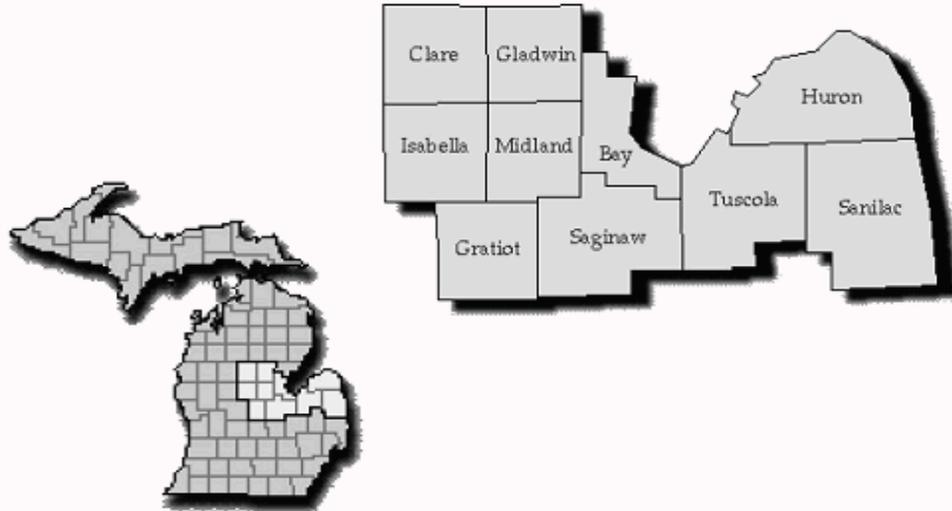


2017—2019 Multi Year Plan
FY 2019 ANNUAL IMPLEMENTATION PLAN
REGION VII AREA AGENCY ON AGING 7



Planning and Service Area

Bay, Clare, Gladwin, Gratiot, Huron,
Isabella, Midland, Saginaw, Sanilac, Tuscola

Region VII Area Agency on Aging

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County/Local Unit of Govt. Review

The Area Agency on Aging must send a letter, with delivery and signature confirmation, requesting approval of the final Annual Implementation Plan (AIP) by no later than June 30, 2018, to the chairperson of each County Board of Commissioners within the Planning and Service Area (PSA) requesting their approval by August 1, 2018. For a PSA comprised of a single county or portion of the county, approval of the AIP is to be requested from each local unit of government within the PSA. If the area agency does not receive a response from the county or local unit of government by August 3, 2018, the AIP is deemed passively approved. The area agency must notify their AASA field representative by August 7, 2018, whether their counties or local units of government formally approved, passively approved, or disapproved the AIP. The area agency may use electronic communication, including e-mail and website based documents, as an option for acquiring local government review and approval of the AIP. To employ this option the area agency must do the following:

1. Send a letter through the US Mail, with delivery and signature confirmation, to the chief elected official of each appropriate local government advising them of the availability of the final draft AIP on the area agency's website. Instructions for how to view and print the document must be included.
2. Offer to provide a printed copy of the AIP via US Mail or an electronic copy via e-mail if requested.
3. Be available to discuss the AIP with local government officials, if requested.
4. Request email notification from the local unit of government of their approval of the AIP, or their related concerns.

Describe the efforts made to distribute the AIP to, and gain support from, the appropriate county and/or local units of government.

On or before June 29, 2018 Region VII AAA will send a hard copy of the FY 2019 AIP along with a cover letter to the chair of each county commission and to the Saginaw Chippewa Indian Tribe. This letter will outline our request for approval by their board or commission by August 1, 2018 and will include an offer of staff to present the draft Annual Implementation Plan.

The FY 2019 AIP draft will also be available on www.region7aaa.org, by calling 1-800-858-1637, or at the front desk of Region VII AAA 1615 S. Euclid Avenue by April 20, 2018. Copies will be provided at the public hearings.

Approved Multi-Year Plan Highlights

The Multi-Year Plan (MYP) Highlights provide an overview of the FY 2017- 2019 MYP and FY 2018 AIP priorities set by the area agency as approved by the Michigan Commission on Services to the Aging (CSA). These highlights serve to provide an overall reference for the established three-year planning period. They also help to provide a framework and context for activities planned during the FY 2019 AIP.

The area agency FY 2017-2019 MYP and FY 2018 AIP Highlights approved by the CSA are included as read-only below. No further entry by the area agency is necessary.

1. A brief history of the area agency and respective PSA that provides a context for the MYP. It is appropriate to include the area agency's vision and/or mission statements in this section.

Region VII AAA was established in 1974 following an amendment to the Older American's Act (OAA). The organization continues with its mission to advocate, plan, develop and support an array of services for older adults in Bay, Clare, Gladwin, Gratiot, Huron, Isabella, Midland, Saginaw, Sanilac and Tuscola counties using OAA funds, Medicaid MI Choice home and community-based waiver, grants and local monies to meet the needs of vulnerable older adults and persons with disabilities. Region VII's main office is located in Bay City, with a smaller office in Cass City that focuses on Care Management and MI Choice waiver coordination for persons in Michigan's Thumb which includes: Huron, Sanilac and Tuscola counties. The region is fortunate to have senior tax millage in all ten of the counties that supplements OAA funding. Strong, well-established county units on aging operate service delivery systems throughout the planning and service area (PSA) using the combined funding to offer services and programs tailored to meet the ever-changing needs of older adults. As we look to the future, Region VII AAA is undergoing CARF accreditation (being surveyed in May 2016), developing capacity to bill for Medicare reimbursement for Diabetes Self-Management Training (DSMT) and Medical Nutrition Therapy (MNT) and to expand evidence-based health promotion programs.

2. A summary of the area agency's service population evaluation from the Scope of Services section.

There are no unexpected major shifts in the population's trajectory towards aging in our region. Most counties have at least 18% of the population currently at age 60 or older. This has created tension between meeting the needs of the younger older adult, and the extreme elderly which we identify as persons age 85 and older. This extreme elderly population for the most part seek in-home services and rely on home-delivered meals, personal care and homemaking to remain in their homes and communities. The younger senior population are more inclined to participate in the evidence-based workshops and desire more social and entertainment options which meld nicely into programs offered by many of the county units on aging in our planning and service area where a meal, transportation and a play or musical event is offered.

Parts of our PSA continue to be economically challenged. Our public input sessions and preparation for the 2017-19 MYP (MYP) has helped us pinpoint extreme rural areas where small numbers of extreme elderly continue to reside and desire services.

We continue to serve a number of aging military veterans, as the American Community Survey (ACS) estimates that nearly 20% of people over age 60 are a military veteran.

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3. A summary of services to be provided under the plan which includes identification of the five service categories receiving the most funds and the five service categories with the greatest number of anticipated participants.

Services are available to people age 60 and older who have the greatest social and economic need. The Medicaid MI Choice home and community-based waiver services are available to adults age 65 and older, and those age 18 and older who are disabled. All candidates for the program must meet nursing facility level of care eligibility and Medicaid financial requirements. Family caregivers providing supports to an adult age 60 and older, as well as grandparents and relatives raising a relative's children, may be eligible for services at age 55. The Title V - Senior Community Services Employment Program may be available to adults age 55 and older who meet eligibility requirements. All state funded services may not be available in all counties.

Access Services
Information and Assistance
Case Coordination and Support
Care Management
Transportation
Outreach

Services contracted to county units on aging and other providers include; Congregate Nutrition, Senior Center Staffing, Kinship/Older relative program, Caregiver Training and education, Disease Prevention/Health Promotion, Adult Day Care, Legal Assistance, Elder Abuse Prevention, Long-term Care Ombudsman, Home Repair, Home-delivered Meals, Personal Care, Homemaking, Respite and Chore Services. The following categories receive the most funding and also serve the greatest number of older adults.

Home-delivered Meals
Congregate Nutrition
Care Management
Personal Care
Homemaking

4. Highlights of planned Program Development Objectives.

Region VII AAA's Executive Director developed the agency's program development objectives during preparations for CARF accreditation. These goals align well with State Plan goals #1, #2, #5 and #6. Additionally, other efforts planned for this MYP cycle align with goals #3 and #4. Highlights of planned projects include the expansion of the evidence-based programming, outreach and education to the public and partner organizations and our continued involvement in the Silver Key Coalition and Senior Advisory Group advocacy efforts.

STATE PLAN GOALS referenced from the AMPS Document Library:

- Goal 1: Recognize and celebrate the cultural, economic, and social contributions of older adults, and create opportunities for engagement in their communities.
- Goal 2: Use person-centered planning to ensure older adults have independence and self-direction through an array of long term supports and services provided in the setting of their choice.
- Goal 3: Provide a variety of opportunities for older adults to enhance their physical and mental well-being, using evidence-based practices and other innovative programs.
- Goal 4: Provide advocacy, information, training, and services to support the rights of older adults to live free from abuse, neglect, and exploitation.

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Goal 5: Develop and enhance public and private partnerships to better serve older adults.

Goal 6: Employ continuous quality improvement and innovation to accommodate the changing needs of older adults.

5. A description of planned special projects and partnerships.

Region VII AAA continues work to expand the array of evidence-based workshops available to older adults in our PSA, with a focus on health promotion recruitment from around the region to become lay leaders and coaches. During this MYP cycle the agency will explore adding additional offerings as desired by the local communities.

Region VII AAA has secured a Medicare billing number which will be used to seek reimbursement of Medical Nutrition Therapy (MNT) and Diabetes Self-Management Training (DSMT). This enhances the agency's implementation of the Diabetes education process.

Agency staff work with the Hospital Council of East Central Michigan (HCECM) on efforts to identify and prioritize new projects and also to continue work on non-emergency transportation improvements and care transitions.

Advocating for improvements in non-emergency medical transportation across the entire planning and service area are underway with research and programming in various stages of development around the region.

Staff represent the needs of older adults and minority older adults in Saginaw County on the Health Improvement and Social Equity workgroup being facilitated by the Ezekiel Project.

The agency supports the efforts of a population health improvement project of the Central Michigan District Health Department which is expected to continue into FY 2017. Shared counties include: Clare, Gladwin and Isabella.

6. A description of specific management initiatives the area agency plans to undertake to achieve increased efficiency in service delivery, including any relevant certifications or accreditations the area agency has received or is pursuing.

It is expected that CARF accreditation will benefit all associated with the agency and lead to interest in process improvement activities agency-wide. Accreditation will demonstrate our quality operation and ongoing commitment to older adults and people with disabilities in our PSA. Once Region VII becomes CARF accredited we will focus on continuing high quality services and implementing any recommendations made by the CARF surveyors.

7. A description of how the area agency's strategy for developing non-formula resources (including utilization of volunteers) will support implementation of the MYP and help address the increased service demand.

Region VII AAA employs a Program Development and Grants Manager who seeks out funding sources to launch and sustain new services and programs of use to older adults and persons with disabilities that are not able to be funded by state and federal government sources. Throughout the PSA, most county units on aging and other contracted service providers have robust volunteer programs with several counties consistently being recognized for the quantity and quality of time and talent being donated in the community where they live and work. Within Region VII AAA, volunteers are used minimally but do include Medicare Medicaid Assistance Program, (MMAP) counselors and intern social work student(s) doing a gerontology research or advocacy project.

The agency will be exploring the feasibility of writing a joint funding proposal with the Hospital Council of East Central Michigan for the purpose of enhancing the delivery of health care to older adults in rural areas.

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During the MYP cycle, Region VII AAA and partner organizations will seek methods to remedy the shortage of volunteer home-delivered meal drivers in rural communities where this is not a paid position. This issue has been brought to the Advisory Council and they have interest in finding long-term solutions.

To address potential increased demand for services, Region VII AAA will begin work with county unit on aging directors and others on identifying best practices and methods to serve persons who desire services and have the ability to purchase them as a way to reduce the strain on the Older American Act budget, and stretch the taxpayer dollar.

8. Highlights of strategic planning activities.

1. Region VII AAA's Strategic Plan dashboard for the MYP cycle includes the following goals: Mitigating financial risk, ensuring operational viability, increasing legislative advocacy efforts, increasing agency awareness and involvement of Integrated Care pilot projects, promoting information and assistance and awaiting direction from AASA regarding ADRC development. There will be a continuation of efforts to improve agency performance and quality scores.

9. FY 2018 AIP Highlights: Description of any significant new priorities, plans or objectives.

Region VII AAA looks to add two significant new plans for FY 2018:

1. Region VII AAA will add Outreach as an Access Service as it strives to increase name recognition and inquiries for aging and disability services from low-income and ethnic minorities including LGBT older adults in the Region VII AAA planning and service area. We expect the outcome to be an annual 8% increase in I&A calls from older adult persons who have or are eligible for Medicaid, an increase in the number of persons referred by their doctor to Region VII AAA programs, and increase the number of participants for evidence-based workshops funded by Title III D.
2. Region VII AAA is looking into the possibility of providing Caregiver and Community Transportation. This program is intended as a possible option to support caregivers, in response to their transportation needs that are not otherwise being met. Transportation has constantly been proven to be in the top three (3) most requested service by individuals contacting Region VII AAA. Residents of the Region VII AAA planning service area (PSA) will have improved short-notice transportation options to access non-emergency medical, housing transitions, benefit application, and enrollment appointments. The goal of Caregiver and Community Transportation is to expand short notice, ride-of-last-resort transportation to clients that are unable to access and/or afford private transportation in and to areas where local transportation companies are unable to service.
3. Region VII AAA has received its Medicare billing number and has become American Association of Diabetes Educators (AADE) accredited. Region VII AAA has already successfully billed Medicare for medical nutrition therapy (MNT) and will begin billing Medicare for diabetes self-management training (DSMT) starting in July 2017 and diabetes prevention program (DPP) in January 2018. Region VII AAA is also working towards being able to bill Medicare for chronic case management and transitional case management.
4. Region VII AAA is looking to partner with Valley AAA and regional hospitals to submit a grant request to the Michigan Health Endowment Fund (MHEF) for care transitions. By partnering with Valley AAA and regional hospitals to provide care transitions, Region VII AAA's goal is to reduce the number of hospital readmission of patients after they are discharged from the hospital and improving the health and wellbeing of older adults.



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FY 2017-2019

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2019 AIP Highlights

The FY 2019 AIP Highlights should provide a succinct description of the following:

- A. Any significant new priorities, plans or objectives set by the area agency for the use of Older Americans Act (OAA) and state funding during FY 2019.**
- B. Current information about contingency planning for potential reduced federal funding (if plans include the pursuit of alternative funding, identify specific funding sources).**
- C. A description of progress made through advocacy efforts to date and focus of advocacy efforts in FY 2019.**

Please provide a narrative about what, if anything, the area agency is planning that is new for FY 2019, or that is significantly different from the established FY 2017-19 MYP or FY 2018 AIP. In addition, include area agency plans to handle the likelihood of reduced federal funding, including any specific alternative funding sources to be pursued. Finally, describe progress made through Multi-Year Plan (MYP) advocacy efforts to date and the area agency's specific planned advocacy focus in FY 2019.

Region VII AAA received a grant from the Michigan Health Endowment Fund and has launched a Care Transitions program designed to reduce hospital re-admissions of Medicare beneficiaries discharged from Ascension facilities in the region. The project uses an unskilled transition model that integrates skilled care in the home. During home visits, a Community Health Worker (CHW) will review and work with the patient on compliance with their hospital discharge instructions. The CHW will complete a medical inventory, train the patient to recognize the 'red flags' of their diagnosis, assess the home environment, assist with scheduling of a primary care provider visit within the required time frame, arrange for home-delivered meals and transportation to medical appointments.

Project partners include the Valley Area Agency on Aging, St. Mary's Hospital, and Genesys Hospital. The agency has also applied for a grant from the Blue Cross/Blue Shield of Michigan foundation.

Region VII AAA is piloting a program which co-locates Medicaid MI Choice home and community-based waiver staff in the communities they serve by partnering with the county units on aging and other community-based organizations.

A. Region VII AAA is making a direct service request so that the agency's Registered Pharmacist can utilize Title III-B funds to provide Medication Management to persons age 60 and older. Region VII AAA is also requesting a regional service definition to provide primary health care services (physician visits) to persons age 60 and older.

B. The agency maintains a contingency plan which would continue to fund critical in-home services for the most vulnerable adults in the planning and service area should a federal shutdown or sequestration take place.

C. The Executive Director's advocacy in the form of funding and policy shaping conversations with state

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and federal lawmakers have helped leverage the state's aging network. Recent success includes retaining federal positive outcome with federal funding for the State Health Insurance Program, MMAP and Title V Senior Employment as well as in-state support by lawmakers to refrain from moving Medicaid long-term care programs into managed care.

Staff, program participants, service providers and advocates participate in activities to raise awareness of the needs of older adults and continue to be vigilant and educate lawmakers and themselves to help keep adequate funding in home and community-based programs. An annual highlight of this effort is Older Michiganian Day.

FY 2019 Advocacy focuses on increasing access to the Medicaid MI Choice Home and Community-Based Waiver, additional state dollars for in-home programs (AASA), securing Social Security and Medicare for future generations of older adults, and developing partnerships with managed care organizations.

Public Hearings

At least one public hearing on the FY 2019 AIP must be held in the PSA. The hearing(s) must be held in an accessible facility. Persons need not be present at the hearing(s) in order to provide testimony; e-mail and written testimony must be accepted for at least a thirty day period beginning when the summary of the AIP is made available.

The area agency must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the general public about the hearing(s). Acceptable posting methods include, but are not limited to: paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA; presentation on the area agency’s website, along with communication via e-mail and social media referring to the notice; press releases and public service announcements; and a mailed notice to area agency partners, service provider agencies, Native American organizations, older adult organizations and local units of government. The public hearing notice should be available at least thirty days in advance of the scheduled hearing. This notice must indicate the availability of a summary of the AIP at least fifteen days prior to the hearing, and information on how to obtain the summary. All components of the AIP should be available for the public hearing(s).

Complete the chart below regarding your public hearing(s). Include the date, time, number of attendees and the location and accessibility of each public hearing. Please scan any written testimony (including e-mails received) as a PDF and upload on this tab. A narrative description of the public input strategy and hearings is also required. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and the resultant impact on the AIP.

Date	Location	Time	Barrier Free?	No. of Attendees
05/09/2018	Marie Davis Senior Center	11:00 AM	Yes	21
05/14/2018	Harrison Senior Center	11:00 AM	Yes	19
05/17/2018	Deckerville Senior Dining	11:30 AM	Yes	6

5/9/18 SAGINAW: The Marie Davis Senior Center in downtown Saginaw was the site of our first FY 2019 AIP public hearing. This location hosts a large Foster Grandparent group, and an all-male Chess club. Public Input included mention of the continuing need for transportation for those age 85 and older with focus on the lack of female participation at the congregate site which may be attributed to the fact that women are not comfortable walking to the center, and/or may no longer be able to drive. This dining site is a block from the Saginaw Transit Authority (STARS) office. Center staff and volunteers will explore transportation options with them, and will also work with the Saginaw County Commission on Aging regarding additional options.

The need for additional In-Home services was expressed. Attendees support Region VII AAA's request to transfer funds from Congregate to In-Home services.

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The differences in longevity between Caucasian and African American men was discussed, with the suggestion being that the age of eligibility for senior services be lowered to 55 for African American men.

A request for errand service for home bound persons led to a discussion about the availability of volunteer drivers and to the Saginaw County Commission on Aging wait list for Homemaking. To fill the gap, it was suggested that United Way may have volunteer drivers available and that often churches have vans that might be used for both transportation and errands.

Additional conversation ensued about landscaping and updates to the Marie Davis Senior Center. These concerns were addressed by the Saginaw County Commission on Aging Director as they fall outside of the scope of the AIP public hearing process.

5/14/18 HARRISON: We didn't receive any specific comments regarding the FY 2019 AIP, however attendees were supportive of the proposed funding transfer from Congregate to In-Home services as they realize many are unable to make it to the dining site. Following the hearing, a few people had specific questions about Medicare and Medicaid. They were assisted onsite, and those in need of additional support were referred to MMAP.

5/17/18 DECKERVILLE: Public comment at this hearing included conversation about home and community-based services and the community-based organizations that provide them. It was suggested that staff from the Blue Water Center for Independent Living meet the staff at Region VII AAA to build a working relationship. The request for a transfer of funds from Congregate to In-Home services was supported by the Dining Site manager, and the HDC Supervisor who attended the public hearing.

Additional comment outside of the hearing was obtained from a representative of the Deckerville Community Hospital who arrived after the hearing had concluded. She was interested in the Care Transitions pilot that Region VII AAA is launching in Saginaw, and wondered if there was potential for coordinating skilled home care w/other in-home needs.

6/1/18 ADDITIONAL PUBLIC INPUT ON THE FY 2019 AIP: Saginaw County Community Action Committee Inc. staff commented that particularly in Buena Vista they are seeing a need for financial literacy education for older adults, this comment comes from the Senior Outreach staff and the Medicare Savings Program staff as they encounter older adults whose younger family members may be preying on them to provide financial and material assistance.

A second need that is becoming apparent is the inability of existing community-based organizations to meet the need of older adult homeowners experiencing a home repair crisis. In many cases, the need for rehabilitation of the structure is upwards of \$10,000 which is more than the available funds/services of DHHS, CAC and others. The needs typically include furnace, hot water heater and air conditioner replacements, roof, and plumbing.

A related issue that is starting to resurface is related to the Step Forward Michigan program which assisted some home owners in becoming current with their property tax obligations, which may have complicated the

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communications between home owner and local governments, as some are now receiving additional bills for taxes that were thought to have been paid by the program.

Regional Service Definitions

If the area agency is proposing to fund a new (not previously approved in this multi-year planning cycle) service category that is not included in the Operating Standards for Service Programs, then information about the proposed service category must be included under this section.

Enter the new regional service name, identify the service category and fund source, include unit of service, minimum standards, and rationale for why activities cannot be funded under an existing service definition.

Service Name/Definition

Care Transitions

Rationale (Explain why activities cannot be funded under an existing service definition.)

This regional service definition provides a Person-Centered intervention during and after a hospital stay designed to put the home and community-based supports necessary into place so that the person is not readmitted to the hospital for the same/similar diagnosis within a 30-day period.

Service Category	Fund Source	Unit of Service
<input checked="" type="checkbox"/> Access <input type="checkbox"/> In-Home <input type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input type="checkbox"/> Other _____	1 visit=1 unit

Minimum Standards

Care Transitions implements the following objectives to reduce avoidable Medicare hospital re-admissions:

UNSKILLED TRANSITION MODEL - A Community Health Worker (CHW) will make a home visit to review the beneficiary's hospital discharge instructions and assist in removing any barrier that may prevent the beneficiary from complying with the instructions. This includes a medication inventory, health education and 'red flags' that may require medical attention, assessment of the home environment, assistance scheduling the patient's follow-up visit with their Primary Care Provider as needed, along with coordination of home delivered meals and other supports. This visit utilizes a well-known four-pillared Care Transitions model.

MEDICATION COMPLIANCE - During the home visit, the beneficiary will consult with a pharmacist via Zoom, a video conferencing technology. Changes and reconciliation of medications will be communicated to all practitioners.

MEDICAL APPOINTMENT FOLLOW-UP - The CHW will work with the beneficiary to meet the Medicare seven-day post hospital discharge follow-up, assisting as needed with scheduling and transportation.

TRANSITIONAL CARE MANAGEMENT - This is a Medicare covered benefit. A Nurse Practitioner and a

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CHW work concurrently during a 30-day period that begins the day the patient is discharged from the inpatient hospital setting in an effort to insure patient success. This process includes a face-to-face visit by a nurse practitioner.

CHRONIC CARE MANAGEMENT - This is a Medicare covered benefit that provides for a Comprehensive Care Plan to be developed when a beneficiary has two or more chronic conditions that are expected to last at least 12 months. This service consists of 20 minutes of non face-to-face intervention per calendar month directed by the general oversight of a nurse practitioner or other medical provider.

EVIDENCE-BASED DISEASE PREVENTION - Services provided by community-based organizations that have been demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults.

MOBILE DOCTOR - Region VII AAA's Primary Care Physician will make home visits to the estimated 15% to 20% of Medicare beneficiaries in the PSA who do not have a Primary Care Provider with whom they are able to schedule a post-hospital discharge visit in the Medicare seven-day time frame.

Access Services

Some access services may be provided to older adults directly through the area agency without a direct service provision request. These services include: Care Management, Case Coordination and Support, Disaster Advocacy and Outreach Programs, Information and Assistance, Outreach, with specific attention to outreach with underserved populations, including LGBT older adults, and MATF/State Caregiver Support funded Transportation. If the area agency is planning to provide any of the above noted access services directly during FY 2019, complete this section.

Select from the list of access services the area agency plans to provide directly during FY 2019 and provide the information requested. Also specify the planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.

Direct Service Budget details for FY 2019 are to be included under the appropriate tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget, Support Services Detail Page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details.

Care Management

<u>Starting Date</u>	10/01/2018	<u>Ending Date</u>	09/30/2019
Total of Federal Dollars	\$0.00	Total of State Dollars	\$177,571.00

Geographic area to be served
Huron, Sanilac, Tuscola counties

Specify the planned goals and activities that will be undertaken to provide the service.

Region VII AAA expects to continue with goals stated in the FY2017 to FY 2019 MYP. They are as follows:

Goal 1. Ensure appropriate care delivery to program participants. Expected Outcome: Program participants will receive necessary assistance to maintain them in their home through an initial assessment and then quarterly in-home re-assessments; whereby, person-centered plans with emphasis on use of community resources will be developed by un-biased and professional Care Coordinators.

Goal 2. Build and maintain professional relationships to ensure that quality care is provided to program participants. Expected Outcome: Care Coordinators knowledge of community resources and communication with caregivers and service providers will ensure that each client receives quality care from trained professionals. On-site provider monitoring by trained staff and semi-annual peer review processes reinforce the commitment to quality care.

Goal 3. Enhance the agency's Quality Management Plan. Expected Outcome: Region VII AAA Care Coordinators along with the agency's Quality Assurance Manager will ensure that program participants receive optimal person-centered, high-quality care that meets or exceeds the established standards of care set forth by

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the Aging and Adult Services Agency (AASA) of Michigan's Department of Health and Human Services.

Goal 4. Continue attendance at Care Management meetings sponsored by AASA. Expected Outcome: Maintain on-going communication with AASA staff regarding Care Management policies, procedures and practices.

Goal 5. Continue receiving information and on-going staff trainings regarding the Tailored Caregiver Assessment and Referral program (T-CARE). Expected Outcome: To ensure that the needs of the caregivers are identified by well-trained T-CARE staff in an effort to assist caregivers in their provision of informal support to participants.

Goal 6. Participate in training opportunities related to the implementation of the Community Living Program, formerly known as the Nursing Facility Transition Service. Expected Outcome: Participant choice will be honored and they will maintain their independence in the least restrictive setting based on preferences and objectives.

Number of client pre-screenings:	Current Year:	48	Planned Next Year:	60
Number of initial client assessments:	Current Year:	16	Planned Next Year:	20
Number of initial client care plans:	Current Year:	16	Planned Next Year:	20
Total number of clients (carry over plus new):	Current Year:	58	Planned Next Year:	60
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:48	Planned Next Year:	1:48

Information and Assistance

<u>Starting Date</u>	10/01/2018	<u>Ending Date</u>	09/30/2019
Total of Federal Dollars	\$0.00	Total of State Dollars	\$76,716.00

Geographic area to be served

Region VII AAA PSA

Specify the planned goals and activities that will be undertaken to provide the service.

Goal 1. Maintain and update the agency's Information and Assistance database to include services and resources that meet the needs of older adults and persons with disabilities. Expected Outcome: Staff will monitor the Information and Assistance database to ensure that the most recent data is available and accurate.

Goal 2. Continue to promote professionalism, education and quality improvement of Information and Assistance. Expected Outcome: Staff will participate in inter-departmental meetings at the agency to ensure that information and programs are current and communicated. Region VII AAA continues to require staff to be certified by the Alliance of Information and Referral System (AIRS) and conducts random monthly quality assurance surveys of 10% of all calls. Additionally, the agency website www.region7aaa.org will continue to be updated. Staff will continue to support the Affordable Care Act and the Healthcare Exchange and Medicare Medicaid Assistance Program (MMAAP).

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Goal 3. Education for our focal points. Expected Outcome: Provide annual roundtable for exchange of educational materials and best practices.

Goal 4. Enhance marketing efforts of Information and Assistance. Expected Outcome: Increased number of calls to Information and Assistance.

Outreach

<u>Starting Date</u>	10/01/2018	<u>Ending Date</u>	09/30/2019
Total of Federal Dollars	\$0.00	Total of State Dollars	\$8,000.00

Geographic area to be served

Region VII AAA PSA

Specify the planned goals and activities that will be undertaken to provide the service.

Region VII AAA management and staff will be presenting information about available home and community-based services for older adults and persons with disabilities to all local governments, i.e. city/village councils, townships, elected officials and other influential groups within the PSA.

Additional outreach and partner development is planned and will involve business, healthcare entities, and community-based organizations.

Direct Service Request

This section applies only if the area agency is submitting a new request to provide an in-home, community, or nutrition service directly that was not previously approved in this multi-year planning cycle. It is expected that in-home services, community services, and nutrition services will be provided under contracts with community-based service providers. When appropriate, a direct service provision request may be approved by the CSA. Direct service provision is defined as “providing a service directly to a senior, such as preparing meals, doing chore services, or working with seniors in an adult day setting.” Direct service provision by the area agency may be appropriate when in the judgment of AASA: (a) provision is necessary to assure an adequate supply; (b) the service is directly related to the area agency’s administrative functions; or, (c) a service can be provided by the area agency more economically than any available contractor, and with comparable quality. Area agencies that have a new request to provide an in-home service, community service, and/or a nutrition service directly, must complete this section for each service category.

Select the service from the list and enter the requested information pertaining to basis, justification, and public hearing discussion for any new Direct Service Request for FY 2019. Specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Direct Service Budget details for FY 2019 are to be included under the appropriate tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget, Support Services Detail Page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details. Please skip this section if the area agency is not submitting a new request to provide an in-home, community, or nutrition service directly during FY 2019.

Medication Management

Total of Federal Dollars \$25,000.00 Total of State Dollars \$0.00

Geographic Area Served Region VII AAA PSA

Planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.

Region VII AAA's licensed Pharmacist will use Title III-B funds to provide prescription drug reconciliation (known as Medication Reconciliation) to persons age 60 and older.

Direct assistance in managing the use of both prescription and over the counter (OTC) medication.

Allowable program components include:

Face-to-face review of client’s prescription, OTC medication regimen, and use of herbs and dietary supplements.

Regular set-up of medication regimen (Rx pills, Rx injectables, and OTC medications).

Monitoring of compliance with medication regimen.

Cueing via home visit or telephone call.

Communicating with referral sources (physicians, family members, primary care givers, etc.) regarding compliance with medication regimen.

Region VII Area Agency On Aging

FY 2019

Family, caregiver and client education and training. UNIT OF SERVICE Each 15 minutes (.25 hours) of component activities performed.

- 1.) The program shall employ a licensed Pharmacist who supervises program staff and is available to staff when they are in a client's home or making telephone reminder calls. Each program shall employ program staff who are appropriately licensed, certified, trained, oriented and supervised.
- 2.) The supervising Pharmacist shall review and evaluate the medication management care plan and the complete medication regimen, including prescription and OTC medications, dietary supplements and herbal remedies, with each client and appropriate caregiver. Each program shall implement a procedure for notifying the client's physician(s) of all medications being managed.
- 3.) The program shall be operated within the three basic levels of service as follows:

Level 1: Telephone reminder call/cueing with maintenance of appropriate documentation. Program staff performing this level of service shall be delegated by the supervising nurse.

Level 2: In-home monitoring visit/cueing with maintenance of appropriate documentation.

Program staff performing level 2 services shall be delegated by the supervising nurse.

Level 3: In-home medication set up, instructions, and passing and/or assistance with medications (e.g., putting in eye drops, giving pills and injections). Program staff performing level 3 services shall be delegated by the supervising nurse.

Level 4. The program shall maintain an individual medication log for each client that contains the following information: a. Each medication being taken. b. The dosage for each medication. c. Label instructions for use for each medication. d. Level of service provided and initials of person providing service. e. Date and time for each time services are provided.

Level 5. The program shall report any change in a client's condition to the client's physician(s) immediately.

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

A, B, and C apply.

Region VII Area Agency On Aging

FY 2019

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

The agency has hired a licensed Pharmacist who has the capacity to provide the service. Region VII AAA has the administrative functions in place to provide, document and bill for the service and will achieve an economy of scale by providing this service directly.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

TBD

Region VII Area Agency On Aging

FY 2019

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency’s efforts to secure services from an available provider of such services; or a description of the area agency’s efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Individuals age 60 and older, along with Medicare beneficiaries being released from the hospital often encounter barriers to seeking a follow-up visit with their physician within seven days of discharge. Region VII AAA is incorporating an on-staff physician into their Care Transitions process and also as a consulting feature for other programs operated by the agency.

The planning and service area of Region VII AAA includes a wide assortment of fragmented healthcare options for older adults and persons with disabilities which is compounded by a shortfall of Medicaid providers.

The agency will ensure that patients are in compliance with Medicare's seven day rule by offering the in-house physician when the patient does not have a primary care provider for follow-up appointments.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

When the concept of Care Transitions was mentioned at each of the public hearings, people were receptive to the idea, and we did not receive any specific comments regarding the potential new service.

Following the hearing in Deckerville, a discussion with staff from the Community Hospital was encouraging. This individual feels that Care Transitions would be a valuable service for those discharged to home from the rural hospitals.

Care Transitions

<u>Total of Federal Dollars</u>	\$25,000.00	<u>Total of State Dollars</u>	\$0.00
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Geographic Area Served Region VII AAA PSA

Planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.

Region VII AAA's Care Transitions program is designed to reduce hospital re-admissions of Medicare beneficiaries. Using components initially put into place to serve older adults and persons with disabilities being discharged from Ascension hospitals, this Direct Service Request will help fund patients who meet the criteria who are being discharged from non-Ascension hospitals in the planning and service area. This includes, but is not limited to McLaren Health Systems, Mid Michigan Health and the sixteen rural critical access hospitals that are members of the Hospital Council of East Central Michigan.

Region VII Area Agency On Aging

FY 2019

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

- (A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.
- (B) Such services are directly related to the Area Agency's administrative functions.
- (C) Such services can be provided more economically and with comparable quality by the Area Agency.

A, B, C

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Care Transitions will be a new service, it does not currently exist in the Region VII AAA planning and service area. This process builds on an existing grant held by the agency and in partnership with Ascension healthcare. The agency expects to use a combination of billable services and other funding to make Care Transitions sustainable within the next three years.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

TBD

Approved MYP Program Development Objectives

Program development goals and objectives previously set by the area agency and approved by the CSA in this multi-year planning cycle are included as read-only. For each of these established program development objectives, a text box is included for the area agency to provide information on progress toward the objective to date. This text box is editable.

Please provide information on progress to date for each established objective under the section tab entitled "Progress".

Area Agency on Aging Goal

- A. Encourage communities in our ten county planning and service area that are not already designated as a Community for a Lifetime (CFL) to consider engaging in the process.**

State Goal Match: 1

Narrative

Region VII AAA will meet with each county unit on aging to discuss the best way to approach localities within their county and then develop a marketing and outreach plan that includes visits and information about CFL for officials, chamber of commerce and economic development groups including the offer of technical assistance to groups interested in this designation.

Objectives

1. One new community in the Region VII AAA planning and service area will receive recognition as a CFL by 9/30/19.

Timeline: 10/01/2016 to 09/30/2019

Activities

Work with county unit on aging directors and staff to develop an outreach plan. Implement plan.

Expected Outcome

One new community in the Region VII AAA planning and service area will secure CFL designation.

Progress

At the start of this MYP, Region VII AAA had two communities express interest in the process. They were Deckerville in Sanilac County and Harrison in Clare County. At this time, Deckerville has been designated as a CFL by AASA. Harrison, Michigan continues to work towards the designation.

- B. Promote and increase the awareness of Region VII AAA programs and services to communities and individuals by 8%.**

State Goal Match: 2

Narrative

Develop baseline indicators that measure an increase in awareness of agency programs services to healthcare providers, potential partners, caregivers, and minority populations including LGBT older adults, tribal members and adults who are age 60 or older and persons with disabilities.

Region VII Area Agency On Aging

FY 2019

Objectives

1. Develop method of documenting efforts to improve outreach and awareness with all populations, and specifically with those affiliated with tribal groups, gay older adults and persons with disabilities.

Timeline: 10/01/2016 to 09/30/2019

Activities

Create tool to measure progress. Implement use of it.

Expected Outcome

8% increase in recognition of agency's services and supports.

Progress

Progress on this goal continues, as MI Choice home and community-based waiver staff are now actively distributing information about AASA funded services in the communities where they work.

A presentation to members of the Saginaw Chippewa Indian Tribe's "at large" group is in the process of being scheduled for spring/early summer 2018. This group is comprised of persons who are not fully eligible for tribal benefits, and or those who reside off the reservation.

Region VII AAA is in year two of the LGBT Older Adult grant, the focus for FY 2019 includes assembling a guide of LGBT affirming service providers, starting with the skilled nursing facilities and healthcare. This effort is being supplemented with a survey process through the Saginaw Valley State University school of social work, and efforts by members of the local LGBT organization Perceptions.

Region VII AAA continues to participate in at least one major county-wide event, each year, in each of the ten counties of the PSA that targets the older adult population.

Management staff are presenting to over 50 units of county, city, village and other municipalities.

The Program Development/Grants Manager continues to report to Senior councils and other groups interested in the work being done by the Area Agency on Aging.

- C. Improve agency performance and quality scores by 1% from the prior year's satisfaction surveys and the Waiver and Care management AQAR and CQAR scores.**

State Goal Match: 2

Narrative

Region VII AAA will develop performance and quality indicators relative to this goal.

Objectives

1. Improve agency performance in home and community-based programs by 1% each year for three years.

Timeline: 10/01/2016 to 09/30/2019

Region VII Area Agency On Aging

FY 2019

Activities

Region VII AAA will develop and implement tools to monitor performance in the home and community-based waiver and care management programs.

Expected Outcome

By 9/30/19 satisfaction rates will be improved by 3%.

Progress

Region VII has restructured the methods used to monitor quality. When data is compiled and results are obtained, the agency takes the findings one step further to determine Root Cause Analysis and implement measures to resolve the identified barrier. Region VII has implemented a proposed quality structure which looks at root cause analysis and discusses the methods/tools used to monitor the identified issue. Region VII continues to value the importance of quality and maintains its goal to improve agency performance and quality scores by 1% from the prior year's satisfaction surveys and the Waiver CQAR and AQAR scores. MDHHS currently has a grant project with MSU to complete participant satisfaction surveys. Results are compiled by MSU colleagues and results are presented to the agency. Region VII remains at 98% satisfaction for WA participants. I&A, as well as Care Management participants remain at the same number as well.

Region VII AAA is applying to become NCQA certified in fiscal year 2019.

OBJECTIVE: Increase agency performance in HCBS by 1%. Region VII had a decrease in the agency's percentage related to agency performance. This trend has been identified by not only this agency, but other AAAs throughout the state. FY2017 was recognized as a 'transition year' for this agency and within the CQAR team as well due to staffing changes. Region VII provides bi-weekly trainings to MICHoice staff which focuses on the findings identified during the FY2017 review. The agency has also implemented a new method of evaluating job performance in order to ensure more effective accountability measures for staff.

D. Promote Region VII AAA's Information and Assistance program and train this staff to become Aging and Disability Resource Center (ADRC) Options Counselors and Alliance of Information and Referral Systems (AIRS) specialists.

State Goal Match: 5

Narrative

Region VII AAA will continue to educate Information and Assistance staff so they can meet the needs of older adults, caregivers and service providers in the planning and service area.

Objectives

1. Persons working in the Information and Assistance department who have not yet achieved AIRS certification will do so during the MYP cycle, should Michigan secure funding for the ADRC projects, staff will be educated in Options Counseling techniques.

Timeline: 10/01/2016 to 09/30/2019

Activities

AIRS and Options Counseling Training as available and needed.

Region VII Area Agency On Aging

FY 2019

Expected Outcome

Persons working in Region VII AAA's Information and Assistance department will be educated in Options Counseling techniques and will be AIRS certified by 9/30/2019.

Progress

FY 2019: All I&A staff, along with select others from around the PSA will participate in LGBT education in July.

Information and Assistance staff are currently or in the process of becoming Alliance of Information and Referral Systems (AIRS) specialists.

E. Increase agency awareness and involvement in Integrated Care/MI Health Link.

State Goal Match: 6

Narrative

Region VII AAA management will continue to monitor and assess organizational preparedness to participate in the Michigan Health Link/Integrated Care (IC) demonstration project for the dual-eligible (Medicare/Medicaid) population and other statewide long-term care (LTC) managed care initiatives.

Objectives

1. Monitor and review available information regarding I.C. and Managed care LTC projects.

Timeline: 10/01/2016 to 09/30/2019

Activities

Communicate with Integrated Care pilot projects, Michigan's Aging and Adult Services Agency, the Area Agency on Aging Association of Michigan and others as necessary to glean information to position Region VII AAA for participation in managed care projects in the future.

Expected Outcome

Region VII AAA will be ready to engage in I.C. and/or LTC managed care projects as they are available.

Progress

FY 2019:

Region VII AAA Board of Directors and agency leaders have, and continue to advocate to retain administration of home and community-based long-term care programs, specifically Medicaid with reference to the Integrated Care for persons with Medicare and Medicaid. Strong advocacy led to the removal of boilerplate language in section 1852 of SB 135 in the proposed FY 2018 Michigan Department of Health and Human Services (MDHHS) budget. This provision would have shifted Medicaid MI Choice participants in pilot areas to Integrated Care Organizations (ICO), operated by health insurance companies.

The agency Executive Director met with state representative Edward Canfield, D.O. chair of the Appropriations Committee to remove a clause in the current proposals that would have shifted all Medicaid long-term care funding lines to Health Maintenance Organizations.

Region VII AAA is pleased to have two active MSAC representatives, and a State Advisory Council representative volunteering on behalf of the PSA to educate lawmakers and their staff about the issues important to Michigan's older adults.

Region VII Area Agency On Aging

FY 2019

Agency staff, providers, participants and community advocates participate in letter writing campaigns year round, circulate a newsletter four times a year, and attend the state Older Michigianian Day each May.

F. Increase advocacy for senior long-term care (LTC) needs with state and federal legislators.

State Goal Match: 1

Narrative

Region VII AAA will continue to educate lawmakers about the cultural, economic and social contributions and needs of older adults in their planning and service area.

Objectives

1. Educate lawmakers about the needs of older adults in their districts.

Timeline: 10/01/2016 to 09/30/2019

Activities

Develop and deploy a communication strategy on pertinent senior issues to disseminate Region VII AAA's advocacy strategy statement to lawmakers, key policy makers and stakeholders who have political influence.

Expected Outcome

Lawmakers will have a better understanding of the demographics of older adults in their districts and the funding needed to support home and community-based services.

Progress

FY 2019:

Region VII AAA is pleased to have two active MSAC representatives, and a State Advisory Council representative volunteering on behalf of the PSA to educate lawmakers and their staff about the issues important to Michigan's older adults. MSAC is a standing item on the Region VII AAA Advisory Council meeting agenda where the appointee from each county reports on the issues affecting older adults in their communities. Highlights are reported to the Region VII AAA Board of Directors and other MSAC members as necessary.

Agency staff, providers, participants and community advocates participate in in-district coffee hours, letter writing campaigns year round, circulate a newsletter four times a year, and attend the state Older Michigianian Day each May.

State lawmakers are visited by the Region VII AAA Executive Director, and lawmakers offices supplied annually with materials and information on aging so that when a need arises a constituent can be linked to Region VII AAA's Information & Assistance department.

G. Ensure Region VII AAA financial and operational viability and stability in providing long-term care (LTC) programs.

State Goal Match: 6

Narrative

The Executive Director will work to assess and mitigate current financial and operational threats to the agency's sustainability.

Region VII Area Agency On Aging

FY 2019

Objectives

1. Improve the effectiveness, efficiency and quality of services.

Timeline: 10/01/2016 to 09/30/2019

Activities

Engage in continuous quality improvement activities.

Expected Outcome

Efficient use of funding for service delivery.

Progress

FY 2019:

A non-emergency medical transportation program continues to develop serving those who are age 60+ and have no other means of transportation to medical appointments. Agency staff are being cross-trained to work in different areas, and the co-locating pilot project is underway, collaborating with county units on aging and other community-based organizations.

- H. Support caregivers and older community members with short notice, ride-of-last resort transportation options, in response to their transportation needs that are not otherwise being met.**

State Goal Match: 2

Narrative

Region VII AAA will ensure that all elderly and disabled citizens within the Region VII AAA PSA are given short notice, ride-of-last resort transportation options based on their individual needs that are not otherwise being met.

Objectives

1. Provide older adults and persons with disabilities within the Region VII AAA PSA short notice, ride-of-last resort transportation options that are not otherwise being met.

Timeline: 10/01/2017 to 09/30/2018

Activities

1. Region VII AAA will assist clients in finding inexpensive transportation from both private and public entities prior to providing transportation to clients.
2. Region VII AAA will verify any transportation source used meets or exceeds the standards of Region VII AAA's transportation system.
3. Region VII AAA will work with community-based programs to find suitable solutions for those that need transportation and will only be a short notice, ride-of-last-resort transportation program.

Expected Outcome

Residents of the planning service area (PSA) will have improved short-notice transportation options to access non-emergency medical, housing transitions, benefit application, and enrollment appointments.

Region VII Area Agency On Aging

FY 2019

Progress

FY 2019:

In addition to the accessible mini-vans, the agency has submitted an application to MDOT for Section 5310 funding to secure additional vehicles to better serve the ten county PSA. Other developments in NEMT include solutions for recurring rides to therapies including dialysis using public transit, on-demand lift services. This greatly reduces the cost to the agency for provision of NEMT and provides reliable, taxpayer subsidized transportation for the person in need.

The NEMT service will be included in the county Senior Resource Directories which are printed and distributed in June of each year, making it more visible to those who may require it.

Appendices

Appendices A and B are not required to be completed or updated for the FY 2019 AIP. Appendix C should only be completed if there are new/changed criteria for selecting providers. Appendices D, E and F should be completed if applicable to the area agency 2019 AIP. Select the applicable appendix from the list on the left and provide information for each appendix.

- A. Policy Board membership – not required for the FY 2019 AIP**
- B. Advisory Council membership – not required for the FY 2019 AIP**
- C. Proposal Selection Criteria**
- D. Cash-in-Lieu-of-Commodity Agreement**
- E. Waiver of Minimum Percentage of a Priority Service Category**
- F. Request to Transfer Funds**

APPENDIX D

Agreement for Receipt of Supplemental Cash-In-Lieu of Commodity Payments for the Nutrition Program for the Elderly

The above identified agency, (hereinafter referred to as the GRANTEE), under contract with the Aging and Adult Services Agency (AASA), affirms that its contractor(s) have secured local funding for additional meals for senior citizens which is not included in the current fiscal year (see above) application and contract as approved by the GRANTEE.

Estimated number of meals these funds will be used to produce is:	69,957
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These meals are administered by the contractor(s) as part of the Nutrition Program for the Elderly, and the meals served are in compliance with all State and Federal requirements applicable to Title III, Part C of the Older Americans Act of 1965, as amended.

Therefore, the GRANTEE agrees to report monthly on a separate AASA Financial Status Report the number of meals served utilizing the local funds, and in consideration of these meals will receive separate reimbursement at the authorized per meal level cash-in-lieu of United States Department of Agriculture commodities, to the extent that these funds are available to AASA.

The GRANTEE also affirms that the cash-in-lieu reimbursement will be used exclusively to purchase domestic agricultural products, and will provide separate accounting for receipt of these funds.

Region VII Area Agency On Aging

FY 2019

APPENDIX E

Waiver of Minimum Percentage For a Priority Service Category

Priority Service Category for which Waiver is being requested:		In-Home Services
Source of Funds	Amount of Funds	Amount of Title III-B
State	21,147	49,005
<p>Rationale Statement: Explain how waiving the respective required minimum percentage will enhance the service delivery system to be implemented under this plan. (For additional context, refer to AASA Transmittal Letter 2005-107, July 27, 2005.)</p>		
<p>Waiving this service requirement will allow additional resources to be used in case management, health related services, and home delivered meals.</p>		

APPENDIX F
Request to Transfer Funds

1	The Area Agency on Aging requests approval to transfer funds from Title III-B Supportive Services to Title III-C Nutrition Services. The Agency assures that this action will not result in a reduction in support for in-home services and senior center staffing. Rationale for this request is below.	Amount of Transfer 0
2	The Area Agency on Aging requests approval to transfer funds from Title III-C1 Congregate Nutrition Services to Title III-B Supportive Services for in-home services. The rationale as to why congregate participation cannot be increased is described below.	Amount of Transfer 194,055
This transfer allows for funding to be placed in needed services like case management and new health related services.		
3	The Area Agency on Aging requests approval to transfer funds from Title III-C1 Congregate Nutrition to Title III-B Supportive Services for participant transportation to and from meal sites to possibly increase participation in the Congregate Nutrition Program. Rationale for this request is below.	Amount of Transfer 0