

Northeast Nebraska Area Agency on Aging

Four-Year Area Plan FY 2020-2023

July 1, 2019 through June 30, 2023

Annual Budget

July 1, 2022 through June 30, 2023

Grantor:

State Unit on Aging

Division of Medicaid & Long-Term Care

Department of Health & Human Services

P.O. Box 95026

Lincoln, NE 68509

AREA AGENCY ON AGING: Northeast Nebraska Area Agency on Aging

Application to operate a service project for older Nebraskans under the Older Americans Act, as reauthorized and amended for the period beginning July 1, 2022 and ending June 30, 2023 in planning and service area.

AND

Annual application for support for the period beginning July 1, 2022 and ending June 30, 2023

The applicant agrees to comply with all federal state and local rules, regulations and policies as outlined in the Older Americans Act, as amended; the Nebraska Community Aging Services Act, the Nebraska Care Management Act, the Local Long-Term Care Ombudsman Program; policies and/or regulations established by the HHS-State Unit of Aging and all other applicable rules, regulations, assurances and ordinances. This includes assurances included in this document.

GRANTEE:	Area Agency on Aging Governing Board Chairperson (or comparable official authorized to sign this document):
Name: <u>Northeast Nebraska Area Agency on Aging</u>	Name: <u>Dennis Kment</u>
Address: <u>119 W Norfolk Avenue</u>	Address: <u>56779 Golf Course Rd</u>
City: <u>Norfolk</u> , NE Zip <u>68701</u>	City: <u>Stanton</u> , NE Zip <u>68779</u>
Phone: <u>(402) 370-3454</u>	Phone: _____
Executive Officer: <u>Connie Cooper</u>	

APPLICATION FOR FUNDS 7/1/2022 through 6/30/2023

(Lines 17a, 17b, 17c, 18a, 18b, 18c, & 19)

III-B - Supportive Services	<u>\$1,166,515.00</u>
III-C(1) - Congregate Meals	<u>\$504,809.00</u>
III-C(2) - Home-Delivered Meals	<u>\$600,936.00</u>
III-D - Disease Prevention & Health Promotion	<u>\$26,857.00</u>
III-E - Family Caregivers Support Program	<u>\$323,770.00</u>
VII-Ombudsman & Elder Abuse	<u>\$59,707.00</u>
State Funds (such as Care Management, ADRC, Senior Volunteer) (Lines 17a, 17b, 17c, & 19)	<u>\$397,943.00</u>
SUBTOTAL	<u>\$3,080,537.00</u>


Area Agency on Aging Composite Match (Lines 14a-15b)	<u>\$14,163.00</u>
Area Agency on Aging Composite Non-Match (Lines 10 - 12b)	<u>\$1,813,905.00</u>
Area Agency on Aging Composite Gross Cost (Line 9)	<u>\$4,823,904.00</u>

I hereby certify that I am authorized to submit this application and plan

Signed:



 Connie Cooper
 Executive Officer
 Northeast Nebraska Area Agency on Aging



 Dennis Kment
 Chairperson
 Northeast Nebraska Area Agency on Aging

SIGNED COPY INCLUDED WITH STATE PLAN

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NENAAA

05/01/2022

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Northeast Nebraska Area Agency on Aging Four Year Plan 2020-2023

Section A Administrative

Description of the Area Agency on Aging

The Northeast Nebraska Area Agency on Aging, which is Planning and Service area “C”, received designation from the State of Nebraska in 1978.

The Northeast Nebraska Area Agency on Aging encompasses 22 counties in Northern Nebraska. Member counties provide a member of its County Board or an appointed alternate to serve on the Governing Board of the Northeast Nebraska Area Agency on Aging. The central office is located at 119 West Norfolk Avenue in Norfolk, NE.

All 22 counties are currently receiving services. Twenty-one of the participating counties receive funding for senior center programs. Keya Paha County is a non-participating county; they do not have a funded senior center in the county.

Mission

The mission of the Northeast Nebraska Area Agency on Aging is to assist older persons to remain independent with dignity in their homes.

History of The Northeast Nebraska Area Agency on Aging

The Northeast Nebraska Area Agency on Aging is one of eight Area Agencies on Aging in the State of Nebraska. It received designation in March of 1978.

The history of aging services began with the Older Americans Act of 1965. In 1972 and again in 1973, the Act was revised to include the formation of Area Agencies on Aging throughout the country. Through a Research and Development Grant, counties/cities were invited to join an inter-local agreement to provide senior citizen services. In 1977, a needs assessment was completed.

An organizational meeting was held February 22, 1978 with 12 counties/cities participating in the inter-local agreement. Norfolk was chosen as the office location site with by-laws approved and officers elected. By March 1978, 16 counties/cities had signed the inter-local agreement and had appointed representatives to the Governing Board. In 1988, 20 counties/cities were participating members. In 2018, there are 22 counties/cities as participating members.

In 1978, there were nine senior centers providing nutrition services in the service area and six centers providing social services. In 1988, there were 43 senior centers, of these, 30 provided nutrition services. In 2011, the Agency has 42 nutrition/supportive service programs and 6 sites with supportive service programs. In 2018, there are 40 nutrition/supportive sites and 6 sites with supportive service programs. The Walthill Senior Center was one of the first senior centers in the nation and celebrated its 50th anniversary in 2018.

Care Management, originally known as Project Independence, was started in 1983 in Cedar and Knox counties. It is now available in the 22-county service area. This program is developed to help the older adult maintain their independence in their own home as long as possible. A comprehensive assessment will be completed to identify the strengths and needs of the older adult. From the assessment, a care plan is developed, and services coordinated and implemented. The care plan is then monitored and evaluated to ensure appropriate services are provided.

The Northeast Area Agency on Aging provides a variety of long-term care services. In-home services such as chore, housekeeping, respite, emergency response system and personal care are available in the service area. Service is provided based on the availability of funds and established criteria.

Senior Care Options is a legislative mandate which is available for older Nebraskans who are considering admission to a nursing home and want Medicaid to pay for the care. Senior Care Options finds the right care at the right time, saves taxpayer dollars by making Medicaid efficient and allows older adults to live independently for as long as possible.

Beginning July 1, 1998, the Nebraska Health and Human Services contracted with the Northeast Nebraska Area Agency on Aging to provide services coordination for persons 65 and older through the Medicaid Aged and Disabled Home and Community-Based Waiver program. This includes authority for eligibility determination, services coordination, and resource development.

In 2001, the Agency started a volunteer Ombudsman program in Madison, Pierce and Stanton counties. The Ombudsman program has expanded to all counties in the service area except Cherry County. The program protects the rights, dignity, safety and quality of life of residents in nursing facilities and assisted living facilities through advocacy, mediation, negotiation and education. The program has 15 trained Ombudsman volunteers.

With the reauthorization of the Older Americans Act in 2000, the Family Caregiver support program was developed. Services such as information, assistance, support groups, respite and supplemental services are available to assist caregivers. Two support groups were started in FY 2003, one in O'Neill and one in Emerson. The Agency now has 11 caregiver support groups in its senior centers.

The Agency became a regional Senior Health Insurance Information Program (SHIIP) July 1, 2005. The Agency has 49 trained volunteers who provide outreach, counseling, and referral to persons eligible for benefits under Medicare and/or Medicaid. The Medicare Part D program became effective January 1, 2006. Initially the Agency's Senior Medicare Patrol (SMP) program

was combined with the Ombudsman program. Currently SMP works with the SHIP program which are provided through a subcontract from the Department of Insurance.

The Agency participated in a pilot project for the Aging and Disability Resource Center (ADRC) program in fiscal years 2016, 2017 and 2018. Legislation was approved to have permanent ADRC's in Nebraska during legislative session 2018.

The Northeast Nebraska Area Agency on Aging celebrated its 40th anniversary in 2018. The goals and objectives of this Agency are the same today as they were when it first started; to provide as many needed services as possible to help the older adults in Northeast Nebraska to maintain their independence.

Demographics

According to the 2010 Census, the number of persons in the service area is 200,923.

The 2010 census information for the 60+ per county information is:

Antelope	1,862	Boone	1,476
Boyd	715	Brown	966
Burt	2,022	Cedar	2,322
Cherry	724	Colfax	1,878
Cuming	2,444	Dakota	3,388
Dixon	1,433	Holt	2,806
Knox	2,567	Madison	6,910
Nance	969	Pierce	1,699
Rock	467	Stanton	1,179
Thurston	1,108	Wayne	1,716
Keya Paha			

City of Columbus 4,470

City of Valentine 818

Total 60 + population is 43,939=22% of population in service area.

Services

A variety of services and programs may be available within the Agency's 22 county service area through a contract, subaward or direct service.

These services include but not limited to:

- In-home services such as personal care, homemaker, chore, respite, etc.
- Access services such Information & Assistance, counseling, outreach, information, etc.
- Legal services including legal assistance and legal outreach
- Nutrition education
- Congregate meals
- Home-delivered meals
- Health Promotion/Disease Prevention-evidence based programs
- Health Promotion/Disease Prevention non-evidence-based programs
- Family Caregiver support services
- Care /Case Management
- ADRC services that includes Information & Assistance and Options Counseling
- Ombudsman

Due to the Coronavirus Pandemic, the Agency was granted approval to provide:

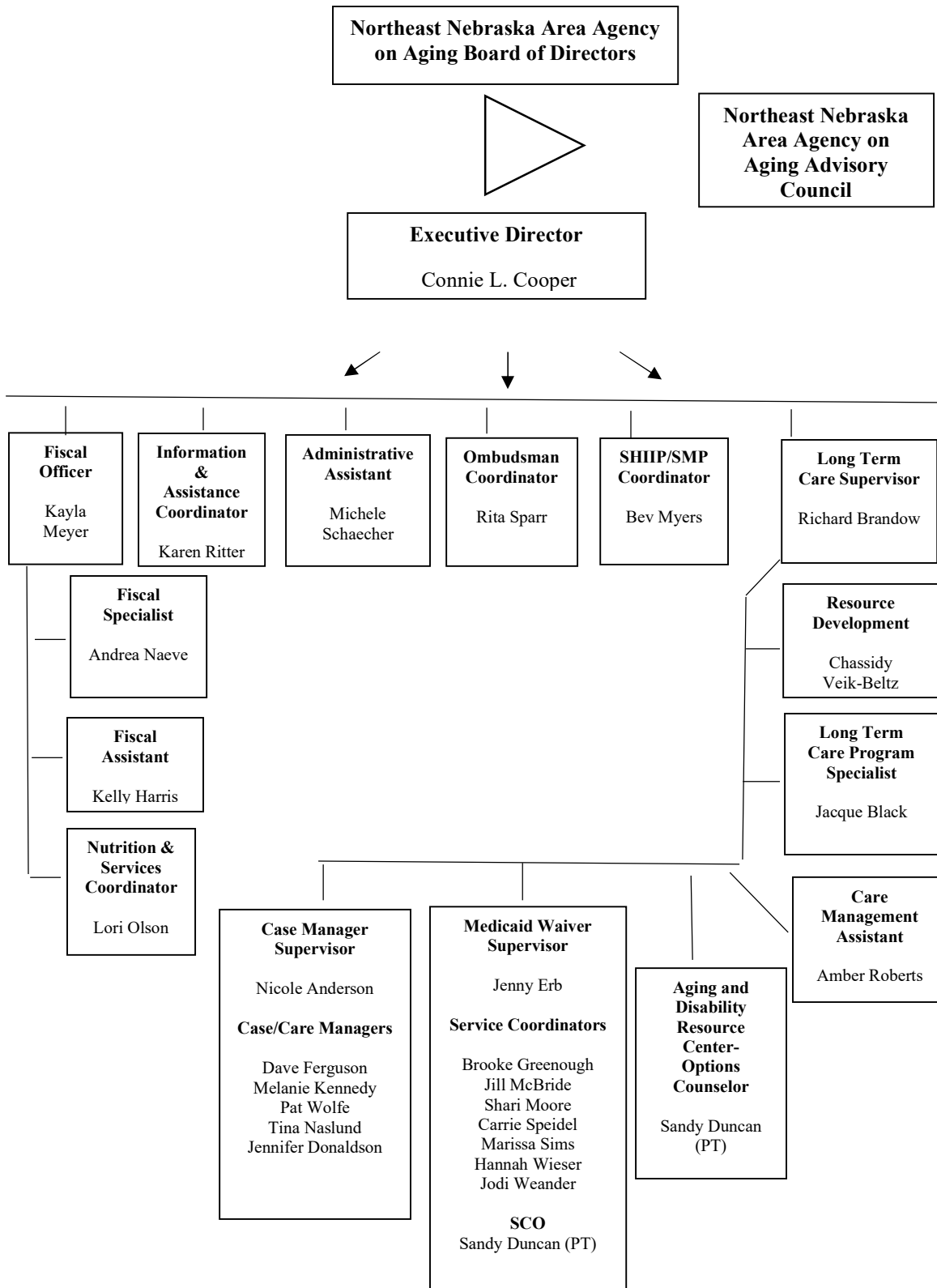
- COVID-19 Home Delivered Meals
- COVID-19 To Go Meals
- COVID-19 PPE
- COVID-19 Goods Delivery
- COVID-19 Well Check

Northeast Nebraska Area Agency on Aging Staff
 119 W Norfolk Avenue
 Norfolk, NE 68701
 402-370-3454

<u>Name/FTE</u>	<u>Descriptions of staffing</u>
Connie Cooper-1.0	Executive Director
Michele Schaecher-1.0	Administrative Assistant
Karen Ritter-1.0	Information & Assistance Coordinator
Lori Olson -1.0	Nutrition, Health and Services Coordinator
Bev Myers-1.0	SHIP/SMP Coordinator
Rita Sparr -.60	Ombudsman Coordinator
Sandy Duncan-1.0	ADRC Coordinator/SCO
Richard Brandow-1.0	Long Term Care Supervisor
Jacque Black-1.0	Long Term Care Program Specialist
Jenny Erb-1.0	Medicaid Waiver Supervisor
Marissa Sims-1.0	Medicaid Waiver Services Coordinator
Brooke Greenough-1.0	Medicaid Waiver Services Coordinator
Shari Moore-1.0	Medicaid Waiver Services Coordinator
Jill McBride-.73	Medicaid Waiver Services Coordinator
Carrie Speidel-1.0	Medicaid Waiver Services Coordinator
Hannah Wieser-1.0	Medicaid Waiver Services Coordinator
Jodi Weander-1.0	Medicaid Waiver Services Coordinator
Chassidy Veik-Beltz-1.0	Resource Development
Nicole Anderson -1.0	Case Management Supervisor
Amber Roberts-1.0	Care Management Assistant
David Ferguson-1.0	Care/Case Manager
Tina Naslund-1.0	Care/Case Manager
Patricia Wolfe-.73	Care/Case Manager
Jennifer Donaldson-1.0	Case/Care Manager
Melanie Kennedy -.50	Case/Care Manager
Kayla Roberts-1.0	Fiscal Officer
Kelly Harris-1.0	Fiscal Assistant
Andrea Naeve-1.0	Fiscal Specialist

Updated 3/22/2022

NORTHEAST NEBRASKA AREA AGENCY ON AGING ORGANIZATIONAL CHART



**Northeast Nebraska Area Agency on Aging
Advisory Council Members
March 2022**

Rozanne Hintz (Chairperson)
DIXON COUNTY

Elsie Witt
CHERRY COUNTY

Chris Dixon (Vice-Chairperson)
CITY OF COLUMBUS

Dr. Richard Fitch
HOLT COUNTY

Richard Krepela (Secretary)
MADISON COUNTY

Linda Elliott
BURT COUNTY

Liz French
BOONE COUNTY

Linda Hewitt
STANTON COUNTY

Bob Eggerling
ANTELOPE COUNTY

Robert Dahlstedt
COLFAX COUNTY

Charlie Kyser
BROWN COUNTY

Karen Havranek
BOYD COUNTY

Cathy Hill-Klein
NANCE COUNTY

Mae Greve
WAYNE COUNTY

Evelyn Howser
CUMING COUNTY

(OPEN AT THIS TIME)
CEDAR COUNTY
DAKOTA COUNTY
KNOX COUNTY
PIERCE COUNTY
ROCK COUNTY
THURSTON COUNTY

**Northeast Nebraska Area Agency on Aging
Governing Board
February 2022**

Dennis Kment (Chairperson)
STANTON COUNTY

David Schold
BURT COUNTY

Virgil Miller (Vice-Chairperson)
KNOX COUNTY

Jim Stout
ROCK COUNTY

Dean Burbach (Secretary)
WAYNE COUNTY

Terry Wragge
PIERCE COUNTY

Eric Stinson
MADISON COUNTY

**Dave Sandoz
CHERRY COUNTY

Ronald Schilling
CITY OF COLUMBUS

Jim Mejstrik
COLFAX COUNTY

Dan Trimble
THURSTON COUNTY

Jonathan Lindgren
BOONE COUNTY

David McGregor
CEDAR COUNTY

Terry Nicholson
DIXON COUNTY

Robert Giese
DAKOTA COUNTY

Dean Smith
ANTELOPE COUNTY

Robert Small
NANCE COUNTY

Dennis Bauer
BROWN COUNTY

Don Butterfield
HOLT COUNTY

Norbert Holtz
CUMING COUNTY

Ronald Bernt
BOYD COUNTY

**denotes “not an elected official”

Full Name	Phone Number	Email Address	Program/Topic	Item Type
Andrea Naeve	4023713454	andrea.naeve@nenaaa.com	Fiscal	Item
Connie Cooper	(402) 370-3454	connie.cooper@nenaaa.com	Director;#PeerPlace Champion	Item
Kayla Roberts	(402) 370-3454	kayla.roberts@nenaaa.com	Fiscal	Item
Lori Olson	(402) 370-3454	lori.olson@nenaaa.com	Nutrition Services	Item
Nicole Anderson	(402) 370-3454	nicole.anderson@nenaaa.com	Care Management	Item
Rich Brandow	(402) 370-3454	richard.brandow@nenaaa.com	Care Management;#Senior Care Options;#ADRC Supervisor	Item
Rita Sparr	(402) 370-3454	rita.sparr@nenaaa.com	Ombudsman	Item
Sandy Duncan	(402) 370-3454	sandy.duncan@nenaaa.com	ADRC Options Counselor	Item

Section B**Goals 2020-2023**

Note: Encourage regular use of the goals and objectives to monitor progress toward achievement; and designating a staff person/s responsible, so it is an active plan. Utilizing performance measures with initial baseline effective June 30, 2019 when appropriate.

Goal 1: Advocacy

Advocate to ensure the interests of people with disabilities, older adults, and their family members are reflected in the design and implementation of public policies and programs.

Objective 1:

Increase public awareness and understanding of the interests of people with disabilities, older adults, and their family members.

Strategy 1:

Increase public awareness through radio and TV ads, public speaking, social media, paid and unpaid media.

Performance Measure:

1. Agency will increase public awareness by increasing Information, Outreach, Caregiver Outreach and Caregiver Information services by 5% annually. Baseline is FY'19 units with 5% increase annually for each service; information, outreach, caregiver outreach and caregiver information.

Strategy 2:

Seek opportunities for the AAAs to collaborate on messaging and awareness opportunities.

Performance Measures:

1. Increase number of meetings/conference calls with the Director of Medicaid and Long Term Care by 1% annually. Baseline is one meeting a year.

2. Utilize State Unit on Aging and the Nebraska Association of Area Agencies on Aging to create state message to promote public awareness. Baseline is zero, will add as agenda item to N4A meetings to discuss state message on public awareness.

Objective 2:

Engage Federal, State, and Local policy makers and other partners to ensure existing policies and programs optimally reflect the interest of people with disabilities, older adults, and their family members.

Strategy:

Communicate and educate Federal, State, and Local policy members to influence public policy related to people with disabilities, older adults, and their family members.

Performance Measures:

1. Contact newly elected State Senators within their first year of office to educate about aging services and the Area Agencies on Aging.
2. Contact State Senators as needed to advocate on issues such as ADRC, funding, and other aging issues. Baseline is one.
3. Contact Federal policy members as needed to advocate on issues such as SHIP, reauthorization of the Older Americans Act, funding and other aging issues. Baseline is one.

Objective 3:

Lead the development and implementation of new public policies and programs that advance the interest of people with disabilities, older adults, and their family members.

Strategy:

Work collaboratively with advocacy groups, AARP, caregivers, Disability Community, and others with similar interests.

Performance Measure:

1. Increase number of meetings/telephone calls with collaborative partners by 1% annually with baseline of 25 meetings/telephone calls.

Goal 2: Protect Rights and Prevent Abuse

Protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older adults and people with disabilities.

Objective 1:

Identify, strengthen, and enhance collaboration of programs at all levels that impact the rights and prevent the abuse, neglect, and exploitation of older adults and people with disabilities.

Strategy 1:

Develop strategic partnerships that encourage, educate, and empower stakeholders on the rights and prevention of abuse, neglect, and exploitation of older adults and people with disabilities

Performance Measure:

1. Provide information annually to senior centers to educate stakeholders on prevention and identification of abuse, neglect and exploitation of older adults and people with disabilities. Baseline is 39 senior centers with average number of congregate meal participants in FY'19.

Strategy 2:

Continue partnerships with disability partners, APS, and others to support elder rights and prevent abuse, neglect, and exploitation.

Performance Measure:

1. Maintain partnership with Elder Rights Coalition by participating in meetings and trainings. Baseline of participating in two meetings/training of Elder Rights Coalition per year.

Objective 2:

Educate and empower stakeholders on the rights and prevention of abuse, neglect, and exploitation of older adults and people with disabilities.

Strategy:

Implement tools for the education and empower stakeholders that include public speaking engagements, websites, outreach, and printed materials.

Performance Measure:

1. Maintain use of Legal Aid of Nebraska and/or Nebraska Attorney General staff to provide speaking engagements and printed materials. Baseline is one presentation of Legal Aid staff or one of Attorney General's staff at senior center manager training per year for 40 printed materials distributed.

Objective 3:

Facilitate individual access to advocacy and representation to protect individual rights and prevent abuse.

Strategy:

Through legal service representation, elder access line, Ombudsman, and presentations to the staff and the public, promote awareness of rights and prevent abuse, neglect, and exploitation of older adults and people with disabilities.

Performance Measure:

1. Increase number of client contacts through the Ombudsman program by 1% annually. Baseline is FY'19 units.
2. Increase units of legal assistance and legal outreach by 2% annually. Baseline is FY'19 units of service for legal assistance and the next year it will be FY 20 units in legal assistance and legal outreach.
3. Promote World Elder Abuse Awareness Day with distribution of printed materials to senior centers and Agency staff annually. Baseline is 39 senior centers and 30 staff with 225 printed materials distributed.
4. Meet with State Ombudsman annually to discuss promotion of program and funding of full-time Ombudsman Coordinator. Baseline is one meeting/phone call with State long term care Ombudsman each year to discuss Ombudsman program and Agency will train two new Ombudsman volunteers a year.

Goal 3: Individual Self Determination

Work with older adults and people with disabilities as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.

Objective 1:

Promote programs and strategies that support community integration for older adults and people with disabilities.

Strategy:

Provide older adults and people with disabilities, information, education, and counseling on their options to live as independently as possible in the community.

Performance Measures:

1. Increase units of service of Information & Assistance by 1% annually. Baseline is FY'19 units of Information & Assistance.
2. Increase number of persons served through Options Counseling and Information and Assistance by the ADRC by 1% annually. Baseline is FY'19 units of Options Counseling and ADRC Information and Assistance.
3. Increase the number of units of evidenced-based programs and non-evidence-based programs of Health Promotion/Disease Prevention by 1% annually. Baseline is FY'19 units of evidence-based programs and non-evidence based programs.

4. Increase units of counseling units by 1% annually. Baseline will be FY'19 Financial Counseling units and next year it will be FY'20 Counseling units

Goal 4: Long-Term Services and Supports

Enable people with disabilities and older adults to live in the community through the availability of and access to high-quality long-term services and supports, including supports for families and caregivers.

Objective 1:

Provide high quality and integrated services that seamlessly address the health and long term services and supports needs of people with disabilities and older adults.

Strategy:

Provide long term services and supports that assure independence, health and quality of life.

Performance Measure:

1. Increase homemaker, chore, personal care, material distribution, caregiver respite and caregiver supplemental services by 1% annually. Baseline is FY'19 units of service for each service; homemaker, chore, personal care, emergency response system (material distribution-ERS only in FY'20), caregiver respite and caregiver supplemental services.
2. Congregate and home-delivered meals will not reduce more than 2% annually. Baseline is FY'19 units of service for congregate meals and home-delivered meals.
3. Maintain the number of senior centers in service area. Baseline is 39 senior centers.
4. Provide the budgeted number of nutrition education units. Baseline is 666 units of nutrition education.
5. Increase units of service served through Care Management, Case Management and Caregiver Assistance Case Management by 1% annually. Baseline is FY'19 units of service for Care Management, Case Management and Caregiver Assistance Case Management.
6. Maintain units of assisted transportation and transportation annually. Baseline is FY'19 units of assisted transportation and transportation.
7. Maintain senior center hours and social activities at a senior center. Baseline is FY'19 supportive services (senior center hours). Baseline the next year will be FY'20 units in senior center hours and social activities.

Objective 2:

Ensure that the ADRC is an ongoing component of Nebraska's long-term care continuum, and that ADRC sites coordinate and establish partnerships with organizations specializing in serving aging persons and persons with congenital and acquired disabilities.

Strategy:

Communicate and educate Federal, State, and Local policy members to influence public policy related to older adults and people with disabilities.

Performance Measure:

1. Disability partners and Area Agencies on Aging collaborate on a plan to develop a comprehensive ADRC. Baseline is 4 meetings in FY'19 with ADRC Leadership Team.

Objective 3:

Promote a convenient point of entry to eligible individuals seeking information and access to long-term care services and supports.

Strategy:

Continue to explore and work with the State Medicaid Agency in the development and implementation of a No Wrong Door system.

Performance Measure:

1. Have representation from the Association on committees and subcommittees for the No Wrong Door program. Baseline is participation in long term care redesign meetings four times in FY'19.

Objective 4:

Explore opportunities for sustainability of the Nebraska ADRC.

Strategy:

Advocate with the Nebraska Legislature to increase, and make permanent, funding for the ADRC.

Performance Measure:

1. Disability partners and Area Agencies on Aging will work with Board Members, State Unit on Aging and/or Nebraska State Senators to secure permanent funding for the ADRC. Baseline is 3 discussions/information on permanent ADRC funding with State Senators, State unit on Aging and Board members.

Goal 5: Effective and Responsive Management

Implement management and workforce practices that support the integrity and efficient operations of programs serving people with disabilities and older adults and ensure stewardship of taxpayers' dollars.

Objective 1:

Implement management improvement activities, including program integrity and internal control initiatives, to strengthen business processes, improve efficiency, and promote accountability.

Strategy:

Research and share best practices among the Area Agencies on Aging.

Performance Measure:

1. Share program integrity and internal controls by adding to the Agenda of the monthly Association meeting. Baseline is one Association meeting in FY'19.
2. Minimal or no recommendations with audit, quality assurance reviews, monitoring evaluations, etc. Baseline is three recommendations with audit, quality assurance reviews or monitoring evaluations in FY'18.
3. Make changes in business practices/policies as recommended by auditor, attorney, etc. Baseline is to make changes within 6 months of recommendation of auditor, attorney, etc.
4. Make changes for appropriate technologies to support Agency operations. Baseline is to make changes within 6 months of recommended technology operations.

Objective 2:

Utilize emerging technologies and leverage shared services to promote innovation, improve accessibility, and better support our mission.

Strategy:

Utilize new State software to record and report activities.

Performance Measure:

1. Staff will participate in training and utilize new State software. Baseline is 6 staff to participate and/or utilize new state software.

Updates to Performance Measures

	FY19 Base	FY2020	FY 2021	FY 2022	FY 2023
Goal 1 Strat 1 Measure 1					
5% increase of Information	13,460	14,645	11,044		
5% increase of Outreach	7,319	143	12		
5 % increase of Caregiver Inf	613	514	232		
5% increase of Caregiver Outreach	1,665	105	17		
 Goal 1 Strat 2 Measure 1					
1% increase of mtg/calls with Med Dir	1	1	1		
 Goal 1 Strat 2 Measure 2					
AAA/SUA create message	0	0	0		
 Goal 1 Obj 2 Measure 1-3					
Contact newly elected state senators	0	0	0		
Contact State Senators as needed	1	1	1		
Contact Fed policy members	1	2	1		
 Goal 1 Obj 3 Measure 1					
Increase mtgs/calls 1% w partners	25	25+	25+		

	FY19 Base	FY2020	FY 2021	FY 2022	FY 2023
Goal 2 Strat 1 Measure 1					
Inf to sr centers	39	39	39		
With ave # of cong particip	832	645	127		
Goal 2 Strat 2					
Participate in elder rights	2	1	3		
Goal 2 Obj 2					
Present at sr ctr trg	1	1	0		
With printed material	40	40+	40+		
Goal 2 Obj 3 Measure 1-3					
Increase contacts 1% ombudsman	165	101	160		
Increase units by 2% of legal assist	303.07	753.70	633		
Increase units by 2% legal outreach	39	20	0		
Promote WEAAD and printed material	39 ctrs	39	39		
30 staff +225 printed materials		same	same		
Meet state Ombudsman	1	1	1		
Train new volunteers	2	3	2		

	FY19 Base	FY2020	FY 2021	FY 2022	FY 2023
Goal 3 Strat 1 Measure 1-4					
Increase 1&A 1%	4,546	3,513.75	3,963.5		
Increase ADRC I & A 1%	1,409	427.25	624.5		
Increase Options Counseling 1%	238.45	320.50	262.25		
Increase health prom evidence based 1%	407	39	0		
Increase health prom non-evid based	74,149	75,591	51,315		
Increase counseling by 1%	157	2,719.20	2,031		

	FY19 Base	FY2020	FY 2021	FY 2022	FY 2023
Goal 4 Obj Measure 1-7					
Increase 1%:					
Homemaker	5,992.25	4,391.75	7,137.05		
Personal care	112	470.50	407.5		
Material distribution	2,128	3,600	2,089		
Caregiver respite	7,031	5,121	9,924.75		
Caregiver supplemental	1,657	1,648	1,626		
Meals will not reduce more than 2%					
Congregate	185,470	150,379	25,558		
Home-delivered	68,578	103,926	211,956		
Maintain sr centers	39	39	39		
Provide budgeted nutrition ed units	666	506	492		
Increase by 1%					
CM	6,320.75	5,005	4,716.25		
Case management III B	515.75	1,263	1,771		
Case Management III E	1,659.75	1,554.25	484.75		
Maintain units for:					
Transportation	29,191	16,274	2,747		
Assisted transportation	5,840	4,478	439		
Maintain sr ctr hours	61,588.45	57,811.20	51,677.25		
Maintain social activities	-----	134,043.72	5,992		
Goal 4 Obj 2					
Leadership team ADRC plan	4	4+	4+		
Goal 4 Obj 3					
LTC redesign	4	0	0		
Goal 4 Obj 4					
Mtgs to secure ADRC funding	3	0	0		

	FY19 Base	FY2020	FY 2021	FY 2022	FY 2023
Goal 5 Obj 1 Measure 1-4					
Share inf at N4A mtg	1	4	4		
Minimal recommendations with					
Audit	3	6	3		
QA	3	0	2		
Monitoring	3	0	3		
Change business practice	6 months	YES	Yes		
Tech. changes	6 months	YES	Yes		
Goal 5 Obj 2					
Participate/utilize new software	6	10+	6		

Section B

Planning Process

The Northeast Nebraska Area Agency on Aging (NENAAA) determines services and programs needed in its service area through several entities including but not limited to senior center public hearings, senior center trainings, in-home clients, CHOICES clients, Area Agency on Aging staff, Nebraska Association of Area Agencies on Aging meetings, health and human service trainings, Planning Committee meetings, Agency Advisory Board meetings and Agency Governing Board meetings. The recommendations are then taken to the Northeast Nebraska Area Agency on Aging Advisory and Governing Boards for review and approval.

The Planning Committee consists of: the Governing Board Executive Committee (3), Governing Board members (4) appointed by the Governing Board Chairperson, Senior Center Managers (4) elected by their peers, Advisory Board Chairman (1) and Choices staff (2) appointed by the Governing Board Chairman. The planning committee meets annually. The last meeting of the Planning Committee was January 21, 2021.

The Agency reviews information from needs assessments and surveys from entities such as AARP, the Administration on Community Living, Workforce Development, NENAAA, etc. to determine the extent of services needed. A discussion with the Nebraska Association of Area Agencies on Aging will be encouraged to consider a statewide needs assessment.

Emphasis in planning is placed for individuals residing in rural areas, as well as low income, greatest social and economic needs, minorities, limited English proficiency, disabled, older individuals with Alzheimer's disease, older individuals with self-care limitations and those at risk for placement of institutional placement. This is evidenced by the services and programs that the Northeast Nebraska Area Agency on Aging provides. The demographic information required of persons receiving services does identify persons according to race, client ethnicity, activities of daily living, individual activities of daily living, poverty, etc. The Agency also has developed a nutritional risk process which is based on the level of risk.

As the demographics change in our service area, the Agency will continuously be addressing populations of greatest economic need, social need, at-risk for institutional placement, low-income minority, people with limited English proficiency and older individuals with Alzheimer's disease and related disorders, etc. with the various services and programs that are offered.

The Northeast Nebraska Area Agency on Aging establishes priorities through the planning process but also through the time study that allocates personnel and Agency costs that ensures that program costs are reasonable, allocable, and allowable.

Service utilization assists the Agency's planning process as we review the units of service from the previous year (or years). This is a major component when we begin the area plan and budget process and budget revision process. For instance, congregate and home-delivered meal funding allocation is determined by the actual average of meals served. The Agency has several monthly spreadsheets that tracks the service and number of units per month. It assists staff in what is currently happening with each program as well as the shifts in services.

The Santee Sioux, Omaha and Winnebago Tribes in our service area receive funding through the Title VI program. NENAAA provides nutrition (Title III C) funding for non-Native American participants in Santee and Winnebago. NENAAA provides technical assistance to the Santee, Macy, and Winnebago Senior Centers. Each Center is invited to attend trainings sponsored by the Agency and the centers are invited to nominate a participant as a member of the Agency's Advisory Board. NENAAA contracts with Nebraska Legal Aid for legal assistance (Title III B) specializing in Native American elder law. Native American older adults who qualify are provided Care Management, Medicaid Waiver and/or in-home services. NENAAA supports Native American communities by actively participating in local health fairs, providing presentations on services, information on fraud and scams, etc. The Agency collaborates with the Native American communities to support their initiatives and avoid duplication of services.

NENAAA has strengthened/expanded Title III and Title VII services by:

- Providing training and technical assistance on service eligibility
- Providing training and technical assistance on service definitions
- Changing the funding reimbursement to include the unit of service provided
- Providing the tools/reporting forms to accurately report the service
- Review reporting forms monthly for accuracy
- Utilizing a time study to cost allocate funding that is reasonable, allowable, and allocable
- Providing Care Management (CM), Case Management (III-B) or Caregiver Assistance Case Management (III-E) to best assist older adults.
- Capturing all SHIP/SMP units of service
- Promotion of the Elder Access Line for legal assistance
- Participation in the Elder Rights Coalition
- Promotion of Elder Rights Training
- Increasing hours of Ombudsman Coordinator
- Provide various non-evidence-based health promotion/disease prevention programs
- Contracting with local health department to provide evidence-based programs
- Providing ADRC services
- Increased number of family caregiver support groups
- Utilizing other nutrition sites to provide congregate and/or home-delivered meals.

The Northeast Nebraska Area Agency on Aging has integrated Title III and VII with several Discretionary Grants:

1. Aging and Disability Resource Center (ADRC)-the Agency participated in the ADRC pilot project and is committed to being a comprehensive point of entry to administer long term support options. It is about empowering individuals to have information and make informed decisions. The ADRC and Title III and VII services provide a seamless system of services from basic information to options counseling to referrals to appropriate services/organizations.
2. Evidence Based Disease Prevention Programs- NENAAA's Title III D program contracts with one of health departments in its service area for two years to provide evidence-based health promotion/disease prevention programs. The classes will be available throughout the service area including Niobrara, Macy and Winnebago.
3. Lifespan Respite-NENAAA works with Central Nebraska Community Service (CNCS) to access Lifespan Respite funding for eligible clients.

NENAAA will address the population increase of older adults through the Planning Committee, senior center trainings and collaboration, Agency staff, Advisory Board, Governing Board, and various organizations the Agency works with including the State Unit on Aging and the Nebraska Association of Area Agencies on Aging. We will continue to advocate for additional funding and flexibility of services that meet the needs of the older adults in the service area.

The focus of aging services is strong for consumer directed services. NENAAA supports consumer choice for services, examples include Agency in-home services that are consumer directed with the client choosing their provider and the client paying the provider for services rendered. Options Counseling provides older adults, caregivers and families the knowledge to make informed decisions about their long-term care. Baby boomers will demand more flexibility, choice, and consumer control with services. This may be part of the reason that our traditional nutrition programs at senior centers are declining in participation.

The Agency worked with the Department of Health and Humans Services with the Fair Labor Standard Act in regards to overtime with in-home providers. The Agency spent extensive time addressing the Fair Labor Standard Act for Agency personnel. A labor law attorney was consulted, and the Personnel Policy revised. Changes were made for the majority of the staff from salary to hourly and comp time to time and a half.

Section C

Definition: Assistance with Activities of Daily Living (ADLs) and/or health-related tasks provided in a person's home and possibly other community settings. Personal care may include assistance with Instrumental Activities of Daily Living (IADLs).		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Personal Care is provided in the form of grant agreements to eligible clients or their legal representative. The use of the functional assessment determines needs, capabilities and preference of services. The client submits a calendar to the Agency each month with the provider's hours recorded on the specific day(s) they supplied the service. Payment is sent to the client/legal representative and the client pays the provider. Personal Care is available in the 22 county service area.

Definition: Performance of light housekeeping tasks provided in a person’s home and possibly other community settings. Task may include preparing meals, shopping for personal items, managing money, or using the telephone, in addition to light housework.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/>	Client may Self-Direct this Service
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

Homemaker service is provided in the form of grant agreements to eligible clients or their legal representative. The use of the functional assessment determines needs, capabilities and preference of services. The client submits a calendar to the Agency each month with the provider’s hours recorded on the specific day(s) they supplied the service. Payment is sent to the client/legal representative and the client pays the provider. Homemaker is available in the 22 county service area.

3. Chore

Definition: Performance of heavy household tasks provided in a person's home and possibly other community settings. Tasks may include yard work or snow removal, in addition to heavy housework.			
Service Unit: Hour		Setting: One-on-One	
Registered Service			
Eligibility: Individual must be 60 years old or older			
Client Details:			
<input checked="" type="checkbox"/>	Collect ADLs	<input checked="" type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	Collect IADLs	<input checked="" type="checkbox"/>	Client may Self-Direct this Service
<input type="checkbox"/>	Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
Other Reporting Requirements: N/A			
Possible Funding Sources:			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	III-B (Supportive Service)	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	CASA (State Aging)
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	Local
		<input checked="" type="checkbox"/>	Other
		<input type="checkbox"/>	May be MAC Eligible
Provider Requirements:		A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Chore is provided in the form of grant agreements to eligible clients or their legal representative. The use of the functional assessment determines needs, capabilities and preference of services. The client submits a calendar to the Agency each month with the provider's hours recorded on the specific day(s) they supplied the service. Payment is sent to the client/legal representative and the client pays the provider. Chore is available in the 22 county service area.

Definition: A meal provided to an OAA qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and all applicable laws. Meals provided to an individual through means-tested programs may be included. Caregivers (Older Relative or Family) can receive III-E funded Home Delivered Meals. If III-E is used to fund the meal, the meal should be counted under Caregiver Supplemental Services.		
Service Unit: Meal	Setting: One-on-One	Registered Service
Eligibility:		
<ul style="list-style-type: none"> • Individual must be 60 years old or older & unable to attend a Congregate Meal, OR • Spouse of an Eligible Individual (60 years or older that is unable to attend a Congregate Meal), OR • Dependent Individual with Disability that lives with an Individual an Eligible Individual (60 years or older that is unable to attend a Congregate Meal) Note: Each AAA determines how “unable to attend a Congregate Meal” is defined. This can include, but is not limited to: being homebound or having 2+ ADLs. Each AAA should have a policy to determine eligibility.		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input checked="" type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.		
Possible Funding Sources:		
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

Home Delivered Meals are provided at 32 sites in the 22 county service area through a contract and a per meal reimbursement rate assigned to each contractor. Home-delivered meals are provided based on criteria established by the Northeast Nebraska Area Agency on Aging which examines the need of each individual. The initial home-delivered meal assessment shall be completed in person for each participant requesting a home-delivered meal. All home-delivered meal participants shall be reassessed annually between July 1 and October 31. Home-delivered meals shall meet one-third of the current Dietary Reference Intakes and Dietary Guidelines and the menus approved by a Registered Dietician.

Definition:

Provided to an older individual, at the direction of the older individual or a family member of the individual:

- by an individual who is trained or experienced in the case management skills that are required to deliver the services and coordination described in subparagraph; and
- to assess the needs, and to arrange, coordinate, and monitor an optimum package of services to meet the needs, of the older individual; and

Includes services and coordination such as—

- comprehensive assessment of the older individual (including the physical, psychological, and social needs of the individual);
- development and implementation of a service plan with the older individual to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the older individual, including coordination of the resources and services—
 - with any other plans that exist for various formal services, such as hospital discharge plans; and
 - with the information and assistance services provided under the Older Americans Act;
- coordination and monitoring of formal and informal service delivery, including coordination and monitoring to ensure that services specified in the plan are being provided;
 - periodic reassessment and revision of the status of the older individual with—
 - the older individual; or
 - if necessary, a primary caregiver or family member of the older individual; and
 - in accordance with the wishes of the older individual, advocacy on behalf of the older individual for needed services or resources.

Service Unit: Hour	Setting: One-on-One	Registered Service
---------------------------	----------------------------	--------------------

Eligibility: Individual must be 60 years old or older

Client Details:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Collect ADLs | <input type="checkbox"/> Client may be Anonymous |
| <input checked="" type="checkbox"/> Collect IADLs | <input type="checkbox"/> Client may Self-Direct this Service |
| <input checked="" type="checkbox"/> Collect NRA Score | <input type="checkbox"/> Client may use Voucher |

Other Reporting Requirements: N/A

Possible Funding Sources:

- | | | |
|---|---|--|
| <input type="checkbox"/> III-A (NSIP Raw Food) | <input type="checkbox"/> III-D (Health Pro) | <input type="checkbox"/> ADRC (State) |
| <input checked="" type="checkbox"/> III-B (Supportive Service) | <input type="checkbox"/> III-E (Caregiver) | <input checked="" type="checkbox"/> Local |
| <input type="checkbox"/> III-C1 (Congregate Meal) | <input checked="" type="checkbox"/> CASA (State Aging) | <input checked="" type="checkbox"/> Other |
| <input type="checkbox"/> III-C2 (Home Delivered Meal) | <input type="checkbox"/> Care Management (State) | |
| <input type="checkbox"/> May be MAC Eligible | | |

Provider Requirements: A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Case Management will assist in identifying unmet needs and utilizing services to assure the least restrictive level of care. Case Management will involve a functional assessment, care plan development and service implementation. The care plan will be monitored and evaluated on an on-going basis to ensure appropriate services are provided. Input/wishes from the client, family and advocates on behalf of the client is important to the development of the care plan and services

implemented. Case Management will be available through-out the 22 county service area including the Native American population. Case Management will be provided directly by employees of NENAAA who must meet the education, training and experience of an Agency Care Manager.

7. Assisted Transportation

Definition: Services or activities that provide or arrange for the travel, including travel costs, of individuals from one location to another. This service includes escort or other appropriate assistance for a person who has difficulties (physical or cognitive) using regular vehicular transportation. Does not include any other activity.		
Service Unit: One-Way Trip	Setting: One-on-One or Group Setting	Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Assisted Transportation is provided to older adults needing assistance including escort to a person who has difficulties, physically or cognitively. Senior centers, throughout the 22 county service area, will provide the Assisted Transportation through a contract.

Definition: A meal provided by a qualified nutrition project provider to a qualified individual in a congregate or group setting. The meal is served in a program that is administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and State/Local laws. Meals provided to individual through means-tested programs may be included.		
Service Unit: Meal	Setting: Group Setting	Registered Service
Eligibility:		
<ul style="list-style-type: none"> • Individual must be 60 years old or older, OR • Spouse accompanying Individual 60 years or older, OR • Volunteer serving the meal, OR • Individual with a Disability, living with a parent 60 years or older & accompanying the parent, OR • If the meal is served at senior housing, Individual with a Disability, living in senior housing 		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input checked="" type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.		
Possible Funding Sources:		
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Congregate Meals are provided at 37 sites in the 22 county service area through a contract with a per meal reimbursement assigned to each contractor. Meals are provided to persons meeting the eligibility criteria. Congregate Meals shall meet one-third of the current Dietary Reference Intakes and Dietary Guidelines and the menus approved by a Registered Dietician.

Definition: Services or activities that provide or arrange for the travel, including travel costs, of individuals from one location to another. Does not include any other activity.		
Service Unit: One-Way Trip	Setting: One-on-One or Group Setting	Non-Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input type="checkbox"/> May be MAC Eligible
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Transportation services provide or arrange travel for older adults from one location to another. Transportation is provided through a contract of a senior center throughout the 22 county service area.

Definition: A targeted program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information that is consistent with the current Dietary Guidelines for Americans and instruction to participants, caregivers, or participants and caregivers, overseen by a dietitian or individual of comparable expertise.		
Service Unit: Session	Setting: One-on-One or Group Setting	Non-Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Program Topic (i.e. Heart Healthy or Drink Enough Water) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. The provider must be a Registered Dietitian or have comparable experience. "Comparable experience" is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Nutrition Education is provided to participants and/or caregivers by providing nutrition, physical fitness or health (as it relates to nutrition) information. The information must be accurate and consistent with current Dietary Guidelines and overseen by a Registered Dietician or individual of comparable expertise. Nutrition Education will be provided through contracts to senior centers throughout our 22 county service area. Senior centers will present Nutrition Education information during the congregate meal and senior centers will provide home-delivered meal participants with the written information.

12. Information and Assistance

Definition:		
Also known as Basic Information . A service that:		
<ul style="list-style-type: none"> • provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology; • assesses the problems and capacities of the individuals; • links the individuals to the opportunities and services that are available; and • to the maximum extent practicable, ensures that the individuals receive the services needed by the individuals, and are aware of the opportunities available to the individuals, by establishing adequate follow-up procedures. 		
Service Unit: Contact	Setting: One-on-One	Non-Registered Service
Eligibility: N/A		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Northeast Nebraska Area Agency on Aging and its contractors in the 22 county service area provide Information and Assistance (I & A). I & A provides information about community opportunities and services available with follow-up which may include offering to call back, if appropriate.

Definition: Activities related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition). Activities must meet ACL/AoA definition for an evidence-based program, as presented on ACL's website.		
Service Unit: N/A	Setting: One-on-One or Group Setting	Sign-In Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Name • Birth Year • ZIP Code 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input checked="" type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements: Trained and/or certified to meet program requirements.		

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Evidence-Based Health Promotion/Disease Prevention services will be provided through a contract with one of the local Health Departments in the 22 county service area. Northeast Nebraska Health Department has agreed to provide evidence based programs for fiscal year 2020 with the option for fiscal year 2021. Services will be provided in their service area of Cedar, Thurston, Dixon and Wayne counties. Agency staff will monitor to ensure the programs are at the highest definition for evidence-based and they meet the contract guidelines.

Definition: Health promotion and disease prevention activities that do not meet ACL/AoA definition for an evidence-based program as defined at ACL's website. Activities may include those defined in the OAA (Section 102(14)). For example:		
<ul style="list-style-type: none"> - health risk assessments - health education - age-related diseases and chronic disabling conditions information - counseling regarding social services and follow-up health services - educational services for individuals and their primary caregivers - physical fitness, group exercise, and music therapy, art therapy, and dance-movement therapy - routine health screening - medication management - home injury control services - gerontological counseling 		
Service Unit: N/A	Setting: One-on-One or Group Setting	Sign-In Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Name • Birth Year • ZIP Code 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	Providers must administer services within the scope of their own professional practice that they are deemed competent to perform. These practices must be permitted in terms of what their own professional licensure approves and allows.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Non-Evidence Based Health Promotion/Disease Prevention includes two subservices, 1. Qualified and 2. Non-qualified. Qualified services require a certified trainer, examples of Qualified activities include, but not limited to health clinic, medication management, physical fitness/group exercise with a certified trainer. Non-qualified services do not require a certified trainer, examples include but not limited to health education, exercise videos, and walking. Qualified and Non-qualified Health Promotion/Disease Prevention services will be provided through a contract throughout the 22 county service area.

Definition: Legal advice and representation provided by an attorney to older individuals with economic or social need, and in the implementing regulation at 45 CFR Section 1321.71, and includes to the extent feasible, counseling or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney.		
Service Unit: Hour	Setting: One-on-One	Restricted Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Legal Assistance Providers will also need to record:		
<ul style="list-style-type: none"> • III- B Restricted Demographics (new) • Number of Open Cases • Number of Closed Cases by: <ul style="list-style-type: none"> ○ Advice ○ Limited Representation ○ Representation 	Number of Cases about: <ul style="list-style-type: none"> • Abuse/Neglect • Age Discrimination • Health Care • Housing • Income • Defense of Guardianship/ Protective Services 	<ul style="list-style-type: none"> • Long-Term Care • Nutrition • Utilities • Other
This grey section will be implemented 10/1/2020		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Title IV
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> Title VII
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	<ul style="list-style-type: none"> • Attorney, OR • Law student under direct supervision of an attorney, OR • Paralegal under direct supervision of an attorney 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Northeast Nebraska Area Agency on Aging will contract with Legal Aid of Nebraska to provide legal assistance to older adults and to elderly Native Americans in the 22 county service area. The separate contracts are in Section I of the Four Year Plan FY 20-23. Legal Aid of Nebraska will provide legal services through the Elder Access Line, provide extended representation or extensive legal services to elders meeting Legal Aid's priorities and hold two law clinics with one of them being for Native American elders.

Definition: Assisting a client to identify and utilize services needed to assure that the client is receiving, when reasonably possible, the level of care that best matches his or her level of need. The Care Management Unit, through its Care Management Unit Supervisor and staff of care managers, assists clients with services as specified in the [Care Management] Act, including ongoing consultation, assessment, Long-Term Care Plan development, and referral for clients in need of long-term care; coordination of the Long-Term Care Plan; monitoring of the delivery of services for clients, and review of the client's Long-Term Care Plan.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individuals 60 years or older are eligible. Those under 60 may also be served, subject to service prioritization.		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: See Care Management reporting requirements.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input checked="" type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	<p>The Care Management Unit Supervisor and care managers shall have the following minimum qualifications:</p> <ul style="list-style-type: none"> • A current Nebraska license as a registered nurse, or baccalaureate or graduate degree in the human services field, or certification under the Nebraska Social Work Law; and • At least two years of experience in long-term care, gerontology or community health. • In addition, a Care Management Unit Supervisor shall have at least two years of supervisory or management experience. 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Care Management unit will assist in identifying unmet needs and utilizing services to assure the least restrictive level of care. Care Management will involve a functional assessment, care plan development and service implementation. The care plan is then monitored and evaluated on an on-going basis to ensure appropriate services are provided. Input/wishes from the client, family and advocates on behalf of the client is important to the development of the care plan and services implemented. Care Management services will be available throughout the 22 county service area including the Native American population. Detailed information regarding Care Management is in the Agency's Plan of Operation submitted to the State Unit on Aging 4/1/19. Care Management will be provided directly by employees of NENAAA.

Definition: The hours of multipurpose senior centers are open to older individuals.		
Sites that only offer meals (also known as Nutrition Sites) should not be included.		
Service Unit: Hour	Setting: Indirect Setting	Non-Registered Service
Eligibility: N/A		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements: Must be multipurpose senior center.		

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Northeast Nebraska Area Agency on Aging will have a contract with multipurpose senior centers for hours open to older adults throughout the 22 county service area.

Definition: Provision of activities which foster the social well-being of individuals through social interaction and the satisfying use of leisure time. Activities, such as performing arts, games, and crafts, either as an observer or as a participant, facilitated by a provider. This service covers activities at the provider's location (i.e. senior center) or should be organized/planned by the provider (senior center).		
Service Unit: Person Hour	Setting: Group Setting	Non-Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input type="checkbox"/> May be MAC Eligible
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Social Activities will be provided by senior centers throughout the 22 county service area with a contract. Social activities will be organized/planned by the senior center and can include cards, book clubs, pool tournaments, performing arts, etc. Social Activities will be on hold until funding is available.

Definition: Services that assist older adults to address issues, concerns, or make decisions. This can include counseling on specific topics like financial issues, SHIIP (Senior Health Insurance Information Program, managed through a federal grant to the Nebraska Department of Insurance), housing, health insurance, taxes, etc.		
Does not include Nutrition Counseling, Caregiver Counseling, Options Counseling, or Transitional Options Counseling.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	Must meet topic specific credentialing, training, or expertise (i.e.: SHIIP counselors must be a certified SHIIP counselor).	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Counseling services will be provided by senior centers throughout the 22 county service area with a contract and by NENAAA staff through an agreement with the Department of Insurance. Senior Centers may provide counseling services through paid staff or volunteers certified in their field such as taxes, SHIIP, financial counseling, etc. Trained NENAAA staff and volunteers will provide SHIIP services.

Definition: An interactive activity that conveys information about available services, aging, or the aging network. It includes in-person interactive presentations, booth/exhibit at a fair, conference, or other public event. This service includes Public Education and Presentations.		
When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
Previously the ACL defined this as a one-on-one intervention by the service provider. The ACL has removed Outreach as a federal service. The state has created a new service called Outreach.		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Eligibility: Information about available services, aging, or the aging network.		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Outreach will be provided by senior centers throughout the 22 county service area by a contract and by NENAAA staff and volunteers that includes but not limited to the agreement with the Department of Insurance. Senior centers may provide outreach such as in-person presentations, county fair booth, senior center float at a community parade, etc. Senior Center outreach services will be on hold until funding is available. NENAAA staff and volunteers trained in SHIP will provide retirement seminars and Agency staff will provide in-person presentations, Agency booth at a fair, etc. about services.

Definition: A media activity that conveys information about available services, aging, or the aging network. It is a one way mode of communication. Examples include: Facebook posts, TV Ads/PSAs, radio ads/PSAs, website hits, brochures, newspaper ads, press releases. When counting brochures and other print media as Information Services, it should be counted when the cost is incurred (when the brochures are printed, when the newspaper ad is billed). When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section. Previously Information Services IIIB and/or Public Information.		
Service Unit: Activity	Setting: Indirect Setting	Non-Registered Service
Eligibility: N/A		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: <ul style="list-style-type: none"> • Topic (if the system allows) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Information Services will be provided by senior centers throughout the 22 county service area by a contract and by the NENAAA. Information Services by senior centers and the NENAAA will provide information about available services, aging and the aging network through Facebook posts, PSA's, radio/TV ads, newspaper ads, newsletters, etc.

<p>An interactive activity that conveys information about legal issues, including but not limited to:</p> <ul style="list-style-type: none"> • Powers of Attorney • Wills • Health Care Directives • Reverse Mortgage • Social Security Benefits • Medicaid/Medicare <p>Legal Outreach includes in-person interactive community education presentations by an attorney or a staff supervised by an attorney at senior centers, conferences, or other public event.</p> <p>Legal Outreach <u>does not</u> include information provided by staff or an attorney at a booth/exhibit at a fair, or a conference or other public event.</p> <p>When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.</p>		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Eligibility: Information about available services, aging, or the aging network.		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input checked="" type="checkbox"/> May be MAC Eligible
Provider Requirements:	<ul style="list-style-type: none"> • Attorney, OR • Law student under direct supervision of an attorney, OR • Paralegal under direct supervision of an attorney 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

The Northeast Nebraska Area Agency on Aging will contract with Legal Aid of Nebraska to provide Legal Outreach services to older adults and to elderly Native Americans throughout the 22 county service area. The separate contracts are in Section I of the Four Year Plan FY 20-23. Due to the definition of Legal Outreach being an in person interactive presentation, most of what Legal Aid will be providing is Information services. When Legal Outreach services are provided in service area units will be documented.

Definition: Service which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers.		
Service Unit: Hour	Setting: One-on-One or Group Setting	Registered Service
Eligibility: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input checked="" type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> May do Caregiver Assessment	<input checked="" type="checkbox"/> May use Voucher
Other Reporting Requirements: Where Respite was Provided:		
<ul style="list-style-type: none"> • In-Home • Out-of-Home (day) • Out-of-Home (overnight) • Other Respite 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregiver Respite is provided in the form of grant agreements to eligible caregivers. The use of the functional assessment determines needs, capabilities and preference of services. The care receiver must be unable to perform at least two activities of daily living without substantial human assistance or experience a cognitive impairment that requires substantial supervision. The caregiver (or care receiver at the direction of the caregiver) submits a calendar to the Agency each month with the provider's hours recorded on the specific day(s) the service was supplied. Payment is sent at the direction of the caregiver who then will pay the provider. Caregiver respite is available in the 22 county service area.

33. Caregiver Supplemental Services

Definition: Goods and services provided to complement the care provided by caregivers.		
If a Family Caregiver and Older Individual receive a Home Delivered Meal, the Family Caregiver Home Delivered Meal should be counted under Caregiver Supplemental Services.		
ERS services for the Care Recipient should be recorded under this service. The Client is the Caregiver.		
Service Unit: Unit	Setting: One-on-One	Registered Service
Eligibility: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	N/A	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregiver Supplemental Services provides funding for Emergency Response System (ERS) services. ERS services is provided in the form of grants to eligible clients or their legal representative throughout the 22 county service area. The care receiver must be unable to perform at least two activities of daily living without substantial human assistance or experience a cognitive impairment that requires substantial supervision. Eligibility is determined through the use of the functional assessment for needs, capabilities and preferences of services. The grants are issued to pay for the installation and monthly charges for an ERS.

**34. Caregiver Assistance:
Case Management**

Definition:		
Provided to a caregiver, at the direction of the caregiver: <ul style="list-style-type: none"> by an individual who is trained or experienced in the case management skills that are required to deliver the services and coordination described in subparagraph; and to assess the needs, and to arrange, coordinate, and monitor an optimum package of services to meet the needs, of the caregiver; and Includes services and coordination such as— <ul style="list-style-type: none"> comprehensive assessment of the caregiver (including the physical, psychological, and social needs of the individual); development and implementation of a service plan with the caregiver to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the caregiver, including coordination of the resources and services— <ul style="list-style-type: none"> with any other plans that exist for various formal services; and with the information and assistance services provided under the Older Americans Act; coordination and monitoring of formal and informal service delivery, including coordination and monitoring to ensure that services specified in the plan are being provided; periodic reassessment and revision of the status of the caregiver; and in accordance with the wishes of the caregiver, advocacy on behalf of the caregiver for needed services or resources. 		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility:	• Family Caregiver	OR • Older Relative Caregiver
Possible Funding Sources:		
Care Recipient	Caregiver (Client) Details:	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements: N/A		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregiver Assistance: Case Management will be provided by NENAAA staff throughout the 22 county service area including the Native American population. NENAAA staff who provide Caregiver Assistance: Case Management services must meet the education, training and experience of an Agency Care Manager. Caregiver Assistance Case management services will involve a functional assessment, care plan development and service implementation.

**34. Caregiver Assistance:
Case Management**

Input/wishes from the caregiver, family and advocates on behalf of the caregiver is important to the development of the care plan and services implemented. The care plan will be monitored and evaluated on an on-going basis to ensure appropriate services are provided.

Definition: An interactive activity that conveys information to caregivers about available services, aging, or the aging network. It includes in-person interactive presentations, booth/exhibit at a fair, conference, or other public events. This service includes Public Education and Presentations.		
When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Eligibility: N/A		
Care Recipient	Caregiver (Client) Details:	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Topic (if system allows) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregiver Outreach will be provided by eleven senior centers throughout the 22 county service area by a contract and by the NENAAA. Caregiver Outreach services by senior centers will include caregiver support groups. The caregiver support groups will be on hold until funding is available. Senior Centers and NENAAA may provide presentations to caregivers about services, aging or the aging network and participate in a caregiver fair/booth, etc.

38. Caregiver Information Services

Definition: A media activity that conveys information to caregivers about available services, aging, or the aging network. It is a one way mode of communication. Examples include: Facebook posts, TV Ads/PSAs, radio ads/PSAs, website hits, brochures, newspaper ads, press releases. When counting brochures and other print media as Information Services, it should be counted when the cost is incurred (when the brochures are printed, when the newspaper ad is billed). When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
Service Unit: Activity	Setting: Indirect Setting	Non-Registered Service
Eligibility: N/A		
Care Recipient	Caregiver (Client) Details:	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements: <ul style="list-style-type: none"> • Topics (if system allows) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	N/A	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregiver Information Services will be provided through eleven senior centers throughout the 22 county service area by a contract and by the NENAAA. Caregiver Information by senior centers and the NENAAA will provide information about available caregiver services, aging and the aging network through Facebook posts, PSA's, radio/TV ads, newspaper ads, newsletters, etc.

Definition: A state ADRC Program whose primary purpose is to maintain information about human service resources in the community and to link people who need assistance with appropriate service providers and/or to supply descriptive information about the agencies or organizations which offer services. The information and referral process involves establishing contact with the individual, assessing the individual's long and short-term needs, identifying resources to meet those needs, providing a referral to identified resources, and, where appropriate, following up to ensure that the individual's needs have been met.		
Service Unit: Contact	Setting: One-on-One	Non-Registered Service
Eligibility: (Must be at least one of the below) • 60 years or older • Individual with a Disability • Caregiver • Representative		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> May Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Aging & Disability Resource Center (ADRC) Information & Referral will be provided throughout the 22 county service area by NENAAA staff. ADRC Information & Referral will provide an individual who is 60 years or older, individual with a disability, a caregiver or legal representative with information about community resources and link them to appropriate services. Where appropriate, follow-up will be provided to ensure the individual's needs have been met.

Definition: A state ADRC Program service that assists an eligible individual in need of long-term care and his or her representatives to make informed choices about the services and settings which best meet his or her long-term care needs and that uses uniform data and information collection and encourages the widest possible use of community-based options to allow an eligible individual to live as independently as possible in the setting of his or her choice.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Need Long Term Care AND (Must be at least one of the below)		
• 60 years or older	• Individual with a Disability	• Representative
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> May Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: See ADRC services demographic information.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Aging & Disability Resource Center (ADRC) Options Counseling will be provided throughout the 22 county service area by NENAAA staff. ADRC Options Counseling will assist an individual 60 years or older, individual with a disability or legal representative to make informed decisions about long term care.