



AREA AGENCIES ON AGING ASSOCIATION OF MICHIGAN  
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## **FACT SHEET ON AREA AGENCIES ON AGING (AAAs)**

### **What are Area Agencies on Aging?**

Area Agencies on Aging are a nationwide network of entities designated by federal statute to plan and develop services to promote health and independence. They serve as a one-stop shop with expertise on aging and long-term care. AAAs were created 40 years ago by the federal Older Americans Act (OAA) with the mission of creating a system of home and community-based services to maximize the independence and dignity of older adults and provide alternatives to nursing homes. The state entity responsible for overseeing OAA services and designating AAAs is the Michigan Aging and Adult Services Agency.

### **How many AAAs serve Michigan?**

There are 16 AAAs that serve all of Michigan's 83 counties. Most are private nonprofit organizations and cover multi-county regions. AAAs are run by boards of directors; most AAA board members are appointed by county boards of commissioners and other local officials. AAAs also have advisory councils with older adult leaders and service providers.

### **What do AAAs do?**

AAAs promote healthy aging, dignity and independence in many ways. AAAs assist older adults, younger people with disabilities, and caregivers looking for information and resources. They are experts on all aspects of aging. They provide specialized counseling on Medicare, Medicaid and health insurance through the Medicare Medicaid Assistance Program (MMAP). AAAs provide supports coordination, a service that assists frail elders remain independent by 1) performing a thorough in-home assessment of the elder's health condition and living situation, 2) developing a person-centered care plan to assist the elder in maintaining a quality life, 3) helping to coordinate the services and supports provided by physicians, specialists, hospitals, other health care providers and the aging network, 4) determining if the elder qualifies for any government programs, and 5) educating the elder about the services and programs available, as well as healthy behaviors. AAAs use an approach that is "person-centered," meaning participants are in control and make the decisions about their care. AAAs also give participants the option to self-direct their services and hire their own helpers.

AAAs fund a wide variety of home and community-based services using a network of 1200 service providers. AAAs screen providers using service standards to find those that deliver quality services at a reasonable price. AAAs perform ongoing assessments of providers to ensure that performance and quality are maximized.

AAAs provide evidence-based programs to increase health and empower individuals to better manage their chronic conditions. Utilizing proven programs recognized by the U.S. Centers for Disease Control and Prevention and the U.S. Administration for Community Living, AAAs help older adults and people with disabilities prevent falls, manage chronic conditions including hypertension, heart disease, diabetes, pain, etc., eat healthy, cope with caregiving responsibilities and do advance care planning.

AAAs help people in nursing homes transition back to the community, along with other waiver

agencies and Centers for Independent Living. This program is called the Nursing Facility Transition Initiative (NFTI). AAAs find people living in nursing homes who have lived there for many months or even years but want to return home and face significant barriers. In most cases, people need in-home services to live safely at home. Some people have lost their homes and belongings and need to find another place to live. Ten to fifteen percent need no Medicaid services whatsoever.

AAAs help people in hospitals transition back to the community to maximize their recovery and prevent unnecessary rehospitalizations. A number of AAAs are partnering with hospitals, health plans and other organizations to provide care transition services.

AAAs help people transition to licensed residential settings including both Adult Foster Care and Homes for the Aged. Transitions can occur from a home, nursing home or hospital setting.

AAAs create new services to fill gaps through public/private partnerships. Creating a service means raising money, finding one or more companies/agencies to provide the service, coordinating the new service with existing programs, and informing seniors and the community about the availability of the new service. AAAs raise additional resources from federal, state and local governments, nonprofit agencies, corporations, foundations, direct mail solicitations, special events and private donors.

AAAs advocate on behalf of older adults and caregivers. AAAs advocate for new programs, more funds for existing programs, and public policies that impact health and well-being. The federal Older Americans Act requires AAAs to advocate for older adults. AAAs have been successful in advocating for federal, state and local resources, and blend all three into a cost-effective service system.

### **Are there advantages to having AAAs separate from service providers?**

Yes. Because AAAs generally do not provide direct services, they will not steer participants to their own services, allowing individuals to pick the providers they prefer. AAAs provide conflict-free supports coordination and person-centered planning. AAAs evaluate providers to insure they are legitimate, financially sound and provide quality services. Because they are conflict-free, AAAs are well-positioned to take on special roles that require an agency with no bias. Those special roles include supports coordination for individuals utilizing Medicaid, Medicare, self-directed care and private pay. Resulting designation as a MI Choice Waiver Agent and Aging & Disability Resource Center is common.

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### **What services are available?**

Following is a list of most of the services available. To find out if a particular service is available in your area, go to [www.michigan.gov/miseniors](http://www.michigan.gov/miseniors).

- Adult Day Care
- Caregiver Training & Support Groups
- Case Coordination and Support
- Chores Services, such as heavy cleaning, minor repairs, lawn care and snow removal
- Congregate Meals at senior centers and other locations
- Counseling

- Elder Abuse prevention
- Employment Assistance
- Evidence-Based Health Promotion & Disease Prevention Programs
  - Personal Action Towards Health (PATH) – chronic disease self-management
  - PATH – Diabetes
  - PATH – Chronic Pain
  - A Matter of Balance – falls prevention
  - Healthy Eating
  - Respecting Choices – advance care planning
  - Savvy Caregivers – assists caregivers of people with dementia
  - T.C.A.R.E. – caregiver assessment and support program
- Grandparents Raising Grandchildren & Kinship Care
- Help with Medicare, Medicaid and other health insurance (MMAP)
- Home Delivered Meals (Meals-On-Wheels)
- Home Injury Control
- Homemaker
- Home Repair & Environment Modifications
- Hospital Care Transitions
- Housing Assistance
- Information and Assistance
- Legal Assistance
- Long Term Care Options Counseling
- MI Choice Medicaid Waiver
- Nursing Facility Transition services
- Ombudsman Services to resolve problems for people living in long term care facilities
- Personal Care, including help with bathing, dressing, eating, etc.
- Respite Care - relief for caregivers, in-home and out-of-home
- Senior Centers
- Supports Coordination
- Transitions to Licensed Residential Settings – Adult Foster Care, Home for the Aging
- Transportation

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**Do services provided by the aging network have a significant and meaningful impact?**

Yes. Despite the steady growth in Michigan’s older population, particularly those 85+, home-based services have contributed to a steady decline in Medicaid nursing home utilization in our state. Over a quarter of a million people are served each year with information and services provided by the aging network. On surveys, AAAs’ customers rank services and performance in the 90<sup>th</sup> percentile. In the Nursing Facility Transition Program, AAAs and other groups transition over 1600 individuals from nursing homes back to the community. These are just a few examples.

**Are services provided by the aging network cost-effective?**

Yes. The average daily cost of the MI Choice Medicaid Waiver is one-third the average daily

cost of a nursing home. OSA services, also federal-state funded, are more flexible and keep seniors living at home, out of nursing homes, and off the Medicaid program. The average cost to keep seniors at home with meals-on-wheels and in-home services is \$3 a day. Services like meals-on-wheels, supports coordination, transportation, respite care, etc. are helping family caregivers so they can provide care longer. The majority of long-term care services are provided at no cost by families and friends, with an estimated annual value of \$15.5 billion in Michigan.

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