

## **PRIORITIZATION OF DISCRETIONARY FUNDS**

(Guidelines for Funding Decisions)

Snohomish County Long Term Care & Aging (LTCA) administers federal, state and local funds for services provided to older people and adults with disabilities. Most of the funding the *Area Agency on Aging (AAA)* receives is designated for specific services such as Community First Choice (CFC), Medicaid Personal Care (MPC), support to unpaid caregivers, and United States Department of Agriculture (USDA) funds for meal programs. The AAA also receives “discretionary” funding from the federal Older Americans Act (OAA) and the State Senior Citizens Services Act (SCSA). These funds are more flexible and can be used to support services to adults age 60 and over, primarily based on locally defined needs.

LTCA uses an established process to make decisions when changes occur in the amount of funding available. Following the guidelines listed below, the Council on Aging–(COA) reviews information provided by LTCA and makes recommendations. Service providers, as well as the general public, have an opportunity to provide input, review, and comment on the funding recommendations. All meetings of the COA are open to the public.

### **Priority in Funding Services**

- In making decisions to increase or decrease funding for services, the AAA’s first priority is to create and maintain a comprehensive and coordinated network of services for older persons and adults with disabilities in Snohomish County.
- An emphasis will be placed on maintaining and enhancing services that are targeted for frail and vulnerable older persons. A person is considered vulnerable if he/she meets the following criteria:
  - Is unable to perform one or more activities of daily living without assistance due to physical, cognitive, emotional, psychological or social impairment. A higher priority will be given to those individuals who lack an informal support system; i.e. no family, friends, neighbors or others who are both willing and able to perform the service(s) needed.
  - Has behavioral or mental health problems that could result in premature institutionalization, or is unable to provide for his/her own health and safety primarily due to cognitive, behavioral, psychological/emotional conditions inhibiting decision-making and threatening their ability to remain independent. A higher priority will be given to those individuals who lack an informal support system i.e. has no family, friends, neighbors or others who are both willing and able to perform the service(s) needed.

## **Factors in Funding Decisions**

Although flexibility exists in the use of discretionary funds, the federal Older Americans Act mandates the following services be funded:

- Congregate Nutrition;
- Home Delivered Meals;
- In-Home Services;
- Legal Services; and
- Access Services (outreach, information & assistance, case management, and/or transportation services).

In addition, Information and Assistance is considered central to a comprehensive and coordinated network of services for older persons. The Older Americans Act of 1965 called for AAAs to “provide for the establishment and maintenance of information and assistance services in sufficient numbers to assure that all older individuals have reasonably convenient access” to services.

## **Approach to Developing Funding Priorities**

When prioritizing services for additional funding or when reductions in funding must be made, the following strategic questions will be considered:

- Does the service reach the priority population?

(In addition to the vulnerable elderly described above, the priority population includes those with greatest economic or social need, low-income racial and ethnic groups and other under-represented groups, those with severe disabilities, rural elderly, limited English-speaking, and those with Alzheimer’s disease or related disorders.)

- Does the service enhance a person’s ability to live independently?
- Are there other primary sources of funding for the service?
- Should current and historical levels of funding for the service continue?
- What amount of funding is necessary to maintain adequate operating levels of the service?

## **Decisions to Reduce or Eliminate Services Due to Funding Shortfalls**

Since many factors change over time, priorities may not be the same year after year. For example, if a program has matching funds or other funding sources that are reduced, it may no longer be viable, even with funding from the AAA.

The Council on Aging (COA) reviews the programs over the year so that members are well-versed in what the programs provide and what populations they serve. This in-depth knowledge, along with discussion and community input, guide staff in determining what programs are determined to have the highest priority status.

The list below prioritizes the discretionary programs, with Level One being highest priority and were restructured for the 2020-2023 Area Plan on Aging.

Level One	Level Two	Level Three
Stabilized Housing  Case Management	Geriatric Depression Screening  Senior Peer Counseling  Volunteer Transportation  Client Specific Funds	Dental Services  Ethnic Meal Transportation  Adult Day Health