

## **2014 National Title VI Training & Technical Assistance**

August 19, 2014

**Issue:** Increased funding in Title VI, Part A/B and C, NSIP and Title V grants. The population is growing and elders are living longer while Title VI funds are not keeping up.

**Issue:** Tribal Indirect Cost Rates on programs. The negotiated rates can cut grants anywhere from 25-30%.

**Issue:** More federally recognized tribes are applying and receiving Title VI funding without increased dollars in Title VI to fund these additional programs.

**Issue:** Hardship on programs due to sequestration.

**Issue:** increase in minimum wage and the effect on the program in respect to having adequate funds to pay staff. Minimum wage will also cause the price of groceries to go up.

**Issue:** Need for increased coordination with the states to include partnerships to receive Medicaid reimbursement for services provided under the Title VI program.

**Issue:** Recommendation for direct funding of Title III to the tribes and a for the age of eligibility for Title III services to be reduced to age 55.

**Issue:** There is a need for resources to address and advocate for elders, to investigate the reports of abuse and to follow up with services. Need for data and no mechanism systematic reporting and collection of that data.

**Issue:** More funding for elder abuse programs, data collection and mandatory reporting through HIS providers and law enforcement.

**Issue:** Need for prevention programs and victim assistance services for abused and neglected and at-risk elders and the need for long-term care ombudsman.

**Issue:** More training and technical assistance around the development of LTSS in Indian Country is needed.

**Issue:** Need for the Indian Health Care Improvement Act to receive appropriations to fund the newly authorized LTSS in the Act as well as funding for facilities on Tribal lands.

**Issue:** Need for benefit counselors and training around benefits.

**Issue:** Need for transportation for elders to and from services, to include healthcare.

**Issue:** High cost of providing services to seniors living in rural and frontier areas that directly limits access to those services.

**Issue:** Need for better coordination between Veteran's Administration and other programs. Vets are entitled to services they are not receiving.

**Issue:** More funding for screening and prevention.

**Issue:** Lack of appropriate dental care and the need for more funding to provide quality healthcare, to include dental.