

Coordination and Delivery of Senior Services in Idaho

Second Follow-up Report
March 2013

Office of Performance Evaluations
Idaho Legislature



Report 13-05F

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2013–2014 Joint Legislative Oversight Committee

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Acknowledgements

We appreciate the cooperation and assistance we received from the Idaho Commission on Aging and the six area agencies on aging. Bryon Welch and Amy Lorenzo of the Office of Performance Evaluations conducted this study. Margaret Campbell copy edited and desktop published the report.

Coordination and Delivery of Senior Services in Idaho

Second Follow-up Report

Executive Summary

In 2011 we released an evaluation report on the coordination and delivery of senior services in Idaho. The findings of our evaluation fell within six areas:

- The Idaho Commission on Aging's new funding formula had redistributed state funds among the area agencies on aging (AAAs) differently than in the past.
- State and federal funding for senior services only covered a portion of the total costs.
- Reimbursement rates varied by service and by area.
- Nutrition and transportation services had declined.
- The commission's performance measures did not reflect the role of the AAAs in providing senior services.
- Planning for the future required statewide collaboration among the commission, the AAAs, and service providers.

We made 11 recommendations to the commission, Idaho's six AAAs, and the Legislature to more effectively coordinate and manage the delivery of senior services across Idaho.

Despite significant employee turnover at the commission soon after the release of our report, the commission has taken significant steps to implement our recommendations. In addition, the six AAAs have also continued their implementation efforts.

Overview of Previous Reports

In February 2011 we released an evaluation report on the coordination and delivery of senior services in Idaho. Our study looked at services to seniors that were administered by the Idaho Commission on Aging and delivered by the area agencies on aging (AAA) and local providers. Specific services included

congregate and home-delivered meals, transportation, homemaker, and respite. We made 11 recommendations to improve oversight, streamline business practices, and plan for the sustainability of senior centers in the future. Ten recommendations were directed to the commission and the AAAs, and one was provided to the Legislature.

In a February 2012 follow-up, we reported that the AAAs had addressed many of our recommendations. Because the commission had experienced significant employee turnover, including an administrator, deputy administrator, and fiscal officer, it had only begun to formulate plans to implement our recommendations. The Joint Legislative Oversight Committee asked that we conduct a second follow-up report, giving the commission more time to execute its plans.

Implementation of Recommendations

We assessed the status of recommendations within four categories:

- **Implemented:** The agency has measurably met the recommendation's intent.
- **Addressed:** The agency has taken an approach that diverged from the recommendation but has still met the recommendation's intent.
- **In process:** The agency has begun to measurably address the recommendation's intent.
- **Not implemented:** The agency has not begun to measurably address the recommendation's intent.

In our first follow-up, we reported that nine recommendations were either in process or not implemented. This second follow-up updates those assessments:

- One recommendation is in process
- Two recommendations have been addressed
- Six recommendations have been implemented

Agencies' Assessment

Even though the AAAs had already addressed the recommendations that were made to them as a group, we provided them an opportunity to highlight their continued efforts to work on the issues raised in our report as well as address any other relevant issues. Letters from three AAAs are in appendix A. The letters also identified broader policy issues. For example, one letter discussed senior centers as Medicaid providers and stressed the difficulty of stagnant reimbursement rates and the amount of required paperwork. In two letters, AAAs indicated that waiting lists for services have decreased. One letter discussed the open communication and transparency that continues between the commission and the AAAs.

Review Funding Distribution

Recommendation 3.1: *The commission has only recently begun implementing its formula for distributing state funds. However, given the impact the state formula will have on each area, the commission should collaborate with the AAAs to analyze how shifts in funding are affecting service delivery. If necessary, we encourage the commission to subsequently seek ways to minimize potential negative impacts.*

The commission implemented a new formula in fiscal year 2010 for the distribution of state funds which now mirrors the formula used to distribute federal funds. The formula is weighted to include factors such as senior populations living in poverty or alone, the number of senior racial minorities, and seniors living in rural communities. Before the implementation of the formula, state funds were allocated based on individual requests made by the AAAs.

While we agree with the approach of using a standardized formula to allocate funds, we encourage the commission to continue to work with the AAAs, particularly those that lost funding under the new formula, to minimize negative effects. After a two-year phase-in period, the commission began distributing state funding in fiscal year 2012 based entirely on the federal distribution formula. According to the commission, it has consensus from the AAAs that the new formula for distributing state funds is fair and equitable.

The commission continues to be concerned about state funding for senior services. In federal fiscal year 2008, \$4.7 million was distributed to the AAAs. In federal fiscal year 2013, that amount dropped to \$3.9 million, a decrease approximately 16 percent.¹ Each AAA received less state funds in 2013 than it did in 2008. While federal funding has increased over this same time by 7.5 percent, the commission is preparing for uncertainty in federal funding. The commission anticipates that federal sequestration may force it to reduce services by an estimated 5 percent.

Because state funding for senior services has decreased and there is some degree of uncertainty in federal funds moving forward, policymakers may wish to continue to consider whether the commission, the AAAs, and the providers have sufficient state funds to provide an appropriate level of services.

Status: This recommendation is **in process**.

¹ Total funding of state and federal funds combined decreased approximately 4 percent over this same time.

Clarify Manuals, Contracts, and Agreements

We had made four recommendations to the commission and the AAAs to add clarifying language to their manuals, contracts, and agreements. The purpose of these recommendations was to provide consistency in contract language and ensure compliance with appropriate state and federal laws. One of these recommendations had already been addressed. The remaining three are discussed below.

Commission Manuals

Recommendation 4.1: *To ensure all AAAs and providers spend state funds appropriately according to state law, the commission should add clarifying language to its manuals to specify how state funds can be used and for which services.*

Federal funding of senior services through the Older Americans Act allows for flexibility in supporting a wide range of services; however, Idaho Code specifies that state funds can only be used for the direct delivery of certain services and cannot be used for program administration or information and assistance. Because service providers are not required to track state and federal funds separately, the AAAs and the commission have had difficulty ensuring that state funds are properly spent only on the direct delivery of services.

In April 2012 the commission completed a revision of its program manual. The manual now includes additional information that clarifies the spending restrictions for state and federal funds, specifically naming those services that cannot be provided with state funds. The manual was again updated in October 2012. The program manual is scheduled to be updated twice a year and includes a process for the AAAs to comment and provide feedback to the commission.

Status: This recommendation is **implemented**.

Subcontractor Agreements

Recommendation 4.3: *Through the course of its statewide monitoring, the commission should ensure that contracts have appropriate clarifying language and that state funds are only spent on allowable services, particularly when subcontractors are used.*

In our first follow-up report, we noted that implementing this recommendation would strengthen the commission's contract language, ensuring that requirements for state funding are adhered to not only by the AAAs but also by providers who subcontract for delivery of services using state funds.

During on-site visits of all of AAAs in 2012, the commission reviewed 16 areas for compliance including contracts, reporting of congregate and home-delivered meals, and financial records. In its review of contracts, the commission specifically examined procurement procedures and processes, costs analyses for reimbursement rates, contract templates, and the monitoring of subcontracts issued by the AAAs.

In addition, the commission issued new performance-based agreements to the AAAs with several modifications of subcontracts such as adding clarifying contract language on the state and federal rules and adding requirements to conduct a cost analysis of payments to subcontractors.

Status: This recommendation is **implemented**.

Elderly Opportunity Agency

Recommendation 4.4: *To ensure all centers have a clear understanding of the Elderly Opportunity Agency's use of reimbursements, the AAA in Area III should require EOA to add clarifying language to its contracts with centers that explains how reimbursements are pooled among all participants.*

In our evaluation report, we highlighted that the Elderly Opportunity Agency (EOA) was one of only a few AAA contractors that subcontracted to other providers to deliver services. The subcontracting model employed by EOA was significantly different from other subcontracting models. Instead of directly reimbursing each senior center according to the number of meals or transportation trips the centers provided, EOA pooled the reimbursements and provided staffing to help administer the meal and transportation programs at all senior centers.

In our first follow-up, we reported that the Area III AAA had added clarifying language to its contract with EOA and required EOA to add clarifying language to each memorandum of understanding with senior centers. EOA made several attempts to add satisfactory language to its contracts with senior centers. However, Area III made the decision in spring 2012 to issue a request for proposals for all of their contracted services. The contract previously held by EOA for congregate and home-delivered meals was awarded to Canyon County Organization on Aging. EOA continues to provide transportation services in some areas.

As Canyon County Organization on Aging has begun to provide nutrition services, Area III is working toward standardizing reimbursement rates and methods. Area III officials plan that all meal sites will be reimbursed on a standard per meal basis by July 1, 2013, including those sites that subcontract with Canyon County Organization on Aging.

Status: This recommendation has been **addressed**.

Establish More Comprehensive Financial Reviews

Recommendation 6.1: *The commission should conduct a more comprehensive financial review to allow the AAAs and the commission to improve financial practices statewide. This review could also resolve discrepancies in the data maintained by the commission, as well as the data reported to the Administration on Aging.*

We found discrepancies between the monthly expenditure reports of the AAAs and the quarterly reports the commission gave to the US Administration on Aging in our initial evaluation. We highlighted several oversight and reporting requirements that the commission and the AAAs needed to perform to ensure data and fiscal accuracy, including fiscal reviews and on-site programmatic reviews.

The commission reports that they have completed a comprehensive financial review of each AAA, including a follow-up review to ensure corrective actions were addressed. Many of the data discrepancy issues that the commission found stemmed from differences in accounting practices between the AAAs' use of accrual basis accounting and the commission's use of cash basis accounting. The commission added additional reporting requirements on the monthly invoice that AAAs use to report services provided and requested that reimbursement correspond with dollar amounts being paid (see recommendation 6.2). Commission officials believe that increased reporting requirements and communication should significantly improve the accuracy and consistency of future data reporting.

Status: This recommendation is **implemented**.

Ensure Data Quality

Recommendation 6.2: *The commission should build on its role of ensuring data quality and consistency by consolidating data management software licenses and bringing all users to a comparable level of functionality within the current web-based system. In addition, the commission should sponsor more statewide trainings on the use of the web-based system and the importance of comprehensive data management.*

This recommendation was made to help the commission maximize benefits and improve processes in two areas:

- Ensure that all AAAs have similar software capabilities and functionality, allowing for advanced analysis and reporting of data.

- Ensure that training for the AAAs could be coordinated statewide. We found that many users of the current system either had not received any formal training or were unaware of the total functionality of the system.

In our first follow-up, we reported that the commission consolidated software licenses in 2011 but later reverted to an agency-specific billing model after experiencing several challenges with license consolidation. Nonetheless, during fiscal year 2013, the commission has taken the following steps to address the areas of data quality and consistency:

- Provided all AAAs with minimal software licenses necessary for accurate data input into the information system used by the commission and the AAAs.
- Procured products, services, and trainings for the AAAs to facilitate advanced reporting functions.
- Informed AAAs of on-demand training options sponsored by the software vendor.
- Established access for AAAs to the federal and state reporting tool application.
- Worked with the software vendor to facilitate statewide trainings.
- Created a new monthly financial invoice form that requires the service units be provided with the reimbursement request. The units reported will then be cross verified with the data entered into the database.

Status: This recommendation is **implemented**.

Expand Annual Reporting and Performance Measures

Recommendation 7.1: *To provide the Legislature with more comprehensive information on statewide senior services and to better track the use of state funds, the commission should expand its performance measures to include the total number and types of senior services that are provided each year. In addition, the commission should work with each AAA to identify area-specific performance measures and include that information in its annual report.*

In our first follow-up, we indicated that the commission included in its 2011 annual report the services that AAAs provide. The commission continued listing AAA services in its 2012 annual report, providing policymakers with information on the expenditure of state and federal funds as well as expanded information on services of the AAAs. The commission also provides the AAAs

with a new reimbursement request that clearly separates allowable services using federal and state funds.

The commission has also included the work of the AAAs in their performance measurement report, highlighting efforts in each area that help meet the commission's goals and objectives. The commission has developed the following eight new performance measures for fiscal year 2014, including four that measure the work of the AAAs:

- Increase Aging and Disability Resource Center (ADRC) website awareness through presentations and social media tools
- Provide training to the 2-1-1 CareLine operators so they provide accurate ADRC information and refer clients to the correct agencies
- Provide current and accurate information in the ADRC website to include a calendar of events and FAQ page
- Provide current and applicable processes, guidelines, and policies in the Idaho Commission on Aging Program Manual provided to the AAAs
- Increase health and disease prevention evidence-based program options in AAAs
- Increase number of partners actively preventing the abuse, neglect, and exploitation of vulnerable adults in AAAs
- Support organizations providing education and outreach to vulnerable adults in AAAs
- Increase program volunteer recruitment in AAAs

Additionally, in October 2012 the commission updated its four-year strategic plan for senior services, which was approved by the US Department of Health and Human Services. The plan establishes goals, objectives, and strategies to provide public access to senior services in Idaho including:

- Improve opportunities to access up-to-date community resources addressing health and long-term care opportunities
- Strengthen existing home and community-based and evidence-based services
- Promote healthy and active lifestyles
- Protect the rights of older people and prevent their abuse, neglect, and exploitation

- Maintain an effective and responsive management and administrative structure

The commission is working with the AAAs to update their area plans and provide data for performance measures. The commission has assigned a program specialist to each AAA to assist in developing performance measures specific to both their service area as well as with the commission's strategic plan.

Status: This recommendation is **implemented**.

Assist Senior Centers

Recommendation 7.2: *The commission and the AAAs should partner to assist senior centers in meeting the needs of seniors in local communities, including understanding reasons for decline in center participation. This assistance could come in the form of a statewide conference, additional training manuals, or guidance throughout the accreditation process.*

In our evaluation report, we recommended that the commission and the AAAs partner with senior centers to ensure each center's success in serving as a local service provider of senior services. The report highlighted how younger seniors access and view senior centers in a different way than seniors of previous generations. Because senior centers continue to serve as the primary source of meals served to seniors in need, we encouraged the commission and the AAAs to work together with the senior centers to maintain the relevancy of senior centers across Idaho.

In 2012 the commission contracted with Boise State University to update its statewide needs assessment performed in 2008. The assessment surveyed individuals age 50 and older statewide to provide information on planning for the future long-term care needs of older Idahoans. The assessment found that 46 percent of respondents were not interested in participating in a senior center, lower than the 61 percent not interested in 2008.

In July 2012 commission staff visited 11 senior centers around the state and met with senior center staff as well as center participants in an open dialogue. They discussed how to assist senior centers in increasing participation and to encourage information sharing among the centers and the AAAs. Commission staff also met with the Area III AAA to explain senior centers funding and contracts, and discuss the transition to a new meal provider (see recommendation 4.4).

Status: This recommendation is **implemented**.

Amend Statute to Provide More Flexibility

Recommendation 7.3: *As the state continues its implementation of the Aging and Disability Resource Connections (ADRC), the Legislature should consider modifying statute to allow the AAAs to use state funds for additional senior services, such as the information and assistance program.*

The Aging Disability and Resource Connections (ADRC) provides the public a single access point to existing information and support services via an informational website and telephone number. We had initially recommended that the commission work with the Legislature to determine whether certain services not listed in the Idaho Senior Services Act should be covered by state funds, such as ADRC and information and assistance.

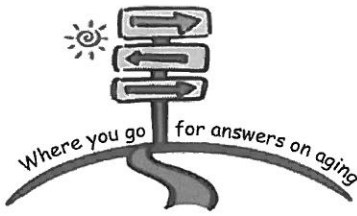
The commission maintains that the AAAs have enough flexibility with federal and state funds, as well as funding from other programs, to sustain the ADRC without further legislative action. According to the commission, Idaho has received more than \$1 million to develop the infrastructure that would sustain the ADRC. The ADRC was initially funded through a federal grant, and the commission has been establishing new funding sources with Medicaid and Veterans Affairs. With these efforts, the commission has been able to leverage additional funds to help sustain the ADRC without amending Idaho Code.

Status: This recommendation has been **addressed**.

Appendix A

Update of Implementation Efforts

Area Agency on Aging of North Idaho 13
Office on Aging Area IV 15
Area Agency on Aging for Southeast Idaho 17



Area Agency on Aging of North Idaho

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March 1, 2013

Bryon D. Welch, Senior Evaluator
Office of Performance Evaluations
Idaho Legislature
954 West Jefferson Street, Boise, ID 83720

Dear Mr. Welch,

Thank you for providing an opportunity to highlight continued efforts to work on the issues in the OPE original report on Idaho senior services and to address issues that we feel would be important for the Legislature to know about. I would like to address my comments toward recommendations 7.2 and 7.3.

Recommendation 7.2: *The commission and the AAAs should partner to assist senior centers in meeting the needs of seniors in local communities, including understanding reasons for decline in center participation. This assistance could come in the form of a statewide conference, additional training manuals, or guidance throughout the accreditation process.* Conversations over the past few years between AAAs and senior centers emphasize the importance of running centers like a business. Toward this end many centers have enrolled as Medicaid providers to receive reimbursement for home delivered meals. More recently, Area I's highest volume center for home delivered meals chose to drop their provider status with Medicaid. Seeking clarification for their reasoning, I learned the following: Reimbursement rates have not changed in years, they are buried in paperwork, and the system established by Molina is ineffective and inefficient. To further clarify—the authorization process is cumbersome and leads to frequent non-payment of meals; changes to the co-pay system have placed centers in the position as “debt collectors” with clients who truly lack the resources to contribute, and the processing of co-payments is retrospective (after Molina decides how much they will pay providers). The decision by this center to drop their provider status was a business decision, and at the same time an emotional one as their value-added for Medicaid centers around regularly checking in with recipients.

Recommendation 7.3: *As the state continues its implementation of the Aging and Disability Resource Connections (ADRC), the Legislature should consider modifying statute to allow the AAAs to use state funds for additional senior services, such as the information and assistance program.* As Medicaid moves forward with its dual-eligible managed care approach for Aged and Disabled Waiver beneficiaries, it seems appropriate that the services of AAAs/ADRC should be considered relevant and reimbursable. Other states (MT, NM, WA) have found the work of the ADRC contributory in managing care, especially services including information and assistance, long-term care options counseling, assistance with Medicaid applications and Medicaid eligibility. Additionally, several area agencies on aging around the state are implementing evidenced-based interventions including care transitions that reduce hospital readmissions, caregiver assessments that lead to reduced stress, and medications review that resolve medication-related problems, all of which are contributing to managing the care of dual-eligible aging and/or disabled individuals.

I appreciate the opportunity to provide more feedback to OPE and the role the report plays in Idaho's future efforts to address a rapidly growing aging population.

Sincerely,

Pearl Bruno Bouchard, Director

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OFFICE ON AGING

February 25, 2013

Bryon D. Welch
Office of Performance Evaluation
Idaho Legislature
954 West Jefferson Street
Boise, ID 83720

Dear Mr. Welch:

Thank you for your email of February 22. The CSI Office on Aging (Area IV) continues to provide senior services and work closely with senior centers in south central Idaho.

We have two changes that you might be interested in, since the OPE review of senior services. As of December 31, 2012, Area IV had a waiting list of 69 people for homemaker services. On that date, there was no waiting list for respite services. (Rec. 3.1)

We continue to meet with and train senior center staff and boards. Qualified meals increased in Area IV by 10,139 in 2012 over 2011. From 2009 through 2012, qualified meals increased by 18,534. Most of the increase was in home delivered meals to home bound seniors. (Rec. 7.2)

Sincerely,

A handwritten signature in blue ink that reads "James R. Fields". The signature is written in a cursive, flowing style.

James R. Fields
Director



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Building Bridges to Communities

March 11, 2013

Bannock County

Arimo
Chubbuck
Downey
Inkom
Lava Hot Springs
McCammon
Pocatello

Bear Lake County

Bloomington
Georgetown
Montpelier
Paris
St. Charles

Bingham County

Aberdeen
Atomic City
Basalt
Blackfoot
Firth
Shelley

Caribou County

Bancroft
Grace
Soda Springs

Franklin County

Clifton
Dayton
Franklin
Oxford
Preston
Weston

Oneida County

Malad

Power County

American Falls
Rockland

**Japanese American
Citizens League**

**National Association
for the Advancement
of Colored People**

**Pocatello Central
Labor Council**

**The Shoshone
Bannock Tribes**

**Economic & Community
Development Division**

Area Agency on Aging

TO: The Office of Public Evaluation—Aging Services in Idaho

Thank you first of all for the opportunity to comment and share the happenings about the aging program in Area V. The aging 60+ population continues to increase as the baby boomers continue to become eligible for the present aging services. Most are still employed and I suspect because of the present economy, they will be working for as long as they are able.

Our partnership with the 13 local senior citizens centers has improved greatly over the past two years. This is due in part to our sponsoring quarterly meetings with them, having our registered dietitian do training each meeting, having a guest speaker come in at times, but above all the AAA believes in cultivating open communication with them and listening to their concerns. One of the highlights of each meeting is the inner sharing of positive happenings in each center, i.e. new board members with fresh ideas, trying innovative fund raising techniques, Pets for a Day, a golden oldie movie day, etc. Managers come away with problems solved, invitations extended to other managers for problem solving and overall, a better camaraderie among all of them. Of course, we do have those centers who do not want to change a thing, but those managers still come and listen to the open sharing.

I am happy to report that due to some re-structuring of our programs, Area V is within 1-2% of having no waiting list at all in any of our funded programs. It is our belief that if elderly need the service, there should be a way of getting that service to them so that no one has to be admitted to a skilled nursing facility prematurely. Sometimes family members are willing to pay for these services for Mom or Dad, other times we utilize federal or state dollars to provide the service. It is our goal to have no waiting list at all in the near future.

Our relationship with the Idaho Commission on Aging continues to be very productive and creative in nature. Here again, I believe in the importance of open communication and transparency regarding any program. If a deadline is missed, we call and ask for an extension and submit it on the revised time frame. When we wish to begin a new service, the AAA runs it by them for ideas or pitfalls we may not see presently. Our rapport with them could not be better, and even though the AAA staff

do not always agree with them, there is a respect for each of them and for the advice given. The Idaho Commission on Aging undertook a mammoth project to review all the Service Manuals for the AAAs. The ICOA chose people at random from the AAAs to feed-in to the discussions from the grassroots efforts, and the feeling from the AAA staff (at least from the Area V staff) was one of openness and collaboration.

The concept of an Area Agency on Aging developing into an ADRC (Aging and Disability Resource Center) is not only exciting, but also somewhat of a challenge in the midst of decreasing federal funds. But this is where the Idaho Commission on Aging in collaboration with this Area Agency on Aging has worked hard to develop and project into the future of what the upcoming AAA could look like. Through the Centers for Medicare and Medicaid (CMS) and the Affordable Care Act, there are innovative possibilities for funding and for designing programs that could enhance aging services into the future. I also give credit to our parent agency, the Southeast Idaho Council of Governments, Inc., for entering into the planning stages with us in order to see potentials for growth as we move into the future together.

I would also like to note that as of Friday this past week, seven of us AAA Staff became certified Medicaid Transition Managers for the Idaho Home Choice Program. This program will assist any elderly who desires and is able to return home from a nursing home to live independently, to do so with assistance of supports and services. We feel very proud of completing this training.

We continue on and see those endless possibilities that we did not see before as a way of partnering with other agencies to provide services differently for the good of our elderly.

Sincerely,



Sister Anthony Marie Greving
Area V Agency on Aging
Director

Office of Performance Evaluations Reports, 2010–Present

Publication numbers ending with “F” are follow-up reports of previous evaluations.

Pub. #	Report Title	Date Released
10-01	Operational Efficiencies in Idaho’s Prison System	January 2010
10-02	Increasing Efficiencies in Idaho's Parole Process	February 2010
10-03F	Use of Average Daily Attendance in Public Education	March 2010
10-04	Governance of EMS Agencies in Idaho	November 2010
10-05F	Governance of Information Technology and Public Safety Communications	November 2010
11-01	Distribution and Sale of Liquor in Idaho	January 2011
11-02	Coordination and Delivery of Senior Services in Idaho	February 2011
11-03F	Increasing Efficiencies in Idaho’s Parole Process	February 2011
11-04F	Idaho Transportation Department Performance Audit	March 2011
11-05	Delays in Medicaid Claims Processing	March 2011
11-06	Equity in Higher Education Funding	November 2011
11-07	Idaho’s End-Stage Renal Disease Program	November 2011
11-08F	Distribution and Sale of Liquor in Idaho	November 2011
12-01	Reducing Barriers to Postsecondary Education	January 2012
12-02F	Delays in Medicaid Claims Processing	January 2012
12-03	Lottery Operations and Charitable Gaming	February 2012
12-04	Establishing an Efficiency Commission	February 2012
12-05F	Coordination and Delivery of Senior Services in Idaho	February 2012
12-06F	Operational Efficiencies in Idaho’s Prison System	February 2012
12-07F	Idaho’s End-Stage Renal Disease Program	March 2012
12-08F	Idaho Transportation Department Performance Audit	March 2012
12-09F	Delays in Medicaid Claims Processing	November 2012
12-10F	Increasing Efficiencies in Idaho’s Parole Process	November 2012
13-01	Workforce Issues Affecting Public School Teachers	January 2013
13-02	Strengthening Contract Management in Idaho	January 2013
13-03	State Employee Compensation and Turnover	January 2013
13-04	Policy Differences Between Charter and Traditional Schools	March 2013
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