

SNOHOMISH COUNTY COUNCIL ON AGING LEGISLATIVE PRIORITIES
(RECOMMENDATIONS)

2021-2022

Mission: The Snohomish County Council on Aging (COA) is a citizens' advisory group charged with advising the Division of Aging and Disability Services/Long Term Care and Aging (LTCA) unit within the Department of Human Services on matters related to the Area Plan on Aging.

The COA's major legislative priorities for 2021–2022:

I. PRESERVE WASHINGTON STATE'S LONG-TERM CARE SYSTEM AND SENIOR INDEPENDENCE

- A. Respond to the needs of older adults for increased and restructured home and community-based services due to COVID-19 and/or any other Major Disaster Declaration.
- B. Provide home and community-based options that help older adults and adults with disabilities remain as independent as possible in the community. In Snohomish County, the senior population, age 60 and over, comprises approximately 20% of the population.
- C. Maintain funding of the Senior Citizens Services Act (SCSA) to meet the needs of an elder population.
- D. Retain Medicaid as an entitlement program which allows for enrollment increases during economic downturns and do not convert to block grants. Approximately 7% of Snohomish County residents over the age of 65 are living at or below the federal poverty level.
- E. Support unpaid caregivers.

II. FUND ESSENTIAL SERVICES FOR THE EXPANDING OLDER POPULATION DURING COVID-19, THE RECOVERY AND BEYOND

Older Americans Act (OAA) funding provides services that keep seniors healthy, independent and active in their own homes and communities.

- A. Preserve funding for older adult services despite the fiscal impact of COVID-19.
- B. Support Older Americans Act (OAA) funding that keeps seniors healthy, independent and active in their own homes and communities.

- C. Maintain these state funding sources--SB 5736—home delivered meal expansion, Senior Citizens Services Act (SCSA), and Family Caregiver Support Program (FCSP).
- D. Maintain transportation resources available to older adults and people with disabilities through greater collaboration among transit, planning agencies, the Aging Network, and disability organizations.
- E. Expand options for safe, accessible, and affordable housing for older adults and people with disabilities.
- F. Support the Alzheimer’s State Plan and the development of Dementia Friendly communities. Alzheimer’s disease or other dementia is the third leading cause of death in Snohomish County.
- G. Maintain access to affordable food and nutrition counseling.
- H. Senior Centers—promote funding opportunities for Senior Centers.

III. EMPOWER AND PROTECT OLDER ADULTS AND INDIVIDUALS WITH DISABILITIES

- A. Address issues of diversity, equity and inclusion with marginalized older adults and individuals with disabilities.
- B. Protect vulnerable older adults from all forms of elder abuse.
- C. Preserve and expand the Long-Term Care Ombudsman program’s ability to advocate on behalf of older adults and people with disabilities who live in nursing homes, assisted living facilities, and adult family homes.
- D. Promote access to and maintain funding of affordable legal services.
- E. Provide geriatric mental health services that meet the unique needs of seniors.

IV. PROMOTE THE ECONOMIC SECURITY OF OLDER ADULTS

- A. Preserve Social Security.
- B. Maintain Medicare benefits.

I. PRESERVE WASHINGTON STATE'S LONG-TERM CARE SYSTEM AND SENIOR INDEPENDENCE

A. Respond to the needs of older adults for increased and restructured home and community-based services due to COVID-19.

1. Quickly expanding programs or developing new ones involves flexible emergency funding that can also be used for infrastructure, which LTCA fortunately received. Sustaining volume increases and new services will require additional funding.
2. In April, May, and June 2020, Homage Senior Services, the home-delivered meals provider for Snohomish County, served 5,100 more meals each month compared to the preceding three months. This increase required reconfiguring delivery routes, additional refrigerated vans, and more freezer space.
3. Using COVID-19 relief funds, Snohomish County LTCA created a Care Transitions program to prepare for the hospital surge. Older adults leaving the hospital received weekly telephone support and check ins to assist with the set up for telehealth, medication questions, and goal setting. The program, operated by Homage and Full Life Care, also reduced loneliness and connected clients to other community resources.

B. Provide community-based options that help older adults remain as independent as possible in the community in Snohomish county, the senior population, age 60 and over, comprises approximately 20% of the population .

1. Encourage seniors to remain independent and assist them in utilizing their talents, skills, and experiences to remain in their homes; thus, avoiding nursing facility placement.
2. Preserve mobile home communities.

C. Maintain funding of the Senior Citizens Services Act (SCSA).

1. In 1977 the Washington State Legislature passed the Senior Citizens Services Act for their long-term care.
2. SCSA funding helps seniors with mental illness find and maintain housing, deliver ethnic meals to seniors, and connect older adults and people with disabilities to community resources.
3. Although the 60+ population continues to grow, the per capita amount of SCSA funds has steadily decreased service provision since 1998 because the funding has remained static.

D. Retain Medicaid as an entitlement program which allows for enrollment increases during economic downturns and do not convert to block grants.

1. The 2018 American Community Survey reported that approximately 7% of Snohomish County residents aged 65+ were living below the poverty line.
2. Continue to means-test program applicants.
3. People with Medicaid must be able to plan on a sustainable level of benefit.
4. Provide access to comprehensive health care including primary, specialty, and acute care, prescription drugs, mental health, and substance abuse.
5. Maintain current functional eligibility requirements for Medicaid long term care services.

E. Support unpaid caregivers.

1. Provide unpaid caregivers with personal protective equipment. Working with businesses and individual donors, LTCA assembled packages of face masks, face shields, gloves and hand sanitizer for caregivers and care receivers.
2. Increase support to unpaid caregivers enabling them to provide quality and sustained levels of care for seniors. In 2018, the Washington State Governor's Office reported that 80% of the State's long-term care is provided by 820,000 caregivers who are unpaid.¹
3. Support unpaid caregivers to reduce the mental, physical and emotional stress and exhaustion from their efforts to keep seniors in their homes rather than placed in state-funded facilities. These efforts reduce state costs greatly.
4. Support includes, but is not limited to, the development of dementia friendly communities.

II. FUND ESSENTIAL SERVICES FOR THE EXPANDING OLDER POPULATION DURING COVID 19, THE RECOVERY AND BEYOND

Every day almost 10,000 Baby Boomers turn 65.

By 2025, it is projected that 25% of Snohomish County's population will be age 60+ or nearly a quarter of a million people.

- A. Preserve funding for older adult services despite the fiscal impact of COVID-19.

There are projected budget shortfalls due to the Major Disaster Declaration.

1. Maintain funding for long term services and supports to include Medicaid and state funded programming. Services and supports and state funded programming save the state dollars by maintaining the older adult or individual with the disability at home. The alternative is more expensive care in long term facilities.
 2. Maintain current eligibility requirements because an increase from needing assistance with three activities of daily living (ADL) to five ADLs has the potential of costly consequences of acute care facility admission and long-term care placement.
- B. Support Older Americans Act (OAA) funding that keeps seniors healthy, independent and active in their own homes and communities.
 1. The Older Americans Act (OAA) of 1965 created a network of federal, state, and local agencies and organizations that provide services to older persons living in their homes and communities. Local Area Agencies on Aging like Snohomish County Long Term Care & Aging (LTCA) serve a defined geographic area and work with a citizens' advisory board such as the Snohomish County Council on Aging to plan and contract with providers in order to create a local system of services for older adults.
 2. The OAA provides older adults with much-needed services that include congregate and home-delivered meals, case management, legal services, transportation and support for unpaid caregivers. For years, OAA funding has not kept pace with inflation or the growing population of individuals eligible for services yet demand by at-risk older adults in need of supportive services has risen and will continue to rise with the growth of the aging population.
 - C. Maintain these state funding sources--SB 5736—home delivered meal expansion, Senior Citizens Services Act (SCSA), and Family Caregiver Support Program (FCSP).
 1. Senate Bill 5736 provides funds to expand home-delivered meals programs in area agencies on aging across the state. In Snohomish County, the funds have helped expand the program and deliver an additional 17,000 meals to Snohomish County residents qualifying for this service.
 2. The Senior Citizens Services Act (SCSA) provides funding for community-based long-term care services so that low-income older adults truly have a

choice between staying at home with paid services or entering a long-term care facility. In Snohomish County, SCSA funding supports case management, housing services, transportation, and information and assistance.

3. The Family Caregiver Support Program (FCSP) helps family and friends serving as unpaid caregivers. Caregivers receive education and support, learn caregiving techniques, and discover how to reduce stress and improve their self-care. Services include respite care, support groups, social events, advocacy, and limited financial assistance with the unexpected costs of caregiving.
- D. Sustain transportation resources available to older adults and people with disabilities through greater collaboration among transit, planning agencies, the Aging Network, and disability organizations.
1. Lack of transportation options contributes to more than 50% of non-drivers over age 65 not leaving their homes most days.
 2. ¹³²
 3. Advocate for paratransit services that are easily utilized, comprehensive, reliable, and with a simplified application process for people who may be eligible for the program.
 4. Maintain and expand travel training to older adults and people with disabilities who want to learn how to use the public transportation system.
 5. Identify gaps in fixed route and on-demand transit services to destinations of social services, essential shopping, health care and community services – and develop innovative mobility projects among coalitions and partnerships to close the gaps.
- E. Expand options for safe, accessible, and affordable housing for older adults and people with disabilities.
1. Develop housing options for older adults who cannot get beds in the County's overcrowded shelters.
 2. Improve community-based living options such as adult family homes.
 3. Protect and preserve existing subsidized senior housing.
 4. Adopt policies and create incentives to encourage sustainable, universal design features in new construction and remodeling projects.

F. Support the Alzheimer’s State Plan and the development of Dementia Friendly communities. Alzheimer’s disease or other dementia is the third leading cause of death in Snohomish County.

1. By 2050, the number of people age 65 and older with Alzheimer’s dementia is projected to reach 13.8 million.³ The Washington State Department of Social and Health Services estimates that 270,000 State residents aged 65+ will have Alzheimer’s Dementia in 2040.⁴
2. Between 2000 and 2018, the death rate from Alzheimer’s increased 32% for people age 65 to 74 but increased 53% for people age 75 to 84 and 84% for people age 85 and older.⁵

G. Maintain access to affordable food and nutrition counseling.

1. Older adults may experience nutrition risks or malnutrition as their bodies change with age. Physiological processes slow, appetites may decrease and physical problems can arise. In addition, older adults’ chronic conditions and use of multiple medications may increase, which may affect nutrition status.
2. Maintain flexible funding for Home Delivered Meals. Home Delivered Meals deliver a week of nutritious meals to older adults in Snohomish County.
3. Home Delivered Meals combated food insufficiency during the Major Disaster Declaration. Demand for services increased from approximately 50 new older adults monthly to over 150—a 216% increase in referrals.
4. Home Delivered Meals, in the quarter before the pandemic, saw a 9% increase in service provision.
5. Maintain flexible funding for Congregate Meals Program.
 - a. Congregate meals provide access to nutritious meals, socialization and assistance with navigating available services and supports in Snohomish County.
 - b. During the Major Disaster Declaration, the congregate meal program provided drive through meals, hot lunches and the option to pick up a week of frozen home delivered meals.
 - c. Flexible funding will allow Congregate Meal sites to put in place necessary infrastructure for indoor dining and/or off-site, meal service provision.

H. Promote Senior Center funding opportunities.

1. Maintain COVID-19 adaptability.
 - a. Senior Centers adapted congregate meal sites to take out meal site.
 - b. Change transportation services from transporting older adults to delivering groceries and prescriptions.
2. Access to services and supports. Senior Centers began calling their members, connecting them with volunteers and benefit programs over the phone.
3. Promoting healthy living by directly impacting social connection: a social determinate of health.

III. EMPOWER AND PROTECT OLDER ADULTS AND INDIVIDUALS WITH DISABILITIES

Many older people continue to play important roles in their communities as employees, volunteers, elected and appointed officials, citizens, and family members. Older adults who are socially isolated and not connected to their communities are particularly vulnerable—a dynamic that has increased dramatically during the COVID 19 pandemic. Programs that empower and connect older adults to services, other people and their communities are vital.

- A. Protect vulnerable older adults and individuals with disabilities from all forms of elder abuse.
 1. Fund Adult Protective Services, Long Term Care Ombudsman, and other programs that protect older individuals from harm, whether physical, sexual, emotional abuse, neglect, abandonment, financial exploitation or self-neglect.
 2. Older individuals face a higher risk of becoming a victim of elder abuse if they have dementia; are socially isolated; are in poor physical health; or if the perpetrator and/or the victim has mental health or substance abuse issues.
 3. The Joint Center for Housing Studies projected that people living alone aged 75+ will double from 6.9 million in 2015 to 13.4 million in 2035.⁶
 4. Currently, it is estimated that 39.6% of Snohomish County residents aged 60+ are living alone.⁷

- B. Address issues of diversity, social justice and inclusion as they affect older adults of color and other marginalized communities within the area plan on aging.
1. 13% of adults age 60 and older in Snohomish County are members of racial and ethnic minorities.⁷
 2. The Older Americans Act requires outreach efforts to certain groups of older adults such as rural residents, individuals with the greatest economic and social needs with attention to low-income minority individuals and elders with limited or no English.
 3. Explore opportunities for Snohomish County LTCA staff and Council on Aging members to attend trainings on diversity, social justice and inclusion as they affect older adults of color and other marginalized communities.
 4. Review data for the largest service delivery programs by race and ethnicity. Identify if race and ethnicity of clients match the county's demographic profile of residents 60 years and older. Develop recommendations to improve these outcomes as needed.
- C. Preserve and expand the Long-Term Care Ombudsman Program's (LTCOP) ability to continue critical advocacy on behalf of older adults and adults with disabilities who live in Long-Term Care Facilities including Skilled Nursing Facility (SNF), Assisted Living Facilities (ALF) and Adult Family Homes (AFH).
1. The LTCOP is a unique state and federally mandated program, the only one of its type that gives residents of long-term care facilities access to certified volunteers and staff. They are the sole source of independent advocacy for the rights and care of these vulnerable residents.
 2. The current COVID-19 crisis has magnified the essential role of the Snohomish County LTCOP advocacy. Through proactive program outreach and community-initiated intake calls, care failures are being identified and work done to rectify deficiencies.
 3. This year Snohomish County LTCOP has experienced a 31% increase in open cases, 79% increase in complaint categories, including a 60% increase in Abuse, Neglect, and Exploitation, 12% increase in eviction/discharges, and substantial increases in all other categories. With 632 facilities and nearly 8,000 residents, the increased need for advocacy has created a challenge for an already critically stressed service.
 4. To enable greater outreach and to ensure the LTCOP can meet the needs of a rapidly increasing population, additional funding for more adequate staffing, the expansion of the volunteer base, and establishing higher

visibility and public familiarity is essential to the continuation of the Snohomish County LTCOP.

D. Promote access to and maintain funding of affordable legal services.

1. The Older Americans Act (OAA) provided funding for legal assistance to over 150 low income older adults in Snohomish County per month both with OAA dollars and pro bono work. The need for assistance is greater than dollars available.
2. Legal Services has seen an increase in legal services related to domestic violence and unfair eviction practices during the COVID 19 pandemic. Post the Major Disaster Declaration there is a projection that an increase of work will emerge for representation for evictions/foreclosures and hearings related to termination/reductions in services.
3. Legal services provided under the Older Americans Act combats injustice in all its forms to older adults and individuals with disabilities.
4. Maintenance of funding is needed to meet the needs of low-income older adults and individuals with disabilities to address legal needs and combat injustice and to avoid wait list in the upcoming biennium.

E. Provide geriatric mental health services that meet the unique needs of seniors.

1. An estimated 20% of people age 55 years or older experience some type of mental health concern with the most common being anxiety, severe cognitive impairment and mood disorders such as depression or bipolar disorder.⁸
2. By 2050, the prevalence of depressive disorders in older adults is expected to more than double.⁹
3. Maintain Snohomish County programs already serving seniors such as Geriatric Depression Screening, Senior Peer Support, and Hope Options.
4. Early identification and treatment of mental health problems helps individuals maintain independence and avoid severe illnesses which require expensive institutionalized care.
5. Maintain long-term service and support programs that support diversion and community living. Projected programs cut due to the Major Disaster Declaration will cost additional dollars to the state.

IV. PROMOTE THE ECONOMIC SECURITY OF OLDER ADULTS

From 2008-2018, the number of 60+ receiving Social Security in Washington State increased by 50%. In Snohomish County, 71.5% of 60+ residents received Social Security.¹⁰

Older minorities experience higher rates of poverty than whites and a higher rate of older women compared to older men live in poverty. According to research conducted through the Washington State Department of Social and Health Services Research and Data Analysis Division, an estimated 5.7% (9,224 persons) of Snohomish County residents ages 60 and older in 2018 are at or below 100% of the poverty level. For minorities in the same age group, it was projected to be 6.1% (1,404 persons) for 2018. Using the same projection model, they estimate 5.6% (9,972 persons) of Snohomish County residents ages 60 and older will be at or below 100% of the poverty level in 2020, and 5.4% in 2030. For minorities in the same age group, it is estimated that 6.0% (1,591 persons) will be at or below 100% of the poverty level in 2020, and 6.6% in 2030. Approximately 6.6% of elderly whites were poor while 18.4% of elderly African-Americans, 11.8% of older Asians, and 17.5% of elderly Hispanics lived in poverty. In 2015, 10.3% of older women lived in poverty compared to 7% of older men.

A. Preserve Social Security.

1. More than half of Washington residents age 65 and older rely on Social Security for 58% or more of their income. For 30% of older Washingtonian residents, Social Security is their only source of income.¹¹
2. Ensure Social Security's long-term solvency. The American Community Survey estimates that 71.6% of Snohomish County residents aged 60+ receive Social Security income.¹² In 2018, the Social Security Administration reported that 3,649 Snohomish County residents aged 65+ received Long Term Care Services under Medicaid.¹³
3. "Do No Harm" to the vulnerable groups that rely on Social Security.
4. Oppose privatization and the establishment of private accounts.

B. Maintain Medicare benefits.

1. Ensure the long-term financial stability of the Medicare program.
2. Standardize benefits and cost-sharing across Medicare Advantage plans and Part D prescription drug plans to reduce confusion and make it easier for people with Medicare to understand costs and benefits.

3. Continue efforts to revise Medicare reimbursement policy including reductions in geographical inequities.
4. Encourage Medicare to continue covering telehealth visits as it did during COVID-19.

C. Advocate for Healthcare Benefits during COVID 19 Recovery.

- Nationally, COVID-19 infection rates, hospitalizations and deaths have had disparate impacts by age and race/ethnicity.
- From the pandemic's beginning, older adults (individuals 60+) and people with certain chronic conditions have faced a higher risk of hospitalization and death if they contract COVID-19. From January through October 5, 2020 in Snohomish County, 15% of COVID infections affected people 60-79 years of age and 5% of infections were in people 80 and older. Adults age 20-39 years represented 37% of infections.¹⁴
By late October 2020, 3 people had died in the 20-39 age group while 87 deaths occurred among older adults age 60-79 years and 110 deaths among people 80 and older.
- In Snohomish County, data on race and ethnicity is available for only 54% of the COVID cases reported between January 19 through October 5, 2020.¹⁵ Because the data is limited, some racial or ethnic groups may be underrepresented. This lack of data makes it difficult to compare across racial and ethnic groups.
- The Snohomish County Health District's data clearly shows that African Americans, American Indians/Alaskan Natives, Asians, Native Hawaiians/Pacific Islanders, and Hispanics (who can be of any race) have a significantly higher risk of COVID-19 infection than non-Hispanic whites. The Native Hawaiian/Pacific Islander population has a relative risk 11 times greater than non-Hispanic whites. Hispanics of all races have the second highest rate of infection, followed by African Americans, then American Indians/Alaska Natives. Asians have a lower relative risk than other non-white groups and only slightly higher than non-Hispanic whites.
- Native Hawaiian/Pacific Islanders have also been 7 times more likely to be hospitalized than non-Hispanic whites. All-race Hispanics and American Indians/Alaska Natives have experienced higher rates of hospitalization compared to whites.
- Comparing COVID-19 related deaths in Snohomish County is difficult due to relatively small numbers. Not all the difference are statistically significant and the ones that are often have wide confidence intervals

- Despite safety precautions, COVID-19 will probably continue to impact negatively the lives of older adults, at least until a vaccine can be developed and distributed. Clearly elders of color and their communities face higher rates of infection, hospitalization and death due to this pandemic. This reality underscores the need for a strong, effective, affordable, efficient, accessible health care system for our county and especially its older adults.

End Notes:

¹Washington State Governor’s Office (2017, July 20). Washington a model for seniors' long-term care. Retrieved from <https://medium.com/wagovernor/washington-a-model-for-seniors-long-term-health-care-fbcaa0311431>.

²AARP. (2014). Baby Boomer Facts on 50 Livable Communities and Aging in Place. Retrieved from <https://www.aarp.org/livable-communities/info-2014/livable-communities-facts-and-figures.html>

³U.S. Census Bureau. 2014 National Population Projections: Downloadable Files. Available at: <https://www.census.gov/data/datasets/2014/demo/popproj/2014-popproj.html>. Accessed September 15, 2020.

⁴Washington State Department of Social and Health Services, Washington State Plan to Address Alzheimer’s Disease and Other Dementias, January 2016. <https://www.dshs.wa.gov/sites/default/files/SESA/legislative/documents/2016%20WA%20Alzheimer%27s%20State%20Plan%20-%20Full%20Report%20Final.pdf>

⁵U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics. CDC WONDER online database: About Underlying Cause of Death, 1999-2018. Available at: <https://wonder.cdc.gov/ucd-icd10.html>. Accessed September 15, 2020.

⁶Joint Center for Housing Studies of Harvard University (2014). Housing America’s Older Adults. Retrieved from <https://www.aarp.org/content/dam/aarp/livable-communities/documents-2014/Harvard-Housing-Americas-Older-Adults-2014.pdf>

⁷U.S. Census Bureau (2016). 2016 American Community Survey 5-Year Estimates. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S0102&prodType=table 2017 American Community Survey table S0102 Population 60 years and over: <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

⁸Centers for Disease Control and Prevention and National Association of Chronic Disease Directors. The State of Mental Health and Aging in America Issue Brief 1: What Do the Data Tell Us? Atlanta, GA: National Association of Chronic Disease Directors: 2008.

⁹Jeste, D. V., Peschin, S., Buckwalter, K., Blazer, D. G., Mcguire, M. H., Moutier, C., Reynolds, C. F. (2018). Promoting Wellness in Older Adults with Mental Illnesses and Substance Use Disorders: Call to Action to All Stakeholders. The American Journal of Geriatric Psychiatry, 26(6), 617-630. Retrieved from [https://www.ajgonline.org/article/S1064-7481\(18\)30271-9/pdf](https://www.ajgonline.org/article/S1064-7481(18)30271-9/pdf)

¹⁰Statistics taken from *A Profile of Older Americans: 2019*, Administration on Aging, U.S. Department of Health and Human Services. Retrieved from https://www.giaging.org/documents/A_Profile_of_Older_Americans_2019.pdf

¹¹U.S. Census Bureau (2016). 2016 American Community Survey 5-Year Estimates. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S0103&prodType=table

¹²Social Security: 2014 Washington Quick Facts, AARP, 2014.

¹³Social Security Administration. (2018, December). Retrieved from https://www.ssa.gov/policy/docs/statcomps/ssi_sc/2018/wa.html on 09/17/2020.

¹⁴Snohomish County health District (2020). COVID-19 in Snohomish County. Confirmed Cases Hospitalizations, and Deaths by Sex and Age Group. Retrieved from <https://www.snohd.org/524/COVID-19-Data-Dashboard> on 10/27/2020.

¹⁵Snohomish County Health District (2020). COVID-19 Race/Ethnicity Data Analysis January-October 5, 2020.