Aging and Disability Resource Centers in Wisconsin

A Status Report
AGING AND DISABILITY RESOURCE CENTER

MISSION STATEMENT

To empower and support seniors, people with disabilities, and their families to ask for help, find a way to live with dignity and security, and achieve maximum independence and quality of life.
# Table of Contents

*Aging and Disability Resource Centers in Wisconsin
Status Report*

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADRC MISSION STATEMENT</td>
<td>i</td>
</tr>
<tr>
<td>WHAT IS AN ADRC?</td>
<td>1</td>
</tr>
<tr>
<td>An ADRC is a Bridge</td>
<td>1</td>
</tr>
<tr>
<td>Anyone Can Use an ADRC</td>
<td>2</td>
</tr>
<tr>
<td>Customer Convenience</td>
<td>2</td>
</tr>
<tr>
<td>A Public Service</td>
<td>2</td>
</tr>
<tr>
<td>LOCATIONS</td>
<td>3</td>
</tr>
<tr>
<td>Availability</td>
<td>3</td>
</tr>
<tr>
<td>ADRC Contact Information Web-link</td>
<td>3</td>
</tr>
<tr>
<td>Locations by Counties Served</td>
<td>3</td>
</tr>
<tr>
<td>AGING AND DISABILITY RESOURCES: A WISCONSIN ORIGINAL</td>
<td>4</td>
</tr>
<tr>
<td>WISCONSIN ADRC TIMELINE</td>
<td>5</td>
</tr>
<tr>
<td>ADRC SERVICES</td>
<td>7</td>
</tr>
<tr>
<td>Information and Assistance</td>
<td>7</td>
</tr>
<tr>
<td>Long-Term Care Options Counseling</td>
<td>8</td>
</tr>
<tr>
<td>Access to Publicly Funded Long-Term Care</td>
<td>8</td>
</tr>
<tr>
<td>Benefits Counseling</td>
<td>8</td>
</tr>
<tr>
<td>Health and Wellness/Prevention and Early Intervention</td>
<td>9</td>
</tr>
<tr>
<td>Short-Term Care Coordination</td>
<td>9</td>
</tr>
<tr>
<td>Transitional Services for Students and Youth</td>
<td>9</td>
</tr>
<tr>
<td>Access to Emergency Response</td>
<td>9</td>
</tr>
<tr>
<td>Number of ADRC Services Reported in 2009</td>
<td>10</td>
</tr>
<tr>
<td>Number of People Served by Benefit Specialists, 2009</td>
<td>10</td>
</tr>
<tr>
<td>ADRC CLIENT POPULATIONS</td>
<td>11</td>
</tr>
<tr>
<td>Wisconsin’s Older and Disabled Populations</td>
<td>11</td>
</tr>
<tr>
<td>Wisconsin’s ADRC Client Populations</td>
<td>12</td>
</tr>
</tbody>
</table>
CUSTOMER SATISFACTION ........................................ 13
FUNDING FOR ADRCs ........................................... 15
Funding for ADRCs .............................................. 15
2009-12 Grant Awards ........................................... 15
ADRC Funding for Calendar Year 2011 .......................... 16
FINANCIAL IMPACT OF ADRCs .............................. 18
Benefit Specialist Program ...................................... 18
Prevention Programs ............................................ 18
Nursing Home Diversion and Relocations ....................... 18
ADRC SUCCESS STORIES .................................... 20
ADRC Customer Success Stories ............................... 20
2009 Recognition: A Wisconsin ‘Success Story’ ............... 21

LIST OF FIGURES AND TABLES

FIGURES
Figure 1: Top 8 Reasons People Call ADRCs ...................... 7
Figure 2: Number of ADRC Activities, 2009 ....................... 10
Figure 3: Map: Percentage Age 65+ in 2010 ..................... 11
Figure 4: Map: Percentage Age 65+ in 2035 ..................... 11
Figure 5: Age of People Who Use ADRCs, by Percentage Served 12
Figure 6: Disability Characteristics, of ADRC Customers that Report a Disability 12
Figure 7: Customers Willingness to Recommend the ADRC .... 13
Figure 8: Usefulness of Help Received .......................... 14
Figure 9: Overall Experience .................................. 14
Figure 10: Ability to Resolve Customer Situation ............... 14
Figure 11: Helpfulness ....................................... 14
Figure 12: ADRC Revenues by Source ......................... 15
Figure 13: ADRC Expenditures, by Category of Service Provided 15

TABLES
Table 1: ADRCs in Wisconsin, by Counties Served ............ 3
Table 2: Number of People Served by Benefit Specialists, 2009 10
Table 3: ADRC Funding for Calendar Year 2011 .................. 16
AN ADRC IS A BRIDGE…

A LINK to community resources for people who are in search of information or help, the ADRC is a bridge that will allow passage across obstacles to a personal destination.

A CONNECTION:
People who work in the ADRC are community connectors for adults with disabilities or elders who are seeking income support, employment, in-home services or a variety of other long-term care related concerns.

An ADRC is a CONDUIT for information and documentation for people seeking eligibility for Medicaid, Family Care or IRIS, streamlining and simplifying complex processes.

“Bridge” not only means a structure, it is a verb that means CREATING UNDERSTANDING BETWEEN PEOPLE, for instance, helping a family convey to service providers the specific needs and concerns relating to their complex medical and social circumstances.

BRIDGING THE GAP can also mean finding a means of reconciling differences, as an advocate for the customer that solves problems with providers in a non-adversarial manner.

WHAT IS AN AGING AND DISABILITY RESOURCE CENTER?

Aging and Disability Resource Centers (ADRCs) are welcoming and accessible places where older people and people with disabilities can obtain information, advice, and help in locating services or applying for benefits. They provide a central source of reliable and objective information about a broad range of programs and services and help people understand and evaluate the various options available to them. By helping people find resources and make informed decisions about long-term care, ADRCs help people conserve their personal resources, maintain self-sufficiency and delay or prevent the need for potentially expensive long-term care. ADRCs serve as the single access point for publicly funded long-term care, providing eligibility determination and enrollment counseling for the state’s managed long-term care and self-directed supports waivers.

...continued on page 2.
“The simple idea of an Aging and Disability Resource Center came from observing how often someone who begins trying to help another ends up saying: there must be a way to help, but where do I start?”

- Donna McDowell, Bureau of Aging and Disability Resources

**Anyone Can Use an ADRC**

ADRC services are available to older people and adults with disabilities regardless of income and regardless of whether the person is eligible for publicly funded long-term care. ADRC services are also available to families, friends, caregivers, physicians, hospital discharge planners, and others who work with or care about older people or people with disabilities.

**Customer Convenience**

Consultations and other ADRC services are provided at the resource center, over the telephone, via the internet, in visits to an individual’s home and at other locations that are convenient to the people it serves.

**A Public Service**

ADRCs are public agencies that may be a part of county government or part of a multi-county regional consortium. ADRCs answer to a board of officials, consumers, and other local citizens. Services are provided to the public free of charge.

Authorization and the basic requirements for ADRCs are found in Section 46.283 of the Wisconsin Statutes and Chapter DHS 10 of the Wisconsin Administrative Code. The Department of Health Services has a contract with each ADRC to ensure comparable scope and quality of services are provided anywhere in the state.
85% OF THE WAY TO STATEWIDE AVAILABILITY

There are thirty-five (35) ADRCs and three (3) Tribal Aging and Disability Resource Specialists serving 59 of Wisconsin’s 72 counties and eight of its eleven tribes. Eighty-five percent of Wisconsin citizens have access to an ADRC in their community.

TABLE 1: ADRCs in Wisconsin, by Counties Served

1. ADRC of Barron, Rusk, and Washburn Counties
2. ADRC of Brown County
3. ADRC of Buffalo, Clark, and Pepin Counties
4. ADRC of Central Wisconsin (Marathon, Wood, Lincoln, and Langlade Counties)
5. ADRC of Chippewa County
6. ADRC of Columbia County
7. ADRC of Calumet, Outagamie, Waupaca Counties
8. ADRC of Dodge County
9. ADRC of Douglas County
10. ADRC of Dunn County
11. ADRC of Eau Claire County
12. ADRC of Fond du Lac County
13. ADRC of Forest County
14. ADRC of Green Lake, Marquette, Waushara Counties
15. ADRC of Jefferson County
16. ADRC of Kenosha County
17. ADRC of Manitowoc County
18. Aging Resource Center of Milwaukee County
19. Disability Resource Center of Milwaukee County
20. ADRC of the North (Ashland, Bayfield, Iron, Price and Sawyer Counties)
21. ADRC of Northwest Wisconsin (Polk and Burnett Counties and St. Croix Tribe)
22. ADRC of Ozaukee County
23. ADRC of Pierce County
24. ADRC of Portage County
25. ADRC of Racine County
26. ADRC of Sheboygan County
27. ADRC of St. Croix County
28. ADRC of Southwest Wisconsin-North (Crawford, Juneau, Richland and Sauk Counties)
29. ADRC of Southwest Wisconsin-South (Grant, Green, Iowa and Lafayette Counties)
30. ADRC of Trempealeau County
31. ADRC of Walworth County
32. ADRC of Washington County
33. ADRC of Waukesha County
34. ADRC of Western Wisconsin (La Crosse, Jackson, Monroe and Vernon Counties)
35. ADRC of Winnebago County

Tribal Aging and Disability Resource Specialists

1. Lac Court Oreilles Band of Lake Superior Chippewa
2. Red Cliff Band of Lake Superior Chippewa
3. Bad River Band of Lake Superior Chippewa

Full names, addresses and contact information for ADRCs are available at http://www.dhs.wisconsin.gov/LTCare/adrc/customer/adrecontactlist.pdf
Aging and Disability Resource Centers

The Resource Center was first envisioned as a way for the State’s network of county aging units and area agencies on aging to provide one-stop for information, assistance and access to services for older people. The idea was expanded to serve people with disabilities in 1997.

ADRCs were incorporated into the Wisconsin Department of Health and Family Services’ proposal for redesigning Wisconsin’s long-term care system. Wisconsin ADRCs developed the disability benefit specialist, web-based tools, options counseling and other innovations that are now regarded as national models.

Wisconsin is widely recognized as the originator of the ADRC concept. Wisconsin’s approach provided the foundation for the development of a national Aging and Disability Resource Center program by the U.S. Administration on Aging (AoA) and the Centers for Medicare and Medicaid Services (CMS). As of October, 2010, ADRCs were operational in 45 states and territories.

The Bureau of Aging and Disability Resources in the Wisconsin Department of Health Services has lead responsibility for planning, implementation, quality assurance and on-going administration of Wisconsin’s ADRC program. The Department and ADRCs’ quality assurance approach is customer-focused, evidence based and data driven. The approach has proven effective in improving customer service, customer satisfaction and consistency in service delivery, and enhanced ADRC quality across the State of Wisconsin.

Individuals and families work with the ADRC to design individualized solutions to problems of advanced age or lifelong disability. ADRCs are an essential part of a solution to the complexity of public benefits and the long-term care system.
### Wisconsin ADRC Timeline

**1995-97**
Planning for the redesign of Wisconsin’s long-term care system began. Wisconsin Aging Resource Center concept paper was distributed.

Preliminary proposal for “Redesigning Wisconsin’s Long-Term Care System,” including development of ADRCs, was released by the Department of Health and Family Services. Authorization and funding for Resource Center pilots was included in the 1997-99 biennial budget.

**1997-99**
Governor Thompson proposed the Family Care initiative in his State of the State address in January, 1998.

ADRC pilots began operation in 9 counties: Fond du Lac, Kenosha, Jackson, La Crosse, Marathon, Milwaukee, Portage, Richland and Trempealeau counties.

Authorization for the Family Care benefit was included in the 1999-01 State Budget, along with statutory language creating ADRCs (s. 46.283, Wis. Stats).

**1999-01**
Family Care managed care organizations began operating in five pilot counties. Administrative rule for Family Care, including ADRCs, was created (DHS 10).

**2005-07**
As a result of a federal “System’s Change” grant awarded in 2005, additional ADRCs were planned. 24 counties applied to become an ADRC; 14 were selected and funded at that time. ADRC services began in Brown, Barron and Green counties in 2005. In 2006, ADRCs began operation in 11 additional counties: Wood, Manitowoc, Sheboygan, Calumet, Outagamie, Waupaca, Green Lake, Marquette, Waushara, Forest and Racine.

Governor Doyle signed legislation authorizing statewide expansion of Family Care, including ADRCs, on May 10, 2006.

**2007-09**

The IRIS Medicaid home and community based services waiver program began July 1, 2008.
In 2009, ADRCs began operations in the following 18 counties: Buffalo, Clark, Pepin, Douglas, Lafayette, Crawford, Grant, Rusk, Washburn, Iowa, Polk, Burnett, Ashland, Bayfield, Iron, Price, Sawyer, and Walworth. The St. Croix Tribe is a partner in the regional ADRC serving Polk and Burnett counties.

ADRC services began in Winnebago, Lincoln and Langlade counties in 2010. A tribal Aging and Disability Resource Specialist position began serving the Red Cliff Tribe in 2010. In 2011, tribal specialists were funded for the Bad River and Lac Court Oreilles Tribes.
ADRC Services

Types of Services Available

ONE-STOP FOR RELIABLE INFORMATION

INFORMATION AND ASSISTANCE

Each older person, and every person with a disability, is unique. ADRCs need information and skills that are very broad. Individuals want to find - or to protect – a place to live, relationships, health, work, recreation, safety, and dignity.

Information and assistance services are about providing personalized help in finding and connecting a customer to services that match his or her needs. People call the ADRC about:

- In-home personal and nursing care
- Housekeeping and chore services
- Home modifications, safety and maintenance
- Health (healthy lifestyles, management of chronic conditions, dementia, etc.)
- Caregiver respite
- Transportation
- Nutrition, home delivered meals
- Housing, including senior and low income housing
- Assisted living, nursing homes and other long-term care facilities
- Financial assistance (e.g., Social Security, SSI, Disability, Medicare, Medicaid and other benefit programs)
- Legal issues (guardianship, power of attorney, client rights advocacy)
- Abuse, neglect, and financial exploitation
- Mental health, alcohol and drug abuse, crisis intervention
- Employment, vocational services, volunteer work
- Adaptive equipment

“They provided information about the help that was available and they were there to answer questions as they came up. I can’t say there was anything that was not handled well.”

-ADRC Customer
EMPOWERING INDIVIDUALS TO MAKE INFORMED CHOICES

LONG-TERM CARE OPTIONS COUNSELING

Through long-term care options counseling, ADRCs provide customers with information about the choices available when making decisions about where to live, what kind of help is needed, where to receive that care and help, and how to pay for it.

ADRCs provide one-on-one consultation to help people identify and think through the pros and cons of the various options in light of their situation, values, resources and preferences.

STREAMLINED ENTRY INTO LONG-TERM CARE PROGRAMS

ACCESS TO PUBLICLY FUNDED LONG-TERM CARE

ADRCs are single-entry points for accessing publicly funded long-term care programs.

ADRC staff are certified to determine functional eligibility for Wisconsin’s long-term care programs: Family Care, IRIS, Partnership and PACE. They help eligible individuals apply for Medicaid and explain and compare available long-term care programs.

CUTTING RED TAPE AND ADVOCATING FOR BENEFITS

BENEFITS COUNSELING

Benefit Specialists at ADRCs help people understand and obtain benefits they are eligible for. Benefit Specialists are knowledgeable professionals who are experts in and provide information about government and other benefits, such as Medicare, Medicaid, Social Security, Disability, FoodShare, low income housing, veterans’ benefits, insurance, etc. Benefit Specialists help in solving problems with receiving benefits.

Elderly Benefit Specialists serve people age 60 and older. Disability Benefit Specialists serve adults age 18-59 who have a physical or developmental disability or a mental illness or substance use issue.

“The best thing that came out of it is that I was able to make up my own mind and choose.”

-ADRC Customer
HELPING PEOPLE MAINTAIN HEALTH AND INDEPENDENCE IN THEIR HOMES

HEALTH AND WELLNESS / PREVENTION AND EARLY INTERVENTION

Providing information on how to reduce the risk of disabilities, connect to wellness programs and stay healthy and independent is a valuable service provided by resource centers.

ADRCs offer intervention activities such as programs to review medications or nutrition, teach people how to manage chronic conditions like diabetes or heart disease, or engage people in programs to eliminate home hazards and prevent falls.

SHORT-TERM SERVICE COORDINATION

ADRCs provide short-term service coordination to help people and their families arrange for needed care services.

TRANSITIONAL SERVICES FOR STUDENTS AND YOUTH

Families and young people with disabilities learn about their options after completing high school. ADRCs coordinate with local school districts and vocational rehabilitation counselors to guide students into a seamless transition.

ACCESS TO EMERGENCY RESPONSE

ADRC staff provide access to emergency response services. Staff are skilled at recognizing emergencies and situations that might put someone at risk, such as a sudden loss of a caregiver. They help people connect to adult protective services, mental health crisis intervention or other appropriate emergency service providers.
ADRC Services

In 2009, 32 ADRCs responded to over 308,523 requests for assistance, averaging almost 26,000 per month.

During those contacts, a total of 454,029 activities were provided in 2009. An 'activity' is a service provided to an ADRC customer.

72% of ADRC activity was Information and Assistance. Follow-up is the second most frequent service provided to ADRC customers. Follow-up includes finding out how the person is doing, asking whether the help they received was right for them, and if other connections or referrals are needed.

More than one activity may be provided in each customer contact with the ADRC.

Source: ADRC of Wisconsin Activity Reporting for 2009

A total of 36,845 people received services from a benefit specialist in 2009.

TABLE 2 shows the total number of clients served by an Elderly Benefit Specialist in counties and tribes where there was an ADRC in operation in 2009.

Source: Data from SAMS and from Legal Action of Wisconsin, Inc

The total number of clients who received assistance from a Disability Benefit Specialist (new cases, open cases carried over, plus the number of information only contacts), are included in TABLE 2.

Source: DBS 2009 Summary Data Report, with additional data provided by the DHS DBS Specialist.

Benefit Specialist services typically involve more than one contact with each client.
**ADRC Client Populations**

*Who do ADRCs serve?*

**WISCONSIN’S OLDER AND DISABLED POPULATIONS**

13.4% of Wisconsin’s population was aged 65 and older in 2009.

**By 2035, Wisconsin’s population aged 65 and older is projected to be 22.3% of the state’s population. 17 counties will top 30% by 2035.**

54% of Wisconsin households with head of household aged 65 or older had incomes under $35,000 a year.

It is projected that 31% of women and 17% of men who turn 65 in 2010 will spend one year or more in a nursing home.

8.8% of Wisconsin’s adult population aged 18-64 reported a disability in 2009.

The largest number reported an ambulatory difficulty (4.2%), followed by a cognitive difficulty (3.6%).
ADRC Client Populations

Who do ADRCs serve?

ADRCs serve the **ELDERLY** and adults with **PHYSICAL OR DEVELOPMENTAL DISABILITIES**, regardless of income.

ADRC services are available to **INDIVIDUALS** who need assistance; to **FAMILY, FRIENDS, CAREGIVERS, GUARDIANS**; and **YOUTH** completing high school.

Information, referral, and benefits counseling is available to **ADULTS** with **MENTAL ILLNESS** and/or **SUBSTANCE USE DISORDERS**.

ADRC customers of all ages are affected by disabilities. Customers are not required to share whether they have a disability. Of those customers who shared, **FIGURE 6** shows the distribution of disability characteristics. More than one condition may be identified for an individual.

**FAMILY, FRIENDS, CAREGIVERS**

Based on 2009 survey data, it is estimated 14.4% of Wisconsin adults provide informal care for a friend or family age 60+ (Source: University of Florida). **20%** of all contacts to ADRCs are made by family, friends, or caregivers.

**FIGURE 5: AGE OF PEOPLE WHO USE ADRCs, BY PERCENTAGE SERVED**

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 60 and older</td>
<td>67%</td>
</tr>
<tr>
<td>Age 18-59</td>
<td>10%</td>
</tr>
<tr>
<td>Unknown</td>
<td>23%</td>
</tr>
</tbody>
</table>

**FIGURE 6: DISABILITY CHARACTERISTICS, OF THOSE WHO REPORT A DISABILITY**

- **Disability Characteristics, 2009**
  - Physical Disability: 56%
  - Developmental Disability: 16%
  - Mental Illness: 24%
  - Substance Use: 4%
Customer Satisfaction

What ADRC Customers Have to Say...

CUSTOMER SERVICE AND SATISFACTION EVALUATIONS

Extensive evaluations of the information and assistance and options counseling services provided by Wisconsin’s ADRCs were conducted by Analytic Insight, an independent research firm, in 2008 and again in 2010 under a grant from the U.S. Administration on Aging.

Both qualitative and quantitative data was collected through the evaluation process. Quantitative data was collected through a telephone interview. 2,308 ADRC customers participated in an interview. 93% said they would recommend the ADRC to others.

FIGURE 7: CUSTOMERS WILLINGNESS TO RECOMMEND THE ADRC

Would you recommend the ADRC to others?

- Yes
- No

ADRC CUSTOMER FOCUS GROUP OBSERVATIONS...

ADRCs “PROVIDE A VOICE for those who would otherwise ‘fall through the cracks’ or who may be too ill, or too proud to call attention to their own difficulties.”

ADRCs were most often described as “helping individuals NAVIGATE THROUGH THE MAZE of social service programs”

Many participants heaped praise on individuals at ADRCs who had GONE ‘ABOVE AND BEYOND’ to help them.

‘The ADRC was considered to be the one place where the helping agency LOOKED AT THE INDIVIDUAL’S ENTIRE CIRCUMSTANCE, understood the context of the individual’s problems, including transportation needs and other barriers to obtaining services, and WORKED TO ENABLE ACCESS to services.”

Customer Satisfaction continued.

90% of ADRC customers rated the help they received as somewhat or very useful.

FIGURE 3: USEFULNESS OF HELP RECEIVED

93% of customers said the ADRC staff treated them ‘with respect and courtesy’.

80% rated the ADRC’s ability to help him/her resolve their situation as good or excellent.

FIGURE 10: ABILITY TO RESOLVE CUSTOMER SITUATION

81% of ADRC customers said that their expectations were met or exceeded.

90% said that the ADRC was helpful or very helpful.

FIGURE 11: HELPFULNESS

Source: Amy Flowers, Analytic Insight Aging and Disability Resource Center Evaluation Summary Report, 2010
Funding for ADRCs

FUNDING FOR ADRCs

ADRCs are budgeted to receive $30.2 million in state general purpose revenue and $11.6 million in federal Medicaid administrative match funds in 2011.

Funding is allocated to individual ADRCs based on a formula that reflects the size of the population they serve and the cost to operate a hypothetical ADRC serving 1% of the state’s adult population (estimated at $487,301 in 2008). ADRCs serving sparsely populated areas receive a minimum annual allocation and can qualify for a financial incentive by joining to form a larger, more robust regional ADRC.

State and federal funding is available to support Tribal Aging and Disability Resource Specialists, who provide information and assistance and options counseling and help tribal members access other ADRC services. State and federal funding also support Tribal Disability Benefit Specialists at the Great Lakes Inter-Tribal Council (GLITC).

Since 2009, over $4.6 million in federal competitive grant funds have been awarded to Wisconsin. Grant topics include:

- Develop, evaluate and improve ADRC quality
- Provide a system of service coordination for those with private resources, to avoid a nursing home stay
- Develop a self-directed supports program for veterans who need long-term care
- Develop national standards for options counseling, an ADRC service
- Develop strategies to enhance the functioning of those with Alzheimer’s disease through early detection, increased physical fitness and caregiver support approaches that will delay or avoid nursing home use.
### ADRC Funding for Calendar Year 2011

**TABLE 3: ADRC FUNDING FOR CALENDAR YEAR 2011**

<table>
<thead>
<tr>
<th>ADRC/County</th>
<th>% of WI Adult Population</th>
<th>State GPR</th>
<th>Federal MA Match</th>
<th>All Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Barron (fiscal agent)</strong></td>
<td>0.86%</td>
<td>592,468</td>
<td>117,065</td>
<td>709,533</td>
</tr>
<tr>
<td>Rusk</td>
<td>0.29%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washburn</td>
<td>0.32%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ADRC of the North</strong></td>
<td></td>
<td>693,722</td>
<td>269,781</td>
<td>963,503</td>
</tr>
<tr>
<td>Bayfield (fiscal agent)</td>
<td>0.29%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ashland</td>
<td>0.31%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iron</td>
<td>0.14%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Price</td>
<td>0.30%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sawyer</td>
<td>0.32%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Brown</strong></td>
<td>4.26%</td>
<td>1,377,498</td>
<td>535,694</td>
<td>1,913,192</td>
</tr>
<tr>
<td><strong>Buffalo (fiscal agent)</strong></td>
<td>0.26%</td>
<td>484,578</td>
<td>188,447</td>
<td>673,025</td>
</tr>
<tr>
<td>Clark</td>
<td>0.59%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pepin</td>
<td>0.14%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Calumet (fiscal agent)</strong></td>
<td>.77%</td>
<td>1,657,988</td>
<td>644,773</td>
<td>2,302,761</td>
</tr>
<tr>
<td>Outagamie</td>
<td>3.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Waupaca</td>
<td>1.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chippewa</td>
<td>1.08%</td>
<td>380,068</td>
<td>147,804</td>
<td>527,872</td>
</tr>
<tr>
<td>Columbia</td>
<td>1.01%</td>
<td>352,983</td>
<td>137,271</td>
<td>490,254</td>
</tr>
<tr>
<td>Dodge</td>
<td>1.63%</td>
<td>570,733</td>
<td>221,952</td>
<td>792,685</td>
</tr>
<tr>
<td>Douglas</td>
<td>0.81%</td>
<td>285,321</td>
<td>110,958</td>
<td>396,279</td>
</tr>
<tr>
<td>Dunn</td>
<td>0.76%</td>
<td>265,148</td>
<td>103,113</td>
<td>368,261</td>
</tr>
<tr>
<td>Eau Claire</td>
<td>1.74%</td>
<td>609,300</td>
<td>236,950</td>
<td>846,250</td>
</tr>
<tr>
<td>Fond du Lac</td>
<td>1.81%</td>
<td>667,927</td>
<td>259,749</td>
<td>927,676</td>
</tr>
<tr>
<td>Forest</td>
<td>0.19%</td>
<td>163,947</td>
<td>63,757</td>
<td>227,704</td>
</tr>
<tr>
<td>Jefferson</td>
<td>1.42%</td>
<td>499,756</td>
<td>194,349</td>
<td>694,105</td>
</tr>
<tr>
<td>Kenosha</td>
<td>2.78%</td>
<td>1,044,431</td>
<td>406,167</td>
<td>1,450,598</td>
</tr>
<tr>
<td><strong>ADRC of Western Wisconsin</strong></td>
<td></td>
<td>1,547,377</td>
<td>601,758</td>
<td>2,149,135</td>
</tr>
<tr>
<td>La Crosse (fiscal agent)</td>
<td>2.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jackson</td>
<td>0.36%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monroe</td>
<td>0.76%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vernon</td>
<td>0.51%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manitowoc</td>
<td>1.52%</td>
<td>534,036</td>
<td>207,680</td>
<td>741,716</td>
</tr>
<tr>
<td><strong>ADRC of Central Wisconsin</strong></td>
<td></td>
<td>1,691,993</td>
<td>657,997</td>
<td>2,349,990</td>
</tr>
<tr>
<td>Marathon (fiscal agent)</td>
<td>2.32%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Langlade</td>
<td>0.39%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lincoln</td>
<td>0.56%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wood</td>
<td>1.39%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milwaukee-ARC</td>
<td>12.11%</td>
<td>2,618,222</td>
<td>1,018,198</td>
<td>3,636,420</td>
</tr>
<tr>
<td>Milwaukee-DRC</td>
<td>4.49%</td>
<td>2,074,753</td>
<td>806,848</td>
<td>2,881,601</td>
</tr>
<tr>
<td>Ozaukee</td>
<td>1.53%</td>
<td>538,148</td>
<td>209,280</td>
<td>747,428</td>
</tr>
<tr>
<td>ADRC Subtotal</td>
<td>29,889,170</td>
<td>11,510,225</td>
<td>41,399,395</td>
<td></td>
</tr>
<tr>
<td>ADRC Subtotal</td>
<td>29,889,170</td>
<td>11,510,225</td>
<td>41,399,395</td>
<td></td>
</tr>
<tr>
<td>Tribal Aging and Disability Resource Specialist Contracts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bad River</td>
<td>40,000</td>
<td>15,555</td>
<td>55,555</td>
<td></td>
</tr>
<tr>
<td>Lac Court Oreilles</td>
<td>40,000</td>
<td>15,555</td>
<td>55,555</td>
<td></td>
</tr>
<tr>
<td>Red Cliff</td>
<td>40,000</td>
<td>15,555</td>
<td>55,555</td>
<td></td>
</tr>
<tr>
<td>Tribal DBS Contracts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GLITC</td>
<td>152,280</td>
<td>59,500</td>
<td>211,780</td>
<td></td>
</tr>
<tr>
<td>Tribal Subtotal</td>
<td>272,280</td>
<td>106,165</td>
<td>378,445</td>
<td></td>
</tr>
<tr>
<td>Grand Total</td>
<td>30,161,450</td>
<td>11,616,390</td>
<td>41,777,840</td>
<td></td>
</tr>
</tbody>
</table>

1/10/2011
Financial Impact of ADRCs

While the dollar value of ADRCs can be hard to measure, some indicators of the actual and potential impact of ADRC services are presented below.

$88.4 MILLION ADDED TO HOUSEHOLD BUDGETS AND LOCAL ECONOMIES

Benefit Specialists help people access Social Security, SSI, SSDI, Medicare, Medicaid, FoodShare, indigent drug programs, private insurance and other benefits.

- Elderly Benefit Specialists helped Wisconsin seniors access $46.5 million in benefits in 2009. Of these, over $31.5 million or 68% were federally funded.
- Disability Benefit Specialists helped people with disabilities access $42.4 million in benefits in 2009. Of these, $34.9 million or 82% were federal.

Sources: DBS 2009 Summary Data Report and data from SAMS and Legal Action of Wisconsin, Inc.

DECREASE IN FALLS, EMERGENCY ROOM VISITS AND HOSPITAL STAYS SAVES LIVES AND MONEY

Participants in the Living Well chronic diseases self management program reported a 27% decrease in emergency department visits and a 13% decrease in hospital stays in the six months after completing the program, while participants in the Stepping On falls prevention program reported a 45% decrease in falls and a 9% decrease in emergency room visits.

Estimated savings, based on data from the Wisconsin Hospital Association, are $1,537 per avoided emergency room visit for persons over age 65 and $19,263 per avoided hospital stay.

Financial Impact of ADRCs

The lady I worked with was very helpful. I'd been in a nursing home and wanted to leave, and she helped me make the arrangements I needed.

~ADRC Customer

STAYING HOME: An 88-year-old woman’s story

“An 88-year-old woman contacted the ADRC because she thought it was time for her to move into a nursing home as she was starting to have difficulty with bathing and maintaining her home. An ADRC Specialist met with her in her home and provided her with the information she needed to choose appropriate personal care, home care, and transportation services.”

The woman continues to live in her own home as a result of the ADRC’s assistance.

774 PEOPLE RELOCATED FROM NURSING HOMES IN FY 2010

ADRCs help delay or avoid the need for nursing home care by helping people to understand the alternatives and make judicious use of their personal financial resources, thus reducing demand for publicly funded long-term care.

They also assist people in relocating from nursing homes and assisted living facilities.

Judging from the experience of three state programs to relocate and divert people from nursing homes and facilities for the developmentally disabled, the savings can be substantial. Some 774 Wisconsin residents were relocated from nursing homes and institutions in state fiscal year 2010. The average savings from relocating to home or community based settings ranged from an average of $45.24 to $71.97 per person per day, depending on the program used to fund the relocation.

ADRC Success Stories

Aging and Disability Resource Center staff help people in Wisconsin every day. Here are a few of the thousands of stories that could be told...

THERE’S NO PLACE LIKE HOME

An elderly man’s health was declining and he had gone into the hospital. He made his daughter promise not to send him to a nursing home, but she didn’t know what to do if he could no longer take care of himself. She was referred to us [the ADRC] to “just talk it over.” The ADRC specialist worked with the family to arrange a temporary stay in a local assisted living facility to give them enough time to set up private pay services.

The father and daughter shared a duplex. The ADRC specialist came up with a plan to install a monitoring system between the two homes. Both the daughter and her father are happy, feeling safe, and living at home.

BUILDING TRUST, CHANGING LIVES

An 84-year-old man attended a meal site and found that no one wanted to sit next to him due to his personal hygiene. Previously, he wouldn’t let a social worker into his home.

After the ADRC consulted with Adult Protective Services and the Health Department, the ADRC specialist visited his home. It was cluttered, dirty, and in such bad shape that it was in jeopardy of being condemned. The ADRC convinced the man to clean up his house so his health wouldn’t deteriorate. He agreed only if the ADRC specialist would be present when the cleaning agency arrived. In addition, the ADRC coordinated with the bank and helped the man come up with a cost-effective home repair plan. The ADRC found volunteers to help with repairs and donate furniture. He’s now proud of his home and happy to still be living there.

A FAMILY FINDS PEACE

One ADRC customer was a man in his fifties who was living with his elderly parents. He was miserable and spent the entire day in his bedroom. His mother’s health was declining, but she still assisted her son with his cares. She was due to have surgery and was worried that his needs would be neglected while she was in recovery.

We [the ADRC] came up with a plan and strategized ways to alleviate the mother’s burden without jeopardizing the son’s health. He was eligible for long-term care programs, so we enrolled him into Family Care and coordinated with the managed care organization.

A few months later, we ran into the parents. They were glowing! Their son was living in a different, healthier setting. He was “a different man.” He was now participating in activities and no longer sat all day long in his room. The elderly parents rejoiced. They had peace.

”We had no idea what to do, then we found the ADRC…”

~ADRC Customer
FINDING WORK AND A FUTURE

A 23-year-old young woman with cognitive disabilities living on her own was desperate for help with household tasks such as cleaning, laundry, grocery shopping, and money management. Her mother was helping her with these tasks, but found it harder and harder to keep up. The young woman expressed interest in a job, but found few jobs available for adults with cognitive challenges.

With the help of the ADRC, the young woman found meaningful work. She’s optimistic about the future and is happy not to have to rely on her mother for help.

SYSTEM COORDINATION AT ITS FINEST

A Disability Benefit Specialist received a referral about a homeless man who was living in his car. He had a long history of mental illness. He would work off and on when his symptoms allowed him to think clearly enough to attend work. The Benefit Specialist assisted him in completing an application for Social Security programs and due to his medical issues, he qualified to receive “presumptive payments.”

The Benefit Specialist worked together with a case manager and housing specialist to find him a low-income apartment and find a job. He is now feeling productive, paying for his rent, and has enough income for food and his medication co-payments.

2010 Recognition of Wisconsin ADRCs

ADRCs ★ A Wisconsin “Success Story”

In February 2010, the U.S. Administration on Aging (AoA) honored the Wisconsin Department of Health Services with an Outstanding Achievement Award for “its pioneering work and continued innovation with Aging and Disability Resource Centers.”

Addressing an audience of people who are developing ADRCs across the country, federal officials recognized Wisconsin as the creator of ADRCs and emphasized that the Wisconsin model is a model other states should follow, indicating that Wisconsin embraces AoA’s vision and goals for ADRCs nationwide.