

2009 Annual Report

of the

New Jersey

Casino Revenue Fund Advisory Commission

Recommendations for the
Casino Revenue Fund Programs

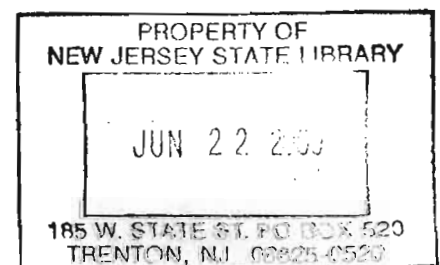
For Seniors and Citizens with Disabilities

For the State Fiscal Year 2010 Budget

Presented to

Richard Codey, Senate President
Joseph J. Roberts, Jr., Assembly Speaker
The New Jersey State Legislature

April, 2009



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NJ Casino Revenue Fund Advisory Commission
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New Jersey Casino Revenue Fund Advisory Commission Members

Misono I. Miller, Chair (representing the NJ Association of Area Agencies on Aging)

Kay Nest, Secretary, Public Member (representing senior citizens)

James Thebery, Vice Chair (representing the NJ Association of Co. Disability Services)

Senator Thomas H. Kean, Jr.

Assemblyman Nelson T. Albano

Assemblyman Vincent Polistina

Laura Ramos, Public Member (representing persons with disabilities)

Enid Torok, Public Member (representing persons with disabilities)

George Vassiliades, Public Member (representing senior citizens)

Joseph Tyrrell, (representing the NJ Association of Casinos)

Tracy Wozniak-Perriello, (representing the NJ Dept of Health and Senior Services)

David J. Rosen, Legislative Budget and Finance Officer (Office of Legislative Services)

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Brian Francz, Office of Management and Budget

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Introduction-

There are 1,443,782 persons age 60 and over in New Jersey (Census) and 1,113,136 persons age 65+. The fastest growing segments of the senior citizen population are the oldest most frail elderly (age85+), growing at a rate of 42.6% from the 1990 to the 2000 census with a 27.6% increase in the population age 75 and older during the same time. One in every four persons age 65+ lives alone. One in every three persons age 75+ lives alone. The increases in the total aging population age 60 and over, should also be considered in view of the aging of the baby boomer population.

According to the 2000 Census, there are 1.39 million disabled residents age five and over and there are 635,104 disabled persons in New Jersey aged 16-64 who have an employment disability. The nature of the programs supported by the Casino Revenue Funds is essential to both the disabled and elderly in ensuring that they have the support to live independently in the community

In fulfilling its mandate of providing recommendations to the Legislature on the programs funded by the Casino Revenue Funds, the Commission presents these recommendations to the Legislature for due consideration. The Commission has met on a bi-monthly basis to discuss the different programs and discuss various issues impacting the Casino Revenue Funds. In the Fall of 2008, the Commission conducted three statewide public hearings to receive comments from the public in regards to programs funded or able to be funded by the Casino Revenue Funds. The transcripts of these hearings as well as written testimony submitted by the public, are part of the public record and strongly substantiate the recommendations of this Commission in regards to the importance of programs that must be considered for additional Casino Revenue Funds on an ongoing basis.

The hearings consist of testimony from over 166 New Jersey residents deeply concerned about the decisions being made that affect essential programs. A summary of the hearings is included as part of this year's reports and is included as Exhibit II. In addition, transcripts of the hearings can be obtained by e-mail from the Dept of the Treasury (609-984-2407) and forwarded to any interested person.

Funding Recommendations

The attention of legislators is requested for these funding recommendations which are based upon the Commission's findings as a result of direct input from the public in hearings conducted by the Commission, an extensive survey to collect data on expenditures and program activities and production, meetings with Legislators and State officials, presentations to the Commission by Casino Revenue Fund program providers and administrators, and research conducted individually by Commission members in an effort to obtain accurate, updated, and detailed information in regards to the Casino Revenue Fund history, record of allocations, projections, and expenditure of funds.

The funding recommendations have been reduced from the 2007 recommendations to incorporate only programs currently receiving support from the Casino Revenue Funds and are as follows:

2009 Annual Report Recommendations of the Casino Revenue Fund Advisory Commission to increase the amount of funds available from casino revenues specifically for:	<i>Dollars in Millions</i>		
	Existing CRF	Additional Requested	Total Fund Requested
Meals on Wheels	1.0	3.0	4.0
Transportation	37.7	4.0	41.7
Safe Housing & Escorted Transportation	1.7	3.0	4.7
Adult Protective Services	1.0	2.0	3.0
Respite Program	5.4	2.0	7.4
Congregate Housing	2.0	1.0	3.0
Additional Funds from the Casino Revenue Fund in addition to the current allocation to be derived from a redistribution of Casino Revenue Fund Resources:		15.0	

The funding of these programs will correct serious inequities in the allocation of several programs that have not received funding increases nor cost of living increases from the Casino Revenue Funds for over a decade and are not equipped to meet the demand for services resulting from a growing elderly population.

Attachment 1, Page 4-A shows the funding history of the CRF specifically for programs that are recommended to be addressed. The history clearly shows evidence of the static nature of funds for the programs recommended for funding increases. Should the programs have grown even with the rate of the casino revenue fund growth, their allocation under the funds would have doubled from 1993. Unfortunately, records indicate that programs such as Meals on Wheels have not received a funding increase from the CRF since at least 1988!! The Safe Housing and Transportation Program actually received \$ 2.9 million in the State FY 1988, yet currently receives \$1.7 million from the CRF. The critical nature of the programs in assisting elderly and disabled to remain in their own homes and the nature of the programs including protective services, transportation, home care, and home repairs and respite care were major considerations of the Commission in making recommendations for funding increases.

FUNDING HISTORY OF SELECTED CASINO REVENUE FUND PROGRAMS
(1994 - 2009)

Expenditures

*numbers are in millions

	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1997	1996	1995	1994
Weekend Meals on Wheels	1.0	1.02	1.02	1.02	0.985	0.985	0.985	0.969	0.950	0.950	0.950	0.950	0.950			
Meals on Wheels		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Safe Housing & Transportation	1.7	1.7	1.7	1.7	1.7	1.7	1.7	1.7	1.7	1.6	1.6	2.0	2.0	2.5	2.8	2.8
Transportation	33.0	36.9	34.9	34.4	25.3	25.5	24.9	24.8	25.7	22.8	22.5	22.2	21.1	19.8	19.4	19.2
Adult Protective Services	1.7	1.84	1.84	1.84	1.78	1.78	1.78	1.75	1.72	1.72	1.72	1.72	1.72			
Congregate Housing Program	2.0	2.0	2.0	2.0	1.9	1.9	1.9	3.3	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
Respite	5.4	5.4	5.4	5.6	5.4	5.4	5.4	5.2	4.8	4.8	4.8	2.8	4.0	4.0	4.0	3.7
Lifeline	0	0	0	0	0	0	34.6	34.7	32.7	34.6	34.6	76.3	76.3	41.9	43.2	43.1
Property Tax	0	0	0	0	0	0	0	0	17.2	17.2	17.2	17.2	17.2	17.2	17.2	17.2

Revenues - Savings & Income

Casino Revenue Funds:	368.4	416.2	450.6	502.3	499.5	468.2	364.8	364.2	347.0	329.6	328.2	325.5	326.5	312.5	330.2	321.0
* Lifeline: Savings	+34.6	+34.6	+34.6	+34.6	+34.6	+34.6										
** Property Tax Deduction: Savings	+17.2	+17.2	+17.2	+17.2	+17.2	+17.2	+17.2	+17.2								

* +34.6 million in 2004 - Lifeline Transferred to Board of Public Utilities

** +17.2 million in 2002 - Property Tax Deduction Transferred to Property Tax Relief Fund

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The Programs-

Meals on Wheels – The Meals on Wheels Programs in New Jersey provide nutritional, hot meals to senior citizens on a daily basis. The program is known for the essential services provided at a minimal cost averaging \$8.97 a day (2005 Mission Nutrition Report) including all costs for food, staff, operations, and delivery. This component of long term care is essential in that it ensures that the most frail, vulnerable senior citizens, i.e., those that are homebound and are not able to prepare their own meals, have the benefit of having a hot, nutritious meal everyday.

Statewide, the 43 home delivered nutrition projects serve 13,938 meals daily or 3.5 million meals in one year. The cost of the program per day is very low compared to the cost of other in-home alternatives and for the benefits achieved. The program not only ensures that the clients have enough food to sustain themselves in their homes, but also ensures that they will be visited at least once per day by the person delivering the meal, who also therefore serves to reduce isolation and to check on the safety of the homebound elderly.

\$3 million in additional funds is recommended for this program to attempt to meet the increasing demand by elderly and disabled. Additional funding in the amount of \$3 million would result in the support of 333,333 more meals per year for elderly and disabled homebound residents of this State.

A. A portion of those funds, at least \$1 million should be allocated for ensuring that disabled homebound persons have access to Meals on Wheels. There is no other permanent source of funds for this purpose. Some Counties serve the disabled with other funding sources, because the need is obvious and local funds have been found. The disabled homebound also need to be served by a stable source of funds and the CRF can provide this.

B. An additional \$2 million would serve to provide needed resources for the Meals on Wheels Programs statewide to utilize in their weekday and weekend meals. The State CRF provides no other funding besides \$1 million a year for the support of the *Weekend* Meals on Wheels Programs only. This is not enough; the lack of any increases in these funds from the CRF for the past 20 years has prevented thousands from obtaining needed home delivered meal services. The Meals on Wheels programs need funding assistance for both its weekday and weekend meals components and additional support provided as recommended would reap tremendous benefit to the elderly and disabled in the ability of the local Meals on Wheels programs to serve them.

Yes, waiting lists are a sad reality for Meals on Wheels as is the reality that Counties who have allocated funds from their own coffers to prevent such lists, may no longer be able to make up for the lack of increases in the State and Federal funding sources for Meals on Wheels. Counties are contributing much more funds to the Meals on Wheels Programs than the State contributes. The additional \$3 million will not match nor come close to the amount of funds from local resources that support Meals on Wheels; however it will be a beginning and an important step in having the State assume a greater portion of the support of this essential program and having the State assist in one of the most cost

effective and basic programs that address assisting senior citizens and hopefully more disabled residents of the State to live independently in their own homes.

Transportation - NJ Transit currently receives 7.5% of the Casino Revenue Fund annually, which is distributed to the Counties on a formula basis. This funding has been successful in developing and supporting a network of coordinated, paratransit services for elderly and disabled in each of the 21 Counties in New Jersey. According to NJ Transit, approximately 4 million rides per year are provided through these County-wide systems, with 1.6 million of those rides provided by funding from the CRF. An increase in funding for transportation services is needed and the need for such funding is at a crucial point considering the following factors:

1. Counties are pressed to maintain these County-wide systems of transportation, with increasing costs of fuel, insurance, staff and staff benefits, and maintenance and upkeep of vehicle fleets.
2. The increasing senior and disabled population in New Jersey is an important factor. In the last Census decade, the highest increase in the senior citizen population was in the 85+ population, which increased by 42% in the last census decade. The nature of the transportation services are geared to help those who are too frail to drive themselves, as well as those whose increasing age limits their desire or ability to drive themselves. These are the oldest elderly, for which the increase in population is the largest component of the elderly population increase. There is therefore an increase in the general demand for this service that must be met.
3. Another factor is the increased demand for kidney dialysis transport that Counties are striving to meet. This type of transport is essential and life sustaining and a priority in service for many of the Counties; however, it is a service that must be provided on a regular basis, at least three days a week, often to persons in wheelchairs and very frail. The resources to provide such transport on a daily basis is costly and an increasing burden to the Counties. As more dialysis centers are planned in New Jersey, the transportation needs of dialysis patients cannot be met by transportation programs, whose resources are being reduced.
4. The allocation of funds from the Casino Revenue Funds were decreased in the year 2009. The schedule of county funding reductions has been provided by NJ Transit for both fiscal years 2009 and 2010 and is included on page 9. The Commission has recommended a 1% increase to 8.5%, in the percentage of funds for transportation from the CRF. This would provide for a modest increase of transportation funds in each County and would represent a fair % of funds considering the benefits reaped from the 21 County transportation systems. Counties are pressed to deal with these funding reductions, which range from \$ 60,000.00 to \$300,000.00 in the larger counties for fiscal year 2009 alone. Unless Counties are able to make up for these deficits in their operating budgets, service cutbacks are inevitable, waiting lists and longer waiting lists are a possibility, and certainly more senior and disabled riders will be refused for trips because of lack of driving staff or vehicles to transport them. Systems will be forced to reduce services to those now served either in scope of service or in refusal of services to those in need.

**Senior Citizen and Disabled Resident Transportation Assistance Program (SCDRTAP)
FY'2008-2010 Funding Levels in New Jersey**

	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>DECREASE IN 1 YEAR 2008-2009</u>	<u>DECREASE IN 2 YEARS 2008-2010</u>
ATLANTIC	\$967,700.00	\$864,411.00	\$791,500.00	\$103,289.00	\$176,200.00
BERGEN	\$2,805,060.00	\$2,509,038.00	\$2,297,405.00	\$296,022.00	\$507,655.00
BURLINGTON	\$1,512,844.00	\$1,349,941.00	\$1,236,076.00	\$162,903.00	\$276,768.00
CAMDEN	\$1,776,243.00	\$1,585,690.00	\$1,451,940.00	\$190,553.00	\$324,303.00
CAPE MAY	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
CUMBERLAND	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
ESSEX	\$2,702,149.00	\$2,410,809.00	\$2,207,462.00	\$291,340.00	\$494,687.00
GLOUCESTER	\$841,283.00	\$752,150.00	\$688,708.00	\$89,133.00	\$152,575.00
HUDSON	\$1,992,966.00	\$1,779,340.00	\$1,629,256.00	\$213,626.00	\$363,710.00
HUNTERDON	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
MERCER	\$1,233,669.00	\$1,100,160.00	\$1,007,364.00	\$133,509.00	\$226,305.00
MIDDLESEX	\$2,591,703.00	\$2,312,581.00	\$2,117,519.00	\$279,122.00	\$474,184.00
MONMOUTH	\$2,171,828.00	\$1,939,312.00	\$1,775,735.00	\$232,516.00	\$396,093.00
MORRIS	\$1,597,662.00	\$1,425,717.00	\$1,305,461.00	\$171,945.00	\$292,201.00
OCEAN	\$2,805,060.00	\$2,509,038.00	\$2,297,405.00	\$296,022.00	\$507,655.00
PASSAIC	\$1,669,708.00	\$1,490,267.00	\$1,364,566.00	\$179,441.00	\$305,142.00
SALEM	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
SOMERSET	\$957,068.00	\$853,185.00	\$781,221.00	\$103,883.00	\$175,847.00
SUSSEX	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
UNION	\$1,997,201.00	\$1,782,147.00	\$1,631,826.00	\$215,054.00	\$365,375.00
WARREN	\$627,776.00	\$566,919.00	\$519,101.00	\$60,857.00	\$108,675.00
TOTAL STATE	\$31,388,800.00	\$28,065,300.00	\$25,698,050.00	\$3,323,500.00	\$5,690,750.00

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Strong endorsement of A2046, S1830

The Commission stresses the importance of, and strongly supports Assembly Bill A2046, S1830 which addresses an issue that must be considered now. A2046, S1830 would increase the % of funds for transportation from the CRF from 7.5% to 8.5% of the total revenues. Counties lost \$3.9 million in their 2009 operating year resulting in losses as high as \$290,000 + in Essex and Bergen Counties and losses in 11 Counties in New Jersey of an average of \$230,000 in operating costs for 2009. The legislation, if approved would prevent *further reductions in funding and service projected for 2010* and would assist Counties in minimizing the reduction in their services to seniors and disabled as a result of the additional reduction they will face in 2010 and 2011 without this legislation. The legislation is timely as well as crucial. (See Exhibit III, A2046). Public comments at the Commission hearings stressed the importance of A2046 and S1830 and its critical role in ensuring that transportation services are not severely disrupted as a result of the anticipated major reductions in funding experienced in both 2009 and 2010, without the passage of this legislation.

In these times of economic hardship for the population across the State, efforts have been initiated and passed by the Legislature and the Governor to ensure that additional funding of the needs of the most vulnerable do not get overlooked. Seniors and disabled are among those most vulnerable because of their limited means of income and ability to maneuver in the community. This passage of A2046, S1830 would also recognize the importance of transportation services in assisting users in their participation in programs that provide food and support services as well as enable their participation as consumers able to buy the goods and services that lend to economic recovery.

In the words of the Commission's former Chairman Donald Boeri, "Transportation for seniors and disabled is so desperate that the need must be met! We cannot ignore the inability of those most vulnerable to provide their own transportation. Shall we wait for the crisis to escalate beyond repair until we act? The cost to redeem a 'broken' system is by far too expensive to even consider. Good planning of existing conditions rewards the community with an envious result!"

Safe Housing and Transportation- Funds for Safe Housing and Transportation, primarily for home repairs and escorted transportation are essential and unique in New Jersey, providing a stable source of funds for services not elsewhere funded. Unfortunately, funding received to support this program are very limited and the current allocation of \$1.7 million for Safe Housing and Transportation is not sufficient and should be increased. It is noted that twenty years ago, the CRF allocated \$2.9 million to Safe Housing and Transportation. Noting its essential nature and uniqueness in being a service not otherwise provided in the State, it is astounding that this program has lessened in funds as the senior population and the CRF have increased significantly.

Since the Safe Housing Program is the only source of dedicated funding for the provision of home repairs related to safe housing and escort programs for senior citizens, the continued lack of increases has prohibited meeting the increased demand by senior citizen homeowners, and has also prohibited counties from providing needed varied home repair services that would require a minimal amount of resources to sustain a program providing multiple repairs.

Many Counties have established programs with the administrative and project operational activities and controls in place. The funds would be used to enable these programs to serve more persons and make it worthwhile for Counties with very small allotments, to establish more comprehensive programs. For example, the practical aspects of organizing a home repair program for 10-15 persons, leaves much to be desired in terms of benefits received for the energies taken to organize and maintain the program. More funding would address this problem and would assist in meeting the demand for a program that has historically had huge waiting lists. This program currently serves seniors only. There are seniors who have difficulty using any kind of transportation and this particular assertive escort service provides the physical means to use transportation. Additional funds should be considered to open the Safe Housing and Transportation Program to the disabled.

The building of ramps for seniors is one essential activity that is able to be funded by the Safe Housing Program. At the Commission hearings, several advocates for the disabled commented on the lack of funds for building ramps to enable a person to leave their homes to access services and programs, including day care, vocational rehabilitation, doctors' offices, hospital facilities, banks, senior centers, etc. The program must be opened for use and services to disabled as well as senior citizens. Additional funding of \$1 million is recommended to address this critical need, increasing the total program funding increase to \$3 million. Last year, it was estimated that the \$2 million increase would serve seniors only. The commission is recommending that the program open its doors to persons with disabilities and receive an additional \$3 million in total.

Adult Protective Services- The Commission recommends an increase of \$2 million for the Adult Protective Services Program. This increase is recommended with consideration of the following factors:

1. Abuse, neglect and exploitation of vulnerable adults residing in the community is on the rise. In the last decade, the number of investigations has grown from 3762 to 4787, representing a 27% increase. Not only is the number of cases increasing, but they are also becoming more complex with a growing number of financial exploitation and guardianship cases. The upward trend of guardianship cases is directly related to the growth in population of individuals 80 years of age or older residing alone.
2. The APS budget has remained at its current level of \$4.1 million dollars since 2000. This is putting a severe financial strain on the county APS provider agencies. There are 13 county APS providers that are Boards of Social Services (BOSS). Presently 3 County Boards are considering no longer providing APS. A position paper has been presented to the Division by the County Welfare Directors' Association focusing on APS referrals and showing a "change in activity of over 112%" from 1992 to 2003, the severe funding shortage and requesting an "immediate commitment to adequately fund and support APS statewide". The position paper goes on to say "during the same period, State funding for APS remained basically unchanged with only a modest 17% increase in 2001. During the same period, the actual cost-of-living increased by over 35%. The inadequate state funds that were

available in 1992 have not only failed to keep up with the cost of doing business but also failed to increase in proportion to the increased demand for services". The position paper is attached as Exhibit III.

3. As an example the State of Massachusetts, though not geographically similar, is almost identical demographically. Unlike New Jersey where APS serves adults from the age of 18, their APS program serves only those individuals 60 years of age and older who reside in the community. In 2004 Massachusetts completed approximately 7000 investigations but substantiated less than half compared with New Jersey which investigated approximately 5000 cases and substantiated 60% giving both states similar open caseloads. Massachusetts APS budget is \$13.6 million dollars this year up from \$11.4 million dollars last year.
4. APS is not a program where a waiting list is acceptable or legal. By statute APS must respond to a referral of abuse, neglect or exploitation within 72 hours and continue intervention until the client is no longer at risk. The county provider agencies are questioning their ability to continue to respond to a crisis within those parameters.

The Commission emphasizes the need for the legislature to approve additional funding for the Adult Protective Services Programs and includes this as a priority recommendation to ensure that the needs of the most vulnerable and frail elderly in New Jersey are not overlooked. A schedule of funding increases to the Counties' APS programs has been prepared by the NJ Department of Health and Senior Services and shows modest increases that would result from additional funding assistance of \$2 million. (See next page)

The critical nature of the lack of funding increases for the Adult Protective Services Program and its impact and potential damage to the existing system in place for responding to the needs of abused and neglected elderly was stressed by several major providers of APS services. Lack of action to obtain additional funds will result in an accident waiting to happen and an appearance of apathy from Legislators and the Administration in view of the pleas for action from those who are on the front lines in the provision of adult protective services. Programs for the most vulnerable elderly and disabled, including lack of sufficient resources for the Public Guardian's office was also stressed to the Commission and should be further investigated and acted upon. See exhibit IV for testimony from the State Association of County Welfare Directors in New Jersey. Programs for the most vulnerable elderly and disabled, including lack of sufficient resources for the Public Guardian's office was also brought before the Commission and should be further investigated and acted upon

The Congregate Housing Program – The Commission recommends a \$3 million funding level for the State Congregate Housing Program. The Congregate Housing Program depends primarily upon the CRF for its support and is funded for \$ 2.0 million from the Casino Revenue Funds, receiving approximately this level of funding since at least 1997. The funding levels from the CRF have remained static since as early as FY1988, when the Congregate Program received \$1.7 million, and \$1.6 million for FYs 1989 and 1990.

ATLANTIC	72,474
BERGEN	188,964
BURLINGTON	69,996
CAMDEN	122,695
CAPE MAY	31,236
CUMBERLAND	48,654
ESSEX	255,360
GLOUCESTER	49,861
HUDSON	216,887
HUNTERDON	14,534
MERCER	82,128
MIDDLESEX	145,845
MONMOUTH	125,637
MORRIS	74,173
OCEAN	145,310
PASSAIC	128,890
SALEM	15,072
SOMERSET	43,219
SUSSEX	19,183
UNION	128,803
WARREN	21,079
	2,000,000

ALLOCATION of \$2,000,000 FOR ADULT PROTECTIVE SERVICES

These funds would be used for additional Adult Protective Services (APS) social work staff. By statute APS must respond to a referral within 3 working days. As caseloads have increased and cases, especially guardianships, have become more complicated, APS is in danger of not being able to respond within the parameters set forth in the statute. Additional certified staff would help alleviate the problem and the vulnerable adults of New Jersey would continue to be kept safe, in their homes with a safety net of services.

If the time comes, when APS cannot intervene and advocate for those adults that cannot advocate for themselves, the results would be disastrous.

The Congregate Housing Program has a long standing history of service provision in the State of New Jersey. The program is administered by the Dept of Health and Senior Services and is offered through public housing facilities serving low-income senior citizens. Services provided to housing residents support their ability to remain independent, and include home care, laundry services, housekeeping, and meals served in a congregate setting. This fits perfectly with the Governor's Plan to rebalance long term care in favor of community based services and delaying the likelihood of needing costlier nursing home or institutional care.

According to State Division on Aging staff who administer the program, there is a waiting list of housing sponsors who wish to participate in the program and could offer the services to more persons. Currently the program is offered in only 12 of the 83 Housing Authorities in New Jersey and is not offered at all in 4 of the 21 Counties, being Warren, Hunterdon, Ocean, and Burlington. Currently the program serves 2700 tenants in approximately 60 subsidized independent senior housing buildings.

The program's growth and assistance to more seniors would be assured with the addition of more funds for services. The average cost of providing Congregate services for a year per client is **\$1000 per client per year!** The cost savings is obvious in the long run, extending the ability of elderly and disabled to maintain their own households as opposed to being placed in costlier alternatives such as assisted living or nursing home care at a cost of 50 times or more per client! \$1000 per client per year should be compared to the cost of Medicaid provided home care at up to \$34,000 per year and to Assisted Living at \$34,000 per year and nursing home care at \$69,000 per year.

Providers and clients of the Congregate Housing Program are the most enthusiastic supporters and confirmers of the benefits to the State in additional funding for the program. Many statements from this source, which express the heartfelt testimony of those who understand the program's efficiency, benefits, and necessity in keeping elders and disabled aging in place in their homes, are included in the transcripts and summary of the Commission hearings.

State Respite Program- The Commission recommends an additional \$2 million for the Statewide Respite Program. The Statewide Respite Program provides services to caregivers of those who are elderly and infirm and living in their own homes. A National Study conducted by the National Family Caregiver Association and Family Caregiver Alliance estimates that there are 862,502 caregivers in New Jersey contributing an average of 921 million hours of care to their family member or friend, for an estimated value of \$9.2 billion of service.

The Statewide respite program enables caregivers to have a respite from the rigors of daily care for another family member. The program arranges for home care, housekeeping services, bathing assistance and personal care, sitting services, and temporary institutional placement for caregivers who have entrusted themselves with the care of a family member. Having such a program enables the caregiver to have some time for themselves, (perhaps to get out of the house, perhaps to take a needed vacation, perhaps to free up time to pursue their own business or a hobby) and enables them to be strengthened and empowered to maintain care for their elderly loved one.

Considering the estimates of numbers of caregivers, the Statewide respite program could expand services to more persons and serve many persons on the waiting lists in the various counties. In addition, consideration to improving and increasing the current limits on care provided through the respite program could be made. Currently, caregivers are limited to no more assistance than \$4500 of services per year. In certain circumstances this may not be sufficient and on an ongoing basis, more services might be considered for the caregiver to have more time for respite.

In Fiscal Year 2009, the federal assistance for Respite from the Older Americans Act decreased, when it too should be increasing to meet the demand for respite from families who have decided to accept the responsibility for the care of their loved one. The CRF has not increased the allocation for the Statewide Respite Program since 2002, with a funding level of \$5.2 million. From State FY1999 the CRF allocation for Respite was only \$4.8 million. With the increasing recognition of the value of Respite as an alternative to having family members placed sooner, in a costlier institutional setting, and enabling the family and the elderly client to have services that assist in care at home, the Commission recommends additional funds for the Statewide Respite Program.

Cost-of Living Increases for Essential Programs

A general recommendation is made that these programs, with the exception of Transportation (which is uniquely tied to the gross revenues of the CRF), should receive at least cost of living increases annually. The Commission states that these mentioned programs are recognized for their efficiency, cost effectiveness, and need by the elderly and disabled to assist in their efforts to maintain their independence at home.

Unfortunately, these programs have suffered from lack of funding increases through the years. Such lack of increases have served to have negative impacts upon the programs. Instead of growth, the programs have diminished since level funding that is not sufficient to meet even cost of living increases for staff, results in decreases in what each program can accomplish on a yearly basis. This diminishing of resources has resulted in crisis situations and decisions by public agencies to forego sponsorship (of APS, for example,) of unnecessarily large waiting lists for service, and programs that do not have the necessary resources to maintain services without reducing the nature of the service or numbers to be assisted.

Cost of living increases are not enough to make up for years of underfunding by the CRF; thus, the recommendations for additional funding have been made. However, increases in the cost of living should be integrated in every program that depends upon funding from the CRF so that needed expansion or maintenance of services can be effected with the growing Casino business and resultant revenues through the years.

A Redistribution, not a Request for Additional State funds.

Savings Experienced by the PAAD Program- The Commission makes the recommendation that additional funds for the most critical and underfunded programs should be reallocated from the savings in the CRF generated from the onset of the

Medicare D drug benefit program that has assumed the expense of a major portion of what formerly was paid by the Casino Revenue Fund. The implementation of Medicare as a national provider of assistance in the costs of prescription drugs has provided the State of New Jersey with a unique opportunity to report savings of \$90 million in 2005 and over \$180 million for the 2006, 2007, and 2008 year for the Pharmaceutical Assistance for the Aged and Disabled Program. The New Jersey Department of Health and Senior Services has very successfully tackled the immense challenge of coordinating the PAAD with the 2006 Medicare D program with minimal negative effects upon the clients and maximum retrieval of costs for PAAD from the Medicare D payment of benefits of PAAD eligible clients.

A **PAAD Expended Funding History** (below) shows the history of the expenditures of the PAAD Program detailing the CRF portion of funds as well as the contribution from the General Funds. It is noted that the General Revenue Portion of the PAAD program was \$167.8 million in 2003 and \$259.8 million from the CRF, for a record expense for the PAAD of \$427.6 million.

PAAD EXPENDED FUNDING HISTORY

	PAA General Fund	PAAD General Fund	PAAD Casino	TOTAL	GF support	CRF Support of PAAD
1996	\$42,801,626	\$0	\$134,961,118	\$177,762,744	24%	75.92%
1997	\$35,802,930	\$0	\$148,514,975	\$184,317,905	19%	80.58%
1998	\$34,141,623	\$0	\$170,510,670	\$204,652,293	17%	83.32%
1999	\$33,119,061	\$48,935,000	\$154,689,153	\$236,743,214	35%	65.34%
2000	\$34,783,000	\$0	\$247,331,858	\$282,114,858	12%	87.67%
2001	\$33,982,224	\$49,500,000	\$231,706,887	\$315,189,111	26%	73.51%
2002	\$34,641,795	\$71,543,222	\$257,916,319	\$364,101,336	29%	70.84%
2003	\$33,580,622	\$134,274,778	\$259,825,386	\$427,680,786	39%	60.75%
2004	\$32,527,859	\$128,884,000	\$254,646,953	\$416,058,812	39%	61.20%
2005	\$22,604,189	\$48,581,884	\$309,005,018	\$380,191,091	19%	81.28%
2006	\$23,556,032	\$21,568,000	\$278,200,097	\$323,324,129	14%	86.04%
2007	\$5,539,403	\$0	\$205,265,000	\$210,804,403	3%	97.37%
2008	\$6,408,000	\$0	\$220,100,000	\$226,508,000	3%	97.17%
2009*	\$6,403,000	\$77,700,000	\$158,500,000	\$242,603,000	35%	65.33%
total	\$379,891,364	\$580,986,884	\$3,031,173,434	\$3,992,051,682	24%	75.93%

* Preliminary Actual Expenditures

The General Revenue Fund portion of the PAAD program saw an immense benefit in terms of savings in Fiscal Years 2005 through 2008. In 2007 and 2008 the General Revenue portion of support for PAAD constituted only 3% of the PAAD total expenditures at \$5.5 and \$ 6.4 million, respectively! The CRF in those same years

contributed \$205 million in 2007 and \$220 million in 2008. In FY 2009, \$83 million is supported by the general revenue funds and \$158.5 million by the CRF. The State general revenue portion of PAAD in FY 2009 is \$84 million less than the amount of general revenue support required for PAAD in FY 2003 and in most subsequent years has diminished significantly in comparison to the CRF support of the PAAD program.

In addition, the recent PAAD increases in the co-payments and non-coverage of diabetic supplies generated an additional yearly savings of \$11 million to the State.

The significant savings to PAAD realized through the subsidy of prescriptions from the Medicare D program as well as increases in costs from PAAD clients, could have generated not only savings for the general fund, but also expanded program benefits for the senior and disabled population if the CRF funds saved, were allocated to support underfunded essential senior and disabled programs.

The Department of Health and Senior Services (DHSS) as the administering agency for most of these programs recommended for funding increases, has some responsibility for their successful development and ability to provide needed assistance. Hopefully, the DHSS will view the extensive PAAD savings as an opportunity to address other critical needs of the elderly and disabled that are served under the other important programs of the Department that receive CRF funds. There is a need for additional funds for these other DHSS programs that are underfunded and require more resources to provide adequate services and assist the elderly and disabled in maintaining their independence at home, thus reducing the State's burden of shouldering nursing home costs by preventing or delaying the deterioration resulting from isolation and lack of community support services.

Savings to the General Fund from the Casino Revenue Fund additional allocations and other CRF supported program savings

In a review of the annual budgets of the Casino Revenue Funds, it is noted that programs such as the Medicaid Personal Care Program were increased in support from the CRF from "zero" in FY 2003 to \$ 77million in FY2004. An additional \$ 41.4 million in CRF funds was allocated to Medicaid Waiver programs in that same year. The State General Revenue Fund portion of support decreased by the approximately the same amount that the additional CRF contributed in the year in which the largest increase in revenues was experienced by the CRF, being Fiscal Year 2004. Because of the close relationship and the general practice of shifting funds from the CRF to the General Funds and vice versa, although it is not the function of the CRF Advisory Commission to report on recommendations on the General Funds, this can not be considered unrelated and irrelevant to any recommendations by this Commission. In fact, in view of the importance of all programs funded by the CRF, making a recommendation on any program to receive reduced funding is made by the Commission with a strong recommendation that the existing essential programs supported by the CRF be maintained by an increase in support from other funds, including the General Funds.

Commission recommendations have been endorsed by major state agencies and associations, including the NJ Commission on Aging, the Council on Special

Transportation (COST), the State Association of Welfare Directors, the NJ Association of Area Agencies on Aging, the NJ Association of County Disability Services, NJ Association of the Blind, United Senior Alliance/Elder Rights Coalition, Alliance for Disabled in Action, Alliance for Betterment of Citizens who are Disabled (ABCD), and the Citizens Advisory Committee of New Jersey Transit.

Casino Revenue Fund Projections and Other Recommendations:

The Commission received an update from the Casino Control Commission in 2007, of the income sources that comprise the Casino Revenue Funds and projections for the funds to the 2011 year. These projections understated the loss in Casino Revenues that was experienced for Fiscal Years 2007 through 2011. A significant amount of Casino Revenue Funds is reduced due to the cessation or reduction of additional taxes on casinos that were implemented on a temporary or reducing basis. These included reduction in parking tax to the CRF, elimination of the tax on complimentaries, elimination of the Net Income tax, and a reduction of revenues to the CRF of the room fees tax.

Reinstatement of Casino taxes

In the interest of increasing revenues in a fund that provides support to essential programs for the aged and disabled, the Commission recommended in 2008 that legislation reinstating these taxes be studied and considered. Because of the increasing decline in the revenues being faced by the casino industry, the following is recommended:

(1) The delay of sunset provisions and reinstatement of taxes should not be considered until the industry is again experiencing growth and increased revenues and should be revisited at that time.

(2) One tax, that of the tax on complimentaries however, should be considered for the following reasons: The most painless increase to the Casinos and the public, would seem to be the reinstatement of the taxes on complimentaries, with the CRF being the beneficiary of the tax. This tax can be passed on to the customer and need not be a further tax burden on the casinos unless the casinos choose to absorb this. Even with the public paying a tax on free rooms, entertainment, and meals, the receipt of such comped benefits would be perceived to be a bargain and reasonable, with only the tax required to be paid. The public would indeed be a major beneficiary in having the tax be used for the benefit of the senior and disabled population service needs.

The Commission is also gathering information on the taxes paid by gaming establishments in other states as a response to the projections of major reductions in the fund. Preliminary information has been gathered on the taxes collected in other States. The taxes on gaming revenues range from 7% in Nevada to 31% in Illinois. The interest of several of the Commissioners is in the history and discussions occurring in regards to the amount of tax to be imposed. Their further research and recommendations in regards to an increase in the rate of regular Casino Revenue tax will be considered at a future time.

The Casino Revenue Fund and Constitutional Issues

The Commission calls attention to its efforts to ensure the integrity of the Casino Revenue Funds as a separate fund to be spent solely for the benefit of senior citizens and

disabled. In fulfilling its charge to the Legislature, the Commission is mindful of the words in the State Constitution that guide the proper use of the CRF stating that "...the revenues derived therefrom to be supplied solely for the purpose of providing funding for reductions in property taxes, rental, telephone, gas, electric, and municipal utilities charges of eligible senior citizens and disabled residents of the State, and for *additional or expanded* health services or benefits or transportation services or benefits ...". The inclusion of wording that states that funding should be for additional or expanded health services or transportation benefits implies that care should be taken in the development of the Casino Revenue Budget to ensure that when new or additional programs are recommended, they are not so lightly disregarded when the CRF has access to additional funds that have become available to the Fund as a result of additional revenues and efficiencies and savings. (See Constitution, Exhibit V).

Further some question has been raised in regards to the propriety of having part of the taxes derived from the operations of the casinos being dedicated to the Casino Reinvestment Development Authority (CRDA) as opposed to the CRF. Wording in the Constitution says that "the State shall license and tax casino operations and equipment used in connection therewith. Any law authorizing the establishment and operation of such gambling establishments shall provide for the State revenues derived therefrom to be applied solely for the purpose of.....benefits to eligible senior citizens and disabled residents." Since the CRDA does not strictly serve senior citizens and disabled, the provision in law that the taxes and fees for room and parking be increasingly dedicated to the CRDA instead of the CRF, does not seem in compliance with the constitutional statement in regards to the sole purpose of revenues derived. The Commission asks that this be an issue to be reviewed by legal counsel of the appropriate State department. Should there be confirmation of this opinion by legal counsel, it seems that the amount of funds for additional programs for seniors and disabled would be a positive result.

A3861

Legislation has recently been introduced that addresses both encouraging development for new casinos through a reduction in the CRDA investment alternative tax of 1.25% for new casinos on a 5 year temporary basis. The legislation also increases by .25%, the % of the current alternative investment tax that is allocated to the CRF and decreases by .25%, the % of these revenues allocated to the CRDA on a temporary basis until improvement is evidenced in the economy. A3861 was introduced by Assemblymen Vincent Polistina and John F. Amodeo and deserves consideration. The Commission has initially endorsed this legislation as a serious effort to improve the status of the Casino Revenue Funds for the benefit of seniors and disabled, in this crucial time of decreasing revenues for the Fund. (See Exhibit III, A3861 summary)

Closing Remarks

The Commission has called for an audit of the funds, specifically clarifying the expenditure of the funds by program and a comparison of program expenditures to the program allocations as presented in the State budget as well as a clear picture of the revenue sources. The Commission appreciates the cooperation, assistance, and work of

the Office of Management and Budget in responding to the varied information requests of the Commission for fiscal data and budget information.

In addition, the Commission will continue to derive client and service information and details on the specific programs that are funded by and related to the Casino Revenue Fund and asserts that program performance audit information is important and will be assessed in making further observations and recommendations to the Legislature that would impact upon the best performance by programs funded by the Casino Revenue Fund.

The Commission recommendations for additional funding have been met with skepticism from those who are aware of the current reduction in the level of Casino Revenue Funds as a result of the lower level of revenues from the casinos. Yet the Commission stands firm in its resolve that certain programs that depend on the CRF have not received a fair share of funding increases in the thirty years of CRF steady increases and that these programs are essential and critical to the well being of the elderly and disabled and should be expanded to meet the increasing demand.

Attention is called to the savings generated in programs majorly supported by the CRF including PAAD. The Medicare D Program now subsidizes a major portion of the PAAD and Medicaid Prescription assistance, resulting in hundreds of millions of dollars in savings each year from 2006. There have also been hundreds of millions of CRF dollars that have resulted in savings to the general revenue funds when CRF funding increases were allocated to replace the General Revenue portion of support for particular programs. In one of the largest increases in CRF funding (in 2004), for example, the CRF increased by \$100 million.. That increase largely served to replace the general revenue fund support of two major programs, the Medicaid Personal Care Program and the Medicaid Waiver programs.

As a result, the opportunity to provide additional benefits, and additional funds for critical programs for seniors and disabled was not taken; instead, funds from the CRF served to provide general revenue fund relief. This is indeed an admirable goal, but one must ask: Was this the intent of the Casino Revenue Funds when instituted to be spent solely on the elderly and disabled population of this State?? More recently the Medicaid programs supported by the CRF, will be receiving funding assistance from the Federal Economic Stimulus funding that is anticipated to be as much as \$2.2 billion for the State of New Jersey for three years. Since the CRF supports hundreds of millions of dollars in Medicaid program funding, it is reasonable to recommend that the State use less CRF dollars that were needed to support the Medicaid programs, and use freed up CRF funds to address the funding recommendations presented herein.

The point is emphasized that the Commission must speak to the real and crucial needs of elderly and disabled in this State. The hearings held by the Commission have underscored the importance and validity of the Commission recommendations that are presented to legislators in this Annual Report. It is therefore very reasonable that the State consider a reallocation of funds as recommended by the Commission to address critical funding needs of the elderly and disabled. The recommendations presented would only require that a miniscule portion of the general revenues that have been saved or replaced by the

CRF through the years, be reallocated to insure an infusion of needed funds to critical programs as well as to insure the maintenance of currently funded programs providing essential services. The Commission is committed to a review and a detailed assessment of the larger scale CRF funded programs of assistance, with the objective of having services supported that are efficiently, effectively, and purposefully rendered.

The Commission looks forward to a productive year with enthusiasm toward the pursuit of these mentioned efforts. The Commission will continue to gather information relevant to the assessment and recommendations to be made in regards to the Casino Revenue Funds and their wisest use and application and will hopefully serve as an important resource to the Legislature in their awesome challenge, responsibility and authority to affect changes for the greater good of senior and disabled residents of this State.

Respectfully submitted,



Misono Miller, Chairwoman
New Jersey Casino Revenue Fund Advisory Commission

MIM
4-23-09

Exhibits and Related Documents

Exhibits:

- I. Casino Revenue Fund Summary & Projection for Fiscal Year 2010
(State Budget Appendix, proposed)
- II. Summary of the Public Hearing comments conducted in 2008 by the
Commission
- III S1830/A2046, A3861
- IV 2008 APS statement, County Welfare Directors Association President
- V NJ State Constitution, regarding the Casino Revenue Fund

Related documents on file at the NJ Dept of the Treasury

:

- 1 Casino Control Commission Report of Revenues, 2007
- 2. Annual Casino Revenue Fund Advisory Commission Reports for 2004, 2005,
2006, 2007, and 2008.
- 3. Congregate Housing Program Report by NJ Dept. of Health and Senior
Services
- 4. Senior Citizen and Disabled Resident Transportation Assistance Program
Annual Report and Public Hearing, July, 2007
- 5. NJ Casino Control Commission, Overview of Revenues, November 2008
- 6. Transcripts, Casino Revenue Fund Advisory Commission for hearings held
on November 19, 2008 in Atlantic City; November 21, 2008 in Trenton; and
December 9, 2008 in Hackensack

CASINO REVENUE FUND SUMMARY AND PROJECTION

(millions of dollars)

	Fiscal 2004	Fiscal 2005	Fiscal 2006	Fiscal 2007	Fiscal 2008	Revised 2009	Budget 2010
Opening surplus	0.00	22.7	0.0	1.0	0.0	0.0	0.0
Revenues	467.5	474.1	500.2	446.1	411.1	365.8	351.1
Lapses and adjustments (a)	0.7	2.7	2.1	3.5	5.1	2.6	0.7
TOTAL RESOURCES	468.2	499.5	502.3	450.5	416.2	368.4	351.8
MEDICAL ASSISTANCE							
Personal assistance	3.7	3.7	3.7	3.7	3.7	3.7	3.7
Home care expansion	0.2	0.2	0.1	0.1	0.1	0.1	0.1
PAAD -- expanded	254.7	309.0	276.0	205.3	220.1	158.5	144.9
Global Budget for Long Term Care (b)	28.2	28.0	29.3	28.7	27.8	27.6	27.6
Disability Services Waivers	16.5	16.5	16.5	16.5	16.5	16.5	16.5
Respite care	5.4	5.4	5.6	5.4	5.4	5.4	5.4
Hearing aid assistance	0.1	0.1	0.1	0.1	0.1	0.2	0.2
Statewide birth defects registry	0.5	0.5	0.5	0.5	0.5	0.5	0.5
Health and Senior Services Admin.	0.9	1.0	1.0	0.9	0.9	0.9	0.9
Personal Care	60.1	60.1	90.1	111.0	60.1	77.7	77.7
TRANSPORTATION ASSISTANCE							
Senior citizens and disabled residents	25.5	25.3	34.4	34.9	36.9	33.0	30.2
Sheltered workshop transportation	2.4	2.4	2.4	2.4	2.4	2.4	2.2
HOUSING PROGRAMS							
Congregate housing support	1.9	1.9	2.0	2.0	2.0	2.0	2.0
Safe housing and transportation	1.7	1.7	1.7	1.7	1.7	1.7	1.7
Developmental Disabilities	38.3	38.3	32.4	31.8	32.5	32.5	32.5
OTHER PROGRAMS							
Home Delivered Meals	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Adult Protective Services	1.7	1.7	1.8	1.8	1.8	1.8	1.8
Adult Day Care -- Alzheimer's	2.6	2.6	2.7	2.7	2.7	2.7	2.7
Home Health Aide Certification	0.1	0.1	0.1	0.0	0.1	0.1	0.1
TOTAL APPROPRIATIONS	445.5	499.5	501.3	450.5	416.2	368.4	351.8
ENDING SURPLUS	22.7	0.0	1.0	0.0	0.0	0.0	0.0
GENERAL FUND SUPPORT							
SOBRA for Aged and Disabled (c)	198.8	220.6	205.1	161.2	166.2	174.2	185.2
Global Budget and Waivers (b)	0.6	5.1	4.9	4.9	38.7	52.2	58.7
Personal Care	75.0	76.8	44.1	16.9	77.4	59.4	67.0
Senior Citizens Property Tax Freeze	17.7	72.4	99.0	127.6	148.5	169.0	172.5
PAAD -- expanded	128.9	48.6	23.7	0.0	0.0	77.0	69.1
TOTAL GENERAL FUND SUPPORT	421.0	423.5	376.8	310.6	430.8	531.7	552.6

Notes:

(a) Lapses and Adjustments include Interest Earnings, Casino Simulcasting Funds, and general fund support in years that CRF revenue is less than expenditures.

(b) Beginning in fiscal 2009, Community Care services are provided through the Global Budget for Long Term Care.

(c) Actuals updated to capture all Sixth Omnibus Budget Reconciliation Act expansion categories.

EXHIBIT II

ABSTRACT

NEW JERSEY CASINO REVENUE FUND ADVISORY COMMISSION

PUBLIC HEARINGS

ATLANTIC CITY, TRENTON, AND HACKENSACK, NJ

NOVEMBER & DECEMBER, 2008

Casino Revenue Fund Advisory Commission:

Misono Miller, Chairperson

James Thebery, Vice-Chairperson

Kay Nest, Secretary

Mrs. Enid Torok

Ms. Laura Ramos

Mr. Joseph Tyrrell

Mr. George Vassiliades

Senator Thomas H. Kean, Jr.

Senator Loretta Weinberg

Assemblyman Vincent Polistina

Assemblyman Nelson Albano

Ms. Tracy Wozniak-Perriello, Dept. of Health & Senior Services

Mr. David Rosen, Office of Legislative Services

Support Staff: Brian Francz, Office of Management & Budget

Patricia Wilson, Dept. of the Treasury

Judy Moore, Dept. of the Treasury

Abstract compiled by:

Laura Ramos, Member of the Commission, representing the Disabled,
with assistance by Kathryn Browarny, Paralegal Personal Assistant
March 2009

Abstract of Casino Revenue Fund Advisory Commission
Public Hearings held in New Jersey in 2008

In Atlantic City on November 19th, in Trenton on November 21st and in
Hackensack on December 9th

This abstract is a summary of the over 400 pages of oral and written testimony given to the CRFAC at the inaugural Public Hearings of the Commission in the Fall of 2008. Elected officials, State and County Administrators, Representatives of Statewide Coalitions, Seniors, Activists for People with Disabilities, one and all came to the three hearings to voice their heartfelt concerns, needs, and petitions to this Commission. For easier reading, the representative comments from participants were arranged by related topics. The abstract was prepared by Ms. Laura Ramos, Member of the Commission, representing the Disabled of New Jersey, with assistance from her Paralegal Personal Assistant Ms. Kathryn Browarny. (March 2009).

The full transcript of the hearing is on file at the State Department of the Treasury and the NJ State Library and can be e-mailed to interested persons.

Overview

Rev. Bob Janis Dillon, Minister to the First Unitarian Universalist Fellowship of Hunterdon County, best summed up the challenges we are facing when he said, "First of all, I'm grateful for the work you do. I also appreciate the difficult situation in which we find ourselves. While I can't say I'm disappointed by the fact that people are playing less blackjack, the fact that the monies of this fund are so significantly reduced is of grave concern. Now is a time when priorities have to be made. We have to decide what is truly important to us. The Bible says numerous times that we should care for Elders, those in our family as well as those who have no family to take care of them. The book of James says that pure religion is to visit orphans and widows in their times of suffering. Indeed, all the major world religions and philosophies speak of caring for the least among us. This is a moral requirement; for those of us who are religious it is a religious requirement."

Mr. Wilson Woolf, Chairman of the Warren County Office on Aging and Advisory Council, reminds us, "I'd like to begin my comments by reading a paragraph from the New Jersey Constitution, which specifies the intended use of Casino Revenue Funds. Any law authorizing the establishment and operation of such gaming establishments shall provide for state revenues derived therefrom to be applied solely for the purpose of providing funding for reductions in property taxes, rental, telephone, gas, electric, municipal utilities, and charges of eligible Senior Citizens and Disabled Residents of the state, and for additional or expanded health services for the benefits for transportation services or benefits to eligible Senior Citizens and Disabled Residents in accordance with such formula as the legislature by law shall provide."

Mr. Woolf continued, "I wish to refer you to your own 2008 annual report dated March 28, 2008. This report thoroughly substantiates and outlines recommendations for increases to the Casino Revenue Fund to subsidize specifically identified programs benefitting New Jersey Senior Citizens and Residents with Disabilities. As a Chairman of the Warren County Aging Service Advisory Council, I've been aware of numerous advocacy efforts to encourage the allocation of additional funds to support essential services to our Senior and Disabled population, our most vulnerable. It was the newly-organized New Jersey Consortium of Area Agency on Aging Advisory Council which spearheaded the paper plate campaign to advocate for increased home-delivered meals funds for homebound Seniors and Disabled New Jersey residents. Through our efforts, thousands of signed paper plates were presented to the New Jersey legislators to demonstrate the importance of this increase in funds. From this, New Jersey COST initiated the "Save My Ride" campaign to increase funding for transportation to our most vulnerable and isolated residents.

Both home-delivered meals and transportation are service priorities listed in your own report. In fact, the recommendations contained in your 2008 report have been formally supported by the following statewide organizations: The New Jersey Areas Agency on Aging, the Welfare Directors Association of New Jersey, the New Jersey Association of Counties, the New Jersey Council on Specialized Transportation. Despite overwhelming support by New Jersey residents, consumers, professional service groups, and our very own Casino Revenue Advisory Commissions... The Casino Revenue Fund has fallen short in meeting the mandates of the New Jersey Constitution. Existing programs have not received funding, nor have new programs been developed to meet the needs of New Jersey Senior Citizens and Residents with Disabilities."

Meals On Wheels/Food Pantries

There was overwhelming support for increased funding for the Meals on Wheels Programs - for Seniors and for the Disabled - as well as increases for Weekday and Weekend meals programs. The 21 Counties' Area Agencies on Aging Advisory Councils organized a campaign, sending over 30,000 paper plates with messages supporting Meals on Wheels programs statewide to Legislators and the Governor to petition our representatives for more funds for this vital program. Many New Jersey Counties have waiting lists for Seniors who need the Meals on Wheels programs. Meals on Wheels is a program exclusively for Seniors, and in some counties the Disabled, who are homebound and unable to cook for themselves and do not have someone else who can prepare a meal for them. Many live alone. In most cases, Senior and Disabled participants pay about \$3 per meal for the service; because they pay for the meal, many feel the Meals on Wheels program preserves their dignity and independence. Often the meal brought by the Meals on Wheels program is the only meal the person gets that day. Evelyn Comer of Bergen County said, "Meals on

Wheels is keeping thousands of Seniors alive. We need it properly funded so everyone who needs a meal gets one."

Neither the State General Fund nor the Casino Revenue Fund has addressed the decades-old inequity of providing funding for services such as Meals on Wheels, Safe Housing/Escorted Transportation, and other essential programs for Seniors, but not for Disabled Residents. Counties and municipalities that do provide Meals on Wheels for the Disabled must find the funding from some other source. Some Counties have begun to include delivering meals to homebound Disabled Residents; some of them have waiting lists for People with Disabilities.

Nina Levinson of Bergen county stated, "The primary need of anybody is food. Without food, we don't live. And therefore, I think the Meals on Wheels—transportation—whatever it takes—has to be funded first, and in full, because if people are hungry, it is very serious. Seniors are hurting badly, and more and more seniors are dependent upon these meals, and I think that should be your priority.

Joan Campanelli stated Bergen County serves 1,700 meals with a waiting list of 117 Seniors. Bertha-Nora Acosta, from the Bergen County Meals on Wheels Program for those under 60 who are permanently disabled and homebound, said they serve 90 meals with a waiting list of 15 Persons with Disabilities. Mary Kuzinski, from Passaic County reported they serve 1,000 Seniors per day and have 300 on their waiting list. An increase of \$2,400 a month would clear up their waiting list. They serve 252 meals on weekends. Walter Trommellen of Burlington County indicated they provided 99,000 meals in 2008 to homebound Seniors, an increase of 20 percent in just one year. In 2009, they may need to institute a waiting list for Meals on Wheels. Barbara McMorro of Monmouth County said they serve over 1,200 Seniors meals weekly and expressed concern that their Meals on Wheels program will sustain a shortfall in funding up to \$153,000 in 2009, resulting in waiting lists and increased institutionalization. Mary Ellen Keller of Cumberland County said they serve 210 meals per day and needed to create a waiting list for the program. Joy Merulla of Camden County expressed concern that while they serve 468 meals per day to Seniors and a few Disabled residents through the Meals on Wheels program, they have a waiting list that has 290 Seniors and People with Disabilities on it; "How do you tell a person that you can't get them a meal?" They opened up their Meals on Wheels program to the Disabled this year, but most are on the growing waiting list.

The Seniors and People with Disabilities who receive meals from Meals on Wheels consider the program a life saver. As A.B. of Millville wrote, "Meals on Wheels was saving my life because I wasn't eating. No desire to cook but food looks so good I can eat it. I'm 84 and appreciate the service." As A.R., also of Millville, penned, "If you are unable to prepare your own meals, then be thankful to God that there is Meals

on Wheels that does a very good job on preparing and delivering right to your door." Indeed, the volunteer drivers of the Meals on Wheels program provide more than a hot meal. They provide socialization and the protection of a caring person looking out for the Senior or Disabled Citizen they are providing nutrition for. Wilson Reimes, a volunteer from Bergen County, reported that he was delivering food to a man on Polifly Road for two and a half years, when one day he rang the bell and there was no answer. He banged on the door, was let in, helped the man who was in distress, and called 911 for him. He's convinced that, "... if it wasn't for me or another driver, the man would have been dead in his apartment. So I beg you, thank you, please increase our support."

A higher proportion of Seniors and People with Disabilities are on special diets due to medical conditions, compared to the general population. Some counties, like Cumberland County, will provide special meals within their dietary restrictions once a prescription from their physician is received. Other counties, like Camden, have not implemented a way to incorporate special dietary needs of many of the Disabled and Seniors in their Meals on Wheels programs. As good as the Meals on Wheels program is, it is essential that all counties find a way to provide healthy meals to all the Disabled and Seniors who need them, including those on special diets.

Mr. Benoit of Hudson County gave the example of "...the price of meals delivered was about \$3.00 from the vendor, at which point he would distribute them, amounting to a total cost of \$8 per meal for home delivery. In the middle of 2008, the agency went through a public bid and the final bid came in at \$3.80 per meal. So in one year, exclusive of the transportation costs, the cost per meal went up 80 cents, amounting to an additional \$140,000 to serve the same number of people in North Hudson. That doesn't include Jersey City, Bayonne, or West Hudson. That's the magnitude of the problems we are seeing in Hudson County. Up 'til now the Mayors have been able to obtain other funding to avoid waiting lists. I don't know how much longer they'll be successful in avoiding waiting lists."

Chairperson Misono Miller noted, "The State did a study called Mission Nutrition about two years ago. The statewide average cost was \$8.97 and that would include the meal costs, the cost of delivering that meal, and all staff costs. It is probably the most efficient service you can get that is so essential to helping them keep their health." Currently, the Casino Revenue Fund only pays for weekend meals. The Commission's 2008 Annual Report requested \$3 million additional funds for Meals on Wheels programs to attempt to meet the increasing demand by Elderly and Disabled Residents. A portion of the funds, at least \$1 million, should be allocated to ensure homebound Disabled Persons have access to Meals on Wheels. There is no other permanent source of funds for this purpose. Two million dollars would be used to provide needed resources for weekday and weekend meals.

Meals on Wheels provides only one solution for the hungry Seniors and Disabled Residents of New Jersey. Families, neighbors, churches, and community food pantries, and the statewide network of Food Banks provide additional food to these vulnerable residents. If these residents cannot obtain or cook food, they are at high risk of being institutionalized. Many Seniors will not apply for food stamps because they view government assistance as being part of the welfare system. They are used to being independent and self-reliant, and they see that as giving up. Some will go to the food pantries, or have family or friends go for them. Thelma Fedele from the Center for Food Action in Bergen County says, "Our most senior client is a 103-year-old woman who lives with her 82-year-old daughter. The daughter comes to pick up the food." Many of the eldest Seniors are being cared for by their children who are also Seniors.

Ms. Fedele goes on to say that, "In 2007, we served over 38,000 people. When I first started in 1992, Seniors accounted for 2 percent of the people we served. The percentage of Seniors gradually rose to 11 percent, this last year, it's up to 15 percent. Overall, the increase of all food pantry clients from 2007 to 2008 rose 30 percent. In 2008 so far, we have assisted 3,500 Seniors, which is a large number for us to handle." They do attempt to coordinate with other service programs like Meals on Wheels for homebound Seniors and Disabled, food stamps, and transportation.

Goldie Wulderk, of the Senior Thrift & Craft Center in Cumberland County, said, "In 1976, I started an eating program collecting fresh foods from our area farms, processing plants, canning factories, supermarkets, bakeries, etc. for a couple hundred families. Since then, we have distributed millions of dollars worth of these foods to those who needed help. Our center can no longer hold the number of people who come for food every day - 2,500 families or 5,000 people each month. We keep running out of food." Food pantries serve people who can get to them; however, as reductions in transportation continue, many Seniors and Disabled throughout the state, particularly those in more rural counties, will not be able to pick up the food they need.

Transportation

There was unanimous support for increased Casino Revenue Fund monies to maintain and expand necessary transportation services for Senior Citizens and Disabled Residents in New Jersey. Most of those who addressed the Commission about transportation indicated strong support for bills A2046/S1830, which would increase the legislated transportation proportion of the Casino Revenue Fund from 7.5 to 8.5 percent. Many counties throughout the state have cut transportation services, which is adversely impacting the lives of Seniors and the Disabled. Some cautioned Legislators that with the reduction of Casino Revenues, the modest one percent

increase in the CRF transportation funds will not keep pace with increasing maintenance and fuel costs, as well as the expected enormous increase in the population of Seniors and the Disabled who need transportation to employment, Senior centers, food pantries, physician visits, dialysis, and other vital services.

Rev. Bob Janis Dillon, of Hunterdon County spoke, "I wanted to be here today to do my best to speak on behalf of the Elderly and Disabled members of my congregation, as well as the Elderly and Disabled in the greater community of Hunterdon County, many of whom currently rely on the programs you support. Hunterdon County, on paper, is one of the most prosperous counties of the country, but it is also one of the most expensive places to live. Many people in our county are having a very hard time making ends meet. This is especially true for the Elderly, many of whom are the "Old Guard"; men and women who have been there for generations and are now getting priced out of their own communities. We are also an extremely isolated community by New Jersey standards. The LINK bus system does what it can, but even with this, for many people getting around is an almost insurmountable challenge. I have spoken to Elderly people who list losing their ability to drive as one of the greatest losses of their life. Not cancer, not operations, not the death of a friend. No. Losing the ability to drive, because there are so few other options out there. Similarly, for the Disabled, transportation needs make life that much more difficult. And that's just transportation. Rent and property taxes are increasing exponentially. Rents are often \$1200 and more, and affordable housing is nearly impossible to find. Some food staples have increased by 50 percent or more. As for utilities, we all know how much the cost to heat a home has increased in such a short time. Many residents are wondering how they will get through this winter."

Robert Koska, Director, Office of Local Programs, New Jersey Transit, administrator for the Senior Citizen/Disabled Resident Transportation Assistance Program (SCDRTAP). He began, "Casino Revenue Funding for transportation services for SCDRTAP began in 1984, and NJ Transit was designated as the State agency to administer the program. By law, 15 percent of SCDRTAP funds are used by NJ Transit, 10 percent for administrative costs, and 5 percent are used for NJ Transit accessibility projects within our bus and rail system. The idea of the program was to dramatically increase the mobility of our Senior and Disabled residents in a way that had not been seen before, to move beyond a targeted purpose oriented transportation, and take the first steps toward a broader concept of individual mobility and independence. By 1996, the State of New Jersey was recognized by the Federal government as a leader with regards to the coordination of transportation services. It was the availability of Casino Revenue Funds that played a role. "

He continued, "After a full year of funding for SCDRTAP at the end of 1985, the counties provided a half million trips with program funds. In 2008, two million trips

were provided with Casino Revenue Funding, and an additional two million trips were provided with funding streams that were brought under county umbrellas of coordination. However, now we are at the critical crossroads with regards to transportation. Just as the Elderly population is about to undergo a rapid expansion as Baby Boomers reach retirement age, just as our medical delivery system decentralizes - making access to medical care more of a challenge - just as the cost of providing transportation services itself increases with the rapid fluctuation of gas increases, vehicle maintenance cost increases, and insurance cost in some cases become a prohibitive factor, the Casino Revenue Funds for transportation has not only leveled off but are now down slightly. For fiscal year 2009, there is almost \$4 million less in this program."

Mr. Koska concluded, "As the only program funded with Casino Revenue Funds that is linked to our percentage of the Fund, the fortunes of the program go up or down based on how business in Atlantic City is, instead of it being based on the needs of the population being served. Cuts in transportation services that have been put in place, will have a domino effect on programs surrounding these services. That means at the nutrition center, fewer meals will be served, less Casino Funds mean more nursing home residents and on and on. The impact in each and every program will be felt. The bottom line is that New Jersey Transit's vision of providing increased mobility to its Senior and Disabled residents will be damaged if we don't keep adequate funding in place. New Jersey Transit is proud to be able to continue this program, but with our experience in working at the county level, most of our issues mean more cuts in service, and any vision of increased mobility for those who have no other roles, but isolation."

Tom Murphy, of Bergen County, reports that in 2007, "Community Transportation drove about 1,100,000 miles and transported about 305,000 (rides). We have approximately 8,000 registered riders. That's people who have used our system at least once in the last six months. For '09, we have received a \$300,000 cut in our Casino Funds. That, because of some of the policies we've implemented and some of the savings that we've provided, will not cause a decrease in service. In fact, for '09, we expect to maintain all the services at the present. The problem is the year '10. From present funding sources, we expect another \$200,000 cut from Jersey Transit, and that along with a \$300,000 cut, will mean substantial cuts, not only in Bergen County, but statewide."

Hudson County, under the direction of Kevin Crimmins, has come a long way in the last couple of years in the county transportation plan. "We've gone from 75,000 rides per year to about a hundred thousand rides per year, and unfortunately with the funding that's been projected through the Casino Revenue Commission, that also will

be declining and we don't know how we'll be able to fit in the projected increase of need over the short term. " Steven Fittante, Director, Middlesex County Department of Transportation, indicated Middlesex County does over 500,000 trips a year. He agrees with the need to increase transportation funding.

Walter Trommellen said Burlington County Senior Transportation Services are utilized for physician visits, dialysis, grocery shopping, and congregate nutrition. As the largest county in New Jersey, many of our communities have limited or no access to public transportation. Our Senior transportation services are geared to help those who are most frail and vulnerable. Last year, over 75,000 trips were provided. 27,000 trips were for medical trips. As the proportion of the oldest Elderly increases, so will the demand for this service. We are at the breaking point in Burlington County. Rising fuel costs and limited local funding have already caused reduction in transportation services for doctor visits and grocery shopping. For the first time ever, there is a transportation waiting list for congregate nutrition. Seniors are not able to go to the senior nutrition site for a meal and socialization because of this lack of transportation. We need to do better. We cannot let this happen. We must figure out a way to provide sufficient funds to meet the transportation needs of this increasingly frail and vulnerable population.

Henry Nicholson of Monmouth County Transportation reports that, Monmouth County has one of the most integrated transportation programs in this state. They provide over 380,000 rides per year. An innovative program transports Persons with Disabilities going to the Arc in Monmouth County, who then deliver Meals on Wheels to persons who otherwise would not have a hot meal nor any social relationship. "This is a great integration between a Senior, a Person with Disability, and the needs of the community. This provides hot meals, keeping people in their homes, and providing a job for these individuals." He requests increases in funding for transportation and the Meals on Wheels program.

Cynthia D. Voorhees of Somerset County asks, "How is it that an increase in the over-65 population results in a tremendous per capita decrease in funds? In Somerset County, for the first three quarters of 2008, there was an increase of 6 percent in the number of trips versus the total number in 2007. This was 525,000 trips for 23,000 registered clients. One third of the older adults who live alone do not have someone readily available to meet their transportation needs. Even those living with relatives often do not have transportation available. In today's world, most of the relatives are employed and the volunteer pool drastically has been reduced. Persons who may be available to do volunteer transport are more hesitant to do so due to liability issues. A neglect to meet this growing demand will adversely affect the mental health of Seniors who may already be confronted with having their wheels taken away. It is evident that an 8 percent decrease in allocation of funds is unacceptable, and I support

the Commission's recommendation for an increase in funding...The time to be proactive is now."

Senator Jeff Van Drew of Cape May County came to advocate for the transportation needs of the Seniors and Disabled. Adequate transportation services are a lifeline to their doctors, medical care, food stores, and other necessary places. For example, those people on dialysis who need to access this treatment. Without these services, we are going to have people who are going to lose their lives. George Martch, Advisory Council, Division on Aging, Mercer County supports increases for Meals on Wheels and transportation. Sy Larson, President of the NJ AARP wants increased funding for transportation, meals, and PAAD. Marikay Green, Salem County Office on Aging, as well as David Grennon of Cumberland County, came to support transportation bills S1830 and A2046.

Kathleen Edmond, Director of Ocean County's Ocean Ride Program reports, "The Ocean County Transportation System was created in 1977 through the Office on Aging. The intent was to provide reliable transportation to Senior Citizens, to safely get to and from medical treatment, often provided outside of county boundaries at that time. Demand for this service has continued to increase rapidly along with the development of a multitude of retirement communities in our region. Over the years, the county system has greatly modernized and has been transformed and expanded to become a major provider throughout our extensive county. We have over 683 square miles of area. We serve 33 towns, and we are home to 91 adult communities. Our Senior population accounts for more than 160,000 persons, which represents 27 percent of our total population. Our Veteran population today stands at 70,000. During the mid 1980s, several county departments worked cooperatively to implement expanded transportation service. This effort was spurred with the new funding from the Casino Revenue Fund. It has taken us three decades to reach our current level, but last year we provided more than 427,000 passenger trips. Trips are provided on a systemwide basis, which today includes 17 bus routes, reserve-a-ride service, Veterans' transportation, specialized transportation for Persons with Disabilities, special group trips and a transportation mini-grant. I believe we are the only county in the state to do this, where we help support the local non-profits within our county. Demand for service in all categories continues to surge. On our busiest day in the reservations area – this is where we handle medical trips – we receive 600 to 700 telephone calls from all across Ocean County requesting door-to-door transportation for medical appointments. While our Board of Chosen Freeholders provides approximately 51 percent of our annual funding, the \$300,000 Casino cut, the most severe cut across the state, will impact our operation in 2009."

She continued, "Another transportation concern is evacuation. During the wildfires of 2005, which impacted Stafford and Barnegat Townships, Ocean Ride was called to

the rescue. We assisted right along with other responders and actually helped to transport Seniors, many of whom relied on mobility devices, from local nursing homes. It was a caravan. It was a sight that I have never seen within my county, and I am so thankful that we had the resources to respond."

She concluded, "Ocean County supports the efforts of New Jersey COST and this Commission in terms of Assembly bills and Senate bills. We have also done the "Please Save My Ride" campaign. This is just one of hundreds that we have back in our office, and we are working with Mr. Vieira, President of COST, to make this come to fruition."

Michael Vieira, President, of the New Jersey Council on Special Transportation (NJ COST) stated, "New Jersey Human Services and Transportation is in a serious financial crisis that is affecting every county, municipality, and social service agency in the state. This crisis negatively impacts New Jersey's older adult population, Persons with Disabilities, economically disadvantaged, Veterans, and other transportation-dependent persons. In July 2008, NJ COST sent letters out to Governor Corzine, Senate President Richard Codey, and Assembly Speaker Joseph Roberts, asking them to set up a bipartisan committee to review long- and short-term solutions to the transportation funding crisis. No response has been received from those letters."

NJ COST's "Please Help Save My Ride" Campaign began 9/19/08. Twenty thousand full-color petitions were distributed across New Jersey and signed by our riders. Within the first three weeks, 15,000 were signed. Right now more than twenty thousand petitions are now signed and being prepared to be delivered to our Legislators and Governor Corzine.

Transportation for the Disabled

Marianne Valls, Member, Senior and Disabled Transportation Program Citizens Advisory Board, Jersey City, expressed, "All opportunities, be they work, education, or social, begin with transportation. The Americans with Disabilities Act calls for People with Disabilities to be included in all aspects of society. Inclusion begins with accessible transportation. I'm sorry. Lack of transportation forces segregation for a class of people that for too long have remained unseen and been unheard. In my view, lack of transportation is a major cause of this segregation. All transportation -- all society loses when one segment of the community cannot contribute simply because getting from one place to another has become impossible. Special transportation is not a luxury for People with Disabilities, but, like the rest of the public, a necessity. I would urge the officials here to imagine the outcry -- what the outcry would be --if you drastically cut mass transit as you seem to be cutting special transportation."

She reminded us, "Special transportation creates taxpayers, shoppers, movie goers, and diners. In this troubled economy, taxes are taxes and spending is spending, regardless whether a person is using a mobility device, visually limited, or has other limitations. People just need a way to support the very troubled economy. That support begins with special transportation. "

She remarked, "If I may make one last comment, this nation is about to celebrate a historic inauguration of the first black president. One of the hallmarks of the civil rights movement was Rosa Parks' refusal to sit in the back of the bus. I would respectfully remind you that there are many times when People with Disabilities can't even get on the bus. Lack of continued funding ensures that now there won't even be a bus."

Kathy Wood is the Director of the Heightened and Independence Progress for Hudson County. She said, " I work to assist People who have Disabilities to participate as fully as possible in community-based activities. Accessible transportation is a vital component of full inclusion. The reality for the majority of Paratransit passengers is that they are dependent on the service not only to access community-based services, but for life-sustaining medical treatments."

She continued, "Secondly, as a Person with multiple Disabilities, I depend on Paratransit services in order to remain employed. The progression of my disabilities has made it impossible for me to continue using the overcrowded mass transit system in my urban environment. Paratransit is what makes a difference between my remaining a taxpayer and my becoming a tax dependent. There are many other individuals who are productive citizens because in part of the availability of Paratransit services."

She concluded, "People with Disabilities are, in large measure silent constituents. As a group, we generally do not make our voices heard on issues that are crucial to our lives. Instead, most People with Disabilities rely upon organizations and advocates to speak for them. I am submitting this testimony to strongly support continuing funding for Paratransit services."

Neil Ross, Resident, Passaic County, began "First of all, I want to say that I support the legislation to increase the transportation funding. I'm concerned for our Seniors who may live in a residence that is off the beaten path not near a bus route, but as well as Persons with Disabilities young and old alike who use Paratransit for employment, shopping, education, recreational activities, and I'd even like to see the services expand. I know in this day and age, just to break even we're lucky because the basic things in life, the equal things in life with our able-bodied counterparts, for

example the idea of going to a council meeting and meeting your elected officials in public to address an issue, if there's no transportation, you can't do that. Paratransit doesn't always operate in the evening, so just as an equal citizen you don't get that. Whatever we can do to improve the service, increase the transportation funding. I think it is vital."

Debra Behnke, Director, Salem County Office for the Disabled said, "Transportation for Persons with Disabilities is important in Salem County. Transportation gives my Consumers with Disabilities access to medical appointments, education opportunities, and other necessary appointments. Due to our rural nature, public transit is almost non-existent for Persons with Disabilities in Salem County. We are a county with 64,000 residents with 20 percent of those Disabled and 15 to 20 percent are Seniors. Programs supported by the Casino Revenue Fund are a definite must for Salem County government to continue to serve its most vulnerable population."

Anne Miller, Disability and Transportation Advisory Councils, Warren County, spoke, "The purpose of the Council is to improve the quality of life for county Residents with Disabilities by advocating for their rights, equality, and accessibility needs. Warren County Disability Council is here today to support the recommendations of the Casino Revenue Fund Advisory Commission in their 2008 annual report. In particular, the funds earmarked for transportation and health services are primary in ensuring that Persons with Disabilities can live as independently as possible with a community of their choice."

She continued, "Within New Jersey, approximately 1.0 million residents are Persons with Disabilities. More specifically in Warren County, 12.3 percent of Warren County residents have disabilities, for the majority of those individuals -- 71 percent -- with disabilities falling within the age range of 20 to 64. We are seeing a rise in numbers of Persons with Disabilities who choose to remain in the community and live in as independent an environment as their abilities will allow. The growing demand for services is critical, and additional funds need to be earmarked to meet the need."

She observed, "Accessible public transportation within the county to other New Jersey counties is very, very limited. We are constantly being asked on the street, by friends, by neighbors, people coming to the Council why they can't leave the county or even go out in the evening. Very special arrangements had to be made just to get them to the Warren County Fair. The 2000 Warren County Department of Human Services strategic plan notes that ridership -- and that translates to individual trips -- on Route 57 shuttle, has increased by 270 percent, and that's since 2003. A lot more people on Warren County's Route 57 are looking up and down the road wondering

where that bus is. Countywide focus groups listed 'transportation options' as one of the top needs. Human Services projects 200,000 trips by the year 2010."

Ms. Miller concluded, "In Warren County, the implementation of the ADRC has become apparent that needs of Persons with Disabilities in many instances are similar in nature to the needs of Seniors. The resources we earmark for this population should be reflective of that need. The utilization of the Casino Revenue Funds target the most vulnerable and isolated citizens of our state and is critical to meeting the needs of New Jersey."

Elizabeth Jane Heap began, "Most of my friends call me Bow Jane or Bow, and I am totally blind from birth. I work for the Bergen County Division of Senior Services. I wanted to talk to you today was to tell you that, if it weren't for community transportation I wouldn't even be here. For one thing, I'd be a menace on the road if I ever drove, and so don't think I'd better do that. Ramsey is where I live in the northern part of the county. There is no public transportation per se, except for the train that goes into New York City. Therefore, I don't have the availability to be able to get down here without community transportation. I consider them a life line. These services are absolutely essential, and if we didn't have them, I don't know where we would be in terms of independence and in terms of being a taxpaying citizen. So I just wanted to let you know that this is vitally important."

Elizabeth Shea, Assistant Executive Director, The Arc of New Jersey, said, "Transportation services provided by the Senior Citizen and Disabled Residents Transportation (SCDRTAP) Assistance Program are the lifeline to community participation for many individual with Developmental Disabilities, most of whom are unable to drive. Unfortunately, that lifeline is not always available and the current transportation system is already overburdened, leaving more families to have to provide transportation to their loved ones. The strain on families where parents must provide transportation to and from work, shopping, medical appointments, and social activities seven days a week throughout the year is incredible. It is important to note that with a residential waiting list of over 8,000 individuals, families are already strained well beyond what they can reasonably bear. I support A2046/S1830."

Dialysis Transportation

Michael Vieira observed, "Today, many of the community transportation systems are experiencing waiting lists for services especially dialysis. Dialysis transportation is becoming a major concern, not only for the 21 county transportation systems, but also for the numerous municipalities and social service agencies throughout the state. Unlike 20 years ago, people needing dialysis transportation services were not living long lives, and seats on a vehicle frequently became available. Thankfully, with today's medical technology, people on dialysis are living much longer and normal

lives. But the seat on a bus for a new dialysis rider is less frequent, and waiting lists continue to grow."

Kathleen Edmund of Ocean County further stated, "We are also experiencing a dramatic increase in the requests for long-term standing order service to get to and from dialysis treatment. Last year, Ocean Ride provided more than 56,000 dialysis trips within our county. With that effort, we still have a waiting list which fluctuates on a daily basis, but that waiting list today is 45 individuals."

Transportation and importance of services and A2046

Dotty Cullen of Cumberland County relayed the following. On January 25, 1998, I suffered a massive stroke which left me paralyzed on the left side of my body. ..In one second my whole life changed and I have been confined to a wheelchair since. Living with a disability has not been easy. It has been a life of struggle, trials, having your values, your self-esteem destroyed. However, through the grace of God and all the programs that have been available to me in this great state, I would not be here today.

Probably most of you people don't know about or have never ridden a CATS bus. So I just wanted to explain to you. I have had to go to therapy, counseling, doctors' care --all under one roof-- and this was known as "Adult Parital Care.". It was in the Millville Hospital in Cumberland County. Now, I was in this program four months, eight hours a day. Now how did I get there? The CATS bus picked me up each morning, fully equipped, handicapped accessible , trained drivers with compassion, sensitivity, put me on a ramp, for safety. They put me on the ramp, lifted the ramp up to the bus, strapped me down for safety, and they took me there and brought me home safe and sound.

Our veterans have been using CATS for 20 years. They depend on CATS to go to the Wilmington VA Hospital for health care treatment.. There is the blind who go to the Winchester Blind Center in Cumberland County for survival. They learn how to adapt and cope with their disability. CATS takes them there everyday. There are those who go to get x-ray, MRIs, special doctors, grocery shopping, and even depend on CATS for the laundromat.

This bill A2046 needs to be passed so it can be placed on Governor Corzine's desk to be signed, and there is not doubt about it; Governor Corzine will sign this bill. You know why? Because he has experienced the trauma, the trials of being disabled. He has lived with a disability and he realizes that you need therapy, treatments, counseling, skilled doctors' care and medication to survive.

You can have all the material things in the world; you can work hard all your life and have all the things that money can buy, but you don't know what you have until you lose it. In one second, your whole life can change. You have heard from a miracle woman who came here today to ask for your support to pass this bill and allow us to live the American dream. Thank you.

Reduced Transportation to Senior Centers

Noreen Best of Bergen County reported, "Our Senior Centers serve over 8,000 Seniors throughout the county. The fastest growing segment of this population is the 85-plus cohort. These Seniors are the ones who are most dependent on the centers for the hot meals, socialization, and health and wellness programs. Because they often live alone, our centers provide them a vital link to activity, while the staff and other participants offer the comfort of someone to watch over them. Many of them don't drive or shouldn't be driving, and are very dependent on Bergen County Division of Community Transportation for getting them to and from Centers for food shopping, doctors appointments, recreational opportunities, etc."

She continued, "All of our Centers have a nutrition component, which is vital to the well-being of our older, frailer Seniors. Without the socialization, nutritional, and health and wellness programs available for these Seniors, they would be home by themselves vulnerable to depression and not eating. Participation at Senior Centers is vital for our frail, elderly Seniors in Bergen County and without transportation they can't get to a center.... The Palisade Park Senior Center doesn't have transportation to it anymore. It stopped 10 or 12 years ago."

Pat Rumi, Borough of Fort Lee Parking Authority, Bergen County stated, "The Parking Authority does all the transportation for our Seniors. We do the medical program in conjunction with the county. We bring our Seniors to the Senior Center, nutrition program, for activities, and we have a medical program that's 3 days a week for people to go to dialysis and physical therapy. There's no way anybody could cut a program for transportation because these Seniors, without transportation, become shut-ins. There is no way for them to get out of their homes. So all these programs need more money. There is no way anybody could cut them. It would just be a disaster for all these Seniors."

Anna Antoninich from Atlantic City who attends the Ventnor Nutrition site said, I beg and pray this country to give us the transportation we need. People like me, handicapped or disabled, we are so many. I need transportation for the doctors, for exercise therapy, to go to AARP meetings and for attending the nutrition program. I belong and I am very active. I try to do my best and I pray that they give to us, transportation that we need. I talk for me and for all the senior citizens.

Safe Housing and Escorted Transportation

The purpose of the Safe Housing and Transportation Program is to provide a safe environment for Senior Citizens through the provision of home repair services, safety improvements, and escorted transportation services. The escorted transportation program is prioritized to serve Seniors living in high crime areas, with special emphasis being placed on frail Elderly 75+ and Elderly living alone. Programs funded under Residential Maintenance focus on alleviating existing conditions which are detrimental to the health and safety of the Elderly. The Safe Housing and Transportation Program is administered through the 21 Area Agencies on Aging.

Susan Lennon remarks, "Safe housing and escorted transportation has not been increased ever. It's been decreased. In fact, Warren County gets a whopping \$10,000 a year to provide safe housing, home repairs and escorted transportation to our residents. \$10,000."

Bob Schavinato said, " We run the Safe Housing Program for Camden County. The objective of the program is to provide a safe home environment for Senior homeowners to prevent institutionalization in nursing homes or assisted living, which is always at the taxpayers' expense. The program was conceived in 1996, and our outcomes focus on constructing exterior ramps, installing grab bars in bathrooms, fixing windows and doors, replacing worn or broken locks, putting smoke and carbon monoxide detectors in, repairing or replacing exterior wires, and performing light plumbing repairs. This is all funded out of the Casino Revenue Commission funding. Since 1996, \$750,000 has been used to perform repairs in 3,658 Senior households in Camden County. With these funds, we were able to keep these Seniors in their homes."

He explained, "The problem is funding has been static since 1996. The needs are greater and the costs have increased. The ramp service we provide is limited to \$2,000 per house, and that limit has been in place since 1996. Since 2003, material costs have increased between 22 and 42 percent. So what one could purchase for a \$2,000 ramp in 2003 is producing far smaller projects now. Labor costs are up. Our agency is a small non-profit and we are really getting socked there. Since 2004, we have constructed 108 ramps, 68 sets of steps, 30 doors repaired or replaced, and installed 210 locks. In 2006, 649 grab bars were installed. We were able to use some money from the Community Development Block Grant Program to help offset the fact that the Casino Revenue hasn't been able to keep pace with the charges that are necessary to provide the service."

He finished, "Originally, the program was designed just for Seniors, but we began to serve the Disabled last year, when Camden merged Disabled and Senior services together under one division. Our grant restricts us to providing services to Senior

homeowners. So we can't work with tenants. We can work with people in modular housing developments, but there are some restrictions on that because of the fact that they don't always own the land on which the modular home sits. Technically, we don't have a waiting list for our service, although in reality, we do. Once the funding is exhausted for the program, we ask the Seniors to reapply when funding comes around again. So, in essence, there really is a waiting list."

Paulann Pierson, Cape May, observed, "Some municipalities allocate part of the small city's Community Development Block Grant monies to fund needs such as home modifications for accessibility. The waiting list for these funds is so lengthy, they really aren't a useful resource for situations that require an urgent response. One family had to give up the dream of caring for a family member at home, because the lack of access made it impossible to get him out to needed therapy." She continued, "There is a pilot program, the Modular Ramp and Low Tread, Low Riser Step Program in Middlesex and Union Counties. This program began in the Department of Human Services Division in 2007. It provides eligible participants with a modular ramp designed to enable people to get into and out of their homes. The pilot program is funded by the Kessler Foundation and is also supported by the Edison Job Corps, New Jersey Institute of Technology, Cerebral Palsy of New Jersey, New Jersey Department of Community Affairs, New Jersey Protection and Advocacy (now Disability Rights New Jersey), and the Middlesex and Union Counties Offices for the Disabled. The main thrust of the program right now is to get people access to employment. To be eligible applicants must either be employed, seeking employment outside the home, attending traditional vocational school or volunteering for the purpose of obtaining future employment."

She concluded, "We need to expand this program to the rest of the State of New Jersey. I would urge the Advisory Commission to recommend allocation of Casino Revenue Funds to extend this much-needed program for the Disabled of New Jersey. At the present time the Safe Home Program, is limited to Senior Citizens. Part of the problem is that many people think that if a person has a Disability, then they are a Senior Citizen. I work with people from childhood up until Senior Citizen age. Equity in some of those services would just be really acknowledging the reality."

Vice Chair Jim Thebery added, "The other piece that you brought to our attention is, with this modular ramp program, you really increase the current accessible housing stock without dreaming of this new complex one day that will be built somewhere else, which may or may not segregate People with Disabilities. This ramp program gives them more freedom to live in whatever neighborhood they please. Thank you."

Joyce Cossaboon, Shirley Eves Center, Cumberland County, asked, "If the Modular Ramp and Safe Housing program can be available in two counties, why can't it be

available in 21 counties? We need to try to find the funding and the legislation to get these things to happen." Jim Thebery replied, "As Chair of the Association for County Disability Services, for the new year, we are going to make that a priority, to look at that and see if we can get funding from either the Casino Revenue Fund or from Kessler Foundation or another source so all counties in New Jersey will have that program. I think it's overdue."

Maureen McCormick of the Chore Handy Man Program, Bergen County, said, "Elderly or Disabled Persons need minor repairs to keep their homes safe and allow them to live independently, thus avoiding costly and often unwanted institutionalization. Last year, Chore served almost 1,600 people and completed almost 4,000 home repairs. Ninety-four percent of the population Chore serves are of moderate means or less, with 72 percent at the low or extremely low poverty level. Chore performs necessary home repairs for these Elderly and Disabled clients free of charge, except for the cost of parts needed for the repair. Chore focuses on providing services to those with the greatest needs, the most vulnerable Elderly who cannot make needed repairs themselves, can't afford to pay someone, and have no other resources to help them."

She added, "Chore visits are prescheduled, and handy persons arrive in one of two vans, special marked vans, with the Chore logo. The volunteers wear clear, easy-to-read identification tags, thus ensuring that the client feels confident and comfortable in allowing them into their home. We go out five days a week all year long. Chore is also unique in that it is Seniors helping Seniors. It addresses the need for Seniors to be active and feel they are contributing to their community, because my Chore volunteers are also Senior Citizens. They range in age 60, 70, 80, and I got a couple of 90-year-old guys going out there. The Senior handy persons benefit from the interaction they get with other volunteers and staff, and also derive great satisfaction from being able to use their skills in a productive way that helps others. "

She concluded, "We do have critical needs. Volunteers are the backbone, but volunteering is not free, so funding is really necessary in a couple of key areas. We have a backlog of about six weeks' worth of waiting, because we only have two vans and a handful of volunteers. Extra funding to help us staff, like crew chiefs for our drivers are very important. We need extra money to get 3 additional vans. We have to maintain the vans, insurance is a big issue, and one part-time employee that coordinates all of this. We hope that you can continue to help fund Chore, and as I said, maybe give us a little bit extra because there's so many more seniors that need our help."

State Respite Program

Elizabeth Shea, Assistant Executive Director, The Arc of New Jersey, spoke, "The Arc of New Jersey is the largest statewide advocacy group for individuals with intellectual and other Developmental Disabilities in New Jersey. We have more than 18,000 members and families. We work to ensure that the estimated 130,000 in New Jersey with intellectual and other related Developmental Disabilities have the services and supports they need to realize their individual potential and participate fully in community life. The Arc of New Jersey is responsible for statewide policy development and advocacy activities including governmental affairs, public relations, community outreach, and information and referral. We also work closely with our 20 affiliated local county chapters who provide services to all of New Jersey's 21 counties."

She added, "Many of the supports and services that individuals with Developmental Disabilities and their families rely on receive support from the Casino Revenue Fund. Respite Care allows the parents to have a much needed break from the stress of constant caregiving. These services are already significantly underfunded, and, although we are facing difficult fiscal times, any decrease in funding to Developmental Disabilities services will be devastating. In many areas of the state, families are on waiting lists for Respite Care. Providers of services for People with Developmental Disabilities have not seen an adequate cost of living adjustment to their contracts with the state for 15 years. Please fund these programs."

Susan Riley, South Jersey Healthcare Community Services began, "I am a social worker with South Jersey Healthcare, particularly in the home care department. I get referrals from a nurse saying something is wrong in the house. What I'm seeing is a shut-in, no ramp, no meals, transportation to get to the doctor. The most vulnerable people are the ones I see in Cumberland, Atlantic, and Gloucester Counties. What I have seen that really works is the Statewide Respite Program. I am here to urge you to increase funding for that program. I am doing it in Salem and Cumberland Counties. It's keeping people out of nursing homes."

Linda Loveland, South Jersey Healthcare Community Services said, "I am here to speak as a client of the Statewide Respite Program. I am a nurse and I do home care services. My 28-year old son Jamie is totally disabled and is quadriplegic. I still have to toilet him, feed him, and totally care for him. Just this past year, I tried to use the Statewide Respite money for the first time with the Cash Advance Program, because in years past, I have used the Statewide Respite Program to take a vacation, which was great."

She continued, "This past year, we took a trailer at the shore and we added an accessible room and bathroom built on to it. We're hoping to use that money from the

Statewide Respite Program in order to allow him to share a vacation with the rest of his family. It's not fair that five of his siblings get to go on vacation with Mom and Dad, and he would have to stay home with the respite worker."

She concluded, "I cannot tell you how difficult it is raising my son every day. What I have to do every morning before I go to work and every evening when I get home from work. I take him to college on Tuesday nights. He works every day. I sit with him through his college courses every Tuesday night, because there is no transportation to take him to the college. He needs to have a career. He's not going to be able to depend on Mom and Dad forever. If I could have someone who could cross that county line with the transportation to the college, I would be freed up on that Tuesday night. It's a very difficult situation, and I welcome anyone sitting on this panel, if they had any questions about the difficulty, my son would be more than happy to share an entire day with you."

Katherine Johnston, Disabled Advisory Council, Salem County said, "I am a caregiver. I am the mother of a quadriplegic 26-year-old son. He was disabled six years ago in an accident. The services that the Casino Commission money provides are essential to our Disabled and Aging community in Salem County. Respite is relief and regeneration. It's essential to my ability to keep Dan at home."

Congregate Housing Program

Doug Struyk, CEO of Christian Health Care Center, Bergen and Passaic Counties; Chair, New Jersey Association of Homes and Services for the Aging, began, "We have 140 non-profit members throughout New Jersey who provide a full continuum of services to the Elderly. I want to address this morning those members who participate in the Congregate Housing Services Program, which of course Commissioner and Administrator White is very familiar with. 2,700 residents, 63 providers across 17 counties in New Jersey have a history of receiving support from the funding that you oversee, and it has certainly made a difference. My testimony also includes letters that we've received from members and consumers that participate from this program as well. It has certainly been a success. It's a win, because Seniors are able to live in a setting that they choose; rather than necessarily looking to an institutional setting - which Seniors continue to tell us is not their first choice. While those settings are appropriate in some cases, when a Senior can stay in their home, and if it happens to be a subsidized setting, that's certainly more preferable. It's also a much more efficient use of public resources. The Congregate Housing Services Program enables nutritious meals, housekeeping, and other important services that are needed for Seniors to remain in those kind of settings, and it enables them, again, to be used most efficiently."

He continued, "New Jersey, you're aware, is seeing a significant rise in its Senior population. Thankfully, Governor Corzine and others are supporting the need to increase affordable housing which will provide greater options and opportunities for these kind of monies to be used that much more efficiently. The JACC and the CAP programs are successful. We'd encourage the Commission to look at ways by which your funds can be perhaps eligible for federal matching. Are there opportunities under existing or proposed or potential waivers where your monies could be stretched even further by looking for those who access the CHSP program and who meet federal criteria to enable the State to pull down more funding? Might that be an opportunity to stretch? You have many worthy programs to support. I'm joined here today by people - who I'm very impressed and humbled to be among - who have great needs that they're supporting. You have the work of Solomon to do in figuring out how to stretch all these dollars, but we're thankful that this program has been among those that has been supported for so many years, and as you continue to work, we encourage you to continue to support this program and the Seniors whose lives it makes a tremendous difference in."

Senator Weinberg, Member of the Commission, asks, "Doug, do you have any specific ideas that we might share in the future on how this money can use waivers to get more federal funds?" Mr. Sturyk replied, "There are many -- if not most of the Seniors who live in subsidized housing, many of them meet the federal poverty income criteria that would enable a conventional waiver, federal waiver, for funding provided to them for these services to potentially meet that federal criteria. It's our understanding that the JACC and the CAP programs have to some extent been structured in a way to do that, but for those Seniors who access the CHSP program it's somewhat complicated. If there is a way to carve out those Seniors accessing the CHSP program who do meet waiver criteria, it's something that would be worthy of looking at. As waivers are modified whether that's the 1915 or the 1115 or the other waivers that are proposed, if there's ways to stretch those dollars and pull down more federal monies, that's a win. I'd be happy with our association both in New Jersey, as well as nationally, to work with the Department of Health and Senior Services to see if we can suggest ways in which that might be done that doesn't add a more extensive administrative burden. That is a win in a sense of being able to draw down more federal dollars, so I'll certainly pledge that support."

Marilyn White, Administrator of the Congregate Housing Services Program, responds, "...as far as the Congregate Housing Services Program and federal funding taking advantage of waivers that are out there, our program works in conjunction with a number of the waiver programs in the Senior housing sites. I know with consolidation of some of the waiver programs, in the big picture over the next several years, there may be ideas out there on how we can expand the services and take advantage of the federal match. Right now, we're working on consolidating waiver

programs to provide services in the community. Those services are also available to folks who live in the same buildings where the Congregate Housing Services Program operates. We sort of complement each other at this point and are able to expand services to some folks who may fall through the cracks in some of the other programs."

Congregate Housing programs are not available in every county. Ms. Lennon from Warren County noted, "We do not have a Congregate Housing program in Warren County. We would love to, so if that ever opened up, we'll be the first in line."

Laura Berkin, Coordinator, Congregate Service, Jewish Community Housing Corporation, Essex County began, "As one of three Coordinators for Congregate Services for the Jewish Community Housing Corporation, we serve over 250 Seniors annually at three buildings and have served Seniors for over 25 years with the congregate services grant. Our mission is to provide support services to low-income Elderly and/or Disabled residents as they age in place in subsidized housing. Services include assistance with activities of daily living, such as housekeeping, supervision of personal care, shopping, laundry and linen change, meal preparation, companionship, and weekend meals. The program allows flexibility of services for short- or long-term assistance depending on the needs of the resident. This program is a vital alternative for residents in order to avoid premature extended or inappropriate institutionalization to a nursing facility. Due to the high cost of assisted living facilities, which they cannot afford, and a limited number of Medicaid-dedicated beds, many would have no choice but to be relocated without the congregate program."

She continued, "Coordinators like myself also act as liaisons between the building staff and residents' families, many times alerting family members to a decline in physical health or mental status before their loved ones are in crisis. We act as referral outreach sources to community services for the residents and their families, many who are not aware of care options available to them. Please help us to continue this crucial program as these residents age and their needs change. Just because their ability and health is declining doesn't mean they don't deserve to continue living independently in a social environment on their own terms."

Susan Bruncati, Executive Director, Asbury Tower, Monmouth County starts, "Asbury Tower is a Senior Citizen affordable housing complex in Asbury Park. We have 350 Senior apartments; we have assisted living and the Congregate Services Program. We are one of four sites for these kinds of programs within PHS Senior Living. We serve about 100 people every day. Part of PHS's philosophy is to serve the Seniors of New Jersey and to give them options, to give them choices. We allow them to live with dignity, enabling them to age in place until the end of their lives. The Congregate Services Program is what PHS is all about."

She continued, "Asbury Tower was one of the first to receive the Congregate Services Grant. Since we started, we have seen changes in our programs in many of our buildings. We also provide persons with meals. The average age at Asbury Tower is 82. The range is from 62 to 102. Many residents are house-bound and some are bed-ridden. As we know today, people are living longer, so the needs of these services are increasing every day. There are sometimes as many as 400 people living in my building. These people are grandmas and grandpas. They have served the country, and now they are asking you for that favor in return. Without the Congregate Services Program, many of my residents would not be living independently; they would have to go to a nursing home. We do have assisted living in our building which also helps to support some of them. What does this mean to the state? The total funding of this program from the state is only \$9 million. In my building, it is \$93,000 for 100 people, or \$930 each per year. If one of the people we serve goes into a nursing home, you are talking \$72,000 a year. We are helping to keep 100 people out of a nursing home. We usually provide these residents housekeeping, laundry, a hot meal for lunch, chore services, and shopping services."

She gave an example, "Mr. G has a monthly adjusted income of \$554. His rent is \$261. His rent is subsidized by Section 8. For the rest of the month, he has \$300 to live on. You and I can't live on \$300 a month. How does this man do it? He has no family. He is a bachelor. He is an amputee and diabetic. Somehow he volunteers three times a week at the Jersey Shore Medical Center. It is difficult for him to cook, clean, and shop. How does he get by? He pays 5 cents a meal. He pays 85 cents an hour for housekeeping. He pays 75 cents a week for shopping, and 90 cents to have his laundry done. That totals to about \$14 a month."

Ms. Berkin concluded, "I will do whatever it takes to support this program, because the Congregate Services Program is keeping 100 people that we serve every day out of a nursing home. And they are living with dignity and it is their choice. We just can't take that away from them. I understand the fiscal needs of the state. I understand what the Commission is going through, but please remember Mr. G and the rest of my residents when trying to make the decision about the Congregate Services Program. Without all of you, they would be in a nursing home."

Joseph Woods, Older Americans Housing, Spotswood, Middlesex County began, "We have about 200 residents, with 120 of them participating in the Congregate Services Program. One of the things that is very helpful to our residents. The Congregate Services Program provides extra services to them in their homes when they come back from the hospital. They come back in very frail health and now they can have a meal delivered and served and other services provided. Please provide more funding for the Congregate Services Program."

Kathy Alexander, Older Americans Housing, Spotswood, Middlesex County commented on a statement from a resident, " Yvonne says, 'The Congregate Program does what it sets out to do. It enables Seniors to remain in their homes and age with grace and dignity as they intended.' Yvonne is absolutely right, it is the best program out there for Senior Citizens in New Jersey. Please provide more funding for the Congregate Services Program."

Karen Scalera, Executive Director, Oak Woods Senior Living, Middlesex County, addressed the Commission, " The congregate living center has 188 apartments in twelve buildings with 180 residents, ages 37 to 109, and they serve Elderly and Disabled. The average income is \$11,900 a year. They pay 30 percent of their income in rent. They have easy access to congregate services because there are already services in the building. 101 residents have taken part in the program in one way or another, some take meals, some only housekeeping. We have served 4,480 meals, we have provided 1,300 hours of housekeeping. And in that cost, the State saved \$68,000 per person. Disabled non-elderly residents make up about 10 percent. They try to accommodate special needs diets. A few years ago, they decided to hire their own cook so they had more control over the quality of the food, and to allow for special diets. Medication management seems to be a top priority that some people need. It's important because if they don't watch their own medication, and they miss some doses, they end up being hospitalized until their medical condition is back under control. We brought about 30 letters from residents who support congregate housing services they are receiving."

Adult Protective Services/Guardianship Programs

David Ricci, State Coordinator, Adult Protective Services (APS), State Department of Health and Senior Services began, " The abuse and neglect that I see involving our Elders in NJ is unfortunately alive and well and on the rise. In the last decade, the number of abuse cases has spread from 3,700 to 4,600 which is a 24 percent increase. Not only is the number of cases increasing, but they are becoming more complex. There is a growing number of financial exploitation cases and cases that end in guardianships. The decline in the economy is causing an increase in these cases. In 2003, 160 guardianships were instituted by Adult Protective Services. In 2006, there were 260 guardianship cases."

Mr. Ricci concluded, "The APS budget has remained at \$4.1 million since 2000. This is putting a serious strain on the county APS provider agencies. Thirteen counties use Boards of Social Services to provide APS services. Because of the financial strain, counties are dropping the APS services. In addition, five non-profit county APS agencies are even more fiscally strained than the Boards of Social Services. APS throughout the State is at a crisis. We cannot meet the mandatory statutory

requirements of responding to cases within three days. Without additional funding, vulnerable adults and Seniors are at great risk."

Adult Protective Services is not a program where a waiting list is acceptable or legal. By statute APS must respond to a referral of abuse, neglect, or exploitation within 72 hours and continue intervention until the client is no longer at risk. The county provider agencies are questioning their ability to continue to respond to a crisis within those parameters.

Scott Crowell and Gary Moellers, Cumberland County Guidance Center reported, "The Cumberland County Guidance Center is predominantly a mental health center. Scott Crowell is the Supervisor of Adult Protective Services in Cumberland County. With Adult Protective Services we investigate abuse, neglect, and exploitation with the population we call "vulnerable adults". A "vulnerable adult" is someone who is either 18 years or older who has a mental or physical disability, or the consumer can be 60 years or over without the mental or physical disability. The person must lack sufficient capacity to make and carry out decisions for themselves. So we try to help those who are really incapable of helping themselves and are subject to abuse, neglect, or exploitation. We work on a referral basis. In 2001, we averaged 70 referrals per year with two full-time staff. From 2002 to 2006, we averaged 120+ referrals a year with one full-time staff and two part-time employees."

He added, "Since 2001, there has been no substantial additional funding provided to the program. Now we have one full-time employee and a vacancy for one part-time employee. It has become very difficult to fill this position due to the limited hours. Another problem is the cost of guardianship when it is needed. The cost is probably between \$3,000 and \$5,000, which our legal line wouldn't even begin to cover. We need funding to administer the program correctly. The quality of service begins to suffer for these vulnerable adults. This is a state-mandated program. Every county has to have it and so if something were to happen and the agency were to give it up, Adult Protective Services is not something that the county can go a day without."

Gary Moellers said, "We have not received any additional funding since the years 2000. We have had to make operational changes, reduce budget lines, take the chance that we are not going to run in to guardianship cases, get creative with how we facilitate them happening, because that's something we're not able to provide even though the program says we should do that. We have had a reduction in staff. If we can't run the program the way it's supposed to be run legally, if we can't comply with the 72-hour response times, maybe we're going to have to give up the contract because we have no other money to put into the program."

Mr. Moellers continued, "With inadequate funding and too few staff, we run the risk that something is going to happen. We're going to hear on the news or read in the papers that a tragedy occurred, because we were not able to provide Adult Protective Services. We cannot continue to operate this program, nor do I believe anyone else could if they took the program over from us. I hope and pray that the decisions we make here today and as the hearings end will ensure that these funds can be available for Adult Protective Services. So at the end of the day, we can all go home and sleep well at night knowing we have done our best."

Chairperson Miller asked, "Have you always provided guardianship when it was needed? If those funds are not in your budget, where does the money come from?" Mr. Moeller replied, "We like to think of ourselves as being creative. We try to find other ways to do it. Sometimes we try to petition the family members and putting responsibility back on the family to provide those funds, or find some other means to provide guardianship costs. We have leaned on people to reduce costs. We have encouraged attorneys to be benevolent. But we fully admit that if the judge turned around and said, "I'm sorry; you're responsible for this," – and that has happened to us – we would not be able to pay the bill. We are not being given enough money to run this program."

Edward Tetelman, Esq., Acting Public Guardian for Elderly Adults, State Department of Health and Senior Services said, "We have charge of persons after they have been judged incompetent by the State. When I was appointed in 2002, we had 280 wards. In July 2008, there were 820 wards. Today, we have over 930 living wards, and approximately 200 wards who have died whose accounts must be closed out and their estates administered. The Office of the Public Guardian (OPG) is the equivalent of the Division of Youth and Family Services for the Elderly incapacitated person who has no willing or appropriate family or friend to become guardian. We are their safety net. The majority of our appointments are the result of petitions to the New Jersey Superior Court by Adult Protective Services, hospitals, nursing homes, community agencies, and individuals concerned with the well-being of an incapacitated Elderly person."

He concludes, "...No one wants an error to occur, whether is it a monetary issue or a health or safety issue. Nor do we want to cease accepting guardianships, just as we would not expect DYFS to cease accepting children in need. In order to assure that this does not occur, I am requesting that the Advisory Commission recommend \$750,000 be designated for the OPG in the next fiscal year. These funds will allow us to reduce the caseload ration and cover the cost of consultants in the next fiscal year."

Pharmaceutical Assistance for the Aged and Disabled (PAAD)

Cosmo Palmisano, reading written testimony from Louis Schwartz (from Bergen County), "Lou Schwartz is a very, very well-known activist throughout New Jersey, a leader of the AARP, and was past chairman of the Advisory Board for the Division of Senior Services, and is an active member of our legislative committee, asked me to read this statement to you. 'Good morning. My name is Lou Schwartz. I live in Teaneck. I lived in Bergen County for more than 50 years. I want to explain why I'm here today. The tremendous cost of prescription drugs has been very cruel to Seniors like me. If a person is not covered by a former employer or union, he or she must pay enormous amounts of money for prescriptions, even with Medicare Part D. People who are older, more frail, sick, and on a very fixed income like Social Security with little savings or investment are in a very bad position. The only way we can survive is through PAAD. It means our survival.'"

He continued, "My friend, Marie, who lives in Fairview, is on dialysis for more than a year, three times per week at Holy Name Hospital. Her total income per month is a little bit over \$850. Her husband was disabled at age 47 with a terrible heart condition that then lead to his death 15 years ago. She's 80 years old. PAAD is keeping her alive. Without it, she would either not be able to eat, or she would be forced to spend down the little savings that she has and go on Medicaid, so her life would be diminished, and the standard of her care would be diminished. PAAD is permitting her to stay slightly above water. She must pay \$189 a month for transportation to and from Holy Name Hospital because the county transportation is not available early in the morning when she's required to go for her dialysis."

He concluded, "PAAD is funded by the State of New Jersey partially through the Casino Revenue Fund. We desperately need to keep this program funded by the Casino Revenue Fund. Thousands of Seniors in Bergen County are covered under PAAD. If this program changes, or, God forbid, ends, these people will not be able to pay the monthly premium for Medicare D, which could be \$30 a month, the co-pays, and then the dreaded doughnut hole will make their lives impossible. It's especially important for people on dialysis, and those who qualify for PAAD. "I can't get it out of my mind this morning that my friend Marie who is struggling to stay alive, weak and frail, has so much trouble even getting on the van to go to the hospital and lives in Fairview, is surviving only because of PAAD. She's in pain, she's weak – she's frightened, and she needs our help. Please keep her alive. Marie needs you."

Mary Ann Jordan, Cumberland County, remarked, "You might ask where this money will come from. Well, recently the Governor has passed an increase in the PAAD from \$5 to \$6 for generic brands and \$7 for name brands. This is a great hardship for many Seniors, including myself, who are on PAAD, especially if you're on multiple drugs on a regular basis. Now the PAAD increase will result in an anticipated savings of \$11 million to the state and would be more than enough to support the increased

number of citizens who would become eligible for the property tax deduction. And furthermore, since the implementation of the Medicare D program, the PAAD program has saved millions of dollars."

While the PAAD program is a lifesaver to many Seniors and Disabled residents, the increased co-pays for prescription drugs are a hardship. At this time, it seems that PAAD is unlikely to have any more reductions in funding. However, there is always the threat of further increases in co-pays, changes in the financial eligibility requirements for participants, and reductions in the program due to lack of supplemental funding for PAAD from the State General Fund. Some Seniors and People with Disabilities on PAAD are already wondering how they will be able to pay for their medications, food, rent, and transportation.

Personal Assistance Services Program (PASP)

David Grennon, Director of the Cumberland County Office for the Disabled said, "I would like to first say that all of the current Casino Revenue funded health, financial, and social services programs are important to our clients in their efforts to maintain their independence. Among these is the Personal Assistant Services Program. This program is very important because it provides personal and home care services that allow Individuals with Disabilities to reach their full potential in education, employment, volunteering, or parenting."

Laura Ramos, Member of Commission, said, "One of the programs that is funded by the Casino Revenue Fund is the Personal Assistant Services Program. If you are over 18 and up to the age of 65, and you are able to have the capacity to fill out a plan and monitor assistants, and you go to work, to school, you volunteer or you parent, you can qualify for this state program. Hunterdon County is one of two counties with the Cash Management Program; it allows one the freedom to hire one's own Personal Assistants - with or without the use of an agency. Aides can drive a vehicle, take one places, run errands, do the shopping, laundry, basic housekeeping and personal care assistance. I believe that the PASP program, which allows me to volunteer on this Commission, is one of the best programs for the Disabled in the State of New Jersey. The PASP program received more funding a couple of years ago to eliminate the waiting lists. There needs to be more funding for this vital program, because there is a new waiting lists for eligible People with Disabilities who need these services."

Ms. Loveland at the Atlantic City hearing spoke of her son, " He is part of the PASP program. However, there are not enough hours nor enough reliable help out there. He qualifies for 25 hours a week. When you figure that it takes two hours to give him a shower, you've blown four hours right there. You figure his class is three hours long. This young man has been working on a college degree since 1999 and does not have his Associates' degree yet. Even when he used the PASP program, I was still

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probably responsible for more than 50 percent of his transportation because, at the last minute, someone would call and cancel. The two programs that are very, very important to us are transportation and the Respite Program."

Global Options for Long-Term Care/ Aging & Disability Resource Connection

Susan Lennon, Executive Director, Division of Aging and Disability Services, Warren County addressed the Commission, "In March of 2004, Governor McGreevey executed Executive Order number 100 which authorized the development of the Global long-term care budgeting process. The next year on April 25th, Governor Codey signed Executive Order 31, which named Warren County and Atlantic County as the Aging & Disability Resource Connection (ADRC) pilot counties for the State of New Jersey. On June 21st in 2006, Governor Corzine signed, and Senator Weinberg was the prime sponsor of this legislation, The Independence, Dignity, and Long-Term Care Act -- Choice and Long-Term Care Act, which reallocates state institutional long-term care dollars for use in home and in the community."

She pointed out with pride, "With all of these additional blended funding sources for community-based programs in New Jersey, older and disabled adults through the ADRC, Warren County *leads* New Jersey in obtaining additional funds for the provision of in-home services and community-based care. In a report I just received from the State Division of Aging and Community Services, Warren County with a population of 102,000 people that ranks 19th out of the 21 counties in New Jersey, we rank 19th with 102,000 people. We are 9th in land mass, we have 365 square miles. We have 256 people per square mile, as opposed to the state average of 1,044. We're a rural county. Our little county has drawn down and captured the third largest amount of funds for Medicaid waiver and home- and community-based services than any county in New Jersey. I want to point this out because the floodgate has not opened yet. Not every county is an ADRC county. We have been very aggressive in capturing dollars and assessing people and making people eligible; also trying to bring services to the Population with Disabilities up to a level that would equal those services available and dedicated for Senior Citizens."

She wondered, "If little Warren County can enroll and serve this many people, where is the money going to come from when the other 19 counties in the State of New Jersey learn how to tap into this fund? That means this money from the Casino Revenue Commission is going to be more important than ever in filling the gaps in services. One of the major services that we find most needed is in-home services. Indeed the population of people 85 and older, as it was stated before, are growing faster than anyone - albeit the population 60 and older is growing very quickly also - the oldest old is growing the fastest. We also have people who are Disabled between 18 and 64, who need in-home services and who are entitled and eligible for it. In a

rural county such as ours, even though in the State of New Jersey, no county is regarded as rural -- and I would invite anyone to come to Warren County so I could show you how not rural we are. In fact, I know Lou Ortiz is probably still driving around out there. Transportation, home health care, respite care, home health aides, homemaker services -- our aides can't hop on a bus or go to a congregate housing building and work all day. They go from one house and drive 20 miles to the next house. And with the price of gas and a reimbursement rate -- it's nearly impossible."

She concluded, "We need to take a look at inadequate Medicaid and Medicaid waiver reimbursement rates to the home care provider agencies. We need to increase those rates, we need to look at -- we need to hold hearings, we need to take a look at differentials for rural communities so that we can provide services. We cannot get aides -- we have a hundred and six people waiting to be enrolled in the Global Options program that we can't enroll, not because we don't have the money. We do. We don't have the people to serve them. And that's the problem. And that's going to be our crisis. We're building this system on toothpicks, the backs of these home health aides and systems that we can't meet the need of the people. We're bringing them home, but we can't serve them."

Senator Weinberg contributed, "I appreciate your bringing that issue forth in terms of home health aides and the global budgeting bill, something I'm very familiar with. Although you're pointing out the problems in rural Warren County getting home health aides, we have the same problems in urban Bergen County. There is no mass transit system to get people from point A to point B. It is the very problem that I have been concerned with since the day I got involved with this bill; that once it was passed and signed, how are we going to have the employment force to fill the needs? I have a meeting coming up later in this week with the Department of Health and Senior Services to discuss these very same issues. I'm glad that you reminded me of these problems."

She continued, "It is much more economical, much more appropriate to keep these people who can stay in their homes rather than institutionalize them. The home health aide field is a very low-paid field, generally. We do not remunerate these people the way they should be. One of the biggest problems we've heard from the home health aide agencies is that if the home health aide has a car, they're usually some kind of an old clunker that is constantly breaking down. It's the main reason for home health aides not showing up at a given appointment, not because somebody is lazy or anything, but because they just can't get there. This is a basic problem that all the others are built on, so although this hearing is overwhelming I'm sure for all of us, as we again are reminded of the size of the problem."

Petitions for New Services Funded by Casino Revenue Fund

Some members of the public came to the CRFAC hearings to ask for funding to continue model programs or to fund new programs. The Casino Revenue Fund is supposed to create new programs for Seniors and the Disabled. It has been many years since a new program has been funded.

Homelessness Prevention/Need Accessible Shelters

Ms. Fedele and Ms. Wulderk also provide other emergency services to the needy. Ms. Fedele's agency also has a homeless prevention program. They provide rent and utility assistance to keep people in their homes. They also pay security deposits to allow people to move into affordable housing. There are many Seniors who need that security deposit in order to move into an affordable apartment. Many Seniors live on Social Security and have no other retirement benefits. Ms. Fedele says she sees ranges from \$631 to \$1,160 per month income, while the average price of a monthly rental of a one-bedroom apartment is \$947. She adds, "That doesn't leave very much left over to pay for utility bills and other expenses. Money for food becomes discretionary spending...As homelessness is increasing, we ask you to do everything you possibly can to help the low-income Seniors and Disabled."

Diane Stroyzk, of the Division of Homeless for Cumberland County, does referrals for people who are homeless; she tries to get them in shelters, rentals, subsidized housing, anything to get them out of a homeless situation. She notes, "In the past year, we have seen a noted increase in Senior Citizens that are homeless." Seniors become homeless due to home foreclosures, rentals with utility bills added - where in the past utilities were included. She adds, "In many of the subsidized Senior units, there's a thing called 'third party utility bills', which in that case the utility costs sometimes are more than the cost of the rental. They can no longer afford to stay in their subsidized housing." Another example is that of Seniors signing over their homes to their children and then being kicked out. Some Seniors can't afford to keep up their homes or even stay in their rentals. Twenty-five percent of Cumberland County's family shelter's clients this year have been Senior Citizens. Last year, it was a rare occurrence. Now it is commonplace. "Another statistic we have in our family shelter in Cumberland County is that 50 percent of them are Disabled." What's worse is she adds, "...If they are too disabled and cannot take care of themselves, they are not allowed to go into the shelter. We do not have Disabled facilities in the homeless shelters."

Ms. Stroyzk suggests solutions to prevent homelessness for Seniors are "Food assistance is number one...Utility assistance and rental assistance. We could also create more Senior subsidized housing." She supports A3103, which would create a County Homelessness Trust Fund, which would be allowed to build affordable housing, rental assistance vouchers, and supportive services for the homeless.

In their testimony, Ms. Fedele and Ms. Stroyzk indicated that there were no facilities appropriate for People with Disabilities, including the frail Elderly with mobility problems, available in their counties' homeless shelters. Laura Ramos, a Disabled Member of the Commission, also noted that when she was homeless early in 2008, Hunterdon County had no provisions for shelter of Disabled persons nor Seniors with mobility impairments. With encouragement from Stuart Weiner of the Community Health Law Project, Ms. Ramos, and others, Hunterdon County assessed the accessibility of all temporary housing units and came to an arrangement with one hotel to take county vouchers for needed accessible rooms. It is essential that the State of New Jersey and each county administration take action to provide appropriate temporary and permanent housing for these most vulnerable among the homeless.

Improved Interpreter Services for the Deaf at Senior Centers

Rose Pizzo, Senior, Deaf Senior Citizens of Midland Park, Bergen County signed, "Good morning. Good morning to all of you. My name is Rose Pizzo. My husband is here with me this morning -- his name is Vincent. I was born deaf. My husband is also deaf. I am here to represent a group known as the Deaf Senior Citizens of Midland Park, the Northwest Center, and what I'm doing right now is I'm utilizing American Sign Language, and the sign language interpreters are here telling you what I'm saying. I thank these interpreters very much, as should all of you, so that you can understand what I'm saying. I thank you for providing the interpreters."

She explained, "Back in 2000, we began meeting at the Midland Park Center. We were invited -- the Deaf Senior Citizens were invited, and we were so pleased by that because for many Deaf Senior Citizens, they were isolated in their own towns and communities that were quite far. They live in Dover, they live quite far from the particular center. The Senior Centers that were available in their own towns were all for hearing people, predominantly. There was no one there for the deaf individuals to be able to socialize with. They weren't able to communicate, to understand, to be able to socialize and play games. So when we set up this Northwest Center, it was the first time that this was done. Deaf Seniors flocked to the Center from all over the area. We had things to do, we were able to socialize with each other. We set it up on Thursday for just for one day a week. The Center is open every day, but our deaf individuals meet there on Thursdays. We said fine, okay, that's fine, we'll take it."

She continued, "We have such a good time. We get together, we chat, we play games, we support each other. We find out what's happening in each other's lives. We've met new friends, we've been able to cement relationships with old friends. It's wonderful, everyone comes, and it's such a valuable and important part of our lives. We range in numbers from 15 to 80 individuals showing up on any particular Thursday. We socialize, we have parties, and we go on trips together. We discuss many, many issues that concern us - mostly related with health problems and things that we can discuss.

Some individuals when they go to the doctors, they do get interpreting services; others do not get interpreters, so they're forced to write notes back and forth with their health care providers. That's a problem within the Deaf Community and in other aspects in our life is an inability to get Sign Language Interpreters."

She noted, "In 2002 or 2003, a Social worker had an office in that center. We noticed that many of the Hearing Seniors would go into her office and discuss various problems throughout the day. The Social Worker was helping the Senior Citizens with various problems they needed assistance with. We decided as a group we also would like to go in and get some assistance. We realized that it would be a wonderful opportunity. So many times we get complicated mail related to our health care, related to insurance, that we didn't understand. The Social Worker realized that the Deaf Senior Citizens have needs too."

She related, "Unfortunately, communication with the social worker was difficult. We would write notes back and forth with her. Sometimes we would understand, sometimes we couldn't. The Social Worker contacted Noreen Best. Noreen Best realized the need to have Sign Language Interpreters and obtained funding for that. This happened around the time that Medicare Part D came out; it was overwhelming for so many Seniors to try and understand. Noreen secured funding for four days, so that we would have Sign Language Interpreters help us to meet with the social worker one-on-one; to be able to fill out the necessary paperwork. It's wonderful to be able to have the interpreters to be able to provide counseling and help with various things. Family Counseling provided the funding for us to continue to have Sign Language Interpreters once a month for a period of 20 months. However, that funding has run out. We would like to have the same opportunity as Hearing Senior Citizens that go to centers. We would be very satisfied if we only have interpreters provided for us maybe once or twice a month. We'd be happy with that. We simply want access to the same information that Senior Citizens who can hear have access to."

She concluded, "We are deaf, and as Deaf Senior Citizens, we are very frightened. We do not have access to this information and we cannot afford the Sign Language Interpreters. Lip reading is very, very difficult, and it is a source of much misinformation. We're hoping that you would help us to provide some funding, so that we have access to Sign Language Interpreters in the future. It is very, very important for our community."

Alice Soll, Senior Deaf Resident, Midland Park Senior Center, Bergen County signed, "My name is Alice Soll. I've been profoundly deaf since the age of two from spinal meningitis. I now reside in Hackensack for ten years. I lived in River Edge for 44 years. And before I continue, I want to point out that the deaf role model representing the deaf community, I hope you will endure a little patience in viewing

my sign language that I present today. It can take two or three times longer than it takes for a similar verbal presentation."

She pointed out, "As a representative of the Deaf Senior Citizens, I want to let you know we've gathered once weekly on Thursdays at the Northwest Bergen Senior Activity Center at 4650 Centre Street in Midland Park since September 2000. I'm standing here with the utmost support of several Deaf Seniors sitting in the audience to plead our appeal to the Atlantic City Casino Commission for their consideration in providing the urgently necessary funds from Atlantic City Gambling Fund for our once-a-month ASL Interpreter Services. This funding will be a huge assistance to Sheila Brogen, a very dedicated Social Worker. She has a list of consecutive appointments for visits from Deaf Seniors in her office for consultations with ASL interpreters aiding in the communication with their translation skills. The financial funding has been looked into and not made available for Sheila's needs for ASL interpreting services."

She continued, "Our variety of programs consists of vital information on complicated health care, medical prescriptions, and medical policies that are difficult to follow and understand. Also, the auto or home insurance policies, legal, family and social services, and not forgetting to learn about our ever-changing Social Security and federal benefits. Since all of these are regularly accessible to the Hearing Seniors, why don't we have the same delivery of educational knowledge to the Deaf Seniors? That's fair enough. Or are we being left behind? ... If accepted for funding, we look forward to the Casino Commission to develop their design for legislative language to ensure that the financial provision will be sustainable on a permanent, yearly basis."

She concluded, "In closing, in fairness to Deaf Seniors, as lifelong New Jersey residents, especially as legal taxpayers, we are anxiously looking forward to your affirmative consideration; with soft spots in your hearts in placing our needs on the top of your priority list for your financial distribution. The approximate amount I would guess would be in the range of \$1,500 to \$1,800 for the sponsorship. However, this amount can be worked out with Sheila Brogen for the estimated disbursement. Factually, one can guess that the Atlantic City Gambling Fund is the result of the casinos' gains in their favor from the clients' losses with holes in our pockets, but its usefulness now would be our payback."

Vice-Chairperson Thebery responded, "I just wanted to make a brief comment on a possible source of additional funding -- and I know some from the Midland Park group, and they are a great group. It would be the Henry H. Kessler Foundation in West Orange. The person to contact would be Elaine Katz. The Kessler Foundation's primary focus is in education, but they also have ancillary grants of \$10, \$20, \$30,000 and so forth. As well as educational grants of \$500,000 plus. Certainly with what

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you've just shared, the education aspect alone I think would warrant consideration. You might not want to let that go by, and get into the next funding stream for the new year."

It should be noted, that the American with Disabilities Act requires governmental agencies and services be made available to the Disabled. Therefore, the communication accessibility problems encountered by the Deaf Seniors at the Senior Center in Bergen County - or anywhere else in New Jersey - are ones that need solutions. The percentage of the population with hearing loss and deafness increases dramatically as people get older. In addition to offering ASL Sign Language Interpreters or hiring bilingual English/ASL fluent staff, it may be a good idea for Senior Centers to offer classes in ASL to other Seniors, those losing their hearing, and to their staff. Hunterdon County, which has a smaller population of Deaf Seniors, is looking into hiring a service that uses video computer links to an ASL Interpreter, so that a staff member may more effectively communicate (who communicates verbally with the ASL interpreter) with a Deaf consumer (who signs via webcam with the ASL Interpreter). Making reasonable accommodations in staffing and services for those using ASL, is as important as making modifications for those in wheelchairs.

Affordable Accessible Housing/ Programs for Disabled Students

Eileen Goff, Executive Director of Heightened Independence and Progress (HIP), Bergen and Hudson Counties said, "We have two Centers for Independent Living for People with Disabilities in Bergen and Hudson Counties. There are 12 such agencies throughout the state. HIP has been providing services for the Disabled community for the past 30 years. The needs of Senior Citizens and People with Disabilities are frequently the same. According to a recent survey before our economy has recently had all these bad things show that 79 percent of people of working age who are able bodied are employed; however, only 37 percent of people of working age with disabilities are employed. There are many reasons, some of which will include lack of opportunity, lack of education and training, occasionally health issues, and discrimination. But what it all means is People with Disabilities are of very low income all too frequently and have not too many opportunities to change that situation. We've been hearing this morning about these critical needs, and I would just like to touch on two of them which have already been addressed."

Her first point was, "One is the need for affordable accessible housing. The small amount of housing that is affordable for people of low income has a minuscule proportion which is accessible to people who have mobility issues, and I think it's a subject that is frequently not realized." Others also noted the lack of accessible housing, especially for low-income Seniors and the Disabled of New Jersey.

Her second point was, "I have another issue that has not been touched on today, and I would like to bring it to your attention. According to New Jersey Department of Education, 230,000 People with Disabilities are between the ages of 6 and 21. For that reason, in 2004, the Department of Education received federal funds for a three-year period which were shared with the 12 existing centers for independent living who cover the 21 counties in our state. The purpose of the funds were to work with high school students who have disabilities to assist them to prepare for their life by developing skills to access the services that are there. Once the school bus stops, the majority of services for students stop because the schools are prepared to train students in education, but not the special needs that they'll have to continue their life. Critical areas such as access to transportation options, developing resumes, preparing to go to work training programs, and a myriad of other areas are required by these young people. Once the educational services stop, the young person with disability begins receiving Social Security and Medicaid and stays home watching TV. Families are overwhelmed, by their parental obligations in this case."

Ms. Goff concluded, "After the three-year initial period through the Department of Labor, the Division of Vocational Rehabilitation Services continued the funding for one year. Future funding for this program is very much in jeopardy. I am asking this body to consider the expenditure of \$700,000 annually to support this initiative. During the last four years, 8,000 young people in high school have received services through the statewide program. Investing in our youth today can prepare them to be employed, self-sufficient taxpayers as they reach adult life."

Community Mental Health Programs for Seniors

Mary Anne Ross, Coordinator, COPSA Institute for Alzheimer's Disease at the University of Medicine and Dentistry of New Jersey explained, "I'm the coordinator of a statewide resource center for older adults who suffer from dementia and their families. We're part of the University of Behavioral Health Care, and for 20 years I've been working with older adults and their families. Not only regarding dementia, but other mental health issues for older adults. This is an area that's overlooked. For the most part older adults have been under served in terms of mental illness. Older adults were thought to be non-compliant or uncooperative, and mental illness isn't identified as such. How many times have we heard people say, "Ever since dad had his heart attack he doesn't seem like he used to," or, "Aunt May has gotten to be a real nervous Nelly," or "Grandma's really kind of changing"? People don't identify those things as anxiety or depression; they might identify dementia or confusion, but Older adults are really at risk. A lot of the conditions - the physical problems the Elderly have - high blood pressure, diabetes, heart attacks - can also have these co-morbid conditions of anxiety, confusion and depression. It's very important that those conditions be treated, because they're associated with very poor health outcomes. They're associated with

increased mortality. In the case of depression, we often see older adults who eventually commit suicide. Older adults have the highest rate of successful suicide of any population in the country."

Ms. Ross said, "One of the things that happens is because of the stigma associated with mental illness, people aren't identifying these conditions or problems as mental illness. People aren't being treated for it. The people who are treating them are their primary care doctors, and some of these doctors are doing a good job, but some of those doctors (just like a lot of people in our society) are ageists. So, when an 80-year-old comes in and says, "I don't have any get up and go. I don't know what's wrong with me lately. I don't know, I feel lonely. I feel lost." The doctors don't identify that person as being depressed. They'll say, "Well, let's see if we can change your arthritis medicine" or "Let's see if we can do something else for you". They won't identify the underlying mental illness. Some statistics indicated that 40 percent of the older adults who committed suicide saw their primary care doctor the week before. That's astounding and horrifying, so it's an issue that we need to address."

Ms. Ross continued, "COPSA originally started in 1973 as a geriatric outreach program, because older adults were identified as being under served for mental illness. Part of the mission of the Community Mental Health Center, which is now University of Behavioral Health Care, was to work with these families. We have an outreach program that goes out into the community and works with families and patients. These model programs have proven to be very successful, because they're very time intensive. Workers go out and establish a rapport with a patient and the family and that takes time. Our Outreach Workers then try to overcome any obstacles a person might have to utilizing services - problems with transportation, with getting medications, etc. They also identify which patients may be able to utilize psychiatric services. Fortunately, at COPSA we have five Geriatric Psychiatrists. The Outreach Workers are able to go with the patient and the family to the Psychiatrist, and have everybody work together."

She concluded, "What I would implore this Commission to do is consider the mental health concerns of Older adults. It does have a deleterious impact on the quality of life and on life itself. I would suggest that you really consider different kinds of programs to educate people about mental illness in Older adults. There need to be more Community Mental Health Outreach Programs for Older adults."

Ms. Ramos shared, "My next- door neighbor, who was over 70 years old, suffered a heart attack, and was never the same. She became more and more reclusive; she talked about dying all the time. Her family tried to get help for her, but the doctors never gave her the mental health services they begged for. Neither her primary care doctor nor her specialists even recognized it as a mental health problem. Even when

she was in the hospital and choosing not to eat, she remained untreated for her depression. She died, because she starved herself to death. I agree that more of these services are essential for our Seniors and their families." Ms. Ross added, "That happens very often."

Marilu Gagnon, Director, Atlantic County Division of Intergenerational Services spoke, "We are concerned about a growing trend in all counties in New Jersey, and that is the increasing need for community-mental health services. What is happening in all the county Offices on Aging is we are receiving increased referrals for Seniors (age 60+) who could benefit from mental health services. We believe county residents are going untreated due to the lack of availability of community mental health services. The clients with mental health issues do not get services such as home-delivered meals, home care, etc. - all services that are designed to help people remain living in the community. Many are difficult to help, because they remain untreated. The Casino Revenue Fund does provide funding for Adult Protective Services and we keep getting increased referrals for clients with mental health issues. We would not be getting those referrals if we had greater availability of mental health services. It is difficult to help these clients with their other problems, while their mental health problems remain untreated. We would like to see mental health community services available even before clients become 60, because then they might not even need our services."

Concerns About Casino Revenue Fund Expenditures & Accounting

Nina Levinson, Fort Lee, NJ, said, "I want to address this Board because in the past, the revenues were abundant and used for all kinds of other purposes than they were intended. They were allocated for Seniors and I believe for schools or for children. That was both ends of the spectrum. However, in the past, they were used for all kinds of things. Now that the revenues are low, all the other stuff has to be thrown out, and the Seniors have to get their appropriate allocation, and the funds have to be directed at what they were intended for. And I think you have to consider the priorities, and from the priorities first, and everything else second, and that is really what I want to say. Do not allow this fund to be raped by other purposes. That is my fundamental message."

From a letter by Dr. Suryakant Shukla, Indo-American Senior Citizens Association of Bergen County, which is a non-profit organization, the Federation of Indo-American Seniors Association of North America, and the Indo-American Seniors of New Jersey (as read by Joan Larkin): "We strive to improve the lives of our Seniors by providing vital information on public and private programs, so that they can become productive and vital citizens of our society. We also create a stimulating social atmosphere under healthy conditions. Economically, our Seniors strive to survive by the efforts of relatives in social, state, and national organizations. It has been very hard in these bad

economic times, when most of our Seniors live on fixed incomes and are trying to make ends meet by cutting corners. ... We have noted recently that to get Meals on Wheels, you have to be on a waiting list in Bergen County, and many other counties. Transportation needs to get to food stores and to medical facilities are not being met. Transportation has been getting more and more difficult, especially in the rural communities."

She continued, "The allocation of the funds in the State of New Jersey have not been increased for Meals on Wheels or transportation in recent years. Our senior population is increasing rapidly, and as soon as the baby boomers enter the Senior population, the demands for services are going to multiply drastically. The Casino Revenue Fund was established for these very reasons, but the benefits are not keeping up with the demand. I am not sure if the funds are not being distributed fairly to these causes, or if there is some other problem, but on behalf of our organization and our Seniors, I strongly urge the members of this Commission, our elected officials, and the Governor of New Jersey, Mr. Jon Corzine, to look very closely and favorably into this matter."

John Wanat, Executive Director of the Monmouth County Division of Aging, remarked that the revenues from the Casino Revenue Fund have increased steadily every year, but not for crucial programs like Meals on Wheels. Our goal, and yours, is to keep people in the community as long as we possibly can, with dignity and caregiver support services. The cost of institutionalization is far more costly than the costs of meals and transportation. In addition to the 14 million dollars requested (for programs of Transportation, Meals on Wheels, Safe Housing, Adult Protective Services, Congregate Housing and Respite), we are also recommending an automatic annual cost of living increase for programs for the elderly and disabled for these programs.

Wilson Woolf spoke, "Moreover, since 2006, the federal Medicare Part D program has saved New Jersey Casino Revenue Fund a minimum of \$180 million per year in PAAD expenses. Funding to support our most vulnerable, isolated, abused, and frail residents is stalled. Many questions remain. Medicare Part D has reportedly saved the Casino Revenue Fund PAAD program an estimated \$180 million per year since 2006.

Where are these funds? Have those and/or other funds been manipulated to support the New Jersey general fund deficit? With the aforementioned savings to the Casino Revenue Fund, please justify how these vital life-sustaining programs such as home-delivered meals, adult protective services, safe housing, respite care services have not even received so much as a cost-of-living adjustment to their budgets in over a decade; nor as the New Jersey Constitution outlined, have there been any new programs developed."

He continued, "What is the function of the Casino Revenue Fund Advisory Commission if their recommendations are discarded? How, then, can the rights and privileges outlined in the New Jersey Constitution be equitably afforded to all residents who are by nature free and independent and have certain natural and unalienable rights which are those of enjoying and defending life and liberty and of acquiring, possessing, and protecting property and pursuing and obtaining safety and happiness when all persons are not given the opportunity to obtain safety and happiness? The Casino Revenue Fund has fallen short in meeting the mandates of the New Jersey Constitution. Existing programs have not received funding, nor have new programs been developed to meet the needs of New Jersey Senior Citizens and Residents with Disabilities.

He added, "On behalf of the Area Agency Service Advisory Council of Warren County, New Jersey, we encourage the New Jersey Casino Revenue Advisory Commission to continue their efforts -- and we know you're making efforts -- in making recommendations for the use of Casino Revenue Funds to support services for Seniors and Residents with Disabilities. But I think we need to get back to basics, and we need to implore the New Jersey legislature to immediately convene public hearings to examine the utilization of Casino Revenue Funds and to develop a long-term strategy to ensure that the Casino Revenue Fund will, for years to come, continue to meet the needs of our growing Senior and Disabled population of this great state. I think we need to look at what the constitution says and reconcile it with the reality of the funding; to make sure that the funding that we should be getting for our Seniors is there, because that's what the law says. I really would like to have your full support in that."

Katherine Johnston: "One last thing about the casino agreement that someone spoke to, what you were supposed to do when you came into the state, there's a lot of folks that wonder what you do for the state. My mom has known for years, and that has been her excuse to come down here (Atlantic City) for a long time now. She's still contributing. Obviously, these are people who are fortunate enough not to need the services that that support provides. I just really want to thank you. It really means a lot to all of us, and I just want to thank you. I feel like I know it is mandated, that you have to do certain things, but we appreciate it very much."

Joseph Tyrrell, Member of Commission, and representative of the New Jersey Association of Casinos spoke, "As a representative for the casinos, I just want to make our commitment very clear. We are one of the largest associations in New Jersey. We do want to say that we have a great responsibility to everyone in the state of New Jersey, every county. We are taking our responsibility to be a useful citizen very seriously, making sure that the Casino Revenue is well-funded, it is executed for all Seniors, for all Disabled in the state, and making sure that every person in New

Jersey understands that there is a good relationship between this Fund and the Association."

Mr. Tyrrell commented, "After hearing your testimony, as an association, we've had similar conversations about the Revenue Fund where it's driven, when it gets to the state, how it's allocated, what happened with Medicare Part D, how it impacted the PAAD program. As to the casino revenue, we're trying to keep it afloat and keep it at least steady, and we know what's happening with the economy. We've noticed a few other things in the past-- what happened in 2006, when we had a budget shutdown in New Jersey and the casinos were closed for a few days. The Casino Revenue Fund had zero funding for a couple of days. We want to know what happened. How did we adjust for the PAAD program? How did we just examine, work with treasury to figure out if we were shut down for four or five days what happened to those funds? How did you make up those funds and provide the service?.. and the administration wasn't really forthcoming about the information. So from an industry viewpoint, we want to be helpful. As we collect the tax and put it to the fund, we want to make sure it's being properly used and spent. Also monitor it properly, the way it is pointed out in the constitution.

Mr. Woolf said, "I think together we can get somewhere with this."

Senator Weinberg contributed, "I just marked up your testimony here, by the end of the week a letter will go forth to the treasurer. I will ask for an accounting with a copy to the budget committees of both the assembly and the senate, to see if we could get some good, clear answers on what's coming in and how the money is being used."

Mr. Woolf added, "And actually, I would like to see that from the first -- they should have an accounting from day one of what happened to these monies and I think we should ask for it."

Ms. Ramos remarked, "One of the things that you didn't mention is that in the 30 years that the Casino Revenue Fund has been in existence, the Casino Control Commission collects all the money and then the State puts it in this other fund. For example, they're supposed to accrue all of the interest for this fund (which is over \$400 million a year right now) only to the Casino Revenue Fund. Yet, in all the financial paperwork that we've been given, there's no accounting for the interest. We don't know what's happened to the interest. In the 30 years that the fund has been in existence, there has never been an audit. Our report does ask for an audit of the fund so we can answer those questions."

Chairperson Miller, "I think somebody from the Office of Management and Budget should be here to perhaps shed some light on the auditing of the Casino Revenue Fund. This would not surprise me if the audit was considered to be part of the whole

state budget audit. A separate audit in and of itself, that is probably what is lacking. I have also been assured by the Office of Management and Budget, that any questions that are appropriate for their response should be given to them as they could not attend this hearing or the Trenton hearing because of the budget time in Trenton. As far as the interest goes, that has been a question off and on with the Commission. I believe that we used to get a better picture of the Casino Revenue Funds on an annual basis when the Casino Control Commission gave a financial statement and included that in their annual brochure to the public. About three years ago, this was no longer to be. You had to go on the Internet and it was very difficult -- difficult for me to find anyway, on the Internet. So we will revisit that particular information being published again. Then we can maybe get a foothold on the question of the interest. We will bring that up also as part of our agenda for the next meeting."

Mr. Woolf cautioned, "Don't forget having a public hearing in addition to that because I think we need to get some answers and we're not looking to shoot anybody. We just want this thing to happen fairly and be distributed the way it was intended under the law"

Ms. Anne Miller said, "All I can say to you is that many years ago I was looking at the Casino Revenue Funds with a total quad living in Morris County, where I used to live, and we both wondered who had their hand in our cookie jar. So please, I am with you. I don't want to see the legislature reaching their hand into the cookie jar to balance the budget again."

Mr. Viera remarked, "In regard to the Casino Revenue PAAD program, what the state is doing is not in the best interest of these crucial Senior programs that continue not to receive sufficient funding. The Federal program under Medicare Part D is providing reimbursement to NJ for PAAD in the amount reported by the state of \$180 million per year. Would it not make sense for the state to put that money, at the very least a percentage, back into the Casino Revenue Fund for those heavily utilized and underfunded programs? Why is the state putting all the savings into Treasury? I remember for many years, the state revenue did subsidize the PAAD program. But in fiscal years 2007 and 2008, the state reported contributing \$0. Somehow the State walked away with a profit of tens of millions from Medical Part D reimbursements. These are monies that could help folks survive. Let's not forget the additional \$5 to \$7 million savings each year the State realizes, because certain medical reimbursements became disallowed through the PAAD program, such as diabetic supplies. The State needs to reconsider what they do with PAAD reimbursements."

He continued, "Besides trying to recapture some of the PAAD savings, other long-term solutions, not just for transportation but for all the programs in the Casino Revenue Fund, could include investigating the possibility of revising legislation on

the AC Casino Comps and the parking tax that at one time were in the Casino Revenue Fund . In regards to the parking tax, I believe that after it sunsets out of the Casino Revenue Fund, it is redirected into the Casino Reinvestment Development Authority. We need loud voices and strong Legislators who will then make these funds go back to the programs that help New Jersey Senior Citizens and those with physical disabilities....Another suggestion would be getting a percentage of the horse-racing profits. Isn't horse betting gambling?"

Mr. Kevin Garvey, of the Casino Control Commission, gave a presentation (in Atlantic City) of the function of the Casino Control Commission, its activities, the sources of revenues contributing to the fund, the amount collected in 2008 (\$410.2 million), and trends affecting the casino industry. He emphasized that the CCC collects the funds for the Casino Revenue Fund (CRF), but exercises no authority over the expenditures from the CRF. The economic crisis and downturn in casino revenues (-\$34 million less taxes), along with legislative changes diverting taxes from the CRF to the Casino Reinvestment Development Authority (CRDA)(-\$55 million less taxes), have resulted in an \$89 million decrease in CRF revenues since fiscal year 2006. He concluded, "The Advisory Commission is charged with the unenviable task of recommending what programs are to be funded from the Casino Revenue Fund dollars. There are many deserving programs which warrant your consideration. Unfortunately, your task is going to be more difficult as a result of decreasing revenues to the fund."

Senator Tom Kean, Member of the Commission, reported, "I and others have objected to the transfer of reimbursements for the PAAD program from the Medicare Part D program to the General Fund and put to other uses than were originally intended (not for healthcare purposes). It was appropriated over the last couple of years."

Assemblyman Polistina, Member of Commission said, "One of the things that concerns me is, we heard that the initial premise of the casinos was to support Senior and Disabled programs. I think we need to get back to those basics. We saw some money being shifted from the Casino Revenue Fund to the CRDA. I think we need to work together to figure out why that is happening, and how that money is being spent. We need to go back the other way and get more money back to the Casino Revenue Fund. The state government has to do everything we can do to support these programs. Whether it's through the Casino Revenue Fund or by other methods, this is a fundamental responsibility of government."

Conclusion

Bill Berg, of the Advisory Council of the Hunterdon County Commission of Senior Services, commented that these repeated goals for full funded programs, demonstrate how critical the needs are for the entire State.

The Advisory Council supports the request by the Casino Revenue Fund Advisory Commission for funding those programs to provide services for the most vulnerable and needy seniors in New Jersey, so that we can require these programs to meet the basic needs. These essential services provide a minimum of nutrition, transportation to medical services and kidney dialysis, support for respite care, affordable housing, and adult protective services, all of which allow continued independent living in their own homes. If these programs are curtailed and cannot service those seniors who require them to remain living independently, these most needy seniors will have no other alternative than to seek institutional care, which is far more expensive. It makes sense to provide the recommended increased funding for these programs since this funding comes from the casino revenues which were mandated for such use by the Constitution.

Rev. Bob Janis Dillon concluded, "My friends, you have a difficult task ahead of you. There is less money to go around, and Disabled and Elderly residents need that money more than ever. May this great state continue to be a place of liberty and prosperity, and just as importantly, may we continue to look out for the least among us."

Chairperson Miller extended appreciation to all for the statistics, facts, and solemn testimony presented, with assurance that the Commission will pursue further activities to bring recommendations to the Legislature on behalf of New Jersey's senior citizens and persons with disabilities.

Department of the Treasury contact for full transcript:
Patricia Wilson, 50 W. State St., 8th floor, PO Box 211, Trenton, NJ 08625
Telephone: 609-984-2407

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EXHIBIT III

SENATE, No. 1830

(A2046)

STATE OF NEW JERSEY

213th LEGISLATURE

INTRODUCED MAY 15, 2008

Sponsored by:

Senator NICHOLAS J. SACCO

District 32 (Bergen and Hudson)

Senator JEFF VAN DREW

District 1 (Cape May, Atlantic and Cumberland)

Co-Sponsored by:

Senators Madden, Buono, Vitale, Haines, S.Kean and Stack

SYNOPSIS

Increases funding of Senior Citizen and Disabled Resident Transportation Program.

CURRENT VERSION OF TEXT

As introduced.

AN ACT concerning the funding of "The Senior Citizen and Disabled Resident Transportation Assistance Program" and amending P.L.1983, c.578.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. Section 4 of P.L.1983, c.578 (C.27:25-28) is amended to read as follows:

4. a. The board shall establish and administer a program to be known as "The Senior Citizen and Disabled Resident Transportation Assistance Program" for the following purposes:

[a.](1) To assist counties [(1)] to develop and provide accessible feeder transportation services, accessible fixed-route transportation services where such services are available, and accessible transit service to senior citizens and the disabled, which may include but not be limited to door-to-door service, fixed route service, local fare subsidy, and user-side subsidy, which include [by] but not be limited to private ride or taxi fare subsidy; and [(2)] to coordinate activities of the various participants in this program in providing the services to be rendered at county level and between counties[.]and;

[b.](2) To enable the corporation [(1)] to develop, provide and maintain capital improvements that afford accessibility to fixed route and other transit services in order to make rail cars, stations, bus shelters and other bus equipment accessible to senior citizens and the disabled; [(2)] to render technical information and assistance to counties eligible for assistance under this act; [(3)] to coordinate the program within and among counties.

b. In the State fiscal year beginning July 1 following the effective date of P.L. , c. (C. (pending before the Legislature as this bill) and in each fiscal year thereafter, there shall be appropriated to the corporation from the revenues deposited in the Casino Revenue Fund established pursuant to section 145 of P.L.1977, c.110 (C.5:12-145) a sum equal to 8.5% of the revenues deposited in the fund during the preceding fiscal year, as determined by the State Treasurer, to effectuate the purposes and provisions of P.L. 1983, c.578 (C.27:25-25 et seq.).
(cf: P.L.1983, c.578, s.4)

2. Section 7 of P.L.1983, c.578 (C.27:25-31) is amended to read as follows:

7. a. Moneys under this program shall be allocated by the corporation in the following manner:

(1) 85% shall be available to be allocated to eligible counties for the purposes specified under paragraph (1) of subsection a. of section 4 of this act.

(2) 15% shall be available for use by the corporation for the purposes specified under paragraph (2) of subsection [b.]a. of section 4 of this act and for the general administration of the program, but no more than 10% of the total moneys allocated under this program shall be used for the general administration of the program.

b. The amount of money which each eligible county may receive shall be based upon the

number of persons resident in that county of 60 years of age or older expressed as a percentage of the whole number of persons resident in this State of 60 years or older, as provided by the U.S. Bureau of the Census. As similar data become available for the disabled population, such data shall be used in conjunction with the senior citizen data to determine the county allocation formula. No eligible county shall receive less than \$150,000.00 during a fiscal year under this program, except that during the first fiscal year no county shall receive less than \$50,000.00 nor more than \$50,000.00.

c. The governing body of an eligible county, or a group or groups designated as an applicant or applicants by the county after a public hearing in which senior citizens and the disabled shall have the opportunity to comment on the appropriateness of such designation, may make application to the board for moneys available under subsection b. of this section. The application shall be in the form of a proposal to the board for transportation assistance and shall specify the degree to which the proposal meets the purposes of the program under paragraph (1) of subsection a. of section 4 of this act and the implementation criteria under the program guidelines and the proposal shall have been considered at a public hearing. The board shall allocate moneys based upon a review of the merits of the proposals in meeting the purposes of the program, and the implementation criteria, under the program guidelines. The governing body of an eligible county shall schedule a public hearing annually for interested parties to provide the governing body with any facts, materials, or recommendations that would be of assistance regarding the efficacy of the program established under paragraph (1) of subsection a. of section 4 of this act.

of: P.L.1995, c.350, s.1)

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the Treasurer,

3. Section 11 of P.L.1983, c.578 is amended to read as follows:

11. There is appropriated to the New Jersey Transit Corporation from the revenues deposited in the Casino Revenue Fund established pursuant to section 145 of P.L.1977, c.110 (C.5:12-145) the sum of \$3,000,000.00 to effectuate the purposes and provisions of this act during the first fiscal year in which this legislation is enacted. In the fiscal year following the effective date of this legislation there shall be appropriated to the New Jersey Transit Corporation from the Casino Revenue Fund to effectuate the purposes and provisions of this act a sum of \$10,000,000.00[, and in each subsequent fiscal year there shall be appropriated to the corporation from the Casino Revenue Fund a sum equal to 7.5% of the revenues deposited in the Casino Revenue Fund during the preceding fiscal year, as determined by the State Treasurer].

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4. This act shall take effect immediately.

STATEMENT

This bill increases the annual appropriation requirement for "The Senior Citizen and Disabled Resident Transportation Program" from 7.5% to 8.5% of the revenues deposited in the General Revenue Fund. Section 2 of the bill revises references to the program to reflect the amendments in section 1 of the bill.

The language providing for the annual appropriation level of 7.5% for the program is contained in a section of the "Senior Citizen and Disabled Resident Transportation Assistance Act," P.L. 1997 c.578 (C.27:25-25 et seq.), which was not codified. This bill removes the annual appropriation language from the uncoded section and places it, at the increased level, in a section of the Act which is codified in order to make the annual appropriation language easier to locate.

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ASSEMBLY, No. 2046

STATE OF NEW JERSEY

213th LEGISLATURE

INTRODUCED FEBRUARY 7, 2008

Sponsored by:

Assemblyman JOHN S. WISNIEWSKI

District 19 (Middlesex)

Assemblyman THOMAS P. GIBLIN

District 34 (Essex and Passaic)

Assemblyman ALBERT COUTINHO

District 29 (Essex and Union)

Assemblywoman LINDA STENDER

District 22 (Middlesex, Somerset and Union)

Co-Sponsored by:

Assemblywoman Wagner, Assemblymen L.Smith, Diegnan, Connors, Assemblywoman Voss, Assemblymen Albano, Milam, Assemblywoman Oliver, Assemblymen Caputo, Schaer, Ramos, as, Assemblywomen Vainieri Huttie, Tucker, Assemblymen Chiappone, Rumana, Assemblywoman Lampitt, Assemblymen Prieto, Rudder, Assemblywoman Addiego, Assemblymen modeo, Polistina, Assemblywoman Rodriguez, Assemblymen Moriarty, Rible, Assemblywoman Angelini, Assemblyman McKeon, Assemblywoman Jasey, Assemblyman Burzichelli, Assemblywoman McHose, Assemblymen Dancer, Johnson and DeAngelo

SYNOPSIS

Increases funding of Senior Citizen and Disabled Resident Transportation Program.

CURRENT VERSION OF TEXT

As introduced.

ASSEMBLY, No. 3861

STATE OF NEW JERSEY

213th LEGISLATURE

INTRODUCED MARCH 10, 2009

Sponsored by:
Assemblyman VINCENT J. POLISTINA
District 2 (Atlantic)
Assemblyman JOHN F. AMODEO
District 2 (Atlantic)

SYNOPSIS

Provides investment alternative tax will not apply to new casinos during first five years of operation; changes certain requirements for CRDA projects funding; temporarily changes rates for casino gaming revenue tax and investment alternative tax.

CURRENT VERSION OF TEXT

As introduced.

STATEMENT

Y This bill provides that the investment alternative tax will not apply to new casinos during the first five years of operation. The bill also changes the geographic distribution requirement for future Casino Reinvestment Development Authority projects, as follows: 10% for North Jersey, 30% for South Jersey, 10% for Atlantic County and 30% for Atlantic City, provided that of the amounts allocated to Atlantic County at least 50% thereof shall be used for projects outside of Atlantic City, regardless of the remaining number of years that a licensee is subject to the tax, and provided further that of amounts allocated to Atlantic City up to 50% thereof may be allocated by the Casino Reinvestment Development Authority, after consultation with the Atlantic City Convention and Visitors Authority, for the marketing of Atlantic City tourism.

The bill also provides for a temporary increase in the annual tax on casino gross revenues from 8% to 12.5% and temporary decreases in the investment alternative tax on gross revenues from 2.5% to 2%, and in the partial payment of the investment alternative tax from 1.25% to 1%. These changes would remain in effect until such time as the State Treasurer issues a determination that, at the end of a calendar year, the volume of sales of existing single family homes for that calendar year equals or exceeds the volume of sales as reported by the New Jersey Association of Realtors for the calendar year 2006. Upon the issuance of that determination, the temporary tax rates on casino gross revenues imposed by the bill will expire and the tax rates provided for in the permanent law will again be in effect.

Nothing contained in the bill would be construed as impairing any contractual obligation, including any obligation to bondholders, entered into prior to the bill's effective date.

For a complete copy of A3861, go to www.njleg.state.nj.us.

**COUNTY WELFARE DIRECTORS' ASSOCIATION
OF NEW JERSEY**

**C/O 18 RECTOR STREET 9TH FL.
NEWARK, NEW JERSEY**



President
973-733-332
Dan Bo
Vice President
609-518-4702

November 11, 2008

Atlantic

Bergen

Burlington

Camden

Cape May

Cumberland

Essex

Gloucester

Hudson

Hunterdon

Mercer

Middlesex

Monmouth

Morris

Ocean

Passaic

Salem

Somerset

Sussex

Union

Warren

Ms. Misono Miller, Vice Chairperson
New Jersey Casino Revenue
Fund Advisory Board
c/o Cumberland County Office on Aging
790 E. Commerce
Bridgeton, NJ 08308

Dear Ms. Miller:

As you are aware, the County Welfare Directors Association of New Jersey (CWDA), under separate cover dated February 25, 2005 appealed to the New Jersey Casino Revenue Fund Advisory Board to increase funding to county-based Adult Protective Service (APS) providers. The responsibility our member agencies face in responding to the mandates of the Adult Protective Service Act have increased significantly since the time we last contacted your office and sadly the value of the financial support provided by the state has not changed, resulting in the value of this support to represent a net decrease.

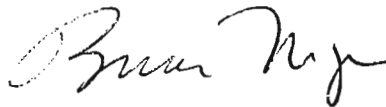
Services provided by APS providers literally do, in some situations, mean the difference between life and death for the clients with which we work. In addition to these crisis situations our member agencies respond to all requests for help from the growing number of vulnerable and at risk state residents over 18 years of age. As the majority of at-risk situations involve the aged, who often present with serious problems the result of years of self-neglect, the number of referrals investigated by APS providers will continue to grow along with the increase in this segment of our population.

Our 2005 letter was an appeal to the Advisory Board to support a recommendation to increase the financial support to APS providers. At that time we reported an actual decrease in state funding since 1992 that in 2005 was placing several APS programs at risk. Facing no additional funding as the result of our 2005 appeal our fiscal situation has reached a critical situation. Not receiving an increase in APS allocations, increased costs of providing services on the county level combined with the current bleak economic climate has the potential for jeopardizing the effectiveness of this vital program. The local over-match in county dollars

required to support the programs, which we previously reported as between 100%-500%, has increased even beyond these levels. APS is not a program that can be under-funded. There are no viable alternatives to providing a resource that has the capacity to respond immediately to emergent situations. Waiting lists, or other reductions in the programs service delivery capacity are simply not appropriate and contrary to the best interest of the public good.

The County Welfare Directors Association of New Jersey strongly supports the proposal of the Casino Revenue Fund Advisory Commission to increase funding for the local Adult Protective Service Programs. Additional financial support from the state is essential at this time to continue to protect our vulnerable and at risk citizens.

Very truly yours,

A handwritten signature in black ink, appearing to read "Bruce Nigro", written in a cursive style.

Bruce Nigro, President

BN/EJK: w

EXHIBIT V

NEW JERSEY CONSTITUTION

ARTICLE IV

SECTION VII

1. No divorce shall be granted by the Legislature.
2. No gambling of any kind shall be authorized by the Legislature unless the specific kind, restrictions and control thereof have been heretofore submitted to, and authorized by a majority of the votes cast by, the people at a special election or shall hereafter be submitted to, and authorized by a majority of votes cast thereon by, the legally qualified voters of the State voting at a general election, except that, without any such submission or authorization;
 - A. It shall be lawful for bona fide veterans, charitable, educational, religious or fraternal organizations, civic and service clubs, senior citizens associations or clubs, volunteer fire companies and first-aid or rescue squads to conduct, under such restrictions and control as shall from time to time be prescribed by the Legislature by law, games of chance of, and restricted to, the selling of rights to participate, the awarding of prizes, in the specific kind of game of chance sometimes known as bingo or lotto, played with cards bearing numbers or other designations, 5 or more in one line, the holder covering numbers as objects, similarly numbered, are drawn from a receptacle and the game being won by the person who first covers a previously designated arrangement of numbers on such a card, when the entire net proceeds of such games of chance are to be devoted to educational, charitable, patriotic, religious or public-spirited uses, and in the case of senior citizen associations or clubs to the support of such organizations, in any municipality, in which a majority of the qualified voters, voting thereon, at a general or special election as the submission thereof shall be prescribed by the Legislature by law, shall authorize the conduct of such games of chance therein.
 - B. It shall be lawful for the Legislature to authorize, by law, bona fide veterans, charitable, educational, religious or fraternal organizations, civic and service clubs, volunteer fire companies and first-aid or rescue squads to conduct games of chance of, and restricted to, the selling of rights to participate, and the awarding of prizes, in the specific kinds of games of chance sometimes known as raffles, conducted by the drawing for prizes or by the allotment of prizes by chance, when the entire net proceeds of such games of chance are to be devoted to educational, charitable, patriotic, religious or public-spirited uses, in any municipality, in which such law shall be adopted by a majority of the qualified voters, voting thereon, at a general or special election as the submission thereof shall be prescribed by law and for the Legislature, from time to time, to restrict and control, by law, the conduct of such games of chance and
 - C. It shall be lawful for the Legislature to authorize the conduct of State lotteries restricted to the selling of rights to participate therein and the awarding of prizes by drawings when the entire net proceeds of any such lottery shall be for State institutions, state aid for education.
 - D. It shall be lawful for the Legislature to authorize by law the establishment and operation, under regulation and control by the State, of gambling houses or casinos within the boundaries, as heretofore established, of the city of Atlantic City, county of Atlantic, and to license and tax such operations and equipment used in connection therewith. Any law authorizing the establishment and operation of such gambling establishments shall provide for the State revenues derived therefrom to be applied solely for the purpose of providing funding for reductions in property taxes, rental, telephone, gas, electric, and municipal utilities charges of eligible senior citizens and disabled residents of the State, and for additional or expanded health services or benefits or transportation services or benefits to eligible senior citizens and disabled residents, in accordance with such formulae as the Legislature shall by law provide. The type and number of such casinos or gambling houses and of the gambling games which may be conducted in any such establishment shall be determined by or pursuant to the terms of the law authorizing the establishment thereof.