

ALASKA STATE LEGISLATURE

LEGISLATIVE BUDGET AND AUDIT COMMITTEE

Division of Legislative Audit



P.O. Box 113300
Juneau, AK 99811-3300
(907) 465-3830
FAX (907)465-2347
legaudit@legis.state.ak.us

July 3, 2007

Members of the Legislative Budget
and Audit Committee:

In accordance with the provisions of Title 24 and Title 44 of the Alaska Statutes (sunset legislation), we have reviewed the activities of the Alaska Commission on Aging (ACoA). The attached report is submitted for your review.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES ALASKA COMMISSION ON AGING SUNSET REVIEW

July 3, 2007

Audit Control Number

06-20054-07

This sunset review was conducted as required by AS 44.66.050 and under the authority of AS 24.20.271(1). Alaska Statute 44.66.050(c) lists criteria to be used to assess the demonstrated public need for a given board, commission, agency, or program, subject to the sunset review process. Currently, under AS 44.66.010(a)(4) the commission terminates on June 30, 2008. If the legislature takes no action to extend this date, the commission would be allowed one year in which to conclude its administrative operations.

In our opinion, ACoA is helping older Alaskans lead dignified, independent, and productive lives. We recommend the legislature adopt legislation extending ACoA's termination date to June 30, 2016.

The audit was conducted in accordance with generally accepted government audit standards. Fieldwork procedures utilized in the course of developing the findings and discussion presented in this report are discussed in Objectives, Scope, and Methodology.

Pat Davidson, CPA
Legislative Auditor

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OBJECTIVES, SCOPE, AND METHODOLOGY

In accordance with Titles 24 and 44 of the Alaska Statutes, we have reviewed the activities of the Alaska Commission on Aging (ACoA or commission) to determine if there is a demonstrated public need for its continued existence and if it has been operating in an efficient and effective manner.

As required by AS 44.66.050(a), the legislative committee shall consider this report as part of the oversight process in determining if ACoA should be reestablished. State law currently specifies ACoA will terminate on June 30, 2008. If no action is taken by the legislature, the commission will have one year from that date to conclude its administrative operations.

Objectives

The two central, interrelated objectives of our report are:

1. To determine if the termination date of the commission should be extended.
2. To determine if the commission is operating in the public interest.

The assessment of the operations and performance of the commission was based on criteria set out in AS 44.66.050(c). Criteria set out in this statute relate to the determination of a demonstrated public need for the commission.

Scope and Methodology

Our audit reviewed the operation and activities of ACoA for the period of July 1, 2003 through June 30, 2007.

During the course of our examination, we reviewed and evaluated the applicable statutes and regulations, minutes of commission meetings, state plans, and other documentation and files related to the commission's operations and mission.

We attended the May 22-24, 2007 ACoA quarterly meeting held in Fairbanks, Alaska and interviewed the commissioners and their staff. We spoke with personnel at agencies and organizations affiliated with ACoA; including the State's Long-Term Care Ombudsman, representatives of the Alaska Mental Health Trust Authority, Alaska Housing Finance Corporation's Senior Housing Office, and representatives of the American Association of Retired Persons' Capital City Task Force and AgeNet. Further, we conducted a survey of senior services providers, in order to solicit their perspective on how effectively they believe the commission is operating.

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ORGANIZATION AND FUNCTION

The Alaska Commission on Aging (ACoA or commission) is established in the Department of Health and Social Services (DHSS) under the Office of the Commissioner.

The commission is made up of 11 members and employs a staff of four. Seven members are appointed by the governor based on their knowledge and demonstrated interest in the concerns of older Alaskans. Alaska Statute 47.45.200 requires the seven appointments be made to ensure representation of low-income persons and minorities, and representation from rural and urban areas of the state, and to secure statewide geographical representation on the commission. These members serve overlapping four-year terms at the pleasure of the governor and all seven are voting members. Two members are the commissioners or their designees from DHSS and the Department of Community, Commerce, and Economic Development (DCCED). An additional member must be a senior services provider and another has to be a Pioneers' Home Advisory Board member.

ALASKA COMMISSION ON AGING

(As of June 30, 2007)

Commissioners:

Frank Appel, Chair
Sharon Howerton-Clark, Vice Chair
Karleen Jackson, DHSS Commissioner
Emil Notti, DCCED Commissioner
Lillian Kasnick
Betty Keegan
Banarsi Lal
Iver Malutin
Paula Rae Pawlowski
Patricia Branson, Senior Services Provider
Edward W. Zastrow, Chair Pioneers' Home
Advisory Board

Commission standing committees include: executive, planning, legislative advocacy, gerontology education and training, and by-laws.

Together, provisions of AS 47.45 and the Older Americans Act (OAA) establish the commission's authority, purpose, and scope of work. The primary functions of the commission include:

1. Approve a comprehensive statewide plan that identifies 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 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. Employ an executive director who serves at the pleasure of the commission. Currently, the executive director oversees a staff of three in Juneau;
5. Help older Alaskans lead dignified, independent, and productive lives;
6. Request and receive reports and audits from state agencies and local institutions concerned with the conditions and needs of older Alaskans;
7. Give assistance, upon request, to the senior housing office in the Alaska Housing Finance Corporation in administration of the senior housing loan program under AS 18.56.710 - 18.56.799 and in the performance of the office's other duties under AS 18.56.700; and,
8. Provide recommendations concerning the integrated comprehensive mental health program for persons with dementia-related illnesses to the Alaska Mental Health Trust Authority, for its review and consideration. Also provide recommendations regarding the use of monies in the mental health trust settlement income account in a manner consistent with regulations adopted under AS 47.30.031.

Although ACoA has been given extensive authority to address almost all the concerns of older Alaskans, AS 44.45.240(c) stipulates the commission may not investigate, review, or undertake any responsibility for the longevity bonus program under AS 47.45 or the Alaska Pioneers' Homes under AS 47.55.

BACKGROUND INFORMATION

The Federal Administration on Aging distributes funds to states. For a state to receive these funds, a state agency must be designated as the state unit on aging. In Alaska, this state unit is the Department of Health and Social Services (DHSS).¹ State unit responsibilities (as defined by the Federal Older Americans Act) are carried out jointly by Division of Seniors and Disabilities Services (DSDS) and the Alaska Commission on Aging (ACoA). DSDS is responsible for administering and distributing federal funds while ACoA is responsible for planning and advocating for Alaska's seniors.

ACoA and the State Plan Advisory Committee² work together to establish a State Plan for Senior Services which includes a funding framework for distribution of grants. The Older American Act (OAA) requires this framework be representative of the population targeted by OAA - frail, low-income, minority, and rural seniors.

A state may be divided into a number of planning and services areas or, as in the case of Alaska, be a single planning and service area (PSA). Single PSA states have the role and responsibilities of an area agency on aging. Section 305 of OAA states:

The State agency shall continue to perform the functions of an area agency on aging for any area of the State not included in a planning and service area for which an area agency on aging has been designated.

Section 306(a)(D) of OAA states, area agencies must:

... establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan.

In Alaska, ACoA serves as this advisory council.

¹ Information from the FY 08-11 State Plan for Senior Services and Code of Federal Regulations 42.35 Sec. 3025.

² The State Plan Advisory Committee is made up of members from ACoA's Planning Committee, current and former ACoA staff, DSDS staff, DHSS Commissioner's Office staff, the Mature Alaskans Seeking Skills Training Program, the Alaska Native Tribal Health Consortium, the Long-Term Care Ombudsman office, Southeast Senior Services, the senior housing program at Alaska Housing Finance Corporation, the Rasmuson Foundation, and Alaska Mental Health Trust Authority.

In 2003, per an executive order, ACoA was moved to DHSS from the Department of Administration. DHSS became the state unit on aging and former ACoA granting responsibilities were delegated to DSDS. The other responsibilities of the state unit on aging—planning, educating, and advocating for Alaska’s seniors—remained with ACoA.

REPORT CONCLUSIONS

Under AS 44.66.010(a)(4), the Alaska Commission on Aging (ACoA or commission) will terminate on June 30, 2008. If the legislature does not take action to extend the termination date, the commission will have one year to conclude its affairs. In developing our conclusion on whether the termination date of ACoA should be extended, we evaluated the commission's operations using the 11 factors set out in AS 44.66.050(c). Under the State's "sunset" law, these 11 factors are to be considered when determining if a commission has demonstrated a public need for its continued operation.

Section 306(a)(D) of the Older American's Act (OAA) requires the establishment of an advisory council consisting of older individuals who are participants or who are eligible to participate in programs assisted under this Act. Federal funding, made available to the State under OAA, is contingent on satisfying this requirement. ACoA satisfies this federal requirement.

After departmental reorganization in 2003 and with the granting function now part of the Division of Seniors and Disabilities Services, ACoA worked to define their new role. Since the move from the Department of Administration to the Department of Health and Social Services, ACoA has been hampered by staffing problems and, consequentially, did not prepare the required annual reports for state fiscal years 2003, 2004, or 2005. Additionally, the State Plan for Senior Services for FY 04-06 was extended.

Currently, ACoA has emerged from the reorganization as a respected planner, educator, and advocator for Alaska's seniors. During FY 07, ACoA set and accomplished operational goals; this included preparation of the annual report for 2006. After consideration of the 11 factors and review of ACoA's activities, we conclude a public need exists for the continuation of ACoA. We recommend that the legislature extend ACoA's termination date to June 30, 2016.

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FINDINGS AND RECOMMENDATIONS

The legislature should consider amending state law to reflect the Alaska Commission on Aging's (ACoA or commission) current mission.

The grant administration responsibilities for ACoA, as defined in state law,³ are no longer performed by the commission; rather, these duties are now being done by the Department of Health and Social Services (DHSS), Division of Senior and Disabilities Services (DSDS).

Executive Order 108 established DSDS within DHSS on July 1, 2003. This new division assumed all policy, program, and administrative responsibilities for grant administration previously performed by ACoA in the Department of Administration (DOA). Further, this executive order reestablished ACoA within DHSS. ACoA retained all the policy, program, and administrative responsibilities it had previously performed within DOA, with the exception of those grant administration functions assigned to DSDS. However, Alaska statutes were not updated to accurately reflect these changes.

The following current Alaska Statutes are not being performed by ACoA:

1. AS 47.45.240(a) *The commission shall: (7) with the approval of the commissioner of health and social services, set policy for the administration of federal programs subject to state control as provided under 42 U.S.C. 3001-30058ee (Older Americans Act, as amended); (8) with the approval of the commissioner of health and social services, set policy for the administration of federal programs as provided under AS 47.65.*
2. Sec. 47.65.010. *Older Alaskans service programs. An amount to carry out the provisions of AS 47.65.010 - 47.65.050 may be appropriated annually by the legislature. The amount appropriated shall be fully distributed by the Alaska Commission on Aging to sponsors of older Alaskans service programs in accordance with the provisions of AS 47.65.010 - 47.65.050.*
3. Sec. 47.45.230. *Executive director.... (2) administer, with the approval of the commissioner of health and social services, federal programs subject to state control as provided under 42 U.S.C. 3001 - 3058ee (Older Americans Act), as amended; and (3) administer, with the approval of the commissioner of health and social services, state programs as provided under AS 47.65.*

As a result, ACoA has not accomplished some of its statutory duties and responsibilities as currently written. The ACoA chairman and DHSS commissioner should pursue changes to Alaska statutes so that they are reflective of ACoA's current role.

³ AS 47.45.24(a)(7-8), AS 47.65.010-050, and AS 47.45.230

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ANALYSIS OF PUBLIC NEED

The following analyses of board activities relate to the public need factors defined in AS 44.66.050(c). These analyses are not intended to be comprehensive, but address those areas we were able to cover within the scope of our review.

Determine the extent to which the board, commission, or program has operated in the public interest.

Collaborates with other agencies and community-based programs

The Alaska Commission on Aging (ACoA or commission) works in collaboration with state departments and coordinates many of their activities with other agencies. The recently-created State Plan for Senior Services for FY 08–11 was produced by an interagency advisory committee. This committee, led by ACoA, included 11 other groups and agencies. In addition to the plan being a requirement for the State to receive federal funding, the plan serves as a guide for senior services providers, grant writers, other state agencies, and individuals. The plan involves various strategies for improved senior care and ACoA will work to ensure that these strategies are adopted. The advisory committee will continue to meet periodically to monitor and ensure implementation of the plan.

ACoA meets four times per year in various locations across the State. Various agencies and senior services providers from the community in which the meeting is held are invited to make presentations. In recent years, ACoA has held one of their quarterly meetings in a rural location. These rural meetings provide a means for the commission to see, first hand, the needs and concerns of seniors in the State's rural or bush areas.

ACoA and the Alaska Mental Health Trust Authority (AMTHA) have built a good working relationship. AMTHA funds one of ACoA's "planner" positions. This position is responsible for the planning and coordination of recommendations to AMTHA regarding funding senior services for persons with dementia-related illnesses. Although this position is currently vacant, AMTHA reports they have been satisfied with ACoA's recommendations. In the past two years, AMTHA has funded two-thirds of the proposals received from ACoA. Examples of these AMTHA-funded proposals include Alzheimer's Disease and Related Disabilities (ADRD) caregiver education/training and increased ADRD support services.

Although the Long-Term Care Ombudsman (LTCO) was transferred from the direct

oversight of the commission in 2001, ACoA continues to collaborate with this office.⁴ The two entities work together on senior issues and have established a rapport. LTCO consistently attends ACoA's quarterly meetings and provides quarterly status reports of the offices' activities, as well as information of upcoming concerns and issues for Alaska's seniors. In addition to attending ACoA meetings, LTCO travels with the commission on their site-visits.

Additionally, ACoA collaborates with the Mature Alaskans Seeking Skill Training (MASST) program. In 2005, the MASST program was moved from the Department of Health and Social Services (DHSS), Division of Senior and Disabilities Services (DSDS), to the Department of Labor and Workforce Development. The MASST program provides training and paid part-time work experience to low-income persons age 55 and older. The program receives referrals and information about senior needs from ACoA and, in turn, collaborates with ACoA on advocacy issues. The program manager of MASST was also part of the State Plan for Senior Services FY 08-11 advisory committee.

More than 90 percent of survey respondents⁵ reported ACoA encouraged public participation in developing regulations and other commission decisions. Over 80 percent of respondents agreed ACoA consults and cooperates with their community organization on programs for older Alaskans.

Keeps older Alaskans informed on important issues

ACoA holds a biweekly, legislative teleconference each year while the state legislature is in session. Seventeen sites across the State host these teleconferences. Legislative teleconference dates, hosts, and ACoA's "*Legislative Watch List*" are available to the public on ACoA's website. Our senior services provider survey concluded 79 percent of respondents agreed that ACoA has been effective in educating senior services providers and Alaska's seniors on the legislative developments affecting older Alaskans.

ACoA and staff often work to provide education and information on issues important to Alaska seniors. Governor Palin proclaimed May 2007 as "Older Americans Month" and ACoA kicked off a "Healthy Bodies...Healthy Brains" campaign. This campaign was a joint effort between ACoA, Division of Public Health, and AMTHA.

Commission staff produces a bimonthly newsletter, *Alaskan Seniors: Living Longer, Growing Stronger*. This is ACoA's most consistent medium of public information exchange and is mailed to over 800 addresses across the State.

⁴ The role of LTCO is that of a specially trained and certified state government employee who has been given authority by federal and Alaska statutes to identify, investigate, and resolve complaints made by or on behalf of Alaskans, 60 years of age or older. The mission of LTCO is to promote and protect the health, safety, welfare, and rights of Alaskan seniors, age 60 and over. Their core services include complaint investigations, advocacy, and education.

⁵ A survey was sent to 92 senior services providers across Alaska; 45 (49%) of these providers responded to our survey. Complete survey results are located in Appendix A.

Determine the extent to which the board, commission, or agency has recommended statutory changes that are generally of benefit to the public interest.

The commission has advocated, supported, and/or recommended several changes to statutes or bills related to the needs of older Alaskans. Examples of successful legislation supported by resolution and/or formal support of ACoA included the following:

- Chapter 03, SLA 04 – Creating the SeniorCare program to provide a monthly cash benefit or alternative prescription drug benefit to low-income seniors.
- Chapter 89, SLA 05 – Extended the SeniorCare program for an additional two years, through June 30, 2007.
- Chapter 92, SLA 05 – Changing the composition of the commission. A representative of the State’s administration was changed to a senior services provider seat.
- Chapter 67, SLA 05 – Raised the penalty for identity theft crimes (which disproportionately impacts older Alaskans) to the felony level.
- Chapter 52, SLA 06 – Added dental care coverage for Medicaid-eligible adults, noting the research showing a correlation between good dental health and longevity.
- Chapter 08, SLA 06 – Designated the second Wednesday in September, of each year, as “Older Alaskans Day.”
- Chapter 64, SLA 06 – Established an Office of Elder Fraud and Assistance, within the Office of Public Advocacy, to investigate complaints of fraud committed against Alaskan residents age 55 or older.
- Chapter 05, SLA 07 – Doubled the number of WWAMI⁶ student slots for Alaskans from ten to 20 per year, to help address Alaska’s perspective physician shortage.
- SB 100 of the 25th Legislature – Provided for long-term secure treatment programs for persons with substance abuse or co-occurring substance abuse and mental health disorders.
- SB 69 of the 25th Legislature – Created a civil legal services fund to be used for legal representation of low-income individuals.

Survey results indicated 93 percent of responding senior services providers agree ACoA helps inform the governor and the legislature in decision making, regarding older Alaskans.

⁶ WWAMI is a partnership between the University of Washington School of Medicine and the states of Washington, Wyoming, Alaska, Montana, and Idaho. The WWAMI name is derived from the first letter of each of the five cooperating states. WWAMI’s purpose is to provide access to publicly supported medical education across the five-state region.

Determine the extent to which the operation of the board, commission, or agency program has been impeded or enhanced by existing statutes, procedures, and practices that it has adopted, and any other matter, including budgetary, resource, and personnel matters.

The senior population is increasing faster in Alaska than in any other state, except Nevada. In 2006, the Alaskan population – age 60 and over – was more than 71,000. These figures represent increases of nearly 35 percent in the total number of seniors and over 27 percent in the number of people age 65 and over, since the year 2000.⁷ To respond to these dramatic increases in Alaska’s senior population, ACoA has advocated for:

- Enhanced senior home- and community-based services to provide additional services to the increasing number of seniors. Grant funding for senior services has remained relatively unchanged for the last five years. Many providers report reducing the scope of services provided, in order to provide a core group of basic services to a greater number of seniors.
- Making behavioral health services more available to seniors. Currently, there are few programs tailored to meet the special behavioral health needs of seniors and few prevention and intervention programs. The need for these services is evidenced by research showing higher than national rates for suicide and abusive drinking for Alaskan seniors as compared to their U.S. counterparts.⁸
- Advocating for an enhanced SeniorCare bill, in addition to other programs such as an expansion of the LIHEAP (Low-Income Heating Energy Assistance Program), that benefit the health and welfare of older Alaskans.

As currently structured, ACoA staff is made up of four positions: the executive director, two planners, and an administrative assistant. As discussed in the Report Conclusion section, the commission’s staff experienced extensive vacancies and turnover after the 2003 reorganization. The current executive director has held the position for less than a year; she was preceded by two prior directors who served for short periods of time between FY 04 and FY 06.

ACoA’s executive director has had problems attracting and retaining staff. The ACoA office has also voiced frustrations about filling a planner position. This position has been vacant since February 2007. The minimum qualifications require a master’s degree. For more than five months, ACoA tried to find applicants with the minimum qualifications. ACoA has worked with DHSS to restructure the education requirements for this position as a way of generating more interest.

⁷ This information is from the State Plan for Senior Services FY 08-11. As of June 26, 2007 this plan was awaiting final signature of approval by the Assistant Secretary for Aging, Federal Administration on Aging.

⁸ *Bureau of Vital Statistics 2000-2004; National Vital Statistics Report 2003; and Behavioral Risk Factor Surveillance System (BRFSS) 2006.*

Due to the problems described above, ACoA spent much of its time trying to fill positions as well as defining their new role as planner, advocator, and educator after the 2003 reorganization. As a result, ACoA did not prepare annual reports as required by state law for 2003, 2004, and 2005. Additionally, the State Plan for Senior Services for FY 04-06 was extended.

**Schedule of Operating Expenditures and Funding Sources
(Unaudited)**

	<u>FY 05</u>	<u>FY 06</u>	<u>FY 07⁹</u>
Expenditures:			
Personal Services	\$257,737	\$300,121	\$250,350
Travel	51,088	44,585	66,220
Services	39,315	32,415	30,835
Commodities	<u>21,663</u>	<u>7,704</u>	<u>21,890</u>
Total Operating Expenditures:	\$369,803	\$384,825	\$369,295
Funding Sources:			
Interagency Receipts (from federal funds)	\$248,826	\$226,450	\$219,648
General Fund Appropriations	<u>120,977</u>	<u>158,375</u>	<u>149,647</u>
Total Funding	\$369,803	\$384,825	\$369,295

Determine the extent to which the board, commission, or agency has encouraged interested persons to report to it concerning the effect of its regulations and decisions on the effectiveness of service, economy of service, and availability of service that it has provided.

ACoA has, in place, several processes to inform the public and solicit public comment. An example is the development of their recent State Plan for Senior Services for FY 08-11. Public input on plan development was sought four separate times at different locations across the State (Juneau, Fairbanks, Anchorage, and a rural call-in). These comments were recorded, reviewed by the planning committee, and added as an appendix to the plan.

Additionally, the public is encouraged to participate and offer feedback to the commission at its legislative teleconferences. These teleconferences offer an opportunity for ACoA to provide education on legislative issues important to seniors as well as allow the public to report their concerns on the effects of commission decisions. Seventeen legislative teleconference host sites are set up across Alaska to encourage public participation in lawmaking that affects Alaska's senior population.

⁹ FY 07 expenditures and funding sources were determined as of June 30, 2007. These expenditures and funding sources do not include personal services from June 15, 2007 through June 30, 2007; nor, do they include other revenues or miscellaneous charges that may occur throughout the State's reappropriation period which ends August 31, 2007.

Determine the extent to which the board, commission, or agency has encouraged public participation in the making of its regulations and decisions.

In addition to the development of the State Plan for Senior Services for FY 08-11 and legislative teleconferences, each ACoA quarterly meeting has time scheduled for public comment. The public has the opportunity to attend or call into any ACoA meeting, or contact ACoA via their website, concerning any commission decisions.

In our survey, senior services providers were asked if ACoA encourages public participation and input in developing regulations or making other decisions. Survey responses indicated 91 percent agreed they did. Further, 83 percent of survey respondents agreed that ACoA consults and cooperates with their organization about programs for older Alaskans.

Determine the efficiency with which public inquiries or complaints regarding the activities of the board, commission, or agency filed with it, with the department to which a board or commission is administratively assigned, or with the office of victims' rights or the office of the ombudsman have been processed and resolved.

We found no complaints against ACoA. We polled five different “watch-dog” agencies and ACoA’s executive director to determine the number of complaints filed against ACoA or its staff. Agencies polled included: the Attorney General’s Office; Office of Victims Rights; Office of the Governor; Office of the Ombudsman; and, Office of the Long-Term Care Ombudsman.

Determine the extent to which a board or commission that regulates entry into an occupation or profession has presented qualified applicants to serve the public.

Since ACoA does not regulate any occupations or professions, this is not applicable.

Determine the extent to which state personnel practices, including affirmative action requirements, have been complied with by the board, commission, or agency to its own activities and the area of activity or interest.

Our review determined 12 of the 16 commission members appointed, from FY 04 through FY 07, have been appointed in accordance with Alaska statutes. Due to incomplete records at the Office of the Governor, we could not determine whether the other four commissioners were appointed properly.

Determine the extent to which statutory, regulatory, budgeting, or other changes are necessary to enable the agency, board, or commission to better serve the interests of the public and to comply with the factors enumerated in this subsection.

The 2003 reorganization of DHSS moved ACoA from the Department of Administration to DHSS, per former Governor Murkowski's Executive Order 108. This reorganization also created and gave ACoA's grant administration responsibilities to DSDS. Currently, Alaska statutes do not reflect this reorganization (see Recommendation No. 1).

Determine the extent to which the board, commission, or agency has effectively attained its objectives and purposes and the efficiency with which the board, commission, or agency has operated.

Since the 2003 departmental reorganization of DHSS, ACoA was no longer responsible for the administration of grants. This has left ACoA in a better position to attain their objectives of planning for, advocating for, and educating Alaska's seniors. The recently submitted State Plan for Senior Services FY 08-11 has received recognition from the Federal Administration on Aging. Examples of issues and services ACoA has effectively advocated for, on behalf of Alaska's seniors, include:

- Resolution supporting the Alaska Housing Finance Corporation FY 04 and FY 05 capital budget; budget included funding for developing, renovating, and weatherizing senior and special needs housing.
- Letter of support for DHSS' FY 06 budget; letter included specific reference supporting additional Pioneers Home staffing, Nursing Facilities Transition program, and the Adult Public Assistance General Relief program.
- Position paper supporting additional \$500,000 in General Fund/Mental Health Funds for the Flexible Long-Term Care Supports program. The grant program supports seniors with Alzheimer's disease and their families by providing services such as case management, respite care, and chore services.
- Letter of support for U.S. Senate Joint Resolution 3. This resolution urges Congress to increase the Medicare reimbursement rates for Alaska. ACoA sent letters directly to Representative Don Young, Senator Ted Stevens, and Senator Lisa Murkowski detailing the need for an increase in reimbursement rates in order to ensure primary care is available to all seniors in Alaska. ACoA's chairman testified on this subject at a congressional hearing held in February 2007.
- Letter of support for the University of Alaska's Geriatric Education Center.

Results of our senior services provider survey concluded 89 percent of those responding to our survey agree ACoA has played an important advocacy role on behalf of older Alaskans.

In addition to planning and advocating, ACoA works to educate Alaska's senior population. Examples of education projects ACoA has participated in include the following:

- Ad campaign for Older Americans Month – May 2006
- Poster campaign for Older Americans Month – May 2007
- Obtained Governor's Proclamations for Older Americans Month in 2006 and 2007
- Created Alaska Aging Advocacy Network
- Completed a study of senior economic well-being – published January 2007
- ACoA's bimonthly newsletter informs seniors of senior issues

Determine the extent to which the board, commission, or agency duplicates the activities of another governmental agency or the private sector.

ACoA is emerging as a "hub" for seniors across the State. There are various organizations in Alaska; American Association of Retired Persons' (AARP) Capital City Task Force and AgeNet, who advocate for their particular seniors' needs; ACoA advocates for Alaska's seniors as a whole. ACoA also coordinates its planning activities and education activities with other agencies and organization across the State to avoid duplication of services.

APPENDIX

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APPENDIX A

Department of Health and Social Services
Alaska Commission on Aging
Senior Services Providers Survey Results

In the course of our review, we sent the following survey to 92 senior services providers of which 45 responded.

Question No. 1 ACoA encourages public participation and input in developing regulations or making other decisions.

91%	51%	Definitely Agree
	40%	Agree
0%	0%	Disagree
	0%	Definitely Disagree
9%	9%	Not Sure

Question No. 2 ACoA helps to inform the Governor and the legislature in decision making regarding older Alaskans.

93%	52%	Definitely Agree
	41%	Agree
0%	0%	Disagree
	0%	Definitely Disagree
7%	7%	Not Sure

Question No. 3 ACoA encourages the development of municipal commissions and/or community-oriented programs.

89%	46%	Definitely Agree
	43%	Agree
2%	2%	Disagree
	0%	Definitely Disagree
9%	9%	Not Sure

APPENDIX A

Department of Health and Social Services
Alaska Commission on Aging
Senior Services Providers Survey Results
(continued)

Question No. 4 ACoA promotes community education efforts regarding the problems and concerns of older Alaskans.

89%	46%	Definitely Agree
	43%	Agree
4%	2%	Disagree
	2%	Definitely Disagree
7%	7%	Not Sure

Question No. 5 ACoA consults and cooperates with my organization about assistance programs for older Alaskans.

84%	34%	Definitely Agree
	50%	Agree
11%	11%	Disagree
	0%	Definitely Disagree
5%	5%	Not Sure

Question No. 6 ACoA has been effective in educating your community and/or others around the State of important legislative developments affecting older Alaskans.

79%	34%	Definitely Agree
	45%	Agree
16%	16%	Disagree
	0%	Definitely Disagree
5%	5%	Not Sure

APPENDIX A

Department of Health and Social Services
Alaska Commission on Aging
Senior Services Providers Survey Results
(continued)

Question No. 7 ACoA has played an important advocacy role on behalf of older Alaskans.

91%	55%	Definitely Agree
	36%	Agree
2%	2%	Disagree
	0%	Definitely Disagree
7%	7%	Not Sure

Question No. 8 A public need exists for the continuation of ACoA.

93%	58%	Definitely Agree
	35%	Agree
0%	0%	Disagree
	0%	Definitely Disagree
7%	7%	Not Sure

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(continued)

Our survey respondents included a variety of senior services providers from all regions of the State. In our survey we asked what specific benefits would be lost if ACoA were allowed to sunset, how ACoA has positively or negatively affected these providers, and we invited comments regarding various aspects of the commission's operations. Below is a summary of comments we received, edited to some extent to enhance readability.

Specific benefits that Alaska's seniors would lose if ACoA were allowed to sunset:

Advocacy/Voice to State Government:

- Advocacy on behalf of seniors.
- The advocacy efforts would cease to exist as providers and caregivers are much too busy to lead such an effort. I think it is important to have a central agency that can coordinate and disseminate information that is of concern to seniors.
- A voice in the legislature. State advocacy services to all seniors of Alaska.
- Alaska seniors need a representation for advocacy at the commission level. Many agencies attempt to assist and advocate for senior issues, but due to the rising cost of doing business – and the extreme difficulty for agencies to just provide services – it is almost impossible to have the manpower to devote to advocacy issues.
- Advocacy for senior programs and services.
- Advocacy efforts and team work with other state agencies.
- They would lose advocacy for elders, education, and prevention programs, also their inspiring support to help other organizations. They are a key to spreading out information to our rural communities by working together. Their network chain is helpful.
- An affordable lobbying voice for Alaskan seniors, advocating the need to maintain meaningful and quality in-home services, saving the state thousands of dollars in premature institutionalization of the elderly.
- Seniors would be losing the recognized voice of advocacy. We try to advocate as much as possible but it seems we are never heard except through ACoA.
- The ACoA is proof that the State recognizes the importance of its senior community and its needs. Seniors need that voice within the structure of government.

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- The organized effort to keep the legislature informed about seniors' needs would be less effective.
- We would lose the voice of the Alaskan Seniors in our government.
- The ACoA helps to keep service providers aware of legislature that is pending that would affect the services we provide.
- Alaskan seniors would not have the advocacy and support – without ACOA – with the Governor's Office, legislative body, DHSS, and other entities in support of the Older Alaskans Act.
- Legislative Advocacy - Keeping seniors fully informed of issues regarding welfare of State programs and services.
- Seniors need support! This is one way it can happen. Some Kenai Peninsula Senior Centers need assistance and support for negotiating Medicaid cost reimbursement increase ... we receive a Medicaid reimbursement rate of \$8.32/per meal and transportation at \$6.34. This is far below averages around the State and our costs continue to rise. Our seniors will suffer. The senior centers provide a great service to our community as far as outreach, information and assistance, meals (congregate and home meals), transportation. The senior centers on the Peninsula provide at least 92 percent of the transportation to seniors. Seniors need to be allowed to have transportation through their senior centers ... using the NTS grant. Many cannot afford our "CARTS" system. We need ACoA to advocate for the senior centers. We need ACoA to advocate for our mentally ill seniors that need someone to monitor meds in their homes. It is taking too long for them to get assistance and get through the system and approved. We need more \$ for our NTS programs ... funding is flat and our clients are increasing as well as their needs are increasing as they "age in place."

Quality of Care:

- The quality of care for seniors would decline due to a lack of training and support for caregivers. There would be less public awareness; therefore, seniors may not be provided access to the services they need to maintain their quality of life and overall well-being.
- The seniors of Alaska receive so many benefits by the existence of the ACoA. Without the ACoA, seniors would not know who to contact about specific services available to them. This organization should never sunset. We have an elder population that continues to grow and this organization is invaluable.

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Funding:

- We would lose a large portion of our operating costs in providing seniors of our community hot nutritious meals. Home-delivered meals to the homebound. Transportation to and from medical, grocery, and social outings. Funding could be cut for the *Senior Voice* paper.
- Grants to Elderly Programs - Who will we answer to?
- Access to Federal Funds
- Funding
- Alaska's seniors need an organization like the ACoA to push for adequate funding and resources for older Alaskans so that they can afford to remain in our state in their last years.

Other:

- There have been a number of name changes in the agency that my organization deals with for program operation funds. I am unsure what ACoA does.
- Since the Native Village of Gambell does not directly work with state agencies on ACoA, we are not sure what we would lose.
- There seems to be a rallying of providers to voice opinions and that may be lost to some degree.

How has ACoA positively or negatively affected your organization?

Positively:

- My agency and community have benefited from having a local resident on the ACOA board. She is our conduit for information and advocacy.
- ACoA helped to obtain increased grant funding for Home- and Community-based Services which are vital to the well-being of frail and cognitively impaired older adults.
- ACoA is pro-in-home supports because seniors prefer these to being institutionalized and they save Alaska money.

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(continued)

- We appreciate all the funding we receive to provide services to our Elders, but the funding is limited so we can only provide limited services.
- Networking and coordination of senior programs has a positive affect and ACoA has been helpful in bridging those gaps in our community.
- Support of keeping elders home verses institutionalization which has allowed for the continuation of the HCB grants.
- Providing trainings and workshops on senior topics.
- ACoA has been instrumental in keeping the needs of seniors well-represented. Their work directly affects the ability of senior centers to provide services to those seniors in need of supportive and health services.
- Caregivers for some of my senior clients have been able to attend training sessions through ACoA which has greatly improved their awareness of issues affecting seniors and given them a greater ability to provide for their senior clients/family members! They have been an invaluable reference for obtaining information for both me and the community. I have been able to attend several trainings which have proven to be very helpful and have given me a greater understanding on many of the issues and concerns I frequently encounter.
- Advocating for senior issues, benefits, and new initiatives in working with AMHTA.
- ACoA has helped train staff on effective ways to reach Alaska's seniors in promoting longevity and independence. They also fund a large part of our annual budget in providing the seniors with meals and transportation. Home-delivered meals and in-home checks to the homebound.
- I have contacted them directly with specific problems at my agency. They have been helpful in seeking funding sources and are overall a great resource regarding resource and referrals.
- ACoA has advocated for the senior housing needs of Sterling and has kept us informed of grant opportunities when available.
- ACoA has always worked well with our organization. We need this entity to help disperse information, doing prevention education, and great advocacy work.
- Whenever I have a question regarding services that an elder might be able to receive through our state, I call ACoA.

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- Effectively help UTDC provide services to the elderly in both Upper Tanana & Glenallen Area for years and continue to do so without much interruption.
- Letting us know what is being discussed by the state that will have an effect on the senior population. This has resulted in many seniors sending legislative POMs that let them know what they need in order to help them live quality lives. An example is senior care and the longevity bonus.
- ACoA represents the views of providers and seniors during the legislative process, as in its support of the "Keep the Elders Home" initiative. It also seeks to represent the views of provider networking entities such as AgeNet.
- ACoA is a voice for all seniors in the state of Alaska. They have been instrumental in leveraging \$ from the state for Home- and Community-based services.
- ACoA has had a positive impact keeping senior centers, other agencies, and Alaskan seniors informed through legislative teleconferences, training seminars, etc. of key senior bills and issues, programs and services, and future needs.

Negatively:

- There were no negative comments about ACoA.

Other:

- Used to sponsor Senior Advocacy Coalition but stopped this year.
- ACoA needs to focus more on small communities.
- Sometimes our senior needs are so great, priorities have to be decided, what I believe is a specific need may not be what ACoA believes are priorities ... I understand that ... I still am not sure our state is ready for the "Big Boom" of seniors aging in place with funding staying so flat ... we need funds to assist the increasing population.
- We do not have positive, nor negative, operations with ACoA since we have no State programs on ACoA.

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General Comments:

- It is a well-known entity and represents the needs of seniors well.
- Thank you for what you do for our Seniors! I know you are trying ... I don't believe the legislature always understands how great our need for help is!
- We need ACoA because people that work professionally with seniors are so overworked and underpaid that we are literally unable to do the types of advocacy and public education necessary for a better tomorrow for seniors in this state.
- I highly recommend that ACoA continues their services because they are the nearest thing to Alaska having a statewide triple-A organization that other states in the U.S. have.
- ACoA has done a wonderful job in advocating for seniors and providing access to needed services. It would be very unfortunate if this Commission were to be terminated. I am not sure where I would turn to for training, support, and answers to the many questions regarding care of seniors!! PLEASE allow this Commission to continue its much needed service to our communities!
- ACoA is a great agency and the State would be negligent in allowing this to fold. With Alaska growing at the rate it is with senior growth and the issues that go along with aging, we need the ACoA more than ever
- ACoA represents a voice for seniors who often have no other voice speaking on their behalf.
- This organization should continue to exist. Without them, several seniors and also organizations that provide services to seniors would be lost.
- The Elders would be losing a valuable resource if ACoA is actually dissolved. I would hope that this decision is not carved in stone and a reversal is a possibility.
- I have seen positive work produced from the commission this past year and would like to see it continue. The aging population is growing rapidly and the insight and support of the individuals on the commission is greatly valued.
- The State should work closely with Municipal governments to provide these much-needed programs in rural Alaska. Villages seem to be excluded on most ACoA programs. We don't see those programs at rural Alaska.
- ACoA is federally mandated. DHSS needs to listen more to what they have to say!!!

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- Now that the ACoA is not actively involved in grant making, it is able to advocate more strongly for improvements in needed services and funding.
- We hope they can continue serving the frail, elderly, homebound, widows, veterans and low-income seniors.
- ACoA is an extremely important entity for Alaskan seniors, and the commission should remain a strategic part of senior services, and agencies.
- ACoA is necessary to the senior population as advocate and information both within the Legislature and out.
- Do Not get rid of this very helpful organization network that has connection for all Alaskans; which serves all Alaskans Well.
- As Alaska's population continues to age both in numbers and as a percentage of our communities – there needs to be an extensive effort to educate government, businesses and the community as well regarding their needs. Significant budget increases from the State to providers will be required to meet their needs. Alaska has a long way to go and will not be able to count on the Federal Government to provide increasing resources as they will follow a much slower pattern of growth than we will here. We have just begun to get the message in Alaska; we are aging, and must invest to enable seniors to remain here as functioning Alaskans. To accomplish that we need more than just ACoA's continued presence, but need to expand advocacy on behalf of seniors at a much greater pace. Time is moving faster than we realize, and we will all be seniors soon enough. Will you and I be able to continue to live here? I hope so.
- The ACoA does not benefit the rural villages. Yes, a Native Elder sits on the board, but he is a very small voice for our rural villages. When program are cut, the Rural Villages are hurt the most. Many of Elders are migrating to the cities for services because they are none in the villages. This migration is flooding our already full services, is ACoA planning for this migrating as funding is cut for the villages?
- ACoA need to consider cost of living & inflation cost and address the issue.
- Although we have tried to make the ACoA teleconferences we have had many things going on that has made it impossible to listen to all.

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES
OFFICE OF THE COMMISSIONER

SARAH PALIN, GOVERNOR

P.O. BOX 110601
JUNEAU, ALASKA 99811-0601
PHONE: (907) 465-3030
FAX: (907) 465-3068

August 3, 2007

RECEIVED
AUG 03 2007
LEGISLATIVE AUDIT

Pat Davidson, CPA
Legislative Auditor
Legislative Audit
P.O. 113300
Juneau, AK 99811-3300

RE: Response to Preliminary Audit, Department of Health and Social Services, Alaska
Commission on Aging

Dear Ms. Davidson:

Thank you for the opportunity to respond to Preliminary Audit, Department of Health and Social Services (DHSS), Alaska Commission on Aging (ACoA). Our response to the recommendation is as follows:

Recommendation No. 1

The legislature should consider amending state law to reflect ACoA's current mission.

The department concurs with this recommendation. DHSS will work with the Alaska Commission on Aging to propose legislation to align the statutes with their current mission.

If you have any additional questions, please contact Bill Hogan at 907-465-1610 or bill.hogan@alaska.gov.

Sincerely,



for Karleen K. Jackson, Ph.D.
Commissioner

cc: Bill Hogan, Deputy Commissioner
Janet Clarke, Assistant Commissioner
Elmer Lindstrom, Special Assistant
Denise Daniello, Executive Director, ACoA

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STATE OF ALASKA

DEPT. OF HEALTH & SOCIAL SERVICES

Alaska Commission on Aging

SARAH PALIN, GOVERNOR

P.O. BOX 110693
JUNEAU, ALASKA 99811-0693
PHONE: (907) 465-3250
FAX: (907) 465-1398

July 20, 2007

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JUL 24 2007

LEGISLATIVE AUDIT

Pat Davidson
Division of Legislative Audit
P.O. Box 113300
Juneau, AK 99811-3300

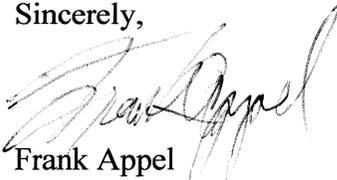
Re: Preliminary Audit Report on: Department of Health and social Services, Alaska Commission on Aging, Sunset Review, July 3, 2007

Dear Auditor Davidson,

The Alaska Commission on Aging agrees with the recommendations in the preliminary audit report. In June, I communicated suggested changes to the current Alaska Statutes to the Deputy Commissioner for Health and Social Services. The Deputy Commissioner acknowledged my suggestions and indicated he would form a committee to review those suggestions and draft statute revisions for presentation, review and approval of the legislature.

Thank you for your report.

Sincerely,



Frank Appel
Alaska Commission on Aging

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