DEPARTMENT of HEALTH and HUMAN SERVICES

Fiscal Year 2008

Administration on Aging

AoA Program Performance Analysis

Excerpted from:
FY 2008 Justification of Estimates for Appropriations Committees

FROM THE ASSISTANT SECRETARY FOR AGING

The Administration on Aging (AoA) is pleased to present AoA's FY 2008 Congressional Justification. This budget request continues support for the President's and Secretary's priority initiatives, ties directly to the Department's FY 2004-FY 2009 Strategic Plan and advances Secretary Leavitt's 500-day plan goals of transforming the healthcare system, modernizing Medicare and Medicaid and protecting life, family and human dignity. Performance measurement results from the Program Assessment Rating Tool review process also provided critical guidance for AoA's budget and program strategies.

Through effective program management and the strategic investment of grant funds, AoA is systematically advancing its mission to develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps older adults maintain their independence and dignity. AoA's three performance measurement categories of program efficiency, client outcomes and effective targeting contribute to the success of the national aging services network in achieving AoA's key priorities to:

- Empower people to make informed decisions and make it easier for them to access the supports and services they need.

- Help people at high-risk of nursing home placement to remain in their own homes and communities for as long as possible.

- Help older people to stay active and healthy through AoA Services and the deployment of evidence-based disease and disability prevention programs.

- Ensure the rights of older people and prevent their abuse, neglect and exploitation.

- Promote effective and responsive management.

The infrastructure of the national aging services network, and its community service providers, are our foundation for service delivery. The involvement of these established providers of cost-effective and consumer-friendly aging services is critical to ensuring the success of these initiatives. Our performance plan includes direct linkages to stakeholder efforts and consumer results.

With this budget request, AoA has reinforced its focus on providing high-quality, efficient services to the most vulnerable elders in ways that provide increased consumer control and choice. This performance budget provides the framework to ensure that the most vulnerable elders have the information and access to services necessary to remain in their homes and communities. This FY 2008 budget request maintains funding for AoA's core programs and continues investments in program innovations designed to support the initiatives important for today's and tomorrow's elders.

Josefina G. Carbonell
Assistant Secretary for Aging

Overview of Performance Analysis

Summary of Measures and Results

In the previous section, Narrative by Activity, along with a description of the program, AoA provided an abbreviated presentation of our performance and highlighted key accomplishments. This section focuses specifically on trends in performance measures, targets and results. Since significantly reducing the number of measures from FY 2004-FY 2005 (over 50 percent reduction from 38 measures to 16), AoA has continued to stay with this succinct approach. Twenty-five percent of our measures relate to program efficiency. The following table summarizes AoA's performance measures and results over the six year period from FY 2003 to FY 2008:

Summary of Measures and Results Table

Fiscal Year	Total Measures in Plan	Total Reported		Targets			
				Total Met	Not Met		
		Number	%		Improved	Total Not Met	% Met
2003	39	38	97	22	6	16	58
2004	38	37	97	27	5	10	73
2005*	16	16	100%	13	1	3	81%
2006	16	NA	NA	NA	NA	NA	NA
2007	17	NA	NA	NA	NA	NA	NA
2008	16	NA	NA	NA	NA	NA	NA

*FY 2005 results are preliminary.

Overview of Performance Planning Activities

FY 2008 represents the third year AoA aggregated all budget line items into a single GPRA program, AoA's Aging Services Program, for purposes of performance measurement. AoA program activities have a fundamental common purpose reflecting the primary legislative intent of the Older Americans Act (OAA): to make community-based services available to elders who are at risk of losing their independence; to prevent disease and disability through community-based activities, and to support the efforts of family caregivers. It is intended that States, Tribal organizations and communities actively participate in funding community-based services and develop the capacity to support the home and community-based service needs of elderly individuals - particularly the disabled, poor, minorities and elders in rural areas where there is limited access to services.

These fundamental objectives led AoA to focus on three measurement areas to assess program activities through performance measurement: 1) improving efficiency; 2) improving client outcomes; and 3) effective targeting to vulnerable elder populations. Each of these measures

separately covers the full scope of AoA's program activities, and therefore each measure reflects the full cost of all program activities. For example, achieving the levels of efficiency for the program that AoA has projected requires the full cost of the program, including administrative costs. Similarly, achieving the projected improvements in consumer assessment and service targeting requires the full cost of the program.

AoA uses sixteen performance indicators to assess progress in these three performance areas. The efficiency indicators led AoA to reexamine and redesign existing measures. The client outcome indicators measure results from the perspective of the consumers receiving services. AoA annually surveys consumers to determine both their satisfaction with services, and their assessment of the value and usefulness of the programs toward maintaining their independence in the community. The targeting indicators focus on ensuring that States and communities serve the most vulnerable elders in greatest need. Most indicators continue to show steady improvement. Program data also points to some key observations about the potential of AoA and the national aging services network in meeting the challenges posed by the growth of the vulnerable older adult population, the changing care preferences of aging baby boomers, the fiscal difficulties faced by State Medicaid budgets, and the expanding needs of both the elderly and their caregivers. Below are examples of some of these observations:

- OAA programs serve elders in greatest need: In FY 2005, over 30 percent of AoA's core State program clients were below the poverty level, which is triple the over 10 percent of all persons over 60 below the poverty level. In addition, almost 50 percent of AoA's minority clients are below the poverty level in contrast to 21 percent at the national level.

- OAA programs build systems capacity: OAA programs stay true to their original intent to "encourage and assist State agencies and area agencies on aging to concentrate resources in order to develop greater capacity and foster the development and implementation of comprehensive and coordinated systems." (OAA Section 301). This is evident in the leveraging of OAA funds with State funds (over 67 percent in FY 2005), as well as in the expansion of projects such as the Aging and Disability Resource Center initiative, which grew from 24 States to 43 States participating in this key program in FY 2005.

An analysis of AoA's performance data shows that the national aging services network is providing high quality services to the neediest elders and doing so in a very prudent and cost-effective manner; as an example, from FY 2000- FY 2003 AoA service unit costs increased on average by just 65 cents, accounting for inflation. Additionally, clients believe these services contribute in an essential way to maintaining their independence, and they express a high level of satisfaction with these services.

AoA also uses performance data to inform program evaluations. AoA substantially increased its program evaluation activity over the last three years. Since FY 2004, AoA completed an evaluation of disease prevention programs, conducted an evaluation of Home and Community-Based Supportive Services and initiated the development of a comprehensive evaluation design for nutrition programs and Native American Supportive Services. These forthcoming evaluations and a continued focus on program assessment through the performance planning

process will help AoA programs improve efficiency, continue to improve client outcomes and increase effectiveness in targeting services to vulnerable elders.

Given the uncertainty of final FY 2007 appropriation levels at the time the AoA developed the performance targets for the FY 2008 Congressional Justification, the FY 2007 targets are not modified to reflect differences between the President's Budget and the Continuing Resolution funding levels. Enactment of appropriations funding may require modifications of the FY 2007 performance targets.

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Detail of Performance Analysis – FY 2008 Aging Services Program

Measure 1: Improve Program Efficiency

Long Term Goal: Improve efficiency of OAA programs by at least 30% by 2011.			
Measure	**FY**	**Target**	**Result****
Indicator 1.1: For Title III Services, that is, Home and Community-based Services and Nutrition Services, increase the number of clients served per million dollars of AoA funding. *(outcome)*	*2008*	7,167 (+26 %)	Sept-09
	2007	7,110 (+25%)*	Sept-08
	2006	6,257 (+10%)	Sept-07
	2005	6,143 (+8%)	6,937
	2004	6,029 (+6%)	6,567
	2003	New in FY 04	6,375
	2002	New in FY 04	5,688 (base)
Indicator 1.2: For Title VII Services, increase the number of Ombudsman complaints resolved or partially resolved per million dollars of AoA funding. *(outcome)*	*2008*	11,997 (+29%)	Sept-09
	2007	11,811 (+27%)*	Sept-08
	2006	10,062 (+14%)	Sept-07
	2005	9,672 (+4%)	11,687
	2004	9,486 (+2%)	10,778
	2003	New in FY 04	10,498
	2002	New in FY 04	9,300 (base)
Indicator 1.3: For Title VI Services, increase the number of units of service provided to Native Americans per thousand dollars of AoA funding. *(outcome)*	*2008*	273 (+24%)	Sept-09
	2007	264 (+20%)*	Sept-08
	2006	242 (+10%)	Sept-07
	2005	229 (+4%)	254
	2004	224 (+2%)	252
	2003	New in FY 04	223
	2002	New in FY 04	220 (base)
Indicator 1.4: For Senior Medicare Patrol, increase the number of beneficiaries trained per million dollars of AoA funding. *(outcome)*	*2008*	49,600 (+60%)	Sept-09
	2007	48,980 (+58%)*	Sept-08
	2006	37,200 (+20%)	Sept-07
	2005	32,550 (+5%)	47,758
	2004	31,930 (+3%)	46,229
	2003	New in FY 04	36,513
	2002	New in FY 04	31,000 (base)
Data Source: National Aging Program Information System (NAPIS).			
Data Validation: See Data Verification and Validation Statement on Page 91.			
Cross Reference: HHS Strategic Plan Goal # 1 and Goal # 6.			

* FY 2007 efficiency targets have been increased.
** FY 2005 data is preliminary

Program efficiency is a necessary and important measure of performance for AoA programs for two principal reasons. First, it is important to be a careful steward of Federal funds. Second, the OAA intended Federal funds to act as catalyst in generating capacity for these program activities at the State and local level. It is the expectation of the OAA that States and communities would increasingly improve their capacity to serve elderly individuals efficiently and effectively with both Federal and State funds.

There are four efficiency indicators for AoA program activities under Titles III, VI and VII of the OAA, and for Medicare fraud prevention activities. The first indicator addresses performance

efficiency at all levels of the national aging services network, in the provision of community and home-based services, including caregiver services. The second indicator demonstrates the efficiency of the Ombudsman program in resolving complaints associated with the care of seniors living in institutional settings. The third indicator demonstrates the efficiency of AoA in providing services to Native Americans. The fourth indicator assesses the efficiency of the Senior Medicare Patrol program.

Performance Targets
In adopting the efficiency indicators, AoA found that in prior years the national aging services network was already improving efficiency. As a result of past performance and AoA and Departmental initiatives to improve service integration and rebalance long-term care, AoA set ambitious performance targets for its efficiency indicators. Recognizing AoA's commitment to aggressively improve program efficiency, OMB highlighted AoA's efficiency measures in the FY 2005 President's Budget. The following summarizes AoA's efficiency indicator targets:

- For Title III services (nutrition, supportive services, caregiver and other activities), AoA will increase by 26 percent over the FY 2002 baseline (from 5,688 in FY 2002 to 7,167 by FY 2008) the number of clients served per million dollars of AoA funding. This ambitious performance target is a reflection of AoA's conviction that ongoing initiatives to rebalance long-term care, including the Choices for Independence demonstration, will result in improved network performance.

- For Title VII services, AoA will increase by 29 percent over the FY 2002 baseline (from 9,300 in FY 2002 to 11,997 by FY 2008) the number of complaints resolved or partially resolved per million dollars of AoA funding.

- For Title VI services, AoA will increase by 24 percent over the FY 2002 baseline (from 220 in FY 2002 to 273 by FY 2008) the number of units of service provided to Native Americans per thousand dollars of AoA funding.

- For Senior Medicare Patrol activities, AoA will increase by 60 percent over the FY 2002 baseline (from 31,000 in FY 2002 to 49,600 by FY 2008) the number of Medicare beneficiaries trained per million dollars of AoA funding.

Linkage to Budget
AoA is not basing its performance improvements for the efficiency measures on increases in program budgets. For the most part, AoA and its program partners will use existing resources and focused management improvements to continue to improve the efficiency of its programs. The one exception to this rule is the ambitious target AoA has established for its Title III programs. The Assistant Secretary for Aging has initiated efforts to improve the efficiency of home and community-based service programs through demonstration grants to States and other entities. These efforts are intended to contribute significantly to the achievement of the efficiency improvements AoA has targeted for its Title III programs. AoA's performance targets, along with the agency's integration initiatives, reflect AoA's belief that improvements in the integration of services and more effective use of existing resources are the key factors that will improve efficiency in AoA programs.

Program Results

For FY 2005, preliminary data is available for the four efficiency indicators. This preliminary data indicates that the FY 2005 performance target was achieved for each indicator.

Available preliminary data indicates that from FY 1999 to FY 2005 AoA and the national aging services network has consistently improved efficiency for Title III. The following summarizes the results for the Title III efficiency indicators:

- FY 2002: 5,688 clients per million dollars of AoA funding.

- FY 2003: 6,375 clients per million dollars of AoA funding.

- FY 2004: 6,567 clients per million dollars of AoA funding exceeding the FY 2004 target by 8 percent.

- FY 2005: 6,937 clients per million dollars of AoA funding exceeding the FY 2005 target by 13 percent.

States reported serving over 714,000 more elders and caregivers in FY 2005 than FY 2004. With overall funding stable, these increases demonstrate improved efficiency.

Similar significant efficiency increases also occurred for the Ombudsman and Senior Medicare Patrol and Services for Native Americans programs:

- Ombudsman programs reported resolving or partially resolving 11,687 complaints per million dollars of OAA funding in FY 2005, exceeding the FY 2005 target of 9,672 by 21 percent.

- In FY 2005, Senior Medicare Patrols reported training 47,758 beneficiaries per million dollars of funding, exceeding the FY 2005 target of 32,550 by 47 percent.

- In FY 2005, Native American Services reported providing 254 units of service per thousand dollars of OAA funding, exceeding the FY 2005 performance target of 229 by 11 percent.

AoA just awarded a contract for a detailed evaluation of the Services for Native Americans program which will study factors impacting program costs among other significant issues for the program.

Measure 2: Improve Client Outcomes

Long Term Goals:
- Demonstrate continued high quality of service by maintaining the percent of Title III recipients rating services good to excellent at 90%.
- Demonstrate improved client outcomes by increasing the percent of caregivers who report that services help them care longer for older individuals to 75% by 2011.
- Demonstrate improved client outcomes by reducing the percent of caregivers who report difficulty in getting services to 35% by 2011.
- By 2011, improve the Ombudsman compliant resolution rates in 35 states.

Measure	FY	Target	Result
Indicator 2.1: Maintain high client satisfaction with home-delivered meals. *(outcome)*	2008	Discontinued	Not Applicable
	2007	93%	July-08
	2006	93%	July-07
	2005	93%	95%
	2004	New in FY 05	Not Available
	2003	New in FY 05	93% (base)
	2002	New in FY 05	Not Applicable
Indicator 2.2: Maintain high client satisfaction with transportation services. *(outcome)*	2008	Discontinued	Not Applicable
	2007	82%	July -08
	2006	82%	July -07
	2005	82%	85%
	2004	New in FY 05	83%
	2003	New in FY 05	82% (base)
	2002	New in FY 05	Not Applicable
Indicator 2.3: Maintain high client satisfaction among caregivers of elders. *(outcome)*	2008	Discontinued	Not Applicable
	2007	87%	July -08
	2006	87%	July -07
	2005	87%	94%
	2004	New in FY 05	96%
	2003	New in FY 05	87% (base)
	2002	New in FY 05	Not Applicable
Indicator 2.4: Maintain high client satisfaction with congregate meals. *(outcome)*	2008	Discontinued	Not Applicable
	2007	93%	July -08
	2006	93%	July -07
	2005	93%	92 +/- 4%
	2004	New in FY 05	90%
	2003	New in FY 05	93% (base)
	2002	New in FY 05	Not Applicable
Indicator 2.5: Increase percent of caregivers who report that services help them care longer for older individuals. *(outcome)*	2008	75%	July -09
	2007	75%	July -08
	2006	68%	July -07
	2005	62%	51% +/- 5%
	2004	New in FY 05	52%
	2003	New in FY 05	48% (base)
	2002	New in FY 05	Not Applicable

Measure	FY	Target	Result
Indicator 2.6: Reduce the percent of caregivers who report difficulty in getting services. *(outcome)*	*2008*	35%	July-09
	2007	35%	July -08
	2006	43%	July -07
	2005	50%	49%
	2004	New in FY 05	50%
	2003	New in FY 05	64% (base)
	2002	New in FY 05	Not Applicable
Indicator 2.7: Improve the Ombudsman complaint resolution rates. *(outcome)*	*2008*	30	Sept-09
	2007	15	Sept-08
	2006	15	Sept-07
	2005	10	26
	2004	7	26
	2003	5	24 States
	2002	New in FY 03	Not Applicable
Indicator 2.8: Increase the percent of Medicare beneficiaries who will read their Medicare Summary Notices as a result of the Senior Medicare Patrol training by 20%. *(outcome)*	*2008*	Baseline +20%	July-09
	2007	Baseline +20%	July-08
	2006	Baseline +20%	July-07
	2005	New in FY 06	Developmental
	2004	New in FY 06	Not Applicable
	2003	New in FY 06	Not Applicable
	2002	New in FY 06	Not Applicable
Indicator 2.9: 90% or more of Title III service recipients rate services good to excellent. *(outcome)*	*2008*	90%	Feb-09
	2007	90%	Feb-08
	2006	New in FY 07	Baseline
	2005	New in FY 07	Not Applicable
	2004	New in FY 07	Not Applicable
	2003	New in FY 07	Not Applicable
	2002	New in FY 07	Not Applicable
Indicator 2.9a: 90% of home delivered meal clients rate services good to excellent.	*2008*	90%	July-09
	2007	New in 08	July-08
	2006	New in 08	July-07
	2005	New in 08	94%
	2004	New in 08	Not Applicable
	2003	New in 08	Not Applicable
	2002	New in 08	Not Applicable
Indicator 2.9b: 90% of transportation clients rate services good to excellent. *(outcome)*	*2008*	90%	July-09
	2007	New in 08	July-08
	2006	New in 08	July-07
	2005	New in 08	97%
	2004	New in 08	Not Applicable
	2003	New in 08	Not Applicable
	2002	New in 08	Not Applicable
Indicator 2.9c: 90% of NFCSP clients rate services good to excellent. *(outcome)*	*2008*	90%	July-09
	2007	New in 08	July-08
	2006	New in 08	July-07
	2005	New in 08	93%
	2004	New in 08	Not Applicable
	2003	New in 08	Not Applicable
	2002	New in 08	Not Applicable
Data Source: National Aging Program Information System (NAPIS).			
Data Validation: See Statement on Data Verification and Validation on Page 91.			
Cross Reference: HHS Strategic Plan Goal # 1 and Goal # 6.			

While achieving efficiency, AoA is committed to maintaining quality. The FY 2008 performance budget includes eight indicators supporting AoA's measure of improving client outcomes. To AoA, these are the core performance outcome indicators for our programs because they reflect program assessments obtained directly from the elders and caregivers who receive the services. AoA has multiple quality assessment indicators in this plan reflecting separate assessments provided by elders for services such as meals, transportation and caregiver assistance. In developing these indicators, AoA included measures to assess AoA's most fundamental outcome: to keep elders at home and in the community, and measure results important to family caregivers. The resulting measures for the Ombudsman program and the Senior Medicare Patrol program focus on the core purposes of these programs: advocacy and education on behalf of older adults. The outcome indicator for the Ombudsman program assesses the efforts of States to improve the successful resolution of complaints by residents of nursing homes and other institutions. The indicator for the Senior Medicare Patrol program tracks the increased scrutiny of Medicare bills by beneficiaries, which is the fundamental objective of the program.

For FY 2008, we are revising the indicators related to consumer assessment of service quality. This is being done to standardize the measures. When the earlier measures were incorporated into the GPRA plan, the performance measurement surveys for specific services each had different quality measures. The surveys have been revised so that some questions are the same across services. Specifically, we propose to discontinue:

- Maintain high percentage of home-delivered meal clients reporting they like the meals.

- Maintain high percentage of transportation clients rating services very good to excellent.

- Maintain high percentage of caregivers rating case management services received by care recipient good to excellent.

- Maintain high percentage of congregate meal clients reporting they like the way the food tastes.

We will replace the above indicators with the following:

- At least 90% of home-delivered meal clients rate the service good to excellent.

- At least 90% of transportation clients rate the service good to excellent.

- At least 90% of National Family Caregiver Support Program clients rate the services good to excellent.

Consumer ratings from the 2005 Survey of Title III Service Recipients are shown below. A summary of the client outcome measures for FY 2008 follows:

Performance Outcomes - Customer Service Ratings
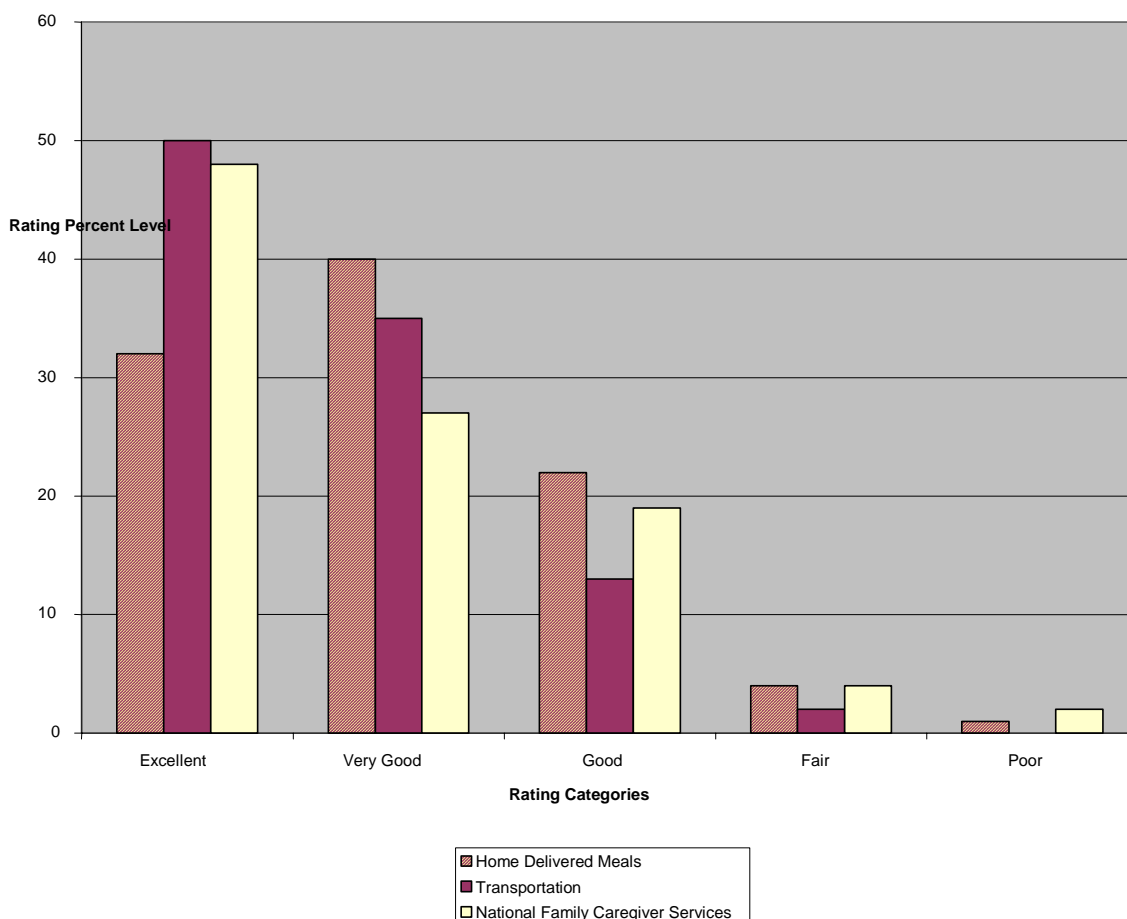
- Caregiver Impact Assessment: Increase the percentage of caregivers reporting that services have helped them provide care for a longer period over the 2003 base of 48 percent.

- Caregiver Difficulty Reduction: Decrease the number of caregivers reporting difficulties in dealing with agencies to obtain services from the 2003 base of 64 percent.

- Improve Ombudsman Complaint Resolution: Increase the percentage of complaints that are resolved in 30 States.

- Increase Scrutiny of Medicare Notices: Increase by 20 percent the percentage of Medicare beneficiaries who review Medicare Summary Notices for accuracy as a direct result of the training provided by the Senior Medicare Patrol program.

- Overall Program Quality Assessment: 90% of Title III recipients rate services good to excellent.

- Home-Delivered Meals Quality Assessment: 90% of home delivered meal clients rate services good to excellent.

- Transportation Quality Assessment: 90% of transportation clients rate services good to excellent.

- Caregiver Quality Assessment: 90% of caregivers rate NFCSP services good to excellent.

Performance Targets

AoA is committed to maintaining the high quality assessment rates established for its core programs and to achieve ambitious improvements in client outcomes measures. For consumer quality assessment indicators, the targets to maintain these high levels of performance are aggressive when taken in the context of AoA's commitment to aggressively improve program efficiency in the near and long term. Performance targets related to caregiver outcomes presented above are also challenging. One indicator calls for a 14 percent increase in two years in the percent of caregivers who report that OAA services "definitely" help them care longer for the elderly they serve while the second caregiver indicator calls for a 14 percent reduction over the same time period in the percent of caregivers who report difficulty in getting services. To AoA, aggressive performance targets for client outcome indicators is critical, because these measures represent direct consumer feedback and truly illustrate the mission of AoA and the network to help vulnerable elders remain in the community.

Linkage to Budget

The client outcomes measure and indicators were a significant element in AoA's rebalancing and integration initiatives, and they complement the efficiency and targeting measures that also support the budget. The success of AoA's initiatives in improving program efficiency must be balanced by the ability of the national aging services network to maintain the current high level of service quality and improvements in results reported by consumers. Similarly, success in improving consumer results must be balanced by the critical need to ensure that the programs are reaching the most vulnerable elders. AoA's caregiver program supports the AoA performance target to reduce the percentage of caregivers who have difficulty navigating the home and community-based services system and also supports the goal to increase the percentage of caregivers who report that OAA services help them provide care longer.

Program Results

For FY 2005, we are able to report on all 7 client outcome indicators that were in the FY 2005 performance budget. Every performance target was achieved except one; the indicator which fell short was "increase the percent of caregivers reporting that services help them care longer for older individuals." Targeted performance was 62%; actual performance was 51% +/- 5%. AoA believes the initial FY 2005 target, which was established without trend data may have been too ambitious. We plan to reexamine the data to ascertain whether this indicator is the best proxy for likely nursing home diversion.

The client outcomes indicators for each of the Title III services indicate a high level of performance in terms of client assessments and results attributed to those services even with corresponding efficiency improvements for those services. Through the Ombudsman program, the national aging services network realized very significant increases in the resolution of complaints. From FY 1998 to FY 2005 Ombudsmen increased their resolution rate from 71 percent of all complaints to 79 percent of all complaints. Recognizing that such a high rate was not consistent across the States, AoA chose to focus this indicator on improving performance in a significant number of States each year**.**

Measure 3: Effective Targeting to Vulnerable Elders

Long Term Goals:			
• Increase the number of severely disabled clients who receive selected home and community-based services by 40% over 2003 baseline.			
• By 2011, all states will achieve a targeting index>1 for low-income, minority and rural Title III clients.			
Measure	**FY**	**Target**	**Result ***
Indicator 3.1: Increase the number of caregivers served. *(outcome)*	*2008*	1,000,000	Sept-09
	2007	1,000,000	Sept-08
	2006	900,000	Sept-07
	2005	800,000	710,546
	2004	500,000	537,137
	2003	250,000	585,000
	2002	New in FY 03	439,000
Indicator 3.2: Increase the number of severely disabled clients who receive selected home and community-based services. *(outcome)*	*2008*	381,550(+30%)	July-09
	2007	350,568 (+25%)	July -08
	2006	322,522 (+15%)	July -07
	2005	302,890 (+8%)	313,362 (+11%)
	2004	New in FY 05	293,500
	2003	New in FY 05	280,454 (base)
	2002	New in FY 05	Not Applicable
Indicator 3.3: Increase the percentage of OAA clients served who live in rural areas to 10% greater than the percent of all US elders who live in rural areas. *(outcome)*	*2008*	Census + 10%	Sept-09
	2007	Census + 10%	Sept-08
	2006	Census + 10%	Sept-07
	2005	New in FY 06	36.7%
	2004	New in FY 06	19.7
	2003	New in FY 06	Census + 5%
	2002	New in FY 06	Census + 5%
Indicator 3.4: Increase the number of states that increase the percentage of clients served who are poor. *(outcome)*	*2008*	24 States	Sept-09
	2007	20 States	Sept-08
	2006	17 States	Sept-07
	2005	15 States	20
	2004	12 States	25
	2003	5 States	18
	2002	New in FY 03	Not Applicable
Data Source: National Aging Program Information System (NAPIS)			
Data Validation: See Statement on Data Verification and Validation on Page 91.			
Cross Reference: HHS Strategic Plan Goal # 1 and Goal # 6			

* FY 2005 data is preliminary.

AoA's philosophy in establishing its targeting measure and the indicators associated with it hold that targeting is of equal importance to efficiency and quality because targeting ensures that AoA and the national aging services network focus services on the neediest, especially when there are

scarce resources. Without targeting measures, efforts to improve efficiency and quality could result in unintended consequences whereby entities might attempt to focus their efforts toward individuals who are not the most vulnerable. Such an outcome would be inconsistent with the intent of the OAA, which specifically requires the network to target services to the most vulnerable elders. Such a result would also be inconsistent with the mission of AoA, which is to help vulnerable elders maintain their independence in the community. To help seniors remain independent, AoA and the national aging services network must focus their efforts on those who are at the greatest risk of institutionalization: persons who are disabled, poor, and rural.

Thus, AoA's four indicators for effective targeting are crucial for ensuring that services are targeted to the most vulnerable client groups and their family caregivers. The caregiver program is still continuing a strong ramp-up even after its first five years of implementation, so the targeting indicator utilized here focuses on rapidly increasing the number of caregivers served.

Performance Targets
As it has with its other measures, AoA has established ambitious performance targets for the indicators under this measure. The targets for disabled elders and for caregivers are particularly aggressive because of the importance of these two groups to the success of AoA's mission.

- By FY 2008, AoA proposes to increase the number of severely disabled clients (3 or more ADL limitations) who receive selected home and community-based services by 30 percent. This is one of AoA's most critical indicators because it reflects our commitment to demonstrate the capacity of the network to serve individuals who are effectively eligible to reside in nursing homes and supports initiatives to create more balance in the national long-term care service delivery system.

- As part of the caregiver program implementation it is essential that the national aging services network reach out to caregivers. As a result, AoA established the aggressive target to serve 1,000,000 caregivers by FY 2007; a goal that is more than 100 percent higher than the FY 2002 baseline for caregivers served. Preliminary FY 2005 data indicate that over 710,000 caregivers currently receive services. While this is a substantial number, it is less than the FY 2005 target of 800,000. In this light, the FY 2007 target of 1,000,000 appears even more ambitious. Therefore, the FY 2008 performance target will remain at 1,000,000 caregivers.

- The poverty targeting indicator is extremely challenging for FY 2008 because it not only commits to improve performance in 24 States but it also commits to a specific and significant level of (10 percent) improvement in each of those States during the same time period.

Linkage to Budget
The observed success of the national aging services network in targeting services to vulnerable elders provided an impetus for AoA to pursue demonstrations—such as the Aging and Disability Resource Centers, Evidence-Based Disease Prevention and the Cash and Counseling program— to increase the capacity of the national aging services network by integrating services, streamlining eligibility and creating linkages with other key programs. These results also informed key AoA decisions and priorities in rebalancing long-term care in favor of evidenced-

based prevention programs and creating greater choice and control for elders with increased availability of home and community-based services. These demonstration projects directly address the intent of AoA and the national aging services network to target community-based services toward those who are most at risk of institutionalization, which includes the poor, the disabled, those in rural areas, and other vulnerable elders.

Program Results
The national aging services network demonstrated success in targeting services to poor individuals and those who live in rural areas. In each of the recent reporting years, approximately 28 percent of OAA clients are poor, versus the national average of just over 10 percent of all elderly individuals are poor; 36.7 percent of OAA clients who live in rural areas is significantly higher than the 2000 Census estimate, which indicates that over 22 percent of all elderly individuals reside in rural areas. Despite these successes, AoA feels it is important to continue this focus to improve targeting to vulnerable elders because of how basic this area is to the mission of the agency and to the intent of the OAA. The targeting indicators also reflect different aspects of performance monitoring that are important for the national aging services network. The rural indicator focuses on improvement at the national level, while the "poverty" indicator focuses in on the pursuit of improvements among the State agencies that administer the program.
For FY 2005 we are able to report on three targeting indicators as follows:

- Preliminary data for FY 2005 indicate that 710,546 caregivers were served, falling short of the FY 2005 target of 800,000.

- In FY 2005, 313,362 severely disabled clients received selected home and community based services, exceeding the FY 2005 target by over 10,000.

- Preliminary data for FY 2005 indicate that 20 States have increased the percentage of Title III clients in poverty, exceeding the FY 2005 performance target of 15 States.

Program Assessment Rating Tool (PART) Summary
CY 2002-CY 2006
(Dollars in Millions)

Program	FY 2007 Continuing Resolution	FY 2008 President's Budget	FY 2008 +/- FY 2007	Narrative Rating
CY 2002 PARTs				
Aging Services Programs........	$1366.0	$1,338.2	-$27.8	Results Not Demonstrated
CY 2003 PARTs				
Aging Services Programs........	$1366.0	$1,338.2	-$27.8	Moderately Effective
CY 2004 PARTs				
N/A	N/A	N/A	N/A	N/A
CY 2005 PARTs				
N/A	N/A	N/A	N/A	N/A
CY 2006 PARTs				
N/A	N/A	N/A	N/A	N/A

Report on FY 2005 Discontinued Annual Measures

In the FY 2005 performance budget, the number of performance measures was reduced. In the FY 2006 performance budget two FY 2005 performance measures were eliminated.

1) *A significant percentage of OAA Title III service recipients live in rural areas.* (This measure was replaced by Indicator 3.3). The FY 2005 performance target was 34%. Preliminary FY 2005 data show that 36.7 % of Title III clients live in rural areas.

2) *Reduce time lag for program data.* The FY 2005 performance target was 12 months. In FY 2004, the performance target of 13 months was achieved. However, a new reporting system was implemented in FY 2005 and there are some start-up reporting problems. The FY 2005 target of 12 months will not be met.

Changes and Improvements over Previous Years

Starting with the FY 2006 Performance Budget document, AoA made further consolidations in the number of measures reported, so that AoA now includes only three performance measures in the plan. There is a net decrease in performance measures, but an increase in the ability to measure the factors that contribute to accomplishing these goals. New efficiency indicators were added, and new outcome indicators based on national survey data were also introduced.

Measures that have been eliminated from the plan will continue to be tracked by AoA to fulfill our commitment to track former measures until the target date was met and the results were published. Eliminated measures that have already met these criteria are marked as "tracking commitment fulfilled" and are no longer included in the performance plan.

The following table summarizes the changes and improvements to the measures and indicators in the performance plan.

Measures and Indicators	Changes From Previous Plan
Measure 1	**No Change from FY 2007**
Measure 2	
Indicator 2.1	Discontinued in FY 2008; Replaced by 2.9.a
Indicator 2.2	Discontinued in FY 2008; replaced by 2.9.b
Indicator 2.3	Discontinued in FY 2008: Replaced by 2.9.c
Indicator 2.4	Discontinued in FY 2008
Indicator 2.5	No Change
Indicator 2.6	No Change
Indicator 2.7	No Change
Indicator 2.8	Developmental
Indicator 2.9	No Change
Indicator 2.9a	New in FY 2008
Indicator 2.9b	New in FY 2008
Indicator 2.9c	New in FY 2008
Measure 3	**No Change from FY 2007**

Data Verification and Validation

AoA and State agencies engage in a formal assessment and certification of the *National Aging Program Information System (NAPIS)* data. With the increasing trend toward web-based data collection, it is important to note that NAPIS is the repository for all AoA data regardless of medium, format or source. It includes the *State Program Report (SPR)*, the *National Ombudsman Reporting System (NORS)*, and the *American Indians, Alaska Natives and Native Hawaiians – Title VI Reporting.* Data collection done on our behalf by the Office of the Inspector General is also a component of NAPIS. AoA, in partnership with State and Area Agencies on Aging, also conducts annual *National Surveys of Recipients of Older Americans Act (OAA) Services* to obtain consumer-reported outcome information

Database Descriptions

State Units on Aging are required to collect, compile, and annually transmit to AoA program information and data known as the SPR. Descriptive material on the SPR and its reports are on AoA's web site at http://www.aoa.gov/prof/agingnet/NAPIS/napis.asp. The 2000 reauthorization of the OAA required the Administration on Aging (AoA) to use data collected through the SPR and other applicable information in the development of performance measures and in compliance with the Government Performance and Results Act (GPRA) of 1993. Since August 2001, AoA has involved State Unit on Aging (SUA) and Area Agency on Aging (AAA) representatives and providers in a SPR modification process.

This work has resulted in revised Reporting Requirements for Title III and VII of the OAA (OMB Approval Number 0985-0008). This modified reporting structure incorporates information regarding the National Family Caregiver Program, complied with OMB requirements regarding reporting classifications, e.g., race and ethnicity and reduced SUA reporting burden (data cells (fields) needed in 2004 and prior years: 12,000 plus; data cells needed in 2005 and beyond: 6,400).

National Survey Data

AoA's national survey employs a range of quality assurance procedures to guarantee the validity of data on OAA participants and services. These quality assurance procedures cover all steps in the survey process, from the development of the samples of agencies and service recipients, to the computer-assisted telephone interviewing (CATI) editing that occurs during the survey, and the post-survey weighting of the data to assure that the sample is truly representative of the universe of clients and services.

Senior statisticians have designed a sample of agencies and service recipients that ensures an accurate representation of OAA programs, and the project staff focus their attention on achieving a high response rate, which maximizes the survey's precision. The surveys have consistently achieved a cooperation rate of over 80 percent for the sampled Area Agencies on Aging and over 90 percent for the sample of clients who are currently participating in OAA programs. These high cooperation rates occur because of several important steps in the quality

assurance process, including intensive follow-up to contact and interview as many service participants as possible, calling back at times that are convenient for respondents.

After the surveys are complete, range and consistency checks and edits, in conjunction with the CATI software applications, ensure that only correct responses appear in the data files. Also, the statisticians weight the data during three important post-survey steps to ensure accuracy. First, the sample of agencies and clients is weighted using the inverse of the probability of selection. Second, there is an adjustment for any non-response patterns and bias that might otherwise occur. Third, the data are post-stratified to known control totals to ensure consistency with official administrative records.

Under an agreement with the HHS Office of the Inspector General, the statistics for tracking the results of our *Senior Medicare Patrol Projects* have been provided every six months since the programs inception; the first performance data report appeared in February 1999. The reports present cumulative figures for the total number of projects, number of beneficiaries and training sessions held, number of complaints received and complaints acted upon. Although self-identified beneficiary savings attributed to Medicare are reported, the OIG does not specifically ask for documentation or explanation of these savings, so it is left to Medicare to recognize this result.

Beginning in 2003, based on OIG recommendations, AoA initiated training sessions for state and local ombudsmen on how to document cases and complaints according to established codes and definitions. This training has improved uniformity and consistency in annual case and complaint data among the regional and state programs for the NORS. In addition to these ongoing sessions, and state-sponsored trainings on data collection, AoA engaged the services of a data research contractor, who: 1) reviews the case and complaint data, along with other program data contained in the states' annual reports to AoA; 2) calls the states if there are unexplained discrepancies with previous years' reports; and 3) provides one-on-one technical assistance which reinforces the group training. Through this process, errors are corrected, while at the same time states are continually trained and assisted in accurately reporting their ombudsman data.
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