

Commission on Aging and Disability

The General Assembly created the Tennessee Commission on Aging in 1963 to plan, develop, and administer the Older Americans Act. The 2001 General Assembly passed Public Chapter 397, renaming the agency the Tennessee Commission on Aging and Disability and expanding the commission's authority to include services to adults with disabilities.

The Older Americans Act provides federal funds for administration and direct services. These services include congregate and home-delivered meals, protection of elder rights, supportive and in-home care, senior centers, transportation, and family caregiver services. The commission administers federal funds from the Centers for Medicare and Medicaid Services to operate the statewide State Health Insurance Assistance Program (SHIP), which provides consumer education and counseling about Medicare, and all other related health insurances. The commission also administers state funds for multi-purpose senior centers, public guardianship, homemaker, and personal care services and home-delivered meals.

TCA 71-2-104 establishes a 25 member policy-forming and decision-making board. The Governor appoints 18 members, including a member of his staff. The commissioners of Health, Mental Health/Developmental Disabilities, Human Services, and Veterans Affairs and the Director of the Council on Developmental Disabilities are ex officio, voting members; and the General Assembly appoints two non-voting representatives.

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Mandated and Optional Services and Best Means of Providing Them

The commission, as the state unit on aging, administers the following Older Americans Act services: 1) Title III, Part B programs consist of supportive programs including access to care, in-home services, and community services. Innovative strategies for access to care include the development of a single point of entry information and referral system that is user-friendly, and accessible. Supportive services primarily consist of case management, homemaker services, and personal care services; 2) Title III, Part C programs include congregate and home-delivered meals. Older Tennesseans eat over 13,500 meals at congregate meal sites and 10,344 home-delivered meals annually; 3) Title III, Part D provides health promotion through screenings, fitness, and medication management. These services are provided primarily through activities and services offered at senior centers, such as: education and training; health education; health promotion/wellness; health screening; material aid; medication management, screening and education; outreach; physical fitness/exercise; recreation; telephone reassurance; transportation; visitation; volunteer opportunities; and intergenerational activities; and 4) Title III, Part E, the family caregiver program helps people who provide primary care for spouses, parents, older relatives, and friends. The program provides information to caregivers about available services, assistance in accessing caregiver services, individual counseling, and supplemental services; in addition, the program organizes support groups and training for caregivers.

The commission also administers a state-funded, home and community-based care program. The Options for Community Living Program (Options), initiated in 2001, serves elderly and disabled Tennesseans who need in-home assistance and who are not Medicaid-eligible. Services primarily

include case management, homemaker services, personal care services, and home delivered meals. Other services may be authorized as needed on a case-by-case basis.

Through a contract with the Bureau of TennCare, the commission provides monitoring and quality assurance reviews for the Long Term Care Community Choices program’s Single Point of Entry (SPOE). In addition, it also provides ombudsman services to residents of assisted living facilities, marketing and outreach services for the SPOE.

TCA 34-7-101 et seq. establishes the Public Guardianship for the Elderly Law and names the commission to administer the program, requiring it to provide public guardians within each of the nine development districts. Public guardians serve as conservators for disabled persons 60 years old or older who have no family members or other person, bank, or corporation willing and able to serve as conservator. The program is totally state funded.

TCA 71-2-109 establishes the Long Term Care Ombudsman and names the commission to plan administer, and operate a statewide long term care ombudsman program in cooperation with the Area Agencies on Aging in each development district.

Performance Standards

1. Improve the quality of life for elderly persons or other adults with disabilities by providing access to services, health promotion and prevention services, and in-home services.
2. Develop a marketing plan, marketing materials, and outreach tools activities for the Long Term Care Community Choices Act single point of entry system.

Performance Measures

1. Number of elderly persons or other adults with disabilities whose quality of life was improved by participating in services as reported to the Administration on Aging.

Actual (FY 2008-2009)	Estimate (FY 2009-2010)	Target (FY 2010-2011)
175,470	176,172	175,820

Note: The American Recovery & Reinvestment Act of 2009 provided increased funds to provide meals through the Nutrition Program for the Elderly. All other program funds are expected to remain level.

2. Percent of marketing plan, marketing materials, and outreach tools developed.

Actual (FY 2008-2009)	Estimate (FY 2009-2010)	Target (FY 2010-2011)
Not Applicable	Not Applicable	100%

Means of Addressing Any Change in Services Since Previous Plan

Beginning July 1, 2009 the commission will no longer be the operating agency for the Statewide Home and Community Based Services Waiver. The commission’s one-year contract for FY 2010 with the Bureau of TennCare is to conduct quality assurance reviews and market the single point of entry system.

The state legislature created the Tennessee Alzheimer Disease Task Force and the commission provides staff support to the Task Force. The Alzheimer state plan was presented to the Governor and the General Assembly on February 15, 2009. The final report included information about the current and future impact of Alzheimer’s disease, services and resources, and recommendations to mobilize a state response to this public health crisis. No funding was allocated to implement the recommendations; however, a commission staff position continues to manage the project and the commission will work closely with the Task Force on an on-going basis to address the recommendations.

TCA 71-5-1422 Pilot project for disabled individuals and family members to self-direct supports and services—the commission shall develop a pilot project that offers families with a member with a disability who requires long-term supports and services and individuals with a disability who require long-term supports and services opportunities to direct their own services. The families and individuals shall exercise choice, control and responsibility for their services within a cost neutral framework. This self-directed “cash & counseling” pilot program was initiated on October 1, 2008. The Aging and Disability Resource Center, Greater Nashville Area Agency on Aging and Disability, was chosen to operate the pilot project.