

**FISCAL YEAR (FY) 2025
ANNUAL IMPLEMENTATION PLAN (AIP)
DRAFT**

Boxed Sections include responses from Agency to the Bureau of Aging, Community Living and Supports per instructions provided to Agency.

COUNTY/LOCAL UNIT OF GOVERNMENT NOTIFICATION

The Michigan Department of Health and Human Services (MDHHS) recognizes the importance of local collaboration including consultation of the complete AIP for each AAA with their county/local unit of government to encourage and foster collaboration between Older Americans Act (OAA) programming and that provided by other non OAA resources.

The Area Agency on Aging (AAA) must send a notification of the complete AIP to the chairperson of each County Board of Commissioners. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation, no later than June 21, 2024. For a Planning and Service Area (PSA) comprised of a single county or portion of the county, notification of the AIP is to be sent to each local unit of government. The AAA must notify their Bureau of Aging, Community Living, and Supports (ACLS Bureau) Field Representative by July 22, 2024, of any comments or feedback received from their county/local unit of government. If no comments or feedback were received, please indicate that in your response. AAAs are encouraged to provide a copy of their official press release for public hearing to their county/local unit of government as well.

The AAA may use electronic communication, including email and website-based documents, as an option for local government notification and consultation of the AIP. To employ this option, the AAA must do the following:

- Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft AIP on the AAA's website. Instructions for how to view and print the document must be included.
- Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via email, if requested.
- Be available to discuss the AIP with local government officials, if requested.
- Request email notification from the local unit of government of their feedback of the AIP or their related concerns.

Instructions

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate county and/or local units of government to gain support.

Upon completion of the plan, the plan will be sent to each county board of commissioners in the planning and service area (PSA).

TRIBAL NOTIFICATION

The MDHHS has an established relationship of working directly with the Federally Recognized Sovereign Indian Tribes of Michigan (Tribes). As part of this work, MDHHS recognizes the importance of Tribal notification including consultation of the complete AIP for each AAA within their PSA to encourage and foster collaboration between Title III and Title VI programming as outlined in the OAA.

Send an official notification of your complete AIP for any Tribe(s) within your PSA for their review and consultation. If there are no Tribes within the PSA, please indicate that in your response and if a Tribe crosses more than one PSA, each AAA is still expected to send their AIP. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation, no later than June 21, 2024. The AAA will notify their ACLS Bureau Field Representative by July 22, 2024, of any comments or feedback received from their Tribe(s). If no comments or feedback received, please indicate that in your response.

The AAA may use electronic communication, including email and website-based documents, as an option for Tribe notification and consultation of the AIP. To employ this option, the AAA must do the following:

- Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the Chairperson of the Tribal Council advising them of the availability of the final draft AIP on the AAA's website. Instructions for how to view and print the document must be included.
- Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via email, if requested.
- Be available to discuss the AIP with Tribal elders and/or Tribal officials, if requested.
- Request email notification from the Tribe of their comments and feedback of the AIP or their related concerns.

Instructions

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate Tribe(s) within your PSA for notification and consultation. Describe any current and future collaborative efforts with Tribe(s) within your PSA including any anticipated outreach efforts. Note whether your Policy and Advisory Boards have representation from the Tribe(s) and/or elders within your PSA. If not, describe the AAA's efforts to build and foster relationships with the Tribe(s) to encourage potential representation on these respective boards.

AgeWays does not have any Federally Recognized Tribes in the PSA, with no representation on policy or advisory boards.

AgeWays has shared information about the plan with Southeastern Michigan Indian Inc. (SEMI), a non-profit local leader and Urban Indian center providing human services and public service announcements for American Indians & others eligible for services.

EXECUTIVE SUMMARY

Include a summary that describes the AAA and the implementation plan including a brief description of the PSA (to include older adults in greatest economic need, minority, and/or non-English speaking), the AAA's mission, and primary focus for FY 2025.

Instructions

Please include in the Executive Summary a brief description of the following:

- A. The PSA and any significant new priorities, plans, or objectives set by the AAA for the use of (OAA) and state funding during FY 2025. If there are no new activities

or changes, note that in your response.

In January 2024, the Area Agency on Aging 1-B updated our agency name to AgeWays Nonprofit Senior Services. We believe AgeWays Nonprofit Senior Services reflects what we do best: Giving older adults the programs, services, and supports they need to age the way they choose.

While our name has changed, our programs, people, and dedication to supporting older adults, adults with disabilities, and family caregivers remain the same. The structure of our organization has not changed. We will continue our role as the Area Agency on Aging serving Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties. We will continue to lead the way and pave the way for seniors in our region — just as we have for the last 50 years.

AgeWays received approval to add Care Transition Services through a FY 2024 AIP amendment. AgeWays will continue development and growth of this program in FY 2025. This is a service to provide proactive discharge planning to older adults to prevent re-institutionalization by providing coaching, education, post-discharge coordination, and 30-day follow-up/monitoring. Screening will occur to ensure that older adults with higher care needs and greatest economic need are being served, while verifying we are not duplicating services under Medicaid or other available programs. Strategic partnerships with hospitals and skilled nursing facilities will be targeted to make the greatest impact in our service region with the intention of expansion throughout our region to support safe transitions and decrease hospital readmissions.

- B. Describe how the AAA educates the public, its partners, and service providers on the Administration for Community Living (ACL) and the ACLS Bureau expectations regarding targeting older adults in the greatest social and/or economic need including populations that have been historically underserved.

Contracted service providers are required to identify and target at least one underserved/target population to be served each fiscal year. Targeting plan documents are submitted annually and reviewed/approved by AgeWays staff. Providers have the ability and are encouraged to assist participants from different cultural, language, and religious backgrounds to access and provide services in a way that respects these diverse backgrounds.

Providers are required to report targeting data quarterly to AgeWays for review and to ensure targeting goals are being met and/or identify if technical assistance is needed. AgeWays staff monitor targeting plans and quarterly reporting forms to measure progress towards this goal.

AgeWays continues to educate the public, our partners, and service providers on the requirements outlined in the Older Americans Act, which states that the services provided under this act are intended to target adults 60 and older who are in greatest social and economic need, with attention to lower-income older adults, members of minority communities, those living in rural areas, people with limited English proficiency, and older adults at risk of institutional care.

AgeWays uses many methods to educate the public and service providers on available programs and services, including:

AgeWays website:

- We publish new content regularly, including content specific to underserved populations such as LGBTQ+ older adults.
- We use search engine optimization (SEO) tools to help people looking for services and programs, like those provided via ACL funding, connect to us.
- We use Google adwords to help older adults and family caregivers connect to us when searching for relevant keywords.

Presentations and events:

- We target low-income populations and facilities where low-income older adults reside.

Publication and distribution of Connect:

- The second edition of *Connect* contained robust information on programs and services offered via ACLS funding and was distributed to over 19,000 individuals, senior centers, libraries, and health care professionals and facilities.

Monthly email newsletters:

- Sent to over 2,500 subscribers monthly, the newsletter contains information and resources for family caregivers and includes information on ACLS programs and services.

Monthly email to available email professional lists

- These emails highlight ACLS-supported programs and services

Monthly content shared by senior centers in the region

- AgeWays provides content on ACLS-supported programs and services that senior centers can include in their newsletters and publications.

Advertising

- Advertising is often targeted to minority audiences and publications serving lower-income communities.

Media Outreach

- AgeWays participates in content partnerships with local newspapers and provides monthly content focused on ACLS-supported programs and services. We also work with local media outlets to build awareness of ACLS programs and services.

C. Current information about contingency planning for potential reduced federal funding (if plans include the pursuit of alternative funding, identify specific funding sources).

In the event of any circumstance where authorization to spend is reduced or suspended, AgeWays shall focus on ensuring that the health and welfare of the most vulnerable adults are protected as well as prioritization on the need to maintain critical operations. The following considerations are made:

- Service utilization, waitlists, recent funding increases or decreases, and/or alternative funding sources including grant funding will be considered before determining any reductions.
- Services will be reduced or eliminated based on our FY 2023-2025 Service Prioritization survey, a community survey conducted in November 2021. Priority services are: Home Safety (Home Injury Control), Public Education about Resources, and In-Home Services (Transportation, Personal Emergency Response, In-Home Respite and Homemaking).⁴

- Operationally, AgeWays shall retain a workforce that ensures critical operations are delivered.

D. A description of progress made through advocacy efforts to date and focus of advocacy efforts in FY 2025.

In FY 24, AgeWays continued to work on the advocacy priorities laid out in the 2023-2024 legislative platform, which included advocating for the Long Term Care Ombudsman Program, MI Choice and rebalancing Medicaid expenditures, supporting ACLS Bureau in-home services, and supporting increased caregiver funding.

At the end of FY23, AgeWays staff and Advisory Council members developed advocacy materials to support the funding request of a minimum \$3 million increase to support 33 new full-time Long Term Care Ombudsmen statewide to achieve the recommended ration of 1 ombudsman for every 2,000 beds. AgeWays is working with advocates from other AAAs as well as AARP, the Alzheimer's Association, and the State Long Term Care Ombudsman to address the needs of this program. AgeWays will continue to advocate for support to this program in FY25.

The Advocate newsletter continues to be published monthly. This publication provides information to subscribers regarding local, state, and federal advocacy including analysis of relevant proposed bills. The Advocate also highlights advocacy priorities and any legislative actions needed by supporters. The Advocate mailing list has grown by 50 subscribers so far in FY24.

AgeWays continues to provide leadership to the statewide Silver Key Coalition, which is focused on addressing unmet needs for Bureau of Aging, Community Living, and Supports (ACLS) in-home services. The Coalition requested a \$7 million increase for senior in-home services and a \$1 million increase for Home-Delivered Meals in the ACLS Bureau FY 2025 budget.

In FY25, AgeWays will continue to advocate in support of the MI Choice Medicaid Waiver Program, work to address the direct care workforce shortage by advancing policies that attract and retain workers, support reoccurring funding for the development and implementation of a Caregiver Resource Center model to support family and informal caregivers, and advocate for additional funding to properly staff the Long Term Care Ombudsman program.

AgeWays advocacy staff have continued to build relationships with state legislators to increase awareness of our agency and the supports and services offered to older adults and will continue to meet frequently with legislators and staff in FY25. AgeWays has been consulted by several offices to provide input on proposed legislation and how it may impact those we serve and will continue to form those relationships with state legislators to be seen as the point person for aging-related questions. AgeWays also frequently attends legislator's Senior Town Halls and will continue to do so in FY25.

AgeWays, working alongside the Area Agencies on Aging Association of Michigan, is continuing to discuss with legislators the importance of including reoccurring Family Caregiver Resource Center funding in the FY 25 state budget.

AgeWays is continuing to work to find innovative solutions to addressing the needs of the MI Choice Medicaid Waiver Program including ways to address Medicaid spend down and to increase the asset limit for participants.

E. A brief description of AAA's successes over the past year and any anticipated challenges for FY 2025.

AgeWays' Successes:

- Awarded \$386,000 to support the expansion of the Long Term Care Ombudsman program in a 2-year grant from the Michigan Health Endowment Fund. With this funding AgeWays added three program staff in January 2024, doubling the available support for the residents in long term care facilities.
- AgeWays has grown our in-home service program enrollment, serving an additional 81 older adults so far in FY 2024.
- AgeWays implemented quarterly contacts to support older adults on the waitlist. During these quarterly contacts we review the older adult's needs, ongoing desire for services, and identify if needs are being met through a new source since the last update. These contacts allow AgeWays to closely monitor the status of older adults on our waiting list and make updates to their waitlist priority to ensure older adults with the highest level of need are served first. With this effort, AgeWays has reduced our waitlist by 61%.
- As the agency continues to increase our offerings to support our community, we have expanded our direct service program offerings to include Adaptive Wellness and Care Transitions. The Adaptive Wellness program provides assistive devices and technology to older adults increasing their independence and ability to remain safe in their home, as well as address social isolation in older adults expressing loneliness. This program is an expansion of our use of the Assistive Devices and Technology service standard. The Care Transitions Programs is anticipated to launch in the summer of 2024. The goal of the program is to provide proactive discharge planning to older adults to prevent re-institutionalization. As these two programs continue to develop, we anticipate positively impacting the lives of additional older adults in our service region, who may otherwise not access AgeWays ACLS services.
- AgeWays has implemented 3 new wellness/caregiver programs:
 1. Trualta – a platform to support family caregivers
 2. Eat Smart, Move More, Weigh Less – a 15 week online weight management program
 3. Care Partners Passage through Dementia
- American Rescue Plan (ARP) funding continued to be available in FY24. Contracted service providers requested needed funds to upgrade and replace old equipment and other supplies to support and expand program operations.
- AgeWays staff has appreciated the opportunity to participate and provide feedback in the ACLS Bureau meetings to update Operating Standards. The changes reflect a better representation of current activities and allowable tasks to help meet the needs of older adults in the communities we serve.
- AgeWays has rebranded – identifying a new name that will help it better connect with those in the community that need it most.
- The second edition of the Connect information and resource guide was published. This guide provides comprehensive information on programs, services, and resources available to older adults and family/informal caregivers.

- \$1,361,575 was awarded to support the development of Family Caregiver Resource Center services.
- AgeWays has added the Gtranslate translation tool to the AgeWays website. This tool provides instant translation of our entire website in 10 languages, making information on programs and services more accessible to non-English speakers.
- AgeWays' programs and services were featured in three television news stories, an episode of American Black Journal, and features from the New York & Michigan Solutions Journalism Collaborative.
- Advocacy efforts were successful in building momentum for additional funding to support the Long Term Care Ombudsman program. AgeWays has been able to form a strong group of advocates interested in the topic and arm them with the information they need to advocate.

Challenges for AgeWays:

- There are still technical concerns that impact workflows with the Electronic Medical Record (EMR) implemented in FY 2023.
- The largest challenge impacting AgeWays programs continues to be the direct care workforce shortage. AgeWays has increased our service reimbursement rates and continue to support our direct service providers as well as family caregivers, attempting to address this barrier.
- Updating the service operating standards has meant some changes to reporting requirements (e.g. NAPIS). We anticipate the need to provide continued technical assistance with our contracted service providers to ensure accurate reporting.
- Successful advocacy to address the reimbursement rate inequity between the MI Choice Medicaid Waiver program and institutional settings will continue to be a challenge in FY 2025. AgeWays hopes that new strategies to address Medicaid spend down and the asset limit will be supported by the state legislature.

PUBLIC HEARINGS

At least one public hearing on the FY 2025 AIP must be held in the PSA. Hearing(s) must be made accessible to all. Persons need not be present at the hearing(s) to provide testimony. E-mail and written testimony must be accepted for at least a 30-day period beginning when the summary of the AIP is made available.

The AAA must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the 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; as well as news sources geared toward communities of color, tribal, Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+); immigrant communities and/or other underrepresented groups; presentation on the AAA's website, along with communication via email and social media referring to the notice; press releases and public service announcements; and a notice to AAA partners, service provider agencies, older adult organizations, and local units of government. *See Operating Standards for AAAs,* ⁷

Section B-2 #3. The public hearing notice should be available at least 30 days in advance of the scheduled hearing. This notice must indicate the availability of a summary of the AIP at least 14 days prior to the hearing, along with information on how to obtain the summary. All components of the AIP should be available for the public hearing(s).

Instructions

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 emails received) as a PDF and upload on this tab.

In addition, the AAA should also upload into AMPS a copy of your official notice and/or press release(s) for a public hearing. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and any impacts on the AIP. Describe how the AAA factored the accessibility issues of the service population and others in choosing the format of the meeting.

For FY 2025, please describe how the agency involved the Policy and Advisory Boards with encouraging and promoting participation at the public hearings(s). Did a representative from either the Policy and/or Advisory Boards attend the hearing(s)?

The FY 2025 Public Hearing is scheduled for 5/17/24 at 12pm via Zoom. Full Summary to be available 5/3/24 to be posted on the website. 30 day comment period: 5/3/24-6/3/24

REGIONAL SERVICE DEFINITIONS

If the AAA 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 in this section.

Instructions

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

N/A

ACCESS SERVICES

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Transition Coordination & Support; Care Management; Case Coordination and Support; Options Counseling; Disaster Advocacy and Outreach Programs; Information and Assistance; Outreach, with specific attention to outreach with underserved populations; and Merit Award Trust Fund/State Caregiver Support-funded transportation. If the AAA is planning to provide any of the above noted access services directly during FY 2025, complete this section.

Instructions

Select from the list of access services those services the AAA plans to provide directly during FY 2025, and provide the information requested. Specify, in the appropriate text box for each service category, the planned goals and activities that will be undertaken to provide the service.

FY 2023 Care management Timeline: 10/1/2024-9/30/2025

FY 2025 Plan Update (list new goals/activities with associated outcomes):

CM1: Utilize the Service Coordination Continuum to move participants from the Community Living Program or the Community Living Program waitlist into the Care Management program as they are determined to need this level of services and supports coordination. Provide Care Management services to eligible MI Choice participants whose Medicaid becomes temporarily inactive.

Expected Outcome: Older adults at the greatest risk for unnecessary nursing home placement or hospitalization will receive Aging, Community Living and Supports (ACLS) funded Care Management services.

CM2: Review the wait list prioritization processes, advocating with the state, to assure wait list best practices align with the state's objectives.

Expected outcome: Older adults with the highest level of need who are requesting in-home and other ACLS Bureau-funded services will receive them faster.

CM3: Conduct at least four trainings for Care Management supports coordinators on topics such as diversity, equity, and inclusion (DEI), current practice guidelines, elder abuse, and caregiver resources. All new staff will complete person-centered thinking online training within their first year of hire.

Expected outcome: Care Management supports coordinators will keep their knowledge and skill levels current to the agency and state priorities and models of provision of care to participants.

Total of Federal Dollars: \$477,240

Total of State Dollars: \$292,552

Number of client pre-screenings:

Current FY 2024: 27

Planned FY 2025: 175

Number of initial client assessments:

Current FY 2024: 17

Planned FY 2025: 150

Number of initial client care plans:

Current FY 2024: 17

Planned FY 2025: 150

Total number of Clients (carry over plus new):

Current FY 2024: 159

Planned FY 2025: 250

Staff to client ratio (active and maintenance per full time care manager)

Current FY 2024: 50

Planned FY 2025: 50

Case Coordination and Support Timeline: 10/1/2024-9/30/2025

FY 2025 Plan Update (list new goals/activities with associated outcomes):

CCS1: Review the wait list prioritization processes, advocating with the state, to assure wait list best practices align with the state's objectives.

Expected outcome: Older adults with the highest level of need who are requesting in-home and other ACLS Bureau-funded services will receive them faster.

CCS2: Conduct at least four trainings for Community Living Program supports coordinators on topics such as diversity, equity, and inclusion (DEI), current practice guidelines, elder abuse, and caregiver resources. All new staff will complete person-centered thinking online training within their first year of hire.

Expected outcome: Community Living Program supports coordinators will keep their knowledge and skill levels current to the agency and state priorities and models of provision of care to participants

Total of Federal Dollars: \$307,561

Total of State Dollars:\$730,558

Care Transition Coordination and Support Timeline: 6/1/2024: - 9/30/2025

FY2025 Plan Update

Goal: Establish partnerships with medical care institutions to identify and refer older adults who may benefit from care transitions support.

Expected Outcome: Older adults receiving care transitions support will have improved health outcomes and experience lower levels of re-institutionalization.

Total of Federal Dollars:\$0

Total of State Dollars: \$198,000

Number of client pre-screenings:

Current FY 2024 0; Goal: 10

Planned FY 2025 250

Number of initial client assessments:

Current FY 2024 0; Goal: 10

Planned FY 2025 200

Number of initial client care plans:

Current FY 2024 0; Goal: 10

Planned FY 2025 200

Total number of Clients (carry over plus new):

Current FY 2024 0; Goal: 10

Planned FY 2025 200

Staff to client ratio (active and maintenance per full time care manager)

Current FY 2024 10

Planned FY 2025 25

FY 24 Information and Assistance

FY 2025 Plan Update (list new goals/activities with associated outcomes):

Goal: Reduce the barriers to accessing programs and services by providing additional support to and follow up with higher-risk older adults and family caregivers.

Expected outcomes: An increase in the percentage of higher risk older adults and family caregivers who connect with local programs and services.

Total of Federal Dollars: \$811,110

Total of State Dollars\$149,464

FY 24 Outreach

FY 2025 Plan Update (list new goals/activities with associated outcomes):

Goal: Launch a new edition of the Connect Resource guide to support community referral partners, older adults, and family caregivers.

Expected outcomes: Community referral partners, older adults and family caregivers will be more knowledgeable about available programs and resources.

Total of Federal Dollars: \$861,871

Total of State Dollars: \$72,627

FY 24 Options Counseling

FY 2025 Plan Update (list new goals/activities with associated outcomes):

Goal: Increase the number of older adults and family caregivers receiving unbiased, person-centered Options Counseling.

Expected Outcome: A 5% annual increase, year or year, for three years of the number of older adults and family caregivers who receive Options Counseling through AgeWays.

Total of Federal Dollars: \$48,935

Total of State Dollars: \$10,000

PLANNED SERVICE ARRAY

Complete the FY 2025 AIP Planned Service Array form for your PSA. Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

PLANNED SERVICE ARRAY NARRATIVE

Describe the AAA's rationale/strategy for selecting the services funded under the AIP in contrast to services funded by other resources within the PSA, especially for services not available PSA-wide.

Instructions

Use the provided text box to detail the Planned Service Array narrative.

AgeWays determines the services funded by analyzing: 1) input from local and regional stakeholders, including AgeWays program participants, service providers, Board of Directors members, Advisory Council members, advocacy groups, county commissioners, and human service collaborative bodies; 2) program participants' demand for services; 3) call center data; 4) regional, state and national data on aging services, program needs, and waitlists; 5) impact of services on health and medical outcomes; 6) availability of services throughout the region; and 7) direct feedback from community members at local community listening sessions and through an online service prioritization survey. Two out of six counties and several municipalities in Region 1-B have a senior millage that support services in their area, allowing a more comprehensive array of services available in the areas supported by senior millage funding. We work closely with our partners at the local level to ensure the funding is utilized to provide the highest priority services.

DIRECT SERVICE REQUEST

This section applies only if the AAA 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, community, and nutrition services will be provided under contracts with community-based service providers, but when appropriate, AAAs can request to provide these services directly. Direct service provision requests must be approved by the Commission on Services to the Aging (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 AAA may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the AAA’s administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

Instructions

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for any **new** Direct Service Request for FY 2025. 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 2025 are to be included under the Direct Service Budget 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 on the Support Services Detail page.

Please skip this section if the AAA is not submitting a **new request** to provide an in-home, community, or nutrition service directly during FY 2025.

N/A

REGIONAL DIRECT SERVICE REQUEST

This section applies only if the AAA is submitting a **new request** to provide a regional service directly that was not previously approved in the multi-year planning cycle.

It is expected that regionally defined services, as identified in the category above, will be provided under contract with community-based service providers, but when appropriate, a regional service provision request may be approved by the CSA to be provided directly. The basis for requesting direct provision of a regional direct service by the AAA would be if, in the judgment of the ACLS Bureau: A) provision is necessary to assure an adequate supply; B) the service is directly related to the AAA’s administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

Instructions

AAAs that have a **new request** to provide a regional service directly must complete this tab for each service category. Enter the regional service name in the box and click “Add.” The regional service name will appear in the dialog box on the left after the screen refreshes. Select the link for the newly added regional direct service and enter the information requested pertaining to basis, justification, and public hearing discussion for any new regional direct service request for FY 2025. Also specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service.

Regional Direct Service Budget details for FY 2025 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.

N/A

APPROVED MYP GOALS AND OBJECTIVES

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

Instructions

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

For the Diversity, Equity, and Inclusion (DEI) objective, the ACLS Bureau Operating Standards for AAAs have long required that preference be given to serving older persons in greatest social or economic need with particular attention to low-income minority elderly.

Please refer to Operating Standards for AAAs sections C-2 and C-4 along with the Document Library for the ACLS Bureau training completed on Embedding Diversity, Equity & Inclusion (DEI) within Aging Services across Michigan for the MYP Cycle.

Within the progress tab, ensure to address, at a minimum, the below Program Development Objectives:

- Objective 1- Increase services provided to veterans, Black, Indigenous (tribal), and People of Color (BIPOC), and LGBTQ+ seniors served in your region. Please share progress made from FY 2023 through FY 2024 on this objective including any data that the AAA has collected and/or tracked that supports efforts to outreach and/or serve more BIPOC and LGBTQ+ seniors within the PSA.

New for FY 2025 AIP, AAAs please describe current methods of outreach and/or targeting of older adults who have served in the U.S. military and ways the AAA could potentially increase services and coordination for veterans and their spouses within the planning service areas.

- Objective 2- Increase the number of AAA staff, providers, caregivers, and volunteers trained in implicit bias, cultural competencies, and root causes of racism. Please describe how the AAA ensures cultural competency trainings reflect the demographics of the seniors residing within the PSA and how the AAA evaluates how staff, providers, caregivers, and volunteers apply this training.
- Objective 3- Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve. Please include the top 3 requested linguistic translation services for your PSA. How does the AAA ensure staff are trained to identify a possible linguistic translation need of a senior, caregiver, and/or family member?

A. Develop resources to support aging service program growth.

A1. Implement the AAA 1-B Advocacy Strategy to secure increased state, federal, and/or local support for older adult services, including support for the direct care workforce.

Timeline: 10/01/2022 to 09/30/2025

Departments: Research

Expected outcomes:

1. Increased appropriations and new policies and programs will be realized, which will enhance the

lives of older adults, adults with disabilities and their family caregivers.

Mid FY24 Update:

In FY 24, AgeWays continues to work on the advocacy priorities laid out in the 2023-2024 legislative platform. The platform includes information about sixteen priority advocacy issues for the agency, including increased funding for the Long Term Care Ombudsman Program, rebalancing Michigan's long term care spending, support for ACLS Bureau in-home services, and support for the direct care workforce.

AgeWays is continuing to advocate for a at least a \$3 million funding increase for 33 new full-time Long Term Care Ombudsmen statewide, which would allow Michigan to achieve the recommended minimum 1 ombudsman for every 2,000 facility beds. AgeWays is working with advocates from other AAAs as well as AARP, the Alzheimer's Association, and the State Long Term Care Ombudsman to address the needs of this program. AgeWays has been successful in meeting with key legislators on both the Senate and House HHS Appropriations committee to share the need to support this program.

AgeWays continues to publish The Advocate newsletter monthly which informs subscribers on local, state, and federal advocacy including analysis of relevant proposed bills.

AgeWays continues to provide leadership to the statewide Silver Key Coalition, which is focused on addressing unmet needs for Bureau of Aging, Community Living, and Supports (ACLS) in-home services. The Coalition requested a \$7 million increase for senior in-home services and a \$1 million increase for Home-Delivered Meals in the ACLS Bureau FY 2025 budget.

AgeWays, working alongside the Area Agencies on Aging Association of Michigan, is continuing to discuss with legislators the importance of including reoccurring Caregiver Resource Center funding in the FY 25 state budget.

AgeWays continues to work to find innovative solutions to address the needs of the MI Choice Medicaid Waiver Program including ways to address Medicaid spend down and to increase the asset limit for participants. AgeWays has begun having discussions with interested legislators on raising the asset limit.

So far in FY 24, AgeWays has met with 20 State Representatives, 9 State Senators, and 5 Members of Congress from 1-B's PSA to share AgeWays' advocacy priorities.

A2. Increase AAA 1-B capacity to secure additional funding resources.

Timeline: 10/01/2022 to 09/30/2025

Departments: Communications, Research

Expected Outcomes:

1. The AAA 1-B will expend increased amounts of donated funds for older adult services.

Mid FY24 Update:

For the second year, AF Group donated \$10,000 to Holiday Meals on Wheels; increasing total donations by 15% and providing over 1,428 meals for vulnerable, homebound seniors. We will continue our work to strengthen the donor relationship with AF Group with the hopes of securing ongoing funding for the Holiday Meals on Wheels Program.

AgeWays has been awarded two grants from the Michigan Health Endowment Fund. The first was awarded in FY 23 in partnered with Ralph C. Wilson, Jr. Foundation to create a Family Caregiver Respite Voucher Program for \$327,783. This program provides access to short-term respite care for informal and family caregivers of older adults. Family caregivers enrolled

into the program can purchase respite care from someone in their known network using this respite voucher. Through our partnership with Carelinx, our care platform for this grant, they are also able to search for a professional caregiver if needed.

In a second grant awarded grant by the Michigan Health Endowment fund, \$386,188 will support our Long Term Care Ombudsman Expansion Pilot program. This grant will allow for the 1-B region to pilot the targeted standard of 1 ombudsman to every 2,000 long term care facility beds in select areas of the region.

The Michigan Department of Health and Human Services has also granted AgeWays \$1,361,575 for the development of a Caregiver Resource Center. This funding will enable family caregivers living with a home delivered meal participant to receive a meal, provide short term out of home respite options, support marketing campaigns to target family caregivers, fund a caregiver event to be hosted in September of 2024, as well as providing subcontracts to support local caregiver programs and events.

AgeWays receives grants funded by the Office of Global Michigan to address the needs of Older adult Refugees. This fiscal year total grant funding increased to \$254,361. United Community Family Services, also known as the Chaldean American Ladies of Charity, has partnered with AgeWays to provide access to community services and resources for older refugees.

B. Expand access to and awareness of aging services.

B1. Increase the awareness of first responders on how the Area Agency on Aging 1-B can help older adults and family caregivers.

Timeline: 10/01/2022 to 09/30/2025

Departments: Communications

Expected Outcomes:

1. To increase the number of referrals made by first responders to older adults and /or family members to the Agency.

Mid FY24 Update:

While the agency has made some progress toward this goal, other priorities have limited our work with first responders. AgeWays staff were able to connect with first responders from several municipalities at community events and share information about the agency and its programs and resources. The agency also mailed collateral to first responders as part of larger collateral mailings connected to rebranding. This mailing resulted in connection with the Rochester Hills Fire Department and participation in a senior-services networking group formed by that fire department in February 2024.

B2. Develop additional resources for caregivers which will improve their confidence and ability to care for their loved one

Timeline: 10/01/2022 to 09/30/2025

Departments: CSI, Communications, Research

Expected Outcomes:

1. Caregivers will gain practical knowledge that increases their capacity to provide quality care and prevent burnout.
2. Communities will enact systems change that supports family caregivers.
3. An increase in the percentage of higher risk older adults and family caregivers who connect with local programs and services.

Mid FY24 Update:

AgeWays has partnered with Trualta, a web-based platform which provides family caregivers with access to skills-based training, support groups, and an online community to help manage care for the loved ones they are caring for. AgeWays began offering the resource to

caregivers in the fall of 2023 and has since served 88 family caregivers.

Additional education and support is offered to caregivers to help bring awareness around how to help individuals living with dementia and how to help improve caregiver confidence, self-care, and caregiving skills. This is done through educational programs such as Powerful Tools for Caregivers, Care Partners Passage Through Dementia, Dementia Friends, and Dementia Live.

With additional funding available, AgeWays is working with contract meal providers to offer home delivered meals to caregivers residing with a home delivered meal recipient. The goal is to increase caregivers' capacity to provide care to their loved ones which can help reduce the risk of caregiver burnout. This program will be available to caregivers until the end of the current fiscal year.

AgeWays launched the caregiver respite voucher program in October 2023. This innovative program is specifically tailored to support informal and family caregivers of older adults by granting them access to short-term respite care services. In the fiscal year 2024, the program has already garnered significant attention, receiving 145 referrals, of which 75 are currently active participants. This program is supported by the Michigan Health Endowment Fund and Ralph C Wilson Jr Foundation.

The Caregiver Coaching Program offers mentorship and support to family caregivers by matching them with compassionate and trained volunteers who provide one-to-one guidance. In FY 24, the program added three new coaches and eight new caregivers. Through personalized mentorship and ongoing support, the Caregiver Coaching Program equips caregivers with knowledge, skills, and emotional resilience necessary to navigate the challenges of caregiving effectively.

AgeWays has developed and distributed caregiver-specific content and publications to help caregivers gain practical knowledge, increase their capacity to provide quality care, prevent burnout, and connect with resources. These included:

- Production and distribution of new edition of *Connect* Information and Resource Guide
- Production and distribution of our *CareHub* electronic newsletter

Connect

AgeWays produced an updated edition of the *Connect Information and Resource Guide* in March of 2023. The update included many articles focused on helping family caregivers. Articles specific to caregiving included:

- Articles on the full breadth of programs and services available to family caregivers our service region — both through AgeWays and through other community organizations (PACE, etc.)
- A complete section dedicated to caregiving
- Articles on legal documents important to family caregivers
- A comprehensive listing of community resources for caregivers in each of the six counties we serve

Connect was widely distributed to family caregivers in our six-county region via partnerships with libraries, city and county governments, senior centers, health care providers, and other entities who interact often with seniors and family caregivers.

The guide was also available for electronic download and viewing on the AgeWays website.

CareHub Caregiver e-newsletter

The agency continued production of our CareHub Caregiver electronic newsletter. The newsletter has a subscription and monthly distribution of almost 2,500. Caregiver-specific

content highlights include:

- January 2023: Caregiver Resource List
- February 2023: Respite Care Resources (Different Types — pros, cons and helpful tips for each)
- March 2023: Protecting Your Loved Ones from Scams and Fraud
- April 2023: Unique Resources for Family Caregivers

Content Partnerships:

We continued our content partnerships with the *Macomb Daily/Oakland Press* and developed monthly content that helped both older adults and family caregivers understand resources. The content has a distribution of 135,000/month.

C. Modernize programs and services to enable older adults to age in place.

C1. Implement IT System improvements to increase efficiency in providing programs and services

Timeline: 10/01/2022 to 09/30/2025

Departments: IT

Expected Outcomes:

1. Improve the quality and quantity of data collection and extraction to anticipate current and future resource needs.
2. Improve the quality and accuracy of assessment documentation captured to improve participant health outcomes.
3. Improve staff efficiency in providing ACLS Bureau services.

Mid FY24 Update:

Updates and improvements continue to be made to our Electronic Medical Record (EMR), particularly in the areas of documentation and reporting. Efficiencies will continue to increase as reports become more robust and staff grow more proficient in the use of the system.

C2. Ensure high risk older adults have access to supportive services

Timeline: 10/01/2022 to 09/30/2025

Departments: CSI, Clinical, VNM

Expected Outcomes:

1. Older adults with the highest level of need who are requesting in-home and other ACLS Bureau-funded services will receive them faster.
2. Older adults and caregivers experiencing social isolation will receive increased support, resulting in lower levels of social isolation.

Mid FY24 Update:

Since 10/1/2022, AgeWays has reduced our waitlist for all ACLS programs by 61% and increased program enrollment by 302.

During FY 2023 AgeWays expanded our direct service program offerings to include the Family Respite Program. The goal of this program is to provide support/respite to family caregivers as well as increase the companionship and socialization opportunities to participants. Family caregivers and participants in the Family Respite Program can receive in-home respite, services in an Adult Day Facility, or in an Out of Home Respite site.

Ageways expanded access to the IndePendant Program. The goal of the program is to provide older adults who are at risk of falls a PERS for a year. The PERS will reduce the risk/occurrence of falls, the capability to call for immediate assistance in the event of a fall, and increase older adult safety at home. After a year, the older adult may choose to continue their PERS at a discounted rate with their provider. **When funding allows, PERS may be extended an additional year.*

FY2024 AgeWays is launching two additional direct service programs, Adaptive Wellness and Care Transition programs. The Adaptive Wellness program provides assistive devices and technology to older adults increasing their independence and ability to remain safe in their home, as well as address social isolation in older adults expressing loneliness. The Care Transitions Programs is anticipated to launch summer of 2024. The goal of the program is to provide proactive discharge planning to older adults to prevent re-institutionalization.

In FY24 AgeWays staff implemented quarterly contacts to older adults on the waitlist. During these quarterly contacts we review the older adult's needs, on-going desire for services, and identify if needs are being met through a new source since the last update. These contacts allow AgeWays to closely monitor the status of older adults on our waiting list and make updates to their waitlist priority to ensure older adults with the highest level of need are served first.

By increasing caregiver rates and continuously adding new providers to the DSP pool, Provider Network Management has been able to ensure that services are provided to all who need them. Priority service request lists are sent to providers at least once a week, and Network Management is in constant contact with providers, helping to ensure that services are provided in a timely and appropriate manner.

AgeWays continues to offer both virtual and in-person evidence-based programs and education for older adults and caregivers throughout the region. Virtual options are available to individuals who cannot leave or need in-home programming. AgeWays continues to offer tablets for use of virtual programs and provide tech support as needed.

AgeWays partners with several venues to offer in-person programs throughout the region, on various days and times, in order to accommodate the needs of participants.

D. Improve the Accessibility of Services to Michigan's Communities and People of Color, Immigrants and LGBTQ+ Individuals.

D1. Ensure staff at the AAA 1-B and subcontracting agencies is knowledgeable about DEI and unconscious bias.

Timeline: 10/01/2022 to 09/30/2025

Departments: Human Resources, CSI, Clinical, Communications

Expected Outcomes:

1. Increased utilization of both direct and contracted services by minority caregivers /older adults.

Mid FY24 Update:

In FY2024, AgeWays began offering a program called Care Partners Passage Through Dementia, which is a culturally sensitive program focusing on the unique needs of each caregiver with a special emphasis on African American caregivers and the importance of being culturally sensitive to concerns in communities of color. Outcomes from this program show that this program helps to address the mistrust that exists in African American communities toward medical systems and research. Promotional efforts have been made by AgeWays to target African American caregivers for the utilization this program.

2. Describe how the Agency ensures cultural competency trainings reflect the demographics of the seniors in the area and how the agency evaluates how staff, providers, caregivers, and volunteers apply this training.

Mid FY24 Update:

All staff attend annual cultural competency training sponsored by AgeWays through evidence-

based training opportunities. Following this training, a survey will be sent to staff to evaluate how this training will be applied to their work.

AgeWays offered the opportunity for contracted providers to attend a webinar through SAGE, one of the ACL-funded national Minority Aging Technical Assistance and Resource Centers, for their webinar titled “Planning for Lifelong Care for Transgender and Non-binary People. The webinar provided information that any gender-diverse person can use to identify their values and goals concerning dementia, gender identity, and gender expression, which can then be used in an advanced directive.

3. How does the agency ensure staff are trained to identify a possible linguistic translation need of a senior, caregiver, and/or family member?

Mid FY24 Update:

At multiple touch points; intake, enrollment, assessment, and monitoring, staff have been trained to inquire about an applicant or participant’s primary language. If an individual speaks a language other than English as their primary language, staff facilitate use of the language line to ensure the most person-centered approach to care. By using the language line, staff empower individuals to participate in communicating their own care needs, rather than relying on a friend or loved one to communicate for them related to their care and wishes.

Information and assistance staff receive training on how to identify if a caller may need translation assistance, and how to use the Language Line to determine the appropriate language, if required. The Language Line will then have a translator join a three-way call between the caller, the AgeWays staff person and the translator.

D2. Provide outreach and education to minority and underserved populations to increase access to understanding what services and programs are available through the AAA 1-B.

Timeline: 10/01/2022 to 09/30/2025

Departments: Communications, Research, Clinical, CSI

Expected Outcomes:

1. Continue growth in the number of minority older adults and/or family caregivers who contact the AAA 1-B for information and assistance services.

Mid FY24 Update:

Many ACLS funded contractors focus targeting efforts on minority older adults and/or family caregivers when providing services within the community, often achieved by working with local taskforces and are attending health fairs in an effort to reach those underserved populations. Providers are required to report targeting data quarterly to AgeWays for review and to ensure targeting goals are being met and/or identify if technical assistance is needed.

The agency continued outreach to minority and underserved populations with the goal of increasing awareness and access.

Targeted presentations/events to minority audiences, including:

- Majestic Roots – largely Nigerian immigrant audience received an overview of programs and services
- Delta Sigma Theta – African American sorority
- Participation in Transgender Michigan Health Fair

Advertisements/media placements in minority-focused publications/media:

- The agency executed a multi-media campaign in the *Michigan Chronicle* from August - October 2023. The campaign included: two print ads, digital ads, editorial content, sponsored social content, and six email blasts on specific programs. The *Michigan Chronicle* covers the interests of the African American Community.

- The agency continued its strong relationship with *Urban Aging*, providing content on programs and services on a regular basis.
- Interviews on caregiving on *American Black Journal*, a highly rated, weekly television show on PBS Detroit.

Social media

AgeWays posted content targeted to minority and LGBTQ+ audiences across our social media channels, including strong content for Black History Month and Pride Month. Here is an example of a [video produced to highlight services and supports for LGBTQ+ older adults: https://www.facebook.com/agewaysmi/videos/1454420948716838](https://www.facebook.com/agewaysmi/videos/1454420948716838)

Addition of universal language translation tool to AgeWays.org website

Gtranslate tool was added to the AgeWays website in January 2024. The tool instantly translated the full site into 10 languages, making the site and information about programs and services accessible to non-English speakers.

Addition of staff pronouns to business cards and email signature lines

Business cards redesigned during the rebranding process now have the option for staff to add the pronouns by which they identify. The addition of these pronouns signal that the agency is a safe, welcoming, and affirming resource for members of the LGBTQ+ community. The option of adding identifying pronouns was also added to our redesigned email signature line.

Inclusion of diversity logos on our website and communications collateral

AgeWays includes the pride flag on our website footer and has included the “All Kinds of Diversity Embraced Here” logo on our four main marketing collateral pieces.

Inclusion of LGBTQ+ specific resources in our Connect publication and our online resource listings.

2. Provide any data that the agency has collected and/or tracked that shows increased efforts to reach BIPOC and LGBTQ+ seniors within the PSA.

Mid FY24 Update:

Some of our ACLS contracted service providers selected the goal of targeting LGBTQ older adults in their FY 2024 targeting plans, while others continued their focus on BIPOC communities. Providers reported serving LGBTQ participants in quarter 1 and will continue to outreach and market to these individuals throughout the fiscal year.

- Tracking of minority-focused presentation and event attendance: 170 individuals
- Engagement of minority-specific social media: 27 posts/ 6,755 impressions
- Estimated distribution of minority-focused advertising/media placement:
 - Michigan Chronicle
 - print: 120,000 x 2 = 240,000
 - digital: 4,5000 x 2 = 9,000
 - email blasts: 60,000 x 6 = 36,000
 - Urban Aging: 20,000 x 2 = 40,000
 - American Black Journal: Viewership unknown

There was a small increase in the number of LGBTQ callers based on data collected in the Information and Assistance program. This year to date there has been 6 callers who identified themselves as LGBTQ compared to 3 callers at this time last year.

3. Describe current methods of outreach and/or targeting of older adults who have served in the U.S. military and ways the agency could potentially increase services and coordination for veterans and their spouses.

Mid FY24 Update:

AgeWays contracts with two local VA organizations to serve U.S. military veterans with long term supports and services, and coordination of their care. AgeWays serves 50-55 veterans monthly in this program.

The agency includes information on veteran-specific services in our Connect Information and Resource Guide and in our online resource listings.

I&A staff screen callers for potential eligibility for Veteran Assistance programs and makes a referral to the local VA office if an individual may qualify for assistance through VA services. Below are the number of referrals made between Oct 1, 2023 and March 11, 2024:

At Risk/Homelessness Housing Related Programs: 11 referrals
Veterans Aid and Attendance: 81 referrals
Veterans Benefits Assistance: 52 referrals

4. Include data regarding the top 3 requested linguistic translation services for your PSA.
Mid FY24 Update:

The Language Line shows the following languages as the three most requested from Oct 1, 2023 to March 11, 2024 based on the number of requests for translation for that language:
Arabic: 57 requests
Spanish: 28 requests
Albanian: 9 requests

FY 2025 AIP COLLABORATION WITH STATE PLAN GOALS

Please provide information for any **new** goals and objectives that are proposed by the AAA during FY 2025.

Instructions

The AAA may enter a new goal in the appropriate text box.

AAAs, it is acceptable, though not required, if some of the AAA's goals correspond to the ACLS Bureau's State Plan Goals. There is an entry box to identify which, if any, State Plan Goal(s) correlate with the entered goal. See the Document Library for Michigan's State Plan on Aging for FY 2024 – FY 2026.

A narrative for each goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box.

Complete the information in the text boxes for the timeline, planned activities and expected outcomes for each objective (see Document Library for additional instructions on completing this section).

N/A

Budget documents that the AAA is required to complete and include with the AIP are listed in the Documents Library and identified with a **“Yes”** underneath the “Required Document” column. Please note that specific budget instructions for FY 2025 are included in the Document Library.

A FY 2025 Cost Allocation Plan Worksheet will be issued for your use in establishing your FY 2025 AIP budgets. Your FY 2025 area plan budget figures must be based on the amounts on the worksheet.

Download the AIP budget documents to your computer, complete the required information, and then upload them through this tab.

SUPPLEMENTAL DOCUMENTS

Other documents that the AAA is required to complete and include with the AIP are listed in the Documents Library and identified with a “Yes” underneath the “Required Document” column. You may upload these documents in either pdf or Excel format.

Documents to be uploaded include:

- A. Agency Staffing Document (Document Library in AMPS).
- B. [FY 2025 Evidence-Based Programs Document](#) (Document Library in AMPS).
- C. [Emergency](#) Management and Preparedness Document (Document Library in AMPS).
- D. Policy Board Membership (Document A in AMPS).
- E. Advisory Council Membership (Document B in AMPS).
- F. Copy of your official notice and/or press release(s) for the FY 2025 AIP public hearing(s).
- G. [Caregiver](#) Program List (Document Library in AMPS).

DOCUMENTS FOR SPECIAL APPROVAL

Select the supplemental document(s) from the list below only if applicable to the AAA’s FY 2025 AIP. Provide all requested information for each selected document. Note that older versions of these documents will not be accepted and should not be uploaded as separate documents.

- A. Proposal Selection Criteria - should only be completed if there are new or changed criteria for selecting providers (Document C in AMPS). N/A
- B. Cash-In-Lieu-Of-Commodity Agreement (Document D in AMPS). N/A
- C. Waiver of Minimum Percentage of a Priority Service Category (Document E in AMPS). N/A
- D. Request to Transfer Funds (Document F in AMPS). N/A

SIGNATURE PAGE

The FY 2025 AIP Signature Page must be signed by the AAA Director and the AAA Board Chairperson, saved as a pdf and uploaded through the Budget and Other Documents Tab.

- Upon completion of plan

AIP APPROVAL CRITERIA

The FY 2025 AIP Approval Criteria was approved by the CSA on December 15, 2023,

and issued in Transmittal Letter #2024-492.

- Upon completion and presentation of plan

FY 2025 AREA PLAN GRANT BUDGET

Rev. 2/23/24

Agency: Area Agency on Aging 1-B

Budget Period: 10/01/24 to 09/30/25

PSA: 0

Date: 04/01/24

Rev. No.: 0 Page 1of 3

SERVICES SUMMARY			
FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	2,931,738		2,931,738
2. Fed. Title III-C1 (Congregate)		3,876,401	3,876,401
3. State Congregate Nutrition		64,354	64,354
4. Federal Title III-C2 (HDM)		2,606,570	2,606,570
5. State Home Delivered Meals		3,193,208	3,193,208
8. Fed. Title III-D (Prev. Health)	222,059		222,059
9. Federal Title III-E (NFCSP)	1,427,108		1,427,108
10. Federal Title VII-A	34,320		34,320
10. Federal Title VII-EAP	43,739		43,739
11. State Access	192,091		192,091
12. State In-Home	5,081,207		5,081,207
13. State Alternative Care	751,100		751,100
14. State Care Management	863,653		863,653
15. St. ANS	299,547		299,547
16. St. Nursing Home Ombs (NHO)	73,035		73,035
17. Local Match			
a. Cash	110,000	-	110,000
b. In-Kind	1,219,774	1,267,365	2,487,139
18. State Respite Care (Escheat)	191,082		191,082
19. MATF	803,387		803,387
19. St. CG Support	99,123		99,123
20. TCM/Medicaid & MSO	27,308		27,308
21. NSIP		1,665,753	1,665,753
22. Program Income	50,000	-	50,000
TOTAL:	14,420,271	12,673,651	27,093,922

ADMINISTRATION				
Revenues		Local Cash	Local In-Kind	Total
Federal Administration	1,229,320	265,000	-	1,494,320
State Administration	213,501			213,501
MATF Administration	79,456	-	-	79,456
St. CG Support Administration	9,803	-	-	9,803
Other Admin				-
Total AIP Admin:	1,532,080	265,000	-	1,797,080

Expenditures		
	FTEs	
1. Salaries/Wages	26.00	1,300,000
2. Fringe Benefits		377,000
3. Office Operations		120,080
Total:		1,797,080

Cash Match Detail		In-Kind Match Detail	
Source	Amount	Source	Amount
1. Federal Admin	265,000	1. Federal Admin	-
2. Federal Admin	-	2. Federal Admin	-
3. Federal Admin	-	3. Federal Admin	-
MATF Administration Match	-	MATF Administration Match	-
St CG Support Match	-	St CG Support Match	-
	-		-
	-		-
Total:	265,000	Total:	-

This budget represents necessary costs for implementation of the Area Plan.
Adequate documentation and records will be maintained to support required program expenditures.

FY 2025 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL

Agency: Area Agency on Aging 1-B
 PSA: _____

Budget Period: 10/01/24 to 09/30/25
 Date: 04/01/24 Rev. No.: _____
 Rev. 2/23/24 page 2 of 3

Operating Standards For AAA's

Op Std	SERVICE CATEGORY	Title III-B	Title III-D	Title III-E	Title VII/EAP	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 Suppl	TCM-Medicaid MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
A Access Services																				
A-1	Care Management	283,740		193,500			10,000					259,096	123,546					65,000	31,654	966,536
A-2	Case Coordination/Support	257,561		50,000			10,000					594,557	126,001					45,000	70,346	1,153,465
A-3	Disaster Advocacy & Outreach Program																			-
A-4	Information & Assistance	331,793		479,317			124,464						25,000						106,730	1,067,304
A-5	Outreach	371,871		490,000			47,627						25,000						103,833	1,038,331
A-6	Transportation													30,670						30,670
A-7	Options Counseling	14,000		34,935								10,000							6,548	65,483
A-8	Care Transition Coordination and Support							198,000											22,000	220,000
B In-Home																				
B-1	Chore	394,730																	43,859	438,589
B-2	Home Care Assistance																			-
B-3	Home Injury Control	143,900		-															15,989	159,889
B-4	Homemaking							1,866,040	288,460									30,000	239,389	2,423,889
B-6	Home Health Aide																			-
B-7	Medication Management							7,330											814	8,144
B-8	Personal Care							1,310,134	325,366									20,000	181,722	1,837,222
B-9	Assistive Device & Technology							55,000	5,000										6,667	66,667
B-10	Respite Care							1,644,703	132,274				191,082		99,123				208,456	2,275,638
B-11	Friendly Reassurance																			-
C Community Services																				
C-1	Adult Day Services													772,717						772,717
C-6	Disease Prevention/Health Promotion		222,059	58,000															31,118	311,177
C-7	Health Screening																			-
C-8	Assistance to Hearing Impaired & Deaf Community	47,500																	5,278	52,778
C-9	Home Repair																			-
C-10	Legal Assistance	256,467																	28,496	284,963
C-11	LTC Ombudsman	197,568				34,320					73,035					27,308			33,101	365,332
C-12	Senior Center Operations																			-
C-13	Senior Center Staffing																			-
C-14	Vision Services																			-
C-15	Programs for Prevention of Elder Abuse, Neglect, Exploitation	46,261				43,739													5,140	95,140
C-16	Counseling Services																			-
C-18	Caregiver Supplement Services																			-
C-19	Kinship Support Services			71,356															7,928	79,284
C-21	Caregiver Education			50,000															5,556	55,556
C-22	Caregiver Training																			-
C-23	Caregiver Support Groups																			-
*C-8	Program Development	586,347																	65,150	651,497
Region Specific																				
a.																				-
b.																				-
c.																				-
d.																				-
e.																				-
f.																				-
Sp Co	8. MATF Adm													79,456						79,456
Sp Co	9. St CG Sup Adm														9,803					9,803
SUPPORT SERVICE TOTAL		2,931,738	222,059	1,427,108	43,739	34,320	192,091	5,081,207	751,100	863,653	73,035	299,547	191,082	882,843	108,926	27,308	50,000	110,000	1,219,774	14,509,530

FY 2025 NUTRITION / OMBUDSMAN / RESPITE / KINSHIP - PROGRAM BUDGET DETAIL

Rev. 2/23/24

Agency: Area Agency on Aging 1-B Budget Period: 10/01/24 to 9/30/25
 PSA: 0 Date: 04/01/24 Rev. Number 0

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FY 2025 AREA PLAN GRANT BUDGET - TITLE III-C NUTRITION SERVICES DETAIL

Op Std	SERVICE CATEGORY	Title III C-1	Title III C-2	State Congregate	State HDM	NSIP	Title III-E	Program Income	Cash Match	In-Kind Match	TOTAL
	Nutrition Services										
C-3	Congregate Meals	3,876,401		64,354		666,301				511,895	5,118,951
B-5	Home Delivered Meals		2,606,570		3,193,208	999,452				755,470	7,554,700
C-4	Nutrition Counseling										-
C-5	Nutrition Education										-
B-12	Carry-out Meal (COM)										-
	AAA RD/Nutritionist*										-
	Nutrition Services Total	3,876,401	2,606,570	64,354	3,193,208	1,665,753	-	-	-	1,267,365	12,673,651

*Registered Dietitian, Nutritionist or individual with comparable certification, as approved by AASA.

FY 2025 AREA PLAN GRANT BUDGET-TITLE VII LTC OMBUDSMAN DETAIL

Op Std	SERVICE CATEGORY	Title III-B	Title VII-A	Title VII-EAP	State NHO	MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
	LTC Ombudsman Ser									
C-11	LTC Ombudsman	197,568	34,320	-	73,035	27,308	-	-	33,101	365,332
C-15	Elder Abuse Prevention	46,261		43,739			-	-	5,140	95,140
	Region Specific	-	-	-			-	-	-	-
	LTC Ombudsman Ser Total	243,829	34,320	43,739	73,035	27,308	-	-	38,241	460,472

FY 2025 AREA PLAN GRANT BUDGET- RESPITE SERVICE DETAIL

Op Std	SERVICES PROVIDED AS A FORM OF RESPITE CARE	Title III-B	Title III-E	State Alt Care	State Escheats	State In-Home	Merit Award Trust Fund	Program Income	Cash/In-Kind Match	TOTAL
B-1	Chore									-
B-4	Homemaking									-
B-2	Home Care Assistance									-
B-6	Home Health Aide									-
B-10	Meal Preparation/HDM									-
B-8	Personal Care									-
	Respite Service Total	-	-	-	-	-	-	-	-	-

FY 2025 AREA PLAN GRANT BUDGET-TITLE E- KINSHIP SERVICES DETAIL

Op Std	SERVICE CATEGORY	Title III-B	Title III-E				Program Income	Cash Match	In-Kind Match	TOTAL
	Kinship Ser. Amounts Only									
C-18	Caregiver Sup. Services	-					-		-	-
C-19	Kinship Support Services	-	71,356				-	-	7,928	79,284
C-21	Caregiver Education	-					-	-	-	-
C-22	Caregiver Training	-					-	-	-	-
C-23	Caregiver Support Groups	-	-				-	-	-	-
	Kinship Services Total	-	71,356				-	-	7,928	79,284