



**The Long Term Care Coordinating Council  
Aging in Community Act Subcommittee  
Wednesday, December 17  
2:00-3:30pm  
Department of Labor and Training  
Regulation and Safety Building (Building #70)  
2<sup>nd</sup> Floor Conference Room  
1511 Pontiac Avenue, Cranston, RI**

Michelle Szylin Greta Abbott Heather Amaral Paula Parker Cathy Gorman Christine Ruggieri Michelle Szylin Cathie Cool Rumsey Deanna Casey Mary Lou Moran	Susan Saccoccia-Olson Rachel Filinson Kali Thomas Marie Stoeckel Aleatha Dickerson Bill Flynn Susan Pomfret Deborah Burton Marea Tumber Maureen Maigret
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**DRAFT MINUTES**

**I. Welcome**

Senator Cathie Cool Rumsey introduced herself, and said that she is interested in LTC issues in rural communities. She witnessed LTC needs when campaigning in rural communities. Maureen said that we would try to URI assist in having a planned listening session in that part of state. Today we are focusing on nutrition and food security, and this Subcommittee will provide a report in the future about available resources and gaps.

**II. Division of Elderly Affairs Nutrition Services (*Marie Stoeckel & Aleatha Dickerson*) (*Presentation attached*)**

Marie Stoeckel and Aleatha Dickerson gave an overview of DEA's Senior Nutrition Services. The purpose is to promote the health, well-being, independence and dignity of older

individuals through access to healthy meals shared with others or delivered to their home. The Congregate Program provides hot, nutritious, federally and state-approved meals five days per week, in settings such as senior centers or housing facilities. There are currently 58 senior meal sites across RI: 53 cafés and 5 restaurant locations. The Home-Delivered Meal (HDM) Program serves individuals who are homebound, unable to drive or cook, and have no one to assist with food preparation.

All citizens aged 60 and older may participate, and certain individuals with disabilities under age 60 may also participate through the 1115 Medicaid Waiver or state handicapped meal funds. Also, people can qualify if they serve as volunteers, and spouses and others who live in the home of an eligible individual can also participate. The Older Americans Act programs are not means-tested. A voluntary contribution of \$3.00 per meal is suggested; participants pay what they can and no one is turned away. SNAP beneficiaries may use their SNAP benefit to make their voluntary contribution. Maureen was interested to learn this, because she was told that it is not possible to use SNAP benefits at meal sites. Aleatha said it is not possible at every site, because they need to have EBT processing capabilities. Heather Amaral said that it's challenging to process payments without an EBT machine. They have to use a paper system, and some people don't like giving personal information in order to complete the forms.

Funding is through Federal Title III and is supplemented by federal performance-based Nutrition Services Incentive Program (NSIP) funds. RI State Community Service Grants are also awarded to aspects of the Nutrition Program. Voluntary contributions and SNAP participation help to sustain and stretch the program. The providers also fundraise for the program, but have seen private philanthropy decrease in recent years. There are multiple congregate sites and partners, including Farmer's Market vouchers and a Farm Fresh pilot program. Kali Thomas said that RI was one of the first states to pilot this program, and she is curious about utilization numbers. Aleatha will email the report to Marea, so that they information can be circulated with the minutes.

### **Utilization Data - Congregate Meals**

Congregate meals (July 1, 2013 - June 30, 2014)	Total = 337,064
Contract Expenditures – Prior Year (State FY 2014):	Total = \$2,464,269
Contract Expenditures – Current Year (State FY 2015):	Total = \$2,479,202

Friendship Café, and several IHOP and Newport Creamery restaurants, collaborate with Meals on Wheels (MOW) of RI and East Bay CAP to provide vouchers for a \$5 donation. This option expands access to breakfast, evening, and weekend meals, as well as meals shared with younger family or friends. There are also café sites, and hopefully a LGBT café will open this spring through a collaboration with SAGE. People can call MOW for restaurant vouchers. The restaurants send the vouchers to MOW each month for reimbursement. MOW is always looking for new restaurant partners. They have to be able to provide a nutritious meal inexpensively. People enjoy the flexibility of the restaurant vouchers. Some sites have evening meals. Lunch numbers are going down nationwide. This may be due to a variety of factors such as many elders still working or taking care of

grandchildren. The meal sites in high-rises are year-round, but some sites are only open in warm weather since attendance is low in winter.

DEA became aware of meal attendance issues after LogistiCare took over the RIDE program through information provided by the senior nutrition program directors in September 2014. Senior meal site managers were reporting that the numbers of “no-shows” were increasing. Participants and their caregivers were concerned about the lack of official identification of the LogistiCare drivers and unmarked vehicles. These issues have been mostly resolved with signage and ID badges. Participants, caregivers, and nutrition sites are encouraged to call the Where’s My Ride line at 855-330-9132 to register a complaint if there is an issue with a ride.

RIDE used to be free, but now there is a charge of \$2 each way. This is in addition to the \$3 recommended meal contribution, so it is more expensive overall to go to meal sites. There is also confusion among the vendors about who to charge, since people who are Medicaid eligible and those in adult day don’t pay. Mary Lou Moran said that there was slight improvement in transportation for a while, but they are seeing an increase in issues again. Maureen said that the LTCCC is working on transportation issues, and that this group will address them in more detail in future meetings.

**Utilization Data for MOW RI:**

Home-delivered meals (July 1, 2013 to June 30, 2014):	Total = 242,025
Contract Expenditures – Prior Year (State FY 2014):	Total = \$1,636,078
Contract Expenditures – Current Year (State FY 2015):	Total = \$1,647,720

**Wait List:**

- High- 124 in July2013; Low- 25 in February 2014
- Monthly Average- 12 months of FY14= 63; last 6 months FY14= 47

When individuals are enrolled, high priority is given to frail elders with no other meal options. There are a number of capacity factors that result in participants being on a wait list, including the number of volunteers available to serve all areas. The number of participants on the waiting list has decreased since the summer of 2013 due to changes implemented by MOW of RI, including changes in routes.

The wait list numbers tend to rise in winter due to falls and flu, and more people need home-delivered meals. The wait list time can be very brief; often a person is on the list while they are waiting to be discharged from the hospital. The wait list is prioritized by degree of need. Sometimes the wait is longer in areas where MOW is heavily used and they need to re-route drivers.

**Senior Nutrition Services- Overview**

Total Meals Served in State FY2014: 579,089  
Total State Contract Expenditures for SFY2014: \$248,838  
Total Federal Contract Expenditures for SFY2014: \$2,710,445

Some funds are reported by calendar year and others by state fiscal year, so these are estimates. This year the Title III allocation was the same, and the NSIP was a little higher because it is based on prior year meals served. The totals are meals served, not people served. It may be possible to get the number of people served from the SAM system, and Marie will try to get this data to the group after the January report is done. There is a cap on how much money can be transferred from congregate meals to HDM. Title III funding has been level since 2008, and it was restored after sequestration. General Revenue funds were cut from \$530K in 2005 to \$200K in 2014. Maureen said that the General Assembly cut the MOW funds in half and never brought it back.

Greta asked whether HDM included special diets, such as diabetic or vegetarian. Aleatha said the meals are nutritious for all, but MOW does have some special meals for HDM and congregate sites. They have a diabetic friendly dessert option and they also have kosher meals. At café sites, they offer a hearty option and alternate meal that is a salad. HDM are different because they are pre-packaged. If they have a special need, i.e. preference is no fish, that is in the system and they receive the alternate on a day when fish is the entree. Aleatha said that most programs have options; for example, for those on certain medications who cannot eat tomatoes. Also, they will serve chopped food for those with trouble swallowing. The meals have required components, such as milk, that must be served to each person.

### **III. Meals on Wheels program (*Heather Amaral*)**

Heather said that we had covered a lot of the MOW information already. The HDM are prepared and packaged by the caterer and delivered at drop-off sites. The MOW location is the largest drop-off site. The meals are delivered refrigerated. Previously, they were delivered hot, but a survey showed that people were reheating them later. So the food was cooked, refrigerated, reheated for delivery and then reheated again later by the consumer at home. Now, they deliver the food cold and remove one reheat from the cycle. MOW made sure that people had a microwave or oven to be able to reheat the meals.

If they didn't have a microwave, MOW provided one for them. Benny's was their partner for providing microwaves. If a person is unable to reheat their meal, the driver helps them. The response to the chilled meals has been universally positive, and it keeps the food safe longer. MOW renegotiated lower prices with the caterer since they don't have to reheat the meals.

MOW has been in Providence for 35 years. They served almost 300,000 meals this calendar year. They served fewer meals this year because they have less money. State funds were cut from \$530K to \$200K in 2008, and the federal funds have not increased since 2008. The NSIP funds are down because those monies are tied to the number of meals served, and MOW served fewer meals. MOW used to have a case management agency, but their board wants to focus just on meals now. MOW laid off 9 people due to decreased funding and they froze open positions. They also streamlined the business, and electronics help with routes and deliveries. The drop-off sites give them space for free. They have many volunteers, but they cannot reimburse for mileage anymore.

They continue to reach out to partners. The shelf-stable meals are a good example. They give these out to people to have on hand for use in emergencies. When times were good, MOW paid for this out of their funds. They had a Wal-Mart grant for 2 years, and then when this ended, Centerville Bank gave them \$20K. However, there are many organizations competing for these private dollars. MOW appeals to private citizens too, but they cannot raise \$300K to offset state decreases. In 2005, meals cost \$4.90 each, now they cost \$6.40 each. It costs more to make each meal, and at the same time, they have to do this with less funding. Aleatha said that Neighborhood Health Plan (NHP) is a new provider of “Rhody Meals” for those on Medicaid and NHP reimburses at the state rate, which does not cover cost of meal. NHP said that they would increase the rate if the state did.

As mentioned by Marie and Aleatha, Medicaid waiver meals can be provided for those under 60 with approval. The state reimburses \$4.50 for “others,” and the meal costs \$6.40. The Medicaid waiver clients may end up on the wait list, which is very challenging because the need is there. Paula clarified that the waiver clients are not being penalized for being on that program. They are the highest need and if they are on the wait list, it is for a very short time.

Bill Flynn said that Senior Agenda is in the same building as MOW. He said that MOW is more than just a meal. The drivers check in on so many people who live alone. The drivers and clients build a relationship, and they are often the only person checking in on these folks. The drivers don’t leave until someone answers the door. They sometimes find people in distress, and if there’s no answer, they will call the police for a wellness check. They have contact information for family, and the daily check-in gives families peace of mind, too.

#### **IV. Research on Value of Home-Delivered Meals (*Kali Thomas, Brown University*)**

Kali Thomas just completed a study on HDM. The driver is the only person many people see each day. The control group got frozen meals and the study group got HDM. The study group had decreased loneliness, increased security about staying in their homes, decreased falls and decreased hospitalizations. Kali will attend a future meeting to discuss the results of her research on MOW in more detail.

#### **V. SNAP - Elder Food Insecurity (*Christine Ruggieri*) (*presentation attached*)**

Christine said there is a misconception that SNAP is for a month’s worth of food; it is a supplemental program and is based on a 3-week supply. There is no wait list for SNAP. If you fit the criteria you get the benefit, and you are not taking the benefit away from others. This is a concern to many. Most of the underserved are elderly. The applications are lengthy and then some only qualify for the minimum, which is \$15. People need to have enough deductions to get under 100% FPL.

Deduction amounts vary for different populations. Elderly tend to have higher medical costs. If they have over \$176 in medical deductions, they get a dollar for dollar deduction.

The verification process is onerous, but the caseworkers can help people by calling CVS, for example, and getting the prescription amounts. The field offices are stretched very thin, with 3000 cases per worker. It is a federal requirement that SNAP workers have to ask each question that is on the form. If a person age 60 or over has income over 200% FPL, the SNAP program has to look at assets. \$194 is the maximum benefit amount for a one-person household, but most people are under that benefit amount. For people who don't have utility expense because heat is included in rent or is subsidized, they have a program called "heat and eat" that gives them standard utility allowance. This program is very helpful in increasing eligibility to SNAP.

SNAP benefits are issued on an EBT card, which is like a debit card. You can swipe the EBT card at a Point of Sale (POS) device. The EBT card can be used by anyone who has the PIN. This is helpful so that others can shop for recipients, but people are not allowed to give benefits away. Ideally, the SNAP program likes to have an approved personal representative to decrease the likelihood of fraud. The elderly and disabled are allowed to use the benefit at restaurants if they don't have facilities to store and cook food. The SNAP program is piloting the restaurant program with some Subways, and they are looking to expand this. People enjoy the social aspect of eating out once in a while, but it is an occasional treat and not an everyday meal. Some people have expressed concerns over the fees at the "café" programs sponsored by DEA. Heather reiterated that this is a voluntary donation, and not a required fee. Christine said that her office is available to do SNAP training and outreach programs.

VI. Next Steps- next meeting TBD