

SENIOR *i*NDPENDENCE[®]

OHIO PRESBYTERIAN RETIREMENT SERVICES



Continuing to Care for More Than 56,000 Ohio Seniors



Fiscal Year 2007 Year in Review
July 1, 2006 – June 30, 2007



OHIO PRESBYTERIAN
RETIREMENT SERVICES

Our Mission is to provide older adults with caring and quality services toward the enhancement of physical, mental and spiritual well-being consistent with the Christian Gospel.

Ohio Presbyterian Retirement Services Mission

Our Vision is to be the premier provider of home and community based services recognized for quality, innovation, financial responsibility and a positive work environment.

Senior Independence Vision



Nancy King, EDM
Executive Vice President
Chief Operating Officer

Continuing to Care by Meeting the Need

The consensus from lawmakers, gerontologists, aging services providers and advocates is unanimous – there is a growing need for home and community based care options for older adults. Ohio Presbyterian Retirement Services (OPRS) has been anticipating that need for nearly 30 years! And during those 30 years, OPRS has accelerated the growth and development of home and community based care services to what is known today as Senior Independence.

People often ask me, how we started Senior Independence. Here are some of our milestones:

- 1980 Breckenridge Village receives a Robert Wood Johnson grant to develop community services.
- 1986 Ohio Presbyterian Homes becomes Ohio Presbyterian Retirement Services to incorporate services to those beyond our continuing care retirement communities. Our mission changes from providing homes to providing caring and quality services.
- 1988 OPRS strategic plan calls for the development of community outreach services at each retirement community.
- 1999 reorganization of community services has local directors report to a corporate vice president.
- 2000 Community Services Task Force forms to focus on future growth of community services in OPRS and adopts the statewide brand name of Senior Independence.
- 2001 OPRS Board creates OPRS Community Services Committee.
- 2006 change in recognition of job role, community service directors titles change to executive directors.

What began as a demonstration project in 1980 has flourished into a statewide home and community based care system, which last year touched 56,000 lives.



Dave Kaasa
President/CEO

Fiscal Year 2007 Strategic Objectives

1. Provide appropriate mix of high quality services in each market we serve.
2. Optimize the development of Senior Independence to serve more people in more ways.
3. Invest in people and processes to achieve service excellence.
4. Strengthen financial viability.

Financial Performance

Fiscal Year 2007 Accomplishments

- Grew top line revenue by 20% or \$4.8 million
- Increased year-over-year Medicare episode volume by 14% to a record 5,704 episodes
- Achieved 40.9 Days in Accounts Receivable (Home Health Industry standard rating: “Excellent”)
- Planned and successfully implemented our first Hospice Medicare billing process
- Operated a financially sound Hospice program at break-even, including Fiscal Year 2007 start-up costs

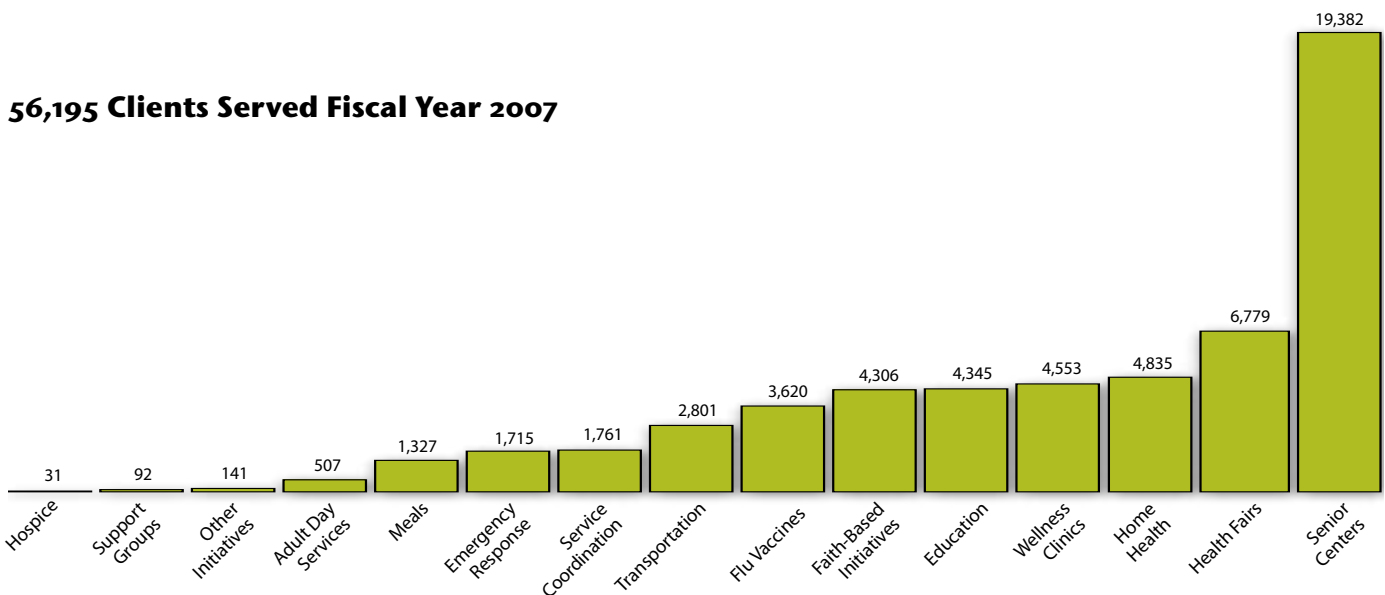
Fiscal Year 2007 was a record year of success for Senior Independence both operationally and financially. Existing programs thrived while new programs took root and flourished. “Fiscal Year 2007 will be the ‘year to beat’ as we strive to further improve our financial efficiency and expand our service to the community,” according to Joseph Belvedere, Senior Independence Controller.

Our existing Home Health program achieved strong results with a combined increase of Medicare volume (up 14% versus Fiscal Year 2006), higher reimbursement per Medicare PPS episode (up 10% versus Fiscal Year 2006), and increased third party insurance activity (up 82% versus Fiscal Year 2006). Increased volume and reimbursement reflect efforts to standardize best practices at operational sites across our state. We have expanded our contracts with private insurance to grow our home health program with insurance providers who align themselves with Medicare pay-out policies. All

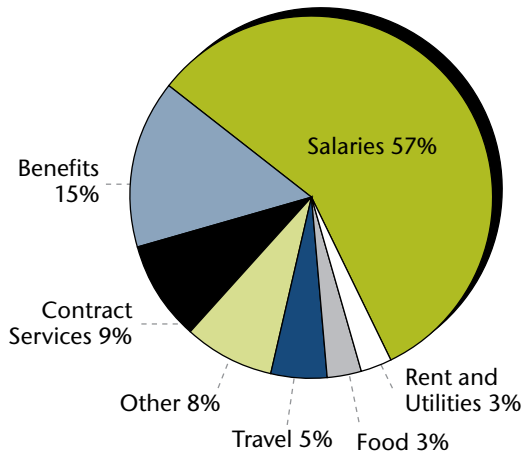
combined, we were able to service more people in a more financially efficient way.

Our most successful start-up program in Fiscal Year 2007 was Hospice. Upon receiving certification in December, we were able to open the billing channels to Medicare for reimbursement. By carefully pacing our staff hiring with our census growth, and controlling expenses, we were able to end our first hospice year slightly better than break-even and absorb all of our Fiscal Year 2007 start-up costs.

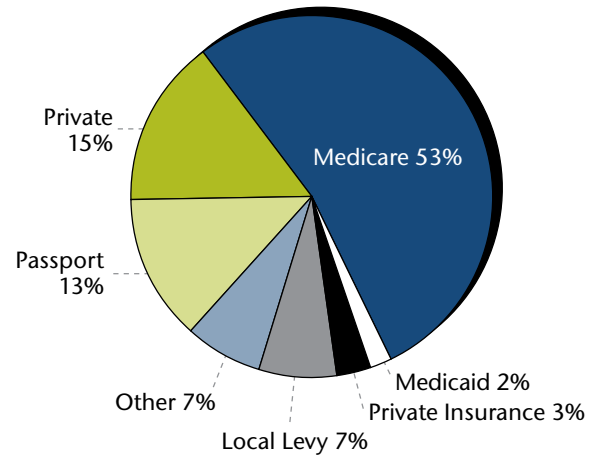
56,195 Clients Served Fiscal Year 2007



Operating Expenses



Gross Revenues by Payor



Statement of Revenue and Expense

Fiscal Year Ended June 30, 2007 (\$000s omitted)

Gross Revenue	\$29,168
Charity	(1,882)
Net Revenue	27,286
Expenses	26,579

Excess Revenues

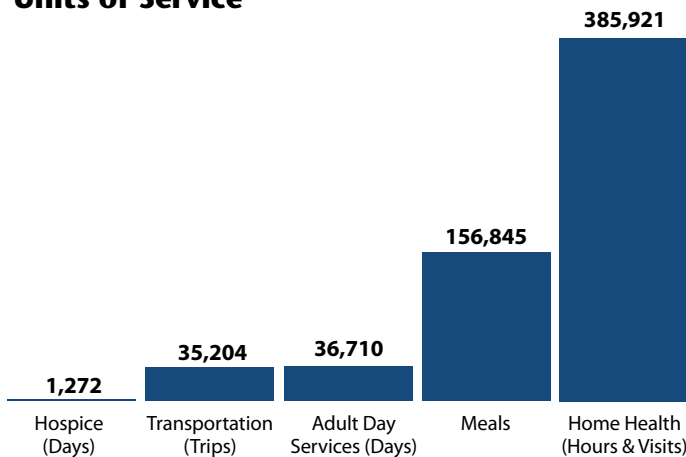
Over Expenses.....\$ 707

Key Financial Indicators

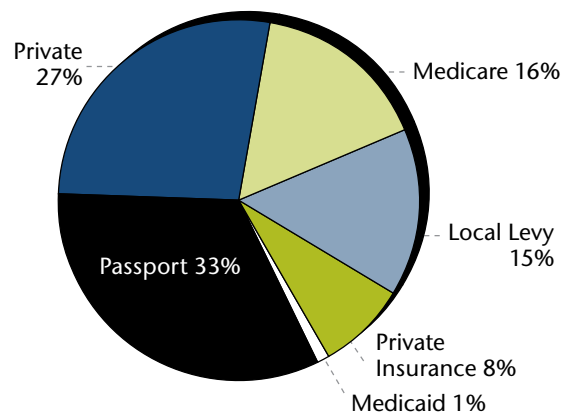
# of PPS Episodes.....	5,704
Reimbursement per PPS Episode.....	\$2,763
A/R	\$3,108,089
Days in A/R.....	40.9
% of Accounts Receivable 90+ Days.....	8.3%
Cash Receipts.....	\$26,019,000



Units of Service



Payor Sources for Units of Service



OPRS Foundation Provides Fundraising and Support to Senior Independence

During Fiscal Year 2007 the OPRS Foundation partnered with Senior Independence to raise more than \$723,000 in support of new and expanding services. Diverse support came from individuals, foundations, corporations and local and state governments. Throughout the state generous donors have contributed to the important work of Senior Independence.



Fundraising and Support



One key to successful fundraising is to make sure that the donor base is a diverse one. The OPRS Foundation strives to achieve positive results by making sure that donors come from all areas; private, public sector, government; individuals making current donations as well as planned giving for future funding. Working together with the Senior Independence staff in each area, the foundation will continue to achieve its mission to support the older adult services of OPRS by nurturing a philanthropic environment that fosters generosity, volunteer involvement and donor relations. “Because of the work the OPRS Foundation has done, we are able for the first time to offer telehealth services in the Akron region,” remarks Sheila Flannery, Executive Director for Senior Independence Akron/Canton Region.

- A \$35,000 grant from the Harry C. Moores Foundation will allow Senior Independence to provide hospice and advanced care planning education throughout central Ohio.
- The Ruth H. Beecher Foundation provided a grant of \$25,000 to campaign projects in the Mahoning Valley.
- Lehner Family Foundation Trust awarded \$10,000 to begin the telehealth program in Akron.
- A first ever grant from the Paul G. Duke Foundation assisted with funding wellness clinics in the Miami Valley area.
- Support from Cardinal Health (\$15,000) and National City Bank (\$10,000) will allow for the printing and distribution of a resource guide to assist families in navigating through the maze of caregiving in the Columbus area.
- The AT&T Lifeline Ohio program provided over \$10,000 to the Mahoning Valley region for education, outreach and support of lifeline services.
- The AT&T Excelerator program awarded \$25,000 to Senior Independence statewide to assist with the support of icaregiver.org.
- In Franklin County the Central Ohio Area Agency on Aging continued to provide state, local and federal funds to support the adult day, transportation and meals in motion programs.
- The Butler County Department of Development in the Southwest region provided \$30,000 in funding for the enhancement of the furniture and equipment of the adult day care center in Fairfield.
- United Way support in Central Ohio for transportation services.

The Fulfillment of Our Mission – Hospice

Hospice services are the fulfillment of our mission to care for older adults when they need us the most. These services have allowed Senior Independence to continue to care for our clients and their families during end-of-life care and provide bereavement support.

“Four out of five hospice patients are 65 years of age or older — while one-third of all hospice patients are 85 years of age or older.”

National Hospice and Palliative Care Organization, November 2006



Compassionate Care



Mr. Hull returns home to be with family and friends.

In December 2006, Senior Independence Central Ohio received a deficiency-free survey and certification to begin accepting Hospice patients. With the initial investment for start-up, this hospice has become financially successful within the first six months. “This has really exceeded our expectations. Our patients and their families have been very pleased with the hospice program and the care they have received. And, we have met our patient census for the first six months,” comments Linda Artis, Executive Director of Senior Independence Central Ohio Region. Senior Independence will add hospice services to the Southwest, Miami Valley and Akron regions next fiscal year.

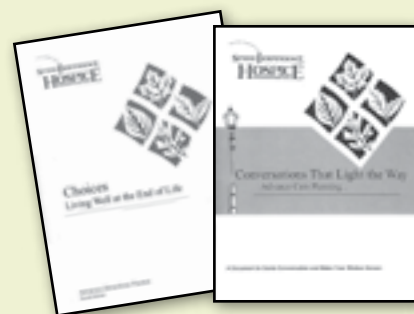
Because of the nature of Hospice, statewide training was conducted throughout the year to educate all of Senior Independence staff leadership on the conditions of participation for Medicare certification. This training was provided by The Hospice of the Florida Suncoast, one of the largest and most successful hospice providers in the United States. The three-day training included all of the newly hired hospice team members, executive directors, health care administrators, marketing directors and program managers.

“The conditions of participation were designed to assist the team in working well together. Hospice care requires a different mindset for us – we are entering into a situation with the patient and family where communication is critical. We are discussing difficult decisions that immediately bring you closer to the patient and their family,” says Sally Huston, Vice President of Clinical Services.



The Ullrich's celebrate 65 years of marriage with their family.

Many people are unaware that their hospice benefit can be accessed for such chronic conditions as Alzheimer's Disease, congestive heart failure, COPD and failure to thrive. Therefore, one of the major objectives for hospice is educating the public on the needs of older adults when it comes to end-of-life care. Senior Independence has been working with the Ohio Hospice and Palliative Care Organization (OHPCO) in training our executive directors, health care administrators, marketing directors, hospice team members and our home care coordinators in a nationally recognized program called *Respecting Choices*®.



This program assists in educating older adults and their families on how to begin conversations regarding end-of-life care.

Hospice – Comfort and Compassion

Here is a story about caring enough for a patient that they actually did get better, and that is the best story of all.

Audrey (not her real name) was referred to Hospice by her physician for failure to thrive. This diagnosis qualifies her for hospice because most of these patients are losing weight, are slightly depressed and as the name implies – giving up.

Whenever someone enters our hospice program the staff asks many different questions, but mostly about their life and what they enjoyed doing with their time prior to their current illness. We found out that Audrey had been an active person who enjoyed playing the violin until she lost most of her eyesight. It had been years since she was able to do what she loved.

Upon listening to Audrey explain how much joy she had when playing the violin our social worker, Sarah Grime, immediately thought about her friend Kim, who works as a computer programmer during the day, enjoys playing the violin and has been doing so most of her life.

A connection was made when Kim came to visit Audrey in her apartment and play the violin for her. Audrey was

thrilled – she not only enjoyed listening to the soothing music of the instrument she loved so deeply, but she and Kim engaged in meaningful conversation and realized that one of Kim's instructors had played with Audrey.



Two lives were enriched – Kim didn't realize she possessed an ability to reach out to someone and make a difference and Audrey received the best gift of all, a renewal of hope and joy. After seven months in the hospice program, Audrey was discharged from hospice because of her continued improvement. Right away, she began to thrive physically, emotionally and spiritually.

The greatest gift of all was knowing that hospice does make a difference and that hope and joy are always present, no matter how old or how ill a person may be. While Audrey's discharge from hospice may be unusual, all of our patients find hope, peace and caring while in our hospice care.

SENIOR *i*NDPENDENCE.
HOSPICE
OHIO PRESBYTERIAN RETIREMENT SERVICES

“Today, persons who reach 65 have an average life expectancy of an additional 17.9 years (19.2 years for women and 16.3 years for men) than what was estimated in 1900.”

*U.S. Department of Health and Human Services’
Administration on Aging*



Home Health Services

Studies have shown that when other considerations are equal, the vast majority of Ohioans prefer to receive care in their homes.

An Economic Study of Long-Term Care Costs in Ohio by: Levin, Driscoll & Fleeter

Our Medicare-certified home health agencies deliver quality skilled services within our clients' homes. These services include nursing, physical, occupational and speech therapies. Most of these services are provided within a 60 day period or episode. Growth is measured and tracked by these episodes.

This year saw major growth in the area of home health. Research is continuing to show support for the development and growth of home health services. For many clients the desire to return home for continued therapies is preferable, and research suggests that convalescing within familiar surroundings increases the effectiveness of this rehabilitation.



Quality Measures for Success

A key quality measure for determining the success of our Medicare-certified services is how well we compare with the state averages. "We really look at one specific quality measure – the percentage of patients who stay at home after an episode of home health care ends. This measure indicates improved care, which means that they are able to maintain living at home once we have discharged them," explains Sally Huston, Vice President of Senior Independence Clinical Services. "As an overall view, we want to be favorable to the state average and see if we need to make any adjustments to our care practices." These quality measures will be very important in 2008 when Medicare reimbursement moves into pay for performance.



Client and Family Satisfaction Survey Results – Fiscal Year 2007

Overall Satisfaction and Recommendation with *Senior Independence Home Care*..... 98%

79% Strongly Agree

19% Agree

Home Care Services

Home care services provide daily living assistance to help maintain our clients' quality of life in the comfort of their own homes. These services include: Personal Care Assistance, Home Delivered Meals, Companionship and Escort, Caregiver Respite, Light Housekeeping, Linen Changes and Laundry, Transportation and Meal Preparation.

Home Care Served 2,026 Clients This Year

We are able to serve more clients who need these non-certified services because we work with local Area Agencies on Aging and other community and statewide funding programs such as PASSPORT. These payor programs assist many financially-dependent seniors in identifying services they need and connecting them with the appropriate providers.

Studies are showing the economic impact these services are having on Ohio's long term care costs and how by increasing funding to programs that support home care services, Ohio can save millions of dollars associated with long term care costs. Senior Independence and OPRS are in a unique position – by providing a continuum of care that can be accessed more than once throughout one's life.



“Ohio can save as much as \$1.4 billion a year just by increasing the number of future clients receiving home care...”

An Economic Study of Long-Term Care Costs in Ohio by: Levin, Driscoll & Fleeter

Assess • Inform • Refer

In Toledo, home care aides are encouraged to communicate with the office if they notice any changes in their clients' condition or simply feel that something “just isn't right.” “Our home care aides are the ones seeing these clients on a regular basis and are more aware of any changes that could indicate a bigger health issue. We want to make sure that they communicate with us before a health care crisis happens. So, we try to make it fun in order to build awareness,” shares Ann Heringhaus, Executive Director of Senior Independence Toledo.

The aides are trained to **A**ssess their clients, **I**nform the office and **R**efer the client. Once the aide has made the call a nurse can ask them more specific questions regarding the changes they have noticed and make a decision on what needs to happen next. Every time an aide calls in, their name is put in a hat for an end-of-month drawing. Those names chosen from the hat receive an AIR award and a small gift. Ann Heringhaus is encouraged by the response, “This really effects the quality of care we can deliver by taking care of these clients before they experience a major health care crisis. For older adults, the earlier we can intervene the better off they will be in the long run.”

Continuing to Care Within the Communities We Serve

Identifying the needs of those communities we serve is one part of successfully expanding our services. This year Southwest, Cleveland, Miami Valley and Mahoning Valley regions worked closely with local officials and community supporters in reaching out to meet the increasing needs of seniors and the centers they go to for support, education and friendship.

Senior Centers

Senior Centers provide older adults with a place to go for socialization and education, as well as a connection to needed services such as transportation, home delivered meals, and personal emergency response systems.

This year Senior Independence of the **Southwest Region** was approached by the Anderson Township Trustees to assist them in managing their senior center. Joan Punch-Fleming, the Executive Director of the Southwest Ohio Region for Senior Independence, began talking with the trustee group and came to a mutually beneficial agreement. “We wanted to make sure that we not only continued the services that the community center was already providing, but we also wanted to make sure that if there were any other needed services that we could also provide those services. And so, we



conducted a survey of the membership and organized an advisory group that included members, trustees and other community leaders.” The result has been a successful partnership and growth in many of the services that Senior Independence offers like personal emergency response systems and home-delivered meals.



Creating the Services to Meet Community Needs

Mahoning Valley's Senior Center has four satellite centers that are managed by Senior Independence of the Mahoning Valley Region. The importance of this senior center is not lost on the government, or those who are seeking political office. This year the senior center was visited by Governor Ted Strckland and Senator George Voinovich. The Governor selected the Mahoning Valley senior center to introduce his plan to lower seniors' property taxes and chose to discuss how home care and community services will play a larger role in meeting the future needs of Ohio's seniors.



Nancy King, Senior Independence Executive Vice President/COO, Karen Ambrose, Executive Director of Mahoning Valley Region and Governor Ted Strickland during press conference at the Mahoning Valley Senior Center.

Senator Voinovich chose to visit the senior center to see how technology assists health care professionals in meeting the needs of those seniors who choose to remain at home. "We know that in order to stay relevant to those we serve, we must assist in educating and informing our government officials," says Karen Ambrose, Executive Director of Senior Independence Mahoning Valley Region.

This year the **Miami Valley Region** teamed up with a local developer to provide wellness services within rural communities throughout Shelby County. Jon Hefner, a local developer who builds senior-friendly homes, volunteered community space within walking distance of his housing development so that Senior Independence could provide weekly wellness clinics and arthritis exercise classes for local seniors. With the success of these two programs, Hefner and Ricki Maxwell, Executive Director Senior Independence Miami Valley, have approached other rural town councils with the concept of providing their own senior-friendly neighborhoods and wellness services. "This is a partnership that we feel will grow as service needs are identified within these communities and we are the established resource for the seniors who attend our wellness clinics and exercise classes," Maxwell adds.



Senator and Mrs. Voinovich learn how telehealth helps to monitor seniors' vital signs within the comfort of their own home.

"We will expand the PASSPORT program to provide essential in-home services to more vulnerable older Ohioans who need a little help with their medical needs or daily needs..."

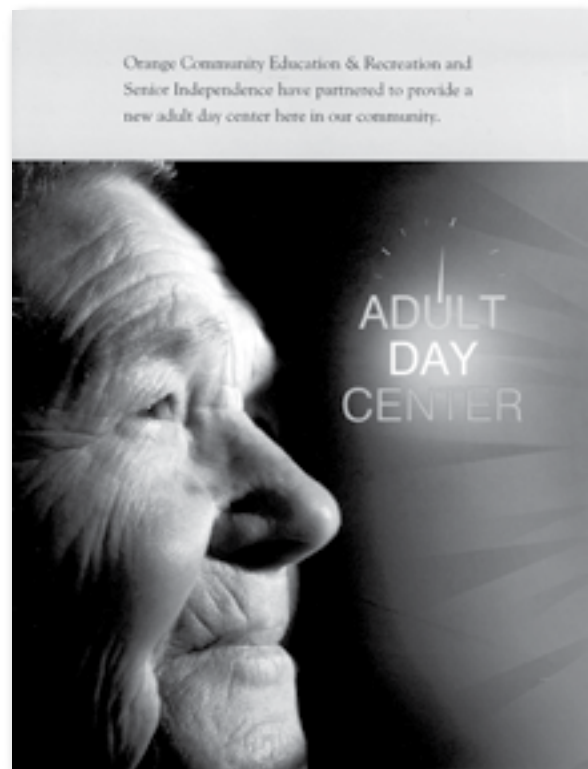
Governor Ted Strickland in his 2007 State of the State address



Adult Day Services

Working with communities in determining what needs they have and how to meet them is one of many services that Senior Independence provides. Greater Cleveland's Executive Director, Lois Calderwood, worked with an advisory group established through the local city of Orange, to look at and determine the needs of their city's aging population. The study concluded that older adults with dementia and physical decline had an immediate need for adult day services.

Senior Independence of Greater Cleveland received a grant from The Murch Foundation to expand adult day services throughout the greater Cleveland area. And so, a partnership was formed with the city of Orange, who provided the space for an adult day center that would be managed and staffed by Senior Independence. Within months of opening its doors, the adult day center of Orange is looking for a larger space to meet the growing demand. Senior Independence now has eleven adult day centers, making us the largest not-for-profit provider of adult day services in Ohio.



Client and Family Satisfaction Survey Results – Fiscal Year 2007

Overall Satisfaction and Recommendation with *Senior Independence Adult Day Services*..... 99%

65% Strongly Agree

34% Agree

Resident Service Coordination Continues to Grow

The Resident Service Coordinator Program is designed to increase elderly residents' ability to age in place in their senior housing apartment. The key component of the program is the placement of a Resident Service Coordinator on-site in federally assisted senior housing buildings.

In Fiscal Year 2007, an additional six resident service coordinators were funded through the HUD (Housing and Urban Development) service coordination grant providing Senior Independence with a total of 29 coordinators throughout the state.

This year Senior Independence named a state coordinator for this program, Mindy Wendling: "My role is to plan and implement quarterly training for these coordinators. Our training focuses on their role in empowering residents to advocate on behalf of themselves, these coordinators are not case managers, their job is to provide resources, education and information to those we serve."

Senior Independence assists managers of HUD buildings in doing the initial resident needs assessment, submitting the grant and then hiring and managing the resident service coordinator once the grant is awarded. The grant covers 80% of the coordinators time assisting HUD

building residents and 20% of their time in educating the greater community. These grants are renewable every three years.

Faith in Action

Senior Independence continues to assist community residents through volunteers with the Faith in Action program of Lake County Ohio. This national program is supported

by a grant from The Robert Wood Johnson Foundation and Senior Independence. The goal of the program is to identify the unmet needs of the frail and elderly who might not normally qualify for other services due to age and/or income. Community volunteers are recruited and matched with residents who need assistance. "If a member of a congregation needs a wheelchair ramp built, we find someone to build it and someone to donate the supplies. It really is about meaningful connections between the volunteer and the person they help," says Maita Jarkewicz.

There are two major components to the program: Identifying those in need and finding volunteers willing to

help. The program director, Maita L. Jarkewicz, DO, works closely with area parish nurses to assist in identifying people in need. Jarkewicz also recruits volunteers from area churches and scout organizations.



2007 OPRS Community Services Volunteers

We thank all of these volunteers and staff who have provided their time and talents to serve on the OPRS Community Services Committee during Fiscal Year 2007.

Community Services Committee Volunteers

John Peterson, Chair
 Jean Evans • Rodney Harrison • Kass Mahdi
 John Perkins • Amy Roscoe • Faith Williams

Hospice Advisory Group Volunteers

Kass Mahdi, Chair
 Sandy Byers • Rod Harrison • Bill Leiter
 Peg Margello • John Peterson

Staff

Dave Kaasa, OPRS President/CEO
 Nancy King, EDM, Senior Independence Executive Vice President/COO
 Rod Crist, OPRS Chief Financial Officer
 Sally Huston, MSN, Vice President, Senior Independence, Clinical Services
 Joseph Belvedere, Senior Independence Controller
 Joan Hatley, Senior Independence, Director of Marketing
 Sue Welty, Vice President, OPRS Foundation
 Cheryl Fleck, Administrative Assistant

A History of Continued Growth

History of continued growth and expansion – Senior Independence takes a look back to where we were five years ago.

	2002	2007
Employees	400	650
Revenue.....	\$13 Million	\$27 Million
People Served	24,000	56,000
Year End Results	(\$135,000)	\$707,000
Charity Care	\$640,000	\$1.8 Million
Senior Centers.....	4	6
Counties Certified	24	38
Telehealth Regions.....	1	6
Foundation Support.....	\$285,000	\$752,000
Hospice Programs	0	1
Service Coordinators	2	29
Wellness Clinics	97	over 160



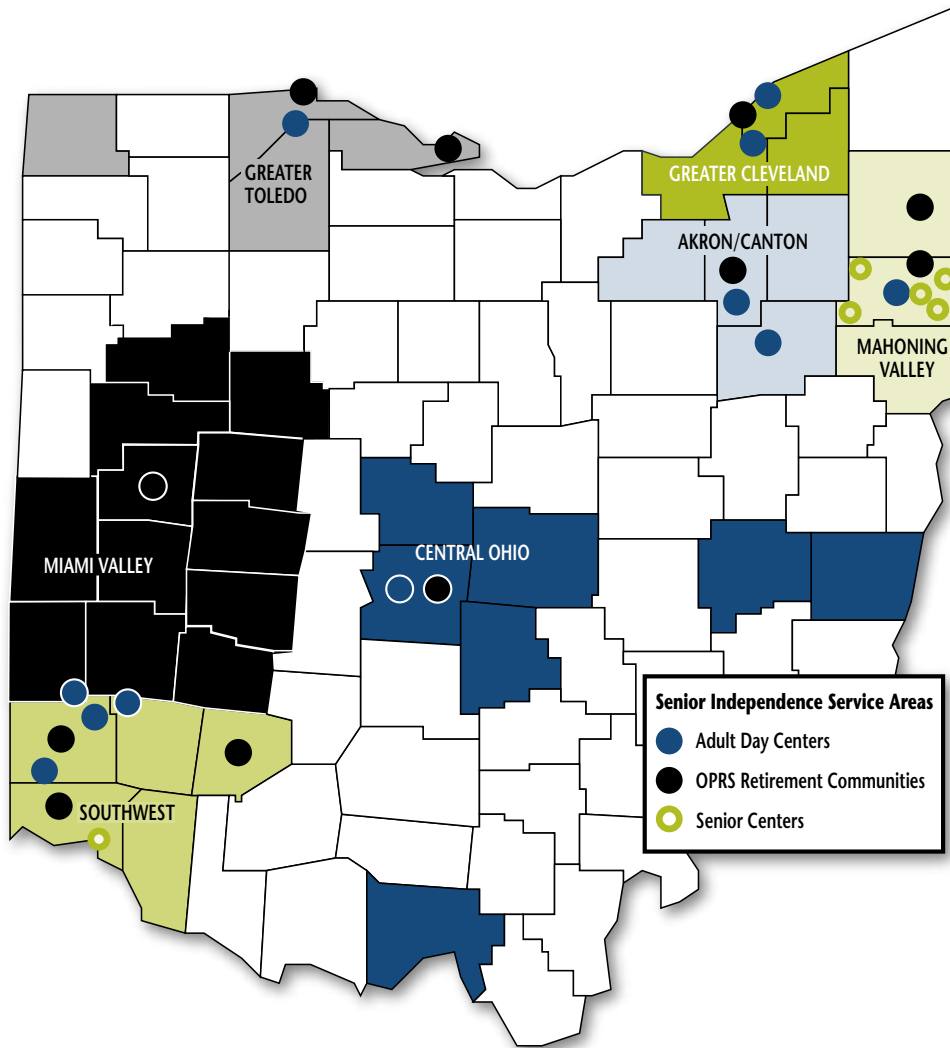
“Men in Hats” day at Toledo’s Adult Day Center.



Senior Independence is a statewide program – a reflection of a philosophy long held by OPRS that we have a responsibility to look beyond our own walls and serve older adults within our greater community. Senior Independence is now Ohio’s largest and most experienced not-for-profit provider of adult day centers and continues to grow its continuum of home and community based services. This year Senior Independence provided services to more than 56,000 older adults in Ohio.

Home and Community Based Services in 38 Ohio Counties

www.seniorindependence.org • www.icaregiver.org



Akron/Canton Region 330 873-3468

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Akron, OH 44313

Central Ohio Region 614 433-0031

Executive Director: Linda Artis
5796 Karl Road
Columbus, OH 43229

Greater Cleveland Region 440 953-1256

Executive Director: Lois Calderwood
38721 Mentor Avenue
Willoughby, OH 44094

Miami Valley Region 937 415-5666

Executive Director: Ricki Maxwell
6520 Poe Avenue, Suite 100
Dayton, OH 45414

Southwest Ohio Region 513 681-8174

Executive Director: Joan Punch-Fleming
1701 Llanfair Avenue
Cincinnati, OH 45224

Greater Toledo Region 419 865-1499

Executive Director: Ann Heringhaus
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Mahoning Valley Region 330 744-1895

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