

2023—2026 Multi Year Plan
FY 2025 ANNUAL IMPLEMENTATION PLAN
U.P. AREA AGENCY ON AGING UPCAP SERVICES, INC. 11



Planning and Service Area

Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft

U.P. Area Agency on Aging UPCAP Services, Inc. 2501 14th Avenue South
P.O. Box 606 Escanaba, MI 49829 906-786-4701
(phone) 800-338-7227 (toll-free)
906-786-5853 (fax)
Jon Mead, President & CEO www.upcap.org

Regional Aging Representative
Lacey Charboneau
CharboneauL2@michigan.gov
517-294-9191

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
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Executive Summary

Include a summary that describes the AAA and the implementation plan including a brief description of the PSA, 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 federal and state funding during FY 2025. If there are no new activities or changes, note that in your response.

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.

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

D. Progress made through advocacy efforts to date and focus of advocacy efforts in FY 2025.

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

In 1974, UPCAP Services, a non-profit multi-purpose human services organization, was designated as the Upper Peninsula Area Agency on Aging (UPAAA). A 7-member Board of Directors serves as the AAA Policy Board and a 17-member Advisory Council assists the UPAAA in accomplishing its mission of serving the U.P.'s elderly. The UPAAA's Policy Board is composed of senior citizens, elected officials, leading local citizens representing U.P. counties, and other members of the private sector. In addition, the Board appoints an Advisory Council, composed primarily of senior citizens age 60 and older, who are eligible participants in programs under the Area Agency's Area Plan. Advisory Council members also include individuals representing the low-income elderly, those with disabilities, minority groups, health care and advocacy organizations, and the general public. These individuals meet at least six times a year to advocate for senior programs and needs, conduct public hearings, aid in the development of the Area Plan, and review and comment on policies, programs, and legislation affecting the elderly. The UPAAA is a regional focal point for aging services and programs for persons with disabilities. The mission of the Area Agency on Aging is to serve as a leader relative to all aging issues on behalf of older persons in the 15 counties of the Upper Peninsula (U.P.) of Michigan. With the help of its partners, the UPAAA carries out a wide range of functions related to advocacy, planning, coordinating, inter-agency linkages, resource and program development, information sharing, brokering, monitoring and evaluation; and is designed to lead to the development of comprehensive and coordinated systems serving each community within the region. These systems are intended to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities for as long as possible.

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

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response

The UPAAA continues to build and focus finding on the Upper Peninsula Caregiver Resource Center . Funding continues from the Michigan Health Endowment fund along with OAA funding. This center is designed to help increase awareness of Caregiver Resources to all residents of our Region. The mission of the Upper Peninsula Caregiver Resource Center is to help maintain and improve quality of life for family caregivers and those they care for by providing information, education, support and resources. This is an expansion of a previous objective listed in the FY2023 Multi Year Plan (MYP).

NEW: Beginning Summer of 2023, UPCAP will partner with the Food Bank Council of Michigan (FBCM) to increase access to locally sourced fresh and healthy foods, targeting economically challenged and food insecure residents. This new initiative known as “The UP Fresh Food Access Program”, is Funded through the Food Bank Council of Michigan, a grantee of the Michigan Department of Education (MDE) and the USDA. This partnership will help establish and implement the new Local Food Purchase Assistance Cooperative Agreement Program (LFPA), an innovative program allowing state and tribal governments to procure and distribute local foods and beverages unique to their geographic area.

UPCAP/UPAAA is also continuing The Upper Peninsula Food as Medicine (UPFAM) program. This large collaborative effort consists of 25 partner organizations and agencies throughout the region committed to the on-going coordination and support of this initiative. The program, generously funded by the Superior Health Foundation of Marquette County, is based on a prescription for health model designed to address and improve food security of individuals that are at risk for or diagnosed with a chronic health condition, face economic barriers to food access and are 18 years of age or older.

NEW: UPAAA/UPCAP has submitted and received a grant from the IMPART Alliance to improve the quality of training provided to Direct Care Workers across the Upper Peninsula and Michigan by utilizing IMPART alliances training program, removing barriers to access for Direct Care Workers, removing the barrier of cost for Direct Care Workers, and providing support, guidance, and technical assistance to our providers.

The UPAAA will continue to partner with local Tribal entities for Aging services across our region and will actively pursue contracts, Memorandums of Understanding (MOU) and any unique opportunities to expand aging services to our U.P. Tribal members and their caregivers. Currently, the UPAAA has contracts for in-home services with three of the five recognized tribal governments in the Upper Peninsula, and we have active working partnerships with the remaining two tribal entities.

NEW: The UPAAA has received grants from both Michigan State Housing Development Authority (MSHDA) to invest in community housing for older residents in the amount of \$300,000 and a grant from the US Department of Housing and Urban Development in the amount of \$500,000 under an Older Adults Home Modification Grant Program.. These programs will focus on accessibility and falls prevention by ensuring safe living environments for residents in the Upper Peninsula.

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.

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The UPAAA has been working with our network of providers for years to emphasize prioritization factors and policies, in keeping with State standards for services. The UPAAA has developed guides to be utilized by providers, defining priority factors as those below 100% of the Federal Poverty Level, those that live alone, race, non-English speaking, and those over the age of 75. Education is provided annually to review these criteria, and assessment & reassessment forms utilized for the determination of services allow for a score to be calculated to target appropriate populations. The UPAAA has also developed written guidance and video trainings to assist our partners throughout the year. As a part of the yearly Quality Assurance Monitoring, QA staff regularly review prioritization policies for all AAA contractors and review NAPIS data to ensure compliance with policies. Additionally, QA staff review marketing materials to ensure compliance with non-discrimination language.

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

The UPAAA has considered this very carefully, and has determined that the following may happen if a 10% reduction in funding occurs:

Payments to community partners/providers would be reduced overall. The number of people currently assisted would be reduced, due to an increased need to further prioritize services for those most in need. Additionally, some people who do not meet the highest priority screening may lose current services. Some services that are considered to be 'non-essential' may no longer be offered, such as homemaking.

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

The following advocacy strategies were formulated from a variety of sources:

- Input was solicited through a public hearing. In addition, the UPAAA received input from County Commissioners through its role as administrator for the U.P. Association of County Commissioners (UPACC). Issues were presented through other required collaborations and advisory boards, as well.

- *The UPAAA will continue to promote, support, and advocate for programs and services that are person-centered, evidenced-based, and community-based.

- *The UPAAA will advocate for increased capacity and expanded access to the MI Choice Program and other community-based long term care options to meet the needs of a rapidly increasing aging population.

- *The UPAAA will continue to advocate for increased funding from the Older Americans and Older Michiganian Act in order to stay in line with increased cost of providing services and meeting the needs of older adults utilizing these funds.

- *The UPAAA will continue to play a role in Michigan's Dual Eligible Medicaid/Medicare integrated care Initiative, building on its relationships with key stakeholders with the goal of promoting and securing seamless service delivery for Integrated Care in the region.

- *The UPAAA will continue to advocate for the provision of adequate funding for non-emergency medical and non-medical transportation and to promote the service as an essential component to low-income and rural consumers.

- *The UPAAA will continue to work in collaboration with groups representing and advocating for the prevention and treatment of chronic conditions and disabilities, including: U.P. Diabetes Outreach Network (UPDON), Michigan Arthritis Foundation, Alzheimer's Association, Michigan State University Extension, local health plans, Superior Alliance for Independent Living (SAIL), Michigan Falls Prevention Coalition, and

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others to develop and conduct evidenced-based disease prevention (EBDP) programs throughout the region.

*The UPAAA will advocate for the provision of additional funding and support for preventive services, including home injury control, elder abuse prevention, caregiver education and training, chore services, and nutrition and wellness programs.

*The UPAAA will promote, support and advocate for adequate wages and training for direct care workers, in order to overcome in-home worker shortages and meet the increasing needs of older adults who want to age in place.

*The UPAAA will advocate for continuation and expansion of MMAP. Through MMAP, trained volunteers provide information and counseling to Medicare beneficiaries concerning Medicare and Medicaid eligibility, enrollment and coverage, medical bills, prescription drug coverage, and supplemental and long-term care insurance at no charge.

*The UPAAA will continue to play an active role and advocate for increased affordable housing options including the development of senior housing projects in rural areas and for the increased provision of supportive services in housing facilities.

*Additional advocacy issues will be selected throughout the multi-year planning cycle based on input received from older adults, service providers, county commissioners, area agency staff, and through input provided by the UPAAA Advisory Council, Quality Collaborative, Aging and Disability Resource Collaborative (ADRC), and the UPCAP Board of Directors. Members of these groups will continue their advocacy efforts as in the past, taking positions on various topics and issues of concern to older adults in the region.

*The UPAAA has also begun diversity, equity and inclusion (DEI) training with our partner network to increase awareness, advocacy and education amongst Black, Indigenous and People of Color (BIPOC) and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) populations. UPCAP has entered into an agreement with MIGen (formerly SAGE Metro Detroit) to provide continuing education and support for the upcoming year.

Currently, the UPAAA and our provider network partners serves a large Native American and Indigenous population. Additionally, the UPAAA has contracts for Aging Services with two of the five recognized tribes in the Upper Peninsula. We have and will continue to partner with all our Tribal entities in whatever aspects we can be of assistance. Two of our five tribal partners have MMAP in-kind counselors, to assist tribal members who are Medicare beneficiaries; we have partnered with all five tribes to promote and encourage participation in the Food as Medicine Program and the Fresh Food Access Coalition, and will continue to be vocal supporters of Tribal governments.

*As a part of data collection on our aging services recipients, we collect and track non-English speaking individuals across the region. Currently, we have no individuals who have requested interpreter services, but we will continue to track and educate our partners on translation and other options should the need arise.

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

Food as Medicine – This large collaborative effort consists of 25 partner organizations and agencies throughout the region committed to the on-going coordination and support of this initiative. The program, generously funded by the Superior Health Foundation of Marquette County, is based on a prescription for health model designed to address and improve food security of individuals that are at risk for or diagnosed with a chronic health condition, face economic barriers to food access and are 18 years of age or older.

The UP Fresh Food Access Program: Beginning Summer of 2023, UPCAP partnered with the Food Bank

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Council of Michigan (FBCM) to increase access to locally sourced fresh and healthy foods, targeting economically challenged and food insecure residents. This new initiative known as “The UP Fresh Food Access Program”, is Funded through the Food Bank Council of Michigan, a grantee of the Michigan Department of Education (MDE) and the USDA. This partnership will help establish and implement the new Local Food Purchase Assistance Cooperative Agreement Program (LFPA), an innovative program allowing state and tribal governments to procure and distribute local foods and beverages unique to their geographic area.

Caregiver Resource Center (CRC) - The mission of the CRC is to help maintain and improve quality of life for family caregivers and those they care for by providing information, education, support and resources.

Vaccine Expansion Grant Opportunity – UPCAP/UPAAA has secured an additional grant to help improve vaccination rates across the U.P. for COVID, flu and other diseases. This grant will focus on reaching rural and homebound seniors across the region and works in conjunction with our health departments and physician’s offices.

UPDATED: Direct Care Worker (DCW) IMPART Alliance Trainings- As part of our ongoing efforts to increase DCWs across the region, UPCAP/UPAAA is partnering with the IMPART Alliance to get a hand on training program for providers and DCWs, to educate and empower workers across the U.P. We know that confident and well trained DCWs will remain longer in their roles and have more job satisfaction when they are given adequate and consistent training opportunities. UPAAA/UPCAP has submitted and received a grant from the IMPART Alliance to improve the quality of training provided to Direct Care Workers across the Upper Peninsula and Michigan by utilizing IMPART alliances training program , removing barriers to access for Direct Care Workers, removing the barrier of cost for Direct Care Workers, and providing support, guidance, and technical assistance to our providers.

Food Bank Council of Michigan - UPCAP has participated in meetings with the Food Bank Council of 6 U.P. Area Agency on Aging FY 2024 Michigan to determine the feasibility of partnering with the council to increase food access throughout the UP. The program would serve food insecure residents throughout the region, with a focus on providing locally sourced produce and dairy products for residents with economic challenges.

Critical/Emergent Unmet Needs- Expansion of this program with ARPA funds allowed home modifications to be done across in all 15 counties of the Upper Peninsula. This program, along with grants from HUD and MISDHA have allowed for accessibility modifications and energy efficiency upgrades to take place across the region. Increasing accessibly and safety items in the home will lessen the likelihood of falls and allow individuals to age in place for as long as possible.

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County/Local Unit of Government Review

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.
- 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 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.

TRIBAL NOTIFICATION

The Michigan Department of Health and Human Services (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 Older Americans Act (OAA).

AAAs, please 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 to Tribes within the PSA. 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

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Representative by July 22, 2024, of any comments or feedback received from their Tribe(s). If no comments or feedback are 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 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. AAAs, note whether your Policy and Advisory Boards have representation from the Tribe(s) and/or elders within your PSA. If not, describe the AAAs efforts to build and foster relationships with the Tribe(s) to encourage potential representation on these respective boards.

For CITY/LOCAL UNIT OF GOVERNMENT REVIEW:

An email requiring a response confirming receipt to the chief elected official of each appropriate local government was sent advising them of the availability of the final draft AIP on the AAA's website, along with a .pdf version attached to the email. Instructions for how to view and print the document must were included. For those lacking print capabilities, the UPAAA offered to provide a paper copy via US Postal Service, if requested. A copy of the public notice for the AIP Hearing was also included 30 days before the hearing date, advising of their opportunity to attend or provide feedback of the AIP or their related concerns.

For TRIBAL NOTIFICATION:

An email requiring a response confirming receipt to the chief elected official of each appropriate local government was sent advising them of the availability of the final draft AIP on the AAA's website, along with a .pdf version attached to the email. Instructions for how to view and print the document must were included. For those lacking print capabilities, the UPAAA offered to provide a paper copy via US Postal Service, if requested. A copy of the public notice for the AIP Hearing was also included 30 days before the hearing date, advising of their opportunity to attend or provide feedback of the AIP or their related concerns.

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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, 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 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, AAAs 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 Board attend the hearing(s)?

Date	Location	Time	Barrier Free?	No. of Attendees
06/17/2024	Escanaba	01:30 PM	Yes	15

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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.

Service Name/Definition

Caregiver Case Management

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

The UPAAA would like to utilize this regional service definition until the category Caregiver Case Management is adopted into the State's official Operating Service Standard. (Category C-24)
The UP AAA will be utilizing this service to assist in the assessment of services for Caregivers across the Upper Peninsula for all programs offered throughout our network.

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

Minimum Standards

A service provided for a caregiver that assesses needs, and arranges, coordinates, and monitors services to meet the individual needs of the caregiver.

1. Caregiver Case Management (CCM) functions shall be carried out by an individual who has a bachelor's degree in a human service field or who has experience and training to effectively determine a caregiver's needs and match those needs with appropriate services.
2. Each CCM program must have uniform intake procedures and maintain consistent records. Intake records for each potential participant shall include:
 - a. Name, address and telephone number
 - b. Date of birth
 - c. Emergency contact information, if applicable
 - d. Race and ethnicity
 - e. Gender identity
 - f. Sexual orientation
 - g. Communication support needs, if applicable
3. Following the intake process, an initial assessment shall include as much of the following information

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as possible:

- a. Participant information gathered at intake
 - b. Current status of physical and mental health
 - c. Needs of the caregiver
 - d. Statement of strengths and challenges
 - e. Existing resources
4. A service plan shall be developed with the caregiver to coordinate the formal and informal resources and services to meet the identified needs of the caregiver. Each plan shall include:
- a. Statement of goals and objectives and interventions utilized for meeting identified needs
 - b. Description of identified resources and supports
 - c. Description of interventions and services used to address the caregiver's identified needs
5. Each caregiver shall be reassessed yearly, or as needed, to evaluate service plan implementation. At minimum, monitoring contacts shall be attempted 90 days following the initial assessment, and ongoing monitoring contacts shall be attempted every 180 days thereafter.
6. CCM service components may be delivered in-person, telephonically, virtually, or hybrid.

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.

The Area Plan Grant Budget that is uploaded and saved in AMPS must include each access service to be provided directly in the Direct Service Budget details tab. 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's Support Services Detail tab. The method of provision must be specified in the Service Summary tab.

Care Management

<u>Starting Date</u>	10/01/2024	<u>Ending Date</u>	09/30/2025
Total of Federal Dollars	\$70,000.00	Total of State Dollars	\$535,000.00

Geographic area to be served

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

Goal: Over the course of the multi-year planning period, the UPAAA will assist individuals needing nursing facility level of care to remain at home through the provision of Care Management, utilizing a person-centered planning/self-directed care process. This includes the Veterans Self-Directed Home and Community-Based Program in partnership with the Veteran's Administration Medical Center (VAMC) in Iron Mountain, MI.

Activities:

1. The UPAAA will utilize Older Michiganiaan Act (OMA) resources to provide comprehensive, person-centered Care Management services to individuals who screen eligible for Long Term Care Supports & Services via a standardized screening process. In 2023, the UPAAA will conduct approximately 500 screenings of individuals requesting Long Term Care Supports & Services (LTSS), and conduct initial assessments for an estimated 250 individuals screening eligible for LTSS. The UPAAA will initiate an additional 50 person-centered support and service plans for persons who meet the Nursing Facility Level of Care criteria for LTSS, with an overall goal of assisting at least 75 persons with LTSS in FY 2023.
2. The UPAAA will continue to work with the local VAMC to provide person-centered, self-directed long-term supports and services to eligible Veterans throughout the Upper Peninsula and northeastern

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Wisconsin . The UPAAA will conduct assessments and develop appropriate supports and services plans for all veterans referred to it by the local VAMC who are willing to utilize a self-directed approach to the provision of LTSS. The agency is currently serving 56 veterans and anticipates receiving 50 new referrals annually.

3. The AAA will continue its contractual relationship with SAIL to purchase transition services for individuals wanting to leave nursing facility placement in favor of community-based options through the Waiver Program or other community-based systems for individuals who may be ineligible for or do not want waiver services.

Number of client pre-screenings:	Current Year: 683	Planned Next Year: 690
Number of initial client assessments:	Current Year: 77	Planned Next Year: 80
Number of initial client care plans:	Current Year: 13	Planned Next Year: 20
Total number of clients (carry over plus new):	Current Year: 154	Planned Next Year: 155
Staff to client ratio (Active and maintenance per Full time care manager):	Current Year: 1:18	Planned Next Year: 1:22

Information and Assistance

<u>Starting Date</u>	10/01/2024	<u>Ending Date</u>	09/30/2025
Total of Federal Dollars	\$70,000.00	Total of State Dollars	

Geographic area to be served
15 counties of the UP

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

Goal: Over the course of the multi-year planning period, the UPAAA will increase awareness and improve access to available resources for older adults, individuals with disabilities, caregivers, and family members, including individuals living in isolated and rural areas.

Activities:

1. UPCAP will work closely with Michigan 2-1-1 and the other six call centers in Michigan to enhance and improve the region's comprehensive data and receive certification.
2. I & A staff will continue to coordinate with Emergency Management Coordinators for all 15 counties via the U.P. 911 Authority in regards to its role in the event of a national or regional disaster.
3. I & A staff will continue to utilize screening tools to identify specific target populations such as family caregivers, those who identify as LGBT, tribal elders, etc. so that they can better understand their potentially unique needs and make appropriate referrals.
4. Continue conducting a public relations campaign across the region to inform the public of the 2-1-1 Information and Assistance Call Center, increasing its call volume by 10% over the next fiscal year as a result of additional television and radio advertising, and other public relation events. The Call Center will also increase access to information and assistance through a partnership with the MI Department of Health

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& Human Services via their MI Bridges portal, and by the ability to access the 2-1-1 database through a texting option.

5. Work with new marketing plan for Caregiver Resource center to ensure smooth transition for caregivers calling 2-1-1 for assistance to the proper portals.

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FY2023-2026 Multi Year Plan

U.P. Area Agency on Aging

FY 2025

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.

Total of Federal Dollars

Total of State Dollars

Geographic Area Served

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

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

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

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

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

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.

Caregiver Case Management

Total of Federal Dollars

Total of State Dollars

\$50,000.00

Geographic Area Served All 15 counties of the UP

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

The goal of Caregiver Case Management is to provide service to assess the needs of UP Caregivers and to assist in the arranging of available services to provide respite and support in all areas of caregiving. This service would also complete the wrap around experience for those caregivers utilizing our growing UP Caregiver Resource Center.

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

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

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

As a part of a new service definition not yet approved by the State, the UPAAA would like to begin providing comprehensive case management services to Caregivers as soon as possible, to ensure we meet the goals of caregivers of our aging population across the UP. As the UPAAA has developed and launched a UP wide Caregiver Resource Center this service fits hand in hand with the goals of the center. The UPAAA sees this service similar to current client Care Management Services, and we feel we are uniquely qualified to expand these resources to caregivers.

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

The UPAAA is exploring this potentially new service definition and feels in the best interest of the program to oversee all aspects of assessment, coordination and communication as part of the umbrella of the UP's Caregiver Resource Center. Working within our agency, the UPAAA believes it can provide these services as a fair/reasonable/effective cost across the Upper Peninsula and ensure consistency in the process.

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

Approved MYP Program Development Objectives

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:

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 US military and ways the AAA could potentially increase services and coordination for veterans and their spouses within the PSA.

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?

Area Agency on Aging Goal

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

Objectives

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1. All UPAAA staff and subcontractors are regularly trained in diversity, equity, and inclusion to improve access to services for all.

Timeline: 10/01/2022 to 09/30/2023

Progress

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.

*UPDATE: The UPAAA, in conjunction with MIGen (formerly SAGE Metro Detroit) created a DEI guide for providers to utilize while collecting and gathering data on BIPOC and LGBTQ+ populations, as part of the State's NAPIS data collection efforts. Data collected is reviewed yearly to see if/what gains have been made in expanding services to priority populations. This data will also be used to assist in outreach and marketing efforts for the upcoming plan year.

*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. Currently the UPAAA/UPCAP services works in conjunction with many Veteran's organizations. UPCAP also has the U.P. Veterans Program which is created to enhance the well-being and quality of life of Veterans and family members across the Upper Peninsula through regional coordination, collaborative assistance, outreach, networking, and strategic planning in order to streamline and deconflict essential delivery of Veteran services. UPCAP has also partnered with UP VCAT (Veterans Community Action Team) to ensure outreach of all programs available by the UPAAA across the UP and our Veterans and their caregivers. This partnership continues to grow more events have been scheduled for the upcoming year.

*New for FY2025- UPCAP/UPAAA is in the process of pursuing a grant for Veterans Oral Health. This grant will be available through our partnerships with local VSOs and Veterans Programs.

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

Timeline: 10/01/2022 to 09/30/2023

Progress

UPDATE:

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.

*UPDATE: Training was held to review purposes of DEI, and to review and address implicit bias and the importance of cultural recognition. All providers participated and were given a copy of materials to share with staff. As a part of the QA monitoring process for AAA providers, all contracted agencies must provide proof of training focusing on DEI education and cultural competencies. Agencies who need technical assistance in providing information to staff were encouraged to request additional information from the UPAAA.

Objective 3- Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve.

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*UPDATE: No requests for translation services were requested.

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

Objectives

1. Provide consumers with options and assistance in obtaining self-directed community-based care when facing the need for long term supports and services.
Timeline: 10/01/2022 to 09/30/2023

Progress

1. The UPAAA's 2-1-1 database reflects all in-home/community services and residential options, including LGBTQ+ resources and demographics, including those agencies and businesses determined to be LGBTQ+ friendly. Information & Assistance (I & A) call specialists will continue to conduct intake on all requests for information on long term care, with referrals made to care managers/supports coordinators for unbiased, one-on-one assistance with long term care planning. (Continues for FY2025)
2. Care managers/supports coordinators have provided information and assistance to all care management and MI Choice Waiver clients on person-centered planning and self-directed care. Those who choose to direct their own care will be aided and supported in doing so. Care managers will promote Residential Services options for waiver-eligible consumers residing in assisted living facilities so that they can remain in their residence of choice.(Continues for FY2025)
3. I & A call specialists and care managers continue to participate in comprehensive training in advanced options, person centeredness, LGBTQ+ and sensitivity training, and benefits counseling practices and philosophies so that the UPAAA can remain the long-term care connection for individuals of any age and/or disabilities within the region. (Continues for FY2025)
4. Regional Service Definition for Nursing Services is available to provide care management participants who require more periodic or intermittent nursing for the purpose of preventive interventions to reduce the occurrence of adverse outcomes such as hospitalizations and nursing facility admissions when no other traditional funding source is available. (Continues for FY2025)
5. The UPAAA works under contract with the local Veteran's Administration Medical Clinic (VAMC) to provide self-directed home and community-based long-term care services to veterans needing long-term care services, with a specific emphasis on self-determination and person-centeredness in developing those services. (Continues for FY2025)
6. The UPAAA continues its contractual relationship with SAIL to purchase transition services for individuals wanting to leave nursing facility placement in favor of home and community-based options. (Continues for FY2025)
7. Expanded use of the Critical Services/Unmet Needs Regional Service Definition with AARPA funds has allowed home modifications and accessibility issues to be addressed in all 15 counties of the UP for individuals choosing to remain in their homes. (Ends w/ the end of AARPA funds)
8. UPCAP has secured funding from the Department of Housing and Rural Development (HUD) in the amount of \$500,000 for an Older Adults Home Modification Grant which will allow individuals to remain safely in their homes by expanding safety accessibility. Additionally, the Michigan State Housing Development Authority (MSHDA) allocated \$300,000 for their MICH grant, which focuses on accessibility and energy optimization.

2025 Program Development Objectives

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. 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).

Area Agency on Aging Goal

A. Strengthen Multi-Sector Connections, Collaboration, and Coordination to Support Older Adults

State Goal Match: 3

Narrative

UPCAP has applied and received two home repair (through MSHDA & HUD) to utilize on home improvement projects - focusing on our older population to allow for accessibility, energy savings and safety repair projects. These projects demonstrate the UPAAA has a strong desire to work with and pursue additional funding to help serve the aging population of the Upper Peninsula.

Objectives

1. Provide funds for home rehabilitation projects focusing on accessibility, safety and energy optimization.
Timeline: 10/01/2024 to 09/30/2025

Activities

*UPCAP/UPAAA will work within the parameters of the guidelines set aside for multiple funding sources to maximize our impact on individuals age 60 and older

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Expected Outcome

Expected outcomes will include:

- 1) Increased accessibility to allow individuals to continue to age in place
- 2) Identify and correct safety concerns for individuals in home to reduce incidents of falls
- 3) Increase energy optimization to assist in significant cost savings measure for those in rural areas

B. Elevate Resources and Inform Public About Aging Services

State Goal Match: 2

Narrative

The UPAAA/UPCAP has contracted with a marketing firm to assist in creating a wraparound media packet to focus on reaching underserved populations utilizing a multi-faceted plan. This plan includes TV and Radio Campaigns, social media blitzes and direct mail components. This campaign will begin with our Caregiver Resource Center. Over time, the outreach and marketing will also focus on other in-home services available across the UP.

Objectives

1. Increase outreach on priority populations - over age 75, minority groups, individuals under 150% of the federal poverty level, American Indian, Veterans, and rural populations.
Timeline: 10/01/2024 to 09/30/2026

Activities

*TV/Radio ads will be created and run on local stations across the Upper Peninsula - focusing on targeting priority populations

*Direct mailing campaigns will also be done to target individual priority populations - over age 75; minority groups, those under 150% of the Federal Poverty Level, and caregivers

Expected Outcome

Expected outcomes:

- 1) Increase awareness of programming and referrals to our partner sources
- 2) Increase awareness of the UPAAA Caregiver Resource Center

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Supplemental Documents

Document A: Policy Board Membership (Required).

Document B: Advisory Council Membership (Required).

SUPPLEMENTAL 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.

Document C: Proposal Selection Criteria - should only be completed if there are new or changed criteria for selecting providers (only if applicable).

Document D: Cash-In-Lieu-Of-Commodity Agreement (only if applicable).

Document E: Waiver of Minimum Percentage of a Priority Service Category (only if applicable).

Document F: Request to Transfer Funds (only if applicable).

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SUPPLEMENTAL DOCUMENT A
Board of Directors Membership

	Asian	Black or African American	American Indian or Alaska Native	Hispanic or Latino	Native Hawaiian or Other Pacific	Middle Eastern or North African	White	Total Membership
Membership Demographics	0	0	1	0	0	0	5	0
Age 60 and Over	0	0	1	0	0	0	4	0
Identifies as Female	0	0	0	0	0	0	0	0
Identifies as Male	0	0	1	0	0	0	5	0
Identifies as Transgender, Non-Binary, or Another Gender	0	0	0	0	0	0	0	0
Gender Undisclosed or Declined to Answer	0	0	0	0	0	0	0	0
Persons with Disabilities	0	0	0	0	0	0	0	0
Persons who Served in the US Military	0	0	1	0	0	0	1	0

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Board Member Name	Geographic Area	Affiliation	Membership Status
Jerry Doucette	Region Wide	At-Large	Appointed
Joseph Derocha	Marquette County	County Commissioner	Elected Official
Daniel Young	Region Wide	At-Large	Appointed
William Menge	Baraga County	County Commissioner	Appointed
Carl Nykanen	Ontonagon County	County Commissioner, Board Chair	Elected Official
Craig Reiter	Schoolcraft County	County Commissioner	Elected Official

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SUPPLEMENTAL DOCUMENT B
Advisory Board Membership

	Asian	Black or African American	American Indian or Alaska Native	Hispanic or Latino	Native Hawaiian or Other Pacific	Middle Eastern or North African	White	Total Membership
Membership Demographics	0	0	0	0	0	0	7	0
Age 60 and Over	0	0	0	0	0	0	2	0
Identifies as Female	0	0	0	0	0	0	5	0
Identifies as Male	0	0	0	0	0	0	2	0
Identifies as Transgender, Non-Binary, or Another Gender	0	0	0	0	0	0	0	0
Gender Undisclosed or Declined to Answer	0	0	0	0	0	0	0	0
Persons with Disabilities	0	0	0	0	0	0	2	0
Persons who Served in the US Military	0	0	0	0	0	0	0	0

Board Member Name	Geographic Area	Affiliation
Jim Bruce	Region Wide	AARP
DoriAnn Brooks	Region Wide	VA Med Ctr.- Home & Community Based Care
Jack VanTassel	Luce County	Consumer
Molly Irving	Region Wide	Upper Peninsula Health Plan
Katreena Hite	Region Wide	Northcare Network - Regional Mental Health
Julie Shaw	Region Wide	SAIL - ADRC

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Patricia Duyck	Region Wide	Bureau of Service for Blind Persons
Jamie LaFave	Delta County	Bishop Noa Home - Nursing Facility
Kristine Lindquist	Alger County	Commission on Aging
Leslie Hoffmeyer	Delta County	OSF Hospital
Aaron Andres	Marquette County	Consumer
Lisa Patterson	Region Wide	VA Medical Center

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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.

	Access	In-Home	Community
Provided by Area Agency	<ul style="list-style-type: none"> • Care Management • Information and Assistance 	<ul style="list-style-type: none"> • Assistive Devices & Technologies 	<ul style="list-style-type: none"> • Disease Prevention/Health Promotion • Long-term Care Ombudsman/Advocacy • Programs for Prevention of Elder Abuse, Neglect, and Exploitation • Caregiver Supplemental Services • Kinship Support Services • Caregiver Education, Support and Training
Contracted by Area Agency	<ul style="list-style-type: none"> • Transportation * 	<ul style="list-style-type: none"> • Chore * • Home Care Assistance * • Home Injury Control • Homemaking * • Home Delivered Meals • Medication Management • Personal Care * • Assistive Devices & Technologies • Respite Care • Friendly Reassurance 	<ul style="list-style-type: none"> • Adult Day Services * • Congregate Meals • Legal Assistance • Caregiver Education, Support and Training
Local Millage Funded	<ul style="list-style-type: none"> • Case Coordination and Support * • Outreach * • Transportation * 	<ul style="list-style-type: none"> • Chore * • Home Care Assistance * • Home Injury Control * • Homemaking * • Home Delivered Meals * • Personal Care * • Assistive Devices & Technologies * • Respite Care * • Friendly Reassurance * 	<ul style="list-style-type: none"> • Adult Day Services * • Disease Prevention/Health Promotion * • Home Repair * • Senior Center Operations * • Senior Center Staffing *
Funded by Other Sources	<ul style="list-style-type: none"> • Case Coordination and Support * • Outreach * • Transportation * 	<ul style="list-style-type: none"> • Chore * • Home Care Assistance * • Personal Care * • Assistive Devices & Technologies * • Respite Care * • Friendly Reassurance * 	<ul style="list-style-type: none"> • Adult Day Services * • Disease Prevention/Health Promotion • Home Repair * • Senior Center Operations * • Senior Center Staffing *

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Participant Private Pay	• Transportation *	<ul style="list-style-type: none"> • Chore * • Home Care Assistance * • Homemaking * • Personal Care * • Respite Care * 	<ul style="list-style-type: none"> • Adult Day Services * • Congregate Meals • Legal Assistance
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* Not PSA-wide

Planned Service Array Narrative

Describe the area agency'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.

The planned service array reflects the preferences of local communities within the PSA. The Upper Peninsula is uniquely rural with a population density of only 19 persons per square mile. This poses a significant problem in providing access to all older persons needing services. The primary barrier for seniors in this region is the inability to access community and medical services. Many who are no longer able to drive or keep up the family home do not always have access to affordable transportation and housing options. Additionally, most service providers are struggling with the cost of providing necessary services, particularly in the extremely rural areas of the region. Providers are expressing concerns over the impact of stagnant funding, increased fuel costs, the mandatory increase in the minimum wage, and workforce shortages. They are frustrated by the inability to maintain a consistent and experienced workforce at a price they can afford. The competitive bidding process used by the UPAAA allows partner agencies to pick and choose to provide services funded by the AAA. Some partners choose not to apply for funding for some services because they don't feel the need for that particular service in their community, or it may be because they feel the amount of funding is not sufficient to provide that service. Many partners often receive funding from other sources (federal and state grants, millage, etc) that allows them to expand on or provide other services they feel are needed in their local communities. UPAAA staff work closely with these partners to identify gaps in service, locate new sources of funding for necessary and requested services, and provide new programs that will help meet the changing needs of older adults within their communities.

ACCESS AND SERVICE COORDINATION CONTINUUM

It is essential that each PSA have an effective access and service coordination continuum. This helps participants to get the right service mix and maximizes the use of limited public funding to serve as many persons as possible in a quality way.

Instructions

The Access and Service Coordination Continuum is found in the Documents Library as a fillable pdf file. (A completed sample is also accessible there). Please enter specific information in each of the boxes below that describes the range of access and service coordination programs in the area agency PSA.

	Level 1	Level 2	Level 3	Level 4	Level 5
	<i>Least Intensive</i>				<i>Most Intensive</i>
Program	Information & Assistance				Care Management
Participants					
What Is Provided?					
Where is the service provided?					

Area Agency Name:

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Caregiver Programs: Complete the chart below. Include all programs that are offered within the PSA. Examples include, but are not limited to: Respite Voucher Programs, education programs, training programs, Support Groups, Regionally Specific Programs, Powerful Tools for Caregivers, Savvy, Dementia Caregiver Series, Trualta, etc. If you have any questions regarding completing this chart, please reach out to Lacey Charboneau at charboneaul2@michigan.gov.

Name of Caregiver Program	Available PSA Wide (Yes / No)	OAA Funded (Yes / No)	Agency's Comments (Optional)

Area Agency Name:

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Caregiver Programs: Complete the chart below. Include all programs that are offered within the PSA. Examples include, but are not limited to: Respite Voucher Programs, education programs, training programs, Support Groups, Regionally Specific Programs, Powerful Tools for Caregivers, Savvy, Dementia Caregiver Series, Trualta, etc. If you have any questions regarding completing this chart, please reach out to Lacey Charboneau at charboneaul2@michigan.gov.

Name of Caregiver Program	Available PSA Wide (Yes / No)	OAA Funded (Yes / No)	Agency's Comments (Optional)

EVIDENCE-BASED PROGRAMS PLANNED FOR FY 2025

Funded Under Disease Prevention Health Promotion Service Definition

Provide the information requested below for Evidence-Based Programs (EBDP) to be funded under Title III-D.

Title III-D funds can only be used on health promotion programs that meet the highest-level criteria as determined by the Administration for Community Living (ACL) Administration on Aging (AoA). Please see the “List of Approved EBDP Programs for Title III-D Funds” in the Document Library. Only programs from this list will be approved for FY 2025. If funding has been allocated as a single amount for all Title III-D programs for a provider, enter on first line under “Funding Amount for This Service”.

Program Name	Provider Name	Funding Amount for Service
<i>Example</i> Arthritis Exercise Program	<i>Example: List each provider offering programs on a single line as shown below.</i> 1) Forest City Senior League Program 2) Grove Township Senior Services 3) Friendly Avenue Services	<i>Example: Funding total for all providers</i> \$14,000

EMERGENCY MANAGEMENT AND PREPAREDNESS
Minimum Elements for Area Agencies on Aging
FY 2025 Annual Implementation Plan

After each general and nutrition minimum element for emergency preparedness, provide a brief description regarding how the AAA Emergency Preparedness Plan for FY 2025 will address the element.

Area Agency on Aging
A. General Emergency Preparedness Minimum Elements (required by the Older American's Act).
<p>1. Does your agency have an Emergency Preparedness Plan? If so when was the latest update and was it sent ACLS? If not, please sent to albrecht@michigan.gov and copy your assigned ACLS Field Representative.</p>
<p>2. Does your agency work with local emergency management? If yes, please provide a brief description of how you are working with them. If no, why?</p>
<p>3. ACLS does have expectations during a State or locally declared emergency/disaster to have staff person (the area agency director or their designee) available for communication with ACLS staff to provide real time information about service continuity (status of aging network service provider's ability to provide services). Please provide ACLS with any updated contact information on staff listed as emergency contact (this includes any drills conducted). This person should be able to provide information about the number and location of vulnerable older persons receiving services from the area agency.</p>
<p>4. What barriers have you had with emergency/disaster drills or with man-made or natural disaster such as flooding, pandemic, flu, and extreme weather?</p>
<p>5. What can ACLS do to assist the AAAs with emergency/disasters? Can include funding, communication issues and PPE for example.</p>

FY 2025 AREA PLAN GRANT BUDGET

Rev. 5/1/24

Agency: UPCAP Services Inc. - UPAAA

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

PSA: XI

Date: 05/08/24

Rev. No.: 0 Page 1of 3

SERVICES SUMMARY			
FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	595,601		595,601
2. Fed. Title III-C1 (Congregate)		787,515	787,515
3. State Congregate Nutrition		13,074	13,074
4. Federal Title III-C2 (HDM)		529,541	529,541
5. State Home Delivered Meals		648,720	648,720
8. Fed. Title III-D (Prev. Health)	45,113		45,113
9. Federal Title III-E (NFCSP)	289,926		289,926
10. Federal Title VII-A	18,940		18,940
10. Federal Title VII-EAP	8,886		8,886
11. State Access	39,024		39,024
12. State In-Home	1,032,279		1,032,279
13. State Alternative Care	152,591		152,591
14. State Care Management	431,825		431,825
15. St. ANS	60,855		60,855
16. St. Nursing Home Ombs (NHO)	42,546		42,546
17. Local Match			
a. Cash	66,100	52,000	118,100
b. In-Kind	256,600	176,500	433,100
18. State Respite Care (Escheat)	58,741		58,741
19. MATF	163,215		163,215
19. St. CG Support	20,139		20,139
20. TCM/Medicaid & MSO	17,311		17,311
21. NSIP		481,355	481,355
22. Program Income	44,700	1,230,000	1,274,700
TOTAL:	3,344,392	3,918,705	7,263,097

ADMINISTRATION				
Revenues		Local Cash	Local In-Kind	Total
Federal Administration	249,744	-	40,000	289,744
State Administration	43,374			43,374
MATF Administration	16,140	-	-	16,140
St. CG Support Administration	1,990	-	225	2,215
Other Admin				-
Total AIP Admin:	311,248	-	40,225	351,473

Expenditures		
	FTEs	
1. Salaries/Wages	2.46	167,842
2. Fringe Benefits		54,111
3. Office Operations		129,520
Total:		351,473

Cash Match Detail		In-Kind Match Detail	
Source	Amount	Source	Amount
1. Federal Admin	-	1. Federal Admin	40,000
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	225
	-		-
	-		-
Total:	-	Total:	40,225

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: UPCAP Services Inc. - UPAAA
 PSA: XI

Budget Period: 10/01/24 to 09/30/25
 Date: 05/08/24 Rev. No.: _____

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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 Supp	LCW/Medicaid MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
A	Access Services																			
A-1	Care Management	35,000		35,000			39,024			431,825		60,855					2,500	2,500	65,000	671,704
A-2	Case Coordination/Support																			
A-3	Disaster Advocacy & Outreach Program																			
A-4	Information & Assistance	35,000		35,000															8,000	78,000
A-5	Outreach																			
A-6	Transportation	12,000															1,500		1,500	15,000
A-7	Options Counseling																			
A-8	Care Transition Coordination and Support																			
B	In-Home																			
B-1	Chore	6,992															200		800	7,992
B-2	Home Care Assistance																			
B-3	Home Injury Control	11,000																	1,500	12,500
B-4	Homemaking	90,500						550,000	65,000								18,000	35,000	45,000	803,500
B-6	Home Health Aide																			
B-7	Medication Management	11,000																	1,500	12,500
B-8	Personal Care	111,000						232,279	69,091								10,000	12,000	34,000	468,370
B-9	Assistive Device & Technology	7,000																	800	7,800
B-10	Respite Care	60,000		75,000				250,000	18,500				58,741	70,215	8,639		11,000	15,000	45,000	612,095
B-11	Friendly Reassurance	6,000																	700	6,700
C	Community Services																			
C-1	Adult Day Services	40,000		39,926										93,000	11,500		1,500	1,000	10,000	196,926
C-6	Disease Prevention/Health Promotion		45,113																5,100	50,213
C-7	Health Screening																			
C-8	Assistance to Hearing Impaired & Deaf Community																			
C-9	Home Repair																			
C-10	Legal Assistance	40,000																	4,600	44,600
C-11	LTC Ombudsman	7,009				18,940					42,546					17,311			7,500	93,306
C-12	Senior Center Operations																			
C-13	Senior Center Staffing																			
C-14	Vision Services																			
C-15	Programs for Prevention of Elder Abuse, Neglect, Exploitation				8,886															8,886
C-16	Counseling Services																			
C-18	Caregiver Supplement Services																			
C-19	Kinship Support Services			15,000															1,800	16,800
C-21	Caregiver Education			9,000														100	1,000	10,100
C-22	Caregiver Training			33,000														500	3,500	37,000
C-23	Caregiver Support Groups			8,000															1,000	9,000
*C-8	Program Development	119,100																		13,300
	Region Specific																			
	a. Critical/Emergent Unmet Needs	2,000																		250
	b. Nursing Services	2,000																		250
	c. Caregiver Case Management			40,000																4,500
	d.																			
	e.																			
	f.																			
Sp Co	8. MATF Adm													16,140						16,140
Sp Co	9. ST CG Sup Adm														1,990				225	2,215
	SUPPORT SERVICE TOTAL	595,601	45,113	289,926	8,886	18,940	39,024	1,032,279	152,591	431,825	42,546	60,855	58,741	179,355	22,129	17,311	44,700	66,100	256,825	3,362,747

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

Rev. 5/1/24

Agency: UPCAP Services Inc. - UPAAA Budget Period: 10/01/24 to 9/30/25
 PSA: XI Date: 05/08/24 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	747,515		13,074		162,000		490,000	16,000	74,600	1,503,189
B-5	Home Delivered Meals		447,541		548,620	294,355		643,000	30,000	88,800	2,052,316
C-4	Nutrition Counseling										-
C-5	Nutrition Education										-
B-12	Carry-out Meal (COM)		62,000		100,100	25,000		97,000	6,000	13,100	303,200
	GAP Filling with nutrition										
	AAA RD/Nutritionist*	40,000	20,000								60,000
	Nutrition Services Total	787,515	529,541	13,074	648,720	481,355	-	1,230,000	52,000	176,500	3,918,705

*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	7,009	18,940	-	42,546	17,311	-	-	7,500	93,306
C-15	Elder Abuse Prevention	-		8,886			-	-	-	8,886
	Region Specific	-	-	-			-	-	-	-
	LTC Ombudsman Ser Total	7,009	18,940	8,886	42,546	17,311	-	-	7,500	102,192

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	-	15,000				-		1,800	16,800
C-21	Caregiver Education	-					-		-	-
C-22	Caregiver Training	-					-		-	-
C-23	Caregiver Support Groups	-	-				-		-	-
	Kinship Services Total	-	15,000				-		1,800	16,800

Planned Services Summary Page for FY 2025			PSA: XI			
Service	Budgeted Funds	Percent of the Total	Method of Provision			
			Purchased	Contract	Direct	
ACCESS SERVICES						
Care Management	\$ 671,704	9.22%			X	
Case Coordination & Support	\$ -	0.00%				
Disaster Advocacy & Outreach Program	\$ -	0.00%				
Information & Assistance	\$ 78,000	1.07%			X	
Outreach	\$ -	0.00%				
Transportation	\$ 15,000	0.21%	X	X		
Option Counseling	\$ -	0.00%				
Care Transition Coordination and Support	\$ -	0.00%				
IN-HOME SERVICES						
Chore	\$ 7,992	0.11%	X	X		
Home Care Assistance	\$ -	0.00%				
Home Injury Control	\$ 12,500	0.17%	X	X		
Homemaking	\$ 803,500	11.03%	X	X		
Home Delivered Meals	\$ 2,052,316	28.19%	X	X		
Home Health Aide	\$ -	0.00%				
Medication Management	\$ 12,500	0.17%	X	X		
Personal Care	\$ 468,370	6.43%	X	X		
Personal Emergency Response System	\$ 7,800	0.11%	X	X		
Respite Care	\$ 612,095	8.41%	X	X		
Friendly Reassurance	\$ 6,700	0.09%		X		
COMMUNITY SERVICES						
Adult Day Services	\$ 196,926	2.70%	X	X		
Congregate Meals	\$ 1,503,189	20.64%		X		
Nutrition Counseling	\$ -	0.00%				
Nutrition Education	\$ -	0.00%				
Disease Prevention/Health Promotion	\$ 50,213	0.69%			X	
Health Screening	\$ -	0.00%				
Assistance to the Hearing Impaired & Deaf Community	\$ -	0.00%				
Home Repair	\$ -	0.00%				
Legal Assistance	\$ 44,600	0.61%		X		
Long Term Care Ombudsman/Advocacy	\$ 93,306	1.28%			X	
Senior Center Operations	\$ -	0.00%				
Senior Center Staffing	\$ -	0.00%				
Vision Services	\$ -	0.00%				
Programs for Prevention of Elder Abuse, Neglect, & Counseling Services	\$ 8,886	0.12%			X	
Carry-Out Meal (COM)	\$ 303,200	4.16%	X	X		
Caregiver Supplemental Services	\$ -	0.00%				
Kinship Support Services	\$ 16,800	0.23%			X	
Caregiver Education	\$ 10,100	0.14%			X	
Caregiver Training	\$ 37,000	0.51%		X	X	
Caregiver Support Groups	\$ 9,000	0.12%			X	
AAA RD/Nutritionist	\$ 60,000	0.82%			X	
PROGRAM DEVELOPMENT	\$ 132,400	1.82%			X	
REGION-SPECIFIC						
a. Critical/Emergent Unmet Needs	\$ 2,250	0.03%	X	X		
b. Nursing Services	\$ 2,250	0.03%	X	X		
c. Caregiver Case Management	\$ 44,500	0.61%			X	
d.	\$ -	0.00%				
e.	\$ -	0.00%				
f.	\$ -	0.00%				
SUBTOTAL SERVICES						
	\$ 7,263,097					
MATF & ST CG ADMINISTRATION						
	\$ 18,355	0.25%			X	
TOTAL PERCENT			100.00%	1.79%	82.49%	15.72%
TOTAL FUNDING		\$ 7,281,452		\$130,000	\$6,006,788	\$1,144,664

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

FY 2025 BUDGET REVIEW SPREADSHEET

Rev. 5/1/24

Agency:	UPCAP Services	11		Fiscal Year:	FY 2025
Date of SGA:	1/23/2024	SGA No.	Est Allocation	Date Reviewed by AASA:	
Date of Budget:	05/08/24	Revision No.	0	Initials of Field Rep Approving:	
SGA CATEGORY	SGA AWARD	C/O AMOUNT	TOTAL	AAA COMMENTS	
Title III Administration	\$ 249,744		\$ 249,744		
State Administration	\$ 43,374		\$ 43,374		
Title III-B Services	\$ 595,601		\$ 595,601		
Title III-C-1 Services	\$ 787,515		\$ 787,515		
Title III-C-2 Services	\$ 529,541		\$ 529,541		
Federal Title III-D (Prev. Health)	\$ 45,113		\$ 45,113		
Title III-E Services (NFCSP)	\$ 289,926		\$ 289,926		
Title VII/A Services (LTC Ombuds)	\$ 18,940		\$ 18,940		
Title VII/EAP Services	\$ 8,886		\$ 8,886		
St. Access	\$ 39,024		\$ 39,024		
St. In Home	\$ 1,032,279		\$ 1,032,279		
St. Congregate Meals	\$ 13,074		\$ 13,074		
St. Home Delivered Meals	\$ 648,720		\$ 648,720		
St. Alternative Care	\$ 152,591		\$ 152,591		
St. Aging Network Srv. (St. ANS)	\$ 60,855		\$ 60,855		
St. Respite Care (Escheats)	\$ 58,741		\$ 58,741		
Merit Award Trust Fund (MATF)	\$ 179,355		\$ 179,355		
St. Caregiver Support (St. CG Sup.)	\$ 22,129		\$ 22,129		
St. Nursing Home Ombuds (NHO)	\$ 42,546		\$ 42,546		
MSO Fund-LTC Ombudsman	\$ 17,311		\$ 17,311		
St. Care Mgt.	\$ 431,825		\$ 431,825		
NSIP	\$ 481,355		\$ 481,355		
			\$ -		
SGA TOTALS:	\$ 5,748,445	\$ -	\$ 5,748,445		
Administrative Match Requirements					
ADMINISTRATION	BUDGET	SGA	DIFFERENCE		
Federal Administration	\$ 249,744	\$ 249,744	\$ -	Minimum federal administration match amount	\$83,248
State Administration	\$ 43,374	\$ 43,374	\$ -	Administration match expended (State Adm. + Local Match)	\$83,599
				Is the federal administration matched at a minimum 25%?	Yes
				Does federal administration budget equal SGA?	Yes
Sub-Total:	\$ 293,118	\$ 293,118	\$ -	Does state administration budget equal SGA?	Yes
MATF	\$ 16,140				
ST CG Supp	\$ 1,990				
Local Administrative Match				Merit Award Trust Admin. & St. Caregiver Support Admin must be expended at or below 9% of	
Local Cash Match	\$ -			Total Merit Award Trust Fund & St. Caregiver Support Admin. Funds budgeted:	16140.00988
Local In-Kind Match	\$ 40,225			Is Merit Award Trust Fund & St CG Support Admin. budgeted at 9% or less?	Yes
Sub-Total:	\$ 40,225				
Other Admin	\$ -	AIP TOT ADMIN	DIFFERENCE		
Total Administration:	\$ 351,473	\$ 351,473	\$ -		
Title III-E Kinship Services Program Requirements					
SERVICES:	BUDGET	SGA	% BUDGETED		
Federal Title III-B Services	\$ 595,601	\$ 595,601	100.0000%	Are kinship services budgeted at > 5% of the AAA's Title III-E funding?	Yes
Fed. Title III C-1 (Congregate)	\$ 787,515	\$ 787,515	100.0000%		
State Congregate Nutrition	\$ 13,074	\$ 13,074	100.0000%	[note: see TL #369 & TL#2007-141]	
Federal C-2 (HDM)	\$ 529,541	\$ 529,541	100.0000%	For Agencies required to budget a minimum of \$25,000 of Title III-E requirement met?	N/A
State Home Delivered Meals	\$ 648,720	\$ 648,720	100.0000%	Title III-B Long Term Care Ombudsman Maintenance of Effort Requirements	
Federal Title III-D (Prev. Health)	\$ 45,113	\$ 45,113	100.0000%	Amount required from Transmittal Letter #2020-431. (see cell L 42)	\$7,009
Federal Title III-E (NFCSP)	\$ 289,926	\$ 289,926	100.0000%	Budgeted amount Title III-B for LTC Ombudsman.	\$7,009
St. Access	\$ 39,024	\$ 39,024	100.0000%	Is required maintenance of effort met?	Yes
St. In Home	\$ 1,032,279	\$ 1,032,279	100.0000%		
St. Alternative Care	\$ 152,591	\$ 152,591	100.0000%		
St. Care Mgt.	\$ 431,825	\$ 431,825	100.0000%	Service Match Requirements	
State Nursing Home Ombs (NHO)	\$ 42,546	\$ 42,546	100.0000%	Minimum service match amount required	\$522,895
St ANS	\$ 60,855	\$ 60,855	100.0000%	Service matched budgeted: (Local Cash + In-Kind)	\$551,200
Sub-Total:	\$ 4,668,610	\$ 4,668,610	100.0000%	Is the service allotment matched at a minimum 10%?	Yes
Miscellaneous Budget Requirements / Constraints					
Local Service Match				Amounts budgeted for OAA / AASA Priority Services:	
Local Cash Match	\$ 118,100			Access:	\$82,000
Local In-Kind Match	\$ 433,100			In-Home:	\$303,492
				Legal:	\$40,000
Sub-Total:	\$ 551,200			Total Budgeted for Priority Services:	\$425,492
Title VII/A Services (LTC Ombuds)	\$ 18,940	\$ 18,940	100.0000%	Are Access Services budgeted at minimum 10% of Original ACL Title III-B	Yes
Title VII/EAP Services	\$ 8,886	\$ 8,886	100.0000%	Are In Home Services budgeted at minimum 10% of Original ACL Title III-B	Yes
NSIP	\$ 481,355	\$ 481,355	100.0000%	Are Legal Services budgeted at minimum 6.5% of Original ACL Title III-B	Yes
St. Respite Care (Escheats)	\$ 58,741	\$ 58,741	100.0000%	(Actual % of Legal)	6.72%
MATF	\$ 163,215	\$ 163,215	100.0000%		
St. CG Support	\$ 20,139	\$ 20,139	100.0000%	Title III-B award w/o carryover or Transfers in current SGA	\$595,601
MSO Fund-LTC Ombudsman	\$ 17,311	\$ 17,311	100.0000%	Amount budgeted for Program Development:	\$119,100
TCM-Medicaid / CM	\$ -			% of Title III-B Program Development (must be 20% or less):	20.0%
Program Income	\$ 1,274,700			Is Program Development budgeted at 20% or less?	Yes
				Title III-D allotment with carryover:	\$45,113
Total Services:	\$ 7,263,097			Amount budgeted for EBDP Activities, per TL#2012-244:	\$45,113
Grand Total: Ser.+ Admin.	\$ 7,814,570			Is 100% of Title III-D budgeted on APPROVED EBDP?	Yes

PRIORITY SERVICE SECTION

Access Services	III-B Budget Amount
a. Care Management	\$35,000
b. Case Coord/supp	\$0
c. Disaster Advocacy	\$0
d. Information & Assis	\$35,000
e. Outreach	\$0
f. Transportation	\$12,000
Access Total:	\$82,000

(AAA Regional Access Service)

In Home Services	III-B Budget Amount
a. Chore	\$6,992
b. Home Care Assis	\$0
c. Home Injury Cntrl	\$11,000
d. Homemaking	\$90,500
e. Home Health Aide	\$0
f. Medication Mgt	\$11,000
g. Personal Care	\$111,000
h. Assistive Device&Tech	\$7,000
i. Respite Care	\$60,000
j. Friendly Reassure	\$6,000
In Home Services Total:	\$303,492

(AAA Regional In-Home Service)
(AAA Regional In-Home Service)

Kinship Services	III-E Budget Amount
1. Caregiver Supplmt - Kinship Amount Only	\$0
2. Kinship Support	\$15,000
3. Caregiver Education - Kinship Amount Only	
4. Caregiver Training - Kinship Amount Only	
5. Caregiver Support Groups - Kinship Amount Only	\$0
Kinship Services Total:	\$15,000

(Other Title III-E Kinship Service)
(Other Title III-E Kinship Service)

(Use ONLY If SGA Reflects Transfers)

Title III-B Transfers reflected in SGA	Title III-B Award
Title III-B award w/o carryover in SGA	\$595,601
a. Amt. Transferred into Title III-B	
b. Amt. Transferred out of Title III-B	
AoA Title III-B Award Total:	\$595,601

(Always Enter Positive Number)
(Always Enter Positive Number)

NOTE: AoA Title III Part B award for the current FY means total award from AoA without carryover or transfers.

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #1**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Care Management

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	44,111		335,566	2,500	2,500	65,000		449,677
Fringe Benefits	15,526		116,611					132,137
Travel	2,713		20,237					22,950
Training	567		4,133					4,700
Supplies	664		5,636					6,300
Occupancy	1,870		15,230					17,100
Communications	688		5,572					6,260
Equipment	350		2,850					3,200
Other:	3,511		25,869					29,380
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	70,000	0	531,704	2,500	2,500	65,000	0	671,704

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #1

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		65,000			Audit Fees Contracted Services (CIM) Insurance Advertising
Local Resources	2,500				
Totals	2,500	65,000	0	0	

Difference 0 0 0

OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #2**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Information & Assistance

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries								0
Fringe Benefits								0
Travel								0
Training								0
Supplies								0
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs	70,000					8,000		78,000
Purchased Services (CM only)								0
								0
Totals	70,000	0	0	0	0	8,000	0	78,000

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

Explanation for Other Expenses:

SCHEDULE OF MATCH & OTHER RESOURCES #2

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Donated Services - Call Center		8,000			
Totals	0	8,000	0	0	

Difference 0 0 0 0
 OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #3**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Disease Prevention / Health Promotion

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	26,818					5,100		31,918
Fringe Benefits	8,355							8,355
Travel	1,300							1,300
Training	1,900							1,900
Supplies	800							800
Occupancy	3,800							3,800
Communications	1,290							1,290
Equipment	450							450
Other:	400							400
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	45,113	0	0	0	0	5,100	0	50,213

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #3

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		5,100			Dues & Subscriptions
Totals	0	5,100	0	0	

Difference 0 0 0 0

OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #4**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Long Term Care Ombudsman

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	5,101	13,784	43,562			7,500		69,947
Fringe Benefits	486	1,314	4,154					5,954
Travel	826	2,232	7,055					10,113
Training	28	75	235					338
Supplies	69	186	588					843
Occupancy	413	1,116	3,528					5,057
Communications	69	186	588					843
Equipment								0
Other:	17	47	147					211
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	7,009	18,940	59,857	0	0	7,500	0	93,306

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #4

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		7,500			Insurance
Totals	0	7,500	0	0	

Difference 0 0 0 0

OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #5**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Prevention of Elder Abuse, Neglect, Exploitation

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	4,304							4,304
Fringe Benefits	1,597							1,597
Travel	1,000							1,000
Training	250							250
Supplies	370							370
Occupancy	1,200							1,200
Communications	165							165
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	8,886	0	0	0	0	0	0	8,886

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #5

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Totals	0	0	0	0	

Difference

OK

OK

OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #6**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Kinship Support Services

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries								0
Fringe Benefits								0
Travel								0
Training								0
Supplies								0
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs	15,000					1,800		16,800
Purchased Services (CM only)								0
								0
Totals	15,000	0	0	0	0	1,800	0	16,800

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #6

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Donated Supplies		1,800			
Totals	0	1,800	0	0	

Difference 0 0 0 0
OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #7**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Caregiver Education

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	5,363					1,100		6,463
Fringe Benefits	2,055							2,055
Travel	443							443
Training	269							269
Supplies	255							255
Occupancy	403							403
Communications	64							64
Equipment	134							134
Other:	14							14
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	9,000	0	0	0	0	1,100	0	10,100

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA) _____

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? _____

Yes No

If yes, please describe: _____

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		1,100			Dues & Subscriptions
Totals	0	1,100	0	0	

Difference 0 0 0 0

OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #8**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Caregiver Training

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	5,959					1,400		7,359
Fringe Benefits	2,283							2,283
Travel	493							493
Training	299							299
Supplies	283							283
Occupancy	448							448
Communications	71							71
Equipment	149							149
Other:	15							15
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	10,000	0	0	0	0	1,400	0	11,400

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		1,400			Dues & Subscriptions
Totals	0	1,400	0	0	

Difference 0 0 0 0
OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #9**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Caregiver Support Groups

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	4,767					1,000		5,767
Fringe Benefits	1,827							1,827
Travel	394							394
Training	239							239
Supplies	227							227
Occupancy	358							358
Communications	57							57
Equipment	119							119
Other:	12							12
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	8,000	0	0	0	0	1,000	0	9,000

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		1,000			Dues & Subscriptions
Totals	0	1,000	0	0	

Difference 0 0 0 0
 OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #10**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Nutritionist

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	39,492							39,492
Fringe Benefits	13,138							13,138
Travel	1,860							1,860
Training	180							180
Supplies	200							200
Occupancy	4,630							4,630
Communications	500							500
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	60,000	0	0	0	0	0	0	60,000

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes X No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Totals	0	0	0	0	

Difference

0

0

0

OK

OK

OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #11**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Program Development

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	83,697					13,300		96,997
Fringe Benefits	19,403							19,403
Travel	1,100							1,100
Training	900							900
Supplies	2,200							2,200
Occupancy	7,000							7,000
Communications	3,300							3,300
Equipment	1,200							1,200
Other:	300							300
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	119,100	0	0	0	0	13,300	0	132,400

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		13,300			Dues & Subscriptions
Totals	0	13,300	0	0	

Difference 0 0 0 0
OK OK OK

**FY 2025 Annual Implementation Plan
Direct Service Budget Detail #12**

AAA: UPCAP Services Inc. - UPAAA

FISCAL YEAR: FY 2025

SERVICE: Caregiver Case Management

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	23,835					4,500		28,335
Fringe Benefits	9,135							9,135
Travel	1,970							1,970
Training	1,194							1,194
Supplies	1,134							1,134
Occupancy	1,791							1,791
Communications	284							284
Equipment	597							597
Other:	60							60
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	40,000	0	0	0	0	4,500	0	44,500

SERVICE AREA: UPAAA

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP?

Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES

FY 2025

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Volunteer Time		4,500			Dues & Subscriptions
Totals	0	4,500	0	0	

Difference 0 0 0 0
OK OK OK

Fundable Services Matrix Updated attachment to TL #2024-499

ACCESS SERVICES

ACCESS SERVICES												
Operating Standard Service Number	Operating Standard Service Name	Federal Funds				State Funds						
		Title III B Supportive Services	Title III D Services (Preventive Health) **	Title III E Services National Family Caregiver Support (NFCSP)	Title VIIA Services (Long-Term Care Ombudsman) and Title VII Elder Abuse Prevention (EAP)	State Access	State Care Management	State Respite Care (Escheats)	State In Home	State Merit Award Trust Fund (MATF)	State Caregiver Support (St. CG Sup.)	State Aging Network Services (St. ANS)
A 1	Care Management	X		X		X	X					X
A 2	Case Coordination & Support	X		X		X	X					X
A 3	Disaster Advocacy & Outreach Program	X										
A 4	Information & Assistance	X		X		X						X
A 5	Outreach	X		X		X						X
A 6	Transportation (For MATF & St. CG Sup. only) adult day service and respite related transport of service recipients including related medical and shopping assistance is allowed.	X		X						X	X	
A 7	Options Counseling	X		X		X	X					X
A-8	Care Transition Coordination and Support	X				X	X		X			

IN-HOME SERVICES

IN-HOME SERVICES												
Operating Standard Service Number	Operating Standard Service Name	Federal Funds				State Funds						
		Title III B Supportive Services	Title III D Services (Preventive Health) **	Title III E Services National Family Caregiver Support (NFCSP)	Title VIIA Services (Long-Term Care Ombudsman) and Title VII Elder Abuse Prevention (EAP)	State Access	State Alternate Care	State Respite Care (Escheats)	State In Home	State Merit Award Trust Fund (MATF)	State Caregiver Support (St. CG Sup.)	State Aging Network Services (St. ANS)
B 1	Chore	X										
B 2	Home Care Assistance	X					X		X			X
B 3	Home Injury Control	X		X								
B 4	Homemaking	X					X		X			X
B 6	Home Health Aide	X					X		X			X
B 7	Medication Management	X					X		X			X
B 8	Personal Care	X					X		X			X
B 9	Assistive Devices & Technologies (PERS)	X		X			X		X			X
B 10	Respite Care (may also include chore, homemaking, home care assistance, home health aide, meal prep./HDM & personal care serv. as a form of respite care)	X		X			X	X	X	X	X	X
B 11	Friendly Reassurance	X										

COMMUNITY SERVICES

Operating Standard Service Number	Operating Standard Service Name	Federal Funds				State Funds						
		Title III B Supportive Services	Title III D Services (Preventive Health)**	Title III E Services National Family Caregiver Support (NFCSP)	Title VIIA Services (Long-Term Care Ombudsman) and Title VII Elder Abuse Prevention (EAP)	State Nursing Home Ombudsman (NHO)	State Alternate Care	State Respite Care (Escheats)	MI State Ombudsman (MSO)	State Merit Award Trust Fund (MATF)	State Caregiver Support (St. CG Sup.)	State Aging Network Services (St. ANS)
C 1	Adult Day Service	X		X			X	X		X		X
C 6	Disease Prevention/Health Promotion	X	X	X								
C 7	Health Screening	X										
C 8	Assistance to Hearing Impaired & Deaf	X										
C 9	Home Repair	X										
C 10	Legal Assistance	X		X								
C 11	Long Term Care Ombudsman	X			Title VII A X	X			X			
C 12	Senior Center Operations	X										
C 13	Senior Center Staffing	X										
C 14	Vision Services	X										
C 15	Prevention of Elder Abuse, Neglect & Exploitation	X			Title VII A & EAP							
C 16	Counseling Services	X		X								
C 18	Caregiver Supplemental Services	X		X								
C 19	Kinship Support Services	X		X								
C 21	Caregiver Education	X		X								
C-22	Caregiver Training	X		X								
C-23	Caregiver Support Groups	X		X								

NUTRITION SERVICES								
Operating Standard Service Number	Operating Standard Service Name	Federal Funds				State Funds		Requirements from ACLS Bureau Transmittal Letters (TL) that establishes Fundable Service Categories
		Title III C1 Congregate	Title III C2 Home Delivered Meals	Title III E Services National Family Caregiver Support (NFCSP)	Nutrition Services Incentive Program *(NSIP)	State Congregate	State Home Delivered Meals	
C 3	Congregate Meals	X			X	X		Replaces: TL 367, 2005 102, and 2007 142 See TL 343 and TL 2006 111 for guidance re St. MATF See TL 2012 244 for guidance regarding Title III-D See TL 2012 256 for guidance regarding State Aging Network - Revised 7/26/17
B 5	Home Delivered Meals		X	X	X		X	
C 4	Nutrition Counseling	X	X	X		X	X	
C 5	Nutrition Education	X	X	X		X	X	
B-12	Carry-Out Meal (COM)		X	X	X		X	

*NSIP funds are designated for actual food costs for Older Americans Act Title III eligible meals.

**Title III D - All Funds must be used for Evidence-Based programs.

Title III Administration
 State Administration
 Title IIIB Supportive Services
 Title IIIC 1 Services Congregate Meals
 Title IIIC 2 Services Home Delivered Meals
 Title IIID Services (Preventive Health)
 Title IIIE Services (NFCSP) National Family Caregiver Support
 Title VII/A Services (LTC Ombudsman)
 Title VII/EAP Services Elder Abuse Prevention
 State Access Services
 State In Home Services
 State Congregate Meals

Federal
 State
 Federal
 Federal
 Federal
 Federal
 Federal
 Federal
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 State
 State
 State

Title III Administration
 State Administration
 Title IIIB Supportive Services
 Title IIIC-1 Congregate Meals
 Title IIIC-2 Home Delivered Meals
 Title IIID Preventive Health
 Title IIIE Natl. Family Caregiver
 Title VII/A LTC Ombudsman
 Title VII/EAP Eld Abuse Prevention
 State Access Services
 State In-Home Services
 State Congregate Meals

State Home Delivered Meals
State Alternative Care
State Aging Network Services (St. ANS)
State Caregiver Support
State Respite Care
State Merit Award Trust Fund (MATF)
State Nursing Home Ombs
Michigan State Ombudsman (MSO)
State Care Management
Nutrition Services Incentive Program (NSIP)

State
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State
Federal

State Home Delivered Meals
State Alternative Care
State Aging Network Services (St. ANS)
State Caregiver Support
State Respite Care
State Merit Award
State Nursing Home Ombs
Michigan State Ombudsman (MSO)
State Care Management
Nutrition Services Incentive Program (NSIP)

MATCHING REQUIREMENTS

Revision date 2/2/2016

Revision to Transmittal Letter #2016-323

FEDERAL ADMINISTRATION TOTAL - MATCH REQUIRED: 25%

STATE 15%^[2] (AASA)

LOCAL 10% (AAAs)

FEDERAL & STATE SERVICES TOTAL - MATCH REQUIRED: 15%

STATE 5% (AASA)

LOCAL 10% (AAAs)

Table 1 below describes these requirements by source of funds.

Table 1 AAA Local Matching Requirement by Fund Source

Funding Source	Fund Source Name	AAA Local Match Requirement	Reference
Federal	Title III Administration	15% (a)	OAA of 1965 (d)
Federal	Title IIIB Supportive Services	10%	OAA of 1965
Federal	Title IIIC-1 Congregate Meals	10%	OAA of 1965
Federal	Title IIIC-2 Home Delivered Meals	10%	OAA of 1965
Federal	Title III-D Preventive Health	10%	OAA of 1965
Federal	Title III-E Natl. Family Caregiver	10%	OAA of 1965
Federal	Title VII/EAP Eld Abuse Prevention	No Match Required	ACL CFDA
Federal	Title VII/A LTC Ombudsman	No Match Required	AoA Fiscal Guide (b)
Federal	Nutrition Services Incentive Program	No Match Required	AoA Fiscal Guide
State	State Administration	No Match Required	AASA
State	State Access Services	10%	AASA
State	State In-Home Services	10%	AASA
State	State Congregate Meals	10%	AASA
State	State Home Delivered Meals	10%	AASA
State	State Nursing Home Ombudsman	10%	AASA
State	State Alternative Care	10%	AASA
State	MI State Ombudsman Funds (MSO)	10%	AASA
State	State Merit Award Trust Fund	No Match Required	AASA TL #1006 (7/28/09)
State	State Caregiver Support	10%	AASA
State	State Respite Care	No Match Required	Public Act 171 of 1990
State	State Care Management	10%	AASA
State	State Aging Network Services	10%	AASA

(a) 15% is an approximate amount and may vary slightly after applying the state match amount.

(b) AoA is the acronym for the federal Administration on Aging

(c) Michigan Office of Long Term Care Supports and Services (OLTCSS)

(d) OAA is the acronym for the Older Americans Act

Per AoA requirements, if the required non-federal share is not provided by the completion date of the funded project period, to meet the match percentage, AoA will reduce the Federal dollars awarded when closing out the award, which may result in a requirement to return Federal funds. AASA verifies compliance with local matching requirements based upon a review of AAA FSRs.

[2] The exact percentage amount may vary slightly in order to meet the federal requirement.