

DEPARTMENT of HEALTH and HUMAN SERVICES

Fiscal Year 2007

Administration on Aging

AoA Program Performance Analysis

Excerpted from: Justification of Estimates for Appropriations Committees

FROM THE ASSISTANT SECRETARY FOR AGING

The Administration on Aging (AoA) is pleased to present AoA's FY 2007 Congressional Justification. This budget request continues support for the President's and Secretary's priority initiatives, ties directly to the Department's FY 2005-2010 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 expansion of the number of community service providers across our core home and community-based services, AoA is achieving its mission to develop a comprehensive, coordinated and cost-effective system of long-term care that helps older adults maintain their independence and dignity – connecting, contributing and thriving in livable communities. 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:

- Make it easier for older people to access an integrated array of health and social supports
- Help older people stay active and healthy
- Support families in their efforts to care for their loved ones at home and in the community
- 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 provides the linkage 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 Older Americans Act services help the most vulnerable elders remain in their homes and communities. This FY 2007 budget request maintains funding for AoA's core programs and for continued 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 one or two key accomplishments. This section focuses specifically on trends in performance measures, targets and results. Since significantly reducing the number of measures from 2004-2005 (over 50 percent reduction from 38 measures to 16), AoA continued to stay with this succinct approach. Twenty four percent of these measures relate to program efficiency. The following table summarizes AoA's performance measures and results over the six year period from FY 2002 to FY 2007:

Fiscal Year	Measures	Total R	eported	Total Met	Total N	Not Met	
	Total in Plan*	Results Reported	% Reported	Met	Improved	Total Not Met	% Met
2002	26	26	100	16	2	10	62
2003	39	38	97	22	6	16	58
2004	38	37	97	27	5	10	73
2005	16	NA	NA	NA	NA	NA	NA
2006	16	NA	NA	NA	NA	NA	NA
2007	17	NA	NA	NA	NA	NA	NA

Summary of Measures and Results Table

Consistent with guidance from HHS and the Office of Management and Budget (OMB), AoA significantly reduced the number of measures tracked under the Government Performance and Results Act (GPRA), focused specifically on outcome measures deemed most valuable in the Program Assessment Rating Tool (PART) process, and organized performance indicators under three broad measures: improving program efficiency, improving client outcomes and effective targeting to vulnerable elders. To ensure clarity with respect to the change in approach, while at the same time fulfilling our commitment to complete reporting on the measures of earlier GPRA plans, AoA's Detail of Performance Analysis is presented in two parts: 1) performance measures for FY 2005 and beyond, and 2) performance measures for earlier years.

Overview of Performance Planning Activities

FY 2007 represents the second 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) improving 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 seventeen performance indicators to assess progress in these three performance areas. The efficiency indicators, reflective of Office of Management and Budget (OMB) requirements to measure efficiency for all program activities, 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 most in need of these services. Most indicators 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:

- <u>OAA programs serve elders in greatest need</u>; Over 28 percent of AoA's core State program clients are below the poverty level, which is more than double the over 10 percent of all persons over 60 below the poverty level. In addition, almost 52 percent of AoA's minority clients are below the poverty level in contrast to over 21 percent at the national level.
- <u>OAA programs build systems capacity</u>: 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 60 percent in FY 2003), 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.
- <u>OAA programs are less expensive than other home and community-based services;</u> the average cost per service unit for many services is far lower than industry averages, often due

to an extensive use of volunteers. As an example, service unit costs for homemaker services are only \$ 9.15 and for transportation is only \$ 5.42. When the total number of service units is divided by the total expenditures States spent on OAA community-based services in FY 2003, the number is \$7.13 per service unit.

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 2000-2003 AoA service unit costs increased on average a meager \$0.65, 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. To help ensure the continuation of these trends, AoA makes extensive use of its discretionary funding to test innovative service delivery models for State and local program entities to attain measurable improvements in program activities. For example, initiatives to better integrate funding for long-term care services delivery, eliminate duplication, and improve access to care for elderly individuals – such as AoA's partnership with the Center for Medicare and Medicaid Services to create Aging and Disability Resource Centers – is beginning to yield these types of efficiency improvements.

AoA also uses performance data to inform program evaluations. AoA substantially increased its program evaluation activity over the past two years, partially in response to findings produced from GPRA performance measures. Since FY 2004, AoA completed an evaluation of disease prevention programs, began an evaluation of Home and Community-Based Supportive Services and initiated the development of a comprehensive evaluation design for nutrition and Native American Supportive Services. These forthcoming evaluations and a continued focus on program assessment through the performance plan will help AoA programs improve efficiency, continue to improve client outcomes and increase effectiveness in targeting services to vulnerable elders.

Detail of Performance Analysis – FY 2007 Aging Services Program

Measure 1: Improve Program Efficiency

Long Term Goal: Improve Program Efficiency (Approved by OMB)			
Measure	FY	Target	Result
Indicator 1.1: For Title III Services, that is, Home and	2007	6,541 (+15%)	Sept-2008
Community-based Services and Nutrition Services, increase the	2006	6,257 (+10%)	Sept-2007
number of clients served per million dollars of AoA funding.	2005	6,143 (+8%)	Sept-2006
(outcome)	2004	6,029 (+6%)	6,528
	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	2007	10,788 (+16%)	Sept-2008
Ombudsman complaints resolved or partially resolved per	2006	10,062 (+14%)	Sept-2007
million dollars of AoA funding.	2005	9,672 (+4%)	Sept-2006
(outcome)	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	2007	253 (+15%)	Sept-2008
units of service provided to Native Americans per thousand	2006	242 (+10%)	Sept-2007
dollars of AoA funding.	2005	229 (+4%)	Sept-2006
(outcome)	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	2007	37,820 (+22%)	Sept-2008
of beneficiaries trained per million dollars of AoA funding.	2006	37,200 (+20%)	Sept-2007
(outcome)	2005	32,550 (+5%)	Sept-2006
	2004	31,930 (+3%)	33,302
	2003	New in FY 04	36,513
	2002	New in FY 04	31,000 (base)
Data Source: National Aging Program Information System (NAP)			
Data Validation: See Data Verification and Validation Statement	on Page 92.		
Cross Reference: HHS Strategic Plan Goal # 1 and Goal # 6.			

Program efficiency is a necessary and important measure of performance for AoA programs for two principal reasons. First, OMB recognizes the importance of efficient use of Federal funds by Federal agencies and the entities that administer Federal programs. 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. Lastly, 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's 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 the nutrition, supportive services, caregiver and other program activities administered under Title III of the OAA, in 2007, AoA will improve program efficiency by 15 percent over the baseline of 5,688. This goal is double the annual improvement rate observed for FY 1999 to FY 2004.
- For Title VII services, AoA will increase by 16% the number of complaints resolved or partially resolved per million dollars of AoA funding from its baseline in FY 2002 of 9,300 to nearly 11,000 by FY 2007.
- For Title VI, AoA will increase by 15% the number of units of service provided to Native Americans from its baseline in FY 2002 of 220 units of service for each thousand dollars of AoA funding to 253 units of service per thousand dollars of AoA funding by FY 2007.
- For AoA's Senior Medicare Patrol activities, AoA's initiatives will increase training to beneficiaries by 22% such that the number of beneficiaries trained will increase from the baseline in FY 2002 of 31,000 people per million dollars of AoA funding to over 37,800 people per million dollars of funding by FY 2007.

Linkage to Budget

AoA is not basing its performance improvements for the efficiency measures on increases in program budgets. The strategy is for AoA and its program partners to use existing resources and innovative management to continue program efficiency gains. The one exception to this strategy is the ambitious target AoA established for its Title III programs. The reason is that the Assistant Secretary for Aging already initiated efforts to rebalance long-term care toward community care, and to improve the integration of home and community-based service programs through demonstration grants to States and other entities. These efforts are intended to significantly contribute toward achieving the efficiency targets. These performance targets, along with the agency's rebalancing and integration initiatives, reflect AoA's belief that improvements in the integration of services and more effective use of existing long-term care resources are the key factors that will improve efficiency in AoA programs.

Program Results

While these measures are still relatively new and there can therefore be no assessment of the extent to which AoA has achieved past efficiency targets, a review of prior year data indicates that from FY 1999 to FY 2003 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:

- <u>FY 2002:</u> 5,688 clients per million dollars of AoA funding.
- <u>FY 2003:</u> 6,375 clients per million dollars of AoA funding.
- <u>FY 2004:</u> 6,528 clients per million dollars of AoA funding.

States reported serving over 400,000 more elders and caregivers in FY 2004 than FY 2003. With overall funding stable, these increases result in an efficiency increase of almost 15 percent. While AoA expects continued growth in the number of caregivers served, AoA does not expect such increases in elderly clients each year.

Similar significant efficiency increases also occurred for the Ombudsman and Senior Medicare Patrol programs. Ombudsman programs reported resolving or partially resolving almost 5,000 more resident complaints in FY 2004 than FY 2003. This increase results in an efficiency increase of almost 16 percent per million dollars of AoA funding. Senior Medicare Patrols reported training over 425,000 beneficiaries in FY 2004; resulting in an efficiency increase of 7 percent. Native American Services also experienced an increase in efficiency, exceeding the FY 2004 target for unit service increase by 12%. In 2004, this represented another 28 units of service for every \$1,000 of Native American Services funding. AoA just released a solicitation 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.

Long Term Goal: Improve Client Outcomes			
Measure	FY	Target	Result
Indicator 2.1: Maintain high client satisfaction with home-	2007	93%	Feb-2008
delivered meals.	2006	93%	Feb-2007
(outcome)	2005	93%	Feb-2006
	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	2007	82%	Feb-2008
transportation services.	2006	82%	Feb-2007
(outcome)	2005	82%	Feb-2006
	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	2007	87%	Feb-2008
of elders.	2006	87%	Feb-2007
(outcome)	2005	87%	Feb-2006
	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	2007	93%	Feb-2008
meals.	2006	93%	Feb-2007
(outcome)	2005	93%	Feb-2006
	2004	New in FY 05	90%
	2003	New in FY 05	93% (base)
	2002	New in FY 05	Not Applicable

Measure 2: Improve Client Outcomes

Measure	FY	Target	Result
Indicator 2.5: Increase percent of caregivers who report that	2007	75%	Feb-2008
services definitely help them care longer for older individuals.	2006	68%	Feb-2007
(outcome)	2005	62%	Feb-2006
	2004	New in FY 05	52%
	2003	New in FY 05	48% (base)
	2002	New in FY 05	Not Applicabl
Indicator 2.6: Reduce the percent of caregivers who report	2007	35%	Feb-2008
difficulty in getting services.	2006	43%	Feb-2007
(outcome)	2005	50%	Feb-2006
	2004	New in FY 05	50%
	2003	New in FY 05	64% (base)
	2002	New in FY 05	Not Applicabl
Indicator 2.7: Improve the Ombudsman complaint resolution	2007	15	Feb-2009
rates in 15 States.	2006	15	Feb-2008
(outcome)	2005	10	Feb-2007
	2004	7	26
	2003	5	24
	2002	New in FY 03	Not Applicabl
Indicator 2.8: Increase the percent of Medicare beneficiaries	2007	Baseline + 20%	June-2008
who will read their Medicare Summary Notices as a result of the	2006	Baseline + 20%	June-2007
Senior Medicare Patrol training by 20%.	2005	New in FY 06	Developmenta
(outcome)	2004	New in FY 06	Not Applicabl
	2003	New in FY 06	Not Applicabl
	2002	New in FY 06	Not Applicable
Indicator 2.9: Increase percent of Title III recipients rating	2007	90%	Feb-2008
services good to excellent.	2006	New in FY 07	Baseline
(outcome)	2005	New in FY 07	Not Applicabl
	2004	New in FY 07	Not Applicabl
	2003	New in FY 07	Not Applicabl
	2002	New in FY 07	Not Applicabl

Cross Reference: HHS Strategic Plan Goal # 1 and Goal # 6.

The FY 2007 performance budget includes nine indicators supporting AoA's measure of client outcomes. To AoA, these are the core performance outcome indicators for our programs because they reflect program assessments obtained directly from elders and caregivers who receive the services. AoA has multiple satisfaction indicators in this plan reflecting separate assessments provided by elders for services such as meals, transportation and homemaker assistance. OMB specifically required these measures in the FY 2005 PART assessment for AoA. As noted earlier in this section, OMB was very pleased with AoA's aggressive efficiency targets. However, there was a concern that an excessive focus on efficiency could reduce service quality and consumer satisfaction, thus OMB asked AoA to include multiple satisfaction indicators in the AoA plan to address consumer satisfaction and an overall quality measures encompassing all services. 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. A summary of the client outcome measures for FY 2007 are:

- <u>Home-Delivered Meals Satisfaction</u>: Maintain the high percentage (93%) of home-delivered meal clients reporting they like the meals.
- <u>Transportation Satisfaction</u>: Maintain the high percentage (82%) of transportation service recipients rating the service very good to excellent.
- <u>Caregiver Satisfaction</u>: Maintain the percent of caregivers (87%) rating case management services good to excellent.
- <u>Congregate Meals Satisfaction:</u> Maintain the percentage of congregate meal clients (93%) reporting they like the way the food tastes.
- <u>Caregiver Impact Assessment:</u> Increase the percentage of caregivers reporting that services have "*definitely*" helped them provide care for a longer period by 27% over the 2003 base of 48%
- <u>Caregiver Difficulty Reduction</u>: Decrease the number of caregivers reporting difficulties in dealing with agencies to obtain services by 29% from the 2003 base of 64%.
- <u>Improve Ombudsman Complaint Resolution:</u> Increase the percentage of complaints that are resolved in 15 states.
- <u>Increase Scrutiny of Medicare Notices:</u> 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.
- <u>Overall Program Assessment:</u> Increase percent of Title III recipients rating all services good to excellent to 90% to assure that there is no decline in total service quality.

Performance Targets

AoA is committed to maintaining the high satisfaction rates established for its core programs and to achieve ambitious improvements in client outcomes measures. For client satisfaction indicators, the targets to maintain these high levels of performance are aggressive when taken in the context of the AoA commitment to aggressively improve program efficiency in the near and long term. It is essential that AoA maintain a high level of satisfaction with services even as the national aging services network increases the number of elders served per million dollars of AoA funding. Additionally, performance targets related to caregiver assessments 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

targeting of 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 satisfaction with services 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 growing 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 will also support the goal to increase the percentage of caregivers who report that OAA services help them care longer for their older family members and friends.

Program Results

The client outcomes indicators for each of the Title III services should 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. Performance targets reflect our intent to maintain high client satisfaction. Through the he Ombudsman program, the national aging services network realized very significant increases in the resolution of complaints. From FY 1998 to FY 2002 Ombudsmen increased their resolution rate from 71 percent of all complaints to 78 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	FY	Target	Result
ndicator 3.1: Increase the number of caregivers served to	2007	1,000,000	Feb-2008
1,000,000 by FY 2007.	2006	900,000	Feb-2007
(outcome)	2005	800,000	Feb-2006
	2004	500,000	525,000
	2003	250,000	585,000
	2002	New in FY 03	439,000
ndicator 3.2: Increase the number of severely disabled clients	2007	350,568 (+25%)	Feb-2008
who receive selected home and community-based services.	2006	322,522 (+15%)	Feb-2007
(outcome)	2005	302,890 (+8%)	Feb-2006
	2004	New in FY 05	293,500
	2003	New in FY 05	280,454 (base)
	2002	New in FY 05	Not Applicable
ndicator 3.3: Increase the percentage of OAA clients served	2007	Census + 10%	Sept-2008
who live in rural areas to 10% greater than the percent of all US	2006	Census + 10%	Sept-2007
elders who live in rural areas.	2005	New in FY 06	Sept-2006
<i>(outcome)</i>	2004	New in FY 06	19.7
	2003	New in FY 06	Census + 5%
	2002	New in FY 06	Census + 5%
ndicator 3.4: Increase the number of states that increase the	2007	20 States	Sept-2008
percentage of clients served who are poor.	2006	17 States	Sept-2007
(outcome)	2005	15 States	Sept-2006
	2004	12 States	25
	2003	5 States	18
	2002	New in FY 03	Not Applicable
Data Source: National Aging Program Information System (NAF	PIS)		

AoA's philosophy in establishing its targeting measure and the indicators associated with it hold that targeting is of equal importance to efficiency 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 services are targeted the most vulnerable client groups and their family caregivers. The caregiver program is still continuing a strong ramp in 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 2007, AoA proposes to increase the number of severely disabled clients (3 or more ADL limitations) who receive selected home and community-based services by 25 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 the initiative to create more balance in the national long-term care service delivery system.
- In the first five years of 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.
- The poverty targeting indicator is extremely challenging for FY 2007 because it not only commits to improve performance in over 25 percent of all States over a very short period of time, 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

In the past few years, the observed success of the national aging services network in targeting services to vulnerable elders provided an impetus for AoA to pursue initiatives to increase the capacity of the national aging services network by integrating services, streamlining eligibility and creating linkages with other key programs. The Aging and Disability Resource Centers expansion is a direct result of these efforts. 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. The initiatives 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, 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. While the percent of clients who live in rural areas appears to have declined in recent years, the 27 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.

Detail of Performance Analysis – Measures for Prior Years

The following tables and analytical presentation reflect a significant change to AoA's GPRA performance plan and report. Because of the necessary reduction in the number of performance measures in the AoA and HHS plans, there is little comparability between the FY 2006 and FY 2007 plans and previous plans. Attempting to analyze the FY 2006 and FY 2007 plans alongside the previous plans would cause tremendous confusion. As a result, AoA opted to separately present the performance results for previous fiscal year GPRA plans. For the sake of brevity, this section does not reiterate rationales for the measures and targets. Instead, the emphasis for the analysis is on the extent to which performance goals and measures were achieved and how performance for those measures affected AoA initiatives. It should be noted that AoA will continue to internally track performance for many of the measures included in prior year plans, and may propose to include some of these measures as indicators of performance in future plans as appropriate. The following table presents measures that were included in previous GPRA plans, but are not included in the FY 2006 and FY 2007 plans.

Performance Goals	Targets	Actual Performance	Reference
A significant percentage of OAA Title III	FY 04: 32%	FY 04: 28.2%	6
service recipients are poor.	FY 03: 32%	FY 03: 28.2%	
[outcome measure]	FY 02: 25%	FY 02: 28.1%	
	FY 01: 25%	FY 01: 29.3%	
Norm: Percent of U.S. elderly population	FY 00: New in FY 01	FY 00: 30.3%	
who are poor in 2000: 10.2%		FY 99: 31.7%	
		FY 98: 36.2%	
A significant percentage of OAA Title III	FY 04: 34%	FY 04: 26.8%	6
service recipients live in rural areas.	FY 03: 34%	FY 03: 27.8%	
[outcome measure]	FY 02: 25%	FY 02: 27.7%	
	FY 01: 25%	FY 01: 30.4%	
	FY 00: New in 01	FY 00: 32.9%	
		FY 99: 33.6%	
		FY 98: 33.5%	
Increase rural participation in States.	FY 04: 9 States	FY 04: 21	6
[outcome measure]	FY 03: 5 States	FY 03: 18	0
	FY 02: New in FY 03	FY 02: Not Available	
Increase the ratio of family caregivers to	FY 04: 1.5 to 10	FY 04: 1.9 to 10	6
registered clients.	FY 03: 1.0 to 10	FY 03: 1.8 to 10	
-	FY 02: New in FY 03	FY 02: 1.4 to 10 (baseline)	

Community-Based Services Programs - Prior Year Measures:

Performance Goals	Targets	Actual Performance	Reference
A significant percentage of OAA Title III service recipients are minorities. [outcome measure] <u>Norm:</u> Percent of U.S. elderly population who are minorities in 2000: 16.3%	FY 04: 20% FY 03: 19% FY 02: 17% FY 01: 17% FY 00: New in FY 01	FY 04: 22.5% FY 03: 22.7% FY 02: 20.5% FY 01: 18.8% FY 00: 19.1% FY 99: 19.3% FY 98: 19.6%	6
Increase participation by senior elders in States. [outcome measure]	FY 04: 9 States FY 03: 5 States FY 02: New in FY 03	FY 04: 24 FY 03: 22 FY 02: Not Available	6
Increase the ratio of leveraged funds to AoA funds. [outcome and efficiency measure]	FY 04: \$2.20 to \$1.00 FY 03: \$1.90 to \$1.00 FY 02: \$1.50 to \$1.00 FY 01: \$1.50 to \$1.00 FY 00: New in FY 01	FY 04: \$2.11 to \$1.00 FY 03: \$1.90 to \$1.00 FY 02: \$1.92 to \$1.00 FY 01: \$2.10 to \$1.00 FY 00: \$1.90 to \$1.00 FY 99: \$1.90 to \$1.00 FY 98: \$1.90 to \$1.00	6
Increase leveraged funding ratios for States. [outcome measure]	FY 04: 8 States FY 03: 5 States FY 02: New in FY 03	FY 04: 30 FY 03: 26 FY 02: 22	6
A high percentage of funding for Personal Care, Home-Delivered Meals, and Adult Day Care will come from leveraged funds. [outcome measure]	FY 04: 76% FY 03: 74% FY 02: 70% FY 01: 70% FY 00 New in FY 01	FY 04: 72.9% FY 03: 71.0% FY 02: 73.0% FY 01: 74.5% FY 00: 74% FY 99: 75% FY 98: 75%	6
Increase program income ratios for States. [outcome measure]	FY 04: 5 States FY 03: 5 States FY 02: New in FY 03	FY 04: 30 FY 03: 35 FY 02: 26	6
Maintain high percentage of senior centers that are community focal points.	FY 04: 62% FY 03: 60% FY 02: 50% FY 01: 50% FY 00: New in FY 01	FY 04: 75.7% FY 03: 74.0% FY 02: 63.0% FY 01: 58.1% FY 00: 61.2% FY 99: 59.5%	6
Increase volunteer staff participation for State Agencies.	FY 04: 5 States FY 03: (New in FY 04)	FY 04: 20 States FY 03: 11 States	
Increase the numbers of State Agencies on Aging that provide caregiver services in all five service categories.	FY 04: 10 States FY 03: 10 States FY 02: (New in FY 03)	FY 04: 46 States FY 03: 45 States FY 02: 46 States	

Performance Goals	Targets	Actual Performance	Reference
	EX 04 102.0	EV.04 142.0	
Increase the number of home-delivered	FY 04: 183.0	FY 04: 142.8	
meals provided.	FY 03: 183.0	FY 03: 142.0	
	FY 02: 183.0	FY 02: 142.0	
	FY 01: 179.0	FY 01: 143.8	
	FY 00: 155.0	FY 00: 143.4	
	FY 99: 119.0	FY 99: 134.6	
		FY 98: 129.7	
Maintain the number of congregate meals	FY 04: 115.2	FY 04: 105.6	
provided.	FY 03: 115.2	FY 03: 105.8	
F	FY 02: 115.2	FY 02: 108.3	
	FY 01: 115.2	FY 01: 112.2	
	FY 00: 113.1	FY 00: 115.8	
	FY 99: 123.4	FY 99: 112.8	
	11,77. 125.1	FY 98: 114.1	
Maintain the number of Transportation	FY 04: 50.7	FY 04: 36.3	
units of service provided.	FY 03: 50.7	FY 03: 36.0	
units of service provided.	FY 02: 50.7	FY 02: 37.1	
	FY 01: 50.7	FY 01: 39.4	
	FY 00: 46.6	FY 00: 42.8	
	FY 99: 39.5	FY 99: 45.8	
Maintain the number of Information and	FY 04: 15.2	FY 04: 13.2	
Assistance units of service provided.	FY 03: 15.2	FY 03: 12.6	
	FY 02: 15.2	FY 02: 12.3	
	FY 01: 15.2	FY 01: 13.1	
	FY 00: 14.0	FY 00: 13.4	
	FY 99: 12.5	FY 99: 12.2	
Reduce time-lag (in months) for making	FY 09: 6 months	FY 09: 06/10	
NAPIS data available for GPRA purposes	FY 05: 12 months	FY 05: 02/07	
and for publication. [outcome and	FY 05: 12 months FY 04: 13 months	FY 05: 02/07 FY 04: 12 months	
	FY 04: 13 months FY 03: 15 months	FY 04: 12 months FY 03: 13 months	
efficiency measure]			
	FY 02: 15 months	FY 02: 15 months	
	FY 01: 15 months	FY 01: 15 months	
	FY 00: (New in FY 01)	FY 00: 19 months	
		FY 99: 22 months	
		FY 98: 26 months	

In previous years, AoA presented measures for the Community-Based Services program according to three categories: intermediate outcome targeting measures, intermediate outcome system measures, and service output measures. The analysis that follows maintains references to those categories to allow for the conduct of analysis in the same context in which the measures were originally presented in the plans for FY 2004 and prior years. This form of analysis will be maintained until requirements for the reporting of program results are met for all fiscal years prior to FY 2005. In those plans, AoA established expectations for performance for the various categories of measures.

- <u>Intermediate Outcome Targeting Measures:</u> Does the network target services to vulnerable elderly individuals and have there been improvements in the delivery of these services?
- <u>Intermediate Outcome System Measures:</u> What do the State and local components of the network contribute to the elderly in the way of resources, coordination, and emphasis on the most vulnerable?
- <u>Service Output Measures:</u> What level of services will the network provide to elderly individuals each year for meals, transportation, and other services?

<u>Performance Measures Analysis – Intermediate Outcome Targeting Measures:</u>

In previous plans, AoA identified a set of targeting measures to track the effectiveness of the network in meeting the intent of the OAA to serve vulnerable elderly individuals, and to target measurable improvements where appropriate.

If AoA is to demonstrate that the network is targeting services to vulnerable individuals, then data should show that the percentage of clients who are poor, disabled, minorities and those in rural areas, is higher than the percentage of all elderly persons in the total population who fit these characteristics. For AoA targeting measures, the tables above indicate that the national aging services network effectively targets services to the vulnerable elderly individuals in the Nation.

- <u>Poverty Targeting Measures:</u> Whereas 10 percent of all elderly over 60 years old were poor, approximately 30 percent of national aging services network clients were poor for all years reported.
- <u>Minority Targeting Measure</u>: The percent of OAA clients who were minorities (22.2 percent in FY 2004) remains significantly higher than the total percent of all minority elders (19.6 percent).
- <u>Disability Targeting Measure</u>: National sample survey data show 79 percent of homedelivered meals clients have limitations in Activities of Daily Living (ADLs) and 86 percent of homemaker services clients have limitations in ADLs. This data indicates that States, as a whole, are successfully targeting services to disabled elderly individuals.
- <u>Senior Elders Targeting Measure:</u> Data on age categories for 42 States show that a high percentage of clients (over 60 percent) receiving registered services are aged seventy-five and above. This data indicates that States as a whole are successfully targeting registered services to elderly individuals aged seventy-five and above.
- <u>Caregiver Targeting Measure:</u> The caregiver program was implemented in FY 2001. State agencies served 1.9 caregivers for every 10 elderly individuals served in FY 2004.

<u>Performance Measures Analysis – Intermediate Outcome Efficiency/System Measures:</u> Intermediate Outcome System measures data should show that: (1) there is a significant contribution above and beyond funding provided by AoA; (2) there is a strong degree of coordination of services provided through the network; and 3) the network is efficient. In general, the data reported above for AoA's intermediate outcome system measures demonstrate the following:

- The funds "leveraged" by the national aging services network are significant in total, almost doubling AoA funds for all years reported.
- The leveraged funds substantially exceed the funding provided by AoA for home and community-based services to the elderly, particularly the disabled who required in-home services and adult day care.
- The network does not rely solely on funds provided by other sources, but every year generates a significant amount of revenue, which is put back into the program for services.
- The network is characterized by a strong community orientation, in which senior centers are not only places where elderly individuals receive services, but are places where services for the elderly are organized and coordinated.
- The network is committed to local solutions and resources in support of the elderly, as reflected in data that show that more than 40 percent of area agency staff are volunteers.

More specifically, the data reported above for AoA's intermediate outcome system measures demonstrate the following:

- <u>Leveraged Funding Measures:</u> For all years reported, FY 1997 through FY 2004:
 - Funds leveraged by State and local agencies exceeded funds provided by AoA by almost 100 percent; and
 - Over 70 percent of the funding that supported personal care, home-delivered meals, and adult day care combined, came from sources other than AoA.
- <u>Program Income Measure</u>: Data for all five fiscal years indicate that revenue generated by the national aging services network (e.g., voluntary contributions for meals) is a significant funding source, representing in over one-third of the amount provided by AoA each year.
- <u>Senior Center Focal Point Measure:</u> Each year, over half of all senior centers participating in the program were community-service "focal points."
- <u>Area Agency Volunteer Measure:</u> The percentage of the staff of area agencies on aging that is made up of volunteers was between 40 and 50 percent in all FYs 1997 through 2004.
- <u>Caregiver Measure:</u> For the National Family Caregiver Support Program, our initial objective for the "system" has been to develop a well-rounded program that serves the various needs of caregivers as envisioned by the OAA. Performance by State agencies in providing services

across all five caregiver service categories was significantly beyond AoA's expectations as 46 State units reported meeting that objective in FY 2004.

<u>Performance Measures Analysis – Service Output Measures:</u>

The service output measures in former plans were used to track the level of services that AoA and the other components of the network provide. Service output data should show that over time performance outputs are consistent with the level of resources provided by AoA and the anticipated level of resources provided by other network sources through the States.

The data on outputs for FY 2004 appear to indicate that costs for services may be rising at higher rates than anticipated, and that the fiscal difficulties confronted by States may have affected program outputs in FY 2004. The units of service provided in FY 2004 are somewhat lower than the units provided in FY 2003 for the categories of service tracked in earlier GPRA plans, including: congregate meals and transportation services. The number of home-delivered meals provided is higher than the number reported for FY 2003. The service levels for home-delivered meals and other services were not as great as AoA had projected in its performance targets.

- <u>Home Delivered Meals Output Measures:</u> The data reflects an increase in the number of home-delivered meals provided in FY 2004. We did not meet the higher targeted result, which we believe reflects three factors: 1) the difficulty of accurately targeting the number of meals that will be served in a given fiscal year, 2) cost increases (particularly fuel costs) associated with delivering the meals, and 3) fiscal difficulties encountered by State units on aging.
- <u>Congregate Meals Output Measure:</u> FY 2004 data indicates that the network did not meet its target for congregate meals, and that the number of congregate meals served declined further.
- <u>Transportation Output Measure:</u> The level of output performance for transportation service did not meet the FY 2004 target. and
- <u>Information and Assistance Output Measures:</u> The level of output performance for information and assistance also did not meet the FY 2004 target.

Vulnerable Older Americans – Prior Year Measures:

Performance Goals	Targets	Actual Performance	Reference
Maintain a high combined resolution / partial resolution rate for complaints.	FY 04: 75% FY 03: 74% FY 02: 70% FY 01: 70% FY 00: 70% FY 99: 71.48%	FY 04: 77.2% FY 03: 76.0% FY 02: 77.0% FY 01: 76.7% FY 00: 74.1% FY 99: 74.3% FY 98: 70.6%	6

<u>Performance Measures Analysis – Ombudsman Measures:</u>

For each of the years included in the table above, the network has achieved a high combined resolution/partial resolution rate in excess of 70 percent. For FY 2001 through FY 2004, the rate has risen to over 75 percent.

Performance Goals	Targets	Actual Performance	Reference
Initially increase and then maintain units of service in the following categories:	(numbers in thousands)	(numbers in thousands)	
Home-Delivered Meals	FY 04: 2,000	FY 04: 2,125	6
	FY 03: 1,850	FY 03: 2,144	
	FY 02: 1,850	FY 02: 2,019	
	FY 01: 1,795	FY 01: 1,870	
	FY 00: 1,632	FY 00: 1,686	
	FY 99: 1,456	FY 99: 1,680	
Congregate Meals	FY 04: 1,650	FY 04: 1,700	
	FY 03: 1,650	FY 03: 1,628	
	FY 02: 1,650	FY 02: 1,545	
	FY 01: 1,583	FY 01: 1,431	
	FY 00: 1,439	FY 00: 1,317	
	FY 99: 1,322	FY 99: 1,290	
Transportation Service Units	FY 04: 740	FY 04: 877	6
Transportation Service Onits	FY 03: 732	FY 03: 885	Ū.
	FY 02: 732	FY 02: 858	
	FY 01: 732	FY 01: 769	
	FY 00: 665	FY 00: 781	
	FY 99: 763	FY 99: 702	
Information & Referral Service Units	FY 04: 747	FY 04: 727	
	FY 03: 747	FY 03: 691	
	FY 02: 747	FY 02: 642	
	FY 01: 747	FY 01: 625	
	FY 00: 679	FY 00: 544	
	FY 99: 632	FY 99: 633	
	FY 99: 632	FY 99: 633	

Native Americans Program – Prior Year Measures:

Performance Measures Analysis – Native American Measures:

In analyzing program performance related to performance plans, data for the Native American program in units of service show modest increases over the prior years ending in FY 2004 with a strong 12 percent increase. Looking at all five years, the data for this program indicate that levels of service provided for most activities increased each year. Information and referral units did not meet the target; however, the number was still a 5 percent improvement over FY 2003.

Transportation service units results in FY 2004 were 18 percent greater than the target with homedelivered and congregate meals averaging a 5 percent increase over the target.

Changes and Improvements over Previous Years

In conformance with new instructions from HHS and OMB, 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. This was accomplished through the introduction of the concept of indicators and a hierarchical organization of programs conducted to accomplish the overall mission of the organization. The result was 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 Prior Year Measure Section.

Measures and Indicators	Changes From Previous Plan
Measure 1	Designed in FY 2006, includes indicators 1.1, 1.2, 1.3 and 1.4
Indicator 1.1	Previously Indicator 1.1.1, New efficiency measure in FY05
Indicator 1.2	Previously Indicator 2.1 - No Change
Indicator 1.3	Previously Indicator 3.1 - No Change
Indicator 1.4	Previously Indicator 4.1 - No Change
Measure 2	Previously Measure 1.2 - Designed in FY 2005, includes indicators 2.1-2.8
Indicator 2.1	Previously 1.2.1 - New in FY 2005
Indicator 2.2	Previously 1.2.2 - New in FY 2005
Indicator 2.3	Previously 1.2.3 - New in FY 2005
Indicator 2.4	Previously 1.2.4 - New in FY 2005
Indicator 2.5	Previously 1.2.5 - New in FY 2005
Indicator 2.6	Previously 1.2.6 - New in FY 2005
Indicator 2.7	Previously 1.2.7 - New in FY 2005
Indicator 2.8	Developmental
Indicator 2.9	New in FY 2006
Measure 3	Previously Measure 1.3 - Designed in FY05, includes Indicators 3.1-3.5
Indicator 3.1	Previously 1.1.2 - No Change
Indicator 3.2	Previously 1.19 - No Change
Indicator 3.3	Previously 1.3.1 - No Change
Indicator 3.4	Previously 1.14 - No Change
Measure 1.14	Discontinued in FY 2005
Measure 1.15	Discontinued in FY 2005
Measure 1.16	Discontinued in FY 2004
Measure 1.17	Discontinued in FY 2005
Measure 1.18	Discontinued in FY 2005
Measure 1.19	Discontinued in FY 2005 - tracking commitment fulfilled

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 1.20	Discontinued in FY 2005
Measure 1.21	Discontinued in FY 2005
Measure 1.22	Discontinued in FY 2005
Measure 1.23	Discontinued in FY 2005
Measure 1.24	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 1.25	Discontinued in FY 2005
Measure 1.26	Discontinued in FY 2005
Measure 1.27	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 1.28	Discontinued in FY 2005
Measure 1.29	Discontinued in FY 2005
Measure 1.30	Discontinued in FY 2005
Measure 1.31	Discontinued in FY 2005
Measure 1.32	Discontinued in FY 2005
Measure 1.33	Discontinued in FY 2005
Indicator 1.1.3	Discontinued in FY 2006
Measure 2.1	Designed in FY 2005
Indicator 2.1.1	Became Efficiency Indicator 1.2 in FY 2006; New Efficiency measure in FY 2004
Indicator 2.1.2	Discontinued in FY 2006, Converted to efficiency measure FY 2005
Measure 2.3	Discontinued in FY 2005 - expired
Measure 3.1	Designed in FY 2005, includes Indicator 3.1.1
Indicator 3.1.1	Became Indicator 1.3 in FY 2006; New efficiency measure in FY 2004
Measure 3.2	Discontinued in FY 2005
Measure 3.3	Discontinued in FY 2005
Measure 3.4	Discontinued in FY 2005
Measure 3.5	Discontinued in FY 2005
Measure 3.6	Discontinued in FY 2004
Measure 3.7	Discontinued in FY 2004 - tracking commitment fulfilled
Measure 3.8	Discontinued in FY 2004 - tracking commitment fulfilled
Magging 4.1	Designed in EV 2005 includes Indicator 4.1.1
Measure 4.1	Designed in FY 2005, includes Indicator 4.1.1
Indicator 4.1.1	Became Indicator 1.3 in FY 2006; New efficiency measure in FY 2004
Measure 4.2	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 4.3	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 4.4	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.1	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.2	Discontinued in FY 2004 - tracking commitment fulfilled
Measure 6.3	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.4	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.5	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.6	Discontinued in FY 2005 - tracking commitment fulfilled
Measure 6.7	Discontinued in FY 2004 - tracking commitment fulfilled

Data Verification and Validation

AoA and State agencies engage in a formal assessment and certification of the *National Aging Program Information System (NAPIS)*. 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* The 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 OAA Services* to obtain consumer-reported outcome information. The increased investment in these systems and technical assistance required to maintain NAPIS is resulting in:

- data availability months earlier than originally anticipated;
- evidence that AoA is effectively targeting services to the most vulnerable;
- high quality of those services;
- high consumer satisfaction; and
- older persons able to live as independently as possible because of the technical assistance provided to individuals and caregivers.

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 Older Americans Act (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).

Through the Performance Outcome Measures Project (POMP), AoA continues to focus on the assessment of quality through the consumer. POMP grantees (States and AAAs) develop performance outcome measurement surveys which are implemented at the national level. AoA conducted two national surveys of performance outcomes in the past year, and incorporated these

results into new outcome measures and into this plan's analysis. Follow-up surveys featuring larger sample sizes will be conducted this year. Westat, Inc. is the research contractor that conducts the National surveys. Westat provided a statement of the data validation procedures they employ in following three paragraphs:

"The Administration on Aging's national survey employs a range of quality assurance procedures to guarantee the validity of data on Older Americans Act 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 Older Americans Act 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 Older Americans Act 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. Accompanying all survey responses are confidence intervals for measuring the precision of the survey results. This ensures that the data reported by AoA are statistically sound and a precise representation of performance in Older Americans Act programs."

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.

Progress, Improvements and Challenges

AoA is experiencing significant progress toward reducing reporting burden and improving the timeliness and reliability of its NAPIS data. This is the result of promoting the advantages of automation and intensifying the rigor of management review in individual program data collection instruments during routine OMB information collection approval processes. Much of the burden reduction can be attributed to the fact that AoA is taking initiatives to combine various reporting documents into a standard automated data collection processes. The National Family Caregiver Support Program reporting is a prime example of this initiative; OMB has approved these proposed modifications.

While AoA is achieving identifiable improvements in managing its data systems, we also note that AoA and the national aging services network face a significant challenge in obtaining data to measure performance for programs of this kind. All levels of the national aging services network, from AoA through the State and area agencies on aging to local centers and service providers, know well the challenge of producing client and service counts by critical program and client characteristics for a program which *coordinates* service delivery through approximately 29,000 local providers.

Because many OAA program services do not require a centralized, one-time registration for service on the part of clients, eligible clients may obtain services on an ad hoc and irregular basis. This makes the tracking of services to individuals and the generation of "unduplicated" counts of clients a very difficult task at the local level, particularly if local entities lack information technology that simplifies client and service record-keeping and information management.

Federal and State reviews of data provided under NAPIS suggest that significant limitations in the adequacy of information infrastructure at the local level inhibit their ability to routinely and consistently produce the data that are required by law for the OAA programs and form the basis for many of AoA's GPRA performance measures. Extensive and repeated Federal and State efforts to provide technical assistance and to isolate and correct common data problems have been helpful for local areas in the majority of States and for most data elements required by the OAA through NAPIS. Nevertheless, much remains to be done to ensure that local service providers and area agencies have the capacity to reliably provide important data without excessive burden.