NC Department of
Health and Human Services
Division of Aging and Adult Services
State Fiscal Year 2021
www.ncdhhs.gov

December 2021

North Carolina
County Data Reports

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SECTION I

INTRODUCTION

The Division of Aging and Adult Services (DAAS) produced the first County Data Reports in February 1992, pursuant to N.C.G.S. 143B-181.1A. While we have made some minor changes in the presentation of the data since then, the intent and basic format of the reports have remained essentially constant. Our primary goal is still to provide basic demographic and service utilization data for individuals 60 years of age and older for use by County Planning Committees, especially in their development of a plan for use of Home and Community Care Block Grant (HCCBG) funds.

Each county in North Carolina has discretion in how HCCBG funds are used—which services are to be funded, in what amounts, and which agencies should be the providers of service. The opportunity of counties to influence the availability of services grew during the 1990's largely because of increases in State funding for home and community-based services for non-Medicaid eligible seniors. These funds, coupled with the expansion of Medicaid eligibility to 100 percent of the federal poverty level, enabled more meaningful local planning. As public funding has stayed constant or even diminished at times, the decisions on how best to use the HCCBG funds have become more challenging and important. Never has this been truer than the current situation facing the state and counties, especially as the number of older North Carolinians grows.

The data in the reports should be used with other information to make key decisions in funding aging services. Other relevant information might include: client "waiting list" data, local indicators of service needs (including cases involving adult protective services), current budget utilization by funding sources, availability of other sources of funding, costs of service, demographic profiles of clients, client satisfaction with services, and evaluations of the current set of providers delivering services. Area Agencies on Aging (AAA) can help County Planning Committees gather information needed to make sound decisions.

Questions about the descriptions of services or clarifications needed regarding the information included in this package should be directed to the regional AAA or to the Division's Planning, & Service Support Section (919-855-3442).

SECTION II

DEMOGRAPHIC DATA

This section identifies some of the sources of key demographic data on North Carolina's older adults. While this information does not reflect all available Census data on older adults, it is a good representation of the most frequently requested data.

The web sites, listed below, provide other key demographic data on North Carolina's older adults.

1. The NC Office of Budget and Management maintains considerable demographic, economic, and other data on NC counties. https://www.osbm.nc.gov/facts-figures

2. The US Census Bureau maintains data on population, economic, social and housing characteristics. https://data.census.gov/cedsci/

3. The US Administration of Aging (AoA), now part of the Administration for Community Living (ACL), maintains data on the characteristics of older Americans through data collection and research projected funded by ACL. Its Aging Integrated Database (AGID) is an on-line query system based on ACL-related data files and surveys and includes population characteristics from the Census Bureau for comparison purposes. In addition, its State Profiles provide key data elements from Older Americans Act programs and services and other features. https://acl.gov/aging-and-disability-in-america/data-and-research

4. The Division of Aging and Adult Services website has "Data Reports" which includes both state and county statistical profiles and other special reports. http://www.ncdhhs.gov/divisions/daas/data-reports

SECTION III

STATE SERVICE UTILIZATION DATA

The primary purpose of this section is to illustrate the statewide programs/services utilization by North Carolina's older adults. For SFY 2020-21, seven different State agencies provided service data on persons age 60 and older.

To assist with the county's service planning for aging population, the various services available from these state agencies have been assigned to a major service category. These categories are defined as follows:

Code   **Description of Categories**

1   Adult Care Homes - Includes: Special Assistance payments for residents of adult care homes; Medicaid expenditures for: personal care services (PCS-basic and enhanced), care management and screening.

2   Economic Support - Programs and services that provide an indirect financial support, without which a cash outlay by the recipient would be required.

3   Hospitals, Physicians, and Other Health Care - Services that provide a variety of health care to recipients outside their home.

4   Home Health and In-Home Care - Services that provide health and related care to recipients in their home.

5   Institutional Care - Services provided to residents of nursing homes, mental health facilities, and hospitals.

6   Social Support - Services that provide social and/or other support to recipients inside or outside their home.

The data report "**Expenditures by State Agencies, Service and Service Category** (Table III-A) provides a summary of service and expenditure data for the seven different reporting agencies for the state. The specific services that comprise the major service categories (above) are cross-referenced by code number. Reported expenditures generally represent the federal, state, and minimum local share for services provided to individuals age 60 and older by the contributing funding sources. Total expenditures for DAAS include consumer-contribution revenues reported as well as U.S. Department of Agriculture (USDA) reimbursement for meals provided through HCCBG. Total consumer-contribution revenues reported to DAAS for SFY 2020-21 was $1,316,435. Total USDA reimbursement for meals provided through HCCBG for SFY 2020-21 was $2,776,326. The data report "**Schedule of Expenditures by County, Service and Service Category** (Table IV) provides the expenditures reported by the seven agencies based on the six service categories for all the counties, where as Table IIIB summarizes all the expenditures by agencies and categories.

Note: Since 2003, DAAS has been responsible for administering all of the services reported under the Division of Social Services, except for Energy Assistance and Food and Nutrition Services.

Note: In SFY 2011-2012, DAAS became responsible for administering Special Assistance for Blind through the Special Assistance In-Home and Special Assistance Adult Care Home Services. Previously, this service was administered by the Division of Services for the Blind.

Each contributing state program shares the common goal of providing services to North Carolina's older adults. However, the only common data element that is reported from these agencies is expenditures. While expenditure data have been collected in this manner since SFY 1991-92, there are typically several changes each year. Below are reminders and noted changes:

1. State/County client information is not available for every service with an expenditure, in which case the client total is left blank. In situations where the number of clients served is 2 or fewer, the client numbers are left blank to maintain client confidentiality.

2. The sum of the county unduplicated counts may or may not equal the statewide-unduplicated counts for DAAS. This is because the state data reports on unduplicated client counts for the state while the county data reports on unduplicated client counts for the county. A person receiving the same service in two different counties will be counted once for the state report but will be reported as a unique count in each of the counties s/he received services.

3. The Division of Social Services' unduplicated counts of recipients (for each service/service category) for the entire State Fiscal Year (SFY) were obtained using the Service Information System (SIS) and day sheets. The sum of the county unduplicated counts may or may not equal the statewide-unduplicated counts. Expenditure data are estimates based on reported expenditures (in the SIS/Co Admin Interface) for the SFY. The percent of 60+ to all recipients was applied to the total reported costs to obtain an estimate of the expenditures. This method applies to all services, even those where some of the fund sources are ">60" and "<60", for consistency. The Special Assistance counts are unduplicated for the year, rather than average monthly counts. The Food and Nutrition Services counts were obtained from North Carolina Families Accessing Services through Technology (NC FAST) by performing a match of individuals across the two systems and the expenditures were estimated.

4. Energy Assistance: The data in the report is provided for two DSS programs- Low Income Energy Assistance Program (LIEAP) and Crisis Intervention Program (CIP), both federally funded for providing energy assistance.

5. Adult Care Home Case Management and At-Risk Case Management services were discontinued effective July 2014.

6. The Special Assistance Service was broken down into two categories.
   - Special Assistance Adult Care Home: This service pays the room and board for eligible residents of adult care homes. The program serves adults 18 and older. Data for 60+ are reported here.

- Special Assistance In-Home Program: Although the data included in this report reflect only the 60+ population, this service provides an option for in-home care for eligible older persons and adults with disabilities who are at risk of placement in an adult care home but who desire to live in a private living arrangement and can be maintained safely in that setting.

7. DAAS received state appropriations for Project C.A.R.E. ("**C**aregiver **A**lternatives to **R**unning on **E**mpty"), a program which was available statewide in SFY 2015-16 to persons caregiving for individuals with Alzheimer's disease and related dementias. Funding supports providing information, assistance, and referral for supports as well as individualized Care Management through the trajectory of their caregiving role. Since this program serves caregivers of any age in the state, serve expenditure data is not included for each county.

8. Since SFY 2015, Information and Assistance a HCCBG service has been renamed Information and Options Counseling.

9. Health Promotion/Disease Prevention data includes health screening and health promotion and disease prevention program expenditures.

10. The DAAS Aging Resources Management System (ARMS) does not differentiate between the service dollars and administrative dollars. Therefore, in programs such as Project C.A.R.E. and the Family Caregiver Support Program, the county expenditure amount may not reflect where the direct services take place.

11. This year's DAAS reports include expenditures of (1) **Coronavirus Aid, Relief, and Economic Security Act (CARES**) grant funds received from ACL. These funds were used to help meet the needs of older adults and people with disabilities as communities implement measures to prevent the spread of COVID-19. The grants will fund home-delivered meals; care services in the home; respite care and other support to families and caregivers; information about and referral to supports; and more (2) **Families First (FF) Coronavirus Response Act,** additional funding to provide nutrition services programs authorized by the Older Americans Act.

12. Data for the Department of Transportation's Elderly and Disabled Transportation Assistance Program (EDTAP) cover both older adults and clients with disabilities. In SFY 2011-12, two Regional Transit Systems were formed by state legislation (Article 25 & Article 26) to provide transportation services. They are Albemarle Regional Health Services (ARHS) serving Camden, Chowan, Currituck, Pasquotank and Perquimans and the Western Piedmont Regional Transit Authority (WPRTA) serving Alexander, Burke, Caldwell and Catawba counties. For these counties, expenditure data were not available at the individual county level and the aggregate amount for all of the counties is shown in the expenditure reports. Macon county EDTAP funds were transferred to Job Access Reverse Commute Program (JARC), hence there is no expenditure amount. Watauga county is being served by Appalachian Campus Area Rapid Transit (AppalCart). For SFY 2020-2021 EDTAP expenditures, data from SFY 2019-2020 was used, since General Assembly did not allocate any funds for SFY 2021. CARES ACT funds were used for ROAP trips.

13. Division of Medical Assistance is now noted as Division of Health Benefits (NC Medicaid). Other funding sources in state government provide services that benefit older adults. However, their data collection and reporting systems are not designed to provide age-specific information. The

contributing state funding sources shown in this package reflect the programs administered by the State of North Carolina that have a large and direct effect on older adults. Because the state and local governmental units have some control and influence with the administration of these services, it is important to focus on these services when addressing the local needs of older adults.

The direct payment of Social Security benefits to older adults clearly represents the largest expenditure of public funds. Expenditures for Medicare, Supplemental Security Income (SSI), Veterans and other federal benefits would overshadow the programs administered by the state. Although not reflected in the reports, the availability of these federally administered programs should be considered when addressing the needs of older adults. The data tables also do not take into consideration special grant-funded projects that are either time-limited and/or geographically limited (for example, Senior Farmers' Market Nutrition program).

SECTION IV

COUNTY SERVICE UTILIZATION DATA

Expenditures associated with HCCBG do not include significant local expenditures reported over and above the minimal local match requirements. County expenditures for DAAS do include consumer-contribution revenues reported.

Although funding through DAAS for home and community services has generally remained static, there is some value for local decision-makers in comparing this year's County Data Reports with information from previous year. Comparing the growth (or decline) in a county's general older population, those with low income, etc., can help identify the relative size and scope of services needed. Some comparison of per capita expenditures (divide expenditures by total population group or actual persons served) may help illustrate the county's response to identified service needs. If per capita expenditures (by total population) are falling, this could indicate that the county is having difficulty keeping pace with population growth and/or inflation. Per capita changes (by persons served) could suggest changes in how the services are delivered (for example, who gets served, intensity of service and/or program efficiencies.)

County planning committees are encouraged to have frank and open discussions about these data and how best to meet the needs of seniors. <u>The Division especially wishes to emphasize the importance of citizen and consumer input throughout the HCCBG funding planning process for consideration by the county commissioners.</u> Counties should conduct this work in a manner that avoids any appearance of conflict of interest with respect to service providers.

The Area Agency on Aging can also help in the analysis and interpretation of these data. Additionally, the Area Agency on Aging can explain how funds for such services as family caregiver support and health promotion are being used within the region. The county expenditure data for these services and supports may not fully reflect the supports that are being made available to county residents through activities administered by Area Agency on Aging.