Good afternoon. My name is Dawn Simonson and I am the Executive Director of the Metropolitan Area Agency on Aging, serving the Minneapolis-St. Paul region of Minnesota. My comments today represent the views of Minnesota’s Area Agencies on Aging.

Older adults and family caregivers in Minnesota are a hearty bunch. Many of us brave long, cold winters our entire lives. Growing old in Minnesota requires fortitude, and often, a little help. We have a strong tradition of pulling together. Families, friends and neighbors form a valuable, informal support network that helps frail older adults live in the community. The essential services provided through the Older Americans Act are also critical to helping older Minnesotans and their family caregivers face the challenges of old age.

Some of our most innovative efforts have been to develop and implement best practice models including evidence-informed or evidence-based services to help family caregivers care longer and with greater competence and confidence.

For example we have developed a caregiver coaching model with services available across Minnesota. Caregiver coaches practice in accordance with established standards and help family caregivers set goals, devise strategies and select services that are most likely to result in successful outcomes for their unique situations.

Recognizing the importance of assessment, AAAs and their community partners have also implemented the Tailored Caregiver Assessment and Referral (TCARE) protocols developed by Dr. Rhonda Montgomery. Utilizing the TCARE screen with caregivers at various entry points to services identifies high-risk caregivers and links them to comprehensive planning and coaching.

As we look to 2011, Minnesota’s AAAs urge the Administration on Aging to make family caregivers a priority in the reauthorization. In addition Minnesota’s AAAs ask consideration for the following:

1. Raise the cap on appropriations for Title IIIB Supportive Services. The demand for chore services, transportation, and information and assistance far exceeds the resource capacity of Minnesota’s AAAs and service provider partners.

2. Increase the effectiveness of the Older Americans Act by combining Titles B, C, D and E. Give AAAs the flexibility to make local funding decisions to best support the independent living needs of the target population. At minimum, combine Titles IIIC-1 and IIIC-2. Participation levels in Congregate Dining continue to trend downward.

3. Support innovation and increased flexibility in use of Title IIIC funds for services that help older adults access healthy foods via grocery delivery, grocery shopping assistance, food shelves, and other models.
4. Incorporate the three major elements of Project 2020 into the Act.

5. Simplify cost-sharing provisions. Minnesota targets OAA funds to subsidize services for older adults at risk of nursing home placement with incomes above Medicaid eligibility but generally less than 200% of poverty. Older adults with incomes above 200% of poverty must be given a real opportunity to share in the cost of services.

6. Strengthen the role of AAAs to provide community planning that spurs service innovation, improves service quality, facilitates integration with the health care system, and engages the broader community. Create stronger emphasis on community planning to ensure that older Americans can live in and contribute to livable communities.

7. Increase the cap on Title IIA to fund state-of-the art management information systems and other technology. Technology is and will become more essential in the function of ADRCs, in using robust data to best target scarce resources, and for communicating with older adults, family caregivers and the public about the value of planning ahead and making informed choices.

Thank you for the opportunity to be here today in tandem with the Minnesota Board on Aging and the Minnesota Department of Human Services. We work together to effectively support older adults and family caregivers in alignment with the ideals and spirit of the Older Americans Act.