

**NEBRASKA**

Good Life. Great Mission.

**DEPT. OF HEALTH AND HUMAN SERVICES**

Nebraska State Unit on Aging

# Program Reference Guide

July 1, 2019 – June 30, 2023

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## Introduction

### Purpose

The purpose of this manual is meant as a reference for individuals within the Aging Network for the SFY 2020-23 Area Plans. It outlines federal and state services, expected reporting requirements, and common definitions.

It was developed with the following 2019 events in mind:

- The ACL is implementing new SPR reporting requirements (including new services) (FFY 2021)
- The State of Nebraska is submitting a new 4-year State Plan (FFY 2020 – FFY 2023)
- AAA 4-year Area Plans will be due (SFY 2020 – SFY 2023)
- New Aging software will be implemented (SFY 2020) to meet SPR requirements.

Service unit measurements were changed when a more representative number could be used. An example is the dollar value of a service, rather than one contact.

This manual also contains guidance on the Aging and Disability Resource Center program as administered by the State Unit on Aging.

If there are questions or concerns, or if further clarification is needed, please contact the State Unit on Aging at [dhhs.aging@nebraska.gov](mailto:dhhs.aging@nebraska.gov) or (402) 471-2307.

### Future Revisions

In the event that a manual change is published, removed information will be indicated with ~~strike through~~ text. Added or edited information will be **highlighted**. The date of the change will be put at the end of the paragraph, (in parentheses).

Service Unit Descriptions

Service Unit	Description
Activity	Way to track communications to multiple, anonymous individuals. It has one focus.
Contact	Used to document one communication in a one-on-one setting.
Unit	Used to track the quantity of an item.  <b>Example:</b> <ul style="list-style-type: none"> <li>• 1 unit for 1x toilet riser</li> <li>• 1 unit for 1x 24-pack of briefs</li> <li>• 1 unit for 1x set of dentures</li> <li>• 3 units for 3x individual cans of Ensure</li> <li>• 1 unit for 1x month of ERS service</li> </ul>
Hour	Used to track time spent providing a service. Please round to the nearest quarter hour increment. (.25 = 15 minutes; .50 = 30 minutes; .75 = 45 minutes)
Meal	Food served as breakfast, lunch, dinner, or supper. It must meet OAA, state, and local law requirements.
One-Way Trip	Used to mark going from one location to another. Each leg is considered one unit.  <b>Example:</b> If someone utilizes transportation services from their home to the doctor’s office that is 1 One-Way Trip.  If the same person utilizes transportation services after their doctor’s appointment to return home, 2 One-Way trips would be entered.  If a person utilizes transportation services from their home to the doctor’s office, then onto the pharmacy, and finally home; this counts as 3 units of service.
Person Hour	Used to track impact of a service that can be done in a group setting or one-on-one.  <b>Example:</b> Calculate the length of the service (Presentation is 2 Hours). Tally the number of participants (6 people watched the Presentation). Multiply 2 by 6. The service units for the Presentation is 12 Person Hours.
Session	Used to track a period of time devoted to a particular activity. Usually 15 minutes to 1 hour in length of time. Length of time and number of participants does not need to be tracked.

## Demographic Information by Program

### Title III-B/C Registered Service Clients – (Mandatory)

Registered III-B/C Services must collect the following client demographic information.

Demographic Information	Data Type	What to Collect/Options
<b>Age</b>	Number	<b>Collect</b> DOB (System calculated, Age, put into Age Ranges: <60, 60-64, 65-74, 75-84, 85+). It is the Age of an Individual at the close of the Federal Fiscal Year.
<b>Gender</b>	Choice	Female, Male, Other
<b>Geographic Distribution</b>	Choice	<b>Collect</b> Zip code (System calculated by software: Rural, Non-Rural)
<b>Poverty Status</b>	Choice	At or Below Poverty, Above Poverty
<b>Household Status</b>	Choice	Lives Alone, Lives with Others
<b>Ethnicity</b>	Choice	Hispanic/Latino, Not Hispanic/Latino
<b>Race</b>	Choice (Multiple)	American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White
<b>Minority Status*</b>	Yes/No	Minority, Not Minority (System calculated)

\* Minority Status is calculated by reviewing the Ethnicity and Race of an individual. This will be done by the [software] system. No calculation or data collection needs to be done at the service provider or AAA level. All Fields will have a “Missing Response” option. System will calculate intersections with those “At or Below Poverty”, ADL 3+, and IADL 3+.

Title III-B/C Registered Service Clients (As Directed)

Registered III-B/C Services may need to collect additional client information, this will be noted individually, by service.

Demographic Information	Data Type	What to Collect/Options
<b>ADL Limitations</b>	Choice (Multiple)	Bathing, Dressing, Transfer, Mobility, Toileting, Eating (Calculated by software: 0-1, 2, 3+)
<b>IADL Limitations</b>	Choice (Multiple)	Preparing meals, Managing money, Shopping, Light housework, Heavy housework, Telephoning, Medication management, Transportation ability (System calculated: 0-1,2,3+)
<b>Nutrition Risk Score</b>	Choice/Number	0-21 (System calculated: 0-5, 6+) <ol style="list-style-type: none"> <li>1. I have an illness or condition that made me change the kind and/or amount of food I eat. (2)</li> <li>2. I eat fewer than 2 meals per day. (3)</li> <li>3. I eat few fruits or vegetables or milk products. (2)</li> <li>4. I have 3 or more drinks of beer, liquor or wine almost every day. (2)</li> <li>5. I have tooth or mouth problems that make it hard for me to eat. (2)</li> <li>6. I don't always have enough money to buy the food I need. (4)</li> <li>7. I eat alone most of the time. (1)</li> <li>8. I take 3 or more different prescribed or over-the-counter drugs a day. (1)</li> <li>9. Without wanting to, I have lost or gained 10 pounds in the last 6 months. (2)</li> <li>10. I am not always physically able to shop, cook and/or feed myself. (2)</li> </ol>

Title III-B Restricted Service Clients (Legal Assistance)

Demographic Information	Data Type	What to Collect/Options
<b>Age</b>	Number	<b>Collect</b> DOB (System calculated, Age, put into Age Ranges: <60, 60-64, 65-74, 75-84, 85+). It is the Age of an Individual at the close of the Federal Fiscal Year.
<b>Gender</b>	Choice	Female, Male, Other
<b>Geographic Distribution</b>	Choice	<b>Collect</b> Zip code (Use reporting sheet to check zip whether Rural or Non-Rural)
<b>Poverty Status</b>	Choice	At or Below Poverty, Above Poverty
<b>Household Status</b>	Choice	Lives Alone, Lives with Others, Lives in LTC Facility
<b>Ethnicity</b>	Choice	Hispanic/Latino, Not Hispanic/Latino
<b>Race</b>	Choice (Multiple)	American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White
<b>Minority Status*</b>	Yes/No	Minority, Not Minority (System calculated)

### Title III-D Sign-In Service Clients

Demographic Information	Data Type	What to Collect/Options
<b>Name</b>	Text	Individual's first and last name.
<b>Birth Year</b>	Number	Year the individual was born
<b>Zip Code</b>	Number	Zip code for Individual's home address

All information must be collected to count the individual.



## Title III-E Registered Service

Demographic Information	Data Type	What to Collect/Options
<b>Age</b>	Number	<b>Collect DOB</b> (System calculated, Age, put into Age Ranges: <60, 60-64, 65-74, 75-84, 85+)
<b>Gender</b>	Choice	Female, Male, Other
<b>Geographic Distribution</b>	Choice	<b>Collect Zip code</b> (System calculated by software: Rural, Non-Rural)
<b>Poverty Status</b>	Choice	At or Below Poverty, Above Poverty
<b>Ethnicity</b>	Choice	Hispanic/Latino, Not Hispanic/Latino
<b>Race</b>	Choice (Multiple)	American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White
<b>Minority Status*</b>	Yes/No	Minority, Not Minority (System calculated)
<b>Relationship to Care Recipient</b>	Choice	Husband, Wife, Domestic Partner (including civil union), Son/Son-in-Law, Daughter/Daughter-in-law, Sister, Brother, Grandparents, Parents, Other Relative, Non-Relative

\* Minority Status is calculated by reviewing the Ethnicity and Race of an individual. This will be done by the [software] system. No calculation or data collection needs to be done at the service provider or AAA level.

All Fields will have a “Missing Response” option. System will calculate intersections with those “At or Below Poverty”, ADL 3+, and IADL 3+.

**Caregivers** can be a **Family Caregiver** or **Older Relative Caregiver**.

**Care Recipients** 60 or older should also have a client profile in the [software] system. See Title III-B/C Registered Service details.

## ADRC Registered Services

Demographic Information	Data Type	What to Collect/Options
<b>Age Range</b>	Number/Choice	Collect DOB or select Age Ranges: <18, 18-49, 50-59, 60-64, 65-74, 75-84, 85+
<b>Gender</b>	Choice	Female, Male
<b>Location</b>	Text/Number	Collect City, County, or Zip Code
<b>Poverty Status</b>	Choice	At or Below Poverty, Above Poverty
<b>Living Arrangement</b>	Choice	At Home w/ NO Formal/Informal Supports, At Home with ONLY Information Supports, At Home with Formal Supports, Community Supervised Living, Hospital, Nursing Facility, Rehab Facility, Other Institutional Setting, Homeless
<b>Ethnicity</b>	Choice	Hispanic/Latino, Not Hispanic/Latino
<b>Race</b>	Choice	American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White
<b>Veteran Status</b>	Choice	Not a Veteran, Veteran, Spouse of Veteran
<b>ADL Limitations</b>	Choice (Multiple)	Bathing, Dressing, Transfer, Mobility, Toileting, Eating, None
<b>Chronic Health Conditions</b>	Choice (Multiple)	ADHD, Alzheimer's/Dementia, Arthritis, Asthma, Autism, Blind/Visually Impaired, Cancer, Cerebral Palsy, Chronic Kidney Disease, COPD, Deaf/Hard of Hearing, Depression, Diabetes, Epilepsy, Heart Disease/Failure, High Blood Pressure, High Cholesterol, HIV/AIDS, I/DD, Mental Health, Multiple Sclerosis, Muscular Dystrophy, Obesity, Physical Disability, PTSD, Spina bifida, Substance Use Disorder, Traumatic Brain Injury, Other, None

All Fields have a “No Response” option.

## Care Management Services

Demographic Information	Data Type	What to Collect/Options
<b>Age</b>	Number	<b>Collect</b> DOB (System calculated, Age, put into Age Ranges: <60, 60-64, 65-74, 75-84, 85+)
<b>Gender</b>	Choice	Female, Male, Other
<b>Geographic Distribution</b>	Choice	<b>Collect</b> Zip code (System calculated by software: Rural, Non-Rural)
<b>Poverty Status</b>	Choice	At or Below Poverty, Above Poverty
<b>Household Status</b>	Choice	Lives Alone, Lives with Others
<b>Ethnicity</b>	Choice	Hispanic/Latino, Not Hispanic/Latino
<b>Race</b>	Choice (Multiple)	American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White
<b>Minority Status*</b>	Yes/No	Minority, Not Minority (System calculated)
<b>ADL Limitations</b>	Choice (Multiple)	Bathing, Dressing, Transfer, Mobility, Toileting, Eating (Calculated by software: 0-1, 2, 3+)
<b>IADL Limitations</b>	Choice (Multiple)	Preparing meals, Managing money, Shopping, Light housework, Heavy housework, Telephoning, Medication management, Transportation ability (System calculated: 0-1,2,3+)
<b>Nutrition Risk Score</b>	Choice	0-21 (System calculated: 0-5, 6+) 11. I have an illness or condition that made me change the kind and/or amount of food I eat. (2) 12. I eat fewer than 2 meals per day. (3) 13. I eat few fruits or vegetables or milk products. (2) 14. I have 3 or more drinks of beer, liquor or wine almost every day. (2) 15. I have tooth or mouth problems that make it hard for me to eat. (2) 16. I don't always have enough money to buy the food I need. (4) 17. I eat alone most of the time. (1) 18. I take 3 or more different prescribed or over-the-counter drugs a day. (1) 19. Without wanting to, I have lost or gained 10 pounds in the last 6 months. (2) I am not always physically able to shop, cook and/or feed myself. (2)
<b>Client Income</b>	Number	Monthly income. Used to determine sliding fee scale.
<b>Education Level</b>	Number	Years
<b>Veteran Status</b>	Yes/No	

\* Minority Status is calculated by reviewing the Ethnicity and Race of an individual. This will be done by the [software] system. No calculation or data collection needs to be done at the service provider or AAA level. All Fields will have a "Missing Response" option.

Services

Federal Aging Services

1. Personal Care

<b>Definition:</b> <a href="#">Assistance</a> 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)		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input checked="" type="checkbox"/> <b>Client may Self-Direct this Service</b>	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

2. Homemaker

<b>Definition:</b> 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.			
<b>Service Unit:</b> <a href="#">Hour</a>		<b>Setting:</b> <a href="#">One-on-One</a>	
<b>Eligibility:</b> Individual must be 60 years old or older			
<b>Client Details:</b>			
<input checked="" type="checkbox"/>	<b>Collect ADLs</b>	<input type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	<b>Collect IADLs</b>	<input checked="" type="checkbox"/>	<b>Client may Self-Direct this Service</b>
<input type="checkbox"/>	Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
<b>Other Reporting Requirements:</b> N/A			
<b>Possible Funding Sources:</b>			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	<b>III-B (Supportive Service)</b>	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	<b>CASA (State Aging)</b>
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	<b>Local</b>
		<input checked="" type="checkbox"/>	<b>Other</b>
		<input type="checkbox"/>	May be MAC Eligible
<b>Provider Requirements:</b>		A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

3. Chore

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input checked="" type="checkbox"/> <b>Client may Self-Direct this Service</b>	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

4. Home Delivered Meals

<p><b>Definition:</b> 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.</p> <p>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.</p>																	
<p><b>Service Unit:</b> <a href="#">Meal</a></p>	<p><b>Setting:</b> <a href="#">One-on-One</a></p>	<p><a href="#">Registered Service</a></p>															
<p><b>Eligibility:</b></p> <ul style="list-style-type: none"> <li>• Individual must be 60 years old or older &amp; unable to attend a Congregate Meal, OR</li> <li>• Spouse of an Eligible Individual (60 years or older that is unable to attend a Congregate Meal), OR</li> <li>• Dependent Individual with Disability that lives with an Individual an Eligible Individual (60 years or older that is unable to attend a Congregate Meal)</li> </ul> <p>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.</p>																	
<p><b>Client Details:</b></p> <table> <tr> <td><input checked="" type="checkbox"/> Collect ADLs</td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect NRA Score</td> <td><input checked="" type="checkbox"/> Client may use Voucher</td> </tr> </table>			<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									
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<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																
<p><b>Other Reporting Requirements:</b> Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.</p>																	
<p><b>Possible Funding Sources:</b></p> <table> <tr> <td><input checked="" type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> May be MAC Eligible</td> <td></td> </tr> </table>			<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	
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<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)																
	<input type="checkbox"/> May be MAC Eligible																
<p><b>Provider Requirements:</b> A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.</p>																	

5. Adult Day Care/Health

<b>Definition:</b> Services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Includes out of home supervision, health care, recreation, and/or independent living skills training offered in centers most commonly known as Adult Day, Adult Day Health, Senior Centers, and Disability Day Programs.		
<b>Service Unit:</b> <u>Hour</u>	<b>Setting:</b> <u>One-on-One</u> or <u>Group Setting</u>	<u>Registered Service</u>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	



6. Case Management

<b>Definition:</b>		
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"> <li>• 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</li> <li>• to assess the needs, and to arrange, coordinate, and monitor an optimum package of services to meet the needs, of the older individual; and</li> </ul>		
Includes services and coordination such as—		
<ul style="list-style-type: none"> <li>• comprehensive assessment of the older individual (including the physical, psychological, and social needs of the individual);</li> <li>• 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"> <li>○ with any other plans that exist for various formal services, such as hospital discharge plans; and</li> <li>○ with the information and assistance services provided under the Older Americans Act;</li> </ul> </li> <li>• 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"> <li>○ periodic reassessment and revision of the status of the older individual with—</li> <li>○ the older individual; or</li> <li>○ if necessary, a primary caregiver or family member of the older individual; and</li> <li>○ in accordance with the wishes of the older individual, advocacy on behalf of the older individual for needed services or resources.</li> </ul> </li> </ul>		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

7. Assisted Transportation

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

8. Congregate Meals

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Meal</a>	<b>Setting:</b> <a href="#">Group Setting</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b>		
<ul style="list-style-type: none"> <li>• Individual must be 60 years old or older, OR</li> <li>• Spouse accompanying Individual 60 years or older, OR</li> <li>• Volunteer serving the meal, OR</li> <li>• Individual with a Disability, living with a parent 60 years or older &amp; accompanying the parent, OR</li> <li>• If the meal is served at <a href="#">senior housing</a>, Individual with a Disability, living in <a href="#">senior housing</a></li> </ul>		
<b>Client Details:</b>		
<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"/> <b>Collect NRA Score</b>	<input checked="" type="checkbox"/> <b>Client may use Voucher</b>	
<b>Other Reporting Requirements:</b> Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.		
<b>Possible Funding Sources:</b>		
<input checked="" type="checkbox"/> <b>III-A (NSIP Raw Food)</b>	<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"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-C1 (Congregate Meal)</b>	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

9. Nutrition Counseling

<b>Definition:</b> A standardized service as defined by the Academy of Nutrition & Dietetics (AND) that provides individualized guidance to individuals who are at nutritional risk because of their health or nutrition history, dietary intake, chronic illness, or medication use, or to caregivers. Counseling is provided one-on-one by a Registered Dietitian, and addresses the options and methods for improving nutrition status with a measurable goal.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<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"/> <b>Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input checked="" type="checkbox"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-C1 (Congregate Meal)</b>	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b>	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<p>The provider must be a Registered Dietitian.</p> <p><b>Provider Requirements:</b> A Medical Nutrition Therapy License is required if a patient’s nutritional status is medically assessed, treated, and monitored. The <a href="#">Nutrition Screening Tool</a> is not considered a part of a medical nutrition therapy assessment. See the <a href="#">Medical Nutrition Therapy</a> and <a href="#">Nutrition Screening Tool</a> for more information.</p>		

10. Transportation

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">One-Way Trip</a>	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<input type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> <b>Client may Self-Direct this Service</b>	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

11. Nutrition Education

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Session</a>	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<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	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Program Topic (i.e. Heart Healthy or Drink Enough Water)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input checked="" type="checkbox"/> <b>III-C1 (Congregate Meal)</b>	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input checked="" type="checkbox"/> <b>III-C2 (Home Delivered Meal)</b>	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b> A background check is suggested. The provider must be a Registered Dietitian or have comparable experience. "Comparable experience" is a private business matter and outside the scope of SUA/DHHS.		

12. Information & Assistance

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

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

<b>Definition:</b> 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). <b>Activities must meet ACL/AoA definition for an evidence-based program, as presented on ACL's website.</b>		
<b>Service Unit:</b> N/A	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Sign-In Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<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	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Name</li> <li>• Birth Year</li> <li>• ZIP Code</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input checked="" type="checkbox"/> <b>III-D (Health Pro)</b>	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input type="checkbox"/> May be MAC Eligible
<b>Provider Requirements:</b> Trained and/or certified to meet program requirements.		

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

<b>Definition:</b> Health promotion and disease prevention activities that <b>do not meet</b> 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"> <li>- health risk assessments</li> <li>- health education</li> <li>- age-related diseases and chronic disabling conditions information</li> <li>- counseling regarding social services and follow-up health services</li> <li>- educational services for individuals and their primary caregivers</li> <li>- physical fitness, group exercise, and music therapy, art therapy, and dance-movement therapy</li> <li>- routine health screening</li> <li>- medication management</li> <li>- home injury control services</li> <li>- gerontological counseling</li> </ul>		
<b>Service Unit:</b> N/A	<b>Setting:</b> <a href="#">One-on-One or Group Setting</a>	<a href="#">Sign-In Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<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	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Name</li> <li>• Birth Year</li> <li>• ZIP Code</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b>	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.	



16. Legal Assistance

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

State Aging Services

20. Care Management

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individuals 60 years or older are eligible. Those under 60 may also be served, subject to service prioritization.		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See Care Management reporting requirements.		
<b>Possible Funding Sources:</b>		
<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"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input checked="" type="checkbox"/> <b>Care Management (State)</b>	
	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>	
<b>Provider Requirements:</b>	<p>The Care Management Unit Supervisor and care managers shall have the following minimum qualifications:</p> <ul style="list-style-type: none"> <li>• 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</li> <li>• At least two years of experience in long-term care, gerontology or community health.</li> <li>• In addition, a Care Management Unit Supervisor shall have at least two years of supervisory or management experience.</li> </ul>	

21. Telephone & Visiting

<b>Definition:</b>		
Phoning a client in order to provide comfort or help. Telephone & Visiting services shall:		
<ul style="list-style-type: none"> <li>• Provide regular telephone or in person contact to or from isolated individuals.</li> <li>• Be provided by staff, knowledgeable and skilled in the services provided, including a volunteer under the supervision of the Care Manager or Options Counselor.</li> <li>• Include a prearranged schedule for contacting the participant;</li> <li>• Maintain a log of contacts documenting:               <ol style="list-style-type: none"> <li>1. Date of the contact;</li> <li>2. Length of the call;</li> <li>3. Summary of the contact;</li> <li>4. Determination of safety and well-being; and</li> <li>5. Determination of special assistance needed;</li> </ol> </li> <li>• Establish a procedure to be implemented in the event of a non-answered call;</li> <li>• Include the participant's preference regarding frequency of calls.</li> </ul>		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

22. Senior Center Hours

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

23. Material Distribution

<b>Definition:</b>		
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.		
<b>Service Unit:</b> <a href="#">Unit</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> <b>Client may Self-Direct this Service</b>	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

24. Social Activities

<b>Definition:</b> 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).		
<b>Service Unit:</b> <a href="#">Person Hour</a>	<b>Setting:</b> <a href="#">Group Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b> N/A		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<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	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

25. Counseling

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> Individual must be 60 years old or older		
<b>Client Details:</b>		
<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	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	Must meet topic specific credentialing, training, or expertise (i.e.: SHIIP counselors must be a certified SHIIP counselor).	

## State Unit on Aging Program Reference Guide

### 26. Respite

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> • Family Caregiver <b>OR</b> • Older Relative Caregiver		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Collect Client profile</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input checked="" type="checkbox"/> <b>May use Voucher</b>
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• In-Home</li> <li>• Out-of-Home (day)</li> <li>• Out-of-Home (overnight)</li> <li>• Other Respite</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		



27. Outreach

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Activity</a>	<b>Setting:</b> <a href="#">Group Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> Information about available services, aging, or the aging network.		
<b>Client Details:</b>		
<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	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

28. Information Services

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Activity</a>	<b>Setting:</b> <a href="#">Indirect Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> N/A		
<b>Client Details:</b> 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	
<b>Other Reporting Requirements:</b> <ul style="list-style-type: none"> <li>• Topic (if the system allows)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>		
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

29. Legal Outreach

<p>An interactive activity that conveys information about legal issues, including but not limited to:</p> <ul style="list-style-type: none"> <li>• Powers of Attorney</li> <li>• Wills</li> <li>• Health Care Directives</li> <li>• Reverse Mortgage</li> <li>• Social Security Benefits</li> <li>• Medicaid/Medicare</li> </ul> <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>		
<b>Service Unit:</b>	<a href="#">Activity</a>	<b>Setting:</b> <a href="#">Group Setting</a> <a href="#">Non-Registered Service</a>
<b>Eligibility:</b> Information about available services, aging, or the aging network.		
<b>Client Details:</b>		
<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	
<b>Other Reporting Requirements:</b>		
<ul style="list-style-type: none"> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> <b>III-B (Supportive Service)</b>	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>		
<b>Provider Requirements:</b>		
<ul style="list-style-type: none"> <li>• Attorney, OR</li> <li>• Law student under direct supervision of an attorney, OR</li> <li>• Paralegal under direct supervision of an attorney</li> </ul>		

Caregiver Services

30. Caregiver Counseling

<b>Definition:</b> A service designed to support caregivers and assist them in their decision-making and problem solving. Counselors are service providers that are degreed and/or credentialed as required by state policy, trained to work with older adults and families and specifically to understand and address the complex physical, behavioral and emotional problems related to their caregiver roles. This includes counseling to individuals. Counseling is a separate function apart from support group activities or training (see definitions for these services).		
If the service provider does not meet provider requirements, service units may be counted under Caregiver Supplemental Services.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR • <a href="#">Older Relative Caregiver</a>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>May collect demographics if OAA eligible.</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b>	Counselors are service providers that have a health and human services-related degree or license that allow them to 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.	

31. Caregiver Training

<b>Definition:</b> A service that provides family caregivers with instruction to improve knowledge and performance of specific skills relating to their caregiving roles and responsibilities. Skills may include activities related to health, nutrition, and financial management; providing personal care; and communicating with health care providers and other family members. Training may include use of evidence-based programs; be conducted in-person or on-line; and be provided in individual or group settings.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR • <a href="#">Older Relative Caregiver</a>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>May collect demographics if OAA eligible.</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

32. Caregiver Respite

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a> or <a href="#">Group Setting</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR • <a href="#">Older Relative Caregiver</a>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input checked="" type="checkbox"/> <b>May Self-Direct this Service</b>
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input checked="" type="checkbox"/> <b>May use Voucher</b>
<b>Other Reporting Requirements: Where Respite was Provided:</b>		
<ul style="list-style-type: none"> <li>• In-Home</li> <li>• Out-of-Home (day)</li> <li>• Out-of-Home (overnight)</li> <li>• Other Respite</li> </ul>		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.		

33. Caregiver Supplemental Services

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Unit</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR                      • <a href="#">Older Relative Caregiver</a>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b>	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> <b>Collect Eligibility</b>	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> N/A		

34. Caregiver Assistance: Case Management

<b>Definition:</b>	
<p>Provided to a caregiver, at the direction of the caregiver:</p> <ul style="list-style-type: none"> <li>• 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</li> <li>• to assess the needs, and to arrange, coordinate, and monitor an optimum package of services to meet the needs, of the caregiver; and</li> </ul> <p>Includes services and coordination such as—</p> <ul style="list-style-type: none"> <li>• comprehensive assessment of the caregiver (including the physical, psychological, and social needs of the individual);</li> <li>• 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"> <li>○ with any other plans that exist for various formal services; and</li> <li>○ 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;</li> <li>○ periodic reassessment and revision of the status of the caregiver; and</li> <li>○ in accordance with the wishes of the caregiver, advocacy on behalf of the caregiver for needed services or resources.</li> </ul> </li> </ul>	
<b>Service Unit:</b>	<a href="#">Hour</a> <b>Setting:</b> <a href="#">One-on-One</a> <a href="#">Registered Service</a>
<b>Eligibility:</b>	• <a href="#">Family Caregiver</a> OR      • <a href="#">Older Relative Caregiver</a>
<b>Possible Funding Sources:</b>	
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>
<input checked="" type="checkbox"/> <b>Must have 2 ADLs or a cognitive deficit</b>	<input checked="" type="checkbox"/> <b>Collect Demographics</b> <input type="checkbox"/> May be Anonymous <input checked="" type="checkbox"/> <b>Collect Eligibility</b> <input type="checkbox"/> May Self-Direct this Service <input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b> <input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements: N/A</b>	
<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"/> <b>III-E (Caregiver)</b> <input checked="" type="checkbox"/> <b>Local</b> <input type="checkbox"/> III-C1 (Congregate Meal) <input checked="" type="checkbox"/> <b>CASA (State Aging)</b> <input checked="" type="checkbox"/> <b>Other</b> <input type="checkbox"/> III-C2 (Home Delivered Meal) <input type="checkbox"/> Care Management (State)	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.

35. Caregiver Support Groups

<b>Definition:</b> A service that is led by a trained individual, moderator, or professional, as required by state policy, to facilitate caregivers to discuss their common experiences and concerns and develop a mutual support system. Support groups are typically held on a regularly scheduled basis and may be conducted in person, over the telephone, or online.  For the purposes of Title III-E funding, caregiver support groups would not include “caregiver education groups,” “peer-to-peer support groups,” or other groups primarily aimed at teaching skills or meeting on an informal basis without a facilitator that possesses training and/or credentials as required by state policy.	
<b>Service Unit:</b> <a href="#">Session</a>	<b>Setting:</b> <a href="#">Group Setting</a> <a href="#">Non-Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR • <a href="#">Older Relative Caregiver</a>	
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> <b>May be Anonymous</b> <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
<b>Other Reporting Requirements:</b> N/A	
<b>Possible Funding Sources:</b>	
<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"/> <b>III-E (Caregiver)</b> <input checked="" type="checkbox"/> <b>CASA (State Aging)</b> <input type="checkbox"/> Care Management (State)
	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> <b>Local</b> <input checked="" type="checkbox"/> <b>Other</b>
	<input type="checkbox"/> May be MAC Eligible
<b>Provider Requirements:</b>	Service providers should have a health and human services-related degree or license that allow them to administer services within the scope of their own professional practice that they are deemed competent to perform.



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### 36. Caregiver Assistance: Information & Assistance

<b>Definition:</b>		
<ul style="list-style-type: none"> <li>provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology;</li> <li>assesses the problems and capacities of the individuals;</li> <li>links the individuals to the opportunities and services that are available; and</li> <li>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.</li> </ul>		
<b>Service Unit:</b> <a href="#">Contact</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> • <a href="#">Family Caregiver</a> OR • <a href="#">Older Relative Caregiver</a>		
<b>Care Recipient</b>	<b>Caregiver (Client) Details:</b>	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> <b>Collect Eligibility</b> <input checked="" type="checkbox"/> <b>May do Caregiver Assessment</b>	<input checked="" type="checkbox"/> <b>May be Anonymous</b> <input type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b> <input checked="" type="checkbox"/> <b>CASA (State Aging)</b> <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> <b>Local</b> <input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> May be MAC Eligible		
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

37. Caregiver Outreach

<p><b>Definition:</b> 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.</p> <p>When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.</p>		
<p><b>Service Unit:</b> <a href="#">Activity</a></p>	<p><b>Setting:</b> <a href="#">Group Setting</a></p>	<p><a href="#">Non-Registered Service</a></p>
<p><b>Eligibility:</b> N/A</p>		
<p>Care Recipient</p>	<p>Caregiver (Client) Details:</p>	
<p><input type="checkbox"/> May collect demographics if OAA eligible.</p>	<p><input type="checkbox"/> Collect Demographics</p> <p><input type="checkbox"/> Collect Eligibility</p> <p><input type="checkbox"/> May do Caregiver Assessment</p>	<p><input type="checkbox"/> May be Anonymous</p> <p><input type="checkbox"/> May Self-Direct this Service</p> <p><input type="checkbox"/> May use Voucher</p>
<p><b>Other Reporting Requirements:</b></p> <ul style="list-style-type: none"> <li>• Topic (if system allows)</li> <li>• Estimated Audience Size</li> </ul>		
<p><b>Possible Funding Sources:</b></p>		
<p><input type="checkbox"/> III-A (NSIP Raw Food)</p> <p><input type="checkbox"/> III-B (Supportive Service)</p> <p><input type="checkbox"/> III-C1 (Congregate Meal)</p> <p><input type="checkbox"/> III-C2 (Home Delivered Meal)</p>	<p><input type="checkbox"/> III-D (Health Pro)</p> <p><input checked="" type="checkbox"/> <b>III-E (Caregiver)</b></p> <p><input checked="" type="checkbox"/> <b>CASA (State Aging)</b></p> <p><input type="checkbox"/> Care Management (State)</p>	<p><input type="checkbox"/> ADRC (State)</p> <p><input checked="" type="checkbox"/> <b>Local</b></p> <p><input checked="" type="checkbox"/> <b>Other</b></p>
<p><input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b></p>		
<p><b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.</p>		

38. Caregiver Information Services

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Activity</a>	<b>Setting:</b> <a href="#">Indirect Setting</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility:</b> 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
<b>Other Reporting Requirements:</b> <ul style="list-style-type: none"> <li>• Topics (if system allows)</li> <li>• Estimated Audience Size</li> </ul>		
<b>Possible Funding Sources:</b>		
<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"/> <b>III-E (Caregiver)</b>	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>	
<b>Provider Requirements:</b> N/A		

State ADRC Direct Services

40. Information & Referral

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Contact</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Non-Registered Service</a>
<b>Eligibility: (Must be at least one of the below)</b> <ul style="list-style-type: none"> <li>• 60 years or older</li> <li>• <a href="#">Individual with a Disability</a></li> <li>• <a href="#">Caregiver</a></li> <li>• <a href="#">Representative</a></li> </ul>		
<b>Client Details:</b>		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> <b>Client may be Anonymous</b>	
<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	
<b>Other Reporting Requirements:</b> N/A		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

41. Options Counseling

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility: Need Long Term Care AND (Must be at least one of the below)</b>		
• 60 years or older	• <a href="#">Individual with a Disability</a>	• <a href="#">Representative</a>
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>May Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See ADRC services demographic information.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

42. Transitional Options Counseling

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility: Need Long Term Care AND (Must be at least one of the below)</b>		
• 60 years or older	• <a href="#">Individual with a Disability</a>	• <a href="#">Representative</a>
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>May Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See ADRC services demographic information.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>	
<b>Provider Requirements:</b>	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

43. Benefits Assistance

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility: (Must be at least one of the below)</b>		
• 60 years or older	• <a href="#">Individual with a Disability</a>	• <a href="#">Representative</a>
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> <b>May Collect NRA Score</b>	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See ADRC services demographic information.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> <b>May be <a href="#">MAC Eligible</a></b>	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		

44. Mobility Training

<b>Definition:</b> 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.		
<b>Service Unit:</b> <a href="#">Hour</a>	<b>Setting:</b> <a href="#">One-on-One</a>	<a href="#">Registered Service</a>
<b>Eligibility: (Must be at least one of the below)</b>		
<ul style="list-style-type: none"> <li>• 60 years or older</li> <li>• <a href="#">Individual with a Disability</a></li> <li>• <a href="#">Caregiver</a></li> <li>• <a href="#">Representative</a></li> </ul>		
<b>Client Details:</b>		
<input checked="" type="checkbox"/> <b>Collect ADLs</b>	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> <b>Collect IADLs</b>	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
<b>Other Reporting Requirements:</b> See ADRC services demographic information.		
<b>Possible Funding Sources:</b>		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> <b>ADRC (State)</b>
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> <b>Local</b>
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> <b>CASA (State Aging)</b>	<input checked="" type="checkbox"/> <b>Other</b>
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
<b>Provider Requirements:</b> This is a private business matter and outside the scope of SUA/DHHS.		



State ADRC Administrative Services

The Aging and Disability Resource Act put forth a series of services that could be provided. Some services are administrative, rather than a direct service. This section will review the ADRC’s capacity development. This section also covers administrative activities that may be eligible for Medicaid Administrative Claiming. See the Medicaid Administrative Claiming section for more information.

45. Point of Entry

<p><b>Definition:</b>          A convenient point of entry to the range of publicly supported long-term care programs for an eligible individual. Each organization or agency that provides ADRC service(s) will be designated as a Point of Entry.</p> <p>Note: This is a designation, a direct ADRC service must be provided by an organization to be considered a Point of Entry.</p>
<p><b>Reporting Requirements:</b>          The SUA will provide an annual ADRC report to the state legislature, including the number of organizations that act as Points of Entry.</p>

46. Unmet Service Needs

<p><b>Definition:</b>          A process for identifying unmet service needs in communities and developing recommendations to respond to those unmet needs.</p>
<p><b>Reporting Requirements:</b>          Unmet needs are collected as part of the uniform data collection process. In order for this administrative service to be used, data must be collected <u>and</u> recommendations must be made to address unmet needs.</p> <p>The SUA will provide an annual ADRC report to the state legislature including details unmet needs. If this administrative service is provided, the Point of Entry providing this service will need to provide recommendations to the SUA.</p>

## 47. Home Care Provider Registry

**Definition:**

A home care provider registry that will provide a person who needs home care with the names of home care providers and information about his or her rights and responsibilities as a home care consumer.

See Definitions: [Home Care Consumer Rights](#), [Home Care Provider](#), [Home Care Registry](#), [Home Care Services](#)

**Reporting Requirements:**

A Point of Entry that provides a Home Care Provider Registry will also:

- Document and implement a maintenance policy.
- Develop & share publications (such as, but not limited to brochures) about provider information and the consumer's rights.
- Report:
  - Total Number of Home Care Providers in the registry
  - Number of providers by each service type (e.g.: homemaker providers)
  - Time spent developing & maintaining the directory and publications
- Regularly record when the Home Care Provider Registry & Consumer Rights were shared with a consumer.

This will be shared in the SUA annual ADRC report to the legislature.

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**Coronavirus 2019 (COVID19) Services**

COVID-19 Services available as of March 2020. Not all services are available in all areas. Services are indicated in budget columns.

<b>Service Name:</b>	COVID19 TGM (NSIP & Not NSIP)	<b>Service Units:</b>	Meal		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	Yes
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible. The client is unable to receive a Congregate Meal at a Senior Center due to COVID-19.				
<b>Definition:</b>	Also Known As: Curbside, Pickup, Grab & Go, Drive Thru, or To Go Meals. A meal that is distributed instead of a Congregate Meal during the COVID-19 pandemic. During the Major Disaster Declaration, meals do not need to meet DRI (Dietary Reference Intake). Meals should be as nutritious as possible. Meals must meet daily calorie minimums (534 calories). If III-A (NSIP) Funds are used, NSIP guidelines must be followed. Clients are not required to pay retail price.				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID19 HDM (NSIP & Not NSIP)	<b>Service Units:</b>	Meal		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	Yes
<b>Eligibility:</b>	(Other) Any OAA eligible individual that receives a Home Delivered Meal because of the COVID-19 pandemic. Any current [Congregate Meal] client that cannot visit a senior center because it is closed for COVID-19, but still needs a meal.				
<b>Definition:</b>	A Home Delivered Meal delivered during the COVID-19 pandemic. Clients may bypass the AAA's normal Home Delivered Meal policies. During the Major Disaster Declaration, meals do not need to meet DRI (Dietary Reference Intake). Meals should be as nutritious as possible. Meals must meet daily calorie minimums (534 calories).				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID19 Well Check	<b>Service Units:</b>	Contact		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible or eligible for state Aging Programs (CASA, CM, & ADRC)				
<b>Definition:</b>	A supportive phone contact to an OAA eligible individual to confirm the individual's mental and physical wellbeing during the coronavirus outbreak. This may identify other needed services. This can be done by a volunteer, senior center staff member, AAA staff member, or other AAA service provider.				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID19 Consumables	<b>Service Units:</b>	Delivery		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	Yes	<b>Client Use Voucher?<sup>2</sup></b>	Yes
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible for state Aging Programs (CASA, CM & ARDC)				
<b>Definition:</b>	Purchased supplies that cannot be re-used, cleaning supplies, groceries, etc. Reoccurring payments like monthly internet or cell phone service.				
<b>Service Status:</b>	Active				

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<b>Service Name:</b>	COVID19 Devices	<b>Service Units:</b>	Unit
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	Yes
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible for state Aging Programs (CASA, CM & ARDC)		
<b>Definition:</b>	These services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver. Physical devices purchased for an older adult's use. This includes durable equipment, durable medical equipment, assistive technology, emergency response systems, cell phones, tablets, and other technologies.		
<b>Service Status:</b>	Active		

<b>Service Name:</b>	COVID19 Transport	<b>Service Units:</b>	One-Way Trip
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible or eligible for state Aging Programs (CASA, CM, & ADRC)		
<b>Definition:</b>	Providing accessible transportation to COVID-19 vaccination sites		
<b>Service Status:</b>	Active		

<b>Service Name:</b>	COVID19 VAC Support	<b>Service Units:</b>	Hour
<b>Collect Client Details?</b>	No	<b>Client Self-Direct?<sup>1</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible or eligible for state Aging Programs (CASA, CM, & ADRC)		
<b>Definition:</b>	<ul style="list-style-type: none"> <li>Disseminating credible information about COVID-19 vaccines and help direct those with questions to additional sources of information</li> <li>Identifying people who may need help getting a COVID-19 vaccination, including those who are unable to independently travel to a vaccination site</li> <li>Helping with scheduling a COVID-19 vaccination appointment for those who need help.</li> <li>Arranging transportation.</li> <li>Providing technical assistance to local health departments and other entities on vaccine accessibility,</li> <li>Providing personal support if needed (e.g., peer support), and</li> <li>Reminding the person of their second vaccination appointment if needed.</li> </ul>		
<b>Service Status:</b>	Active		

<b>Service Name:</b>	COVID19 Group Socials	<b>Service Units:</b>	Contact
<b>Collect Client Details?</b>	No	<b>Client Self-Direct?<sup>1</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible for state Aging Programs (CASA, CM & ARDC)		
<b>Definition:</b>	Contacts by staff or volunteers between more than two older adults via text, phone, email, or video chat to provide reassurance or socialization. Each OAA participant should be counted as a single contact. E.g.: A group phone call is set up by a senior		

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	center volunteer. Five OAA eligible people participate. 5 contacts should be recorded for that group call
<b>Service Status:</b>	Active

<b>Service Name:</b>	COVID19 CG Homemaker	<b>Service Units:</b>	Hour		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	Yes	<b>Client Use Voucher?<sup>2</sup></b>	Yes
<b>Eligibility:</b>	Caregiver of 60+ year old				
<b>Definition:</b>	<p>Hours of time spent providing in-home assistance to Caregivers, including delivery of groceries, prescriptions, or other supplies. These services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver. Follow III-B Homemaker, Chore, and Personal Care definitions.</p> <p>Homemaker, chore, and personal care services may be activities that can occur during the provision of respite care, which may offer additional support to either the caregiver or care receiver. If the service is integral to the respite care provided for SPR purposes the service should be reported as Respite.</p>				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID19 CG HDM	<b>Service Units:</b>	Meal		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	Yes
<b>Eligibility:</b>	Caregiver of 60+ year old				
<b>Definition:</b>	<p>A Home Delivered Meal delivered during the COVID-19 pandemic. Clients may bypass the AAA's normal Home Delivered Meal policies. During the Major Disaster Declaration, meals do not need to meet DRI (Dietary Reference Intake). Meals should be as nutritious as possible. Meals must meet daily calorie minimums (534 calories). These services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver.</p>				
<b>Service Status:</b>	Active				
<b>Service Name:</b>	COVID19 CG Consumables	<b>Service Units:</b>	Delivery		
<b>Collect Client Details?</b>		<b>Client Self-Direct?<sup>1</sup></b>		<b>Client Use Voucher?<sup>2</sup></b>	
<b>Eligibility:</b>	Caregiver of 60+ year old				
<b>Definition:</b>	<p>These services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver. Purchased supplies that cannot be re-used, cleaning supplies, groceries, etc. Reoccurring payments like monthly internet or cell phone service.</p>				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID19 CG Devices	<b>Service Units:</b>	Unit		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	Yes	<b>Client Use Voucher?<sup>2</sup></b>	
<b>Eligibility:</b>	Caregiver of 60+ year old				
<b>Definition:</b>	<p>These services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver. Physical devices purchased for an older adult's use. This includes durable equipment, durable medical equipment, assistive technology, emergency response systems, cell phones, tablets, and other technologies. These</p>				

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	services must benefit the caregiver, whether the service or item is used by the care receiver or the caregiver.
<b>Service Status:</b>	Active

<b>Service Name:</b>	COVID19 SFMNP	<b>Service Units:</b>	Application		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible. Individual must be 60+ and be within the 185% of the Federal Poverty Guidelines for a 1 or 2 person household.				
<b>Definition:</b>	Will provide service delivery to clients, including passing out and collecting applications, nutrition education and coupons for the SFMNP.				
<b>Service Status:</b>	Active				

<b>Service Name:</b>	COVID-19 Goods Delivery	<b>Service Units:</b>	Contact		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible for state Aging Programs (CASA, CM & ADRC)				
<b>Definition:</b>	The coordination of grocery, goods and pharmaceutical items to an OAA eligible individual to distribute, deliver/coordinate food, household items and medication during the coronavirus outbreak. This can be done by a volunteer, senior center staff member, AAA staff member or other AAA service provider. One distribution is one contact.				
<b>Service Status:</b>	Inactive – Tracked under Homemaker				

<b>Service Name:</b>	COVID-19 PPE	<b>Service Units:</b>	Unit		
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No	<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	(Other) Any current or new client that is OAA eligible for state Aging Programs (CASA, CM & ARDC)				
<b>Definition:</b>	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 an individual. This may include masks, gloves, first aid items, etc.				
<b>Service Status:</b>	Inactive – Tracked under CG Consumables				

<b>Service Name:</b>	COVID 19 Food Delivery	<b>Service Units:</b>	Food Basket		
<b>Collect Client Details?</b>	No	<b>Client Self-Direct?<sup>1</sup></b>	Yes	<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	Individual is 60+ year old				

<sup>1</sup> Clients can direct and coordinate service providers. May not be available in all regions.

<sup>2</sup> Some agencies use a voucher program to redeem services at the Client’s convenience.

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<b>Definition:</b>	MAAA has offered to pickup and deliver any necessities for seniors. In addition the food delivery service will be utilized to deliver pantry items gathered by community donation or purchased with material distribution funds.
<b>Service Status:</b>	Inactive – Tracked under Homemaker or CG Consumables

<b>Service Name:</b>	Covid-19 CG Supportive Services	<b>Service Units:</b>	Unit
<b>Collect Client Details?</b>	Yes	<b>Client Self-Direct?<sup>1</sup></b>	No
		<b>Client Use Voucher?<sup>2</sup></b>	No
<b>Eligibility:</b>	Caregiver of 60+ year old		
<b>Definition:</b>	Handing out homemade cloth masks (2), hand sanitizer, and gloves to our Care givers as they are not able to get any of these items. Hopefully this will protect our Caregivers and clients.		
<b>Service Status:</b>	Inactive- Tracked under CG Consumables		

## Other SPR Components

This section will detail more information for new SPR requirements that go into effect ~~October 1, 2021 (FFY 2021 report)~~ at various times throughout SFY 2022 (starting July 1, 2021).

SPR reporting changes can be found on the External Partners Share Point site: <https://partners-dhhs.ne.gov/SUA/Pages/SPR.aspx> Note: This page requires credentials. Contact your supervisor and/or [DHHS.Aging@nebraska.gov](mailto:DHHS.Aging@nebraska.gov) if you have access questions.

The External Partners Share Point site provides webinar, job aids, timelines, and additional guidance.



### ADRC Reporting Requirements

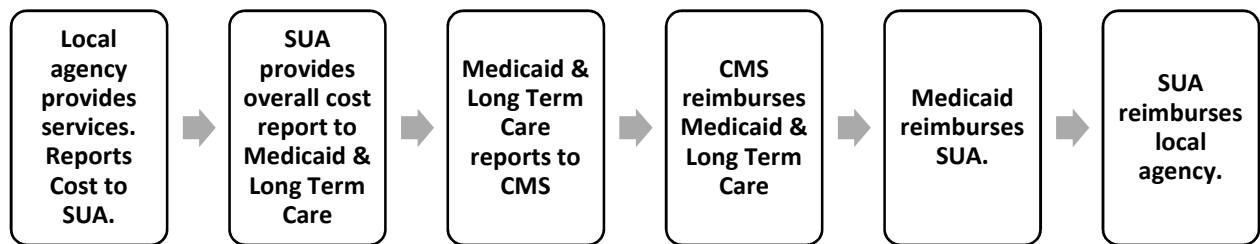
The SUA is responsible for providing an annual report to the Nebraska State Legislature in December. This report will encompass the State Fiscal Year that ended during the calendar year. If an ADRC service requires more than service units to be provided, additional information must be given to the SUA by October 1<sup>st</sup> of the calendar year.

### Medicaid Administrative Claiming (MAC)

Also known as Federal Financial Participation (FFP). An ADRC can receive federal Medicaid dollars to directly support efforts to identify and enroll eligible individuals into Medicaid programs, or help individuals avoid Medicaid if that is a better option.

State funded programs like the ADRC and the Care Management program may be eligible for allowable administrative match reimbursed by CMS. Other federal funds (like OAA funds) cannot receive a federal match from CMS. This makes the ADRC and the Care Management program ideal. At this time, administrative match is 50% of the allowable costs.

Local agencies must adhere to federal (CMS) and state (SUA) guidelines for reporting MAC/FFP eligible time.



Activities that can receive funding:

- Outreach
- Person-Centered Counseling
- Facilitating Medicaid Eligibility
- Staff Training
- Program Development
- Quality Improvement

An example of the math for administrative claiming:

Federal Financial Participation Estimates	Expenditures	Claimable Clients	Federal Match	Potential FFP
Care Management	\$500,000	70%	50%	\$175,000
ADRC Local & State	\$87,000	70%	50%	\$30,450
Local Funds	\$100,000	70%	50%	\$35,000
<b>Total</b>	<b>\$687,000</b>			<b>\$240,450</b>

## Frequently Asked Questions

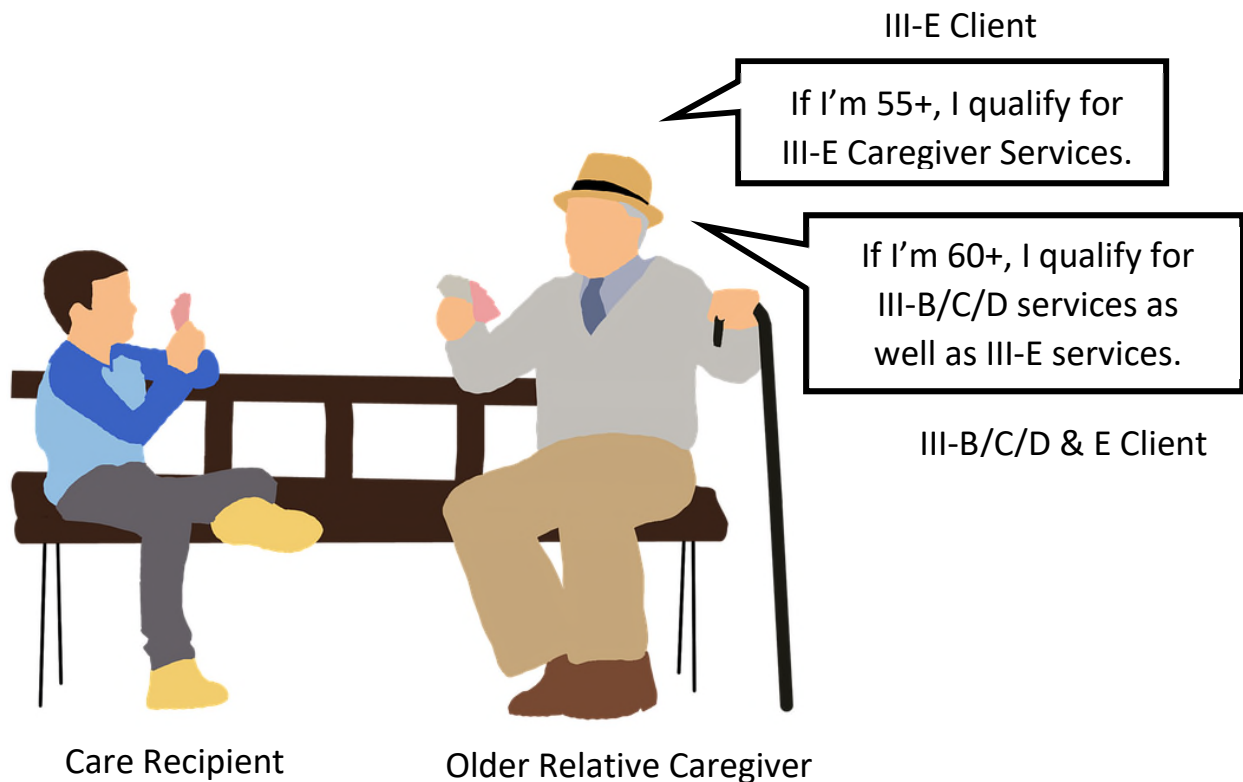
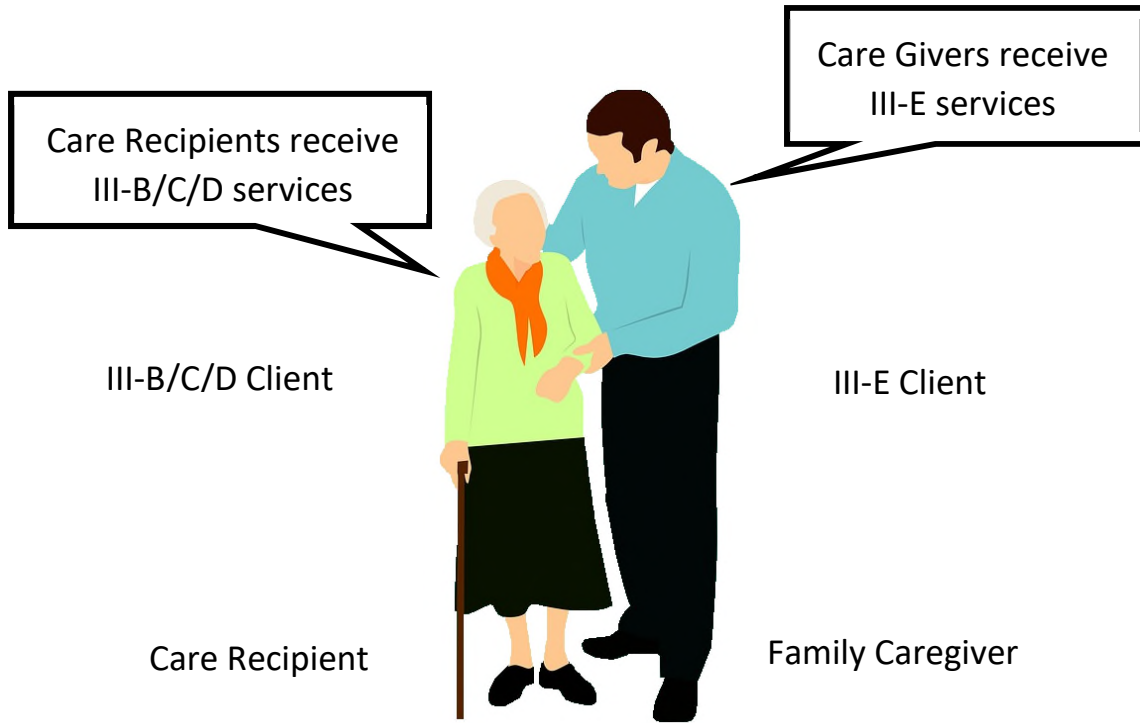
### Parallel III-B/C/D and III-E Services

Similar services can be provided for an Older Individual or to a Caregiver (Family or Older Relative) and funded through III-B (Supportive Services) or III-E (Caregiver).

Older Individual service	Caregiver service
<a href="#">4. Home Delivered Meals</a>	Part of <a href="#">33. Caregiver Supplemental Services</a>
<a href="#">5. Adult Day Care/Health</a>	Part of <a href="#">32. Caregiver Respite</a>
<a href="#">6. Case Management</a>	<a href="#">34. Caregiver Assistance: Case Management</a>
<a href="#">8. Congregate Meals</a>	Part of <a href="#">33. Caregiver Supplemental Services</a>
<a href="#">12. Information &amp; Assistance</a>	<a href="#">36. Caregiver Assistance: Information &amp; Assistance</a>
<a href="#">23. Material Distribution</a>	Part of <a href="#">33. Caregiver Supplemental Services</a>
<a href="#">25. Counseling</a>	<a href="#">30. Caregiver Counseling</a>
<a href="#">26. Respite</a>	<a href="#">32. Caregiver Respite</a>
<a href="#">27. Outreach</a>	<a href="#">37. Caregiver Outreach</a>
<a href="#">28. Information Services</a>	<a href="#">38. Caregiver Information Services</a>

**It is important to note that the Older Individual is considered the client for III-B/C/D services. The Caregiver is the client for III-E services.**

**See the next page for clarification.**



What's the difference between...?

1. [Care Management / Case Management](#)

**Care Management** and **Case Management** are often used synonymously for a care coordination service. The State Unit on Aging recognizes these as two different services. *Case Management* is the federal service (as set forth in OAA) and cannot require payment towards services. *Care Management* is the state service (as set forth in Title 15 – Aging Services) and states that the individual “shall pay” if the individual is above 0% on the Fee Scale (> 149% of Federal Poverty Level). This is an important distinction as “shall pay” for the state’s Care Management service is in opposition to the OAA’s requirement that OAA funded services be provided regardless of whether any payment amount is received. See **Cost Sharing** for more information.

Care Management requires the use of the Care Management Basic Assessment.

2. [Information & Assistance / Information & Referral](#)

**Information & Referral (I&R)** differs from **Information & Assistance (I&A)** by:

- I&A is usually a quick contact, with an individual asking about a single community resource (e.g.: location, business hours, or phone numbers).
- I&R is distinguished by the gathering of more data, and may be about multiple subjects. The provider may make recommendations about multiple community resources. The individual seeks guidance from the ADRC.

**Information & Referral (I&R)** is similar to **Information & Assistance (I&A)**:

- Both can be done anonymously, however I&R gathers more individual demographic information.
- Both can have follow ups contacts.

3. [Options Counseling / Care or Case Management](#)

**Options Counseling** is a short term (less than six months) form of “light” **Care or Case Management**. Care/Case Management provides in depth support across multiple facets of life. Options Counseling may only focus on one or two specific areas of support, for a much shorter period of time. Options Counseling is focused on solving a problem, whereas Care or Case Management is focused on Long Term Services and Supports.

4. [Caregiver Assistance: Information & Assistance / Caregiver Assistance: Case Management](#)

It is possible for **Caregiver Assistance: Case Management** clients to receive **Caregiver Assistance: Information & Assistance**. If the service is a quick, one off discussion, classify the service as Caregiver Assistance: Information & Assistance. If more than 15 minutes is spent providing information, screening for services, or reviewing possible support plans, count the service as Caregiver Assistance: Case Management.

5. [Contact Service \(Information & Assistance and Information & Referral\)](#) vs. [Hourly Service \(Care Management, Case Management, Benefits Assistance, etc.\)](#)

General rule of thumb, if the contact lasts 15 minutes or longer, it can be classified under the appropriate hourly service.

6. [Outreach](#) / [Information & Assistance](#) / [Information Services](#)

During an Outreach event (like a presentation or a booth at a fair), brochures may be handed out, questions asked and answered. This is normal activity during an Outreach event. When an Outreach event occurs, individual services should not be counted. It is all covered under the Outreach service.

7. [Outreach](#) / [Social Activities](#)

The topic determines if an activity is Outreach or Social Activities. If the topic is aging- or aging network-related, it should be counted as Outreach.

If the topic is not aging- or aging network- related, but presented to older adults, the service can be counted under Social Activities.

You want to count the service because it's....	Outreach	Social Activities
Aging-Related Topic	X	
Available Aging Services Topic	X	
Aging Network Topic	X	
Audience is older adults		X
Location is senior center/AAA		X
Organized by senior center/AAA		X

8. [Health Promotion Disease Prevention: Evidence-Based](#) / [Non Evidence-Based](#)

Both are III-D Services because they come from part D of the OAA Title III. Per the ACL, only Evidence-Based Programs can utilize III-D funding. Non-Evidence-Based Services cannot use III-D funding, it can use III-B funding.

9. [Transitional Options Counseling](#) / [Options Counseling](#)

**Transitional Options Counseling** differs from **Options Counseling** by:

- Focusing specifically on life and/or living situation transition
- Transitional Options Counseling support is not time limited, but is project/goal limited (once transition is complete, service ends). Options Counseling is usually less than six months.

10. [Mobility Training](#) / [Information & Assistance](#)

**Mobility Training** differs from **Information & Assistance (I&A)** by:

- Information & Assistance (I&A) may be as brief as providing a bus schedule and highlighting an appropriate bus route.
- Mobility Training is a more in depth service to orient an individual with transportation options.
- If a provider spent more than 15 minutes explaining/detailing transportation options, it should be counted as Mobility Training.

11. [Counseling](#) / [Outreach](#)

Counseling services are done in a one-on-one setting.

Outreach is done in a group setting.

## 12. [Senior Center Hours](#) / [Social Activities](#)

Senior Center Hours are the hours a multipurpose senior center is open to older individuals. Informal or impromptu social activities may occur while the senior center is open. The Social Activities service tracks planned or formal activities.

**Example: A couple of individuals chat over coffee about a new book at the senior center.**

Senior Center Hours would cover this social interaction. It would be inappropriate for senior center staff to try to watch all conversations or groupings and try to assign an activity with it or have the people in this example do an “impromptu book club” sign in.

**Example: Every third Friday, the senior center holds a book club meeting.**

Social Activities would cover this event. There is probably a sign in sheet. It is planned or organized. The activity should take place at the senior center or should be organized by the senior center staff or volunteers.

**Example: Once a quarter, the senior center organizes a trip to a local point of interest (not gambling or alcohol related).**

Social Activities would cover this event because the senior center staff or volunteers organized and planned this event.

## 13. [Multipurpose Senior Center](#) / [Nutrition Site](#)

A Multipurpose Senior Center is a senior center or other community building that provides a spectrum of services including nutrition, recreation, education, and more. Meals do not need to be provided to be considered a Multipurpose Senior Center. A Nutrition Site is a location that has congregate meals available for older adults. No other programming is provided. **Its primary purpose is not to provide aging services.**

### [Who is a Family Caregiver or Older Relative Caregiver?](#)

#### 1. Does a Family Caregiver have to be family?

No. A family caregiver can be any adult individual that provides informal in-home and community care to an Older Individual or an Individual with Alzheimer’s disease.

#### 2. Does an Older Relative Caregiver have to be a relative?

Yes. There must be a familial connection between the 55 years or older Caregiver and the Child or Individual with Disability. A familial connection can be through blood, marriage, adoption, custody, or guardianship.

#### 3. An Individual with Alzheimer’s disease is not 60 years or older. Does their Caregiver qualify as a Family Caregiver?

Yes. While Alzheimer’s disease mainly affects those 65 years or older, about 5% of all Alzheimer’s patients have “early-onset” Alzheimer’s are diagnosed in their 40s or 50s. An adult providing informal in-

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home and community services for an individual with Alzheimer's qualifies as a Family Caregiver under the National Family Caregiver Support Program, regardless of the Care Recipient's age.

Can Emergency Response Systems be counted under [Respite](#) or [Caregiver Respite](#)?

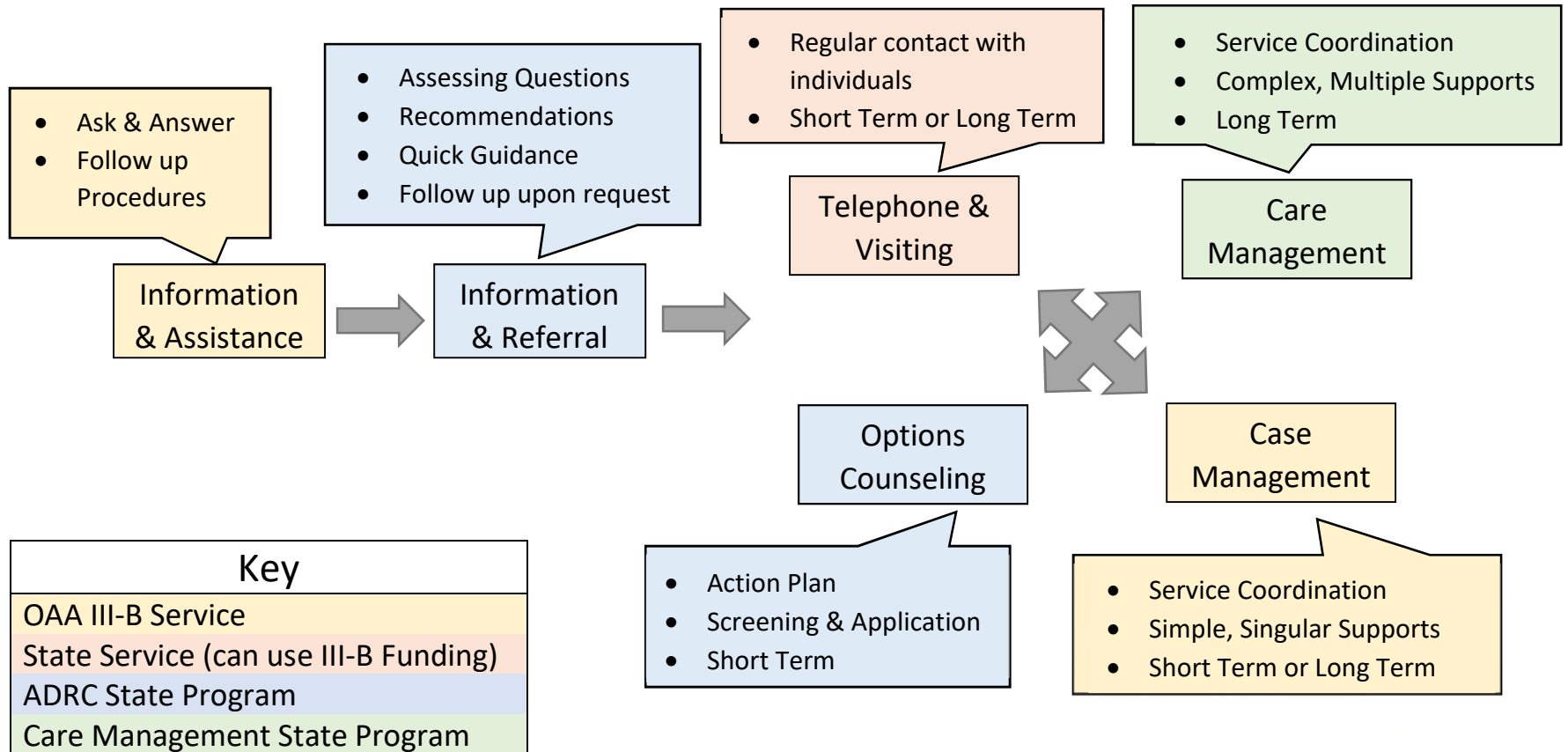
No. Emergency Response Systems (ERS) are meant to provide 24 hour coverage. Respite is meant to be short term relief from caregiver responsibilities.

Emergency Response Systems should be documented under [23. Material Distribution](#) or [33. Caregiver Supplemental Services](#).

Under Home Delivered Meals and Congregate Meals, it mentions "Meals provided to an individual through means-tested programs may be included." Should we be means-testing for meals?

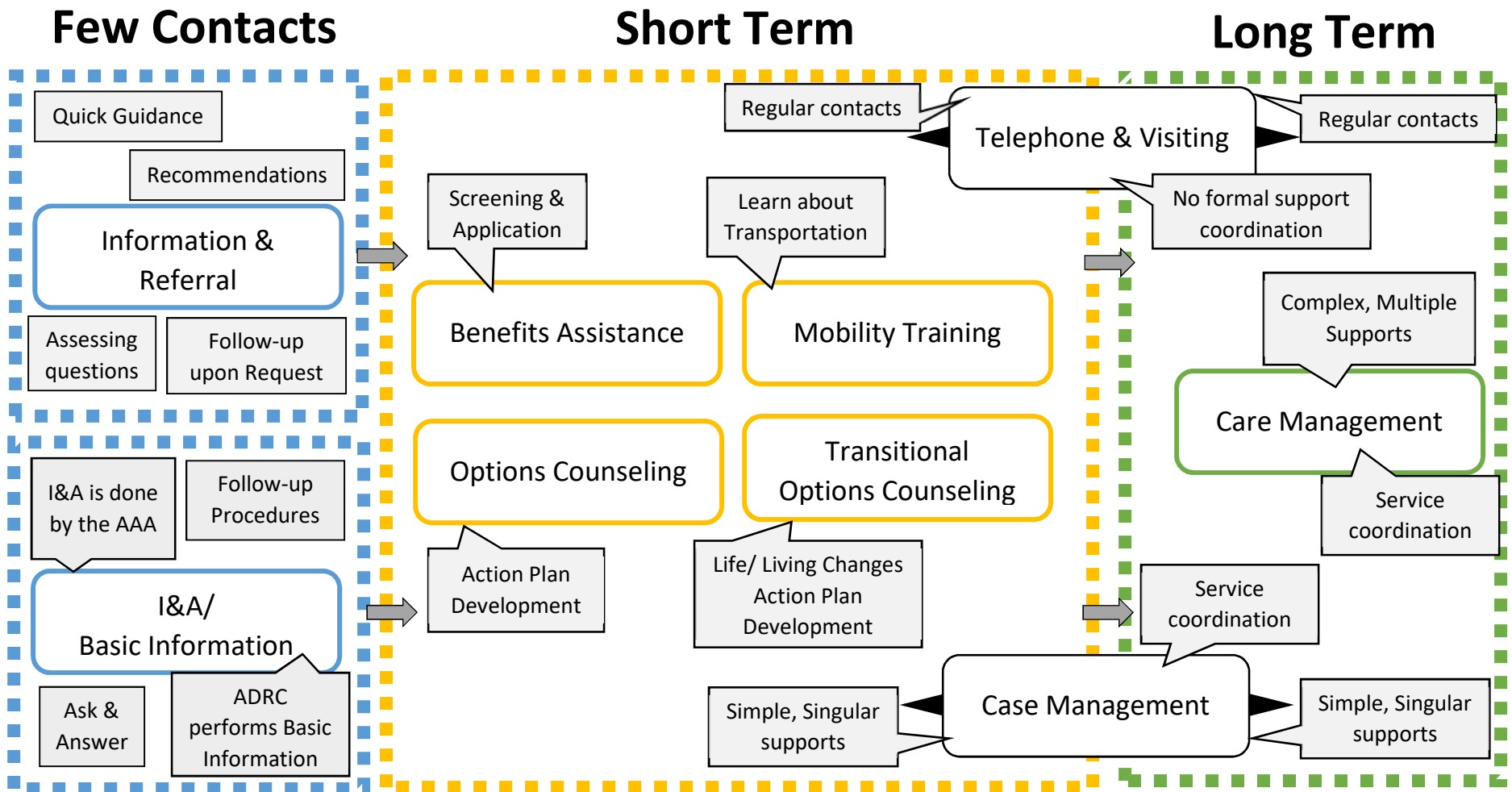
This has been standard language for the last few taxonomies. We regularly collect meals that were paid for by Title XX or Waiver (means-tested programs) if the senior center or AAA helps facilitate those meals as well. Means-tested programs & services cannot receive OAA funds. This information is collected because it is considered part of the Aging Network.

Service Workflow I





Service Workflow II



## Old Taxonomy Services – Where are they now?

### 14. Outreach

Previously defined as: Intervention with individuals initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits. It was Information & Assistance initiated by the AAA.

During the SPR redesign process, the ACL removed Outreach as a federal service. The SUA created a new State Aging Service with the same name (Outreach), but with a new definition.

### 15. Health Education

Previously defined as: Any other health related education that does not fall under “Nutrition Education”. This can include Alzheimer’s, depression, dementia, and holiday stress.

During the SPR redesign process, the ACL split Health Promotion/ Disease Prevention into two services. Health Promotion / Disease Prevention (Evidence-Based) for services that could use III-D funding. Health Promotion/ Disease Prevention (Non Evidence-Based) for services that could use III-B funding.

Health Education units should be reported under [14. Health Promotion/ Disease Prevention \(Non Evidence-Based\)](#).

### 16. Emergency Response System

Previously defined as: Direct action to make available emergency response system for persons who are frail or at risk of loss of independence and who can benefit from the security provided by such a system. System must be a formal emergency response system.

The SUA created a new State Aging Service: [23. Material Distribution](#). Emergency Response Systems (that can be funded by III-B) should be documented under [23. Material Distribution](#).

### 18. Financial Counseling

Previously defined as: Provision of information and presentation of options on a one-to-one basis designed to assist an older individual to obtain financial services and benefits. Service includes public benefits counseling and tax assistance counseling.

This service was split between two services: [43. Benefits Assistance](#) (public benefits counseling and assist older individual to obtain benefits) and [25. Counseling](#) (tax assistance counseling and assist older individual to obtain financial services).

### 19. Health Clinic

Previously defined as: Services provided by licensed health care professionals that are designed to identify, prevent or treat a physical or mental health problem. Service must include individualized health intervention provided by a health professional (example: blood pressure, hearing screening, foot clinic, cholesterol screening.)

This service will be categorized under [14. Health Promotion/ Disease Prevention \(Non Evidence-Based\)](#).

## 22. Durable Medical Equipment

Previously defined as: The provision of goods to an individual at no cost or at a reduced cost which will directly support the health and independence of the individual with an assessed need. Goods are adaptive devices or assistive technology to be used by an individual.

The SUA created a new State Aging Service: [23. Material Distribution](#).

## 24. Self-Directed Care

Previously defined as: This was previously called Cash and Counseling. An approach to providing services (including programs, benefits, supports, and technology) under this Act intended to assist an individual with activities of daily living, in which

- Such services (including the amount, duration, scope, provider, and location of such services) are planned, budgeted, and purchased under the direction and control of such individual;
- Such individual is provided with such information and assistance as are necessary and appropriate to enable such individual to make informed decisions about the individual's care options;
- The needs, capabilities, and preferences of such individual with respect to such services, and such individual's ability to direct and control the individual's receipt of such services, are assessed by the area agency on aging (or other agency designed by the area agency on aging involved);
- Based on the assessment made, the area on aging (or other agency designated by the area agency on aging) develops together with such individual and the individual's family, caregiver, or legal representative—
  - a plan of services for such individual that specifies which services such individual will be responsible for directing;
  - a determination of the role of family members (and others whose participation is sought by such individual) in providing services under such plan; and
  - a budget for such services; and
- The area agency on aging or State agency provides for oversight of such individual's self-directed receipt of services, including steps to ensure the quality of services provided and the appropriate use of funds under this Act. From Section 102(46) of the Older Americans Act of 1965, as amended.

This covers the range of services provided or paid for through allowance, vouchers, or cash which provided to the client so that the client can obtain the supportive services which are needed.

During the SPR redesign process, the ACL removed Self-Directed Care as a federal service. Self-Directed Care has been defined as a service delivery method and will be noted with the service.

## 27. Ombudsman

Previously defined as: Includes cases (investigation and resolution of complaints that are made by and on behalf of residents of nursing homes and assisted living facilities); Information and Consultations to Individuals; Consultations to Facility/Providers; Work with Resident Councils; Work with Family councils; Training given to Facility Staff (data from Ombudsman report.)

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Ombudsman services are tracked in PeerPlace software. Ombudsman information is reported through a separate federal report - NORS.

### 29. Volunteerism

Previously defined as: An uncompensated individual who provides services or support on behalf of older individuals. State Senior Companion program participants should be documented under this NAMIS service.

Volunteers are tracked in the system and reported through the SPR. Volunteers help support the aging network. Volunteer time should be documented as In-Kind.

### 30. Volunteerism/Stipend

Previously defined as: A compensated individual who provides services or support on behalf of older individuals or is a participant in senior corps programs should be entered into NAMIS as Volunteerism/Stipend. This includes the federal Senior Companion program and the Foster Grandparents program.

Volunteers are tracked in the system and reported through the SPR. Volunteers help support the aging network.

### 35. Supportive Services

Previously defined as: Provision of a broad spectrum of services; including but not limited to health, socialization, educational opportunities, recreation, general information, interpretation / translation for the older person. This should be entered as group utilization in NAMIS.

Note: FROGS and other Non Evidence-Based Health programs should be entered as Supportive Services. Contact the State Unit on Aging for subservice creation.

Note: The unit reflects the hours of operation at multipurpose senior centers.

Old Service (or Sub Service)	New Service
FROGS	<a href="#">14. Health Promotion/ Disease Prevention (Non Evidence-Based)</a>
MP Senior Center Hours	<a href="#">22. Senior Center Hours</a>
Presentations	<a href="#">24. Social Activities</a> or <a href="#">27. Outreach</a>
Exercise w/ Qualified Trainer	<a href="#">13. Health Promotion / Disease Prevention (Evidence-Based)*</a>
Exercise w/o Qualified Trainer	<a href="#">14. Health Promotion/ Disease Prevention (Non Evidence-Based)</a>
SHIIP Ed	<a href="#">25. Counseling</a> or <a href="#">27. Outreach</a>
Crafts – Quilting – Ceramics	<a href="#">24. Social Activities</a>
Exercise Class	<a href="#">14. Health Promotion/ Disease Prevention (Non Evidence-Based)</a>
Exercise Equipment	<a href="#">14. Health Promotion/ Disease Prevention (Non Evidence-Based)</a>
Other Group Activities	<a href="#">24. Social Activities</a>
Recreation Activities	<a href="#">24. Social Activities</a>
Social Events	<a href="#">24. Social Activities</a>
Recreation	<a href="#">24. Social Activities</a>
Telephoning	<a href="#">20. Telephone &amp; Visiting</a>

\* Where applicable. If the program is not evidence-based, it should be counted under [14. Health Promotion/ Disease Prevention \(Non Evidence-Based\)](#).

### 38. III-E Access Assistance

Previously defined as: A service that assists caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures.

NOTE: Information and assistance to caregivers is an access service, i.e., a service that:

- provides individuals with information on services available within the communities;
- links individuals to the services and opportunities that are available within the communities;
- to the maximum extent practicable, establishes adequate follow-up procedures.

Internet web site “hits” are to be counted only if information is requested and supplied. This service includes information and assistance for caregivers as well as Case Management services for caregivers.

During the SPR redesign process, the ACL split III-E Access Assistance into two separate services: [34. Caregiver Assistance: Case Management](#) and [36. Caregiver Assistance: Information & Assistance](#). This allows the services to be counted with regular service units (Case Management: Hours and Information & Assistance: Contacts).

### 39. III-E Counseling

Previously defined as: Counseling to caregivers to assist them in making decisions and solving problems relating to their caregiver roles. This includes counseling to individuals, support groups, and caregiver training (of individual caregivers and families.)

During the SPR redesign process, the ACL split III-E Counseling into three separate services: [30. Caregiver Counseling](#), [31. Caregiver Training](#), and [35. Caregiver Support Groups](#).

### 42. III-E Self-Directed Care

Previously defined as: This was previously called Cash and Counseling. An approach to providing services (including programs, benefits, supports, and technology) under this Act intended to assist an individual with activities of daily living, in which

- Such services (including the amount, duration, scope, provider, and location of such services) are planned, budgeted, and purchased under the direction and control of such individual;
- Such individual is provided with such information and assistance as are necessary and appropriate to enable such individual to make informed decisions about the individual’s care options;
- The needs, capabilities, and preferences of such individual with respect to such services, and such individual’s ability to direct and control the individual’s receipt of such services, are assessed by the area agency on aging (or other agency designed by the area agency on aging involved);
- Based on the assessment made, the area on aging (or other agency designated by the area agency on aging) develops together with such individual and the individual’s family, caregiver, or legal representative—
  - a plan of services for such individual that specifies which services such individual will be responsible for directing;

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- a determination of the role of family members (and others whose participation is sought by such individual) in providing services under such plan; and
- a budget for such services; and
- The area agency on aging or State agency provides for oversight of such individual's self-directed receipt of services, including steps to ensure the quality of services provided and the appropriate use of funds under this Act. From Section 102(46) of the Older Americans Act of 1965, as amended.

This covers the range of services provided or paid for through allowance, vouchers, or cash which provided to the client so that the client can obtain the supportive services which are needed.

During the SPR redesign process, the ACL removed III-E Self-Directed Care as a federal service. Self-Directed Care has been defined as a service delivery method and will be noted with the service.

## Definitions

### Abuse

Any knowing or intentional act on the part of a caregiver or any other person which results in physical injury, unreasonable confinement, cruel punishment, sexual abuse, or sexual exploitation of a vulnerable adult. **§ 28-351** The knowing infliction of physical or psychological harm or the knowing deprivation of goods or services that are necessary to meet essential needs or to avoid physical or psychological harm. **OAA §102 (a) (1)**

### Activities of Daily Living

Also known as **ADLs**. Activities related to personal care. They include bathing or showering, dressing, getting in and out of bed or a chair (transfer), walking, using the toilet, and eating.

(<https://www.cms.gov/>)

### Administration on Community Living

Also known as the **ACL**. It oversees OAA funds and State Units on Aging. It is a combination of several [federal] Health & Human Services agencies, including the Administration on Aging (AoA). The AoA provided previous oversight to OAA funds and state aging departments.

### Advocacy

Work on behalf of individuals and/or groups to ensure that they receive the benefits and services for which they are eligible and that organizations within the established service delivery system meet the collective needs of the community; that attempt to marshal public support for a particular issue or cause; or that seek to influence legislation, local ordinances or administrative rulings in order to benefit specific interest groups or achieve specific social, political or environmental goals. [AIRS FP-0500](#)

### Adult Protective Services

Also known as **APS**. Those services provided by the department for the prevention, correction, or discontinuance of abuse, neglect, or exploitation. Such services shall be those necessary and appropriate under the circumstances to protect an abused, neglected, or exploited vulnerable adult, ensure that the least restrictive alternative is provided, prevent further abuse, neglect, or exploitation, and promote self-care and independent living. Such services shall include, but not be limited to: (1) Receiving and investigating reports of alleged abuse, neglect, or exploitation; (2) developing social service plans; (3) arranging for the provision of services such as medical care, mental health care, legal services, fiscal management, housing, or home health care; (4) arranging for the provision of items such as food, clothing, or shelter; and (5) arranging or coordinating services for caregivers. **§ 28-352**

### Aged and Disabled Waiver

A home and community-based Medicaid-funded program for eligible persons of all ages whose care needs match those of people in nursing facilities. The individual works with a services coordinator to develop a safe and cost-effective Plan of Services and Supports which includes one or more waiver services such as adult day health service, assisted living, home care chore, home-delivered meals, home modifications, nutrition counseling, and transportation.

### Aging and Disability Resource Center

Also known as **ADRC**. A community-based entity established to provide information about long-term care services and support and to facilitate access to options counseling to assist eligible individuals and their representatives in identifying the most appropriate services to meet their long-term care needs.

**§68-1114** Only Area Agencies on Aging are eligible to receive funds directly from the State Unit on Aging. Other agencies can provide ADRC services and receive ADRC funding by becoming a sub-grantee of the AAA. The AAA in turn will monitor the sub-grantee and provide technical assistance.

### Aging Network

The network of local, state, and federal agencies that support older individuals. This also includes direct service providers, any organization that receives Title III funding, and institutions of higher education.

**OAA §102 (a) (5)**

### Alaska Native

Also known as American Indian. Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. **US Census Bureau, Current Population Survey**

### American Indian

See [Alaska Native](#).

### African American

Having origins in any of the black racial groups of Africa. **US Census Bureau, Current Population Survey**

### Area Agency on Aging

Also known as **AAA**. Public or private agencies responsible for developing and administering a comprehensive and coordinated system of services to meet the needs of older people in a PSA. **OAA §305(a)(2)(A)**

### Area Plan /Annual Plan

Also known as the **Area Program Plan**. The document submitted to the State Unit on Aging by an AAA in order to receive funds under the Nebraska Community Aging Services Act and under the Older Americans Act ... which details the AAA's plan for a comprehensive, coordinated program of community aging services for such area. The area program plan shall be designed to address the needs of older individuals with the greatest economic need and the greatest social need. The Area Plan outlines for a period of 3, 4, or 5 years. The Annual Plan provides a detailed programmatic and budget narrative for the ensuing state fiscal year. **15 NAC 1001.01B & 15 NAC 1001.01D**

### Asian

Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. **US Census Bureau, Current Population Survey**



### Assessment

The comprehensive appraisal of individual clients by making orderly and purposeful observations, conducting interviews, and recording the results of those observations and interviews on a standardized assessment document issued by the State Unit on Aging. **15 NAC 2001.01B**

### Assistance

When an individual needs help with an ADL or IADL. Some examples are: personal assistance, stand-by assistance, supervision, or cues.

### At Risk for Institutional Placement

When an older individual is unable to perform at least 2 activities of daily living without substantial assistance (including verbal reminding, physical cuing, or supervision) and is determined by the State involved to be in need of placement in a long-term care facility. **OAA §102 (a) (9)** See **Nursing Facility Level of Care** for Nebraska determinations.

### Black

See [African American](#).

### Caregiver / Family Caregiver / Older Relative Caregiver

#### Caregiver

An individual who has the responsibility for the care of an older individual, either voluntarily, by contract, by receipt of payment for care, or as a result of the operation of law and means a family member or other individual who provides (on behalf of such individual or of a public or private agency, organization, or institution) compensated or uncompensated care to an older individual. **OAA §102 (a) (18) (B)** Caregiver is defined in the area defining exploitation, abuse, and other related terminology. It does not reference the National Family Caregiver Service Program (NFSCP), Part E of the Older Americans Act.

#### Family Caregiver

An adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction. **OAA §302 (3)** Even though "Family" is in the name, a Family Caregiver does not need to be related to the older individual. A Family Caregiver is more commonly referred to as just "Caregiver". It is a part of the National Family Caregiver Service Program (NFSCP), Part E of the Older Americans Act.

#### Older Relative Caregiver

An individual that is aged 55 years or older that is the primary caregiver for a child or individual with a disability. Similar to the Family Caregiver, the Older Relative Caregiver does not need to be related to child or individual with a disability. However, the Older Relative Caregiver must have a familial relationship (blood, marriage, adoption, custody, or guardianship) with the child or individual with a disability. **OAA §372 (3)** An Older Relative Caregiver is more commonly referred to as just "Caregiver". It is a part of the National Family Caregiver Service Program (NFSCP), Part E of the Older Americans Act.

### Care Recipient

The person supported by the Family Caregiver or Older Relative Caregiver. If the caregiver is a Family Caregiver, the Care Recipient is 60 years old or older (no familial connection required) or the Care Recipient has Alzheimer's Disease or a related disorder with neurological and organic brain dysfunction. If the caregiver is an Older Relative Caregiver, the Care Recipient is under 18 years old or an adult with a disability (familial connection required).

### Case

A legal assistance matter provided to an eligible client by a legal assistance provider. A case encompasses one legal matter. Accordingly a client may have more than one case simultaneously and/or during a calendar year. When matters in litigation move from one forum to another, such as upon filing of an appeal by the client or by an adversary or another litigant, a new case is to be opened.

### Center for Independent Living

Also known as **CIL**. A consumer-controlled, community-based, cross-disability, nonresidential private non-profit agency that is designed and operated within a local community by individuals with disabilities, and provides an array of independent living services.

<https://www.acl.gov/programs/aging-and-disability-networks/centers-independent-living>

### Centers for Medicare & Medicaid Services

Also known as **CMS**. It is the federal agency that provides health care funding and regulates the provision of health care. Also administers the Medicare program and is the primary federal agency administering Medicaid programs.

### Medicaid

A state program that pays for covered medical services for persons who are unable to afford to pay for medically necessary services and who meet certain eligibility requirements. Eligible groups include elderly, blind, and disabled individuals and low-income pregnant women, children, and parents. CHIP (Children's Health Insurance Program) is part of Nebraska Medicaid and provides medical assistance to children age 18 and younger.

### Medicare

A federal health insurance program for:

- People who are 65 or older
- Certain younger people with disabilities
- People with End-Stage Renal Disease (ESRD)

<https://www.medicare.gov/glossary/>

### Child

An individual who is not more than 18 years of age. **OAA §372 (1)**

### CHOICES

Also known as **Choosing Home or In Community Elder Services**. A combination of three programs (Aged and Disabled Waiver, Care Management, and Senior Care Options) which work together to assure that

older Nebraskans receive the right services at the right time through case management, assessment, and planning. Aged and Disabled Waiver and Senior Care Options are not regulated by the SUA, and will only be defined. The SUA oversees Care Management, and it can be found in the Services section.

### Community Focal Point

Also known as **Focal Point**. A facility established to encourage the maximum collocation and coordination of services for older individuals. **OAA §102 (a) (21)**

### Congregate Meal Site

Also known as a **Nutritional Site**. A site that provides a meal, but does not offer other regular aging services like a multipurpose senior center. It is often a restaurant or eating establishment. If a local grocery store cafeteria or restaurant provides a meal that meets OAA standards and guidelines, but does not offer or provide other aging services, it is a Congregate Meal Site.

### Conflict of Interest

The existence of any interest which impairs an individual's ability to carry out his or her official duties in an impartial manner. **15 NAC 3-002**

### Contractor

Provides goods and services for a non-Federal entity's own use and creates a procurement relationship. Generally, a primary recipient uses a procurement contract when the recipient buys goods or services for its own benefits or use.

- Provides goods or services within normal business operations.
- Provides similar goods or services to many different purchasers.
- Operates in a competitive environment/market.
- Is not subject to the compliance requirements of the federal program as a result of the agreement.

### Contribution

Also known as **Voluntary Contribution**. Contribution shall mean a donation of money or anything of value that is voluntarily given by a participant to a service provider. **15 NAC 1001.01J** A noncoercive solicitation encouraged for individuals whose self-declared income is at or above 185 percent of the poverty line, at contribution levels based on the actual cost of services. **OAA § 315 (b) (1)**

### Cost Sharing

Also known as a **Sliding Fee Scale** or **Sliding Scale** or **Fee Scale**. A system that takes an individual's self-reported income and requests a percentage of the service cost. No other variables beyond the reported income and the cost to deliver the service should be considered. Individuals at or below the Federal Poverty Level should not be considered for cost sharing. The older individual's privacy and confidentiality shall be protected in regards to their individual income and whether cost sharing payments are made or not. Services cannot be denied if a cost sharing payment is not made or not made in full. Cost sharing can be implemented for all services **except**: Information & Assistance, outreach, benefits counseling, case management [federal service], Ombudsman, elder abuse prevention, legal assistance, other consumer protection services, congregate meals, home delivered meals, and any services delivered through tribal organizations. **OAA § 315 (a) (1) – (6)**

### Direct Care Program

Direct Care Program shall mean any program of an Area Agency on Aging, except care management [state service], providing services to older individuals. **15 NAC 2001.01K**

### Disability

A physical or mental impairment that substantially limits one or more major life activities of such individual. **Americans with Disabilities Act - Title 42 Chapter 126 Section 12102 (1)(A)**

### Ethnicity

Self-identification of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin. **US Census Bureau, Current Population Survey**

### Fee Scale

See [Cost Sharing](#).

### Federal Poverty Level

Also known as **Poverty Guidelines** or **FPL**. A code that reviews the Census Bureau's most recent poverty threshold and adjusts for price changes using the Consumer Price Index. It provides a range of household/family sizes and the corresponding income that indicates the household/family is in poverty. It is issued annually by the federal Department of Health and Human Services (HHS).

(<https://aspe.hhs.gov/poverty-guidelines>)

### Fiscal Year

A period of time that is used for accounting and financial purposes. It may not be the same as a calendar year (start January 1, 20XX, end: December 31, 20XX).

If an agency or organization's fiscal year does not match the calendar year, it will start in one year (20XX) and finish in the next year (20XY). XY is the year XX + 1 (next year). It is referred to as Fiscal Year 20XY or FY XY.

It is possible to have multiple Fiscal Years happening at the same time.

- Calendar Year 20XX
- FFY 20XX will end on September 30, 20XX. FFY 20XY will start on October 1, 20XX. FFY 20XY will end on September 30, 20XY.
- SFY 20XX will end on June 30, 20XX. SFY 20XY will start on July 1, 20XX. FFY 20XY will end on June 30, 20XY.

On August 1, 20XX, you are in calendar year 20XX, FFY 20XX, and SFY 20XY.

### Federal Fiscal Year

Also known as **FFY**. A Federal Fiscal Year is used by the federal (national) government. It starts on October 1, 20XX and ends September 30, 20XY. This example is for FFY 20XY. State Plans and the SPR (submitted to the ACL – or federal government) and follow this fiscal calendar. NSIP (more federal funding) also follows the Federal Fiscal Year.

### State Fiscal Year

Also known as **SFY**. A State Fiscal Year is used by the state of Nebraska government. It starts on July 1, 20XX and ends June 30, 20XY. This example is for SFY 20XY. Area Plans, Area Plan Updates, Budgets, Legislative Reports, and Monitoring follows this fiscal calendar.

### Local Fiscal Year

An AAA may follow a different fiscal calendar. Consult with your fiscal staff to confirm its start and end date.

### Full-Time Staff

This measurement is specific to the SPR. It does not apply to internal agency definitions or designations. Persons who work 35 hours or more per week in a compensated (paid) position as of September 30<sup>th</sup> of the reporting year (federal fiscal year). **US Census Bureau, Current Population Survey**

Frail

Also known as **Functionally Impaired**.

- An older individual that is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision. **OAA § 1021 (a) (22) (A)(i)**  
**OR**
- An older individual that requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual due a cognitive or other mental impairment. **OAA § 1021 (a) (22) (B)**

Functionally Impaired

See [Frail](#).

Gender

One’s inner sense of one’s own gender. **SPR/ACL Guidance**

Geographic Distribution

Type of developed environment in which the consumer lives as defined by the rural-urban commuting area (RUCA) codes defined at the zip code level. <https://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes.aspx>

Type	RUCA Codes
<b>Rural</b>	4.0, 4.2, 5.0, 5.2, 6.0, 6.1, 7.0, 7.2, 7.3, 7.4, 8.0, 8.2, 8.3, 8.4, 9.0, 9.1, 9.2, 10.0, 10.2, 10.3, 10.4, 10.5, and 10.6.
<b>Non-Rural</b>	1.0, 1.1, 2.0, 2.1, 3.0, 4.1, 5.1, 7.1, 8.1, and 10.1.

Greatest Economic Need

The need resulting from an income level at or below the poverty line. **OAA §102 (a) (23)**

Greatest Social Need

The need caused by non-economic factors, which include:

- physical and mental disabilities
- language barriers
- cultural, social, or geographical isolation, including racial or ethnic status isolation, that
  - restricts the ability of an individual to perform normal daily tasks**OR**
  - threatens the capacity of the individual to live independently

**OAA §102 (a) (24)**

Group Setting

A service environment that allows more than one person to benefit from a program or service. It is possible for an individual to show up to a presentation or group activity.

### Home Care Consumer Rights

(1) The right to confidentiality of all personal, financial, and medical information which is disclosed to a provider of home care services. A home care consumer also has the right of access to his or her own records and all written information from those records;

(2) The right to receive disclosure from the provider of home care services in writing and in plain language (a) whether the provider of home care services is an employer, a joint employer, an employee leasing company, or a contractor, as applicable, and (b) that the home care consumer (i) may be considered an employer under law and, if the home care consumer is so considered, may be held responsible for the payment of federal and state taxes, including, but not limited to, federal and state income taxes, taxes under the Federal Insurance Contributions Act for purposes of social security and Medicare, contributions under the Federal Unemployment Tax Act and the Employment Security Law, payment of overtime pay and minimum wage, workers' compensation insurance, and any other applicable payments required under state or federal law and (ii) should consult a tax professional if the home care consumer is uncertain about his or her responsibility for such payments;

(3) The right to be informed of the home care consumer's rights under the Home Care Consumer Bill of Rights Act by a provider of home care services prior to receiving home care services. The provider of home care services shall provide a copy of the rights guaranteed by the Home Care Consumer Bill of Rights Act in the format accessible to the consumer which may include paper, electronic, audio, large print, or braille;

(4) The right to be informed of the contact information for the entities the home care consumer may contact if the home care consumer's rights are violated, including the Consumer Protection Division of the Office of the Attorney General, in order to have grievances addressed in an appropriate and timely manner and without retaliation;

(5) The right to participate in the planning of his or her home care services, including, but not limited to, the right to make choices about aspects of the home care services that are important to him or her, choosing providers and schedules to the extent practicable, receiving reasonable accommodation of his or her needs and preferences, and involving anyone he or she chooses to participate with him or her in that planning;

(6) The right to receive sufficient information to make informed decisions, to be fully informed in advance about any proposed changes in home care services, and to be involved in the decision-making process regarding those changes;

(7) The right to refuse home care services;

(8) The right to be informed of the cost of home care services prior to receiving those services, whether the cost of home care services is covered under health insurance, long-term care insurance, or other private or public programs, and any charges the home care consumer will be expected to pay for such home care services. A home care consumer has the right to thirty days' advance notice of any changes to such costs or services;

(9) The right to receive care and services provided in a way that promotes his or her dignity and individuality; and

(10) The right to (a) express grievances about the quality of the home care services, the number of hours of home care services, and any violations of the home care consumer's rights under the Home Care Consumer Bill of Rights Act and (b) assert the rights under the act without retaliation. **§71-9304**

### Home Care Provider

A public or private organization that provides home care services or arranges for the provision of home care services by an independent contractor. **Home Care Consumer Bill of Rights Act § 71-9302 (3)**

### Home Care Services

Also known as **In-Home Services. This does not include medical services.** “Home and community-based services the purposes of which are to promote independence and reduce the necessity for residence in a long-term care facility, including, but not limited to, personal care services designed to assist an individual in the activities of daily living such as bathing, exercising, personal grooming, and getting in and out of bed.” **§ 71-9302**

### Household Status

A household includes all the people who occupy a housing unit (such as a house or apartment) as their usual place of residence.

A household includes the related family members and all the unrelated people, if any, such as lodgers, foster children, wards, or employees who share the housing unit. A person living alone in a housing unit, or a group of unrelated people sharing a housing unit such as partners or roomers, is also counted as a household. **US Census Bureau, Current Population Survey**

### In-Home Services

See [Home Care Services](#).

### In-Kind

Property of services which benefit a federally assisted project or program and which are contributed by non-Federal third parties without charge to the grantee, or a cost-type contractor under the grant agreement. **Title 41 (C) §105-71.102**

### Indirect Setting

A service environment that does not require interaction between individuals. It is impersonal. For example, a number of hours a senior center is opened or a media activity.

### Individual with a Disability

**For OAA services:** Also known as **Adult with a Disability**. An individual with a disability, as defined in section 3 of the Americans with Disabilities Act of 1990 (a physical or mental impairment that substantially limits one or more major life activities of such individual), who is not less than age 18 and not more than age 59. **OAA §372 (2)**

**For ADRC services:** An individual with a disability, where a disability is a physical or mental impairment that substantially limits one or more major life activities of such individual, at any age.

### Information Memorandum

A formal communication from the State Unit on Aging. It provides greater detail, discussion, or guidance on a topic. It is informative and does not have a mandatory action. Active Information Memoranda can be found on the SUA website.



### Instrumental Activities of Daily Living

Also known as IADL. Instrumental Activities of Daily Living are activities related to independent living. They include preparing meals, managing money, shopping for groceries or personal items, performing light or heavy housework, medication management, transportation assistance, and using a telephone. (<https://www.cms.gov/>) IADL Limitations are counted and are reported for service prioritization.

### Limitation

When an individual is unable to perform the activity without substantial assistance (including verbal reminding, physical cuing, or supervision).

### Long-Term Care

Also known as **LTC**. Any service, care, or item (including an assistive device) that assists individuals in coping with and compensating for a functional impairment in carrying out Activities of Daily Living. These can be furnished in home, in a community setting, or a long term care facility. It is not meant to prevent, diagnose, treat, or cure a medical disease or condition. **OAA §102 (a) (34)**

### Long-Term Care Facility

Any skilled nursing facility, as defined in section 1819(a) of the Social Security Act (42 U.S.C. 1395i-3(a)); any nursing facility, as defined in section 1919(a) of the Social Security Act (42 U.S.C. 1396r(a)); a board and care facility; and any other adult care home, including an assisted living facility, similar to a facility or institution described above as a skilled nursing facility or nursing facility. **OAA §102 (a) (35)**

### Long-Term Care Ombudsman

A program funded through Title VII, Title III-B, state, and local dollars. There are three levels of support for this program. The Ombudsman program identifies, investigates, and resolves complaints that are made by or on behalf of residents of Long Term Care Facilities, such as skilled nursing facilities and assisted living facilities. It provides education to residents, their families, and facilities. They advocate for resident rights, including but not limited to quality of life, choice, safety, and health.

The Ombudsman program works on behalf of the resident. Ombudsmen are not mandatory reporters for abuse or suspected abuse.

### State Long-Term Care Ombudsman

The state wide office oversees the local Ombudsman office. They are ultimately responsible for Ombudsman services in Nebraska. The State Long-Term Care Ombudsman reports activities to the ACL through the NORS (National Ombudsman Reporting System) report every federal fiscal year.

### Local Long-Term Care Ombudsman

An Ombudsman that is housed in an AAA or other local agency. They provide Ombudsman services to LTC facility residents in their service area. Their service area may not match an AAA PSA. Local Ombudsmen are responsible for overseeing their volunteers – Ombudsman Associates.

### Ombudsman Associate

A volunteer that regularly visits a LTC facility and checks the welfare of the residents. They may investigate complaints under the guidance of the Local Ombudsman. An associate must regularly complete training in order to be a certified Ombudsman Associate.

### Long Term Support and Services

Also known as **LTSS**. A person-driven, formalized system that allows those that have long-term care needs to be served in a variety of settings, from community-based services to institutional settings.

### Medicaid Administrative Claiming

Also known as **MAC**. Federal matching funds under Medicaid are available for the cost of administrative activities that directly support efforts to identify and enroll potential eligible individuals into Medicaid and that directly support the provision of medical services covered under the state Medicaid plan. To the extent that NWD/ADRC employees perform administrative activities that are in support of the state Medicaid plan, federal reimbursement may be available. In order to receive matching federal funds, non-federal funds must be used.

<https://www.medicaid.gov/medicaid/finance/admin-claiming/no-wrong-door/index.html>

Agencies providing ADRC services must pursue federal matching funds. **§ 68-1115**

### Medical Nutrition Therapy

A medical service whose practitioners are licensed by the Nebraska Department of Health & Human Services. The service is defined as the assessment of nutritional status of patients. It involves the assessment of patient nutritional status followed by treatment, ranging from diet modification to specialized nutrition support, and monitoring to evaluate patient response to such treatment.

### Minority Status

Racial and ethnic minority populations are defined as: Asian American, Black or African American, Hispanic or Latino, Native Hawaiian and Pacific Islander, American Indian and Alaska Native. **US Census Bureau, Current Population Survey**

### Multipurpose Senior Center

Also known as a **Senior Service Center** or **Senior Center**. A community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental and behavioral health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals. **OAA §102 (a) (36)** a senior center or other community facility that provides ready access to a broad range of community aging services. **§ 81-2211** "Pop-up" Senior Centers that provide multiple services are considered Multi-Purpose Senior Centers.

### Native Hawaiian

Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. **US Census Bureau, Current Population Survey**

### NAMIS

Also known as **NAMIS II**. A previous software system that was used to collect aging data.

### NAPIS

National Aging Program Information System. The system used by the SUA to upload and report SPRs to the ACL. It is being replaced by **OAAPS**.

No Wrong Door

Also known as **NWD**. A one-stop coordinated system that has common protocols and information exchanges. It is a streamlined access to Long Term Support and Services.

Non-Registered Service

Also known as an **Unregistered Service**. A service that does not require demographic and consumer characteristics to be reported.

Non-Rural

Also known as **Urban**. U.S. Census tracts that have the following RUCA scores: 1.0, 1.1, 2.0, 2.1, 3.0, 4.1, 5.1, 7.1, 8.1, and 10.1. RUCA stands for the Rural Urban Commuting Area. It classifies census tracts by measuring population density, urbanization, and daily commuting.

Nutrition Risk Assessment

Also known as **NRA** and **Nutrition Screening Tool**. See [Nutrition Screening Tool](#).

Nutrition Screening Tool

Also known as **Nutrition Risk Assessment** or **NRA**. The DETERMINE Nutritional Risk Screening Tool was developed by the Nutrition Screening Initiative. It indicates the person’s potential Nutrition Risk.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1694757/>

Score Range	Level of Risk
0-2	Low Risk
3-5	Moderate Risk
6+	High Risk

This screening tool is not considered an assessment as defined by the State of Nebraska’s Medical Nutrition Therapy licensure requirements.

Nutrition Site

A location that has congregate meals available for older adults. No other programming is provided. **Its primary purpose is not to provide aging services.**

Nursing Facility Level of Care

Persons who require assistance, supervision, or care in at least one of the following four categories meet the level of care criteria for Nursing Facility or Aged and Disabled Home and Community-based Waiver services:

- Limitations in three or more Activities of Daily Living (ADL) AND Medical treatment or observation.
- Limitations in three or more ADLs AND one or more Risk factors.
- Limitations in three or more ADLs AND one or more Cognition factors.
- Limitations in one or more ADLs AND one or more Cognition AND one or more Risk factors.

**For more detailed information reference 471 NAC 12-003.02A. This is State Medicaid policy.**

### Nutrition Services Incentive Program

Also known as **NSIP**. Formerly a Department of Agriculture program titled Nutrition Program for the Elderly (NPE). NSIP is now managed by the Administration for Community Living (ACL). Current NSIP reimbursement rate is 70 cents per meal.

### Pacific Islander

Also known as [Native Hawaiian](#).

### NSIP Qualified Meal (Congregate)

A meal provided to a qualified individual in a congregate or group setting through a program that meets all of the criteria for payment using OAA funds (see OAA Title III-C):

- Served to an eligible individual, i.e. a person who is qualified to receive services under the OAA as defined in Title III; and
- Served to an eligible person who has NOT been means-tested for participation; and
- Compliant with the nutrition requirements; and
- Served by an eligible agency, i.e. has a grant or contract with a SUA or AAA; and
- Served to a person who has an opportunity to contribute toward the cost of the meal.

Meals served under Title III-E supplemental services may be included if all the above criteria are met.

### NSIP Qualified Meal (Home-Delivered)

A meal provided to a qualified individual in his/her place of residence through a program that meets all of the criteria for payment using OAA funds (see OAA Title III-C):

- Served to an eligible individual, i.e. a person who is qualified to receive services under the OAA as defined in Title III; and
- Served to an eligible person who has NOT been means-tested for participation; and
- Compliant with the nutrition requirements; and
- Served by an eligible agency, i.e. has a grant or contract with a SUA or AAA; and
- Served to a person who has an opportunity to contribute toward the cost of the meal.

Meals served under Title III-E supplemental services may be included if all the above criteria are met.

\$4.00 meal cost = \$ .70 NSIP \$3.30 –III- E—Caregiver

\$4.00 meal cost = \$ .70 NSIP \$3.30 –III-C2--Recipient

### Older Americans Act Performance System

Also known as **OAAPS**. The system used by the SUA to upload and report SPRs to the ACL. It replaces the **NAPIS** system in FFY 2021.

### Older Individual

Any individual who is 60 years of age or older.

### One-on-One

A service environment that provides direct contact or correspondence between two individuals (individualized attention, guidance, suggestions, etc.).

### Part-Time Staff

This measurement is specific to the SPR. It does not apply to internal agency definitions or designations. Persons who work less than 35 hours per week in a compensated (paid) position as of September 30th of the reporting year (federal fiscal year). **US Census, Current Population**

### Pass-Through Entity

Pass-through entity means a non-Federal entity that provides a subaward to a subrecipient to carry out part of a Federal program. **2 CFR § 200.74**

### Planning and Service Area

Also known as **PSA**. An area (counties) overseen by an AAA. Its boundaries do not overlap another PSA.

### Point of Entry

“An Aging and Disability Resource Center shall provide one or more of: .... (d) A convenient point of entry to the range of publicly supported long-term care programs for an eligible individual.” **§68-1116(1)(d)**

Every organization or site that provides ADRC services is a **Point of Entry**.

### Poverty Status

See [Federal Poverty Level](#).

### Program Income

Gross income received by the grantee or subgrantee directly generated by a grant supported activity, or earned only as a result of the grant agreement during the grant period. "During the grant period" is the time between the effective date of the award and the ending date of the award reflected in the final financial report. **§105-71.125 Program Income must stay within the program (service) that generated it.**

**Per ACL guidance, Program Income is the Gross Income received and expended during the grant period.**

### Program Instruction

A formal, mandatory communication from the State Unit on Aging. It provides guidance on a required procedure or policy. Active Program Instructions can be found the SUA website.

### Psycho-Social Needs

Those basic needs which include, but are not limited to, social participation, orientation, understanding, and a sense of wellbeing. **15 NAC 2001.01T**

### Race

Self-identification with a national origin or sociocultural group. See American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander; White for more details. **US Census Bureau, Current Population Survey**

### Registered Service

A service that requires demographic and consumer characteristics to be reported.

### Relationship

The familial relationship of the caregiver to the care recipient.

### Representative

A person who oversees the legal affairs of another.

### Restricted Service

A service that requires demographic and consumer characteristics to be collected, but only aggregate information is shared. Consumer personal identifying information is not shared or recorded outside the service provider level.

### Rural

U.S. Census tracts that have the following RUCA scores: 4.0, 4.2, 5.0, 5.2, 6.0, 6.1, 7.0, 7.2, 7.3, 7.4, 8.0, 8.2, 8.3, 8.4, 9.0, 9.1, 9.2, 10.0, 10.2, 10.3, 10.4, 10.5, and 10.6. RUCA stands for the Rural Urban Commuting Area. It classifies census tracts by measuring population density, urbanization, and daily commuting.

### Self-Directed Care/Self-Direction

Formerly a service, Self-Directed Care is considered a service delivery method. An approach to providing a service to an individual where:

- The individual directs and controls the service.
- The individual is given information & assistance to make informed decisions.
- The individual's needs, capabilities, and preferences are assessed by the AAA or another agency.
- Individual works with assessor to create:
  - A plan of services, including which the individual will be responsible for.
  - Determining the role of those providing supports
  - A budget

The AAA provides oversight to ensure the services are received, the quality of services, and appropriate use of funds.

### Senior Care Options

Also known as **SCO**. Nebraska's pre-admission screening program for Medicaid-eligible persons aged 65 and older which determines the need for nursing facility care and offers alternative services. Area Agencies on Aging provided Senior Care Options while screening for those under 65 were done by the Centers for Independent Living. As of September 2017, age restrictions were removed and a AAA or CIL can do pre-admission screen for Medicaid, regardless of age.

### Senior Health Insurance Information Program

Also known as **SHIIP**. A volunteer program overseen by the Nebraska Department of Insurance. Volunteers provide counseling to older Nebraskans regarding Medicare, Medicaid, and health insurance. Some AAAs have volunteers that provide SHIIP counseling. Some volunteers are not associated with an AAA. <https://doi.nebraska.gov/consumer/senior-health>

### Senior Housing

Facilities or communities that can lawfully refuse to sell or rent dwellings to families with minor children. In order to qualify as a senior housing facility, one of the following:

- Housing that has been determined by HUD (Federal Department of Housing and Urban Development) to be specifically design and operated to assist elderly persons, as defined in the state or federal program. OR
- Intended for, and solely occupied by persons 62 years of age or older. OR
- Intended for and operated for occupancy by persons 55 years of age or older.

[https://www.hud.gov/program\\_offices/fair\\_housing\\_equal\\_opp/seniors](https://www.hud.gov/program_offices/fair_housing_equal_opp/seniors)

### Service Delivery Method

The way a service is provided to a client.

### Traditional Service Delivery

An agency determines the individual's service provider and when and how the services will be delivered.

### Self-Directed Service Delivery

The individual receiving services shares responsibility with an agency on who provides services and when they are provided.

### Voucher

When an agency pre-pays or commits funds to a service. The individual receiving services would use the voucher at the service provider to receive services at their choosing.

### Service Priority or Prioritization

The State Unit on Aging must provide assurances that specific groups or types of eligible individuals will be given priority when services are determined. **OAA §306 (a) (15) (A)**

#### For individuals that are/have:

- Greatest economic need
- Greatest social need
- At risk for institutional placement
- Low-income minority older individuals
- with limited English proficiency
- residing in rural areas

#### **OAA §306 (a) (4) (A)**

### Service Provider

An individual, organization, or agency that completes a service in the aging network. These services can be in-home or in the community.

### Service Unit

Any discrete measurement used for billing or tracking purposes in provision of a service.

### Sign-In Service

A service that requires the client to sign in and provide name or signature, birth year, and zip code. The minimal data requirements allows a AAA to identify unique client counts without the client completing the registered service intake form.

### Social Service Block Grant

Also known as **SSBG**. A part of the Social Security Act formerly known as Title XX which provides block grant funds to the Nebraska Health and Human Services System (HHSS) to provide services to low-income people. Such services as chore, meals, homemaker, day care, and transportation can be provided by HHSS. Nebraska designs its own mix of services within the state.

### State Unit on Aging

The state agency that oversees AAA aging and ADRC services and expenditures. It ensures OAA and state program integrity. It also provides technical assistance to AAAs. It is monitored/overseen by the ACL.

**Title 41 (C) §105-71.102** Previously known as the **Department of Aging (DOA)**.

### State Program & Performance Report

Also known as the **SPR**. It is the federal report compiled by the Nebraska SUA for the ACL.



### Subaward

Also known as a **Subgrant**. An award of financial assistance in the form of money, or property in lieu of money, made under a grant by a grantee to an eligible subgrantee. The term includes financial assistance when provided by contractual legal agreement, but does not include procurement purchases, nor does it include any form of assistance which is excluded from the definition of grant in this part. **Title 41 (C) §105-71.102**

### Subrecipient

Also known as a **Subgrantee**. A non-Federal entity that receives a subaward from a pass-through entity to carry out part of a federal program; but does not include an individual that is a beneficiary of such program.

- Determines who is eligible to receive what federal assistance.
- Performance is measured in relation to whether objectives of the federal program were met.
- Programmatic decision making.
- Responsible for adherence to applicable Federal program requirements
- Uses Federal funds to carry out a program for a public purpose specified in authorizing statute, as opposed to providing goods or services for the pass-through entity.

### Technical Assistance

Sharing information and expertise, instruction, skills training, guidance.

### Time Study

A method used to allocate personnel costs.

### Title-III (Grants for State and Community Programs on Aging)

The Grants for State and Community Programs on Aging section of the Older Americans Act.

#### III-B (Supportive Services and Senior Centers)

Part of the OAA that helps fund a wide variety of services except meals.

#### III-C1 (Congregate Nutrition Services)

Part of the OAA that funds meals to older persons (and other qualified individuals) in a group or congregate setting.

#### III-C2 (Home Delivered Nutrition Services)

Part of the OAA that funds meals to an older person in their own home.

#### III-D (Disease Prevention and Health Promotion Services)

Part of the OAA that helps fund evidence-based programs that prevent diseases and promote health. III-D funding must go to evidence-based programs. III-D services that are not evidence-based (i.e. Health Clinics or Screenings) can be funded using III-B dollars. <https://www.acl.gov/node/507>

#### III-E (National Family Caregiver Support Program)

Part of the OAA that helps fund caregiver services. See the Caregivers definition for further information on the caregivers that are supported.

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### Title-V (Community Service Employment for Older Americans)

Part of the OAA that allows AAAs to assist older workers.

### Title-VI (Grants for Native Americans)

This is given directly to tribal organizations – not the AAAs. It is not administered by the SUA.

### Title-VII (Vulnerable Elder Rights Protection Activities)

Part of the OAA that allows the SUA and the AAAs provide information and advocacy services for older individuals (Ombudsman & Legal Assistance Development Programs).

### Unmet Need

Any type of public or private service, which aids the consumer to remain in the community of their choice and is not available to them.

“An Aging and Disability Resource Center shall provide one or more of: ... (e) A process for identifying unmet service needs in communities and developing recommendations to respond to those unmet needs.” § 68-1116(1)(e)

It is tracked in the software system. ADRC sites providing this service will work with community partners to develop recommendations for the annual ADRC report to the legislature.

### Unduplicated Client Count (Legal Assistance)

The number of different individual clients who received legal assistance/advice (as defined above) during a state or federal fiscal year. For the unduplicated count, a client is counted only once for the fiscal year, regardless of how many times the individual returned that year for assistance on either the same legal issue/case or different legal issue/case. For purposes of this report, the year to be used in counting/reporting unduplicated clients is the state fiscal year. For example, if a client calls/comes in for the first time in a fiscal year and needs help on two different legal issues and the provider subsequently opens two cases (as defined above), this should be counted and reported as two cases, but only one unduplicated client. If that person calls back/returns later in the year, with the same or a totally different issue, the unduplicated client count does not increase because the person is the same unduplicated client.

At the start of a new fiscal year, individuals with open cases are counted only once as unduplicated, even if they have more than one open case.

Note: Number of cases, whether or not they are for the same person are captured in the Cases Closed section of the report. This definition of unduplicated client comports with AOA's/ACL's definition for its National Aging Program Information System (NAPIS) Reporting System.

### Urban

See [Non-Rural](#).

### Volunteer

An uncompensated individual who provides services or support. Federal programs like Foster Grandparents may offer a stipend to those that are 200% of the FPL or below. The stipend is meant to

defray costs associated with volunteering, not as compensation. (Someone should not have to pay to volunteer.)

### White

Having origins in any of the original peoples of Europe, the Middle East, or North Africa. **US Census Bureau, Current Population Survey**

## Acronyms

<a href="#"><u>AAA</u></a>	Area Agency on Aging
<a href="#"><u>AARP</u></a>	American Association of Retired Persons
<a href="#"><u>ACL</u></a>	Administration on Community Living
<a href="#"><u>ADL(s)</u></a>	Activity of Daily Living
<a href="#"><u>ADRC</u></a>	Aging and Disability Resource Center
<a href="#"><u>APS</u></a>	Adult Protective Services
<a href="#"><u>CHOICES</u></a>	Choosing Home or In Community Elder Services
<a href="#"><u>CIL</u></a>	Center for Independent Living
<a href="#"><u>CMS</u></a>	Centers for Medicare & Medicaid Services
<a href="#"><u>FFY</u></a>	Federal Fiscal Year
<a href="#"><u>FPL</u></a>	Federal Poverty Level
<a href="#"><u>IADL(s)</u></a>	Instrumental Activity of Daily Living
<a href="#"><u>IM</u></a>	Information Memorandum
<a href="#"><u>LTC</u></a>	Long-Term Care
<a href="#"><u>LTCO</u></a>	Long-Term Care Ombudsman
<a href="#"><u>LTSS</u></a>	Long Term Services and Supports
<a href="#"><u>MAC</u></a>	Medicaid Administrative Claiming
<a href="#"><u>NAMIS</u></a>	Nebraska Aging Management Information System
<a href="#"><u>NAPIS</u></a>	National Aging Program Information System
<a href="#"><u>NASUAD</u></a>	National Association of States United for Aging and Disabilities
<a href="#"><u>NE4A</u></a>	Nebraska Association of Area Agencies on Aging
<a href="#"><u>NFSCP</u></a>	National Family Caregiver Service Program
<a href="#"><u>NORS</u></a>	National Ombudsman Report System
<a href="#"><u>NRA</u></a>	Nutrition Risk Assessment
<a href="#"><u>NSIP</u></a>	Nutrition Services Incentive Program
<a href="#"><u>NWD</u></a>	No Wrong Door
<a href="#"><u>OAAPS</u></a>	Older Americans Act Performance System
<a href="#"><u>PI</u></a>	Program Instruction
<a href="#"><u>POE</u></a>	Point of Entry
<a href="#"><u>PSA</u></a>	Planning and Service Area
<a href="#"><u>SCO</u></a>	Senior Care Options
<a href="#"><u>SDC</u></a>	Self-Directed Care
<a href="#"><u>SFY</u></a>	State Fiscal Year
<a href="#"><u>SHIIP</u></a>	Senior Health Insurance Information Program
<a href="#"><u>SPR</u></a>	State Program and Performance Report
<a href="#"><u>SSBG</u></a>	Social Services Block Grant
<a href="#"><u>SSDI</u></a>	Social Security Disability Insurance
<a href="#"><u>SSI</u></a>	Supplemental Security Income
<a href="#"><u>SUA</u></a>	State Unit on Aging

## Reference

The State Unit on Aging currently makes the following available online:

1. AAA Fiscal Forms & Templates
2. Active Program Instructions
3. Active Information Memoranda
4. Area Plans, Budgets, and Annual updates
5. Assessments
6. ADRC Plan(s)
7. Legislative References
8. Nutrition Resources
9. State Regulations
10. Subawards
11. Useful Links (State and Federal)
12. Link to: ACL approved Evidence-Based Programs

For more information, please visit: <http://dhhs.ne.gov/Aging>