

NJ Casino Revenue Fund Advisory Commission Hearing

0001

1 NEW JERSEY CASINO REVENUE FUND ADVISORY COMMISSION

2

* * * *

3

Friday, November 21, 2008

4

Trenton, New Jersey

5

* * * *

BOARD MEMBERS PRESENT:

6

MISONO I. MILLER, Chairwoman

JAMES THEBERY, Vice Chairman

7

ENID TOROK, Public Member

PATRICIA POLANSKY, Assistant Commissioner

8

Department of Health and Senior Services

LAURA RAMOS, Public Member

9

JOSEPH TYRRELL, New Jersey Casino
Association

10

SENATOR THOMAS KEAN, JUNIOR

11

HELD AT: State House Annex

Trenton, New Jersey

12

REPORTED BY:

13

Renée Helmar, Shorthand Reporter

14

* * * *

15

16

17

18

19

20

21

22

23

CLASS ACT COURT REPORTING AGENCY

Registered Professional Reporters

24

1420 Walnut Street

133 Gai ther Drive

Suite 1200

Suite H

25

Philadelphia, PA 19103

Mt. Laurel, NJ 08054

0002

1

I N D E X

2

TESTIFIER

PAGE

3

SUSAN BRUNCATI, Asbury Tower

13

4

WALTER TROMMELLEN, Burlington County

19

Office on Aging

5

LIZ SHEA, Arc

24

6

JOHN WANAT, NJ4A

28

7

LYNN MILLER, NJ4A

28, 33

8

HENRY NICHOLSON, Monmouth County

37

9

Transportation

10

MICHAEL VIERIA, COST

39

11

DAVID RICCI, Department of Health and

54

Senior Services

12

EDWARD TETELMAN, Department of Health

59

and Senior Services

13

STEVEN FITTANTE, Middlesex County

63

14

JOSEPH WOODS, Congregate Services

66

15

KATHY ALEXANDER, Congregate Services

68

16

BILL BERG, Hunterdon County

70

17

CYNTHIA D. VOORHEES, NJ4A

73

18

GEORGE MARTCH, Advisory Council

81

19

FRANK BYRNE, NJAHS

87

20

KAREN SCALERA, Oak Woods Senior Living

89

NJ Casino Revenue Fund Advisory Commission Hearing

22	OLGA MICCIO, Congregate Services	94
23	ROBERT KOSKA, NJ Transit	97
24	SY LARSON, AARP	104
25	REVERAND ROBERT JANIS-DILLON	105

0003

1 (Whereupon, the proceedings
2 commenced at approximately 9:25
3 a.m.)

4 MADAME CHAIRWOMAN: Hello everybody, my
5 name is Misono Miller; I am the chairman (sic)
6 of the Casino Revenue Fund Advisory Commission.
7 And the Commission and I are here, today, to
8 hear testimony in regards to the needs and
9 concerns of seniors.

10 And I welcome you all today, and I would
11 like to start these hearing proceedings with
12 our Vice-Chair James Thebery.

13 (Whereupon, the Pledge of
14 Allegiance was recited.)

15 MADAME CHAIRWOMAN: Okay. I would, first
16 of all, like to introduce to you all of the
17 Commission Members that are here today. And I
18 would ask the Commission Members if they would
19 like to say a few words or not, they can do so.

20 So, I will begin with Enid Torok, Public
21 Member from Somerset County, and next to Enid
22 is Patricia Polansky, who is the Assistant
23 Commissioner of the Department of Health and
24 Senior Services. She is the Director of the
25 Division of Aging and Community Services.

0004

1 MS. POLANSKY: Good morning.

2 MADAME CHAIRWOMAN: Okay. To my left is
3 James Thebery, and he is the President of the
4 Association of County Offices of Disability.
5 And Laura Ramos, Public Member from Hunterdon
6 County.

7 MS. RAMOS: Hi. Welcome to the Commission
8 2006, from the disabled for the state.

9 MADAME CHAIRWOMAN: And right now, last,
10 but not least, we have our newest member of the
11 Commission, Joseph Tyrrell, who is representing
12 the New Jersey Association of Casinos.

13 And Joe has a few remarks to make to you.

14 MR. TYRRELL: Hi; my name is Joseph
15 Tyrrell.

16 I am head of the regional aspect of
17 government relations for Harrah's and all
18 casinos, and a Casino Association
19 representative to be on this Board.

20 As a casino representative, I just wanted
21 to make our commitment very clear. We are one
22 of the largest associations in New Jersey. We
23 do want to say that we have a great
24 responsibility to everyone in the State of New
25 Jersey, every county.

0005

1 We are taking our responsibility to be a
2 useful citizen very seriously, making sure that
3 the Casino Revenue is well funded, it is
4 executed for all seniors, for all disabled in
5 the state, and making sure that every person in
6 New Jersey understands that there is a good
7 relationship between this fund and the
8 Association.

9 MADAME CHAIRWOMAN: Thank you, Joe.

NJ Casino Revenue Fund Advisory Commission Hearing

We do have some guests, and I would like to introduce to you some of them sitting in the front row right now.

David Ricci, who is in the Department of Health and Senior Services, Adult Protective Services of New Jersey. We have Ed Tetelman behind him. And Ed is the public guardian. And we also have Tracey, who is dressed in yellow.

Tracey, raise your hand.

Tracey Pariello also sits on the Commission. And Marilyn White, who is the director of Congregate Services.

I can't introduce everybody, practically, but I will introduce my colleagues.

I am the executive director of the

Cumberland County Office on Aging, and I see my colleagues here.

We have Elaine -- Eileen Doremus from Mercer, okay.

Stand up.

And is there any other -- John Wanat from Monmouth County.

And, John, did you bring a guest with you?

MR. WANAT: Yes. Lynn Miller.

MADAME CHAIRWOMAN: Okay. It is nice to have you with us.

Okay. And Jeanne Borkowski, okay, from Burlington County, okay. Henry Nicholson. Henry, is that correct?

MR. NICHOLSON: Yes.

MADAME CHAIRWOMAN: And, also, Michael Viera, V-I-E-R-I-A, and he is the Council on Special Transportation, as well as head of the Department of Transportation. In what county are you from, Michael?

MR. VIERIA: Essex.

MADAME CHAIRWOMAN: And next is John Adair from Somerset County and Robert Koska. He is the director of the Office of Special Programs and Vehicles from New Jersey Transit. A very

important person in transportation. Okay.

I know that I have not named all persons that should be named, maybe Jim can help me if there are any that I missed.

MR. THEBERY: I was just going to say, Misono Miller is here, our chair, who will know every one of your names by heart at the end of the day.

MADAME CHAIRWOMAN: Laura Ramos.

MS. RAMOS: I would also like to introduce Pamela Pacentrelli, who has elected to be here with us from Hunterdon County and Barbara Metzger, who is the expert for the disabled from Hunterdon County.

MADAME CHAIRWOMAN: Okay. I understand that our senator, Tom Kean is here. Tom Kean, Junior, and I am not going to hold up the hearings. I will let Tom get settled and introduce him as he sits down.

I would like to -- I think you have an agenda in front of you, and we'll get started and go through the focus of the hearings and some of the items the Commission wants to

announce.

Okay. The purpose -- and I am so glad to

see you all here. This is a terrific showing for seniors and disabled, I believe, and I just wanted to thank you for being here.

The purpose of these hearings is two-fold. The Commission was established to provide recommendations to the governor and the legislature regarding the programs funded, or able to be funded, by the Casino Revenue Funds.

The Commission is to assess and to evaluate the need for existing, additional or expanded programs and advise the legislature accordingly.

The hearing will assist the Commission in having the information needed to make those recommendations with resolve and understanding from the feedback that you are giving us today.

It is hoped that the Commission hearings will also provide a much needed opportunity to focus on the needs of the seniors and disabled residents of this state, and that public awareness, attention, and support of those needs will assist in making the necessary decisions that need to be made on their behalf.

It is intended that your statements today

will contribute to increasing the support from the general public, elected officials and decision makers, that will be necessary to make changes where they are needed.

I thank you all for your presence here, for those who are providing us with a host of comments, and those who are here to listen, learn and acting on behalf of seniors and disabled.

Now, it is the charge of the Commission to complete an annual report to the legislature. And the Commission has done so for the past several years, with consistent recommendations and rationale for funding of essential programs.

The reports that the Commission has completed, have focused on increasing funding for the programs providing crucial, effective, essential and underfunded services in this State, that affect the most frail and vulnerable seniors and officials.

In many cases the programs recommended have not received funding or funding increases from the Casino Revenue Funds for many years.

And I will give you an example. The Meals

on Wheels Program from the Casino Revenue Fund has received the same minimal funding, that is, \$1 million for the whole state since 1988. It has never gone up. If it has, it is slight.

The Safe Housing Program is the only program in this state that provides home repair funding for seniors, and this helps them to stay in their homes. It has been reduced in funding from a decade ago.

The 2008 Annual Commission Report recommends that six essential programs

NJ Casino Revenue Fund Advisory Commission Hearing
historically funded by the Casino Revenue
Funds, receive funding increases.

They are transportation, Meals on Wheels,
the State Respite Program, the Safe Housing
Program for home repairs and escorted
transportation, Adult Protective Services and
Congregate Housing.

The Commission is very aware of the recent
downturn in the Casino Revenue Funds.

However, there have been huge savings in
major programs such as the PAAD Program of
which a small portion of these savings could be
considered for reallocation to these crucial
programs.

In addition, in years of increasing Casino
Revenue Funds when things were good, these same
programs that I mentioned have been
consistently overlooked for additional funding.

So, those are the comments that I wanted
to leave with you. I wanted to let you know
that the 2008 annual report of the Commission
is there on the table for you, as well as the
New Jersey Transit Annual Report, which was
given to us by Robert Koska at one of the
Commission hearings.

Okay. These are very difficult times, and
as Jim Thebery and I were talking, Jim is our
vice chair, is it a bad time to have hearings,
because times are difficult? Who has this
funding? That is the time that we must have
hearings.

So, we concluded that this is the best
time for having a hearing, when we must ensure
that the needs of the most vulnerable in this
state, are at least recognized and attempted to
be addressed.

Your comments are welcome in all areas of
Casino Revenue Funds, okay. And I would like
to continue the hearings, but before I do, I

would like to introduce Senator Tom Kean, who
has just come with us.

SENATOR KEAN: It is nice to be with you
again.

MADAME CHAIRWOMAN: All right. Now, with
that, we have many people, here, who have come
from far and wide to talk to the Commission and
to make their comments public.

We have a lot to do for you, and we will
look at these comments carefully. We will, as
a Commission, keep our questions to what we
think are essential, and we may or may not have
questions, but our staff members are indicating
that we have 25 people to go through today,
okay.

And if you have -- if you wish to comment
and you are not on the roster, then you must go
to the registration table and we will fit you
in.

We are affording all persons here five
minutes, at least, okay, and we will let you
know when the five minutes is over, because we
have a timer. Our timer is Melissa Clifton,
who has the timer, and she is from the
Cumberland County Office on Aging.

0013

1 And I want to introduce Melissa Clifton
2 and Barbara Nedohon, my staff, who have helped
3 very much in the organization of these
4 hearings.

5 I also want to recognize Patricia Wilson
6 and Judy Moore from the Department of Treasury,
7 who were at that registration table when you
8 first came in, and helped organize these
9 hearings.

10 At this time, I would like to call up
11 Susan Bruncati, okay. Susan is from -- the
12 director at Asbury Tower.

13 Okay. First of all, introduce yourself.

14 MS. BRUNCATI: Good morning, ladies and
15 gentlemen. My name is Susan Bruncati; I am the
16 Executive Director of Asbury Tower, a senior
17 citizen affordable housing complex in Asbury
18 Park.

19 We have 350 senior apartments; we have
20 assisted living and the Congregate Services
21 Program.

22 We are one of four sites for these kinds
23 of programs within PHS Senior Living, and we
24 serve about 100 people every day.

25 Part of PHS's philosophy is to serve the

0014

1 seniors of New Jersey and to give them options,
2 to give them choices and allow them to live
3 with dignity, enabling them to age in place
4 till the end of their lives. The Congregate
5 Services Program is what PHS is all about.

6 Asbury Tower is one of the first to
7 receive the Congregate Grant.

8 Since we started, we have seen changes in
9 our programs in many of our buildings.

10 We started providing the program right in
11 our building, and also provide persons with
12 meals.

13 The average age at Asbury Tower is 82.
14 The range is from 62 to 102.

15 Many residents are housebound, and even
16 bedridden. As we know, today, people are
17 living longer. So, the needs of these services
18 are increasing every day.

19 There are sometimes as many as 400 people
20 living in my building. These people are our
21 grandmas and our grandpas.

22 They have served the country and now they
23 are asking you for that favor in return.

24 Without this program, Congregate Services,
25 many, many of my residents would not be living

0015

1 in my building, they would have to go to a
2 nursing home.

3 We do have assisted living, also, in our
4 building, which also helps to support them.

5 So, without the Congregate Services, I
6 wouldn't be able to have assisted living in my
7 building.

8 What does this mean to the state? The
9 total funding of this program from the State is
10 only \$9 million. In my building, it is
11 \$93,000, for 100 people, \$930 each per year.

12 For one of those people that we serve, if
13 one of them goes into a nursing home, you are

14 talking \$72,000 a year, for one person.

15 We're helping to keep 100 people out of
16 the nursing home.

17 Many of us in this room are very fortunate
18 and may not need these types of services, and
19 many of you will stay in your own home. But
20 many of us that are in this room may, some day,
21 need the services.

22 There is a gentleman in my building who
23 worked for the State, he worked on many
24 committees, he worked, I believe, for
25 Protective Services many years ago, and,

0016 1 unfortunately, made some bad financial
2 decisions and ended up in my building. And if
3 it wasn't for Congregate Services, he wouldn't
4 be in my building.

5 His prize possession is his cat.

6 Setting that aside, let me give you a
7 little bit of background about one of my
8 residents and what we do.

9 We usually provide these residents
10 housekeeping, laundry, a hot meal for lunch,
11 chore services and shopping services.

12 Mr. G. has a monthly adjusted income, of
13 \$554. His rent is 261. He is subsidized by
14 Section 8.

15 So, what he has left over at the end of
16 the month is \$300. You and I can't live on
17 \$3000 a month.

18 How does this man do it? Because of the
19 Congregate Services.

20 He has no family. He is a bachelor. He
21 is an amputee. He is a diabetic. But somehow
22 this man gets himself to the hospital three
23 times a week to volunteer at Jersey Shore
24 Medical Center. And why does he do that;
25 because, he said, you never stop giving,

0017 1 because you never know when you can't give any
2 longer.

3 It is difficult for him to cook, clean,
4 shop. But Congregate Services makes it
5 possible for him to survive.

6 He pays five cents a meal. He pays .85
7 cents an hour for housekeeping. He pays .75
8 cents a week for shopping and .90 cents to have
9 his laundry done. That totals about \$14 a
10 month.

11 Well, you think that is bad, let me tell
12 you about Mrs. F. She is on the Assisted
13 Living Program, and her supplemental income,
14 after medical expenses, is \$2000 a year. That
15 means it is 170 a month. And once her monthly
16 rent of \$64 is paid, she lives on about \$100 a
17 month; \$100.

18 Again, how does she do this? Because of
19 the Congregate Housing Program.

20 Senator, you have visited my building. We
21 see these miracles every single day. I see
22 people who are housebound; I have people who
23 are bedridden. And you know what, they are in
24 their own home that they have been in for 15,
25 20, 25 years.

0018 1 In fact, I have two people that have been

NJ Casino Revenue Fund Advisory Commission Hearing
there from 1974. They are amazing.

I have a 103 year old in my building who, if it wasn't for the Congregate Service Program, she would no longer be in my building, she would be in a nursing home.

Now, I would like to say something as a taxpayer. As a taxpayer trying to make ends meet, considering how much it would cost to put somebody in a nursing home, as a taxpayer, I can tell you that I am also in support of the Congregate Services Program.

As a matter of fact, I will be at an Atlantic City casino tonight. My son turned 21, so I can support this casino fund in this way, too.

I will do whatever it takes to support this program, because this program is keeping 100 people that we serve every day out of the nursing home. And they're 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

Mrs. F. and my 103 year old resident when trying to make the decision. Without all of you, they would be in a nursing home.

Thank you very much for your time.

MADAME CHAIRWOMAN: Thank you very much.

Walter Trommellen.

Now, before Mr. Trommellen comes up, I would like to introduce another guest that just came in, Mr. Sy Larson; is he here? Sy is the President of the New Jersey AARP.

Mr. Larson, do you want to sit up front? Okay.

We have, now, a staff for the AARP Program, and we welcome his presence and, Tom, we welcome your presence and we are glad to have you hear these comments.

Mr. Trommellen from Burlington County is a member of the Burlington County Office on Aging.

MR. TROMMELLEN: Thank you. My name is Walter Trommellen; I am the chairman of the Burlington County Office of Aging Advisory Council.

I thank you for the opportunity to comment on recommendations of the New Jersey Casino

Revenue Advisory Commission.

I will address two areas specifically, Meals on Wheels and transportation.

In Burlington County, the population of seniors over the age of 60 is projected to increase 50 percent from 2007 to 2010, from 61,000 to 90,500 in just three years time.

At the same time, the number of the old elders, those over the age of 85, is projected to increase 42 percent. Last year, nearly 99,000 meals were delivered to homebound senior citizens in our county. A 20 percent increase in just one year.

During the same period, the fuel prices increased 41 percent causing an increase in

food prices as well.

For our most frail and homebound seniors, the daily meal of Meals on Wheels guarantees their survival. It is a matter of life and death for many.

The meal ensures that the clients have enough food to sustain themselves in their homes, and the daily visit by the delivery person provides welcome reassurance. For some, it is their only human contact for days upon

end.

Unfortunately, as the need has increased, the costs have, also, while funding has remained stagnant.

The Casino Revenue Fund provides \$1 million annually for weekend meals, which has not changed in 20 years. We take meals entirely from funds from other sources.

Local resources are stretched and becoming more limited. Sadly, some areas in New Jersey will institute a waiting list for Meals on Wheels. Without additional resources, Burlington County may be among those in just one more year.

If Casino Revenue Funds earmarked for weekend meals remains at the \$1 million level, no expansion of services is possible, much less our ability to maintain current levels.

We support the Advisory Commission's recommendation to increase funding for Meals on Wheels by \$3 million. This level would, for the first time, provide \$2 million in funding for weekday meals, and enough funds for weekend meals.

For seniors that do not drive or are

unable to drive or maintain a vehicle, Transportation Services offer a lifeline similar to that of Meals on Wheels with the meals.

The Burlington County Senior Transportation Services are utilized for physician visits, dialysis, grocery shopping and congregate nutrition.

As the largest county in New Jersey, we have the entire area and communities with limited or no public transportation at all. Our senior transportation services are geared to help those who are most frail and vulnerable among us.

Last year, over 75,000 trips were provided. Almost 27,000 trips were for medical trips alone. As the proportion of the oldest elderly increases, so, too, 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. There are able bodied, ambulatory seniors who cannot plan to go to the senior

nutrition site for a meal and socialization simply because of a lack of transportation.

We need to do better. We cannot let this happen.

While we support a one percent increase in the percentage of funds for transportation from Casino Revenues from seven and a half to eight and a half percent, we caution that this modest increase will only serve to maintain current services and prevent further reductions.

We must figure out a way to provide sufficient funds to meet the needs of the transportation demands of the increasingly frail and vulnerable population.

The number of older adults in our city will continue to grow. Many of these older adults will be healthy, yet, many others, particularly the old, old, will need a variety of services in order to continue to live independently in their own homes, in their own communities.

We are in the Human Services business. As

you concur and weigh the many funding needs presented at these hearings, please give full consideration to those service areas where the seniors' very lives are affected.

Thank you.

MADAME CHAIRWOMAN: Thank you very much.

I would like to just comment on one part of your presentation.

That is, the \$3 million requested for Meals on Wheels.

It has been requested for the weekday program, and we did include weekends for the regular program, two million of that, and also one million for a service to the disabled. There is no other funding source for disabled meals.

Thank you very much.

Our next speaker is Demby Dickson. Oh, Miss Shea, okay.

Miss Shea is from the Arc of New Jersey.

MS. SHEA: Good morning, and thank you for the opportunity to testify.

My name is Liz Shea; I am the assistant executive director at the State Office of the Arc.

As a nation, we need to help people with intellectual and other developmental disabilities to be near their families.

The Arc of New Jersey is the largest statewide advocacy group for individuals with intellectual and other developmental disabilities in New Jersey with more than 18,000 members and families. We work to ensure that the estimated 130,000 people 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

NJ Casino Revenue Fund Advisory Commission Hearing
and information and referral. We also work
closely with our twenty affiliated local county
chapters, who provide services in all of New
Jersey's 21 counties.

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

parents to have a much needed break from the
stress of constant caregiving. Community-based
housing with supports, such as group homes and
supervised apartments, are the safety net for
individuals with developmental disabilities
whose families are no longer able to care for
them. Transportation services provided by the
"Senior Citizen and Disabled Residents
Transportation Assistance Program" are the
lifeline to community participation for many
individuals 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 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. And 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. In fact, The Arc of New Jersey, as part
of a large Coalition, is supporting legislation
(S1830/A2046) that would increase the
percentage of Casino Revenue Funding that is
allocated to this program from 7.5 percent to
8.5 percent. We are hopeful that this
legislation will pass the Legislature soon.

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 sitting 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. We are
aware that the current economic downturn has
also meant that casino revenues are down.
However, I hope that you will do everything
within your power to ensure that supports and
services for individuals with developmental
disabilities and their families continue to
receive as much funding as possible through the

Casino Revenue Fund.

Thank you for the opportunity to share my
concerns with you today.

I particularly want to thank Joe for
coming here, and his commitment to ensure that

NJ Casino Revenue Fund Advisory Commission Hearing
the Casino Revenue Funds continues to be well
funded.

And, also, we are here today to ask you to
do everything in your power to make sure that
none of these services get cut, and that we
increase funding as we move on.

If anyone has any questions, I would be
happy to answer them.

MADAME CHAIRWOMAN: Okay. Thank you very
much.

Our next speaker is John Wanat. I'm going
to ask John to come on up. Would you like to
have Lynn come up with you?

MR. WANAT: Yes. Thank you, Madame Chair.

MADAME CHAIRWOMAN: He is from Monmouth
County.

MR. WANAT: Thank you. I truly appreciate
it.

MS. MILLER: I am Lynn Miller; I am the
administrative department director for the

Monmouth County Department of Human Services.

MR. WANAT: Good morning. And I thank
you.

We are here in force with the DYFS Board
Members who are here to support this.

As a matter of fact, this afternoon I will
have my meeting and explain how well we have
accomplished our objective, here, this morning.

Also, to let Lynn make the case,
individual case, on behalf of those of our
department that wanted to be here, but because
of other urgent matters, had to pass and she
will get back and inform our director.

And I'm here specifically to ask for
increases for our Meals on Wheels and our
senior transportation.

And I wanted to begin by saying that we
commend the State of New Jersey and this
Commission for the funding that was earmarked
for Meals on Wheels and for transportation for
our most elderly and disabled population.

This revenue has served us well in the
past.

However, with our increasing senior and
disabled population and a weakened economy, we

are respectfully requesting increases for those
funded areas.

I will share with you some information to
support our request.

The senior population is increasing. As I
just said, New Jersey has the fourth largest
population in this country, 1,442,782 seniors
all over the age of 60.

And we have not yet seen the big numbers
of baby boomers who are about to descend upon
us in various stages at this time.

Our 85 plus population has increased by 42
percent between the years of 1990, and the year
2000.

Over the last few months, seniors and our
disabled citizens across the entire state have
signed and sent over 35,000 paper plates to our
legislators in Trenton to increase our request
for casino revenue funds for Meals on Wheels

and transportation.

Our Monmouth County Freeholder, Barbara McMorro, who wanted to be here today, has personally brought 4000 of those paper plates to the legislatures on two separate occasions, here, in Trenton.

The revenues from the Casino Revenue Fund have increased steadily over the years, but the Meals on Wheels and transportation, have not had major increases.

And these two sources of revenue are crucial to all of our counties providing a meal and transportation for medical and survival services.

Our goal, as is your goal, is to keep our people in the community as long as we can with dignity, and caregiver support services that they need to stay there. As a -- as a caregiver for five elderly, down, now, to two, hopefully, you can see the importance of having these meals and the transportation services.

When I had to take away the keys from my dad, my dad didn't talk to me for an entire year. He wouldn't talk to me for an entire year, because that was the final blow. He couldn't drive anymore.

But if it wasn't for the transportation services that the revenue provided, my dad wouldn't have been able to get around town as well as he did.

So, it is an important essential service

that people need.

In Monmouth County, the people that we have is over 1200 people, with meals weekly, and we have over 1300 trips per day for our transportation.

If there is no increase in casino revenue funding, our Meals on Wheels program will sustain a shortfall up to \$153,000 in 2009, resulting in waiting lists and increased institutionalization.

Additionally, as a member of the New Jersey Association of Area Agencies on Aging, we support the recommendations of the Casino Revenue Fund Advisory Commission to increase the amounts of funds available from casino revenue for: transportation from 37.7 million to 42.7 million; Meals on Wheels from 1.0 million to 4.0 million; Safe Housing and Escorted Transportation from 1.7 million to 3.7 million; Adult Protective Services from 1.0 million to 3.0 million; Congregate Housing from 2.0 million to 3.0 million; Respite from 5.4 million to 6.4 million.

In addition to the \$14 million requested for these programs, we are also recommending an

automatic annual cost-of-living increase for programs for the elderly and disabled for these programs.

Thank you for listening.

MADAME CHAIRWOMAN: Thank you.

Okay. Linda.

MS. MILLER: Good morning. Thank you very

much. I appreciate your time.

Actually, I'm representing the Department of Human Services, and in our department, we have the Division of Aging and Disability and the Division of Transportation Services.

I am very honored to deliver testimony on behalf of the freeholders, Barbara McMorrow, who John mentioned, was unable to attend because of a last minute conflict that came up.

And, so, I would like to read her testimony.

Thank you for the opportunity to speak to you regarding the critical need to increase spending from the Casino Revenue Fund for the senior citizens and the disabled persons in New Jersey.

In Monmouth County, we are talking, not only about senior programs, but, also,

transportation for the people with disabilities and the Meals on Wheels Program.

As you know, the Casino Revenue is decreasing due to the current economic conditions.

As a direct result, funding for the Senior Citizens and Disabled Resident Transportation Program is also decreasing.

In Monmouth County, this decrease in 2009, will result in a loss of \$233,000 for 15,500 rides per year. Reduced funding will result in, either, a decrease of services, or an increase in fares in all 126 counties.

Services provided by transportation include, but are not limited to, many medical, dialysis, physical and psychiatric appointments, chemo and radiation therapy, therapeutic workshop, employment, nutrition sites, Meals on Wheels, food shopping, veteran services, recreational and many, many others.

Assembly Bill A2046 and Senate Bill 1830 provide for a one percent increase in a portion of casino revenue tax that would be earmarked for senior and disabled services. This would be increased from seven and a half, to eight

and a half percent. These bills are part of the solution as we, as a State, look to a permanent solution for funding community transportation and Meals on Wheels.

Despite the current economic conditions, these increases can be funded by the cost savings to New Jersey now that the pharmaceutical assistance for the aged and disabled, otherwise known as PAAD, is federally funded.

Since 2006, the PAAD Program costs have been reduced by hundreds of millions of dollars as a result of the implementation of the Federal Medicare PAAD Program.

This one percent increase has been endorsed by the Monmouth County Board of Freeholders and the New Jersey Council on Special Transportation.

New Jersey COST estimates that without it, county transportation systems will lose nearly four million for services beginning in January,

NJ Casino Revenue Fund Advisory Commission Hearing
as the result of the overall loss of gaming
revenue.

In making your decision, I ask that you
consider the fact that New Jersey's senior

citizen population is increasing.

New Jersey has the fourth largest senior
citizen population in the country, with 1.4
million seniors who are over the age of 60.

Monmouth County has the largest population
in the state.

In Monmouth County, Meals on Wheels are
delivered to 1200 disabled and homebound people
each week. As many of these people live alone,
often it is the only hot meal that they will
eat all day, and the only social interaction
they will receive.

If the allocations from Casino Revenue
Funds are not increased, there will be a
shortfall of up to \$153,000 in 2009, resulting
in a waiting list for our Meals on Wheels
Program.

We are in a community transportation
funding crisis that will negatively impact New
Jersey's older, adult population, persons with
disabilities and economically disadvantaged
veterans and other transportation-dependent
persons. The one percent increase that we are
seeking equals the four million dollars needed
to fill the statewide funding gap.

Therefore, I urge you to please consider
the needs of our senior and disabled
population, and increase the funding so that we
can avoid the shortfall.

Thank you so much.

MR. NICHOLSON: Hi. I'm Henry Nicholson,
Director of Transportation for Monmouth County.

I want to thank you for inviting us to
testify today at this hearing.

Monmouth County has one of the most
coordinated transportation programs in this
state, and in the country.

We have integrated transportation that
includes persons with disabilities and seniors,
and for all purposes, it is part of their daily
life. And it is important that we continue
that type of program for our over 380,000 rides
that we do a year for persons with disabilities
and seniors.

An example of how we have integrated
interrelationships between the various
organizations is the Meals on Wheels Delivery
Program.

We transport persons with disabilities
going to Arc in Monmouth County, who then

delivers Meals on Wheels to persons who,
otherwise, would not have a hot meal or would
have any social relationship.

This a great integration between a senior,
a person with disability and the needs of the
community of, both, hot meals, keeping people
in their homes and providing a job for these
individuals.

We ask that you continue to provide

transportation funding and Meals On Wheels funding; we ask for the increase from seven and a half, to eight and a half percent, which is very important. And this is also just a temporary band aid on the needs of the entire population.

We need to rethink how funding occurs for programs for seniors and for persons with disabilities.

We thank you, and we appreciate your assistance.

MADAME CHAIRWOMAN: Okay. Thank you.

Susan Anczarki is not here.

Is Fran Benson here?

(No response.)

MADAME CHAIRWOMAN: Okay. Well, you know

what, there is going to be room for more comments.

Michael Vieri a.

MR. VIERIA: Madame Chairwoman and Members of the Casino Advisory Commission, my name is Michael Vieri a; I am the president of the New Jersey Council on Special Transportation.

Before I continue on, I would like to thank the Commission for allowing me to speak on these programs that thousands of New Jersey senior citizens and persons with disabilities have come to rely on each day.

Some of the services are life sustaining.

I also want to thank the Commission for their concern about the programs in the Casino Revenue Fund for this year.

For the past several years, you have compiled a report to the governor and our legislators with your ideas and suggestions.

I can assure you that some people do read these reports and, in fact, it was part of the justification used by New Jersey Council on Special Transportation to get legislation sponsored to support the Casino Revenue Fund's Senior Citizen and Disabled Transportation

Assistance Program, which I will refer to as SCADRTAP.

I want to go on record by saying that New Jersey Council of Special Transportation, supports all programs in the Casino Revenue Fund. They benefit thousands of people each day.

However, today my interest and testimony is with the transportation SCADRTAP Program.

New Jersey Council on Special Transportation is a statewide advocacy association that for over 27 years, has provided information and support for New Jersey's Community Based Transit Services.

New Jersey COST also provides education and information to those not familiar with New Jersey's Paratransit and Community Transportation Services, and the benefits of these services.

Our membership consists of representatives from New Jersey's 21 counties, as well as agencies including municipal, state and not for profit and private, who specialize in providing

transportation services.

We provide transportation to the

economically disadvantaged, senior citizens, persons with disabilities and, in some cases, the general public, when conventional fixed route transit is not available. Most services are provided on a door-to-door or curb-to-curb basis.

Whether you call it community transportation, paratransit, special transportation or senior and disabled transportation, they all have the same meaning and provide the same services which include transportation for nonmedical appointments, dialysis, physical and mental therapies, chemotherapy, radiation, non-competitive workshops, nutrition sites, Meals on Wheels, shopping, veterans' services, job employment for the economically disadvantaged, recreational activities and, in some counties, general public bus routes.

New Jersey, right now, is facing a severe transportation funding crisis. Monies used to pay for these services have taken a financial hit.

Most of these services heavily rely on the transportation funding from the SCADRTAP

Program.

However, with the poor economy, the Atlantic City casinos are not maintaining the revenue levels of recent years, and because of this, the 21 county systems will lose nearly \$4 million starting January of 2009. Even worse, another loss is projected for 2010.

This is in addition to the rising operating costs and higher prices being paid for fuel.

Commissioners, right now, New Jersey's Paratransit and Community Transportation is experiencing a funding crisis.

It has gotten to the point where this past September COST released the following statement: New Jersey Human Services and Transportation is in a serious financial crisis that is effecting 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.

Commissioners, right now, counties are preparing for a rough 2009. And there is no

doubt that some people who may need a ride, may not get one. Less money means fewer drivers and fewer rides.

Although the \$4 million decrease in the SCADRTAP Fund, will directly affect the 21 county systems, it will also indirectly affect to all New Jersey agencies that provide community transportation services, including the state, municipal and Social Service Agencies.

To start planning on how to get through

this transportation funding crisis, the New Jersey Council on Special Transportation, has written letters to Governor Corzine, Senate President Richard Codey and Assembly Speaker Joseph Roberts, asking them to set up a bipartisan committee to review long term and short term solutions.

To date, unfortunately, no responses have been received from our July 7th letters.

The New Jersey Council on Special Transportation and this Advisory Commission cannot solve this problem alone. We are all in it together, and it will get worse if we do nothing.

0044

There is a short term solution, however, and New Jersey Council on Special Transportation will continue to work hard for its success.

Currently, in the legislature, there is Assembly Bill 2046 sponsored by Assemblyman Wisniewski, and its companion Senate Bill 1830, sponsored by Senator Sacco.

These bills will change the funding formula for the SCADRTAP Program from seven-and-a-half percent, to eight-and-a-half percent per share. The additional one-percent share should be \$4 million.

The original intent of these bills when it was first introduced in the last legislative session, was to allow Public Transportation Services to increase, because there was a need and demand for more services. Estimations back then said that these bills would help provide an additional 250,000 - 300,000 rides per year. This is no longer the case.

Now, the successful passage of these bills will only help maintain the prior year transportation service levels, and this may not even be enough.

0045

And, also, unfortunately, if these bills are passed in early 2009 and signed by the governor, the increased funding will not be available until at least January 2011.

So, again, 2009 and 2010 are going to be critical times when providing transportation services.

And I am delighted to say that the legislators' response to these bills have been very encouraging and very supportive.

Last Thursday, in this room, the senate version was unanimously and successfully voted out of the Budget Committee, and should be making its way to a full senate vote very soon.

The assembly version seems stuck in one of the committees that doesn't meet regularly.

However, since we may not have to concentrate too much on the senate version anymore, we can put all our efforts in the assembly version.

With a decrease in transportation funds and the poor economy, the State needs to be prepared for some possible results due to less transportation being available.

Senior citizens who may have stopped

0046

1 driving, may again get behind the wheel and
2 possibly risk their lives and the lives of
3 others.

4 Senior citizen and persons with physical
5 disabilities, who, at one time, used community
6 transportation services which allowed them to
7 remain independent may end up in nursing homes
8 or assisted living facilities. The mentally
9 disabled, who are fighting to live
10 independently, may not be able to do so, and
11 may need to return to facilities that assist
12 them.

13 There will be less transportation for food
14 shopping and nutrition sites.

15 Many counties have also said that they
16 plan on eliminating or decreasing their
17 vehicle replacement programs in order to put
18 the monies into service areas. On one hand,
19 this is a good idea. On the other hand, older
20 vehicles are less reliable, have more
21 breakdowns and have increased maintenance
22 costs. Expect waiting lists for medical
23 appointments, dialysis, chemotherapy and
24 radiation.

25 Today, many of the community

0047

1 transportation systems are experiencing waiting
2 lists for services, especially dialysis. It is
3 only going to get worse.

4 Dialysis transportation is becoming a
5 major concern not only for the 21 counties, but
6 also for the numerous municipalities and social
7 service agencies throughout the state.

8 Twenty years ago, people needing dialysis
9 transportation services were not living long
10 lives, and seats on a vehicle frequently became
11 available. Thankfully, with today's medical
12 technology, people on dialysis are living much
13 longer and normal lives. But, the seat on a
14 bus for a new dialysis rider is less frequent,
15 and waiting lists continue to grow.

16 In addition to the dialysis services, the
17 New Jersey senior population is increasing
18 dramatically. People are living longer, are
19 much more independent.

20 People with mental and physical
21 disabilities are also winning their battles to
22 live independently. But they all have one
23 thing in common, to succeed on their own, they
24 must rely on Paratransit and Community
25 Transportation Services.

0048

1 Commissioners, I hope that as a result of
2 these three public hearings, you will compile a
3 report of these recommendations to the governor
4 and our legislators.

5 Community Transportation Services are a
6 lifeline for hundreds of thousands of New
7 Jerseyans.

8 In regards to the Casino Revenue's PAAD
9 Program, what the state is doing, is not in the
10 best interest of these crucial senior programs
11 that continue not to receive sufficient
12 funding.

13 The federal program under Medicare Part D

is providing reimbursement to New Jersey 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 revenues did subsidize the PAAD Program.

But in the Fiscal Years 2007 and 2008, the

State reported contributing zero dollars. But somehow walked away with a profit of tens of millions from Medicare Part D reimbursements.

These are monies that could help folks survive. And 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 where they fund PAAD funding.

Commissioners, 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 Atlantic City casino comps and the parking tax that, at one time, were in the Casino Revenue Funds.

In regards to the parking tax, I believe that after it sunsets out of the Casino Revenue Fund it is redirected into the Casino Redevelopment Fund. We need loud voices and strong legislators who will then make these fundings 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.

Some of the horse tracks at Monmouth and Atlantic City were voted in, as the casinos. Isn't horse betting gambling?

Also in this dwindling economy, the issue of sports betting issue should be brought up again. Yet, it is a touchy subject. Do you not think right now, people are illegally betting on sports as I speak?

This, too, can bring millions of dollars to the casino fund, but also to the State as well.

And before I end, and I will end in two seconds. In order to get attention for the SCADRTAP Legislation Bills Program as I stated, on September 19th, the New Jersey Council on Special Transportation unveiled our "Please Help Save My Ride" campaign. 20,000 full color petitions were distributed across New Jersey and signed by our riders.

Within the first three weeks, 15,000 were signed. Right now, 20,000 plus a few thousand

black or white copies are now signed and being

NJ Casino Revenue Fund Advisory Commission Hearing
prepared to be delivered to our legislators and
Governor Corzine.

There is a community transportation
funding crisis happening right now, and help is
needed.

So, again, on behalf of the New Jersey
Council on Special Transportation, I thank you
for this opportunity to come before you and
touch upon concerns, and provide suggestions of
how, not only transportation, but all the
programs can be maintained during this time
when we don't know how much worse this economy
is getting, or when it will start getting
better.

So, thank you very much.

MS. RAMOS: Madame Chair, I have a
question.

One of the things that you said I was not
aware of. You said that even if this is passed
in 2009, the funds wouldn't be available until
2011?

MR. VIERIA: I believe that is true,
because already we are in Fiscal Year 2009. If
it is signed, I think, any time next year, even

later than July of 2009, it goes to the next
year.

I am not sure how the fiscal year -- I am
not sure how they came up with that or it was
explained to me, but that was the date that I
have.

MS. RAMOS: And it was signed by the end
of this year?

MR. VIERIA: No. It was signed and put in
fiscal year on my budget. The budget is
already out.

SENATOR KEAN: Fiscal year is fiscal year,
so it is still delayed, but it would be six
months earlier than 2011. It could be mid
2010.

MR. VIERIA: And, also, about a year, I
think.

SENATOR KEAN: Two things. Number one,
many of us have been complaining for many a
year about transfers of funds for official
federal money, especially in the area of
Medicare Part D.

If it came through and if that money, you
know, was all freed up and sent elsewhere
within the general fund and, let's say, not for

health care purposes. Actually, it was
appropriated over the last couple of years.

But the second substantive question that I
have for you. You've mentioned before that
paratransit vehicles are extending the life of
expectancy, and the use of those vehicles deal
with the crisis. What is the current life
expectancy of a paratransit vehicle, and what
are, when you refer to extending the life, just
saying -- are you saying 12 years; how does
that work?

MR. VIERIA: We look for a seven-year
lifeline.

Bob Koska will state the capital and the
program.

Usually about seven years, because by the time that I have seven years on them, they have about 400,000 miles on the SCADRTAP vehicles.

A couple of years ago -- Atlantic County just went over to these vehicles, only because these vehicles last a little bit longer.

Also, at that time gas was much more cheaper. Today, some of our gas was like diesel, and the prices weren't even cost saving.

So, it was about seven years that we went over to those vehicles. And they are used every day. Some are used up to 20 hours each day.

MADAME CHAIRWOMAN: Thank you.

MR. THEBERY: Isn't it also true that if you have older vehicles, if you need parts, if you have older vehicles, you can take the parts and transfer it? I'm not saying that you do, but you can?

MR. VIERIA: Yes.

MADAME CHAIRWOMAN: Okay. Thank you, Michael.

MR. VIERIA: Thank you.

MADAME CHAIRWOMAN: David Ricci, State Coordinator Department of Health and Senior Services for Adult Protective Services.

MR. RICCI: Madame Chairwoman and Members of the Casino Revenue Advisory Commission, I would like to thank you for inviting us to be here this morning.

My name is David Ricci, and I am the state coordinator of Health and Senior Services for Adult Protective Services.

The abuse and neglect that I see involving

our elders in communities in New Jersey is, unfortunately, alive and well. It is also on the rise.

In the last decade, the number of abuse has spread from 3700 to 4600, which is a 24 percent increase. Not only is the number of cases increasingly, but they are becoming more complex. There is a growing number of financial exploitation cases, and cases that end in guardianships, I would say, because of the decline in the economy, they are increasing faster.

And cases that are in guardianship, there were 160 guardianships instituted by Adult Protective Services in 2003. We now stand at 260 guardianships in 2006.

So, as you can see, that old, old population that you heard about, reside by themselves, are declining and becoming more frail.

The APS budget has remained at its current level of \$4.1 million since 2000. It is putting a serious strain on the county APS provider agencies.

There are 13 county APS providers that are

Boards of Social Services, the social service agencies that used to be known as county welfare agencies. Because of this strain,

counties are dropping the services. Additionally, the five non-profit county APS agencies are even more fiscally strained than the Boards of Social Services.

You have a position paper dated February 25, 2005, from the county welfare director's association, it was directed to our position showing a change in activity of over 112 percent from 1992 to 2003, a severe shortage, and requesting an immediate commitment to adequately fund and support the Adult Protective Services statewide.

The position paper goes on to say, during the same period, state funding for Adult Protective Services remained basically unchanged from the modest 17 percent in 2001. During the same period, the actual cost of living increased by over 35 percent.

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.

As I said, you have a copy of the letter. A second letter was just sent from the Director's Association, and you have a copy of that, also, in your packet.

And I quote from that, basically, facing no additional funding as the result of our 2005 appeal, our fiscal situation has reached a critical situation. Not receiving an increase in Adult Protective Service allocations, increased costs of providing services on the county level, combined with the current bleak economic climate has a potential for jeopardizing the effectiveness of this vital program.

When you have the time, I urge you to read this letter in its entirety.

I compare New Jersey with the State of Massachusetts, which had a 2005 projected APS service budget of \$13.6 million, up from 11.4 million for 2004.

Unlike New Jersey where APS serves adults from age 18, the Massachusetts program serves only those individuals 60 years of age and older.

Massachusetts is almost identical demographically to New Jersey, and carries a similar caseload.

It is obvious that New Jersey is woefully underfunded at \$4.7 million. And it is similar to the DYFS Protective Services, especially when APS intervenes to protect vulnerable, elderly. Just as we do not want harm to come to a child, neither do we want harm or exploitation to come to a vulnerable adult.

Given the need and the demand for adult services, the two million dollars that you are recommending, will assist and help APS providers in carrying out their statutory duty.

I thank you for this consideration, and I would just like to say, that from a statutory mandate, we must respond within three days.

And we are at a level right now, where we are not able to respond and would hate to see anybody left out.

Thank you very much. If there are any questions, I would be happy to answer them.

MADAME CHAIRWOMAN: Okay. Ed Tetelman, Public Guardian, Department of Health and Senior Services.

MR. TETELMAN: Good morning, Madame Chair Miller and Senator Kean, and Commissioners. I thank you for allowing me to give testimony.

We have charge of persons after they have been judged incompetent by the State.

I have been the Acting Public Guardian for Elderly Adults for almost seven years.

When I was appointed in 2002, the Office of the Public Guardian for Elderly Adults 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 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.

The individual situations vary from a

straight substitution of guardian, usually involving an elderly person who can no longer continue as guardian because of illness to homeless individuals to individuals who have been exploited, abused or neglected by family or so-called friends.

Indeed it is not unusual for the OPG to be appointed guardian and the incapacitated person to have four or more children. Many of these cases involve the misuse of the elderly person's funds by a person with power of attorney.

These individuals simply think once they have a POA, it's their money. We've seen similar activity involving a house that is signed over to a child or friend.

Mortgages are then obtained and then defaulted and the elderly person, who in many cases has lived in the house all their life become homeless.

OPG is also seeing more wards whose ages are in the 60 as opposed to the 80s.

These wards often have serious psychiatric conditions. Overall, OPG is being appointed guardian of persons that present with more

complex situations, including challenging family and friends.

These cases take more and more time to manage. Beyond care management, OPG marshals a ward's assets and liabilities. We found that

banks, pension funds, and brokerage houses don't cooperate readily as they had in the past. So time is added to the process.

At the same time we're receiving daily calls from nursing homes and hospitals concerning payment for services.

Also getting an individual eligible for Medicaid is very, very difficult. The citizenship issue alone can take weeks, months or years if paperwork cannot be found.

For example, right now we have a ward in Atlantic City Medical Center. She was on her way to New York City when her bus broke down in Atlantic City. She had medical incident and was admitted to ACMC. She lost her purse so she had no identification. She thinks her name is Brown and thinks she is from Maryland. She had been at ACMC for over a year because we have no identification and therefore she cannot qualify for Medicaid. Often there are legal

issues that tie things up such as the ward who had all his properties under various corporations, for which no taxes had been paid. OPG must untangle these situations. Needless to say, each case is a challenge.

During my tenure, OPG has managed to avoid asking for additional state funds. OPG has maximized revenue through commissions, fees, and the federal share of Medicaid. When I began, OPG had approximately 28 full time state employees and today we have 34 full time and 35 part time employees. As you all know there is a hiring and promotion freeze within state government because of the state's fiscal crisis. Fortunately the OPG statute allows the Public Guardian to hire consultants. Because of the need to hire outside consultants, the OPG's expenses have increased by 18 percent, and at the same time our revenues are down 8 percent. Our staff case ratio in finance alone ranges for an accountant between 100 and 140 cases. It should be between 50 and 65 cases. We need to continue to purchase outside services that are costing more in order to reduce the caseload ratio and to address a growing

caseload. My staff is doing an extraordinary job, but we need to keep pace and balance with our caseload.

No one wants an error to occur, whether it is 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 that \$750,000 be designated for the OPG in the next fiscal year. These funds will allow us to reduce the caseload ratio and cover the cost of consultants in the next fiscal year.

On behalf of our existing wards and future wards I thank you for giving me the opportunity to speak to you today.

MADAME CHAIRWOMAN: Okay.

MR. TETELMAN: Thank you very much.

MADAME CHAIRWOMAN: Thank you very much.

Our next speaker is Steven Fittante. He is from Middlesex County.

MR. FITTANTE: Madame Chair, Members of the Commission, Senator Kean,

As the director of the Middlesex County Department of Transportation, I operate a casino funded service. A service that I may supervise over 500 passenger trips a year.

We've seen a tremendous increase in our ability that we could handle in the last five years.

And today what I would like to describe with respect to why funding to these transit groups and the SCADRTAP Programs are so critical at this time.

Recently, the State focused of the needs for better coordination of transportation resources through the creation of the Council on Access and Mobility based on the focusing of federal need in terms of providing better coordination and better transit services.

But at the state level of New Jersey, we are also looking at how to focus on coordination of state funding and other funding sources that are provided in 21 counties.

County operated systems, traditionally serving older persons and persons with disabilities, are more often serving other transportation dependant persons as well as

choice riders as a more integral part of the New Jersey Transit bus and rail network.

Many counties now operate services that also serve transit demands, particularly in rural and suburban counties that NJ Transit just does not have the funding to meet through expanded routing.

Many of these routes also serve as connectors to NJ Transit Services. And the empty seats not filled by the senior citizens and people with disabilities, or are being filled by low income residents, students and commuters electing to leave their cars at home.

While the first priority for SCADRTAP funds is meeting the needs of senior citizens and people with disabilities, the stable funding of the county coordinate and transportation systems also promotes a more efficient delivery of passenger transportation services that function as part of the larger bus and rail transit network in the state.

At one time it was a wonderful achievement to use transit for the economical and environmental considerations.

Proposed legislation will provide a

minimum level of stability for mobility systems that promote independent living and reduced congestion and provide a better air quality if passed.

Again, I urge you to support a Number 2046 and Senate 1830, as a means of keeping these systems viable in the future.

Thank you.

MADAME CHAIRWOMAN: Okay. Joseph Woods, Congregate Services.

MR. WOODS: I would like to thank the Committee for the opportunity to speak to the Congregate Services Program.

Our building is in Spotswood, New Jersey; almost 130 years, and one is 15 years old. Barely built with money needed for services.

The Congregate Services Program started 70 years ago in our building. It has caused dramatic change of lifestyle for our residents.

Kathy is our director of the Congregate Services Program, and she will speak about a couple of our residents.

I know one is about 94, and she has lived in the building. She used to talk about, I don't know why I'm still here; life isn't worth

living; this is no fun.

She even said that she used to substitute a bowl of cereal and soup for some ice cream, and now she has a nutritious meal every night thanks to our Congregate Services Program. She said it is the first time in three years that she would rather eat with someone, than eating all by herself.

She used to talk about not wanting to live any longer. Now she doesn't talk about that anymore. She is always happy, excited about our services, the Congregate Service Program.

We have about 200 residents, 120 of them take part in helping in various ways.

One of the things that really out does is, when our residents come back from the hospital, they don't keep you very long, they come back in very frail health, and now they are able to have a meal delivered to them, they can have potential care and they can have their meals served.

So, I want to thank the Casino Revenue Commission for the money put into this program. Hopefully, we can get more funds for the senior housing that has existed for years.

Kathy is going to talk a little bit about that.

MS. ALEXANDER: I am actually going to take time right now to read a letter that one of our many residents wrote that I brought with me to read to you.

"I am writing to you today to let you know just how important and valuable Congregate Health and Services is to those of us senior citizens who live here at your senior home.

Many of us are older, frail seniors who are living off of a fixed income. And it was Congregate Programs that feed us dinners at a cost that we can afford.

We don't have to worry about how we will afford a lack of appropriations, when we don't know where it will come from.

Many of us here are frail and disabled and have a difficult time cleaning and preparing our meals. With Congregate Program, we can remain as tenants. We can stay in our

apartments, knowing that we have help when needed. We do not have to be afraid of being alone anymore. We know that Congregate Services is there to help us remain tenants and

to remain in our homes very warm to us.

This is very important at any age. It is especially important to the elderly.

Our prayers are that we will continue to afford the Congregate Program, because it is the best program out there for us seniors.

The bulk of senior citizens living in New Jersey is your mom, my mom, she is living alone, wondering where her next meal is coming from; wondering what will become of her if she gets sick or injured; will she have to leave her home? These are the fears of many seniors living here in New Jersey.

The Congregate Program takes those fears away. Along with Congregate, they don't have to worry about being alone anymore.

To know that the program will provide them with affordable meals, housekeeping, laundry, medicine and help when they are sick or they are injured, whether it is running home from the hospital, this is afforded to these seniors.

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.

And with your support and your funding, you are helping to make a difference in these peoples' life.

I happen to be very grateful to be a part of it, also. And I want to thank you on behalf of myself, Mr. Woods and all the seniors who are grateful to be here, are worrying a little less, they are eating a little better, and they are staying in their homes a little longer.

Thank you very much.

MADAME CHAIRWOMAN: I would like to say that, without funding for the Congregate Program, some of the residents would lose their homes and be homebound and they wouldn't be in their houses. We appreciate it. Thank you.

MS. ALEXANDER: Thank you.

MADAME CHAIRWOMAN: Bill Berg, Hunterdon County.

MR. BERG: I am Bill Berg; I am the vice chairman of the Advisory Council for Hunterdon County Senior Services.

And I would also like to thank the Commission for allowing me to discuss what, to some, the senior revenue means to our seniors and the disabled population of Hunterdon County.

But before I read the letter, what was already submitted as testimony to be part of the record, I would like to say that you probably will not hear anything of this

testimony that has already been said about the technicality of the most received of fundings for the continued programs.

However, these repeated goals for full-funded programs, it demonstrates how critical the needs are throughout the entire state.

The Advisory Council of the Hunterdon County Commission of Senior Services supports the requests for revenue mentioned by the New Jersey 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 such as kidney dialysis, support for respite care, affordable housing and adult protective services, all of which allow continued independent living in their homes.

These programs have been underfunded for years, and will soon see services stripped down or limited.

Seniors who receive Meals on Wheels are homebound and unable to food shop for basic necessities. These delivered meals help our seniors to receive proper daily nutrition and are essential in maintaining an individual's health and wellness. These meals are critical for those that are diabetic and those diagnosed with failure to thrive.

Some are physically challenged, and unable to stand for long periods of time to create meals. The delivery of these meals often provide a well needed break and piece of mind for their caregivers.

The Meals on Wheels delivery volunteers often provide many seniors with the one social contact they have on a daily basis.

Without this program, many seniors have no

other alternative to obtain adequate daily nourishment. It makes fiscal 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 state Constitution.

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 and a drain on the already overstressed Medicaid program funds.

And I thank everybody for their consideration on this urgent issue.

MADAME CHAIRWOMAN: Thank you.

Cynthia Voorhees from Somerset.

MS. VOORHEES: Good morning, Madame Chairperson, Commission, Senator Kean; I am Cynthia Voorhees; I am the administrative assistant for senior services at Somerset County.

I want to thank you for the opportunity to

24 speak before you, and I am directly in support
25 of the Commission's recommendations for the

0074
1 Casino Revenue Funds Program for seniors and
2 citizens with disabilities as presented to
3 Senate President Richard Codey and Assembly
4 Speaker Joseph Roberts on behalf of our seniors
5 on March 28th, 2008. Assembly Bill Number 2046
6 sponsored by Assemblyman John S. Wisniewski,
7 Assemblyman Thomas P. Giblin and co-sponsored
8 by Assemblywoman Wagner was introduced February
9 17th, 2008.

10 This bill increases the annual amount of
11 money for transportation by one percent for
12 seniors already in place for the elderly and
13 disabled.

14 It is incomprehensible that the
15 transportation reduction schedule 2009
16 allocations projection is \$33,001,800 versus
17 \$36,928,000 in 2008.

18 This represents a decrease of eight
19 percent for the entire state, and a decrease of
20 eight percent for Somerset County, the county
21 in which I am employed.

22 How is it that an increase in the over age
23 65 population results in a tremendous per
24 capita decrease in funds?

25 As I work primarily with older adults, my

0075
1 comments are most specific to that segment of
2 the population, and are related to mental
3 health.

4 There are times when it takes money to
5 save money, and I consider this one of those
6 times.

7 One of the fastest growing segments of the
8 population, the oldest is 85 and older,
9 accounted for about 12 percent of the elderly
10 in 2000, and this number is projected to
11 increase to 19 percent of the population by the
12 year 2040.

13 Per capita costs for acute and long term
14 health care services are highest for people at
15 age 85 or older.

16 Based on the census Statistics Bureau,
17 there are 1,443,782 persons age 60 and over in
18 New Jersey with 1,113,136 of them over age 65
19 and older. From 1990 to 2000, the number of
20 persons age 85 or over grew by 42.6 percent.
21 Disabilities and disease prevalent in the
22 elderly, and greatly affect functioning level
23 and independence.

24 One third of the older adults who live
25 alone do not have someone readily available to

0076
1 meet their transportation needs. Even those
2 living with relatives often do not have
3 transportation available.

4 In today's world, most of the relatives
5 are employed, and the volunteer pool
6 drastically has been reduced.

7 Persons who may be available to do
8 volunteer transport are more hesitant to do so
9 due to liability issues.

10 Transportation plays a vital role in the
11 area Agency on Aging goal to assist seniors to

age in place with the best possible quality of life.

This includes getting to senior centers, doctors appointments and medical sites such as dialysis, radiation and chemotherapy.

In some instances, there also needs to be services for grocery shopping.

The Merck Manual of Geriatrics reports that in 2002, people over the age of 55 made more than 224 million visits to their local physician's office. Those age 65 to 74 averaged 6.1 visits per year, and those age 75 or over averaged 7.2 visits per year.

In Somerset County, for the first three

quarters of in 2008, there was an increase of six percent in the number of trips versus the total number in 2007. This was 525,000 trips for 23,000 registered clients.

As the senior population ages and increases in number, the demand for transportation will, proportionately, be increased.

A neglect to meet this growing demand will directly adversely effect mental health of seniors who may already be confronted with having their wheels taken away.

To identify with this situation, just ask someone to tell you that you can no longer drive and take your car keys. How are you going to get home? I feel quite certain that it will not take long for you to start feeling isolated from society, even if you have family to provide transportation. But if you are like one third of the older population living alone, your situation becomes more complex. To remain healthy you must remain active physically and mentally. Yes there are ways to remain active when one is alone, but as one ages, the initiative may decrease.

Being with others has many benefits, such as verbal communication, involvement in activities, and often one has improved nutritional status.

The inability to get to senior centers, for example, leads to isolation that may lead to depression, which is not a normal part of aging, increased substance abuse or anxiety.

An article in the November 15th, 2008 edition of the Virginia Gazette references a professor who identified one of the key factors that lead older adults to become addicts. About one-third of older adults experience late onset addiction to alcohol, in which drinking increases in the 50s and 60s, probably in response to personal loss and other problems we face in getting old.

The risk of depression in the elderly increases with other illnesses and ability to function becomes limited.

Depression is a serious medical condition that involves mood, body and thoughts. It affects how one sleeps, eats, alters self perception that changes the way one thinks and feels. It can make routine tasks unbearably

0079

1 difficult, and take the joy out of previously
2 enjoyed pleasures.

3 Physical symptoms such as headaches, heart
4 disease, stomach pain, chronic pain, digestive
5 disorders may also be experienced and be
6 nonresponsive to routine treatment, all
7 adversely affecting the quality of life.

8 The American Psychological Association
9 reports that an estimated 20 percent of older
10 adults living in the community suffer from
11 depression.

12 The National Alliance on Mental Illness
13 reports that some form of depression affects
14 more than 6.5 million of 35 million Americans
15 age 65 or older, and is often associated with
16 dependency and disabilities.

17 According to the World Health
18 Organization, depression is second only to
19 heart disease as a cause of disability.
20 Depressed older adults tend to use health
21 services at high rates, and engage in poorer
22 health behaviors that lead to an increase in
23 expenditure for health services.

24 The need for escorted transportation
25 increases as the seniors have increased

0080

1 mobility issues and need one-to-one assistance.

2 Mental problems are reported in older
3 patients, symptoms of depression have, roughly,
4 50 percent higher health care costs than
5 non-depressed seniors.

6 Depression and other mental disorders or a
7 substance abuse disorder are risk factors for
8 suicide. Substance abuse, including alcohol,
9 may be considered self treatment for
10 depression.

11 Although they comprise only 12 percent
12 U. S. population, people age 65 and older
13 accounted for 16 percent of suicide deaths in
14 2004.

15 The National Institute of Mental Health
16 reports that of 100,000 people age 65 and
17 older, 14.3 died by suicide in 2004. This
18 figure is higher than the national average of
19 10.9 suicides for 100,000 in the general
20 population. The rate for non-Hispanic white
21 men age 85 or older had an even higher rate at
22 17.8 suicides per 100,000. An estimated 8 to
23 25 non-fatal suicide attempts occur for every
24 suicide death.

25 And I just want to add, the day before

0081

1 yesterday, we had a client, she had been
2 drinking light alcohol, rubbing alcohol and
3 taking her meds, and if she had not been
4 getting a meal, we probably would be at her
5 funeral today.

6 It is evident that an eight percent
7 decrease in the allocation of funds is
8 unacceptable. And I support the Commission's
9 recommendations for increase in funding.

10 Additionally, I support that the Casino
11 Revenue Funds be utilized in programs for which
12 they were originally dedicated. The time to be
13 proactive is now.

MADAME CHAIRWOMAN: Thank you very much.
Well, we have some chairs here, they are
not reserved anymore, so, if -- would anybody
from the back like to come up front?

(No response.)

MADAME CHAIRWOMAN: Okay. Back there, you
can hear; all right.

Our next speaker is Victoria Webb; she is
not here, okay.

George Martch. George Martch is from
Morris County.

MR. MARTCH: Good morning, and I

appreciate the opportunity.

My name is George Martch and I am serving
with the Mercer County Office of Aging Council.

I am a resident of West Windsor County
since 1962. This opportunity is, and your
willingness to serve us, is impressive.

The public probably would be more reactive
if more information was available to them. And
I believe if the public knew more on this
support, that they would understand. And I
believe that communicating this message is one
thing that would serve advocacy. And I will
just make one observation.

Community colleges are an excellent
resource. Community colleges, with many people
in nursing care and service delivery, have a
great match of being able to apply county
college skills to community services. And I am
working with, in the Mercer County community to
try to see if we can do that.

I will continue with my testimony.

Many of the New Jersey seniors in the
neighborhood and those self-sufficient, have
something going on in their lives.

Sometimes with the assistance of passing

friends or separate religious organization in
time of their need, and others are totally
dependent on funding provided by government
agencies.

As you know, the Older Americans Act was
established by Congress to provide funds to
support those that are less fortunate.

New Jersey has had the wisdom and
foresight to create the Casino Revenue Funds to
be a source of funds for those needs.

Non-profit agencies have formed to deliver
a variety of services and solicit funds to
support their delivery plans.

Twenty-one counties of New Jersey operate
currently, and manage programs and available
funds in which counties -- proposals are issued
to solicit bids for some agencies that are
willing to compete -- they provide services.

The RFPs are prepared as a result of an
area service plan that matches the budget that
are expected to help those variety of services.

Mercer County operates a program with a
published directory for contact information for
all ranges of services. To access the service,
the clients must apply. And I think that is a

point to pause and think about.

If you are mentally ill, or if you are not aware of services, if you are a caregiver and you are not aware of the services that are available. There are many people who do not apply, they are not represented and their needs are not really met.

The referrals are made by agencies when they make contact with those that have critical needs, and we referred to that this morning.

Waiting lists occur when the demand for the program is at capacity.

The Casino Revenue Funds support many categories of need, all of which are important.

Today, on behalf of those that are living alone and are dependent upon those others to deliver their next meal, I request that the Commission consider the fight and increase the funds outdated by bills across New Jersey.

When, in the course of human events, the economy collapses or particular prices escalate, less fortunate are impacted.

Meals on Wheels assistance requires prepared food, transportation and volunteer service providers.

The services impacted by the cost, and by limiting volunteers who are willing to, and financially able to -- willing and financially able to devote their time to participate, that's not structured. These are people that have the time and they have the finances to use that time. If they have to have a job, they are not able to volunteer.

Some able body drivers could drive the county provided vehicles, are not willing to take the risk of liability exposure as the driver, then the insurance programs, able to -- government employees are not volunteers.

New Jersey legislation must enable the needs and offer liability insurance to all in all regards, to the event that New Jersey offers all these services that need to be tapped.

More efficient county legislature should assign volunteers to lower the cost.

Meals on Wheels is crucial. Recipients on Meals on Wheels service need alterations to services that would be beneficial.

I encourage the Casino Revenue Commission to remand -- recommend increases in Meals on

Wheels funding to triple last year as proposed and recommended by the New Jersey area Agencies on Aging Association, particularly in light of the economy, I urge the legislature to enable a means of intergration of service delivery to improve efficiency and lower costs of service.

I have just one comment. The transportation service record at Mercer County shows the different categories in which different rides are provided, and I wanted to compliment the Mercer County and each county. They are striving hard to integrate services so that when the bus is moving, it is not just satisfying one need, but in point, it is satisfying all needs of that trip. And that is

character of Meals on Wheels.

We have volunteers driving their cars, the sole purpose of delivering a meal. As they go in and their social visit and all the fallouts that are very necessary, but they are extra.

The nursing training and various other sources of training are in the community colleges.

And volunteer drivers apparently have to be age 21 and up. That is an impediment to

getting some people who are more than qualified to drive. Going through a reservoir of resources, they could be the source of the drivers which are now in minimal existence.

And those vehicles could more than just deliver meals. I think an integrated look at the plan is necessary.

Thank you.

MADAME CHAIRWOMAN: Thank you.

Frank Byrne.

MR. BYRNE: Good morning, Members of the Commission, my name is Frank Byrne, and I am vice president of Public Policy for the New Jersey Association of Homes and Services for the Aging.

I will be very, very brief.

On behalf of the Association and its members, thank you for providing opportunity to comment on the benefits and importance of the Congregate Housing Program Services which is supported by the Casino Revenue Fund.

There was a group from Asbury Towers, represented by Susan Bruncati from Asbury Towers. With me here today is Karen Scalera, Executive Director of two NJAHS member

communities, Oak Woods and Charleston Place, located in Middlesex County.

Attached to my testimony, we have a letter from Karen and other members, letters from residents that wanted to let you know about Congregate Housing.

Our organization represents over 140 nonprofit nursing homes, assisted living residences, residential healthcare facilities, board and care homes and independent senior housing apartments buildings, also identified with Congregate Housing. So we are representing the whole community and state across the nation.

We're the oldest state association in the country. We were established in 1931, serving thousands of seniors in all of the facilities throughout the states.

The Congregate Housing Program is unlike many of the other programs that are operating under the Medicaid program. It is extremely unique and extremely flexible, and allows residents to remain in their home no more, no less than they need them.

It is extremely cost effective, allowing

those aged to remain in place, where they want to be, in their home.

With that, I will turn it over to Karen.

MS. SCALERA: Good morning. It is really an honor to be here to talk about Congregate Services.

My name is Karen Scalera; I am the executive director. I am also a senior resident in charge of placing them in their homes.

We have a total of 188 apartments; we have approximately 180 residents. Our age goes from 37 to age 109. We serve an elderly and, also, disabled population.

The average income is \$11,900 a year. They pay 30 percent of their income for rent.

The Congregate Program, as Frank said, enables residents to obtain services that they need, when they need them, in the place they call home.

It is very cost effective, because it allows the residents to age in place. They have easy access to the services, because they are already in the building. There is no wait. You don't have to contact the county or wait

for the services to begin.

If someone is hospitalized, someone within the services can make sure that you immediately get it.

It is cost sharing. And I think they are paid -- a portion of the cost also pays their income.

An example would be, for a three-course dinner, some residents pay .40 cents.

Congregate Program offers -- our program, it is flexible. Our program happens to offer just meals. Same congregate, and housekeeping services.

It works in conjunction with other programs such as CCPED. If the residents need their services, we piggyback them and they get whatever services they need.

I have 180 residents, as I said, in 12 buildings.

So far this year, 101 residents have taken part in programs in one way or another. Some only meals; some only housekeeping.

We have served 6480 meals; we have provided 1300 hours of housekeeping. And in that cost, the State saved \$68,000 per person.

That is the cost for one person to go into a facility or nursing home.

And with a decrease in funding, the cost of those remaining in this situation increases. We would be looking for some increase funding, because I would like to have the option of adding more services.

Medication management seems to be a top priority that some people, that is all that they need, is for someone to watch their medication.

And, unfortunately, because they don't watch their own medication, they end up going out and being hospitalized until they can get it back under control.

I would just like to tell you quickly about two of my residents.

One, Mr. D., moved into our building seven years ago. He lost his wife two years ago.

He would have been institutionalized immediately. He had never taken care of himself and he never prepared meals, and he had never taken care of a home.

He was with us for another two years. He liked this program so much, he would come down

early in the day and help set the tables. It was his social time.

I also have a resident that -- she is 101. And she dresses to come down for dinner every day. She fixes her hair and she flirts with the meal server.

And I have a husband and wife in their 90s in one apartment, and the wife has dementia.

We recently moved their disabled son into another apartment.

They cannot prepare their own meals, because the wife was the caregiver; she was the meal person. She took care of the apartment. She can't do that anymore, so they are in the Congregate Program. And all three of them, both for the meals and the housekeeping services.

And they get, in this particular case, they get their dinner meals from us. They participate in the Meals on Wheels Program. They were getting their lunch, so they had no food preparation issues, and then we provide the housekeeping.

At this point in their lives, they still don't require medical assistance, so they don't

need the personal care they would have to pay to get some of the other programs.

The Congregate, for us, is a wonderful answer.

As Frank said, that we brought about 30 letters. And the people, in those letters, the people appreciate the good nutritious meal.

And Congregate provides a setting where they are socializing with their neighbors, and assists those that choose to be in their homes, because it is keeping them in a nice clean home where they can feel safe and secure.

Thank you so much.

MADAME CHAIRWOMAN: Thank you.

Any questions?

MS. RAMOS: I do have a question. I was wondering, what is the portion of your resident population that is disabled, but not senior?

MS. SCALERA: I have to think about that for a moment. Disabled non-elderly is probably about 10 percent.

MS. RAMOS: I mean, I realize that everyone gets served, like, the same meal.

What about the people with special needs?

MS. SCALERA: We try our best to

accommodate the special needs diets, which is why a few years ago we decided to hire our own cook so that we had more control over, both, the quality of the food and, also, to allow some leeway for special diets.

6 So, the cook tries to work with the
7 residents as best as they can. Folks that are
8 on a low salt diet. And we have a few that we
9 have to be very careful with, like, you know,
10 liquid diets and the food being, you know,
11 prepared special for them.

12 MS. RAMOS: Thank you.

13 MADAME CHAIRWOMAN: Thank you very much.

14 MS. SCALERA: Thank you.

15 MADAME CHAIRWOMAN: Okay. Donna
16 Kovalovich; Donna is not here.

17 MS. MICCIO: Good morning, Ladies and
18 gentlemen, my name is Olga Miccio, and I am the
19 Congregate Coordinator for Wilentz Senior
20 Residence in New Jersey.

21 Our congregate housing services began in
22 1981. This year we have served 91 residents.
23 We offer dinner meal on Monday through Friday,
24 Saturday lunches, housekeeping and laundry --
25 laundry and personal assistance.

0095

1 The personal assistance component is
2 crucial, as our residents health declines or
3 requires more added assistance upon returning
4 from being hospitalized.

5 The meals are also vital, as our residents
6 lose the ability to prepare nutritious meals
7 for themselves, or need help upon returning
8 from being hospitalized.

9 This program provides key services that
10 enable our residents to live independently and
11 age in place.

12 By providing this program, the State
13 provides the services that our residents need
14 and cannot, otherwise, afford, where they would
15 have to pay privately for them.

16 Please keep in mind that -- please keep in
17 mind that we are saving, as taxpayers, by
18 having Congregate Services versus nursing home
19 placement.

20 And I would just like to read one letter
21 from a gentleman who is on the Congregate
22 Program.

23 He receives housekeeping, but, also, his
24 wife is part of this program. She has passed
25 away, but this is what he writes.

0096

1 "My wife was diagnosed ALS, which is Lou
2 Gehrig's Disease, about three years ago, and
3 died in May of 2008.

4 She was bedridden, and could not have
5 lived here happy and well taken care of without
6 the lady who took care of her through
7 Congregate Services.

8 She cleaned the apartment and took care of
9 her, recommended foods that she could digest
10 and, most of all, talked to her while she was
11 working. She cheered her up.

12 Now that my wife is gone and I can only
13 get around with a walker, she cleans the
14 apartment and also does my laundry on a weekly
15 basis."

16 I just wanted to let you know that Mr. and
17 Mrs. J. pay around \$60 a month for these
18 services, which include laundry, housekeeping
19 every week and personal assistance when she was

alive, three times a week.

And, also, not only is this program cost effective, but a lot of our residents are lonely, and the people that, you know, do these jobs are company to them. They really look forward to seeing them on a weekly or biweekly

basis.

And I really love this program. I have been doing it for 11 years, and I really hope that you keep it going, because our elderly need it.

Thank you very much.

MADAME CHAIRWOMAN: Thank you.

We have Martin DeNero and Bob Koska from Transportation Services.

So, if you both wanted to come up.

Martin is not here, okay.

I will introduce Bob Koska as a guest and as an official, and you already know that he heads the State's County Transportation Services under New Jersey Transit.

MR. KOSKA: Good morning, Madame Chair and Members of the Commission. I am Bob Koska, the director of the New Jersey Transit's Office of Local Programs. I have been involved in the administration of the Senior Citizens Transportation Assistance Program since its inception.

In recent years at the federal level, there has been an increase in attention regarding the need for coordination of services

that provides transportation to seniors and persons with disabilities.

In 1984, in New Jersey, something remarkable happened. Legislation was passed that set aside seven and a half percent of the casino revenue fund for transportation services. New Jersey Transit, was designated as the state agency to administer and be responsible for the program.

Today, by law, 85 percent of the fund's annual year distribution to the counties remain with New Jersey Transit for accessible projects within our bus and rail system, as well as administrative expenses.

From the very beginning, this program, has been viewed by New Jersey Transit as the glue that can create coordinated systems within each county and bring together various transportation funding streams under one transportation umbrella.

It was envisioned that the coordinated services that were developed in each county would not only maximize the efficiency of casino revenue funds, but also the other local, state and federal funds that existed in various

programmatic transportation channels.

From the very first year, a county could only receive casino revenue funds for transportation if they had an adopted plan that addressed how they would spend their allocation, and how they were going to coordinate services within the county, as well

as, when possible, act as a feeder service to New Jersey Transit's existing bus and rail services.

The idea 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 towards a broader concept of individual mobility and independence.

This program not only helps individuals with nutrition, but to the doctor, to school, to shopping, to visiting a friend. Its goal was to provide freedom of mobility to an individual so that a good quality of life could be achieved.

It is not a coincidence that in 1996, in response to the Federal Welfare Reform Act, and

again in 2006 under the Federal Reauthorization Act for Transportation, the federal government required coordination plans as a requisite to receive federal transit funding.

It is not a coincidence because, by 1996, the State of New Jersey was recognized by the federal government as a national leader with regards to the coordination of transportation services.

It was the availability of Casino Revenue Funds that played a role.

After a full year of fund availability for transportation at the end of 1985, the counties provided a half million trips with program funds.

In 2008, 2 million trips were provided with Casino Revenue Funds, and an additional 2 million trips were provided with other fund streams that were brought under those county umbrellas of coordination.

The counties systems have become sophisticated in the delivery of the service, utilizing computerized dispatching, global positioning technology, onboard mobile signals and cameras on board vehicles to protect, both,

the provider and the customer.

Today it is difficult to drive anywhere in New Jersey without seeing a van or minibus that operates in the county that was most likely purchased with Casino Revenue Funds. But to describe the importance of these services in terms of transportation only, does not do justice to the full impact of these services. This is not just a successful transportation program.

Without the vital transportation services, everyone that needs to, may not arrive at the local adult care center, or have lunch at the senior nutrition center, or have dialysis three times a week, or go shopping at the local supermarket.

This program allows so many individuals to receive life sustaining, life enhancing services and allows individuals to age in place in their home and in their community.

And that reduces the cost of providing

increased services if the individual can no longer remain within the community.

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 is more of a challenge, just as the cost of providing transportation service itself increases with the rapid fluctuation of gas increases, vehicle maintenance costs increase and insurance costs in some cases becomes a prohibitive factor, the Casino Revenue Funds for transportation has not only leveled off, but are now down slightly.

For the Fiscal Year 2009, there are nearly \$4 million less in this program.

As the only program funded with Casino Revenue Funds that is linked to a percentage of the fund, the fortunes of the program go up, and now go down based on how business in Atlantic City is, instead of it being based on the needs of the population being served.

Requesting an increase in funding with the transportation program is not just a wish to continue to expand, it is how a request to avoid cuts in service that if put in place, will have a domino effect throughout the human

services sector.

That means less rides to 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 the idea that New Jersey Transit championed nearly 25 years ago, of providing increased mobility to its senior and disabled residents, will be damaged if we don't keep that vision and adequate funding in place.

New Jersey Transit is proud to administer this program, but our experience in working at the county level indicates that more funding is needed to avoid cuts in service and to maintain that vision of increased mobility for those who have no other alternative, but isolation.

Thank you for this opportunity.

MADAME CHAIRWOMAN: Thank you for that statement.

Any questions for him?

(No response.)

MADAME CHAIRWOMAN: Okay. Mr. Larson; Sy

Larson.

We have, now -- I will let you know that two more persons after Mr. Larson to make comments, and then the hearing ends.

MR. LARSON: Thank you, Madame Chair. My name is Sy Larson from AARP.

I would like to commend the Commission for holding these hearings, because more of the public is aware of the plight of some of the

seniors and disabled, the greater possibility that some action will be taken.

After listening to the testimony of the various representatives who are involved in the seniors and the disabled communities, there is very little that I can add to their testimony except to confirm the need.

Our office is constantly bombarded with issues relating to the meals, for the needs of transportation for various services, inability to pay prescription, even though we have PAAD, it seems as though the cost and ability to pay for medical needs, the AARP's position is, that since we know that for the last ten years or so, no increase for the Casino Revenue Fund was allocated to such programs of meal development,

for transportation, the AARP will support the recommendations of the Casino Revenue Commission and we, again, wish to work again with the Commission supporting these goals.

Thank you very much.

MADAME CHAIRWOMAN: Thank you very much.

And that is a powerful statement that you just made, and the Commission will look forward to working with the AARP.

And I just wanted to comment. It's been longer than 10 years, it's been 20 years since the funds have been increased.

Okay. Now we have Reverend Robert Janis-Dillon.

And I would like to say, all of the people that are here, I would like to invite you for sandwiches in the back, if you would like to have sandwiches. Okay.

REVEREND JANIS-DILLON: Ladies and gentlemen of the New Jersey Revenue Fund Advisory Commission, honored guests, it is good to be with you today. My name is Bob Janis-Dillon, I serve as minister of the First Unitarian Universalist Fellowship of Hunterdon County. As you probably guessed, I'm not

elderly yet, though I'm working on it. But 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.

I want to say first of all that I'm grateful for the work you do, and also that I appreciate the difficult situation in which we find ourselves. While I can't say I'm disappointed by the fact that people are paying 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 time 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.

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, and 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
Hunterdon County 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.

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.

Thank you for your time, and for your
important work.

MADAME CHAIRWOMAN: Thank you for those
encouraging words. And I think all your
comments at the end, speak to all our efforts,
on behalf of what we are trying to do.

I will ask the Commissioners if they have
any comments. Does any Commissioner want to
make a comment before we close the hearing?

(No response.)

MADAME CHAIRWOMAN: I want to thank you
all. I want to thank you for being here; I am
really glad that you came. Thank you for your
interest; I want to thank you for your
advocacy; and I want to thank you for your
statements.

Some of you have never prepared statements
before, and you are, again, contributing in
another way.

And I also would encourage you to use this
as a dry run, okay? There will be other budget

12 hearings, and the legislature will be
13 scheduling other hearings. It is very, and I
14 would like to say tricky, because, you know, if
15 you don't know about them -- there is a window
16 of about two weeks to get on board with those
17 hearings.

18 More people than the Commission need to
19 hear what you are saying. And the Commission
20 needed to hear this today.

21 So, I really want to thank you for being
22 here and, yes, have some sandwiches with us.

23 And the hearings are adjourned.

24 (Whereupon, the proceeding was
25 adjourned at approximately 11:39 a.m.)

0110

1 C E R T I F I C A T E

2
3 I, RENEE HELMAR, a Shorthand Reporter, and Notary
4 Public, certify that the foregoing is a true and accurate
5 transcript of the proceedings which were held at the time,
6 place and on the date herein before set forth.

7 I further certify that I am neither attorney, nor
8 counsel for, nor related to or employed by, any of the
9 parties to the action in which these proceedings were taken,
10 and further that I am not a relative or employee of any
11 attorney or counsel employed in this action, nor am I
12 financially interested in this case.

13
14
15
16
17 Renée Helmar
Shorthand Reporter