

U.S. Department of Health & Human Services Begins at 2:00 pm



TO JOIN BY TELEPHONE:

Phone: (510) 210-8882 | Access Code: 199 456 2878

U.S. Department of Health and Human Services – Covering Families Through the Lifespan

Child Care, Family Assistance, Head Start, Medicaid, CHIP, Medicare, Aging Services, Community Health, Substance Use, Behavioral Health

The U.S. Department of Health and Human Services enhances and protects the health and well-being of all Americans by providing for effective health and human services and fostering advances in medicine, public health, and social services. HHS programs are numerous. This session will spotlight the **Administration for Children & Families (ACF)** programs that promote the economic and social well-being of families, children, individuals and communities; the **Centers for Medicare & Medicaid Services (CMS)** programs featuring Medicaid, the State Children's Health Insurance Program (CHIP); the **Health Resources and Services Administration (HRSA)**, which provides health care to people who are geographically isolated, economically or medically vulnerable; the **Administration for Community Living (ACL)**, which increases access to community support and resources for the unique needs of older Americans and people with disabilities; and the **Substance Abuse and Mental Health Services Administration (SAMHSA)**, which improves access and reduces barriers to programs and services for individuals who suffer from or are at risk for addictive and mental disorders, as well as for their families and communities.

Presenters:

Julia Lothrop

Acting Regional Director, U.S. Department of Health and Human Services

Jeri Pickett

Regional Administrator, Health Resources and Services Administration

LaKesha Pope Jackson

Regional Administrator, Administration for Children and Families

LCDR Traci Murray

Assistant Regional Administrator, Substance Abuse and Mental Health Services Administration

Derek Lee

Regional Administrator, Administration for Community Living

Melissa Scarborough

Local Engagement and Administration Staff, Centers for Medicare and Medicaid Services



Working Together to Serve Diverse Communities
U.S. Department of Health and Human Services:
Covering Families Through the Lifespan

Julia Lothrop
Acting Regional Director



About HHS

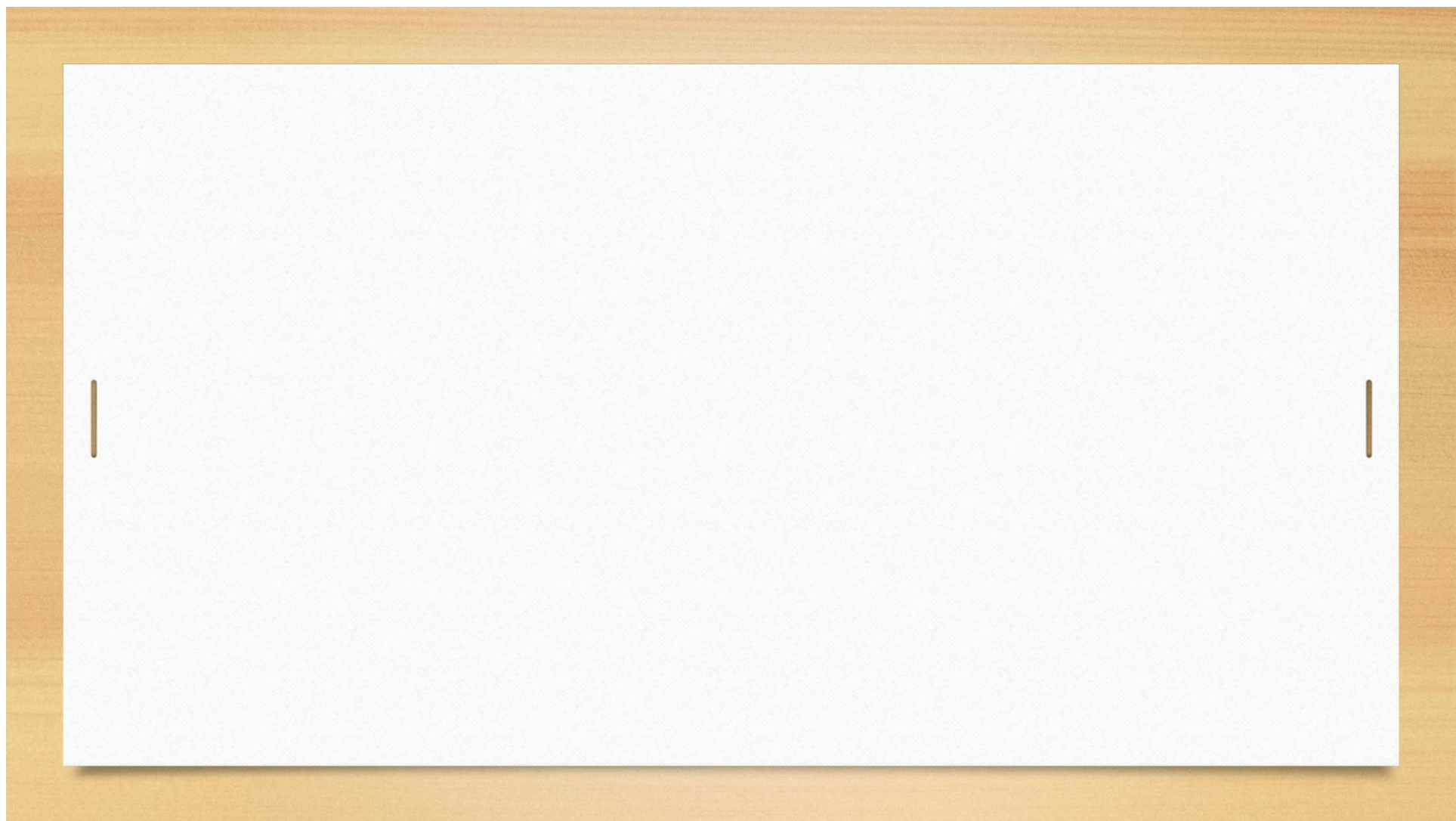
- Mission: Enhance and protect the health and well-being of all Americans.
- Health and human services
- Advances in medicine,
- Public health, and
- Social services.
- [HHS.gov](https://www.hhs.gov)



HHS

11 Operating Divisions:

- Administration for Children and Families (ACF)
- Administration for Community Living (ACL)
- Agency for Health Care Research and Quality (AHRQ)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Centers for Disease Control & Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Food & Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Substance Abuse and Mental Health Services Administration (SAMHSA)





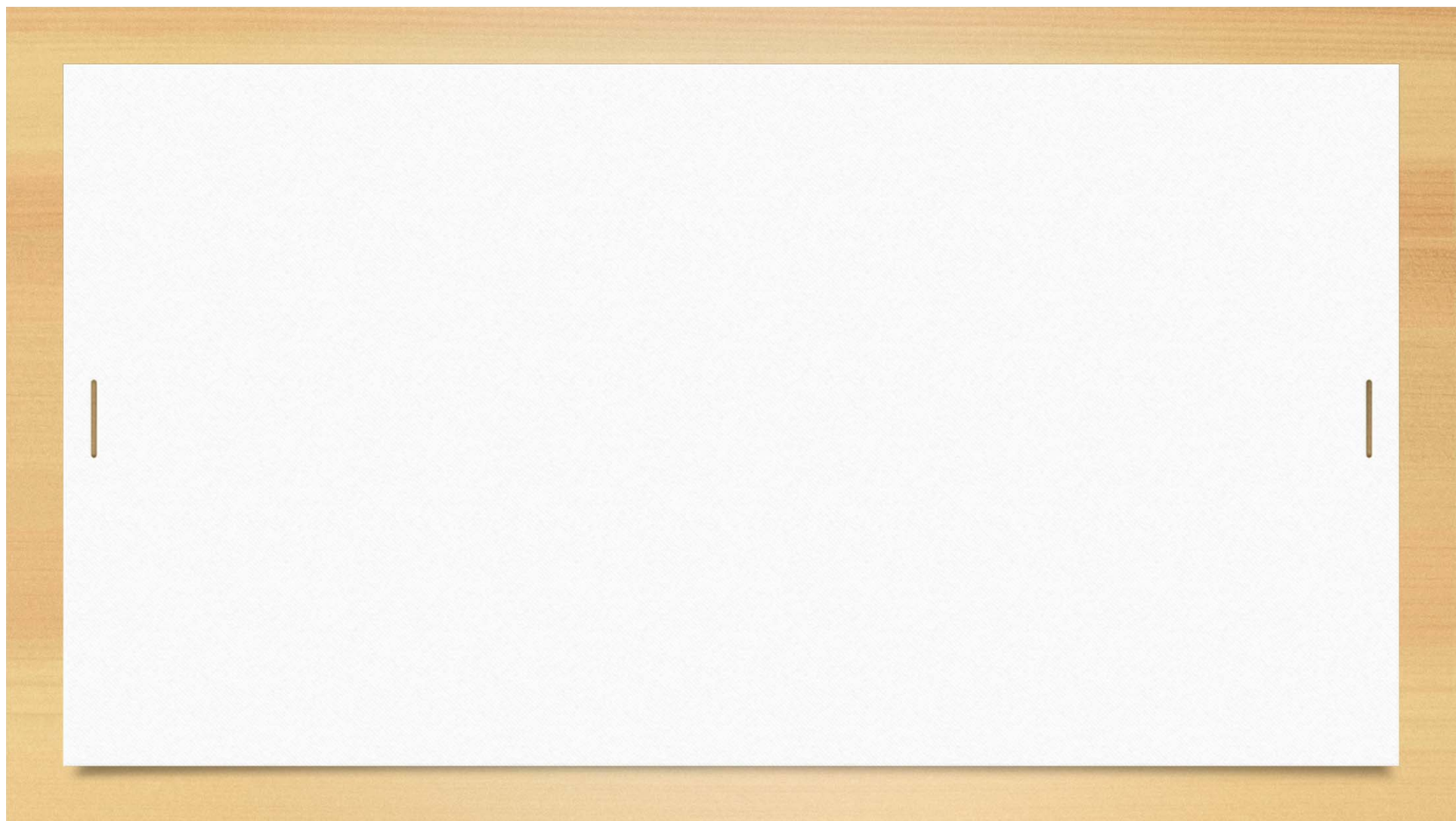
HHS

HHS Secretary Alex Azar

Priorities:

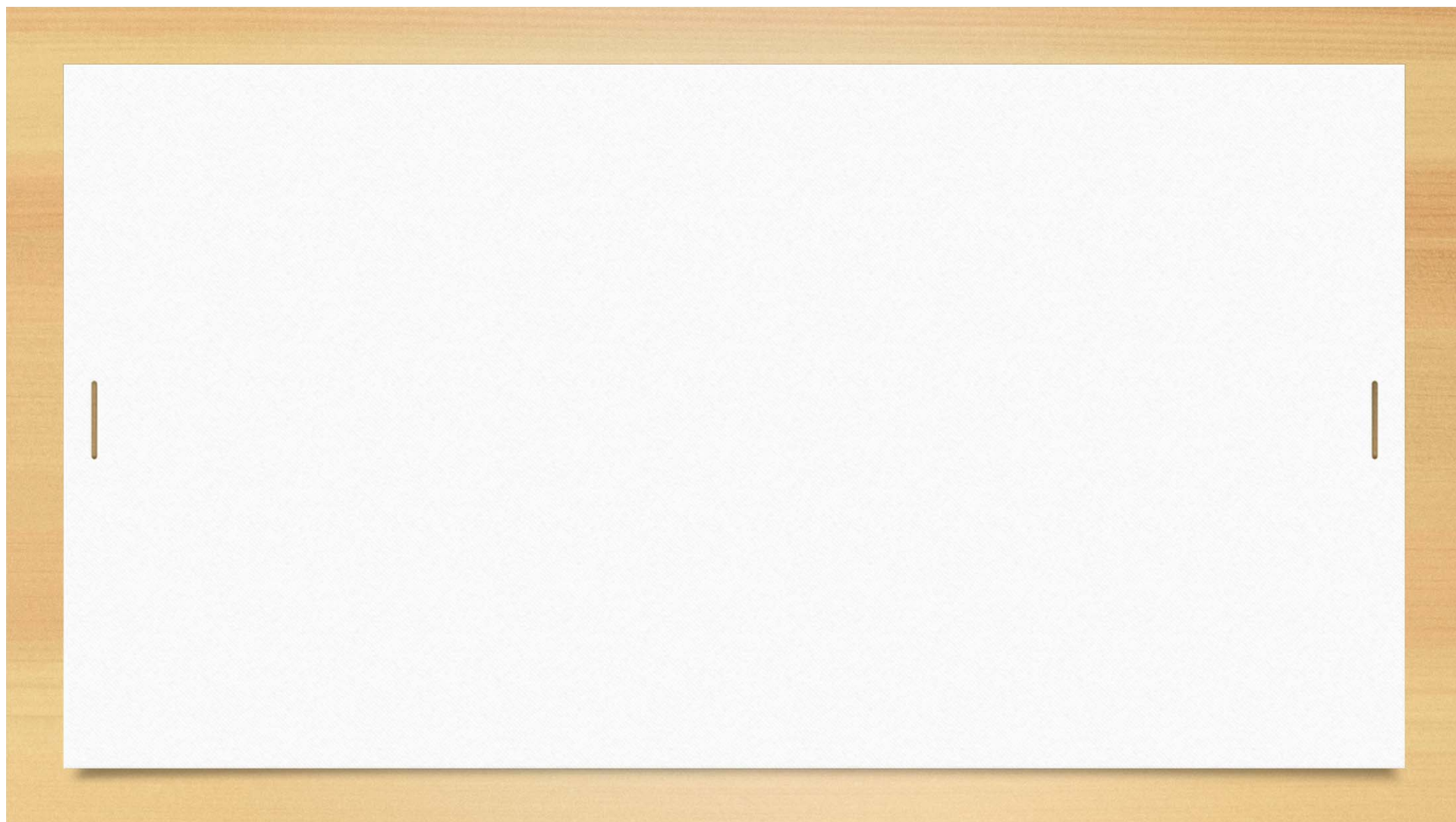
- Opioid Crisis - <https://www.hhs.gov/opioids/>
- Health Insurance Reform – cms.gov
- Drug Pricing - <https://www.whitehouse.gov/presidential-actions/executive-order-lowering-prices-patients-eliminating-kickbacks-middlemen/>
- Value-Based Care – cms.gov
- Ending HIV Epidemic by 2030 – HIV.gov
- COVID-19 - <https://www.hhs.gov/coronavirus/index.html> & CDC.gov





Health Disparities

- Black Americans and American Indians and Alaska Natives are being hospitalized for COVID-19 at five times the rate of non-Hispanic white Americans
- Hispanic Americans are being hospitalized at four times the rate.



Essential Workers

- Racial and ethnic minorities are disproportionately likely to hold jobs that are deemed “essential.”
- These occupations cause individuals to be in close and frequent contact with others,
- Public Transportation
- Close proximity at work site



Essential Workers: What is HHS Doing?

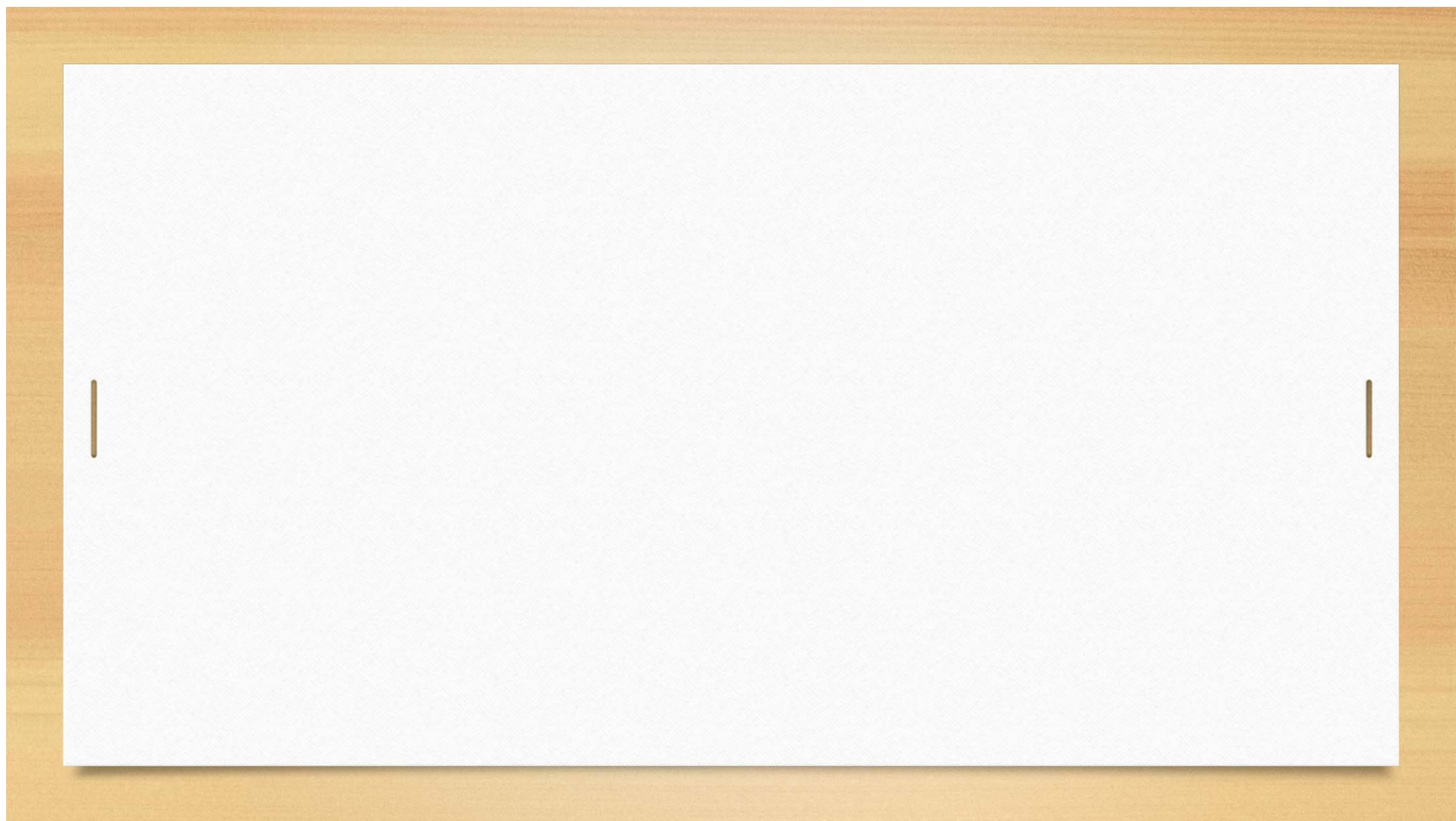
- CDC teams to communities: lab testing, technical assistance, mitigation
- HHS employees and Commissioned Corps officers deployed to hot spot areas
- More than 1,800 community-based testing sites around America, including 201 in Texas
- More than two-thirds located in underserved areas.
- Testing at Community Health Centers - <https://findahealthcenter.hrsa.gov/>
- Testing Sites: dshs.state.tx.us or <https://www.hhs.gov/coronavirus/community-based-testing-sites/index.html>

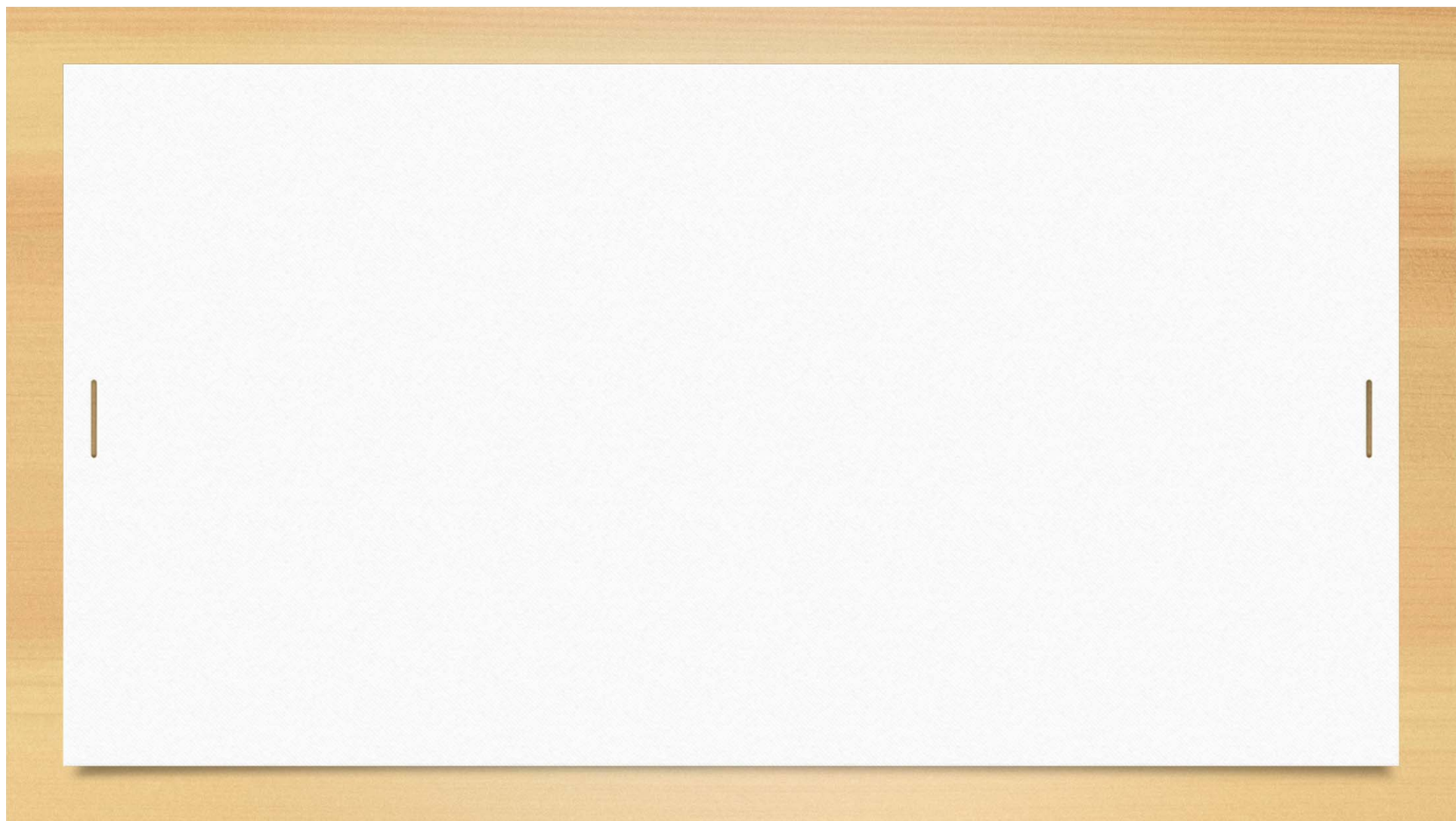
Essential Workers: What is HHS Doing?

- Partnered with national pharmacy and grocery retail chains -- CVS, Rite-Aid, Walgreens, Quest (Walmart) and eTrueNorth (Kroger and Walmart)
- More than 600 COVID-19 testing sites in 48 states and the District of Columbia.
- Approximately 70% of these testing sites are located in communities with moderate-to-high social vulnerability
- Improve data collection - <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>

Health Disparities: What is HHS Doing?

- COVID-19 testing and care for the uninsured - <https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/for-patients/index.html>
- \$25 billion for Medicaid and safety-net providers, \$10 billion for rural providers, and \$2 billion for hospitals that serve disproportionately low-income and uninsured individuals.
- Current Provider Relief Funds announcement – by Aug 28 - <https://www.hhs.gov/about/news/2020/07/31/hhs-extends-application-deadline-for-medicaid-providers-and-plans-to-reopen-portal-to-certain-medicare-providers.html>
- Telehealth

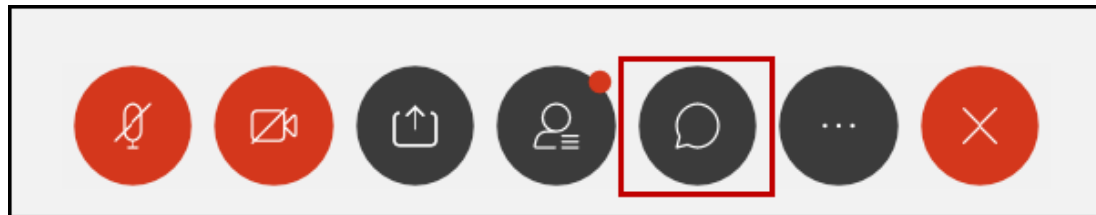




Questions?

Send your question by **Chat**:

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- In the **Send To** or **To** drop-down list, select the recipient of your question
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Working Together to Serve Diverse Communities: A Virtual Common Ground Conference

Federal Trade Commission

August 5, 2020

Jeri Pickett
Regional Administrator
Office of Regional Operations (ORO)

Vision: Healthy Communities, Healthy People

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Health Resources and Services Administration (HRSA) Overview

- Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged
- HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities
- Every year, HRSA programs serve tens of millions of people, including people living with HIV/AIDS, pregnant women, mothers and their families, and those otherwise unable to access quality health care

Health Resources and Services Administration (HRSA)

Health Center COVID-19 Survey

<https://bphc.hrsa.gov/emergency-response/coronavirus-health-center-data>

	Patients Tested for COVID-19	Racial and/or Ethnic Minority Patients Tested for COVID-19	Patient Tested + for COVID-19	Racial and/or Ethnic Minority Patients Tested + for COVID-19
Arkansas	3,352	39.26%	186	55.91%
Louisiana	5,241	58.23%	498	61.04%
New Mexico	1,874	66.12%	50	76.00%
Oklahoma	947	55.86%	72	45.83%
Texas	15,916	59.99%	2630	80.46%



*Data represents information provided by health centers from a single, specified reporting date.
Latest data for the week ending on July 17, 2020.*



HRSA Find Health Services Locator Tools



[HRSA.gov](https://www.hrsa.gov)



findahealthcenter.hrsa.gov



findhivcare.hrsa.gov

Maternal Child Health Bureau Programs

- MCHB is the one federal bureau responsible for improving the health of all America's mothers, children, and families. We envision an America where all children and families are healthy and thriving, and where each child has a fair shot at reaching their fullest potential.
 - Title V Maternal and Child Health Services Block Grant Program
 - Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV)
 - Healthy Start
 - Other MCHB Programs



Maternal Child Health Bureau

- HHS Awards \$20 Million to Combat COVID-19 Pandemic through Telehealth **(April 30)**
 - MCHB awarded \$15 million to four recipients to support key areas in maternal and child health: pediatric care, maternal health care, state public health systems and family engagement for children with special health care needs.



Office of Regional Operations - Dallas

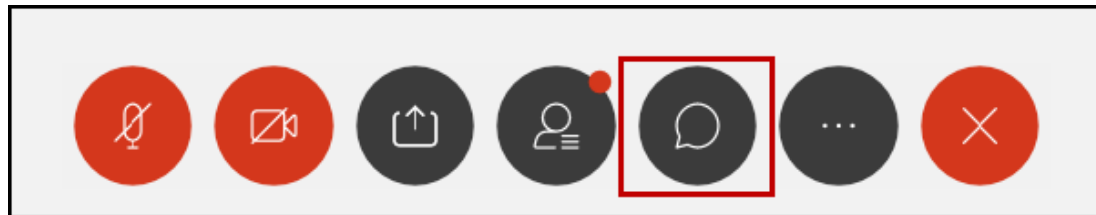
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Office of Regional Operations - Dallas

Contact Information

Jeri Pickett
Regional Administrator
HRSA Office of Regional Operations - Dallas
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Administration for Children and Families (ACF)

PRESENTER:

LAKESHA POPE JACKSON



What is ACF?

The Administration for Children and Families (ACF) is a division of the Department of Health & Human Services (HHS).

We promote the economic and social well-being of children, families, individuals and communities with funding, strategic partnerships, guidance, training and technical assistance.



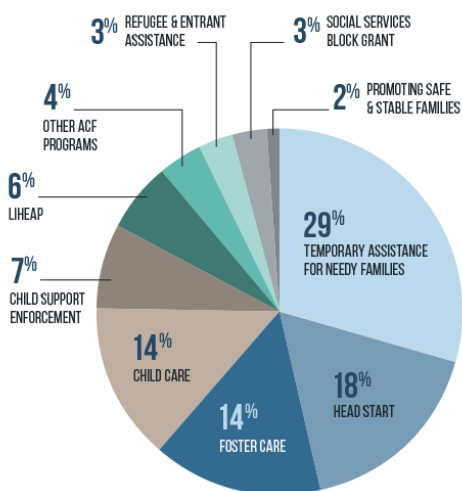
About ACF

Leadership



Lynn Johnson,
ACF Assistant Secretary

ACF FY 2020 BUDGET



ACF administers more than **60 programs** with a budget of more than **\$53 billion**, making it the second largest agency in the U.S. Department of Health and Human Services.

Regional Leadership

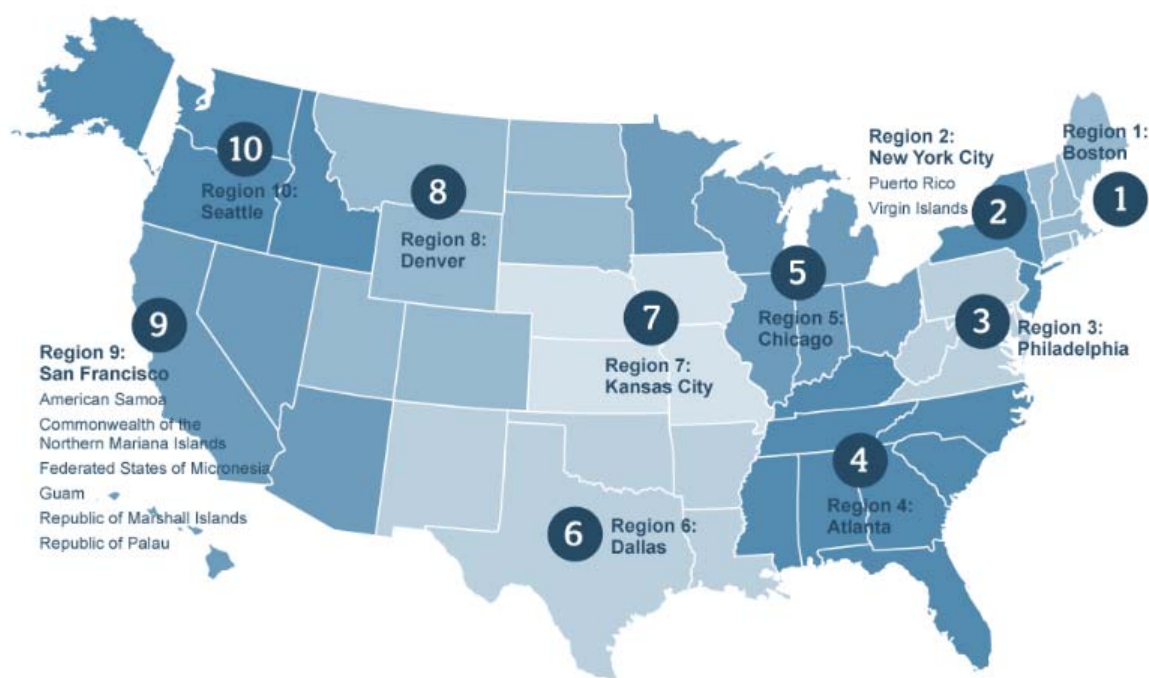


LaKesha Pope Jackson,
R6 Regional
Administrator &
Acting RA for Region 9



ACF Regional Offices

ACF is comprised of 19 offices including the Office of Regional Operations, which represents 10 regional offices around the country.



ACF Priority Areas



Primary Prevention

A whole family approach to improve outcomes for children and families by connecting them to services before they are in crisis, preventing child abuse, neglect, homelessness, or poor health and development.

Economic Mobility

Concept to move families to self-sufficiency by growing the capacity to achieve their fullest potential through the workforce, early childhood development and the full spectrum of integrated health and human services.

ACF Priority Areas

Path Forward

- Using this modeling, *we are able to:*
- Strengthen our support for both children and families
- Create the conditions for better coordination and integrated service delivery to families
- Strengthen the capacity of communities

This means advancing broad community efforts that:

- Strengthen economic supports for families that advance their economic mobility
- Provide quality care and education early in life
- Promote healthy child development, and
- Highlight primary prevention efforts that support the overall well-being of families

ACF Leadership's Strategic Planning Summit (May 2019)



ACF Program Offices

- ACF has program offices specialized in their missions supporting a variety of initiatives that empower families and individuals and improve access to services in order to create strong, healthy communities.
- These programs fund a variety of projects from Native American Language Preservation to Refugee Resettlement to Child Care.



ACF Program Offices



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Administration for Native Americans (ANA)

Administration on Children, Youth and Families (ACYF)

Children's Bureau (CB)

Office of Early Childhood Development (ECD)

Family and Youth Services Bureau (FYSB)

Office of Child Care (OCC)

Office of Child Support Enforcement (OCSE)

Office of Community Services (OCS)

Office of Family Assistance (OFA)

Office of Head Start (OHS)

Office of Human Services Emergency Preparedness and Response (OHSEPR)

Office of Refugee Resettlement (ORR)

Office on Trafficking in Persons (OTIP)



ADMINISTRATION FOR
CHILDREN & FAMILIES

ACF Program Offices

Administration for Native Americans

ANA supports Native American communities by providing financial assistance and capacity building, gathering and sharing data, and advocating for improved policies within HHS and across the federal government.

Administration on Children, Youth and Families (ACYF)

ACYF oversees major federal programs that provide financial assistance to states, community-based organizations, and academic institutions to provide services, carry out research and demonstration activities, and manage training, technical assistance and information dissemination.

ACF Program Offices



CB focuses on improving the lives of children and families through programs that reduce child abuse and neglect, increase the number of adoptions, and strengthen foster care.

Office of Early Childhood Development (ECD)

ECD promotes a joint federal approach to improve early childhood education and development.



The Family & Youth Services Bureau (FYSB) supports the organizations and communities that work every day to reduce the risk of youth homelessness, adolescent pregnancy and domestic violence.



OCC supports low-income working families through child care financial assistance and promotes children's learning by improving the quality of early care and education and afterschool programs.

ACF Program Offices

Office of Child Support Enforcement (OCSE)

[OCSE](#) partners with federal, state, tribal and local governments and others to promote parental responsibility so that children receive support from both parents even when they live in separate households.

Office of Community Services (OCS)

[OCS](#) partners with states, communities and agencies to eliminate causes of poverty, increase self-sufficiency of individuals and families and revitalize communities.

Office of Family Assistance (OFA)

[OFA](#) administers several key federal grant programs, including Temporary Assistance for Needy Families (TANF), Tribal programs, Healthy Marriage and Responsible Fatherhood, and Health Profession Opportunity Grants.

Office of Head Start (OHS)



[OHS](#) manages grant funding and oversees local agencies providing Head Start services. Head Start promotes school readiness of children under five from low-income families through education, health, social, and other services.

ACF Program Offices

Office of Human Services Emergency Preparedness and Response (OHSEPR)

[OHSEPR](#) promotes resilience for individuals, families, and communities impacted by disasters & public health emergencies by providing expertise in human services policy, planning, operations, and partnerships.

Office of Refugee Resettlement (ORR)

The Office of Refugee Resettlement (ORR) helps new populations maximize their potential in the United States by linking them to critical resources that assist them in becoming integrated members of American society.

Office on Trafficking in Persons (OTIP)

[OTIP](#) is committed to preventing human trafficking and ensuring that victims of all forms of human trafficking have access to the services they need.

The Office of Head Start (OHS)

- The Office of Head Start (OHS) administers grant funding and oversight to the 1,600 agencies that provide Head Start services in communities across the country. OHS also provides federal policy direction and a training and technical assistance (T/TA) system to help grantees in providing comprehensive services to eligible young children and their families.
- Head Start programs prepare America's most vulnerable young children to succeed in school and in life beyond school. To achieve this, Head Start programs deliver services to children age birth to 5 and their families in core areas of early learning, health, and family well-being.
- The Head Start program serves about 1 million children and pregnant women in urban, suburban, and rural communities throughout America. Head Start services are provided in centers, family child care homes, or in the family's own home.



Office of Child Care (OCC)



- The Child Care and Development Fund (CCDF) program, is authorized under the Child Care and Development Block Grant Act (CCDBG) which was enacted under the Omnibus Budget Reconciliation Act of 1990.
- The CCDBG Act was amended and reauthorized by the Personal Responsibility and Work Opportunity Act of 1996, and again by the CCDBG Act of 2014. CCDF made \$8.7 billion available to states, territories, and tribes in fiscal year 2020.
- In addition, the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) provided \$3.5 billion in supplemental CCDF monies to address the impacts of the coronavirus.



Office of Child Care (OCC)



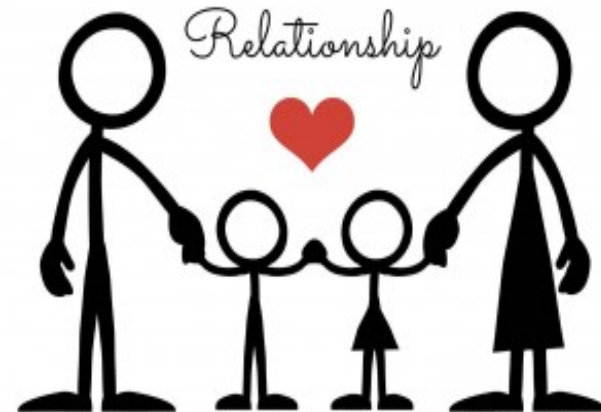
- Child care is an essential part of the response to the COVID-19 pandemic and subsequent recovery efforts. The Child Care and Development Fund (CCDF) continues to provide funding to state, territory and tribal governments during the pandemic to provide support for children and their families with paying for child care. Below are links to guidance and resources relevant to child care and COVID-19.
- **Office of Child Care COVID-19 Resources:** <https://www.acf.hhs.gov/occ/resource/occ-covid-19-resources>



Office of Family Assistance (OFA) Programs

Healthy Marriage and Responsible Fatherhood (HMRF).

On September 30, 2015, OFA announced grant awards to 91 organizations in 27 states and one territory to provide activities to promote healthy marriage and relationship education, responsible fatherhood, and reentry services for currently or formerly incarcerated fathers under three funding opportunities.



OFA Programs



Health Profession Opportunity Grants (HPOG) program

The HPOG program provides education and training to TANF recipients and other low-income individuals for health occupations that pay well and are expected to either experience labor shortages or be in high demand.

HPOG 2.0, a new round of HPOG grants, was awarded in September 2015 to 32 organizations, including 5 tribal organizations, located across 21 states for a new five-year period.

OFA Programs



- **Native Employment Works (NEW).** The Native Employment Works (NEW) program provides annual funding to 78 grantees (7 in Region 6) for a variety of work-related activities to support job readiness, job placement, and job retention for Native Americans.
- **Tribal TANF.** Federally-recognized Indian tribes are eligible to apply for funding to administer and operate their own TANF programs. Tribes receive block grants to design and operate programs that accomplish one of the four purposes of the TANF program. There are currently 4 Tribal TANF programs in ACF Region 6 states and one pending.
 - New Tribal TANF PI addresses common questions about how Tribal TANF can be used to alleviate the COVID-19 economic crisis for families, and what administrative flexibilities are available to programs: <https://www.acf.hhs.gov/ofa/resource/tanf-acf-pi-2020-02-questions-and-answers-about-tribal-tanf-and-the-coronavirus-disease-2019-covid-19-pandemic>

OFA Programs

Temporary Assistance for Needy Families (TANF).

The Temporary Assistance for Needy Families (TANF) program is designed to help needy families achieve self-sufficiency. States receive block grants to design and operate programs that accomplish one of the purposes of the TANF program.

TANF Resources

<https://www.acf.hhs.gov/ofa/programs/tanf>



TANF

Since replacing Aid to Families with Dependent Children (AFDC) in 1996, the TANF program has served as one of the nation's primary economic security and stability programs for low-income families with children. TANF is a block grant that provides \$16.6 billion annually to states, territories, the District of Columbia, and federally-recognized Indian tribes. These TANF jurisdictions use federal TANF funds to provide income support to low-income families with children, as well as to provide a wide range of services (e.g., work-related activities, child care, and refundable tax credits) designed to accomplish the program's four broad purposes.

These statutory purposes are to:

- provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;
- end the dependence of needy parents on government benefits by promoting job preparation, work, and marriage;
- prevent and reduce the incidence of out-of-wedlock pregnancies; and
- encourage the formation and maintenance of two-parent families.



TANF

Allowable Uses of TANF Funds

Employment Services

- A wide range of employment-specific services are allowable for TANF eligible families including a non-resident father such as, but not limited to, vocational education, on the job training, unsubsidized job referral/placement, work experience and subsidized employment.
- TANF cash assistance recipients are required to participate in specific work or employment-related services and thus may have limited options as determined by the TANF jurisdiction.



Contact Information & Resources

Regional Contact:

LaKesha Pope Jackson,
Region 6 Regional Administrator & Acting RA R9
214) 767-9648
LaKesha.PopeJackson@acf.hhs.gov

ACF Resources:

Administration for Children & Families
<https://www.acf.hhs.gov>

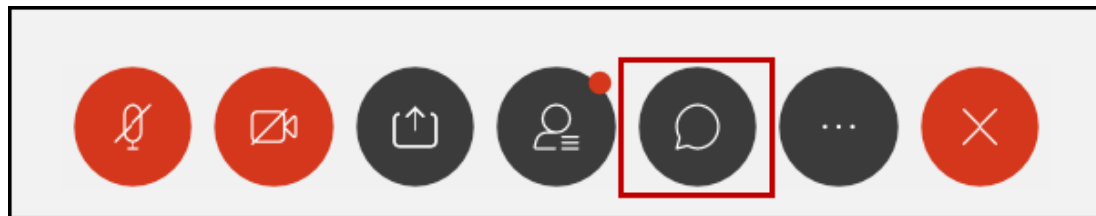
ACF COVID-19 Response & Resources
<https://www.acf.hhs.gov/coronavirus>



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SAMHSA Efforts Supporting Behavioral Health Needs for African Americans

LCDR Traci M. Murray, PhD, MPH, RN, CPH

Regional Administrator Office, Region VI

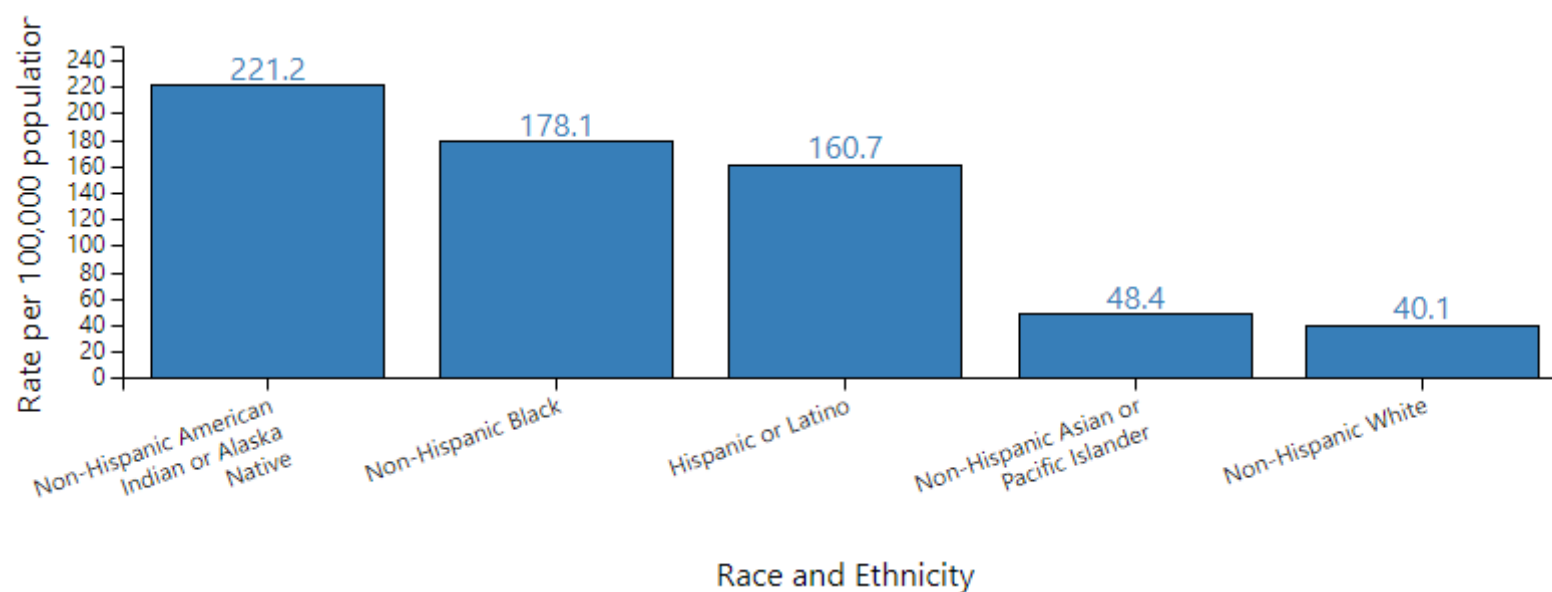
Substance Abuse and Mental Health Services Administration

U.S. Department of Health and Human Services



Disparities in COVID-19 Hospitalizations

Age-adjusted COVID-19-associated hospitalization rates by race and ethnicity, COVID-NET, March – June 13, 2020

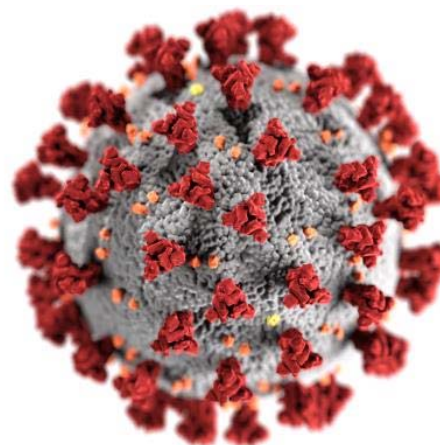


CARES ACT

- \$425M – Increase access to mental health services through Community Behavioral Health Clinics, suicide prevention programs and emergency response spending
- \$40M – FY2020 COVID-19 Emergency Response for Suicide Prevention grants
- \$7M – Suicide Prevention Lifeline Crisis Center Follow-Up Expansion Grants
- \$110M – COVID-19 Emergency Grants to Address Mental and Substance Use Disorder

Guidance during COVID-19 Pandemic

- Intramuscular use of naloxone for law enforcement and first responders
- Flexibility for grantees experiencing loss of operational capacity and increased costs
- 42 CFR Part 2, waived prohibitions on use and disclosure of patient identifying information
- Exceptions for Opioid Treatment Programs to dispense 28 days of take-home doses



For more information on
SAMHSA's COVID-19 efforts, visit:
<https://www.samhsa.gov/coronavirus>

Funding Opportunities: SAMHSA.gov/grants



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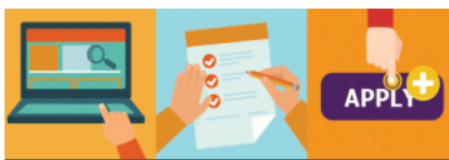
Grants

Note: A significant change has been made to the registration process for the System for Award Management (SAM). Please refer to the FAQs on the SAM website.



FY 2020 Grant Announcements

SAMHSA announces grant funding opportunities through Funding Opportunity Announcements (FOAs). Each FOA contains all the information you need to apply for a grant. To apply for a SAMHSA grant, you must register on [Grants.gov](#).



Applying for a New Grant

These resources will help you find and apply for funding opportunities. Visit "[Applying for a New SAMHSA Grant](#)" to learn more.

- » [Training Events for Applicants](#)
- » [Registration Requirements](#)



Explore This Section

- » [Block Grants](#)
- » [GPRA Measurement Tools](#)
- » [Grants Glossary](#)
- » [Fact Sheet](#)

Grant Awards



SAMHSA'S efforts related to African Americans, visit:

<https://www.samhsa.gov/behavioral-health-equity/black-african-american>

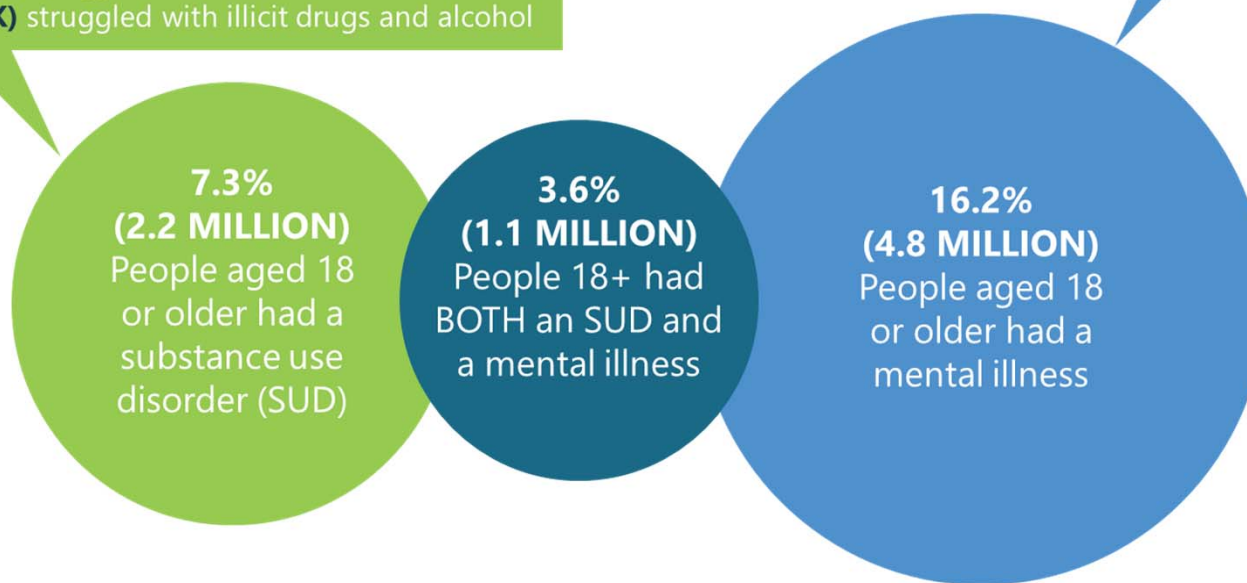


Mental Illness and Substance Use Disorders among African American Adults (≥ 18 y.o.)

PAST YEAR, 2018 NSDUH, African American 18+

Among African Americans with a substance use disorder:
6 IN 13 (47.1% or 1.0M) struggled with illicit drugs
2 IN 3 (67.6% or 1.5M) struggled with alcohol use
1 IN 7 (14.8% or 320K) struggled with illicit drugs and alcohol

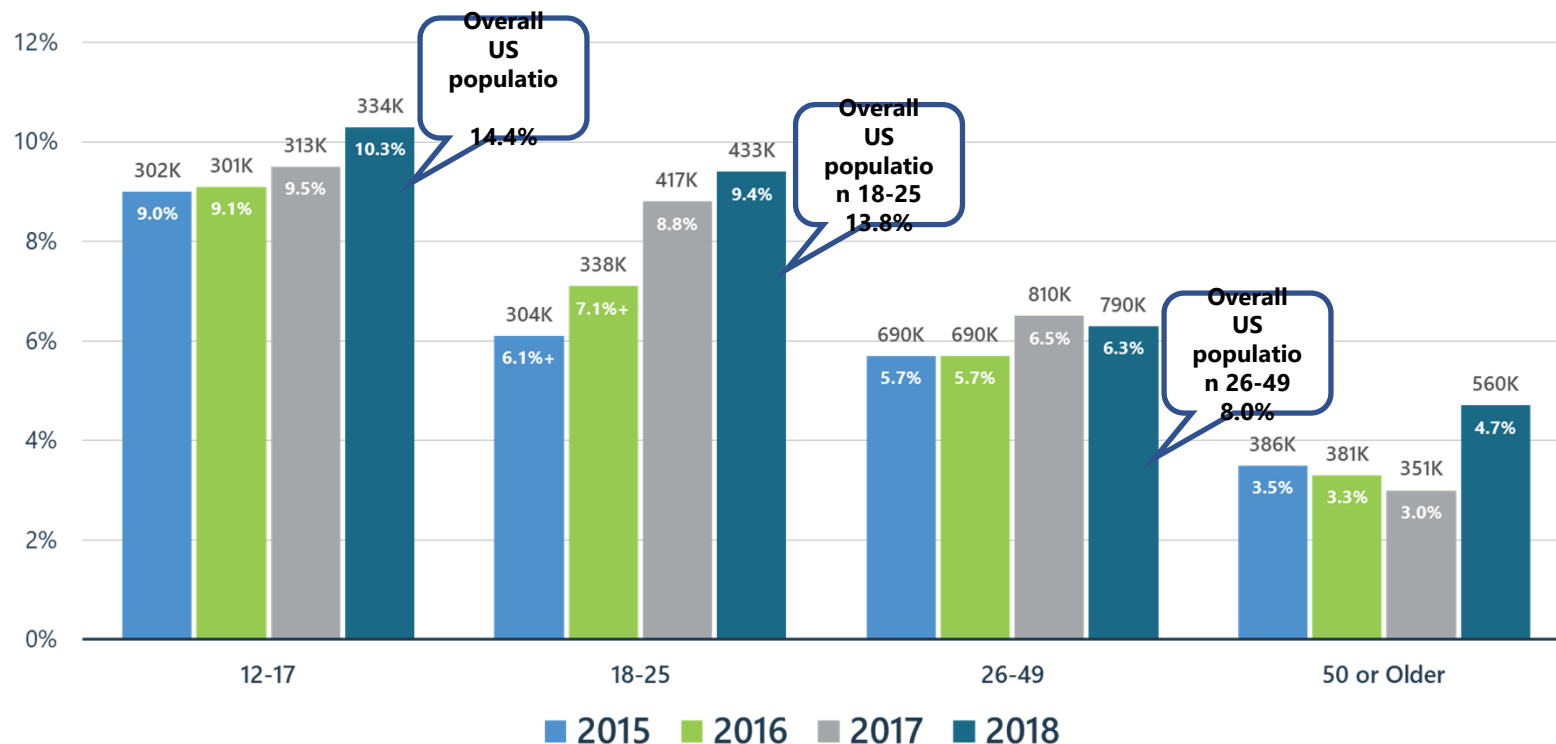
Among African Americans with a mental illness:
2 IN 9 (22.4% or 1.1M) had a serious mental illness



55 In 2018, **5.9M** African American adults had a mental and/or substance use disorder.

Major Depressive Episodes among African Americans

PAST YEAR, 2015-2018 NSDUH, African American 12+



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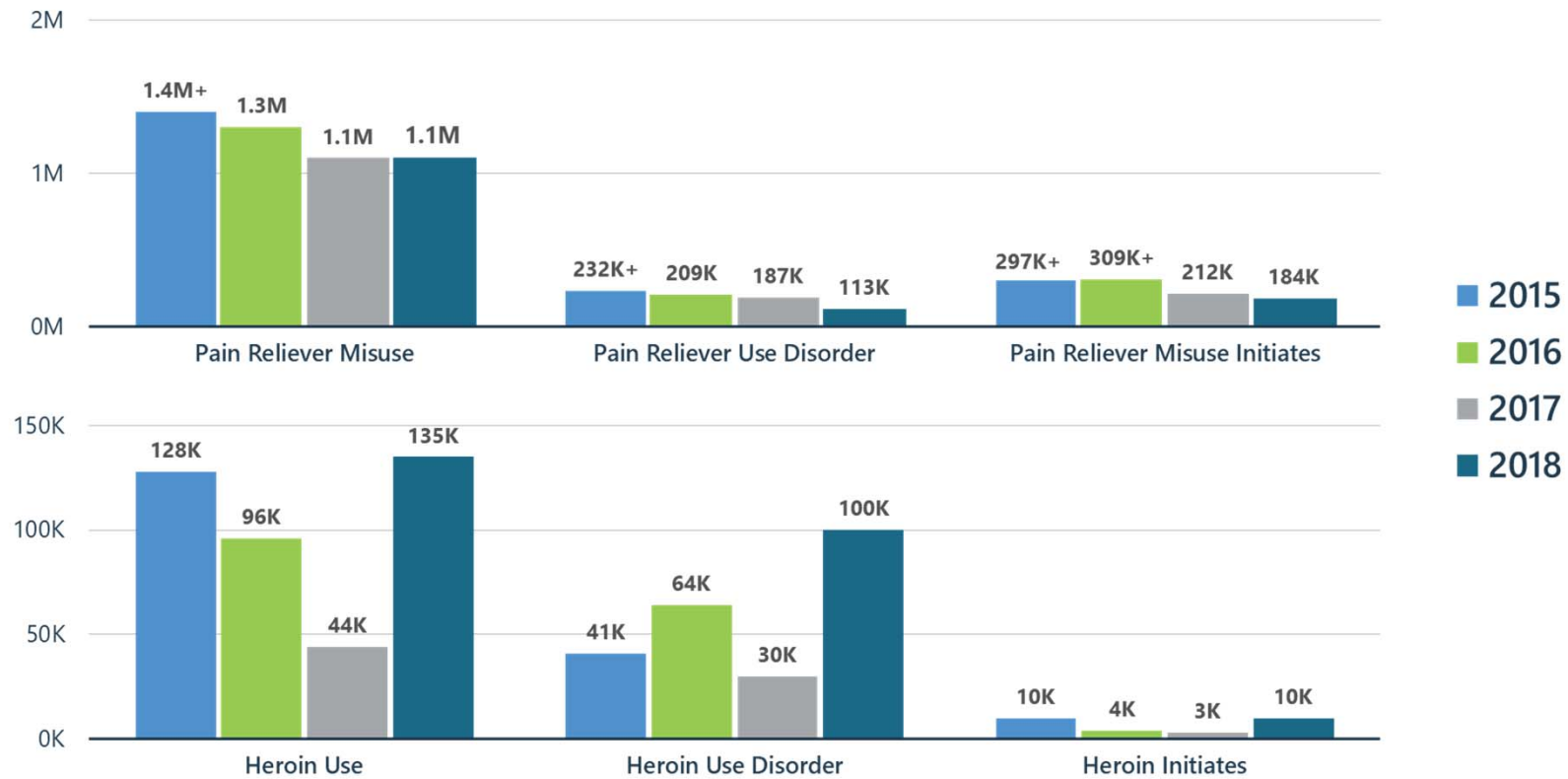
Note: The adult and youth MDE estimates are not directly comparable.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

SAMHSA
Substance Abuse and Mental Health
Services Administration

Prescription Pain Reliever Misuse and Heroin Use among African Americans

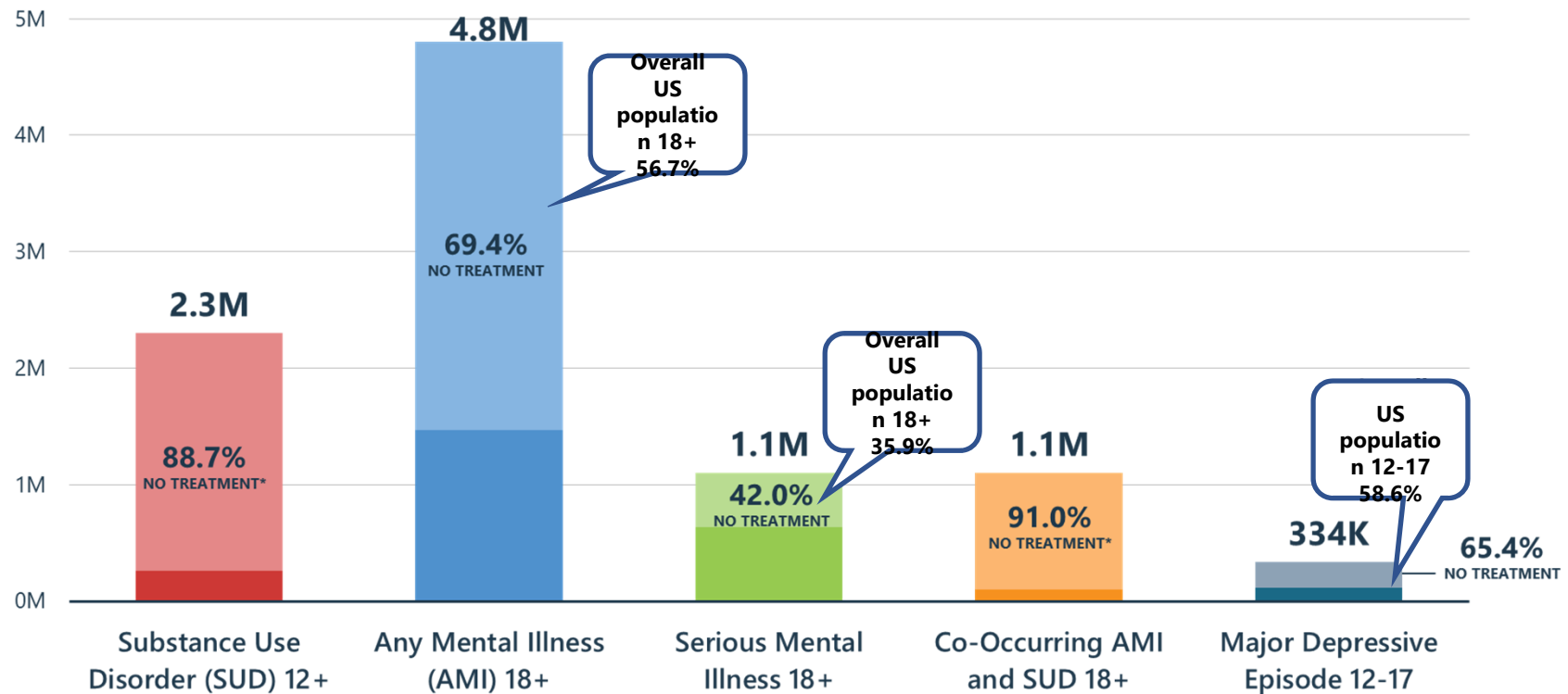
PAST YEAR, 2015-2018 NSDUH, African American 12+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Despite Consequences and Disease Burden, Treatment Gaps among African Americans Remain Vast

PAST YEAR, 2018 NSDUH, African American 12+



* No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor's office, self-help group, or prison/jail.

SAMHSA
Substance Abuse and Mental Health
Services Administration

An Urgent Issue

Includes:

- Data on **opioid misuse and death rates** in the Black/AA population;
- **Contextual factors & challenges** to prevention & treatment;
- Innovative **outreach & engagement strategies** to connect people to evidence-based treatment;
- **The importance of community voice.**

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HBCU Center of Excellence



This program recruits students to careers in the behavioral health field to address mental and substance use disorders, provides training that can lead to careers in the behavioral health field, and/or prepares students for obtaining advanced degrees in the behavioral health field.

Faith-based and Community Initiatives



The initiative emphasizes the key role FBCI organizations play in the delivery of substance use prevention, addiction treatment, and mental health services, particularly to underserved communities and culturally diverse populations.

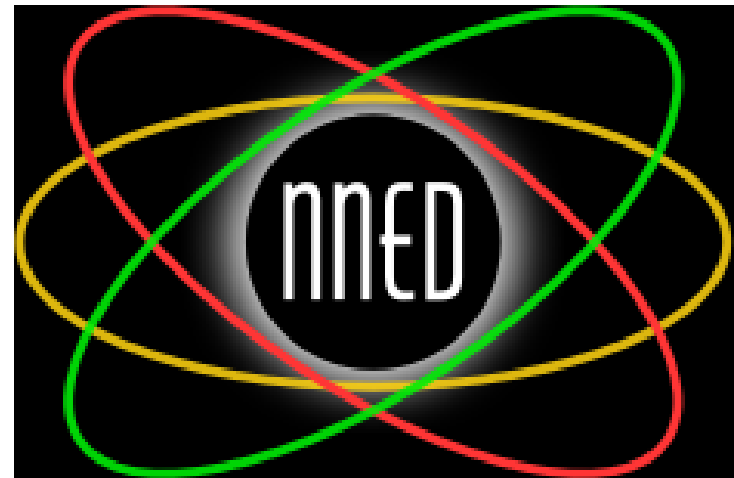
<https://www.samhsa.gov/faith-based-initiatives>

National Network to Eliminate Disparities in Behavioral Health

Network of **community-based organizations** focused on the mental health and substance use issues of diverse racial and ethnic communities

Supports information sharing, training, and technical assistance towards the goal of **promoting behavioral health equity**

<https://nned.net/>



REACH Training Program



Recognizing and Eliminating disparities in Addiction through Culturally-informed Healthcare

Program Goals: (1) Increase overall number of racial and ethnic underrepresented minority (URM) addiction specialists, and (2) increase number of addiction specialists adequately trained to work with racial and ethnic URM patients with substance use disorders.

<https://reachgrant.org/>

Thank You

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

HHS Region VI:

AR, LA, NM, OK, TX and 68 Federally Recognized Tribes



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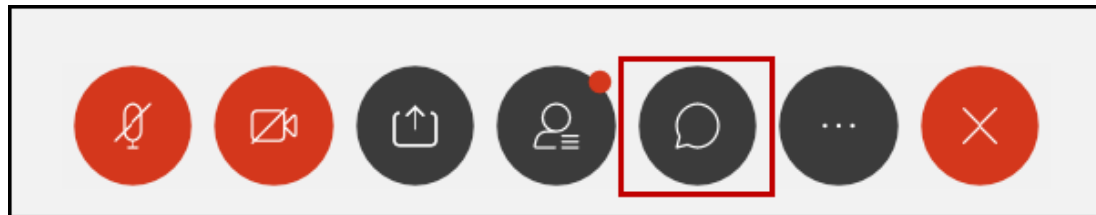
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- In the **Send To** or **To** drop-down list, select the recipient of your question
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Working Together to Serve Diverse Communities

FTC Virtual Resource Fair
August 5, 2020



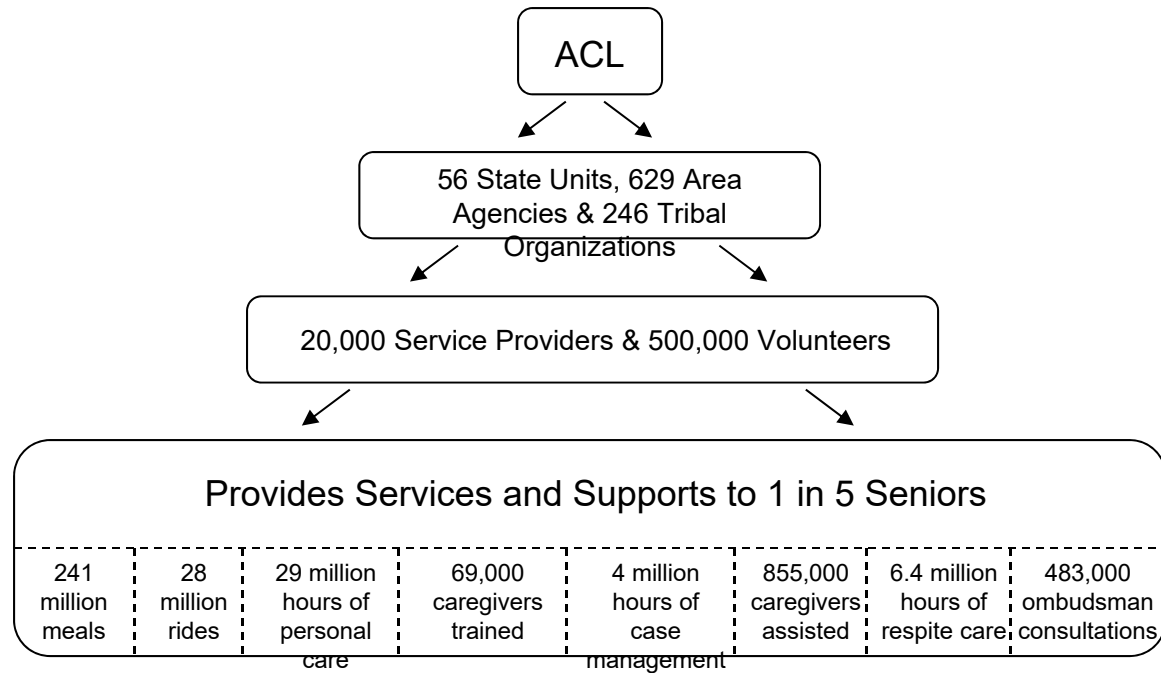
About the Administration for Community Living

ACL brings together:

- Administration on Aging (AoA)
- Center for Innovation & Partnership
- Administration on Disabilities
- National Institute on Disability, Independent Living, and Rehab. Research
- Center for Regional Operations

We have the responsibility for developing policies and improving supports for seniors and people with disabilities.

How The Aging Network Helps 11 Million Seniors And Their Caregivers Remain At Home Through Community Based-Services



Older Americans Act

DECLARATION OF OBJECTIVES

Older people of our Nation are entitled to:

- The best possible physical and mental health which science can make available and without regard to economic status.
- Efficient community services, including access to low cost transportation, which provide a choice in supported living arrangements and social assistance in a coordinated manner and which are readily available when needed, with emphasis on maintaining a continuum of care for vulnerable older individuals.
- Immediate benefit from proven research knowledge which can sustain and improve health and happiness.

OAA Title III Program Eligibility

- “Older individual” means an individual who is 60 years of age or older. OAA Title I, Sec. 102(40)
- The OAA does not have income requirements and prohibits means-testing.
- Targeting is required: older individuals with *greatest economic need* and older individuals with *greatest social need*, with particular attention to low-income minorities and individuals residing in rural areas.

Supportive Services

Title III Part B

Grants fund an array of services that enable older adults to remain in their homes for as long as possible. Services include, but are not limited, to:

- Transportation
- Case management
- Information and assistance
- In-home services (personal care, chores, and homemaker assistance)
- Legal services
- Adult day care
- Multi-purpose senior centers
- Health screening
- Exercise/health promotion programs

Nutrition Services

PURPOSES (Sec 330)

- (1) to reduce hunger and food insecurity
- (2) to promote socialization, and
- (3) to **promote the health/well-being** of older individuals by **access to nutrition and other disease prevention/health promotion services to delay the onset of adverse health conditions** resulting from poor nutritional health or sedentary behavior.



Nutrition Services

Through the meals providers, the program provides a range of services including:

- Nutrition screening
- Assessment
- Education
- Counseling

About 5,000 providers together serve more than 900,000 meals a day in communities across the country.

Home-delivered Meals

The home-delivered meals program authorizes meals and related nutrition services for older individuals who are:

- Frail
- Homebound
- Isolated
- In some cases, their caregivers, spouses, and/or persons with disabilities.

Health Promotion/Disease Prevention

Title III-D

- Health education reduces the need for more costly medical interventions.
- Priority is given to serving elders living in medically-underserved areas or who are of greatest economic need.



Health Promotion/Disease Prevention

“evidence-based” requirement

A state’s health promotion/disease prevention allocation may only be used for activities which have been demonstrated through rigorous evaluation to be *evidence-based*.

Evidence-based programs:

- are shown to be effective at helping participants adopt healthy behaviors, improve their health status, and reduce their use of hospital services and emergency room visits.
- can mitigate the negative impact of chronic diseases and related injuries, such as falls.
- empower older adults to take control of their health by maintaining a healthy lifestyle through increased self-efficacy and self-management.
- provide the greatest impact given available funding.

National Family Caregiver Support Program

Title III-E

Grants to states/territories to fund various supports that help family and informal caregivers care for older adults in their homes for as long as possible.

National Family Caregiver Support Program

NFCSP grantees provide five types of services:

- *information* to caregivers about available services
- *assistance* to caregivers in gaining access to the services
- individual *counseling*, organization of support groups, and caregiver training
- *respite care*; and
- *supplemental* services, on a limited basis

National Family Caregiver Support Program

Clients (caregivers) eligible to receive services:

- Adult family members/other informal caregivers age 18 and older providing care to *older individuals* (age 60+) or to *individuals of any age with Alzheimer's disease* and related disorders.

- Older relatives - not a parent - age 55 and older providing care to children under the age of 18;
- Older relatives, including parents, age 55 and older providing care to adults ages 18-59 with disabilities.

Long-Term Care Ombudsman

Title VII



States' Long-Term Care (LTC) Ombudsman programs work to resolve problems related to the health, safety, welfare, and rights of individuals who live in LTC facilities.

Prevention of Abuse, Neglect, Exploitation

Title VII, Chapter 3

The Abuse, Neglect, Exploitation program:

- Trains health care providers, law enforcement officers, and other professionals on how to recognize and respond to elder abuse;
- Supports outreach and education campaigns to increase public awareness of elder abuse and how to prevent it;
- Supports the efforts of state and local elder abuse prevention coalitions and multidisciplinary teams.

Title VI Native American HCBSS

- Nutrition services
 - congregate
 - HDM
 - nutrition education and counseling
- Supportive Services
 - information and assistance
 - case management
 - transportation
 - homemaker
 - home health aid
 - chore
 - evidence-based health promotion
 - legal or ombudsman services

Native American Nat'l Family Caregiver Support Program

- Information to caregivers about available services;
- Assistance to caregivers in gaining access to the services;
- Individual counseling, organization of support groups, and caregiver training to assist the caregivers in the areas of health, nutrition, and financial literacy, and in making decisions and solving problems relating to their caregiving roles;
- Respite care to enable caregivers of a frail elders to be temporarily relieved from their caregiving responsibilities; and
- Supplemental services, on a limited basis, for caregivers of frail elders to complement the care provided by caregivers.



SHIP counselors are trained and certified to help Medicare beneficiaries, their families, and caregivers by:

- Informing about Medicare Advantage, Medicare prescription drug coverage, and Medigap plan comparison or enrollments;
- Explaining how supplemental insurance options (e.g. insurance plans for retirees) work with Medicare;
- Providing information on long-term care insurance; and
- Referring beneficiaries to agencies such as the Social Security Administration and State Medicaid offices.



SMP mission: To empower and assist Medicare beneficiaries and caregivers to prevent, detect, and report suspected healthcare fraud, errors, and abuse through outreach, counseling, and education.

COVID-19 Supplemental Funding

Families First Coronavirus Response Act

- \$250 million in grants from the ACL to help communities provide meals for older adults.
- FFCRA signed into law on March 18, 2020, provided the additional funding for the nutrition services programs authorized by the Older Americans Act.

COVID-19 Supplemental Funding Coronavirus Aid, Relief and Economic Security Act

CARES Act

\$955 million provided to existing grantees in the Aging and Disability networks, including State Units on Aging and Centers for Independent Living, as well as tribal organizations:

- \$200M for HCBS under Title III-B of the OAA;
- \$480M for nutrition programs of the OAA;
- \$20M for nutrition and related services for Native American programs of the OAA;
- \$100M for the Nat'l Family Caregiver Support Program;
- \$20M for the Ombudsman program under Title VII of the OAA;
- \$50M for Aging/Disability Resource Centers; and
- \$85M for Centers for Independent Living under Title VII-C, Chapter I of the Rehabilitation Act.

ACL's Independent Living Programs

Working to support community living and independence for people with disabilities.

- Assisting with job searches
- Teaching local transit skills
- Helping with assistive technology
- School-to-career transition
- Assisting with home accessibility
- Housing options assistance

State Protection & Advocacy Systems

- P&A provide legal support to traditionally unserved or underserved populations to help navigate the legal system to achieve resolution and encourage systems change. P&As ensure that individuals with disabilities are able to exercise their rights to make choices, contribute to society, and live independently.

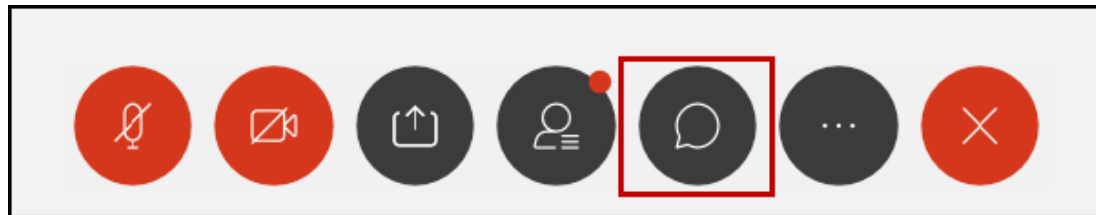
For more information

- Administration for Community Living
<https://acl.gov/>
- Eldercare Locator
<https://eldercare.acl.gov/Public/Index.aspx>
- ACL Older Indians website
<https://olderindians.acl.gov>

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Centers for Medicare & Medicaid Services Programs and Resources

Melissa Scarborough, MPH, CHES
Office of Local Engagement and Administration, CMS Dallas
Centers for Medicare & Medicaid Services
Department of Health and Human Services



Medicare

■ Health insurance for people

- 65 and older
- Under 65 with certain disabilities
 - ALS (Amyotrophic Lateral Sclerosis, also called Lou Gehrig's disease) without a waiting period
- Any age with End-Stage Renal Disease (ESRD)

NOTE: To get Medicare you must be a U.S. citizen or lawfully present in the U.S. Must reside in the U.S for 5 continuous years.



CMS Product No. 10050

Your Medicare Options

Original Medicare

☒ **Part A**



☒ **Part B**



You can add:

☐ **Part D**



You can also add:

☐ **Supplemental coverage**



This includes Medicare Supplement Insurance (Medigap). Or, you can use coverage from a former employer or union, or Medicaid.

Medicare Advantage (also known as Part

☒ **Part A**



☒ **Part B**



Most plans include:

☒ **Part D**



☒ **Extra benefits**

Some plans also include:

☐ **Lower out-of-pocket costs**

NOTE: Medicare Supplement Insurance (Medigap) policies only work with Original Medicare.

Help for People with Limited Income and Resources

- Medicare Savings Program
 - Help from your state paying Medicare costs, including Medicare premiums, deductibles, coinsurance, and copayments
 - Extra Help
 - Help paying Part D prescription drug costs
 - Medicaid
 - Federal-state health insurance program
 - Children's Health Insurance Program (CHIP)
 - Covers uninsured children up to 19 and may cover pregnant women
- 95 □ If family's income is too high for Medicaid

Minimum Federal Eligibility Requirements for the Medicare Savings Program

Medicare Savings Program	Individual Monthly Income Limits	Married Couple Income Limits	Helps Pay Your
Qualified Medicare Beneficiary (QMB)	\$1,084	\$1,457	Part A and Part B premiums, and other cost-sharing (like deductibles, coinsurance, and copayments)
Specified Low-Income Medicare Beneficiary (SLMB)	\$1,296	\$1,744	Part B premiums only
Qualifying Individual (QI)	\$1,456	\$1,960	Part B premiums only
Qualifying Disabled & Working Individuals (QDWI)	\$4,339	\$5,833	Part A premiums only

Resource limits for QMB, SLMB, and QI are \$7,860 for an individual and \$11,800 for a married couple. Resource limits for QDWI are \$4,000 for an individual and \$6,000 for a married couple.

What is Extra Help?



Part D
Medicare
prescription
drug coverage

- Program to help people pay for Medicare prescription drug costs (Part D)
 - Also called the low-income subsidy (LIS)
- If you have the lowest income and resources
 - Pay no premiums or deductible, and small or no copayments
- If you have slightly higher income and resources
 - Pay reduced deductible and a little more out of pocket
- No coverage gap or late enrollment penalty if you qualify for Extra Help

Qualifying for Extra Help

■ You automatically qualify for Extra Help if you get

- Full Medicaid coverage
- Supplemental Security Income (SSI)
- Help from Medicaid paying your Medicare premiums (Medicare Savings Program; sometimes called “partial dual”)

■ All others must apply

- Online at socialsecurity.gov/benefits/medicare/prescriptionhelp
- Call Social Security at 1-800-772-1213; TTY: 1-800-325-0778
 - Ask for “Application for Help with Medicare Prescription Drug Plan Costs” (SSA-1020)
- Contact your State Medical Assistance (Medicaid) office
- Work with a local organization, like a State Health Insurance Assistance Program (SHIP)



Part D
Medicare
prescription
drug coverage

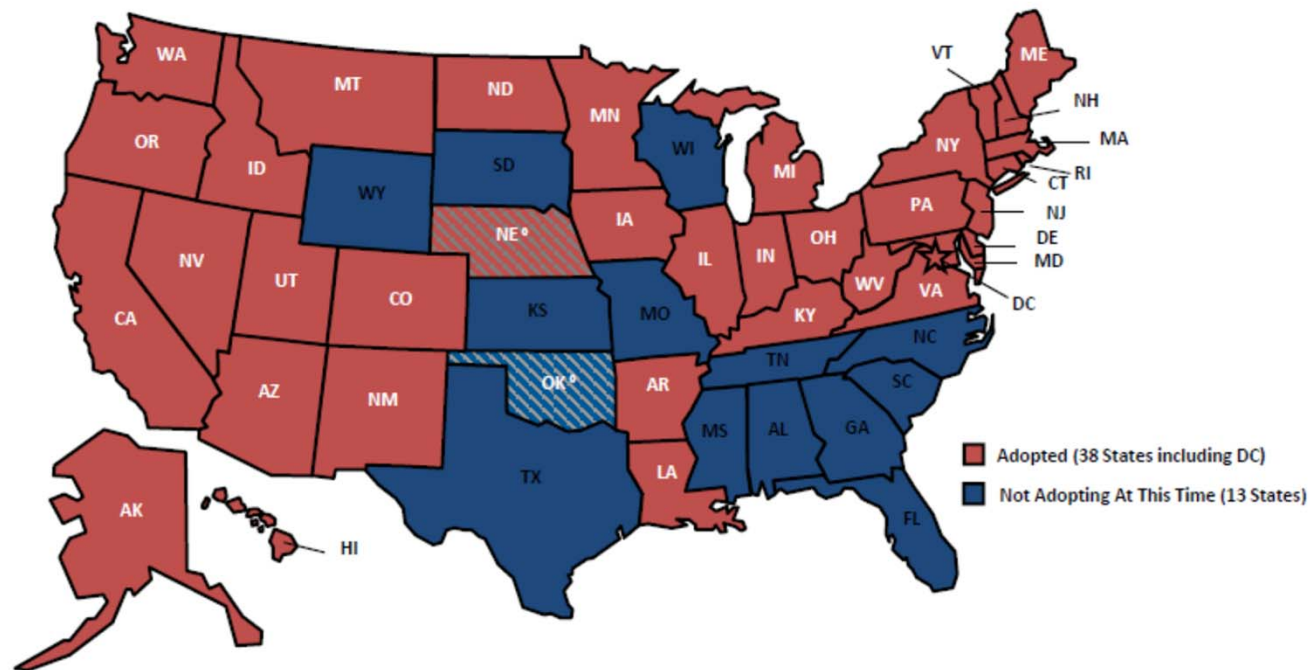
What's Medicaid?

- Joint federal and state program
- Helps pay health care costs for people with limited income and resources
- Some people qualify for Medicare and Medicaid
- May cover services that Medicare may not or may partially cover, like nursing home care, personal care, and home- and community-based services
- Early and Periodic Screening, Diagnostic, and Treatment (EPSDT): Children under 21 can get all medically necessary optional and mandatory services, regardless of whether the state covers them for other individuals.

Qualifying for Medicaid

- Eligibility tied to groups specified under the federal Medicaid law
 - Pregnant women
 - Children
 - People with disabilities
 - Seniors – 65 years and older
 - Low-income adults in expansion states
- States must cover certain groups, such as children and pregnant women, and have the option to cover other groups, such as childless adults
- Financial and non-financial requirements

Medicaid Expansion- 2020



NOTES: Current status for each state is based on KFF tracking and analysis of state activity. *Expansion is adopted but not yet implemented in NE and OK. (See link below for additional state-specific notes).

SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated July 1, 2020. <https://www.kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>

What is the Children's Health Insurance Program?

- Health coverage for uninsured children in families earning too much to qualify for Medicaid, but too little for private insurance
- Jointly funded by federal and state governments
- Administered by states
- 6.7 million children enrolled
- For CHIP information by state, visit [Medicaid.gov/chip/state-program-information/chip-state-program-information.html](https://www.Medicaid.gov/chip/state-program-information/chip-state-program-information.html)

How Health Insurance Marketplaces Work

- There's one process to determine eligibility for
 - Qualified health plans through the Marketplaces
 - Premium tax credits toward monthly premiums
 - Reduced cost sharing
 - Medicaid
 - Children's Health Insurance Program (CHIP)
- They offer choice of plans and levels of coverage
- To be eligible for Marketplace coverage, you must
 - Be a resident of a state served by the Marketplace, and
 - Be a U.S. citizen, U.S. national, or a non-citizen who's lawfully present in the U.S. (and expected to be for the entire time coverage is sought), and
 - Not be incarcerated (other than incarceration pending disposition of charges)
 - *Those eligible for Medicare do not qualify except in limited circumstances.*

Enrollment Assistance

- Help is available
 - Marketplace Call Center - 1-800-318-2596 (TTY: 1-855-889-4325)
 - Marketplace-approved in-person help
- Use the Find Local Help tool at [Localhelp.HealthCare.gov/](https://localhelp.healthcare.gov/)
- Language assistance is available through interpreters, Call Center support, print, and web resources
 - Help is available to complete application
 - Job aids in 33 languages at
 - Marketplace.CMS.gov/applications-and-forms/individuals-and-families-forms.html

From Coverage to Care (C2C)

- Roadmap to Better Care and a Healthier You
- 5 Ways to Make the Most of Your Coverage
- Manage Your Health Care Costs
- Videos
- Enrollment Toolkit
- Prevention Resources
- Partnership Toolkit
- Community Presentation

Website: go.cms.gov/c2c

Email: CoverageToCare@cms.hhs.gov



[CMS Equity Plan for Medicare](#)[From Coverage to Care](#)[C2C Consumer Resources](#)[COVID-19 Resources](#)[Prevention Resources](#)[5 Ways to Make the Most of Your Coverage](#)[Roadmap to Better Care](#)[C2C Partner Resources](#)[Get Involved](#)[Connected Care: The Chronic Care Management Resource](#)[Rural Health](#)[Advancing Health Equity R & D](#)[Health Observances](#)[Webinars & Events](#)[Health Equity Award](#)

COVID-19 Resources

From Coverage to Care (C2C) has released new resources on the 2019 Novel Coronavirus (COVID-19) and health coverage for you and your family. Click on the resources below for more information and share these with your family members, loved ones, patients, and communities.



[Coronavirus and Your Health Coverage: Get the Basics \(PDF\)](#)

Learn how to protect yourself and your family during COVID-19 with tips for staying healthy. This resource also has information about what health services are typically covered under Medicare and Marketplace plans and additional resources.

This resource is also available in [Spanish \(PDF\)](#).



[Stay Safe: Getting the Care You Need, at Home \(PDF\)](#)

Get tips for how to stay healthy during COVID-19 with information about scheduling health appointments from home and planning ahead for prescriptions.

This resource is also available in [Spanish \(PDF\)](#).

COVID-19 Resources

[For Health Care Professionals](#)

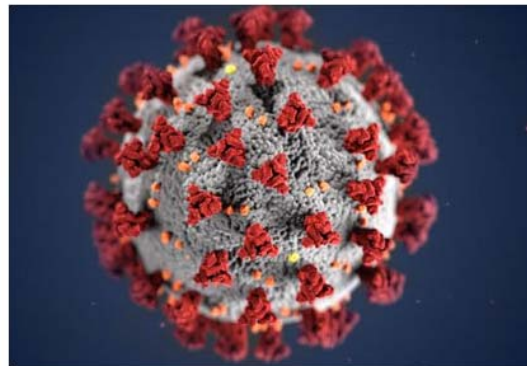
[For Consumers & Patients](#)

[Health Care Professionals & Researchers](#)

[Consumers & Community Partners](#)

[Resources by Language](#)

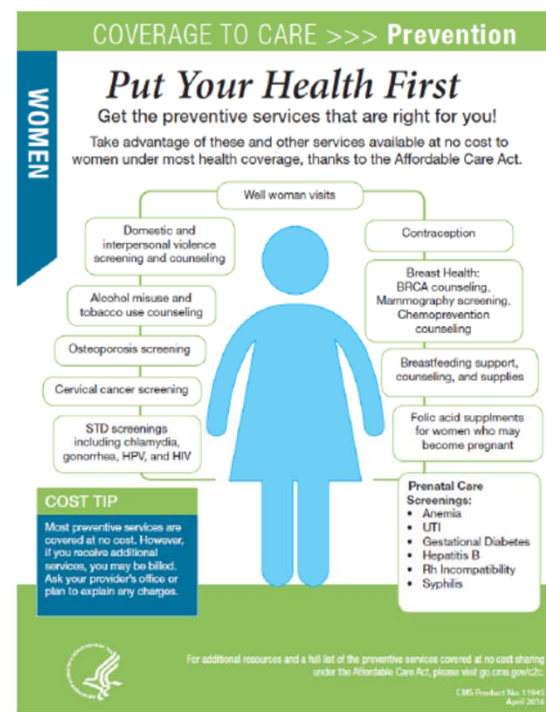
COVID-19 Resources on Vulnerable Populations



The Centers for Medicare & Medicaid Services Office of Minority Health (CMS OMH) has compiled the following Federal resources on the 2019 Novel Coronavirus (COVID-19) to assist our partners who work with those most vulnerable—such as older adults, those with underlying medical conditions, racial and ethnic minorities, rural communities, and people with disabilities. Please share these materials, bookmark the page, and check back often for the most up-to-date information.

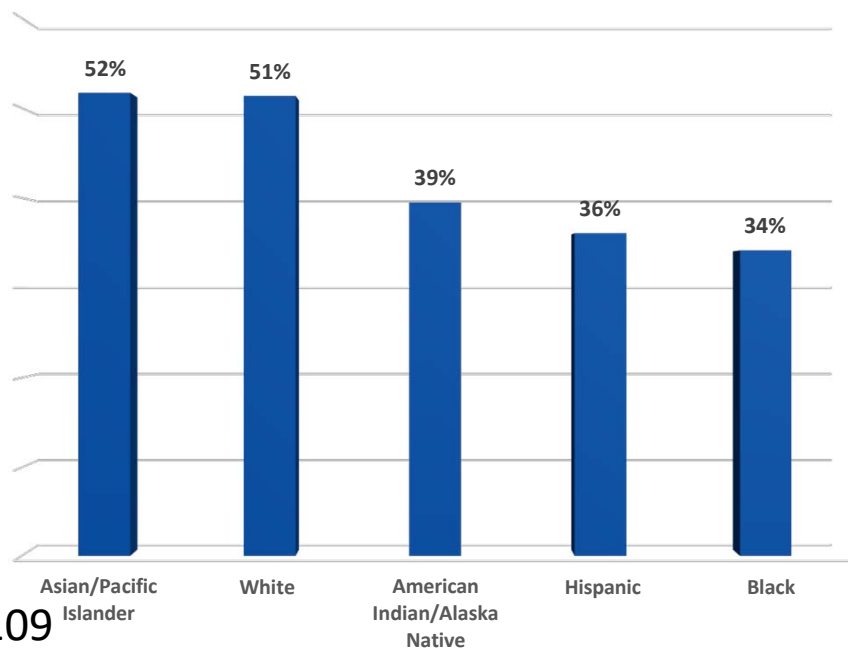
Preventive Services

Men, Women, Adults, Babies, Children, Teens



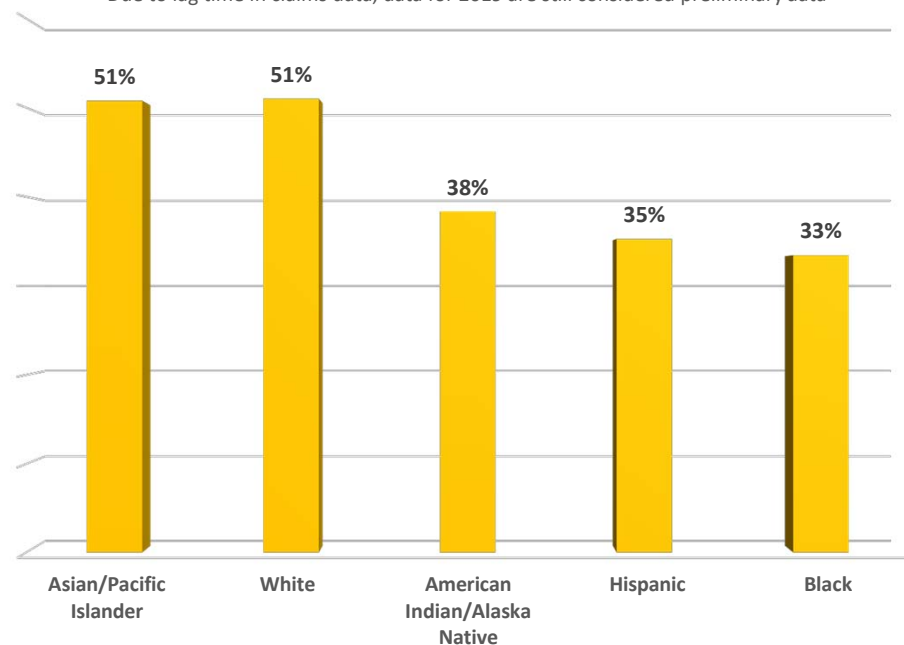
Influenza Virus Vaccine Rate Among Medicare FFS Beneficiaries by Race and Ethnicity, 2018 - 2019

2018



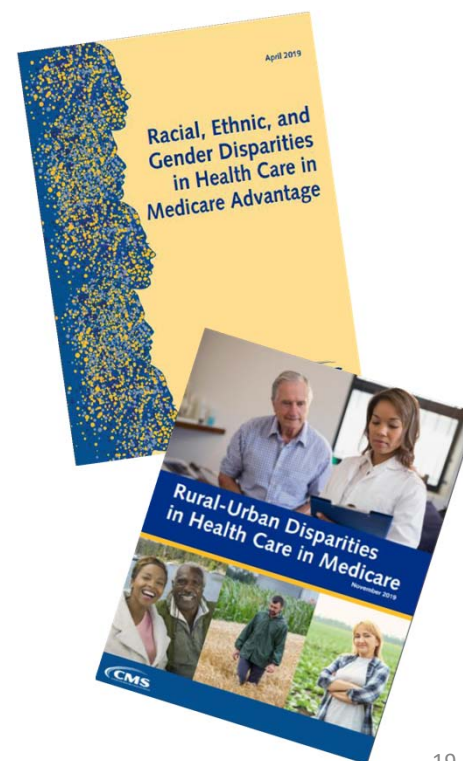
2019

Due to lag time in claims data, data for 2019 are still considered preliminary data



Racial, Ethnic, and Gender, and Rural-Urban Disparities in Medicare Advantage, 2019 Reports

- Asian and Pacific Islander beneficiaries received better care than White beneficiaries on 14 of the 33 measures of clinical care.
- Hispanic and Black beneficiaries received worse care than Whites on 13 and 14, respectively, of the 33 measures of clinical care.
- **Among both women and men, Black and Hispanic beneficiaries reported worse experiences than White beneficiaries with getting appointments and care quickly and had lower rates of vaccination for the flu.**
- With just one exception, both Medicare fee-for-service (FFS) and Medicare Advantage (MA) beneficiaries living in rural areas reported health care experiences that were similar to the experiences reported by FFS and MA beneficiaries living in urban areas.
- Patterns of racial and ethnic disparities in patient experience were largely similar for urban and rural residents except for API-White disparities among MA enrollees and Black-White disparities among Medicare FFS enrollees.



110

Source: <https://www.cms.gov/About-CMS/Agency-Information/OMH/research-and-data/statistics-and-data/stratified-reporting> and <https://www.cms.gov/About-CMS/Agency-Information/OMH/equity-initiatives/rural-health/reports-and-publications>

CMS Opioid Resources



[CMS.gov/about-cms/story-page/reducing-opioid-misuse.html](https://www.cms.gov/about-cms/story-page/reducing-opioid-misuse.html)

Helpful Websites

- Medicare – [Medicare.gov](https://www.medicare.gov)
- Medicaid – [Medicaid.gov](https://www.medicaid.gov)
- Social Security – [socialsecurity.gov](https://www.socialsecurity.gov)
- Health Insurance Marketplace® – [HealthCare.gov](https://www.healthcare.gov)
- Children's Health Insurance Program – [InsureKidsNow.gov](https://www.insurekidsnow.gov)
- CMS National Training Program – [CMSnationaltrainingprogram.cms.gov](https://www.cmsnationaltrainingprogram.cms.gov)
- State Health Insurance Program (SHIP) – [shiptacenter.org](https://www.shiptacenter.org)
- Office of Minority Health - [Coverage to Care](https://www.coverage-to-care.gov)
- Senior Medicare Patrol - <https://www.smpresource.org/>

Thank You!



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Centers for Medicare & Medicaid Services

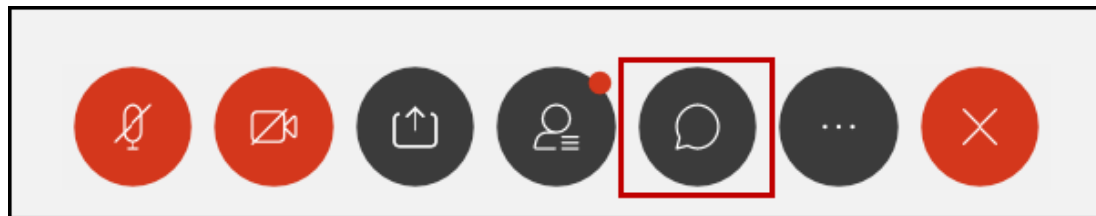
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