

2027-2030 Area Plan Summary: Resource Allocation Plans

Scope of Local Need & Obstacles

ALTC's region is heavily rural and anchored in agriculture, yielding stark wealth disparities. These inequities systematically disrupt local access to nutrition, public transit, digital connectivity, and medical specialists. The primary minority population in our service area are people of Hispanic/Latino origins. Many older adults in this population have experienced health issues related to early years of strenuous physical labor, and health disparities. Many in this marginalized group do not have or never have had access to any consistent health care. Access to other services has been hampered by language barriers, inequity to access, and fear of governmental bureaucracies.

Planning Methodology

To craft policy recommendations across a vast Planning & Service Area (PSA), ALTC organized four multi-county online forums alongside dedicated public comment opportunities and stakeholder consultations. Baseline data extraction draws from the U.S. Census, American Community Survey, WA Office of Financial Management (OFM), and specialized entities such as the Dementia Action Collaborative.

The Regional Economic Barrier

OAA funding operates on weighted formulas driven by localized criteria, including total geographic square mileage and populations experiencing acute economic distress. The severity of the local landscape is highlighted by standard economic indices:

- **Poverty Realities:** Out of 39 Washington counties, Yakima exhibits the 6th-highest poverty rate (15.4%), with Asotin ranking 8th (14.9%) and Kittitas 9th (14.3%). Public land limits local property tax generation, intensifying competition for private donor dollars.
- **The Elder Index Benchmark:** The Elder Economic Security Standard Index demonstrates that the minimum income required for basic local survival outpaces average fixed incomes. For a single elder renting a one-bedroom apartment, monthly survival requires up to \$2,754 in Benton County, illustrating why conventional federal poverty thresholds miscalculate actual local needs.

PRIORITIZATION OF DISCRETIONARY FUNDS

The Older Americans Act aims to serve the most vulnerable older adults. ALTC first allocates funding to each county in its PSA based on a funding formula that includes a base amount and the following factors:

- Number of square miles
- Number of people aged 60 and over.
- Number of people aged 60 and over with greatest economic need.
- Number of racial and ethnic minority people aged 60 and over.
- Number of limited English-speaking people aged 60 and over.
- Number of people aged 60 and over, with difficulty performing activities of daily living.

- Number of people aged 60 and over living alone.

The allocation to each county is provided through the existing ALTC policy which protects a county's funding level so that it does not fall below a certain threshold. In recent years, service purchasing power has declined due to minimal funding, the impact of overall product price increases, and annual inflation. The demographics reflected in the Selected Population and Aging Service Utilization Forecast indicate that the number of adults 60+ years old in our PSA has increased from 2023 to 2026 by 5%. In addition, the intrastate funding formula has not changed to fully measure the impact of our PSA's large rural geography, health disparities of ethnic minorities, inequity to access of needed services, health care shortages, limited economies of scale and other factors that are not as common in urban areas.

ALTC looks at the utilization and the target population of each program and GetCare reports that include utilization and targeting percentages. We also receive demographic information on each county. ALTC reviews emerging issues impacting older adults and health care data including, falls data, and the number of individuals with dementia. ALTC Advisory Council quarterly meetings assist in informing our process for service priorities along with ALTC's Community Planning Forums where public input is considered.

Other factors considered by ALTC Administration when setting priorities include policy directions from the State and Federal governments. The governing board of the Council of Governments also offers input. This process includes review and analysis of evidence-based programs, Washington Association of Area Agency on Aging (W4A) white papers, Health Care Authority (HCA) and Department of Social and Health (DSHS) concept papers, innovations, and policy initiatives. These assist ALTC to remain relevant and consistent with the direction that health care is taking with the Affordable Care Act (ACA) and the role that is being etched out for Long Term Services and Supports (LTSS).

ALTC's discretionary funding would first be ADRC, followed by Senior Nutrition, which follows the vulnerability criteria established by OAA. Other priorities would vary by county depending upon area plan objectives that are informed by the AAA planning process, stakeholder input from community forums, and ALTC Advisory Council of each county.