

**CITY OF BALTIMORE  
COUNCIL BILL 12-0013R  
(Resolution)**

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Introduced by: Councilmembers Middleton, Henry, Cole, Stokes, Kraft, Scott, Mosby, Spector,  
Clarke, Welch, Branch, Holton, Curran, President Young

Introduced and read first time: January 30, 2012

Assigned to: Urban Affairs and Aging Committee

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REFERRED TO THE FOLLOWING AGENCIES: Health Department

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A RESOLUTION ENTITLED

1 A COUNCIL RESOLUTION concerning

2 **Informational Hearing – Office of Aging and CARE Services – Commission on Aging and**  
3 **Retirement Services (CARE)**

4 FOR the purpose of of requesting the Commissioner of Health and the Acting Commissioner of  
5 CARE Services to address the City Council on the transition of CARE from an independent  
6 entity to a program under the Health Department’s Office of Aging and CARE Services; to  
7 present information on the services available to the elderly; to share plans to address delivery  
8 of services to meet the projected increase in the elderly population; and to discuss the  
9 methods used to enable Baltimore City’s elderly residents to be aware of and to access  
10 federal, state, city, non-profit, and private services and resources.

11 **Recitals**

12 The Maryland Department of Aging 2009 – 2012 State Plan on Aging introductory message  
13 from the Secretary states, in part: “As you know, we face a major demographic challenge in the  
14 years ahead. In year 2000, the number of seniors in Maryland was just over 800,000. Today,  
15 there are about 900,000, and in five years there will be over one million seniors in Maryland. By  
16 2030, the number is projected to increase to about 1.7 million seniors.”

17 The report addresses the need to plan for the impact that the retirement of Maryland’s baby  
18 boomers will bring: “Fortunately, not all 1.7 million seniors will be looking to the State for  
19 assistance...However as the population increases, so will the actual number of persons who will  
20 require some assistance. That assistance may take the form of subsidies to help pay for  
21 community-based long-term care in order to avoid less desirable and more costly nursing home  
22 care, protection for people who reside in nursing homes, and the provision of programs and  
23 services that will keep people healthy and engaged in community life.”

24 Demographic facts and figures included in the Department’s Fiscal Year 2010 budget  
25 presentation show that:

- 26 • Individuals over 85 are the fastest growing segment of the population. This group  
27 will grow in number, statewide, from 66,902 in 2000, to 173,355 by the year 2030.

EXPLANATION: Underlining indicates matter added by amendment.  
~~Strike out~~ indicates matter deleted by amendment.

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- 1 • In 2,000, 67.4% of Maryland seniors resided in Baltimore City and in Anne Arundel,  
2 Baltimore, Montgomery and Prince George’s counties. In 2030, these will remain the  
3 jurisdictions with largest number of individuals over 60.
- 4 • Low-income older individuals are concentrated in the Baltimore Metropolitan Area.  
5 The 2000 Census showed that 63,978 older Marylanders lived in poverty as defined  
6 by federal poverty guidelines.

7 The Population References Bureau’s Reports on America: First Results From the 2010  
8 Census, July 2010, in looking ahead to 2020 finds that 1 in 6 U.S. residents could be age 65 or  
9 older, as a large number of baby boomers reach retirement age by that year. State and federal  
10 studies show that in Maryland, a large percentage, if not the largest percentage of Maryland’s  
11 elderly, will continue to live in Baltimore City where CARE, in partnership with other senior-  
12 serving organizations, is the primary public agency in the City responsible for advocating for and  
13 delivering services to them, their families, and care givers.

14 The Baltimore City Commission on Aging and Retirement, an organization that was created  
15 in 1973, by Ordinance of the Mayor and City Council, to advocate for older Baltimoreans by  
16 developing, coordinating, and funding programs, services and activities for seniors and  
17 establishing a pre-retirement education program, was moved to the Health Department, effective  
18 July 1, 2010, to address a City-wide budgetary shortfall. Under the move, City officials  
19 maintained that the program would remain “exactly” the same, creating a “one-stop shop” for  
20 seniors while saving about \$500,000 in the City’s 2011 budget.

21 Baltimore City has a responsibility to make certain that today’s and tomorrow’s elderly  
22 citizens age with dignity and choices that allow for a safe, productive, and fulfilling life as  
23 participating members of our communities and to ensure that their well-being is not subject to the  
24 vacillations of the City budget.

25 **NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF BALTIMORE,** That The  
26 Commissioner of Health and the Acting Commissioner of CARE Services are requested to  
27 address the City Council on the transition of CARE from an independent entity to a program  
28 under the Health Department’s Office of Aging and CARE Services; to present information  
29 on the services available to the elderly; to share plans to address delivery of services to meet the  
30 projected increase in the elderly population; and to discuss the methods used to enable  
31 Baltimore City’s elderly residents to be aware of and to access federal, state, city, non-profit,  
32 and private services and resources.

33 **AND BE IT FURTHER RESOLVED,** That a copy of this Resolution be sent to the Mayor, the  
34 Commissioner of Health, the Acting Commissioner of CARE Services, and the Mayor’s  
35 Legislative Liaison to the City Council.