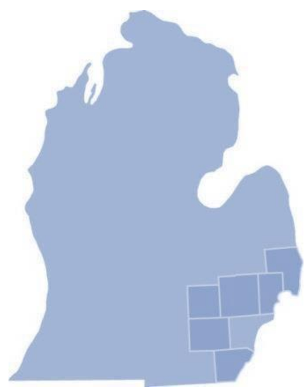
AGEWAYS NONPROFIT SENIOR SERVICES
REQUEST FOR PROPOSALS
FOR SOCIAL AND NUTRITION SERVICES
FISCAL YEARS 2027, 2028, AND 2029
(October 1, 2026 – September 30, 2029)



Mission

AgeWays Nonprofit Senior Services enhances the lives of older adults and adults with disabilities in the communities we serve

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INTRODUCTION

AgeWays Nonprofit Senior Services (AgeWays) is a non-profit agency that is responsible for services to more than 750,000 people aged 60 and older, in addition to adults with disabilities, and caregivers residing in Livingston, Macomb, Monroe, Oakland, St. Clair, and Washtenaw counties. AgeWays is dedicated to: 1) allocating federal and state funds for social and nutrition services through contracts awarded to local agencies on a competitive basis; 2) advocating key issues; 3) developing new programs; 4) coordinating activities with public and private agencies; and 5) assessing the needs of people with disabilities and older adults and linking them with needed community-based long-term care services. AgeWays prioritizes activities that allow older adults and adults with disabilities to maintain their independence with dignity and places an emphasis on assistance to frail, low-income, disadvantaged, and minority individuals.

AgeWays is part of a federal aging network for the Administration on Community Living (ACL) within the Department of Health and Human Services, as established by congressional action through the Older Americans Act of 1965, as amended.

The Older Americans Act (OAA) provides that each state is to be divided into planning and service areas (PSAs) and that an Area Agency on Aging is to be designated within each PSA. Area Agencies are a major component of the network of agencies intended to implement the provisions of Title III of the Older Americans Act, Grants for State and Community Programs on Aging. The general purpose is to concentrate resources to develop greater capacity and foster the development and implementation of comprehensive and coordinated service systems to serve older individuals.

Federal Older Americans Act (OAA) and State of Michigan funds are channeled through AgeWays for the provision of needed social and nutrition services to adults aged 60 and older. AgeWays allocates federal and state funds in two ways: 1) through contracts awarded to local agencies on a competitive basis; and 2) through Direct Service Purchase (DSP) vendor bid agreements where service is purchased on behalf of individual participants.

Title III of the Older Americans Act

Part A. General Provisions

Part B. Supportive Service and Senior Centers

Part C. Nutrition Services

- C-1. Congregate Meal Services
- C-2. Home Delivered Meal Services

Part D. Disease Prevention and Health Promotion

Part E. National Family Caregiver Support Program

This Request for Proposals (RFP) for Social and Nutrition Services Fiscal Years 2027, 2028, and 2029 contains a tentative schedule of RFP activities, application information and instructions, application review, award, denial process, pre-contract materials, reporting requirements, and annual assessment information. Contracts for services are awarded for a three-year period based on the availability of funding and funding decisions from the AgeWays Board of Directors. Specific funding amounts allocated for each service will be made available at the Applicant Workshop or by contacting the appropriate AgeWays Program Manager.

All applicants should refer to the AgeWays Nonprofit Senior Services and the Bureau of Aging, Community Living, and Supports Operating Standards Manual for Social and Nutrition Services Fiscal Years 2027, 2028, and 2029 for operating guidelines to be followed by organizations if a contract is awarded by AgeWays. This manual will be used to guide contract performance for contract fiscal years 2027-2029 and may be subject to change (i.e., receipt of transmittal letters from the Bureau of Aging, Community Living, and Supports (ACLS Bureau) indicating a policy or standards change). Potential applicants should not apply for services if the organization is unable to comply with the requirements in all sections of the Operating Standards Manual.

Public, private non-profits, private for-profits, and political subdivisions of the State of Michigan are eligible applicants for contracts. Contracts with private for-profit agencies require prior approval from ACLS Bureau via AgeWays. Such agencies are advised to contact AgeWays for more information.

There is a separate application process for agencies interested in applying for the Direct Service Purchase (DSP) vendor pool. Information on how to apply for the DSP vendor pool can be found on the website at www.ageways.org.

TENTATIVE SCHEDULE
FY2027 - 2029 REQUEST FOR PROPOSALS AND CONTRACT AWARDING ACTIVITIES

RFP Materials Available	March 17, 2026
Applicant Workshop, MANDATORY • All applicants are required to attend workshop to apply for funding • Information on applying for contracts will be presented • Applicants are encouraged to review the entire Request For Proposals Manual and Operating Standards Manual prior to attending the workshop	March 25, 2026
Application Submission Deadline • Applications are due no later than 5:00 p.m. on May 29, 2026	May 29, 2026
AgeWays Board of Directors' Action on Funding Decisions	July 31, 2026
FY 2027 – 2029 Award/Denial Letters Sent to Applicants	August 3 - 7, 2026
Pre-Contract Materials for Successful Applicants Due • Signed Acknowledgement Letter • Required Policies and Procedures • Certificate of Insurance • Revised Budget and Match Letter (if applicable) • Targeting Plan(s) • Business Associate Agreement • Other Documents	August 21, 2026
FY 2027 Contracts Sent to Contractors	August 31 – September 11, 2026
Signed Contracts Due to AgeWays for Final Signature	September 21, 2026
FY 2027 Contract Year Begins	October 1, 2026
Contractor Reporting Workshop, MANDATORY	TBD (Fall 2026)

APPLICATION INFORMATION AND INSTRUCTIONS

An organization submitting applications for multiple services funded through AgeWays Title III/State Funds must submit a separate application, budget, and required documents for each service. Please follow the instructions below to complete the application. Applications must be submitted electronically via the SmartSimple platform. An overview and instructions for utilizing the platform will be reviewed during the Applicant Workshop.

Organization Information

Applicants not currently contracting with AgeWays will need to register and create an organization profile in SmartSimple. This organization profile information will include the official name of the organization, the address, telephone number, website address, employer identification number, executive director/CEO information, corporate status, and contact information. Current AgeWays contractors will not be required to create a new organization profile in SmartSimple and will be able to access the funding opportunity through the platform upon logging in. Once logged in to the platform, both new and returning applicants will have the opportunity to apply for any of the contracted services. Each applicant must specify the service that is being applied for, the proposed service area (e.g., county(ies)/cities), proposed funding, proposed participants to be served, and proposed units to be served.

All applicants will be required to submit a copy of the Articles of Incorporation with their application. For organizations applying for multiple services, the Articles of Incorporation will need to be uploaded only once, but the applicant will be required to identify the application in which the Articles of Incorporation were submitted with all subsequent submissions.

Narrative: Briefly describe the following:

Organization History and Experience

Describe the organization's history and how it has evolved to meet the needs of the population to be served. Describe the organization's successful experiences, and qualifications for supporting the proposed service for older adults and/or caregivers.

Program Need

Describe how the program meets a specific need in the service area and why the organization is the most qualified to provide the service. For new applicants, describe the need in the community that has been identified and how the program/service will fulfill that need. For returning applicants, describe any recent program changes made to enhance the program and/or meet the needs of the population to be served.

Program Description

Identify how the program/service will uniquely benefit older adults and/or caregivers. Describe how the program will address the needs within the community(ies) to be served and how the proposed program will add value to the various stakeholders (older adults, caregivers, and taxpayers) served by the aging network. Describe how the organization plans to target services to older persons in greatest social or economic need with preference given to low-income minority elderly.

Program Implementation

Describe the person-centered procedures for the process of program implementation including referral activities, participant intake, and service delivery. Describe outreach efforts and how the program will be marketed to the target population to be served including low-income minority elderly.

Program Evaluation and Impact

Describe the criteria for evaluating service quality, and participant and/or caregiver satisfaction. Include the method of measurement, the specific measures, and outcome data. Describe how participant evaluations and/or outcome data has been used in the past and how outcome data will be used to enhance the program service delivery moving forward. Attach a sample of the program evaluation tools (e.g., participant/caregiver surveys) and recent outcome reports.

Staffing and Volunteers

Describe the following: program staff roles, number of full-time equivalent (FTE) and part-time employees, orientation and frequency of in-service trainings for staff, volunteers, and subcontractors. If applicable, include staff credentials, supervision, and staff to participant ratio. Include information about if, how, and when volunteers will be used to enhance and/or expand the program. Attach an organizational chart.

Technology

Describe how technology (e.g., systems, platforms) will be used to further support and/or enhance the service delivery operations. Describe how the use of technology has or will be used to enhance program performance and create efficiencies for service delivery. If applicable, describe how technology will be used to interact with participants. Identify any processes that will be used to ensure that the use of technology is user-friendly and person-centered.

Proposed Funding Rationale

State the proposed funding amount, participants, and units being applied for. For congregate meals and home delivered meals applicants, provide the proposed unit rate reimbursement. All applicants must provide rationale to support the proposed funding amount, participants, units, and unit rate as applicable. In addition, describe any additional resources or alternative funding that will be used to further support or enhance the program.

Letters of Support

Applicants are required to submit two (2) letters of support with their application. The first letter of support must come from a community partner organization. The letter should include a brief history of the partnership and how the partnership would enhance service delivery and participants to be served. The letter should be submitted on letterhead and signed by the partner organization and uploaded to the SmartSimple platform.

The second letter of support must come from a participant or caregiver who received service. The letter should include a description of how the service impacted and helped the individual maintain independence and dignity while aging in place in the community. The letter can be typed or handwritten by the participant/caregiver and must be uploaded to the SmartSimple platform.

Subcontract Request
Organizations may choose to subcontract services with another agency, however the request must be submitted in writing and approved by AgeWays. Applicants requesting subcontract must complete the AgeWays Subcontracting Request for Approval form and submit the form with the application for the services being rendered. This form can be found in the SmartSimple platform under the "narrative" tab.

Organizations that are approved for funding must provide services as stated under the approved AgeWays Annual Implementation Plan (AIP) through formal contractual agreements. Awarded applicants (contractors) must comply with applicable provisions of the Older Americans Act (OAA) and the regulations and policies pertaining there to; all other applicable federal laws and regulations, including applicable licensure requirements to policies of the Administration for Community Living (ACL), to the policies of the Michigan Department of Health & Human Services (MDHHS)/Bureau of Aging, Community Living, and Supports (ACLS Bureau), and to all other applicable state and local laws.

Policy Waiver
Organizations applying for funding are required to adhere to all applicable Michigan Department of Health & Human Services (MDHHS)/Bureau of Aging, Community Living, and Supports (ACLS Bureau) and AgeWays operating and service standards. If there is a standard that an organization is unable to comply with, a request for a waiver of any AgeWays standard must be submitted on the AgeWays Request for Waiver of Service Standard form to AgeWays with the application by the application due date. This form can be found in the SmartSimple platform under the "narrative" tab. At a minimum, requests for a waiver must include the following: 1) the specific AgeWays policy/standard for which the waiver is requested; 2) the reason(s) why the waiver is needed; and 3) the proposed date on which the waiver (if approved) would take effect. AgeWays will review the requested waiver and notify the applicant if the waiver request is approved or denied. No waiver of minimum insurance requirements will be granted.

Financial Management
The financial management section of the application includes questions to determine the financial processes of the applicant. The areas that are covered are:

- Financial Capacity & Stability
- Budgeting & Cost Allocation
- Accounting & Internal Controls
- Reporting & Compliance
- Risk Management & Oversight

Applying for federal funds comes with many requirements. Review the Code of Federal Regulations at https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200?toc=1

SOCIAL SERVICES BUDGET INSTRUCTIONS

Applicants are required to download the budget template in the budget documents tab of the application. The budget will open in excel can be completed and then uploaded into the budget drop box. Once the budget has been uploaded, select the "Save Draft" button and the completed budget will auto populate on the screen.

Complete a full, detailed budget of the proposed program. Include the amount of funding being requested, additional resources that will be invested to operate the program, the number of participants applicant proposes to serve, and the number of units of service applicant proposes to serve. Definition of units of service is found with each service definition. The budget will cover only one fiscal year, despite the award being granted for a three-year term. A new budget will be submitted prior to the start of each fiscal year in the term.

Budget Schedules: Cost Detail and Summary

There are three schedules that form the budget, the Direct Budget Cost Detail Schedule, the Indirect Budget Cost Detail Schedule, and the Budget Summary. The two Detail Schedules are designed to show the costs of the proposed program by line item. Totals of the two Detail Schedules will be automatically carried forward to the Budget Summary.

Follow these instructions to complete the two Cost Detail Schedules. Remember to prepare these schedules first; the totals will automatically transfer to the corresponding lines on the Budget Summary. On the top line of both Cost Detail Schedules, record the full legal name of the organization and service proposed. Use the formal name of the service as found in the service definition.

Only whole numbers should be used when filling in entries. The only time decimal places are used is transportation/mileage, and/or facilities/rent or utility rates.

Direct Budget Cost Detail Schedule

This schedule includes all costs directly associated with the delivery of the service.

Salaries and Wages:

Line a) Record the number of hours in the organization's work week.

Line b) Record each position involved in the program. Include all full-time and part-time employees, but do not include professional fees, contractual services, or personnel hired on a personal contract basis.

Line c) The full time equivalent (FTE) is figured by dividing the number of budgeted work hours per week by the hours in the standard work week. Example: Employee A is budgeted for 12 hours per week, and the standard work week is 40 hours. The full-time equivalent is 12/40 = 0.3 FTE.

Line d) Record the total salary/wages amount assigned to each position. If an employee functions in more than one program, the FTE and salary/wage lines must reflect the percentage that applies to this program only.

Employees may be grouped on one line if their roles are the same and their pay rate and hours of work are the same. If an employee is to be involved less than 52 weeks of the year, note that. Total the values at the bottom of the table. This sum, on line 5 will be automatically transferred to the Budget Summary, line 5.

Fringe Benefits:

This section will include the employer's contributions for insurance, retirement, unemployment, worker's compensation, FICA, and other similar benefit expenses for all full-time and part-time employees who work on the program. Enter the total dollar amount representing benefits paid to all staff attributed to this budget. This value will be automatically transferred to the Budget Summary, line 6. Calculate the percentage to total salaries by dividing the total amount of fringe benefits by the Salary and Wages total and multiply this figure by 100. Enter the value in the box in front of % sign.

Travel – Staff:

This item is for paid staff travel only. Any travel costs included in this item must be for conducting the program activities as described in the application. This includes cost for mileage, per diem, lodging, registration fees for approved conferences, and other approved travel costs incurred by employees. Travel of consultants is to be included under "Other" (Line 13 on direct expenditure detail tab). Record the total value on line 7. This value will be automatically transferred to the Budget Summary, line 7.

Supplies:

Supplies are items that are consumed or expended when used, or non-consumable items that cost less than $5,000 per unit. This includes items such as office, janitorial, or educational supplies.

Equipment:

Purchases of equipment over $10,000 require pre-approval from the ACLS Bureau and AgeWays. Maintenance contracts for equipment should be listed under "Service Contracts". Lease and rental of equipment should be listed under "Other".

Rent/Utilities:

Include the cost of rent and utilities used in the operation of the program. Facility renovations may be included upon AgeWays approval for Adult Day Service programs only. For rent, indicate the cost per square foot of space. For utilities, indicate the total cost per month for heat, electricity, and water. Convert these costs into annual figures and total the values on line 10. This value will be automatically transferred to the Budget Summary, line 10.

Communications:

Itemize telephone, postage, photocopying, and printing used in the operation of the program. Record the total value on line 11. This value will be automatically transferred to the Budget Summary, line 11.

Service Contracts:

Itemize all contracts for specific services such as equipment maintenance, janitorial services, etc., in which the applicant pays another organization for the provision of services. Record the total value on line 12. This value will be automatically transferred to the Budget Summary, on line 12.

Other:

Itemize costs not included in any of the previous categories. Examples include liability insurance, bonding, consulting fees, equipment rental/lease, volunteer travel, etc. record the total value on line 13. This value will be automatically transferred to the Budget Summary, line 13.

Indirect Budget Cost Detail Schedule

The Indirect Budget Cost Detail Schedule shall include only costs indirectly associated with the operations of the program. Follow the instructions above for the following sections: Salaries and Wages, Fringe Benefits, Travel – Staff, Supplies, Equipment, Rent/Utilities, Communications, Service Contracts, and Other. The total values of each section will automatically transfer to the indirect Cost section (lines 14 – 22) of the Budget Summary.

Local Cash Match and Local In-Kind Match

There are two additional sections on the Indirect Budget Cost Detail Schedule. Applicants are required to provide matching funds to support the program. They are called Local Cash Match and Local In-Kind Match. Cash match includes money that has been designated for the support of the service funded through AgeWays. Such cash funds cannot be federal funds, except in cases where clearance is allowed, such as General Revenue Sharing Funds.

In-Kind Match includes resources other than cash, which are used in providing the service. These may include but are not limited to donated rent and/or utilities; recorded hours of volunteers; and/or donated secretarial time. The value of in-kind donations should relate to actual costs, for example the per-hour value of the work done by a volunteer or the fair market value of donated office space.

Cash or In-Kind match is required for Older Americans Act (federal or state) funding. Applicant must obtain original documentation from the source(s) of local match contributions and attach the letter(s) to the application. The match amounts are determined by formula for each service category. The local match dollars may be cash, in-kind resources, or a combination of both.

Social Services Match Requirement: A minimum match ratio of 85% federal/state funding to 15% local match. To determine the match, divide the requested funding amount by 85% then multiply the result by 15%.

Tally the sum of both the Cash Match and In-Kind Match sections and report on lines 26b and 26c. These values will be automatically transferred to lines 26b and 26c of the Budget Summary.

Budget Summary

Follow these instructions to complete the Budget Summary. Much of the information will have been auto populated from the two Cost Detail Schedules, but there are a few lines that require information to be entered.

Line 1) Enter the Organization Name

Line 2) Use the dropdown to select the formal name of the service being applied for.

Line 3) Use the dropdown to select the fiscal year. The fiscal year period is from October 1 through September 30. The budget may be revised during the year, but each time it is revised, continue to use the original period on this line.

Line 4) Enter the date the budget is prepared. Each time the budget is revised within the period, record the revised preparation date.

Program Income/Voluntary Cost Share

Program Income/Voluntary Cost Share is the projected gross income received by the program that is directly generated by a supported activity or earned because of the grant agreement during the grant period. Program income includes, but is not limited to, income from contributions for services performed. Interest earned on federal or state funds is not program income.

Program Income/Voluntary Cost Share generated from federal/state-funded services must be used to enhance or increase service for the program in which it was received in the grant year that it was received. Failure to enhance or increase program services when program income/voluntary cost share is received more than the approved contract budget will result in the reduction of the federal/state share of the net allowable costs.

Considerations:

- Program Income/Voluntary Cost Share may not be budgeted or used for local match.
- Program Income/Voluntary Cost Share must be realistically estimated in the budget submitted to AgeWays prior to the beginning of a fiscal year.
- Actual Program Income/Voluntary Cost Share received will be reported on the monthly and quarterly report forms submitted to AgeWays for each program.
- If Program Income/Voluntary Cost Share is expected to exceed the budgeted amount, then the applicant must submit a Budget Change Request form (in the Post Award tab in SmartSimple) as soon as possible, and no later than July 10. The form must indicate how the additional program income has or will be used to increase or enhance services during the current fiscal year.

Line 25) Subtract line 24 form line 23 to determine Net Costs of the proposed program.

Line 26a) This line represents the federal/state funding requested from AgeWays. Enter the total amount of funding applicants are applying for.

Line 26b and 26c) This line will be auto populated from the Description of Matching Funds section of the Indirect Budget Cost Detail Schedule.

Line 27) Enter the Program Income/Voluntary Cost Share. This line will match line 24.

Line 28) This represents applicants' total budget for the proposed program. Add lines 26a, 26b, 26c, and 27. If the budget is calculated correctly line 28 will equal line 23. If the amounts on lines 23 and 28 do not match, an error in calculation has occurred and should be identified and corrected.

NUTRITION SERVICES BUDGET INSTRUCTIONS

Applicants are required to download the budget template in the budget documents tab of the application. The budget will open in excel can be completed and then uploaded into the budget drop box. Once the budget has been uploaded, select the "Save Draft" button and the completed budget will auto populate on the screen. The hyperlink in Smart Simple provides the budget template that must be used.

The estimated amount of federal/state funding is allocated by service region for the Congregate and Home Delivered Meal services and will be provided at the Applicant Workshop. Funding is allocated by a formula. Requests for federal/state funding greater than the amount allocated to the service area will not be considered.

Awards are based on unit rates; that is nutrition services contracts are based on a dollar amount funded per unit of service. Definition of units of service is found with each specific service definition. Unit rates are subject to negotiation prior to finalization of the contract. It is highly recommended that all additional resources that will be used to support the program be included in the budget. Not providing additional resources may put the applicant at a disadvantage when competitive unit rates are negotiated.

The budget must include proposed expenditure for one fiscal year. Budgets will be requested in subsequent fiscal years on an as needed basis. AgeWays will inform the applicant when an updated budget will be required.

If applying to provide both congregate and home delivered meal services, program costs shall be accurately allocated between the respective programs. At fiscal year-end, each program must be able to calculate the component cost of each meal provided according to the line-item categories on the budget.

Nutrition Services Budget Form

There are three tabs in the budget: 1) Summary, 2) Expenditure Schedule, and 3) General Expenditures. The expenditure schedule, and general expenditures will be automatically carried forward to the Summary tab.

Budgeted expenditure information must include all expenditures that will be made with the federal/state award, Nutrition Services Incentive Program (NSIP) funding, program income and required local match revenues. Expenditures that will be made from additional resources needed to operate the program should not be included on the summary page.

Pursuant to OMB Circular A-122 federal/state funding may not be used to reimburse grantees for the value of donated space and volunteer labor. The value of rented space and time may be included in the line items to the extent that they equal the required match amount. List donated values, exceeding the required match amounts, in the Additional Resources column on the full Congregate and Home Delivered Meal Program Budget form.

Follow the instructions below to complete the three Detail forms. Remember to prepare these forms first; the totals will automatically transfer to the corresponding lines on the Summary tab.

Only whole numbers should be used when filling in entries. The only time two decimal places are used is for unit rate, transportation/mileage, and/or facilities/rent or utility rates.

Detail Form: Expenditure Schedule

This form is to be completed first, for both Congregate and Home Delivered services. On the top line of all Detail forms, record the full legal name of the organization requesting funding. The service will auto update the summary and expenditure service line item once selected in the general expenditures tab.

Line 1 – Raw Food

Describe or name the production facility. Enter only the costs associated with raw food preparation in production facilities that are to be operated by the applicant. If all meal preparation is subcontracted to another organization, skip this section.

Line 2 – Purchased Meals

This category is used for all meals not prepared in the applicant's facility including subcontracted meal production. Name the provider(s) from whom applicant will purchase meals. Enter the type of meals each provider will provide for the program. Type of meals include Hot, Cold, Emergency/Shelf Stable. In the second and third columns, enter the number of meal units and the cost (unit rate) that will be paid for the meals.

Line 3 – Nutrition Supplement

If providing nutrition supplement products, enter the type of supplement (Ensure, Glucerna, Ensure Plus, etc.) and the number of cases that will be ordered. Enter the cost per case. Enter the number of units that will be served for each service and for each type of supplement. Do not add any additional costs to this line for delivery, handling, packaging, or National Aging Program Information System (NAPIS) tracking. All additional costs for serving a Nutrition Supplement should be contained in the appropriate line items on the subsequent detail pages.

The total units and cost for all three categories of Raw Food are automatically totaled and will be auto populated onto the summary page of the Home Delivered Meal Program Budget form.

General Expenditures

Line 4 & 5 – Direct Labor Salary and Direct Labor Fringe

Only those salaries and fringe benefits for employees whose job responsibilities directly support meal procurement and delivery should be included in this line item. Record the number of hours in the employee's work week, number of hours the organization is open for business. The full-time equivalent (FTE) is figured out by dividing the number of budgeted work hours per week by the hours in the standard work week. Example: Employee A is budgeted for 12 hours per week, and the standard work week is 40 hours. The full-time equivalent is 12/40 = 0.3 FTE.

Using the organizational chart that was provided with the application, enter the salaries and fringe that will be allocated to each service for applicant employees and volunteers listed. The fair market value of volunteer wages and fringe should only be included in this line item to the extent that those amounts are not greater than the required match. Use the OMB A-122 Cost Principles for non-profit agencies as a guide to calculating volunteer salaries. If volunteer labor is used as required match, attach a description, including position title and number of hours expected for all volunteers in the budget.

Applicants are required to track volunteer hours provided for purposes of match verification. Do not include contract employees/service provider salaries on this line.

Fringe amounts may include applicant's expenditures for FICA, health insurance, retirement, unemployment, and worker's compensation to the extent that the salaries are allocated above. The fringe line item will be reviewed for its reasonableness in relation to the salary amounts provided.

Volunteer labor and/or salaries paid by other sources (i.e., local millage dollars) are to be entered under additional resources.

Line 6 – Direct Kitchen Expenses

Enter only expenses that directly support meal procurement and delivery. Examples of direct kitchen expenses include supplies (i.e., paper plates, plasticware, etc.) and non-consumable items with a value of $5,000 or less. Items such as janitorial supplies and educational materials should be budgeted in the "Other" line item.

Line 7 – Transportation

Enter the costs associated with regular vehicle maintenance and fuel for meal delivery only. Costs may include mileage reimbursement paid to delivery drivers, direct fuel costs for delivery vehicles, and routine vehicle maintenance for delivery vehicles. If vehicles are used for activities other than the specified meals program, only apply allocated costs for the service.

Line 8 – Other

Enter costs not included on other lines. Costs may include:

- Staff travel for conducting service activities other than delivering meals
- Communications include telephone, internet, postage, copying, printing, etc.
- Insurance
- Lease agreements

If any items on this line exceed 10% of the Total Program Budget for either service, attach a detailed description of each cost.

Line 9 & 10 – Indirect Labor Salary and Indirect Labor Fringe

Enter only those salaries and fringe benefits for employees whose job responsibilities do NOT directly support meal procurement and delivery should be included in this section.

Line 11 – Facilities (Rent/Utilities)

Enter all rent and utility costs associated with the program. If space is donated, it only includes the value to the extent that it does not exceed the amount for the required match. All other donated space should be listed under Additional Resources on the summary tab. If donated space is to be used for required match, attach documentation that includes verification of square footage and fair market value per square foot.

Line 12 – Equipment

Purchases of equipment over $10,000 require pre-approval from the ACLS Bureau and AgeWays. Lease and rental of equipment should be listed under “Other” (Line 8).

Line 13 – Consultants

Enter all contract or consultant expenditures. This line should include costs for legal services, accounting services, and IT services.

If any items on this line exceed 10% of the Total Program Budget for either service, attach a detailed description of each cost, outlining the work to be performed and all associated fees, such as travel. The budget form will automatically indicate when the line is equal to or greater than 10% by changing the line from “13. Consultants” to “13. Consultants (submit justification)”.

Full Budget Form: Summary

Much of the information will have been auto populated from the expenditure schedule and general expenditures, but there are a few lines that require information to be entered. In Section I, General Information, enter the full legal name of the organization applying for funding. In the Grant Funding Column, enter the funding amounts provided to applicants at the Applicant Workshop.

The NSIP rate will be provided by AgeWays staff. Required Match amounts will automatically calculate based on the required ratio, as described below. The number of units proposed to be served, and the unit rate will be auto populated. Enter the number of participants proposed to be served with budgeted funding.

Local Match Requirement Policy – Nutrition Services

Applicants are required to provide matching funds to support the program. They are called Local Cash Match and Local In-Kind Match. Cash match includes money that has been designated for the support of the service funded through AgeWays. Such cash funds cannot be federal funds, except in cases where clearance is allowed, such as General Revenue Sharing Funds.

In-Kind Match includes resources other than cash, which are used in providing the service. These may include but are not limited to donated rent and/or utilities; recorded hours of volunteers; and/or donated secretarial time. The value of in-kind donations should relate to actual costs, for example the per-hour value of the work done by a volunteer or the fair market value of donated office space.

Cash or In-Kind match is required for Older Americans Act (federal or state) funding. Applicant must obtain original documentation from the source(s) of local match contributions and attach the letter(s) to the application. The match amounts are determined by formula for each service category. The local match dollars may be cash, in-kind resources, or a combination of both.

Match on the summary page will auto-populate once the grant funding is entered. The details of who or where the match is coming from can be spelled out specifically in the General Expenditures tab.

A minimum match ratio of 85% federal/state funding to 15% local match. To determine the match, divide the requested funding amount by 85% then multiply the result by 15%. Match is not required for Nutrition Services Incentive Program (NSIP) funding.

Additional Resources

If additional resources outside of the budgeted funding are invested to operate the program, list these resources and the value of such resources in Section II of the form.

Program Income/Voluntary Cost Share

Program Income/Voluntary Cost Share is the projected gross income received by the program that is directly generated by a supported activity or earned because of the grant agreement during the grant period. Program income includes, but is not limited to, income from contributions for services performed. Interest earned on federal or state funds is not program income.

Program Income/Voluntary Cost Share generated from federal/state-funded services must be used to enhance or increase service for the program in which it was received in the grant year that it was received.

Considerations:

- Program Income/Voluntary Cost Share may not be budgeted or used for local match.
- Program Income/Voluntary Cost Share must be realistically estimated in the budget submitted to AgeWays prior to the beginning of the fiscal year.
- Actual Program Income/Voluntary Cost Share received will be reported on the monthly fiscal report in SmartSimple for each program.
- If Program Income/Voluntary Cost Share is expected to exceed the budgeted amount, then the applicant must submit a Budget Change Request form as soon as possible, and no later than July 10. The form must indicate how the additional program income has or will be used to increase or enhance services during the current fiscal year.
- For applicants with current contracts, the program income information will be reviewed against year-end and monthly reports for accuracy.

The last line on this form, Federal/State Grant, will automatically calculate. Verify that this value is equal to the “Grant Total” in Section I. If the values are not equal, an error in calculation has occurred and must be identified and corrected before the budget is accepted.

NUTRITION SERVICES PROGRAM INFORMATION

These forms must be completed and submitted with the organization's application for Nutrition Services: Congregate Meals and Home Delivered Meals. Nutrition services forms can be found within the "nutrition services program information" tab on the SmartSimple platform. Instructions for completing the forms is outlined below.

Home Delivered Meal Applicants:

Food Specifications Worksheet
Complete this worksheet for all production kitchens and submit attachments as indicated. This information will be used to evaluate and compare ingredients, quality, and portion sizes. Indicate N/A for items that are not used and identify substitute products where applicable.

Menu Specifications and Nutrient Analysis Worksheet
Complete this worksheet for all production kitchens. This information will be used to evaluate a sample of the nutrient analysis and the applicants' ability to provide nutrient analysis, standardized recipes and menu planning.

Home Delivered Meals (HDM) Drop Site Only Worksheet
This worksheet is to be completed for each site where home delivered meals are received from a production kitchen, packed, and distributed to HDM recipients by the Applicant Agency.

Production Kitchen Information Worksheet
This worksheet is to be completed for each site where food is prepared by the Applicant Agency, whether at a central, satellite, subcontractor, or caterer kitchen.

Congregate Meals Applicants:

Congregate Meals Site Operations Worksheet
This worksheet is to be completed for each site where congregate meals are served by the Applicant Agency.

APPLICATION REVIEW, AWARD, AND DENIAL PROCESS

The following is an overview of the process used for contract activities:

Application Review Criteria

Applications will only be accepted from agencies that attend the Applicant Workshop, in person or via Zoom.

Applications must include all required documents and signatures, where appropriate, and must be submitted to AgeWays via SmartSimple no later than 5:00 p.m. on the application due date of May 29th, 2026. <u>Late applications will not be accepted.</u>

Any organization applying for more than one service funded through the AgeWays Title III/State

Funds must submit a separate application, budget, and required documents for each service.

Applications are reviewed based on the following criteria:

- Organization History and Experience
- Program Need
- Program Description
- Program Implementation
- Program Evaluation and Impact
- Staffing and Volunteers
- Technology
- Proposed Funding Rationale
- Budget
- Copy of Articles of Incorporation
- Other Relevant Information

Contracts will be awarded to organizations whose applications best meet the stated criteria, demonstrate cost effective delivery of quality services, show collaboration and coordination with partner agencies, and are responsive to older adults most in need.

Application Review Tool

Programmatic and fiscal application review tools are used to identify how well an application meets the criteria stated above.

Applications are reviewed by an Application Review Committee (ARC) consisting of members of the AgeWays Board of Directors, appointed by the Board's Chairperson, and AgeWays staff. The Chairperson may also invite members of the AgeWays Advisory Council to participate on the committee. Funding recommendations proposed by the ARC must be approved by the AgeWays Board of Directors.

In cases where no application best meets the criteria, AgeWays has the right to deny all applications and issue a second RFP for the desired service.

Notice of Award

Applicants awarded funding will receive written notification of approval of their application to contract with AgeWays. Written notification of the AgeWays Board of Directors decision will be communicated within seven (7) calendar days of the AgeWays Board of Directors meeting at which the funding decisions are approved.

Once the AgeWays Board of Directors has determined and approved funding levels for the first contract year, participant and unit numbers may be further negotiated with the AgeWays Program Manager. Other changes, program requirements, and/or pre-contract stipulations may be added to the funding decision.

All contracts are awarded for a three-year period, with first-year funding determined at the start of a contract, and subsequent funding determined if federal/state funding levels change. Award letters will include the number of participants and units of service expected to be delivered during the contract year. Availability of funds may increase or decrease during a contract period or within the three-year contract award cycle.

AgeWays reserves the right to adjust a contract after the first year, and/or to issue a new RFP for any contracted service before the end of the original contract period, based on, but not limited to:

- Inadequate contractor performance.
- Amendments to AgeWays multi-year plan or annual implementation plan; and/or
- Significant changes in the scope or nature of the service to be provided as related to state or federal requirements.

Contract negotiations for the second and third year(s) are not limited to, but based on the following:

- Availability of funds
- Successful fulfillment of contract spending and serving in the current fiscal year
- Fiscal and programmatic site assessments
- Any other criteria which may affect contract performance

Acceptance of Award

Successful applicants are required to:

1. Complete the Acknowledgement Letter in SmartSimple to AgeWays acknowledging acceptance of the funding decision by the AgeWays Board of Directors.

2. Any negotiations in participants or units should be discussed with the Program Manager at this time. Contracts for funding will be issued based on the information contained in the Award Letter.

3. If applicable, submit a new budget reflecting AgeWays Board of Directors approved funding, participants, and/or units.

4. Submit electronic copies of the required policies and procedures as specified on the AgeWays Required Policies and Procedures Checklist within SmartSimple.

Applicants that do not submit the requested information by the due date may jeopardize their funding award. Negotiations must be completed, and signed contracts must be returned to AgeWays prior to the start of the fiscal year.

Denial of Award

Applicants not awarded funding will receive a denial letter from SmartSimple within seven (7) calendar days of the AgeWays Board of Directors meeting at which the funding decisions are made. Applicants not awarded funding may contact AgeWays to receive specific information about the denial including an opportunity to appeal the decision.

PRE-CONTRACT MATERIALS

Upon notification of contract award, all AgeWays awarded contractors are required to submit the following documentation to AgeWays. All documentation must meet the requirements of the AgeWays and Bureau of Community Living and Supports (ACLS Bureau) Operating Standards Manual for Social and Nutrition Services.

1. Revised Budget and Match Letter, if applicable

2. Targeting Plan(s)

3. Policies and Procedures
    - Required policies and procedures that are clearly labeled and identified and in order as listed on the Required Pre-Contract Policies and Procedures Checklist. Submit only the policies and procedures requested.

4. Certificate of Insurance

5. Business Associate Agreement

6. Provider Disclosure Form

7. Adult Day Services– RN, LPN, and Chauffeur Licenses, if applicable

8. Nutrition Services Only – Submit cycle menus for all meals served (including subcontractors) and nutrient analysis for all meals served if not following the AgeWays meal planning requirements. In addition, submit the Holiday Meals on Wheels Plan. The cycle menu template and Holiday Meals on Wheels plan template are provided by AgeWays and can be found on the SmartSimple platform.

AgeWays may request additional documents. AgeWays must receive all requested documents prior to releasing the contract. Submit only the requested documents clearly labeled and in an organized manner. Unrequested documents will not be reviewed and may be returned for proper resubmission. All documentation should be submitted via SmartSimple (unless noted otherwise) by August 21, 2026.

PARTICIPANT TARGETING PLAN INSTRUCTIONS

The purpose of the Participant Targeting Plan is to identify socially or economically disadvantaged persons in the service area and project the number of individuals in each category who will be served over the course of the fiscal year. AgeWays describes them as an “underserved or priority population group.” Targeting of economically and/or socially disadvantaged population groups is required under the Federal Older Americans Act (OAA) and by the Michigan Department of Health & Human Services (MDHHS)/Bureau of Aging, Community Living, and Supports (ACLS Bureau).

Contractors will enter county-specific demographic data onto the Participant Targeting Plan form in the Smart Simple platform based on U.S. Census information provided on the AgeWays website at www.ageways.org. Contractors will also enter the number of participants from each demographic group they project to serve.

For FY 2027 – 2029, successful applicants are required to select one or more underserved/priority population groups (individuals living in poverty or belonging to a racial or ethnic minority group) at a rate of at least twice their proportion in the county. For example, if African American older adults represent 10% of a county's older adult population, the applicant will project to serve 20% of the African American older adult population in that county.

Successful applicants who are proposing to serve individuals in more than one county must complete and submit a separate Participant Targeting Plan form for each county. When providing services in more than one county successful applicants can select a different underserved/priority population to target in each county.

Successful applicants may also target lesbian, gay, bisexual, transgender (LGBT) older adults or older adults with limited English proficiency. Census data for these groups is not available at this time, but there are resources and information on the AgeWays website https://www.ageways.org/contract-providers/.

Providers awarded funding for Adult Day Services, Caregiver Legal Assistance, Grandparents Raising Grandchildren, and Volunteer Caregiver services must complete the Caregiver Targeting Plan (only) for each county that they serve. The Caregiver Targeting Plan must include the number of unduplicated caregivers that will be supported and provided respite services.

The Participant Targeting Plan definitions:

- "Poverty" is the need resulting from an income at or below the official poverty level as defined each year by the Federal Administration for Community Living/Department of Health and Human Services. For targeting purposes, factors indicating economic need are sources of income (Social Security Income (SSI), food stamps, Medicaid, etc.), or income at or below 100% of the federal poverty level that entitles older persons to other supportive programs. To determine the federal poverty levels, go to www.aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines
- "Race/ethnicity status" is confined to the following designations:
    - American Indian or Alaskan Native – a person having origins in any of the original peoples of North American (including Central America), and who maintains tribal affiliation or community attachment
    - Asian, native Hawaiian, or Other Pacific Islander – a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, China, India, Japan, Korea, Malaysia, Pakistan, Philippine Islands, Thailand, and Vietnam. May also be a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
    - Black or African American – a person having origins in any of the black racial groups of Africa
    - Hispanic or Latino – a person of Cuban, Mexican, Puerto Rican, South or Central

    American, or other Spanish culture origin, regardless of race
  - White – a person having origins in any of the peoples of Europe, the Middle East, or North Africa
  - Multi-racial – a person whose response to the race item on the census could not be categorized in a specific group. The census data is based on an individual's self-identification, that is, their perception of their own racial identity. For the Participant Targeting Plan, people who identify with two or more racial categories are multi-racial
  - "Non-minority" older adults are those who are not in a minority designation – i.e., white, non-Hispanic
- Lesbian, Gay, Bi-Sexual, Transgender (LGBT) – an individual who self-identifies as lesbian, gay, bi-sexual, and/or transgender.
- Limited English Proficiency (LEP) – a person who does not speak English as their primary language and have limited ability to read, speak, write, or understand English may be limited English proficient.

REPORTING REQUIREMENTS

Successful applicants who are awarded funding (Contractors) are required to submit fiscal and programmatic reports to AgeWays and the National Aging Program Information System (NAPIS). All reports are to be submitted electronically, unless otherwise directed by AgeWays. Reports are used by AgeWays to monitor contract performance, participant and unit serving levels and monitor contract spending. A reporting workshop will be held for successful applicants to provide a detailed overview of reporting requirements.

Programmatic Reporting Requirements

1. **Quarterly Participant Unit Report**
   All contractors need to complete this form via the SmartSimple platform for <u>each</u> county served. For contractors serving more than one county, Total Participant and Units must be divided between the Quarterly Participant Unit Report - All Services reports for each county served according to the projections on the individual county Targeting Plans.

2. **Quarterly Waiting List Report**
   This report is to be completed by Chore, Home Delivered Meals, Home Injury Control, and Legal Assistance contractors only on a quarterly basis. The report must be completed even when a wait list is not maintained.

3. **Disease Prevention and Health Promotion Quarterly Report**
   This report is to be completed by Disease Prevention and Health Promotion contractors only.

4. **AIS Secure Report – Caregiver Legal Assistance and Legal Assistance**
   Caregiver Legal Assistance and Legal Assistance contractors shall report program data to the ACLS Bureau via the AIS Secure Report – File Drop.

5. **NAPIS Electronic Submission Process**
   Contractors of the following services are required to submit electronic data into NAPIS each quarter. Electronic submissions are due the 10^{th} of the month following the end of each

quarter.

a. Adult Day Services
b. Chore
c. Congregate Meals (registration file only)
d. Grandparents Raising Grandchildren
   - Respite Care
   - Caregiver Supplemental Services
   - Caregiver Counseling Services
   - Caregiver Case Management
e. Holiday Meals (when applicable)
f. Home Delivered Meals
g. Volunteer Caregiver

Quarterly programmatic reports are due by the 10th of the month following the end of each quarter. Due dates are January 10th, April 10th, July 10th, and October 10th. Note: When the 10th of the month falls on a weekend and/or holiday, programmatic reports are due the following business day.

Contact the AgeWays Program Manager if, for any reason, the programmatic reports will be submitted late. Late reports can affect the status of the contract and are a compliance issue.

Additional guidelines and instructions for reporting will be included during training for successful applicants. Questions about how to complete the quarterly programmatic reports should be directed to the appropriate Program Manager.

Fiscal Reporting Requirements

1. **Monthly Fiscal Reporting**
   The monthly fiscal report is due at the end of the 5th business day following the end of the month; if the 5th business day is the weekend or a holiday it would fall on following business day. Filling out the monthly fiscal report is how providers get paid.

   Social Service Program Monthly Financial SmartSimple Reporting
   a. Report type: Monthly
   b. Reporting month: select the appropriate month, however there is a Sept report, and a Sept YTD report. The Sept YTD report should be selected if additional expenses for the fiscal year need to be reported
   c. Fiscal Year: Select appropriate fiscal year
   d. Monthly Federal/State Share – Payment: This field is the amount the provider is reporting to be paid for that month. Providers are required to report based on the internal tracking of actual expenses for the prior month
   e. YTD Federal/State Share: The amount that's been reported including that current month in the Monthly Federal/State Share Payment
   f. Local Monthly Cash Match: This should be tracked in the accounting system and should be earmarked as such and cannot be from another federal source of funds. The year-end total should match what was budgeted, or can be more
   g. Local Monthly In-Kind Space: This should be tracked in the accounting system and

cannot come from federal funds. In kind space match may also include utilities of the space used for the program. The year-end total should match what was budgeted or can be over reported.

h. Local Monthly In-Kind Volunteer Amount: This should be tracked in the accounting system and be identified as match for AgeWays funding. The current volunteer rate is $34.79. Providers should be able to provide time records of volunteers
i. Less Program Income/Voluntary Contribution: The amount of donations received in the previous month
j. 10% Over/Under Explanation: An explanation should be provided if reporting is over/under 10% of projected spending at that time

Nutrition Services Monthly Financial SmartSimple Reporting

a. Report type: Monthly
b. Reporting month: select the appropriate month, however there is a Sept report, and a Sept YTD report. The Sept YTD report should be selected if additional expenses for the fiscal year need to be reported
c. Fiscal Year: Select appropriate fiscal year
d. Monthly Federal/State Share: total number of units served in the previous month times the agreed upon unit rate is the amount requested for payment
e. Local Monthly Cash Match: This should be tracked in the accounting system and should be earmarked as such and cannot be from another federal source of funds. The year end total should match what was budgeted, or can be more
f. Local Monthly In Kind Space: This should be tracked in the accounting system and cannot come from federal funds. In kind space match may also include utilities of the space used for the program. The year-end total should match what was budgeted or can be over reported.
g. Local Monthly In Kind Volunteer Amount: This should be tracked in the accounting system and be identified as match for AgeWays funding. The current volunteer rate is $34.79. Providers should be able to provide time records of volunteers
h. Unit Rate: contracted unit rate
i. Units Served: number of units served the previous month. Units totaled quarterly and compared with the number reported in NAPIS
j. Monthly NSIP Funds Earned: units times approved NSIP rate (reported to providers when it changes)
k. YTD NSIP Funds Received: the amount that’s been reported including that current month in the Monthly NSIP Funds Earned
l. Less Program Income/Voluntary Contribution: The amount of donations received in the previous month
m. 10% Over/Under Explanation: An explanation should be provided if reporting is over/under 10% of projected spending at that time
n. Congregate Meal Providers Only: Voucher Meal Units Served and Voucher Meals Unit Rate: Only report as applicable. Voucher meals should be included in the monthly federal/state share total

2. Quarterly Financial Report for Social Service Providers

Due the 10th of the following month after the end of a quarter. The form is available in the

SmartSimple platform under Post Award and can also be submitted in the drop box under the link to the form. Due dates are January 10th, April 10th, July 10th, and October 10th.

The quarterly financial report tracks the budgeted expenses to the actual expenses, and the reported numbers will be used during the annual fiscal assessment. If a Budget change request (BCR) was submitted use the numbers from the BCR.

3. **Annual Report for nutrition providers**
   The Annual Actual vs Budgeted Nutrition form is due by November 10th for the previous fiscal year, for each service. The link to the report is in SmartSimple under the post award tab and can be submitted in the box below the hyperlink. The report shows actual versus what was budgeted, if a BCR was submitted use the numbers from that form.

4. **Annual Equipment Inventory**

   The form can be found in SmartSimple under post award and can be submitted in the box under the link to the form.

   Include all equipment purchased with AgeWays funding that has an acquisition cost of $10,000 or greater. The cost of each unit or piece of equipment is to include the necessary accessories, installation costs, and taxes. Provide a detailed description of the item, the accessories, and installation requirements. When federal/state funding is used to purchase equipment for a program, the applicant must maintain records that include the following information regarding the equipment:
   - Equipment description
   - Manufacturer's serial or model number
   - Funding source of the equipment acquisition cost and date of acquisition
   - Disposal information

   If the equipment is used for non-federal/state programs, the applicant will charge a user fee no less than a private company would charge for equivalent use. Such user charges must be treated as Program Income.

5. **Budget Change Request (BCR)**

   The budget change request form is in SmartSimple under post award. The BCR should be submitted if a line item of the approved budget changes greater of 15% or $5,000 and is due by July 10th.

ANNUAL CONTRACTOR ASSESSMENTS

To ensure that contractors are operating in accordance with service contracts and operating standards, programmatic and fiscal assessments will be conducted annually, beginning in the second quarter of each fiscal year. Assessments also provide an opportunity for collaborative efforts to improve the quality of and to expand the capacity of service programs.