

Midland Area Agency on Aging

Annual Plan Update

Annual Budget FY

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: Midland 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>Midland Area Agency on Aging</u>	Name: <u>Charles Neumann</u>
Address: <u>2727 W 2nd St Ste. 440</u>	Address: <u>908 N. Kansas</u>
City: <u>Hastings</u> , NE Zip <u>68901</u>	City: <u>Hastings</u> , NE Zip <u>68901</u>
Phone: <u>(402) 463-4565</u>	Phone: <u>402-463-5471</u>
Executive Officer: <u>Casey Muzic</u>	


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

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

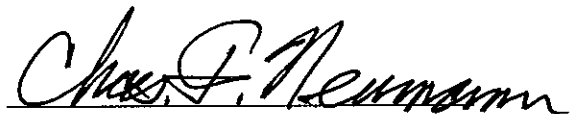
III-B - Supportive Services	\$292,612.00
III-C(1) - Congregate Meals	\$418,879.00
III-C(2) - Home-Delivered Meals	\$848,200.00
III-D - Disease Prevention & Health Promotion	\$14,748.00
III-E - Family Caregivers Support Program	\$109,663.00
VII-Ombudsman & Elder Abuse	\$9,350.00
State Funds (such as Care Management, ADRC, Senior Volunteer) (Lines 17a, 17b, 17c, & 19)	\$272,122.00
SUBTOTAL	\$1,965,574.00
Area Agency on Aging Composite Match (Lines 14a-15b)	\$197,680.00
Area Agency on Aging Composite Non-Match (Lines 10 - 12b)	\$1,609,125.00
Area Agency on Aging Composite Gross Cost (Line 9)	\$3,772,359.00

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

Signed:



 Casey Muzic
 Executive Officer
 Midland Area Agency on Aging



 Charles Neumann
 Chairperson
 Midland Area Agency on Aging

SIGNED COPY INCLUDED WITH STATE PLAN

Midland Area Agency on Aging
FY23 Plan Update
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Midland Area Agency on Aging

2727 West 2nd, Suite 440

Hastings, Nebraska 68902-0905

Ph: 402-463-4565

Section A: Administrative

July 1, 2019 – June 30, 2023

Description of Midland Area Agency on Aging

The Mission of Midland Area Agency on Aging is to advocate and provide for caring, quality services to older adults and their families that enable independent living with dignity in their homes and communities.

Midland Area Agency on Aging (MAAA) was formed in 1973 under the Nebraska Inter-local Agreement Act, which allows local government to form an entity for a common purpose. This agreement formed an agency for planning, advocacy and administration of community aging services for the member counties. The first two counties to sign the agreement were Hall and Adams Counties. By 1984 Clay, Hamilton, Howard, Merrick, Nuckolls and Webster Counties had joined to bring the total of eight counties that MAAA serves today.

Older Americans Act services are sub-awarded in Hall and Hamilton Counties, and Direct Services are provided in the remaining six counties. Member counties provide one to three members of their County Board, or an appointed alternate, to serve on the Governing Board of MAAA. Member counties provide an annual membership fee to the agency, currently based on \$1.00 per person over the age of 60 in each county. This fee provides each county with planning, over site and evaluation of MAAA services.

Midland Area Agency on Aging operates on a decentralized area management system, focusing planning and operating responsibilities for Older Americans Act services at the county level. A single entity is recognized at the county level to plan for service delivery and development. These entities offer direct service or sub-award service operations to provide OAA services.

The Choosing Home Or In Community Elder Services (CHOICES) division of MAAA, comprised of the Care Management, Senior Care Options and Medicaid Waiver programs operates on a more centralized management system, with its supervisory staff based in MAAA's central office. Care Manager/Service Coordinators have offices throughout the service area to provide maximum service linkages with the county senior services offices. This component of the agency was begun in 1987 with the passage of LB 42, The Nebraska Care Management Act. In 1988, the Medicaid Waiver program was implemented, and then in 1994, the final component of CHOICES, Medicaid pre-admission screening began within the agency.

Demographics

The following demographics were obtained from the estimated 2014 populations from the College of Public Affairs Research the University of Nebraska at Omaha.

The MAAA service area total population is **128,691**. The two largest Cities are Grand Island which had a population of 50,550 and the Hastings whose population was 25,093. Together they contain 59% of the MAAA total population. The remaining population is located in smaller cities, villages or in the county.

County	Total Population	Aged 65 and older	% 65 and older	Aged 85 and older	% 85 and older
Adams	31,367	4824	15.4%	933	2.1%
Clay	6,469	1,174	18.1%	202	3.1%
Hall	59,431	7,919	13.3%	1,320	2.2%
Hamilton	9,090	1,556	17.1%	301	3.3%
Howard	6,308	1,211	19.2%	205	3.2%
Merrick	7,802	1,468	18.8%	210	2.7%
Nuckolls	4,462	1,170	26.2%	252	5.6%
Webster	3,762	903	24.0%	170	4.5%
MAAA	128,691	20225	15.70%	3593	2.80%

Table 1- MAAA county population age 65 and over and 85 and over including percent of total county population for both age groups.

Table 1

County	State Ranking
Adams	76
Clay	61
Hall	87
Hamilton	66
Howard	52
Merrick	55
Nuckolls	7
Webster	14

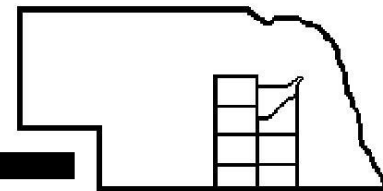
The College of Public Affairs Research ranked each of the 93 Nebraska counties by percent of total population who are 65 years of age and older.

Two of MAAAs counties ranked in the top 15 for percent of population that is 65 years of age and older. Population maps show that the southernmost central Nebraska counties are among the counties that have the highest percent of population over 65 in the state.

Table 2

Midland Area Agency on Aging

2021 GOVERNING BOARD MEMBERS



ADAMS

Lee Hogan
4165 West Oakridge Road
Hastings, NE 68901
lhogan@gtmc.net
(402) 469-0112

Charles Neumann
Chairperson
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Hastings, NE 68901
(402) 463-5471
Cell 461-7844
Marylou.neumann@yahoo.com

Eldon Orthmann
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Hastings, NE 68901
(402) 462-9846
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eldonorthmann@gmail.com

CLAY

Scott Bitterman
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Scott.Bitterman@george-brothers.com

HALL

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940 S. North Road
Grand island, NE 68803
(308) 382-2070
karenb@hallcountyne.gov

Butch Hurst
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Grand Island, NE 68803
(308) 675-2888
(308) 391-2940
butchh@hallcountyne.gov

Scott Sorensen
1410 Birdie Blvd.
Cairo, NE 68824
308-390-2122
scotts@hallcountyne.gov

HAMILTON

John W. Thomas
1119 8th Street
Aurora, NE 68818
402-694-8919
jtiv127@gmail.com

HOWARD

Kathy Hirschman
830 Hardy Road
St. Paul, NE 68873
(308) 754-7855
Bobkatcattle@hotmail.com

MERRICK

Roger Wiegert
Vice Chairperson
7585 N. Gunbarrel Road
Grand Island, NE 68801
(308) 390-4101
rrwieg@kdsi.net

NUCKOLLS

Tim Zikmund
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Nelson, NE 68961
402-621-0130
tzikmund28@gmail.com

WEBSTER

Dan Shipman
441 Road 2100
Guide Rock, NE 68942
(402) 257-2271
sshipmann@yahoo.com

ALTERNATES

(In absence of regular board members)

- **CLAY**
L.Wayne Johnson
602 S. Martin Ave.
Clay Center, NE 68933
(402) 469-9499
- **HAMILTON**
Rich Nelson
721 Turtle Beach
Marquette, NE 68854
402-630-5888
rnelson68854@gmail.com
- **HOWARD**
- **MERRICK**
Edward Dexter
2014 24th Street
Central City, NE 68826
308-940-0475
Edward.dexter@gavilon.com
- **NUCKOLLS**
Richard Schwieger
355 West 8th
Superior, NE 68978
(402) 879-5765
- **WEBSTER**

AMENDED AND RESTATED CONSTITUTION AND BYLAWS

OF

MIDLAND AREA AGENCY ON AGING

Revision date October 11, 2018

ARTICLE I – Agency

Section 1. Name of Agency. The name of the Agency shall be “Midland Area Agency on Aging”.

Section 2. Governing Body. The Governing Body of the Agency shall be known as

“Midland Area Agency on Aging Governing Board”, and shall be composed of representatives from the member counties who shall be deemed eligible for appointment as prescribed in Article III, Governing Body, in the By-Laws of the Agency.

Section 3. Seal of the Agency. The Seal of the Agency shall bear the name of the Agency and the year of its organization.

Section 4. Administrative Headquarters. The Administrative Headquarters of the Agency shall be located in the City of Hastings, State of Nebraska. The Governing Board shall hold its meetings in Hastings or such other places as it may designate by resolution.

ARTICLE II – Purpose

Section 1. Purposes. The purposes of the Agency shall be as follows:

A. To act as the firm official advocate for the area’s older citizens regarding their needs, problems and concerns;

B. To identify and define the most pressing needs of the Area’s older citizens;

C. To develop effective plans to meet the area’s identified needs on a continuing and priority basis;

D. To develop or case to have developed services to meet the identified priority needs of the area’s older citizens;

E. To continually monitor and evaluate the area’s services and programs for older people to insure that program and service objectives are meeting their needs.

F. To cooperate with and coordinate the area’s public and private programs, services, and efforts on behalf of the older individuals in the area, to insure that an effective, comprehensive umbrella of services are at their disposal.

G. To develop and implement an annual area operating plan of programs and services;

H. To receive and expend the funds granted to the agency by federal, state, county and municipal governments and by private individuals or foundations, and/or to contract with the above units of government and private entities in a manner consistent with the objectives and priorities established by the Agency;

I. To furnish general and technical aid to member governmental subdivisions and individuals as they may request;

J. To review and comment on proposals that impact municipal, county, state, regional or federal programs for the aging;

K. To do any and all things within the power of the member counties of the Agency to improve the quality of life for the area's older citizens.

ARTICLE III – Governing Board of the Agency

Section 1. Representation. Each member County Board to the Midland Area Agency on Aging Interlocal Agreement, which by Nebraska law creates the Agency, shall designate members of its board to serve on the Governing Board of the Agency. Representative positions shall be as follows:

Adams	3	Merrick	1	Hall	3	Hamilton	1
Clay	1	Nuckolls	1	Howard	1	Webster	1

Alternates for the above appointed County Board members may also be designated by the County Board to serve on behalf of the official County designee. Alternates may be from the general public, but shall be designated on the basis of awareness of community programs for the elderly in their area and an appointment procedure adopted by the County Board. The individuals so designated shall have full authority to act on behalf of the County represented regarding matters to come before the Governing Body, except the commitment of County funds not previously committed to the Agency.

Section 2. Eligibility. To be eligible to serve on the Governing Body, an individual cannot serve as an officer, director or employee of any senior center board that receives direct funding from the Agency.

Section 3. Appointment Procedures. The Governing Body of each member county shall by resolution approve its Chairman's appointee(s) and alternates to the Governing Body of the Agency.

Section 4. Term. The term of each appointed member or alternate shall be one year, with no limit upon the number of terms which an individual member may serve.

Section 5. Compensation. A member shall receive no compensation, but shall be entitled, dependent upon the availability of funds, to necessary expenses, including travel expenses, incurred in the discharge of duties.

Section 6. Duties of Members of Governing Body. Each member of the Governing Body shall discharge his or her duties as a member of the Governing Body, including his or her duties as a member of a committee: (a) in good faith; (b) with the care an ordinarily prudent person in a like position would exercise under similar circumstances; and (c) in a manner he or she reasonably believes to be in the best interests of the Agency,

Section 7. Censure of Member of Governing Body; Notice to Appointing Authority. Members of the Governing Body who fail to perform the duties of a member or act in a manner contrary to the best interests of the Agency may be subject to censure by the Governing Body. In the event a majority of the Governing Body, by majority vote of those in attendance at a duly-called meeting of the Governing Body where a quorum is present, approves a motion to censure a member of the Governing Body, such

censure shall be recorded in the written minutes of the Governing Body and written notice of the censure shall be sent to the County Board that appointed the censured member requesting that another representative of that County Board be appointed to replace the censured member. Conduct worthy of censure includes, but is not limited to, failure to perform the duties of a member of the Governing Body or committees, interference with Agency operations, intentional disregard of conflicts of interest, breaches of confidence and/or duties, disruption of meetings, and/or personal attacks against fellow Governing Body members.

Section 8. Executive Committee. The Executive Committee shall be composed of the Chairman, Vice Chairman and Secretary. At the discretion of the Chairman, the Executive Committee may be activated to act on behalf of the Governing Board for the interpretation of the Agency's policies and for carrying out Governing Board authorized functions between regular meetings and in those cases where emergency action is necessary.

ARTIVLE IV – Officers and Employees

Section 1. Chairman. The Chairman shall preside at all meetings of the Governing Board. Except as otherwise authorized by the resolution of the Governing Board, the Chairman or his/her authorized representative shall sign all contracts, deeds and other instruments made by the Agency. At each meeting, the Chairman shall submit such recommendations and information as may be deemed proper concerning the business affairs and policies of the Agency. Page 4 of 7

Section 2. Vice-Chairman. The Vice-Chairman shall perform the duties of the Chairman in the absence or incapacity of the Chairman; and in the case of the resignation or death of the Chairman, the Vice-Chairman shall perform such duties as are imposed on the Chairman until such time as a new Chairman is selected.

Section 3. Secretary. The Secretary shall keep the records of the Agency and shall act as secretary of the meetings of the Agency but may authorize Agency Staff to record the proceedings of the meetings. Meeting Records shall include a record of all votes and the journal proceedings to be kept for such purpose. Meeting records shall be public records. The Secretary shall keep in safe custody the seal of the Agency and shall have power to affix the seal.

Section 4. Fiscal Agent. The Agency shall act as its own Fiscal Agent and shall have custody of all funds entrusted to it, and shall be subject to all customary audit, control, and disbursal procedures.

Section 5. Executive Director. An Executive Director shall be appointed by the Governing Board of the Agency. The Governing Board shall annually review the employment of the Executive Director. The compensation of the Executive Director shall be determined by the Governing Board.

Section 6. Parliamentarian. A Parliamentarian may be appointed by the Chairman for his/her term of office and may attend the meetings of the Agency. The Parliamentarian shall have no vote unless he/she has otherwise been officially appointed to the Agency Governing Board as provided for in Article III.

Section 7. Additional Duties. The officers of the Governing Board shall perform such other duties and functions as may from time to time be required by the Governing Board or the By-Laws or rules and regulations of the Agency.

Section 8. Elections and Appointments. The Chairman, Vice-Chairman, and Secretary shall be elected at the annual meeting by the members of the Governing Board of the Agency. They shall hold office for one year or until their successors are elected. Any person appointed to the office of Executive Director of the Agency shall have such term as the Governing Board affixes, but no member of the Governing Board shall be eligible to serve as Executive Director except as a temporary appointee.

Section 9. Vacancies. Should the office of Chairman, Vice-Chairman, or Secretary become vacant, the Governing Board shall elect a successor from its membership at the next regular meeting. Such election shall be for the unexpired term of the office.

Section 10. Additional Personnel. The Executive Director may from time to time employ such personnel as necessary to exercise its powers, duties and functions. The selection and compensation of such personnel shall be determined by the Executive Director subject to the laws of the State of Nebraska and policy of the Agency

ARTICLE V – Meetings

Section 1. Annual Meetings. The Annual Meeting of the Governing Board shall be held on the regular meeting date in the month of the December at the regularly designated time and location. Officers elected at the Annual Meeting shall assume of the duties of the office at the next regular meeting.

Section 2. Regular Meetings. Regular meetings will be held at such place, date and time as may from time to time be designated by the Governing Board. Meetings shall be held in accordance with the Nebraska Open Meeting Law.

Section 3. Special Meetings. Special Meetings of the Governing Board may be called by the Chairman, or by three members of the Governing Board, for the purpose of transacting any business designated in the call. The call for a Special Meeting may be delivered at any time prior to the time of the proposed meeting to each member of the Governing Board or may be mailed to the business or home address of each member at least ten (10) days prior to the date of such Special Meeting. Meetings shall be in accordance with the Nebraska Open Meeting Law.

Section 4. Voting. A majority, defined as seven (7) members, shall constitute a quorum of the Governing Board for the purpose of conducting its business and exercising its powers for all other purposes. Action may be taken by the Governing Board upon a vote of a majority (7) of the members present. Voting may be done on a Yea or Nay vote unless otherwise specified voting has to be done by a roll call vote or in the case of a tie.

ARTICLE VI – Basis of Support

Section 1. Method of Assessment. The Agency shall assess the member counties a proportionate share of the support of the Agency on a per capita basis. Said proportionate assessment shall be based on the county's population aged 60 and over.

Section 2. Procedure of Payment. The Agency shall each year on or before a date affixed by the County Board of Commissioners/Supervisors of each member county, file with each respective County Clerk the estimate of the expenditures of the Agency of county funds for the ensuing fiscal year. The expenses shall be itemized as to amount and purpose for the approval of the County Board. Page 6 of 7

Each county shall transmit its share of the Agency budget to the Agency at the beginning of the county's fiscal year, or by semi-annual or monthly payments. The Agency shall at the end of each year inform the Governing Board of the balance in the Agency's program budget and its credit of the remaining balance.

In addition to the assessment, each county may provide funds, equipment, and accommodations necessary for the work of the Agency, or for their respective county within the Agency. The expenditures of these resources by the Agency, exclusive of gifts and grants, shall be within the amounts appropriated for the purpose by the respective member county boards and no expenditures nor agreements for expenditures shall be valid in excess of those amounts.

ARTICLE VII – Rules of Order

Section 1. Rules of the Agency. The rules contained in Robert's Rules of Order shall govern the Agency in all cases to which they are applicable, and in which they are not inconsistent with the agreement creating this Agency and its By-Laws.

ARTICLE VIII – Amendments

Section 1. Amendments to By-Laws. The By-Laws of the Agency shall be amended only with the approval of a majority of the members of the Agency Governing Board at a regular meeting, but no such amendment shall be adopted unless at least 30 days written notice thereof has been given to all members of the Agency and to all members of the member County Board of Commissioners/Supervisors.

This document constitutes the Constitution and By-Laws of the Midland Area Agency on Aging and is the official and current organization document of the Agency.

BY: _____ BY: _____

Chairman, Midland Area Agency on Secretary, Midland Area Agency on
Aging Governing Board Aging Governing Board

DATE: _____ DATE: _____

2021 MAAA Advisory Council

County Council Representatives:

Viola Clements
P.O. Box 232
Juniata, NE 68955-0232
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Edgar NE 68935
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Fairfield Ne 68938
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Dick Phillips – Hamilton
Chairperson
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Aurora, NE 68818
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Shorty Hahn – Merrick
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Home: (308) 946-3521

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kkolder@gmail.com

Ashley Schultz - Hall
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chyde24@live.com

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Jim Morgan
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jim.morgan@shdhd.org

Mandy Sullivan
Respite Task Force

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Alternates:

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Work: (402) 462-6211

Midland Area Agency on Aging
Central Office Staff
PHONE: 402-463-4565

Casey Muzic, Executive Director – 1 FTE extension 310

Agency policy and procedure, quality assurance, vendor and project contracts, legislative issues, HIPAA Compliance Officer for the Agency. Oversees III-E programs.

Linda O'Brien, Fiscal Manager – 1 FTE extension 302

Accounts payable and receivable, payroll, employee benefits, budgets, grant, financial and tax reporting.

Tammy Musgrave, Nutrition Services and Program Specialist – 1 FTE extension 306

Nutrition services, Farmer's Market, legal services, in-home services, training, health promotion.

Christopher Morrison, Information Services Specialist – 1 FTE extension 307

Client data, transportation and nutrition reports, technical support, purchasing, Liaison to the State/Network computer.

Pam Arterburn, Grant/Data Entry Assistant – 1 FTE extension 316

Client intake entry and service data entry for NAMIS II and Connect

Kristin Parr, Office Manager– 1 FTE extension 300

Transportation testing, mail in and out, telephone receptionist, human resources, background checks, agency information requests, administrative support, equal employment and non-discrimination officer for the agency.

Andrea Cox, CHOICES Director – 1 FTE extension 304

Policy, procedure in all CHOICES programs, personnel management of CHOICES staff.

Nicole Doremus, CHOICES Specialist – 1 FTE extension 301

Provider inquiries. Care Management, Senior Care Options and Medicaid waiver information and referrals. Resource Development duties.

JoAnn Schakat, CHOICES 1 Assistant – 1 FTE extension 314

Client billing inquiries. Care Management, Senior Care Options and Medicaid waiver information.

Gwen Decker, CHOICES 1 Assistant/Coordinator – 1 FTE 308-384-8212

Client billing inquiries. Care Management, Senior Care Options and Medicaid waiver information. Provider inquiries and Resource Development Duties.

CHOICES Coordinators- 8.6 FTEs Hastings: 402-463-4565, Grand Island: 308-384-8212

Care Management, Case Management, Senior Care Options and Medicaid Waiver, community based services.

Sandy Yilk, Cindy Gabriel, Kayla Jacobitz, Lara Schiffbauer, Robin Remm, Pamela Taylor, Laura Guthrie, Brandie Kral

DeAnna Tuttle-Ombudsman/SMP- .70 FTE extension 313

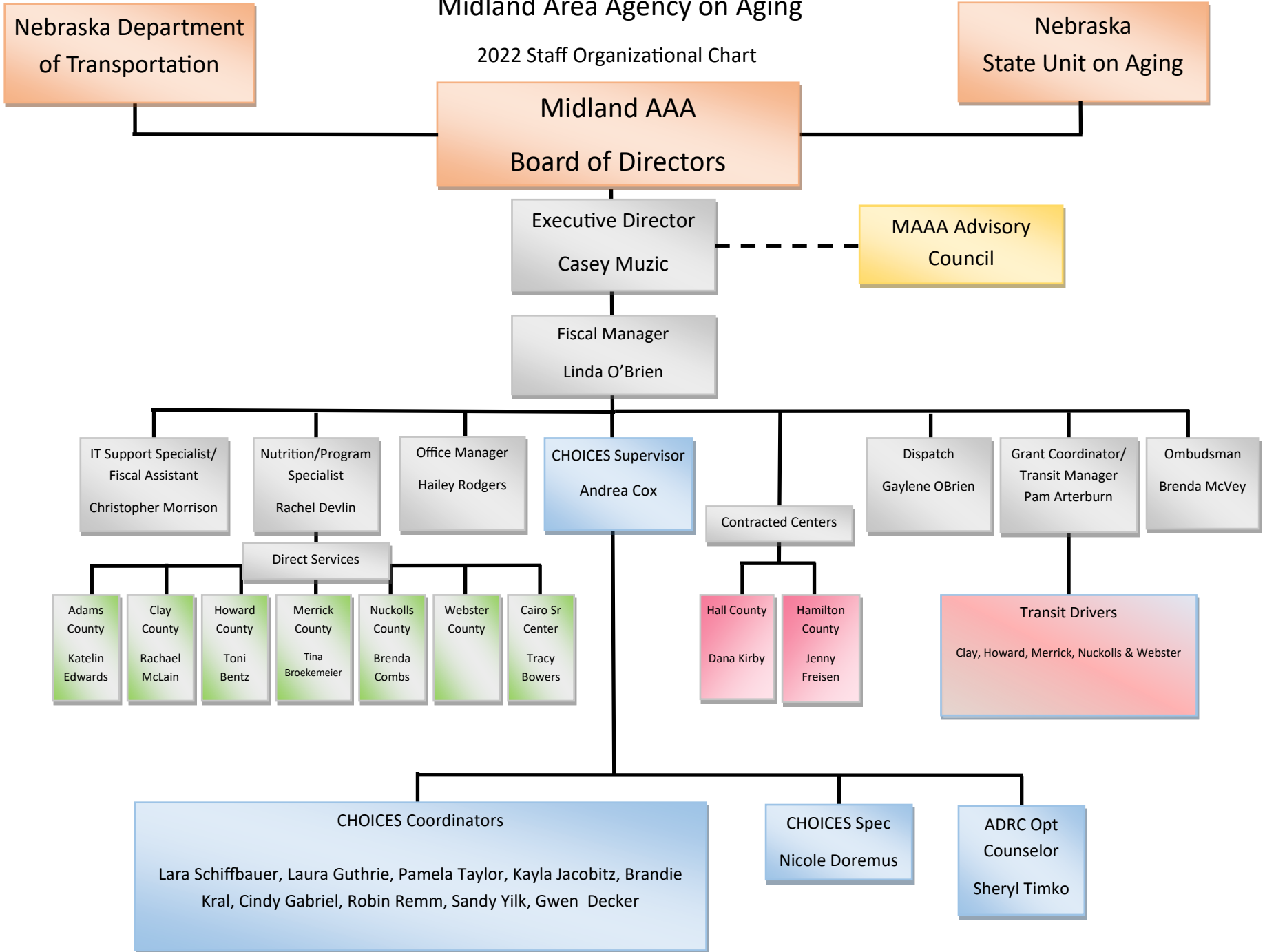
Advocate for the rights and well being of nursing home and assisted living facility residents. Provides education to residents and facility staff. SMP Coordinator educates the public on health care fraud prevention.

Sheryl Timko-ADRC Option Counselor 1 FTE extension 332

Resource contact for the Aged and Disabled Resource Center.

Midland Area Agency on Aging

2022 Staff Organizational Chart



Midland Area Agency on Aging

Active Service Summary

Service #	Service	MAAA	Direct or Sub Award?
1	Personal Care	NO	
2	Homemaker	YES	Direct
3	Chore	YES	Direct
4	Home Delivered Meals	YES	Direct and Contract
5	Adult Day Care/Health	NO	
6	Case Management	YES	Direct
7	Assisted Transportation	NO	
8	Congregate Meals	YES	Direct and Contract
9	Nutrition Counseling	NO	
10	Transportation	NO	
11	Nutrition Education	YES	Direct
12	Information & Assistance	YES	Direct
13	HP/DP (Evidence-Based)	YES	Direct
14	HP/DP (Non Evidence-Based)	YES	Direct
16	Legal Assistance	YES	Contract
20	Care Management	YES	Direct
21	Telephone & Visiting	NO	
22	Senior Center Hours	NO	
23	Material Distribution	YES	Direct
24	Social Activities	YES	Direct
25	Counseling	YES	Direct
26	Respite	NO	
27	Outreach	YES	Direct
28	Information Services	YES	Direct
29	Legal Outreach	YES	Contract
30	Caregiver Counseling	NO	
31	Caregiver Training	NO	
32	Caregiver Respite	YES	Direct
33	Caregiver Supplemental Services	YES	Direct
34	Caregiver Assistance: Case Management	YES	Direct
35	Caregiver Support Groups	NO	
36	Caregiver Assistance: Information & Assistance	YES	Direct
37	Caregiver Outreach	YES	Direct
38	Caregiver Information Services	NO	
40	Information & Referral	YES	Direct
41	Options Counseling	YES	Direct
42	Transitional Options Counseling	NO	
43	Benefits Assistance	YES	Direct
44	Mobility Training	NO	

Midland Area Agency on Aging

2727 West 2nd, Suite 440

Hastings, Nebraska 68902-0905

Ph: 402-463-4565

Section B: Goals Objectives and Strategies

July 1, 2019 – June 30, 2023

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.

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.

Long-Term Care Ombudsman Program

The mission of the Nebraska Ombudsman Office is to empower and enhance the lives of residents in long-term care facilities by seeking resolution of issues and advocating for residents' rights. The program is responsible, through federal and state law, to advocate for residents of long-term care facilities, including nursing homes and assisted living facilities. The Office strives to fulfill this responsibility every day by working to resolve complaints that impact the health, safety and welfare of residents as well as by informing residents of their rights.

MAAA Ombudsmen recruit and manage the volunteers from their areas. All MAAA Ombudsmen and volunteers work to resolve complaints on behalf of the residents.

Objective 1:

Expand the Nebraska Ombudsman Program.

In November 2021 we created a full-time Ombudsman position. With this change we will be have a more active presence in our 8 county area and also work on increasing the number of Ombudsman volunteers.

Strategies:

1. Participate as able in local Ombudsman programs offered.
2. With assistance of SUA increase the number of Ombudsman volunteers.

Measurements:

1. Increase the number of volunteers in MAAA service area by June 30, 2023. (Baseline 1) **Currently we have no volunteers. We are currently working with a possible volunteer to get that back up.**
2. Increase the number of facilities visited on an annual basis by 10% by June 30, 2023. (Baseline visits 152). **Completed 68 visits since November 2021. We believe that having a full time Ombudsman will allow us to meet or exceed our goal.**

Objective 2:

Increase awareness of and protect the rights of older Nebraskans in long-term care facilities, including their right to be free from abuse, neglect and financial exploitation. Ensure that residents have the right to live in the least restrictive environment possible.

Strategies:

1. Conduct facility staff in-service trainings at long-term care facilities in MAAA's service area regarding residents' rights and how to prevent, identify and report abuse and financial exploitation of residents.
2. Provide facility consultations throughout the year to facility staff.
3. Provide information and consultations to residents and individuals on residents' rights and resolve complaints by or on behalf of residents.
4. Provide education and information on residents' rights and abuse at Resident and Family Council meetings in long-term care facilities in MAAA service area.
5. Provide residents' rights and abuse materials to seniors, those in long-term care facilities, their friends and family.

Measurements:

1. Using the data from the National Ombudsman Reporting System 2017 report, increase or maintain the number of facility staff in-service trainings through June, 2023. (Baseline 5).
4 staff in-services have been provided so far this year. We are on track to meet this goal.
2. Using the data from the National Ombudsman Reporting System 2017 report, increase or maintain the participation in resident and family council through June, 2023. (Baseline 4).
Our Ombudsman has attended 3 resident council meetings this year. We are on track to meet our goal.
3. Using the data from the National Ombudsman Reporting System 2017 report, maintain the number of cases and consultations through June, 2023. (Baseline 325).
Currently the ombudsman has 47 cases and consults completed. Calls have been increasing recently and we are sure we will be on track to meet this goal

Goal 2: Protect Rights and Prevent Abuse

Elder Rights Protection/Elder Justice

MAAA will collaborate with APS on an ongoing basis on projects and initiatives, including the World Elder Abuse Awareness Day (WEAAD) observance. MAAA staff will attend an annual training on elder abuse, financial exploitation and legal issues at the state level. MAAA will continue to educate their staff on Elder Rights training as they become available.

Objective 1:

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

Strategy:

MAAA will become more involved with Disability Rights Nebraska and the Nebraska Caregiver Coalition to encourage, educate, and empower consumers on the rights and prevention of abuse, neglect, and exploitation of older adults and people with disabilities.

Measurement:

1. MAAA staff will attend at least one training per year on Elder Justice Issues and if available one training offered through Disability Rights of Nebraska.

MAAA staff has attended the Legal Aid Webinar on February 24, 2021 and Elder Justice Trainings.

2. MAAA staff will participate in at least 6 of the monthly Nebraska Caregiver Coalition Calls. **We are still on track to reach this goal. We have attended the Coalition calls every month they have been offered.**

Objective 2:

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

Strategies:

Disseminate information to help older adults and people with disabilities to protect themselves from elder abuse and financial exploitation.

Enhance outreach strategies throughout the service area to educate and empower consumers.

Measurements:

Hand out the Advance Directives brochure in English and Spanish through partner organizations to increase access to the brochure for older adults and people with disabilities.

MAAA will seek 2 new publications that will provide education to empower older Nebraskans and individuals with disabilities to protect themselves from elder abuse and financial exploitation. .

1. Increase awareness on elder abuse, neglect, and financial exploitation through publications and social media postings. **We have increased our social media presence through our face book page.**
2. Increase in the units of service for "Information Assistance" in the Taxonomy by 5%. Baseline 2,942. **We saw a drop in I&A Activity during COVID, but the calls are rebounding and we will be on track to meet or exceed this goal. We are on track to complete 1811 units.**

Objective 3:

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

Strategy:

MAAA will continue to make referrals to the ElderAccessLine® services and the Ombudsman Program, promote availability of services to prevent abuse, neglect, and exploitation of older adults and people with disabilities.

Measurements:

Maintain the number of clients referred to the Legal Services Program. Base line 160

We currently have 120 hours reported in Legal Aid. We hosted a law school clinic, August 2021. We are also sending out our Elder Access brochures and ads (English and Spanish) to our clients and contact information is published in our newsletters.

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.

Title III-D Programs - Health Promotion / Disease Prevention

Health Promotion and Disease Prevention Programming is provided through the aging network to help older adults live healthier more active lives. Low-cost interventions at the community level include areas such as fall prevention, physical activity, chronic disease self-management, medication management, foot care and nutrition. Seniors benefit from these programs by making behavioral changes that have proven effective in reducing the risk of disease and disability among the elderly.

MAAA will continue emphasizing the importance of leading healthy lifestyles by promoting additional evidence-based health promotion and disease prevention programs into the aging network. The availability of workshops and programs will be expanded to include more online opportunities, and the MAAA will work toward securing a broader and more sustainable funding base.

Objective:

Promote the use of evidence based programs throughout the aging network and explore new opportunities to provide evidence based programs for communities.

Strategies:

1. Identify and introduce new evidence based programs throughout the aging network.
2. Integrate the development and improvement of health literacy skills into evidence based programs throughout the aging network while partnering with other Health Department programs.
3. Continue to collaborate, promote and encourage falls prevention programs with Area Agencies and Health Departments.

Measurements:

1. Increase the number of sites offering evidence-based programs by 66% by June, 2023. Baseline, 3 sites (Nuckolls, Webster, Adams).

2. Increase the number of participants in evidence-based health programs by 10% by June, 2023. Baseline, 49 clients.

We will continue offering Tai Chi and are also going to start Bingocize in several of our service areas. We currently have served 57 unduplicated and 106 duplicated clients. We are on track to meet our unit goal of 212.

Aging & Disability Resource Centers (ADRC)

Since the 2015-2019 State Plan was developed, there has been significant progress on the ADRC initiative.

Legislation for a 2-year ADRC Demonstration Pilot program became law in 2015. The project launched July 1, 2016 with seven of the eight AAAs, in collaboration with several disability organizations, participating as ADRC sites. Each site provided Information and Referral, Options Counseling, and Identifying Unmet Needs services through a website, toll-free number, and walk-in service.

Due to the positive results of the Demonstration, the sponsor of the original Legislation filed a bill in January of 2018 that would transition it to a permanent program. It became law in April of 2018 and provided funding through June of 2020.

The seven AAAs and the disability partners of the Demonstration Pilot submitted new plans for the permanent program which offers Basic Information, Information and Referral, and Options Counseling through the same channels and site locations, retaining the statewide reach.

Objective:

Apply continuous improvement and innovation to overall program operations to advance the ADRC into a more robust program to provide security and service to those in need of services.

Strategies:

1. Attend training as provided by the SUA and other applicable resources.
2. Collaboratively improve the content and data analysis of the monthly report.
3. Work with the SUA on alternative funding sources.

Measurements:

1. MAAA will attend at least one statewide training opportunity each calendar year. MAAA has completed several trainings including ATP, Aging with Compassion, State Review Team, and Elder Justice Training.
2. Monthly reports will be completed by the 15th of the following month on the ADRC Dashboard to provide analysis of trends and variances, and strategies and tactics to address any identified challenges. We are on track with this goal.

3. Track the number of ADRC services offered with the goal of an average of four services offered, by June 30, 2023. Baseline: 2 **Beginning July 1st, 2022 MAAA will offer 5 ADRC services including I & R, Options Counseling, Transitional Options Counseling, Benefits Assistance, and Mobility Training.**
4. MAAA's ADRC will increase the number of engaged disability partners to 4 by June 30, 2023. Baseline: 3 **MAAA has met this goal.**

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.

Performance indicators are used to track progress for program outcomes. For home and community-based services, these indicators are: Efficiency indicators, which assess how many services are provided and at what cost, expressed as the number of participants served per dollars of funds expended; client outcome indicators, which include consumer assessment of service quality and effectiveness; effective targeting indicators, which assess the program's ability to serve those who may be vulnerable, such as minorities, people with disabilities, and those who live at or below the poverty level or live in rural areas.

Title III-B In-Home Services

In-Home Long Term Support Services enable individuals with disabilities and older adults to live in the community setting of their choice through availability of and access to high-quality long-term services and supports, including supports for families and caregivers. This maximizes the client experience of care, improves the health of clients, and reduces the per capita cost of health care by allowing individuals to remain in the community setting of their choice, receive the services they need to maintain and improve their health, and reduce or eliminate admission to long term care facilities.

In-Home Services include Homemaker, Chore, and Material Distribution and are available throughout our service area to Older Individuals age 60 and over. MAAA will offer access to the In-Home service(s) through coordination and delivery of the service(s) and through Self-Directed Care, where the client coordinates the services.

MAAA will continue to provide access to services in a manner that is planned, budgeted, and purchased under the direction and control of the client. The specific services utilized, such as Personal Care or Chore services, will be recorded in the system, rather than Self-Directed Care.

Quality in the provision of in-home services is also includes client satisfaction surveys completed by MAAA regarding Long-Term Services and Supports. Clients provide feedback regarding the services they receive and are initially returned to MAAA for review. MAAA will then provide the results to the SUA.

Objective 1:

Assist older Nebraskans to improve their health and live in the community through the availability or access to high-quality, community based in-home and access services, which will maximize their health and allow them to live in the community setting of their choice as long as possible.

Strategies:

1. Provide Homemaker, Chore, Material Distribution services to older Nebraskans.
2. Target provision of services to Older Nebraskans with the greatest economic and social need, those living in rural areas, those with limited English speaking proficiency, low income minority individuals, those at risk for institutional placement, and frail older adults.
3. Ensure quality of in-home services through use of a Long Term Services and Supports satisfaction survey of clients receiving in-home services.
4. Utilize III-B funds efficiently to assist as many older Nebraskan's to receive in-home services as possible.
5. Maintain a comprehensive directory of available public and private resources that includes formal and informal community-based services for use in referral activities.

Measurements:

1. MAAA will participate in a training that focuses on effective outreach to individuals in rural areas by June 30, 2023. **MAAA participates in Community and Nutrition calls through the United Way. These calls are completed weekly and address the needs of individuals living in rural areas.**
2. Long Term Services and Supports, which includes clients receiving in-home services, will receive an 80% client satisfaction rate annually through June 30, 2023. **MAAA is on track to meet this goal.**
3. Federal In-home service units will increase by 1% annually through June 30, 2023. Baseline is 605. **MAAA is on track to surpass 3000 in-home service units.**
4. MAAA will maintain and update comprehensive directory of available public and private resources that includes formal and informal community-based services for use in referral activities through June 30, 2023. **MAAA is on track to meet this goal.**

Title III-B Access Services

Access Services enable people with disabilities and older adults to live in the community through availability of, and access to, high-quality long-term services and supports, including supports for families and caregivers. This maximizes the client experience of care, improves the health of clients, and reduces the per capita cost of health care by allowing individuals to remain in the community setting of their choice, receive the services they need to maintain and improve their health, and reduce or eliminate admission to long term care facilities. Access Services include Case Management, Transportation, Information & Assistance, Health Promotion/Disease Prevention (Non Evidence Based), Senior Center Hours, Social Activities, Counseling, Outreach and Information services. Individuals age 60 and over can access these services directly through MAAA and in some instances through senior centers.

Objective:

Assist older Nebraskans, as well as Nebraskans experiencing disabilities, to improve their health and live in the community through the availability or and access to high-quality, community based in-home and access services, which will maximize their health and allow them to live in the community setting of their choice as long as possible.

Strategies:

1. Provide Case Management, Transportation, Information & Assistance, Health Promotion/Disease Prevention (Non Evidence Based), Senior Center Hours, Social Activities, Counseling, Outreach and Information services to older Nebraskans.
2. Increase options for coordination of services through provision of OAA III-B Case Management services.

Measurements:

1. Federal Access service units will increase by 1% annually through June 30, 2023. Baseline 3000.

MAAA has stopped providing “Senior Center Hours”, and is not in our budget effective FY21. Access units are expected to surpass 8000 at the end of FY22. We are on track to meet this goal.

Transportation Services

MAAA and senior centers in our service area coordinate transportation to assist older individuals to obtain long term services and supports including nutrition and counseling services as well as legal assistance. Services are provided directly by agency employees or volunteers, through contracted services or sub-awards as well as through referrals to community services for which an older individual may be eligible.

MAAA funding comes from the Nebraska Department of Transportation.

MAAA offers transportation programs that emphasize services in rural areas. These programs offer demand response services throughout their service area to medical appointments, shopping and visitations. For participation at community centers and meal sites, transportation continues to be a cornerstone for assisting those who wish to participate in a congregate meal, health clinic, evidence based program and socialization.

Transportation is now a non- OAA service.

Title III-C Nutrition Services

Adequate and consistent nutrition is critical to a healthy life for older adults. Nutrition programs for the elderly available through the Older Americans Act help older adults who may not eat adequately, and through better nutrition, can help them remain healthy and independent in their communities.

Congregate meals are to be served five days per week in urban areas and as population allows in rural areas, allowing older people to enjoy positive social contacts with other seniors in a group setting. Meals being provided occur in a variety of different settings which may include: senior centers, restaurants, and independent living facilities. MAAA also provides clients with vouchers to use in a congregate meal setting at a restaurant or grocery store. Persons age 60 or older and their spouses, regardless of age, are eligible for meals; however, priority is given to those with the highest physical, economic, or social need and to minority or rural individuals who are eligible.

Home delivered meals are service options that are funded through the Nutrition Services Incentive Program (NSIP) and other national or local programs. Meals are delivered to the individual residences of vulnerable older persons who are normally unable to leave their homes without assistance. These clients typically need assistance with meals, because they are unable to prepare meals for themselves and lack an informal support system to routinely provide assistance with meals. Services are intended to maintain or improve the nutritional status of these clients, support their independence, prevent premature institutionalization, and allow earlier discharge from hospitals, nursing homes, and other residential facilities.

The Nutrition Program also provides a wide range of other related services including nutrition screening, assessment and education are available to help older participants meet their health and nutrition needs. These programs also include special health assessments for diseases such as hypertension and diabetes.

MAAA also participates in the Senior Farmers' Market Nutrition Program. This program provides coupons for Nebraska-grown fruits and vegetables to individuals who are at least 60 years old and who meet income guidelines of 185% of the federal poverty level.

In addition to providing nutrition and nutrition-related services, the Nutrition Program provides an important link to other needed supportive in-home and community-based services such as home-maker, chore, transportation, physical activity programs, and even home repair and home modification programs.

Objective 1:

Work to provide nutritionally insecure older adults with more nutrition options.

Strategies:

1. MAAA will continue to offer nutrition education in our eight county area.
2. Expand home-delivered meal services to include more meals served.
3. Maintain client meal participation at existing congregate sites and attract new eligible participants.
4. Continue to explore additional meal voucher programs throughout our eight county area.

Measurements:

1. Increase the number nutrition education services by 5% of baseline by June 30, 2023. (Nutrition Education: Baseline 1521 (Units). **1900 service units are expected in nutrition education in FY22**
We are on track to meet this goal
2. Increase the number of home-delivered meals served by 2% by June 30, 2023.
3. (Baseline 82,775 Units). **HDM Meals have been growing we expect to reach 120,000 in FY22.**
We are on track to meet this goal.
4. Maintain the number of congregate meals served within 5% of baseline by June 30, 2023. (Congregate: 62,925 meals served) **Congregate meals have decreased (57,500 meals expected), however our To-Go meals (17800 meals), which was a popular alternative to congregate meals during COVID, has the remaining numbers to exceed our Congregate Meal goal.**
5. Increase the number of alternative meal and programing sites. Baseline programs: Nutrition site: 8 sites, Voucher sites: 5 sites. **We have 2 new voucher sites that will be starting in May 2022.**

Objective 2:

Delay institutionalization in high risk and non-Medicaid individuals.

Strategies:

1. Identify high-risk groups for targeting prevention initiatives and activities.
2. Continue to identify and build aging partnerships in our eight county area.
3. Heighten awareness of volunteer opportunities in aging nutrition services:
4. Promotion of volunteers and opportunities to work with clients receiving nutrition services.

Measurements:

1. Increase the total number of individuals utilizing aging nutrition programs in the community by 5% by June 30, 2023. (Baseline Congregate/HDM 2,108 clients). **(Currently at 2031)**
2. Work with our area Health Department and utilize other MAAA programs to assess high risk individuals in need of more services. (2 Health Departments in our service area)
3. Increase publications of volunteer opportunities in nutrition service programs throughout our service area. Baseline 0. Volunteer information will be distributed in County and Agency Newsletters, Health Fairs, other advocate agencies, and our agency web site.

We believe we are on track to reach this goal.

Title III-E Caregiver Services (Family Caregiver Support Program) (FCSP)

FCSP services are available throughout the MAAA service area to Family Caregivers who care for older individuals age 60 and over as well as individuals who experience Alzheimer's disease or a related disorder. Older Relative Caregivers caring for a child or individual with a disability are eligible for services as well if:

- they are 55 or older,
- they live with and are the informal provider of in-home and community care to the child or individual with a disability, or

- they are the primary caregiver for the child or individual with a disability.

The goal of the FCSP is to provide services that support the caregiver, which will allow them to continue in their role. Caregivers can receive support in the form of information in obtaining access to services and resources, education training and support to assist them in their caregiver roles, respite services and additional supplemental services to complement the care they provide – this can include emergency response systems, assistive technologies, supplies and home modifications.

Objective 1:

Assist caregivers to access Family Caregiver Support Program services that best match their needs, maximizes care receiver independence and allows them to live in the community setting of their choice as long as possible.

Strategies:

1. Provide Caregiver Respite, Caregiver Supplemental Services, Caregiver Assistance: Case Management, Caregiver Assistance: Information & Assistance, and Caregiver Outreach to Caregivers.
2. Target provision of III-E Caregiver services to Older Nebraskans with the greatest economic and social need, older relative caregivers of children and individuals with severe disabilities, and caregivers who provide care for individuals with Alzheimer’s disease or related disorders.
3. Ensure quality of III-E Caregiver services through use of a National Family Caregiver Support Program client satisfaction survey.
4. Utilize III-E funds efficiently to assist as many older Nebraskan’s to receive access services as possible.
5. Provide III-E Caregiver Assistance: Case Management services at MAAA. This is a new service beginning in FY 2020.

Measurements:

1. MAAA will participate in training that focuses on effective outreach to caregivers of individuals with Alzheimer’s disease or related disorders by June 30, 2023.
2. National Family Caregiver Support Program services will receive an 80% client satisfaction rate annually through June 30, 2023.
3. Total National Family Caregiver Support Program clients will increase by 1% annually through June 30, 2023. Baseline 6.
4. III-E Caregiver Assistance: Case Management services will be provided by MAAA which have not previously provided this service, through June 30, 2023.

MAAA is still working on meeting these goals.

Objective 2:

Advocate for caregivers through increasing public awareness and understanding of their needs and interests.

Strategies:

1. Work with the Nebraska Caregiver Coalition to facilitate information to the community regarding the needs of Nebraska caregivers.
2. Work with the Nebraska Caregiver Coalition to promote the interests of as well as provide education to Nebraska caregivers.

Measurements:

1. Staff will participate in the Caregiver Coalition monthly meetings to be educated and informed of community resources for the needs of caregivers, annually, through June 30, 2023.
2. Annually plan and participate in at least one community based event that promotes the interests of, and provides education to, caregivers through June 30, 2023.

We participate in monthly Caregiver Coalition calls and attend Person Centered Planning and Day of Caring.

Care Management Services

The Care Management Program serves Nebraskan's primarily age 60 and over through assistance to identify and utilize services needed to assure they are receiving care that best matches their needs, maximize independence and allows them to live in the community setting of their choice as long as possible.

The Care Management Unit provides clients with an assessment of needs, Long-Term Care Plan development, coordination of the Long-Term Plan of Care, monitoring of the delivery of services for clients, and review and consultation regarding the client's Long-Term Care Plan. State statute and regulations require the use of a sliding fee scale for Care Management Program services. Fees are based on the Federal Poverty Guidelines. Clients who have incomes under than 150% of the federal poverty rate are not required to pay a fee, those with income between 150% and 300% pay a portion of the cost, and those with income over 300% are required to pay the full fee for services provided. Most clients served by the Care Management Program have incomes just above the eligibility guidelines for Medicaid and, therefore, client fees do not account for a significant portion of the programs funding.

Objective:

Utilize the Care Management Program to promote and increase the accessibility of all aspects of community life for older Nebraskans.

Strategies:

1. Utilize Nebraska's Care Management program to promote and coordinate aging services to older Nebraskan's in rural communities.
2. Ensure quality of Care Management services through use of a Care Management Program client satisfaction survey.
3. Utilize Care Management with efficiently to assist as many older Nebraskan's to receive Care Management services as possible.

Measurements:

1. Distribute information sheets or brochures provided by the SUA that promotes Care Management and coordination of aging services targeted to rural communities, by June 30, 2023. Baseline 100.
2. Care Management Program services will receive an 80% client satisfaction rate annually through June 30, 2023.
3. Total Care Management clients served will remain flat annually through June 30, 2023, Baseline 125.

We are on track to meet or exceed this goal.

Goal 5: Effective and Responsive Management:

Objective 1:

MAAA plans to Maintain and enforce OMB Circular Rules within our agency and our subawardees as per our monitoring policy.

Strategies:

1. MAAA will continue to provide ongoing monitoring of direct and sub award sites in regards to quarterly monitoring visits by either desk audit or on site review. There will be a minimum of 2 on sites reviews completed annually and monthly review of financials.
2. In the event that a monitoring visit identifies deficiencies, a corrective action plan will be given to the subrecipient. The corrective action plan will have detailed timelines as to when corrections will be submitted. Depending upon the infraction, financial adjustments or disallowances may be required.

MAAA has no subawards at this time.

Objective 2:

MAAA plans to maintain data collection accuracy and avoid duplication of units.

Strategies:

1. MAAA will continue to utilize Peer Place for the collection of data in the aging services and ADRC related data.

2. Staff will ensure that accurate reporting of data is occurring and that a double check of units are completed by compiling a monthly report which are reviewed by administrative staff and local senior center managers for accuracy.
3. Meal programs have extra safeguards in place to ensure accurate units are reported for NSIP reimbursements. Units are entered and verified for accuracy before submission to the fiscal manager. All guest counts are verified by sign in sheets for eligibility and receipts are obtained for ineligible persons.
4. MAAA continually trains local county senior center supervisors on proper data collection and rules for each service Monthly meetings with directors and managers occur on a monthly basis.
5. MAAA has started utilizing more effective spreadsheets solutions as well as easily accessible databases to reduce human error and increase speed of data collection.

We continue to have zoom conference calls and in person meetings with our site supervisors to assist continuing education on the units, reporting, and forms. We are implementing monthly meetings to review units and peer place reports.

Objective 3:

MAAA plans to maintain the efficient use of funding for services and programs. MAAA strives to ensure that the services that are being provided to consumers are being done in the most cost effective manner.

Strategies:

1. Services will continually be reviewed by, the administrative team and Site Supervisors on the county level, to try and implement more efficient and cost effective use of funding.
2. Cost allocation and time studies will be utilized to ensure appropriate reimbursement of time from programs.
3. Contractual expenses are compared to the service units being rendered to ensure accurate billings from contractors.
4. MAAA utilizes RFPs and public input to ensure the best and most cost effective service is provided. Providing services directly is only pursued when it is determined that it is the most cost effective means of providing sufficient services in an area.

We have implemented a central oversight and approval process for our nutrition ordering. We have started a weekly grant meeting to discuss client needs and making sure that they are being offered in a cost effective manner.

Midland Area Agency on Aging

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Hastings, Nebraska 68902-0905

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Section C: Services

July 1, 2019 – June 30, 2023

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?

Midland Area Agency on Aging provides Personal Care services as a grant based self-directed service directly through Central Office via our Grant Coordinator (the client pays provider and we reimburse the client or the client can choose to have MAAA pay the provider directly until grant is depleted). These services are available to any eligible individual with the need in our service area.

In the event that we have more clients than funds allow, we will utilize a waiting list and the priority policy. We will also refer them to other available services both in our agency and others.

Lists of background checked providers are available or clients can furnish their own.

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 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?

Midland Area Agency on Aging provides Homemaker services as a grant (up to \$500 per fiscal year) based self-directed service directly through Central Office via our Grant Coordinator (the client pays provider and we reimburse the client or the client can choose to have MAAA pay the provider directly until grant is depleted). These services are available to any eligible individual with the need in our service area.

In the event that we have more clients than funds allow, we will utilize a waiting list and the priority policy. We will also refer them to other available services both in our agency and others.

Lists of background checked providers are available or clients can furnish their own.

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	
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 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?

Midland Area Agency on Aging provides Chore services as a grant (up to \$500 per fiscal year) based self-directed service directly through Central Office via our Grant Coordinator. (the client pays provider and we reimburse the client or the client can choose to have MAAA pay the provider directly) These services are available to any eligible individual with the need in our service area.

In the event that we have more clients than funds allow, we will utilize a waiting list and our priority policy. We will also refer them to other available services both in our agency and others.

A list of background checked providers is available of the client can use one of their choosing.

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 in all eight counties of our service area. Home Delivered Meals are prepared either by a senior center, nutrition site, or contracted vendor. Hall and Hamilton Counties are subawards, the other six counties are direct services. Hamilton and Howard counties utilize a Hot-Shot Vehicle to maintain temperature in their rural delivery areas.

Definition:		
Provided to an older individual, at the direction of the older individual or a family member of the individual: <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 older individual; and Includes services and coordination such as— <ul style="list-style-type: none"> • 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— <ul style="list-style-type: none"> ○ 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; <ul style="list-style-type: none"> ○ 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 is a direct service program provided to our entire service area through the CHOICES program. The Care Coordinators are either RNs, or Bachelor Degree in Human Services field. Case Management clients are contacted monthly and reassessed annually. Care Coordinators follow the Midland AAA Care Management procedures. Client access is through referrals from the senior centers, or self/family referrals, and ADRC. Client Contribution letters will be sent on a monthly basis for these services. Client Satisfaction surveys are sent annually.

MAAA plans to use case management for eligible individuals who may not be able to remain on Care Management for any reason but still needs a similar service.

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?

All Counties in the MAAA service area provide congregate meals. Hall and Hamilton operate under a subaward. Clay, Webster, Adams, Nuckolls, Merrick, and Howard are direct service sites. All meal sites operate 5 days per week, with the exception of our rural cities which include Palmer, Roseland, Edgar, and Fairfield, offering a meal once per week and Sutton operation 3 times per week. Starting in FY 19 Cairo Senior Center is now also a direct service site, operating 5 days per week.

Starting in FY19, Midland Area Agency on Aging has expanded congregate meal services in Grand Island through Vouchers 7 days per week . In Adams County vouchers are being offered at Village Diner, and a new 5 day per week congregate meal site was started at Gold Beck Towers. These program have helped many seniors get a hot nutritious meal who's schedule doesn't allow for them to take advantage of the Congregate Meals at the senior center

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?

Clay, Nuckolls, Webster and Howard all have transportation programs administered, and run by MAAA. Adams, Hamilton, and Hall utilize other service vendors for their transportation.

The Central City Transportation program is owned by the City. Central City has an agreement with MAAA to provide administration and drivers and the city will reimburse MAAA the amount of personnel and supplies expensed for their program.

Funding comes from CASA, Title XX, the Nebraska Department of Roads, city and county funding.

In all counties that are responsible for the transportation service it is accessed by clients calling the dispatch telephone number.

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:	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. In addition a monthly nutrition education flyer and wellness materials are generated for center managers to use when discussing nutritional health/wellness.	

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 a direct service and utilized in Adams, Clay, Hall, Hamilton, Howard, Merrick, Nuckolls, and Webster. Center managers may contact MAAA nutrition service coordinator or a Registered Dieticians in each county to conduct nutritional programs quarterly.

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?

Information and Assistance is a direct service and subaward service. All counties in the MAAA service area provide general information and assistance on aging resources in their communities, including sub award counties of Hall and Hamilton.

I&A activities are accessed by seniors or their family members contacting either the senior centers or Central Office for help.

To aid with better tracking and gathering of information, MAAA has developed new cloud based logging practices to help ensure any and all needed call backs are fulfilled.

13. Health Promotion/ Disease Prevention (Evidence-Based)

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?

Health Promotion/Disease Prevention is a direct service provided by trained individuals. Counties that may participate in HP/DP are Adams, Clay, Hall, Hamilton, Howard, Merrick, Nuckolls, and Webster Counties. HP/DP evidence based available are TAI-CHI movement for better balance, stepping on, Living Well with Chronic Health; Diabetes, and Powerful Tools for Caregivers.

**14. Health Promotion/ Disease Prevention
(Non Evidence-Based)**

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 		
<ul style="list-style-type: none"> - 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?

A direct service being provided by Hamilton County (i.e. Fitness Reaching Older Generations.) Directed by Memorial Health PT employees. In addition all eight counties will offer routine health screenings, health education, toe nail clinics, and other exercise opportunities.

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?

Legal Assistance is provided in our service area by Legal Aid of Nebraska. Midland Area Agency on Aging continues to refer and educate our seniors on the services they can receive through Legal Aid.

Advertisement for Elder Access Line is included in every issue of the MAAA newsletter, and an article on their services is published at least annually. EAL brochures are available in English and Spanish are available at all senior centers and the central office. Brochures are distributed at health fairs, speaking engagements and other venues such as Day of Caring. CHOICES coordinators provide information on legal services and have Spanish translators available. The legal assistance ads are available in Spanish and English on the MAAA website.

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?

Care Management program is provided to our entire service area through the CHOICES program. The Care Coordinators are either RNs, or Bachelor Degree level in Human Services field. Care Management clients are contacted monthly and reassessed annually. Care Coordinators follow the Midland AAA Care Management procedures; including notifying clients monthly if fees are incurred for the service. Client access is through referrals from the senior centers, or self/family referrals, and ADRC.

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?

Hamilton County, Senior Citizens Industries, Wood River Senior Center, and Doniphan senior center are subaward sites. Direct sites include senior centers in Cairo, Webster County, Clay County, Adams County, Howard County, Merrick and Nuckolls County.

The senior centers have operating hours listed in the senior center directory (included in this plan); most are open 8am-4pm five days per week. Those not are: Grand Island 7am-3pm, Doniphan 9am-2pm, Cairo 8am-1pm, Guide Rock 7am-12:30pm and Wood river 9am-2pm.

During those hours seniors receive nutrition, education, recreation, socialization, information, and other OAA programs.

Definition:		
The provision of goods to an older individual at no cost or at a reduced cost which will directly support the health and independence of the individual with an assessed need.		
This can include: commodities, pantry items, clothing distribution, smoke detectors, eyeglasses, hearing aids, oral health, etc.		
This also includes Emergency Response Systems (ERS, Personal Emergency Response System, PERS). An Emergency Response System is an electronic device and has portable buttons (including pendants and bracelets) worn by the customer. These units provide 24-hour on call support to the customer having a medical or emergency need that could become critical at any time. ERS can be landline or cell phone based services.		
Previously counted in Durable Medical Equipment and Emergency Response System. This is no longer limited to medical equipment, adaptive devices, or assistive technology.		
Service Unit: Unit	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 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?

The MAAA Direct Assistance Program (DAP) is available for use for seniors throughout the MAAA service area. Clients are prioritized based on assessments of activity of daily living and instrumental activities of daily living. MAAA provides seniors with assistance towards the electronic emergency response system of their choice. DAP has a fixed budget which results in a waiting list for the program. MAAA pays the ERS Provider and Client pay MAAA any costs over the agreed upon amount (currently \$15 per month in FY2019)

MAAA will expand this service to include other services and goods as the need and funding becomes available. In these cases the client can be reimbursed or MAAA can pay the provider directly.

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?

All of our multipurpose senior centers have some form of social activities at their center. Common activities are Bingo, Cards, puzzles, billiards, shuffleboard, movies, and crafts. Our centers strive to keep aging hands busy and active.

The centers have a set schedule of events on a weekly basis and there are areas available for those wanting to do their own unscheduled activity if desired

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?

*Hamilton County and Senior Citizens Industries senior center are subaward sites. Direct sites include senior centers in Cairo, Webster County, Clay County, Adams County, Howard County, Merrick and Nuckolls County.

Nuckolls, Clay, and Merrick counties provide assistance with Medicare Part D during the open enrollment period. Howard and Webster Counties do not have trained SHIIP volunteers, so referrals are made to either other local agencies, or to trained Central Office staff.

Adams, Hall and Hamilton counties provide SHIIP services at their senior centers. The senior center in Grand Island also houses a full time SHIIP counselor year round.

The MAAA Central Office also has SHIIP counselors that provide SHIIP on either a walk in or scheduled basis year round.

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?

*Hamilton County, Senior Citizens Industries, Wood River Senior Center, and Doniphan senior center are subaward sites. Direct sites include senior centers in Cairo, Webster County, Clay County, Adams County, Howard County, Merrick and Nuckolls County.

All counties in the MAAA service area provide outreach. Adams, Hall, Hamilton, Clay, Nuckolls, Merrick, and Webster all do outreach activities at their county health fairs and through their senior centers. Howard County does not hold a health fair so outreach is done through the senior center.

County and Central Office staff provide outreach through programs for churches, service organizations, colleges, and any business or organization requesting a program. We frequently are able to make 1:1 contact with program participants following the program. MAAA is always trying to increase our visibility and outreach in the communities we serve. MAAA will be represented at Senior Day at the Nebr. State Fair.

Outreach will also be done through the ADRC options counselor and the CHOICES Program.

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?

*Hamilton County, Senior Citizens Industries, Wood River Senior Center, and Doniphan senior center are subaward sites. Direct sites include senior centers in Cairo, Webster County, Clay County, Adams County, Howard County, Merrick and Nuckolls County.

All counties and central office count and report publications made for senior services. Our publications usually include: Newspaper ads, newsletters, and online media.

Although Facebook posts and website hits can be counted, we usually do not report them since they can typically be unreliable to report as the hits can't be verified.

<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?

Legal Outreach is fulfilled through Legal Aid of Nebraska. Legal Aid will periodically provide this service as needed in our service area.

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?

Midland Area Agency on Aging provides Caregiver Respite services as a grant(up to \$500 per fiscal year) based self-directed service directly through Central Office via our Grant Coordinator (client pays the provider and MAAA Reimburses the client or the client can choose to have MAAA pay the provider directly). These services are available to any eligible individuals with the need in our service area and who qualify with the needed ADLs. This is a valuable service to give our hard working caregivers a much needed break.

In the event that we have more clients than funds allow, we will utilize a waiting list or refer them to other available services both in our agency and others.

A list of background checked Providers is available or the client can use one of their own choosing.

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?

Midland Area Agency on Aging provides Caregiver Supplemental services as a grant(up to \$500 per fiscal year) based service directly through Central Office via our Grant Coordinator(client pays the provider and MAAA Reimburses the client or the client can choose to have MAAA pay the provider directly). These services are available to any eligible individual with the need in our service area that meet ADL requirements. Clients connect with us through the county senior centers, CHOICES, and other community agencies by referral or directly by contacting any of our offices.

Our common uses for this service are: Emergency Response Systems and other goods necessary to ease the burden of caregivers.

In the event that we have more clients than funds allow, we will utilize a prioritized waiting list or refer them to other available services both in our agency and others.

A list of background checked providers is available or the client can provide their own.

**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: <ul style="list-style-type: none"> 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?

IIIE Case Management is a direct service program that is provided to our entire service area through the CHOICES program; provided that the appropriate ADL's qualify. The Care Coordinators are either RNs, Social Workers or Bachelor Degree in Human Services. IIIE Case Management clients are visited monthly and reassessed annually. Care Coordinators follow the Midland AAA Care Management

Service Narrative:
**34. Caregiver Assistance:
Case Management**

procedures. Client access is through referrals from the senior centers, or self/family referrals, and ADRC. A voluntary contribution letter will be sent to these clients on a monthly basis.

**36. Caregiver Assistance:
Information & Assistance**

Definition:		
<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: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> May do Caregiver Assessment	<input checked="" type="checkbox"/> May be Anonymous <input type="checkbox"/> May Self-Direct this Service <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-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <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:	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?

All counties in our service area utilize 3E I&A activities and are accessed by seniors or their family members contacting either the senior centers or Central Office for help.

To aid with better tracking and gathering of information, MAAA has developed new cloud based logging practices to help ensure any and all needed call backs are fulfilled.

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?

All counties in the MAAA service area provide caregiver outreach through direct service. Adams, Hall, Hamilton, Clay, Nuckolls, Merrick, and Webster all do outreach activities at their county health fairs and through their senior centers. Howard County does not hold a health fair so outreach is done through the senior center.

County and Central Office staff provide caregiver outreach through programs for churches, service organizations, colleges, and any business or organization requesting a program. We frequently are able to make 1:1 contact with program participants following the program. MAAA is always trying to increase our visibility and outreach in the communities we serve. MAAA will be represented at Senior Day at the Nebr. State Fair.

Caregiver Outreach will also be done through the ADRC options counselor and the CHOICES Program.

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?

This service will utilized as a compliment insert/page of our newsletter to convey caregiver services to our service area. This is a directly served services.

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?

MAAA has one options counselor and one ADRC supervisor located at the central office in Hastings that provide I&R services to all eight counties served in our area. I&R can be provided through a phone call or walk in to assist individuals with making referrals and connections to long term services and supports. Follow up is provided to individuals on an as needed basis.

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 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 ADRC options counselor that serves all of the MAAA service area is located in Central Office in Hastings, NE. People 60 and older, persons with disabilities of any age, their families and the general public can access the ADRC services by calling the ADRC toll free number, any Midland Area Agency on Aging's phone numbers, by dropping by the office, through the ADRC and MAAA websites, and through referrals from a wide range of aging and disability agencies and organizations.

Service Narrative:
**42. Transitional Options
 Counseling**

Definition: A state ADRC Program service that develops, implements, assesses, and follows up on plans for the evaluation, treatment and/or care of people who are experiencing a specific, time-limited problem such as a transition from hospitalization to independent living and who need assistance to obtain and coordinate the support services that will facilitate the change.		
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 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?

Midland Area Agency on Aging plans to assist in transitioning people from facilities back to their home.

We will be offering this to anyone within our 8 county service area.

Transitional Options counseling will help those that don't seem to know where to go after a hospitalization and is less likely to require other Care Management services and/or will assist with the transition into Care Management services if needed.

Definition: A state ADRC Program service that provides assistance for people who are having difficulty understanding and/or obtaining grants, payments, services, or other benefits for which they may be eligible. The programs may help people understand the eligibility criteria for benefits, the benefits provided by the program, the payment process, and the rights of beneficiaries; provide consultation and advice; help them complete benefits application forms.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: (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 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?

ADRC staff operate out of the Central office location in Hastings. We serve all 8 counties identified in our service area. Benefits assistance will be provided to individuals that have specific questions in regards to grants, payments, services that they need to apply for. This is usually completed in a face to face visit but can be done over the phone if necessary. OC staff may meet with individuals in their homes, at the office or in another public location to provide consultation, advice and assistance completing application for benefits.

Definition: A state ADRC Program service that provides training which introduces new riders, commuters, and other residents to the transportation options that are available in their community and trains them to use the system effectively. Participants learn the basic components of the public transit system and other transportation options (e.g., bicycles, carpools and vanpools); the location of park and ride or park and pool lots, bus stops, train stations, ferry terminals, and other facilities; and basic travel skills such as how to read a bus schedule, find the bus closest to work/home, participate in a car/van pool, and plan a commute using the system. Instruction may be provided on an individual or group basis and may involve field training in which the individual is accompanied by a customer service representative. The objective of the training is to encourage use of the public transportation by building rider confidence and comfort with the system.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: (Must be at least one of the below) • 60 years or older • Individual with a Disability • Caregiver • 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 type="checkbox"/> 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 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?

Midland Area Agency on Aging will offer this service to anyone within our 8 county service area when needed, directly through our Central Office.

We felt there was a need in our area to familiarize those needing transportation with the process for getting local public transit and/ or other alternatives to taxi services where beneficial. Instead of just giving out a phone number for local transit options, we plan to be a little more involved in making sure transportation needs are met in an economical way.