## Human Service Committee Testimony SB2138 – January 13, 2025 – Community of Care

Chairman Ruby and members of the Human Services Committee, my name is Myrna Hanson. I am the Executive Director of Community of Care, a nonprofit serving older adults in rural Cass County. Our primary demographic is individuals age 65+. Thank you for the opportunity to speak with you today. We also want to thank you for the funding we have received through the Department of Human Services budget. Those dollars, paired with a wide range of non-state funding, allow us to pursue our goal of enhancing the quality of life in rural Cass by assisting clients to remain in their rural Cass County homes as long and as safely as possible. In 2024, we received 62% of our funding from local fundraisers, donations and rural Cass county grants.

I would like to give you a brief overview of Community of Care and the services we provide. We began as a pilot project of the Good Samaritan Society in 2003. We serve all of rural Cass County, a 1,700 square mile area with 27 rural communities. A few of the communities include Arthur, Page, Casselton, Kindred, Harwood and Buffalo. Throughout our 21-year history, we have provided all of our services Free of Charge, regardless of a person's economic situation. The values which guide Community of Care are compassion, safety, treating older adults with dignity and respect, providing services free of charge, and that older adults have worth and wisdom.

Since we began in 2003, Community of Care has focused on the concept of "Aging in Place." In order to "age in place," individuals need access to medical care, adequate housing, transportation, a social support system and a supportive community. We believe those "Aging in Place" concepts are critical to Community of Care's programs. Throughout our history, we have continued to expand our programs and services based upon the needs of local residents in order for them to "Age in Place." The majority of older adults prefer to remain in the homes and communities they call home. Most of our clients have lived in their homes and communities for decades, if not their entire lifetime. They are important members of the local community as they shop locally, support local events and share their community knowledge.

In 2024, we served 688 individuals. A majority of these individuals received multiple services in multiple program areas.

We describe our program as a 4-legged stool:

- The One Stop Service Center is staffed by our Social Worker who provides information, referrals, care coordination, assistance securing in-home equipment & services, help with paperwork such as applications for fuel/food/prescription assistance & Medicaid, Advance Care Plans and Medicare Part D drug plan enrollment. Our Care Coordinator and a trained volunteer/retired pharmacist assisted 367 individuals review their Medicare Part D plans during open enrollment 2024. The average savings was \$313 per person. In 2023, our Care Coordinator and 2 trained volunteers assisted 370 individuals with an average savings of \$1,511 per person. Our Care Coordinator also coordinates socialization events, an important element in older adult's health. Our staff regularly assist adult children of aging parents with information, assistance securing in-home equipment or services.
- The Faith Community Nurse program is staffed by three part-time licensed RNs who have completed Faith Community Nurse certification. One serves in Northern Cass through our Arthur office, another in Casselton and the 3<sup>rd</sup> was added in the Kindred area in April of 2024. The Faith Community Nurses are licensed RNs who focuses on preventative care. They provide outreach visits to help older adults understand medical conditions, physician's orders and

medications. The Faith Community Nurses assess, educate and refer. They facilitate blood pressure screenings and assist clients complete Advance Care Plans. They work with Health Cabinets representing the local communities to identify needs and sponsor educational events. Faith Community Nurses also facilitate Bone Builder exercise classes in 7 locations. Each week, approximately 100 older adults gather twice a week to exercise. In the most recent survey, 80% of respondents reported the classes improve their mobility and 79% reported class participation improves their cognitive ability. One bone builder participant shared the following, *"Bone Builders keeps me feeling younger. Without Bone Builders I'd feel more stiff and unable to do the things I need to do to function at my optimum."* The Faith Community Nurses also coordinate pen pal/journal project and Fun With Tech between older adults and local middle and high school students.

The Volunteer Program is facilitated by a part-time Volunteer Coordinator. The most utilized aspect of the Volunteer Program is transportation to medical appointments. A ride to their medical appointment is often a critical element in older adults' ability to remain in their rural home. Without a ride their appointment, older adults would likely not receive the medial care they need or they would be forced to move from their rural home and community. In 2024, our volunteers drove 10,721 miles bringing clients to medical appointments. This included 184 rides and 478 hours of volunteer services. The round trip from Casselton is approximately 50 miles and from Page in the Northwest corner of the county is 100 miles. In our most recent client survey, 100% reported the ride to their medical appointment assists them to remain in their rural home. Volunteers provide a wide range of service. In 2024, a total of 328 individuals served in some capacity of our program. In total, volunteers provided 2,387 hours

of service. This includes the board of directors, transportation volunteers, school students with spring yard work, bone builder leaders, Medicare Part D volunteer, Wellness Screening & Health Fairs, pen pal project, fundraiser committees, health cabinets, local college students, etc.

- Support and Education are provided through presentations, website and our newsletter mailed twice a year to every box holder in rural Cass County. Each year we coordinate programming for the Casselton Business Association Senior Day. Our Faith Community Nurses coordinate annual Wellness Screening Fair in Casselton and Health Fair in Arthur.
- Clients come to Community of Care through a variety of ways. They become aware of our programs & services through presentations to local senior centers, our newsletter and community publications. We also receive large number of referrals from volunteers, community members, clients, churches, local pharmacy, local physical therapist, local bankers and families. It is also very common for an older adult to receive assistance in one area of programming and share with staff additional concerns. An example is our Faith Community Nurse provides an outreach visit to a client with health concerns. They learn the client needs a ride to their medical appointment & is having financial concerns. Our Volunteer Coordinator facilitates a ride to their medical appointment and Care Coordinator reviews their Medicare Part D and assists with paperwork for food & fuel applications. The older adult might also begin attending bone builder classes after the visit with our Faith Community Nurse. Adult children contacting us for assistance in caring for their aging parents continues to be an area of growth.

- Staff regularly work with many other agencies such as North Dakota Assistive, Alzheimer's
  Association, Essentia & Sanford Paramedic Programs to coordinate care for older adults in rural
  Cass County
- Our staff includes 7 employees. Two full-time and 5 part-time a 3.85 FTE

Our strategic plan includes additional Faith Community Nurse staff or hours to assist greater areas of Cass County, including the I-29 corridor and the western portion of the county. Currently, our Faith Community Nurses cover approximately 40% of Cass County. This addition not only requires staff time, but also additional rent, phone, internet, computers, etc. to operate another office. The Care Coordination, Volunteer Program and Support/Education cover the entire 1,700 square miles of Cass County.

Phyllis is an excellent example of how our four-legged stool keeps rural residents safe in their homes. Phyllis is 83 years old and lives alone in her rural Cass County home. She has a marvelous attitude, but has experienced numerous health concerns the past two years. Our Faith Community Nurse visits with her regularly to help her understand her condition and medications, which has prevented avoidable emergency medical assistance. Our Volunteer Coordinator has facilitated countless rides for Phyllis to attend medical appointments and weekly infusions, all provided by volunteer drivers who are doing their part to help Phyllis remain in her home. Our Volunteer Coordinator has also coordinated spring yard work provided by local school students. This allows students the opportunity to give back, but also gives Phyllis peace of mind and a yard she looks at with pride. Our Care Coordinator reviewed Phyllis's Medicare Part D drug plan and completed a fuel assistance form. Our staff work together to arrange for in-home equipment and supplies for Phyllis. Our holistic care approach meets a wide range of needs for our clients. If any of those pieces of Phyllis' plan were missing, she would face challenges to remain in her home.

Community of Care is a model for other communities to assist older adults remain in their rural homes. NDSU Extension received a grant to pilot our model in two other locations. For the past 3 ½ years, the Aging in Community Project have been assisting residents in Lisbon and Western Morton Counties. These programs are fully funded through the grant received. Community of Care has provided consulting services to assist these locations develop their programs. We believe our model has potential to benefit other locations and older adults throughout North Dakota. We are very willing to share our knowledge and experience.

Assisting older adults to remain in their homes as long as safely possible provides cost savings for individuals, their families and potentially the state of North Dakota. A significant percentage of our clients are renters without any equity and others own very modest homes in rural Cass County. If these older adults required a move to a long-term care facility, they would likely need to apply for Medicaid at the time of the move or very soon after.

I recently asked our Care Coordinator/Social Worker and Faith Community Nurses to identify the number of clients who in their professional opinion who would have required long-term care in 2024 without our services. Our staff identified 15 individuals they believe would require basic care at this time without the programs, services and referrals provided by Community of Care. The majority of these clients would require a Medicaid application within months of moving to basic care, which would be a significant cost to the state of North Dakota. Throughout our 21-year history, our programs and services have delayed a move to assisted living or long-term care for dozens of our clients. Currently, we are aware of at least 30 clients living in their homes on Medicaid, fuel assistance and snap benefits. These are the clients we have assisted, but we know adult children have assisted many other clients complete Medicaid applications. Many other clients qualify, but they are too proud to complete the Medicaid application. Without these benefits, clients would likely need to move to basic care at a long-term care facility on a significantly higher Medicaid rate.

According to the ND Department of Health and Human Services, the average cost of long-term care in North Dakota in 2025 is \$146,635 per year. After the average social security benefit and \$100/month personal care allowance, the average balance remaining is \$124,439 per year. With a move to longterm care, the assets of many of our client's would be depleted very quickly, resulting in the need for a Medicaid application.

As I shared, Community of Care has received funding through the Department of Human Services budget since 2009. We are grateful for those funds and have been able to serve hundreds of clients as a result. The amount we have received however has remained constant during those 15 years. According to Genworth financial, in 2009 the average cost of long-term care in North Dakota was \$56,940, as compared to the \$146,635 per year in 2025.

Community of Care is requesting an increase in our funding to more closely align with the cost of living increases over the past 15 years and the increase in the cost of long-term care in North Dakota. An increase in funding will allow Community of Care to serve a greater number of clients and greater needs to assist older adults remain in their homes as long as safely possible.

Thank you. I am happy to stand for questions.