

D26A07
Department of Aging

Operating Budget Data

	(\$ in Thousands)				
	<u>FY 02</u> <u>Actual</u>	<u>FY 03</u> <u>Approp.</u>	<u>FY 04</u> <u>Allowance</u>	<u>FY 03 - 04</u> <u>Change</u>	<u>FY 03 - 04</u> <u>% Change</u>
General Funds	\$21,346	\$23,700	\$23,261	-\$439	-1.9%
FY 2003 Cost Containment	0	-1,161	0	1,161	
Contingent & Back of Bill Reductions	0	0	-11	-11	
Adjusted General Funds	\$21,346	\$22,539	\$23,250	\$712	3.2%
Special Funds	221	250	233	-16	-6.5%
Contingent & Back of Bill Reductions	0	0	-2	-2	
Adjusted Special Funds	\$221	\$250	\$232	-\$18	-7.1%
Federal Funds	24,961	29,162	26,297	-2,864	-9.8%
Contingent & Back of Bill Reductions	0	0	-4	-4	
Adjusted Federal Funds	\$24,961	\$29,162	\$26,293	-\$2,868	-9.8%
Adjusted Grand Total	\$46,527	\$51,950	\$49,776	-\$2,174	-4.2%

- The fiscal 2004 allowance decreases by \$2.17 million, or 4.2% below the fiscal 2003 working appropriation.
- The allowance includes \$1.65 million for expansion of the Maryland Older Adults Medicaid waiver from 3,135 to 4,135 participants in fiscal 2004.

Personnel Data

	<u>FY 02</u> <u>Actual</u>	<u>FY 03</u> <u>Working</u>	<u>FY 04</u> <u>Allowance</u>	<u>Change</u>
Regular Positions	57.00	51.00	56.00	5.00
Contractual FTEs	8.00	12.00	7.00	-5.00
Total Personnel	65.00	63.00	63.00	0.00

Vacancy Data: Regular Positions

Budgeted Turnover: FY 04	1.22	2.18%
Positions Vacant as of 12/31/02	1.00	1.96%

- The fiscal 2004 allowance includes the conversion of 5 contractual FTEs to regular positions. These positions are all in the Maryland Older Adults Medicaid waiver program. Staff turnover has been cited as a major problem in this program.

Note: Numbers may not sum to total due to rounding.

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Analysis in Brief

Major Trends

Department of Aging Making Consistent Progress Towards Key Goals: Overall the Department of Aging (MDOA) is improving services towards its key goals. However, decreased funding in fiscal 2003 and 2004 could impact its further ability to improve.

Issues

Maryland Older Adults Medicaid Waiver Under “Redesign” Process: In fiscal 2003, the State convened a redesign team to address several perceived problems in the Maryland Older Adults Medicaid waiver. The redesign team hired a consultant, who clarified and identified the perceived problems and made several recommendations for the short-, mid-, and long-term. **MDOA should update the committees on its efforts to prioritize the consultant’s recommendations and improve services with current resources.**

Recommended Actions

	<u>Funds</u>
1. Add budget bill language requiring the Maryland Department of Aging to identify by subprogram its grant initiatives in the State budget.	
2. Reduce funding for expanded case management and related administrative costs for the Maryland Older Adults Medicaid Waiver to allow time for current backlogs to be reduced and services improved for current enrollees.	\$ 1,251,292
3. Reduce funding for the State Assisted Living Group Home Subsidy program.	758,500
Total Reductions	\$ 2,009,792

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Department of Aging

Operating Budget Analysis

Program Description

The Department of Aging (MDOA) is responsible for administering community-based care programs and services to the elderly, evaluating the service needs of the elderly, and determining whether public and private resources meet these needs. The department administers various State and federal programs through local Area Agencies on Aging (AAAs). The Maryland Aging Network, composed of MDOA and the AAAs, establishes priorities for meeting the needs of the elderly population and advocates for those priorities.

The department and its local partners operate in pursuit of several key goals:

- to enable seniors to be maintained in their communities for as long as possible and to offer them meaningful care choices in this setting;
- to ensure that seniors are treated with dignity and protected against abuse, exploitation, and fraud; and
- to serve as a valuable resource for information, health education, and socialization for Maryland's seniors and their caregivers.

Performance Analysis: Managing for Results

Exhibit 1 provides several indicators of MDOA's success at meeting its key goals.

Exhibit 1

Performance Measurement Data Department of Aging Fiscal 2001 through 2004

	<u>FY 01</u> <u>Actual</u>	<u>FY 02</u> <u>Actual</u>	<u>FY 03</u> <u>Est.</u>	<u>FY 04</u> <u>Est.</u>	<u>Ann. % Chg.</u> <u>FY 01-04</u>
Number of seniors participating in MDOA community-based services programs	5,977	6,794	8,702	8,774	10.1%
Number of jurisdictions with at least one provider for each Medicaid waiver service	n/a	11	24	24	n/a
Percent of long-term care facility resident complaints resolved to the satisfaction of the resident	48%	n/a	48%	48%	0%
Information contacts with potential family caregivers	n/a	125,591	128,106	130,615	n/a

n/a = not available

Source: Department of Aging

Enable Seniors to Be Maintained in Their Communities for As Long As Possible, and Offer Them Meaningful Care Choices in This Setting: MDOA indicates substantial success over the past three years in increasing the number of seniors served in their community, primarily through expansion of the Maryland Older Adults Medicaid waiver. However, the performance estimates for fiscal 2004 do not appear to include full expansion of the waiver to 4,135 participants. **The department should comment on its development of these estimates and its ability to implement the planned waiver expansion.**

The department has also overcome early difficulties in recruiting providers of waiver services throughout the State. While some areas, especially rural areas, are still experiencing provider shortages, the recruiting efforts of several State agencies administering community-based Medicaid waivers have greatly improved provider enrollment.

Ensure That Seniors Are Treated with Dignity and Protected Against Abuse, Exploitation, and Fraud: Over the past three fiscal years, MDOA has been increasing staffing levels in the Long-term Care Ombudsman program in order to ensure that long-term care facilities comply with State regulations and that residents of these facilities are safe. Long-term Care Ombudsmen provide independent review of facility compliance and investigation of complaints about care by residents or other interested parties. MDOA hopes to bring staffing levels up to the statutory requirement of 10 hours per nursing home per week by the end of fiscal 2004, though it has indicated that fiscal 2004 funding is insufficient for this initiative. The number of Long-term Care Ombudsmen full-time equivalent positions (FTEs) has more than doubled since 2001, but complaints and abuse allegations have also increased by 30% and 45% respectively. Due to the

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sensitive and complicated issues surrounding long-term care, the percent of complaints resolved to the satisfaction of the resident may not necessarily improve even if Long-term Care Ombudsmen faithfully execute their statutory duties. **While satisfaction of the resident is certainly a worthwhile and important objective, MDOA should consider using another quality indicator for the Long-term Care Ombudsman program. MDOA should also comment on any strategies it has developed to date to fully implement the Ombudsman initiative given the resources available.**

Serve As a Valuable Resource for Information, Health Education, and Socialization for Maryland's Seniors and Their Caregivers: The Department of Aging is responsible for administering the National Family Caregivers Support Program. This federally funded program was established in 2000 and provides information and assistance to caregivers of individuals over 60 years old, as well as to individuals over 60 who are primary caregivers of minors. Funding for this program has been relatively consistent over 2002 and 2003 but is reduced over 25% in the fiscal 2004 allowance. **Given the increasingly important role of family caregivers as the State's population ages, MDOA should address how it plans to continue to increase activity in this program despite decreased funding.**

Fiscal 2003 Actions

Impact of Cost Containment

Cost containment in January of fiscal 2003 reduced MDOA's working appropriation by almost \$1.2 million. \$105,000 of this reduction came from various operating expenses, and \$25,000 from unawarded senior center operating fund grants. \$1.032 million of the reduction came in State funds for various grants MDOA provides to its AAA partners for service provision. A breakdown of these reductions can be found in **Exhibit 2**.

Exhibit 2

**Impact of Fiscal 2003 Cost Containment
Department of Aging
State Grant Programs**

<u>Grant</u>	<u>FY 03 Original Approp.</u>	<u>FY 03 Adjusted Approp.</u>	<u>% Reduction</u>	<u>FY 04 Allowance</u>
Support to MAC, Inc.*	\$144,000	\$136,800	5.00%	\$136,800
Senior Assisted Living Group Home Subsidy	3,537,328	3,233,486	8.59%	3,204,246
Senior Multi-Family Housing	1,777,128	1,688,077	5.01%	1,688,077
Frail Elderly	97,856	93,727	4.22%	93,727
Vulnerable Elderly	500,000	493,563	1.29%	493,563
State Ombudsman	1,543,947	1,480,565	4.11%	1,480,566
Senior Information and Assistance	990,155	937,325	5.34%	937,325

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<u>Grant</u>	<u>FY 03 Original Approp.</u>	<u>FY 03 Adjusted Approp.</u>	<u>% Reduction</u>	<u>FY 04 Allowance</u>
Senior Care	7,059,299	6,825,913	3.31%	6,825,843
Public Guardian	663,693	655,066	1.30%	655,066
Senior Nutrition	1,670,412	1,468,005	12.12%	1,468,005
State Health Insurance Counseling and Assistance Program	72,814	72,814	0.00%	72,814
Information Technology Grant	171,000	127,591	25.39%	127,591
Medicaid Waiver Case Management	2,051,748	2,051,748	0.00%	2,877,394
Innovations in Aging	250,000	232,500	7.00%	232,500
Total:	\$20,529,380	\$19,497,180	5.03%	\$20,293,517

*MAC, Inc. is the area agency on aging for Dorchester, Somerset, Wicomico, and Worcester counties.

Source: Department of Aging

MDOA has stated that these grant reductions will have an impact on the ability of AAAs, especially those that receive minimal funding from local government, to provide services to their seniors. Specific impacts include reduced monitoring of homebound seniors, fewer meals served to homebound seniors and in senior centers, increased waiting lists for Senior Care and Group Housing subsidies, and insufficient staffing in the Long-term Care Ombudsman initiative. These impacts are important to note because the fiscal 2004 allowance largely funds these grant programs at the adjusted fiscal 2003 level, as indicated in Exhibit 2.

Governor's Proposed Budget

As shown in **Exhibit 3**, the fiscal 2004 allowance for MDOA decreases by \$2.174 million, or 4.2% below the adjusted fiscal 2003 working appropriation. Increases include a net increase of \$57,000 for the conversion of five contractual positions in the Maryland Older Adults Medicaid waiver program to regular positions. Other personnel changes include increases in health insurance and continued savings from the hiring freeze. Various operating expenditures for MDOA decrease by a total of \$435,000.

Impact of Cost Containment

Fiscal 2004 cost containment includes the elimination of \$16,000 for matching employee deferred compensation contributions up to \$600, contingent upon enactment of a provision in the Budget Reconciliation and Financing Act of 2003.

Maryland Older Adults Medicaid Waiver Expands by 1,000

The 2004 allowance includes an increase of \$1.7 million in general and federal funds for the Maryland Older Adults Medicaid waiver. Of this amount, \$400,000 is to annualize the fiscal 2003 expansion to 3,135 individuals. The remaining \$1.3 million will allow for further expansion of the program to 4,135

participants.

Exhibit 3

**Governor's Proposed Budget
Department of Aging
(\$ in Thousands)**

	FY 02	FY 03	FY 04	FY 03 - 04	FY 03 - 04
	<u>Actual</u>	<u>Approp.</u>	<u>Allowance</u>	<u>Change</u>	<u>% Change</u>
General Funds	\$21,346	\$23,700	\$23,261	-\$439	-1.9%
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Contingent & Back of Bill Reductions	0	0	-4	-4	0.0%
Adjusted Federal Funds	\$24,961	\$29,162	\$26,293	-\$2,868	-9.8%
Adjusted Grand Total	\$46,527	\$51,950	\$49,776	-\$2,174	-4.2%

Where It Goes:

Personnel Expenses

Conversion of 5 contractual positions to regular positions in the Maryland Older Adults Medicaid waiver program.....	\$277
Employee and retiree health insurance	47
Turnover adjustments	27
Deferred compensation match and workers' compensation	-82
Savings from fiscal 2003 position abolitions and hiring freeze.....	-350

Grants for Service and Benefit Programs

Maryland Older Adults Medicaid waiver: annualization of fiscal 2003 costs (\$0.4 million) and expansion from 3,135 to 4,135 enrollees (\$1.3 million).....	1,700
Federal nutrition grants.....	-2,302
Federal grants for Senior Care and Health Promotion programs.....	-737
Federal grant for community services	-88

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Federal grant for health insurance counseling.....	-148
Federal grants for elderly refugees, Alzheimer’s, and preventing abuse in Medicare and Medicaid	-81
State assisted living group housing subsidy.....	-29
Full statutory allowance funding for senior center operating funds.....	25
Other Operating Changes	
Decreased contractual personnel due to conversion of five positions to regular positions .	-220
Data processing, advertising, printing, and computer maintenance.....	-101
Consulting services, communications, travel, vehicles, supplies, and fixed charges.....	-100
Other adjustments.....	-12
Total	-\$2,174

Note: Numbers may not sum to total due to rounding.

Program Grants to Local Area Agencies on Aging

In fiscal 2004, MDOA will continue to allocate the vast majority of its funds (89%) to AAAs for case management and direct services. **Exhibit 4** shows the three-year funding history of these grants across the various programs the AAAs administer. As indicated earlier, most State grant contributions are level-funded at the fiscal 2003 adjusted appropriation.

As Exhibit 4 indicates, the department anticipates decreased federal funding for grant programs in fiscal 2004. Excluding the Medicaid waiver, federal grants decrease by roughly \$3.3 million in fiscal 2003. However, MDOA received federal funds \$7 - 8 million greater than anticipated in the appropriation in fiscal 2001 and 2002. Also, most of these grants are funded formulaically based on the percentage of the nation’s senior citizens residing in the State, with non-federal matching requirements that MDOA either meets or exceeds. **MDOA should discuss its federal fund estimates, including why it estimates reduced federal funding in 2004.**

Exhibit 4

Department of Aging Grant Programs
Three-year Trend in Direct Service Funding
(\$ in Thousands)

	Fiscal 2002 actual			Fiscal 2003 adjusted			Fiscal 2004 allowance			Fiscal	Fiscal
	<u>GF</u>	<u>FF</u>	<u>Total</u>	<u>GF</u>	<u>FF</u>	<u>Total</u>	<u>GF</u>	<u>FF</u>	<u>Total</u>	<u>02-03</u>	<u>03-04</u>
										<u>Change</u>	<u>Change</u>
Support to MAC, Inc.	\$144	\$0	\$144	\$137	\$0	\$137	\$137	\$0	\$137	-\$7	\$0
MONA-Support for Elderly Refugees	0	-40	-40	0	131	131	0	109	109	171	-21
Ombudsman/Elder Abuse	1,489	295	1,785	1,974	293	2,267	1,974	293	2,267	482	0
Public Guardian	666	0	666	655	0	655	655	0	655	-11	0
Senior Care	7,264	2,390	9,654	6,826	2,665	9,490	6,826	1,969	8,794	-163	-696
Health Insurance Counseling	116	279	394	73	328	401	73	180	253	6	-148
Health Promotion	98	375	473	94	391	485	94	350	443	12	-41
Senior Centers	495	0	495	476	0	476	500	0	500	-20	25
Info and Assistance*	991	5,926	6,918	937	5,660	6,597	937	5,572	6,509	-320	-88
Curbing Medicare/Medicaid Abuse	0	222	222	0	210	210	0	192	192	-12	-18
Innovations in Aging	100	0	100	233	0	233	233	0	233	133	0
Congregate Meals	835	7,538	8,373	734	8,330	9,064	734	6,612	7,347	691	-1,718
Home Delivered Meals	835	3,900	4,735	734	4,326	5,060	734	3,742	4,476	326	-584
Assisted Living Subsidy	2,446	0	2,446	3,233	0	3,233	3,204	0	3,204	788	-29
Congregate Housing	1,891	0	1,891	1,688	0	1,688	1,688	0	1,688	-203	0
Medicaid Waiver	1,358	1,104	2,462	2,052	3,197	5,249	2,877	4,023	6,900	2,787	1,651
IT grant	154	0	154	128	0	128	128	0	128	-27	0
Total	\$18,882	\$21,989	\$40,871	\$19,973	\$25,531	\$45,503	\$20,657	\$22,932	\$43,589	\$4,633	-\$1,915

*The federal funds in this program represent MDOA's total grant under Title III-B of the federal Older Americans Act. This grant funds the Public Guardian, Information and Assistance, and IT grant programs. However, MDOA could not provide a breakdown of how these funds were allocated across these programs, so the total is in one program.

Source: Department of Aging; Department of Budget and Management

Issues

1. Maryland Older Adults Medicaid Waiver Under “Redesign” Process

Since 1993, the State has administered a Medicaid waiver program for low-income seniors wishing to prevent or delay entry into a nursing home. MDOA provides case management and administration for this waiver, while the Department of Health and Mental Hygiene (DHMH) provides funding for the waiver services. As required by 1999 legislation, MDOA applied to and was approved by the federal government to make its program less restrictive and to serve more individuals.

Since January 2001, the program has expanded from roughly 135 participants to a planned 4,135 individuals by the end of fiscal 2004. The expansion of the program included extension of eligible services to include assisted living, assistive technology and devices, behavior consultation, dietitian/nutrition services, accessibility adaptations, family training, home health services, home-delivered meals, personal care, emergency response systems, respite care, senior center plus services, and case management.

The rapid expansion of the program led to several “growing pains” including delays in processing applications and establishing plans of care and a lack of certified providers. Based on several concerns with the ability of the Maryland Older Adults Medicaid waiver to effectively serve the needs of its clients, DHMH and MDOA convened a “redesign committee” on the waiver. This committee included representatives from DHMH, MDOA, local AAAs, Adult Evaluation and Review Services (AERS), the Office of Health Care Quality, and advocates. This committee contracted with The Lewin Group to study the waiver’s current functioning and shortcomings, compare best practices from similar programs around the nation, and make appropriate recommendations to improve the program. The stated goals of the redesign process were to:

- simplify and expedite processes;
- identify clear roles and responsibilities for agencies involved;
- promote accountability; and,
- utilize existing local infrastructure.

Key Findings and Recommendations

The consultant found several key concerns across the various stakeholder groups it interviewed:

- fragmented policies and poor communication across the several agencies involved in waiver processing, exacerbating a lack of accountability;
- excess workload at the State and local level;
- inability to effectively track applications and inform clients of status; and

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- obstacles to recruiting and retaining providers.

The consultant also found that the application and enrollment processes were burdensome and frustrating to consumers and providers, and took much longer than stated goals. Providers also expressed concern over reimbursement rates and delays in receiving payment. Delays in payment can be especially critical for family caregivers, who often rely on waiver payments as a source of household income.

A review of best practices across Maryland, successful programs in other states and professional literature identified several potential improvements to the current administration of the program. Based on these best practices, the consultant made the following recommendations:

- establish single points of entry for clients and providers;
- delegate all functions in the eligibility process to the local level, emphasizing accountability to criteria established at the State level;
- develop automated systems to share and track information between agencies during eligibility determination; and
- increase staffing to expedite enrollment of participants and providers and payment of providers.

The consultant suggested short-, mid-, and long-term improvements towards the final goals and estimated a total long-term cost of the recommendations at roughly \$9.9 million. Almost \$8.0 million represents the estimated cost of automated systems for enrolling and tracking participants and providers. The majority of the remainder would fund staff increases at various agencies involved in waiver administration and processing. The consultant estimates ongoing costs for personnel and system maintenance at roughly \$1.2 million per year.

Moving Forward

The waiver redesign team is now reviewing and prioritizing the consultant's recommendations. Though waiver administrators had taken some steps to improve the application process, many of the problems the consultant identified are ongoing. Given the considerable time and resources necessary to implement the consultant's recommendations, the Department of Legislative Services (DLS) does not recommend continuing expansion of the waiver program until the current backlogs can be reduced, and services can be improved to current enrollees. As of February 2003, 1,935 participants were enrolled in the waiver with an additional 1,944 applications being processed or pending. MDOA indicates the average enrollment rate is 118 participants/month. At this rate, the waiver will not reach the 3,135 level for at least 10 months.

MDOA should update the committees on its efforts to prioritize the consultant's recommendations and improve services with current resources.

Recommended Actions

1. Add the following language:

Provided that the Maryland Department of Aging (MDOA) shall establish separate subprograms through the State Budget and Financial Management Information System for each program initiative included in its budget. MDOA shall work with the Department of Legislative Services and the Department of Budget and Management to determine the appropriate subprograms to be identified in the budget. In addition, MDOA shall conform its fiscal 2003 actual and fiscal 2004 working appropriations to these subprograms.

Explanation: The Maryland Department of Aging does not currently identify its grant programs separately in the State budget. Though the department has developed subobjects for the State and federal allocations, these subobjects often overlap in programs. As a result, it is difficult to monitor the changes in resources associated with each program. It is particularly critical to monitor expenditures for the Medicaid Waiver for Older Adults, which is not currently budgeted separately from other grant programs.

	<u>Amount</u>	
	<u>Reduction</u>	
2. Reduce funding for expanded case management and related administrative costs for the Maryland Older Adults Medicaid Waiver to allow time for current backlogs to be reduced and services improved for current enrollees. The program plans to expand to 4,135 participants in fiscal 2004. Current enrollment in the program is only about 2,000 participants. This reduction still allows the program to expand to 3,135 participants.	\$ 625,646	GF
	\$ 625,646	FF
3. Reduce funding for the State Assisted Living Group Home Subsidy program to the fiscal 2002 actual spending level. This program had reversions of over \$790,000 in fiscal 2002 due to the enrollment of participants in the Maryland Older Adults Medicaid Waiver. As the waiver continues to accept new participants, further reductions in this program are likely.	758,500	GF
Total Reductions	\$ 2,009,792	
Total General Fund Reductions	\$ 1,384,146	
Total Federal Fund Reductions	\$ 625,646	

Current and Prior Year Budgets

Current and Prior Year Budgets Department of Aging (\$ in Thousands)

	<u>General Fund</u>	<u>Special Fund</u>	<u>Federal Fund</u>	<u>Reimb. Fund</u>	<u>Total</u>
Fiscal 2002					
Legislative Appropriation	\$22,358	\$232	\$17,905	\$0	\$40,495
Deficiency Appropriation	0	0	0	0	0
Budget Amendments	0	0	7,073	0	7,073
Reversions and Cancellations	-1,012	-11	-17	0	-1,040
Actual Expenditures	\$21,346	\$221	\$24,961	\$0	\$46,528
Fiscal 2003					
Legislative Appropriation	\$23,700	\$250	\$21,370	\$0	\$45,320
Budget Amendments	-1,161	0	7,792	0	6,631
Working Appropriation	\$22,539	\$250	\$29,162	\$0	\$51,951

Note: Numbers may not sum to total due to rounding.

Fiscal 2002

The Department of Aging's fiscal 2002 appropriation increased by approximately \$7.1 million in federal funds. The additions incorporated the Maryland Older Adults Medicaid waiver into the department's budget and increased the federal funds for several other programs to reflect actual grant awards. Reversions from the fiscal 2002 budget included \$216,000 in cost containment as well as \$796,000 in less than anticipated expenditures in the Senior Assisted Living Group Housing program due to a large shift of these participants into the Medicaid waiver.

Fiscal 2003

Fiscal 2003 cost containment reduced MDOA's fiscal 2003 general fund appropriation by \$1.161 million, as discussed above. A budget amendment increased the fiscal 2003 federal fund appropriation by \$7.8 million. These funds were available through federal grants from fiscal 2001 that were never included in the budget. The failure to add these funds to the fiscal 2001 budget forced the department to roll forward fiscal 2001 grants into fiscal 2002 and pay for them using fiscal 2002 appropriations. Because the fiscal 2002 appropriations were used up by payments for fiscal 2001 grants, no accruals could be booked during the fiscal 2002 closeout. The amendment appropriated the unexpended fiscal 2001 funding into the fiscal 2003 budget in order to avoid a similar accounting error in fiscal 2003.

**Object/Fund Difference Report
Department of Aging**

<u>Object/Fund</u>	<u>FY 02 Actual</u>	<u>FY 03 Working Appropriation</u>	<u>FY 04 Allowance</u>	<u>FY 03 – FY 04 Amount Change</u>	<u>Percent Change</u>
Positions					
01 Regular	57.00	51.00	56.00	5.00	9.8%
02 Contractual	8.00	12.00	7.00	-5.00	-41.7%
Total Positions	65.00	63.00	63.00	0	0%
Objects					
01 Salaries and Wages	\$ 4,648,274	\$ 4,954,960	\$ 4,890,165	-\$ 64,795	-1.3%
02 Technical & Spec Fees	260,766	486,127	269,714	-216,413	-44.5%
03 Communication	80,389	90,049	81,866	-8,183	-9.1%
04 Travel	75,352	82,856	58,303	-24,553	-29.6%
07 Motor Vehicles	16,967	12,716	5,069	-7,647	-60.1%
08 Contractual Services	122,184	391,562	252,321	-139,241	-35.6%
09 Supplies & Materials	50,003	64,380	40,446	-23,934	-37.2%
10 Equip - Replacement	13,628	92,533	11,335	-81,198	-87.8%
11 Equip - Additional	80,375	1,250	1,700	450	36.0%
12 Grants, Subsidies, Contr	41,088,174	46,826,987	44,087,665	-2,739,322	-5.8%
13 Fixed Charges	76,361	82,593	89,400	6,807	8.2%
14 Land & Structures	14,976	25,255	3,678	-21,577	-85.4%
Total Objects	\$ 46,527,449	\$ 53,111,268	\$ 49,791,662	-\$ 3,319,606	-6.3%
Funds					
01 General Fund	\$ 21,345,896	\$ 23,700,108	\$ 23,260,922	-\$ 439,186	-1.9%
03 Special Fund	220,881	249,523	233,252	-16,271	-6.5%
05 Federal Fund	24,960,672	29,161,637	26,297,488	-2,864,149	-9.8%
Total Funds	\$ 46,527,449	\$ 53,111,268	\$ 49,791,662	-\$ 3,319,606	-6.3%

Note: Fiscal 2003 appropriations and fiscal 2004 allowance do not include cost containment and contingent reductions.

Fiscal Summary
Department of Aging

<u>Unit/Program</u>	<u>FY 02 Actual</u>	<u>FY 03</u>		<u>FY 03 Working Appropriation</u>	<u>FY 02 – FY 03</u>		<u>FY 04 Allowance</u>	<u>FY 03 – FY 04</u>	
		<u>Legislative Appropriation</u>	<u>Appropriation</u>		<u>% Change</u>	<u>% Change</u>			
01 General Administration	\$ 46,032,135	\$ 44,819,202	\$ 52,611,268	14.3%	\$ 49,291,662	-6.3%			
02 Senior Centers Operating Fund	495,314	500,000	500,000	0.9%	500,000	0%			
Total Expenditures	\$ 46,527,449	\$ 45,319,202	\$ 53,111,268	14.2%	\$ 49,791,662	-6.3%			
General Fund	\$ 21,345,896	\$ 23,700,107	\$ 23,700,108	11.0%	\$ 23,260,922	-1.9%			
Special Fund	220,881	249,523	249,523	13.0%	233,252	-6.5%			
Federal Fund	24,960,672	21,369,572	29,161,637	16.8%	26,297,488	-9.8%			
Total Appropriations	\$ 46,527,449	\$ 45,319,202	\$ 53,111,268	14.2%	\$ 49,791,662	-6.3%			

Note: Fiscal 2003 appropriations and fiscal 2004 allowance do not include cost containment and contingent reductions.