

2015 MIDTERM ADJUSTMENT SUMMARY

SDA62500 - State Department on Aging
11000 - General Fund

Priority	Adjustment Title	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
	REDUCTION				
1.00	Reallocate CHOICES State Part D funding from General Fund to Aging Insurance Fund	394,250	-76,250	318,000	-76,250
2.00	Reduce Elderly Nutrition Funding	2,508,842	-74,932	2,433,910	-74,932
3.00	Reduce Elderly Health Screening Program Funding	294,976	-294,976	0	-294,976
	ADJUSTMENT TOTAL	3,198,068	-446,158	2,751,910	-446,158

Head of Budgeted Agency (Signature)



September 03, 2013

Date submitted

Midterm Adjustments to the FY 2015 Budget - Reduction Adjustment

SDA62500 - State Department on Aging 11000 - General Fund

Reallocate CHOICES State Part D funding from General Fund to Aging Insurance Fund

Edith Prague, MSW, Commissioner
860-424-5992

Priority: 1
Creation Date: 10/18/2013

Description and Reason/Measure of Impact

This reduction option would reallocate \$76,250 of funding from the General Fund (thereby reducing the General Fund) to the Insurance Fund. This transfer would be offset totally by a reduction of \$100,000 from the Fall Prevention Program currently funded through the Insurance Fund. This reallocation to the Insurance Fund is appropriate considering the nature of counseling provided. Overall reduction to the Insurance Fund from elderly programs would be 5% (\$23,750). (See Fall Prevention Budget Option).

This option does not reduce state CHOICES funding or services, it merely reallocates the funding to come from the Insurance Fund.

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Client Contacts	16,480	16,480	16,480	0	16,480	0

Financials

Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
16260 - Programs for Senior Citizens	394,250	394,250	394,250	-76,250	318,000	-76,250
Total	394,250	394,250	394,250	-76,250	318,000	-76,250

Midterm Adjustments to the FY 2015 Budget - Reduction Adjustment

SDA62500 - State Department on Aging 11000 - General Fund

Reduce Elderly Nutrition Funding

Edith Prague, MSW, Commissioner
860-424-5992

Priority: 2
Creation Date: 10/18/2013

Description and Reason/Measure of Impact

With this reduction it is anticipated that 13,711 meals will be not be delivered and 162 older adults will not be served. With the cut in funding, contractors will need to reduce the number of meals that are served, reduce the number of days that meals are available and/or establish waiting lists for both the congregate and home delivered meal program. Some congregate sites may be forced to close for a day or altogether and some home delivered meals routes may be eliminated or consolidated. Additionally, the lack of funding will mean a reduction in the workforce that serves older adults at the same time that the older adult population is in the rise. Once eliminated, the probability that services resume is unlikely even if funds are restored.

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Consumers served	24,312	24,434	24,434	-162	24,272	-162
Meals delivered	2,067,069	2,077,405	2,077,405	-13,711	2,063,694	-13,711

Financials

Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
16260 - Programs for Senior Citizens	2,495,942	2,508,842	2,508,842	-74,932	2,433,910	-74,932
Total	2,495,942	2,508,842	2,508,842	-74,932	2,433,910	-74,932

Midterm Adjustments to the FY 2015 Budget - Reduction Adjustment

SDA62500 - State Department on Aging 11000 - General Fund

Reduce Elderly Health Screening Program Funding

Edith Prague, MSW, Commissioner
860-424-5992

Priority: 3
Creation Date: 10/18/2013

Description and Reason/Measure of Impact

The goal of the Elderly Health Screening Program is early detection and prevention of disease. Once early detection identifies the possibility of disease, linkages are established between the adult and the available community treatment services. For those uninsured or underinsured adults, this program provides a service to identify and manage chronic disease and to enable the older adult to remain in the home and community of their choice for as long as possible.

This reduction proposed for SFY 2015 will completely eliminate the Elderly Health Screening Program. Currently there are four (4) programs funded for Elderly Health Screening across the state. With the elimination of these four (4) programs in 2015, it is estimated that 1,622 individuals will not have access to these services and 5,006 units of elderly health screening services and prevention will not be received.

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Consumers Served	1,760	1,622	1,622	-1,622	0	-1,622
Health Screening Units provided	6,815	5,006	5,006	-5,006	0	-5,006

Financials

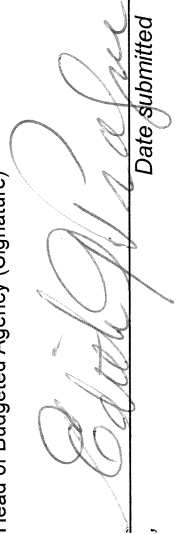
Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
16260 - Programs for Senior Citizens	268,030	294,976	294,976	-294,976	0	-294,976
Total	268,030	294,976	294,976	-294,976	0	-294,976

2015 MIDTERM ADJUSTMENT SUMMARY

SDA62500 - State Department on Aging
12004 - Insurance Fund

Priority	Adjustment Title	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
	REDUCTION				
1.00	Reduce Fall Prevention Funding	475,000	-100,000	375,000	-100,000
	ADJUSTMENT TOTAL	475,000	-100,000	375,000	-100,000

Head of Budgeted Agency (Signature)



September 03, 2013

Date Submitted

Midterm Adjustments to the FY 2015 Budget - Reduction Adjustment

SDA62500 - State Department on Aging 12004 - Insurance Fund

Reduce Fall Prevention Funding

Edith Prague, MSW, Commissioner
860-424-5992

Priority: 1
Creation Date: 10/18/2013

Description and Reason/Measure of Impact

The SDA proposes to reduce \$100,000 dollars from the Fall Prevention Program . The program allocation funded through the State Insurance Fund will decrease from \$475,000 dollars to \$375,000 dollars. This reduction alone exceeds the 5% reduction allowable from the Insurance Fund. However, Aging is also proposing that a portion of CHOICES Part D in the amount of \$76,250 be paid through the Insurance Fund rather than the General Fund, leaving an overall reduction of Aging programming cost to the Insurance Fund not to exceed the requisite 5% (\$23,750) as well as reduction of 5% to the General Fund. Please see CHOICES Budget Option.

The fall prevention program addresses the rising rates of falls and resulting disability among Connecticut's older adults. With funding provided under this legislation, the Yale CT Collaboration for Fall Prevention has undertaken several initiatives that have built upon previous research showing that admission to emergency departments and acute care hospitals can be reduced when older adults learn they are at risk, why they are at risk and are assisted in changing behaviors to reduce their risks.

This reduction option will curtail the ability to expand proven community-based fall prevention programs. This year a new fall prevention initiative will begin with the Northwestern CT and if funds are diminished, the continuation of this effort will be in jeopardy.

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Fall Prevention (Direct education and prevention interventions)	1,741	1,741	1,741	-366	1,375	1,375

Financials

Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
12565 - Fall Prevention	475,000	475,000	475,000	-100,000	375,000	-100,000
Total	475,000	475,000	475,000	-100,000	375,000	-100,000