

FROM THE HILL

Safety of Seniors Act of 2007

The safety of Seniors Act 2007 will allow for more research and data gathering on falls among older adults, and how falls can be prevented. The bill would support a national education campaign focusing on reducing falls among older adults and preventing repeat falls as well as awarding grants, contracts or cooperative agreements to qualified organizations, institutions, etc. It would also give the ability to create demonstration projects focused on evaluating and preventing senior citizen falls. Senate Bill 845 seeks to address the increasing problem of falling and fall-related injuries among the older American population. In the United States, one of every three persons age 65 and over falls each year. Falls are the leading cause of injury death and the most common cause of injuries and hospital admissions for trauma in older adults. Most recently the Senate Bill, S. 845 was passed.

For more information: <http://www.govtrack.us/congress/bill.xpd?bill=s110-845> •

CMS Announces 2008 SHIP Funding

On April 7, the Centers for Medicare and Medicaid Services (CMS) announced that \$35.8 million will be distributed to State Health Insurance Assistance Programs (SHIPs) to help people with Medicare get more information, counseling and assistance with understanding and making health insurance choices. The \$35.8 million being distributed to SHIPs today is the first installment of more than \$50 million that will be provided to the SHIPs in 2008. Regular SHIP grants will total \$39 million, performance-based grants will be awarded in September, SHIP support, and an additional \$15 million in supplemental funding will be distributed on June 1st.

SHIPs were formally established under Section 4360 of the Omnibus Budget Reconciliation Act (OBRA) of 1990, Public Law 101-508. The Act authorized CMS to make grants to states for health advisory services programs for people with Medicare. Currently, there are SHIPs in all 50 states, Washington, DC, Guam, Puerto Rico and the Virgin Islands. Two-thirds of these state based programs are administered by State Units on Aging and the remainder are administered by State Departments of Insurance. In some states, additional state funding is leveraged to support the program. SHIPs use community based networks, including a significant number of area agencies on aging, to provide Medicare beneficiaries with one-on-one assistance on a range of Medicare and health insurance topics. There are more than 1,300 local sponsors and a cadre of over 14,000 highly skilled volunteer and paid counselors that work with states to create comprehensive statewide networks who provide personal assistance to Medicare beneficiaries and their families.

Significant accomplishments of the SHIP has been their success in helping to educate many of the 39 million Medicare beneficiaries about their prescription drug coverage options, publicizing the low income subsidy and providing personalized help to vulnerable older persons with complex health insurance issues.

For detailed information on State Health Insurance Programs (SHIPs) click here: http://www.cms.hhs.gov/partnerships/10_SHIPS.asp

To view the CMS National press release issued today click here: http://www.cms.hhs.gov/apps/media/press_releases.asp •

The Traumatic Brain Injury Act Reauthorization

The Traumatic Brain Injury Act (Bill S 793) would renew a Center for Disease Control and Prevention program that funds state programs for the tracking and reporting of brain injuries. The program also connects patients with hospitals and treatment centers. The bill would reauthorize a Health Resources and Services

Administration grant program that funds state brain injury rehabilitation programs. Bill S 793 has already been cleared by a vote of 392-1 by the Senate and is now awaiting clearance from the president's desk. If allowed both programs would be reauthorized through 2011.

For more information: <http://www.govtrack.us/congress/bill.xpd?bill=s110-793> •

Senator Dodd Announces Disability Savings Act of 2008

On March 11, Senator Chris Dodd of Connecticut announced a new piece of legislation, the Disability Savings Act, which would modify the federal tax code to allow tax-advantaged savings accounts for disability expenses. The accounts would not affect eligibility for federal benefits, and would allow families of people with disabilities to set aside up to \$250,000 for disability-related expenses. This legislation represents a new strategy to promote asset development for individuals with disabilities and would enable families to support individuals with disabilities through tax advantages.

For more information: <http://dodd.senate.gov/index.php?q=node/4316> •

IN WASHINGTON

NASUA at Aging in America

The Aging in America Conference was held in Washington, DC March 26-30. NASUA was well represented at the event, with President Pat Polansky, Martha Roherty, Bernice Hutchinson and Jessica Sayers in attendance.

President Pat Polansky gave two presentations in the Long Term Care track. Her first presentation, entitled

“The Future of Long Term Care in America,” featured Assistant Secretary Josefina Carbonell and n4a President Charles Sission. President Polansky discussed NASUA's efforts to seek full funding for the Older Americans Act. President Polansky and n4a President Charlie Sisson discussed the joint policy proposal Project 2020 and urged audience members to join their efforts to “take the hill”. President Polansky indicated that the proposal would shortly be released to the public and will be seeking “billions not millions” in appropriations.

To view Assistant Secretary Carbonell's remarks: <http://www.aoa.gov/press/speeches/speeches.asp>

In addition, President Polansky presented in the session titled “Aging and Disability Resource Centers: Key to Long Term Care Balancing Efforts.” In this session, she discussed the efforts New Jersey has made to rebalance Long Term Care utilizing ADRCs. She was joined by representatives from Kentucky and the Lewin Group.

Martha Roherty presented along with representatives from Service Employees International Union (SEIU) and American Association of Homes and Services for the Aging (AAHSA) in a session titled “Making Long Term Care Financing a National Priority.” Martha discussed the future of financing Long Term Care and the role and impact on the States.

Bernice Hutchinson conducted two sessions. The first session, *Advancing Diversity: Shaping Tomorrow's Access to Aging Information, Services and Supports* was designed as an intensive for the 15th graduating class of the ASA New Ventures in Leadership Project. New Ventures in Leadership (NVL) aims to advance knowledge and experience of professionals in aging from diverse backgrounds to make positive contributions in aging policy, program development and service delivery to better serve diverse older audiences. The intensive used culturally grounded principles, promising aging network practices and practical stories to help the graduates understand the myriad of complex communication issues that affect quality conversations between aging information and referral professionals and consumers. The second session, *ADRCs: The Natural Evolution for I&R/A* explored the history of the Older Americans Act I&R network, how ADRCs have evolved and one practical example of a local program. The panel included Greg Case of AoA and Stephanie Hall of the Maryland Department on Aging.

If you are interested in developing diversity and/or I&R training for your state or would like copies of these PowerPoint presentations, contact Bernice Hutchinson at bhutchinson@nasua.org •

NASUA News

The Newsletter of the National Association of State Units on Aging

APRIL 2008

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Dennis Smith, Director of CMSO Resigns

Dennis Smith has resigned as CMSO Director; April 11 was his last day. Dennis came to CMS in 2001 after serving as Medicaid Director for Virginia, and, prior to that, as staff member for the Senate Finance Committee. Herb Kuhn, Deputy Director of CMS, will take over as Acting CMSO Director. Mr. Kuhn joined CMS in 2004, heading the Center for Medicare Management, which oversees the fee-for-service side of the Medicare program. •

NEW REPORTS AVAILABLE

Mathematica Report on Medical and Program Costs Associated with Diabetes

Mathematica Policy Research released a paper entitled *Federal Medical and Disability Program Costs Associated with Diabetes, 2005, Summary of Methods and Key Findings*. The paper analyzes findings from the study of federal spending on diabetes conducted by a Mathematica study team with funding from Novo Nordisk. The paper estimates the costs to the federal government from treating diabetes, including federally financed medical care costs and disability payments including Supplemental Security Income and Social Security Disability Insurance payments. The researchers estimated 2005 federal expenditures from national program and population data. They found that

in 2005, the federal government spent \$79.7 billion in additional costs for medical care and disability costs to treat people with diabetes. This includes \$2.5 billion in disability payments associated with diabetes and \$77.2 billion in increased medical costs. Nearly 80 percent of the federal medical costs were in the Medicare program. The paper concludes that federal costs related to diabetes will grow with projected increases in life expectancy and diabetes prevalence unless there are enhanced efforts to control blood glucose, reduce the risk of complications, and prevent the onset of diabetes.

To view the paper: <http://www.mathematicampr.com/publications/pdfs/Federalmedical.pdf>. •

New State by State Falls Data

The National Safety Council with CDC's National Center for Injury Prevention and Control have developed the list of the Top 15 states with the highest number and rate of falls deaths. There is not a reoccurring theme throughout the data. The large, older adult greater populated states have the highest incidence of deaths by falls.

Ranked by Rate			
Rank***	State	Rate** (per 100,000 pop.)	Number of Deaths*
1	New Mexico	99.26	235
2	Wisconsin	87.35	710
3	Vermont	81.46	72
4	South Dakota	76.19	100
5	Arizona	75.93	593
6	Minnesota	71.86	513
7	Rhode Island	70.49	125
8	Montana	67.74	96
9	Colorado	67.31	315
10	Oregon	63.48	328
11	Washington	63.02	491
12	Iowa	59.31	304
13	North Dakota	57.38	67
14	Missouri	52.5	437
15	Idaho	51.4	88

Ranked by Number of Deaths			
Rank***	State	Number of Deaths*	Rate** (per 100,000 pop.)
1	Florida	1,405	43.01
2	California	1,249	30.77
3	Texas	945	41.31
4	New York	858	31.76
5	Pennsylvania	787	37.32
6	Wisconsin	710	87.35
7	Ohio	683	42.4
8	Arizona	593	75.93
9	Minnesota	513	71.86
10	Michigan	505	38.38
11	Washington	491	63.02
12	North Carolina	477	45.48
13	Illinois	451	27.5
14	Missouri	437	52.5
15	Georgia	413	47.9

Disparities in Asian American Populations

Recently, there has been a substantial amount of discourse on health reform and the lack of health insurance coverage as well as the lack of access to health care. The Kaiser Family Foundation and the Asian & Pacific Islander American Health Forum decided to create a more in-depth analysis of the pre-existing health disparities involving Asian Americans and whites; however instead of lumping all Asian Americans into one homogeneous category their analysis specifically targeted subgroups within the race. By using two annual government issued surveys, their analysis revealed wide disparities among the nation's Asian American, Native Hawaiian and Pacific Islander populations. One key finding was that the proportions of nonelderly uninsured people varied; Koreans having 31 percent, Native Hawaiians and Pacific Islanders with 24 percent, Vietnamese with 21 percent, Japanese and Asian Indians with 12 percent and Filipinos at 14 percent all in comparison to the 12 percent of nonelderly non-Hispanic White uninsured population. Contrary to popular belief the Asian American community also has some threatening disparities not only in comparison to White American populations but also within itself. For example, according to the Study and its findings, nonelderly Koreans are the least likely to obtain employer-sponsored health coverage while Asian Indians have the highest rate of employer-sponsored health coverage. There are varying factors for these revelations such as how a specific group arrived in the United States or the environment in which they surround themselves. Nonetheless this new analysis calls for attention from policymakers and other leaders when trying to address the American crisis of uninsured and underinsured residents. It is a definite consideration for future health care reform. •

Notes: Age-adjusted rates per 100,000 U.S. standard population. Populations used for computing death rates are postcensal estimates based on the 2000 census. Since death rates are affected by the population composition of a given area, age-adjusted death rates should be used for comparisons between areas because they control for differences in population composition. Data are for 2005.

Sources: United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Compressed Mortality File (CMF) compiled from 2005, Series 20 No. 2K, 2008. Accessed 3/24/2008 via the CDC WONDER On-line Database. •

Diabetes Deaths State by State

Statehealthfacts.org, Kaiser Family foundation

	<i>Diabetes Death Rate per 100,000</i>
United States	24.6
Alabama	29.3
Alaska	22.3
Arizona	19.8
Arkansas	26.6
California	23.6
Colorado	19.1
Connecticut	20.3
Delaware	26.1
District of Columbia	32.7
Florida	22.3
Georgia	22.6
Hawaii	15.0
Idaho	22.1
Illinois	23.7
Indiana	26.8
Iowa	20.0
Kansas	23.7
Kentucky	27.4
Louisiana	38.5
Maine	24.6
Maryland	25.8
Massachusetts	17.5
Michigan	27.2
Minnesota	23.4
Mississippi	23.0
Missouri	24.5
Montana	26.6
Nebraska	23.2
Nevada	15.2
New Hampshire	23.0
New Jersey	27.1
New Mexico	31.0
New York	19.4
North Carolina	26.0
North Dakota	26.4
Ohio	30.3
Oklahoma	32.1
Oregon	29.1
Pennsylvania	23.0
Rhode Island	22.2
South Carolina	26.9
South Dakota	25.8
Tennessee	29.9
Texas	29.1
Utah	29.9
Vermont	25.4
Virginia	22.6
Washington	25.2
West Virginia	34.4
Wisconsin	21.1
Wyoming	25.7



EPA Aging Initiative

The Environmental Protection Agency (EPA) has been working in collaboration with the American Society on Aging to create informative materials for the aging community. The available fact sheets and posters from the EPA cover a range of topics that can be beneficial. “Diabetes and Environmental Hazards,” describes the negative effects environmental hazards have on the health of individuals living with diabetes. The fact sheet covering this topic outlines simple and important preventative steps to reduce one’s exposure to air pollution and extreme heat. Another area that the new initiative covers is the startling rate of Chronic Obstructive Pulmonary Disease in Americans over 65 years of age. “Age Healthier, Breathe Easier” poster and fact sheet outline simple steps that older adults with respiratory diseases can take to reduce and control the frequency of their symptoms. Another popular issue that older Americans face is the excessive heat spells that stretch across the US. Approximately 1500 people die from excessive heat exposure and most are those 65 and above. “It’s Too Darn Hot: Planning for Excessive Heat Events” describes ways for older adults to reduce exposure to excessive heat and also describes measures local governments can take to prepare for periods of excessive heat.

The sheets have been translated into 13 different languages and can be downloaded on the EPA website at <http://epa.gov/aging/resources/factsheets/index.htm#fs>

There is also a large font series available at <http://epa.gov/aging/resources/factsheets/index.htm#lowvision>

Also available on the EPA website are grant opportunities, news and other useful information on the environment and aging. For more information please visit www.epa.gov/aging •

AHRQ Analyzes Costs Associated with Elder Abuse

Recently the Agency for Healthcare Research and Quality (AHRQ) released a report on the hospitalization costs for elder abuse and violence for the year of 2005. The following data is what was provided by the report. There were 1,830 hospitalizations for elder abuse; the mean total costs per stay for elder abuse was \$7500 and the mean total cost per day was \$1300. The aggregate costs for elder abuse totaled up to \$13.3 million for the year of 2005. The results are based upon statistics from the 2005 Nationwide Inpatient Sample, a nationally representative sample of inpatient stays in all short-term, non-federal hospitals. The information provided on costs associated with elder abuse defined elder abuse as “adult maltreatment, observation and evaluation of abuse and neglect, and criminal neglect among 65+ year olds.”

To read the full report: <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb48.pdf> •

Federal Report Demonstrates Americans Living Longer, but Disparities Remain

As the average life expectancy increases, today’s older Americans enjoy better health and financial security than any previous generation. However, rates of gain are inconsistent between the genders and across age brackets, income levels and racial and ethnic groups. Some critical disparities also exist between older Americans and older people in other industrialized countries. These and other trends are reported in *Older Americans 2008: Key Indicators of Well-Being*, comprehensive look at aging in the United States from the Federal Interagency Forum on Aging-Related Statistics.

Full press release: http://www.agingstats.gov/agingstatsdotnet/Main_Site/Data/2008_Documents/Embargoed_PR.doc •

FROM THE STATES

Maryland Expands Senior Drug Assistance

The Maryland legislature has approved legislation sought by Governor O’Malley to continue and expand its state-funded senior drug assistance program. That program provides a premium subsidy of up to \$25 a month for Maryland Medicare beneficiaries whose incomes are above the Medicare Savings Programs limits but below 300% of the FPL. CareFirst, the Blues plan in Maryland, currently provides \$23 million to the state to fund health care programs in Maryland in exchange for exemption from the state 2% premium tax; over half of those funds are used to support the state senior Rx assistance program. Earlier this winter, CareFirst agreed to increase their payment by \$4 million in 2009. The legislature has approved using the new money to allow the assistance program also to provide help in meeting actual drug costs for eligible individuals who find themselves in the Medicare “donut hole” coverage gap. The expansion will begin in January 2009.

For more information on the program: <http://www.marylandspdap.com/> •

Hawaii Passes Bill to Add Three Additional Ombudsmen

On April 4th, the Hawaii State Legislature passed a bill to add three local ombudsmen to their ombudsman program. The additional ombudsmen will serve the county of Maui, the county of Hawaii, and the county of Kauai. Hawaii State Ombudsman John McDermott says they will start with the biggest challenge because of its large size, the Big Island.

For more information: http://www.capitol.hawaii.gov/session2008/bills/SB2151_HD1_.htm •

ANNOUNCEMENTS

Older Driver Safety

The National Center in Senior Transportation (NCST) in partnership with the National Highway Traffic Safety Administration (NHTSA) and the Federal Transit Administration (FTA) has requested that all Teams of organizations and agencies with statewide reach submit proposals to conduct demonstration projects to establish and implement older driver safety plans. NCST and its partner organizations are interested in enhancing and promoting older driver safety in communities across the states in order to improve the transportation mobility of older persons.

NCST will select seven states to participate in a two-day technical assistance meeting and ongoing assistance in the development of an action plan. The teams selected will receive planning grants to assist in the implementation of their action plans. In addition to travel costs associated with the meetings, funding for the selected demonstration projects will range from \$5000 to \$11000. The information received from the submitted plans will be used in a guide for all states with proper distribution and presentation at two national conferences. The *DUE DATE for proposals is June 10, 2008*. If you would like more details and information please visit: http://seniortransportation.easterseals.com/site/PageServer?pagename=NCST2_about_projects •

The Harry and Jeanette Weinberg Foundation Announces \$9 Million in Grants to Support Caregivers and Informal Care

The Harry and Jeanette Weinberg Foundation, one of the nation's largest private philanthropies with more than \$2.2 billion in assets and annual distributions of approximately \$110 million, announced an innovative program to provide \$9 million in grants to assist caregivers nationwide. A Request for Proposals (RFP) has been released to support The Family and Informal Caregiver Program making 12 to 230 grants ranging from \$100,000-\$300,000 per year for a maximum of three years for community-based agencies. The Family and Informal Caregiver Funding Program was developed by the Weinberg Foundation to provide the critical resources necessary to support caregivers in innovative ways and facilitate partnerships among agencies and organizations.

Eligible grant recipients include State Units on Aging, 501(c)(3) organizations, faith-based and other community-based organizations, tribal organizations, and units of local government nationwide. *Grant applications will be accepted by The Weinberg Foundation until June 12, 2008*. Complete application details and additional information is available online at www.hjweinbergfoundation.org, by calling (410)654-8500, or email at CaregivingRFP@theweinbergfoundation.org.

To view the press release: <http://www.hjweinbergfoundation.org/subPages/pressRoom.htm> •

Podcasts Now Available from the 2007 National Aging and Law Conference

Podcasts from the 2007 Aging and Law Conference are now available on the American Bar Association (ABA) website. Eight sessions are currently available, and ABA will continue to post podcasts until every session is posted. Topics include Medicare Parts C & D, Guardian's accountability, handling elder mistreatment and fair housing.

Download the podcasts: <http://www.abanet.org/aging/cle/home.shtml> •



Sixth Edition of Grant Funding for Elderly Health Services

The sixth edition of *Grant Funding for Elderly Health Services* is now available. This 151-page report looks at trends in funding health services for the elderly. It includes funding details on a representative range of grants from government agencies and foundations. Although it is not a directory of grants in aging services; the report includes a list of the top 50 funders of health related grants and details of foundation profiles. The sixth edition of *Grant Funding for Elderly Health Services* provides ideas about how your program's needs could be matched by studying the priorities of the funding.

Available for order at http://www.healthresourcesonline.com/elderly_health/gfhs6cd.htm or email order at orders@healthresourcesonline.com •

24th Annual HCBS Conference Information Now Available

Information for the 24th Annual HCBS Conference is now available on the NASUA Website. You will find the Call for Sessions, hotel information as well as exhibitor and sponsorship information. Registration coming soon. www.nasua.org •

OMBUDSMEN CORNER

NASUA at State Ombudsman Conference

The National Association of State Ombudsman Programs (NASOP) in conjunction with the National Ombudsman Resource Center, of which NASUA is a partner, held their annual State Ombudsman Training Conference. The conference included new state ombudsman orientation, training on culture change, resident councils and sharing by the states of their current activities.

Martha Roherty and Jessica Sayers attended the conference on behalf of NASUA, and gave presentations on the current and future initiatives of NASUA. Martha also addressed the State Ombudsman on NASUA's joint effort with n4a to rebalance long term care with Project 2020. •

I & R CORNER

Annual Aging and Disability Information and Referral Symposium Planned

Once again, the National Aging and Disability Information and Referral Symposium gets underway, May 18 through 22 in Houston, Texas. For the past 18 years, the symposium has been a featured training event for the National Aging I&R Support Center at NASUA. With funding from the Administration on Aging and exceptional partners like the Alliance of Information and Referral Systems (AIRS) and the National Association of Area Agencies on Aging (n4a), the symposium offers unparalleled professional networking and training opportunities in the field. The symposium is held in conjunction with the Annual AIRS Conference and offers the aging network a chance to join forces with professionals from the United Way, the military, libraries and other I&R systems internationally. States and Area Agencies on Aging will enhance their conference experience on Sunday, May 18th with a full day aging network retreat. The aging workshop track will focus on consumer empowerment and the evolution of ADRCs. The annual aging luncheon will feature Anthony Wilhelm, Director of Consumer Education for the TV Converter Box Program for the Department of Commerce. He will discuss the unique educational and empowerment challenges facing older adults and consumers with disabilities as Digital Television comes of age. Planning to launch a new ADRC this year? Then you can't afford to miss this opportunity to engage with AoA and the Lewin Group for training, consultation and technical support. It's not too late to join us, log onto www.airs.org to register. Questions? Contact Bernice Hutchinson, bhutchinson@nasua.org. •

Alabama Promotes Professional I&R Credentialing

For the past two years, Irene Collins, Executive Director of the Alabama Department of Senior Services has been on a mission. Her mission is to move toward professional certification of the information and referral staff statewide. This is no easy feat but, changing times call for bold measures. Collins is working with each area agency in the state to promote a higher standard of excellence for information and referral in the state. With the number of older adults and consumers with disabilities on the rise, the aging network is challenged to educate and inform more diverse and eager audiences. Professional credentialing requires a commit-

ment of funds for staff development, training, and testing. Recently, NASUA conducted a full day training intensive for more than 35 aging network I&R professionals as part of the Alabama Gerontological Society Conference in Birmingham, Alabama. “It’s not easy, but it will all be worth it in the end. Caregivers want quality information about services. With an aging certification credential, I am recognized as a highly trained professional,” commented one I&R specialist. For more information on aging certification and training opportunities, contact Bernice Hutchinson, at bhutchinson@nasua.org. •

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DIRECTOR'S SPOTLIGHT

Charles D. Johnson, Treasurer of NASUA

Charles D. Johnson, Treasurer of NASUA's Board of Directors, serves as the Director of the Illinois Department on Aging. Director Johnson earned his bachelor's degree in history and education from Lane College, a historically black college in Jackson, Tennessee. From then he served as the Deputy Director and Director of Neighborhood Centers for the Community Action Agency in Kankakee, IL from 1967 to 1972. Director Johnson has worked for the Northeastern Illinois Area Agency on Aging since 1974. In 2003 he was appointed the Director of Illinois Department on Aging. Under his leadership, the agency implemented and expanded community-based services that promote independent living, including transportation assistance, home delivered meals, support for caregivers, and community care programs. He has been a vocal advocate for elder abuse prevention and response services as well as expanded senior pharmaceutical assistance programs.

GREATEST ACCOMPLISHMENT:

Charles' greatest accomplishment while Director is the facelift that the department has undergone. He changed the community care program; the budget has had a significant increase; a wage increase for home care workers; great emergency home response and flexible senior services where case managers determine what the client needs. Charles also raised the asset level of participation which had not been raised since 1980. Another great accomplishment he is responsible for is the totally upgraded customer service pharmaceutical assistance program. It went from 4,000 apps to 200,000 in about three years. He has been extremely fortunate to work with competent people who are mission driven. Charles believes much of his success is based on the people that have surrounded him and supported him throughout his career.

FUTURE GOAL:

Charles has many things in store for the future but he really wants to come up with a more comprehensive plan that will prove to the Office Management Budget office that the reduction of nursing home beds are on definitely on decline but there is a correlation with his programs at the Department of Aging in Illinois. He aspires to create a benchmark that truly represents the correlation with the significant decline.

INTERESTING FACT:

Charles has been blessed to be married for 42 years. One of his enjoyments is his hobby, leather crafting. •



Upcoming Events

If your state is having an event, please let us know and we will include it on our website: jsayers@nasua.org

National Aging and Disability

I&R/A Symposium

May 18–21, 2008

Westin Galleria

Houston, TX

For more information: bhutchinson@nasua.org

To register: www.airs.org

Life's A Dance!

2008 Kansas Governor's Conference on Aging Services

May 7 & 8, 2008

Capitol Plaza Hotel and Maner Conference

Center Topeka, Kansas

For more information: www.agingkansas.org

or call 785-286-4986

NASUA Membership Meeting

June 22–24, 2008

Hyatt Regency

Crystal City, VA

For more information: kfletcher@nasua.org

Aging Out Loud! 2008 Oklahoma Conference on Aging

May 20–22, 2008

Reed Center

Midwest City, OK

For more information: (405) 521-2281

24th National HCBS Conference

September 28 – October 1, 2008

Westin Waterfront

Boston, MA

For more information: kfletcher@nasua.org

n4a 33rd Annual Conference and Tradeshow

July 20–23, 2008

Renaissance Nashville Hotel and Nashville

Convention Center

Nashville, TN

For more information: www.n4a.org

n4a Aging Policy Briefing & Capitol Hill Day 2008

April 28–30, 2008

Washington Plaza Hotel

Washington, DC

For more information: www.n4a.org

NCCNHR 33rd Annual Conference

October 15–18, 2008

Hilton Indianapolis

Indianapolis, IN

For more information: www.nccnhr.org



The National Association of State Units on Aging

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