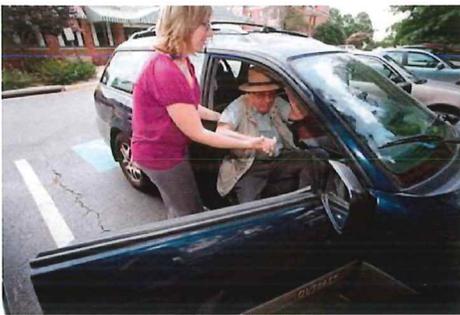


EAST TENNESSEE AREA PLAN on AGING and DISABILITY

Executive Summary *FY 2027-2030*

*For Progress Toward a Comprehensive, Coordinated Service System
for Older Persons and Adults with Disabilities*



East Tennessee Human Resource Agency

Designated Area Agency on Aging and Disability

for the

EAST

Planning and Service Area

in Tennessee for
July 1, 2026 to June 30, 2030



FY2026 – 2027 Program and Funding Proposal

Older Americans Act - Planning and Administration

The administrative responsibilities of the AAAD have increased significantly over the course of the last 25 years, but the staffing and administrative budget has not, so we have reached our limit on taking on more responsibilities without more funding.

We have added the Options for Community Living Program, Medicaid CHOICES, the National Family Caregiver Services program, the Supplemental Nutrition Assistance Program (SNAP), Senior Meal Connect Program, and most recently the Victims of Crime Act - Collaborative Response to Elder and Vulnerable Adult Abuse advocacy program (VOCA -CREVAA), and the Collaborative Response to End Self-Neglect in Tennessee (CREST), and our core administrative budget has not changed and the only way we have been able to accomplish this is to make sure we have high quality staff and by improving systems and adding technology to the work effort.

Older Americans Act and State Funded Services

County Offices on Aging:

- County Offices on Aging provide local advocacy/assessment services, information and referral services, outreach services, limited transportation, and coordination of local services for persons over age 60.
- Approximately 35,000 clients will be served through the County Offices on Aging.
- One area of emphasis each year is to increase effectiveness of Information and Assistance by assisting to facilitate training for all County OOA Directors with a renewed focus on outreach, transportation, community education, and benefit screening.
- Funding is allocated to each county through the approved ETAAAD funding formula.
- This formula basically follows the same factors as are found in the state funding formula - 60+, 60+ low income, 65+ minority, 60+ rural, and 80+. We start with a \$10,000 base for each county.

Senior Centers:

- State funding for 22 senior centers in East Tennessee is provided for recreation, health- promotion and health screening services, physical fitness activities, and educational opportunities.
- We have an initiative in ET to move centers more to "Aging and Wellness" Centers to provide health education services, health screening support and regularly scheduled health fairs. We are convinced that the only real way to assure the viability of centers going forward is to raise their value to the community with a greater focus on health improvement activities.
- We will provide services to over 50,000 individuals annually through senior center services.
- Funding is allocated to each county through the approved ETAAAD funding formula - \$7,500 per county base with the balance of the funding allocated on the county's share of the 60+ population.
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Information and Assistance Services:

- The ETAAAD provides information and assistance services to those in our community who are calling to access services or need information on a wide range of topics – our staff work very closely with the County Office on Aging staff to provide information and assistance services – if we get a call that can be managed at the county level, we e-mail the OOA Director for follow-up with the client. We have implemented a new “tasking” process in Mon Ami (our state mandated data system) so referrals are sent “inside the system”. We believe this approach is a much better way to support older individuals in ET.
- Over 500 agencies and organizations are part of our referral system in East Tennessee.
- This division also completes all the telephone screenings for the Options, National Family Caregiver, and CHOICES programs.
- The staff in the office are required to have the National Inform USA Certification.
- We respond to approximately 15,000 calls, e-mails and faxes per year!
- We offer 3 basic support services in this unit – simple information, assistance and referral, taking an average of between 3-5 minutes on each call; more complex information, assistance and referral, taking an average of 5-10 minutes and then in-home service screening, taking an average of 30-45 minutes.
- Our plans for FY2026-2027 is to work with DDA to purchase an automated assistant that will be able to answer calls in real time, gather basic information from the caller and provide a written summary of the call, with all the data collected, to staff for follow-up.

Public Conservatorship Services: (A Direct Service of the ETAAAD)

- The Public Conservator serves as a court appointed conservator for persons who lack the capacity to make informed medical and financial decisions.
- Approximately 80 full conservatorship cases are under management, with court oversight and reporting.
- By state law, the Public Conservatorship project is a direct service of the East Tennessee Area Agency on Aging and Disability.
- Approximately 7 trained and certified volunteers are utilized to provide direct support to clients served by the Public Conservator and the Volunteer Coordinator.

Legal Services - 15 ET Counties: (A Direct Service of the ETAAAD)

- A staff attorney provides education, advice, guidance, and limited representation for persons over age 60 in areas of public benefits, housing, discrimination and other priority service categories.
- Approximately 225 clients / 250 cases will be served in 2026-2027.

Legal Services - Knox County:

- Services are provided through a contract with Knox CAC - Office on Aging and they sub- contract with Legal Aid of East Tennessee.
- Services include education, advice, guidance, and limited representation for persons over age 60 in areas of public benefits, housing, discrimination and other priority service categories.
- Approximately 150 clients / 300 cases will be served each year.

LTC Ombudsman Services - 16 ET Counties: (A Direct Service of the ETAAAD)

- Ombudsman services are provided to residents of long term care facilities.
- Primary work involves investigation and resolution of resident complaints.
- The ET Ombudsman service includes an excellent and very successful volunteer ombudsman component.
- Approximately 10 volunteers are certified and assigned to LTC facilities in East Tennessee.
- Approximately 3,000 residents will be served with almost 11,000 individual contacts each year.

Elder Abuse:

- We propose continuing to support the Tennessee Elder Justice Coalition and the Tennessee Elder Justice Conference.
- The Elder Justice Coalition was established in 1993!
- Continuing the caregiver training contract with Alzheimer's Tennessee.
- Supporting the planning for the "National" Elder Justice Conference in May / June, 2027 or 2028 in Nashville.

SHIP Medicare/TennCare Counseling:

- ETAAAD was selected to work with the Tennessee Department of Disability and Aging (TNDDA) to manage the State Health Insurance Assistance Program (SHIP), the Medicare Improvements for Patients and Providers Act (MIPPA), and the Patient Protections and Affordable Care Act (PPACA) in the East Tennessee region.
- The project provides counseling services to beneficiaries who receive Medicare and TennCare benefits and provides for the recruitment and training of volunteers to assist beneficiaries with health insurance questions and to provide outreach efforts to identify underserved Medicare populations.
- We also receive funding from the Upper Cumberland AAAD to support fraud prevention activities through the Senior Medicare Patrol (SMP) to report Medicare and Medicare fraud.

Older Americans Act - Nutrition Services

Congregate Meals:

- We currently contract with 5 agencies to provide meal services in ET - Blount CAA, DCEA, ETHRA, MECAA and Knox CAC along with a contract with PurFoods - Mom's Meals as a support meal service provider for the Options for Community Living Program.
- We currently support 20 congregate meal locations in the region - contractors have not been successful reopening meal sites post COVID - continues to be a work in progress.
- The State sets the maximum meal reimbursement rate each year.
- Based on the annual allocation and the approved meal rate, the ETAAAD set a minimum daily meal requirement in each county.
- Service providers that receive OAA funding for both congregate meals and home delivered meals are not allowed to reduce funding below 30% of the total

- contract amount for congregate meals.
- Service providers will continue to be asked to secure contributions from consumers and utilize NSIP funding (Cash in Lieu of Commodities) to improve and increase services.
- Each service provider is required to evaluate, along with ETAAAD staff, every congregate meal site to determine how the site can be improved to increase congregate meal participation if the site is below the required minimum. New sites are under consideration.
- Additionally, each provider is required to continue outreach efforts in each county to improve congregate meal participation and provide nutrition education to participants.
- A special, focused review of all congregate meal sites in our region will be conducted during this area plan cycle.
- The contractor is required to complete the Participant Information Form on each client and enter service delivery data in Mon Ami and upload supporting documents as required by TNDDA and the ETAAAD.
- Approximately 60,000 meals will be served at 23 congregate meal sites across the region.
- We need to increase the number of congregate meal sites in FY27 to at least 30. It has been difficult to reopen or add new sites since COVID.

Home Delivered Meals:

- Home delivered meal service providers shall offer hot meals, frozen meals and emergency meal for those days they cannot serve due to inclement weather or other reasons, including staff training.
- The reimbursement rate is higher for hot meals to encourage hot meal as the go to solution.
- The maximum meal rate is set by the state
- Funds are allocated on a county basis and a minimum meal level per day is set as a benchmark.
- Service providers are asked to secure contributions from consumers and utilize NSIP funding (Cash in Lieu of Commodities) to improve and increase services.
- Service providers are required to coordinate home delivered meal services with ETAAAD and the "Options for Community Living" and CHOICES programs.
- Approximately 600,000 meals will be served with 225 active meal routes in the district.

Health Promotion Services: (A Direct Service of the ETAAAD)

- The ETAAAD has been revamped to focus on Evidence-Based Programming, including the Chronic Disease Self-Management Program (CDSMP), Arthritis Foundation Exercise Program, and to work with the regional and county health departments to offer the Stay Active and Independent for Life (SAIL) Program and Tai Chi and Improving Medication Management.
- This is in addition to general planning for health promotion and health screening activities in the 22 East Tennessee Senior Centers.
- The AAAD works with staff at the senior centers to develop an annual health promotion / evidence-based service plan, work with them to implement this plan, and monitor the center's progress.
- Evidence-Based Programming sessions are being conducted across the region. The Administration for Community Living (ACL) required that health promotion programs be 100% Evidence-Based about 10 years ago.

National Family Caregiver Support:

- These funds will be utilized to purchase and/or coordinate services for family caregivers in the following categories:
 - Information and Assistance to support the caregiver
 - Case management services
 - Respite services for caregivers at home and in facilities
 - Grandparent Support Program
 - Medical supplies on a case by case basis and limited in scope
- Those eligible include family caregivers of either an adult age 60+, or a person, *any age*, caring for an individual with a form of dementia, or grandparents or relative caregivers who are caring for a child, 18 and younger.

HCBS - Options for Community Living (OCL):

- These funds will be used to help those eligible to continue living in their homes or in a community setting. Those eligible include adults age 60+ and adults 18 years of age or older, with physical disabilities who are at risk of entering long-term care facilities. The Governor, based on a request from the Commissioner of the Tennessee Department for Disability and Aging has increased the Options funding on an annual basis for the past several years and the request is in for FY27 as well. This is great news but the non-medical home support network in TN cannot find an adequate number of staff to provide the level of in-home services needed now or into the foreseeable future.
- Maximum care plan cost per year is set at \$13,465 with approval from TNDDA - ET average case cost is approximately \$8,000 per year. The AAAD provides telephone eligibility screening, home assessment and ongoing case management services.
- Services Provided:
 - Information and Assistance and Eligibility Screening services
 - Case management services
 - In-Home services - Home Delivered Meals / Homemaker / Personal Care / PERS
 - Minor Home Modifications / Transportation / Assistive Devices
 - Adult Day Services
 - Self-Directed Services through a state approved subcontract with Morning Sun
- Consumers who have an income above 200% of the federal benefit rate may be required to contribute towards the cost of services.
- Approximately 800 individuals are served each year with a capacity of approximately 1,000.

HCBS - Medicaid CHOICES Funding:

- The East Tennessee Area Agency on Aging and Disability has been designated to be the Single Point of Entry for the TennCare Long Term Support Services "CHOICES" program in the ET Planning and Service Area for those individuals who are not a member of a Managed Care Organization
- We receive and process approximately 500 referrals a month and process about 1,250 applications a year through TennCare for Home and Community Based Services
- Services we provide include:
 - Telephone screening to determine if a home visit is warranted
 - Completing a Comprehensive Medical and Functional Home assessment
 - Assisting with financial eligibility including completing a Medicaid Application
 - Leverages approximately \$15,000,000 in direct funding to support individuals to remain at home and in the community in the ET Region

Supplemental Nutrition Assistance Program (SNAP) Senior Outreach Funding:

- This funding is provided by the Department of Human Services to support a senior outreach program to encourage underserved populations to participate in the nutrition assistance program.
- Only about 50% of those eligible who are over age 65 participate in the program in East Tennessee.
- The Area Agency on Aging and Disability will have a staff person trained to inform seniors of this program through presentations or events within our sixteen counties and to assist eligible seniors with the application process
- Matching funds required for this will be earned by coordinating with our existing Options and I&A staff to capture part of their time spent on screening and home assessments.
- We manage approximately 500 inquiries and application assistance a year.

Victims of Crime Act / Collaborative Response to Elder and Vulnerable Adult Abuse (VOCA - CREVAA)

- CREVAA Advocates work with District Attorneys in Judicial Districts 3-12, Adult Protective Services, and Law Enforcement and other community providers in the 26 county area to provide victim services & supports to individuals who are victims of an alleged crime. The individual must be sixty meet the Adult Protective Services' (APS) vulnerability adult definition and is an alleged victim of a crime.
- The CREVAA program will accept both direct and self-referrals for services & once determined eligible, Advocates contact the alleged victims contact as soon as possible.
- Advocates offer trauma informed, person centered victim supports and services to stabilize clients following victimization. Services may include providing information, hotline counseling, safety planning, referral, case management, direct services, counseling, & connection to community resources to support the client through recovery and the criminal justice program, as agreed upon with the client.
- We have partnerships with Second Harvest (approximately 35 food boxes a month are delivered to CREVAA clients)

- We have an annual "Angle Tree" fund raising program with several area business to gain donations for clients.
- We have 5 full-time & 1 part-time position based in Knoxville & Chattanooga and serve 26 counties.

Collaborative Response to End Self-Neglect in Tennessee (CREST)

- The staff works with TN DHS and Adult Protective Services investigators in the 26-county area to support individuals who are victims of self-neglect and who are 60 years or older or individuals who are dependent adults.
- The staff will collaborate with APS to assist clients with creating a long-term plan, as well as connection to community resources and direct services to assure the clients are no longer at-risk.
- Referrals for this service can *only* come directly from active cases being worked by Adult Protective Services investigators.
- Referrals are screened for program eligibility and the staff will identify a course of action and work directly with the client and Adult Protective Services to meet those goals.
- We have three full-time positions based out of Knoxville/Chattanooga.

Senior Meal Connect:

- This was a one-time source of funding provided by the Davidson County Chancery Court through the ElderTrust settlement.
- The purpose of these funds is to improve access to meals and donated food for older adults who do not have access to adequate nutrition and who are at nutritional risk.
- The funding was utilized to purchase a cargo van that is being used to deliver food to individuals who cannot get to food pantries or other locations, or do not have the resources to purchase the food they need
- Second Harvest of East Tennessee is our major partner in this project and will be assisting with food donations and, in fact, have agreed to set aside funding in their budget to purchase food items for this project.
- Since the inception of the original investment, the food box program has grown to 1,100 boxes (approximately 20 meals per box) per month! Over 22,000 meals per month – 264,000 meals annually. This represents just over \$1.25 Million in food cost per year – a donation from Second Harvest of East Tennessee!

FY2027–2030 Strategic Goals, Objectives, and Steps

1. Service, Information, and Assistance

Goal

Strengthen access to timely, accurate, and person-centered information and assistance for older adults, caregivers, and individuals with disabilities.

Objectives

- Increase awareness of available aging and disability services across the region.
- Improve responsiveness and coordination through a “no wrong door” approach.
- Expand outreach to underserved rural and minority communities.

Strategic Steps

- Enhance the Aging and Disability Resource Connection (ADRC) with improved referral tracking.
- Provide cross-training for staff and partner agencies on eligibility and service navigation.
- Develop multilingual and accessible outreach materials.
- Conduct regular community listening sessions to identify unmet needs.

2. Small Residential Homes and Shared Housing

Goal

Expand safe, affordable, community-based housing options that support aging in place.

Objectives

- Increase availability of small residential care alternatives.
- Promote shared housing models as an option for affordability and companionship.
- Strengthen partnerships with housing developers and local governments.

Strategic Steps

- Support pilot programs for shared housing matching services.
- Provide technical assistance to small residential home operators on compliance and quality.
- Coordinate with housing authorities to prioritize older adult housing needs.
- Advocate for local zoning policies that support accessory dwelling units and shared housing.

3. Congregate and Home-Delivered Meals

Goal

Improve nutrition services to reduce food insecurity and support health and independence.

Objectives

- Increase participation in congregate meal sites to reduce isolation.
- Expand home-delivered meal capacity for high-risk individuals.
- Improve meal quality through culturally appropriate and medically tailored options.

Strategic Steps

- Modernize congregate dining locations with welcoming, multi-purpose programming.
- Implement nutrition screening and referral protocols.
- Partner with health systems to identify individuals needing nutrition support after discharge.
- Explore weekend/holiday meal delivery expansion through volunteers and contractors.

4. Assisted Transportation

Goal

Enhance mobility and transportation access for older adults and people with disabilities.

Objectives

- Reduce transportation barriers to medical care, nutrition, and community engagement.
- Increase coordination among public, private, and volunteer transportation providers.
- Improve access in rural and underserved counties.

Strategic Steps

- Expand non-emergency medical transportation partnerships.
- Support volunteer driver recruitment and reimbursement programs.
- Promote ride scheduling technology and call-center support for individuals without internet.
- Advocate for regional transit solutions and age-friendly transportation planning.

5. Elder Justice

Goal

Prevent, identify, and respond effectively to elder abuse, neglect, and exploitation.

Objectives

- Strengthen prevention education for older adults, caregivers, and professionals.
- Improve coordination with Adult Protective Services, law enforcement, and legal aid.
- Expand services for victims of exploitation and abuse.

Strategic Steps

- Increase community education on scams, fraud, and financial exploitation.
- Develop multidisciplinary elder justice response teams in priority counties.
- Enhance training for service providers on mandatory reporting and trauma-informed care.
- Support access to legal services and protective interventions.

6. Improving Access to Health Care

Goal

Ensure older adults and individuals with disabilities can access affordable, coordinated health care services.

Objectives

- Reduce barriers related to cost, transportation, and provider shortages.
- Improve care transitions from hospitals to home.
- Increase use of preventive and primary care services.

Strategic Steps

- Expand partnerships with federally qualified health centers and rural clinics.
- Strengthen hospital discharge planning collaborations.
- Promote telehealth access through digital literacy and device support programs.
- Support caregiver education on navigating Medicare, Medicaid, and long-term services.

7. Health Promotion Education

Focus: Medication Management & Fall Prevention

Goal

Improve health outcomes through evidence-based education that reduces falls and medication-related harm.

Objectives

- Increase participation in fall prevention programs across the region.
- Improve medication adherence and reduce adverse drug events.
- Support older adults in managing chronic conditions safely.

Strategic Steps

- Expand evidence-based programs such as *Stepping On* and *Matter of Balance*.
- Partner with pharmacists for medication reviews and deprescribing education.
- Provide fall-risk home assessments and safety modification referrals.
- Develop caregiver-focused training on medication organization and monitoring.

8. Reducing or Eliminating Ageism

Goal

Promote an age-friendly, inclusive East Tennessee by reducing ageism in communities, workplaces, and service systems.

Objectives

- Increase public awareness of ageism and its impact on health and equity.
- Encourage intergenerational engagement and respect for older adults.
- Ensure agency services reflect dignity, autonomy, and person-centered values.

Strategic Steps

- Launch regional anti-ageism awareness campaigns in partnership with local media.
- Support intergenerational volunteer and mentoring initiatives.
- Provide training for providers and staff on implicit bias and respectful communication.
- Encourage adoption of Age-Friendly Community frameworks in local governments.

To support all service areas, ETAAAD will also:

- Strengthen data collection and outcome reporting.
- Expand workforce development and caregiver support.
- Increase equity-focused outreach to underserved populations.
- Pursue innovative funding and public-private partnerships.
- Integrate technology while maintaining accessibility for all.

Summary of the Area Agency on Aging & Disability Proposed Funding for FY 26-27

ETHRA / ETAAAD	Tennessee Department of Disability and Aging											Other			
	II-B	III - C-1	III - C-2	III-D	III-E	VII Omb	VII EA	NSIP	State	SHIP MPPA SMP	SNAP	CREVAA/ VOCA	CREST End Self- neglect	TennCare CHOICES	Projected FY 27
AAAD Administration + State	144,310	346,600			53,900				133,500						678,310
Congregate Meals + NSIP		1,210,650													1,210,650
RD - Paula Nelson		24,650													24,650
Home Delivered Meals+NSIP+St			1,247,900					233,200	860,200						2,341,300
HDM Assessments	148,400														148,400
HCBS In-Home Services									61,100						61,100
Health Promotions				93,900											93,900
Nat. Family Caregiver + St					424,088				81,400						505,488
Grandparenting / Caregiver Training					45,000										45,000
Public Guardian									344,300						344,300
Ombudsman	100,000					78,100									178,100
Legal - ETHRA, KKCAC	136,604														136,604
Elder Abuse Training							11,800								11,800
Offices on Aging	932,628														932,628
Senior Centers	120,000								226,500						346,500
Options In-Home Services									4,699,382						4,699,382
HCBS/NFCS Case Management	51,324				117,360				785,344						954,028
Intake	8,440				53,352				129,474					347,766	539,032
SHIP/SMP/MPPA										244,057					244,057
SNAP-Food Stamp Information											136,225				136,225
CREVAA-Victims of Crime Act											372,800				372,800
CREST-Assist Self-Neglect clients												317,762			317,762
CHOICES - HCBS													811,453		811,453
Projected FY 27 Allocations	1,641,706	1,581,900	1,247,900	93,900	693,700	78,100	11,800	233,200	7,321,200	244,057	136,225	372,800	317,762	1,159,219	15,133,469
Matching funds	224,268	260,863	146,812	-	103,273	-	-	-	226,500	-	136,225	-	-	-	1,097,941