

LSC Greenbook

Analysis of the Enacted Budget

Department of Aging

*Wendy Risner, Senior Budget Analyst
Legislative Service Commission*

September 2009

TABLE OF CONTENTS

OVERVIEW	1
Agency Overview.....	1
Appropriation Overview	1
Major Initiatives	2
Unified Long-Term Care Budget	2
Ohio's Best Rx Program	2
Ohio Community Service Council.....	3
PACE Program	3
Statewide Expansion of Choices Program.....	3
Consolidated Federal Medicaid Waiver	4
Vetoed Provisions	4
Residential State Supplement Workgroup	4
Unified Long-Term Care.....	4
ANALYSIS OF ENACTED BUDGET	5
Introduction	5
Long-Term Care Services and Supports	7
Ombudsman Activities (490410, 490609, and 490620)	7
Residential State Supplement (490412)	8
Long-Term Care Activities (490423, 490602, 490610, and 490623)	9
Long Term Care Consumers Guide (490613).....	15
Senior Support	16
Senior Community Services (490411).....	16
Alzheimer's Respite (490414).....	17
National Senior Service Corps (490506).....	17
Senior Community Outreach and Education (490606).....	18
Federal Aging Grants (490618).....	18
Federal Independence Services (490612)	19
Resident Services Coordinator (490616)	20
Ohio's Best Rx	21
Ohio's Best Rx Administration (490673)	21
Ohio Community Service Council	22
Ohio Community Service Council (490409)	22
AmeriCorps Programs (490617).....	22
OCSC Community Support (490604)	23

Operating Expenses	24
Operating Expenses (490321)	24

ATTACHMENT:

Budget Spreadsheet By Line Item

Department of Aging

- Establishes a unified long-term care budget
- Establishes a Home First component for the PACE Program
- Expands the Choices Program statewide

OVERVIEW

Agency Overview

The Ohio Department of Aging (ODA) serves and advocates for the needs of over two million Ohioans age 60 years and older. It provides home and community-based services that help frail individuals remain in their own homes, and supports consumers of long-term care. ODA also seeks to promote positive attitudes toward aging and older people through outreach, volunteer programs, and other efforts. As of June 30, 2009, ODA had 101 full-time employees and one part-time. Additionally, the Ohio Community Service Council had eight full-time employees and one part-time. There were 11 Aging Advisory Council members that received pay for meetings attended.

ODA funds and administers programs such as the PASSPORT Medicaid waiver (Pre-Admission Screening System Providing Options and Resources Today), Assisted Living Medicaid waiver, Program of All-Inclusive Care for the Elderly (PACE), Residential State Supplement (RSS), Alzheimer's Respite Care, Long-Term Care Ombudsman, Ohio's Best Rx, and the Golden Buckeye Card. The majority of ODA's spending is for the PASSPORT Program. In FY 2009, approximately 75% of ODA's budget was expended on this one program. Most state and federal aging programs in Ohio are administered at the local level by 13 Area Agencies on Aging (AAAs). They also distribute federal, state, and, in some cases, local funds. AAAs are the primary vehicles for organizing and coordinating community-based services for older adults.

Appropriation Overview

Appropriations by Fund Group					
Fund Group	FY 2009	FY 2010	% Change	FY 2011	% Change
General Revenue	\$173,560,672	\$115,869,058	(33.2%)	\$152,269,694	31.4%
General Services	\$40,219	\$372,677	826.6%	\$372,677	0.0%
State Special Revenue	\$39,395,709	\$41,047,065	4.2%	\$40,844,353	(0.5%)
Federal Special Revenue	\$354,477,208	\$432,888,037	22.1%	\$422,918,498	(2.3%)
TOTAL	\$567,473,808	\$590,176,837	4.0%	\$616,405,222	4.4%

*FY 2009 figures represent actual expenditures.

As can be seen in the table above, the budget provides total funding of \$590.2 million in FY 2010, an increase of 4.0% from FY 2009, and \$616.4 million in

FY 2011, an increase of 4.4% from FY 2010 appropriations. GRF appropriations decrease by 33.2% in FY 2010, but increase by 31.4% in FY 2011. On the other hand, federal special revenue funds increase by 22.1% in FY 2010, but decrease by 2.3% in FY 2011. Most of the fluctuation in the appropriations between GRF and federal special revenue funds can be attributed to the impact of the additional federal Medicaid reimbursement, also known as enhanced Federal Medical Assistance Percentage (FMAP), Ohio may receive for the period of October 1, 2008 through December 31, 2010. During this period, the enhanced FMAP may vary quarterly based on Ohio's unemployment rate. The largest expense category, by far, is subsidies.

Major Initiatives

Unified Long-Term Care Budget

The budget extends the Unified Long-Term Care Budget Workgroup for FY 2010 and FY 2011. The Workgroup was originally created in H.B. 119 of the 127th General Assembly. It also adds representatives of managed care organizations who are to be appointed by the Governor. The directors of Aging and Budget and Management, working with the Director of Job and Family Services, are to annually submit a written report to the Speaker of the House, President of the Senate, Minority Leader of the House, Minority Leader of the Senate, and others, describing the progress toward establishing, or if already established, the effectiveness of the unified long-term care budget.

The budget authorizes the Director of Budget and Management, in support of the Workgroup's proposals, to seek Controlling Board approval to transfer cash from Fund 5R20, Nursing Facility Stabilization, used by ODJFS, to Fund 4J40, PASSPORT/Residential State Supplement, used by the Department of Aging.

Ohio's Best Rx Program

On July 1, 2007, the Ohio's Best Rx Program was transferred to ODA from ODJFS. The goal of the program is to provide significant savings on prescription medications to people over the age of 60 and low-income individuals of any age.

Until FY 2008, GRF funds were used to provide supplemental and start-up funding for the program. In FY 2009, GRF funding was eliminated. Instead of GRF, ODA used only manufacturer's payments, administrative fees, and investment earnings deposited in Fund 5AA0 to support the program. The goal of the program was self-sufficiency; however, several external factors such as the implementation of Medicare Part D, reduction in the number of brand-name drugs in the marketplace, and market competition driving down the price of generic drugs, have made this goal impossible.

The budget repeals statutes dealing with the program. However, it allows the Director of Aging to contract with any person for the operation of a drug discount

program similar to the Best Rx Program. A transfer of \$400,000 from Fund 5AA0 to the GRF occurred on August 18, 2009. However, the fund will remain open until October 1, 2009 to allow for accounts to be settled.

Ohio Community Service Council

The budget removes ODA from acting as the fiscal agent for the Ohio Community Service Council. No other agency is specified in the bill as the agency. Instead the bill specifies that the Council is required to enter into a written agreement with another state agency to serve as the fiscal agent. The Governor is required to be informed before any agreement and before the appointment of an Executive Director. The budget specifies matters that the agreement is to contain and/or address.

PACE Program

PACE provides high quality home and community-based care, thereby allowing seniors to live in the community. There are currently two PACE sites – Tri-Health Senior Link, which is in Cincinnati and Concordia Care, which is in Cleveland. PACE is a managed care program. The PACE sites provide participants with all of their needed health care, medical care, and ancillary services at a capitated rate. The budget allows the Director to expand PACE to regions beyond these two sites. However, when expanding PACE, the Director is prohibited from decreasing the number of PACE participants in currently participating areas below the number enrolled in PACE on July 1, 2008.

Additionally, the budget establishes a Home First component for PACE. Home First currently permits individuals who are on the waiting list for PASSPORT, Assisted Living, and RSS, and living in a nursing facility, to receive priority enrollment onto one of these programs. ODA anticipates that the Home First provision for PACE will become operational October 16, 2009.

Statewide Expansion of Choices Program

Choices is a home and community-based Medicaid waiver that enables older individuals to stay at home by providing in-home long-term care services. The Choices waiver is "consumer-directed." Consumer direction is a philosophy that allows individuals and families greater choice, control, and responsibility for their services. The Choices Program allows individuals to recruit, hire, schedule, and if necessary, fire their worker. The case manager still has a major role in assessing the consumer's needs and working with the consumer to identify ways of meeting those needs. The Choices waiver is limited to individuals already enrolled on the PASSPORT waiver and is currently only available in four geographic areas in the state: AAA 6, which covers central Ohio, AAA 7, which covers southern Ohio; AAA 8, which covers southeastern Ohio, and AAA 4, which covers the Toledo area in northwestern Ohio. The budget

requires that the program be available statewide, subject to federal approval. ODA will pursue this approval through the consolidation waiver, which is discussed below.

Consolidated Federal Medicaid Waiver

There is a separate federal Medicaid waiver for each of the three Medicaid waiver programs the Department of Aging administers: the Assisted Living Program, Choices Program, and PASSPORT Program. The budget requires the Director of Job and Family Services to submit a request to the United States Secretary of Health and Human Services to obtain a federal Medicaid waiver that consolidates the three programs into one Medicaid waiver program. The programs are to be operated as separate Medicaid waiver programs until the state receives federal approval for the consolidated federal Medicaid waiver.

Vetoed Provisions

Residential State Supplement Workgroup

The budget created the Residential State Supplement Workgroup. The Workgroup was required to examine the issue of which state agency is the most appropriate to administer the program. The Workgroup was required to submit written recommendations to the Governor and General Assembly no later than December 31, 2009. The Governor vetoed this provision since the appropriate agency directors have already begun this dialogue.

Unified Long-Term Care

The budget added representatives of managed care organizations, which ODJFS contracts for purposes of Medicaid managed care, to the Unified Long-Term Care Budget Workgroup. Representatives of managed care organizations were added to the Workgroup; however, the Governor vetoed the designation specifying that these organizations are the ones that ODJFS contracts with for the purposes of Medicaid managed care to allow for broader representation of managed care entities.

ANALYSIS OF ENACTED BUDGET

Introduction

This section provides an analysis of the funding for each appropriation item in ODA's budget. In this analysis, ODA's line items are grouped into five categories. For each category a table is provided listing the appropriation in each fiscal year of the biennium. Following the table, a narrative describes how the appropriation is used and any changes affecting the appropriation that were enacted in H.B. 1. The five categories used in this analysis are as follows:

1. Long-Term Care Services and Supports;
2. Senior Support;
3. Ohio's Best Rx;
4. Ohio Community Service Council; and
5. Program Support.

To aid the reader in finding each item in the analysis, Table 4 below shows the category in which each appropriation has been placed, listing the line items in order within their respective fund groups and funds. This is the same order the line items appear in the budget bill.

Categorization of ODA's Appropriation Line Items for Analysis of Enacted Budget			
Fund	ALI and Name		Category
General Revenue Fund Group			
GRF	490321	Operating Expenses	5: Program Support
GRF	490409	AmeriCorps Operations	4: Ohio Community Service Council
GRF	490410	Long-Term Care Ombudsman	1: Long-Term Care Services and Supports
GRF	490411	Senior Community Services	2: Senior Support
GRF	490412	Residential State Supplement	1: Long-Term Care Services and Supports
GRF	490414	Alzheimer's Respite	2: Senior Support
GRF	490423	Long Term Care Budget – State	1: Long-Term Care Services and Supports
GRF	490506	National Senior Service Corps	2: Senior Support
GRF	490625	Alzheimer's Respite – Federal Stimulus	2: Senior Support
General Services Fund Group			
4800	490606	Senior Community Outreach and Education	2: Senior Support
Federal Special Revenue Fund Group			
3220	490618	Federal Aging Grants	2: Senior Support
3C40	490623	Long Term Care Budget	1: Long-Term Care Services and Supports
3M40	490612	Federal Independence Services	2: Senior Support
3R70	490617	AmeriCorps Programs	4: Ohio Community Service Council
State Special Revenue Fund Group			
4C40	490609	Regional Long-Term Care Ombudsman	1: Long-Term Care Services and Supports
4J40	490610	PASSPORT/Residential State Supplement	1: Long-Term Care Services and Supports
4U90	490602	PASSPORT Fund	1: Long-Term Care Services and Supports
5AA0	490673	Ohio's Best Rx Administration	3: Ohio's Best Rx
5BA0	490620	Ombudsman Support	1: Long-Term Care Services and Supports
5K90	490613	Long Term Care Consumers Guide	1: Long-Term Care Services and Supports
5W10	490616	Resident Services Coordinator Program	2: Senior Support
6240	490604	OCSC Community Support	4: Ohio Community Service Council

Long-Term Care Services and Supports

The appropriations in this category generally fund the long-term care programs administered by ODA, such as PASSPORT, Assisted Living, PACE, and Choices. These programs are supported with Medicaid funding. They enable seniors and persons with disabilities to live in settings they prefer. Additionally, funds in this category are provided for Ombudsman Support activities, which include the investigation of complaints against providers of long-term care services for the elderly. Lastly, the funds provide for the Long Term Care Consumers Guide, which compiles timely, comparative information about the 567 residential care facilities and almost 1,000 nursing homes in Ohio.

Appropriations for Long-Term Care Services and Supports				
Fund	ALI and Name		FY 2010	FY 2011
General Revenue Fund				
GRF	490410	Long-Term Care Ombudsman	\$535,857	\$535,857
GRF	490412	Residential State Supplement	\$5,225,417	\$5,225,417
GRF	490423	Long Term Care Budget – State	\$97,916,967	\$134,317,603
General Revenue Fund Subtotal			\$103,678,241	\$140,078,877
Federal Special Revenue Fund Group				
3C40	490623	Long Term Care Budget	\$350,162,957	\$340,193,418
Federal Special Revenue Fund Group Subtotal			\$350,162,957	\$340,193,418
State Special Revenue Fund Group				
4C40	490609	Regional Long-Term Care Ombudsman Program	\$935,000	\$935,000
4J40	490610	PASSPORT/Residential State Supplement	\$33,263,984	\$33,263,984
4U90	490602	PASSPORT Fund	\$4,424,969	\$4,424,969
5BA0	490620	Ombudsman Support	\$600,000	\$600,000
5K90	490613	Long Term Care Consumers Guide	\$820,400	\$820,400
State Special Revenue Fund Group Subtotal			\$40,044,353	\$40,044,353
Total Funding: Long-Term Care Services and Supports			\$493,885,551	\$520,316,648

Ombudsman Activities (490410, 490609, and 490620)

These line items provide funding for ombudsman activities. Each specific line item is discussed in more detail below. The Ombudsman Program advocates for long-term care consumers who are receiving home and community-based services and residents of nursing homes, residential facilities, and adult care facilities. Ombudsmen also voice consumer needs and concerns to policymakers and providers. They also investigate and attempt to resolve consumer complaints about long-term care services. Ombudsmen create a regular presence in all long-term care facilities through many

activities such as complaint handling, provider education, regular visitation, and work with resident councils and family councils. The program is run by the State Ombudsman, in collaboration with Ohio's 12 regional programs. The program relies heavily on volunteers to help create a presence in long-term care facilities. In FY 2009, the program (state and regional) made almost 14,000 visits to long-term care facilities with volunteers making 70% of those visits. In FY 2009, the program (state and regional) investigated over 8,800 complaints. The most common complaints relate to discharge and care planning issues.

GRF line item 490410, Long-Term Care Ombudsman, provides funding to support the investigation of complaints against providers of long-term care services for the elderly. The budget provides funding of \$535,857 in each fiscal year, a decrease of 3.7% from FY 2009 expenditures.

Line item 490609, Regional Long-Term Care Ombudsman Program, pays operating costs of the regional programs. Revenue from the bed fee charged to nursing homes, residential care facilities, and homes for the aging are deposited into Fund 4C40, Long-Term Care Ombudsman Program. The budget provides for funding of \$935,000 in each fiscal year, which is an increase of 29.4% over FY 2009 expenditures.

Line item 490620, Ombudsman Support, is used for the development of the Ombudsman Volunteer Program to increase the frequency of facility visits. This line item is supported by Fund 5BA0, Ombudsman Support. The Ombudsman Support Fund receives cash transfers from Fund 4E30, Resident Protection, which is used by ODJFS. In FY 2005 and in FY 2006, \$615,000 was transferred. There were no transfers made in FY 2007. In FY 2008 and in FY 2009, \$600,000 was transferred. The program is funded at FY 2009 levels with appropriations of \$600,000 in each fiscal year.

In addition to the appropriations described above, the program receives funding from line item 490612, Federal Independence Services. Funds are allocated to the 12 regional programs by formula grants.

The budget allows the Director of Aging to impose civil fines for (1) subjecting a long-term care facility resident or community long-term care services recipient to retaliation for filing a complaint, or (2) denying the Long-Term Care Ombudsperson access to a long-term care facility or community-based long-term care site to investigate a complaint. Currently, only criminal fines can be leveled against a facility. The budget requires the Attorney General, at the request of the Director of Aging, to bring and prosecute a judgment or a civil action to collect any unpaid fines.

Residential State Supplement (490412)

This line item provides the majority of funding for the RSS Program. In addition to the GRF appropriations provided in line item 490412, some funds are also provided

for the program through appropriation item 490610, PASSPORT/Residential State Supplement, and appropriation item 490623, Long Term Care Budget.

The RSS Program provides cash assistance and case management to aged, blind, or disabled adults who reside in approved living arrangements including group homes, adult care facilities, residential care facilities, and other facilities licensed by the Ohio Department of Mental Health. To be eligible for the program, a person must be 18 years of age or older, not need 24-hour supervision, require a protective level of care, require less than 120 days of skilled nursing care, and not have a monthly income greater than \$800 for most individuals. Also, persons may not have more than \$1,500 in assets. Clients receive the supplemental payment directly and then pay the RSS providers themselves. The monthly cash supplement is used together with the individual's personal income to pay for an alternative living arrangement. The monthly supplement makes up the difference between the individual's income and the financial need standard set for the appropriate RSS living arrangement.

Although ODA administers the RSS Program and appropriations are made in ODA's budget, the Ohio Department of Job and Family Services (ODJFS) is responsible for making the payments to recipients. ODA transfers its RSS funding to ODJFS. ODJFS then issues RSS payments from line item 600618, Residential State Supplement Payments.

As of June 30, 2009, the RSS caseload was 1,778 and there were 138 individuals on the waiting list. Individuals who are eligible for RSS also receive a Medicaid card.

The budget provides funding of \$5.2 million in each fiscal year in GRF line item 490412, a decrease of 40.0% over FY 2009 expenditures. The budget specifies that line item 490610 is allowed to be used for RSS; however, no specific dollar amounts were earmarked or set aside for RSS. The majority of funding in line item 490610 will be devoted to PASSPORT. Funds in both of these line items may be used by ODA to transfer cash for RSS to ODJFS to make benefit payments and to the Department of Mental Health for training for adult care facilities serving residents with mental illness. ODA has stated that no new enrollment is allowed into the program as of July 20, 2009. If slots open up through disenrollment, the slot will not be filled. ODA anticipates this applying over the course of the biennium unless an individual in a nursing facility chooses to enroll in RSS through the Home First provision.

Long-Term Care Activities (490423, 490602, 490610, and 490623)

The line items referenced above are dedicated to funding long-term care programs such as PASSPORT, Assisted Living, Choices, and PACE.

GRF line item 490423 and federal line item 490623 are used for the Medicaid waiver programs PASSPORT, Assisted Living, and Choices. Funding in those line items is also used for PACE. These line items were established to create a flexible

budget structure as one of the recommendations of the Unified Long-Term Care Budget Workgroup, which was created in H.B. 119 of the 127th General Assembly. Previously, funds were appropriated in line items specific to each program.

Line item 490610, PASSPORT/Residential State Supplement, is used primarily for the PASSPORT Program. However, funds may also be used for the RSS Program. The source of revenue for Fund 4J40 is the franchise permit fee for nursing home facilities. ODJFS collects this fee on a quarterly basis and transfers a portion of the revenue to ODA. The budget flat funds this line item with an appropriation of \$33.3 million.

Line item 490602, PASSPORT Fund, is used for the PASSPORT Program. The source of revenue is a portion of the Horse Racing Excise Tax. The budget provides funding of \$4.4 million in each fiscal year, which is an increase of 74.9% over FY 2009 expenditures. The increase in appropriation is to allow ODA to access the cash balance in the fund and use it for the PASSPORT Program.

The table below shows FY 2009 spending for the PASSPORT, PACE, Assisted Living, and Choices programs by fund group and line item. Under the unified long-term care budget, the budget combines the three GRF and three federal line items that fund these programs into one GRF and one federal line item. The two state special revenue fund line items listed in the table remain separate.

FY 2009 Long-Term Care Spending			
Fund Group	Fund ALI	ALI Name	FY 2009
GRF	GRF 490403	PASSPORT	\$128,155,783
	GRF 490421	PACE	\$9,721,839
	GRF 490422	Assisted Living	\$9,541,485
		Total GRF	\$147,419,107
FED	3C40 490607	PASSPORT	\$263,005,365
	3C40 490621	PACE – Federal	\$14,330,719
	3C40 490622	Assisted Living – Federal	\$13,555,194
		Total FED	\$290,891,278
SSR	4J40 490610*	PASSPORT/Residential State Supplement	\$30,428,928
	4U90 490602	PASSPORT Fund	\$2,530,484
		Total SSR	\$32,959,468
		TOTAL	\$471,269,853

* \$2.84 million in the fund was used for the RSS Program.

As seen in the table below, despite the large fluctuations in GRF and federal appropriations over the biennium, total appropriations for PASSPORT, PACE, Assisted Living, and Choices, when combined, increase each year. The fluctuation in GRF and federal appropriations is attributable to the impact of the increased federal Medicaid reimbursement, or enhanced Federal Medical Assistance Percentage (FMAP), that Ohio

is to receive for FY 2010 and the first half of FY 2011. Because of the increased federal reimbursement, GRF appropriations are reduced for FY 2010 and for the first half of FY 2011. When the increased federal reimbursement ends halfway through FY 2011, the GRF appropriations are restored to more normal levels.

Comparison of Long-Term Care Funding, FY 2009-FY 2011					
Fund Group	FY 2009	FY 2010	% Change	FY 2011	% Change
GRF	\$147,419,107	\$97,916,967	(33.6%)	\$134,317,603	37.2%
FED	\$290,891,278	\$350,162,957	20.4%	\$340,193,418	(2.9%)
SSR*	\$32,959,468	\$34,853,953	5.7%	\$34,853,953	0.0%
Total	\$471,269,853	\$482,933,877	2.5%	\$509,364,974	5.4%

*LSC assumes that \$2.84 million in each fiscal year in Fund 4J40 will be used for the RSS Program.

At the funding levels provided, ODA anticipates that 680 new enrollments will be possible in each month. The figure was based on enrollment data from FY 2009. Thus, this figure could need to be adjusted in the future if variations in costs occur. Each PASSPORT Administrative Agency will be provided with a monthly enrollment maximum for their area. ODA has stated that the natural enrollment onto the program could be over 1,000 per month or 300 to 350 greater than the 680 monthly enrollments supported. Thus, the program will operate with a waiting list. There will be one waiting list and participants will be enrolled onto the program of their choice on a "first come first served basis." Individuals in nursing facilities will be enrolled onto programs through the Home First provision.

The budget contains several provisions that affect long-term care programs. Some of these are highlighted below.

The budget requires the Director of the Ohio Department of Job and Family Services to seek federal approval to consolidate Assisted Living, Choices, and PASSPORT into one Medicaid waiver. However, the programs are to be operated as separate waiver programs until the federal approval has been obtained.

The budget establishes a Home First component for PACE. ODA anticipates this to become operational October 16, 2009. Home First currently permits individuals who are on the waiting list for PASSPORT, Assisted Living, and RSS, and living in a nursing facility, to receive priority enrollment onto one of these programs. Under the budget, PASSPORT, PACE, RSS, and Assisted Living enrollment through Home First will be reimbursed through transfers from Fund 5R20, Nursing Facility Stabilization, used by ODJFS, to Fund 4J40, PASSPORT/Residential State Supplement. The budget also authorizes additional expenditures from Fund 3C40, PASSPORT, when receipts credited to the fund exceed appropriated amounts.

The budget allows individuals to request that home-delivered meals provided under PASSPORT be kosher. After such a request has been made, ODA or the entity providing the meals, must ensure the meal is kosher. The reimbursement rate for these equals the rate applied to home-delivered therapeutic meals.

The budget also requires that the Choices Program be available statewide. This is of course subject to federal approval.

The budget provides that a long-term care consultation may be provided to a nursing facility resident regardless of the source of payment being used for the resident's care in the nursing facility. ODA or the program administrator is required to provide consultation to an individual identified by ODA or the administrator as being likely to benefit from a consultation. To assist in making this determination, the budget provides that ODA or the administrator is to have access, except as limited under state or federal law, to data collected from a nursing facility's assessment of its residents. A consultation is not required if an individual refuses to cooperate. Additionally, ODA is allowed to fine a nursing facility for denying access to the facility or to a resident of the facility as needed to perform a consultation or implement the program. ODA is permitted to establish procedures to assist an individual in accessing all sources of care and services that are appropriate and for which the individual is eligible. Additionally, the bill permits ODA to establish procedures for periodic or follow-up consultations for nursing facility residents.

The budget eliminates the statutory limit (1,800) on the number of individuals who may participate in the Assisted Living Program. However, the bill specifies that enrollment may not exceed any limit set by the federal government.

The budget also specifies that the Director of Aging may expand PACE to regions beyond those currently served by the two current sites. However, when expanding PACE, the Director is prohibited from decreasing the number of PACE participants in currently participating areas below the number enrolled in PACE on July 1, 2008.

Each of the Medicaid-funded programs covered in this section are discussed individually in more detail below.

PASSPORT

The PASSPORT (Pre-Admission Screening System Providing Options and Resources Today) Program provides (1) screening for individuals seeking placement in a nursing facility and (2) community-based long-term care services. The PASS (Pre-Admission Screening System) portion of PASSPORT is responsible for screening any Ohioan seeking entry into a Medicaid nursing facility. These screens assess the individual's needs and determine their level of care. After the screenings, individuals are provided with information about options available to meet their long-term care

needs and information about factors to consider in making long-term care decisions. The screening and assessment component at the AAA serves as a portal to all programs operated by ODA. The PORT (Providing Options and Resources Today) is the component that directly provides Medicaid long-term care services.

PASSPORT is a home and community-based Medicaid waiver that enables older individuals to stay at home by providing them with in-home long-term care services. To be eligible for the program, the person must be over age 60 and meet Medicaid eligibility for nursing home care. In addition, the person must be frail enough to require a nursing home level of care and have a physician's consent that the person is able to safely remain at home. Services covered on the PASSPORT waiver are as follows: personal care, homemaker, home delivered meals, adult day services, transportation, social work and counseling, nutrition consultant, independent living assistance, emergency response systems, home chores and repairs, medical supplies and equipment, and adaptive and assistive equipment.

As discussed earlier, under the Medicaid Program, the federal government reimburses allowable expenditures according to a state's Federal Medical Assistance Percentage (FMAP). State expenditures are billed to the federal government to "draw down" federal funds as reimbursement. The Centers for Medicare and Medicaid Services (CMS) in the United States Department of Health and Human Services annually sets the FMAP for each state. Administrative costs related to running Medicaid programs are reimbursed at a lower rate, with some exceptions, when compared to reimbursement for direct health care services.

According to ODA, average service costs for PASSPORT are \$11,459 per year (no administration included). Average service costs for nursing facilities are estimated at \$46,906 per year net of recipient liability or \$55,969 per year not including offsetting recipient liability. As of June 30, 2009, the census for the PASSPORT Program was 28,760.

Choices

Like PASSPORT, Choices is a home and community-based Medicaid waiver that enables older individuals to stay at home by providing in-home long-term care services. However, unlike PASSPORT, Choices is "consumer-directed." Consumer direction is a philosophy that allows individuals and families greater choice, control, and responsibility for their services. Choices allows individuals to recruit, hire, schedule, and if necessary, fire their worker. The case manager still has a major role in assessing the consumer's needs and working with the consumer to identify ways of meeting those needs. Choices is limited to individuals already enrolled on the PASSPORT waiver and is currently only available in four geographic areas in the state: AAA 6, which covers

central Ohio, AAA 7, which covers southern Ohio, AAA 8, which covers southeastern Ohio, and AAA 4, which covers the Toledo area in northwestern Ohio.

Assisted Living

The Assisted Living Program was created in H.B. 66 of the 126th General Assembly and began July 1, 2006. The program provides a setting that gives the person a home-like environment in a community living setting. Assisted Living is geared to those individuals who need extra help or supervision in their day-to-day lives but who do not require the 24-hour care provided in a nursing facility. The program is only available in residential care facilities that are licensed by the Department of Health. Facilities wishing to participate in the Assisted Living Program are also certified by the Department of Aging. The principal additional certification requirement is that the room is single occupancy, has a locking door, private bathroom with shower and tub, and has an area for socialization. To be eligible for the program, a person must be a current nursing facility resident or existing Medicaid waiver participant, be age 21 or older, need hands-on assistance with certain activities of daily living such as dressing and bathing, be able to pay room and board, and meet the financial criteria for Medicaid eligibility.

The program provides two services. The first is assistance with activities and independent activities of daily living, as well as other activities and services to support the individual. The program also provides transition services: furnishings and household goods to help a person in setting up their assisted living space. The transition services are a one-time only expenditure and are given to individuals leaving a nursing facility and moving to an assisted living facility.

As of June 30, 2009, the program census was 1,423. In March of 2007, there were 50 facilities certified as Assisted Living providers. That number has risen to 169 as of January 31, 2009. According to ODA, average service costs for Assisted Living are \$18,516 per year (no administration included).

PACE

PACE provides high quality home and community-based care, thereby allowing seniors to live in the community. There are currently two PACE sites – Tri-Health Senior Link, which is in Cincinnati and Concordia Care, which is in Cleveland. PACE is a managed care program. The PACE sites provide participants with all of their needed health care, medical care, and ancillary services at a capitated rate. All PACE participants must be 55 years of age or older and qualify for a nursing home level of care. The PACE sites assume full financial risk for the care of the participants. Indeed, if PACE participants require nursing facility care, the PACE site continues to be responsible and pays for the service out of the capitated rate. As a result, there is an

incentive that a broad range of preventive and community-based services be provided that are alternatives to more costly care.

The program is authorized through the Medicaid state plan and operated under an agreement with the federal government – Centers for Medicare and Medicaid Services. PACE is unique in that it is the only program that provides managed care of both Medicare and Medicaid services. PACE average service costs are \$34,040 per year. As of June 30, 2009, there were 238 individuals on the program and five on the waiting list for services at the Cleveland facility. At the Cincinnati facility, there were 453 participants and 38 on the waiting list.

Long Term Care Consumers Guide (490613)

This line item is used to publish the web-based Ohio Long Term Care Consumers Guide. Fund 5K90, Long Term Care Consumers Guide, consists of fees paid by nursing facilities and residential care facilities.

The goal of the guide is to provide timely, comparative information about the 567 residential care facilities and almost 1,000 nursing homes serving Ohioans. The site provides information on each facility's inspection report from the Ohio Department of Health, along with statewide and district averages. The site also provides consumer satisfaction information, which is based on surveys of families and residents. The consumer satisfaction surveys provide quality incentive measures used by ODJFS in its quality incentive payment for nursing facilities. Additionally, nursing homes can add information about bed capacity, policies, staffing levels, specialization, and quality. In December of 2007 and 2008, ODA released the results of the Nursing Home and Residential Care Facility Resident Satisfaction Survey. In FY 2008, more than 77,330 users visited the web site. In total, there were 123,068 "visits."

The budget provides funding of \$820,400 in each fiscal year, which is an increase of 218.4% over FY 2009 expenditures. There was little spending in FY 2009, as most of the work for the 2009 survey will be done in FY 2010.

Senior Support

This category of appropriations is used to help seniors live independently in their own homes and communities and to support the efforts of caregivers. The line items include funding for services such as Alzheimer's respite, and congregate and home-delivered meals.

Appropriations for Senior Support				
Fund	ALI and Name		FY 2010	FY 2011
General Revenue Fund				
GRF	490411	Senior Community Services	\$5,934,134	\$5,934,134
GRF	490414	Alzheimer's Respite	\$4,131,595	\$4,131,595
GRF	490506	National Senior Service Corps	\$268,237	\$268,237
General Revenue Fund Subtotal			\$10,333,966	\$10,333,966
General Services Fund Group				
4800	490606	Senior Community Outreach and Education	\$372,677	\$372,677
General Services Fund Group Subtotal			\$372,677	\$372,677
Federal Special Revenue Fund Group				
3220	490618	Federal Aging Grants	\$10,200,000	\$10,200,000
3M40	490612	Federal Independence Services	\$63,655,080	\$63,655,080
Federal Special Revenue Fund Group Subtotal			\$73,855,080	\$73,855,080
State Special Revenue Fund Group				
5W10	490616	Resident Services Coordinator Program	\$330,000	\$330,000
State Special Revenue Fund Group Subtotal			\$330,000	\$330,000
Total Funding: Senior Support			\$84,891,723	\$84,891,723

Senior Community Services (490411)

This GRF line item is used to provide community-based services to assist seniors to live independently in their own homes and communities as long as possible. These GRF funds are used to (1) supplement federal Title III funds and (2) satisfy the state's match obligations to draw down various federal funds. The program targets individuals who are frail and impaired and not served through PASSPORT. According to ODA, 80% of the individuals who receive senior community services have incomes of less than 150% of the federal poverty level. Recipients may contribute, based on a sliding fee scale, to the cost of their services, which include the following:

- Personal care, homemaker, adult day and chore services;
- Home-delivered and congregate meals;
- Case management and care coordination;

- Transportation and escort services for medical visits, essential shopping, and other transportation;
- Information reporting;
- Home maintenance and repair; and
- Housing coordination services.

The budget provides funding of \$5.9 million in each fiscal year, a decrease of 40.0% from FY 2009 expenditures. ODA is currently working with the federal Administration on Aging to try to ensure that no federal funds are lost as a result of this reduction.

Alzheimer's Respite (490414)

Appropriations in GRF line item 490414, Alzheimer's Respite, are used to provide respite, support, and education to caregivers of people with Alzheimer's disease or other dementia. These funds also provide the federally required 25% match for the National Family Caregiver Support Program. The budget provides funding of \$4.1 million in each fiscal year, a 4.6% increase over FY 2009 expenditures.

According to the Alzheimer's Association, one in ten individuals over 65 and nearly half of those over 85 are affected by this disease. A person with Alzheimer's will live an average of eight years and as many as 20 years following the onset of symptoms. More than seven out of ten people with the disease live at home, where nearly 75% of care is provided by family and friends. Caregivers of individuals with Alzheimer's or other dementia provide more care than caregivers of other older people. One study found that 40% of caregivers of individuals with Alzheimer's and other dementia provided more than 40 hours a week of assistance as compared to 28% of caregivers of other older people.

National Senior Service Corps (490506)

This GRF line item provides a state subsidy for senior volunteer programs. The National Senior Service Corps Program, which is under the jurisdiction of the Corporation for National and Community Service, provides volunteer opportunities to older adult volunteers. The National Senior Service Corps Program is made up of the following three subprograms: the Retired Senior Volunteer Program (RSVP), the Foster Grandparent Program, and the Senior Companion Program. ODA allocates funds in the following manner: 50% to the RSVP, 25% to the Foster Grandparents Program, and 25% to the Senior Companion Program. Over 18,000 older Ohioans provide services around the state through these programs.

The budget provides funding of \$268,237 in each fiscal year, a decrease of 20.0% from FY 2009 expenditures. This could impact efforts to recruit and retain participants in the program.

Descriptions for each of the subprograms are provided below.

RSVP

RSVP provides Ohioans age 55 and older with volunteer opportunities in their communities that match their skills and availability. Some volunteer activities include building houses, immunizing children, and protecting the environment. Volunteers in the program do not receive any compensation.

Foster Grandparent Program

The Foster Grandparent Program connects Ohioans age 60 and older with young people with exceptional needs. Volunteers in the program commit approximately 20 hours per week and receive a small stipend if they meet certain income eligibility levels to offset the cost of volunteering (\$2.65 per hour).

Senior Companion Program

The Senior Companion Program brings together seniors age 60 and older with adults in their community who have difficulty with the tasks of daily living. The volunteers assist with shopping and light chores, interacting with doctors, helping with transportation to appointments, or simply providing friendly interactions. They also offer respite for caregivers. Volunteers in this program commit approximately 20 hours per week and also receive a small stipend if they meet certain income eligibility levels to offset the cost of volunteering (\$2.65 per hour).

Senior Community Outreach and Education (490606)

This line item supports statewide annual events including Senior Citizens' Day, the Governor's Conference on Aging, Senior Citizens Hall of Fame, and State Fair activities. Registration fees and other revenues from special events activities are deposited in Fund 4800, Senior Citizens Services Special Events.

The budget provides funding of \$372,677 in each fiscal year, an increase of 826.6% from FY 2009.

Federal Aging Grants (490618)

This line item is used to provide meal reimbursement, senior employment, elder care, home care, elder abuse prevention, pension counseling, preventative health care, in-home services, Home Energy Assistance Program (HEAP) outreach, senior health insurance, and Alzheimer's care to those who qualify. A variety of federal grants are used to provide funds for this line item such as the Senior Community Service Employment Program grant, Senior's Farm Market Nutrition Program grant, and the Senior Community Service Employment Program grant.

The budget provides funding of \$10.2 million in each fiscal year, an increase of 32.2% over FY 2009 expenditures.

Three of the programs funded with this line item are discussed in more depth below.

Senior Farmers' Market Nutrition Program

The Senior Farmers' Market Nutrition Program is funded with a grant from the U.S. Department of Agriculture. The program provides nutrition information and vouchers for locally grown produce to income-eligible adults aged 60 and older in 16 counties. The vouchers can be redeemed through authorized farmers selling produce at farmers' markets and roadside stands.

HEAP

HEAP provides financial assistance to low-income residents to help meet heating costs. The Ohio Department of Development manages HEAP and provides funds each year to ODA for HEAP outreach. ODA provides outreach grants to local AAAs to distribute applications, assist applicants with the forms, and promote the program.

Senior Community Services Employment

The Senior Community Services Employment Program is a training and work experience program that places eligible individuals in temporary nonprofit or governmental jobs. To be eligible, an individual must be age 55 or older and cannot have an annual income that exceeds 125% of the federal poverty level. In FY 2008 and FY 2009, the Department approved 512 positions. According to ODA, participants work approximately 20 hours per week in 31 Ohio counties. One community-based organization was selected to provide program administration.

Federal Independence Services (490612)

This line item provides for social services for older adults, as well as congregate and home-delivered meals. Fund 3M40, Federal Supportive Services, consists of Older Americans Act (OAA) Title III Supportive Services, In-Home Services, Preventive Health, Caregiver Support, Elder Abuse Prevention, and Ombudsman Services funds.

The federal OAA funds supportive services (Title III B), congregate and home-delivered meals (Title III C), disease prevention and health promotion (Title III D), and the National Family Caregiver Support Program (Title III E). The Nutrition and Support Services Program includes funding under Title III B, C, and D. Some of the services authorized by Title III of the OAA include the following: chore services, counseling, adult day care, education, employment, escort, friendly visitor, health services, home health aide, home maintenance, homemaker, information/referral, legal services, congregate meals, home-delivered meals (Meals on Wheels), outreach, protective services, recreation, respite care, telephone reassurance, and transportation. The purpose of these funds is to help older adults maintain their physical health and

prevent the onset of disabling disease. As a result, these funds are also used to support exercise classes, walking programs, and other wellness activities at local senior centers.

The budget provides funding of \$63.7 million in each fiscal year, an increase of 26.9% over FY 2009 expenditures.

Resident Services Coordinator (490616)

The line item is used to support the Resident Services Coordinator Program. Fund 5W10, Resident Services Coordinator Program, receives a grant each year from the Ohio Housing Trust Fund in the Ohio Department of Development. ODA awards funds to eight local sub-grantee agencies, which employ, train, monitor, and supervise 18 part-time service coordinators. The coordinators provide information and referrals, not services, to low-income and special-needs tenants, including the elderly, who live in financially-assisted rental housing units. Additionally, the program helps those individuals identify and obtain community services and benefits for which they are eligible.

The budget provides for funding of \$330,000 in each fiscal year. This should allow for program activities to be continued at current levels.

Ohio's Best Rx

The appropriations in this category support the Ohio's Best Rx Program, which provides prescription drug savings to eligible individuals. The category also includes appropriations for the Golden Buckeye Card Program.

Appropriations for Ohio's Best Rx				
Fund	ALI and Name		FY 2010	FY 2011
State Special Revenue Fund				
5AA0	490673	Ohio's Best Rx Administration	\$202,712	\$0
State Special Revenue Fund Subtotal			\$202,712	\$0
Total Funding: Ohio's Best Rx			\$202,712	\$0

Ohio's Best Rx Administration (490673)

This line item funds the Ohio's Best Rx Program. Fund 5AA0, Ohio's Best Rx Administration, consists of revenues from pharmaceutical manufacturer drug rebates and point-of-sale order fulfillment fees.

The budget provides funding of \$202,712 in FY 2010, which is a decrease of 84.1% from FY 2009 expenditures. The budget repeals statutes dealing with the program. However, the budget allows the Director of Aging to contract with any person for the operation of a drug discount program similar to the Best Rx Program. A cash transfer of \$400,000 from Fund 5AA0 to the GRF occurred on August 18, 2009. However, the fund will remain open to allow for accounts to be settled. Fund 5AA0 is abolished on October 1, 2009. ODA will continue to operate the Golden Buckeye Card Program through line item 490321.

Ohio Community Service Council

The appropriations in this category fund the operations and programs of the Ohio Community Service Council.

Appropriations for Ohio Community Service Council				
Fund	ALI and Name		FY 2010	FY 2011
General Revenue Fund				
GRF	490409	AmeriCorps Operations	\$147,034	\$147,034
General Revenue Fund Subtotal			\$147,034	\$147,034
Federal Special Revenue Fund				
3R70	490617	AmeriCorps Programs	\$8,870,000	\$8,870,000
Federal Special Revenue Fund Subtotal			\$8,870,000	\$8,870,000
State Special Revenue Fund				
6240	490604	OCSC Community Support	\$470,000	\$470,000
State Special Revenue Fund Subtotal			\$470,000	\$470,000
Total Funding: Ohio Community Service Council			\$9,487,034	\$9,487,034

Ohio Community Service Council (490409)

This line item supports the operating expenses for the Ohio Community Service Council. The Council operates as a semi-autonomous agency, however; ODA acts as the fiscal agent for the Council. The Council manages the federally funded AmeriCorps Program in Ohio and promotes volunteerism and community service efforts across the state. Some funds from Federal Fund 3R70, which is discussed below, are used for administration of the AmeriCorps Program.

The budget provides funding of \$147,034 in each fiscal year, a decrease of 15.5% from FY 2009 expenditures. The budget removes ODA from acting as the fiscal agent for the Council. The Council is required to enter into a written agreement with another state agency to serve as the fiscal agent. The Governor is required to be informed before any agreement and before the appointment of an Executive Director.

AmeriCorps Programs (490617)

This line item primarily supports the AmeriCorps Program, with a portion of the appropriation also going to other related volunteer programs administered by the Council. Revenues for Fund 3R70, AmeriCorps Programs, come from federal grants. The AmeriCorps Program is funded solely with federal funds. Fund 3R70 also provides for management expenses related to the program.

AmeriCorps provides individuals with educational awards for college (\$4,725) in return for one year of community service. A hallmark of AmeriCorps from its inception in 1994 has been the idea of local control. Hence, the potential sub-grantees for funds are required to solicit community input to determine the most pressing local needs that

could be addressed by an AmeriCorps project. The most common types of projects are tutoring of children and adults, natural resource preservation, home building and renovation, and food distribution projects. A portion of the funds distributed to states by the federal government is based on population, while the other portion is through a competitive process based on program quality.

The budget provides funding of \$8.87 million in each fiscal year, which is an increase of 55.6% over FY 2009 expenditures.

OCSC Community Support (490604)

This line item supports the Ohio Citizen Corps initiative. The Council was identified as the key agency for a statewide system of recruiting, registering, training, and deploying volunteers for response in declared emergencies. The Council has an existing infrastructure and database for volunteer disaster response encompassing four regional coordinating organizations. Revenues from gifts, donations, and an inter-agency contract with the Department of Health are placed into Fund 6240, OCSC Community Support Fund. The Council provides the Department with volunteer recruitment, registration, and management services under this inter-agency service agreement.

The budget provides funding of \$470,000 in each fiscal year, a decrease of 35.1% from FY 2009 expenditures. The Council requested this funding level due to fluctuations in the contract amounts received from the Department of Health. If additional revenues are forthcoming, the Council will go to the Controlling Board for additional appropriation.

Operating Expenses

The funds in this category provide for operating expenses for ODA's central office. This includes things such as rent, equipment, and related expenses.

Appropriations for Program Support				
Fund		ALI and Name	FY 2010	FY 2011
General Revenue Fund				
GRF	490321	Operating Expenses	\$1,709,817	\$1,709,817
General Revenue Fund Subtotal			\$1,709,817	\$1,709,817
Total Funding: Program Support			\$1,709,817	\$1,709,817

Operating Expenses (490321)

This line item supports operating expenses for ODA. The budget provides funding of \$1.7 million in each fiscal year, a decrease of 24.8% from FY 2009 expenditures. Some of the funding in 490321 is dedicated specifically for program-related activities within other program areas and is used as required match to leverage federal or other funds. Some additional funding for the Program Support may be provided for in line item 490606, Senior Community Outreach and Education.

AGE.docx/th

FY 2010 - 2011 Final Appropriation Amounts

All Fund Groups

Line Item Detail by Agency			FY 2008	FY 2009	FY 2010 Appropriations	% Change FY09 - FY10	FY 2011 Appropriations	% Change FY10 - FY11
Report For: Main Operating Appropriations Bill			Version: Enacted					
AGE Department of Aging								
GRF	490321	Operating Expenses	\$ 2,720,160	\$ 2,273,759	\$ 1,709,817	-24.80%	\$ 1,709,817	0.00%
GRF	490403	PASSPORT	\$ 121,671,786	\$ 128,155,783	\$ 0	-100.00%	\$ 0	N/A
GRF	490406	Senior Olympics	\$ 14,856	\$ 14,856	\$ 0	-100.00%	\$ 0	N/A
GRF	490409	AmeriCorps Operations	\$ 176,052	\$ 173,956	\$ 147,034	-15.48%	\$ 147,034	0.00%
GRF	490410	Long-Term Care Ombudsman	\$ 488,629	\$ 556,534	\$ 535,857	-3.72%	\$ 535,857	0.00%
GRF	490411	Senior Community Services	\$ 9,995,789	\$ 9,870,157	\$ 5,934,134	-39.88%	\$ 5,934,134	0.00%
GRF	490412	Residential State Supplement	\$ 7,157,599	\$ 8,704,791	\$ 5,225,417	-39.97%	\$ 5,225,417	0.00%
GRF	490414	Alzheimer's Respite	\$ 4,158,042	\$ 3,951,608	\$ 4,131,595	4.55%	\$ 4,131,595	0.00%
GRF	490416	JCFS Community Options	\$ 250,000	\$ 238,125	\$ 0	-100.00%	\$ 0	N/A
GRF	490421	PACE	\$ 10,217,860	\$ 9,721,839	\$ 0	-100.00%	\$ 0	N/A
GRF	490422	Assisted Living Waiver	\$ 4,802,690	\$ 9,541,485	\$ 0	-100.00%	\$ 0	N/A
GRF	490423	Long Term Care Budget - State	\$ 0	\$ 0	\$ 97,916,967	N/A	\$ 134,317,603	37.18%
GRF	490440	Ohio's Best RX Start-Up Costs	\$ 1,282,434	\$ 22,483	\$ 0	N/A	\$ 0	N/A
GRF	490506	National Senior Service Corps	\$ 335,296	\$ 335,296	\$ 268,237	-20.00%	\$ 268,237	0.00%
General Revenue Fund Total			\$ 163,271,193	\$ 173,560,672	\$ 115,869,058	-33.24%	\$ 152,269,694	31.42%
4800	490606	Senior Community Outreach and Education	\$ 60,397	\$ 40,219	\$ 372,677	826.63%	\$ 372,677	0.00%
General Services Fund Group Total			\$ 60,397	\$ 40,219	\$ 372,677	826.63%	\$ 372,677	0.00%
3220	490618	Federal Aging Grants	\$ 6,691,514	\$ 7,717,013	\$ 10,200,000	32.18%	\$ 10,200,000	0.00%
3C40	490607	PASSPORT	\$ 205,224,294	\$ 263,005,365	\$ 0	-100.00%	\$ 0	N/A
3C40	490621	PACE-Federal	\$ 14,586,134	\$ 14,330,719	\$ 0	-100.00%	\$ 0	N/A
3C40	490622	Assisted Living-Federal	\$ 4,121,189	\$ 13,555,194	\$ 0	-100.00%	\$ 0	N/A
3C40	490623	Long Term Care Budget	\$ 0	\$ 0	\$ 350,162,957	N/A	\$ 340,193,418	-2.85%
3M40	490612	Federal Independence Services	\$ 45,481,066	\$ 50,169,906	\$ 63,655,080	26.88%	\$ 63,655,080	0.00%
3R70	490617	AmeriCorps Programs	\$ 6,359,542	\$ 5,699,011	\$ 8,870,000	55.64%	\$ 8,870,000	0.00%
Federal Special Revenue Fund Group Total			\$ 282,463,739	\$ 354,477,208	\$ 432,888,037	22.12%	\$ 422,918,498	-2.30%
4C40	490609	Regional Long-Term Care Ombudsman Program	\$ 816,384	\$ 722,419	\$ 935,000	29.43%	\$ 935,000	0.00%
4J40	490610	PASSPORT/Residential State Supplement	\$ 33,491,930	\$ 33,263,984	\$ 33,263,984	0.00%	\$ 33,263,984	0.00%

FY 2010 - 2011 Final Appropriation Amounts

All Fund Groups

Line Item Detail by Agency			FY 2008	FY 2009	FY 2010 Appropriations	% Change FY09 - FY10	FY 2011 Appropriations	% Change FY10 - FY11
AGE Department of Aging								
4U90	490602	PASSPORT Fund	\$ 2,993,582	\$ 2,530,484	\$ 4,424,969	74.87%	\$ 4,424,969	0.00%
5AA0	490673	Ohio's Best Rx Administration	\$ 202,712	\$ 1,274,418	\$ 202,712	-84.09%	\$ 0	-100.00%
5BA0	490620	Ombudsman Support	\$ 600,000	\$ 600,000	\$ 600,000	0.00%	\$ 600,000	0.00%
5K90	490613	Long Term Care Consumers Guide	\$ 1,008,192	\$ 257,684	\$ 820,400	218.37%	\$ 820,400	0.00%
5W10	490616	Resident Services Coordinator Program	\$ 315,847	\$ 22,573	\$ 330,000	1,361.91%	\$ 330,000	0.00%
6240	490604	OCSC Community Support	\$ 568,685	\$ 724,147	\$ 470,000	-35.10%	\$ 470,000	0.00%
State Special Revenue Fund Group Total			\$ 39,997,332	\$ 39,395,709	\$ 41,047,065	4.19%	\$ 40,844,353	-0.49%
Department of Aging Total			\$ 485,792,661	\$ 567,473,808	\$ 590,176,837	4.00%	\$ 616,405,222	4.44%