

MARYLAND DEPARTMENT OF AGING (MDoA)

17.235 SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)

Program Description: Provides, fosters, and promotes part-time work opportunities (usually 20 hours per week) in community service activities for unemployed low-income persons 55 years of age and older. The grant increases individual economic self-sufficiency through placement of persons into unsubsidized employment, maintaining the community service focus of the program.

Formula Description: The statutory allocation formula of the Older Americans Act provides for the distribution of funds on the basis of a hold-harmless factor, the number of persons aged 55 and over residing in each state and the per capita income in each state. Below the state level, funds are distributed on the basis of persons over the age of 55 in poverty calculated from the number of persons age 55 or older who have incomes at or below 125% of the DHHS poverty guidelines. Project sponsors must provide, or arrange through third parties, at least 10% of the cost of the project. The sponsor share of cost may be contributed in cash or in-kind. This program also has maintenance of effort requirements.

FY10 (exp)	FY11 (approp)	FY12 (est)
\$ 1,567,038	\$ 1,647,028	\$ 1,667,038

Governor's Goal #1 [Create, Save or Place Residents into 250,000 Jobs Maryland by End 2012](#)

17.236 SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM / ARRA

FY10 (exp)	FY11 (approp)	FY12 (est)
\$ 327,239	\$ 0	\$ 0

Governor's Goal #1 [Create, Save or Place Residents into 250,000 Jobs Maryland by End 2012](#)

93.041 PREVENTION OF ELDER ABUSE, NEGLECT, AND EXPLOITATION

Program Description: Assists State and area agencies on aging in carrying out programs to prevent abuse, neglect, and exploitation of older individuals. Funds are awarded to States to develop or strengthen service systems through designated State and area agencies on aging.

Formula Description: No match is required. The statistical factor used for fund allocation is the State population of persons 60 years of age and over relative to other States. This program has maintenance of effort requirements.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 84,735	\$ 111,640	\$ 118,211

Program Supported / Population Served: Title VII Elder Abuse Prevention/statewide

Governor's Goal #4 [Reduce Violent Crime in Maryland by 20% by End 2012](#)

93.042 LONG TERM CARE OMBUDSMAN SERVICES FOR OLDER INDIVIDUALS

Program Description: Long term care ombudsmen are advocates for residents of long term care facilities (nursing homes and assisted living facilities). Paid and volunteer ombudsmen work in every jurisdiction to advocate on behalf of individuals and groups of residents, and provide information to residents and their families about the long term care system. They provide an on-going presence in long term care facilities, monitoring care and conditions and providing a voice for those who are unable to speak for themselves.

Formula Description: No match is required. The statistical factor used for fund allocation is the State population of persons 60 years of age and over relative to other States. This program has maintenance of effort requirements.

FY10 (exp)	FY11 (approp)	FY12 (est)
\$ 286,934	\$ 367,123	\$ 385,552

Program Supported / Population Served: Title VII Long Term Care Ombudsman activity currently serving 2,797 statewide

Governor's Goal #4 [Reduce Violent Crime in Maryland by 20% by End 2012](#)

93.043 DISEASE PREVENTION & HEALTH PROMOTION SERVICES

Program Description: Implements programs of preventive health services for the elderly. Funds develop or strengthen preventive health service systems through designated state and area agencies on aging. Services may not include services eligible for reimbursement under Medicare.

Formula Description: Programs are funded on a federal/state matching basis as follows: Preventive Health Services 85%/15%. For each fiscal year, state resources provide no less than 25% of the non-federal share of each state's total Title III expenditures from state or local public sources. The statistical factor used for fund allocation is the state population of persons 60 years of age and over. This program has maintenance of effort requirements.

FY 10 (exp)	FY 11(approp)	FY 12 (est)
\$ 361,152	\$ 357,541	\$ 361,152

Program Supported / Population Served: Title III D Health Screening & Education, Physical Fitness and Exercise Sessions, currently serving 55,456 participants

93.044 SUPPORTIVE SERVICES & SENIOR CENTERS

Program Description: Supports programs for older persons via statewide planning, area planning, and provision of supportive services, including multi-purpose senior centers. States may use 5% for state agency administration. Up to 10% of the funds awarded may be used for the administration of area plans and an adequate proportion of funds awarded to area agencies must be used for access, legal, and in-home services. Funds may be used for other services

Formula Description: Programs are funded on a federal/state-matching basis as follows: 85% to 15%. The statistical factor used for fund allocation is the state population of persons 60 years of age and over. This program has maintenance of effort requirements.

FY10 (exp)
\$ 7,709,626

FY11 (approp)
\$ 5,664,378

FY12 (est)
\$ 6,200,883

Program Supported / Population Served: Title III Supportive Services currently serving 205,261 individuals; Legal Services serving 4,079 individuals; and Senior Information & Assistance serving 51,099 individuals

93.045 NUTRITION SERVICES

Program Description: Finances the provision of congregate and home-delivered meals to older Americans. Nutrition education and other appropriate nutrition services are also provided.

Formula Description: Funded on a federal/state-matching basis of 85%/15%. For each fiscal year, state resources provide no less than 25% of the non-federal share of each state's total expenditures from state or local public sources. The statistical factor used for fund allocation is the state population of persons 60 years of age and over.

FY10 (exp)
\$ 9,593,033

FY11 (approp)
\$ 10,472,120

FY12 (est)
\$ 11,191,317

Program Supported / Population Served: Title III C
Congregate Meals serving 34,299 individuals
Nutrition Education serving 25,011 individuals
Home Delivered Meals serving 7,071 individuals

93.048 EVIDENCE-BASED DISEASE PREVENTION GRANTS PROGRAM

Program Description: Supports programs that demonstrate the efficacy of delivering evidence-based prevention programs for the elderly through community-based aging service provider organizations including state agencies, area agencies on aging, local health entities, hospitals, faith-based and academic organizations.

Formula Description: This program has no statutory formula. Grants are awarded on a discretionary basis and subject to availability of funds. Matching requirement is 25% non-Federal of total project cost and not less than 75% of the Federal funds from this grant must be allocated to community-based aging services providers. The non-Federal contribution may be in the form of cash or in-kind contributions, including plant, equipment, or services.

FY10 (exp)
\$ 200,000

FY11 (approp)
\$ 300,000

FY12 (est)
\$ 300,000

Program Supported / Population Served: 900 attending, 720 completing Chronic Disease Self Management Program/ Area Agencies on Aging serving Baltimore, Howard, Calvert, Caroline, Cecil, Kent, Talbot, Montgomery, Cecil, Calvert, Prince George's and Worcester Counties

93.048 ADMINISTRATION ON AGING SENIOR MEDICARE PATROL (SMP)

Program Description: The Senior Medicare Patrol program empowers seniors through increased awareness and understanding of healthcare programs. This knowledge helps seniors to protect themselves from the economic and health-related consequences of Medicare and Medicaid fraud, error and abuse. SMP projects also work to resolve beneficiary complaints of potential fraud in partnership with state and national fraud control/consumer protection entities, including Medicare contractors, state Medicaid fraud control units, state attorneys general, the OIG and CMS.

Formula Description: U.S. Administration on Aging (AoA) will fund no more than 75 % of the project's total cost, which means the applicant must cover at least 25% of the project's total cost with non-federal resources.

FY10 (exp)
\$ 180,000

FY11 (approp)
\$ 180,000

FY12 (est)
\$ 180,000

Program Supported / Population Served: Senior Medicare Patrol (SMP) Support Services currently serving 22,636 statewide

93.048 HEALTH CARE FRAUD PREVENTION PROGRAM EXPANSION AND SMP CAPACITY BUILDING GRANTS

Program Description: This grant seek to expand the capacity of the Senior Medicare Patrol (SMP) program to reach more Medicare and Medicaid beneficiaries, their families and caregivers, with the message of fraud prevention and identification, with additional funding targeted to designated high fraud states.

Formula Description: Under this and other OAA programs, AoA will fund no more than 75 % of the project's total cost, which means the applicant must cover at least 25% of the project's total cost with non-Federal resources.

FY10 (exp)
\$ 0

FY11 (approp)
\$ 300,000

FY12(est)
\$ 0

Program Supported / Population Served: Senior Medicare Patrol (SMP) Support Services currently serving 2,256 individuals in Calvert, Cecil, Charles, Washington, Allegany, Garrett, and Worcester Counties

93.048 SENIOR MEDICARE PATROL INTEGRATION GRANT

Program Description: SMP Integration Grants were awarded for a two-year period to develop new partnerships or “cutting edge” approaches to improve outreach efforts. The U.S. Administration on Aging (AoA) identified three priority areas for collaboration and program integration, including: Medicaid fraud, home health care fraud, and fraud related to the new prescription drug benefits under the Medicare Modernization Act. Grantees demonstrated how their proposals would strengthen the SMP program through the integration of SMP program materials, outreach and message to: 1) reach targeted populations; and 2) address targeted areas of health care fraud, error or abuse. The SMP fraud awareness message is to be expanded and integrated throughout rural areas through collaborative efforts led by the state aging organization.

Formula Description: The award is a cooperative agreement with the Administration on Aging substantially involved in the development and implementation of the activities of the projects and describing the technical assistance, support, and training to be provided to the projects. The cooperative agreements provide expectations for: project activities, development and dissemination of models, and evaluation of the project; as well as substantial assistance and support to be provided by AoA and the National Consumer Protection Technical Resource Center (the Center). Applicants are required to cover at least 25% of the total program costs with non-Federal resources.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 100,000	\$ 0	\$ 0

Program Supported / Population Served: Senior Medicare Patrol (SMP) Support Services currently serving 2,256 individuals in Calvert, Cecil, Charles, Washington, Allegany, Garrett, and Worcester Counties

93.048 EMPOWERING INDIVIDUALS TO NAVIGATE THEIR HEALTH & LONG TERM CARE SUPPORT OPTIONS

Program Description: In September 2009, the U.S. Administration on Aging (AoA) awarded a thirty-six month grant to expand and strengthen the Maryland Access Point program. Under the grant, two new sites will be developed and a five year strategic plan will be designed. In addition, the grant will allow the development of infrastructure to promote statewide operational consistency and to develop a quality assurance system and an evaluation. The grant funding has allowed the development of two new MAP sites in Montgomery and St. Mary’s Counties and it has provided additional funding support to two other MAP sites.

Formula Description: This program has no statutory formula. Matching requirements may be required of any grantee to the extent deemed appropriate by the Assistant Secretary for Aging and are generally set at a minimum of 25 percent of the total cost of the project.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 289,542	\$ 267,483	\$ 192,291

Program Supported / Population Served: The Aging & Disability Resource Centers of Maryland Access Point (MAP) statewide

93.048 AGING AND DISABILITY RESOURCE CENTER EVIDENCE BASED CARE TRANSITION

Program Description: This grant helps older persons or persons with disabilities remain in their own homes after a hospital, rehabilitation or skilled nursing facility stay, breaking the cycle of readmission to the hospital that occurs when an individual is discharged into the community without the social services and supports they need. This program supports frail adults in the community by providing a Guided Care Nurse that works with the individual upon hospital discharge to assist the individual to remain stable in the community. The program has demonstrated savings as a result of reductions in readmission, emergency admissions and other acute episodes. The program is a collaboration between MDoA, the Baltimore City MAP and the Johns Hopkins Community Physicians Practice.

Formula Description: This program has no statutory formula. Matching requirements may be required of any grantee to the extent deemed appropriate by the Assistant Secretary for Aging and are generally set at a minimum of 25 percent of the total cost of the project.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 0	\$ 197,660	\$ 202,340

Program Supported / Population Served: The Aging & Disability Resource Centers Maryland Access Point (MAP)/Baltimore City

93.048 NURSING HOME DIVERSION/COMMUNITY LIVING PROGRAM GRANT

Program Description: This grant was initially a three-year initiative funded by the U. S. Administration on Aging; however, the grant has received an extension through December 2011. The initiative has enabled MDoA, in partnership with five AAAs and other long-term care stakeholders, to develop a tool to identify individuals at risk of Medicaid spend down and nursing home placement and assist them through a flexible self-directed benefit program. The program also has made it possible to develop a Veteran Directed Home and Community Based Services Program which will provide a flexible benefit to veterans who have disabilities and are living in the community. In 2010, a Fiscal Intermediary was retained to provide personnel payroll and vendor purchases by individuals participating in the Community Living and Veterans Programs.

Formula Description: This program has no statutory formula. Matching requirements may be required of any grantee to the extent deemed appropriate by the Assistant Secretary for Aging and are generally set at a minimum of 25 percent of the total cost of the project.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 40,000	\$ 40,000	\$ 10,000

Program Supported / Population Served: Community Living Program/Veteran Directed Home and Community Based Services Program pilot sites: Baltimore City, Baltimore, Prince George's and Washington Counties and MAC Inc. (serving the Eastern Shore).

93.052 NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

Program Description: The National Family Caregivers Support Program (NFCSP) provides services to family and other non-paid caregivers in recognition of the work that they do in caring for their loved ones. The NFCSP provides five categories of services: Information about available services; assistance to access these services, including case management; education, training, support services, and individualized counseling; respite care to enable temporary relief from caregiving responsibilities; and supplemental services that may include other services not identified above.

Formula Description: Formula grants (Title III-E) for this program are 75% federal and 25% non-federal. The non-federal contribution may be in the form of cash or in-kind contributions, including plans, equipment, or services. Project Grant (Title III-E) matching requirements are specified in the program announcement published in the Federal Register. Project grants (Title VI-C) have no matching requirements.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 1,828,081	\$ 2,546,364	\$ 2,565,116

Program Supported / Population Served (2010): Title III E Family Caregiver Support Services statewide:

- Education, Training or Support – 11,467 units
- Respite Care - 2,252 individuals
- Supplemental Services – 2,368 individuals
- Information – 132,096 individuals
- Assistance – 24,750 individuals

93.053 NUTRITION SERVICES INCENTIVE PROGRAM

Program Description: Rewards effective performance by states in the efficient delivery of nutritious meals to older adults through the use of cash or commodities.

Formula Description: The NSIP is based on a performance incentive model. State agencies on aging receive NSIP funding based on the number of meals served in the prior federal fiscal year in proportion to all other states, and the available appropriation. State agencies may elect to receive commodities through procedures established by the USDA. There are no match requirements.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 1,828,615	\$ 1,828,615	\$ 1,836,363

Program Supported / Population Served: Nutrition Services: 1,545,479 congregate meals served statewide, and 1,286,384 home-delivered meals served statewide

93.071 MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDER ACT FOR BENEFICIARY OUTREACH AND ASSISTANCE (MIPPA)

Program Description: The purpose of the MIPPA grant, a jointly funded project of the U. S. Centers for Medicare & Medicaid Services (CMS) and the Administration on Aging (AoA), is to demonstrate how State Health Insurance Counseling Programs (SHIPs), State Agencies on Aging, Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs) can coordinate outreach activities to educate and provide application assistance to low income

Medicare beneficiaries who may be eligible for the Low Income Subsidy (LIS) to help with Medicare Part D prescription expenses, Medicare Savings Programs (MSP), the Qualified Medicare Beneficiary (QMB), the Specified Low Income Medicare Beneficiary (SLMB) and Qualified Individual Program(QI-1) to help with Medicare Part B expenses.

Formula Description: Two thirds of the allocation amount is based on the number of Medicare beneficiaries in the state who are likely eligible, but not yet enrolled, for LIS. One third of the allocation is based on the number of beneficiaries who are eligible for Part D and who live in rural areas. Grants to State Agencies on Aging for AAAs are designed to provide enhanced outreach to eligible Medicare beneficiaries regarding their benefits and enhanced outreach to individuals who may be eligible for the LIS, MSP, Part D and Part D in rural areas. States have the option to develop their own plan for allocating these funds to either all or to a subset of their AAAs, or states can utilize a pre-defined allocation to their AAAs to maximize local outreach efforts.

FY10 (exp)	FY11 (approp)	FY12 (est)
\$ 59,670	\$ 0	\$ 0

Program Supported / Population Served: Senior Health Insurance Program statewide

93.517 AFFORDABLE CARE ACT – AGING AND DISABILITY RESOURCE CENTER

Program Description: This grant will strengthen Aging and Disability Resource Centers (ADRCs), known in Maryland as Maryland Access Point, by building their capacity to provide options counseling to individuals seeking information and assistance on long term supports and services. Options counseling programs help people understand, evaluate, and manage the full range of long term services and supports available in their community. Under this grant, Howard County will work to develop and test standards and to develop a method for incorporating these standards in all long term supports and services programs and among all MAP partners including the Money Follows the Person Demonstration.

Formula Description: This program has no statutory formula or matching requirements. This program does not have any Maintenance of Effort (MOE) requirements.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 0	\$ 250,000	\$ 250,000

Program Supported / Population Served: Aging & Disability Resource Center known as “Maryland Access Point” or “MAP” statewide

93.518 AFFORDABLE CARE ACT – MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS (MIPPA) - AoA

Program Description: This grant provides outreach and assistance to Medicare beneficiaries on their benefits, including client education and enrollment in the Qualified Medicare Beneficiary Program, Specified Low-Income Medicare Beneficiary Program, Part D Low-Income Subsidy Program; coverage for preventive services; and additional federal assistance for individuals who fall into the Medicare Part D “donut hole.”

Formula Description: This program has no statutory formula or matching requirements. This program does not have MOE requirements.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 0	\$ 218,733	\$ 218,734

Program Supported / Population Served: Senior Health Insurance Program statewide

93.705 HOME DELIVERED MEALS (ARRA) – RECOVERY ACT

Program Description: This grant helped States to support nutrition services including nutritious meals, nutrition education and other appropriate nutrition services for older Americans in order to maintain health, independence and quality of life. Meals were delivered to the home where the older individual is homebound. Local projects had to provide a hot or other appropriate meal that complies with the Dietary Guidelines for Americans and provides one-third of the Dietary Reference Intakes (DRI), at least once per day, five or more days per week, except in rural areas where a lesser frequency is determined feasible, to eligible people aged 60+ and their spouses at least once per day, five or more days per week, except in rural areas where a lesser frequency is determined feasible, to eligible people aged 60+ and their spouses.

Formula Description: Awards were made based upon the formula established to states and territories that have a currently approved state plan.

FY10 (exp)	FY11 (approp)	FY12(est)
\$ 519,378	\$ 0	\$ 0

Program Supported / Population Served: Home Delivered Meals/ 31,475 meals statewide

93.707 CONGREGATE MEALS – (ARRA) RECOVERY ACT

Program Description: This grant supported States’ nutrition services including nutritious meals, nutrition education and other appropriate nutrition services for older Americans in order to maintain health, independence and quality of life. Meals will be served in a congregate

setting. Local projects must provide a hot or other appropriate meal that complies with the Dietary Guidelines for Americans and provides one-third of the Dietary Reference Intakes (DRI), at least once per day, five or more days per week, except in rural areas where a lesser frequency is determined feasible, to eligible people aged 60 and over and their spouses

Formula Description: Awards were made based upon the formula established to states and territories that have an approved state plan.

FY10 (exp)
\$ 1,054,986

FY11 (approp)
\$ 0

FY12(est)
\$ 0

Program Supported / Population Served: Congregate Meals/49,282 meals were served statewide

93.725 CHRONIC DISEASE SELF-MANAGEMENT PROGRAM ARRA

Program Description: In general, the use of these funds is to support state efforts to deploy evidence-based chronic disease self-management (CDSMP) programs that empower older people with chronic diseases to maintain and improve their health status. These funds are not to be used for “free standing” CDSMP programs that are not part of a state’s larger systems development effort to delivery community-based evidence-based prevention programs to older adults.

Formula Description: Awards are made based upon the formula established to states and territories that have a currently approved state plan. This program has no statutory formula or matching requirement.

FY10 (exp)
\$ 300,000

FY11 (approp)
\$ 300,000

FY12(est)
\$ 0

Program Supported / Population Served: CDSMP/895 attended, 690 completed

93.778 MEDICAL ASSISTANCE PROGRAM

Program Description: The Home and Community-Based Waiver for Older Adults enables older adults to remain in a community setting even though their age or disability would warrant placement in a long-term care facility. The Waiver allows services, which are typically covered by Medicaid only in a nursing facility, to be provided to eligible persons in their own homes or in assisted living facilities. These services include personal care, home-delivered meals, environmental assessments and accessibility adaptations, assistive devices, respite care, behavioral consultation, family and consumer training, dietitian/nutritionist services, personal emergency response systems and Senior Center Plus. Each program participant is assigned to a case manager who works with him or her to develop a plan of care that best meets his or her needs. Services and qualified providers are identified in the plan of care, and then monitored to assure the participant’s needs are being adequately and continuously addressed.

Formula Description: Federal funds are available to match state expenditures for health care and related services in the community. The federal share for medical services is 50% in

Maryland. The statistical factors used for fund allocation are medical assistance expenditures by state and per capita income by state based on a 3-year average. Statistical factors for eligibility do not apply to this program. This program has maintenance of effort requirements.

FY10 (exp)*	FY11 (approp)*	FY 12(est)*
\$ 3,206,657	\$ 3,954,449	\$ 3,840,000

**Expenditures are for Waiver case management and State and local program administration. Other services are funded by the Department of Health and Mental Hygiene*

Program Supported / Population Served: Medicaid Home and Community-Based Waiver for Older Adults/3,587Statewide

93.779 CENTERS FOR MEDICARE & MEDICAID SERVICES RESEARCH, DEMONSTRATIONS & EVALUATIONS

Program Description: The Senior Health Insurance Assistance Program provides seniors and adults with disabilities on Medicare, with information and assistance on health insurance issues, including Medicare and Medigap, Medicare Part D Prescription Drug plans, preparing and filing health insurance claims, Medicare Advantage Plans, programs for low-income beneficiaries and long-term care insurance policies. State and local SHIP staff and volunteers provide one-to-one assistance, and conduct educational sessions throughout the State on a variety of health insurance related topics, most notably, the new Medicare prescription plans.

Formula Description: The Basic Grant includes a fixed award of \$75,000, and a variable portion of the grant award based on a formula that considers: (a) the percentage of nationwide persons with Medicare residing in the State; (b) the percentage of the State's persons with Medicare in relation to the State's total population; and (c) the percentage of the State's persons with Medicare who reside in rural areas. Additional funding for specific priorities is available on a year-by-year basis, depending on Congressional approval.

FY10 (exp)*	FY11 (approp)*	FY12 (est)*
\$ 584,259	\$ 548,855	\$ 666,003

Program Supported / Population Served: Senior Health Insurance Assistance Program (SHIP) Support Services/25,583 Statewide

NOTE: **Program Year runs from 4/01 to 3/31*

93.779 MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDER ACT FOR BENEFICIARY OUTREACH AND ASSISTANCE (MIPPA) - CMS

Program Description: The purpose of the MIPPA grant, a jointly funded project of the U. S. Centers for Medicare & Medicaid Services (CMS) and the Administration on Aging (AoA), is to demonstrate how State Health Insurance Counseling Programs (SHIPs), State Agencies on Aging, Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs)

can coordinate outreach activities to educate and provide application assistance to low income Medicare beneficiaries who may be eligible for the Low Income Subsidy (LIS) to help with Medicare Part D prescription expenses, Medicare Savings Programs (MSP), the Qualified Medicare Beneficiary (QMB), the Specified Low Income Medicare Beneficiary (SLMB) and Qualified Individual Program(QI-1) to help with Medicare Part B expenses.

Formula Description: Two thirds of the allocation amount is based on the number of Medicare beneficiaries in the state who are likely eligible, but not yet enrolled, for LIS. One third of the allocation is based on the number of beneficiaries who are eligible for Part D and who live in rural areas. Grants to State Agencies on Aging for AAAs are designed to provide enhanced outreach to eligible Medicare beneficiaries regarding their benefits and enhanced outreach to individuals who may be eligible for the LIS, MSP, Part D and Part D in rural areas. States have the option to develop their own plan for allocating these funds to either all or to a subset of their AAAs, or states can utilize a pre-defined allocation to their AAAs to maximize local outreach efforts.

FY10 (exp) \$ 66,079	FY11 (approp) \$ 128,602	FY12(est) \$ 79,042
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Program Supported / Population Served: SHIP/statewide

93.779 DEVELOPMENT AND IMPLEMENTATION OF A PERSON-CENTERED HOSPITAL DISCHARGE PLANNING MODEL

Program Description: The overall goal of the program is to prevent unnecessary hospital discharges to nursing homes and to maximize opportunities for people to live in the community post hospitalization by developing and executing a “model” discharge planning process. The Department will develop “Person-centered Hospital Discharge Planning Models” in partnership with hospitals, patients and their caregivers, community-based providers and single entry points to long-term supports. This “person-centered” discharge planning process will systematically solicit input regarding the needs, preferences, strengths, capacities and desired health outcomes of the individual being discharged from the hospital. In the process, the patient should be given the tools they need to make informed decisions about where and how they will receive services and supports after discharge. The initiative will also enhance and create new Aging and Disability Resource Centers that serve as the conduit of information on community based options to the patient and his or her caregivers.

Formula Description: This program has no statutory formula. Grants are awarded on a discretionary basis and subject to availability of funds. Matching requirement is 25% non-Federal of total project cost and not less than 75% of the Federal funds from this grant must be allocated to community-based aging services providers. The non-Federal contribution may be in the form of cash or in-kind contributions, including plant, equipment, or services.

FY10 (exp) \$ 343,726	FY11 (approp) \$ 371,801	FY12(est) \$ 451,473
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Program Supported / Population Served: Aging & Disability Resource-Center Person-Centered Hospital Discharge Planning in Anne Arundel, Carroll, Dorchester, Howard, Somerset, Washington, Wicomico, Worcester Counties

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