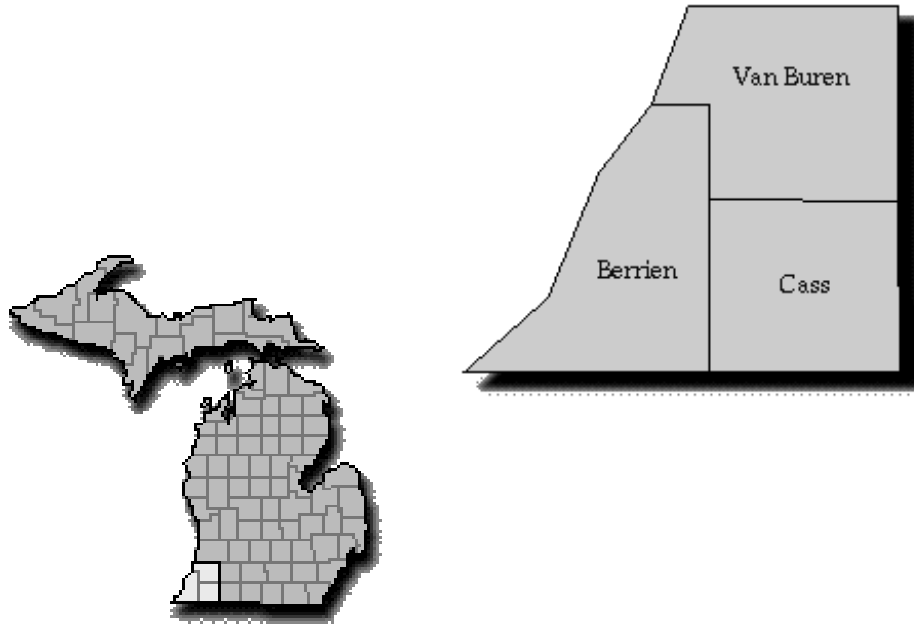


2020 - 2022 Multi-Year Plan  
**FY2021 ANNUAL IMPLEMENTATION PLAN**  
REGION IV AREA AGENCY ON AGING



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**Planning and Service Area**  
Berrien, Cass, Van Buren

**Region IV Area Agency on Aging**

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St. Joseph, MI 49085  
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Lynn Kellogg, CEO  
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**Field Representative Cindy Albrecht**

[albrechtc@michigan.gov](mailto:albrechtc@michigan.gov)  
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## Executive Summary

Region IV Area Agency on Aging (RIV AAA) is a nonprofit corporation governed by an independent Board of Directors. The agency was formed in 1974, and serves Berrien, Cass, and Van Buren counties in southwest Michigan where more than 71,000 adults age 60+ reside. ([www.data.census.gov](http://www.data.census.gov))

The region is primarily rural with some areas of high poverty and others of mass wealth. The primary race/ethnicities represented in the 60+ population of the region include Caucasian (90%), African American (7%) and Hispanic (2%). American Indian, Asian, and Other population comprise around 1%.

Region IV AAA is designated by the Michigan Aging and Adult Services Agency (AASA) to plan, develop, and implement services as guided through the federal Older Americans Act (OAA) of 1965 and its subsequent amendments. The Older Michiganians Act (OMA) was enacted by the State of Michigan in 1981 to build upon the efforts of the aging network through State resources.

The mission of Region IV AAA is "Offering Choices for Independent Lives" with a primary focus on individuals with the greatest economic and social needs. The vision of RIV AAA is that through choice and range of services, every aging adult lives a quality life. This is achieved through advocacy, educating the community, collaboration, planning and development of needed services, coordinating services and using available resources and funding for supportive services.

Region IV AAA works to include a wide range of perspectives in its planning process. The most important voices at the table are those of seniors and people with disabilities. Tools used to gain that input include having 60% or more of RIV AAA Advisory Council member be age 60 or older. The balance being a community action agency representative; a Senior Volunteer Programs participant; resource persons from non-grantee agencies and members of the general public.

Advisory Council members provide feedback on such issues as healthcare, transportation, housing and more; help identify gaps, barriers, resources and suggest ideas for improvement in services; assist with public hearings, focus groups and other agency activities; and suggest ways that the agency can best serve seniors and persons with disabilities.

Organizational input into the planning process is gleaned through staff participation in the three county Human Services Collaborative Councils, the membership of which ranges broadly and includes organization representative from human services, education, health care, social services, law enforcement, county governments, employment services, United Way, disability groups, senior service organizations and more.

Further, RIV AAA targets staff affiliations on numerous boards, committees and coalitions at the local, regional, state and national level to both aid in its local planning efforts as well as to inform the planning efforts of other organizations and policy makers.

The RIV AAA planning process is guided and approved by its Advisory Council and Board of Directors, many of whom are representatives from key planning partner organizations. Additional strategies are employed to ensure a robust and well-informed Area Plan is achieved.

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The RIV AAA Multi-Year Plan (MYP) for the period of October 1, 2019 through September 30, 2022 has set forth a plan to continue to provide and improve upon a comprehensive coordinated system of services to assist aging adults in maintaining independence in their homes and communities. No changes are planned for Access, In-home and Community-based services in the 2021 AIP and are consistent with the approved 2019-2021 MYP.

The 2021 AIP includes one new Direct Service Request for the provision of Telephone Reassurance service. This service, Friendly Callers, was developed and launched through the established RIV AAA Senior Volunteer Programs in response to increased social isolation and loneliness among area seniors due to the COVID-19 pandemic.

The 2021 AIP also includes one new goal: Improve the accessibility of services to southwest Michigan's communities and people of color, persons with disabilities, recent immigrants and LGBTQ+ individuals.

The COVID-19 pandemic shifted the Agency focus from normal operations in FY 2020 to meeting seniors' heightened needs during the crisis. RIV AAA response to the COVID-19 pandemic includes:

1.1. Organizational

1. Reviewed and updated Agency emergency preparedness plan and business continuity plan to identify any gaps or opportunities to amend policies to best address current issues, meet client needs and maintain staff health.

Deployed all staff to remote work equipping them with technology and training to conduct all business operations from the field. Maximized recent investment in Office 365 tools such as SharePoint, PowerBI and Teams to allow for seamless access to information, workflows and team collaboration with all staff working from home. Barriers experienced include some staff not having internet access or having poor internet services at their home resulting in some staff not being able to work at full capacity. Technology solutions for remote document generation and obtaining client signatures on required MDHHS forms during the stay at home order proved to be an ongoing challenge.

Participated in weekly, bi-weekly then monthly Joint Information Calls with Health Department to get direct CDC and Public Health information, recommendations and guidelines to make fact-based information driven decisions and push that information out through our provider network.

Conduct weekly, then bi-weekly, conference calls with provider network to provide information, identify needs and address barriers. Primary barriers identified include shortage of PPE and direct care workforce challenges.

Collaborated with tri-county health departments to facilitate information sharing with SNFs, AFCs and ALFs so health officials have a direct-line of communication to facilities housing vulnerable populations during the pandemic.

1.2. Care Management:

1. Reviewed emergencies services plans with all clients; identified unmet needs and filled gaps. All care management programs have remained operational throughout the pandemic and new enrollments continue. Interaction with clients are all telephonic. Face to face assessments and reassessments are on hold until

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southwest Michigan reaches phase 5 of the Governor's MI Safe Start plan. Telehealth options for expanded remote client interactions/patient monitoring are being explored.

Developed a Rapid COVID-19 HCBS Response initiative to provide COVID positive older adults with access to 4 weeks of HCBS for those convalescing at home or 2 weeks of HCBS services post hospitalization. The project also provides the same level of service for older adults whose informal caregivers are COVID-19 positive and therefore cannot provide care to the older adult. An on-line professional referral system allows physicians, discharge planners and health department officials to refer patients to this service. Service providers are equipped with PPE and Direct Care Workers an increased in rates when serving COVID positive patients.

**3. Volunteer Programs:**

1.Suspended FGP and SCP services. Provide education, information on preventative health practices to volunteers. Staff doing telephone reassurance calls to volunteers at risk of social isolation and loneliness to ensure connectivity, identify needs and refer to Information and Assistance to connect to resources. Conducted drive-through recognition event in June to honor, support and celebrate FGP and SCP volunteers.

Launched Friendly Callers, a telephone reassurance initiative to serve isolated seniors. This phone line provides reassurance, helps connect older adults to services they may need while sheltering in place and reduces feelings of isolation and loneliness.

Secured and coordinated mailing 3,500 cloth facemasks to clients, volunteers, caregivers and other area seniors through partnerships with volunteers, non-profit organizations and community foundations.

**4. Community Services:**

1.Maintained full staffing and operational hours of toll-free Information and Assistance line with staff fielding calls from home.

Ceased in-person evidence-based and other classes mid-March. Developed virtual program offerings to engage older adults, caregivers and younger persons with disabilities in on-line learning opportunities. Challenges included the lack of an established virtual class platform and staff and volunteer inexperience with leading virtual classes. RIV AAA purchased five Zoom licenses, provided training and launched a robust series of classes in June 2020. Class registrations are growing; the largest of which has been 60 where traditional in-person classes had topped at 25. On-going challenges will be reaching seniors with virtual programming who are not familiar with the technology and working to resume in-person classes in a safe manner when appropriate.

Collaborated with non-profits, commodities sites, food banks and United Way to distribute 1,700 Quarantine boxes and produce boxes to area seniors; and continue to collaborate with community service providers to deliver weekly produce boxes to older adults in the region.

Secured PPE for Agency and provider network staff. Continue to monitor and coordinate PPE acquisition and delivery to providers to ensure an equipped and ready workforce to meet the needs of clients.

5. Continue to develop and expand structural partnerships and efforts to address systemic barriers to

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successful outcomes. Prime examples include actionable efforts to impact ageism and racism as barriers to successful health outcomes.

**2021 Plan Highlights**

In FY 2021, Region IV AAA will continue to offer and administer the objectives established in the FY2020-2022 MYP. A significant new initiative and priority in FY 2021 is combatting the negative effects of social isolation and loneliness among area seniors via a Telephone Reassurance service. The Friendly Callers program was developed and operationalized in FY 2020 in response to an increase in social isolation due to the COVID-19 pandemic. The Friendly Callers program will be extended and expanded in FY 2021.

The potential for reduced funding over the last few years has afforded Region IV AAA an opportunity to restructure the use of various OAA and state funding sources to accommodate some of the unexpected shifts in funding. These flexible services are easily turned on and off without having much effect on the individual but are still able to lessen and/or eliminate a barrier.

However, not all funding sources can easily be shifted to adapt to a reduced funding stream and may require the AAA and direct service providers to reduce much needed services. This reduction may have a negative effect on an individual and potentially their ability to continue to lead an independent life in their homes and community. An example would be having to reduce and restructure Care Management and Case Coordination & Support staff which would result in fewer individuals being assessed and less in-home services being authorized.

Whether there is a reduction in funding or not, Region IV AAA will continue to seek out additional funding opportunities and community partnerships to sustain and/or grow existing programs and start new programs when viable to meet the needs of the older adult population in our counties. Those potential funding sources include private and public foundations, United Way, health system and health payor contracts among others.

Advocacy efforts for FY2021 will build on progress to date and not differ greatly from the FY2020-22 MYP. Progress made includes increased consumer engagement through grassroots advocacy efforts as evidenced by increased participation in public policy events such as the 2020 Senior Action Day. Further, Legislators' awareness and understanding of policy implication have been heightened through AAA staff testimony on pending legislation, facilitated conversations with consumers and field visits. Policy analysis, public testimony and facilitated consumer meetings between elected officials will continue.

Significant advocacy efforts and success have focused on the effort to make Michigan a no-wait state for AASA-funded in-home services. Those efforts will continue in FY2021 with an added focused effort on federal funding for Title III-B services.

Recognizing state and federal budget shortfalls are increasingly likely due to the COVID-19 pandemic, advocacy efforts will focus on educating appropriators on the value and impact of AAA services and will focus advocacy efforts to avoid cuts to key programs and mitigate impact on older adults by seeking additional funding opportunities to mitigate the impact of federal or state funding cuts.

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<b>Public Hearings</b>
------------------------

Date	Location	Time	Barrier Free?	No. of Attendees
06/01/2020	Conference Call	02:00 PM	Yes	12

Region IV AAA held a public hearing for its FY2021 Annual Implementation Plan (AIP) on June 1, 2020 in conjunction with the Advisory Council Meeting. The meeting was held via conference call due to the Covid-19 pandemic. Notice of the public hearing was posted on the AAA website thirty days in advance along with a draft of the plan. In addition, an announcement was sent via e-mail to the area's largest local newspaper.

Ray Cruse, Advisory Council Chair, officially opened the public hearing for the FY2021 AIP. The hearing was then turned over to Pam Kahaneck, Community Services Director of Region IV AAA. It was stated that the FY2021 AIP is the second year of the three year Multi-Year planning cycle and addresses services to be funded through the federal Older Americans Act and the state Older Michigianians Act. It was also mentioned that due to the Covid-19 pandemic, the State Commission on Services to the Aging approved an extension of the FY2020 AIP and the AAA's will only need to address in the FY2021 AIP any substantial changes from the FY2020 AIP.

The services that were provided in FY2020 either directly by the AAA, or through Annual Contracts and Direct Service Purchase agreements were reconfirmed for the FY2021 AIP by Pam Kahaneck. Christine Vanlandingham, Chief Operating Officer, stated that Region IV AAA will be providing a new telephone reassurance program in FY2021, called Friendly Callers, which was developed in rapid response to the Covid-19 pandemic and the governor's stay at home order. Due to the urgency to get the program up and running, the AAA was able to quickly deploy this new service through its existing volunteer and information and assistance departments and will continue to use this internal structure to continue to provide the service in FY2021 as it allows for cost effectiveness and efficiencies. Ray Cruse, Advisory Council Chair, commented on how impressed he was with AAA's ability to quickly get the Friendly Caller program up and running and the number of older individuals that have already been connected to the service.

It was noted that the Aging and Adult Services Agency provided the AAA with an estimated cost allotment which was used for FY2021 funding levels with knowledge that the final funding level could possibly differ. The top five service categories to be funded, which comprises 82% of the anticipated funding, were also mentioned.

Attendees of the public hearing were informed that a draft of the plan has been posted to the AAA website and printed copies are available upon request. It was noted that comments on the AIP will be accepted via e-mail or US Postal Service through Friday, June 5th.

There were no comments received on the FY2021 AIP for public record and Ray Cruse, Advisory Council Chair, closed the public hearing.



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**Access Services**

**Care Management**

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/30/2021
Total of Federal Dollars		Total of State Dollars	\$107,957.00

Geographic area to be served  
Berrien, Cass, Van Buren (PSA4)

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

Continue to implement a person-centered model of care coordination that allows Nurse and/or Social Worker Supports Coordinators the flexibility to provide care and services based on the unique needs and preferences of participants and their chosen legal representative(s).

Provide telephonic and in-person professional assessment, consultation, care planning, and service monitoring by licensed Nurse and/or Social Worker Supports Coordinators.

Provide ongoing home and community-based services and supports to meet needs as identified during the person-centered planning process.

Provide unbiased information and assistance in accessing community resources.

Engage participants in person-centered emergency preparedness planning.

Provide seamless transition of participants among programs as changes in eligibility allow.

Offer opportunities for donation using a sliding scale cost-share model.

Assure high quality service is being provided through bi-annual client surveys.

Implement continuous quality improvement plan for AASA Quality Outcome Measures.

Number of client pre-screenings:	Current Year:	177	Planned Next Year:	177
Number of initial client assesments:	Current Year:	156	Planned Next Year:	156
Number of initial client care plans:	Current Year:	156	Planned Next Year:	156
Total number of clients (carry over plus new):	Current Year:	265	Planned Next Year:	270
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:38	Planned Next Year:	1:38

**Case Coordination and Support**

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/30/2021
Total of Federal Dollars	\$105,000.00	Total of State Dollars	\$40,063.00

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Geographic area to be served

Berrien, Cass, Van Buren (PSA4)

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

Continue to implement a person-centered model of care coordination that allows Nurse and/or Social Worker Supports Coordinators the flexibility to provide care and services based on the unique needs and preferences of participants and their chosen legal representative(s).

Provide telephonic and in-person professional assessment, consultation, care planning, and service monitoring by licensed Nurse and/or Social Worker Supports Coordinators.

Provide ongoing home and community-based services and supports to meet needs as identified during the person-centered planning process.

Provide unbiased information and assistance in accessing community resources.

Engage participants in person-centered emergency preparedness planning.

Provide seamless transition of participants among programs as changes in eligibility allow.

Offer opportunities for donation using a sliding scale cost-share model.

Assure high quality service is being provided through bi-annual client surveys.

Implement continuous quality improvement plan for AASA Quality Outcome Measures.

**Information and Assistance**

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/30/2021
Total of Federal Dollars	\$87,000.00	Total of State Dollars	\$17,552.00

Geographic area to be served

Berrien, Cass, Van Buren (PSA4)

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

Activities:

Facilitate person-centered access to services for individuals (both professions and community) by answering all requests in a timely and thorough manner.

Continue to assess clients for the appropriate referral to AAA programs.

Obtain and maintain MMAP counselor status to enhance existing knowledge.

Maintain a resource database to ensure individuals are provided with an array of current and accurate information to meet the needs of the aging and disabled population in the service area.

Assure high quality service is being provided by annually surveying client satisfaction levels.

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Continue to extrapolate and analyze data from the I&A data system (WellSky), which documents approximately 1,000 contacts per month, to make outcome-driven decisions.

Goals:

- \* Answer live 92%, or higher, of Info-Line calls.
- \* Provide 4 staff trainings during fiscal year 2021.
- \* All I&A staff will maintain their MMAP certification.
- \* Two I&A staff will become AIRS certified.
- \* I&A staff will partner with a CM team member to gain further insight on assessing and enrolling participants into AAA programs.

**Options Counseling**

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/30/2021
Total of Federal Dollars		Total of State Dollars	\$107,956.00
Geographic area to be served			
Berrien, Cass, Van Buren (PSA4)			

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

Continue to implement a person-centered model of care coordination that allows Nurse and/or Social Worker Supports Coordinators the flexibility to provide care and services based on the unique needs and preferences of participants and their chosen legal representative(s).

Provide telephonic and in-person professional assessment, consultation, care planning, and service monitoring by licensed Nurse and/or Social Worker Supports Coordinators.

Provide immediate and short-term home and community-based services and supports to meet needs as identified during the person-centered planning process.

Provide unbiased information and assistance in accessing community resources.

Engage participants in person-centered emergency preparedness planning.

Provide seamless transition of participants among programs as changes in eligibility allow.

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**Direct Service Request**

**Friendly reassurance**

Total of Federal Dollars     \$3,000.00                      Total of State Dollars

Geographic Area Served     Berrien, Cass, Van Buren (PSA4)

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

Objectives:

- Reduce social isolation and loneliness among area older adults
- Provide meaningful volunteer opportunities connecting trained volunteers with older adults at risk of social isolation and loneliness

Goals:

- Older adults served will report reduced feelings of isolation
- Older adults served will report increased social ties/perceived social support

Activities:

The Friendly Callers program matches volunteers with homebound or otherwise socially isolated and lonely seniors based on common first language and, when possible, common interests and hobbies. Volunteers make regular calls to provide socialization. The calls may be once a week or more, depending on the client's preference and volunteer's availability. Calls typically last 15-30 minutes but may be longer or shorter depending on how the client is feeling that day. Volunteers are screened and undergo training before they are matched, which includes: volunteer tasks and roles, practice in active listening and communication skills, information about the Info-Line for Aging and Disability to connect clients to community resources, and any relevant aging topics. Volunteers keep records of the frequency and duration of their calls with each client, along with any notes on client needs or concerns and actions taken (e.g., referrals to AAA Info-Line). Clients who receive this service for at least 4 months are expected to feel they have increased social ties/perceived social support.

**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.**

This direct service provision request is necessary due to

A) Provision of this service can be provided more economically and with comparable quality by the Area Agency on Aging.

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**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 AAA's Telephone Reassurance Program, Friendly Callers, was developed in rapid response to the COVID-19 pandemic and the governor's stay at home order. The Area Agency on Aging has invested in limited staff to spur the rapid development and deployment of this service. AAA quickly trained and deployed staff and trained volunteers to conduct the work and executed a publicity campaign inclusive of social media, print and radio broadcasts to inform older adults of this key service during the pandemic. Given the urgency of the issue and the nature of the stay at home order, the AAA did not undertake an effort to build capacity in existing providers to stand up this service. As such, the AAA is in a unique position to offer this direct service in combination with its existing volunteer and information and assistance programs in a uniquely cost effective and efficient manner by building on this existing infrastructure.

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

The request to provide the Telephone Reassurance Program directly was presented at the AAA's June 1st public hearing by Christine Vanlandingham, Chief Operating Officer. The presentation covered the community need for the program and the justification for continuing to provide the program directly.

**Approved MYP Program Development Objectives**

**Area Agency on Aging Goal**

**A. Help older adults maintain their health and independence at home and in their community.**

Objectives

1. Strengthen and expand access to supports and resources for family caregivers.

Timeline: 10/01/2019 to 09/30/2022

Progress

Continue to fund a successful Respite Chore program in our three county area. In FY2019, chore services were provided to 130 unpaid caregivers. However, due to the COVID-19 pandemic, the program has not been able to gain momentum in FY2020 due to the inability to provide chores.

Continue to support caregivers through the funding of Caregiver Supplemental Services in our three county area. In the first six months of FY2020, 32 caregivers have received supplemental services.

Region IV AAA added an additional trainer to the Creating Confident Caregivers program. The addition of a third trainer has allowed the AAA to assign a trainer to each county to ensure maximum coverage of our three county area.

Continue to provide the 36 Hour Day guide to caregivers as a resource. The guide provides information on the causes of dementia, managing the early stages of dementia, the prevention of dementia, and finding appropriate living arrangements for the person who has dementia when home care is no longer an option.

The Senior Volunteer Program (SVP) surveyed participants who are currently receiving the Grandparents Raising Grandchildren (GRG) newsletter to obtain data on how to further meet the needs of the of this population of older adults. The SVP had also been holding workgroups comprised of 6 GRGs to provide input into developing a program that will be the most responsive to meet their needs. The workgroup has not convened since February 2020 due to COVID-19.

2. Continue to support and encourage independent living and successful aging of the older population by being able to adapt to their needs.

Timeline: 10/01/2019 to 09/30/2022

Progress

I&A staff attended a full day training on Mental Health First Aid which is a skills-based training course that teaches participants about mental health and substance-use issues.

MMAAP Regional Coordinator has been able to meet the needs of many community individuals who are approaching 65 or nearing retirement by offering "New to Medicare" classes as opposed to scheduling one-on-one appointments with counselors. The classes cover such topics as how to enroll, options available, fraud, cost savings, and other Medicare nuances which may ease the enrollment process. In FY2019, classes

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were held in April, June, and August and had a total of 80 participants. Due to the covid-19 pandemic, the MMAP Regional Coordinator has had to move the "New to Medicare" class from an in-person class to a virtual class. The first virtual class is being held in May with 8 community individuals currently registered to attend.

Region IV AAA contracted with two local Spanish translators to begin the process of translating and offering both marketing and enrollment materials to the Hispanic community.

The Diversity & Inclusion Educator from the OutCenter of SW Michigan presented an on-site workshop, available to both staff and providers, titled "LGBTQ+ Aging and Home Health".

Region IV AAA will continue to utilize regional service definitions (Gap Filling) to allow Supports Coordinators to meet the unique unmet needs identified in the person-centered planning which are not met through the traditional service standards. Provided Gap Filling services to 88 individuals in FY2019 and 25 individuals during the first six months of FY2020.

**B. Promote elder and vulnerable adult rights and justice.**

Objectives

1. Increase community awareness on the signs of abuse, neglect, and financial exploitation of older adults and how to report suspicious activity.  
Timeline: 10/01/2019 to 09/30/2022

Progress

Currently partnering with the Berrien County Health Department to offer Opioid Education at senior housing complexes. In FY2019, twelve senior housing complexes and 175 residents participated in the education class with 92.7% of the residents indicating that the information provided was beneficial. However, due to the covid-19 pandemic, the health department has not been able to provide the education classes in person but is currently working on alternative solutions to continue to provide information to residents of senior housing complexes.

MMAP volunteers educated 3,091 individuals in FY2019 and 1,193 the first six months of FY2020 on how to recognize Medicare and Social Security Fraud.

Distributed to congregate meal sites fraud prevention placemats created by the Social Security Administration and Federal Trade Commission.

I&A staff attended an elder abuse training put on by the Michigan Elder Justice Coordinating Council which gave attendees an overview of the dynamics of elder abuse, legal issues, and challenges impacting professionals.

I&A staff attended a presentation put on by the Michigan Alliance for Families titled "Rethinking Guardianship" which covered such topics as strangers as guardians and alternatives to guardianship.

Legal Aid of Western Michigan (LAWM) provided 428 hours of service on 182 unduplicated cases as of March 31, 2020; the most notable issues older adults were seeking assistance on were financial and housing related.

The Long Term Care Ombudsman (LTCO) made 49 nursing home visits as of March 31, 2020; the majority of

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nursing home complaints were for the quality of care being received and residents rights not being adhered to.

**C. Conduct responsible quality management and coordination of Michigan's aging network.**

Objectives

1. Continue to be innovative in meeting the needs of the ever-changing landscape of the older population while ensuring service provision remains effective and efficient.

Timeline: 10/01/2019 to 09/30/2022

Progress

Implemented Office 365 SharePoint and Power BI Dashboards to allow staff to more efficiently and effectively organize and manage their work.

**D. More communities will complete an aging-friendly community assessment and receive recognition as a Community for a Lifetime (CFL).**

Objectives

1. At least one community within Region IV AAA service area will receive recognition as a CFL.

Timeline: 10/01/2019 to 09/30/2020

Progress

None



**2021 Program Development Objectives**

**Area Agency on Aging Goal**

**A. Improve the accessibility of services to minority populations in southwest Michigan inclusive of people of color, persons with disabilities, recent immigrants and LGBTQ+ individuals**

State Goal Match: 0

Narrative

Historical biases such as economic deprivation, social ostracization (exclusion), and inequitable exposures to occupational and environmental hazards have resulted in lower health outcomes for Michigan's communities/people of color, recent immigrants and lesbian, gay, bisexual, transgender and other (LGBTQ+) persons. Effects of such bias have been shown to result in poorer health outcomes because of limits on access to social programs, in-home support services and health care, as well as physiological responses to living with chronic discrimination. Mortality rates and chronic health conditions are higher among these population groups.

Objectives

1. Assure AAA staff and subcontractors are trained in diversity, equity and inclusion, including ability to recognize and address unconscious bias

Timeline: 10/01/2020 to 09/30/2021

Activities

- 1) Provide annual DEI training for staff, providers and volunteers inclusive of, but not limited to MDHHS suggested Systemic Racism training.
- 2) Provide annual LGBTQ training to assure sensitivity and efficacy of approach

Expected Outcome

- Establish a common language and base understanding of systemic racism
- Ensure that AAA staff and subcontractors are able to recognize and address unconscious bias
- Ensure AAA staff and subcontractors are provide culturally competent service for LGBTQ+ individuals

2. Ensure that programming and outreach is culturally sensitive and welcoming to all

Timeline: 10/01/2020 to 09/30/2021

Activities

- Conduct focus groups of minority populations and service providers to identify barriers program accessibility
- Collaborate with community influencers representing minority populations and trusted organizations currently serving minority populations to distribute service availability information and build trust.

Expected Outcome

AAA programs and outreach is culturally sensitive consistent with diverse populations represented in the region .

3. Ensure that culturally and linguistically appropriate outreach is directed to non-English-speaking persons and that providers are trained to adapt to diverse cultural needs.

Timeline: 10/01/2020 to 09/30/2021

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Activities

- Translate AAA organizational and programmatic materials into the first language of underserved minority populations.
- Assure translation services are readily available and staff proficient in use .
- Continue to provide information, resources and best practices to the vendor network to ensure culturally competent services are provided

Expected Outcome

- Outreach will be conducted in a culturally and linguistically appropriate manner consistent with the diverse populations represented in the region.
  - Services will be provided in a manner consistent with the cultural needs of the diverse populations represented in the region.
4. Ensure AAA staff, board and volunteers serving the communities of southwest Michigan are reflective of the diverse population of the region.  
Timeline: 10/01/2020 to 09/30/2021

Activities

- Add DEI language to job postings and recruitment materials for staff, board and volunteers
- Ensure AAA print, social media and web images and language reflect the diversity of the community and AAA commitment to DEI
- Collaborate with organizations who have been successful at attracting and retaining a diverse workforce to learn and implement best practices.

Expected Outcome

- AAA will attract and retain a diverse workforce, board and volunteers

**Approved Multi-Year Plan Highlights**

**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 IV Area Agency on Aging (AAA) is a nonprofit corporation governed by an independent Board of Directors. The agency was formed in 1974, and serves the counties of Southwest Michigan, which includes Berrien, Cass, and Van Buren. Region IV AAA is designated by the Michigan Aging and Adult Services Agency (AASA) to plan, develop, and implement services as guided through the federal Older Americans Act (OAA) of 1965 and its subsequent amendments. The Older Michiganians Act (OMA) was enacted by the State of Michigan in 1981 to build upon the efforts of the aging network through State resources. The mission of Region IV AAA is "*Offering Choices for Independent Lives*" with a primary focus on individuals with the greatest economic and social needs and a vision through choice and range of services, every aging adult lives a quality life. This is achieved through advocacy, educating the community, coordinating services, and using available resources and funding for supportive services. The Region IV Area Agency on Aging Multi-Year Plan (MYP) for the period of October 1, 2019 through September 30, 2022 has set forth a plan to continue to provide and improve upon a comprehensive coordinated system of services to assist aging adults in maintaining independence in their homes and communities.

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

The current demographic information, used for the MYP, was provided by the U.S. Census, American Fact Finder. The data indicated, as compared to the prior MYP 60+ population: 8.2% increase in the 60+ ; 4.2% increase in the 85+; 15% increase in the number living alone; minority population experienced a decrease in the African American (6.91% vs. 7.37%) and an increase in the Hispanic (1.80% vs. 1.50%) race; population at or below poverty level experienced a decrease to 8.67% from 9.73%.

The unmet needs of the aforementioned population were identified through a variety of resources such as the AAA's Information & Assistance data system, partner meetings, client satisfaction surveys, and social networking.

The most prominent unmet needs continue to be transportation and in-home services which align with the prior MYP. As individuals age, services that enable them to continue to live independently in their community and homes tend to be the first services they search for.

The number of older adults continues to increase dramatically as the baby boomers move into retirement age and will continue for the next ten years. As this population increases, the need for family members to step into the role of caregivers will also increase. These two circumstances present an opportunity for Region IV AAA to continue to be creative in meeting the needs of the older adults and caregivers while staying focused on quality and person-centeredness.

**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.**

**Direct Services (provided by Region IV AAA):**

Care Management

Case Coordination & Support

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Options Counseling  
Information & Assistance  
Disease Prevention/Health Promotion  
Creating Confident Caregivers®  
Long-Term Care Ombudsman/Elder Abuse Prevention  
Respite Care (Senior Companion Program)  
Kinship Support Services (Grandparents Raising Grandchildren)

**Purchased/Contracted Locally**

Adult Day Services  
Assistive Technology & Devices  
Congregate Meals  
Chores  
Counseling Services  
Caregiver Education, Support, and Training  
Caregiver Supplemental Services  
Creating Confident Caregivers®  
Gap Filling  
Home Care Assistance  
Home Delivered Meals  
Home Injury Control/Home Repair  
Homemaking  
Legal Assistance  
Medication Management  
Nutritionist  
Personal Care  
Respite Care  
Transportation

Within the available services listed in the MYP, the service categories which are represented most by the funds provided by the Older Americans Act and Older Michiganians Act are as follows: Congregate and Home Delivered Meals, CM/CCS, Adult Day, Homemaker, Options Counseling, and Information & Assistance. It is anticipated that the following services will benefit the greatest number of participants: Congregate and Home Delivered Meals, Information & Assistance, Long-Term Care Ombudsman, Transportation, and Legal Assistance.

**4. Highlights of planned Program Development Objectives.**

1. Strengthen and expand access to supports and resources for family caregivers.
2. Continue to support and encourage independent living and successful aging of the older population.
3. Increase community awareness on the signs of abuse, neglect, and financial exploitation of older adults and how to report suspicious activity.
4. Continue to be innovative in meeting the needs of the ever-changing landscape of the older population while ensuring service provision remains effective and efficient.

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**5. A description of planned special projects and partnerships.**

Interagency Care Team (ICT)

The ICT project will focus on the implementation of payment models within scalable contracts to structurally link AAA HCBS expertise with physician needs to better serve and solve a range of home-based barriers to health care. This stems from a multi year ICT effort to bring care managers from varied providers, including AAA, together to collectively target and solve problems with the goal of creating a holistic approach for patients whose circumstances result in a high recurrent use of the hospital emergency department.

MI Health Link (MHL)

The MHL partnership with the two health plans and Region 3B has continued to evolve as a demonstration to integrate care for people dually eligible for Medicare and Medicaid. Interest and staff at the health plans have fluctuated considerably since the inception of the demonstration which has resulted in continued change and evolution of the contractual relationships involved. It remains unclear as to whether the MHL goal to provide seamless access to services and support through a person-centered care coordination model has been successful. The AAAs will continue to work closely with the two health plans involved.

Campus for Creative Aging

The AAA's efforts to laud age as a time of Purpose, Creativity, Growth and Learning will gain momentum as a virtual campus movement that promotes expanded educational offerings and connectivity in areas such as technology, volunteerism, health, retirement, financial planning, and enrichment. The hub emerged from the purchase of an additional building, adjacent to the AAA's main building, which will incorporate campus-branded kiosks throughout the sites of organizational partners within our PSA that range from established aging entities such as senior centers and councils on aging, to libraries, YMCA, and beyond. The kiosks will be the "key" to opening the doors to creativity and involvement.

Direct Care Workforce

The direct care workforce challenges voiced by AAA home care providers led to the intervention of funding by the AAA to create a Provider Employee Needs Fund. The fund is available to assist a direct care worker who is employed by a Region IV AAA (AAA) provider and experiencing a hardship which is preventing them from being able to meet the requirements of their position as a direct care worker; some examples are a car battery, tire, or cell phone minutes. The funds can also be used for a direct care worker who would benefit from the opportunity to receive additional job coaching; the coaching will be tailored to the specific needs of the worker. Expenditures and efforts will be tracked to report on trends and to determine feasibility of future sustainability.

Opioid Education

The AAA has initiated a partnership with the local Health Departments to provide opioid education. The efforts are being primarily targeted towards education in the home; more specifically, persons residing in senior housing complexes that do not provide substantial staff support. Initiated in FY2019, early work will inform the effort to carry out and continue the education and metrics to measure the success.

**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.**

The increase in Region IV AAA's funding streams and related service delivery products has created opportunity to implement efficiencies which will benefit the entire agency.

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The cross-department interdependences on information to successfully maintain all products, has created an opportunity for the agency to secure an outside consulting firm to review existing processes. The intent of this initiative is to identify areas of inefficiencies in data flow and service reporting in the existing process and obtain recommendations which can be implemented internally.

The agency is also looking at options to implement a learning management system to streamline the training needs of staff. The objective is to not only ensure all staff are in compliance with the insurance company requirements in preparation for audits, but they are receiving the training needed to continue to provide quality services.

As the agency continues to expand its services in the highly competitive health plan market, it has become apparent that Region IV AAA needs to demonstrate its commitment to quality and accountability by pursuing the National Committee of Quality Assurance (NCQA) accreditation.

**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.**

Non-formula resources are imperative to ensuring the services to the aging population are sustained and expanded as the need arises. All three counties within our region have a senior millage which is distributed through either a county or township level. These additional resources assist with supplementing services identified in the Plan as well as sustain services that are not funded under the Plan, such as senior centers.

The availability of the Custom Care program at the AAA is designed for consumers who are able to pay for their long term care needs. This program connects consumers to services and resources which has allowed individuals with the most social and economic needs to be served with the limited funding available.

The AAAs cost sharing/donation program has allowed the agency to serve more participants with the additional revenue by putting the income back into program services. The revenue has been very beneficial in providing additional funds for in-home services (especially homemaker and personal care) which is currently one of the largest unmet needs.

The AAA obtained Medicare certification to provide Medical Nutrition Therapy in late 2016 which has allowed the agency to create an additional revenue stream by partnering with local physicians to obtain referrals to provide the service.

The AAA's partnership with United Way has been instrumental in providing a sustainable source of funding to supplement numerous AAA programs. United Way provides 3-year funding agreement to the AAA for the impact areas of Health, Education, and Income. Programs supported are Foster Grandparent, Senior Companions, Computer Learning, and Personal Action Towards Health (PATH).

The AAA relies heavily on volunteers to successfully implement not only the Foster Grandparent program but also, Senior Companions, Computer Learning, MMAP, and various evidence-based programs.

**8. Highlights of strategic planning activities.**

Medical/Social Service Partnerships

Continue to work with local, state, and national partners to develop opportunities to create strategic linkages with health partners that build on AAA core competencies to better serve residents of SW Michigan through integrated

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health collaboration. This involves expanding Medicare lines of service focusing on: Medical Nutrition Therapy (MNT); Chronic Care Management; Transition of Care & related services. Work will also continue with existing contracts associated with MI Health Link and the potential to collaborate on additional services. The potential for new contracts will be explored with Medicare Advantage plans through 4AM and n4a initiatives. Also, the AAA will work to support MDHH's efforts to shift Nursing Facility Transition (NFT) services to a state plan service to maximize opportunities with the state's new fee-for-service structure.

Campus for Creative Aging

The campus represents a collaborative movement to build awareness of service programs while lauding age as a hallmark of creativity, purpose, growth, and learning through lifelong education that confronts isolation and ageism by igniting personal dreams, passion, or community service. The focus is to expand learning, volunteer, and service opportunities at AAA's campus while creating partnerships with collaborative entities to expand the visions and activities regionwide.

Maintenance and Expansion of Service and Educational Offerings

The AAA's mission of "Offering Choices for Independent Lives" is what continues to keep the agency focused on service refinement and expansion towards empowerment of the individual while engaging in education of community leaders, legislators, funders and policy makers on the impact of policy and law on individuals and the subsequent need for service options. Particular focus is on the expansion of evidence-based classes including, but not limited to, chronic disease self-management through a series of Personal Action Towards Health (PATH) classes, falls prevention through Matter of Balance, and caregiver support through Creating Confident Caregivers® and Powerful Tools for Caregivers classes. The Aging Mastery Program (AMP) core course and single course modules will also be offered. The AAA will continue its commitment to furthering public education and understanding of the impact of policy and law on one's ability to live independently; this will manifest through partnerships at the local, state, and national level.

**FY 2021 AREA PLAN GRANT BUDGET**

Agency: Region IV, Area Agency on Aging, Inc  
 PSA: 4

Budget Period: 10/01/20 to 09/30/21  
 Date: 05/07/20

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**SERVICES SUMMARY**

FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	336,428		336,428
2. Fed. Title III-C1 (Congregate)		415,088	415,088
3. State Congregate Nutrition		7,542	7,542
4. Federal Title III-C2 (HDM)		215,922	215,922
5. State Home Delivered Meals		376,944	376,944
8. Fed. Title III-D (Prev. Health)	24,938		24,938
9. Federal Title III-E (NFCSP)	152,722		152,722
10. Federal Title VII-A	7,624		7,624
10. Federal Title VII-EAP	5,108		5,108
11. State Access	22,511		22,511
12. State In-Home	401,348		401,348
13. State Alternative Care	88,664		88,664
14. State Care Management	215,913		215,913
15. St. ANS	35,104		35,104
16. St. N ursing Home Ombs (NH-O)	18,004		18,004
17. Local Match			
a. Cash	608,021	31,672	639,693
b. In-Kind	137,362	111,420	248,782
18. State Respite Care (Escheat)	45,451		45,451
19. MATF	94,149		94,149
19. St. CG Support	11,616		11,616
20. TCM/Medicaid & MSO	9,264		9,264
21. NSIP			
22. Program Income	56,900	183,842	240,742
<b>TOTAL:</b>	<b>2,271,127</b>	<b>1,342,430</b>	<b>3,613,557</b>

**ADMINISTRATION**

Revenues	Local Cash	Local In-Kind	Total
Federal Administration	125,220	9,163	145,316
State Administration	21,644		21,644
MATF Administration	9,311		9,311
St. CG Support Administration	1,149		1,149
Other Admin			
<b>Total AIP Admin:</b>	<b>157,324</b>	<b>9,163</b>	<b>177,420</b>

Expenditures	FTEs
1. Salaries/Wages	2.00
2. Fringe Benefits	34,034
3. Office Operations	47,809
<b>Total:</b>	<b>177,420</b>

Cash Match Detail		In-Kind Match Detail	
Source	Amount	Source	Amount
Custom Care	9,163	Board Travel/Time	7,183
		Advisory Travel/Time	3,750
<b>Total:</b>	<b>9,163</b>	<b>Total:</b>	<b>10,933</b>

I certify that I am authorized to sign on behalf of the Area Agency on Aging. This budget represents necessary costs for implementation of the Area Plan. Adequate documentation and records will be maintained to support required program expenditures.

Signature 

Title CFO

Date 05/08/20



Operating Standards for AAAs

Agency: Region IV Area Agency on Agi

FY 2021 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL

Budget Period: 10/1/2020 to 09/30/21

Date: 03/07/20

Rev. No.: 0

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Op	Service Category	Title III-B	Title III-D	Title III - E	Title VIII-EAF	Title VII-A OMB	State Access	State In-Home	St. Alt. Care	State Care Mgmt	State NHO	St. ANS	St. Respite (Escheat)	MATF	St. CG Supp	Unallocated MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
A	Access Services																			
A-1	Care Management																			
A-2	Case Coord/Supp	50,000		55,000			22,511										40,000			11,995
A-3	Disaster Advocacy & Outreach Program							7,945				17,552					200			16,118
A-4	Information & Assis	80,000		22,000								17,552								13,283
A-5	Outreach																	800		6,421
A-6	Transportation	65,000															12,500			11,995
A-7	Options Counseling																			11,995
B	In-Home																			
B-1	Chore	1,838																		204
B-2	Home Care Assis																			518
B-3	Home Injury/Cntl	3,651																		21,876
B-4	Homemaking							175,199	21,690											4,811
B-6	Home Health Aide																			8,389
B-7	Medication Mgt	1,300							42,000											4,811
B-8	Personal Care																			1,344
B-9	Assistive Device&Tech	4,283						63,956	5,377											8,389
B-10	Respite Care	24,592						7,945	4,575								900			13,443
B-11	Friendly Reassurance	3,000						148,347	4,575				11,387							14,789
C-10	Legal Assistance	25,000																		3,333
C	Community Services																	92,400		2,778
C-1	Adult Day Services								15,022								3,000			3,000
C-2	Dementia ADC																			690,851
C-6	Disease Prevent/Health Promotion		24,938	29,322														300		62,844
C-7	Health Screening																			
C-8	Assist to Hearing Impaired & Deaf Only																			
C-9	Home Repair	1,000																		2,000
C-11	LTC Ombudsman	4,000				7,524					18,004									4,321
C-12	ST-Clr Operations																			
C-13	ST-Clr Staffing																			
C-14	Vision Services																			
C-15	Prevent of Elder Abuse, Neglect, Exploitation				5,108															5,108
C-16	Counseling Services																			
C-17	Carel. Cont. Omb. CCC			13,400																1,489
C-18	Caregiver Support Services			7,000																7,778
C-19	Kniship Support Services			10,000																1,111
C-20	Caregiver E.S.T.			16,000																1,778
*C-8	Program Develop	65,285																		7,254
	Region Specific																			
	GAP Filing Services	7,499																		833
	a																			
	b																			
	c																			
	d																			
Sp 06	7. CLPADRC Services													9,311	1,149					9,311
Sp 06	8. MATF Adm																			
Sp 06	9. ST CG Supp Adm																			
	SUPPRT SERV TOTAL	336,428	24,938	152,722	5,108	7,524	22,511	401,348	88,654	215,913	18,004	35,104	45,451	103,450	12,755	9,264	55,900	608,021	137,362	2,281,587

Planned Services Summary Page for FY 2021			PSA: 4		
Service	Budgeted Funds	Percent of the Total	Method of Provision		
			Purchased	Contract	Direct
<b>ACCESS SERVICES</b>					
Care Management	\$ 159,952	4.41%			x
Case Coordination & Support	\$ 161,381	4.45%			x
Disaster Advocacy & Outreach Program	\$ -	0.00%			
Information & Assistance	\$ 132,835	3.67%			x
Outreach	\$ -	0.00%			
Transportation	\$ 84,721	2.34%		x	
Option Counseling	\$ 119,952	3.31%			x
<b>IN-HOME SERVICES</b>					
Chore	\$ 2,042	0.06%	x		
Home Care Assistance	\$ -	0.00%			
Home Injury Control	\$ 4,179	0.12%	x		
Homemaking	\$ 218,765	6.04%	x		
Home Delivered Meals	\$ 753,859	20.80%	x	x	
Home Health Aide	\$ -	0.00%			
Medication Management	\$ 48,111	1.33%	x	x	
Personal Care	\$ 83,702	2.31%	x		
Personal Emergency Response System	\$ 13,443	0.37%	x		
Respite Care	\$ 233,090	6.43%	x	x	x
Friendly Reassurance	\$ 3,333	0.09%			x
<b>COMMUNITY SERVICES</b>					
Adult Day Services	\$ 680,851	18.79%	x	x	
Dementia Adult Day Care	\$ -	0.00%			
Congregate Meals	\$ 575,954	15.89%		x	
Nutrition Counseling	\$ -	0.00%			
Nutrition Education	\$ -	0.00%			
Disease Prevention/Health Promotion	\$ 62,844	1.73%		x	x
Health Screening	\$ -	0.00%			
Assistance to the Hearing Impaired & Deaf	\$ -	0.00%			
Home Repair	\$ 1,000	0.03%	x		
Legal Assistance	\$ 80,178	2.21%		x	
Long Term Care Ombudsman/Advocacy	\$ 43,213	1.19%			x
Senior Center Operations	\$ -	0.00%			
Senior Center Staffing	\$ -	0.00%			
Vision Services	\$ -	0.00%			
Programs for Prevention of Elder Abuse,	\$ 5,108	0.14%			x
Counseling Services	\$ -	0.00%			
Creating Confident Caregivers® (CCC)	\$ 14,889	0.41%		x	x
Caregiver Supplemental Services	\$ 7,778	0.21%	x		
Kinship Support Services	\$ 11,111	0.31%			x
Caregiver Education, Support, & Training	\$ 17,778	0.49%		x	
AAA RD/Nutritionist	\$ 12,617	0.35%	x		
<b>PROGRAM DEVELOPMENT</b>	\$ 72,539	2.00%			x
<b>REGION-SPECIFIC</b>					
GAP Filling Services	\$ 8,332	0.23%	x		
b.	\$ -	0.00%			
c.	\$ -	0.00%			
d.	\$ -	0.00%			
<b>CLP/ADRC SERVICES</b>	\$ -	0.00%			
<b>SUBTOTAL SERVICES</b>	\$ 3,613,557				
<b>MATF &amp; ST CG ADMINISTRATION</b>	\$ 10,460	0.29%			
<b>TOTAL PERCENT</b>		100.00%	38.97%	38.27%	22.75%
<b>TOTAL FUNDING</b>	\$ 3,624,017		\$1,412,203	\$1,386,940	\$824,541

Note: Rounding variances may occur between the Budgeted Funds column total and the Total Funding under the Method of Provision columns due to percentages in the formula. Rounding variances of + or (-) \$1 are not considered material.