

Welcome to the 2022-23 Annual Budget process.

State Fiscal Year	7/1/2022	6/30/2023
Prior 6 months:	7/1/2021	12/31/2021
Projected 6 months:	1/1/2022	6/30/2022
Remaining Fiscal Year	FY 2022	
Next Fiscal Year	FY 2023	

Worksheets / tabs are linked below:

(All sheets are protected, but may be unprotected by the agency. No password is required.)

<p>Units of Service</p>	<p>Rows for COVID-19 Services have been added (if needed). There is a corresponding column for each potential service on the budget spreadsheets.</p> <p>Columns have been added to accommodate funding flexibility provided by the major disaster declaration (e.g. paying for a III-B service with III-C(1) funds) that began in January, 2020. Manually enter service units in these columns.</p> <p>13. Health Promotion/Disease Prevention (Evidence-Based) and 14. Health Promotion/Disease Prevention (Non Evidence-Based) request a client estimate, not a service unit estimate.</p> <p>Service Units will automatically feed from the Units of Service tab into the subsequent III-B, -C1, -C2, -D, -E, and State Funds tabs. The exception is: 9. Nutrition Counseling and 11. Nutrition Education. Service Units will need to be manually entered into the Units of Service worksheet, as well as the related funding spreadsheet (III-B, III-C1, and/or III-C2).</p>
<p>10% Variance</p>	<p>If there is a service unit increase or decrease from one SFY to another SFY of 10% or more, an explanation is needed. Each 10% variance explanation used to be located on the related Service Narrative Template. The explanations will now be listed together on the 10% variance worksheet. The 10% variance worksheet will highlight yellow any changes that are ±10%. The Variance Reason column will automatically wrap the text and will expand to fit the explanation size. Press the F7 key to initiate the spell checker.</p>
<p>Application-Signature</p>	<p>Select your agency from the drop down at the top of the page. This action will auto-complete Grantee information such as name, address, city, zip, phone number, and executive officer. The Governing Board chairperson's name will also be automatically filled in. This will also populate the agency's name on the last five tabs of this workbook. The chairperson's address, city, zip code, and phone will need to be manually entered.</p> <p>The Application for Funds program amounts will fill in from the supporting Composite and Program specific tabs (III-B, III-C1, III-C2, III-D, III-E, State Funds, and VII). The Other Programs information has been removed. The SUA does not oversee outside funding sources. This amount was always, and should be \$0.</p> <p>An Application-Signature page needs to be signed for the initial Plan/Update and Budget submission. If the SUA requires adjustments to the Plan and/or budget before approval, the Application-Signature page does not need to be resubmitted until the Plan and Budget are approved.</p>
<p>Fund Transfer</p>	<p>Complete if you will be transferring money between programs. Note any funds that need to be transferred between funding categories.</p>
<p>Budget Template Instructions</p>	<p>Provides more in-depth information about what funds are budgeted for which lines and services.</p>
<p>Composite</p>	<p>This is automatically completed from the budget pages. A calculated table has been added to confirm the agency is conforming to OAA section 307 (a)(2) - The estimated budget table (aka "reservation table") provided to the Area Agencies on Aging, and developed by the State Unit on Aging, outlines specific minimum funding requirements as follows: 15% Access, 15% In-Home, and 2% Legal. If the minimum requirements are not met, review the III-B worksheet.</p>

<p>III-B, -C(1), -C(2), -D, -E, State Funds, Other Programs, VII</p>	<p>Complete columns for each service provided. The totals will link to the Composite, the Application-Signature, and the Plan Admin worksheets.</p> <ul style="list-style-type: none"> • 17b. "CASA as Match" was renamed to "SUA Match on OAA funds." See the Budget Template Instructions tab for details and references to the Reservation Table. • 17d. MAC Return was created. Funds on this line are 1) estimated to be received by the agency as a result of participation in Medicaid Administrative Claiming and 2) used to support a Medicaid-related service. • 18b. Federal Carryover FY19 - FY21 - enter an estimate of funds from Federal FY19 - FY21 subawards that will be requested in State FY22. There is a separate
<p>III-B</p>	<ul style="list-style-type: none"> • Projected Units will fill in when the Units of Service tab's service units are filled in, except for 9. Nutrition Counseling (Column Y) and 11. Nutrition Education (Column Z). • 14. Health Promotion/Disease Prevention (Non Evidence-Based) will fill in the estimated Unique Client Count from the Units of Service tab, not Service Units. • State Plan Checks have been added to Rows 45:48 in the In-Home Services Sub Total (Column N), Access Services Sub Total (Column Y), and Legal Services Sub Total (Column AB). All boxes should be white. If a box is red, it does not meet the requirements of OAA section 307 (a)(2) - The estimated budget table (aka "reservation table") provided to the Area Agencies on Aging, and developed by the State Unit on Aging, outlines specific minimum funding requirements as follows: 15% Access, 15% In-Home, and 2% Legal. • Row 50 (CHECK: this should be -0-) confirms that the Row 41 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 51 should have green OKs. If there are service units, there needs to be a budget. Ombudsman Program, Area Plan Admin, and Sub-Totals/Totals do not have
<p>III-C(1)</p>	<ul style="list-style-type: none"> • Projected Units will fill in when the Units of Service tab's service units are filled in, except for 9. Nutrition Counseling (Column D) and 11. Nutrition Education (Column E). • Row 49 (CHECK: this should be -0-) confirms that the Row 41 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 50 should have green OKs. If there are service units, there needs to be a budget. Area Plan Admin, and Sub-Totals/Totals do not have this requirement. • Row 51 will fill automatically fill in off of the Units of Service's estimated NSIP Congregate Meals.
<p>III-C(2)</p>	<ul style="list-style-type: none"> • Projected Units will fill in when the Units of Service tab's service units are filled in, except for 9. Nutrition Counseling (Column D) and 11. Nutrition Education (Column E). • Row 50 (CHECK: this should be -0-) confirms that the Row 41 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 41 should have green OKs. If there are service units, there needs to be a budget. Area Plan Admin, and Sub-Totals/Totals do not have this requirement. • Row 52 will fill automatically fill in off of the Units of Service's estimated NSIP Home Delivered Meals.
<p>III-D</p>	<p>Complete columns for each service provided. The totals will link to the Composite, the Application-Signature, and the Plan Admin worksheets.</p> <ul style="list-style-type: none"> • 13. Health Promotion/Disease Prevention (Evidence-Based) will fill in the estimated Unique Client Count from the Units of Service tab, not Service Units. • Row 50 (CHECK: this should be -0-) confirms that the Row 41 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 51 should have green OKs. If there are service units, there needs to be a

1. Delete
17b. ? 2.
Delete
FY19

III-E	<ul style="list-style-type: none"> • Projected Units will fill in when the Units of Service tab's service units are filled in. • Row 50 (CHECK: this should be -0-) confirms that the Row 41 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 51 should have green OKs. If there are service units, there needs to be a budget. Area Plan Admin and Totals do not have this requirement. • Row 43: 19. Amount of Federal Funds included in Line 18a. budgeted for services to older relative caregivers (55+ w/ grandchild or disabled adult) was
State Funds	<ul style="list-style-type: none"> • Row 42 (21. CM Client Responsibility). Clients above Federal Poverty Level shall contribute towards the 20. Care Management program as required by AAA policy. Client Responsibility can be calculated by taking the impacted Client Service Units x Client Rate % x CM Rate. • 21. CM Client Responsibility and 12a. Income Cont./Fees will be compared, and the higher value will be used to determine the amount the SUA will reimburse. • Projected Units will fill in when the Units of Service tab's service units are filled in. • Row 49: CM (19) Per Unit was created. This reflects the amount per unit from 19. Care Management. The maximum value is: \$75.00. If the value is more than \$75.00, a message to "Adjust line 19" will appear. • Row 50 (CHECK: this should be -0-) confirms that the Row 36 (19b. TOTAL SUA COST) is calculated correctly. If the number is red, not enough funding was reported. If the number is (red & in parenthesis), too much was funding was reported. • Row 51 should have green OKs. If there are service units, there needs to be a budget. Ombudsman Program, Area Plan Admin, and Sub-Totals/Totals do not have this requirement. • Row 40 reflect the maximum amount of 19. Care Management funds that can be
Other Programs	<ul style="list-style-type: none"> • Agency services that aren't funded by the SUA should be listed here. • No Funding (Rows 29 – 35) should be filled in. • Projected units are not needed.
VII	<ul style="list-style-type: none"> • Use the Title VII worksheet for Ombudsman (not III-B funded) or Elder Abuse Prevention. • Projected units are not needed.
Senior Volunteer	<p>Complete if applying for the FY 2023 Senior Volunteer Program grant. Some fields are populated when the agency is selected on the Application-Signature tab.</p>
Plan Admin	<p>When the agency is selected on the Application-Signature tab, it will populate here. The dollars will link from other spreadsheets.</p>
Cost Itemization	<p>Complete itemized information for Equipment and/or Capital Expenditures greater than or equal to \$5,000. When the agency is selected on the Application-Signature tab, it will populate here.</p>
Budget Justification	<p>Describe the Matching and Non-Matching revenue sources for each program. When the agency is selected on the Application-Signature tab, it will populate here.</p>
Contractor Subaward Details	<ul style="list-style-type: none"> • Provider Name: Enter the agency/organization that provide services. • Service Provided: Select the Service from the drop down menu. Once a service has been selected once, auto-complete is available for future entries. "COVID-19 Services" has been added as a selection. • Relationship: Select Subaward, Contractor, or MOU. • Total Provider Cost: Enter the amount the provider receives. • Receives OAA Funds: Enter Yes or No. <p>When the agency is selected on the Application-Signature tab, it will populate here.</p>

Taxonomy #	Service Name	Change (%)	Variance Reason yellow indicates a variance explanation is required for that service(here) & a new service template is needed (word document).
Federal Aging Services			
1	Personal Care	2.56%	
2	Homemaker	2.47%	
3	Chore	98.17%	The increase in units in Chore is due to a mild winter with relatively few snow storms that resulted in the need for snow removal.
4	Home Delivered Meals	1.96%	
	<i>NSIP Eligible Home Delivered Meals</i>	2.00%	
5	Adult Day Care/Health	0.00%	
6	Case Management - IIIB	0.00%	
7	Assisted Transportation	0.00%	
8	Congregate Meals	11.43%	Congregate units increased due to an increased participation in Diner's Choice.
	<i>NSIP Eligible Congregate Meals</i>	11.02%	Congregate units increased due to an increased participation in Diner's Choice.
9	Nutrition Counseling	0.00%	
10	Transportation	0.00%	
11	Nutrition Education	0.00%	
12	Information & Assistance	0.54%	
13	Health Promotion/Disease Prevention (Evidence-Based)	0.00%	
14	Health Promotion/Disease Prevention (Non Evidence-Based)	0.00%	
15	Reserved		
16	Legal Assistance	1.79%	
17	Reserved		
18	Reserved		
19	Reserved		
State Aging Services			
20	Care Management	34.59%	The increase in Care Management units is driven in part by the fiscal needs of ongoing operational costs including supervisory and administrative components of the program which are included in the final budget amount but do not directly generate units of services.
21	Telephoning & Visiting	0.00%	
22	Senior Center Hours	1.41%	
23	Material Distribution	-0.38%	
24	Social Activities	0.00%	
25	Counseling	0.00%	
26	Respite	0.00%	
27	Outreach	7.69%	
28	Information Services	2.08%	
29	Legal Outreach	0.00%	
Caregiver Services			
30	Caregiver Counseling	0.00%	
31	Caregiver Training	0.00%	
32	Caregiver Respite	19.65%	FY-23 ENOA will expand respite care services to include in-home overnight and out-of-home overnightst to allow for extended respite needs.
33	Caregiver Supplemental Services	307.69%	FY-23 ENOA will expand supplemental services based on the greatest needs of the participants we are serving, including but not limited to CG Self-Directed Care Chore and CG Self-Directed Care Home modifications/repairs.
34	Caregiver Assistance: Case Management	4.25%	
35	Caregiver Support Groups	0.00%	
36	Caregiver Assistance: Information & Assistance	0.00%	

Taxonomy #	Service Name	Change (%)	Variance Reason yellow indicates a variance explanation is required for that service(here) & a new service template is needed (word document).
37	Caregiver Outreach	0.00%	
38	Caregiver Information Services	0.00%	
39	Reserved		
ADRC Direct Services			
40	Information & Referral	5.00%	
41	Options Counseling	-21.74%	Most ADRC consumer calls in our service area that could turn into Options Counseling generally want only the resource information & decline follow up from an Options Counselor.
42	Transitional Options Counseling	0.00%	
43	Benefits Assistance	0.00%	
44	Mobility Training	0.00%	

Eastern Nebrasks Office on Aging

AREA AGENCY ON AGING: Eastern Nebraska Office 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>Eastern Nebraska Office on Aging</u>	Name: <u>Mary Ann Borgeson</u>
Address: <u>4780 S. 131st Street</u>	Address: <u>12503 Anne</u>
City: <u>Omaha</u> , NE Zip <u>68137</u>	City: <u>Omaha</u> , NE Zip <u>68137</u>
Phone: <u>(402) 444-6444</u>	Phone: <u>(402) 676-2227</u>
Executive Officer: <u>Trish Bergman</u>	

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

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

III-B - Supportive Services	<u>\$1,600,408.00</u>
III-C(1) - Congregate Meals	<u>\$1,077,514.00</u>
III-C(2) - Home-Delivered Meals	<u>\$1,388,928.00</u>
III-D - Disease Prevention & Health Promotion	<u>\$33,403.00</u>
III-E - Family Caregivers Support Program	<u>\$850,951.00</u>
VII-Ombudsman & Elder Abuse	<u>\$190,896.00</u>
State Funds (such as Care Management, ADRC, Senior Volunteer) (Lines 17a, 17b, 17c, & 19)	<u>\$1,085,394.00</u>
SUBTOTAL	<u>\$6,227,494.00</u>
Area Agency on Aging Composite Match (Lines 14a-15b)	<u>\$76,600.00</u>
Area Agency on Aging Composite Non-Match (Lines 10 - 12b)	<u>\$691,831.00</u>
Area Agency on Aging Composite Gross Cost (Line 9)	<u>\$7,001,783.66</u>

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

Signed:

See Area Plan Document _____
Trish Bergman
 Executive Officer
 Eastern Nebraska Office on Aging

See Area Plan Document _____
Mary Ann Borgeson
 Chairperson
 Eastern Nebraska Office on Aging

SIGNED COPY INCLUDED WITH STATE PLAN

Taxonomy #	Service Name	Service Unit	Units of Service				Change (%)
			07/01/21 - 12/31/21 (Actual)	01/01/22 - 06/30/22 (Projected)	07/01/21 - 06/30/22 (Combined)	07/01/22 - 06/30/23 (Projected)	
Federal Aging Services							
1	Personal Care	Hour	3,159	3,159	6,318	6,480	2.56%
2	Homemaker	Hour	7,729	7,729	15,458	15,840	2.47%
3	Chore	Hour	512	800	1,312	2,600	98.17%
4	Home Delivered Meals	Meal	84,353	82,863	167,216	170,500	1.96%
	<i>NSIP Eligible Home Delivered Meals</i>	<i>Meal</i>	<i>65,935</i>	<i>66,474</i>	<i>132,409</i>	<i>135,057</i>	<i>2.00%</i>
5	Adult Day Care/Health	Hour			-		0.00%
6	Case Management	Hour			-		0.00%
7	Assisted Transportation	One-Way Trip			-		0.00%
8	Congregate Meals	Meal	33,952	34,000	67,952	75,722	11.43%
	<i>NSIP Eligible Congregate Meals</i>	<i>Meal</i>	<i>33,048</i>	<i>33,750</i>	<i>66,798</i>	<i>74,161</i>	<i>11.02%</i>
9	Nutrition Counseling	Hour			-		0.00%
10	Transportation	One-Way Trip			-		0.00%
11	Nutrition Education	Session	25	25	50	50	0.00%
12	Information & Assistance	Contact	2,406	1,871	4,277	4,300	0.54%
13	Health Promotion/Disease Prevention (Evidence-Based)*	* Client Served	293	107	400	400	0.00%
14	Health Promotion/Disease Prevention (Non Evidence-Based)*	* Client Served	122	38	160	160	0.00%
15	Reserved						
16	Legal Assistance	Hour	2,798	2,507	5,305	5,400	1.79%
17	Reserved						
18	Reserved						
19	Reserved						
State Aging Services							
20	Care Management	Hour	3,950	3,800	7,750	10,431	34.59%
21	Telephoning & Visiting	Hour			-		0.00%
22	Senior Center Hours	Hour	10,602	10,279	20,881	21,175	1.41%
23	Material Distribution	Unit	2,671	2,383	5,054	5,035	-0.38%
24	Social Activities	Person Hour	101,796	92,204	194,000	194,000	0.00%
25	Counseling	Hour			-		0.00%
26	Respite	Hour			-		0.00%
27	Outreach	Activity	14	12	26	28	7.69%
28	Information Services	Activity	41,954	50,723	92,677	94,608	2.08%
29	Legal Outreach	Activity	5	2	7	7	0.00%
Caregiver Services III-E							
30	Caregiver Counseling	Hour			-		0.00%
31	Caregiver Training	Hour			-		0.00%
32	Caregiver Respite	Hour	7,815	8,900	16,715	20,000	19.65%
33	Caregiver Supplemental Services	Unit	11	15	26	106	307.69%
34	Caregiver Assistance: Case Management	Hour	597	650	1,247	1,300	4.25%
35	Caregiver Support Groups	Session			-		0.00%
36	Caregiver Assistance: Information & Assistance	Contact			-		0.00%
37	Caregiver Outreach	Activity	1	1	2	2	0.00%
38	Caregiver Information Services	Activity			-		0.00%
39	Reserved						
ADRC Direct Services							
40	Information & Referral	Contact	2,116	1,487	3,603	3,783	5.00%
41	Options Counseling	Hour	38	8	46	36	-21.74%
42	Transitional Options Counseling	Hour			-		0.00%
43	Benefits Assistance	Hour			-		0.00%
44	Mobility Training	Hour			-		0.00%
45	Point of Entry	Hour			-		0.00%
46	Unmet Service Needs	Hour			-		0.00%
47	Home Care Provider Registry	Hour			-		0.00%
COVID-19 Services							
50	COVID19 To-Go Meals	Meal			-	750	0.00%
51	COVID19 Home Delivered Meals	Meal			-	2,720	0.00%
52	COVID19 Well Check	Contact			-		0.00%
53	COVID19 Consumables	Delivery	3		3	3	0.00%
54	COVID19 Devices	Unit			-		0.00%
55	COVID19 Group Socials	Contact			-		0.00%
56	COVID19 VAC Support	Hour			-		0.00%
57	COVID19 VAC Transportation	One-Way Trip			-		0.00%
60	COVID19 CG Homemaker	Hour			-		0.00%
61	COVID19 CG Home Delivered Meal	Meal			-		0.00%
62	COVID19 CG Consumable Supplies	Delivery			-		0.00%
63	COVID19 CG Devices	Unit			-		0.00%

FUND TRANSFER

In this Application and Plan the following transfers of funds between funding categories are included. This represents changes to the reservation table (Federal Funding). Transferred funds should be listed on the appropriate tab's Row 34 (18b. Federal Carryover).

- Title III-B to Title III-C(1)	\$	-
- Title III-B to Title III-C(2)	\$	-
- Title III-C(1) to Title III-B	\$	127,147.00
- Title III-C(1) to Title III-C(2)	\$	-
- Title III-C(2) to Title III-C(1)	\$	-
- Title III-C(2) to Title III-B	\$	-

COMMENTS:

Transfer \$127,147 Federal funds from C1 to III B for Supportive Services.

NOTE: ONLY THE ABOVE MENTIONED FUNDS CAN BE TRANSFERRED.

**APPROVAL OF THE AREA PLAN
INCLUDES APPROVAL OF THIS REQUEST.**