



2024-2028 State Plan on Aging  
Pennsylvania Department of Aging  
Draft for Comment – June 11, 2024

October 1, 2024 through September 30, 2028

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## Verification of Intent

The Pennsylvania Department of Aging (PDA), serving as the State Unit on Aging, hereby submits the Pennsylvania State Plan on Aging for the period October 1, 2024 through September 30, 2028 and certifies that the development of the state plan is and its administration by PDA shall be in compliance with the required assurances and provisions of the Older Americans Act.

This State Plan will serve as a blueprint over the next four years to ensure that older adults can age within their communities in a manner that aligns with their preferences and needs, promotes independence, embraces diversity, and builds capacity for our aging network to better support older adults, caregivers, and care partners. build capacity for our aging network, promote innovation, implement best practices, improve data management and reporting, support healthy living and active engagement, embrace diversity, honor individual choice, advocate and protect against elder abuse and strengthen accountability.

PDA is committed to providing person-centered planning and services that meets the needs of older adults within the communities of their choosing.

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Jason Kavulich, Secretary of Aging

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Josh Shapiro, Governor

# Executive Summary

## Introduction

Every four years, Pennsylvania submits a State Plan on Aging to the federal Administration for Community Living (ACL). Completing a state plan at specific time intervals is one of the requirements set by the Older Americans Act (OAA) to receive funding under OAA. The State Plan on aging provides goals and objectives related to assisting older residents, their families, and caregivers.

According to State Plan Guidance provided by ACL, the State Plan<sup>1</sup>:

- Documents the tangible outcomes expected from state long-term care reform efforts
- Translates activities, data, and outcomes into proven best practices, which can be used to leverage additional funding
- Provides a blueprint for coordination and advocacy activities the state will undertake to meet the needs of older adults, including integrating health and social services delivery systems
- Builds capacity for long-term care efforts in the state

The state plan provides an opportunity to create an age- and disability-friendly community for all Pennsylvanians. Creating a Commonwealth that is longevity-ready is a key priority for the current Pennsylvania Governor's administration, community-based organizations, and older adults themselves across the state.

Pennsylvania, like many states across the nation, currently sits at a crossroads with a large and rapidly growing older adult population. This demographic shift provides a unique opportunity to create a plan that will not only advance PDA's core mission to promote independence, purpose, and well-being for older adults, but truly create a Commonwealth that is age- and disability-friendly. The partnerships between federal, state, and local agencies that make up the aging network are critical to improving the quality of life for older adults across the state through completing the goals, objectives, and strategies outlined in this plan.

In addition to a rapidly growing population, the demographics of the older adult population are changing. Older adults are becoming increasingly diverse - representing a broad range of ethnicities, races, languages, and gender and sexual identities. This increasing diversity challenges Pennsylvania to create programs that are founded in justice and equity and provide historically underserved and minority groups with the services they need and desire.

On May 25, 2023, Governor Josh Shapiro signed Executive Order 2023-09, formalizing a project that directed the Secretary of Aging to develop a Multisector/Master Plan for Older Adults, now known as *Ageing Our Way, PA*. To develop this plan, PDA convened multiple departments, agencies, and stakeholder organizations to improve the overall infrastructure and coordination of services within the

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<sup>1</sup> Alison Barkoff, Assistant Secretary for Aging. State Unit on Aging Directors Letter #01-2023. (2023).

aging network to ensure they are both scalable and sustainable. The Plan was made available for public comment on February 20, 2024, and published in its final form on May 31, 2024.

Pennsylvania is required to submit a State Plan on Aging every four years to the ACL. The four-year State Plan must outline goals and objectives on programs and initiatives authorized by the Older Americans Act (OAA). The plan outlined in this document will serve as the blueprint over the next four years to build age-friendly communities that meet the needs of older adults across the Commonwealth. This plan is distinct from *Aging Our Way, PA* and to avoid confusion, the OAA federally required plan has been titled 2024-2028 Aging Four-Year State Plan.

The 2024-2028 Aging Four-Year State Plan draws upon insights and experiences gained from the intensive community outreach and feedback process used to create *Aging Our Way, PA*. It aligns with the priorities outlined in *Aging Our Way, PA*, which were established through stakeholder engagement utilizing AARP's Eight Domain of Community Livability Framework.

This Plan aims to connect the strategies and key topic areas of the 2020-2024 Four-Year State Plan, the priorities identified in *Aging Our Way, PA*, and the key topic areas established by the ACL in 2021, including:

- Older Americans Act (OAA) Core Programs
- COVID-19
- Equity
- Expanding Access to Home- and Community-Based Services (HCBS).
- Caregiving

The goals and objectives included in the 2024-2028 Aging Four-Year State Plan will coincide the priorities identified in *Aging Our Way, PA* and will also closely align with the local area plans created by the Area Agencies on Aging (AAAs).

With a shared goal and vision, PDA commits to drive meaningful change in the way programs and services are created, offered, and delivered to older adults and create a state in which older adults can age with the independence and dignity they deserve.

## Goals

Over the next four years, PDA will collaborate with the AAAs, the public, and other key stakeholders on the following four goals to better meet the needs of older adults across the state:

**Unlocking Access:** Design and offer equitable, affordable, and available options and opportunities that older adults may choose from for healthy and engaged lives, regardless of ability; socioeconomic status; racial, ethnic, linguistic, or cultural backgrounds; or geographical location.

**Aging in Community:** Remediate barriers that prevent older adults from remaining in their own homes, maintaining familiar surroundings, staying connected to their communities, and living in secure dwellings.

**Caregiver Supports:** Build a comprehensive catalogue of supports and enhancements that provide caregivers with help at home, respite, training, and navigational tools.

**Education & Navigation:** Lead a pervasive, coordinated network of community and academic partners to raise public awareness of services for older adults, provide information that reaches everyone and is understandable by all, ensure timely and streamlined connection to assistance with any needed resource, and resolve the challenging problems that older adults face in their daily lives.

## Mission Statement, Vision, and Values

**PDA Mission:** The mission of the Pennsylvania Department of Aging is to promote independence, purpose, and well-being in the lives of older adults through advocacy, service, and protection.

**Vision:** The 2024-2028 Four-Year State Plan, in coordination with *Aging Our Way, PA*, will guide PDA and the 52 AAAs in Pennsylvania's Aging Network as we work collectively to provide older adults across the Commonwealth with the resources they need to age with dignity and respect and remain vital, active members of their communities. With this approach, we commit to creating a state in which older Pennsylvanian can experience happiness, dignity, and fulfillment.

### Values:

- Diversity and inclusion strengthen us.
- Innovation drives us.
- We are passionate about the customer experience. We lead strategically to meet future needs.
- We listen and effectively communicate with consumers and partners.
- We act with integrity.
- We value our workforce.
- Partnership and collaboration enhance our capacity.
- We hold ourselves and partners accountable for results.
- We manage resources entrusted to us responsibly.

## Description of PDA

The Pennsylvania Department of Aging (PDA), established by Act 70 in 1978, is Pennsylvania's designated State Unit on Aging (SUA) under the Older Americans Act (OAA). This landmark legislation, in conjunction with the OAA 2006 Reauthorization, charge the Department "to advocate for the interests of older Pennsylvanians at all levels of government."<sup>2</sup> Unlike many of its sister agencies across the Commonwealth, such as the Department of Human Services (DHS) or the Department of Health (DOH), PDA has the unique charge to advocate for the over 3.5 million older adults of Pennsylvania. The organizational structure of PDA can be seen in Appendix A.

PDA provides leadership and coordinates with the state's 52 Area Agencies on Aging (AAAs) to develop and provide older adults services authorized under OAA. In addition to providing technical assistance, PDA provides policy guidance, data collection systems management, education, quality assurance, and training. Senior community centers (SCCs), adult day living centers (ADLCs), and PA Link (Pennsylvania's Aging and Disability Resource Centers) are also vital components of the aging network and continuum of

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<sup>2</sup> (Aging PA Publications and Procedure Manual, 2020)

service offerings. Each of these distinct resources are critical in improving the lives and well-being of older adults.

Federal resources provided by OAA fund, at least in part, the core programs that are provided to older adults, their families and care partners, and older adults with disabilities across the state. Unlike many other states, Pennsylvania's older adults also benefit from the state lottery. Lottery funds provide 80% of PDA's budget. This funding is critical to the creation, development, and dissemination of many of PDA's programs and services.

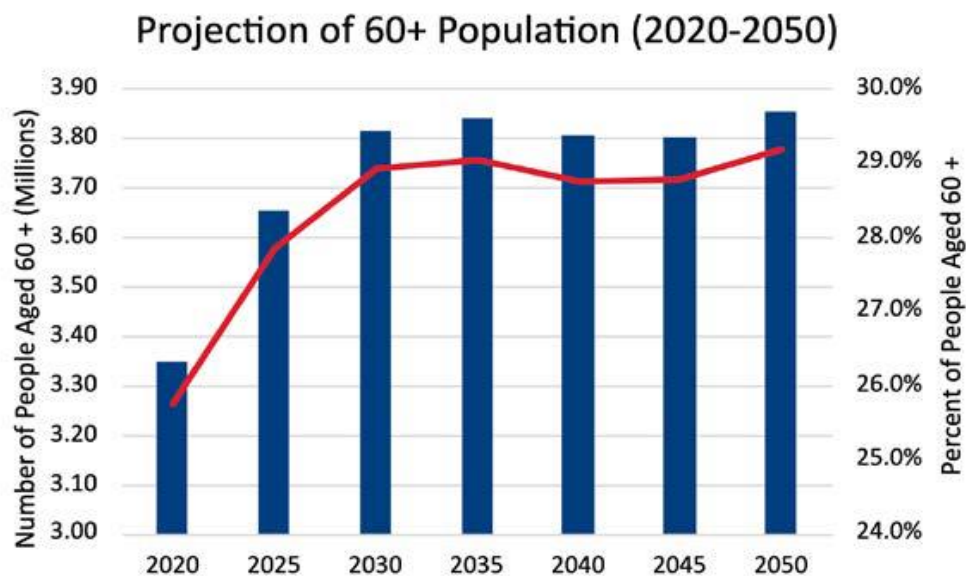
Federal funds are allocated across service areas by the Intrastate Funding Formula (IFF), which can be seen in Attachment C. The weighted formula considers the older adults in both greatest economic need and greatest social need, as described by the OAA (Section 101 (28)(E)(i)(ii)). The 2024-2028 State Plan and IFF considered greatest economic need and greatest social need as required by the Older Americans Act with particular attention to low-income minority older individuals, older persons with limited English proficiency, older individuals living in rural areas, and older adults with a disability.

The State Plan outlined in this document is the product of internal strategic planning and robust stakeholder engagement. The goals, strategies, and objectives described below provide a visionary strategy for the Department to achieve over the next four years.

## Population, Socioeconomic Demographics, & Priority Populations

Like many states across the nation, Pennsylvania has a large and rapidly growing older adult population. There are nearly 3.5 million older adults aged 60+ in Pennsylvania and almost one out of every four residents are an older adult, making PA home to the fifth largest older adult population in the nation. This number is expected to shift to one in three by the year 2030. This marked increase in the sheer size of the population indicates that Pennsylvania needs to evaluate and assess the existing systems and aging infrastructure of today to ensure that it is prepared for the expanding number of older adults over the next decade. Understanding the population growth and projections of the population of older adults is a critical component of any state plan as older adults face unique challenges and barriers related to quality of life. While the Department characterizes older adults as individuals 60 and over, much of the publicly available data is based on 65 and over. To account for this, we have identified throughout this document when the data is based on age 60+ versus 65+.





Based on the most current American Community Survey Census data, of the older adult population aged 60+ in Pennsylvania, 85.9 % identify as white, 7.6% of older adults identify as Black or African American, 2.2% identify as Asian, 1.5% identify as “some other race”, 2.7% identify as 2 or more races, and 3.1% identify as Hispanic or Latino. Pennsylvania’s older adult population is also becoming linguistically diverse with 495,797 older adults speaking a language other than English at home. Language and cultural differences create a specific barrier for older adults that have different ethnicities, cultures, or backgrounds as they seek services and supports. Placing diversity and equity at the forefront of every conversation, and including members of the community, will help PDA to develop services that are culturally sensitive and appropriate.<sup>3</sup>

Furthermore, as we age, we are more likely to age into a disability, with 45% of the world population over the age of 60 having an expressed disability.<sup>4</sup> In Pennsylvania, 690,807 individuals aged 65+ have a described self-care need according to the Center for Rural PA<sup>5</sup>. Older adults are also more likely to have complex needs and multiple chronic conditions that require individualized care.<sup>6</sup>

The U.S Surgeon General brought loneliness and isolation in the United States to the forefront of public conversation in 2023. Older adults remain central to this concern, as those who live alone are more likely to suffer from social isolation, which has been linked to increased risk of developing dementia or

<sup>3</sup> U.S. Census Bureau. (2022). DP05: ACS Demographic and Economic Characteristics. Census Bureau Table

<sup>4</sup> Centers for Disease Control and Prevention. (2022). Disability & Health U.S. State Profile Data: Pennsylvania. CDC

<sup>5</sup> [Official Website of the Center for Rural Pennsylvania \(pa.gov\)](https://www.pa.gov/government/agencies/center-for-rural-pennsylvania)

<sup>6</sup> Senior Health Rankings. 2023 Senior Report. (2023)

even premature death.<sup>7</sup> Currently, 20% of those aged 65+ live alone in Pennsylvania based on reports gathered from the Penn State Data Center and the American Community Survey.

Finally, Pennsylvania has a large population living below or near the federal poverty line (FPL). Individuals vulnerable to falling below the FPL are referred to as the “near poor” population. Normally, the near poor population represents those between 100%-125% of the FPL or 100-150% of the FPL. Understanding the needs of the near poor population is crucial, given that 17% of individuals aged 60+ in Pennsylvania live at or below 150% of the FPL.

Throughout the planning process for the 2024-2028 State Plan on Aging, special consideration was given to ensuring this plan equitably addressed the needs of all of Pennsylvania’s older adults, especially those in both greatest economic and social need. Older adults that may fall into the greatest social and or the greatest economic need may include, but are not limited to, older adults of minority status, including Asian Americans and Pacific Islanders, older Native Americans, older Hispanic Americans, older African Americans, adults with disabilities, older adults who identify as LGBTQ+, those with limited English proficiency, and those that are living below or near poverty. It also important to note that many of these factors are intersectional and often hard to understand independent of one another.

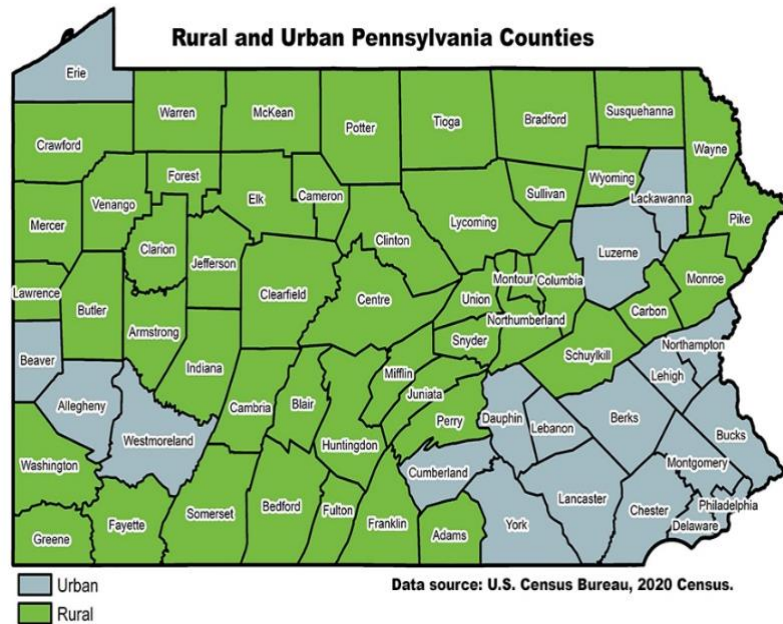
Historically, the individuals that fall into these categories have been disenfranchised and marginalized, preventing many older adults from receiving the services they require. Pennsylvania will benefit by increasing outreach and services to these diverse populations, which add to the vibrance of our communities. Engaging in a strategic planning process driven by equity is key to ensuring that the aging network is prepared to help all older adults across the commonwealth lead healthy fulfilling lives. Finally, by prioritizing populations that have greatest economic and/or greatest social need, Pennsylvania strives to offer accessible and effective programs and services through its aging network.

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<sup>7</sup> HHS Press Office. New Surgeon General Advisory Sounds Alarm on Health Worker Burnout and Resignation. (2022)

## Geography

Considering the geography and distribution of older adults across Pennsylvania is critical in ensuring that



services reach all community members. Urban, suburban, and rural communities face common and unique barriers with changing needs and resources.

Older adults in urban areas may face other unique challenges. Historically marginalized and underserved communities often face low food access or food deserts. Food deserts are areas that have limited access to affordable and nutritious foods.<sup>8</sup>

While Pennsylvania has large and mid-sized urban centers, many residents live in remote locations. According to the Center for Rural

Figure 2: PA Rural/Urban Map by County

PA, 48 of Pennsylvania's 67 counties are considered rural<sup>9</sup>. Older adults living in rural areas often face

greater challenges in accessing public transportation or must drive further distances to hospitals or urgent care centers. Additionally, there is an extreme shortage of primary care providers and specialists practicing in rural areas of Pennsylvania, further exacerbating health inequities.

## Programs, Services, and Funding

The Department provides a range of services and programs that directly benefit older Pennsylvanians, their families and care partners through our AAA network. These services are funded through both state and federal funding to Planning and Service Areas (PSAs) across the commonwealth through allocations to AAAs calculated by an Intrastate Funding Formula approved by ACL. A full list of the Department's core services can be seen in Appendix C.

Individuals interested in enrolling and receiving services through any of the Department's aging services programs are assessed using the Department's assessment tool. The assessment tools are designed to capture essential information about an individual's functional abilities, met and unmet needs, and the need for services. Individuals that are assessed and meet the financial and clinical eligibility requirements for Medicaid Long-Term Services and Supports are referred to the PA Department of Human Services' independent enrollment broker to begin the Medical Assistance Eligibility

<sup>8</sup> v [USDA ERS - Go to the Atlas](#)

<sup>9</sup> [Official Website of the Center for Rural Pennsylvania \(pa.gov\)](#)

Determination Process. This collaboration is essential to ensuring that older adults are directed to the program and services that best support their needs. The assessment tools include:

- **Needs Assessment Tool (NAT):** A comprehensive assessment that captures information about the individual and acts as a foundation for developing the person-centered care plan. The NAT specifically collects information on cognitive and mental status; medical, neurological, intellectual, and mental health conditions; depression and life satisfaction, and includes a suicide screening. Based on responses to questions in the NAT, Care Managers will make appropriate referrals for medical and/or psychiatric intervention.
- **Express Needs Assessment Tool (NAT-E):** A shortened version of the NAT which is used only for individuals in the OPTIONS Program receiving specified limited services and individuals receiving congregate meals at a senior community center.
- **Caregiver Assessment Tool (CAT):** A comprehensive assessment that collects data and information about a caregiver and acts as a foundation for developing the Person-Centered Care Plan for individuals enrolling in or receiving services in the Caregiver Support Program.

## Caregiver Support Program

The Caregiver Support Program provides assistance and support to primary caregivers to encourage a healthy, ongoing relationship with their care receivers. The program aims to alleviate the stresses associated with caregiving by focusing on the well-being of the caregiver, providing access to respite care, addressing the need for formal and informal supports, and providing financial reimbursement for out-of-pocket costs associated with caregiving-related services and supplies. The program is designed to serve primary caregivers who meet one of the following eligible categories:

- Individual 18 or older who is the Primary Caregiver for:
  - An individual age 60 or older with functional deficits
- An individual of any age who has a diagnosis of Alzheimer's Disease or other chronic dementia
  - Individual 55 or older who is the Primary Caregiver for:
  - A dependent child under 18 and related by blood, marriage, or adoption
  - An individual age 18-59 with a disability and related by blood, marriage, or adoption

This program provides reimbursement to caregivers for out-of-pocket expenses they incur associated with caregiving related services and supplies. An income-based sliding scale is used to determine the amount or percentage of reimbursement a caregiver receives. This unique program blends both the requirements of the federal National Caregiver Support Program, and Pennsylvania's State Family Caregiver Support Program funded by state dollars.

## Nutrition Services

Nutrition services are designed to reduce hunger and food insecurity and promote socialization, health, and overall well-being through improved nutrition. Nutrition services include nutrition screening, education, counseling, and direct meal services to older adults, with particular focus given to those deemed nutritionally at-risk, due to social or economic need, or who experience isolation due to

geographic location or disability, and those residing in rural areas. Direct meal services are comprised of congregate and home-delivered meals.

### OPTIONS Program

OPTIONS is a home and community-based services program for individuals 60 years of age or older who do not qualify for Medicaid long-term services and supports. Services include, but are not limited to, adult day care, care management, home-delivered meals, personal care, home support, home modifications, personal emergency response systems, and medical equipment, supplies, and adaptive devices. There are no income or asset requirements to be eligible, but individuals may be required to share in the costs of services based on income on a sliding scale. Pennsylvania's OPTIONS program is primarily funded with state lottery dollars but does utilize Title III B and C funding.

### Senior Community Centers

Senior Community Centers (SCCs) are in community settings that facilitate the social, emotional, and physical well-being of older Pennsylvanians as part of a comprehensive and coordinated system of programming and services. They offer a wide variety of activities, programs, and services that vary from center to center depending on the needs and desires of the consumers and community being served.

Services and programs are provided at no cost to participants age 60 and older. Required services offered at a SCC include:

- Nutrition services such as:
  - Congregate meal services
  - Nutrition education
  - Nutrition screening and counseling
- Fitness and well-being classes
- Educational programs for creative instruction, self-enrichment, and independent living
- Volunteering opportunities

SCCs must also facilitate access to services that may be available within the local Area Agency on Aging's Planning and Service Area. Usually this involves making a referral to the local AAA on a participant's behalf. Many SCCs offer the following additional services or access to representatives for the following services:

- Providing information, referral, and outreach
- Transportation
- Legal and advocacy assistance
- Employment services
- Volunteer services
- Long-Term Care Ombudsman services
- Housing and placement services and assistance
- Other services that may be available in the local community

## Transportation

Transportation is a fundamental aspect to healthy communities. Access to reliable transportation, especially in rural areas, is a social determinant of health that can often determine how socially connected an individual is to their communities or if they can access their local health care services.

Because transportation is imperative to our healthy communities, Pennsylvania offers free transit and shared-ride programs to help provide affordable transportation options for older adults. Both programs are funded by proceeds from the Pennsylvania lottery and administered by the Pennsylvania Department of Transportation (PennDOT).

Individuals aged 65 and older may ride for free at all times, any day of the week, on the fixed route services of local public transit systems throughout Pennsylvania.

Shared-Ride is a demand-responsive, curb-to-curb transportation service for older adults. Older adults may use Shared-Ride for any reason, such as rides to senior community centers, medical appointments, Adult Daily Living Centers, social service agencies, grocery stores, etc. PennDOT pays 85 percent of the fare for individuals age 65 and older and the individual or a third-party agency, such as the AAA, pays all or some portion of the 15 percent copay.

## Legal Services

The Legal Assistance Program provides older adults with the greatest social and economic need access to free legal advice and representation by an attorney including, to the extent possible, counseling, or other appropriate assistance by a paralegal or law student under the supervision of an attorney, and counseling or representation by a non-lawyer were permitted by law. Older adults may be required to pay for court costs and filing fees for some matters.

AAAs are to allocate a portion of funds for the delivery of legal services to older adults in their PSA. AAAs may request an Administrative Waiver of this requirement (see Section III) if it can demonstrate legal services being provided by other sources meet the needs of the older adults in their PSA.

## Long-Term Care Ombudsman Program

The Long-Term Care Ombudsman Office, established within the PDA, protects the health, safety, welfare and rights of individuals receiving long-term care. Pennsylvania long-term care ombudsmen (both paid and volunteer) serve residents of skilled nursing facilities and other residential care communities.

Pennsylvania's Empowered Expert Residents (PEER) are long-term care residents who are trained to self-advocate and empower their fellow residents to improve their quality of life and quality of care in long-term care facilities. PEER is a partnership between residents, facility staff, and the local ombudsman.

## PACE and PACENET Programs

The Pharmaceutical Assistance Contract for the Elderly (PACE and PACENET) programs offer low-cost prescription medication to qualified Pennsylvania residents, age 65 and older who meet the income requirements. The Program has an open formulary that covers most medications that require a prescription. PACE and PACENET are funded by the Pennsylvania Lottery. Individuals can enroll in PACE or PACENET while also receiving benefits from another insurer, including a former employer-retiree

plan, the Veterans Administration, a Medicare Advantage Plan, or a Medicare Part D plan. Individuals enrolled in the Pennsylvania Department of Human Service's Medical Assistance prescription benefit are not eligible for PACE or PACENET.

### The PACE Clearinghouse

The Clearinghouse provides the expertise necessary to determine the likelihood of enrollment for persons of all ages who are seeking assistance from manufacturers' medication programs. The Clearinghouse has evolved since its beginning in 1999. It handles applications from individual patients, physician offices, social workers, and other agencies. The staff gather the patient information required to complete applications and offer guidance and assistance to the patient throughout the application and reapplication processes. In addition, the Clearinghouse helps individuals apply for and access all of the social support services integrated into the PACE application center, such as Supplemental Nutrition Assistance Program (SNAP), Low Income Home Energy Assistance Program (LIHEAP), and the Property Tax Rent Rebate (PTRR), providing necessary connections for navigating social drivers of health. The Clearinghouse has coordinated pharmaceutical assistance to nearly 109,000 individuals since its inception.

### Re-entrant Placement and Related Services

PACE co-administers parts of the Pennsylvania Department of Corrections (DOC) pharmacy benefit. Additionally, it works with the DOC to assist re-entrants returning to the community. The comprehensive program knowledge and ongoing coordination provided by the Clearinghouse was identified by the Department of Corrections (DOC) as having potential to be particularly helpful for parolees upon release. For the past 10 years, PACE and DOC have partnered to use the Clearinghouse to assist reentrants with obtaining medications, transportation, and social services, and with finding furniture, physicians, housing, food, grants, and other support. These efforts have provided ongoing coordination and support to nearly 3,000 reentrants just in 2023. The sustained support provided through the partnership has proven to be remarkably beneficial: **recidivism among reentrants using the Clearinghouse services is below 2%.**

### Veterans Outreach and Benefit Application Services

In November 2022, in conjunction with the Pennsylvania Department of Military and Veterans Affairs, the United States Department of Veterans Affairs, and the Pennsylvania Department of Transportation, the PACE Program began a statewide services enrollment outreach project. This major effort sends 5,000 outreach letters per week to 540,000 veterans and will continue until all veterans have been contacted. Two PACE call centers handle inquiries stimulated by the outreach, one center for veterans under the age of 65 and one call center for persons aged 65 and older. More than 167,000 letters have been mailed, more than 6,389 calls received, and 4,097 veterans have been assisted with benefits and referrals.

### Senior Food Box Program

The PACE Program, in collaboration with the PA Department of Agriculture, continues to expand enrollment in the Senior Food Box Program (SFBP), which improves the health of low-income seniors by supplementing their diets with nutritious USDA foods. In August of 2021, the PACE Cardholder Call Center began outreach efforts to eligible PACE enrollees and thereafter, a second call center was added at the PACE Application Center (Benefits Data Trust). More than



32,000 applications have been received since 2021 and 93% of the applications have been approved. PACE transfers the applications to Hunger Free PA where they are distributed to one of the network's 17 food banks. In some areas of the state, food boxes are delivered through an agreement with Door Dash.

### Naloxone Copay Assistance

In partnership with the Pennsylvania Department of Drug and Alcohol Programs, the Naloxone Copay assistance program provides a benefit of up to \$50 on each naloxone prescription for people with insurance. The benefit can be used at any PACE provider pharmacy and no prescription is needed when using the state standing order.

### Outreach to unenrolled eligibles and facilitated enrollment

The PACE Application Center for the Department of Aging has conducted data-driven outreach and application assistance to connect older Pennsylvanians with public benefit programs to help cover the cost of prescriptions, shelter, and food. The Center identifies older Pennsylvanians who may be eligible for PACE and other benefit programs including the Supplemental Nutrition Assistance Program (SNAP), Senior Food Box Program, Property Tax/Rent Rebate (PTRR), Low-Income Home Energy Assistance Program (LIHEAP), Medicare Savings Programs (MSP), Medicaid coverage, and Medicare Part D Extra Help Low-Income Subsidy (LIS). The Center conducts outreach to those who may be eligible for benefits and completes and submits applications on behalf of older Pennsylvanians.

The Center uses multiple sources of federal, state, private, and public data and funding to conduct outreach. Since the Center began working with PACE, outreach efforts have resulted in over 240,500 applications for the PACE and PACENET programs and 157,500 applications for LIS. In addition, the Center has submitted over 178,500 other benefit applications on behalf of Pennsylvania's seniors. In total, seniors received approximately \$1.35 billion in benefits to help them afford their prescriptions, age in place, and live with dignity.

### Pennsylvania Medicare Education and Decision Insight (PA MEDI)

The Department established a statewide program, previously known as APPRISE, in Pennsylvania in 1900. The grant is administered through ACL. In 2021, the Department rebranded and renamed APPRISE as the Pennsylvania Medicare Education and Decision Insight or PA MEDI.

Using SHIP grant funds, the PA MEDI Program provides free, in-depth, unbiased, one-on-one health insurance counseling to Medicare beneficiaries, their families, and caregivers about Medicare and Medicaid benefits and eligibility, Medicare supplement insurances, Medicare Advantage Plans, Medicare prescription (Part D), and Medicare Savings Programs. The Department is responsible for the statewide management of the program and oversees the operation of a statewide toll-free hotline (800-783-7067) for Medicare-related inquiries. Area Agencies on Aging are responsible for PA MEDI's local administration.

### Senior Community Services Employment Program (SCSEP)

PDA is the grantee for the Senior Community Services Employment Program (SCSEP) administered by the United States Department of Labor. Seven (7) Area Agencies on Aging (AAAs) and one contracted vendor, currently AARP, serve as sub-grantees of the Department. PDA participated in a collaboration



with the Department of Labor and other state agencies to provide input on the 2024-2028 Workforce Innovation and Opportunity Act (WIOA) Combined State Plan. During this process, PDA highlighted the importance of increased coordination with OAA programs and SCSEP<sup>10</sup>. This is now a key goal in the WIOA plan.

## Health & Wellness Programs

PDA's Title IIID funded services focus on keeping older adults healthy, manage chronic conditions and preventing injury and disease through evidence-based programs. Programs include workshops on chronic conditions, injury and disease prevention, mental health, substance abuse, medication-management, exercise, and nutrition. There are approximately 32 Health & Wellness Evidence-Based Programs available offered by the Area Agencies on Aging across the state. Either in person or virtual free to anyone 60 or older.

PDA owns a Self-Management Resource Center multi-agency license so all 52 AAAs may provide at least one of the CDSME programs. In addition, PDA is the proprietary owner of HSOA and HSIM which allows all 52 AAAs to conduct at least one PDA owned falls prevention program each year.

PDA provides bi-monthly meetings and technical assistance to all 52 AAAs to support and enhance their Title IIID offerings as well outreach to underserved populations in PA by offering EBPs in senior centers, faith-based organizations, community centers, parks, health care organizations etc.

Some of the most widely available programs and Endorsed by PDA include:

- **Chronic Disease Self-Management Program (CDSMP)** reviews healthy ways to manage living with a chronic condition through six workshops covering managing medications, improving nutrition, increasing fitness and exercise, communicating with your doctor, managing the daily emotions that often accompany a chronic condition, and learning to work within the health care system.
- **Diabetes Self-Management Program (DSMP)** like CDSMP reviews healthy ways to manage living with diabetes through six workshops.
- **Chronic Pain Self-Management Program (CPSMP)** like CDSMP and DSMP reviews healthy ways to manage living with chronic pain through six workshops.
- **Healthy IDEAS** (Identifying Depression Empowering Activities for Seniors) provides depression screening and depression intervention to older adults and empowers them to manage their depression through a behavioral activation approach that encourages involvement in meaningful activities.
- **Healthy Steps for Older Adults (HSOA)** is an evidence-based falls prevention program that is designed to raise awareness of falls, screen for falls risk, introduce methods to prevent falls, and provide referrals and resources through two workshop sessions.
- **Healthy Steps in Motion (HSIM)** is an evidence-based falls prevention exercise program open to participants of all fitness levels and designed to increase strength and balance through eight workshop sessions.

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<sup>10</sup> [PA WIOA Combined State Plan 2024-2028 DRAFT.pdf](#)



available through a local collaboration between the Area Agencies on Aging (AAAs) and a local housing partner.

## Collaborative Impact

To better serve older Pennsylvanians statewide, the Department fosters partnerships with other state agencies, home- and community-based organizations, and academic partners to integrate health, health care, and social services systems. These strategic alliances allow the Department to leverage the expertise of multiple sectors and better meet the needs of older adults in a more holistic approach. Through collaboration, the Department plays a critical role in integrating these systems more effectively. Below are a few examples of these collaborations, which provide the Department with the knowledge we need to better serve our constituents.

- **National Technical Assistance Center** – The Department participates in meetings the National Technical Assistance Center hosts with other states and stakeholders. These meetings are designed to brainstorm and share ideas. Additionally, the National Technical Assistance Center hosts presentations and technical assistance webinars which Department staff attend. As a result of a recommendation provided by the National Technical Assistance Center, the Department participates on the PA Partners Supporting Families Workgroup which was formed to collaborate with other stakeholders in PA. The Department will continue to attend and participate in events hosted by the National Technical Assistance Center to continue to gain valuable information and share ideas with other stakeholders.
- **Temple University** – The Department’s Protective Services Bureau collaborates with Temple University’s Institute on Protective Services to ensure that we are up to date on best practices and providing quality services. Based on recommendations from the Institute on Protective Services and the 2021 Protective Services Conference, basic training for PS investigators was revised to incorporate trauma-informed components in October, 2023.
- **Pennsylvania Association of Community Health Centers (PACHC)** – Medical assistance programs often have lengthy and sometimes confusing application processes. The Department uses PACHC services to screen applicants for Medicare Savings Programs and to provide assistance with applications for these programs. Utilizing PACHC helps the Department reach more individuals every year and ensures that older adults have access to the benefits they qualify for.
- **Benefits Data Trust (BDT)** – The Department has an ongoing agreement in coordination with Benefits Data Trust and administered through one of the AAAs to provide benefit coordination to older adults. This agreement allows BDT to have a dedicated phone line that conducts eligibility screenings and assists with submitting applications on behalf of those likely to be eligible for Extra Help and/or Medicare.

# Learning from Our Past for a Better Tomorrow: Lessons from COVID

Throughout the execution of the previous 4-year state plan spanning from 2020 to 2024, the Pennsylvania Department of Aging, alongside the Commonwealth and the entire nation, remained entangled in the complexities of the COVID-19 pandemic and its multifaceted repercussions. This federal public health emergency highlighted and exacerbated the health disparities that affect individuals and communities in the greatest economic and social need. With older people experiencing the greatest risk of infection, the Department of Aging had not only the responsibility, but the opportunity to respond with innovation and collaboration in an efficient manner. American Rescue Plan Act funding (ARPA) was instrumental in ensuring that the Department and the AAAs could continue to provide quality services and supports to older adults. All COVID-19 supplemental funding is expected to be spent by July 1, 2024.

In response to the COVID-19 epidemic, the Department collaborated with agencies across the Commonwealth to ensure that older adults were receiving timely information. Partnership with the Pennsylvania Department of Health (DOH), Department of Human Services (DHS), Pennsylvania Emergency Management Agency (PEMA), and others was critical in this effort. During the height of the pandemic, every agency in the Commonwealth, including the Department of Aging had staff continuously report to the PEMA Offices to answer phone calls and concerns from older Pennsylvanians. The rotating staff members who supported the PEMA efforts would receive critical information and report out PDA's own continued efforts. Furthermore, Long-Term Care ombudsmen were key in providing information to long-term care facilities on how to request and receive personal protective equipment (PPE), cleaning supplies, and how to stay open to the public to continue to provide services. The lessons learned during this time has made the Department more agile in its services and better prepared for future emergencies.

During the pandemic, the Department, through the flexibilities provided by the COVID-19 Federal Public Health Emergency and ACL, was able to offer more effective and efficient responses in delivering essential services to older Pennsylvanians throughout the pandemic. The Department found that these more flexible options were more accessible for all older adults and allowed more older adults experiencing accessibility options to receive needed services.

- **Data Collection & Reporting:** Collecting data related to the federal public health emergency was essential in an effective response to COVID. Through the Department's online reporting tool, the Bureau of Quality Assurance tracked COVID-19 vaccine uptake and booster shots among older adults.
- **Protective Services:** To ensure our Protective Services continued, staff members utilized remote communication platforms to provide consistent technical assistance and training to AAA protective services staff, as well as for PS investigators to communicate with older adults in need of protective services. COVID-19 guidance in conducting face-to-face visits was provided to mitigate the spread of COVID-19 for older adults and AAA PS investigators. Furthermore, PDA collaborated with Temple Institute to create an online training module for PS investigators entitled "PS Standard Precautions for Infection Control When Working with Older Adults (PPE) Training Course" which remains on the PDA learning management system (LMS). This education course was critical in providing

the most up-to-date information possible efficiently. PS investigators can still access these courses.

- **Meals:** During the COVID-19 pandemic, Senior Community Centers (SCCs) were closed to in-person services and programs across the Commonwealth. The Department provided guidance to the AAA network and SCCs related to meals provided by SCCs. AAAs and SCCs responded to the changing landscape of the pandemic by finding creative, innovative approaches to serve participants. These approaches changed the method of providing traditional programming and meals to older adults, including the use of Grab and Go meals, also commonly referred to Carry-Out, Take-Out, or Drive-Thru Meals. Grab and Go meals have become an effective means of providing nutrition services to older adults through the SCCs. The Department has provided guidance to the AAAs and SCCs to continue the use of Grab and Go meals, at their discretion, after the Federal Public Health Emergency ended to best serve older adults in their communities.
- **Vaccine Education:** During the pandemic, the Department's Education and Outreach office and the Communications office partnered with sister agencies including DOH and DHS to share best practices related to social distancing, handwashing, and eventually, vaccines. This huge effort to provide materials to older adults both aging-in-place and in community-based settings was integral in the high uptake of the Covid-19 vaccine. The department continues to foster our relationship with sister agencies to create materials on vaccine education to disseminate to hard to reach older adults, including those in long-term care settings.
- **Long-Term Care Communication:** The pandemic highlighted a clear communication gap between commonwealth media outlets and individuals residing in long-term care facilities in the state. During this time, the Long-Term Care Ombudsman Office collaborated with the Department of Health to create and distribute interactive materials directly to long-term care residents related to emergency preparedness, mask-wearing, handwashing, social distancing, and vaccines. In the face of newly emerging health crises, the Department can easily update these materials. Additionally, these educational materials can be distributed in perpetuity in the case of another public health emergency or natural disaster.
- **Prescription Assistance:** At the onset of the pandemic, the PACE Program adjusted prescription parameters to lessen cardholder burden by easing the requirements on early refills and prescription quantities.
- **COVID Call Center and Outreach:** As COVID vaccines became available, specific steps by the Department's PACE Program and the local aging network led to targeted outreach to Pennsylvania's older adult population. Through inbound and outbound telephone call center explanation and targeted postcard outreach, the PACE Program assisted consumers with assessing vaccine eligibility, directed them to local vaccination providers, scheduled appointments, offered transportation assistance, and shared up-to-date and accurate vaccination information. There were over 120,000 inbound and outbound calls. These telephone-based direct to consumer actions contributed substantially to the state quickly reaching one of the highest COVID-19 vaccination rates in the country for persons 65 years and older. PACE also arranged various community vaccination events, accounting for 25,000 vaccinations. Additionally, PACE arranged

vaccination appointments at pharmacies and in-home appointments for people were home-bound, or otherwise unable to get to an appointment. The PACE program will continue to make vaccination appointments for older adults that need assistance in securing an appointment.

## Community Outreach & Needs Assessment

The 2024-2028 State Plan was developed by the PDA with input from stakeholders, AAAs, the Pennsylvania Council on Aging (PCOA), the Long-term Care Council (LTCC), and other state agencies and commissions. Research for this plan utilized the World Health Organization's (WHO) framework to support the advancement of age-friendly and livable communities. This framework was adapted by AARP for the United States and is based upon the eight (8) domains of livability that have been found to have a direct impact on the health and well-being of older adults across the world<sup>12</sup>.

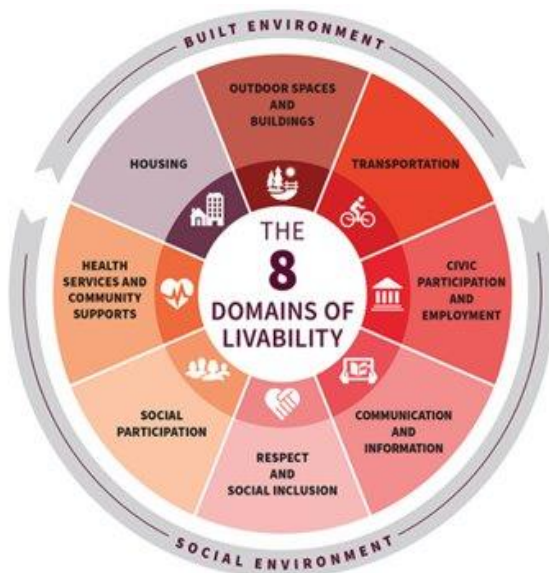


Figure 3: Eight Domains of Livability

The 8 domains, seen in Figure 3 and further explained in Appendix B, are inextricably linked to social determinants of health (SDH). These non-medical factors have long been noted for their influence on health outcomes and are the conditions and wider set of systems that shape individuals everyday lives<sup>13</sup>. Social Determinant of Health have a strong influence of health outcomes and health inequities. Exploring SHD through the framework of the 8 domains of livability provided the Department with unique insight into how older adults across Pennsylvania interact with each factor and how that impacts both their daily lives and their overall health and well-being.

PDA relied on the Pennsylvania Association of Area Agencies on Aging (P4A) and the network of 52 AAAs to lead listening sessions and community engagement to gain a better understanding of the barriers that older adults face in accessing services. This direct stakeholder engagement and iterative analysis guided the development of the goals and strategies outlined in both this document for the 2024-2028 State Plan as well as *Aging Our Way, PA*. AAAs and PDA completed over 200 in-person and virtual listening sessions. At least one listening session was held in all 67 counties. This tremendous stakeholder effort

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<sup>13</sup> [Social determinants of health \(who.int\)](https://www.who.int)

allowed the department to collect over 10,000+ comments between listening sessions, emails, letters, and an online form.

In addition to the 10,000+ comments collected directly from stakeholders, PDA completed a needs assessment survey in partnership with the University of Pittsburgh. The final Needs Assessment Survey can be seen in Appendix D. The University of Pittsburgh conducted a 900-person random sample telephone survey. PDA and the University also distributed a survey, available as an online form and requested paper copies, which yielded nearly 7,000 responses. Using existing relationships and building new partnerships with community-based organizations allowed PDA to distribute the survey widely. The Needs Assessment Survey was distributed and completed in multiple languages, including Spanish, Korean, Mandarin, and Spanish. By partnering with Long-term Care facilities, PDA distributed paper surveys in congregate-home settings.

PDA staff, with technical assistance from the LTCC analyzed and interpreted the data collected through the Listening Sessions, emails, comment cards, and the Needs Assessment Report to produce a compiled list of common themes that illustrate the barriers that older adults consistently face every day.

In addition to the 2024-2028 State Plan being rooted in stakeholder feedback, the draft of *Aging Our Way, PA* was published on the department's website on February 20th for a 30-day public comment period. The draft was available in HTML, which can be translated into any language that the viewer is using on their personal device.

## Goals, Objectives, Strategies, and Outcome Measures

The Department of Aging developed four goals based upon the five key topic areas designated by the Administration for Community Living and guided by the comments and concerns expressed during the stakeholder engagement sessions.

**Unlocking Access:** Design and offer equitable, affordable, and available options and opportunities that older adults may choose from for healthy and engaged lives, regardless of ability; socioeconomic status; racial, ethnic, linguistic, or cultural backgrounds; or geographical location.

**Aging in Community:** Remediate barriers that prevent older adults from remaining in their own homes, maintaining familiar surroundings, staying connected to their communities, and living in secure dwellings.

**Caregiver Supports:** Build a comprehensive catalogue of supports and enhancements that provide caregivers with help at home, respite, training, and navigational tools.

**Education & Navigation:** Lead a pervasive, coordinated network of community and academic partners to raise public awareness of services for older adults, provide information that reaches everyone and is understandable by all, ensure timely and streamlined connection to assistance with any needed resource, and resolve the challenging problems that older adults face in their daily lives.

**Unlocking Access** will empower older adults to engage and access resources available to have healthy and fulfilling lives. As we age attaining the appropriate services, infrastructure, and resources



becomes increasingly challenging. Regardless of ability, socioeconomic status, race, ethnicity, language, culture, location, or age, people should have access to ample and accessible options that allow us to age in the way we choose.

**Key Topic Areas addressed: OAA Core Programs, HCBS, Equity**

## Goal 1: Unlocking Access

Objective 1.1: Improving access and availability of LTSS among vulnerable populations

Strategies:

- Expand and fund the scope of the Office of the Long-Term Ombudsman to serve individuals receiving HCBS long-term supports and services.
- Advocate for funding to establish and maintain an appropriately staffed Alzheimer's Disease and Related Disorders (ADRD) office within PDA.
- Author a Long-Term Care Patient Bill of Rights that will protect the rights and dignity of older adults in the long-term care system, especially historically marginalized people including those living with HIV/AIDS, minority individuals, and older adults who identify as LGBTQ+.

Objective 1.3: Increasing access to nutritious food

Strategies:

- Expand awareness among older adults and throughout the Aging Network of eligibility for nutrition-related programs, such as SNAP, Senior Food Box, and the Senior Farmers Market Nutrition Program.<sup>1</sup>
- Revise the existing assessment tools for the Department's nutrition programs to incorporate malnutrition screening for individuals determined to be at nutritional risk.
- Increase enrollment through identifying new individuals and re-enrolling eligible older adults in the Senior Food Box program and where necessary arranging transportation for individuals that can not pick up food themselves. (30,000)

Objective 1.4: Offering language and accessibility

Strategies:

- Create and distribute a comprehensive accessibility guide and assessment tool for outreach and communication, including parameters for multiple languages, accessible formats, print and digital media, and dissemination channels to ensure cultural and linguistic sensitivity.
- Increase awareness of the Pennsylvania Technology Foundation to ensure older adults have access to the assistive technologies.

Objective 1.5: Promoting inclusive social opportunities

Strategies:



- Ensure social engagement opportunities are designed for diverse individuals to be inclusive for all older individuals, including Asian Americans and Pacific Islanders, older Native Americans, older Hispanic Americans, older African Americans, and older LGBT persons.
- Develop a statewide online platform that offers virtual health and wellness programming, connection to information and resources, and opportunities for virtual social engagement.<sup>1</sup>

By 2028, the Department plans to have:

- Developed and implementation of virtual health and wellness programming.
- Measured the number of older adults reached by virtual health and wellness programming.
- Distributed accessibility guide to 100% Area Agencies on Aging and Senior Community Centers.
- Promoted virtual health and wellness programming to reach 5% more older adults annually.
- Improved access to older adult services for historically marginalized and underserved populations.
- Decreased food insecurity among older adults through increased awareness and access to nutrition programming such as SNAP, Senior Food Box, and the Senior Farmers Market Nutrition Program.

**Aging in Community** involves fostering supportive, inclusive, accessible, and affordable environments in which older adults feel valued and can live comfortably. This goes beyond "aging in place". Due to challenges in adapting homes to changing needs and limited access to assistance programs for those with modest incomes. Providing home-based care services is crucial for maintaining independence and is more cost-effective than residential care.

Maintaining social connections as we age is essential for a sense of belonging, purpose, and well-being. This includes enabling older Pennsylvanians to continue working, utilizing their skills, and helping address workforce shortages. Embracing technology is key, with many older adults interested in training and access to broadband for secure and consistent device use. This approach ensures older adults can thrive in their chosen environments.

**ACL Key Topic Areas addressed: OAA Core Programs, Equity, HCBS**

## Goal 2: Aging in Community

Objective 2.1: Protecting older adults financial and personal safety

Strategies:

- Expand partnership between Attorney General's Office, Department of Banking & Securities (DOBS), and community advocacy organizations such as Center for Advocacy for the Rights & Interests of Elders (CARIE) and AARP Pennsylvania to expand educational programs that inform older adults about how to recognize and report common scams and frauds.
- Expand the existing PDA Financial Exploitation Task Force with state and local law enforcement agencies to investigate and combat fraud and scams targeting older adults.

- Implement the Older Adult Suspicious Death Multidisciplinary Review Team (SDMART) to identify gaps in services and inform best practices.
- Advocate to update the Older Adults Protective Services Act to better serve and protect older adults.

Objective 2.2: Identifying and supporting programs that help older adults live in the community

Strategies:

- Expand and increase the number of people served and access to more services in the Help at Home (OPTIONS) program.<sup>1</sup>
- Expand and fund Shared Housing and Resource Exchange (SHARE) model to additional counties and expand the model to more populations including veterans and reentrants.<sup>1</sup>
- Support funding and policy to create age-friendly, dementia-friendly, and ADA-compliant communities to improve access and availability.
- Support the 1115 waiver authority to expand access and supports for housing for individuals who are eligible for Pennsylvania's Medicaid program.<sup>1</sup>
- Expand the Elder Cottage Housing Opportunity program (ECHO) to more AAAs
- Engage in recruitment and retention efforts to increase the number of Domiciliary Care Providers to expand supportive housing opportunities. community.
- PA Link will continue to provide education and training for partners on home and community-based services and resources.

Objective 2.3: Promoting a diverse range of social opportunities

Strategies:

- Collaborate with arts and cultural organizations to provide meaningful ways for different generations to connect and participate that foster dialogue and appreciation between groups, community enrichment, and self-expression, including art exhibitions, museum visits, concerts and festivals.
- Develop artist-in-residence program opportunities to connect Senior Community Centers and artists who have completed the Pennsylvania Council on the Arts Academy for Creative Aging.<sup>1</sup>
- Encourage the growth and creation of innovative respite programs, including Memory Cafes and other models to support persons living with dementia and their care partners.<sup>1</sup>
- Explore opportunities for congregate-meal providers to attract program participants by offering medically-tailored meal options in addition to traditional hearty meals.
- Provide culturally appropriate meal options at senior community centers to the maximum extent possible.
- Engage in recruitment and retention efforts to increase the number of Domiciliary Care Providers to expand supportive housing opportunities in the community.

#### *Objective 2.4: Increasing the capacity and capability of the Aging Network*

##### Strategies:

- Provide educational workshops and resources to advance the Aging Network's ability to form and maintain relationships with other local and regional organizations, create diverse funding streams, develop new or innovative services and supports, and modernize the delivery of services to address the evolving needs of the older adults they serve in their community.
- Design and launch a grant writing education program to advance the Aging Network's ability to pursue external competitive grants.
- Encourage relevant state and local agencies within the Aging Network to use validated tools (e.g., UCLA Scale of Loneliness) to measure loneliness and social isolation and provide direction with subsequent interventions to connect those at risk to social participation opportunities.<sup>1</sup>
- Create grant opportunities for Aging Network Partners to enhance local communication, outreach, and branding efforts.
- Create a Community Needs Assessment template to assess and improve the quality and satisfaction with Senior Community Center service and program offerings, operations, and environment.
- Develop and implement a comprehensive toolkit to monitor the performance of all 52 AAAs in administering Older Adult Protective Services, Caregiver Support Program (CSP) and OPTIONS.
- Incorporate supplemental fiscal measures into the evaluation of CSP and OPTIONS.
- Promote Senior Community Service Employment (SCSEP) within both Area Agencies on Aging and Senior community centers through distribution of electronic marketing materials.

##### By 2028, the Department plans to have:

- A state-wide age-friendly designation from AARP that signifies the state commitment to support existing Age-Friendly Community coalitions and expanding the capacity of the Age-Friendly Network within the state.
- Distributed SCSEP marketing materials to 100% of senior community centers and AAAs.
- Expanded the SHARE program to three (3) additional AAAs.
- Increased awareness of home and community-based service options among older adults to allow more older adults to age in the communities of their choosing.
- Expanded access to medically tailored meals for older adults.
- Increased awareness of frauds and scams among the older adult population through the PDA Financial Exploitation Task Force.
- Initiated the Older Adult Suspicious Death Multidisciplinary Review Team (SDMART) and identified gaps in services and quick wins.

**Caregiver Supports** aims to bolster the direct care workforce and aid care partners through improved systems of support, education, and assistance. This goal seeks to ensure sustainable,

competent, and exceptional care for older adults. Caregivers fulfill a vital role in maintaining the well-being of older adults, yet their demanding work often lacks adequate recognition and support. Pennsylvania, like many states, grapples with a shortage of direct care workers and high turnover rates due to factors like low wages, limited training, and scant opportunities for advancement. This scarcity of skilled workers further compounds the challenges families encounter as they seek to arrange support and services for their loved ones.

**ACL Key Topic Areas addressed: Caregiving**

### Goal 3: Caregiver Supports

Objective 3.1: Strengthening the direct care workforce

Strategies:

- Update and develop an implementation plan for the 2019 Blueprint for Strengthening Pennsylvania's Direct Care Workforce starting with recommendations to enhance wages, benefits, training, and development of a career ladder.
- Change Scope of Practice laws to allow healthcare paraprofessionals and other individuals involved in supporting the clinical and long-term care needs of older adults and individuals with disabilities to perform functions they are qualified to perform.
- Advocate for changes to federal and state laws to allow legal immigrants and refugees to be hired as direct care workers.

**Education & Navigation** includes coordinating research with academic and community partners to address complex social and cultural issues that hinder older adults from actively participating and engaging in their communities. This goal works to ensure that older adults and adults with disabilities can easily access the information they need to better understand the services and programs that are available.

**ACL Key Topic Areas addressed: COVID-19, Equity, HCBS, Caregiving**

### Goal 4: Education & Navigation

Objective 4.1: Augmenting navigation

Strategies:

- Establish at least one dedicated navigator in every AAA equipped with standardized training in case management, information and referral tools, customer service, and resources related to health services and community supports, housing, social engagement, and transportation.
- Refresh the PA Link program by conducting a comprehensive program evaluation, redesigning a local and statewide No Wrong Door system, establishing channels for information and referral, managing a statewide resource database for case management, exploring outreach systems for follow-up and assistance, and launching a public awareness campaign.
- Enhance coordination to optimize the referral system between State Health Insurance Assistance Programming (PA MEDI) and the PA Link.

- Continue to provide training for the PA Link on person-centered counseling.
- Expand person-centered training for Long-term care Ombudsman volunteers.

*Objective 4.3: Preparing for emergencies*

- Develop and build upon activities and mechanisms for older adults, families, and communities to plan and prepare for individual and public emergencies, especially those who live in nursing homes, are homebound, or belong to historically marginalized communities.
- Expand awareness among older adults and caregivers of protocols for emergency communication, including those available in multiple languages and accessible formats.

*Objective 4.4: Educating the community*

- Distribute existing resources for victims of abuse and neglect, including intimate partner or family member abuse, that contains resources for immediate help and assistance in multiple languages.
- Distribute existing resources to educate older adults in senior community centers and congregate home settings about the negative health effects associated with social isolation.
- Increase awareness and resources dedicated to early detection, diagnosis, and treatment of dementia, especially in diverse and underserved communities and populations with greater risk factors.
- Increase outreach and education on Medicare Benefits such as preventative health benefits and Medicare savings programs.
- Provide trauma-informed care training for protective services workers and care management staff with external subject matter experts and law-enforcement partners.
- Continue to provide educational resources to senior centers, AAAs, PA Link, and the PACE Clearing House on infectious diseases and vaccine preventable diseases.
- Encourage local SHIPs to continue to build partnership with government agencies and local community partners to educate Medicare beneficiaries.

*Objective 4.5: Raising awareness of existing opportunities*

- Launch a public awareness campaign to expand the availability and use of Older Adult Daily Living Centers and LIFE programs and promote the broad range of services as an alternative option to more costly service utilization, such as personal assistance, nursing facilities, and hospital stays.
- Develop and provide a toolkit to Senior Community Centers and other community-based organizations and for legislators to use at older adult fairs and similar locations to address volunteer and mentorship opportunities in their area.
- Expand an awareness campaign of volunteer opportunities, utilizing existing resources, including information on the social and mental health benefits of volunteering.
- Increase outreach to art and culture professionals to enroll in the Pennsylvania Council on the Arts Academy for Creative Aging.

- Lead an education and awareness campaign for community-based organizations on best practices for intergenerational programming, such as the models promoted by the Pennsylvania Intergenerational Network (PIN) and Generations United.
- Expand the Healthy Steps for Older Adults Fall Prevention Program and the Healthy Steps in Motion (HSOA) to reduce the risk of falling and fall related traumatic brain injuries (TBI) and provide referrals and resources to improve health and promote an active lifestyle.

By 2028, the Department plans to have:

- Distributed educational materials on infectious and communicable diseases to 100% of senior community centers and AAAs.
- Provided trauma informed care to 50% of all caseworkers and Ombudsman volunteers.
- Trained 100% of Ombudsman staff on person-centered planning.
- Improved older adults knowledge and awareness of existing resources.
- Improved the aging network's ability to respond to individualized care needs with person-centered planning.

## Quality Management

Quality Management is critical in providing quality services and is central to PDA's mission in serving older adults. The Bureau of Quality Assurance within PDA is dedicated to developing and implementing policies and procedures for continual quality assessment and evaluation of programs within the Aging Network.

The Bureau of Quality Assurance collects data, monitors, and reports on the service delivery of programs across the state. AAAs and contracted service providers collect and enter specific information in an online database known as Aging & Disability (A&D), formerly known as the Social Assistance Management Software (SAMS). Data collected includes program participants, services, expenditures, and more. Utilizing databases like this allows the Bureau of Quality Assurance to create reports at specified time intervals on the utilization rate of programs and more.

The department is in the process of finalizing a new monitoring tool which is being referred to as the C.A.P.E. (Comprehensive Aging Performance Evaluation). The C.A.P.E. will transform the Department's monitoring function from a siloed program approach to a more holistic philosophy, in which each AAA will be evaluated for performance in OPTIONS, Caregiver Support Program, and Older Adult Protective Services during a singular review. The C.A.P.E. is being piloted in three AAAs during the April-June 2024 timeframe and then, upon successful pilot, will be rolled out statewide in July 2024. The Department will also be utilizing monthly reports to gauge and monitor ongoing compliance with the Protective Services Program. The C.A.P.E. was designed with specific measures to identify compliance with Protective Services (among other Older Americans Act Services). If, after the C.A.P.E. has been completed, the Agency has identified areas of non-compliance with specific program measures, the AAA will be required to submit a Performance Improvement Plan (PIP) to the Department for review and approval. Once the PIP has been reviewed and accepted, the Bureaus of Protective Services, Aging Services and Finance will have engagement with the AAA to provide TA in the areas of Protective Services non-

compliance/OPTIONS/CSP/Fiscal and to ensure that the PIP was implemented. Continuous quality improvement will be achieved through routine monitoring.

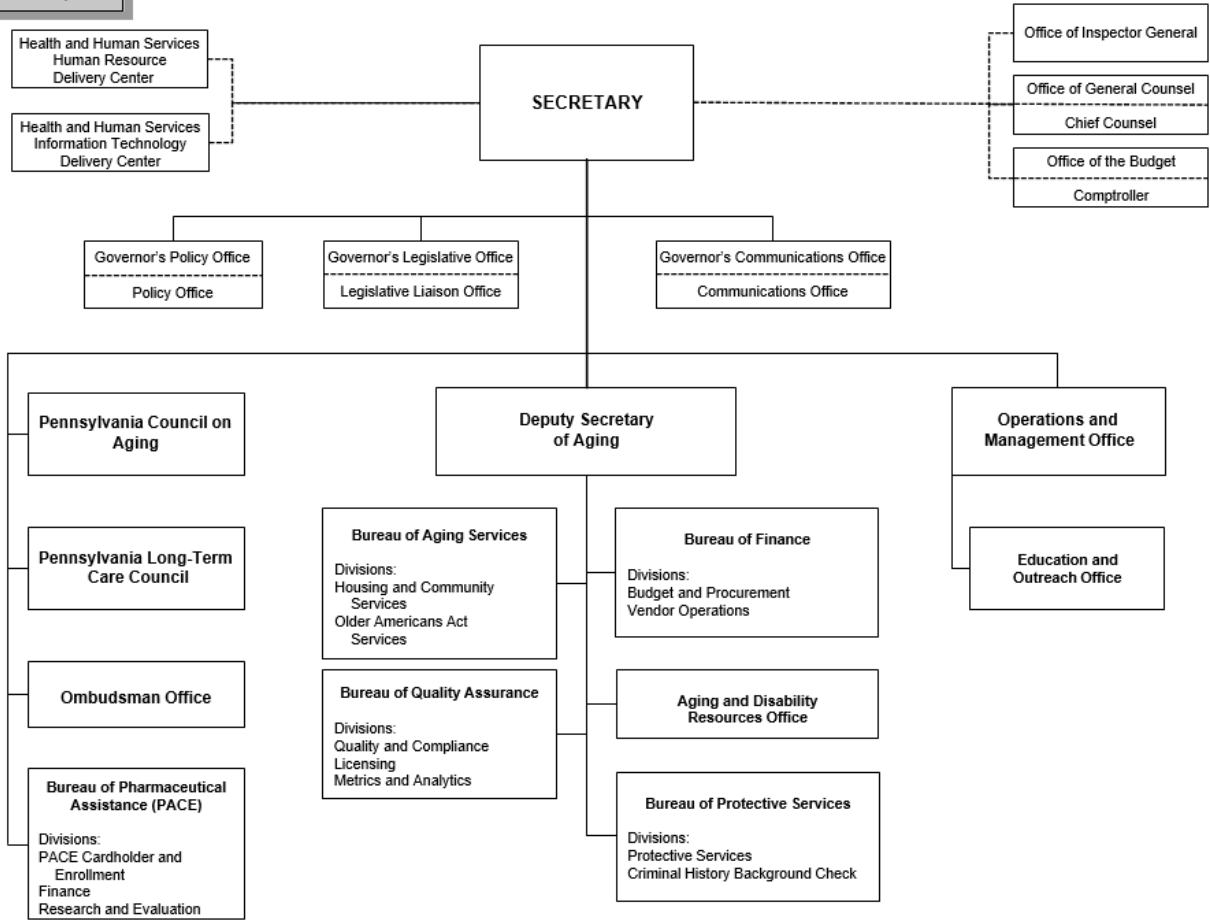
## Next Steps:

Continued coordination and collaboration of public and private stakeholders, transparency, and accountability are critical to advancing the 2024-2028 State Plan on Aging and achieving the goals identified through direct stakeholder engagement. The Department has committed to a transparent data collection and modelling system for the implementation of *Aging Our Way, PA*. Overlapping tactics between the 2024-2028 State Plan on Aging and *Aging Our Way, PA* will be tracked on an online public-facing platform. This transparency is essential to ensuring the Department and our partners are accountable for implementing and achieving the goals that were identified by older adults during the stakeholder engagement process. This State Plan, in coordination with *Aging Our Way, PA* will guide the Department's strategic planning efforts over the next four years to ensure not only that older adults and adults with disabilities have the resources they need to thrive in their communities, but that the Commonwealth of Pennsylvania is longevity-ready and age-friendly for all.

# Appendix A

OR-21-010  
September 28, 2021

## DEPARTMENT OF AGING





## Appendix B

**Respect and Social Inclusion:** Pennsylvania is characterized by inclusivity and appreciation for the contributions, wisdom, and experiences of older adults. Stereotypes and prejudices are actively challenged, ensuring that older Pennsylvanians of all backgrounds are valued members of their communities, free from discrimination based on age, ability, race, ethnicity, gender, sexual orientation, religion, or other characteristics.

**Housing:** Older adults live where they choose, in well-maintained structures, universally functional quarters, in safe neighborhoods, and hospitable communities. Alternative and affordable options and adaptations are readily available to meet changing needs and desires for housing. Older adults can choose a housing option that includes appropriate housing design and close proximity and access to services and amenities such as grocery stores, libraries, and community centers. Alternative options and adaptations are readily available to meet changing needs and desires for housing.

**Transportation:** Older Pennsylvanians can move throughout their community and never feel isolated due to a lack of transportation options or mobility impairment. Pedestrian modes of travel, which may be aided by mobility devices like wheelchairs, walkers, and scooters, are enjoyable and facilitated over smooth and well-maintained sidewalks. Pedestrians are not impeded by cracked pavement, overgrown roots, snow and ice coverings, or other hazards. Drivers are responsive to the rules around crosswalks. Older adults are practicing safe driving, agreeing to driving exams as appropriate, and are freshly aware of alternative means of mobility. If an older adult is not comfortable operating a personal vehicle, they can depend on reliable, timely, accessible, and useful transit options with stops that provide shelter from the elements, a place to sit, and are well-placed near community resources.

**Outdoor Spaces and Buildings:** Our public community spaces like playgrounds, state parks, libraries, places of worship, and businesses will be vibrant, clean, accessible, and comfortable, offering inviting and safe atmospheres that encourage physical activity, social interaction, local shopping, and activity in shared community spaces.

**Social Participation:** A thriving culture offers older Pennsylvanians numerous opportunities for social engagement and recreation. Essential community spaces host workshops, art exhibitions, games, and other options for socialization with people of the same and different ages and backgrounds. These opportunities help counter the loneliness and social isolation many older adults experience as part of their daily lives

**Civic Participation and Employment:** Older Pennsylvanians are encouraged and supported in their endeavors to contribute to the workforce or engage in volunteer opportunities. Businesses and organizations recognize the wealth of experience and knowledge older individuals bring, pay fair wages for time and expertise, and accommodate requests for flexibility that enable workers to be effective in their positions.

**Health and Community Supports:** Comprehensive, holistic healthcare services promote physical, behavioral, financial, social, and emotional wellness, prevention, and early intervention. The network of public and private providers offers high-quality community supports and health services that are affordable and readily available. Older adults and caregivers are informed and empowered to heal and thrive in the manner that they choose, that best suits their preferences and circumstances.

## Appendix C

<b>Adult Daily Living Centers</b>	Available through our OPTIONS program, Adult Daily Living Centers can provide supervision and support for older adults one or more days a week
<b>PA MEDI</b>	Free and objective one-on-one Medicare counseling from trained PA MEDI volunteers
<b>Caregiver Support Program</b>	Program of supports and services designed to ease caregiver stress
<b>Education Programs</b>	Medication management, nutrition classes, health screenings, and more
<b>Health &amp; Wellness</b>	Evidence-based exercise, chronic disease management, falls prevention and other classes
<b>Nutrition Services</b>	Provide direct meal service and nutrition counseling at no charge to eligible individuals
<b>Older Pennsylvanians Legal Assistance Program</b>	Provides legal assistance, advocacy, and counseling for qualifying older adults on a variety of issues
<b>Office of the Long-Term Care Ombudsman</b>	Advocacy and complaint resolution for individuals living in long term care facilities such as nursing or personal care homes and assisted living facilities
<b>Ombudsman: PA Empowered Expert Residents (PEERs)</b>	In-facility long-term care advocate residents, available to assist other residents in understanding their rights
<b>OPTIONS – Help at Home</b>	Cost-shared in-home services which could include care management, personal care, home modifications, home health care, adult day care, home-delivered meals, transportation, and other services
<b>PA Link to Aging &amp; Disability Resources</b>	Person-centered information and assistance for accessing long-term services and supports for adults 18 years and older. PA Link: 1(800)753-8827
<b>PACE &amp; PACENET Prescription Assistance</b>	Income-based eligibility low-cost prescription medications for qualified residents age 65 and older. PACE/PACENET: 1(800)225-7223
<b>PA Patient Assistance Program Clearinghouse (Sponsored by PACE)</b>	Adults 18 and older can call the Clearinghouse for assistance with a variety of medical, food, housing, employment, and other programs. Statewide Clearinghouse: 1(800)955-0989

<b>Protective Services</b>	Protection for adults 60 years old and older from physical, emotional, and financial abuse, exploitation, neglect, and abandonment. Statewide hotline: 1(800)490-8505
<b>Senior Centers</b>	Offer socialization, activities, and free, nutritious meals in a congregate setting
<b>Senior Employment</b>	Federally funded program providing job training and employment for low-income adults 55 and older
<b>Transportation</b>	Free and discounted rides to assist older adults getting to medical appointments, senior centers, and other essential destinations
<b>Volunteer Opportunities</b>	The Department has many volunteer opportunities for older adults and others. Express your interest on the <a href="#">PDA Volunteer Interest Form</a> .

[Appendix D - University of Pittsburgh Needs Assessment Survey](#)