

Lorain County
Older Adults
Needs
Assessment
2021



Contents

N.	TRODUCTION	3
DE	MOGRAPHIC PROFILE OF OLDER ADULTS	5
	Race and Ethnicity	5
	Citizenship Status	5
	Primary Language	6
	Educational Attainment	6
	Marital Status	7
	Veteran Status	7
	Disability Status	7
	Health Insurance	8
	Household Mobility and Make-up	g
	Housing Affordability	9
	Risk of Social Isolation	10
	Employment	10
	Household Income and Poverty	11
	Access to Food	12
	Transportation	13
	Life Expectancy	13
	Chronic Health Conditions	14
	Leading Causes of Death	16
	COVID-19 Case Data	17
	COVID-19 Vaccination Data	17
	AARP Livability Index	18
PR	IMARY DATA COLLECTION	19
	Survey Analysis	19
	Demographics	21
	Aging Services	24
	Nutrition	28
	Housing	31

Saf	fety	33
Tra	ansportation	34
He	ealth	36
Eld	der Abuse	38
Em	nployment	38
Fui	nding of Aging Services	39
Focus	s Group Analysis	41
COST	T ANALYSIS OF LONG-TERM CARE IN LORAIN COUNTY	45
Loi	ng-Term Care Insurance	45
Pri	ivate Pay	45
Ме	edicaid	45
Co	ost of Care	46
Но	ome and Community Based Care	49
APPEND	DIX A: SURVEY	
APPEND	DIX B: SPANISH SURVEY	
Append	dix C: Cost of Care Tables	

INTRODUCTION

The Lorain County Office on Aging (LCOOA) provides services and supports to Lorain County residents so they can age successfully in the setting of their choice. The priority of the office is to treat individuals with dignity and respect. By offering aging services and partnering with multiple agencies and programs, LCOOA both serves and empowers clients and families to direct their own aging journey.

LCOOA is committed to meeting the needs of all residents ages 60 and older in Lorain County. In order to understand the needs of the community, LCOOA partnered with The Center for Community Solutions to conduct this needs assessment. The following report details the findings from primary data collection, secondary data analyses, and a long-term care cost analysis.

The first section provides a detailed demographic profile that pulls from multiple secondary data sources, including the U.S. Census Bureau's American Community Survey (ACS). The assessment uses the most recent reliable data from the ACS, the 2019 5-year estimates. Additional sources are noted within the profile.

The second section includes primary data source analysis, including surveys developed specifically for this assessment. The surveys were distributed by mail, email, and social media, and they were also conducted by phone. Qualitative data was also collected through focus groups with caregivers, and an analysis is provided.

Finally, a cost analysis uses industry estimates for the cost of various types of long-term services and supports paired with household budgets prepared as part of the Elder Index developed by The Center for Social and Demographic Research on Aging UMAss Boston to model potential costs for Lorain County older adults. Models include variation of single/couple, renter/homeowner, and poor/good/excellent health.

While the report provides detailed analyses, the following points provide a brief synopsis of the key findings.

- One of the top concerns of older adults in Lorain County related to aging is the fear of being placed
 in a long-term care facility. Ninety-seven percent of older adults report that being able to remain in
 their homes as the age is important to them. The presence of and access to home and communitybased supports are crucial factors in maintaining impendence in one's own home.
- An estimated 18,000 older adults in Lorain County may struggle to afford home-based aging supports and services. Those with incomes between \$25,000 and \$75,000 are likely to be over the income for Medicaid and Medicaid wavier programs but without enough financial resources to privately pay for the recommended level of services and supports.
- Residents who are both older adults and renters struggle with housing affordability in Lorain County.
 Over half of renters are cost-burdened by their housing. More than 50 percent of renters aged 60 and over have incomes below \$25,000, and over 15 percent have been behind in their rent and have worried about being evicted.
- Lorain County ranks low on access to public transportation. A large majority of older residents report that they drive. But those who do not drive struggle with finding safe, reliable, and affordable transportation, particularly to medical appointments outside of the county.

- One in four older adults in Lorain County worries that they will run out of food before they can get more. Nutrition supports within Lorain County available to address food insecurity include the Supplemental Nutrition Assistance Program (SNAP) and Home delivered meals. Just under 40 percent report having access to home-delivered meal programs. Those who do receive home-delivered meals generally report having high access to healthy meals. A small number of survey respondents were enrolled in SNAP and some express frustration at the low level of the benefit and the challenge of navigating the application process, including language barriers for those whose primary language is not English.
- Older adults in Lorain County are fairly well connected to the internet, as demonstrated by the number of surveys received via email and social media links as well as self-reporting on the survey.
 The internet was the number one method older adults listed for accessing information about community services.
- Caregivers in Lorain County report having struggled with COVID-19 pandemic safety restrictions.
 While some felt completely isolated and eagerly returned to social activities as soon as they were
 able, others remained close to home as they feared what would happen to their care recipient if
 they were to become infected. Many were relieved to be able to return to more community-based
 activities as vaccines became widely available.
- Caregivers are interested in respite programs to help them manage the stress and isolation that
 often accompanies caregiving responsibilities. Caregivers would also like the opportunity to have
 hands-on training tailored to the needs of their care recipient. Generalized trainings have left gaps in
 their caregiving competencies.

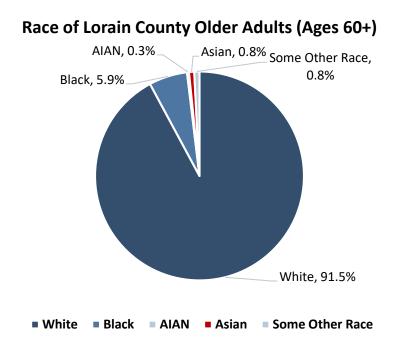
DEMOGRAPHIC PROFILE OF OLDER ADULTS

The demographic profile for older adults in Lorain County draws from secondary data sources with indicators selected to create a deeper understanding of the population. Unless otherwise noted, data contained in this profile comes from the 2019 5-year estimates of U.S. Census Bureau's American Community Survey (ACS). This is the most recent reliable data available from the U.S. Census Bureau.

About 25 percent of Lorain's total population (307,670) is 60 and older. Slightly more females than males in the county are 60 and older. This mirrors statewide data. In both Lorain County and the state of Ohio, 55 percent of people over age 60 identify as female and 45 percent identify as male.

Race and Ethnicity

The county's population of seniors who are 60 and older is 92 percent white, 6 percent Black, and 1 percent Asian. American Indians and Alaska Natives make up less than 1 percent of the older adult population in Lorain. Those with an ethnicity of Latinx descent make up 5 percent.



Citizenship Status

Almost all (99.9 percent) of Lorain's 60 and older population who completed the ACS are citizens of the United States. Possibly an unauthorized resident would not complete a survey asking demographic questions. The Migration Policy Institute estimates a population of 87,000 unauthorized residents statewide. Of that total, an estimated 5 percent, or 5,000, are 55 and over. Likely at least some of the 5,000 live in Lorain County. The top five languages unauthorized populations in the state of Ohio speak

at home are Spanish (47 percent), English (12 percent), Chinese (7 percent), and Sub-Saharan African languages (4 percent).¹

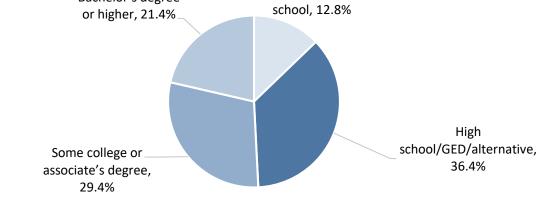
Primary Language

English is the primary language for 93 percent of adults ages 60 and older in Lorain County, while close to 7 percent speak a language other than English as their primary language. Less than 1 percent speak English less than very well.

Educational Attainment

One-eighth of older adults (12.8 percent) in Lorain have not obtained a high school diploma. Older adults with a diploma, GED, or some other equivalent made up the largest proportion at 36 percent. Thirty percent of older adults had some college or associate's degree, while 21 percent had a bachelor's degree or higher. Higher educational attainment has a positive correlation with positive health outcomes and mortality.²





Less than high school

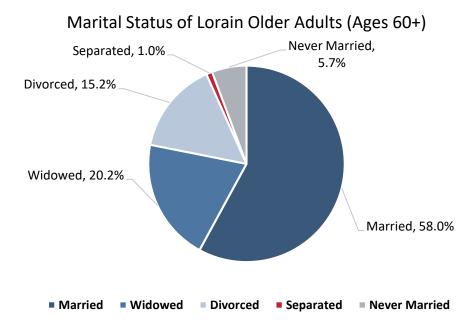
- High school/GED/alternative
- Some college or associate's degree
- Bachelor's degree or higher

¹ https://www.migrationpolicy.org/data/unauthorized-immigrant-population/state/OH

² Zajacova, A., & Lawrence, E. M. (2018). The Relationship Between Education and Health: Reducing Disparities Through a Contextual Approach. *Annual review of public health*, *39*, 273–289. https://doi.org/10.1146/annurev-publhealth-031816-044628

Marital Status

More than half (58 percent) of older adults in Lorain County are married. Those who are widowed make up 20 percent, while 15 percent are divorced, and 1 percent are separated. About 6 percent of older adults in the county have never been married. Being engaged in a marriage or long-term partnership serves as a protective factor to experiencing social isolation. The 42 percent of adults not currently married may benefit from opportunities to interact with the community and develop social relationships.



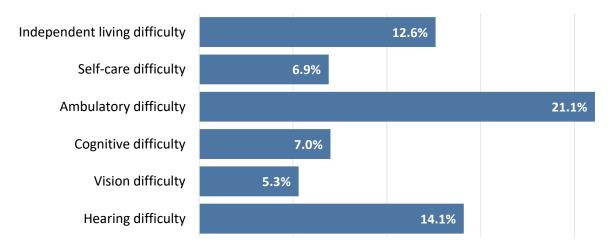
Veteran Status

More than 15 percent (15.5) of Lorain's older adults have veteran status. Approximately 10,000 veterans age 65 and older currently live in Lorain County. Many veterans are able to access health care and aging services through the VA Administration, though some may also choose to enroll in Medicare for health insurance.

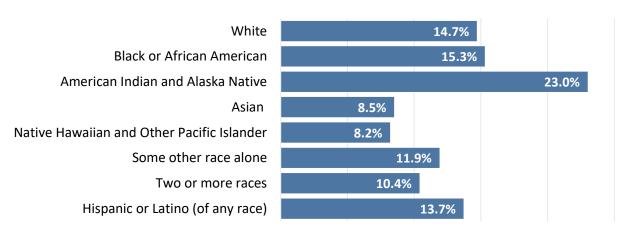
Disability Status

Of the total number of those who are 65 and older living in Lorain, 34 percent live with a disability. The most common type of disability is ambulatory difficulties, followed by hearing difficulties and independent living difficulty. Disabilities occur at similar rates for males and females, affecting 14.1 percent and 14.9 percent of the population respectively.

Disability Types in Adults 65+



Percent of Population with a Disability by Race



Health Insurance

The majority of Lorain's 65 and older population are insured (99.6 percent), with most of those adults insured through Medicare.

Medicare Part A generally covers in-patient care in a hospital, skilled nursing facility care, nursing home care (not including custodial or long-term care), hospice care, and home health care.³ Medicare Part B covers services that fall into two specific category types: those that are medically necessary to diagnose or treat a patient's condition and those that are preventive. Part B can include things like clinical research, ambulance services, or mental health services among others.⁴

³ Centers for Medicare and Medicaid Services. (n.d.). What Part A covers. https://www.medicare.gov/what-medicare-covers/what-part-a-covers

⁴ Centers for Medicare and Medicaid Services. (n.d.). What Part B covers. https://www.medicare.gov/what-medicare-covers/what-part-b-covers

Medicare does not cover all health-related services. Long-term care, most dental care, eye exams related to prescribing glasses, dentures, cosmetic surgery, acupuncture, hearing aids and exams for fitting them, or routine foot care are not covered in original Medicare but may be covered through a Medicare Advantage plan or a Medigap plan.

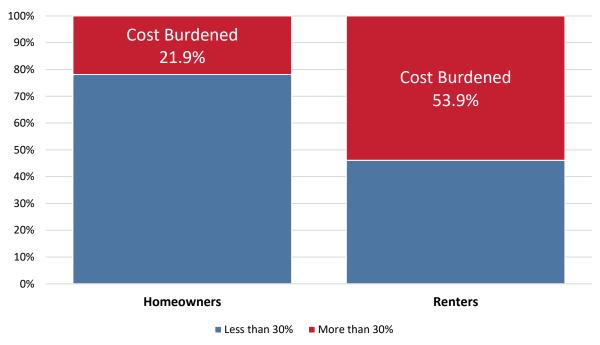
Household Mobility and Make-up

Housing mobility is low among older residents of Lorain County. Most residents ages 60 and older (95 percent) lived in the same house in the past year. More than half (56 percent) of older adults in Lorain live with someone else while 40 percent live alone. Older adults living alone rely on friends, family, and community programs to maintain social connections. These social connections decrease the likelihood of older adults experiencing elder abuse and self-neglect. About 3 percent of Lorain's older adults have grandchildren living with them, and 1 percent are responsible for providing care for their grandchildren.

Housing Affordability

A large majority (82 percent) of older adults are homeowners in Lorain, while 18 percent of older adults rent their homes. A household is considered "cost burdened" if they spend 30 percent or more of their income on housing, including utilities. Twenty-two percent of older adult homeowners are cost burdened. Conversely, older adults who rent in the county have more difficulty with housing costs, and 54 percent of older adults renting their homes are cost burdened.

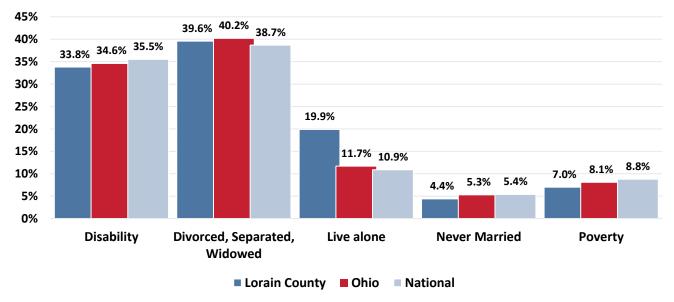
Cost Burdened Older Adults (Ages 60+) in Lorain



Risk of Social Isolation

According to the state profile of America's Health Ranking Senior Report, Ohio ranks 35th among all states in risk of older adults experiencing social isolation. Within Lorain County, indicators that factor into an overall social isolation index are lower on all but one measure when compared to the state. A higher percentage of older adults live alone in Lorain County than the state as whole. Over one-third of adults 65 and older (33.8 percent) in Lorain County are living with a disability. This number is slightly lower than the percentage of Ohio seniors (34.6 percent) and those nationally (35.5 percent) living with a disability. Nearly 40 percent of seniors 65 and older in the county are divorced, separated, or widowed. The percentage is similar to that of Ohio (40.2 percent) and the nation (38.7 percent). One-fifth of seniors in this age group live alone in Lorain. This number is higher than that of Ohio (11.7) and the country as a whole (10.9 percent). A little over 4 percent of residents of Lorain County who are 65 and older have never been married. Both Ohio older adults and those nationally have a slightly higher percentage of those who have never been married, at a little more than 5 percent. Adults in this age bracket also make up a slightly smaller proportion of those in poverty in Lorain than in the state of Ohio and nationally.



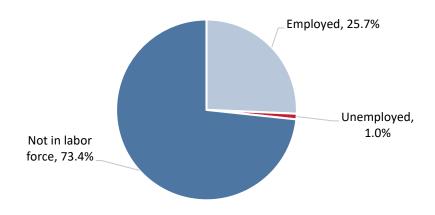


Employment

Close to three-quarters (73.4 percent) of Lorain County older adults are not in the labor force. Those who are classified as being in the labor force include those who are employed and those who are unemployed but are actively looking for a job. More than a quarter (25.7 percent) are employed and 1 percent are unemployed.

⁵ Bureau of Labor Statistics. (2021). Concepts and Definition. https://www.bls.gov/cps/definitions.htm#laborforce

Employment of Lorain Older Adults (Ages 60+)

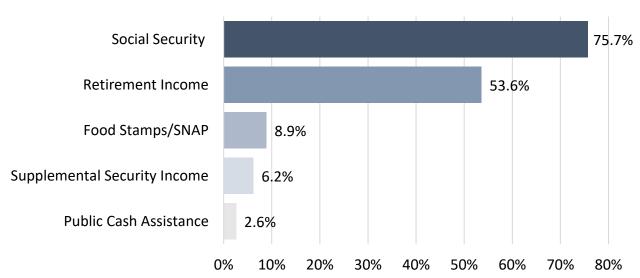


Household Income and Poverty

Lorain County older adult households (60+) have a median annual household income of \$47,455. Sources of household income are varied.

- 75.7 percent report Social Security Income
- 53.6 percent report retirement income
- 46.8 percent report income from employment
- 8.9 percent receive SNAP benefits
- 6.2 percent report Supplemental Security Income
- 2.6 percent receive Cash Public Assistance

Income by Type for Lorain Older Adults (Ages 60+)



The Federal Poverty Level threshold for 2019 was \$12,490 annually for a one-person household. Based on that threshold, more than 8 percent, or roughly 1 in 10 people 60 and older in Lorain County live in poverty. Another 7 percent are poverty adjacent, or between 100 to 150 percent (<\$18735) of the federal poverty line.

1 in 7 older adults (60+) in Lorain County is living in poverty or is poverty adjacent



Access to Food

According to Feeding America's Map the Meal Gap tool, the projected food insecurity rate for Lorain County in 2020 was 16.5 percent, 4 points higher than the 2019 rate of 12.4 percent. Fortunately, the projected rate for 2021 is lower than during the height of the COVID pandemic, with a projection of 13.5 percent rate of food insecurity. Prior to COVID-19, 12.4 percent of all Lorain County residents were food insecure and 8 percent had limited access to healthy foods. According to Feeding America, the average meal cost for Lorain County was \$3 and the annual food budget shortfall for the county was \$19,556,000. This shortfall represents the additional dollar amount needed within the county over a 7-month period to purchase enough food for food-insecure households. Seven months is the average number of months that households experience food insecurity in a year.

Lorain County Access to Food			
Lorain County			
Access to Food	Food Insecure	12.4%	
	Limited access to healthy foods	8%	
	Average meal cost	\$3.00	
	Annual food budget shortfall	\$19,556,000	
Source: 2020 County Health Rankings and Feeding America Map the Meal Gap project. ⁶			

⁶ 2020 County Health Rankings. (2021). Health Behaviors section. https://www.countyhealthrankings.org/app/ohio/2021/rankings/lorain/county/outcomes/overall/snapshot; Feeding America. Food Insecurity in Lorain County: Before COVID-19. https://map.feedingamerica.org/county/2019/overall/ohio/county/lorain

Transportation

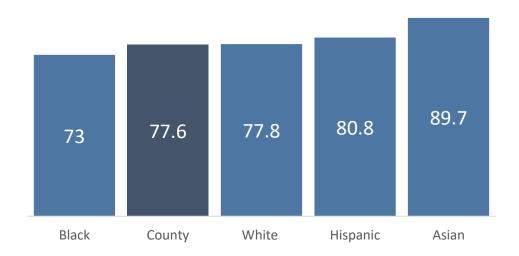
The Center for Neighborhood Technology's AllTransit database provides metrics examining the social and economic impacts of transit across the U.S.⁷

Lorain County scored a 0.6 on a 10-point scale for public transit access in 2019 and a 0 for transit connectivity. (For reference, Summit County scored a 3.4 for public transit access and a 2 for connectivity.). Less than 1 percent of commuters use public transportation, and a little more than a fifth (22.3 percent) of households live within a half mile distance of public transportation. Public transportation is only available in the cities of Lorain, Elyria, and parts of Sheffield. Oberlin has an ondemand transit service available in Oberlin and parts of bordering communities. The majority of Lorain County households own a car (93.2 percent). This data is substantiated by the popular "Walk Score" tool, which evaluates walkability and transportation options in geographies across the United States. The three largest cities in Lorain County—Lorain, Elyria, and North Ridgeville—are all rated as "Most errands require a car" or "Almost all errands require a car."

Life Expectancy

The average life expectancy in Lorain County was 77.6 years in 2020. Asian residents in Lorain County had the highest life expectancy of close to 90 years. Hispanic/Latino individuals had the second highest at almost 81 years of life. White residents in Lorain had a life expectancy of over 77 years, while Black residents had the lowest life expectancy at 73 years.



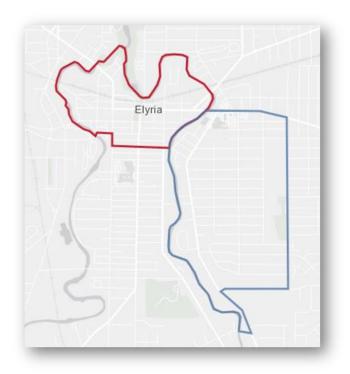


⁷ Center for Neighborhood Technology. (2019). About the Data. https://alltransit.cnt.org/about-the-data/; AllTransit Metrics. https://alltransit.cnt.org/metrics/

⁸ Center for Neighborhood Technology. (2019). County: Lorain, OH. https://alltransit.cnt.org/metrics/?addr=lorain+county#quality; Center for Neighborhood Technology. (2019). County: Summit, OH. https://alltransit.cnt.org/metrics/?addr=summit+county

⁹ Walk Score. (2021). About Walk Score. https://www.walkscore.com/about.shtml

Life expectancy throughout the county varies widely, and often mirrors maps showing racial demographics. Black life expectancy is nearly five years less than white life expectancy in Lorain County. Hispanic people have the highest life expectancy, consistent with national trends. There are life expectancy disparities between neighborhoods that are close in proximity. For instance, Downtown Elyria (outlined in red) is 22 percent Black/African American and 8 percent Hispanic/Latinx with an overall life expectancy of 64.8 years. Conversely, the Eastern Heights neighborhood (outlined in blue) is 87 percent white, with an overall life expectancy of 80.2 years. ¹⁰



Chronic Health Conditions

The two most prevalent chronic health conditions in adults 65 and older in Lorain County, are hypertension and hyperlipidemia. Over 60 percent of Lorain older adults have hypertension, and over 50 percent have hyperlipidemia. Other prevalent health conditions among older residents include arthritis (38.4 percent), ischemic heart disease (30.6 percent), diabetes (26.3 percent), and chronic kidney disease (25.8 percent).

¹⁰ https://www.communitysolutions.com/wp-content/uploads/2021/08/Racial-Disparaties-in-Lorain-County.pdf

Chronic Health Conditions, Ages 65 and older Lorain County					
	Lorain County	Prevalence amongst Beneficiaries (n=33,409)			
	Hypertension	61.2%			
	Hyperlipidemia	53.1%			
	Arthritis	38.4%			
	Ischemic Heart Disease	30.6%			
	Diabetes	26.3%			
	Chronic Kidney Disease	25.8%			
	Depression	19.9%			
	COPD	14.5%			
	Heart Failure	14.2%			
Chronic	Alzheimer's Disease/Dementia	10.4%			
Chronic Health	Atrial Fibrillation	10.2%			
Conditions	Cancer	8.9%			
	Osteoporosis	6.8%			
	Asthma	4.7%			
	Stroke	4.7%			
	Schizophrenia and Other				
	Psychotic Disorders	2.4%			
	Drug/Substance Abuse	2.4%			
	Alcohol Abuse	2.1%			
	Hepatitis (Chronic Viral B & C)	0.5%			
	Autism Spectrum Disorders	0.2%			
	HIV/AIDS	0.1%			
Source: Centers for Medicare and Medicaid Services ¹¹					

¹¹ Centers for Medicare and Medicaid Services. (2021). Dashboard. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/CCDashboard

Leading Causes of Death

in 2019, the top two leading causes of death in Lorain for adults 65 and older were diseases of the heart and malignant neoplasms, another name for cancerous tumors. ¹² The majority of deaths in the county were due to both causes, with 535 deaths caused by heart disease and 513 deaths caused by malignant neoplasms.

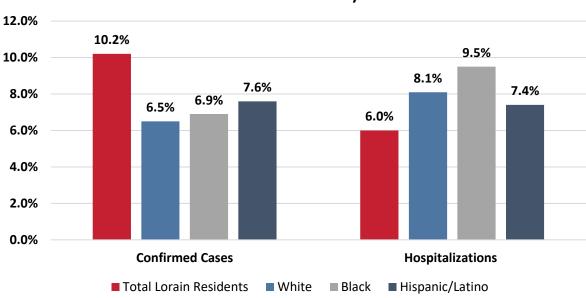
Leading Causes of Death, Ages 65 and Over Lorain County				
	Lorain County 65+	Deaths	Crude Rate (Per 100,000)	
	Diseases of heart	535	919.3	
	Malignant neoplasms	513	881.5	
	Chronic lower respiratory diseases	201	345.4	
	Cerebrovascular diseases	168	288.7	
	Alzheimer disease	106	182.1	
	Accidents (unintentional injuries)	86	147.8	
	Diabetes mellitus	74	127.2	
	Parkinson disease	54	92.8	
Leading Causes of	Nephritis, nephrotic syndrome and nephrosis	50	85.9	
Death	Influenza and pneumonia	41	70.5	
	Essential hypertension and hypertensive renal disease	35	60.1	
	Septicemia	33	56.7	
	Chronic liver disease and cirrhosis	21	36.1	
	Pneumonitis due to solids and liquids	19	Unreliable	
	In situ neoplasms, benign neoplasms of uncertain or unknown behavior	18	Unreliable	
Source: Centers for Disease Control and Prevention ¹³				

 $^{^{12}}$ National Cancer Institute. Neoplasm. $\underline{\text{https://www.cancer.gov/publications/dictionaries/cancer-terms/def/neoplasm}}$

¹³ Centers for Disease Control and Prevention. (2021). CDC Wonder. https://wonder.cdc.gov/

COVID-19 Case Data

As of September 20, 2021, 10 percent of Lorain's residents had confirmed cases of COVID-19, with a total of 31,241 cases. Six percent of confirmed cases resulted in hospitalization, while 2 percent were fatal. Out of the total population of white residents in the county (271,338), close to 7 percent had confirmed cases of COVID-19 and 8 percent of those with cases resulted in hospitalization. Seven percent of the 33,612 Black residents in Lorain also had cases of COVID-19, and close to 2 percent of those cases required hospitalization. Close to 8 percent of the 30,628 Lorain residents of Hispanic/Latino descent had COVID-19, and a little over 7 percent of them had to be hospitalized.



COVID-19 Case Data by Race

Source: The Ohio Department of Health COVID-19 Dashboard¹⁴

(***Note: The above data was accessed on September 20, 2021)

COVID-19 Vaccination Data

As of October 4, 2021, an estimated 58.1 percent of the population of Lorain County had received, or had started to receive, a COVID-19 vaccination. This put Lorain County slightly ahead of Ohio's statewide vaccination rate of 54.2 percent. Fortunately, vaccination rates were significantly higher for older adults in Lorain County:

- Adults 65-69: 85.9 percent vaccinated
- Adults 70-74: 92.5 percent vaccinated
- Adults 75-79: 91.7 percent vaccinated
- Adults 80+: 84.1 percent vaccinated

¹⁴ Ohio Department of Health. (2021). COVID-19 Dashboard. https://coronavirus.ohio.gov/wps/portal/gov/covid-19/dashboards/overview

AARP Livability Index

The AARP Livability Index measures seven categories to calculate an overall average score of livability for neighborhoods, cities, counties, or states on a scale from 0 to 100. Scores for cities, counties, and states are an average of the scores of all the neighborhoods within its boundaries. The seven categories included in a total index score are as follows:

- Housing: measuring its affordability and accessibility
- Neighborhood: measuring factors such as convenience in access to jobs, grocery stores, and recreation
- Transportation: measuring accessibility to safe, convenient, and low-cost options
- Environment: measuring air and water quality
- Health: measuring residents' healthy behaviors, and accessibility and quality of health care
- Engagement: measuring factors that influence interaction, such as internet access and civic and social engagement
- Opportunity: measuring degree of inclusion and diversity in opportunities provided to residents On the index, Lorain County received a score of 52, which is slightly above the average community score of 50. AARP rates the following categories of livability in Lorain County as less than average: Housing (47), Transportation (46), and Health (45). AARP scored the remaining categories for Lorain County as higher than average: Neighborhood (52), Environment (58), Engagement (52), and Opportunity (66).

AARP Livability Index: Lorain County				
Categories Scored Below Average (50)			_	ed Above Average 50)
	Housing 47			Neighborhood 52
(1)	Transportation 46			Environment 58
Ô	Health 45			Engagement 52
Source: AARP	Livability Index ¹⁵		;; (\$) ;;	Opportunity 66

¹⁵ AARP Livability Index. (2018). Location Results: Current Location—Lorain County, OH. https://livabilityindex.aarp.org/search#Lorain+County+OH+USA

PRIMARY DATA COLLECTION

Survey Analysis

In collaboration with the Lorain County Office on Aging, the Center for Community Solutions developed a survey to assess the needs of older adults in Lorain County. (Appendix A) Surveys were available to complete both on paper and online. Most paper surveys were distributed through a randomized mailing. The Lorain County Board of Elections voter registration database was accessed to randomly select 2,000 residents of Lorain County ages 60 and over. Oversampling in selection of residents who received the mailed survey occurred in zip codes with higher rates of residents who are Hispanic/Latino and residents living at or below 100 percent of the federal poverty level. This was done as an attempt to increase the likelihood of hearing from these populations who have been traditionally underrepresented. The survey was translated into Spanish using a certified translator. Paper copies of the survey were distributed by LCOOA to multiple partner agencies, including to El Centro, which provided the Spanish survey to clients. (Appendix B)

Links were created for an online version of the paper survey. Two separate links were created, one for social media and one for email distribution. LCOOA shared the social media link on Facebook and the post was shared seven times by their followers. An email was originally sent to 559 known contacts of LCOOA. How many times the email link was forwarded is unknown.

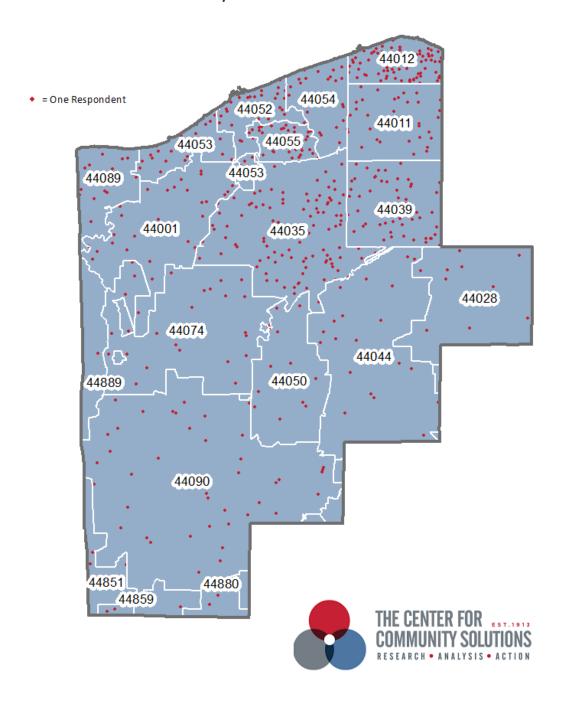
Method of Survey Distribution	Completed Surveys
Paper Survey	434
Email Link	141
Social Media Link	105
Total Surveys	680

LCOOA staff administered a shortened version of the survey over the phone to 83 clients of home-delivered meals. These results were analyzed separately from the longer-form survey.

Respondents from every zip code in Lorain County completed the survey with a total of 680 valid surveys included in the final analysis. The number of responses needed to have a confidence level of 95 percent that the real value is within ±5 percent of the measured/surveyed value is 383. The total number of surveys completed far exceeds that number, and we can confidently conclude that the survey results are representative of the older adult community in Lorain County. The map on the following page shows the distribution of completed surveys by zip code. One dot represents one completed survey and is randomly placed within the zip code listed by the survey taker. In some instances, survey data was analyzed by southern and northern parts of the county. Respondents with zip codes 44001, 44011, 44012, 44035, 44039, 44052, 44054, 44055, and 44089 were considered to live in the northern part of the county. The southern part of the county includes respondents from the zip codes 44028, 44044, 44050, 44074, 44090, 44851, 44859, 44880, and 44889.

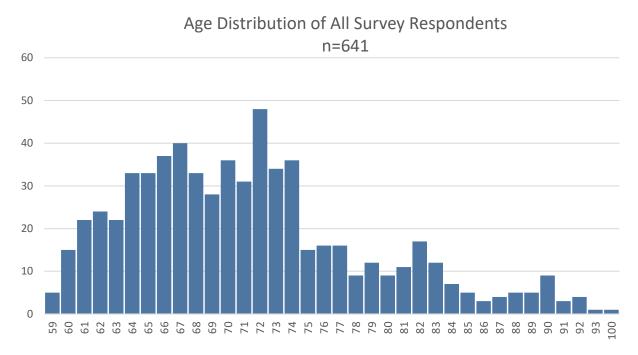
Respondents Clustered by Zip Code

In ZIP Codes that Touch Lorain County



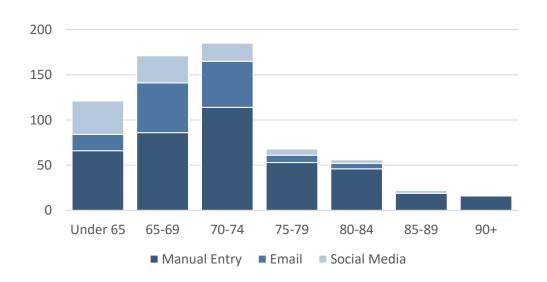
Demographics

Survey respondents comprise a range of ages, with the largest cluster from 64 to 74. Email and social media respondents who did not disclose their age on the survey were not included in the analysis. Paper surveys were distributed only to those known to be 60 or over, and the 39 survey respondents who responded on paper but did not disclose their age were included in the analysis.

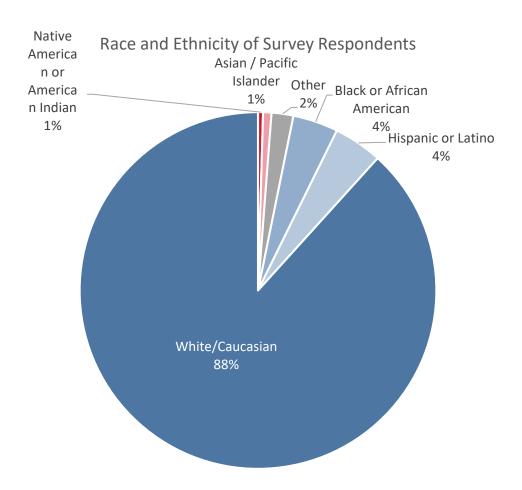


Respondents who completed the survey via email and social media were more likely to be under 75 than those who completed their survey on paper. This trend is consistent with that of internet connectivity of older adults in general.

Age of Respondent by Method of Survey Distribution n=641



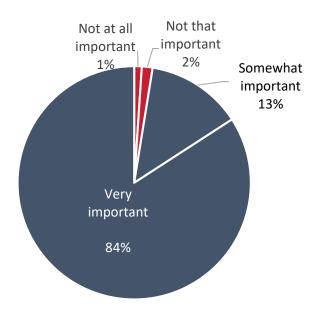
The race and ethnicity demographics of the survey respondents are similar to the demographics of all older adults in the county. A slightly lower percentage of survey respondents (4 percent) were Black compared to the overall population (5.9 percent) identifying as Black. Four percent of survey respondents indicated they were Hispanic/Latino. Two percent of survey respondents (17) indicated the primary language spoke in their homes was Spanish. The large majority indicated English as the primary language; a few respondents listed multiple languages including English.



Older adults throughout the country consistently indicate they wish to remain in their homes for as long as possible as they age. This trend holds true in Lorain County. Eighty-four percent of residents say staying in their homes as they age is very important, and another 13 percent feel it is somewhat important. Just 3 percent did not place importance on remaining in their home. Among home-delivered meal clients, over 95 percent say remaining in their homes is very important. A smaller majority of older adults say remaining in the county is important. Twenty percent do not feel remaining in Lorain County is important, even if they wish to remain in a home environment as they age. In order to remain in their homes, the majority of older adults will need some health or social supports to help them maintain their independence. These supports may come in the form of unpaid family caregiving, out-of-pocket paid care, or care provided by insurance or a subsidized program that provides support based on income eligibility.

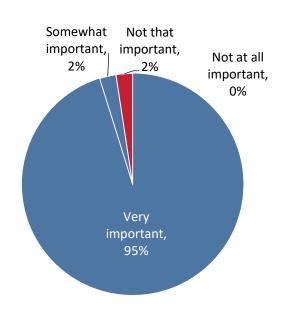
How important is it to you to be able to stay in your home as you age?

n=672

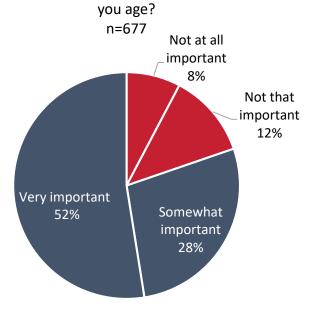


How important is it to you to be able to stay in your home as you age?

Home Delivered Meal Clients n=83



How important is it to you to be able to stay in Lorain County as

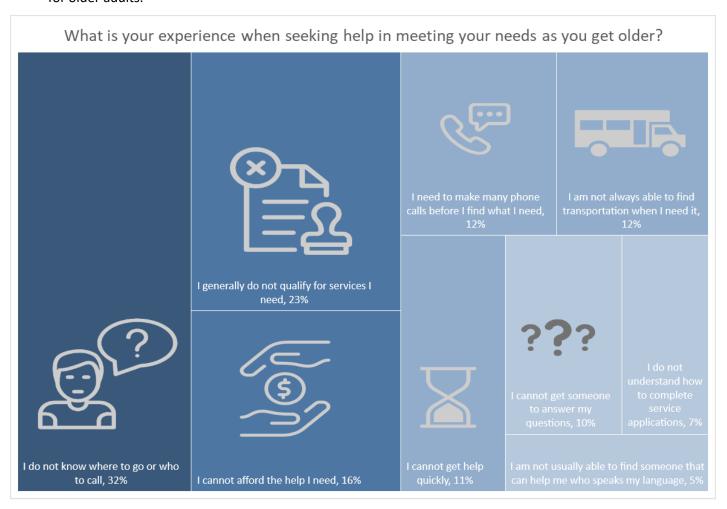


Aging Services

Lorain County Office on Aging offers a variety of supportive services that allow older adults to maintain their independence in a community-based setting. Commonly, people are unfamiliar with services until they or someone close to them seeks assistance. The most familiar service to older adult residents of Lorain County is Home Delivered Meals, followed by Assisted Transportation. The most commonly used service, according to survey takers, is the Senior Years Newspaper. Older adults have the least familiarity with Kinship Services, the Blue Sky Restaurant Program, and Options Counseling.

Aging Services offered by LCOOA	I am aware of this service but I have not used it personally	I have heard of this, but I do not know what it is	I have personally used this service	Not at all familiar
Benefits Assistance	22%	15%	6%	57%
Specialized Information & Assistance	19%	13%	4%	65%
Options Counseling	14%	12%	3%	70%
Home Delivered Meals	54%	15%	5%	25%
Blue Sky Restaurant Program	13%	8%	3%	76%
Senior Food Box Program	19%	12%	7%	63%
Emergency Food Pantry	35%	18%	7%	41%
Kinship Services	13%	7%	2%	78%
Homemaker Services	17%	12%	2%	69%
Assisted Transportation	39%	21%	3%	37%
Senior Years Newspaper	18%	8%	13%	61%
Retired and Senior Volunteer Program (RSVP)	23%	13%	3%	61%

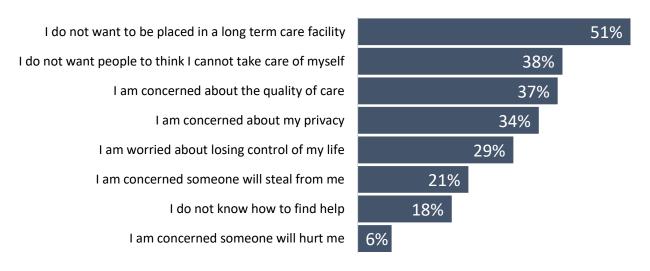
The most common challenge older adults in Lorain County face when seeking help with aging needs is not knowing where or whom to call, followed by not qualifying for the services they need. A smaller number of respondents indicated they do not understand how to complete service applications and are unable to find help in their language. The percentage of those who cannot find help in their language (5 percent) represents all the respondents who report speaking a language other than English in their home. This stat highlights a need for additional translation and interpretation services in Lorain County for older adults.



Respondents were also able to choose an "other" category and write in responses to this question. Twenty-eight chose to do so. A number of comments are related to home repairs and maintenance. For instance, one person indicates a lack of available people with plumbing skills who can provide assistance and other comments mentioned the difficulty of finding a handyman to help with small repairs. Yard maintenance is also mentioned as a service that is difficult to find. Other comments center around feeling frustrated and trying to access services that never materialize. A few people share that costs are increasing for everything yet they are not eligible for discount or assistance programs. Finally, several commenters share the support they receive from their retirement community and adult children but also share concern about the financial impact caregiving is taking on their family members.

Some older adults delay accessing services because they have fears related to acknowledging they need assistance. Over half of older adults indicate they do want to be placed in a long-term care facility. Over a third are worried about people thinking they cannot take care of themselves, the quality of care, and maintaining their privacy. Few people, just 6 percent, are concerned that someone will hurt them if they access aging services.

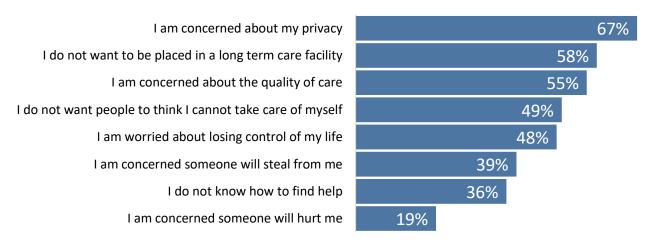
What concerns do you have about accessing services to support you as you age? n= 680



In general home-delivered meal clients have a higher rate of concern about accessing services to support them as they age. Compared to those who took the longer-form survey, the home delivered meal population is more concerned about their privacy and less concerned about people thinking they could not take care of themselves.

What concerns do you have about accessing services to support you as you age?

Home Deliverd Meal Clients n=83

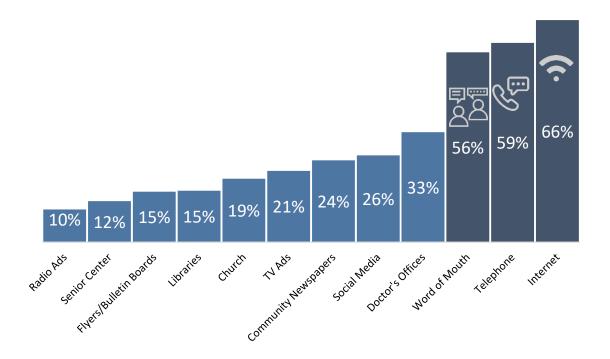


Aging Related Concerns					
		Long Form Survey	Home Delivered Meal Clients		
Being able to afford medical bills	الم	42%	33%		
The services you need being available		40%	34%		
Being able to afford prescriptions	+	39%	25%		
Access to the services you need	Finita	36%	29%		
Being able to afford services	S	36%	31%		

When asked what they are concerned about related to aging, 42 percent of older adults in Lorain County indicate they are very or extremely concerned about being able to afford medical bills and 39 percent say the same about affording prescriptions. Regarding aging services, 40 percent are very or extremely concerned about services being available, and 36 percent are concerned with both accessing and affording those services.

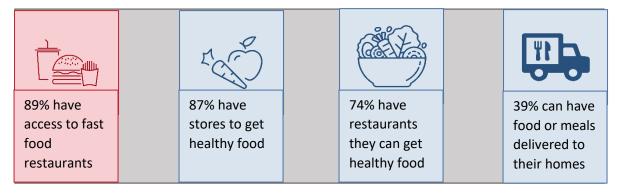
The most common way older adults identify and access community services in Lorain County is through the internet, followed by telephone and word of mouth. Eighty-eight percent of older adults in the county indicate they have access to the internet, most frequently accessed in their home. Just under 40 percent are using a smartphone or tablet to access the internet. Very few indicated accessing the internet at the library or a community/senior center, which is unsurprising, given that facilities were closed over the past year because of the COVID-19 pandemic.

What source do you use to identify and access community services?



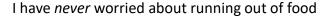
Just under a quarter (23 percent) of older adults are familiar with the Info Line 211, and of those familiar 17 percent have used the services. Senior centers and radio ads are the least commonly used mediums to access information about services.

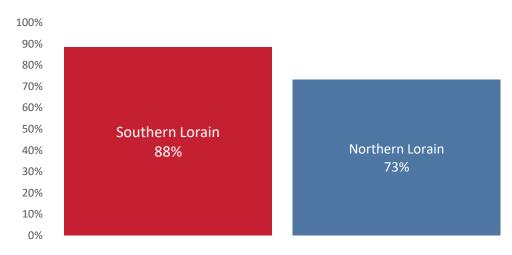
Nutrition



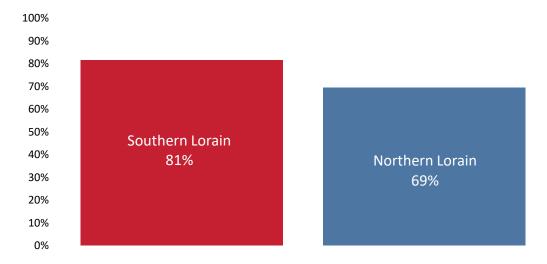
Three out of four older adults in Lorain County have never worried they would run out of food before they could get more. Older adults in northern Lorain County are less food secure than their southern Lorain counterparts. Eighty eight percent or those residing in the southern part of the county have never worried about running out of food compared to just 73 percent in northern Lorain. Across the county 11 percent said they do experience this worry sometimes but not every month. Five percent worry about running out food monthly, while 4 percent worry once or twice a year, and 3 percent worry every week

that they will run out of food. About 7 percent of older adults throughout the county report eating less than they should because they do not have money for food. The rate of eating less is higher in the northern part of the county with 8 percent reporting this experience and just 3 percent of the southern part eating less because they do not have enough money for food. Seventy-two percent of older adults across the county report they always eat healthy and balanced meals. However, the southern part of the county has higher access to consistent healthy and balanced meals compared to the northern part of the county. Just under a quarter of older adults in the entire county (23 percent) eat healthy meals sometimes, and under 5 percent do not heat healthy often.

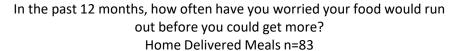


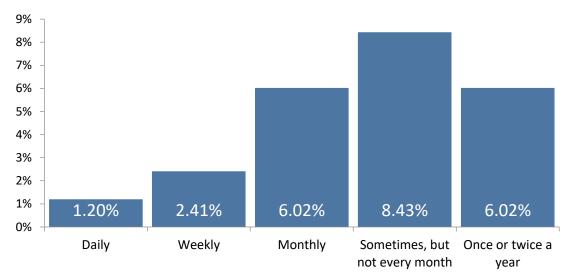


I am always able to eat healthy and balanced meals



Home-delivered meals allow for individuals who are not able to prepare meals for themselves to receive proper nutrition on a regular basis. Among home-delivered meal clients, 10 percent indicate that in the past year they have eaten less than they should have because they could not afford food. In the past 12 months, 25 percent of clients have worried about running out of food. Just over one-third of clients are always able to afford healthy and balanced meals, and 44 percent can afford them sometimes. Sixteen percent are rarely or never able to afford healthy and balanced meals.

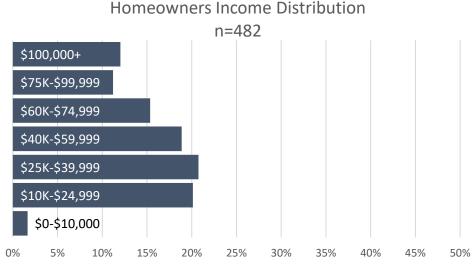




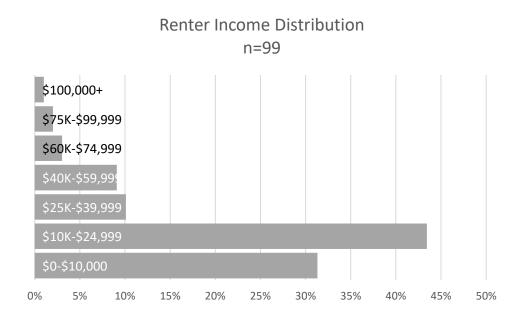
Enrolling in the Supplemental Nutrition Access Program (SNAP), commonly referred to as food stamps, is an effective way to increase access to healthy and affordable food. This program provides funds through an Electronic Balance Transfer (EBT) card that can be used on most food items (alcohol and hot prepared items are excluded). Twelve percent of survey takers are currently enrolled in SNAP; another 6 percent have not applied but would like to apply. A similar number of respondents have applied but did not qualify. Responding to a question about challenges encountered while applying for SNAP, more than a few survey participants indicate they are disappointed in the small amount of benefit they receive through the program and would like a higher benefit amount. Others share frustrations with the application process, noting difficulties with paperwork requirements, income eligibility guidelines, interactions with staff, and accessing information in their primary language if it is not English.

Housing

Proper nutrition is an important component of maintaining independence. Another important factor in remaining in one's home is access to safe, affordable, and accessible housing. Eighty-four percent of survey respondents are homeowners. In Lorain County, homeowners are more likely to be financially secure than their counterparts who rent. Over a third of homeowners have incomes of \$60,000 or higher, whereas just 6 percent of renters have incomes at that level. Three out of four renters in Lorain County over age 60 have incomes below \$25,000. Likely, renters within Lorain County are in more need of subsidized support services than homeowners.



Housing stability is greater for older homeowners in the county compared to those who rent. Seventeen percent of renters indicate they have been behind in their rent, and 16 percent worry they will receive an eviction notice. Just 5 percent of homeowners have been behind in their mortgage, and 4 percent are concerned about losing their homes to foreclosure.



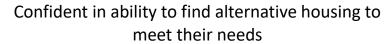
Housing Stability for Renters				
I have been behind in rent	17%			
I worry I will receive an eviction notice	16%			
My landlord has threatened to evict me	13%			
I have received an eviction notice	9%			
I have been evicted	8%			

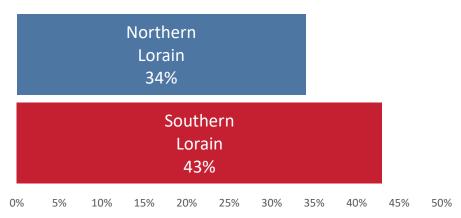
Housing Stability for Homeowners		
I have been behind in my mortgage	5%	
I worry I will lose my home to		
foreclosure	4%	
I have received a foreclosure notice		
from my bank	2%	
I am in the process of foreclosure	1%	
I have lost my house to foreclosure	2%	

Although, as indicated above, some older residents have struggled with housing affordability, the majority of older adults indicate they are able to afford their current housing and their utilities. There was no difference in housing affordability between the northern and southern part of the county. Slightly more, about 4%, of northern residents indicated difficulty paying for utilities compared to their southern peers. While 85 percent of all older residents in the county report being able to maintain the inside of their home, only 43 percent agree they have affordable home repair contractors available to them. Seventy-two percent of residents are able to maintain the outside of their home, but just over half indicate having access to affordable seasonal services for outdoor maintenance.

Llana Maintanana O Affandabilitu		Dorgont that Agree
Home Maintenance & Affordability		Percent that Agree
I am able to afford my current		
housing		94%
_		
I am able to afford my utilities		91%
I am able to maintain the inside of		
my home		85%
•		3373
I have made, or plan to make,		
modifications to my home as I age		45%
Affordable home repair		
contractors who are trustworthy		
and do quality work		43%
I am able to maintain the outside		
of my home (lawn/snow removal,		
etc.)		72%
Seasonal services, such as lawn		- =,-
work or snow removal that are	<u> </u>	
	"	F10/
affordable		51%

Twenty-one percent of older residents do not believe they could find alternative housing if they had to leave because of health or mobility issues, and 44 percent are not sure if they could find alternative housing. Together, that makes 65 percent of the older adult population in the county without a plan for adjusting their future housing needs should their health and mobility change. A smaller percentage of residents in the northern part of the county (34 percent) indicate they are confident they could find alternative housing compared to those who live in the southern part of the county (43 percent).



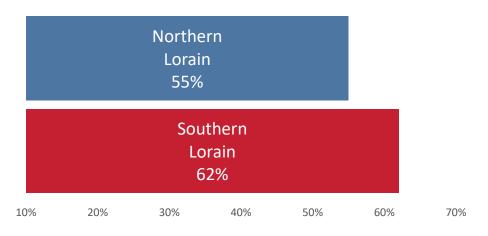


Residents who are confident they can find alternative housing most often list a family member's home as a place they would relocate to if health or mobility needs necessitate a move.

Safety

Safety from crime is also a consideration for older adults planning to remainin the community. Eight percent of survey takers indicate they have been a victim of crime in the community, and 12 percent are fearful they will be victims of crime. Throughout the county, older adults report that connections to

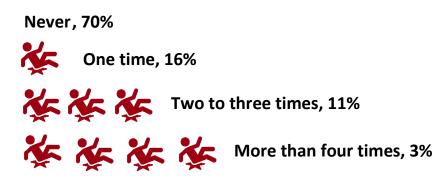
Community connections make them feel safe and protected



their community make them feel safe and protected. This is true for a higher percentage of older adults in southern Lorain, 62 percent, than those residing in northern Lorain, 55 percent.

An overwhelming majority, 97 percent, of older adults in Lorain County feel safe in their home, however 1 in 4 are concerned about accidents and falls within their home. Thirty percent of older residents have experienced at least one fall in their home in the past twelve months.

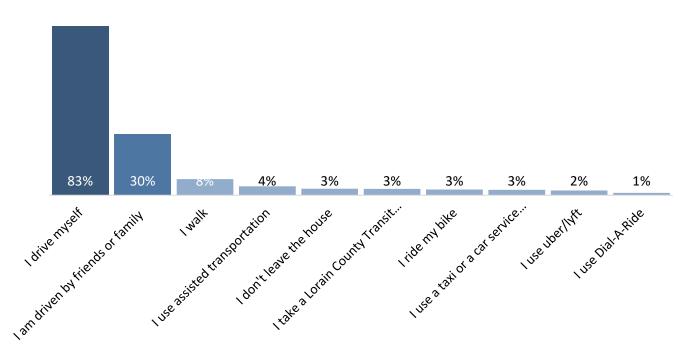
How many times have you fallen in your home?



Transportation

Being able to access the amenities of the community beyond one's home is dependent on access to transportation. In Lorain County, 83 percent of older adults drive themselves to complete errands, go to medical appointments, and attend events. Thirty percent of the older adults rely on friends or family members to drive them around, and 8 percent walk. A small percentage of older adults use other methods, such as Lorain County Transit Bus, assisted transportation, a bicycle, or a private car service.

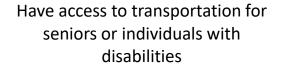
Usual way of running errands, getting to medical appointments, or attending events?

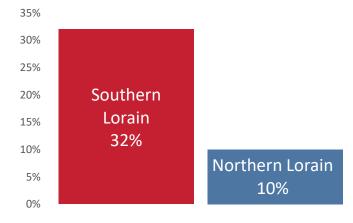


Sixty-five percent of older adults report they have no difficulty getting around. For the 35 percent who do face challenges, 11 percent report that public transportation does not take them where they want to go. Respondents cite this as their most common transportation-related challenge. Only 15 percent describe public transportation as being affordable, reliable, and convenient. Difficulty finding rides to appointments outside of Lorain County (6 percent) is the second most common challenge related to transportation respondents report. Of the home-delivered meal participants, 14 percent say they always have difficulty getting places and 26 percent sometimes have problems. Sixty percent of home-delivered meal participants rarely or never have difficulty getting around.

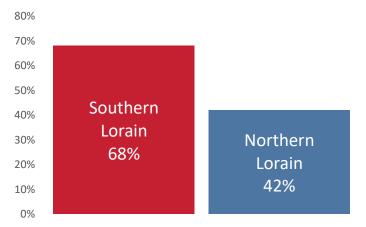
Do you have the following where you live?	Yes	Not Sure	No
Affordable, reliable, and convenient public transportation	15%	38%	47%
Special transportation for seniors or individuals with			
disabilities	25%	60%	14%
Well-maintained streets	78%	5%	17%
Affordable and easy-to-use parking lots, spaces, and areas to			
park	76%	13%	12%
Sidewalks	67%	3%	29%

The southern part of the county has a higher percentage of older adults that lack access to public transportation but also report higher access to transportation services seniors and people with disabilities. Sixty seven percent of older residents in the northern part of the county report no trouble getting around which is lower than the 72 percent of those in the southern part of the county. There is no difference between the northern and southern parts of the county in accessing transportation for medical trips outside of the county.



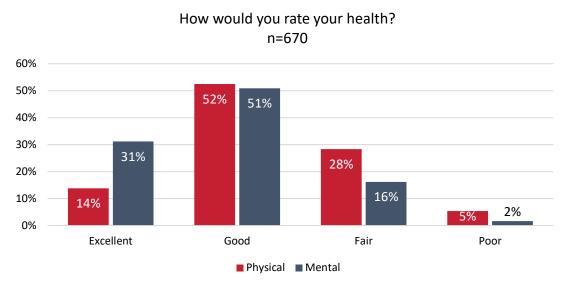


Lack access to affordable, reliable and convenient public transportation

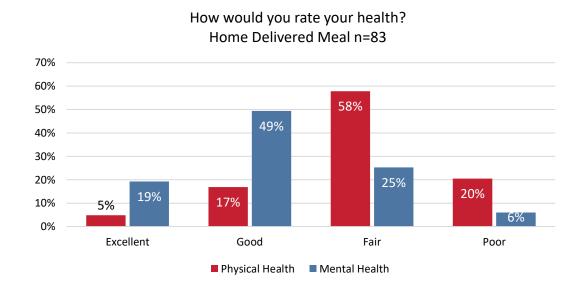


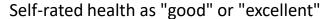
Health

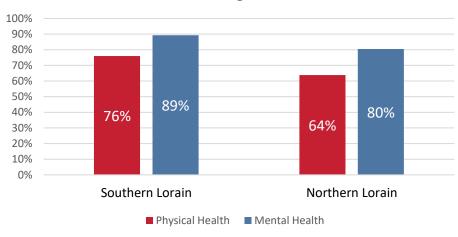
Two thirds of Lorain County older adults self-report they are in excellent or good physical health. Eighty percent of the population in this age group has been diagnosed with at least one chronic disease. Although just 18 percent rate their mental health as fair or poor, 29 percent indicate they sometimes feel depressed or wish they could get help with depression, and 4 percent feel this way frequently. During the COVID-19 pandemic and the periods of necessary isolation, more people of all age groups experienced feelings of sadness and loneliness than they had previously. The survey was largely completed as the Delta variant was beginning to surge and many people were restricting social interactions again. The variance in the 18 percent who report poor mental health and the 33 percent who would like help with depression may be a result of general discomfort caused by the unpredictable course of the pandemic. While many say they have good mental health overall, they may also be feeling what they hope to be a temporary sadness or depression related to current social conditions.



A higher percentage of older adults enrolled in the home-delivered meal program than the general population rated their health as poor (20 percent) or fair (58 percent). Mental health ratings were similar among both populations.



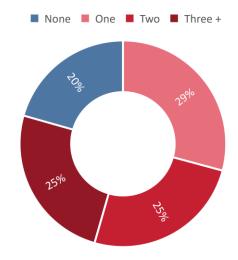




Older adults in southern Lorain County report a higher level of both physical and mental health than older residents of the northern part of the county. Thirty five percent of northern county older adults report feeling depressed or wishing they could get help with depression, compared to 26 percent of those living in the southern part of the county.

Thirteen percent of Lorain County older adults report they sometimes skip filling their prescription medications because of cost.

Number of Chronic Disease Diagnosis



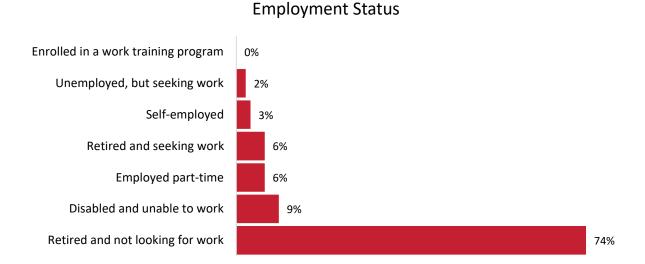
Throughout the county, 20 percent of older adults report having no diagnosed chronic illness. It appears those living in the southern part of the county are less impacted by chronic disease than those living in the northern part of the county. The percentage of those with no chronic disease is higher in the southern part of the county (31 percent) than in the northern part of the county (18 percent). Seventeen percent of southern residents report three or more chronic diseases while 26 percent of northern residents report having three or more diagnosed chronic diseases.

Elder Abuse

A small percentage of survey respondents (3 percent) indicate they have experienced elder abuse or neglect, and another 1 percent are not sure if they have. Elder abuse is generally believed to be underreported. Some people may not realize that being mistreated by family members or caregivers falls under the definition of elder abuse. Likely, this self-attestation of elder abuse is also an underrepresentation. Respondents cite the most common type of elder abuse as someone who was supposed to help with needs failing to do so. The second most common type they cite is being tricked into spending money they did not want to.

Employment

Nearly three quarters of older adults in Lorain County are retired and not looking for work. Another 9 percent are disabled and unable to work. Of the remaining 17 percent, 6 percent are employed part time and the same number are retired and seeking work. Just 3 percent are self-employed, and 2 percent are unemployed but seeking work. No survey takers report being enrolled in a work training program.



Of older adults currently working, most would like to retire in the next five years but may have to work longer for financial or other reasons. More than half say not enough jobs are available for those 60 and older.

Retirement plans for currently employed older adults	;
I expect to retire in the next five years	91%
For other reasons, I will work as long as I can	80%
For financial reasons, I need to work as long as I can	64%
There are not enough jobs available for people my age	61%
I want to retire now but need to keep working to get health benefits	45%
I expect to retire in the next ten years	29%
I plan to retire and also plan to, or would like to, start a new	
career	27%

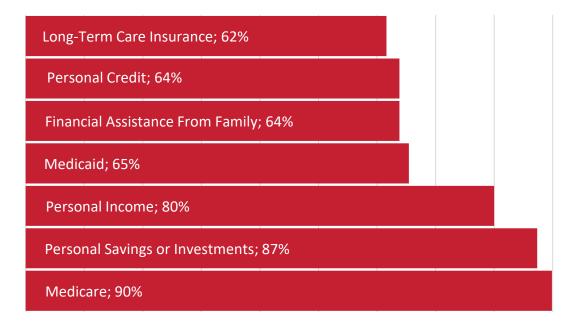
Funding of Aging Services

The survey asked respondents to identify their regular expenses from a list of common items and determine which they would decrease if necessary. The top five monthly expenses are all related to basic needs: groceries, utilities, prescriptions, health insurance, and medical bills. The top five areas older adults would make budget reductions in are groceries, restaurants, charitable giving, entertainment, and gifts.

The Administration for Community Living estimates that 70 percent of Americans age 65 and older will need some sort of long-term care services and supports as they age. Long-term care services range from unpaid family caregivers assisting with running errands to a long-term care facility providing full-time care. Many long-term care services and supports have a cost associated with them. Asked how they would pay for services as they age, 90 percent of respondents say Medicare. While Medicare will cover or partially cover many medical expenses, it covers very few long-term care or social support services.

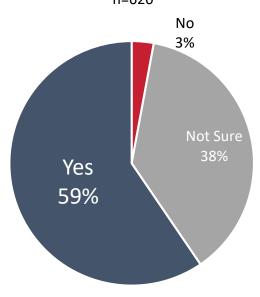
Regular Monthly Expenses					
Groceries	94%				
Utilities	90%				
Prescriptions	79%				
Health insurance	73%				
Medical bills	71%				
Over-the-counter medical expenses	68%				
Restaurant	67%				
Transportation expenses	58%				
Home maintenance expenses	57%				
Charitable giving	56%				
Entertainment	56%				
Gifts	49%				
Life insurance policy	48%				
Monthly subscriptions	41%				
Savings contributions	40%				
Investments	32%				
Gym membership	19%				
Home health care	16%				
Top areas people would cut expenses if					
necessary					

How will you pay for services as you age?



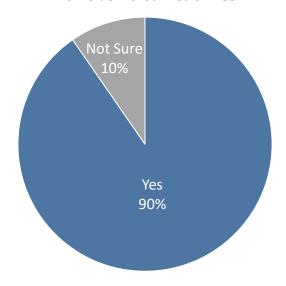
Asked if they believed more funding is needed for aging services, just 3 percent say no. While 38 percent say they are unsure, 59 percent of survey takers say yes.

Do you think more funding is needed for aging services? n=620



Recipients of home-delivered meals are more certain of a need for additional funding, with 90 percent agreeing it is necessary. Ten percent are not sure.

Do you think more funding is needed for aging services? Home delivered meals n=83



Focus Group Analysis

Across the country, 41.8 million adults currently provide care to a person who is over 50, up from 34.2 million in 2015. Caregivers span all demographic categories including race, age, income, education, family types, gender, and sexual orientation. Most caregivers provide care for a relative, while about 10 percent provide non-familial care. Care is provided for a wide variety of physical and mental conditions, and care provided ranges from assistance with housekeeping to complex hygiene and medical assistance. While nearly half of caregivers report that caregiving gives them purpose and meaning, caregiving also takes a toll on the caregiver. Many caregivers experience declines in physical and mental health, as well as a decrease in financial security. Counting the number of caregivers in a community is challenging, as many do not consider themselves caregivers—particularly those who are related to their care recipient and those who are unpaid. While the exact number of caregivers in Lorain County is unknown, thousands of hours of caregiving are no doubt provided in the community every day.

LCOOA highly values the contributions of unpaid family caregivers in the community. To gain a better understanding of their needs and the needs of their care recipients, four focus groups were held with caregivers providing care in Lorain County. A total of 16 people participated in the groups. The groups included male and female participants and represented a variety of caregiver relationships, including spouse, parents, and adult children. Three of the four focus groups were held at Memory Cafés, a program of A Dementia Friendly LIFE Foundation. Memory Cafés provide opportunities for caregivers of individuals with dementia and their care recipients to participate in structured activities, to socialize, and to receive peer support. Caregivers participated in the focus group, while their care recipients participated in an exercise or art therapy program. The fourth focus group was held at a community location and open to the public.

Caregivers are not prepared to take on the role of caregivers. Each focus group discussion opened with a question about whether caregivers felt prepared for the role of caregiver. And universally the answer was no. Caregivers say there is no true way to be prepared. One person describes their care recipient's decline as gradual but that with each decline they must re-learn what caregiving requires of them. Many caregivers share that they are particularly ill-prepared for the responsibilities directly related to providing care. Participants say tasks related to their care recipient's personal hygiene and medical care are the most challenging to master. They express a need for early stage hands-on training related to their care recipient's specific needs. Caregivers suggest hands-on training could be provided by a medical professional who is familiar with dementia and could anticipate some of the future care challenges.

Some caregivers express the challenges of suddenly being responsible for household management tasks their care recipient had previously handled. For instance, one person says that prior to their care recipient developing dementia, the recipient did all the grocery shopping and cooking. The caregiver now feels enormous stress and embarrassment in the difficulty of mastering these tasks on top of their new caregiving responsibilities. Another participant shares that their care recipient previously handled all the household finances. The caregiver feels overwhelmed by the tasks and concerned they will make costly mistakes.

Early diagnosis and immediate support can mitigate the impact of inability to prepare for caregiving. One member of the focus group says that while "every brain is different" and therefore every course of dementia is different, knowing what road you are traveling down is helpful. A diagnosis can provide that

roadway. Caregivers express the usefulness of hearing the experiences of others and the strategies they have engaged to get through challenges. They report that having a diagnosis led them to others in similar situation. A diagnosis offers some insight into prognosis, even though one cannot be fully prepared. Many caregivers share that receiving a diagnosis for their care recipient was surprisingly time consuming to navigate and difficult to obtain. Many say the guidance they received through support groups was helpful in navigating the process.

Changes in relationships are a part of the caregiving experience. Relationship dynamics necessarily change as one person becomes more dependent on the other. One caregiver compares their caregiving experience to parenting a toddler—except with toddlers you know things will get better and with a person with dementia you know they will get worse. Another caregiver describes the difficulties in getting their parents to admit the need for help and accepting such help from their adult child. After many attempts to take over some of their parents' household management duties that they were no longer able to safely complete, the caregiver found themselves frustrated and feeling defeated. They describe how they came to peace with the knowledge that they tried everything they could to make life better for their parents but could not force them to accept help. The caregiver says that a third party may have been more successful in getting their parents to accept assistance but the caregiver did not know where or how to access that kind of service.

The relationship between the caregiver and their other family members may also undergo transition. One caregiver describes feeling like they are being controlled by their children. When their care recipient—their spouse—received a dementia diagnosis, the couple's children moved them across the country to be closer to extended family. The caregiver describes family members making all the decisions about where and when they would move. They felt powerless knowing they would need to rely on the same family members for help with caregiving tasks.

Grief often accompanies the change in relationship. As caregivers observe and experience the changes in their interactions with their care recipient, they grieve the relationships they once had. One caregiver describes the sadness they experienced the day their spouse of over 40 years no longer recognized them. Even when they became a stranger to their spouse, all of the intimate caregiving duties persisted. Others describe knowing that someday their spouse will not recognize them and trying to gradually prepare themselves for that moment.

As relationship dynamics change, caregivers benefit from being able to share their experiences, frustrations, and grief. The Memory Café and other support groups offer the opportunity to share for those who participate in these groups. Continued investment into these programs and development of other support groups, as well as individual opportunities for emotional support are crucial for caregivers.

COVID impacted caregivers. The onset of the COVID-19 pandemic was challenging for many caregivers for varying reasons. One caregiver describes feeling like they needed to be extremely careful and limit all interactions with people outside their household. They describe worrying about what would happen if one of them contracted the virus and they would need to be separated. Their care recipient's communication has declined to the point that, while the caregiver still understands them, it is near impossible for others to glean meaningful information from conversation. They describe worrying about their care recipient being unable to understand what was happening without them present to ease their anxieties.

Others say they felt concern about the virus but also could not manage their caregiving responsibilities without assistance. They determined it was better for them to continue to bring in outside help from home health agencies or family members who lived outside their household. Doing so allowed them to continue caring for their care recipient at home, which was deemed safer than placing their care recipient in a long-term care facility—where outbreaks were common prior to the development of the vaccine.

Still others say they felt they were already so socially isolated from the nature of dementia/caregiving that they could not lose the little connection they had and so they continued to meet up with people. They continued to participate in social activities when they were available and sought out opportunities to be around others. Many felt relief when vaccinations became available and had both themselves and their care recipient receive the vaccine. A small number of participants in the focus group did not believe COVID-19 was a threat to themselves or their care recipients health and did not believe vaccines were necessary. Because they manage their care recipient's care, they did not allow them to be vaccinated and continue to engage in community activities, often without masks.

During health crises, public health departments and agencies that work with older adults should continue to provide guidance on how to best protect caregivers and care recipients. Consistent, clear information is useful to caregivers as they navigate decision-making for themselves and their care recipients. Departments and agencies should include caregivers, care recipients, and all older adults in their emergency preparedness plans. Resources must be allocated to developing and, if necessary, implementing these plans in the case of health crises, natural disasters, or large-scale emergencies.

Caregiving is Isolating, and caregivers rarely get a break from their responsibilities. Many caregivers describe the isolating nature of caregiving as surprising and depressing. As their care recipient needs higher levels of care, fewer people make themselves available to assist. The changing nature and declines in health status of the care recipient seem to deter even longtime friends and family members from socializing. Some caregivers also share the unwillingness of their recipient to engage in social activities. The care recipient's awareness of their cognitive or physical health declines, make them feel embarrassed and ashamed. To avoid those feelings, they avoid social functions. This often results in the caregiver missing functions as well. New social connections through support groups are invaluable to the caregivers who have been able to make those connections.

Asked about how they engage in caring for themselves or taking breaks from caregiving, many caregivers say they do not get to do this enough. Being a caregiver often means prioritizing the care recipient's needs over their own. A few say a lack of sleep contributes to their own health issues. Caregivers say they have difficulty taking a break because of the complications in getting another person to fully understanding the needs and communication styles of the care recipient. As one caregiver explains, "No one understands my mom like I do." Another shares that her spouse with dementia speaks a "nonsense" language. Being around her spouse 24/7 has allowed her to interpret the language, but she says that bringing a part-time caregiver into their world be near impossible.

Caregivers in Lorain County would like a respite program. Without being prompted, each group mentioned wanting a permanent respite program in Lorain County that could be accessed by any caregiver. Recently the Alzheimer's Association received funding to provide this type of programming, but just for one year. Those who have used the program describe the benefits of being able to take a break to attend their own medical appointments, visit with friends or family, exercise, or catch up on

sleep. Since the service is housed within the Alzheimer's Association caregivers express trust and peace of mind that the respite provider will have basic knowledge of dementia and how to care for those with dementia safely.

COST ANALYSIS OF LONG-TERM CARE IN LORAIN COUNTY

When their health status makes them eligible to receive care through a long-term care or a skilled nursing facility, people usually have the option of entering a facility or receiving care through home- and community-based services. Often family members are involved in the decision on how and where the individual receives care. While many older adults believe they will access Medicare for long-term care supports, Medicare does not fully cover long-term care supports and services. People generally have three options to cover the cost of long-term care: accessing Medicaid, private paying, or using long-term care insurance.

Long-Term Care Insurance

The least common way to pay for long-term care is through long-term care insurance. Policies for this type of insurance are sold on the private market and can vary greatly in cost and coverage. Policies may cover some or all of nursing home care, home health care, respite care, hospice care, personal care in the home, assisted living facility services, and adult day care center services. Premiums are based on age; the older an individual is when the policy is purchased, the higher the premiums. Polices typically have an elimination or deductible period in which the individual pays out of pocket for a set number of days. The benefit period can vary as well; the longer the period (up to lifetime), the greater the monthly cost. While this may be an option for those who can afford the premiums, only a small percent of Ohioans have long-term care insurance policies, and within a year of first accessing their benefits, most Ohioans reach their policy's coverage limits. Although 62 percent of survey respondents indicate they have long-term care insurance, they likely falsely believe their current health insurance includes long-term care and they do not carry a separate policy specifically for long-term care.

Private Pay

Individuals needing long-term care may use private funds to pay for care, either in a facility or in a home- and community-based setting. Upon needing care, individual's options for funds include using personal income, savings, investments, and contributions from outside sources, such as family members or charitable organizations. The need, level of care, and access to an unpaid caregiver will often determine the length of time an individual is able to private pay for their care. A majority of survey takers plan to pay for at least some long-term care through personal financial resources.

Medicaid

Over the past 15 years, Medicaid has shifted from primarily funding long-term care in long-term care facilities to funding waivers that provide long-term care in home- and community-based settings. The Ohio Department of Medicaid has aligned with the federal priority of balancing the number of older adults and adults with disabilities receiving care in the community and in long-term care facilities. This was achieved through the Federal Balancing Incentive Program, ¹⁶ which was implemented to increase the percentage of community-based services and decrease the percentage of facility-based services, Medicaid long-term care services and supports. In 2013, 42.7 percent of Medicaid long-term care funds were spent on community- and home-based supports, and by June of 2015, 56.8 percent of funds were spent on community supports. ¹⁷ As a result, the number of older results receiving home- and community-based services has increased in recent years, as they have been able to access Medicaid

¹⁶ https://www.medicaid.gov/medicaid/ltss/balancing/incentive/index.html

¹⁷ Balancing Incentive Program Ohio Dashboard, August 19, 2015

through the waiver program known as PASSPORT. PASSPORT waives the requirements to receive skilled nursing level of care in a facility.

To qualify for Medicaid long-term care, whether through a home- and community-based waiver, or through a long-term care facility, the individual must meet income and asset eligibility requirements. The income level for long-term care eligibility is referred to as the Special Income Level (SIL) and is set at 225 percent of the Federal Poverty Level (FPL). For 2020, this amount is \$2,392 monthly or \$28,710 annually. A Qualified Income Trust (QIT), also known as Miller Trust, allows individuals over the Medicaid Special Income Level to become financially eligible for long-term care services through Medicaid. Their income exceeding 225 percent of the FPL is placed in the trust, with the State of Ohio named as the sole beneficiary of the trust.

For an individual who receives care in a long-term care facility and is enrolled in Medicaid, the first \$2,392 of the individual's monthly income goes to the long-term care facility. The remainder of the monthly income is placed in the Miller Trust. Individuals are able to access \$30 from the trust for a personal allowance. Money from the trust is then used to reimburse the long-term care facility for the expense of caring for the individual. If money remains in the trust following the individual's passing, the remaining funds become assets of the state.

For an individual who receives long-term care through a home- and community-based Medicaid waiver, such as PASSPORT, the individual keeps the first \$2,392 of monthly income. This allows the individual to continue to cover the costs of housing and basic needs. Any income exceeding \$2,392 is placed into a Miller Trust and used to reimburse the agency administering the PASSPORT waiver for the care. If money remains in the trust following the individual's passing, the remaining funds become assets of the state.

In both instances of using Medicaid for long-term care, if the individual's cost of care was more than the amount in the Miller Trust, the state can recover costs through estate recovery. Many individuals are wary of estate recovery and opt to privately pay as long as possible to avoid risking the loss of transfer of wealth that occurs within families upon the passing of a homeowner. Asset limits of \$2,000 per individual also prevent some who would otherwise be income eligible for waiver programs from accessing this benefit.

Cost of Care

The cost of long-term care is very individualized, particularly in home- and community-based settings. Depending on the individual need and access to unpaid caregivers, an individual will purchase various services. The Genworth 2020 Cost of Care estimates the cost for homemaker health care, adult day care, assisted living facility, and nursing home care for U.S. Metropolitan Statistical Areas. Estimates were calculated for each region based on surveys and interviews of administrators of the various agencies providing care. The table below details the 2020 daily cost estimates for care in Elyria/Cleveland.

The daily rate for homemaker services is based on 6.25 hours of care per day. Adult day care typically covers six to eight hours of the day, and the assisted living facility rate is based on a private, one-bedroom unit. The level of service provided will vary greatly on the individual's need. The following model was developed to gauge the costs for various need levels and methods of paying for care. This

¹⁸ https://www.genworth.com/aging-and-you/finances/cost-of-care.html

model relies on three indices—The Elder Index, the Genworth Cost of Care Study, and Federal Poverty Level—to generate the amount of funds an individual will have remaining once basic needs and long-term supports are paid.

The Elder Index¹⁹ was developed in partnership with the Women's Policy Research, National Council on Aging and UMASS Boston. The index provides a basic needs budget localized to Lorain County. The index provides separate budgets for the health status of single and couples households, as well as three housing possibilities: with mortgage, without mortgage, and renting. The budget includes housing (utilities included), food, transportation, health care and miscellaneous expenses.

SINGLE 65+							
ELDER INDEX BUDGET							
	Monthly	Annual				Health	
Poor Health	total	total	Housing	Food	Transportation	Care	Misc
Renter	\$2,066	\$24,792	\$692	\$272	\$244	\$583	\$275
Homeowner with Mortgage	\$2,596	\$31,152	\$1,222	\$272	\$244	\$583	\$275
Homeowner without							
Mortgage	\$1,849	\$22,188	\$475	\$272	\$244	\$583	\$275
	Monthly	Annual				Health	
Good Health	total	total	Housing	Food	Transportation	Care	Misc
Renter	\$1,865	\$22,380	\$692	\$272	\$244	\$382	\$275
Homeowner with Mortgage	\$2,395	\$28,740	\$1,222	\$272	\$244	\$382	\$275
Homeowner without							
Mortgage	\$1,648	\$19,776	\$475	\$272	\$244	\$382	\$275
	Monthly	Annual				Health	
Excellent Health	total	total	Housing	Food	Transportation	Care	Misc
Renter	\$1,770	\$21,240	\$692	\$272	\$244	\$287	\$275
Homeowner with Mortgage	\$2,300	\$27,600	\$1,222	\$272	\$244	\$287	\$275
Homeowner without							
Mortgage	\$1,553	\$18,636	\$475	\$272	\$244	\$287	\$275

COUPLE 65+ ELDER INDEX BUDGET							
Poor Health	Monthly total	Annual total	Housing	Food	Transportation	Health Care	Misc
Renter	\$3,153	\$37,836	\$692	\$498	\$375	\$1,166	\$422
Homeowner with							
Mortgage	\$3,683	\$44,196	\$1,222	\$498	\$375	\$1,166	\$422
Homeowner without							
Mortgage	\$2,936	\$35,232	\$475	\$498	\$375	\$1,166	\$422

¹⁹ www.basiceoncomicsecurity.org

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Good Health	Monthly total	Annual total	Housing	Food	Transportation	Health Care	Misc
Renter	\$2,751	\$33,012	\$692	\$498	\$375	\$764	\$422
Homeowner with Mortgage	\$3,281	\$39,372	\$1,222	\$498	\$375	\$764	\$422
Homeowner without Mortgage	\$2,534	\$30,408	\$475	\$498	\$375	\$764	\$422
		,					
	Monthly	Annual				Health	
Excellent Health	total	total	Housing	Food	Transportation	Care	Misc
Renter	\$2,561	\$30,732	\$692	\$498	\$375	\$574	\$422
Homeowner with							
Mortgage	\$3,091	\$37,092	\$1,222	\$498	\$375	\$574	\$422
Homeowner without							
Mortgage	\$2,344	\$28,128	\$475	\$498	\$375	\$574	\$422

The Genworth Cost of Care Study provides estimates of various services for long-term care needs, localized to a region that includes the Elyria Cleveland region. This region is the most closely aligned with Lorain County. For the purpose of the study, the definitions of the service are as follows. Homemaker services include assistance with shopping, finances, cooking errands, transportation, and companionship. Homemaker Health Aide services may help with bathing, dressing, transferring, and toileting, but do not include services that require a skilled nurse. Adult Day Health Care are structured programs in a protective setting that meet the needs of adults who are functionally or cognitively impaired. Assisted Living Facilities range from providing basic care to more substantial care, in a onebedroom unit. Nursing Homes are Medicare-certified nursing facilities with both private and semiprivate rooms.20

Elyria/Cleveland Cost of Long-Term Care Services							
Service	Hourly Cost	Daily Cost					
Homemaker Services	\$22.88	\$143.00					
Home Health Aide	\$23.13	\$145.00					
Adult Day Health Care	-	\$58.00					
Assisted Living Facility	-	\$130.00					
Semi Private Room	-	\$258.00					
Private Room	-	\$288.00					

²⁰ https://pro.genworth.com/riiproweb/productinfo/pdf/131168.pdf

Home and Community Based Care

From the Genworth study daily rates, various home-based care scenarios and associated costs were developed. These represent possible combinations of paid care an individual and family may arrange to receive while living in a community-based setting.

		Weekly	Monthly	Annual
Care Option	Service Combination	Cost	Cost	Cost
Adult Day & Homemaker	Two days homemaker, four days homemaker health aide, three days			
Combination	adult day health care	\$1,040	\$4,160	\$49,920
Adult Day Care on Weekdays				
& Homemaker Health Aide on	Five days adult day health care, two			
Weekends	days homemaker health aide	\$580	\$2,320	\$27,840
Homemaker Services as	Seven days homemaker health aide,			
Primary Caregiver	three days homemaker	\$1,444	\$5,776	\$69,312
Homemaker Health Aide on				
Weekdays & Weekend Family				
Caregiver (unpaid)	Five days homemaker health aide	\$725	\$2,900	\$34,800

The service combinations added to the elder index budget provide a very rough estimate of what an individual might expect to pay as they require in-home aging services and supports. Comparing these costs to various income levels offers a look at how well or not a household will be able to afford the care they need. The "break even" table below lists out the minimum monthly income that would be needed in order to cover the costs included in the elder index budget and the various aging support service combinations. The table includes the variations within the elder index that address housing and health.

Break Even Income	Adult	Day & Home			ay Care on V aker & Healt Weekends	h Aide on	Homema	ker Services : Caregiver	as Primary		naker Healtl ays & Weeke Caregiver	end Family
Single Elder 65+												
	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent
Without a												
Mortgage	\$6,009	\$5,808	\$5,713	\$4,169	\$3,968	\$3,873	\$7,625	\$7,424	\$7,329	\$4,749	\$4,548	\$4,453
Renter	\$6,226	\$6,025	\$5,930	\$4,386	\$4,185	\$4,090	\$7,842	\$7,641	\$7,546	\$4,966	\$4,765	\$4,670
With a												
Mortgage	\$6,756	\$6,555	\$6,460	\$4,916	\$4,715	\$4,620	\$8,372	\$5,776	\$8,076	\$5,496	\$5,295	\$5,200
Elder Couple 65+	+											
	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent
Without a												
Mortgage	\$7,096	\$6,694	\$6,504	\$5,256	\$4,854	\$4,664	\$8,712	\$8,310	\$8,120	\$5,836	\$5,434	\$5,244
Renter	\$7,313	\$6,911	\$6,721	\$5,473	\$5,071	\$4,881	\$8,929	\$8,527	\$8,337	\$6,053	\$5,651	\$5,461
With a												
Mortgage	\$7,843	\$7,441	\$7,251	\$6,003	\$5,601	\$5,411	\$5,776	\$9,057	\$8,867	\$6,583	\$6,181	\$5,991

Comparing the estimated cost of services to the 2020 income threshold for 200, 400, and 600 percent of the poverty level can provide a glimpse into how low-, medium-, and high-income older adults will fare. These levels were chosen to represent those who qualify for Medicaid waivers (200 percent), those who can potentially afford to private pay (600 percent), and those who neither qualify for Medicaid waivers nor can afford to private pay (400 percent). This model is based on income alone and does not consider assets or long-term care insurance in covering the cost of care.

A series of tables in Appendix C detail the monthly surplus or deficit a household will encounter based on the service combination and income level. LCOOA currently provides a Homemaker Services program for up to four hours a month of services. The model accounts for the positive financial impact of the service on a household. Reviewing the tables below, one will see that the model demonstrates, there are situations when the level of care and type of service cannot be covered by the individual's income alone. The group that experiences the most financial struggle doesn't financially qualify for Medicaid but is below an income that could support privately paying for services. Single older adults with incomes between \$28,710 and \$51,040 and couples with incomes between \$38,790 and \$68,960 will likely struggle to afford a safe level of care for an individual who needs a skilled level of care and wishes to remain in a home- and community-based setting.

What happens when the expenses are more than the available income? In Lorain County there are approximately 18,000 senior households with incomes that fall in the "at-risk" zone of \$25,000 to \$75,000, representing more than half of the older adult population in the county. The collective financial and emotional weight of needing skilled care goes beyond the individual; it impacts familial and nonprofessional caregivers. Family members and other loved ones often cover the gap between what the individual needs and what the individual can afford. This comes both in the form of the physical act of caregiving and contributing financially to the cost of care. Family caregiving bears a financial cost to the one providing care as well as to the community as a whole. According to a caregiving study conducted by the Transamerica Institute, 76 percent of nonprofessional caregivers have adjusted their work schedules, including taking on fewer hours, quitting their jobs, or retiring. These adjustments remove people from the workforce and result in less earning potential for a segment of the population. The study also found just 56 percent of caregivers rate their financial well-being as excellent or good. Unsurprisingly, lower income households report less financial security. Caregivers in the study with a household income of less than \$25,000 describe their financial well-being as poor, and 32 percent indicate their financial situation has worsened since becoming a caregiver.²¹ With income decreasing, and available income going toward the cost of caregiving services, both the individual and the nonprofessional caregivers have less income to spend in the community. They spend less on both basic need items, like groceries, as well as social and entertainment expenses, like dining out, charitable giving, and gifts.

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²¹ The Many Faces of Caregivers: A Close-up Look at Caregiving and Its Impacts, Transamerica Institute, 2017

APPENDIX A: SURVEY





Dear Lorain County Resident,

The Lorain County Office on Aging (LCOOA) provides services and supports so Lorain County residents can age successfully in the place they have chosen to call home. The priority of the office is to treat all individuals with dignity and respect. By offering aging services and partnering with multiple agencies and programs, LCOOA both serves and empowers **clients and families** to direct their own aging journey.

We are currently conducting a needs assessment to learn how we can best serve the community. We need your input to guide this process. Please take a few moments to complete the enclosed survey and return it in the selfaddressed stamped envelope by August 23, 2021.

To show our appreciation we be will raffling off six \$25 gift cards for completed surveys. To enter the raffle, please complete the enclosed raffle entry form and include it in the same envelope as the survey. Your raffle entry will be separated from your survey. All survey responses will be anonymous and kept confidential.

Si prefiere completar esta encuesta en español, comuníquese con Alex a adorman@communitysolutions.com o al 410-812-4743.

Thank you,

Board President Lorain County

Board of Commissioners Lauren Ksiazek

Executive Director Lorain County Office on Aging

Linda Noelker **Board President**

Lorain County Office

on Aging

AGING SERVICES

How familiar are you with following services?	Not at all familiar	I have heard of this, but I do not know what it is	I am aware of this service but I have not used it personally	I have personally used this service
Benefits Assistance			personany	
Specialized Information & Assistance				
Options Counseling				
Home Delivered Meals				
Blue Sky Restaurant Program				
Senior Food Box Program				
Emergency Food Pantry				
Kinship Services				
Homemaker Services				
Assisted Transportation				
Senior Years Newspaper				
Retired and Senior Volunteer				
Program (RSVP)				
Do you think more funding is ne	eded for agi	ng services? Circ	le one: Yes No	o Not Sure
What is your experience when s	eeking help	in meeting your ne	eeds as you get older?	(Select all that apply)
$\ \square$ I do not know where to g	o or who to	call	•	e to find someone that
 I cannot afford the help I 	need		can help me who sp	
 I cannot get help quickly 			I do not understand	•
 I am not always able to fi 	nd transport	tation	service applications	
when I need it				y phone calls before I
☐ I cannot get someone to	answer my		find what I need	
questions			I have not needed h	•
☐ I generally do not qualify	for services	I need	Other (please descr	ibe)
What concerns do you have abo	ut accessing	services to suppo	rt you as you age? (<i>Se</i>	lect all that apply)
☐ I am concerned about	my privacy		do not want people to	o think I cannot take
I am concerned some	ne will steal		are of myself	
me			do not want to be pla	ced in a long term
I am worried about los	ing control o	of my life of	are facility	

 ☐ I do not know how to find help 	□ I am co	ncerned son	neon	e will hi	urt me
	Not at all	Slightly	Ve	ry	Extremely
As you age, how concerned are you about:	Concerned	Concerned		ncerned	Concerned
Being able to afford services					
Being able to afford medical bills					
Being able to afford prescriptions					
Access to the services you need					
The services you need being available					
INFORMATION SERVICES What sources do you use to identify and access com	•	-	II tho	nt apply))
☐ Telephone	☐ Chu				
☐ Internet (websites)		ior center 			
☐ Social media (Facebook, Twitter, etc.)		nmunity new			
☐ Libraries		rd-of-mouth	•	-	illies, etc.)
☐ TV Ads	•	rs/bulletin be			
☐ Radio Ads	☐ Oth	er communit	y age	encies	
□ Doctor's Offices					
Are you familiar with the local information and refer	_		? ነ	es N	0
If yes, have you used 2-1-1 to identify a service or ge Do you have access to the internet?		1?		∕es N ∕es N	
If yes, where do you use the Internet? (Select al.	i tnat appiy)	¬		. , .	
☐ At home	L	At a comn		•	
☐ At the library NUTRITION	L	On my Sm	ıartp	none or	tablet
Do you have the following nearby where you live?			Yes	No 1	Not Sure
Meals and/or food delivered to your home			103	140	vot sare
Restaurants to get healthy and affordable food					
Stores to get healthy and affordable food					
Fast food restaurants					
In the past 12 months, how often have you worried y	your food wo	uld run out b	efor	e you co	ould get
□ Daily	□ Onc	e or twice a y	year		
□ Weekly	☐ I ha	ve never wor	ried	about r	unning out
☐ Monthly	of fo	ood			
☐ Sometimes, but not every month					
How often are you able to afford to eat healthy and □ □ Always □ Sometimes		als? ery often		□ Nev	ver

In the past year, did you ever eat less than you sho	past year, did you ever eat less than you should have because you di Yes $\hfill \square$ No					
Have you ever applied for food stamps (SNAP)? Yes, I am currently enrolled in food stamps Yes, I applied but I did not qualify If you have enrolled or applied for SNAP have you	□ No, I have not nee	ded to	apply			
TRANSPORTATION						
What is your usual way of running errands, gettin (Select all that apply) I drive myself I am driven by friends or family I use assisted transportation I take a Lorain County Transit bus I use Dial-A-Ride Do you face any of the challenges listed below who community location? (Select all that apply) I have no problems getting around. I have difficulties with walking I can't afford a car or car maintenance. I can't afford public transportation. There is no public transportation to take me where I need to go Lorain County Transit buses are difficult to use and/or unreliable I have difficulty finding a ride to appointments outside of Lorain County	☐ I walk☐ I use Uber or Ly☐ I use a taxi or a☐ I ride my bike☐ I don't leave th	yft car ser e hous ment, o long ti to arriv hers wh me es with	rvice of eevent, ime for veno are parki	ompany or able or ng. Dial-A-Ride.		
Where you live, do you have the following?		Yes	No	Not Sure		
Affordable, reliable, and convenient public transpor Special transportation for seniors or individuals wit						
Well-maintained streets	4.340/11463					
Affordable and easy to use public parking lots, spac	es, and areas to park					
Sidewalks						

HOUSING

How important is it to you to be abl	e to stay in your home as you age?				
\square Very important \square	Somewhat important				
□ Not that important □	Not at all important				
How important is it to you to be abl	e to stay in Lorain County as you age?				
\square Very important \square	Somewhat important				
□ Not that important □	Not at all important				
f you had to leave your home due t find alternative housing to meet you	o health or mobility issues, do you feel conf ur needs?	ident th	at yo	u could	
□ Yes	□ No □	ľm no	t sure	2	
f yes, where would you move?					
n the past 12 months, how many ti	mes have you fallen in your home? (please	circle o	ne)		
□ Never	☐ 2-3 times				
□ Once	☐ More than 4 time	5			
Do you agree with the following st	tatements?	Yes	No	Not Sure	
I feel safe in my home	tatements:	103	140	Not Suic	
I am concerned about accidents or	falls in my home				
My community connections make					
I have concerns that my home is not secured (windows, doors, locks, etc.)					
I am fearful that I will be the victim of crime in my community					
I have been the victim of a crime in my community					
	•				

Please select the best answer(s) for your housing situation related to eviction and foreclosure.

Renters			Homeowners					
	Yes	No		Yes	No			
I have been behind in rent.			I have been behind in my mortgage.					
I worry I will receive an eviction			I worry I will lose my home to					
notice			foreclosure					
My landlord has threatened to evict			I have received a foreclosure notice					
me			from my bank					
I have received an eviction notice			I am in the process of foreclosure					
I have been evicted			I have lost my house to foreclosure					
I have not experienced any of these			I have not experienced any of these					

Do you agree with the following statements?	Yes	No	Not Sure
I am able to afford my current housing			

I am able to maintain the inside of my	home						
I am able to maintain the outside of m	y home (lawn/sn	ow r	emoval, e	etc.)			
I have made, or plan to make, modifica	ations to my hom	ne as	I age				
I am able to afford my utilities							
Are the following available in your co	mmunity?				Yes	No	Not Su
Affordable home repair contractors wh	no are trustworth	ny ar	nd do qua	ity work			
Seasonal services such as lawn work or	snow removal v	vhic	n are affor	dable			
HEALTH							
How would you rate your physical healt			Fair	Good		Excell	
How would you rate your mental health	n? Poor		Fair	Good	E	Excell	ent
Do you ever skip medications/not fill proposed or wish you	•						
Have you been diagnosed with a chronic dementia, hypertension, high cholester I have one chronic disease		itis, (COPD, kidney ree or more c			
☐ I have two chronic diseases			I do not	currently have	e a chr	onic	disease
Optional: If you have chronic disease(s)	what are they			, 			
Since you turned 60, have you been abuelse you trust? <i>If you have experienced elder</i> Yes	•	•	•	ive Services at (4	•	4-446	
If so, how? (Select all that apply)							
☐ Someone took my money or prop	perty			e who was su	•		
without my permission				me with my n			-
☐ Someone tricked me into spendi	ng money I			e has tried to			
didn't want to spend				has controlle		and tr	ied to
☐ I was physically hurt by someone				away from o			
 I was sexually abused by someon ECONOMIC SECURITY 	ıe	Ц	Other				
What is your employment status?							
☐ Employed full-time		П	Retired a	and not lookir	g for v	work	
☐ Employed part-time				and seeking w	•	., OI K	
☐ Self-employed				oyed, but seel		ork	
☐ Disabled and unable to work			-	in a work trai	_		am
			51104	5 77 51 17 17 17	٦ ه٠٠٠٠	۰, ۵۵, ۵	

☐ For financial reasons, I need	to work as		I expect t	o retire in	the ne	ext five	years
long as I can			I expect t	o retire in	the ne	ext ten	years
☐ For other reasons, I will work	as long as I		•	retire and			•
can	J		•	art a new	•		
☐ I want to retire now but need	l to keep			e not enou		s availa	ble for
working to get health benefit	•		people m		.g joo	o a vanc	
Place an X in the boxes where you s		nonth	•		ease sr	ending	if needed.
Spending Category	I spend money or						nding on
Spending category	month	1 (1113	Cacii	this item		•	_
	IIIOIILII						
<u> </u>				medicai	or nor	ne nea	Ith costs
Groceries							
Utilities							
Medical Bills							
Prescriptions Entertainment							
Restaurant Gifts							
Gym Membership							
Home Health Care							
Home Maintenance expenses							
Transportation expenses							
Charitable Giving							
Over the counter medical expenses							
Savings contributions							
Life Insurance policy							
Health insurance							
Monthly subscriptions							
Investments							
Other (write in)							
Which of the following will help pa	ay for services as yo	u age	e?		Yes	No	Not Sure
Personal Savings or Investments							
Personal Income							
Financial assistance from family							
Medicaid							
Medicare							
Long Term Care Insurance							
Personal credit							
Other, please list:							

If you are employed, what are your plans for retirement? (Select all that apply)

What	is your zip code?
What	is your gender? □ male □female □other
What	is your date of birth?
	Month Year
What	is your race or ethnicity?
	White/Caucasian
	Hispanic or Latino
	Black or African American
	Native American or American Indian
	Asian / Pacific Islander
	other (please name)
	is your main source of income? (Select all that apply)
	Social Security Retirement Program
	Wages from work
	, , ,
	, , ,
	Retirement income – traditional pension
	Retirement income - 401(k)/ 403 (b)/ etc.
	Retirement income - state plan (OPERS, STERS, etc.)
	Other
What	is the highest level of education you completed?
	Some high school, no diploma
	High school diploma or GED
	Some college, no degree
	Associate's degree
	Bachelor's degree
	Graduate or professional degree
What	is your annual household income?
	\$0-\$10,000 \(\square\) \$60K-\$74,999
	\$10K-\$24,999
	\$25K-\$39,999
	\$40K-\$59,999
Who	is in your household? (Select all that apply)
	My spouse or partner
	My children
	My grandchildren
	Other relatives
	Nonrelatives
	I live alone

What is the total number of people who permanently live in your household? _____

Are you currently a caregiver for a friend or family member who is over age 60? Ves No
If yes, who? What type of home do you live in? Single family home Multi-family home (duplex, condo, etc.) Apartment Assisted living home Senior apartment building Townhouse Continuing care retirement community Nursing home Other
Do you own or rent your home? ☐ Own ☐ Rent
What language is primarily spoken in your home? ———————————————————————————————————





Complete this form and mail back with your survey to be *entered into a raffle* for a \$25 Walmart Gift Card. This form will be separated from the completed survey. All survey responses will be anonymous and kept confidential. We will contact six winners by phone or email to arrange for delivery of gift card.

Name	
Address	
Address 2	
City	
7:n Cada	
Zip Code	
Phone number	
Thore namber	
Email Address	



APPENDIX B: SPANISH SURVEY





Estimado residente del Condado de Lorain:

La Oficina de Envejecimiento del Condado de Lorain (LCOOA, por sus siglas en inglés) proporciona servicios y apoyo para que los residentes del Condado de Lorain puedan envejecer con éxito en el lugar que han elegido como su hogar. La prioridad de la oficina es tratar a todas las personas con dignidad y respeto. Al ofrecer servicios para personas mayores y asociarse con múltiples agencias y programas, LCOOA sirve y empodera a clientes y familias para dirigir su propio viaje de envejecimiento.

Actualmente estamos llevando a cabo una evaluación de necesidades para saber cómo podemos servir mejor a la comunidad. Necesitamos su opinión para guiar este proceso. Tómese unos minutos para completar la encuesta adjunta y devuélvala en el sobre, que incluye la dirección y estampilla, a más tardar el 23 de agosto de 2021.

Para mostrar nuestro agradecimiento estaremos rifando seis tarjetas de regalo de \$25 por encuestas completadas. Para participar en la rifa, complete el formulario de inscripción para la rifa adjunto e inclúyalo en el mismo sobre que la encuesta. Su participación en la rifa se separará de su encuesta. Todas las respuestas de la encuesta serán anónimas y se mantendrán confidenciales.

Si prefiere completar esta encuesta en español, comuníquese con Alex, en adorman@communitysolutions.com, o al 410-812-4743.

Gracias.

Michelle Hung Presidenta de la Junta

Junta de Comisionados del Condado de Lorain

Lauren Ksiazek

Directora Ejecutiva de la Oficina de Envejecimiento del Condado de Lorain

Linda Noelker

Presidenta de la Junta de la Oficina de Envejecimiento del

Condado de Lorain

SERVICIOS DE ENVEJECIMIENTO

¿Qué tan familiarizado está con los siguientes servicios?	Nada familiarizado	He oído hablar de esto, pero no sé qué es.	Sé que existe este servicio, pero no lo he utilizado personalmente	He utilizado este servicio personalmente.	
Asistencia de beneficios					
Información y asistencia					
especializada					
Asesoramiento de opciones					
Comidas entregadas a domicilio					
Programa de restaurantes Blue Sky					
Programa de caja de alimentos para personas mayores					
Despensa de alimentos de emergencia					
Servicios de parentesco					
Servicios de ama de casa					
Transporte asistido					
Periódico Senior Years					
Programa de voluntarios jubilados y mayores (RSVP,					
por sus siglas en inglés)					
¿Con qué necesita ayuda a medi			s mayores? Encierro	e en un círculo:	
Sí No No sé					
¿Cuál es su experiencia al buscar todas las que correspondan)	ayuda para sat	tisfacer sus necesida	ades a medida que er	nvejece? <i>(Seleccione</i>	
□ No sé a dónde ir ni a quié	n llamar	□ Ge	neralmente no calific	co para los servicios	
☐ No puedo costear la ayuda que necesito que necesito					
☐ No puedo conseguir ayud	a rápidamente	□ Ро	r lo general, no pued	o encontrar a	
 No siempre puedo encontro cuando lo necesito 	trar transporte		guien que me pueda a idioma	ayudar y que hable	
No puedo conseguir que a a mis preguntas	alguien respond	-	entiendo cómo com licitudes de servicio	pletar las	

 Necesito hacer muchas llamadas telefónicas antes de encontrar lo que necesito 		he necesitado o (por favor d			
¿Qué inquietudes tiene sobre el acceso a los servicios q todas las que correspondan)	ue lo apoyen	a medida qu	e envejece? (Seleccione	
 Me preocupa mi privacidad Me preocupa que alguien me robe Me preocupa perder el control de mi vida No quiero que la gente piense que no 	 No quiero que me coloquen en un centro de atención a largo plazo Me preocupa la calidad de la atención No sé cómo buscar ayuda Me preocupa que alguien me lastime 				
A medida que envejece, ¿qué tanto le preocupa:	No me preocupa	Me preocupa un poco	Me preocupa mucho	Me preocupa en extremo	
Poder pagar los servicios					
Poder pagar las facturas médicas					
Poder pagar las recetas médicas					
Acceder a los servicios que necesita					
Que los servicios que necesita estén disponibles					
SERVICIOS DE INFORMACIÓN ¿Qué fuentes utiliza para identificar y acceder a los s correspondan) □ Teléfono □ Internet (sitios web) □ Redes sociales (Facebook, Twitter, etc.) □ Bibliotecas □ Anuncios de televisión □ Anuncios de radio □ Consultorios médicos ¿Está familiarizado con la línea directa de informació 1? Sí No	☐ Igles ☐ Cen ☐ Peri ☐ Boc ☐ Vola ☐ Otra	sia tro para perso ódicos comur a a boca (amig antes/carteler as agencias co as locales, <i>Lín</i>	onas mayores nitarios gos, familiare ras de anuncio munitarias nea de inform	es, etc.) os ación 2-1-	
En caso afirmativo, ¿ha utilizado el 2-1-1 para identif Sí No	icar un servic	cio u obtener	intormación?		
¿Tiene acceso a Internet?		Sí	No		
Si es así, ¿dónde usa Internet? (Seleccione todas	las que corre	espondan)			
☐ En casa		En un cent	ro comunitar	io/para	
En la biblioteca		personas r	mayores		
	[🗆 En mi teléf	fono inteliger	nte o tableta	

NUTRICIÓN						
¿Tiene lo siguiente cerca de donde vive?			Sí	No	No sé	
Comidas y/o comida a domicilio						
Restaurantes para conseguir comida sana y asequible						
Tiendas para conseguir comida sana y asequible						
Restaurantes de comida rápida						
En los últimos 12 meses, ¿con qué frecuencia le ha preocupado que se le acabe la comida antes de poder conseguir más? Diariamente Semanalmente Mensualmente A veces, pero no todos los meses						
¿Con qué frecuencia puede permitirse comer comidas saludables y equilibradas? □ Siempre □ Algunas veces □ No muy a menudo □ Nunca						
En el último año, ¿alguna vez comió menos de lo que debería porque no tenía dinero para la comida? □ Sí □ No □ No sé						
¿Alguna vez solicitó cupones de alimentos (SNAP, por su	sig	las en inglés)?				

□ Sí, actualmente estoy inscrito en cupones de alimentos
 □ No, no he aplicado pero me gustaría No, no he necesitado aplicar
 □ Sí, apliqué pero no califiqué

Si se ha inscrito o solicitado SNAP, ¿ha experimentado algún desafío? En caso afirmativo explíquelo, por favor.

TRANSPORTE

☐ Uso Dial-A-Ride

¿Cuál es su forma **usual** de hacer diligencias, llegar a citas médicas o asistir a eventos? (Seleccione todas las que correspondan)

☐ No salgo de casa

Conduzco por mi cuenta	Camino
Me llevan amigos o familiares	Uso Uber o Lyft
Uso transporte asistido	Uso un taxi o una empresa de servicios
Tomo un autobús de tránsito del	de automóviles
Condado de Lorain	Conduzco mi bici

	nfrenta a alguno de los desa				lo viaja	a una	cita, evento	
o iuga	r de la comunidad? (Selecci	•	spor	•	ver mi	icho ti	omno nara	
	No tengo problemas para		Ш	 Tengo que esperar mucho tiempo para que llegue el transporte 				
	Tengo dificultades para ca			No tengo otros que puedan o quieran				
	No puedo pagar un autom		Ш					
	mantenimiento de un auto			llevarme				
	No puedo pagar el transpo	•		Tengo dificultades para aparcar				
	No hay transporte público a donde necesito ir	que me lleve		Tengo problemas con el uso de Dial-A Ride				
	Los autobuses de transpor	te público del		No me siento se	eguro c	amina	ando en mi	
	Condado de Lorain son dif	íciles de usar		comunidad				
	y/o poco confiables			No conduzco				
	Tengo dificultades para en	contrar						
_	transporte a citas fuera de							
	Lorain	i conada de						
En la z	ona donde vive tiene acces	so a lo siguiente?			Sí	No	No sé	
	orte público asequible, conf					_		
•	orte especial para personas	•	า dis	capacidades				
	ien mantenidas	,						
	namientos, espacios y áreas	públicas para estaciona	ar as	seguibles v				
áciles d	•	para cosación		, ,				
Aceras								
VIVIEN	DA importancia tiene para uste	nd noder normanecer er) CII	casa a modida d	uo onv	oioco?		
	·	·	ısu	casa a medida q	ue env	ejece:		
	uy importante	☐ Algo importante						
□ NC	tan importante	 Para nada importa 	nte					
¿Qué i enveje	importancia tiene para uste ece?	ed poder permanecer er	n el (Condado de Lora	iin a me	edida	que	
□ Mu	uy importante	Algo importante						
□ No	tan importante	☐ Para nada importar	ite					
	era que salir de casa por pr vienda alternativa que satis		/ilida	ad, ¿se siente se	guro de	e pode	er encontrar	
	Sí	□ No			□ No	sé		
Si es a	sí, ¿a dónde se mudaría?							
	, =							
En los	últimos 12 meses, ¿cuánta Nunca	s veces se ha caído en s	u ca	sa? (Marque un Una vez	a con u	ın círc	ulo)	

	2-3 veces	Más de 4 veces
Ш	2-3 Veces	ivias de 4 veces

¿Está de acuerdo con las siguientes afirmaciones?	Sí	No	No sé
Me siento seguro en mi casa			
Me preocupan los accidentes o caídas en mi casa			
Mis conexiones con la comunidad me hacen sentir seguro y protegido			
Me preocupa que mi casa no esté segura (ventanas, puertas, cerraduras, etc.)			
Tengo miedo de ser víctima de un delito en mi comunidad			
He sido víctima de un crimen en mi comunidad			

Seleccione la(s) mejor(es) respuesta(s) para su situación de vivienda relacionada con el desalojo y la ejecución hipotecaria.

Inquilinos			Propietarios			
	Sí	No		Sí	No	
Me he retrasado en el alquiler.			He estado atrasado en mi hipoteca.			
Me preocupa recibir un aviso de			Me preocupa perder mi casa por una			
desalojo			ejecución hipotecaria			
Mi arrendador ha amenazado con			He recibido un aviso de ejecución			
desalojarme			hipotecaria de mi banco			
He recibido un aviso de desalojo			Estoy en proceso de ejecución			
			hipotecaria			
Me han desalojado			He perdido mi casa por ejecución			
			hipotecaria			
No he experimentado ninguno de			No he experimentado ninguno de			
estos			estos			

¿Está de acuerdo con las siguientes afirmaciones?	Sí	No	No sé
Puedo pagar mi vivienda actual			
Puedo mantener el interior de mi casa			
Puedo mantener el exterior de mi casa (césped/remoción de nieve, etc.)			
He hecho, o planeo hacer, modificaciones en mi hogar a medida que envejezco			
Puedo pagar mis servicios públicos			
¿Están disponibles los siguientes en su comunidad?	Sí	No	No sé
Contratistas de reparación de viviendas asequibles que sean confiables y realicen un trabajo de calidad			
Servicios de temporada como trabajos de jardinería o remoción de nieve que sean asequibles			

SALUD

¿Cómo calificaría su salud física? Mala Regular Buena Excelente

¿Cómo	o calificaría su salud mental?	Mala	Regul	ar Bı	uena	Excelente
Nunca ¿Algur	na vez se salta medicamentos/no s A veces Frecuentemente na vez se sintió deprimido o desea A veces Frecuentemente				esión?	
	n diagnosticado una enfermedad ncia, hipertensión, colesterol alto,		tritis, dia	betes, EPOC, enf	ermedad	renal, cáncer,
	Tengo una enfermedad crónica Tengo dos enfermedades crónica Tengo tres o más enfermedades crónicas nal: Si tiene enfermedades crónica	S	on?	Actualmente no crónica	tengo un	a enfermedad
quien (440) 28	que cumplió 60 años, ¿ha sido ab confía? <i>Si ha sufrido abuso o negligend</i> 84-4465. Sí					_
	sí, ¿cómo? (Seleccione todas las q		ndan)			
	Alguien se llevó mi dinero o mi pr sin mi permiso.	opiedad		Alguien que se sayudarme con rayudó	-	
	Alguien me engañó para que gast que no quería gastar	ara umero		Alguien ha inter	ntado ame	nazarme
	Fui lastimado físicamente por alg Fui abusado sexualmente por alg			Alguien me ha de mantenerme	controlado	y ha tratado
SEGLIRI	DAD ECONÓMICA			Otro		
	es su situación laboral?					
	Empleado de tiempo completo			Jubilado y busca	ando traba	aio
	Empleado a tiempo parcial			Desempleado, p		•
	Trabajador por cuenta propia			Inscrito en un p		•
	Discapacitado e incapaz de traba	iar		laboral	. 50. 31.114	
	Jubilado y sin buscar trabajo	•				

SI 6	esta empleado, ¿cuales son sus pla	nes de jubilacior) ; (S	seleccione todas las que co	rrespo	naan)		
	Por razones económicas, necesito todo el tiempo que pueda	o trabajar		Espero jubilarme en los próximos cinco años				
	□ Por otras razones, trabajaré todo el tiempo			Espero jubilarme en los p	róxim	os diez	años.	
	que pueda	·		Planeo jubilarme y tambi				
	Quiero jubilarme ahora, pero neo	cesito		gustaría comenzar una nu	•			
	seguir trabajando para obtener b		П	No hay suficientes trabajo			s para	
	de salud			personas de mi edad			-	
Col	oque una X en las casillas donde g	asta dinero cada	n me	•	s si fu	era nec	esario.	
	ategoría de gasto	Gasto dinero en		Disminuiría el gasto en este				
		esto cada mes		más costos médicos o de at				
Α	limentos							
S	ervicios públicos							
F	acturas médicas							
R	ecetas médicas							
Ε	ntretenimiento							
R	estaurantes							
R	egalos							
Ν	1embresía de gimnasio							
С	uidado de la salud en el hogar							
G	astos de mantenimiento del hogar							
G	astos de transporte							
D	onaciones caritativas							
G	astos de medicamentos de venta							
	bre							
	ontribuciones de ahorro							
	óliza de seguro de vida							
	eguro de salud							
	uscripciones mensuales							
	nversiones							
О	tro (describir)							
¿C	Cuál de las siguientes opciones ayuda	ará a pagar los ser	vici	os a medida que envejece?	Sí	No	No sé	
Ał	norros o inversiones personales							
	gresos personales							
	/uda económica de la familia							
_	edicaid							
	edicare							
	eguro de cuidados a largo plazo							
	rédito personal							
U	tro, por favor enumere:							

¿Cuál es su código postal?	☐ Mis nietos
¿Cuál es su género?	Otros parientes
\square Masculino \square Femenino \square Otro	□ Otros no parientes
	□ Vivo solo/a
¿Cuál es su fecha de nacimiento?	
Mes Año	¿Cuál es el número total de personas que viven
¿Cuál es su raza o etnia?	permanentemente en su hogar?
☐ Blanco/Caucásico	
☐ Hispano o latino	¿Es actualmente el cuidador de un amigo o
☐ Negro o afroamericano	familiar que tenga más de 60 años?
 Nativo americano o indio americano 	□ Sí
☐ Asiático/isleño del Pacífico	□ No
 Otra (por favor nombre) 	Si es así, ¿quién?
	¿En qué tipo de casa vive?
¿Cuál es su principal fuente de ingresos? (Seleccione	Vivienda unifamiliar
todas las que correspondan)	 Vivienda multifamiliar (dúplex,
 Programa de jubilación del seguro social 	condominio, etc.)
□ Salarios del trabajo	Apartamento
 Ingreso de seguridad suplementario (SSI, por 	☐ Hogar de vida asistida
sus siglas en inglés)	 Edificio de apartamentos para personas
 Programa de Seguro de Discapacidad del 	mayores
Seguro Social (SSDI, por sus siglas en inglés)	☐ Townhouse
 Ingresos de jubilación - pensión tradicional 	 Comunidad de jubilados de cuidados
□ Ingresos de jubilación - 401 (k)/ 403 (b)/ etc.	continuos
 Ingresos de jubilación: plan estatal (OPERS, 	Asilo de ancianos
STERS, etc.)	□ Otro
□ Otro	
¿Cuál es el nivel más alto de educación que	¿Es propietario o alquila su casa?
completó?	□ Propietario □ Inquilino
 Algo de secundaria, sin diploma 	
 Diploma de escuela secundaria o GED 	¿Qué idioma se habla principalmente en su
 Algo de universidad, sin título 	hogar?
☐ Título asociado	 _
☐ Licenciatura	¿Completó esta encuesta usted mismo o la
 Título de posgrado o profesional 	completó para otra persona?
¿Cuál es el ingreso anual de su hogar?	☐ Completé la encuesta yo mismo
□ \$0-\$10,000 □ \$60K-\$74,999	☐ Completé la encuesta para otra persona
□ \$10K-\$24,999 □ \$75K-\$99,999	
□ \$25K-\$39,999 □ \$100,000+	
□ \$40K-\$59,999	
¿Quién vive en su hogar? (Seleccione todas las que	
correspondan)	
☐ Mi cónyuge o pareja	
☐ Mis hijos	
···· ····y	





Complete este formulario y envíelo por correo con su encuesta para *participar en una rifa* por una *Tarjeta de regalo de \$25 de Walmart*. Este formulario se separará de la encuesta completa. **Todas las respuestas de la encuesta serán anónimas y se mantendrán confidenciales.** Contactaremos a *seis ganadores* por teléfono o correo electrónico para organizar la entrega de la tarjeta de regalo.

Nombre	
Dirección	
Dirección 2	
Ciudad	
Código postal	
Número de teléfono	
Dirección de correo electrónico	 _



Appendix C: Cost of Care Tables

Single Elder Renter in Poor Health Monthly Expenses \$2,066										
Income Level		Benefit Program		Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900			
			LCOOA	. ,	, ,	, ,	. ,			
Percent FPL	Monthly Income	PASSPORT WAIVER	Homemaker Services	Income remaining to spend in community after basic expenses and care needs are met						
200%	\$2,127.00	Eligible	\$91.52	\$61.00	\$61.00	\$61.00	\$61.00			
400%	\$4,253.00	Not Eligible	\$91.52	-\$1,881.48	-\$41.48	-\$3,497.48	-\$621.48			
600%	\$6,378.00	Not Eligible	\$91.52	\$243.52	\$2,083.52	-\$1,372.48	\$1,503.52			

Single Elder Homeowner with Mortgage in Poor Health Monthly Expenses \$2,596											
Income Level		Benefit Program		Adult Day & Homemaker Combination	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver				
Incom	le Levei	венени		\$4,160	\$2,320	\$5,77 0	\$ 2,900				
Percent FPL	Monthly Income	PASSPORT WAIVER	LCOOA Homemaker Services			d in community re needs are m	·				
200%	\$2,127.00	Eligible	\$91.52	-\$469.00	-\$469.00	-\$469.00	-\$469.00				
400%	\$4,253.00	Not Eligible	\$91.52	-\$2,411.48	-\$571.48	-\$4,027.48	-\$1,151.48				
600%	\$6,378.00	Not Eligible	\$91.52	-\$286.48	\$1,553.52	-\$1,902.48	\$973.52				

Single Elder Homeowner without Mortgage in Poor Health Monthly Expenses \$1,849											
							Homemaker				
					Adult Day		Health Aide				
					Care on		on				
					Weekdays		Weekdays				
					Homemaker	Homemaker	and				
				Adult Day &	& Health	Services as	Weekend				
				Homemaker	Aide on	Primary	Family				
				Combination	Weekends	Caregiver	Caregiver				
Incon	ne Level	Benefit Program		\$4,160	\$2,320	\$5,776	\$ 2,900				
			LCOOA								
Percent	Monthly	PASSPORT	Homemaker	Income rei	maining to spend	in community	after basic				
FPL	Income	WAIVER	Services		expenses and car	•					
200%	\$2,127.00	Eligible	\$91.52	\$278.00	\$278.00	\$278.00	\$278.00				
		Not									
400%	\$4,253.00	Eligible	\$91.52	-\$1,664.48	\$175.52	-\$3,280.48	-\$404.48				
		Not									
600%	\$6,378.00	Eligible	\$91.52	\$460.52	\$2,300.52	-\$1,155.48	\$1,720.52				

	Single Elder Renter in Good Health Monthly Expenses \$1,865									
				Adult Day & Homemaker Combination	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends	Homemaker Services as Primary Caregiver	Homemaker Health Aide on Weekdays and Weekend Family Caregiver			
Incom	ne Level	Benefit	Program	\$4,160	\$2,320	\$5,776	\$ 2,900			
Percent FPL	Monthly Income	PASSPORT WAIVER	LCOOA Homemaker Services	Income remaining to spend in community after basic expenses and care needs are met						
200%	\$2,127.00	Eligible	\$91.52	\$262.00	\$262.00	\$262.00	\$262.00			
400%	\$4,253.00	Not Eligible	\$91.52	-\$1,680.48	\$159.52	-\$3,296.48	-\$420.48			
600%	\$6,378.00	Not Eligible	\$91.52	\$444.52	\$2,284.52	-\$1,171.48	\$1,704.52			

_	Single Elder Homeowner with Mortgage in Good Health Monthly Expenses \$2,395										
Income Level Benefit Program		Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900					
Percent FPL	Monthly Income	LCOOA Monthly PASSPORT Homemaker			naining to spen	d in community	/ after basic				
200%	\$2,127.00	Eligible	\$91.52	-\$268.00	-\$268.00	-\$268.00	-\$268.00				
400%	\$4,253.00	Not Eligible	\$91.52	-\$2,210.48	-\$370.48	-\$3,826.48	-\$950.48				
600%	\$6,378.00	Not Eligible	\$91.52	-\$85.48	\$1,754.52	-\$1,701.48	\$1,174.52				

_	Single Elder Homeowner without Mortgage in Good Health Monthly Expenses \$1,648										
	ne Level	Danafik	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900				
IIICOII	le Level	Bellette	rogram	74,100	72,320	75,770	7 2,300				
			LCOOA								
Percent	Monthly	PASSPORT	Homemaker	Income rer	naining to spend	d in community	after basic				
FPL	Income	WAIVER	Services	e	xpenses and car	re needs are me	et				
200%	\$2,127.00	Eligible	\$91.52	\$479.00	\$479.00	\$479.00	\$479.00				
400%	\$4,253.00	Not Eligible	\$91.52	-\$1,463.48	\$376.52	-\$3,079.48	-\$203.48				
600%	\$6,378.00	Not Eligible	\$91.52	\$661.52	\$2,501.52	-\$954.48	\$1,921.52				

	Single Elder Renter in Excellent Health Monthly Expenses \$1,770											
Incom	Income Level Benefit Program		Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900						
Percent FPL	Monthly Income	PASSPORT WAIVER			• .	d in community e needs are me						
200%	\$2,127.00	Eligible	\$91.52	\$357.00	\$357.00	\$357.00	\$357.00					
400%	\$4,253.00	Not Eligible	\$91.52	-\$1,585.48	\$254.52	-\$3,201.48	-\$325.48					
600%	\$6,378.00	Not Eligible	\$91.52	\$539.52	\$2,379.52	-\$1,076.48	\$1,799.52					

	Single Elder Homeowner with Mortgage in Excellent Health Monthly Expenses \$1,770											
Income Level Benefit Program		Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900						
			LCOOA									
Percent	Monthly	PASSPORT	Homemaker		naining to spen		'					
FPL	Income	WAIVER	Services	ex	xpenses and ca	re needs are m	et					
200%	\$2,127.00	Eligible	\$91.52	-\$173.00	-\$173.00	-\$173.00	-\$173.00					
400%	\$4,253.00	Not Eligible	\$91.52	-\$2,115.48	-\$275.48	-\$3,731.48	-\$855.48					
600%	\$6,378.00	Not Eligible	\$91.52	\$9.52	\$1,849.52	-\$1,606.48	\$1,269.52					

	Single Elder Homeowner without Mortgage in Excellent Health Monthly Expenses \$1,770											
Incon	Income Level Benefit Program		Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900						
			LCOOA									
Percent	Monthly	PASSPORT	Homemaker		maining to spend	•						
FPL	Income	WAIVER	Services	(expenses and car	e needs are me	et					
200%	\$2,127.00	Eligible	\$91.52	\$574.00	\$574.00	\$574.00	\$574.00					
400%	\$4,253.00	Not Eligible	\$91.52	-\$1,368.48	\$471.52	-\$2,984.48	-\$108.48					
600%	\$6,378.00	Not Eligible	\$91.52	\$756.52	\$2,596.52	-\$859.48	\$2,016.52					

	iple Renters Expenses \$3 ,	in Poor Health ,153					
Incon	ne Level	Benefit	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900
Percent FPL	Monthly Income	PASSPORT WAIVER	LCOOA Homemaker Services		• .	d in community e needs are me	
200%	\$2,873.00	Eligible	\$91.52	-\$280.00	-\$280.00	-\$280.00	-\$280.00
400%	\$5,747.00	Not Eligible	\$91.52	-\$1,474.48	\$365.52	-\$3,090.48	-\$214.48
600%	\$8,622.00	Not Eligible	\$91.52	\$1,400.52	\$3,240.52	-\$215.48	\$2,660.52

	p le Homeov Expenses \$3,		ortgage in Poor	Health			
Incom	ne Level	Benefit	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900
			LCOOA				
Percent	Monthly	PASSPORT	Homemaker		naining to spen		'
FPL	Income	WAIVER	Services	ex	kpenses and car	re needs are m	et
200%	\$2,873.00	Eligible	\$91.52	-\$810.00	-\$810.00	-\$810.00	-\$810.00
400%	\$5,747.00	Not Eligible	\$91.52	-\$2,004.48	-\$164.48	-\$3,620.48	-\$744.48
600%	\$8,622.00	Not Eligible	\$91.52	\$870.52	\$2,710.52	-\$745.48	\$2,130.52

	u ple Homeo v Expenses \$2		a mortgage in	Poor Health			
Incon	ne Level	Benefit	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900
Percent FPL	Monthly Income	PASSPORT WAIVER	LCOOA Homemaker Services		maining to spend expenses and car	•	
200%	\$2,873.00	Eligible	\$91.52	-\$280.00	-\$280.00	-\$280.00	-\$280.00
400%	\$5,747.00	Not Eligible	\$91.52	-\$1,474.48	\$365.52	-\$3,090.48	-\$214.48
600%	\$8,622.00	Not Eligible	\$91.52	\$1,400.52	\$3,240.52	-\$215.48	\$2,660.52

	Elder Couple Renters in Good Health Monthly Expenses \$2,751											
Incom	ne Level	Benefit	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900					
Percent FPL	Monthly Income	PASSPORT WAIVER			• .	d in community e needs are me						
200%	\$2,873.00	Eligible	\$91.52	\$122.00	-\$280.00	-\$280.00	-\$280.00					
400%	\$5,747.00	Not Eligible	\$91.52	-\$1,072.48	\$767.52	-\$2,688.48	\$187.52					
600%	\$8,622.00	Not Eligible	\$91.52	\$1,802.52	\$3,642.52	\$186.52	\$3,062.52					

	i ple Homeov Expenses \$3,		nortgage in Go	od Health			
Incom	ne Level	Benefit	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900
Percent	Monthly	PASSPORT	LCOOA Homemaker		naining to spen		
FPL 200%	Income	WAIVER	Services		xpenses and ca		
200% 400%	\$2,873.00	Eligible Not Eligible	\$91.52 \$91.52	-\$408.00 -\$1,602.48	-\$408.00 \$237.52	-\$408.00 -\$3,218.48	-\$408.00 -\$342.48
600%	\$8,622.00	Not Eligible	\$91.52	\$1,272.52	\$3,112.52	-\$3,218.48	\$2,532.52

	u ple Homeo v Expenses \$2		a mortgage i	n Good Health			
Incon	ne Level	Benefit F	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900
			LCOOA				
Percent	Monthly	PASSPORT	Homemak	Income re	maining to spend	d in community	after basic
FPL	Income	WAIVER	er Services		expenses and car	e needs are me	et
200%	\$2,873.00	Eligible	\$91.52	\$339.00	\$339.00	\$339.00	\$339.00
400%	\$5,747.00	Not Eligible	\$91.52	-\$855.48	\$984.52	-\$2,471.48	\$404.52
600%	\$8,622.00	Not Eligible	\$91.52	\$2,019.52	\$3,859.52	\$403.52	\$3,279.52

	Elder Couple Renters in Excellent Health Monthly Expenses \$2,561											
Incom	Income Level Benefit Program		Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900						
Downsomt	N 4 a satisfy i	DACCDODT	LCOOA	la como moment	-i-i	d :	ofton books					
Percent FPL	Monthly Income	PASSPORT WAIVER	Homemaker Services		•	d in community e needs are me						
200%	\$2,873.00	Eligible	\$91.52	\$312.00	\$312.00	\$312.00	\$312.00					
400%	\$5,747.00	Not Eligible	\$91.52	-\$882.48	\$957.52	-\$2,498.48	\$377.52					
600%	\$8,622.00	Not Eligible	\$91.52	\$1,992.52	\$3,832.52	\$376.52	\$3,252.52					

Elder Couple Homeowners with mortgage in Excellent Health Monthly Expenses \$3,091												
Incom	ne Level	Benefit P	Program	Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900					
Percent FPL	Monthly Income	PASSPORT WAIVER	LCOOA Homemaker Services	Income remaining to spend in community after basic expenses and care needs are met								
200%	\$2,873.00	Eligible	\$91.52	-\$218.00	-\$218.00	-\$218.00	-\$218.00					
400%	\$5,747.00	Not Eligible	\$91.52	-\$1,412.48	\$427.52	-\$3,028.48	-\$152.48					
600%	\$8,622.00	Not Eligible	\$91.52	\$1,462.52	\$3,302.52	-\$153.48	\$2,722.52					

Elder Couple Homeowners without Mortgage w in Excellent Health Monthly Expenses \$2,344													
Income Level		Benefit Program		Adult Day & Homemaker Combination \$4,160	Adult Day Care on Weekdays Homemaker & Health Aide on Weekends \$2,320	Homemaker Services as Primary Caregiver \$5,776	Homemaker Health Aide on Weekdays and Weekend Family Caregiver \$2,900						
Percent	Monthly	PASSPORT	LCOOA Homemaker	Income remaining to spend in community after basic									
FPL	Income	WAIVER	Services	expenses and care needs are met									
200%	\$2,873.00	Eligible	\$91.52	\$529.00	\$529.00	\$529.00	\$529.00						
400%	\$5,747.00	Not Eligible	\$91.52	-\$665.48	\$1,174.52	-\$2,281.48	\$594.52						
600%	\$8,622.00	Not Eligible	\$91.52	\$2,209.52	\$4,049.52	\$593.52	\$3,469.52						