

Elderly Nutrition Program Task Force Final Recommendations

Co-Chairs of the Elderly Nutrition Program Task Force Senator Matt Lesser and Representative Jillian Gilchrest would like to thank the Task Force participants for their active participation, expertise, and support. It has been an honor to work with such committed Task Force members.

The Elderly Nutrition Program is open to eligible individuals, and their spouses, 60 years and older, as well as those under 60 years of age with a disability. The Elderly Nutrition Program is essential as it has reduced food insecurity and maintained the nutritional and social well-being of the elderly population. Moreover, the Elderly Nutrition Program provides vital nutritional screening, assessment, and education on nutritional needs.

The Elderly Nutrition Program Task Force seeks to acknowledge the stress on elderly nutrition programs caused by the significant drop in federal funding. Task Force members gathered to discuss how to streamline operations, seek additional funding, and increase advocacy efforts for the Elderly Nutrition Program.

The Elderly Nutrition Program Taskforce was established under [Special Act No. 23-17 AN ACT CONCERNING THE BENEFITS CLIFF BARRIER TO GAINFUL EMPLOYMENT.](#)

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 That section 17b-112 of the general statutes be amended to foster
- 2 gainful employment by gradually adjusting temporary family
- 3 assistance benefits when a beneficiary becomes employed rather than
- 4 abruptly ending benefits and discouraging employment.

Statement of Purpose:

To adjust temporary family assistance benefit reductions imposed upon employment of a beneficiary to encourage beneficiaries to become gainfully employed.

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Elderly Nutrition Program Task Force Membership

Chairpersons

Senator Matt Lesser

Senate Human Services Committee Chair

Representative Jillian Gilchrest

House Human Services Committee Chair

Members

Maureen McIntyre

Appointed by Speaker Matt Ritter

Alison Dvorak

Appointed by Speaker Matt Ritter

Marie Allen Short

Appointed by Senator Martin Looney

Lena Rodriguez

Appointed by Senator Martin Looney

Bill Rybczyk

Appointed by Representative Jason Rojas

Stan Mingione

Appointed by Senator Bob Duff

Eugene Theroux

Appointed by Representative Vincent Candelora

Michelina Buchino

Appointed by Senator Kevin Kelly

Sarah Leathers

Appointed by Senator Lisa Seminara

Joel Sekorski

Appointed by Representative Jay Case

Erin Harkrader

Appointed by Commissioner Amy Porter

Aleck Spinks

Appointed by Commissioner Andrea Barton Reeves

Taskforce Meetings and Presentations

August 30th

Introductions and Taskforce Goals

[Minutes](#)

September 27th

Program Design and Funding

[Minutes](#)

October 25th

Contractual Process(es) for Providers of Elderly Nutrition Services

[Aging CT Presentation - Elderly Nutrition](#) (Addendum A)

[ADS Presentation - CT's Elderly Nutrition Program](#) (Addendum B)

November 29th

Follow Up Questions, Discussion of Possible Recommendations

[Minutes](#)

December 19th

ADS Recommendations, Discussion of Task Force

Recommendations

[Minutes](#)

January 31st

Discussion of Final Recommendations

Task Force Recommendations

Recommendation #1:

Codify the requirement that AAAs can seek additional funding from SUA on 50% expenditure rather than 75% and provide payment within 30 days when possible. ADS will report annually on the feasibility going to 25%. Payment be made both from SUA to the AAA and then from the AAA to providers within 30 days except when precluded by lack of funds.

Recommendation #2:

Require ADS and AAAs to report to the Human Services Committee on progress in streamlining the contracting process and streamlining Form V. Require an assessment, the development of a plan, and report on the program regarding compliance.

Recommendation #3:

Require notification to legislative delegation and chief elected officials by AAA when there is a material change in service levels or when a provider is changed, and when an ENP provider is changed require SUA to require the completion of a continuity of effort plan submitted with input from each CEO and relevant stakeholders in each town.

Recommendation #4:

Requesting funding from OPM to fund technology to streamline the process for grant databases (similar to Grantee Gateway) and ask AgingCT to take advantage of any and all funding.

Recommendation #5:

The Human Services Committee Co-Chairs shall write to the congressional delegation requesting assistance in understanding OAA Funding and reducing delays and request increased federal funding.

Recommendation #6:

AAAs, SUA shall analyze which individuals are on the Elderly Nutrition Programs and will provide a list to DSS for cross-checking for SNAP eligibility. SUA and DSS will then have an interagency process for creating outreach measures to identify individuals who are currently not receiving SNAP benefits as a way to increase SNAP enrollment.

Recommendation #7:

Increase funding for the Elderly Nutrition Program by \$5.5 million per year.

Recommendation #8:

Provide one-time funding from OPM to SUA to allow a three-month carryforward of the program to the following federal fiscal year.

Task Force Member Comments

The prior final recommendations are based on the following comments and replies from fellow Task Force members.

Eugene Theroux:

Thank you to the entire committee for all of the information, topics, workflow and funding clarification and final recommendations.

My replies to the recommendations:

1. Yes
2. Yes
3. ? I do not understand the recommendation, the way it is written
4. Yes
5. Yes
6. Yes
7. Yes, this is one of the most important recommendations as was stated throughout all of the meetings.
8. Yes, as long as the "one Time" happens annually.

Alison Dvorak:

Here are my responses:

1. Agree but the contract recently executed provides for the 50% expenditure and a 45 day payment from SUA to AAA. This is a recent change and improvement which will be closely monitored for impact on flow of funds related to this issue. Agree with continued review to feasibility of going to 25% and 30 day payment cycles as long as funds are available.
2. Agree. ADS and AAA have already met to work on streamlining the form 5 and will continue to discuss. A required assessment, development of plan and report on program compliance is administratively burdensome since the decision and use of the form is within the ADS and AAAs that are working on the revision.
3. Further clarification would be helpful to define what is a "material change" and what forms of notification would be effective. Note "EMP" should be "ENP" to stand for Elderly Nutrition Provider.
4. Agree. AAA awaiting determination from OPM.
5. Agree.
6. Agree with promoting SNAP and other nutrition security opportunities for people in the Senior Nutrition Program but I think the sharing of lists between DSS and SUA would be administratively cumbersome and possibly risk the privacy of individuals. AAAs and ENPs can work together to facilitate outreach to existing and new SNP clients through Nutrition Education and Benefits screening.
7. Agree, if possible, but would consider this a lower priority than other actions of this taskforce.
8. Agree but the funding needs to be one time per year, EVERY YEAR, in order to support the lack of federal funding available in October, November, December.

Marie Allen:

1. Yes
2. Yes
3. Yes
4. Yes
5. Yes
6. Yes but only SUA has the aggregate data of all ENP participants and DSS has data on enrolled individuals in the SNAP program. AAAs do not have access to this information or a way to query between the two data sets.
7. Yes, although more work should be done to qualify individuals for meals or we will never have enough money to meet all the needs.
8. Yes

Joel Sekorski:

I do not have a problem making these recommendation because they are Recommendations but it seems that some of our Recommendations cant be changed so I am not objecting to the hard work done by the committee. These are my feelings on each item

1. Yes
2. Yes
3. No, this, the RFP is a competitive process designed to rules and policy. I do believe an ENP should not be subject to an RFP if they have been doing the job without incident etc. they should be offered a reasonable extension unless they do not accept the terms.
4. Yes but the funding should be for software that is universal to create continuity for the future
5. Yes
6. Yes but I am not sure if all AAAs and the SUA have the same capabilities
7. Yes Money is almost always the answer
8. Yes but this needs to be every year unless I don't understand one time funding. Is this designed to front load the system and then unspent dollars from the feds carry over to the next year ongoing? I thought we were talking about a yearly float or loan to get the dollars into the hands of the ENPs faster.

Michelina Buchino:

Yes on all recommendations

Maureen McIntyre:

1. Yes
2. Yes
3. Note typo: EMP should be ENP
4. Grant decision pending
5. Yes
6. The mechanics of this will ultimately rely interagency data sharing and availability. I understand the intention and will support it.

- 7. Yes
- 8. Yes

Lena Rodriguez & Bill Rybczyk:

1. Codify the requirement that AAAs can seek additional funding from SUA on 50% expenditure rather than 75% and provide payment within 30 days ~~when possible~~. ADS will ~~research and~~ report ~~annually~~ **within 60 days** on the feasibility going to 25%. Payments ~~are to~~ be made both from SUA to the AAA and then from the AAA to providers within 30 days except when precluded by lack of funds.

2. Require ADS and AAAs to **assess opportunities for streamlining internal processes (contradicting, payment), develop a plan and recommendations and report on the plan** to the Human Services Committee **on a monthly basis**. ~~on progress in streamlining the contracting process and streamlining Form V. Require an assessment, the development of a plan, and report on the program regarding compliance.~~ **Require ADS and AAA to assess the Form 5 requirements and streamline the data collection process. Assess how the data collected via the Form V can be used for further funding reallocations and program development.**

- 3. Yes
- 4. Yes
- 5. Yes
- 6. Yes
- 7. Yes
- 8. Yes

Erin Estey:

Abstention

Sarah Leathers:

Abstention

Aleck Spinks:

Has not attended the last few meetings; will likely not respond and has not responded to follow up.

Stan Mingione:

Personal family needs likely mean he will not respond on final recommendations.

Addendum C: CAA ENP Provider Recommendations

1. Allow the State Unit on Aging (SUA) to administer the contracts and payments to the Elderly Nutrition Providers (ENPs) instead of the AAAs (we understand that the AAA's have a federal designation to receive funding under the Older Americans Act but this does not have to mean they receive all funding....states such as Rhode Island do direct payments from the State to ENP's). This will streamline the process by eliminating a layer and speed up payments.
2. Allow the ENP providers to be paid within 30 days of service billing, as stated in their contracts (Currently, there is a cumbersome process where AAAs have to show 75 percent of expenditures have been delivered to get a quarterly payment. SUA has moved this to 50 percent, but it needs to provide payment within 30 days as ENPs cannot afford to float these funds).
3. Increase state funding to the Elderly Nutrition program by \$5.5 million annually to meet the true amount necessary to maintain service levels
4. Utilize State funding to upfront costs at the beginning of the program year in October (Federal funds on average do not arrive until February)
5. Streamline the state contracting process so the ENP providers receive their contracts in a timely fashion.

Addendum D: Elderly Nutrition Provider Recommendations – ADS Response

The Department of Aging and Disability Services appreciates inclusion of our State Unit on Aging in the Elderly Nutrition task force, and we look forward to continued collaboration in the upcoming legislative session to provide operational feasibility and agency impact on any recommendations that develop.

CANASP Recommendations:

- 1. Realign State Funding to precede Federal fund release at minimum 80% of prior year federal contribution. This will release adequate funding as a loan to be paid back to the state after federal dollars are received. This is intended to speed up the billing turnaround to contracted vendors.**

Report pg 55: At the start of nearly every federal fiscal year in October, there is rarely an approved federal budget. Continuing Resolutions provide some program funding to bridge the gap between the beginning of the FFY and a budget being enacted, however, every state begins the new FFY without knowing what the specific funding for the year will be, or when they will ultimately receive it. Potential solutions that could be explored by the task force may include adjustment of how the state's share of the program's funding is scheduled for allocation but providing the state share when the total programmatic budget is unknown—since the vast majority of funding is supported by the federal government—could risk spending too much early on and running out of resources before the end of the program year.

However, providing a loan equal to 80% of the federal allocation is beyond ADS's authority and budget. State funds equate to roughly one-third of the federal allocation (\$3.15M vs. \$10M) and are available for distribution beginning in July. The Federal Fiscal Year runs from October to the following September, so by the time that the FFY begins, through when the large federal award is allocated, we are typically more than halfway through the State Fiscal Year.

- 2. Increase Funding to Elderly Nutrition Program (ENP), Encourage the State Unit on Aging (SUA) to continue to Advocate and support with the Administration for Community Living or ACL and Federal government to increase Older Americans Act funding. This will support ongoing data and advocacy for decreasing the gap between actual cost to produce the meals and the Unit of Service (UOS) reimbursement and increasing service levels ensuring no or limited waitlists in the future.**

ADS continues to communicate the needs of the state to ACL through our Regional Administrator. Report, pg 19: Each year the ACL allocates a set amount of OAA funding to each state and defines how the funding is proportioned for each Title III line item. Because the program is not means-tested or an entitlement, services may be reduced or waiting lists established when the demand for services exceeds these available funds.

- a. **Quality of product, proper funding has not kept up with rising cost of food, paper, labor and delivery capability. Programs are forced to use less or inadequate products and materials to execute the contractual requirements. More funding can't be overstated as the primary need for Both the Title IIIc Older Americans Act Funding (OAA) and the Ct Home Care Program for Elders or CHCPE.**

ADS allocates funds in accordance with awards from ACL and does not have control over the amount of funding received for the Nutrition program. The Connecticut Home Care Program for Elders is administered by the Department of Social Services and reimbursed in accordance with DSS fee schedules, so ADS cannot speak to this reimbursement. However, the enacted budget supported a 12.5% increase in agency rates for home delivered meals effective July 1, 2023.

3. **Streamline the reporting process and the Form V, to speed up access to contracted funds. WE are suggesting having a template or portal that the ENPs could preload for the Area Agencies on Aging (AAAs). This May help to eliminate redundancy. The client assessment that ensures eligibility is the approval for these meals, making the Unit of Service (UOS) pre-approved, speeding up the process and eliminating double work in the future. Adjustments for inappropriate or incorrectly billed meals can be fixed monthly and ongoing. We Suggest using the homecare program model.**

Though this recommendation is not entirely clear, the Form 5 collects information that primarily correlates to the annual State Performance Report (SPR) required by ACL. ADS-SUA is open to streamlining the Form 5 and data collection to conform with the requirements of the SPR.

The process that the AAAs use for collecting service delivery data from their respective ENPs may vary and ADS would encourage discussion among the AAAs for best practices. Due to state procurement rules, any changes to the MIS data system would require research and a competitive process for any new software or operating system that originates at ADS.

Regarding the Homecare program model, the DSS system has different requirements, with prior authorizations required for meals according to procedure codes and prescribed meal types and frequencies.

4. **Assess possible reform of the Form V. Clients, specifically Congregate, feel it is intrusive and the additional information is a barrier for attendance. Make the requirements of the Older Americans Act the minimum standard.**

Providers routinely raise participant cooperation issues about the large amount of data required during intake. Except for the Service Indicators section of the Form 5, all other sections of the Form 5 collect information required as part of the State Performance Report. The Service Indicators section was intended to collect information that would allow AAAs and ENPs to prioritize consumers in the event of a waitlist, and to provide additional data about malnutrition among older adults. ADS is willing to discuss suggested streamlining that conforms with the requirements of the SPR.

- 5. CANASP wishes to acknowledge that not acting on these points will result in ENPs dropping contracts and opting out of their provider status. The gap between cost and funds has historically been filled by client donation and fundraising. In recent years client donation has all but disappeared, dropping steadily and fundraising totals are unsustainable as they rise to a percentage that is unrealistic.**

CAAs Recommendations:

- 1. Streamlining Operations**

- a. Recommendation #1 – What is Connecticut’s process for distributing the funds to the AAA? Are there any efficiencies to improve the timeliness of distributing these funds to the AAA and providers?**

Asked and answered in prior submission.

- b. Recommendation #2 – Ensure that the AAAs execute contracts with providers within 30 days of contract start date.**

ADS supports timely execution of contracts and will work with the AAAs during monitoring to address this.

- c. Recommendation #3 – Reduce the amount of information captured on Form 5’s to be in alignment with the minimum information required by Federal Funding Agency.**

Except for the Service Indicators section of the Form 5 (see excerpt on last page), all other sections of the Form 5 collect information required as part of the State Performance Report. The Service Indicators section was intended to collect information that would allow AAAs and ENPs to prioritize consumers in the event of a waitlist, and to provide additional data about malnutrition among older adults. ADS is willing to discuss suggested streamlining that conforms with the requirements of the SPR.

- d. Recommendation #4 – ENP staff enter Form 5 information directly into Grantee Gateway with additional funds allocated to ENP’s for this task.**

Grantee Gateway is not an MIS system of ADS. Any change to the statewide MIS system would require an investigation into possible alternative systems and a competitive procurement process.

There are some ENPs who currently enter their data directly into the state database, WellSky A&D as part of their contracts with their respective AAA.

- e. Recommendation #5 – State Unit on Aging issues direct contracts with ENP’s and the State Unit on Aging audit the AAA payment processes and selection of ENP providers.**

The Older Americans Act requires that ADS-SUA distributes funds directly to the AAAs and that the AAAs contract with service providers in the community through a competitive process.

- f. Recommendation #6 – An external auditor or consulting firm is hired to conduct an administrative analysis of the processes to determine what efficiencies can be implemented by AAAs, and State Aging office to improve contracting and payment process.**

ADS opposes the hiring of any consultants. This would result in additional costs that could potentially divert funds away from the program. Not to mention that the topic of efficiencies seems to have been extensively studied and is an ongoing discussion at regular stakeholder meetings.

2. Payment Processing

- a. Recommendation #1 – Issue an initial payment by leveraging state funds at the beginning of the program year (October 1st) equal to 60 days of expenditures**

At this time, the funding allocation schedule for state funds is on a quarterly basis. A change to this schedule would require approval beyond ADS authority.

- b. Recommendation #2 – allow for funds to be requested at 25% expended rather than the current 75% requirement**

ADS has recommended amending contracts to allow for funds to be requested at 50% expended rather than the current 75% requirement. This is pending Commissioner and AG approval.

- c. Recommendation #3 – payments must be issued no greater than 30 days after a monthly reporting cycle ends (i.e., November payment issued by December 30th)**

It is unclear whether this recommendation is meant for the AAAs or ADS, however, this is unrealistic for ADS, as AAAs must do their monthly closeout before they submit expenditure reports and payment requests to ADS.

3. Request for Proposal Process

- a. Recommendation #1 – Include at least 2 members of review panel who have direct experience in operating Elder Nutrition programming and/or food service distribution.**

Although regulations require a competitive procurement process, the composition of review panels is at the discretion of the AAAs. Given the relatively small number of in- state providers, this may not be feasible.

- b. Recommendation #2 – Ensure that there is uniformity in training across all AAA regions on the scoring evaluation tool**

Currently, all AAAs must comport with a competitive bid process and use the same scoring tool.

- c. Recommendation #3 – Ensure that the State Aging office reviews and signs off on the procurement process implemented by the Agency on Aging**

ADS reviews the draft Request for Proposals and requires that all RFPs be done in accordance with state procurement guidelines and Connecticut State Regulations under §17b-423-5. If a bidder for an RFP believes that the process was not properly followed, after appealing to the AAA, the bidder may appeal to the State Unit on Aging.

- d. Recommendation #4 & #5 – Maximize buying power of ENP's through a discounted (1) fuel rate (as currently available for municipal vehicles) and/or (2) raw food rate (as currently available through local education districts)**

ADS encourages cooperative or bulk purchasing within contract guidelines.

4. Advocacy Efforts

- a. Recommendation #1 – Convene a meeting of CT's Federal Delegation to understand how the OAA funding comes to Connecticut to understand the timing delay.**

ADS cannot make recommendations about engaging with Congress; however, AAAs and local providers are free to advocate at any level of government for their needs as they see fit.

- b. Recommendation #2 – Request an increase to Older American Act funding that is sufficient to meet the unit costs of ENP provider agencies in CT (\$5.5 million annually)**

Report, pg 19: Each year the ACL allocates a set amount of OAA funding to each state and defines how the funding is proportioned for each Title III line item. Because the program is not means-tested or an entitlement, services may be reduced or waiting lists established when the demand for services exceeds these available funds.

- c. Recommendation #3 – Ensure that state funding to support ENP is being leveraged to maximize federal reimbursement**

Report, pg. 24: The Elderly Nutrition Program receives an allocation of state funds each year to partially match federal funding. State Nutrition funds are allocated in one amount (in contrast to separate earmarked federal allocations for congregate and home delivered meals) in accordance with CGS § 17a-851(b).

AAAs Recommendations:

- 1. ENPs can enter Form V data directly into Grantee Gateway.**

Grantee Gateway is not an MIS system of ADS. Any change to the statewide MIS system would require an investigation into possible alternative systems and a competitive procurement process.

There are some ENPs who enter their data directly into the state database, WellSky A&D as part of their contracts with their respective AAA.

- 2. SUA can elect to reduce the length of the Form V data and capture only data that is requested by the Federal Government.**

Except for the Service Indicators section of the Form 5, all other sections of the Form 5 collect information required as part of the State Performance Report. The Service Indicators section was intended to collect information that would allow AAAs and ENPs to prioritize consumers in the event of a waitlist, and to provide additional data about malnutrition among older adults. ADS is willing to discuss suggested streamlining that conforms with the requirements of the SPR.

- 3. AAAs can enter data directly into the CORE System or submit directly to Finance.**

Provider payment requests must be reviewed by AAA Field Representatives to check against expenditure reports for completeness and accuracy. These required checks and balances in our accounting processes are intended to prevent errors and fraud.

4. **AAAs can request funds at 25% of funds expended rather than 75% OR make a request at 50% of utilization when the processing time can be reduced from current actual of 54 days to 30 days.**

ADS has recommended amending contracts to allow for funds to be requested at 50% expended rather than the current 75% requirement. This is pending Commissioner and AG approval.

5. **State funded meals through the CT Home Care Program for Elders (CHCPE) could be paid at the uniform reimbursement rate to prevent expenses from CHCPE transferring to Title III reimbursement.**

The Connecticut Home Care Program for Elders is administered by the Department of Social Services and reimbursed in accordance with DSS fee schedules, so ADS cannot speak to this reimbursement.

6. **Other food security options for seniors could be explored to decrease pressure on the ENP program to provide more than one meal per day.**

Report, pg. 56: All program providers have indicated that the need for services continually exceeds their available resources, and, in some instances, providers have had to reduce the number of meals provided or have established waiting lists for services. One solution may include leveraging other federally supported programs, particularly those which older adults may already be eligible for but not accessing, like the Supplemental Nutrition Assistance Program (SNAP).

According to the Food Research and Action Center, nationwide, only 42% of eligible older adults are enrolled in SNAP compared to 83% of all eligible people that participate in this program. Many older adults who are homebound are likely eligible for SNAP but may not have the ability to use these benefits due to their lack of mobility. However, states including Minnesota and Wyoming allow SNAP benefits to be used for Meals on Wheels programs. As SNAP benefits are federally funded, with only the administrative costs split with the state, it might be worth exploring ways to maximize SNAP participation, including an exploration of the Restaurant Meals Program option.

7. **Alternate sources of funding for meals (ex. Medicare Medically Tailored Meals, Food As Medicine) could be used for participants with related medical or social needs to reduce dependence on only OAA for funding of this program.**

As OAA is intended to be the payor of last resort, ADS supports the concept of exploring alternate sources of funding, particularly the leveraging of other federal funding sources. However, until the Governor's budget is presented in February, and we can determine policy priorities and funding levels, we are unable to support any potential budgetary increase.

Addendum E: CAAs Recommendations Elderly Nutrition Task Force

I. Streamlining Operations

Recommendation #1 – What is Connecticut’s process for distributing the funds to the AAA? Are there any efficiencies to improve the timeliness of distributing these funds to the AAA and providers?

Recommendation #2 – Ensure that the AAAs executes contracts with providers within 30 days of contract start date.

Recommendation #3 – Reduce the amount of information captured on Form 5’s to be in alignment with the minimum information required by Federal Funding Agency

Recommendation #4 – ENP staff enter Form 5 information directly into Grantee Gateway with additional funds allocated to ENP’s for this task

Recommendation #5 – State Unit on Aging issues direct contracts with ENP’s and the State Unit on Aging audit the AAA payment processes and selection of ENP providers.

Recommendation #6 – An external auditor or consulting firm is hired to conduct an administrative analysis of the processes to determine what efficiencies can be implemented by AAA’s, and State Aging office to improve contracting and payment process.

II. Payment Processing

Recommendation #1 – Issue an initial payment by leveraging state funds at the beginning of the program year (October 1st) equal to 60 days of expenditures

Recommendation #2 – allow for funds to be requested at 25% expended rather than the current 75% requirement

Recommendation #3 – payments must be issued no greater than 30 days after a monthly reporting cycle ends (i.e. November payment issued by December 30th)

III. Request for Proposal Process

Recommendation #1 – Include at least 2 members of review panel who have direct experience in operating Elder Nutrition programming and/or food service distribution.

Recommendation #2 – Ensure that there is uniformity in training across all AAA regions on the scoring evaluation tool

Recommendation #3 – Ensure that the State Aging office reviews and signs off on the procurement process implemented by the Agency on Aging

Recommendation #4 – Maximize buying power of ENP’s through a discounted fuel rate (as currently available for municipal vehicles)

Recommendation #5 – Maximize buying power of ENP’s through a discounted raw food rate (as currently available through local education districts)

IV. Advocacy Efforts

Recommendation #1 – Convene a meeting of CT’s Federal Delegation to understand how the OAA funding comes to Connecticut to understand the timing delay.

Recommendation #2 – Request an increase to Older American Act funding that is sufficient to meet the unit costs of ENP provider agencies in CT (\$5.5 million annually)

Recommendation #3 – Ensure that state funding to support ENP is being leveraged to maximize federal reimbursement



Addendum F: CANASP Recommendations

Connecticut Association of Nutrition and Aging Service Providers

11/29/23

Nutrition Task Force

CANASP Recommendations

Catholic
Charities of
Fairfield
County, Inc.

Community
Renewal Team,
Inc.

CW Resources,
Inc.

Estuary
Council of
Seniors, Inc.

LifeBridge
Community
Services, Inc.

Litchfield Hills
Northwest
Elderly
Nutrition

New
Opportunities,
Inc.

TEAM, Inc.

Thames Valley
Council for
Community
Action, Inc.

1. Realign State Funding to precede Federal fund release at minimum 80% of prior year federal contribution. This will release adequate funding as a loan to be paid back to the state after federal dollars are received. This is intended to speed up the billing turnaround to contracted vendors.

2. Increase Funding to Elderly Nutrition Program (ENP), Encourage the State Unit on Aging (SUA) to continue to Advocate and support with the Administration for Community Living or ACL and Federal government to increase Older Americans Act funding. This will support ongoing data and advocacy for decreasing the gap between actual cost to produce the meals and the Unit of Service (UOS) reimbursement and increasing service levels ensuring no or limited waitlists in the future.

2a. Quality of product, proper funding has not kept up with rising cost of food, paper, labor and delivery capability. Programs are forced to use less or inadequate products and materials to execute the contractual requirements. More funding can't be overstated as the primary need for Both the Title IIIc Older Americans Act Funding (OAA) and the Ct Home Care Program for Elders or CHCPE.

3. Streamline the reporting process and the Form V, to speed up access to contracted funds. WE are suggesting having a template or portal that the ENPs could preload for the Area Agencies on Aging (AAAs). This May help to eliminate redundancy. The client assessment that ensures eligibility is the approval for these meals, making the Unit of Service (UOS) pre approved, speeding up the process and eliminating double work in the future. Adjustments for inappropriate or incorrectly billed meals can be fixed monthly and ongoing. We Suggest using the homecare program model.

4. Assess possible reform of the Form V. Clients, specifically Congregate, feel it is intrusive and the additional information is a barrier for attendance. Make the requirements of the Older Americans Act the minimum standard.

5. CANASP wishes to acknowledge that not acting on these points will result in ENPs dropping contracts and opting out of their provider status. The gap between cost and funds has historically been filled by client donation and fundraising. In recent years client donation has all but disappeared, dropping steadily and fundraising totals are unsustainable as they rise to a percentage that is unrealistic.