling into the Helpline to schedule a screening remains very high which has lead to the scheduling timeframe increasing from an average of 8 days to over 30 days.

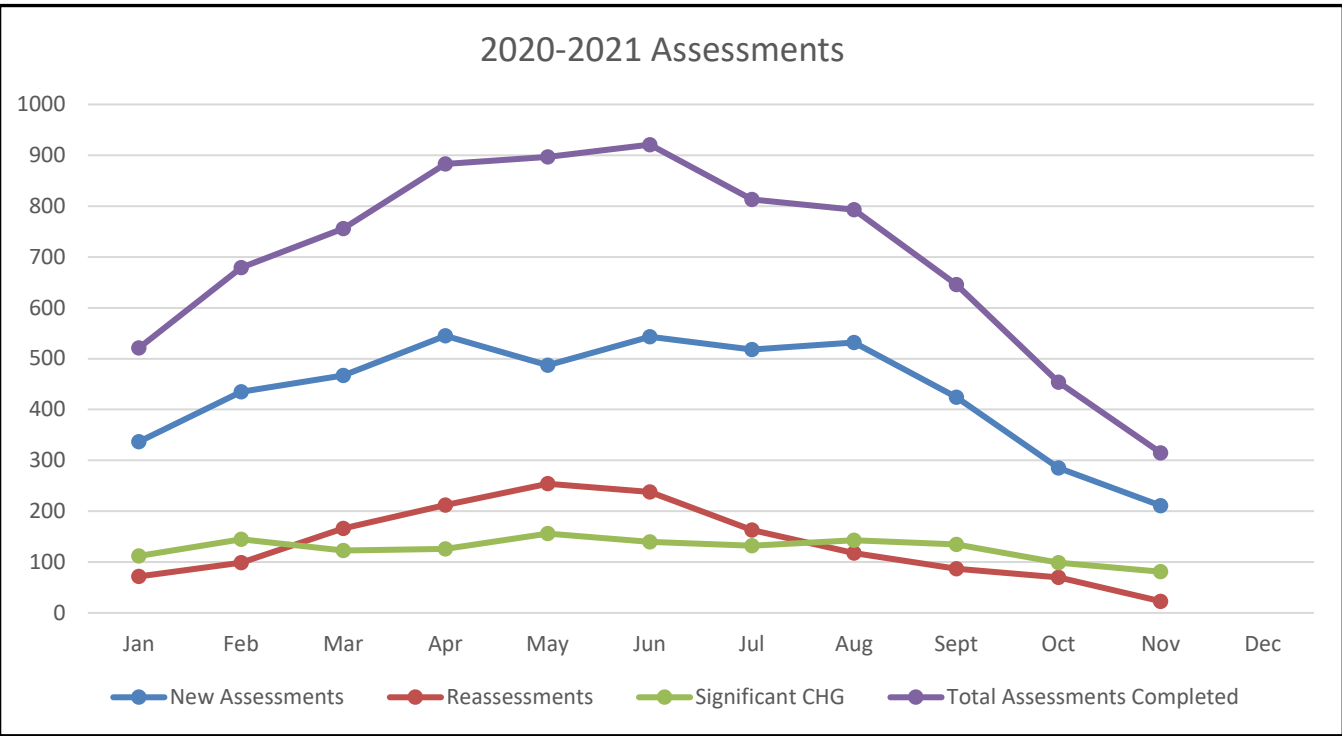
Screenings  
315

Screenings YTD  
7,678

Sig. Change  
28%

Reassmt Due  
2185

Scheduling  
31 Days



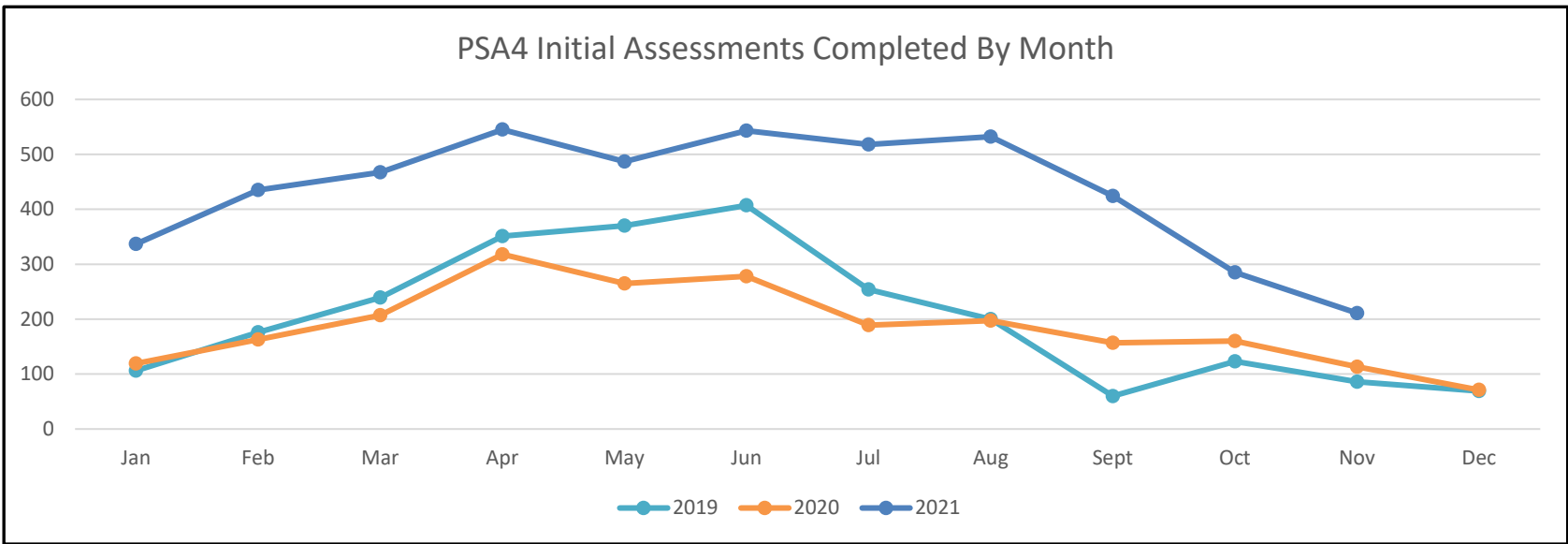
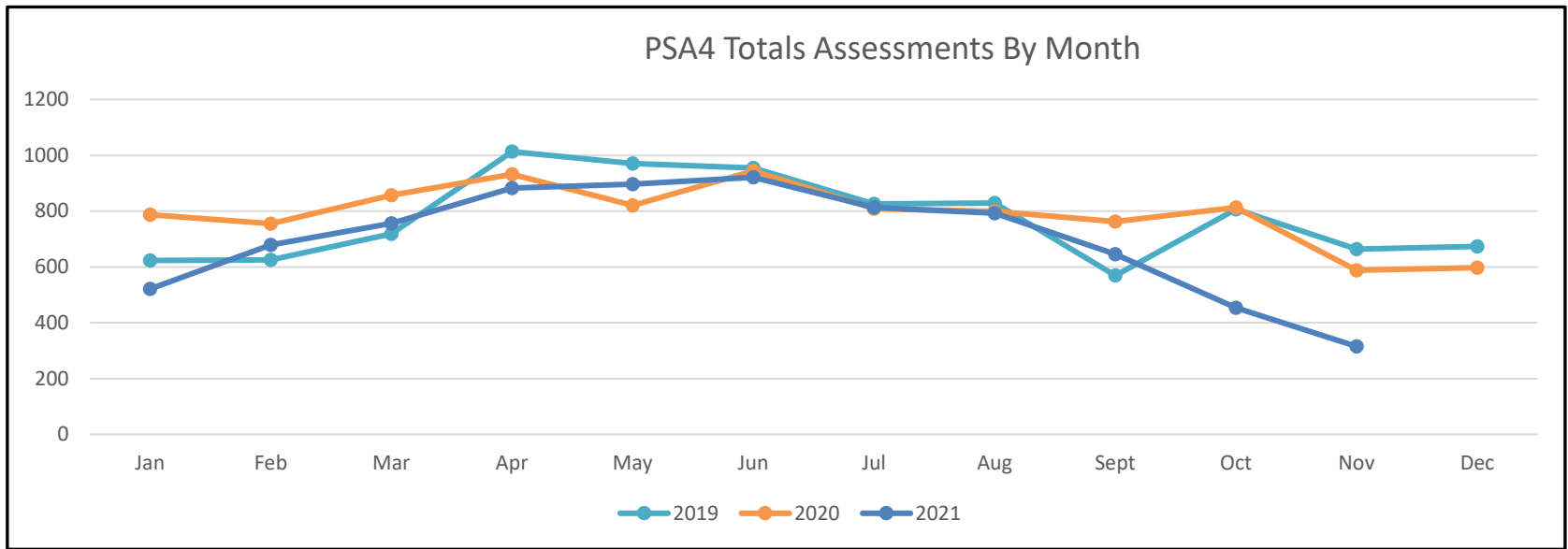
YTD Released  
1,600

Nov Release  
59

Total APPL  
393

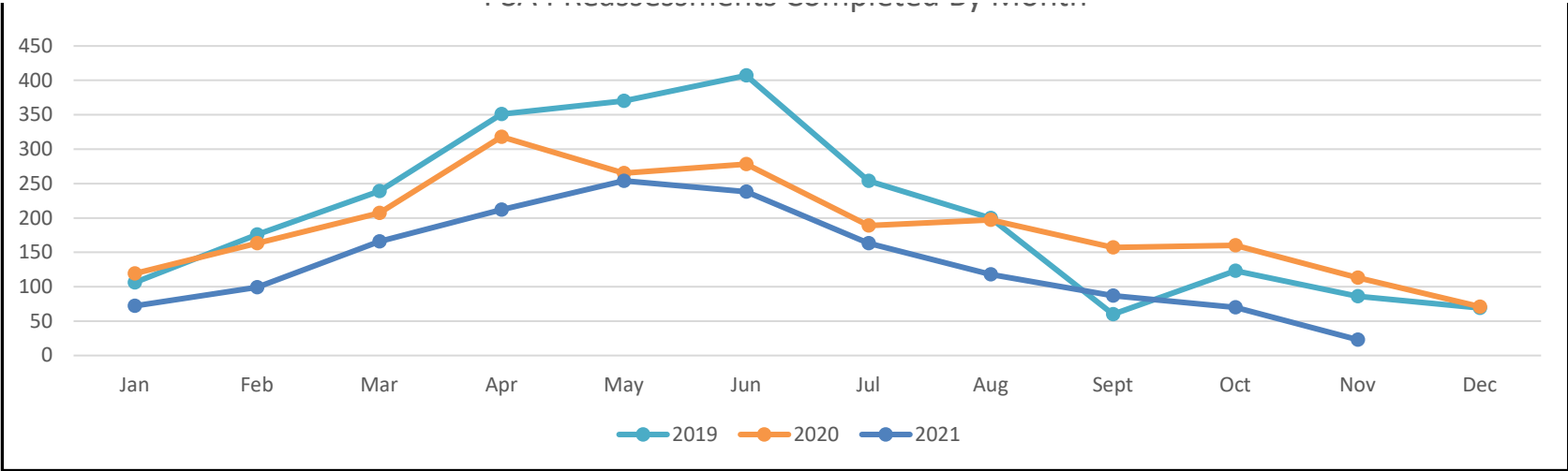
Total APCL  
59

LTCC Waitlist  
6,377

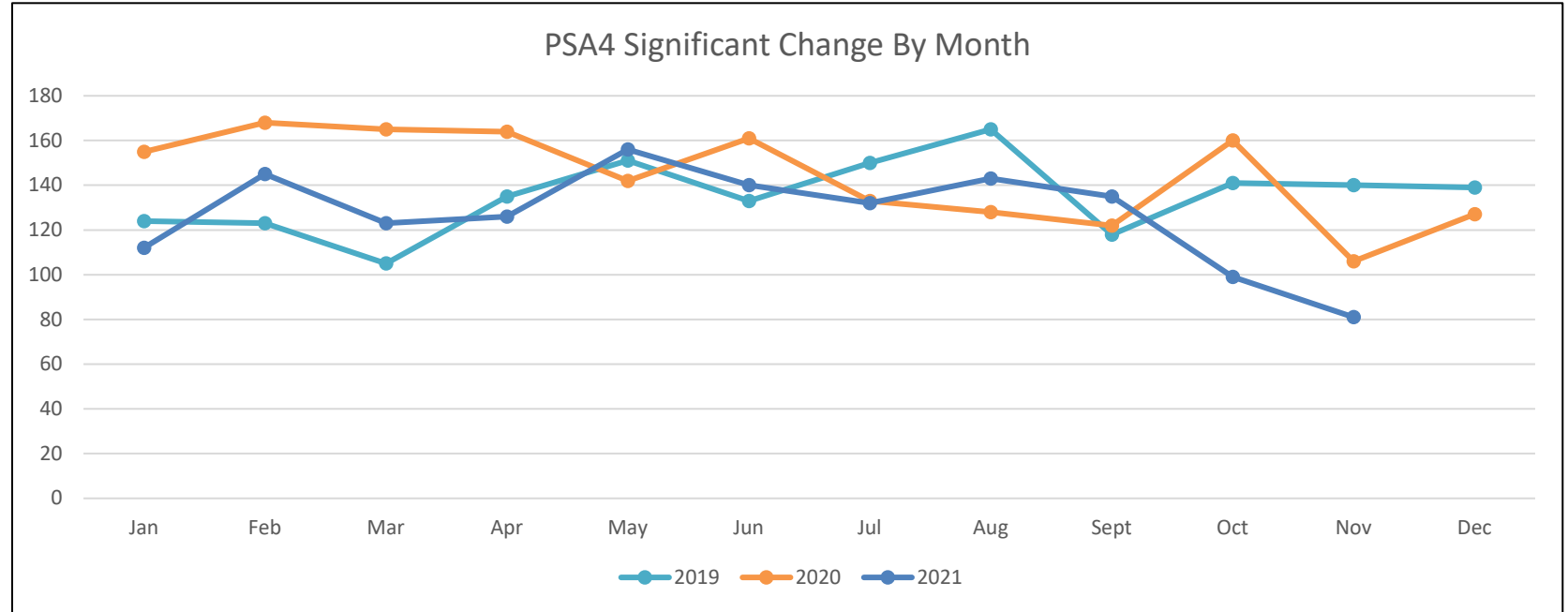


PSA4 Reassessments Completed By Month

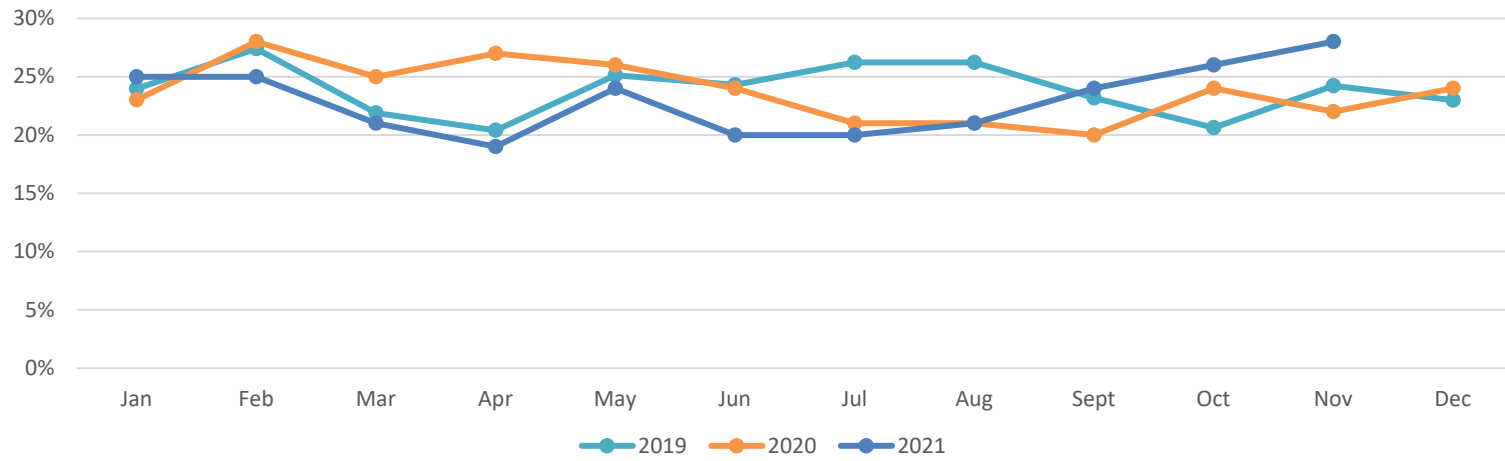
PSA4 Readings Completed By Month



PSA4 Significant Change By Month

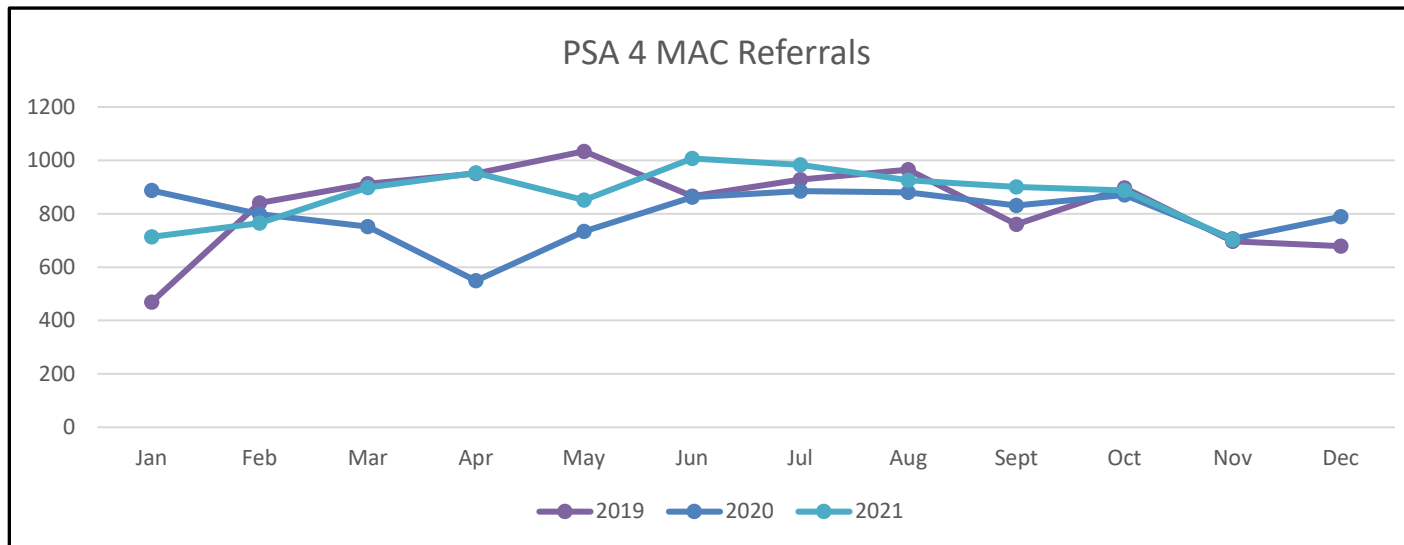
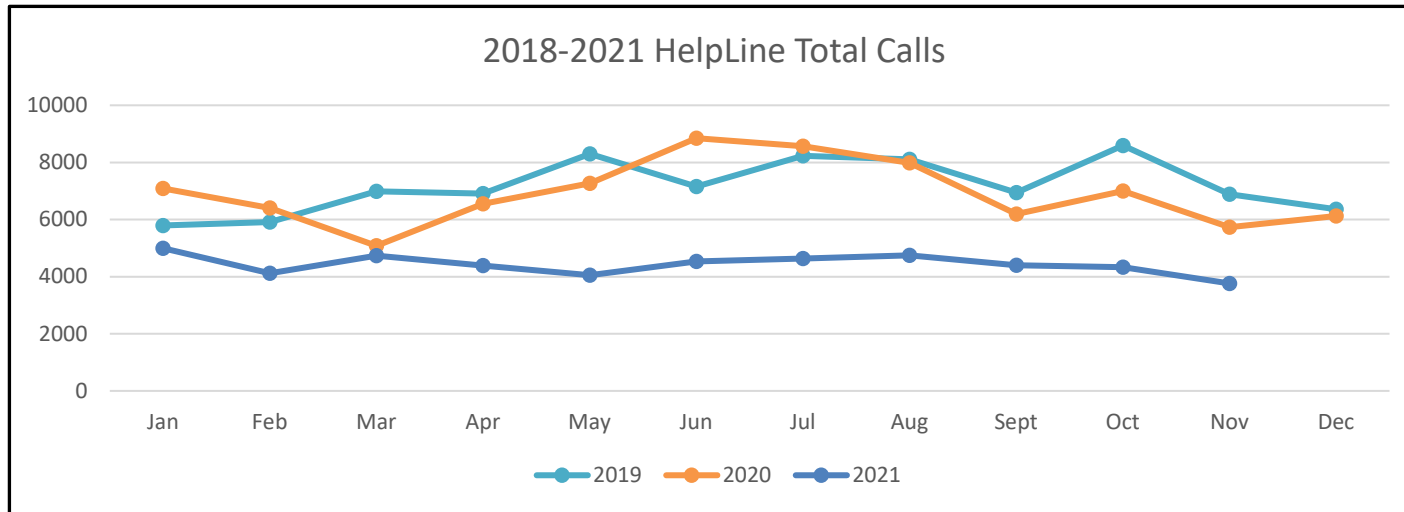


% Significant Change By Month





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The SHINE (Serving Health Insurance Needs of Elders) Program provides Medicare and health insurance counseling and information from an unbiased source. The SHINE program, MIPPA, (Medicare Improvements for Patients and Providers Act) and SMP (Senior Medicare Patrol) contract goals are primarily achieved through the commitment and efforts of the team of volunteers. The counselors are committed to helping Medicare beneficiaries make informed choices regarding their Medicare benefits. Contract benchmarks are achieved through the documentation in two national databases used to track counseling activities. Due to COVID-19, all grant benchmarks must be achieved at least by 50%.

**Monthly Analysis:** November 2021: ElderSource met all the SHINE, SMP and MIPPA benchmarks for October and November. Outreach events take place both virtually and in-person. The in-person events are beginning to see a come back but the attendance is not at the level of pre-covid. The SHINE trainings held in late summer and early fall has led to an increase in the number of active SHINE volunteers.

### SHINE Benchmarks 2 (must be 50% to meet contract)

Client Contacts	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021-22 Benchmark	252	201	220	261	282	219	347	376	234	220	215	240	3067
2021-22 Actual	196	162	240	228	267	262	406	540					2301
% of Goal	78%	81%	109%	87%	95%	120%	117%	144%	0%	0%	0%	0%	

Outreach Events	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021-22 Benchmark	12	10	11	11	11	13	17	13	8	8	8	11	133
2021-22 Actual	8	7	8	9	11	10	16	10				9	88
% of Goal	67%	70%	73%	82%	100%	77%	94%	77%	0%	0%	0%	82%	

### SMP Benchmarks 3 (must be 50% to meet contract)

Group Outreach	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	11	11	11	11	19	13	8	10	8	10	8	6	126
2021-22 Actual	8	9	11	11	18	10							67
% of Goal	73%	82%	100%	100%	95%	77%	0%	0%	0%	0%	0%	0%	

People Reached Through Group	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	399	258	269	343	305	218	137	181	183	49	60	60	2462
2021-22 Actual	164	180	130	198	219	197							1088
% of Goal	41%	70%	48%	58%	72%	90%	0%	0%	0%	0%	0%	0%	

Individual One-on-One	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
2021-22	137	163	129	121	206	177	137	150	179	135	125	125	1784
2021-22 Actual	164	166	200	192	271	353							1346
% of Goal	120%	102%	155%	159%	132%	199%	0%	0%	0%	0%	0%	0%	

## MIPPA Benchmarks 8 (must be 50% to meet contract)

<b>Completion of LIS Apps.</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	37	53	55	38	22	36	21	22	30	30	48	59	451
2021-22 Actual	28	48	51										99
% of Goal	76%	91%	93%	93%	0%	0%	0%	0%	0%	0%	0%	0%	
<b># LIS Eligibility Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
21-22 Benchmark	113	209	196	114	153	197	122	104	109	138	100	128	1683
2021-22 Actual	112	225	241										466
% of Goal	99%	108%	123%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
<b># LIS Benefit Explanation Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	97	163	144	82	125	173	87	82	70	91	75	110	1299
2021-22 Actual	72	122	111										233
% of Goal	74%	75%	77%	0%	0%	0%	0%	0%	0%	0%	0%		

## MIPPA Benchmarks (con't)

<b>Completion of MSP Apps</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	93	122	131	122	110	112	130	63	79	74	146	93	1275
2021-22 Actual	111	105	122										227
% of Goal	119%	86%	93%	93%	0%	0%	0%	0%	0%	0%	0%	0%	
<b># MSP Eligibility Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	121	205	197	112	147	195	102	108	90	140	141	98	1535
2021-22 Actual	135	197	112										309
% of Goal	112%	96%	57%	57%	0%	0%	0%	0%	0%	0%	0%	0%	
<b># MSP Benefit Explanation Activities</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	102	158	142	80	117	168	81	77	68	105	75	110	1181
2021-22 Actual	97	141	181										322
% of Goal	95%	89%	127%	127%	0%	0%	0%	0%	0%	0%	0%	0%	

## MIPPA Benchmarks New 2021-22 (con't)

<b>Group and Media to Low-Income or Rural Beneficiaries **Target Beneficiary Group must be low-income</b>													
<b>Extra Help/LIS/Medicaid/MS P</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Total</b>
2021-22 Benchmark	13	17	13	8	10	8	9	8	7	8	6	8	102

2021-22 Actual	10	17	10										27
% of Goal	77%	100%	77%	77%	0%	0%	0%	0%	0%	0%	0%	0%	

Group and Media to Low-Income or Rural Beneficiaries **Target Beneficiary Group must be low-income													
Preventative Services	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Total
2021-22 Benchmark	6	9	9	4	7	7	7	8	7	7	6	8	79
2021-22 Actual	7	12	9										21
% of Goal	117%	133%	100%	100%	0%	0%	0%	0%	0%	0%	0%	0%	

Number of Volunteers By County												
2021	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Baker	0	0	0	0	0	0	0	0	0	0	0	
Clay	2	2	2	2	2	2	2	2	2	2	2	
Duval	18	10	10	10	10	10	11	11	11	11	14	
Flagler	5	5	5	5	5	5	5	5	5	5	5	
Nassau	2	2	2	2	2	2	2	2	2	3	3	
St. Johns	14	11	11	11	11	11	11	12	12	12	12	
Volusia	2	2	2	2	2	2	2	2	2	2	4	
PSA Total	43	32	32	32	32	32	33	34	34	35	40	0

