

Alaska
Commission
on Aging



FY 2015
Annual
Report

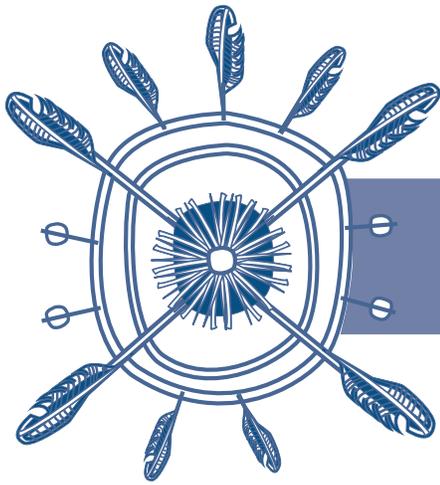


Healthy Aging in Alaska

Alaska's Road Map to Successful Aging



Alaska Commission on Aging



The mission of the Alaska Commission on Aging is to ensure the dignity and independence of all older Alaskans, and to assist them to lead useful and meaningful lives through planning, advocacy, education, and interagency cooperation.

Alaska Commission on Aging FY 2015 Annual Report

<http://www.alaskaaging.org/>

Bill Walker, Governor
State of Alaska

Valerie Davidson, Commissioner
Department of Health & Social Services

Denise Daniello, Executive Director
The Alaska Commission on Aging



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February 2016

*Photos courtesy of Alaska Department of Health and Social Services,
Alaska Commission on Aging, and Lesley Thompson, ACoA Planner.*

FY 2015 Annual Report

No longer do we need to wait for the pending “Silver Tsunami.” Alaska has the fastest growing population of people age 65 and older in the nation for six consecutive years and is projected to more than double by 2042 before declining.

Since 2010, the 60+ population has increased almost 27% and the 65+ population by 29%, while the total population in Alaska grew by 3.6%. We have had time to prepare for Alaska’s age wave and through collaborative efforts show signs that we are making progress developing policies to prepare for the surge of older Alaskans while promoting awareness of the untapped reservoir of resources that seniors bring to their communities.

This greater appreciation for the policy implications in Alaska shines through in the new Alaska State Plan for Senior Services, SFY2016-SFY2019, Alaska’s Roadmap to Address Alzheimer’s Disease and Related Dementias, in addition to efforts by the Department of Health and Social Services to expand and reform Alaska’s Medicaid health care delivery system to improve health outcomes for vulnerable Alaskans. We are pleased to present the Alaska Commission on Aging (ACoA) 2015 Annual Report, a resource for statistical data about the Alaska senior population, that provides information about prevailing trends impacting older Alaskans and describes activities of the Commission this year.

In collaboration with many partners over a 19-month statewide planning process, the ACoA developed the Alaska State Plan for Senior Services, SFY2016-SFY2019 to render a guide for the provision of senior services over the next four years and to satisfy a federal requirement of all states receiving Older American Act funds for their services. This Plan requires the active engagement of public and private stakeholders to achieve the goal of ensuring Alaska seniors can live safely and independently in their homes and communities as long as possible. In preparation for development of this State Plan, the Commission conducted a Senior Survey (2,280 respondents age 55 years and older), a Senior Provider Survey (85 provider respondents), and six Elder-Senior Listening Sessions (128 public member participants) statewide. Findings from the statewide needs assessment process highlighted the following themes:



Mary Shields
ACoA Chair,
Public Member
Anchorage

What suggestions can you offer to help prepare for a successful retirement?

“A successful retirement must be planned; not just the money needed, but also activities you might want to pursue. Pick two or three activities that you currently enjoy doing or would like to learn how to do: painting, gardening, volunteering, organizing activities for others, traveling, etc. and get involved in at least one of them before you retire. You’ve led a busy life for at least 45 years before you retired, don’t allow yourself to get bored once you have left the work (for money) arena.”



Edna DeVries
ACoA Commissioner,
Public Member,
Palmer



What is the most pressing challenge for Alaska seniors today?

"Availability of health services that fit with their medical insurance and the financial ability to support their health choices."

- 1. Access to affordable health care** was identified as the #1 most pressing issue facing older Alaskans today by 94% of the senior survey respondents. This is consistent with findings from the 2010 Alaska Senior Survey. Many seniors have health problems that require medical supervision. About three in five seniors reported that they experience an illness or disability that limits the range of activities they enjoy. Alaskans are living longer today – 72 years in 1980 compared to 78 years currently - and desire to live a long, healthy, productive, and meaningful life. Cognitive health is also important to healthy aging as serious threats to brain health caused by Alzheimer's and related forms of dementia increase with age.
- 2. Financial security** was rated as the second most important concern affecting Alaska seniors. Although Alaskan seniors are living longer and have more time to help grow the economy, contribute to their communities, and enjoy their families, longer lives can also challenge senior financial security by increasing the risk of outliving personal assets. Many older Alaskans struggle with economic security. Only 41% of those surveyed reported having enough income to meet all their monthly expenses and being able to afford unexpected costs. Another 44% of the respondents have enough to cover monthly living expenses but have very little left over for anything extra, especially to pay for an unexpected emergency expense, and 15% reported not having enough money to make ends meet. Although many seniors are retired (63% of the survey respondents), over one-third reported working full-time, part-time, or occasionally with many having no immediate plans for retirement.
- 3. Long-term services and supports** remain a priority. Overwhelmingly, older Alaskans prefer to remain independent in the community, with 72% planning to live in the same home as they age. Senior centers are the most widely used service by survey respondents for senior meals, transportation, information, age-appropriate activities, and hubs for social engagement. The availability of in-home services (64%) and supports for people with dementia and their family/natural caregivers (61%) were identified as services that need to be expanded by survey respondents that help seniors remain living safely at home.
- 4. Elder justice** is a critical component in protecting older Alaskans from financial exploitation, abuse, and neglect. Older people are more vulnerable to abuse and exploitation across all socio-economic, cultural, racial, and ethnic divisions. During the elder-

senior listening sessions, half of the participants indicated that either they personally, or someone they knew, had experienced elder abuse with 69% of those who reported this experience noting financial exploitation as the most common. The senior survey respondents similarly support the need for attention around this issue with 29% indicating they or someone they knew had experienced abuse, with financial exploitation as the top ranking form.



Marie Darlin
ACoA Commissioner,
Public Member,
Juneau

5. Senior housing was identified as an issue in need of improvement during the elder-senior listening sessions by all communities. The provider survey also identified assisted living for seniors with challenging behaviors resulting from dementia and mental illness and independent senior housing as services lacking in the continuum of care for Alaska seniors. Affordable senior housing, combined with appropriate home and community-based long-term supports, facilitates the ongoing independence of older Alaskans and is critical for many older people living on a fixed income.

Nationally, Alaska stands out as having a strong system of long-term support services. In 2014, AARP published a scorecard of state performance in long-term services and supports using a multidimensional approach to comprehensively measure performance overall and across diverse areas of performance. Alaska ranked fifth highest in the nation as having one of the most balanced programs that provides a broad array of home- and community-based alternatives, consumer directed services, and residential programs. Alaska's continuum of long-term support services promotes health and wellness, personal dignity, and provides a significant savings to the state by avoiding premature institutional placement.

Alaska's Aging and Disability Resource Centers together with the Senior Provider Network help seniors and their families navigate the service array and make informed choices regarding the services they receive. Alaska provides a critical safety net for those who are most vulnerable. Programs such as Senior Benefits, a monthly cash assistance program for persons age 65+ who income qualify, the Alaskans Living Independently waiver and Personal Care Assistance services for seniors who need assistance and meet eligibility requirements, as well as the senior grants programs administered by the Division of Senior and Disabilities Services for seniors 60+ years old who require assistance but do not qualify for Medicaid funded services.

What is the most pressing challenge for Alaska seniors today?

"We need to work for more senior involvement at the local level in identifying and providing needed services."

**FY 2015
Alaska Commission
on Aging Members**
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Mary Shields
Chair,
Public Member,
Anchorage

Rolf Numme
Vice Chair,
Public Member,
Wasilla

David Blacketer
Public Member,
Kodiak

Marie Darlin
Public Member,
Juneau

Edna DeVries
Public Member,
Palmer

Eleanor Dementi
Public Member,
Cantwell

Anna Frank
Public Member,
Fairbanks

Rachel Greenberg
Senior Service Provider,
Palmer

Gordon Glaser
Public Member,
Anchorage

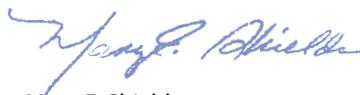
Duane Mayes
Director,
Senior and Disabilities
Services, Department of
Health and Social Services,
Anchorage

Paula Pawlowski
Executive Director, Serve
Alaska, Department of
Commerce, Community
and Economic
Development
Anchorage

Bob Sivertsen
Alaska Pioneer Home
Advisory Board Chair,
Ketchikan (Sept 2014)

We can prepare Alaska's health care delivery system for the demographic changes in our State's makeup as well as Alaska's fiscal challenges. Strategic investment in services, which focus at the front end of the continuum of care with prevention, primary care, and low-cost home and community-based services, promote senior wellness and lower the need for higher-cost chronic and acute care over the long-term. Further, providing meaningful training and supports for caregivers to assist them in their role of meeting the long-term care needs of their loved ones at home reduce the financial burden today and in the future. Success means planning and offering programs that support optimal aging by providing access to appropriate services and promoting greater opportunities for senior civic engagement. Rather than being overwhelmed by concerns of a growing older adult population, we can tap the power of aging and senior experience to improve our families, communities and the state as we go forward.

Sincerely,



Mary E. Shields
Chair of the Alaska Commission on Aging



Denise Daniello
ACoA Executive Director



Photo of the 2015 Alaska State Plan Advisory Committee, comprised of 34 members, with many participating by teleconference who are not shown here.

The Statutory Purpose of the Alaska Commission on Aging

The mission of the Alaska Commission on Aging is to ensure the dignity and independence of all older Alaskans, and to assist them to lead useful and meaningful lives through planning, advocacy, education, and interagency cooperation.

1. Subject to review by the Department of Health and Social Services, approve a comprehensive statewide plan that identifies and addresses the concerns and needs of older Alaskans and, with reference to the approved plan, prepare and submit to the governor and legislature an annual analysis and evaluation of the services that are provided to older Alaskans;
2. Make recommendations directly to the governor and the legislature with respect to legislation, regulations, and appropriations for programs or services that benefit older Alaskans;
3. Encourage the development of municipal commissions serving older Alaskans and community-oriented programs and services for the benefit of older Alaskans;
4. Help older Alaskans lead dignified, independent, and useful lives;
5. Request and receive reports and audits from state agencies and local institutions concerned with the conditions and needs of older Alaskans;
6. Offer assistance, on request, to the senior housing office in the Alaska Housing Finance Corporation in administration of the senior housing loan program and in the performance of the office's other duties; and
7. Provide to the Alaska Mental Health Trust Authority, for its review and consideration, recommendations concerning the integrated comprehensive mental health program for persons with Alzheimer's disease and related dementias and the use of the money in the mental health trust settlement income account.

FY 2015 Alaska Commission on Aging Staff

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Executive Director

Jon Erickson,
Planner II

Lesley Thompson,
Planner I

Sherice Cole,
Administrative Assistant II

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Duane Mayes
ACoA Commissioner,
Director of Senior &
Disabilities Services,
Anchorage



*"We are entering
challenging times as a
state and now is the time
we all come together to
ensure that the quality of
life for Alaskan seniors is
a priority."*

To accomplish its duties, the Commission may:

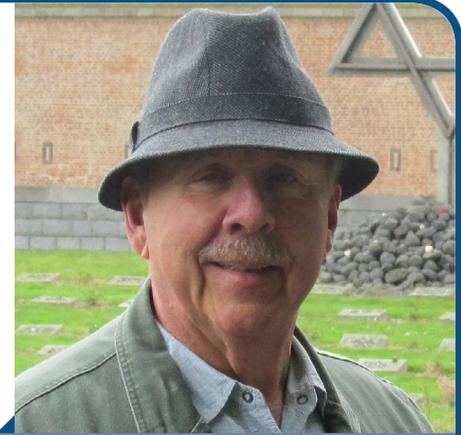
- a) Review, evaluate, and comment upon state programs concerned with the problems and the needs of older Alaskans;
- b) Collect facts and statistics, and make studies of conditions and problems pertaining to the employment, health, housing, financial security, social welfare, and other concerns that bear upon the well-being of older Alaskans;
- c) Provide information about public programs that would be of interest or benefit to older Alaskans;
- d) Promote community education efforts regarding the problems and concerns of older Alaskans;
- e) Consult and cooperate with persons, organizations, and groups interested in or concerned with programs of assistance to older Alaskans;
- f) Advocate improved programs of benefit to older Alaskans; and
- g) Recommend standards for levels of services for older Alaskans for programs administered by the department.

Charged by statute, ACoA makes recommendations directly to the Governor, the Legislature, and the Administration regarding legislation, regulations, and appropriations for programs and services benefiting Alaska seniors. The Commission is authorized to develop the four-year comprehensive Alaska State Plan for Senior Services required by the U.S. Administration on Community Living/ Administration on Aging for all states receiving federal funds from the Older Americans Act. In addition, the Commission serves as an advisory board to the Alaska Mental Health Trust Authority regarding issues and budget needs for Trust beneficiaries who are older Alaskans with Alzheimer's disease and related dementias, behavioral health conditions, mental illness, developmental disabilities, and brain injury.



Alaska Commission on Aging Members

The Alaska Commission on Aging (ACoA) consists of eleven members, seven of whom are public members appointed by the Governor to serve four-year terms with six members being age 60 years and older. Two seats are filled by the Commissioners of the Department of Health and Social Services and the Department of Commerce, Community and Economic Development, or their designees. The remaining seats are reserved for the Chair of the Pioneer Home Advisory Board and a senior services provider, regardless of age. The ACoA is supported by an office staff of four that includes the Executive Director, two Planners, and an Administrative Assistant.



Gordon Glaser
ACoA Commissioner,
Public Member,
Anchorage

What is the most pressing challenge for Alaska seniors today?

"Some aging Alaskans are more vulnerable, while others have medical or economic issues and must struggle to retain their dignity and purpose. We are challenged to make each life important to ensure that most Alaskans have food, health care, shelter and a valued place in the community. We share the concern as our State again faces a fiscal crisis. We know that part of that solution is "aging in place." It's what we want and is cheaper than an institution. That is a challenge we must meet and we will."



Eleanor Dementi
ACoA Vice Chair,
Public Member,
Cantwell



What is the best thing about aging in Alaska?

"Aging in Alaska is great because your friends are aging also and are still with you."

Alaska State Plan for Senior Services, SFY2016-SFY2019

Alaska's State Plan for Senior Services describes the programs and services available to older Alaskans, both those paid for by Older Americans Act funding and those paid by public funding through the State of Alaska. Based on the findings generated by the senior survey, provider survey, and elder-senior listening sessions, the State Plan Advisory Committee identified six overall goals that are supported by corresponding strategic objectives and performance measures to chart a path forward for senior services in Alaska. The ACoA and its partner agencies will plan and implement activities to address each of these goals over the life of the Plan.



Goal 1 Promote healthy aging and provide access to comprehensive and integrated health care.



Goal 2 Assist seniors with financial planning, pursuit of employment opportunities, and promotion of awareness and access to economic benefits and support services.



Goal 3 Protect vulnerable seniors from abuse, neglect, self-neglect, and exploitation.



Goal 4 Ensure seniors have access to quality, affordable, accessible, safe, and appropriate senior housing across the continuum of care.



Goal 5 Promote opportunities for meaningful aging, intergenerational connectivity, and civic engagement.



Goal 6 Provide person-centered, quality, and affordable home- and community-based long-term support services that provide seniors with the highest quality of life.

Vision Statement and Guiding Principles

The new Alaska State Plan for Senior Services identifies the following vision statement and guiding principles that will be used to plan and implement services for the well-being of older Alaskans.

Guiding Principles

- 1. Promote independence, empowerment, and choice.** Older Alaskans are recognized as a valuable resource as well as a powerful economic and political force affecting business and public policy direction. Wherever possible, we seek to strengthen the voice and participation of seniors on issues affecting them.
- 2. Keep seniors strong and healthy.** Seniors are given information, education, and resources to assist them in making healthy choices (including good nutrition, medication use, physical activity, community involvement, healthy relationships and peer support) that will reduce their risk of chronic disease, mental illness, and substance abuse and increase their ability to lead healthy and productive lives.
- 3. Target services to the most vulnerable seniors.** Service providers focus on outreach to frail elders, low-income seniors, minority seniors, non-English speakers, and those living in rural areas, ensuring that they are aware of and able to access services.
- 4. Offer a full continuum of care and housing.** Services are provided in each community or region to supply what seniors need at each stage of the continuum of care, from independent living through supportive home- and community-based services, and into assisted living and nursing facility care.
- 5. Highlight seniors' community contributions.** Above all, programs and services seek to acknowledge and support the abundant vital contributions of older Alaskans to their families, communities, and the State of Alaska. Seniors are one of Alaska's greatest assets; serving them increases their capacity to contribute to the well-being of all Alaskans.



Vision of the
Alaska Commission
on Aging

*The Alaska State Plan
for Senior Services,
SFY2016-SFY2019
builds on strong
partnerships to provide
high-quality, culturally-
sensitive, accessible
services for Alaskans
60 and above to live
healthy, independent,
meaningful lives in the
place and manner of
their choosing.*



Rachel Greenberg
ACoA Commissioner,
Senior Service Provider,
Palmer



How can employers prepare for an aging workforce?

"Alaska's employers value the contribution made by our mature workforce and attempts to keep them in the workforce longer. In addition to providing a flexible schedule to meet the demands of aging, including taking time off to take their loved ones to their appointments, employers can maintain quality services by encouraging our aging workforce to mentor the younger workforce."

An Emerging Public Health Priority: Alzheimer's Disease and Related Dementias

1 in 3 seniors in America who die in a given year has been diagnosed with Alzheimer's or another dementia.

(Alzheimer's Association 2015 Facts and Figures)

Alzheimer's disease and related dementias (ADRD) is a growing public health concern in Alaska as the senior population continues to boom as well as the number of people who live to advanced age. While age is the greatest risk factor, Alzheimer's is not a normal part of aging and age alone is not sufficient to cause the disease.

The likelihood of developing Alzheimer's doubles about every 5 years after age 65 with the risk being highest for persons age 85 and older. Approximately 46% of persons age 85+, or almost one in two, may have Alzheimer's disease. Approximately 71% of Alaskans with memory problems have not discussed this condition with their health care provider.

Alzheimer's, the most common form of dementia, is a degenerative brain disease that is caused by the death of brain cells and the atrophy of the brain. Other common related dementias include vascular, mixed dementia, Parkinson's, Lewy Body dementia, and frontotemporal dementia.

Risks for People with Dementia Who Live Alone

1 in 8

Alaskans with Cognitive Decline Live Alone



Increased Risk for:

Self-neglect

Falls

Wandering

Hospitalizations

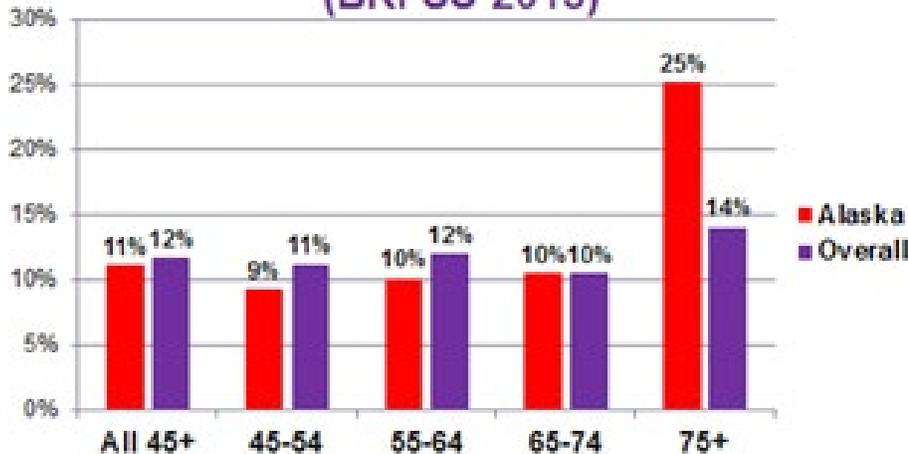
Source: ADRD Roadmap Stakeholder Meeting, 11.19.2015

Reprinted with permission from the National Alzheimer's Association, Public Policy Division

Currently, 6,400 Alaskans age 65+ are estimated to have Alzheimer's, or about 9% of the 65+ population, and nearly 8,000 may have ADRD (Alaska's Roadmap to Address ADRD 2014; National Alzheimer's Facts and Figures 2015). Symptoms typically associated with ADRD include loss of memory and language ability, loss of balance and thinking abilities, and changes in personality and behavior. Alzheimer's disease is a progressive disorder that impairs a person's ability to carry out daily activities and eventually leads to a person requiring round-the-clock care. Ultimately, Alzheimer's is fatal.

According to 2013 findings from the Perceived Cognitive Decline Module in the Alaska Behavioral Risk Factor Surveillance Survey conducted in Alaska and those compiled from seventeen other states, 25% of Alaskans age 75+ reported greater cognitive decline (as described by increased confusion and memory loss) as compared to 14% of persons age 75+ in the 17-state composite.

Percent Alaskans with Subjective Cognitive Decline vs. 17-State Composite (BRFSS 2013)



Source: ADRD Roadmap Stakeholder Meeting, 11.19.2015
 Reprinted with permission from the National Alzheimer's Association, Public Policy Division

Interestingly, Alaskans with subjective cognitive decline also reported fewer difficulties than their peers in functional abilities and performing daily activities, such as household chores and social activities, in the 17-state aggregated findings (National Alzheimer's Association, Public Division 2015).



Denise Daniello
 ACoA Executive Director,
 Juneau

The aging of Alaska presents both challenges and opportunities as the senior population increases and baby boomers come of age. Viewing older adults as a great resource, an asset, rather than as a liability is an important step for creating meaningful opportunities that actively engage Alaska seniors and baby boomers to use their talents and improve community life - so that we may all benefit from their life experience dividend.



Rolf Numme
ACoA Vice Chair,
Public Member,
Wasilla



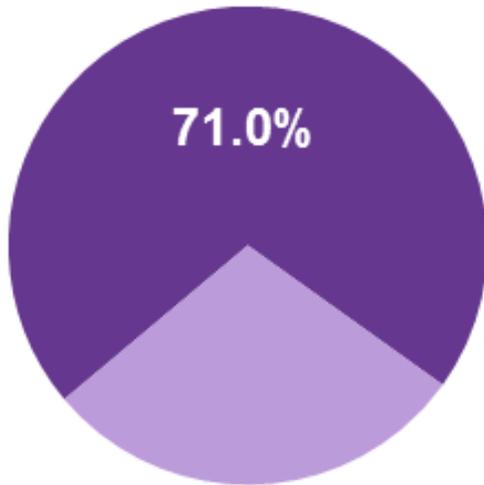
How can employers prepare for an aging workforce?

"Many adults are electing to remain active in the workforce longer. It is important for employers to consider how our state's aging workers can continue making meaningful contributions to their organizations. Employers also need to develop company policies that facilitate older employees maximizing their potential within the company."

Roadmap Implementation: Alaska's Roadmap to Address Alzheimer's Disease and Related Dementias is Alaska's first state plan that provides a comprehensive and coordinated approach to address the multiple and complex challenges that dementia presents in order to improve the quality of life for Alaskans and their caregivers impacted by this condition. The first year implementation of the Roadmap is underway. Among other efforts, stakeholders reported the following progress made during the 2015 Roadmap Annual Meeting:

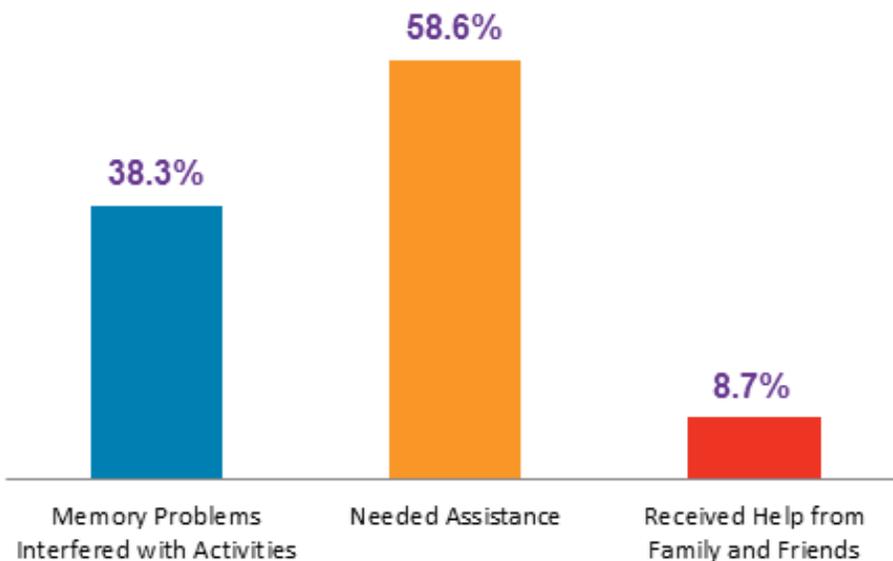
- ✧ **Education and support** provided to 2,795 Alaskans in 112 communities in 2015 (Alzheimer's Resource of Alaska) and development of the new Healthy Body and Healthy Brain public awareness effort (Alaska Mental Health Trust Authority and the Alaska Commission on Aging);
- ✧ **Development of a new Medicaid reform initiative** to sustain services for seniors and other vulnerable populations, including those with dementia, through the 1915(k) Community First Choice and the 1915(i) Home and Community-Based Services Medicaid State Plan options. Pending approval, the 1915(k) will bring in new federal funding for Medicaid services and the 1915(i) will help to expand the number of people with cognitive impairments eligible for Medicaid services. These options will help to refinance grant-funded services and preserve the State's general funds (Department of Health and Social Services, Division of Senior & Disabilities Services, Alaska Mental Health Trust Authority, and DHSS boards/council/commission);
- ✧ **HomeMAP**, an assessment tool that reviews homes for modifications and need for assistive technology in order to promote aging in place, is being piloted successfully in the Southeast and Kenai regions for possible expansion in other locations (Southeast Alaska Independent Living Center and the Kenai Independent Living Center); and
- ✧ **Alaska Geriatrics Interdisciplinary Leadership Development**, a training program aimed to advance knowledge and skills utilizing evidence-based interventions and interdisciplinary opportunities, is proceeding to improve systems of care to support health and quality of life for older Alaskans, including those with dementia (University of Alaska and Southcentral Foundation).

Percent of Alaskans with memory problems who have not talked to a health care



(Source: Alzheimer's Association, 2015 Alaska Fact Sheet based on data from Alaska 2013 Behavioral Risk Factor Surveillance Survey)

Percent of Alaskans with memory problems who say it created difficulties and burden



(Source: Alzheimer's Association, 2015 Alaska Fact Sheet based on data from Alaska 2013 Behavioral Risk Factor Surveillance Survey)



Paula Pawlowski
 ACoA Commissioner,
 Director "Serve Alaska"
 Commerce, Community &
 Economic Development,
 Anchorage

What is the most pressing challenge for Alaska seniors today?

"Housing. Housing that is affordable and accessible. Reducing the cost of energy to heat homes. Innovations in housing like sidewalks that are heated to melt the snow and ice will reduce accidents. Consistent lighting on streets and pathways. Housing that is safe. All of these things will help seniors age in place."



David Blacketer
ACoA Commissioner,
Public Member,
Kodiak



What suggestions can you offer to help prepare for a successful retirement?

"Plan for your retirement early (age 40-50) financial, hobbies, travel, etc."

| Strategy | Convener |
|--|--|
| 1.1.1 Educate Alaskans about prevention, diagnosis, treatment, costs and appropriate care for people with ADRD through all possible media, in-person presentations, and policy advocacy. | Alzheimer's Resource of Alaska |
| 2.1.1 Assess feasibility and design an implementation plan for a potential 1915 (i) and 1915 (k) HCBS State Medicaid Plan amendments. | The Trust |
| 2.4.1 Identify the DHSS resources needed through 2025 and 2035 to ensure those with ADRD can remain living safely in their own home or family caregiver's home for as long as possible. | Senior and Disabilities Services |
| 3.2.1 Develop and implement regulations for quality standards for assisted living homes and other residential settings so that caregivers' skills are appropriate to the population they serve. | Office of the Long Term Care Ombudsman |
| 4.2.1 Increase dementia care training across the continuum of care and in complementary fields such as police, emergency services, finance, justice system, nursing, dental, optometry, social work and mental health. | Pioneer Home |
| 5.1.1 Increase training to caregivers about ADRD, resources available and approaches and strategies for providing care and reducing stress and fatigue. | AARP |
| 5.1.2 Increase in-home respite and adult day services to meet caregiver needs for appropriate breaks in providing care. | Alaska Commission on Aging |

LEGISLATIVE RECOMMENDATION:

Preserve base funding (\$1,721,498 GF) for Adult Day services to provide a safe and structured social setting for vulnerable seniors with physical and cognitive impairments (DHSS Division of Senior and Disabilities Services, Senior Community-Based Grants Component). Adult Day is the only senior grant-funded service that provides support for working family caregivers with elderly loved ones who are not safe staying alone while their caregivers are away. In SFY2015, Adult Day served 423 seniors at an average cost of \$4,069 per participant (Division of Senior and Disabilities Services Senior Grants Unit, 2015).

Maintain base funding (\$2,851,868 GF) for Senior In-Home services that provide case management, chore, respite/extended respite, supplemental services, and information targeting seniors who experience dementia, live alone, are disabled, and those with the greatest economic and social need (DHSS Division of Senior and Disabilities Services, Senior Community-Based Grants Component). In SFY2015, Senior In-Home served 1,371 seniors at an average cost of \$2,080 per senior (Division of Senior and Disabilities Services Senior Grants Unit, 2015).

Family & Other Informal Caregivers: “Taking Care of Our Own”

In Alaska, an estimated 128,000 informal caregivers provide unpaid care valued at \$1.1 billion.

(AARP 2015)

Caregiving is a pressing issue that will affect virtually all of us as the need for long-term services and supports increases due to the growing population of frail seniors and younger people with disabilities. Caregiving by family and other natural supports is the essential bedrock for long-term care and a rapidly growing component of Alaska’s health care system. Without family caregivers, the cost of long-term supports would increase astronomically, shifting substantial cost and burden to the State.

Caregivers assist their elderly loved ones with daily activities such as bathing, dressing, meal preparation, transportation, managing finances, and providing socialization. In addition, they manage complex medication regimes, perform wound care, deal with incontinence, arrange and coordinate care among multiple health care providers, and pay for services out of pocket such as in-home care, home modifications, and transportation. Many caregivers perform specialized health care tasks with little or no formal training. When family and other natural caregivers receive appropriate training, respite, counseling, and other supports, research shows they are often able to provide care at home one year or longer, thus postponing the need for higher cost institutional care (Gaugler, Reese, and Mittelman 2013). Family caregiver support services in Alaska are critical to the health and well-being of caregivers by providing respite care, adult day services, information about available services and assistance in accessing them, individualized counseling, support groups, and caregiver training.

Although rewarding, caregiving often exerts a heavy emotional, physical, and financial toll that puts family caregivers at risk, particularly those caring for loved ones with dementia. The cost of healthcare for caregivers in Alaska in 2014 was \$27 million higher than for Alaskans who are not caregivers (Alzheimer’s Association Facts and Figures 2015). Caregivers commonly experience mental health problems, especially depression. They also experience poorer physical health than non-caregivers and financial hardship due to caregiving demands (Alzheimer’s Association Facts and Figures 2015).



Anna Frank
ACoA Commissioner,
Public Member,
Fairbanks

“The most pressing challenge for elders living in the village is access to housing and assisted living. When elders need housing, they must complete so many forms. Many times, elders have to leave their village, their families, and way of life in order to get the housing they need.”



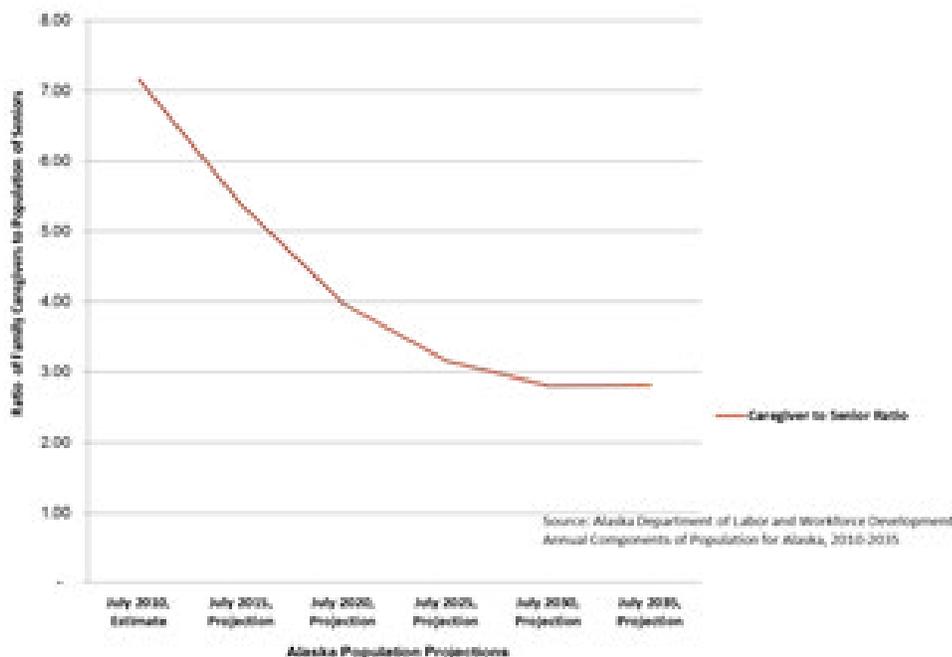
Bob Sivertsen
ACoA Commissioner,
Pioneer Home Advisory
Board Chair,
Ketchikan



What is the most pressing challenge for Alaska seniors today?

I believe the most pressing challenge is remaining an Alaskan senior. For those of us that have been lucky enough to live in Alaska, we did so understanding that Alaska is not the cheapest place to live. The cost of medical care, food, housing and petroleum products in Alaska are already higher than out of state. What is the incentive to stay? With the budgetary challenges facing the State of Alaska and the demand for taxes and program reductions are giving seniors reasons to be concerned. Is the desire to live in our state enough to keep us here... "Will we be able to afford to stay here?"

Alaska's Number of Potential Caregivers (ages 25-64) for Older Alaskans, Age 65+



The pool of potential family caregivers is expected to drop dramatically in the coming years from 7 potential family caregivers for every person age 80 years and older currently to 4 potential family caregivers by 2030 as family size becomes smaller and more people move away from their families of origin (ACoA 2013 and AARP 2013 estimates). Unpaid family caregivers need meaningful support and training as our population ages. Their needs for support are often not assessed or addressed adequately, although the plan of care frequently rests upon the ability of the family caregiver to continue providing quality support. Family caregivers must be involved in decisions affecting their loved ones and included in policymaking decisions.

LEGISLATIVE RECOMMENDATION:

Provide continued base funding (\$279,124 GF) for 13 Family Caregiver Support programs to provide respite, counseling, supplemental supports, and information to caregivers of older adults (age 60+) and for grandparents (age 55+) raising grandchildren who live in the same household (DHSS Division of Senior and Disabilities Services, Senior Community-Based Grants Component). In SFY2015, this program served 854 caregivers at an average cost of \$1,174 per caregiver. State funds for this program are matched with \$723,681 federal funds for a total amount of \$1,002,805 (Division of Senior and Disabilities Services Senior Grants Unit, 2015).



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Family Caregivers Month

Effective Date: Thursday, November 5th, 2015

WHEREAS, family caregivers assist vulnerable loved ones with health, personal care, and financial support which provides much needed aid to many Alaskans as an alternative to the cost of institutional long-term care; and

WHEREAS, an estimated 60,500 family and other informal caregivers in Alaska provide over 65 million hours of uncompensated care annually – valued at more than \$643 million; and

WHEREAS, caregiving often exerts a heavy emotional, physical, and financial toll that can put family caregivers at risk for depression, poor health, and financial hardship, and taking time out for respite is important for family caregivers; and

WHEREAS, since 1997, National Family Caregivers Month has been an opportunity to celebrate the contributions of family caregivers who serve a cause greater than themselves by their positive impact on the well-being of their loved ones, and to recognize organizations that serve family caregivers by providing respite, training, counseling, and other support; and

WHEREAS, the State of Alaska acknowledges the challenges faced by caregivers and thanks these dedicated Alaskans who give so much of themselves to ensure the health and well-being of their vulnerable loved ones.

NOW, THEREFORE, I, Bill Walker, GOVERNOR OF THE STATE OF ALASKA, do hereby proclaim November 2015 as:

Family Caregivers Month

in Alaska, and encourage all Alaskans to recognize the importance of family caregivers as part of our long-term care system and to care for them by offering support with their caregiving responsibilities.

Dated: November 5, 2015



*Family
Caregivers Month
Proclamation:
November 2015*

Through Executive Proclamation, Governor Walker declared November 2015 as Family Caregivers Month in Alaska to recognize the efforts of caregivers who ensure the health, safety, and dignity of loved ones under their care. The Proclamation also acknowledged the outstanding service to family caregivers provided by family caregiver support programs and adult day services in Alaska.



Health & Healthy Aging
highlights from the
2015 Senior Survey



Falling is the #1
source of non-fatal
hospitalized injuries
for seniors.

Health care is the #1
concern affecting
Alaskan seniors.

Health of Alaska Seniors and Healthy Aging

Approximately 94% of senior survey responders rated health care as the number one concern affecting Alaskan seniors
(Alaska State Plan for Senior Services, SFY2016-SFY2019).

Generally, Alaska seniors do live longer and remain in better health than their predecessors. Improved health and enhanced medical treatments translate into far fewer deaths from acute causes. Currently, the most common causes of death are heart disease, cancer, stroke, chronic respiratory disease, injury, and diabetes. Approximately 15% of seniors responding to the 2015 Senior Survey indicated a fear of falling, which is the #1 source of non-fatal hospitalized injuries for seniors. A longer life means that a large share of the senior population may experience dementia, disabilities, and/or periods of frailty in their later years. The cost of their care may place seniors in an economically stressful position.



A comparison of age-adjusted death rates for those ages 65 and older using data from the Centers for Disease Control and Prevention shows that Alaska is 7.5 percent below the U.S. rate in 2013. Male seniors in Alaska and the U.S. have higher age-adjusted death rates than females. The risk of death also differs by race in Alaska with Alaska Natives consistently having the highest age-adjusted death rates of any racial group and Asian/Pacific Islanders consistently having the lowest. While Alaska seniors continue to have lower age adjusted death rates for heart disease, cancer, and stroke, the cause of death involving a behavioral factor (accidents, suicide, alcohol, and drugs) rank higher in Alaska and are areas where older Alaskans are at increased risk.



Initiatives to reform Alaska’s health care and long-term care systems are being developed and implemented by the Department of Health and Social Services in collaboration with the Alaska Mental Health Trust Authority and other partners that will provide better support for Alaskans as they age. These efforts are transforming Alaska’s health care system to improve support of chronic care management, provide focus on preventative care, and integrate physical health care with other specialty care to address an individual’s whole health care needs.

Moreover, reforms of Alaska’s long-term care system through the 1915 (i/k) Medicaid State Plan Options, known as Inclusive Community Choices, will help to serve more Alaskans with cognitive impairments, such as seniors with dementia, and provide additional federal funding for the Alaska Pioneer Homes.

LEGISLATIVE RECOMMENDATION:

Support Medicaid reform efforts to include development and implementation of the Inclusive Community Choices 1915 (i/k) Medicaid State Plan options for seniors with dementia and others who are eligible and require these services.



What you can do to prevent falls:



Begin a regular exercise program.



Have your health care provider review your medicines.



Have your vision checked.



Make your home safer.

Many falls can be prevented. By making some changes, you can lower your chances of falling.

For more information, please call the Aging and Disability Resource Center at 1-877-6AK-ADRC (1-877-625-2372) or visit our website at www.alaskaaging.org.



How do Nutrition, Transportation, and Support Services help Alaska's seniors?



NTS core services help older Alaskans to sustain their health, social well-being, and independence in the community and remain a high service priority for senior centers and other senior providers who offer these services.

Helping seniors remain in their homes saves on higher cost health care and Medicaid expenditures and promotes independence and quality of life.

Nutrition, Transportation, and Support (NTS) Services Senior Grant Program

Nutrition, Transportation & Support services offer low-cost solutions that sustain health and independence for older Alaskans by reducing the need for higher cost care and allowing an older person to maintain their independence and remain living safely at home and in the community for as long as possible.

Good nutrition is the foundation for healthy and independent living. While the percentage of older Alaskans confronting food insecurity has decreased steadily from 2013 (16% of seniors) to 2015 (12% of seniors), more than 13,250 seniors are currently challenged to meet their food needs and face the risk of hunger (United Health Foundation, 2015). According to a survey of seniors who received home-delivered meals funded by the Older Americans Act, 93% of seniors responding reported that home-delivered meals allowed them to continue living in their own home, and 80% said the service allowed them to eat a greater variety of food, eat healthier food, feel better, and feel less hungry (Administration on Aging 2010).

The Nutrition, Transportation, and Supports (NTS) Senior Grant program, administered by the DHSS Division of Senior and Disabilities Services Senior Grants Unit, provides the largest proportion of senior services offered under the Older Americans Act Title III federal grants. These services, provided by the senior provider network, include meals, transportation, homemaker, information and other core services for seniors, age 60 years and older.



Alaska Seniors Served, SFY2015

(Source: Division of Senior & Disabilities Services, Senior Grants Unit)

- ✧ 11,859 seniors age 60+ received NTS services, an increase of 140 seniors from SFY2014 (unduplicated count).
- ✧ Average cost of NTS services is \$574 per senior recipient.
- ✧ 670 seniors (or 20%) who received home-delivered meals reported having three or more limitations with activities of daily living.
- ✧ 4,705 seniors (40%) receiving NTS services reported incomes below poverty.
- ✧ Nutrition, Transportation & Support Services help a growing number of older Alaskans to “age in place” and remain in their homes and communities even as their health and functioning decline. Nutrition, Transportation, & Support Services serve a significant number of older persons at risk for nursing home admission including those of advanced age (4,885), incomes below poverty level (4,705), live alone with limited caregiver support (3,916), and have functional limitations with activities of daily living (1,113 for seniors receiving home-delivered meals and homemaker services).

States that invest more money in core senior services (such as home-delivered meal programs) spend less on higher cost health care for their elderly residents. According to findings from the Health Research & Educational Trust (2013), for every \$25 states spend on home-delivered meals, there is a 1% reduction in the number of new residents with low-care needs in the nursing home.

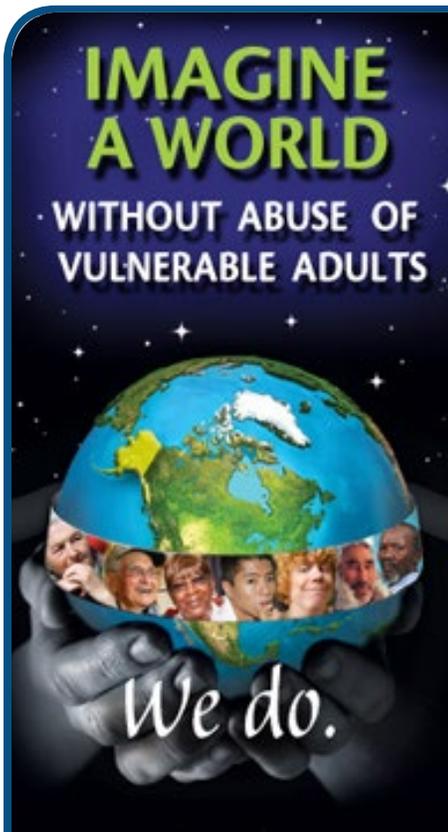
LEGISLATIVE RECOMMENDATION:

Maintain ongoing base funding (\$2,466,351 GF) for Nutrition, Transportation and Support Services for Alaska’s increasing senior population who require assistance to continue living at home but do not meet Medicaid eligibility requirements (DHSS Division of Senior and Disabilities Services, Senior Community-Based Grants Component). State general funds are supported with federal match in the amount of \$4,340,128 for a total funding amount of \$6,806,479.



How does the State benefit from Nutrition, Transportation, and Support Services?

- ✧ States that invest more money in core senior services (such as home-delivered meal programs) spend less on higher cost health care for their elderly residents.
- ✧ For every \$25 states spend on home-delivered meals, there is a 1% reduction in the number of new residents with low-care needs in the nursing home.



How to make a Report of Harm on a vulnerable adult:



**Please call
1-800-478-9996
to report
suspected abuse
of a
vulnerable adult.**

Elder Justice

The cost of elder abuse is significant. When a senior is victimized and requires services from elder protection agencies or loses personal financial assets and becomes Medicaid-eligible, the State bears the cost to provide assistance. However, even more disturbing is the personal cost to an elderly person as abuse often compromises the senior's independence and feelings of security which can lead to depression and despair.

Elder abuse is an important issue for Alaska. Older Alaskans and Alaskans with disabilities, such as dementia, are vulnerable to many forms of abuse, neglect, and financial exploitation. The majority of cases often go unreported as elders/seniors are reluctant to report the abuse, particularly when the abusers are family members, for fear of shaming the family or losing that person's care. Elder abuse can increase the risk of premature death and cause unnecessary illness, injury, and suffering. Research suggests that victims of elder abuse may be four times more likely to be admitted to a nursing home, and three times more likely to be admitted to a hospital (Lachs and O'Brien 2002).

Adult Protective Services, the Office of Long-Term Care Ombudsman, and the Office of Elder Fraud and Assistance work together to provide elder protection services and manage the increasing stream of complaints of abuse, neglect, self-neglect, and exploitation from the growing number of older Alaskans. These elder protection services are housed within the Division of Senior and Disabilities Services, Alaska Mental Health Trust Authority, and the Office of Public Advocacy respectively. Educational campaigns have helped to increase the public's ability to recognize the signs of abuse and report possible cases of abuse, as well as to destigmatize elderly victims and reporters of abuse. Public awareness is an important element in the overall approach to preventing older adult abuse and neglect.

Comparing SFY2010 to SFY2014, there has been a 110% increase in the total number of reports of harm received by Adult Protective Services (APS) regarding vulnerable adults and almost a four-fold increase (382%) in those involving seniors/elders. Of the founded investigations involving older adults in SFY2014, 312 investigations (58%) reported allegations of self-neglect; 84 investigations (16%) related to financial exploitation allegations; and 51 investigations (9.5%) corresponded to neglect allegations. A family member

was most often reported as the perpetrator for non-self neglect investigations involving an older adult when a perpetrator was indicated (65.6% for elders/seniors). APS also reports an increasing number in the complexity of cases. (Alaska State Plan for Senior Services, SFY2015-2019).

The Office of Long-Term Care Ombudsman (OLTCO) is authorized by federal and state law to resolve complaints made by, or on behalf of, Alaskans age 60+ who reside in assisted living homes or skilled nursing facilities. In SFY2015, the OLTCO responded to 1,044 complaints, with 92% of the complaints being resolved to the satisfaction of the senior, and completed unannounced visits to all 18 nursing homes in Alaska in addition to 96% of Alaska's senior assisted living homes. The top complaints received by the OLTCO from Alaska seniors were falls or injuries of unknown origin; timely access to physician services or medical care; discharge/eviction; lack of dignity and respect by staff; and incorrect administration of medications (Office of Long-Term Care Ombudsman 2015).

The Office of Elder Fraud and Assistance (OEFA) is empowered to investigate complaints and file civil actions involving fraud committed against Alaska residents age 60 and older that include robbery, extortion, coercion, theft, and exploitation. The OEFA provides consumer education efforts to help seniors protect themselves from identity theft, credit and debt consolidation scams, predatory lending, and Medicare/Medicaid fraud.

LEGISLATIVE RECOMMENDATION:

Passage of HB 8 authored by Representative Hughes to reform Alaska's Power of Attorney law in order to provide improved protection of Alaska seniors from financial exploitation.



ALASKA
LONG TERM CARE
OMBUDSMAN



*Top Complaints
received by OLTCO
from Alaska seniors*

- ✧ Falls or injuries of unknown origin;
- ✧ Timely access to physician services or medical care;
- ✧ Discharge/eviction; lack of dignity and respect by staff; and
- ✧ Incorrect administration of medications

(Office of Long-Term Care Ombudsman 2015).

Senior Housing

Seventy-five percent of seniors surveyed in the Alaska Senior Survey have no plans to move out of state with 72% planning to live in their current home

(Alaska State Plan for Senior Services, SFY2016-2019).

Housing is a top priority for Alaska seniors. A growing number of seniors are choosing to remain in Alaska and appropriate, affordable housing is a critical need statewide. While the majority of seniors say they want to remain in their own homes as they age, many of these homes are older and in poor repair and not eligible for weatherization and other energy improvement programs. Other older Alaskans seek smaller, more accessible and affordable accommodations, either in independent senior housing or in other types of senior housing where long-term support services are available on-site. Affordable senior housing is important as many older people live on a fixed income. Senior housing ranked in the top three issues of importance for Alaska seniors in the SFY2015 needs assessments conducted by the Alaska Commission on Aging.

The Senior Citizen Housing Development Fund (SCHDF), administered by Alaska Housing Finance Corporation (AHFC), is the one and only senior housing grant fund in Alaska. Since 1995, AHFC has competitively awarded SCHDF funds to nonprofit organizations and regional housing authorities to expand rental housing opportunities for Alaska seniors, providing financial support to fund more than 70 senior housing projects statewide with approximately 1,420 residential units. The SCHDF provides gap financing for senior housing projects, leveraging about \$2 non-state funds for every \$1 of SCHDF funds. The SCHDF Senior Accessibility Modification Program has funded accessibility modifications for over 300 senior households statewide.

LEGISLATIVE RECOMMENDATION:

Support the Governor's SFY17 proposed capital budget that includes \$1,750,000 from the Rasmuson Foundation for the AHFC Senior Citizens Housing Development Fund and requires a financial contribution from the State. AHFC's Senior Citizen Housing Development Grant Fund provides gap funds that support the construction/renovation of senior housing and energy/weatherization services for housing occupied by older Alaskans and persons with disabilities.



Alaska's Newest Affordable Senior Housing: Silverwood Manor III, Soldotna Developer



Kenai Peninsula Housing Initiatives

5 units of senior housing, not yet open, 3rd phase of development



Alaska's Newest Affordable Senior Housing: Caswell Court, Anchorage Developer



Cook Inlet Housing Authority

34 units of senior housing



Alaska's Newest Affordable Senior Housing: Ptarmigan Heights, Delta Junction



Deltana Community Services Partnership

6 units of senior housing, incorporating solar energy

Reauthorization of the Alaska Commission on Aging

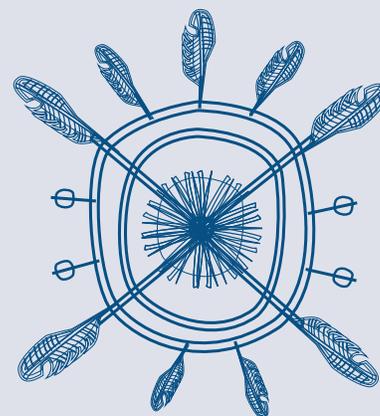
The Alaska Commission on Aging (ACoA) was established in 1981 under AS47.45.200-.290, and is scheduled to sunset June 30, 2016 under AS 44.66.010(a)(4). Legislation is needed to extend the Commission's sunset date by eight years to June 30, 2024 as recommended by the audit conducted by the Division of Legislative Audit in 2015. This Audit concluded that the Commission is serving the public's interest by helping older Alaskans lead dignified, independent, and useful lives and that the Commission meets the federal requirement for each state to establish an advisory council to advise the state on matters related to aging.

The ACoA satisfies a requirement of the federal Older Americans Act (OAA) that all states which receive OAA funding have an advisory council that is comprised of older individuals and advises the "state unit on aging," regarding matters related to aging issues. In Alaska, it is the Department of Health and Social Services. Alaska is receiving almost \$11 million in federal OAA funding in SFY2016 thanks to its compliance with the Older Americans Act. The ACoA also serves as a statutory advisory board to the Alaska Mental Health Trust Authority (AMHTA) and advises the AMHTA on the needs of older Alaskans with cognitive impairments, including Alzheimer's disease and related dementias, and makes recommendations to the AMHTA regarding budget and legislation that benefit this vulnerable population.

The Alaska Commission on Aging serves as an advocate and educator regarding the needs of Alaska's older people to help ensure the dignity, health, safety, and independence of Alaska's seniors and to assist them in leading useful and meaningful lives. The ACoA develops the four year comprehensive Alaska State Plan for Senior Services and in partnership with AMHTA and other agencies, developed Alaska's Roadmap to Address Alzheimer's Disease and Related Dementias (2015). ACoA also makes recommendations on legislation and appropriations beneficial for older Alaskans, and provides education/outreach regarding matters related to aging.

LEGISLATIVE RECOMMENDATION:

Support passage of companion legislation sponsored by Representative Hawker (HB 226) and Senator Stoltze (SB 124) to reauthorize the Alaska Commission on Aging to June 30, 2024.



HB 226
Representative
Hawker

**Support the
reauthorization
of the
Alaska
Commission
on Aging
through
June 30, 2024.**



SB 124
Senator
Stoltze

Demographics of the Alaska Senior Population

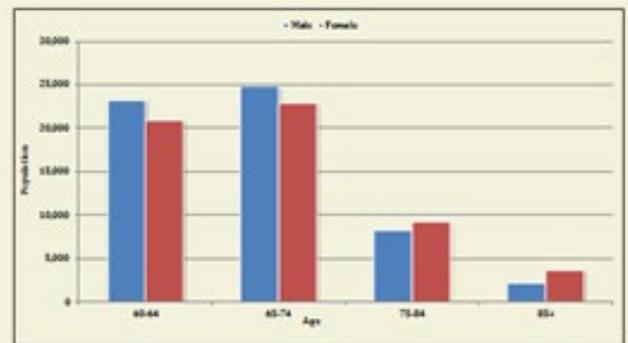
The thousands of young people who moved to Alaska during the economic boom of oil development and the 1970s Trans-Alaska Pipeline construction, having lived their entire working lives in Alaska, are now choosing to retire in the state. The aging of Alaskan baby boomers is the most important factor responsible for the demographic transformation of Alaska's population, not the in-migration of new seniors from outside the state.

Between 2000 and 2010, there were 1,273 people age 65+ who moved to Alaska and 1,744 Alaskan seniors who left the state. The 60+ demographic, comprised of 115,280 Alaskans in 2014, is growing faster than any other age demographic in the state and comprises 15.7% of the total state population. During the period from 2010 through 2014, Alaska's senior population grew an average of 6.7% annually while the under-nineteen age cohort shrank a total of 0.6% during these years. Persons age 85+, who are most at risk for AD/DR and other chronic health conditions, will increase even more dramatically at the same time growing at an average rate of 15% annually over the next 40 years with women, age 85+, being the fastest growing age demographic. Near the end of the projection period of 2042, all baby boomers will have entered their senior years and the older Alaskan population will begin to decline.

Alaska's Population by Age and Gender

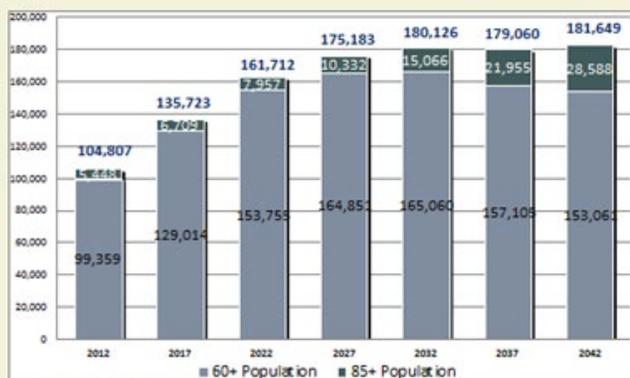
The senior population (age 60+) is almost evenly divided between men and women, although men predominate in the 60-64 and 65-74 age groups and women in the 75+ age group. By age 90, women outnumber men almost two to one.

Age and Gender, 2014



Source: Alaska Department of Labor Workforce & Development, Research and Analysis

Projections of Alaskans Age 60+ and 85+



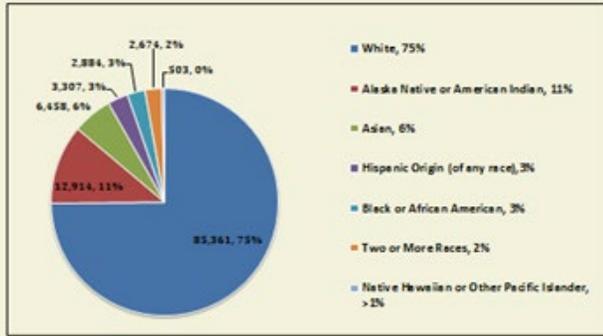
Source: Alaska Department of Labor Workforce & Development, Research and Analysis

Race

Whites and Asians are slightly over-represented among seniors when compared to the total population, while other races are slightly under-represented. For example, 75% of seniors age 60+ are white, while only 67.3% of the total population is white; and 6% of seniors are Asian, compared to 5.9% of the total population. Meanwhile 11% of seniors are Alaska Native (alone or in combination with other races) although 14.8% of the State's total population is Alaska Native. African-Americans are also under-represented in the

senior population. Some 3% of Alaska seniors are African-American while 3.8% of the State's total population is African-American (Source: Alaska Department of Labor & Workforce Development, 2013).

Alaska Senior Population by Race and Hispanic Origin, July 2013



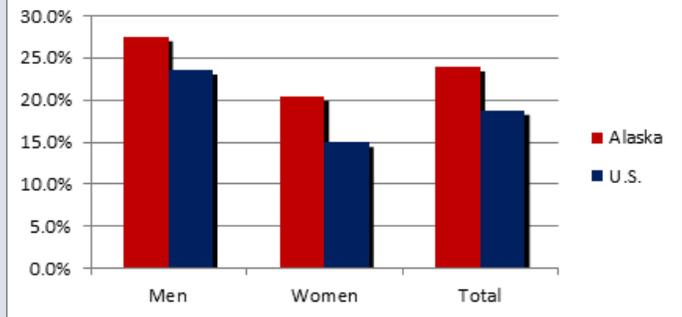
Regional Patterns

All regions of the State experienced at least a 15% increase in their senior populations from 2010 through 2014, with no regions losing senior population. In general, senior population growth was more rapid in the Railbelt (Anchorage, Kenai, Mat-Su, Fairbanks, and Southeast Fairbanks Census Areas) when compared to other areas of the state. While Anchorage has the largest number of seniors, the fastest rate of increase was in the Mat-Su Borough, an increase of 117% in the 60+ population from 2000 to 2010. The highest concentration of seniors age 60+ is in the Southeast, 19.8%, an area with generally milder temperatures. The community of Haines, for example, had the largest concentration of seniors of any area in the state with 27.9% of their population being age 60+. The lowest concentration of seniors, 8.7%, was found in the Kusilvak Census Area (formerly known as Wade Hampton Census Area). (Alaska Department of Labor & Workforce Development, 2013)

Labor Force Participation

The 65+ population has been increasing in labor force participation, and senior labor force participation rates are now at their highest levels on record. While older women have lower labor force participation rates, their rates are growing much faster than older men's. A higher percentage of Alaska seniors are in the labor market than are seniors nationally and these seniors are engaged in a wide variety of work in all occupations and industries (Alaska Department of Labor & Workforce Development, 2013).

Labor Force Participation Rates, Age 65+



Alaska Commission on Aging (ACoA) Senior Snapshot: Older Alaskans in 2015

Annually, the ACoA gathers data to provide a sketch of the health and well-being of Alaskan residents, age 60 years and older. Below are highlights from the 2014/2015 Senior Snapshot:

- ✧ Annually, the ACoA gathers data to provide a sketch of the health and well-being of Alaskan residents, age 60 years and older. Below are highlights from the 2014/2015 Senior Snapshot:
- ✧ Alaska continues to be the fastest growing senior population per capita for the sixth year in a row. From 2003 to 2013, the 65+ population increased in Alaska by more than 60% followed by Nevada (50.7%), Colorado (46.8%), Georgia (44.4%), Arizona (43.2%), Idaho (43.1%), and South Carolina (43.1%) comprising the top seven states with a population increase of 30 percent or more.
- ✧ The number of Alaskan seniors age 60+ continues to increase. From the 2010 census to the 2015 projected population data, the Alaskan senior population increased 32.5% statewide. The highest regional growth rate over this period was in the Aleutians (41.8%) followed by Southcentral (39.1%). Southeast Alaska has the highest concentration of seniors at 19.8% where almost one in five residents in the region is an adult age 60 years and older.
- ✧ The number of Alaskans age 60 to 64 has grown to 45,491 in 2015 from 35,938 in 2010, a 26.6% increase.
- ✧ The 85-and-older Alaskan cohort increased at a fast pace. These seniors are generally frail, at risk for developing Alzheimer's disease and related dementias (ADRD), and are the most likely to depend on home- and community-based and long-term support services. The 85-and-older cohort grew from 4,711 in 2010 to 6,084 in 2015, for an increase of 29.1% over the past five years.
- ✧ Retired seniors as a whole contribute at least \$2.4 billion annually to Alaska's economy from their retirement income, health care spending and revenue from other sources. The retirement industry, one of the State's top economic sectors, creates approximately 13,000 jobs in health care, long-term support services, housing, and other employment sectors. Employed seniors (23.8% of the 65+ population) contribute an additional \$633 million. More than half of employed seniors work in health care, education, public administration, and retail. The cumulative senior economic impact of \$3 billion compares favorably to other industries including fishing (\$2.2 billion), construction (\$2.1 billion) and retail trade (\$2.1 billion). In addition, Alaskan seniors volunteer and provide unpaid caregiving to family members and friends (UA Institute of Social and Economic Research, Power of Aging in Alaska Symposium, 2014).

- ✧ The number of Alaskans age 65 and older receiving monthly cash supplemental payments from the Senior Benefits Program continues to increase annually at modest levels (2% or less). To qualify for this program, seniors must be 65 or older and have incomes below 175% of the federal poverty level for Alaska.
- ✧ The percent of seniors receiving food stamps from 2014 to 2015 has grown by 7.5%. The amount of food stamps provided to each senior is based on the need and income of the entire household.
- ✧ The number of seniors (age 65+) receiving monthly cash supplemental payments from the Old Age Assistance program (Adult Public Assistance) has increased this past year by 2%, and the average benefit has decreased by 2.1% .
- ✧ The number of households with a senior member (age 60+ years) that received heating assistance decreased 52% comparing FY2015 to FY2014.
- ✧ There were 332 applicants on the Pioneer Home active waitlist in 2015. To be eligible for the Pioneer Homes one must be 65 years or older, be a resident for at least one year, and complete an application. To qualify for the active wait list, the senior must be willing and ready to move into a Pioneer Home within 30 days of an offer.
- ✧ Alaska continues to have the highest nursing home costs in the country at \$771 per day or \$281,415 per year in 2015. The average annual cost in the United States is \$91,250.
- ✧ Alaska has the second highest median cost for assisted living home care at \$68,430 per year as compared to the national average of \$43,200 per year. Washington D.C. has the highest cost for assisted living in the nation at \$82,673 annually.
- ✧ The 2015 median daily rate for Adult Day Services in Alaska increased by 18.45% from the previous year compared to the national median increase of 6.2%.
- ✧ In SFY2014, the Office of Long-Term Care Ombudsman investigated 618 cases from seniors across the state, made unannounced visits to 300 in-state long-term care facilities, and visited with more than 3,500 seniors.
- ✧ In SFY2014, Adult Protective Services received 3,379 reports of harm of which 51% involved older adults, age 60+.
- ✧ The number of intakes of harm by the Department of Health and Social Services, Adult Protective Services of adults 60 and older is the highest since the program was created. In FY2015, there were 4,968 APS intakes with alleged victims age 60 and older.

Note: The Senior Snapshot incorporates the latest data available however not all items are updated on an annual basis.

Population by Region and Age Group Senior Snapshot: Older Alaskans in 2015

| Population Age 60+ | 60+ % of Regions 2015 Pop. | CY 2015 | CY 2014 | CY 2013 | CY 2010 | % Seniors Change 2010-2015 | Comments |
|--|----------------------------|---------|------------------------|-----------------------------|-------------------------------------|----------------------------|---|
| Statewide Total | 16.30% | 120,444 | 115,280 | 110,794 | 90,876 | 32.50% | All census areas increased at least 4% over 2013. Note 1 |
| I. Bethel Area | 10.50% | 2,754 | 2,635 | 2,495 | 2,306 | 19.40% | Bethel, Kusilvak Census Area |
| II. Interior | 15.70% | 17,757 | 16,853 | 16,191 | 13,134 | 35.20% | Fairbanks NSB, Yukon-Koyukuk, Denali, SE Fairbanks |
| III. North Slope | 10.70% | 1,057 | 10,011 | 983 | 856 | 23.50% | North Slope Borough |
| IV. Anchorage | 15.20% | 45,492 | 43,727 | 42,287 | 35,079 | 29.70% | Municipality of Anchorage |
| V. Southcentral | 18.90% | 31,651 | 30,179 | 28,620 | 22,760 | 39.10% | Kenai Peninsula, Mat-Su, Valdez- Cordova |
| VI. Northwest | 11.40% | 2,036 | 1,996 | 1,937 | 1,681 | 21.10% | Nome, Northwest Arctic |
| VII. Southwest | 13.70% | 2,928 | 2,919 | 2,919 | 2440 | 20.00% | Bristol Bay, Dillingham, Kodiak, Lake & Peninsula |
| VIII. Aleutians | 14.10% | 1,201 | 1,166 | 1,168 | 847 | 41.80% | Aleutians East, Aleutians West |
| IX. Southeast | 20.50% | 15,282 | 14,675 | 14,194 | 11,764 | 29.90% | Haines, Juneau, Ketchikan, Prince of Wales, Sitka, Skagway-Hoonah- Angoon, Wrangell-Petersburg, Yakutat |
| Age 60-64 % of senior pop. | 37.80% | 45,491 | 44,200 | 43,031 | 35,938 | 26.60% | Baby boomers entering this group. |
| Age 65-74 | 42.00% | 50,592 | 47,605 | 44,967 | 33,139 | 52.70% | |
| Age 75-84 | 15.10% | 18,177 | 17,615 | 17,151 | 14,877 | 22.20% | |
| Age 85+ | 5.00% | 6,084 | 5,860 | 5,645 | 4,711 | 29.10% | |
| Senior Population Growth | | | 2013 AK Ranking | AK Growth, 2003-2013 | US Average Growth, 2003-2014 | | Comments |
| Rank Among States in Growth of the Senior Population | | | #1 | 61.7% | 24.7% | | Age 65+. Note 2 |

Economic Factors

Senior Snapshot: Older Alaskans in 2015

| Economic Factors | | | | | Comments |
|--|--|---|---|--|--|
| Seniors' Economic Contribution to Alaska | CY 2014: \$2.5 billion** | CY 2013: \$2.4 billion** | CY 2012: \$2.1 billion** | CY 2010: \$1.712 billion | Note 3 |
| Average Monthly Social Security Payment Age 65+ | AK, Dec. 2014 \$1,146 | AK, Dec. 2013 \$1,215 | AK, Dec. 2012 \$1,195 | AK, Dec. 2010 \$1,180 | Note 4 |
| Average Monthly PERS Payments | AK, Sept. 2015: \$1,729 # of seniors: 15,421 | AK, Sept. 2014: \$1,676 # of seniors: 14,377 | AK, Sept. 2013: \$1,605 # of seniors: 13,568 | AK, Sept. 2012: \$1,553 # of seniors: 12,893 | Average payment per person retirement PERS payments. Note 5 |
| Average Monthly Teachers Retirement System (TRS) Payment | AK, Oct. 2015: \$2,855 # of seniors: 5,517 | AK, Oct. 2014: \$2,831 # of seniors: 5,217 | AK, Oct. 2013: \$2,756 # of seniors 5,046 | AK, Sept. 2012: \$2,717 # of seniors 4,843 | Teachers Retirement System: Information includes average payment per person. Note 6 |

Senior Benefits by Region

Senior Snapshot: Older Alaskans in 2015

| Senior Benefits Recipients 65+ | Nov. 2015: | Oct. 2014: | Oct. 2013: | Oct 2012: | Alaska Division of Public Assistance. Note 7 |
|--------------------------------|------------|------------|------------|-----------|--|
| Statewide | 11,540 | 11,298 | 11,123 | 10,882 | Statewide |
| I. Bethel Area | 808 | 775 | 778 | 802 | Bethel, Wade Hampton |
| II. Interior | 1,354 | 1,306 | 1,311 | 1,275 | Fairbanks NSB, Yukon-Koyukuk, Denali, SE Fairbanks |
| III. North Slope | 38 | 36 | 40 | 41 | North Slope Borough |
| IV. Anchorage | 4,231 | 4,154 | 4,053 | 3,977 | Municipality of Anchorage |
| V. Southcentral | 2,850 | 2,795 | 2,687 | 2,627 | Kenai Peninsula, Mat-Su, Valdez-Cordova |
| VI. Northwest | 441 | 425 | 395 | 378 | Nome, Northwest Arctic |
| VII. Southwest | 407 | 415 | 449 | 459 | Bristol Bay, Dillingham, Kodiak, Lake & Peninsula |
| VIII. Aleutians | 65 | 60 | 61 | 52 | Aleutians East, Aleutians West |
| IX. Southeast | 1,346 | 1,332 | 1,341 | 1,264 | Haines, Juneau, Ketchikan, Prince of Wales, Sitka, Skagway-Hoonah-Angoon, Wrangell-Petersburg, Yakutat |
| Unknown Region | 0 | 0 | 8 | 7 | Unknown Region |

Food Stamps and Other Senior Assistance Programs

Senior Snapshot: Older Alaskans in 2015

| Other assistance | | | | Comments |
|--|--|---|---|---|
| Seniors in Alaska (age 60+) on Food Stamps | Nov. 2015: 2,995 (60-64) 4,047 (65+) Total 7,042 | Nov. 2014: 2,802 (60-64) 3,746 (65+) Total 6,548 | Nov. 2013: 2,711 (60-64) 3,570 (65+) Total 6,281 | Alaska Division of Public Assistance. Note 7 |
| Avg. dollar monthly benefit for Alaskan seniors on Food Stamps | FY 2015: \$260.93 (Age 60-64) FY 2014: \$185.89 (Age 65+) | FY 2014: \$167.52 (Age 60-64) FY 2014: \$91.33 (Age 65+) | FY 2013: \$158.97 (Age 60-64) FY 2013: \$97.61 (Age 65+) | Alaska Division of Public Assistance. Note 7 |
| Seniors Receiving Old Age Assistance 65+ | FY 2015: \$234.57 (Age 65+) n=5,657 | Nov. 2014: \$239.02 (Age 65+) n=5,546 | Nov. 2013: \$237.26 (Age 65+) n=5,395 | Alaska Division of Public Assistance. Note 8 |
| Households with a senior member (65+) receiving heating assistance | FY2015 total: 3,846 LIHEAP: 3,031 AKAHP: 815 | FY2014 total: 4,055 LIHEAP: 3,213 AKAHP: 842 | FY 2013 total: 4,179 LIHEAP: 3,273 AKAHP: 906 | Alaska Division of Public Assistance. Note 7 LIHEAP (Low Income Home Energy Assistance Program) AKAHP (Alaska Affordable Heating Program) |

AHFC and Senior Housing

Senior Snapshot: Older Alaskans in 2015

| Housing | | | | Comments |
|---|--|---------------------------------|--|--|
| AHFC total units of senior/disabled housing (statewide) | Dec. 2015: 610 units | Dec. 2014: 610 units | Dec. 2012: 610 units Dec 2011: 610 units | Alaska Housing Finance Corporation (AHFC). Note 9 |
| AHFC wait list for senior/disabled housing (statewide) | Nov. 2015: 663 | Nov. 2014: 567 | Nov 2012: 1,281 Oct. 2011: 1,144 | The data for 2013 represents only senior housing units in Anchorage for Alaska Housing Finance Corporation. Note 10 |
| AHFC wait list for housing vouchers | Nov. 2015: 2,297 Families | Nov. 2014: 2,448 Families | Nov. 2013: 4,743 Families Nov. 2012: 3,341 Families | Alaska Housing Finance Corporation. Note 11 |
| AHFC senior housing units funded for development | FY 2015: 47 Units FY 2014: 95 Units | FY 2013: 40 Units | FY 2011: 58 Units | Alaska Housing Finance Corporation. From FY2001 thru 2015, 915 senior housing units in total were developed with AHFC and other funding sources. |

Senior Health

Senior Snapshot: Older Alaskans in 2015

| Senior Health | Alaska | Alaska | U.S. Comments | Comments |
|--|---|--|---|--|
| Number with Alzheimer's Disease & Related Dementia (ADRD) (estimate) | CY 2015: 6,400 CY 2014: 6,100 | CY 2010: 5,000 CY 2000: 3,400 | CY 2015: 5.3 Million | Alaska's ADRD estimates are based on national prevalence rates by age group. An estimated 9% of Alaska seniors age 65+ have Alzheimer's disease. Alzheimer's disease rates increase with age and directly affect almost half of Alaskans over 85. Note 12. |
| Leading Causes of Death 65+ (per 100,000 age 65+) | Alaska 2013 | Alaska 2012 | U.S. 2012 | Comments |
| Other accidental deaths | Age 65-74; 26.7 Age 75-84; 70.0* Age 85+; 283.9* | Age 65-74; 54.9 Age 75-84; 85.4 Age 85+; 238.2* | Age 65-74; 8.3 Age 75-84; 23.1 Age 85+; 82.7 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Alcohol-induced deaths | Age 65-74; 28.9* Age 75-84; ** Age 85+; ** | Age 65-74; 26.2* Age 75-84; ** Age 85+; ** | Age 65-74; 15.8 Age 75-84; 10.3 Age 85+; 5.0 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Drug-induced deaths | Age 65-74; ** Age 75-84; ** Age 85+; - | Age 65-74; - Age 75-84; ** Age 85+; ** | Age 65-74; 6.5 Age 75-84; 4.0 Age 85+; 5.1 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Cancer | Age 65-74; 616.6 Age 75-84; 1,190.5 Age 85+; 1,845.6 | Age 65-74; 51.6 Age 75-84; 1,232.3 Age 85+; 1,740.8 | Age 65-74; 632.2 Age 75-84; 1,103.7 Age 85+; 4,046.1 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Heart Disease | Age 65-74; 291.6 Age 75-84; 828.7 Age 85+; 2945.8 | Age 65-74; 327.0 Age 75-84; 762.6 Age 85+; 3,005.3 | Age 65-74; 388.3 Age 75-84; 1,161.7 Age 85+; 1,658.9 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Stroke | Age 65-74; 69.0 Age 75-84; 268.4 Age 85+; 1,206.7 | Age 65-74; 76.3 Age 75-84; 286.7 Age 85+; 1,227.7 | Age 65-74; 75.7 Age 75-84; 272.2 Age 85+; 931.2 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |

Senior Health (continued)

Senior Snapshot: Older Alaskans in 2015

| Leading Causes of Death 65+ (per 100,000 age 65+) | Alaska 2013 | Alaska 2012 | U.S. 2012 | Comments |
|---|---|---|--|---|
| Influenza & Pneumonia | Age 65-74; 19.0* Age 75-84; 61.0* Age 85+; 425.9 | Age 65-74; 20.0* Age 75-84; 93.3* Age 85+; 201.5* | Age 65-74; 26.1 Age 75-84; 98.2 Age 85+; 408.4 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Chronic Lower Respiratory Diseases | Age 65-74; 114.6 Age 75-84; 309.3 Age 85+; 567.8 | Age 65-74; 116.9 Age 75-84; 402.6 Age 85+; 696.3 | Age 65-74; 140.0 Age 75-84; 364.0 Age 85+; 687.8 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Alzheimer's disease | Age 65-74; ** Age 75-84; 99.2* Age 85+; 869.5 | Age 65-74; 26.2* Age 75-84; 256.2 Age 85+; 861.2 | Age 65-74; 17.9 Age 75-84; 175.4 Age 85+; 936.1 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Diabetes mellitus | Age 65-74; 60.1 Age 75-84; 151.7 Age 85+; 283.9 | Age 65-74; 78.7 Age 75-84; 140.3 Age 85+; 164.9* | Age 65-74; 69.7 Age 75-84; 145.8 Age 85+; 285.7 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Parkinson's Disease | Age 65-74; ** Age 75-84; 75.8* Age 85+; 301.6* | Age 65-74; 16.7* Age 75-84; 67.1* Age 85+; 219.9* | Age 65-74; 12.3 Age 75-84; 76.2 Age 85+; 172.3 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Accident/ Unintentional injuries | Age 65-74; 37.8* Age 75-84; 105.0* Age 85+; 354.9 | Age 65-74; 59.6 Age 75-84; 128.1 Age 85+; 329.8* | Age 65-74; 44.0 Age 75-84; 107.8 Age 85+; 336.9 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |
| Hospital admissions for fatal falls, 60+ | Age 65-74; ** Age 75-84; 35.0* Age 85+; ** | Age 65-74; ** Age 75-84; 42.7* Age 85+; ** | Age 65-74; 13.9 Age 75-84; 58.6 Age 85+; 222.2 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |

Senior Health (continued)

Senior Snapshot: Older Alaskans in 2015

| Leading Causes of Death 65+ (per 100,000 age 65+) | Alaska 2013 | Alaska 2012 | U.S. 2012 | Comments |
|---|--|---|---|---|
| Suicides | Age 65-74; 20.0* Age 75-84; 40.8* Age 85+; - | Age 65-74; ** Age 75-84; ** Age 85+; ** | Age 65-74; 14.0 Age 75-84; 16.8 Age 85+; 17.8 | Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics. Note 25 |

Senior Behavioral Health

Senior Snapshot: Older Alaskans in 2015

| Senior Behavioral Health | Alaska 2013 & 2014 | Alaska 2012 & 2011 | U.S. 2014 | Comments |
|--------------------------|----------------------------|--------------------------|-----------|---|
| Binge drinkers | 2014: 6.2% 2013: 7.7% | 2012: 4.2% 2011: 8% | 4.2% | Age 65+ - 2010 BRFSS. Note 13 |
| Heavy drinkers | 2014: 6.2% 2013: 6.6% | 2012: 4.8% 2011: 7% | 3.9% | Age 65+ - 2010 BRFSS. Note 14 |
| Smokers | 2014: 10.0% 2013: 9.9% | 2012: 10.0% 2011: 12% | 8.9% | Age 65+ - 2010 BRFSS. Note 15 |
| Disabled seniors | 2014: 65.2% 2013: 37.1% | 2012: 38.7% 2011: 45% | 36.6% | Age 65+ who are "limited in activities because of physical, mental or emotional problems or need special equipment such as a cane, a wheelchair, special bed, or telephone" – 2012 BRFSS. Note 16 |
| Obese seniors | 2014: 28.8% 2013: 30.5% | 2012: 30.4% 2011: 30% | 27.5% | Age 65+ - 2010 BRFSS. Note 17 |

Long Term Care Senior Snapshot: Older Alaskans in 2015

| Long Term Care | Alaska | | | Comments |
|---|--|--|--|---|
| Percent of Pioneer Home residents at Level III | Nov. 2015: 56.11% Oct. 2014: 55.9% | Oct 2013: 56% Oct. 2012: 53% | Dec. 2004: 46.1% | Level III is the most advanced level of care. Data provided by the Division of Pioneer Homes. Note 18 |
| Average age of Pioneer Home resident | Nov, 2015: 86.4 years | Oct, 2014: 86.2 years | 1998: 76 years | Total number of beds available is 542. Note 18 |
| Number of Pioneer Home Applicants on Active Wait List | 2015 – 332 2014 – 276 | 2013 - 369 2012 – 475 | 2008 – 374 2007 - 339 | Applicants must be 65 years or older, a resident for at least one year, and submit an application. Active wait list is defined by the number of seniors who are willing and ready to move into a Pioneer Home within 30 days of an offer. Note 18 |
| Nursing home costs – private room, median daily rate | AK, 2015: \$771/day \$281,415/year | AK, 2014: \$660/day \$240,900/year | U.S., 2015: \$250/day \$91,250/year | Amount is based on a private room. Alaska has the highest cost of skilled nursing facility care in the U.S. Note 19 |
| Assisted Living Home costs – average median monthly base rate | AK, 2015: \$187 median daily rate \$68,430 annual median rate | AK, 2014: \$181 median daily rate \$66,000 annual median rate | U.S., 2015: \$118 median daily rate \$43,200 annual median rate | Alaska is in the top 10 highest median cost per year, Washington, DC has this highest cost at \$82,673. Note 19 |
| Home Health Care Costs: Home Health Aide | AK, 2015: \$59,488 annual median rate or \$163 median daily rate | AK, 2014: \$56,125 annual median rate or \$154 median daily rate | U.S., 2015: \$45,760 annual median rate or \$125 median daily rate | Alaska has the highest cost per year. Average cost of care based on 44 hours per week by 52 weeks. Note 19 |
| Adult Day Services Costs | AK, 2015: \$122 median daily rate \$31,829 annual median rate | AK, 2014: \$103 median daily rate \$26,845 annual median rate | U.S., 2015: \$69 median daily rate \$17,904 annual median rate | Alaska has the highest cost for adult day services. This amount is based on 5 days per week by 52 weeks. Note 19 |
| Alaskans Living Independently Waiver, Seniors Recipients, Age 65+ | FY 2015: 1,678 FY 2014: 1,884 | FY2013: 2,044 FY 2012: 1,992 | FY 2011: 1,758 | To qualify for services under the Alaskans Living Independently Waiver, individuals must be age 21 years or older, income-eligible, and must meet nursing home level-of-care requirements. Note 20 |

Long Term Care (continued)

Senior Snapshot: Older Alaskans in 2015

| Long Term Care | Alaska | | | Comments |
|---|---|---|---|--|
| Senior grant services through Division of Senior & Disabilities Services. | FY 2015: 25,893 Total cost \$14,867,957 Per Client \$574 | FY 2014: 25,053 Total cost \$14,153,889 Per Client \$565 | FY 2013: 25,619 Total cost \$13,680,319 Per Client \$534 | FY 2015 financial total was funded the following way: Federal 87%, State 11% and MHTAAR 2%. The recipient count includes the total number of seniors receiving registered and non-registered services. Years 2013-14 Note 21 |
| Alaskans on Medicare | CY 2015: 80,836 | CY 2013: 73,434 | CY 2011: 68,417 | The number of Alaskans on Medicare continues to increase as the senior population grows. Approximately 20 percent of Medicare recipients are under the age of 65. (Source: Alaska Medicare Information Office, 2015). Note 22 |
| Aging and Disability Resource Center | FY 2015 8,481 | FY 2014 7,709 | FY 2013 11,497 | Division of Senior and Disabilities Services, Senior Grants Unit. Counts for FY14 and 15 are unduplicated. Note 21 |

Senior Safety

Senior Snapshot: Older Alaskans in 2015

| Senior Safety | FY 2015 & 2014 | FY 2013 & FY 2012 | Comments |
|---|--|--|--|
| Long-Term Care Ombudsman | FY 2015: 618 cases 1,044 complaints FY 2014: 734 cases 1,264 complaints | FY 2013: 671 cases 1,319 complaints FY 2012: 532 cases 1,149 complaints | Note 23 |
| Adult Protective Services Reports of harm | FY 2015: 4,968 intakes FY 2014: 3,085 intakes | FY 2013: 2,598 intakes FY 2012: 2,301 intakes | Intakes age 60+. Adult Protective Services (APS) Note 24 |

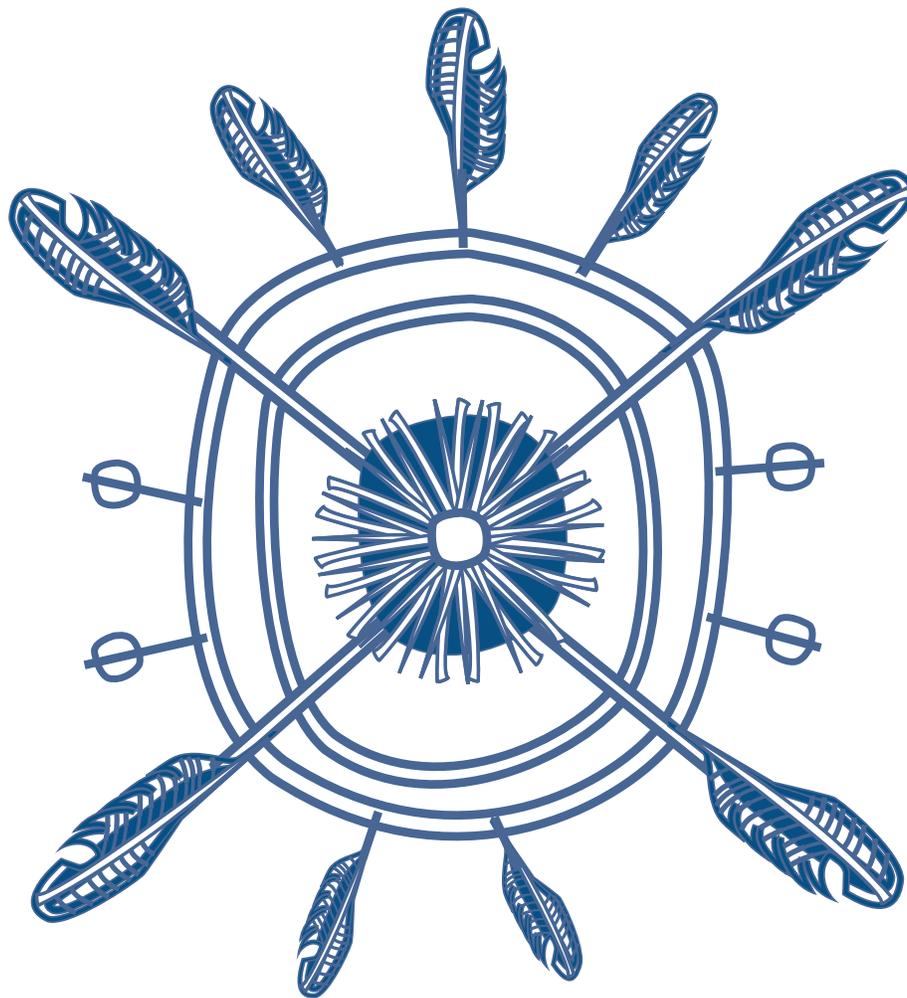
Senior Snapshot Notes

1. Data from Alaska Department of Labor and Workforce Development's population estimates. Regions are those used by the Alaska Department of Health and Social Services. "The Alaska State Plan for Senior Services, FY2012 – FY2015" prescribes funding by region for senior grant programs which include federal Older Americans Act money.
2. Data from "A Profile of Older Americans: 2014," Administration on Aging, U.S. Department of Health and Human Services.
3. The University of Alaska Anchorage's Institute for Social and Economic Research (ISER) estimated the 2004 cash contribution of Alaska retirees age 60 and older at \$1.461 billion. The estimate is contained in the 2007 ACoA-commissioned "Report on the Economic Well-Being of Alaska Seniors" available on the Commission's website at: <http://dhss.alaska.gov/acoa/Documents/documents/seniorWellbeingReport.pdf>. This estimate was updated by the UA Institute of Social and Economic Research for the Power of in Alaska Symposium, 2014.
4. SOURCE: Social Security Administration, Master Beneficiary Record, 100 percent data. Data obtained from Social Security Administration's website. Data from "OASDI Beneficiaries by State and County, 2014. The Alaska average monthly payment may be lower because of the high percentage of Alaska retirees who are subject to the "Windfall Elimination Provision," which limits Social Security retirement benefits for many individuals receiving public employee pensions. <https://www.ssa.gov/policy/docs/statcomps/supplement/2015/5j.html#table5.j6>
5. Figures on PERS (Public Employee Retirement System) benefits include PERS retirees age 60 and older who currently reside in Alaska. AK Dept. of Administration, Div. of Retirement & Benefits.
6. Figures on TRS (Teachers Retirement System) benefits include TRS retirees age 60 and older who currently reside in Alaska. AK Dept. of Administration, Div. of Retirement & Benefits.
7. Information from the Alaska Division of Public Assistance. The Alaska Affordable Heating Program (AKAHP) provides heating assistance to households between 151% to 221% federal poverty level (FPL). The federally-funded Low Income Heating and Energy Assistance Program (LIHEAP) provides heating assistance to households below 151% FPL. From 2011 to 2015, funding levels for LIHEAP have been reduced.
8. Adult Public Assistance is a supplement to SSI, so recipients must be either certified as disabled by the Social Security Administration (with severe long-term disabilities that impose mental or physical limitations on their day-to-day functioning) or be age 65 and older. There are income limits for the program, which is intended to assist aged or disabled individuals in attaining self-support or self-care.

9. Includes only HUD properties managed by AHFC. The total number of units has not changed for many years.
10. Includes individuals age 62+ as well as individuals of any age with a disability.
11. All families, regardless of age, are in this wait list count.
12. Data from Alaska's Roadmap to Address ADRD, 2014 and the 2015 Alzheimer's Disease Facts and Figures report.
13. The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing multi-state phone survey conducted in Alaska by the Division of Public Health. The 2013-14 data include cell phone data and use a new weighting methodology that allows adjustment for more demographic variables. Because of this – current data is not directly comparable to past years that did not use these methods. Binge drinking is defined as males having five or more drinks on one occasion and females having four or more drinks on one occasion.
14. The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing multi-state phone survey conducted in Alaska by the Division of Public Health. The 2013-14 data include cell phone data and use a new weighting methodology that allows adjustment for more demographic variables. Because of this – current data is not directly comparable to past years that did not use these methods. Heavy drinking is defined as adult men having more than two drinks per day and adult women having more than one drink per day.
15. The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing multi-state phone survey conducted in Alaska by the Division of Public Health. The 2013-14 data include cell phone data and use a new weighting methodology that allows adjustment for more demographic variables. Because of this – they are not directly comparable to past years that did not use these methods. Smokers are defined as current smokers.
16. The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing multi-state phone survey conducted in Alaska by the Division of Public Health. The 2013-14 data include cell phone data and use a new weighting methodology that allows adjustment for more demographic variables. Because of this – they are not directly comparable to past years that did not use these methods. Seniors with disabilities include those age 65 and over who say that they are limited in their activities because of physical, mental, or emotional problems.
17. The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing multi-state phone survey conducted in Alaska by the Division of Public Health. The 2013-14 data include cell phone data and use a new weighting methodology that allows adjustment for more demographic variables. Because of this – they are not directly comparable to past years that did not use these methods. "Obese" individuals are defined as those with a body mass index (BMI) of 30.0 or greater.

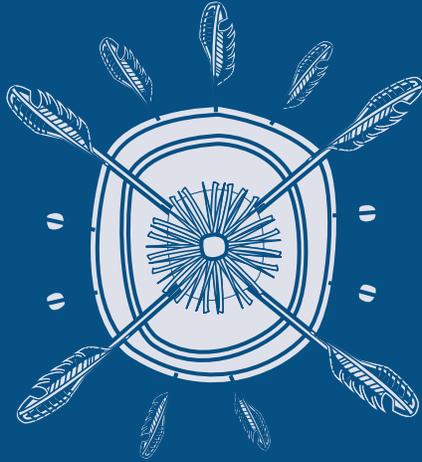
18. Information from the Division of Alaska Pioneer Homes.
19. Information from the Genworth Long Care Costs Across the United States, 2014 and 2015.
20. According to the Division of Senior and Disabilities Services, the decrease in the number of Alaskans Living Independently (ALI) waiver recipients (regardless of age) may be due to one or more of the following reasons: (1) A lawsuit that required SDS to actively provide services to individuals who were denied level of care until the division implemented the "Material Improvement Process" and "third level external review process," both of which have been accomplished by SDS; (2) employing tools and practices that better align with program eligibility criteria in the distribution of limited program funds; and (3) re-directing individuals with minimal support needs to alternative programs such as Personal Care Assistance, senior grant-funded services, and natural supports.
21. SFY12 –SFY15 information from Senior & Disabilities Services. FY11 info from DHSS Budget Overview. Senior grant programs include Nutrition, Transportation and Support Services (NTS), Senior In-Home Services, Adult Day Services, Family Caregiver, and ADRD Education and Support. The senior grant programs are available to individuals age 60 and older. Seniors (age 60+) need not be Medicaid-eligible in order to receive grant services. Over the past three years, this number has also included seniors served by ADRCs.
22. Information from the Medicare Information Office.
23. Complaints involving seniors (age 60+) in long-term care in the 17 skilled nursing facilities and 636 licensed assisted living homes. The top complaint against facilities was accidents/injuries/falls/improper handling. The OLTCO has seen a decline in the number of cases as well as in the number of complaints due to the fact that the OLTCO has changed the way we determine a case and complaint based on feedback from our federal officers.
24. Information from Adult Protective Services, State of Alaska Department of Health and Social Services.
25. Per 100,000, age 65+. Alaska Bureau of Vital Statistics, CDC National Vital Statistics http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_10.pdf. *Rates based on fewer than 20 occurrences are statistically unreliable and should be used with caution. ** Rates based on fewer than 6 occurrences are not reported.

For questions: Please call Deirdre Shaw 907-465-4792 at the Alaska Commission on Aging



Alaska Commission on Aging
FY 2015 Annual Report

<http://www.alaskaaging.org/>



FY 2015

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ACoA's Guiding Principles:

- ◆ *Highlight Seniors' Community Contributions.*
- ◆ *Keep Seniors Strong and Healthy.*
- ◆ *Promote Independence, Empowerment and Choice.*
- ◆ *Focus on Partnerships.*
- ◆ *Build Community-Centered Agencies.*
- ◆ *Provide Home-and Community-Based Care.*
- ◆ *Offer a Full Continuum of Care.*
- ◆ *Individualize the Response.*
- ◆ *Include Younger Generations.*
- ◆ *Target Services to the Most Vulnerable Seniors.*
- ◆ *Support High-Quality Staff.*
- ◆ *Respect Rights.*
- ◆ *Aim for Excellence.*
- ◆ *Give Fair Reimbursement.*