

2008 ANNUAL REPORT

NEW YORK STATE ASSEMBLY

COMMITTEE ON AGING



Sheldon Silver, Speaker

Jeffrey Dinowitz, Chair

December 15, 2008

Honorable Sheldon Silver
Speaker of the Assembly
State Capitol, Room 349
Albany, New York 12248

Dear Speaker Silver:

It is my pleasure to forward to you the 2008 Annual Report of the Assembly Standing Committee on Aging.

The work accomplished during the 2008 Legislative Session reflects the Committee's dedication to and concern for seniors' quality of life, health and safety, independence, and other interests. This year the Committee advanced legislation addressing a wide range of issues. Several of these initiatives have been enacted into law, including elder abuse education and awareness programs that require the State Police and the State Office for the Aging to work together to provide educational materials to state police officers and develop procedures to follow when abuse is suspected by law enforcement.

Several other laws were enacted this year to protect seniors' interests and ensure seniors' independence. Chapter 82 of the Laws of 2008 will allow Naturally Occurring Retirement Communities (NORCs) and Neighborhood Naturally Occurring Retirement Communities (NNORCs) to provide services to seniors who live near, but not within, the area of the communities. This will enable more seniors to access the services they need to stay independent and in their homes longer. Chapter 167 of the Laws of 2008 will add the Director of the New York State Office for the Aging (SOFA) to the New York State Consumer Protection Board. This will enable SOFA to be more involved in consumer issues relating to seniors.

I would like to take this opportunity to thank the Committee members for their continued contributions to this past year's achievements. I would also like to express my appreciation for the assistance that the Committee received from the Committee staff in the course of our work. Finally, Mr. Speaker, I commend you for your continued leadership and support of our legislative initiatives to better protect New York State seniors.

Sincerely,

Jeffrey Dinowitz
Chair, Committee on Aging

2008 ANNUAL REPORT
OF THE
NEW YORK STATE ASSEMBLY
STANDING COMMITTEE ON AGING

JEFFREY DINOWITZ, CHAIR

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I. Committee Responsibilities and Goals

The New York State Assembly Standing Committee on Aging has jurisdiction over legislation affecting the quality of life of New York's senior citizen population. The Committee also reviews certain legislation providing real property tax relief for those over the age of sixty-five. The Committee works closely with, and has legislative and budgetary oversight for programs administered by, the New York State Office for the Aging. The Committee works to ensure services are available so that seniors enjoy a high quality of life in their later years. This includes programs such as the Expanded In-home Services for the Elderly Program (EISEP), Caregiver Resource Centers, Long-Term Care Ombudsman Program, Retired and Senior Volunteer Program (RSVP), Senior Respite Programs, Social Adult Day Programs, Naturally Occurring Retirement Communities (NORC), Neighborhood Naturally Occurring Retirement Communities (NNORC), Foster Grandparent Programs, Elder Abuse Education and Outreach Program, and Meals-on-Wheels Programs. Furthermore, the Committee has legislative and budgetary oversight of the Elderly Pharmaceutical Insurance Coverage (EPIC) Program, which is administered by the New York State Department of Health.

During the 2008 Session, the Committee reviewed 133 bills and addressed numerous issues aimed at reducing the real property tax burden among low income seniors, providing low income seniors relief from rent increases in the City of New York, enhancing benefits provided under EPIC, ensuring that seniors are able to safely remain in their homes and communities for as long as possible with the supports they deserve, providing supports and resources to individuals diagnosed with Alzheimer's disease and other dementias and their caregivers, as well as providing civic, volunteer, and paid opportunities to newly retired seniors who still have much to give to their communities and to New York State. Furthermore, this Committee held hearings to gather information on the abuse and exploitation of vulnerable elderly citizens, the continuation of senior services during the aging services modernization efforts in New York City, and the Comprehensive Geriatric Mental Health Act.

This report describes the Committee's major legislative activities during the 2008 Legislative Session.

II. 2008 COMMITTEE ACCOMPLISHMENTS

A. Real Property Tax

Property taxes in New York State are the tenth highest in the nation and are twenty-five percent above the national average. Property taxes are based on the value of the home, not on income or the ability to pay. This often creates a burden for low-income seniors who may rely on Social Security as their only source of income. It is the goal of this Committee to enable seniors to remain in their homes and out of costly institutions for as long as possible. One way this can be done is by providing real property tax relief through the Senior Citizen Rent Increase Exemption (SCRIE) program, the Circuit Breaker program, and the Enhanced Star program, as well as other senior exemptions.

1. Extends Real Property Tax Exemptions to Individuals Sixty-two Years of Age

A. 267 (Wright); Passed Assembly

This bill would authorize municipalities to allow seniors over the age of sixty-two to be granted a real property tax exemption on property owned by two people aged sixty-two or older or a married couple or siblings where one is sixty-two years of age or older. Under the current Real Property Tax Law, a person is eligible for the senior citizen real property tax exemption when he or she is 62 years of age and older only if married to, separated from, or the surviving spouse of a person 65 years of age or older, or are the sibling of such a person. This bill would allow more seniors to benefit from this real property tax exemption.

2. Expands Income for SCRIE Eligibility

A. 1249 (Bing); Passed Assembly

This bill would give localities the option, upon a public hearing and the adoption of a local law, ordinance, or resolution, to exempt income received from social security benefits or supplemental security income payments when determining eligibility for the Senior Citizen Rent Increase Exemption (SCRIE) program. The SCRIE program is currently being utilized in New York City where the cost of housing is burdensome to seniors on a fixed income. This bill would allow more seniors to qualify for an exemption from increases in rent, thus providing relief from the high costs of housing.

3. SCRIE for Two Contiguous Dwelling Units

A. 2604-B (Englebright); Chapter 531 of the Laws of 2008

This bill would allow a senior who lives in two contiguous and connected apartments as one apartment for at least two years and is eligible for SCRIE to receive the rent exemption for both units. This bill would impact a small number of seniors who have been living in contiguous dwellings for a number of years. Currently, when the senior is eligible for SCRIE, he or she is

exempt from increases in rent on only one of the dwellings; this has placed such seniors at risk for financial instability due to large increases in rental payments on the other dwelling. This bill would ensure that seniors who live in contiguous and connected dwellings and are eligible for SCRIE receive the exemption from rent increases on both apartments. Only one head of household may take the exemption for the multiple units.

4. Eligibility Simplification for DRIE

A. 7244/A. 9267 (Bing); Passed the Assembly

This bill would streamline the eligibility process for the Disability Rent Increase Exemption (DRIE) program to mirror that which currently exists for SCRIE. Eligibility for the SCRIE program is straight forward; you must be a senior who has an annual income less than \$25,000. Eligibility for the DRIE program is less simple, involves a complex formula, and requires many forms of documentation. This complex eligibility standard severely limits the number of individuals with disabilities who can take advantage of this program. This bill seeks to streamline the eligibility process, enabling more individuals with disabilities to utilize this benefit.

5. Include Certain Unreimbursed Medical Expenses in Calculation of Income for SCRIE

A. 10045 (Dinowitz); Passed the Assembly

This bill would allow localities to modify the definition of income in relation to eligibility for the Senior Citizen Rent Increase Exemption Program (SCRIE) to offset income by the amount paid for all medical and prescription drug expenses not reimbursed or paid for by insurance. For many senior citizens living on a fixed income, medical treatment and prescription drug costs not covered by insurance represent a financial burden that affects their standard of living. With the cost of living constantly rising, it is important that new and innovative approaches to providing assistance be explored.

B. Safety/Health and Well-Being

As we age we become more vulnerable to hazards such as falls, drug interactions, and victimization. Seniors are more likely to become injured and suffer more severe consequences because of that injury than young adults. It is the responsibility of this Committee and of New York State to ensure that we are actively trying to preventing hazards and are responding appropriately.

1. Senior pedestrian surveys

A. 31-A (Clark); Veto Memo 54 of 2008

This bill would require the Department of Transportation to do a state-wide survey to determine the safety of senior pedestrians and to study the feasibility of suggested methods to enhance the safety of such pedestrians. Every year senior citizens have a disproportionately high representation of those killed or injured in pedestrian incidents. Preventive pedestrian safety measures have been implemented outside New York State, and it is reasonable and prudent that these measures receive scrutiny and consideration for use in New York State.

2. Fall and Injury Prevention Coordinating Council

A. 5740-A (Englebright); Veto Memo 56 of 2008

This bill would establish a fall and injury prevention program and create a Fall and Injury Prevention Coordinating Council. In 2003, falls among older adults accounted for 12,900 deaths, 1,800,000 emergency department visits, and 421,000 hospitalizations. Among older adults who fall, 20-30 percent suffer moderate to severe injuries such as hip fractures or head trauma that reduces mobility and independence, increases the risk of premature death, and leads to serious health problems. The total cost of all fall injuries for people age 65 and older was calculated in 1994 to be \$27.3 billion. By 2020, the cost is expected to reach \$43.8 billion. Prevention of falls in homes, in public places, and in long-term care facilities can increase the quality of many seniors' lives as well as lead to a cost savings for the state.

3. Senior Drug Guide

A. 6278-A (Benjamin); Passed Assembly

This bill would require the New York State Office for the Aging to publish a guide explaining the purpose, function, and potential drug interactions of drugs commonly used by persons over the age of 62. The creation of a prescription drug guide for seniors would make seniors aware of the specific effects of the drugs seniors commonly use. Often, seniors are prescribed multiple medications and/or self-medicate with over-the-counter medicines. Certain drug interactions can be life threatening. Seniors need to be made aware of the likely contraindications of certain commonly prescribed drugs and over-the-counter medications.

4. Financial Exploitation Prevention Outreach, Education, and Training Program

A. 6519-A (Englebright); Passed Assembly

This bill would create a Financial Exploitation, Outreach, Education, and Training Program within the New York State Office for the Aging. Seniors are often an attractive target of financial exploitation for a number of reasons. Seniors control over 70 percent of the nation's wealth. They

may not realize the value of their assets, and often do not know what action to take when they are the victims of financial abuse. This bill would ensure that seniors receive the education and support they need to ensure they are not victims of financial abuse.

5. Schedule of Fees for the Use of Air Conditioners in Adult Homes

A. 7069-A (Brennan); Passed Assembly

This bill would require that the New York State Department of Health establish a schedule of fees for the use, maintenance, and repair of air conditioners by residents of adult homes, enriched housing programs, and residences for adults. Due to deaths in adult homes from extreme temperatures, two million dollars was added to the 2006-2007 Budget to enable residents of adult homes to purchase air conditioners. Since then, many residents have enjoyed air conditioning, but have also seen dramatic increases in payments to the adult home operator for the use, maintenance, and repair of such air conditioners. It is the goal of this bill to set fair limits on the amount that an adult home operator can charge each resident who chooses to take advantage of the air conditioners purchased by the state.

6. Develop Awareness and Increase Appropriate Response to Elder Abuse

A. 9905-A (Dinowitz); Chapter 184 of the Laws of 2008

This bill would direct the superintendent of the state police to work with the State Office for the Aging and the Office of Children and Family Services to provide educational and other material related to elder abuse to state police officers and develop written procedures to follow when abuse is encountered by officers. Broadly defined, elder abuse can include physical, emotional, or sexual abuse, as well as exploitation (illegal taking, misuse, or concealment of funds, property, or assets of a vulnerable elder), neglect (refusal or failure by those responsible to provide food, shelter, health care, or protection for a vulnerable elder), or abandonment (desertion of a vulnerable elder by anyone who has assumed the responsibility for care or custody of that person). The growth of the aging population and the recognition that elder abuse is a growing problem (as many as 90% of cases go unreported) provides an important incentive to educate officers in regards to identifying potential elder abuse.

C. Housing and Services

Housing is one of the largest unmet needs of seniors. Most seniors want to stay in the houses or apartments that they have called their own for most of their adult life. When retirement or changes in medical status cause them to leave their homes, it is often difficult for seniors to find the right

combination of housing and services to meet their needs. It is the goal of the committee to increase available housing options and services for seniors to enable them to remain as independent as possible for as long as possible.

1. New York Certified Retirement Community Program

A. 1170 (Gunther); Veto Memo 139 of 2008

This bill would require the Department of Economic Development to develop a “New York Certified Retirement Community” Program to encourage cities, towns or villages to offer physical and cultural diversity, housing opportunities, health care services, transportation, recreational opportunities, and medical and social activities that are appealing to those in retirement. Older citizens enrich the communities in which they live, are often civic minded, and volunteer their time to the betterment of our communities with their valuable experience and knowledge. Modeled after a successful program in Kentucky, the program would promote the state and its communities as a retirement destination for mature citizens. Retirees are a growing portion of the population as 75 million baby boomers reach retirement age. Thus, recruiting retirees to communities will be an increasingly important economic and community development tool for the next twenty years and beyond.

2. Authorizes the LTC Ombudsman in Assisted Living Residences

A. 1452-A (Englebright); Passed Assembly

This bill would include assisted living residences within the definition of “Long Term Care Facilities” for the purposes of the Long-Term Care Ombudsman program. There has been some concern that the Long-Term Care Ombudsman program has been refused entrance into assisted living residences because of some ambiguity in the State law. This bill cures any such ambiguity by requiring that all assisted living residences allow long-term care ombudsmen access in their facilities.

3. Model Zoning and Planning Guidelines

A. 4989 (Englebright); Passed Assembly

This bill would require the New York State Office for the Aging to develop model zoning and planning guidelines that foster age-integrated communities, including the incorporation of senior units in areas currently zoned for single family residences and for mixed-use development. Affordable and accessible housing continues to be a primary concern and a top priority for senior citizens and senior advocates. Despite a growing population of seniors, finding housing that is suitable and affordable in communities throughout the state continues to be a challenge. Communities in many states are changing their zoning to create mixed-use age-integrated communities that bring together service businesses and different generations to create an environment that does not rely on motor vehicles. These model zoning and planning guidelines would be made available to cities,

towns and villages who would like to develop their communities, control sprawl, revitalize downtown areas, or redesign certain neighborhoods to meet their communities' needs.

4. Preserving EPIC Eligibility for Seniors Who Receive Small Increases in Retirement Benefits
A. 7923-A (Brennan); Passed Assembly

This bill would ensure continuing EPIC eligibility for seniors who receive small increases in Social Security or pension benefits. The already high cost of prescription medicines is continuing to rise dramatically. Cost of living adjustments are usually minimal and quickly spent on other necessary services. It would be unfair to punish seniors who were previously eligible for EPIC but are no longer solely due to a cost of living adjustment.

5. Expansion of Adult Day Health Slots
A. 9319-A (Gunther); Veto Memo 146 of 2008

This bill would allow an Adult Day Health Program located in Orange County, which currently has a waiting list, to increase the number of adult day health slots by up to fifty for a limited time frame. This bill is in response to a moratorium placed on Adult Day Health slots by the Department of Health, which has led to waiting lists across the state. Many adults with medical needs cannot be served by home care or by Social Adult Day Programs and are left with inadequate care due to the shortage of Adult Day Health slots. Uncertainty regarding whether the Department of Health will decide to lift the moratorium leaves those with need without options.

6. Renames and Broadens the Geriatric Service Demonstration Program to Include Older Adults with Mental Health Disabilities and Chemical Dependence
A. 9846 (Dinowitz); Veto Memo 14 of 2008

This bill would rename the Geriatric Service Demonstration Program to be the Geriatric Mental Health and Chemical Dependence Demonstration Program, extend grant eligibility, currently limited to providers of mental health services for the elderly, to providers of chemical dependency treatment for the elderly, include the Commissioner of the Office for Alcohol and Substance Abuse Services in the joint annual report now required from the Commissioner of Mental Health and the Director of the Office of the Aging, and increase the number of members on the interagency planning council to seventeen to reflect involvement of the Adjutant General and the Director of the Division of Veterans' Affairs. It is estimated that 17% of seniors suffer from alcoholism or some other form of chemical dependence. As the senior population is expected to increase over the next 15 years, it is imperative that proactive action be taken to develop programs and strategies to meet the expected needs.

7. Providing Services to People Who Live Near NORCs and NNORCS

A. 10011 (Dinowitz); Chapter 82 of the Laws of 2008

This bill would allow Naturally Occurring Retirement Communities (NORCs) and Neighborhood Naturally Occurring Retirement Communities (NNORCs) to provide services to people who live near, but not within, the area of the communities. NORCs provide vital services to help older people in New York remain in their homes and communities. There are occasions when it makes sense to allow NORCs to provide services to persons near to their service areas - health care screening, for example, or when a grant received is for a broader area. Providing that flexibility ensures more seniors have access to services that enable them to stay at home and independent.

8. Older Adult Caregiver Support Program

A. 10013 (Dinowitz); Passed Assembly

This bill would provide support services to grandparents or other older adult relative caregivers who are providing primary care for a child. There are over 240,000 children being raised in grandparent-headed households in New York State. Many grandparents assume responsibility for their grandchildren under critical circumstances, such as drug addiction or incarceration of the parents, death of the parents, and mental health or disability issues faced by the parents. However, grandparent caregivers are often unaware of services available to them for assistance. Making them aware of these services will enable them to continue to be caregivers and keep the families together.

9. Extension of Adult Day Health Slots

A. 10121 (Destito); Chapter 582 of the Laws of 2008

This bill would extend the additional twenty slots added to adult day health care programs in Oneida County until 2012. Many adults with medical needs cannot be served by home care or by Social Adult Day Programs and are left with inadequate care due to the shortage of Adult Day Health slots. Uncertainty regarding whether the Department of Health will decide to lift the moratorium leaves those with need without options.

10. Long Term Care Worker Training Pilot Program

A. 10465-A (Lifton); Passed Assembly

This bill would expand access to quality training for long term care workers to improve the quality of care available to seniors and improve access to care in high needs areas of the State. Many communities are challenged by increasing numbers of older adults who need supportive services such as recreation, income assistance, transportation, and wellness education, and with long-term chronic health problems that require home health care, supportive housing, or institutional care. Many areas face problems recruiting and retaining skilled front-line workers, as well as specialists with knowledge of the particular social and medical needs of older adults, and especially lack the resources of 'state of the art' education and training

programs. This program would improve the quality of services provided to New York's elders by making available training on aging issues to health, mental health, and social service providers in certain counties across New York State.

11. Examination of Services Modernization Initiatives

A. 10470-A (Dinowitz); Passed Assembly

This bill would require contracts for community services awarded as of January 1, 2008, in cities with a population of one million or more to be continued until an independent evaluation of the Senior Options pilot program in the Bronx is done. In addition, an independent evaluation must be completed regarding the modernization of aging services that addresses the number of seniors who would be impacted by each initiative, demographics and annual projections of seniors for the next ten years who would be served by each initiative, how services would be enhanced by the new initiatives, how services would be diminished by the new initiatives and what has been proposed to counteract that, how the proposals for the new initiatives would be better adapted to meet the needs of seniors over five to ten years, and a cost analysis of the current case management, meals-on-wheels, and senior center programs as well as the proposed case management, meals-on-wheels, and senior center programs. While modernization will be vital to the continued delivery of senior services as the population grows and needs increase, it is important that services to seniors not be disrupted or lessened as a result of the modernization efforts. Independently evaluating the process to ensure that needs are being met, in conjunction with continuing community input, is central to making the modernization process as successful as possible.

12. Senior Housing Task Force

A. 10474 (Dinowitz); Veto Memo 99

This bill would establish the Senior Housing Taskforce containing seventeen members. According to a recent study by the American Association of Retired Persons (AARP), most seniors would like to age in their own homes. Unfortunately, many of our seniors cannot appropriately age in their current residence because there may be too many stairs, a lack of wheelchair accessibility, or too great a distance to their family and caregivers. As a result of this, many seniors have no other option but to enter an elder care facility, including but not limited to, nursing homes, assisted living facilities, and independent living facilities. The Taskforce would be responsible for a state-wide assessment of senior housing needs, taking into account several factors, including different geographical areas and their differing needs, health care needs of seniors, long-term care needs of seniors, financial resources of or available to seniors, transportation needs of seniors, and innovative approaches being successfully implemented in other states. This assessment would also project those needs over the next ten years and include a viable plan to provide quality senior housing to meet the needs identified.

13. Expansion of Adult Day Health Slots

A. 10573-A (Magee); Veto Memo 158

This bill would allow an Adult Day Health Program located in Otsego County, which currently has a waiting list, to increase the number of adult day health slots by up to twelve for a limited time frame. This bill is in response to a moratorium placed on Adult Day Health slots by the Department of Health, which has led to waiting lists across the state. Many adults with medical needs cannot be served by home care or by Social Adult Day Programs and are left with inadequate care due to the shortage of Adult Day Health slots. Uncertainty regarding whether the Department of Health will decide to lift the moratorium leaves those with need without options.

14. Expansion of Adult Day Health Slots

A. 11052 (Lifton); Veto Memo 150

This bill would allow an Adult Day Health Program located in Cortland County, which currently has a waiting list, to increase the number of adult day health slots by up to sixteen for a limited time frame. This bill is in response to a moratorium placed on Adult Day Health slots by the Department of Health, which has led to waiting lists across the state. Many adults with medical needs cannot be served by home care or by Social Adult Day Programs and are left with inadequate care due to the shortage of Adult Day Health slots. Uncertainty regarding whether the Department of Health will decide to lift the moratorium leaves those with need without options.

15. Delivery of Service to Traditionally Underserved Populations Study

A. 11245-A (Kellner); Passed Assembly

This bill would require the State Office for the Aging, in their annual report, to assess progress, problems, and effectiveness of service provision to traditionally underserved senior populations, provide recommendations, and include a report on specific needs of traditionally underserved populations and define traditionally underserved populations as populations defined by actual or perceived race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, marital status, disability, familial status, and/or language. The experience of marginalization places many traditionally underserved senior populations at a higher risk for isolation, poverty, homelessness, and premature institutionalization. Moreover, many members of traditionally underserved populations are members of multiple underrepresented groups, and as a result are doubly marginalized. Due to these factors, many seniors avoid accessing elder programs and services, even when their health, safety, and security depend on it. The State Office for the Aging would be authorized to make grants-in-aid to not-for-profits to provide training, outreach, and education to providers of services to the lesbian, gay, bisexual, and transgender senior populations.

16. Intergenerational Day Care Program Extension

A. 11355 (Dinowitz); Veto Memo 102

This bill would continue the Intergenerational Day Care Program and the reporting requirements of such program for two years by extending the provisions of §10 and §12 of Chapter 841 of the Laws of 1987 until 2010. These projects have demonstrated the cost-effectiveness of creating intergenerational programs that meet critical social needs by reducing the isolation of senior citizens and providing child day care services in the community.

17. Expansion of Adult Day Health Slots

A. 11578 (Rules (Diaz, R.)); Veto Memo 151

This bill would allow an Adult Day Health Program located in Bronx County that currently has a waiting list to increase the number of adult day health slots by up to twenty-four for a limited time frame. This bill is in response to a moratorium placed on Adult Day Health slots by the Department of Health, which has led to waiting lists across the state. Many adults with medical needs cannot be served by home care or by Social Adult Day Programs and are left with inadequate care due to the shortage of Adult Day Health slots. Uncertainty regarding whether the Department of Health will decide to lift the moratorium leaves those with need without options.

D. Alzheimer's Disease

Alzheimer's disease is the seventh leading cause of death in the United States, and if you factor in age, it is the fifth leading cause of death for those over the age of sixty-five. Seventy percent of those diagnosed with Alzheimer's disease are cared for at home by family and friends. One out of eight adults over the age of sixty-five and one out of two over the age of eighty-five is diagnosed with Alzheimer's disease; however, it is estimated that Alzheimer's disease is severely under-reported. It is the goal of this Committee to bring more focus to the needs of patients diagnosed with Alzheimer's disease, to provide education and supports to their caregivers, and to increase the state-wide infrastructure to prevent and treat this devastating disease.

1. Omnibus Alzheimer's Services Act of 2008

A. 10265-B (Magnarelli); Veto Memo 179

This bill would authorize the Director of the State Office for the Aging to develop training for law enforcement regarding individuals with cognitive impairments, require the Alzheimer's Coordinating Council to develop recommendations regarding the best use of locator technology, and require the State Office for the Aging to consult with the Division of Criminal Justice Services, the Department of Health, the Division of the State Police, the Alzheimer's Coordinating Council, appropriate local law enforcement, and any other state agency, to develop model guidelines for a silver alert system to locate missing individuals, aged

eighteen years or older, who suffer from dementia, Alzheimer's, or other cognitive impairment. Every incident where an elderly individual with Alzheimer's disease or other dementia wanders from home and is injured or dies underscores the need for a more comprehensive system for locating them before any harm has been done. The more organized the response, the greater the chance for a positive outcome.

E. Civic Engagement

Many older adults who retire often continue to work either due to financial necessity or because of desire. Likewise, many employers recognize the great loss to their organization when older adults retire. It is the goal of this committee to maximize opportunities for older adults either by providing them volunteer opportunities they will enjoy that will utilize their skills or by providing them alternative employment opportunities to supplement their income.

1. Intergenerational Educational and Mentoring Service Program

A. 5564-A (Englebright); Passed Assembly

This bill would create an Intergenerational Education and Mentoring Service Program administered through the New York State Office for the Aging. This program would provide volunteer opportunities in schools for seniors to tutor and/or mentor students in need of such service. Bridging the generations provides a benefit to the older adult and to the child. The older adult stays connected in the community and less likely to want to move out of state. The older adult is able to give back to the community in a meaningful way. The child has exposure to older people and can learn from them, interact with them, and have a better understanding of being older.

2. Mature Worker Training Program

A. 5566-A (Englebright); Veto Memo 88

This bill would create the Mature Worker Employment Training Program administered by the New York State Office for the Aging. This program would provide grants to existing employment programs to develop or expand services to adults over the age of 55 who are looking to remain in the work force or who would like to re-enter the work force. As the baby boomer generation looks forward to retirement, many may not be able to retire or may want to continue working. Furthermore, the economic value of this labor force necessitates efforts to keep older workers engaged in the labor market.

3. Promoting and Enabling Senior Volunteerism

A. 10436-C (Kavanagh); Veto Memo 78

This bill would authorize the State Office for the Aging (SOFA) to enter into a contract with a statewide organization to establish a database of individuals who would like to volunteer their time to programs that address the needs of aging. SOFA would also replicate, develop, or cause to be developed training programs for the volunteers and the programs. Guidelines for use of the database would be developed by SOFA and address confidentiality, screening, access, collection of data, correction of data, and any other requirements that SOFA deems necessary. To develop the training, SOFA could work with individuals and entities experienced in developing such training at the State University of New York and the City University of New York. Many older New Yorkers are looking for opportunities to volunteer in a meaningful way; many not for profits would use volunteers if they could be effectively and efficiently employed. This legislation is designed to meet both of these needs by providing the connections that would bring volunteers and organizations together.

F. Other

1. Adds NYSOFA to the State Consumer Protection Board

A. 6198 (Englebright); Chapter 167 of the Laws of 2008

This bill would add the Director of the New York State Office for the Aging to the New York State Consumer Protection Board. Many seniors have become the victims of consumer fraud and, as the demographics of the state and nation change, it is important that the New York State Consumer Protection Board takes the needs of seniors into consideration when planning and responding to consumer protection issues.

2. Adds NYSOFA to the Emergency Services Council

A. 6202 (Englebright); Passed Assembly

This bill would add the Director of the New York State Office for the Aging to the New York State Emergency Services Council. Natural disasters, man made disasters and other emergency situations require that the special needs of seniors be taken into consideration when the State develops strategies and responses. Therefore, it is imperative that this Council has representation from the aging community.

III. BUDGET

The SFY 2008-2009 Budget was a productive one for the Aging Committee. The Executive continued funding for many of the initiatives funded in last year's budget cycle, including the Family Caregiver Council. Furthermore, there were some innovative new editions to this year's budget. The Regional Caregiver Centers for Excellence, Community Empowerment Initiatives, and Enriched Social Adult Day Services Demonstration Project are all new programs that highlight the dynamic nature of New York aging population.

Family Caregiver Council **\$ 125,000**

This is the second year of funding for this initiative. This council is focusing on the caregiving needs and issues faced by the informal caregivers of children and adults of any age and grandparents raising grandchildren. The Council includes caregivers, as well as academic and other stakeholders. The Family Caregiver Council is developing a policy agenda and recommendations to support caregivers and avert caregiving "burnout."

Regional Caregiver Centers for Excellence **\$ 475,000**

The Regional Caregiver Centers for Excellence will provide advanced and innovative information and tools to help caregivers care for their loved ones and provide support. This will be accomplished through training and technical assistance to local programs.

Community Empowerment Initiatives **\$ 492,000**

This initiative would provide technical assistance and community enhancement to promote innovative models of care, training, and professional development in geriatrics in both medical and non-medical professionals and paraprofessionals, financial exploitation, and elder abuse prevention activities to enable older persons to "age in place" and stay in their own neighborhoods.

Enriched Social Adult Day Services Demonstration Project **\$ 500,000**

The Enriched Social Adult Day Services Demonstration Project would enable seniors who may need minor medical care to receive such care in Social Adult Day Programs instead of enrolling in more expensive Adult Day Health programs. Many times seniors need short term medical care due to an injury and have to leave the Social Adult Day program they are currently participating in as current state law forbids Social Adult Day programs from providing even minor medical care. This demonstration project would decrease the cost and increase the continuity of care provided to seniors needing day programming.

Transportation**\$1,000,000**

Transportation continues to be a significant unmet need across New York State. Research shows that on average there is a ten year gap between the time that seniors are no longer able to drive and when they need institutional care. This places a great burden on family and neighbors and often leaves the senior isolated and unable to get to doctor's appointments or the grocery store. Transportation needs are exacerbated in rural districts where residential areas are often miles away from business and commercial areas. The fifty-nine designated area agencies on aging provide transportation services to seniors. This budget add of one million dollars is intended to enhance those services.

Alzheimer's Advisory Coordinating Council**\$ 50,000**

The Alzheimer's Advisory Coordinating Council is an on-going initiative that was developed to address the growing needs of Alzheimer's patients and the families that care for them in New York State. The Council will make recommendations and ensure the coordination of public-private efforts to meet the needs of person with dementia, their families and loved ones, and the professionals and services that support them. The council will facilitate interagency planning and policy for dementia, review specific agency initiatives, and provide a forum to develop state policy on dementia that would enhance access to appropriate services.

IV. HEARINGS AND ROUNDTABLES

A. Hearing on the Abuse and Exploitation of Vulnerable Elderly Citizens

The Aging Committee held two hearings, on January 18, 2008, in New York City and on February 7, 2008, in Rochester, jointly with the Assembly Judiciary Committee regarding elder abuse. In New York State, an estimated 30,000 seniors are victims of some sort of abuse or exploitation. This number, however, is commonly understood to be low due to factors that make elder abuse and exploitation a hidden and underreported crime. Substance abuse, financial stress, emotional stress, lack of social and other community supports, inadequate training for caregivers, increased medical and emotional needs of the elder person, and a family history of violence all increase the risks of senior victimization. Statewide demographic changes, a higher reliance on home and community based care, increases in longevity, and more medically complex, frail elders may also increase the incidence of abuse and exploitation of seniors.

The Committees heard from the New York State Office of Children and Family Services, the New York State Unified Court System, Adult Protective Services caseworkers, local district attorneys, local offices for the aging, local police departments, legal and other assistance organizations, and other advocates. The testimony provided from all of these sources clearly demonstrated the need for more effective tools to prevent future acts of abuse and exploitation as the population of vulnerable elderly grows in the future.

Several central concerns that require close attention when developing potential legislation and policies emerged. While Protective Services for Adults, commonly known as Adult Protective Services (APS), responds to reports of suspected physical abuse, emotional abuse, neglect, self-neglect, and financial exploitation, not all seniors who need these services are receiving them. Likewise, APS does not always have appropriate resources to investigate and potentially intervene in all of the potential cases and the growing complexity of the cases. In addition, one out of fourteen persons over the age of 60 may experience some sort of abuse. Neglect is by far the most common form of abuse with financial exploitation occurring almost as often. Family members are the source of elder abuse in approximately half of the cases reported. This abuse is often not reported by the victim due to guilt and shame and the perceived belief that the victim is dependent upon the perpetrator who will institutionalize the elder if abuse is reported. Many times victims experience a high rate of social and physical isolation limiting their ability to communicate with anyone other than their caregivers. Overcoming barriers to reporting abuse as well as improving response to suspected cases of abuse are both key to dealing with this growing cancer in our society.

The Aging Committee has worked to turn many of these recommendations into concrete policies and will continue to do so in the future. The Committee is dedicated to finding ways to shed light on this terrible practice in all of its manifestations and to support strengthening the support mechanisms to remove victims from their situations and bring them justice.

B. Hearing on Ensuring that Seniors Retain Access to Essential Supports During the Aging Services Modernization in New York City

The Aging Committee, jointly with the Assembly Committees on Cities and Consumer Affairs and Protection and the Assembly Subcommittee on Outreach and Oversight of Senior Citizen Programs, held a hearing on April 18, 2008, in New York City to examine the development, implementation, and progress of the aging services modernization efforts implemented by the New York City Department for the Aging (DFTA). DFTA had determined that a redesign of services provided to older adults would ensure a more coordinated and uniform system that recognizes the changing lifestyle, needs, and wants of older New Yorkers. The three pieces of this modernization are case management services, home-delivered meals, and senior center services.

The purpose of this hearing was to ensure that all due care and caution has been taken to ensure that these modernization efforts proposed by the New York City Department for the Aging will not result in a reduction in benefits for the seniors who rely on these services. The Committees heard from the New York State Office for the Aging, the City of New York Department for the Aging, the New York City Comptroller, the Queens Borough President's Office, senior centers, advocates, and seniors who utilize the services. While DFTA was confident of the success of their initiatives, several concerns were raised.

The first concern is isolation. While it is not the intent of the City Department for the Aging to increase the isolation of seniors, it has not been demonstrated adequately that this approach to modernization of senior services will not result in this outcome. The study done by KPMG LLP of the *Senior Options* program did not address isolation from the seniors' point of view, and it is unclear if it has been addressed at all in the senior congregate activities concept paper. Seniors who have to travel farther to reach a center may choose not to attend if the journey is a difficult one. For some, it may not be a choice because they simply cannot make the trip without increased transportation support. Another concern is the quality and type of services being offered by these modernized systems. The quality of the frozen meals is in dispute by many community residents, though the report done on the *Senior Options* program does indicate that medically frail home-bound seniors with dementia think the meals are nutritious. There does not appear to be any mechanism to ensure nutrition or any mechanism to ensure sensitivity to seniors' cultural and special dietary needs. There are similar questions regarding the senior center consolidation. The new services envisioned may appeal to younger seniors who are more willing and able to travel to the center, but what about older seniors? We need to ensure there will be activities that are attractive to them as well. An integral part to centralizing these centers must be to improve support for transportation to the facilities for seniors. The services offered are of no help to seniors if they cannot reach the center.

Services are an integral part of the Aging Committee's goal to help seniors remain active and vital in their communities for as long as possible. Helping to address the concerns raised by this hearing and finding ways to offer services seniors need in the most effective and efficient ways is an ongoing priority for the Aging Committee.

C. Hearing on Addressing the Comprehensive Geriatric Mental Health Act

The Aging Committee held a joint hearing with the Assembly Committee on Mental Health, Mental Retardation, and Developmental Disabilities regarding the Comprehensive Geriatric Mental Health Act. Currently, there are an estimated seven million seniors in the United States with mental or substance abuse disorders with only 20% receiving appropriate treatment.

In 2005, New York State passed the Geriatric Mental Health Act, landmark legislation that addresses the critical issue of geriatric mental health. In addition to the enacted legislation, New York State has appropriated \$2 million to date for geriatric mental health services demonstration programs. The purpose of this hearing was to determine the status of the requirements placed on state agencies to better address geriatric mental health issues, learn how the funds appropriated have been spent by grantees and what outcomes have been achieved, ascertain what other actions have been taken by state agencies to improve care for older adults with mental disorders, and gather public opinion on proposed legislation to broaden the role of the Interagency Geriatric Mental Health Council established by the Geriatric Mental Health Act.

The committees heard from the New York State Office for the Aging, New York State Office of Mental Health, New York State Office of Mental Retardation and Developmental Disabilities, New York State Office of Alcoholism and Substance Abuse Services, medical institutions, and advocates.

It is clear from the testimony heard at the hearing that the State can do more to promote services that deal with geriatric mental health issues as well as chemical dependency in older adults. The Aging Committee continues to be committed to working on ways to address these needs.

D. Hearing on Senior Scams

On December 1, 2008, the Committee, along with the Committee on Consumer Affairs and Protection, held a public hearing to examine how the State can best protect senior citizens from consumer scams. While all age groups are affected by fraud, several factors put seniors at particular risk of being targeted by scammers. Seniors are more likely to have large “nest egg” savings and are often more trusting than younger consumers. In addition, according to the Federal Bureau of Investigations, seniors are less likely to report a fraud, may be ashamed at having been scammed, or may be unaware that they have been scammed.

The Committee received testimony from the Consumer Protection Board, the Office for the Aging, the Queen’s County District Attorney’s Office, advocacy groups, and service providers. The Committee intends to explore the legislative proposals put forth at the hearing and will continue to work with the Committee on Consumer Affairs and Protection to address this issue.

IV. OUTLOOK AND GOALS FOR 2009

The 2009 Legislative Session promises to present many challenges to the Aging Committee. The Committee will pursue many of the issues it addressed during the 2008 Session, and new issues will emerge for consideration. As in the past, the Committee will continue to address issues brought to its attention by legislators, the executive branch, staff, and by the people of the State of New York.

APPENDIX A

CHAPTERS OF 2008

CHAPTER #	ASSEMBLY BILL #	ASSEMBLY SPONSOR	DESCRIPTION
82	10011	Dinowitz	Allows Naturally Occurring Retirement Communities (NORCs) and Neighborhood Naturally Occurring Retirement Communities (NNORCs) to provide services to people who live near, but not within, the area of the communities.
167	6198	Englebright	Adds the Director of the New York State Office for the Aging to the New York State Consumer Protection Board
184	9905-A	Dinowitz	Directs the Superintendent of the State Police to work with the State Office for the Aging and the Office of Children and Family Services to provide educational and other material related to elder abuse to state police officers and develop written procedures to follow when abuse is encountered by officers.
531	2604-B	Englebright	Allows seniors who have lived in two contiguous apartments as if they are one apartment for at least two years and who is eligible for SCRIE to receive the rent exemption for both units.
582	10121	Destito	Extends the additional twenty slots added to adult day health care programs in Oneida County until 2012.

APPENDIX B

VETOS of 2008

Veto #	ASSEMBLY BILL #	ASSEMBLY SPONSOR	DESCRIPTION
14	9846	Dinowitz	Would rename and broaden the Geriatric Service Demonstration Program to include older adults with mental health disabilities and chemical dependence.
54	31-A	Clark	Would require a state-wide survey of the safety of senior pedestrians and a feasibility study of methods to enhance safety.
56	5740-A	Englebright	Would establish a Fall and Injury Prevention Coordinating Council.
78	10436-C	Kavanagh	Would promote and enable senior volunteerism by establishment of a database of seniors desiring to volunteer and training programs for volunteers and organizations.
88	5566-A	Englebright	Would establish a Mature Worker Employment Training Program.
99	10474	Dinowitz	Would establish a Senior Housing Task Force.
102	11355	Dinowitz	Would continue the Intergenerational Day Care Program.
139	1170	Gunther	Would establish a New York Certified Retirement Community Program.
146	9319-A	Gunther	Would increase number of adult day health slots in Orange County by 50.
148	10573-A	Magee	Would increase number of adult day health slots in Otsego County by 12.
150	11052	Lifton	Would increase number of adult day health slots in Cortland County by 16.
151	11578	Rules (Diaz, R.)	Would increase number of adult day health slots in Bronx County by 24

APPENDIX C

BILLS PASSED ASSEMBLY

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A. 267 (Wright)	N/A	Passed Assembly	Would reduce the age of eligibility for real property tax exemption from 65 to 62 years of age.
A. 1249 (Bing)	S. 1326 (Maltese)	Passed Assembly	Expands income definition for the SCRIE program.
A. 1452-A (Englebright)	N/A	Passed Assembly	Clarifies that Assisted Living Residences are Long Term Care Facilities for certain purposes.
a. 4146-A (Englebright)	N/A	Passed Assembly	Locator Technology Advisory Council.
A. 4989 - A (Englebright)	N/A	Passed Assembly	Model zoning and planning guidelines. (This was enacted in the 2007-2008 Budget).
A. 5564 (Englebright)	S. 3059 – A (Golden)	Passed Assembly	Intergenerational Educational and Mentoring Service Program.
A. 6202 (Englebright)	S. 3730 (Golden)	Passed Assembly	Adds the Director of SOFA to the Emergency Services Council.
A. 6278 –A (Benjamin)	A. 6854 (Golden)	Passed Assembly	Creates a Drug Guide for seniors.
A. 6519-A (Englebright)	S. 3127-B (DeFrancisco)	Passed Assembly	Financial Exploitation Prevention Outreach, Education and Training Program.
A. 7069-A (Brennan)	S. 8013 (Morahan)	Passed Assembly	Fee schedule for the use, maintenance and repair of air conditioners used in adult homes.
A. 7244 (Bing)	S. 1681 (Golden)	Passed Assembly	Includes persons with disabilities as eligible for SCRIE.
A. 7923 – A (Brennan)	S. 511 – A (Maziarz)	Passed Assembly	Ensures continues EPIC eligibility for seniors who may receive small increases in Social Security or pension benefits.

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A. 10013 (Dinowitz)	S. 8266 (Golden)	Passed Assembly	Provide support services to grandparents and other older adult relative caregivers who are providing primary care for a child
A. 10045 (Dinowitz)	N/A	Passed Assembly	Include medical and prescription drug costs not reimbursed or paid by insurance in the calculation of income under the SCRIE program
A. 10465 – A (Lifton)	S. 7304 – A (Winner)	Passed Assembly	Long Term Care Worker Training Pilot Program
A. 10470 – A (Dinowitz)	S. 8153 – A (Smith)	Passed Assembly	Independent evaluation of services modernization initiatives in cities with a population greater than one million
A. 11245 – A (Kellner)	S. 7818 – A (Duane)	Passed Assembly	Assessment of service delivery to traditionally underserved populations

APPENDIX D

**2008 SUMMARY OF ACTION ON ALL BILLS REFERRED TO
THE ASSEMBLY COMMITTEE ON AGING**

<u>Final Disposition of Bills</u>	<u>Assembly Bills</u>	<u>Senate Bills</u>	<u>Total</u>
<u>Bills Reported With or Without Amendment</u>			
To Floor; Not Returning to Committee	1	0	1
To Floor; Recommitted and Died	0	0	0
To Ways and Means	30	0	30
To Codes	2	0	2
To Rules	4	0	4
To Judiciary	0	0	0
Total	33	0	33
<u>Bills Having Committee Reference Changed</u>	0	0	0
<u>Senate Bills Substituted or Recalled</u>			
Substituted	0	0	0
Recalled	0	0	0
Total	0	0	0
<u>Bills Defeated in Committee</u>			
Bills Never Reported, Held in Committee	8	0	8
Bills Never Reported, Died in Committee	85	6	91
Bills Having Enacting Clause Stricken	7	0	7
Motions to Discharge Lost	0	0	0
Total	100	6	100
Total Bills in Committee	133	6	139
Total Number of Committee Meetings Held	8		