

2020 Area Plan Update:



Area 3 Senior Services Agency – Southwest Idaho Area Agency on Aging

Raul Enriquez, Director

701 S. Allen Ste. 100
Meridian, ID 83642

For Services call: 1-208-898-7060 or 1-844-850-2883

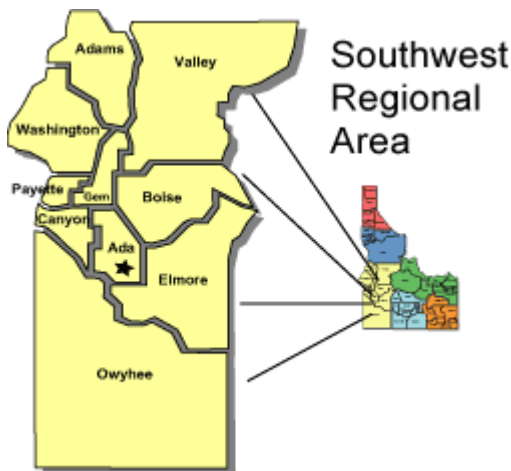
Website – <http://www.a3ssa.com>

Fax – 208-855-2608

Email – psa3@a3ssa.com

Counties – *Ada, Adams, Boise, Canyon, Elmore, Gem, Owyhee, Payette, Valley, Washington*

PSA III



Geographic Information:

The largest region, both in terms of area (21,879 square miles), number of counties (ten: Ada, Canyon, Elmore, Payette, Washington, Adams, Boise, Owyhee, Gem, and Valley) is also the most urbanized.

The Boise Metropolitan Statistical Area (MSA) is Idaho's "megacity", sprawling over two counties (Ada and Canyon) and actually including the cities of Boise, Meridian, Nampa and Caldwell, along with several formerly small communities that have recently grown into adjoining satellite cities. The area is collectively known as the Treasure Valley. The metropolitan area's quality of life is further enhanced by the presence of several colleges and universities. The Area 3 Senior Services Agency is administered by a Board of Commissioners, and maintains an office in Meridian.

Demographic Information:

Based on the 2017 American Community Survey Estimates, the total population in PSA III was 784,838 of which 159,951 (20.4%) individuals were over the age of 60. The at risk populations which factors in Idahoans of 65 + living in poverty, Idahoans of 65+ living alone, Idahoans living in a rural county, racial minorities, Persons 60 + and Hispanic, Idahoans aged 75 and older & also 85 and older is, 135,932.

**Planning and Service Area III
Three Year Area Plan Update Summary
Updated October 15, 2020**

All Sections	<ul style="list-style-type: none"> • Updated actual expenses and budget • Updated Baseline Performance Data
Focus Area A: Older Americans Act Programs	
Administration:	<ul style="list-style-type: none"> • New Administration and actual expenses and budget • New Coordination and actual expenses and budget • New description of what projects will be supported by coordination funds • Outcome/ Successes added from previous state fiscal year.
10. Home Delivered Meals Objective:	<ul style="list-style-type: none"> • Updated Home Delivered Meals List • Updated demographic baseline
11: Disease Prevention and Health Promotions Objective	<ul style="list-style-type: none"> • New Diabetes Self-Management Program actual expenses and budget
Focus Area B: Older Americans Act Discretionary Programs	
2: Medicare Improvements for Patients and Provers Act (MIPPA) Objective:	<ul style="list-style-type: none"> • New MIPPA actual expenses and budget
Focus Area D: Elder Justice	
2. State Adult Protective Services	<ul style="list-style-type: none"> • Updated Adult Protective Services Presentations
Updated Attachments	
Attachment B: FY2016 State Plan Intrastate Funding Formula (IFF)	<ul style="list-style-type: none"> • Updated with new FY2020 Intrastate Funding Formula • Added FY2020 Budget
Attachment D: Area Agency on Aging Organizational Chart	<ul style="list-style-type: none"> • Updated staff names and positions
Attachment E: Sliding Fee Scale	<ul style="list-style-type: none"> • Updated sliding fee scale with new poverty levels
Attachment F: Poverty Guidelines	<ul style="list-style-type: none"> • Updated with new 2019 federal poverty levels
Attachment H: Advisory Council Profile	<ul style="list-style-type: none"> • Updated advisory council names
Attachment N: AAA Disaster and Emergency Preparedness Plan	<ul style="list-style-type: none"> • Updated staff names on emergency preparedness plan

Focus Area A: Older Americans Act (OAA) Core Programs

ICOA Goal: Increase OAA core services by:

- Utilizing financial and operational data to increase services to older individuals and standardizing proven best practices for service delivery throughout the Planning and Service Area.
- Coordinating with health and social service partners to broaden access for long-term care services.

Administration

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	\$73,382	\$184,558	\$257,940
SFY 2019 (July 2018 – June 2019) Actual	\$138,785	\$228,715	\$367,500
SFY 2020 (July 2019 – June 2020) Actual	\$125,282	\$185,670	\$310,953
SFY 2020 Family First Actual	\$0	\$6,137	\$6,137
SFY 2020 CARES Act Actual	\$43,219	\$0	\$43,219
Total SFY 2020 Admin. Actual	\$168,501	\$191,807	\$360,309
SFY 2021 (July 2020 – June 2021) Budget	\$116,226	\$241,644	\$357,870
SFY 2021 Family First Budget	\$14,222	\$36,385	\$50,607
SFY 2021 CARES Act Budget	\$0	\$129,655	\$129,655
Total SFY 2021 Admin. Budget	\$130,448	\$407,684	\$538,132

Coordination and Planning

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$14,917	\$14,917
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$11,190	\$11,190
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$0	\$0
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$6,400	\$6,400

State Fiscal Year 20 Projects

List of projects for previous year:

1. Develop and Pilot Focused Care Coordination as an Adult Protection Services. 2. Develop and Pilot a Consumer Direct Respite Program. 3. Expand the Diabetes and Pain Management Programs by facilitating workshops. 4. Develop an ADRC Covid Response Plan.

Identify Outcomes/Successes for previous plan: 1. Focused Care Coordination trainings provided statewide to all Adult Protection and Informaiton and Assistance Staff. 2. Consumer Direct trainings provided statewide to all Idaho Area Agency on Aging. 3. Agreements in place to work with the LINC and Idaho Assistive Technology project to support ADRC Covid Strategies. 4. Implemented online Powerful Tools for Caregiver and Self Management Program workshops.

State Fiscal Year 2021 Coordination Activities:

1. Develop and submit the 2022-2025 Area Plan. 2. Support one senior center to provide consumer direct services. 3. Expand Consumer Direct Respite Program and transition legacy respite consumers. 4. Establish an ADRC Covid response plan.

1: Transportation Objective: To utilize best available data and resources from current transportation systems to maximize available services to older individuals.

Service Description: Transportation funds are used for operating expenses only and are designed to transport older persons to and from community facilities and resources for the purpose of applying for and receiving services, reducing isolation, or otherwise promoting independent living. The funds need to be used in conjunction with local transportation service providers, public transportation agencies, and other local government agencies, that result in increased provision. Service is provided to: congregate meal sites, supportive services (health services, programs that promote physical and mental well-being and shopping) community facilities and resources for the purpose of applying for and receiving services, which include comprehensive counseling and legal assistance.

Provider Name	Phone #	County Served	Time of Operations (based on ridership)
Jannus	208-333-1363	Ada	M-F / Weekends. Time Based on demand and availability
Kuna Senior Center	208-922-9714	Ada	M-F 9am-3pm
Mountain Home Senior Center	208-587-4562	Elmore	Mon, Wed & Fri: 9:30-2:30pm

Payette Senior Center	208-642-4223	Payette	Mon, Wed & Fri Congregate: Thurs to Ontario - medical, bank, etc..
Three Island Senior Center	208-366-2051	Elmore	Mon, Tues and Thurs: 10:30-2pm
Valley Regional Transit	208-258-2712/208-258-2708		Transportation Provider for Eagle SC, Horseshoe Bend SC, Meridian SC, Star SC, Parma SC, & Metro Community Services
Eagle Senior Center	208-939-0475	Ada	M, T, Thurs for Congregate. Wed for Dr. appts, errands, etc. Fri for misc trips.
Horseshoe Bend Senior Center	208-793-2344	Boise	2 Thurs each month for medical. T & F from 10:30am – 2:30pm
Meridian Senior Center	208-888-5555	Ada	M-F / weekends. Time based on demand and availability
Star Senior Center	208-286-7943	Ada	M- Shopping, T & Th- Medical, W & F 10am-2pm for Congregate
Parma Senior Center	208-722-5421	Canyon	Mon- Thurs Medical Appts 8:30am-10am Mon-Thurs for Congregate Friday-Special Trips
Metro Community Services	208-459-0063	Canyon	M-F, 8am-4pm
Elder Opportunity Agency	208-365-4461		Transportation Provider for Boise Basin SC, Cambridge SC, Cascade SC, Council SC, Gem County Seniors, Homedale SC, McCall SC, Melba SC, New Meadows SC, New Plymouth SC, & Weiser SC
Boise Basin Senior Center	208-392-4918	Boise	Tues, Thurs 10am-2pm
Cambridge Senior Center	208-257-3358	Washington	Wed & Fri 10am-2pm
Cascade Senior Center	208-382-4256	Valley	Tues & Thurs 10am-2pm
Council Senior Center	208-253-4802	Adams	T, W & F 10am-2pm
Gem County Seniors	208-365-4343	Gem	M – F, 9am-3pm
Homedale Senior Center	208-337-3020	Owyhee	T, W & F 10am-2pm
McCall Senior Center	208-634-5408	Valley	T & Thurs 10am-7pm
Melba Senior Center	208-495-2168	Canyon	T & Thurs 10am-2pm
New Meadows Senior Center	208-347-2363	Adams	Mon, Wed & Fri: 10-2PM
New Plymouth Senior Center	208-278-5320	Payette	Tues, Thurs and Fri: 10 - 2 PM

Rimrock Senior Center	208-968-5430	Owyhee	Tues & Thurs: 10 - 2 PM
Weiser Senior Center	208-414-0750	Washington	Mon- Fri: 10-2pm

Performance Measure:

- Effectiveness = Number of boarding.
- Efficiencies = Total cost, cost per boarding.
- Quality = Consumer satisfaction (use ACL’s POMP-Performance Outcome Management Project).

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Annual Boardings</u>	<u>Average Cost per Boarding</u>	<u>Consumer Satisfaction %</u>
SFY 2016 (July 2015 – June 2016) Actual	50,904	\$3.63	Not Available
SFY 2017 (July 2016 – June 2017) Actual	58,231	\$2.77	Not Available
SFY 2018 (July 2017 – June 2018) Actual	64,499	\$3.41	Not Available
SFY 2019 (July 2018 – June 2019) Actual	106,908	\$2.34	Not Available
SFY 2020 (July 2019 – June 2020) Actual	65,755	\$4.17	Not Available

Benchmark:

- Increase number of boarding’s 2% annually
- Maintain \$2.95 average cost per boarding.
- Customer satisfaction 80% or higher.

A. Transportation Coordination Strategy: Coordinate with Senior Centers, Valley Regional Transit’s Rideline, Disabled American Veterans & Medicaid Transportation to improve senior utilization of transportation services.

Performance Measure: Number of resources listed in GetCare database and number of referrals provided per resource.

Baseline: State Fiscal Year July 1, 2016-June 30, 2017 Referral counts.

- Transportation (General): 42
- Access Van: 9
- Where2 Transportation: 9
- Valley Region Transit – Go Ride: 9
- Treasure Valley Regional Transit: 7
- Valley ride- Access Paratransit Service: 6
- Idaho Tender Care Transit: 6
- Snake River Transit: 2
- Ada County Highway District Commuteride: 1

Benchmark: Increase the number of referrals to transportation providers by 2.5% annually.

2: Outreach Objective: To target outreach efforts that increase OAA core services.

Service Description: Outreach funds are used to seek out older persons, identify their service needs, and provide them with information and assistance to link them with appropriate services. Outreach efforts must emphasize the following: (i) *older individuals residing in rural areas.* (ii)&(iii) *older individuals with greatest economic and social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas).* (iv) *older individuals with severe disabilities;* (v) *older individuals with limited English-speaking ability;* (vi) *older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals).*

Service Eligibility: General public needing long-term care services and supports.

Service Implemented by:

- Area Agency on Aging

Outreach (Title IIIB only)

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$0	\$0
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$618	\$618
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$8,415	\$8,415
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$20,963	\$20,963
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$24,437	\$24,437
SFY 2020 CARES Covid 19 Actual	\$0	\$17,520	\$17,520
Total 2020 Actual	\$0	\$41,957	\$41,957
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$32,282	\$32,282

A. Outreach Service Delivery Strategy: Increase the number on one to one outreach contacts by visiting 2-3 Senior Centers a month and provide AAA information to participants. Specific target populations must include:

1. Seniors residing in rural areas
2. Greatest economic need
3. Greatest social need
4. Seniors with limited English ability
5. Seniors with severe disabilities
6. Seniors with Alzheimer’s disease and related disorders
7. Caretakers of individuals listed above in 1-6.

Performance Measure:

- Number of Senior Centers visited annually.
- Number of one to one contacts

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>One-to-one Contacts</u>
SFY 2016 (July 2015 – June 2016) Actual	155
SFY 2017 (July 2016 – June 2017) Actual	52
SFY 2018 (July 2017 – June 2018) Actual	916
SFY 2019 (July 2018 – June 2019) Actual	1,017
SFY 2020 (July 2019 – June 2020) Actual	1,483

Benchmark:

- Outreach increased by 50 contacts per area plan year. 2017=102; 2018=152; 2019=202; 2020=252
- Modify and increase outreach budget to support outreach objectives.

B. Outreach Coordination Strategy: Provide education and outreach materials to partners like Advisory Council Members, A3SSA Board of County Commissioners, Senior Centers and Southwest Health Collaborative to distribute A3SSA materials to eligible individuals.

Performance Measure:

- Number of AAA presentations provided during meetings.
- Number of referrals one to one contacts conducted as a result of AAA presentations.

Baseline:

- State Fiscal Year July 1, 2016-June 30, 2017 Outreach Counts is 52

Benchmark:

- One presentation per month per partner.

3: Information and Assistance (I&A) Objective: To provide older individuals with statewide access to comprehensive long-term care resource assistance and OAA core service eligibility determination in coordination with Aging and Disability Resource Center (ADRC) partners.

Service Description: Information and assistance (I&A) funds are used to: (1) Provide older individuals with current information on long-term care supports, services and opportunities available within their communities, including information relating to assistive technology; (2) Assess older individual's problems and capacities; (3) Link older individuals to long-term care supports, services and opportunities that are available; (4) To the maximum extent practicable, ensure that older individuals receive needed services, and are aware of available opportunities by establishing follow-up procedures; and (5) Serve the entire community of older individuals, particularly: (i) Older individuals with the greatest social need; (ii) Older individuals with the greatest economic need; and (iii) Older individuals at risk for institutional placement.

Service Eligibility: General public needing long-term care services and supports.

Service Implemented by:

- Area Agency on Aging

Funding Source: (Actual expenditures for completed year and Budget for current year)

Information and Assistance

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$280,927	\$280,927
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$249,561	\$249,561
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$246,528	\$246,528
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$302,347	\$302,347
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$266,956	\$266,956
SFY 2020 CARES Covid 19 Actual	\$0	\$63,347	\$63,347
Total 2020 Actual	\$0	\$330,303	\$330,303
SFY 2021 (July 2020 – June 2021) Friendly Calling Budget	\$0	\$248,834	\$248,834

A. I&A Service Delivery Strategy: Establish a quarterly GetCare report to track the following tasks per FTE:

- Number of incoming calls
- Number of assessments
- Number of referrals provided
- Number of follow ups and reassessments

Performance Measure:

- Efficiencies = Cost per contact, average contact per Full Time Equivalent/I&A staff.
- Effectiveness = Total contacts, total costs.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Annual Contacts</u>	<u>Average Cost per Contact</u>	<u>Allocated Number of I&A Staff</u>	<u>Average Monthly Contact per I&A</u>
SFY 2016 (July 2015 – June 2016) Actual	23,084	\$12.17	7	275
SFY 2017 (July 2016 – June 2017) Actual	10,379	\$24.04	5	173
SFY 2018 (July 2017 – June 2018) Actual	7,273	\$33.90	6.65	91
SFY 2019 (July 2018 – June 2019) Actual	6,889	\$43.89	6.4	90
SFY 2020 (July 2019 – June 2020) Actual	9,056	\$36.47	5.38	140

Benchmark: (Statewide I&A average cost per contact is \$30.38 per FTE).

- Increase the number of contacts by 1% annually.
- Provide training to I&A staff that fall below average number of calls.

B. I&A Coordination Strategy: Establish protocols with organizations to streamline referrals between organizations that provide I&A.

Performance Measure:

Number of memorandum of understandings with referral protocols in place.

Baseline:

No referral protocols in place with organizations that provide Information and Assistance.

Benchmark:

One memorandum of understanding in place per year.

4: Case Management Objective: To provide statewide access to Case Management service for older individuals who need an optimum package of long-term care services.

Service Description: Case Management funds are used for eligible older individuals and disabled adults, at the direction of the older individual or a family member of the older individual, to assess the needs of the person and to arrange, coordinate, and monitor an optimum package of services to meet those needs. Activities of case management include: comprehensive assessment of the older individual; development and implementation of a service plan with the individual to mobilize formal and informal resources and services; coordination and monitoring of formal and informal service delivery; and periodic reassessment.

Service Eligibility: Individuals 60 years of age or older who cannot manage services on their own.

Service Implemented by:

- Area Agencies on Aging

Case Management

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$0	\$0
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$0	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$0	\$0
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$0	\$0
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$0	\$0
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$46,260	\$46,260

A. Case Management Service Delivery Strategy: Assist consumers that need coordination of multiple health/social services and cannot access services on their own.

Performance Measure:

- Efficiencies = Cost per consumer, average cost per unit.
- Effectiveness = Total consumers, total costs, total unit hours.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Unduplicated Clients Served</u>	<u>Average Cost per Client</u>	<u>Total Annual Units (hrs.)</u>	<u>Average cost per Unit (hr.)</u>
SFY 2016 (July 2015 – June 2016) Actual	0	Not Applicable	0	Not Applicable
SFY 2017 (July 2016 – June 2017) Actual	0	Not Applicable	0	Not Applicable
SFY 2018 (July 2017 – June 2018) Actual	0	Not Applicable	0	Not Applicable
SFY 2019 (July 2018 – June 2019) Actual	0	Not Applicable	0	Not Applicable
SFY 2020 (July 2019 – June 2020) Actual	0	Not Applicable	0	Not Applicable

Benchmark:

- Number of case management referrals assisted that meet IDAPA criteria.

<p>B. Case Management Coordination Strategy: Streamline referrals with program staff that provide service coordination:</p> <ul style="list-style-type: none"> • Idaho Home Choice Transition Managers, • Health and Welfare Navigators, • Blue Cross Service Coordinators, • Senior Community Service Employment Program Employment Training Coordinators and • Living Independent Network Corporation Living Specialists. • Veteran’s Nurse Case Managers
<p>Performance Measure:</p> <ul style="list-style-type: none"> • Number of referrals provided to organizations that provide service coordination. • Number of cross trainings facilitated with Health and Welfare, Blue Cross of Idaho and LINC
<p>Baseline:</p> <ul style="list-style-type: none"> • No cross trainings provided in previous fiscal year 2016-2017. • Number of referrals to organizations: <ul style="list-style-type: none"> ○ LINC: 9
<p>Benchmark:</p> <ul style="list-style-type: none"> • Increase number of referrals to organizations providing service coordination by 5% annually. • Two cross trainings annually with Experience Works, LINC, Health and Welfare and Blue Cross of Idaho

5: Homemaker Objective: To provide statewide access to Homemaker services for eligible individuals.

Service Description: Homemaker funds are used to assist an eligible person with housekeeping, meal planning and preparation, essential shopping and personal errands, banking and bill paying, medication management, and, with restrictions, bathing and washing hair.

Service Eligibility: Seniors 60 years of age or older and meets any of the following requirements:

- They have been assessed to have Activities of Daily Living (ADL) deficits, and/or Instruments of Activities of Daily Living (IADL) deficits, which prevent them from maintaining a clean and safe home environment.
- Clients aged 60 years or older, who have been assessed to need homemaker service, may be living in the household of a family member (of any age) who is the primary caregiver.
- They are Adult Protective Services referrals and homemaker service is being requested as a component of a Supportive Service Plan (SSP) to remediate or resolve an Adult Protective Services complaint.
- They are home health service or hospice clients who may be eligible for emergency homemaker service.

Service Implemented by: (Service Authorized by A3SSA; 1-844-850-2883)

Homemaker	Service Areas
WICAP	Adams, Horseshoe Bend, Gem, Payette, Valley, Washington
Metro Community Services (Formerly CCOA)	Canyon and Owyhee
Addus Homecare	All Areas
Havenwood	Ada, Canyon, Emmett, Elmore
Comfort Keepers	Ada, Canyon, Mtn Home, Emmett, Homedale, Marsing
Homewatch	Ada County, Caldwell, Nampa, Notus, Parma, Melba, Middleton, Emmett
ResCare	Ada County, Horseshoe Bend, Idaho City, Canyon County, Emmett, Murphy, Marsing, Homedale, Payette County

A Tender Heart	Ada County, Caldwell, Greenleaf, Nampa, Wilder, Emmett, Homedale, Marsing
----------------	---

Cost Share: Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

A. Homemaker Service Delivery Strategy: Conduct targeted outreach to individuals with the following risk factors; living in rural counties, identified having greatest economic and social need.

Performance Measure:

- Efficiencies = Cost per consumer, average units per consumer.
- Effectiveness = Total consumers, total unit hours, total costs, and registered consumers by at risk factor.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Unduplicated Clients Served</u>	<u>Total Annual Units (hrs.)</u>	<u>Average cost per Unit (hr.)</u>	<u>Annual Units (hrs.) per Client</u>	<u>Annual Expense per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	494	15,691	\$16.03	32	\$509.05
SFY 2017 (July 2016 – June 2017) Actual	446	15,536	\$16.07	35	\$559.92
SFY 2018 (July 2017 – June 2018) Actual	356	11,184	\$14.58	31	\$458.02
SFY 2019 (July 2018 – June 2019) Actual	344	12,374	\$14.93	36	\$536.96
SFY 2020 (July 2019 – June 2020) Actual	354	15,446	\$14.51	44	\$633.16

Demographic Baseline:

<u>Homemaker State Fiscal Year (SFY)</u>	<u>Census Data: % of Population Living in Rural Areas</u>	<u>% of Registered Consumers living in Rural Areas</u>	<u>Census Data: % of Population in *Greatest Economic Need</u>	<u>% of Registered Consumers with Greatest Economic Need</u>	<u>Census Data: % of Population in **Greatest Social Need</u>	<u>% of Registered Consumers with Greatest Social Need</u>
SFY 2016 (July 2015 – June 2016)	25,218/127,236=20%	136/494=27%	7,621/127,236=6%	128/494=26%	23,163/127,236 =18%	416/494=84%
SFY 2017 (July 2016 – June 2017)	25,218/127,236=20%	114/446=26%	7,621/127,236=6%	106/446=24%	23,163/127,236 =18%	341/446=76%
SFY 2018 (July 2017 – June 2018)	27,660/145,707=19%	83/356=23%	8,057/145,707=5.5%	102/356=29%	25,006/145,707 =17%	298/356=84%
SFY 2019 (July 2018 – June 2019)	29,599/159,951=18%	79/344=22%	10,340/159,951=6.4%	117/344=34%	26,711/159,951 =16%	290/344=84%
SFY 2020 (July 2019 – June 2020)	30,813/168,188=18%	90/443=20%	10,519/168,188=6.2%	154/443=35%	27,913 /168,188=16%	325/443=71%

***Greatest Economic Need: 65 or older living in Poverty**

****Greatest Social Need: 65 or older living alone**

Benchmark:

- Maintain \$16.07 average cost per hour.

- Percentage of registered consumers with the following criteria matches the census.
 - Individuals living in rural areas.
 - Individuals with greatest economic need.
 - Individuals with greatest social need.

B. Homemaker Coordination Strategy: Work with ICOA and other AAAs to establish standardized service units and cost-sharing parameters.

Performance Measure:

- Establish service unit and cost-sharing standards.

Baseline:

- AAA III currently has a maximum of 5 hours per month per consumer.
- Current cost-share starts at 100% of poverty.

Benchmark:

- Implement statewide service unit and cost-sharing standards.

6: Chore Objective: To expand chore services statewide.

Service Description: Chore funds are used to improve the client’s or older individual’s safety at home or to enhance the client’s use of existing facilities in the home. These objectives shall be accomplished through one-time or intermittent service to the client. Providing assistance with routine yard work, sidewalk maintenance, heavy cleaning, or minor household maintenance to persons who have functional limitations that prohibit them from performing these tasks.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by:

- Area Agencies on Aging

Chore

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$16,599	\$16,599
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$3,737	\$3,737
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$0	\$0
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$0	\$0
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$0	\$0
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$25,940	\$25,940

Cost Share: Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

A. Chore Service Delivery Strategy: Implement a new A3SSA Chore program that will serve eligible consumers with the highest risk factors.

Performance Measure:

- Efficiencies = Cost per hour.
- Effectiveness = Total consumers, total costs and total unit hours.

Baseline:

State Fiscal Year (SFY)	Referral or Contracted Service	Total Unduplicated Clients Served	Total Annual Units (hrs.)	Average Cost per Unit (hr.) and materials
SFY 2016 (July 2015 - June 2016) Actual	Contract	37	148	\$112.16
SFY 2017 (July 2016 - June 2017) Actual	Contract	8	34	\$109.92
SFY 2018 (July 2017 - June 2018) Actual	Referral	N/A	N/A	N/A
SFY 2019 (July 2018 - June 2019) Actual	Referral	N/A	N/A	N/A
SFY 2020 (July 2019 - June 2020)	Referral	N/A	N/A	N/A

If AAA only “refers” consumers to other organization and does not fund this service, select “Referral” and place N/A (Not Applicable) in each of the other cells for SFY16 and SFY17.

Benchmark:

- Decrease the average cost per unit by 50%
- Increase the number of individuals served by 5%

B. Chore Coordination Strategy:

Utilize the following disability groups to seek input on home safety and accessibility:

- Idaho State Independent Living Council,
- Northwest ADA
- LINC

Performance Measure:

New Chore program implemented with contracted providers serving consumers.

Baseline:

No Chore program currently in place.

Benchmark:

Chore program implemented with contracted providers serving consumers.

7: Minor Home Modification Objective: Expand minor home modification statewide.

Service Description: Minor home modification funds are used to facilitate the ability of older individuals to remain at home where funding is not available under another program. Not more than \$150 per client may be expended under this part for such modification. Types of modification: bathroom grab bars, handrails for outdoor steps, materials to help build wheelchair ramps, etc.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by:

Program Name	Contact Information
Accessibility Program	208-331-4881
Boise City/Ada County Housing Authority	208-345-4907
Boise City Housing and Community Development	208-384-4158
Idaho Assistive Technology Project Loan Program	1-800-432-8324
Life @ Home	1-208-322-0153

Minor Home Modifications

Funding Source: (Actual expenditures for completed years and

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$0	\$0
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$0	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$0	\$0
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$0	\$0
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$0	\$0
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$0	\$0

Cost Share: Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

A. Minor Home Modification Service Delivery Strategy: Increase access to home modification services through referrals.

Performance Measure:

- Efficiencies = Cost per hour.
- Effectiveness = Total consumers, total costs and total unit hours.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Referral or Contracted Service</u>	<u>Total Unduplicated Clients Served</u>	<u>Total Annual Units (hrs.)</u>	<u>Average cost per Unit (hr.) and materials</u>
SFY 2016 (July 2015 – June 2016) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2017 (July 2016 – June 2017) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2018 (July 2017 – June 2018) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2019 (July 2018 – June 2019) Actual	Referral	Not Applicable	Not Applicable	Not Applicable
SFY 2020 (July 2019 – June 2020) Actual	Referral	Not Applicable	Not Applicable	Not Applicable

Benchmark: Increase the number of referrals by 2% annually.

B. Minor Home Modification Coordination Strategy: Coordinate home modification referrals by utilizing resource list maintained by LINC and ensure service list is in GetCare Listing Manager.

Performance Measure: Increase referrals annually

Baseline: State Fiscal Year July 1, 2016-June 30, 2017 Referral counts.

- Boise City/Ada County Housing Authority: 14.
- Idaho Assistive Technology Project: 10.

Benchmark: Referrals increased annually by 2%.

8: Legal Assistance Objective: Provide access to legal information resources and legal assistance to priority services.

Service Description: Legal Assistance funds are used for the following priority of legal issues related to: income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse or neglect, and age discrimination.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by:

Provider Name	Phone #	County Served	Time of Operations
Boise Idaho Legal Aid	208-345-0106	Ada, Boise, Elmore, and Valley	8:30- 5:00
Caldwell Idaho Legal Aid	208-454-2591	Adams, Canyon, Gem, Owyhee, Payette, and Washington	8:30- 5:00

Legal Assistance (Title IIIB Supportive Services and Title IIIE Caregiver Services)

Funding Source: (Actual expenditures for completed years and budget for current year)

State Fiscal Year (SFY)	State	Federal	Total	IIIE Federal	Total
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$29,610	\$29,610	\$0	\$29,610
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$32,655	\$32,655	\$0	\$32,655
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$30,698	\$30,698	\$0	\$30,698
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$31,950	\$31,950	\$0	\$31,950
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$31,118	\$31,118	\$0	\$31,118
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$32,250	\$32,250	\$0	\$32,250

A. Legal Assistance Service Delivery Strategy: Establish best practice to track A3SSA legal assistance data.

Performance Measure:

- Efficiencies = Cost per hour.
- Effectiveness = Number of cases, number of hours and total costs.

Baseline:

<u>Older Americans Act Service Priority</u>	<u>SFY16 Cases</u>	<u>SFY17Cases</u>	<u>SFY18 Cases</u>	<u>SFY19 Cases</u>	<u>SFY20 Cases</u>
Income	N/A	28	24	96	34
Health Care	N/A				16
Long-term care	N/A	68	63	84	0
Nutrition	N/A				0
Housing	N/A	28	18	58	101
Utilities	N/A				0
Protective Services	N/A				0
Defense of Guardianship	N/A	1	1	6	4
Abuse	N/A	5		11	0
Neglect	N/A				0
Age Discrimination	N/A	3	2	6	4
Total	0	133	108	261	159

<u>Older Americans Act Service Priority</u>	<u>SFY16 Hours</u>	<u>SFY17 Hours</u>	<u>SFY18 Hours</u>	<u>SFY19 Hours</u>	<u>SFY20 Hours</u>
Income	N/A	69.1	113.5	134.28	123.8
Health Care	N/A				236.3
Long-term care	N/A	167.2	149.2	138.1	0
Nutrition	N/A				0
Housing	N/A	126.6	94.7	88.4	180.5
Utilities	N/A				0
Protective Services	N/A				0
Defense of Guardianship	N/A	1.5	0.4	9.7	1.6
Abuse	N/A	35.8		13.2	0
Neglect	N/A				0
Age Discrimination	N/A	8.6	7.7	12.8	10.6
Total	0	408.8	365.5	396.48	552.8

Benchmark: Reporting system in place to track Legal Assistance data.

B. Legal Assistance Coordination Strategy: Provide Legal Assistance training to Information and Assistance, Adult Protective Services and Ombudsman staff to improve appropriate referrals to Idaho Legal Aid.

Performance Measure:

- Number of trainings provided to I&A, Ombudsman and Adult Protective Services Staff.
- Number of appropriate referrals to Idaho Legal Aid

Baseline: State Fiscal Year July 1, 2016-June 30, 2017 Referral counts.

- Legal Assistance (General): 19.
- Idaho Legal Aid: 39.

Benchmark: Number of eligible consumers referred to Idaho Legal Aid that are provided with assistance.

9: Congregate Meals Objective: Increase participation at meal sites to reduce isolation and increase socialization.

Service Description: Congregate Meal program funds are used to prepare and serve meals in a congregate setting (mostly at Senior Centers), which provide older persons with assistance in maintaining a well-balanced diet, including diet counseling and nutrition education. The purpose of the program is to reduce hunger and food insecurity, promote socialization and the health and well-being of older individuals in Idaho. This service assists seniors to gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior.

Service Eligibility: Seniors 60 years of age or older. Additional eligibility: An adult under 60, whose spouse is 60 or older and receives a meal (**must attend together**), Person with a disability under 60 living in the home with a person 60 or older (**must attend together**), Person under 60 providing volunteer services during the meal hours.

Service Implemented by:

Name	Congregate Service Hours	Phone #	City
Nampa Senior Center	Mon-Fri 12pm	208-467-7266	Nampa
Dick Eardley Boise Senior Center (Formerly Boise Senior Activities Center)	Mon - Fri - 12pm	208-608-7578	Boise
Eagle Community & Senior Center	Mon, Tue & Thurs - 12pm	208- 939-0475	Eagle
Garden City Senior Center (Boise Site)	Closed	208-336-8122	Garden City
Kuna Senior Center	Mon, Wed, Fri - 12pm	208-922-9714	Kuna
Meridian Senior Center	Mon - Fri - 12pm	208-888-5555	Meridian
Northgate Senior Village	Mon - Fri - 12pm	208-853-8448	Boise
Samaritan Village Apts.	Mon - Fri - 12pm	208-342-3163	Boise
Star Senior Center	Wed & Fri - 12pm	208-286-7943; President: 322-4357	Star
Boise Basin Senior Center	Tue & Thurs- 12pm	208-392-4918	Idaho City
Caldwell Senior Center	Mon- Fri - 12pm	208-459-0132	Caldwell
Cambridge Senior Citizens -	Wed -12pm & Fri - 5:30pm	208-257-3358	Cambridge
Cascade Senior Center	Tue & Thurs - 12pm	208-382-4256	Cascade
Council Senior Center	Tue, Wed, Fri - 12pm	208-253-4802/ 208-253-4282	Council
Homedale Senior Center	Tue & Thurs - 12p Wed - 11:30am	208-337-3020	Homedale
Horseshoe Bend Senior Center	Tues & Fri - 12pm	208-793-2344	Horseshoe Bend
McCall Senior and Community Center	Tue & Thurs- 6 pm	208-634-5408	McCall
Melba Valley Senior Center	Tue breakfast and Thu lunch at 12	208-495-2168	Melba
Mountain Home Senior Citizens Center	Mon, Wed, Fri - 12pm	208-587-4562	Mountain Home
New Meadows Senior Center	Wed & Fri - 5:30pm	208-347-2363	New Meadows

New Plymouth Senior Center	Tuesday, Thursday, Friday - 12pm, Salad Bar opens at 11:30 a.m., if consumers would like to socialize prior to the noon meal	208-278-5320	New Plymouth
Parma Senior Center	Monday - Friday - 12pm	208-722-5421	Parma
Payette Senior Center	Mon, Wed, Fri- 12pm	208-642-4223	Payette
Rimrock Senior Center (Grandview)	Tues & Thur- 12pm	208-834-2922	Grandview
Three Island Senior Center (Glenns Ferry)	Mon, Tue, Thurs - 12pm	208-366-2051	Glenns Ferry
Weiser Senior Center	Mon-Fri at 12pm	208-414-0750	Weiser

Congregate Meals

Funding Source: (Actual expenditures for completed years and budget for current year)

State Fiscal Year (SFY)	State	Federal	Total
SFY 2016 (July 2015 – June 2016) Actual	\$143,077	\$492,373	\$635,450
SFY 2017 (July 2016 – June 2017) Actual	\$177,355	\$524,649	\$702,004
SFY 2018 (July 2017 – June 2018) Actual	\$295,170	\$330,450	\$625,620
SFY 2019 (July 2018 – June 2019) Actual	\$146,850	\$488,264	\$635,114
SFY 2020 (July 2019 – June 2020) Title IIIC1 Actual	\$124,852	\$412,606	\$537,458
SFY 2020 Family First Title IIIC1 Actual	\$0	\$127,996	\$127,996
SFY 2020 CARES Title IIIC1 Actual	\$0	\$185,165	\$185,165
Total 2020 Title IIIC1 and Covid IIIC1 Actual	\$124,852	\$725,767	\$850,619
SFY 2021 (July 2020 – June 2021) Budget	\$140,455	\$1,047,685	\$1,188,140

A. Congregate Meal Service Delivery Strategy: Work with Senior Centers and community partners to identify resources that can support the increase of congregate participation.

Performance Measure:

- Efficiencies = Average cost per meal, current AAA reimbursement, average consumer contribution, average other contribution.
- Effectiveness = Total consumers, total meals, to visitor meals, and total eligible meals.
- Quality = Consumer satisfaction (ACL's POMP (Performance Outcome Management Project)).

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Unduplicated Clients Served</u>	<u>Total Congregate Meals</u>	<u>*Average cost per Congregate Meal</u>	<u>AAA Contracted Meal Reimbursement Rate</u>
SFY 2016 (July 2015 – June 2016) Actual	3,780	170,969	\$3.72	\$3.50
SFY 2017 (July 2016 – June 2017) Actual	3,601	193,667	\$3.62	\$3.50
SFY 2018 (July 2017 – June 2018) Actual	3,698	176,663	\$3.54	\$3.50
SFY 2019 (July 2018 – June 2019) Actual	4,039	176,311	\$3.60	\$3.50
SFY 2020 (July 2019 – June 2020) Title III C1 Actual	3,766	123,991	\$4.33	\$4.00
SFY 2020 COVID-19 C1 Actual	1,820	31,256	\$10.02	\$9.00
Total 2020 Title III C1 and COVID-19 C1 Actual	Not Applicable	155,247	Not Applicable	Not Applicable

*Cost includes AAA wages, nutritionist and provider reimbursement.

Benchmark: Number of additional resources accessed.

B. Congregate Meal Coordination Strategy: Work with Senior Centers and provide technical guidance to sustain and increase participation at Senior Centers.

Performance Measure: Number of Senior Center visits and technical guidance provided.

Baseline: State Fiscal Year July 1, 2016-June 30, 2017 Site Visits

- 08/02/2016: Council Senior Center
- 08/02/2016: Weiser Senior Center
- 08/03/2016: Parma Senior Center
- 08/31/2016: Payette Senior Center
- 09/01/2016: Boise Basin Senior Center
- 09/08/2016: Rimrock Senior Center

Benchmark: Visit 2-3 Seniors a month and provide technical guidance.

10: Home Delivered Meals Objective: To utilize best available resources to identify potential consumers or older individuals who could benefit from the program.

Service Description: Home Delivered Meal funds are used to provide meals five or more days a week (except in a rural area where such frequency is not feasible) and at least one meal per day, which may consist of hot, cold, frozen, dried, canned, fresh, or supplemental foods and any additional meals that the recipient of a grant or contract under this subpart elects to provide.

Service Eligibility: Seniors 60 years of age or older. Additional Requirements: (a) Persons age 60 or over who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part. (b) The spouse of the older person, regardless of age or condition, may receive a home delivered meal if, according to criteria determined by the area agency, receipt of the meal is in the best interest of the homebound older person. Also, a client's eligibility to receive home delivered meals shall be based upon the degree to which Activities of Daily Living (ADLs)/Instrumental Activities of Daily Living (IADLs) limit ability to independently prepare meals.

Service Implemented by: (Service Authorized by A3SSA)

<u>Organization Name</u>	<u>HDM Delivery Schedule H = Hot, F = Frozen</u>	<u>City</u>
Metro Community Services	N/A	Caldwell

Dick Eardley Boise Senior Center (Formerly Boise Senior Activities Center)	Mon-Thurs (1 H), Fri (1 H & 2 F) Thurs (1 H & 6 F), Tue (1 H & 6 F)	Boise
Eagle Community & Senior Center	Tue (1 H & 1 F), Thurs (1 H & 4 F)	Eagle
Emmett Area	Tue (1H & 2F) Fri (1H & 3F)	Emmett
Garden City Senior Center	Closed	Garden City
Kuna Senior Center	Mon (1 H & 1 F), Wed (1 H & 1 F), Fri (1 H & 2 F)	Kuna
Meridian Senior Center	<i>City:</i> Mon (1 H & 1 F), Wed (1 H & 1 F), Fri (1 H & 2 F) <i>Rural:</i> Tue (1 H & 6 F)	Meridian
Middleton Area	Mon – Thurs (1H), Fri (1H & 2F), Tue (1H & 6F)	Middleton
Star Senior Center	Wed (1 H & 1 F), Fri (1 H & 4 F)	Star
Caldwell MOW's	<i>City:</i> Mon-Thurs (1 H), Fri (1 H & 2 F), <i>Rural:</i> Tues (7 F) (The referral has to be received the Friday before Tues delivery.)	Caldwell, Middleton & Greenleaf
Cambridge Senior Citizens	Wed (1 H & 6 F)	Cambridge
Homedale Senior Center	Tue (1 H), Wed (1 H), Thurs (1 H & 4 F)	Homedale
Horseshoe Bend Senior Center	Tue (1 H), Fri (1 H)	Horseshoe Bend
Marsing Senior Center	Closed	Marsing
McCall Senior and Community Center	Tue (1 H & 1 F), Thurs (1 H & 4 F)	McCall
Melba Valley Senior Center	Thurs (1 H & 6 F) - call to verify	Melba
Mom's Meals NourishCare	Frozen Meals Delivered for the week	Any
Mountain Home Senior Citizens Center	Mon (1 H & 1 F), Wed (1 H & 1 F), Fri (1 H & 2 F)	Mountain Home
Nampa St. Alphonsus MOW's	Mon – Thurs (1H), Fri (1H & 2F), Rural: Mon (1H & 6F)	Nampa
New Meadows Senior Center	Wed (1H & 2F), Fri 1H & 3F)	New Meadows
New Plymouth Senior Center	Tue (1 H & 1 F), Thurs (1 H), Friday (1 H & 3 F)	New Plymouth
Parma Senior Center	Mon (1 H & 1 F), Wed (1 H & 1 F), Fri (1 H & 2 F)	Parma
Payette Senior Center	Mon - Thurs (1 H), Fri (1 H & 2 F)	Payette
Three Island Senior Center (Glenns Ferry)	Mon (1 H), Tue (1 H & 1 F), Th (1 H & 3 F)	Glenns Ferry
Weiser Senior Center	Mon- Fri (1 H), Fri (2 F)	Weiser

Home Delivered Meals (Title III only)

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$551,089	\$540,787	\$1,091,876
SFY 2017 (July 2016 – June 2017) Actual	\$509,781	\$472,820	\$982,601
SFY 2018 (July 2017 – June 2018) Actual	\$370,135	\$349,162	\$719,297
SFY 2019 (July 2018 – June 2019) Actual	\$250,807	\$539,398	\$790,205
SFY 2020 (July 2019 – June 2020) Title IIIC2	\$221,310	\$526,190	\$747,500
SFY 2020 Family First Title IIIC2 Actual	\$0	\$255,993	\$255,993
SFY 2020 CARES Title IIIC2 Actual	\$0	\$470,823	\$470,823
Total 2020 Title IIIC2 and Covid-19 IIIC2 Actual	\$221,310	\$1,253,006	\$1,474,316
SFY 2021 (July 2020 – June 2021) Budget	\$207,448	\$794,919	\$1,002,367

A. Home Delivered Meal Service Delivery Strategy: Identify and implement best practices for managing Home Delivered Meals programs to ensure eligible high risk consumers are served and to minimize waiting lists.

Performance Measure:

- Efficiencies = Average cost per meal, current AAA reimbursement, average consumer contribution, average other contribution.
- Effectiveness = Total consumers, total meals, and total eligible meals and registered consumers by at risk factor.
- Quality = Consumer satisfaction (ACL's POMP (Performance Outcome Management Project)).

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Unduplicated Clients Served</u>	<u>Total Home Delivered Meals</u>	<u>*Average cost per Home Delivered</u>	<u>AAA Contracted HDM Reimbursement Rate</u>
SFY 2016 (July 2015 – June 2016) Actual	1,583	216,858	\$5.03	\$4.25
SFY 2017 (July 2016 – June 2017) Actual	1,125	200,690	\$4.90	\$4.25
SFY 2018 (July 2017 – June 2018) Actual	979	164,543	\$4.37	\$4.25
SFY 2019 (July 2018 – June 2019) Actual	1,181	180,203	\$4.39	\$4.25
SFY 2020 (July 2019 – June 2020) Title IIIC2	1,296	163,044	\$4.58	\$4.50
SFY 2020 COVID-19 C2 Actual	949	65,363	\$11.12	\$9.00
Total 2020 Title IIIC2 and COVID-19 C2 Actual	2,245	228,407	\$6.45	N/A

*Cost includes AAA wages, nutritionist and provider reimbursement.

Demographic Baseline:

<u>Home Delivered Meals State Fiscal Year (SFY)</u>	<u>Census Data: % of Population Living in Rural Areas</u>	<u>% of Registered Consumers living in Rural Areas</u>	<u>Census Data: % of Population in *Greatest Economic Need</u>	<u>% of Registered Consumers with Greatest Economic Need</u>	<u>Census Data: % of Population in **Greatest Social Need</u>	<u>% of Registered Consumers with Greatest Social Need</u>
SFY 2016 (July 2015 – June 2016)	25,218/127,236=20%	278/1425=20%	7,621/127,236=6%	268/1425=19%	23,163/127,236=18%	873/1425=61%

SFY 2017 (July 2016 – June 2017)	25,218/127,236=20%	260/1125=23%	7,621/127,236=6%	260/1125=23%	23,163/127,236=18%	636/1125=56%
SFY 2018 (July 2017 – June 2018)	27,660/145,707=19%	211/979=21%	8,057/145,707=5.5%	251/979=26%	25,006/145,707=17%	594/979=61%
SFY 2019 (July 2018 – June 2019)	29,599/159,951=18%	274/1181=23%	10,340/159,951=6.4%	353/1181=30%	26,711/159,951=16%	684/1181=58%
SFY 2020 (July 2019 – June 2020)	30,813/168,188=18%	377/1568=24%	10,519/168,188=6.2%	501/1568=32%	27,913 /168,188=16%	756/1568=48%

***Greatest Economic Need: 65 or older living in poverty**

****Greatest Social Need: 65 or older living alone**

Benchmark: Number of consumers served that are high risk and there is no waiting list.

B. Home Delivered Meal Coordination Strategy: Work with home delivered meals providers and ICOA to establish an eligibility process that will ensure high risk consumers are not placed on a waiting list.

Performance Measure: Eligibility process is in place that ensures high risk consumers are not placed on a waiting list.

Baseline:

Pre-Screening Criteria: (Must meet at least one of the following)

- Rural
- Lives Alone
- Below Poverty

Eligibility criteria for Home Delivered Meals:

- 60 or older
- Homebound
- Frail (unable to prepare meals)

Benchmark:

- New eligibility process in place

11: Disease Prevention and Health Promotions Objective: Improve the wellness of seniors by ensuring that Disease Prevention and Health Promotion programs are delivered according to evidence-based guidelines.

Service Description: Disease Prevention and Health Promotion funds are for evidence-based programs selected by the Area Agencies on Aging based on input from the consumers in the Planning and Service Area (PSA). Evidence-based programs support healthy lifestyles and promote healthy behaviors and reduce the need for more costly medical interventions. The purpose of the Aging and Disability Evidence-Based Programs and Practices (ADEPP) is to help the public learn more about available evidence-based programs and practices in the areas of aging and disability and determine which of these may best meet their needs.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by:

- Area Agencies on Aging

Title IID Health Promotions and Disease Prevention

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$0	\$35,735	\$35,735
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$9,860	\$9,860
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$11,166	\$11,166
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$33,097	\$33,097
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$56,915	\$56,915
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$49,321	\$49,321

A. Disease Prevention and Health Promotion Service Delivery Strategy: Review the approved ACL list of evidence based health promotion programs and implement one.

Performance Measure:

- Efficiencies = Cost per consumer.
- Effectiveness = Total program cost and numbers of consumers.

Baseline:

Diabetes Self-management Program

<u>State Fiscal Year (SFY)</u>	<u>Evidency Based Program Expense</u>	<u>Total Unduplicate Clients</u>	<u>Average cost per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	\$35,735	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$9,860	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$11,166	6	\$1,861
SFY 2019 (July 2018 – June 2019) Actual	\$33,097	29	\$1,141
SFY 2020 (July 2019 – June 2020) Actual	\$56,915	N/A	N/A

Benchmark: One evidence based health promotion program implemented in PSA III.

B. Disease Prevention and Health Promotion Coordination Strategy: Collaborate with A3SSA Board of Commissioners, A3SSA Advisory Council, Senior Centers, Southwest Health Collaborative and LINC and promote new health promotion program.

Performance Measure: Number of individuals that participated in A3SSA health promotion program.

Baseline: No active evidence based health promotion program in place.

Benchmark: Implement program and increase participation by 5% annually.

12: National Family Caregiver Support Program (NFCSP) Objective: To strengthen the Idaho's Family Caregiver Support Program.

Service Description: NFCSP funds must be used to support and train caregivers to make decisions, resolve problems, and develop skills to carry out their caregiving responsibilities:

1. Caregiver information (large group presentations, printed materials, media);
2. Caregiver access assistance (assisting caregiver to access resources);
3. Caregiver Counseling including caregiver support groups and training;
4. Respite provides a brief period of relief to a full-time caregiver. The care recipient must have physical or cognitive impairments that require 24-hour care or supervision;
5. Supplemental Services.

Service Eligibility: (1) family caregivers who provide care for individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction, the State involved shall give priority to caregivers who provide care for older individuals with such disease or disorder, (2) grandparents or older individuals who are relative caregivers, the State involved shall give priority to caregivers who provide care for children with severe disabilities, (3) caregivers who are older individuals with greatest social need, and older individuals with greatest economic need (with particular attention to low-income older individuals), and (4) older individuals providing care to individuals with severe disabilities, including children with severe disabilities.

Service Implemented by:

- Area Agency on Aging
- See Homemaker Providers Table

Title III E National Family Caregiver and Support Program

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$246,234
SFY 2017 (July 2016 – June 2017) Actual	\$35,313	\$113,530	\$148,843
SFY 2018 (July 2017 – June 2018) Actual	\$35,592	\$100,803	\$136,395
SFY 2019 (July 2018 – June 2019) Actual	\$81,610	\$114,075	\$195,685
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$320,875	\$320,875
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$324,823	\$324,823

Cost Share: Both federal and state funds are eligible; however different requirements apply: If only federal funds are used, the AAA must use individual income when determining cost-share and participants cannot be terminated for refusal to pay. If only using state funds, the AAA must use household income when determining cost-share and person can be terminated for refusal to pay. If a combination of federal and state funds is used, the AAA follows federal requirements.

A. National Family Caregiver Support Program (NFCSP) Service Delivery Strategy: Expand current Caregiver services and implement new caregiver programs to meet current needs.

Performance Measure:

- Efficiencies = Average cost per consumer.
- Effectiveness = Total consumers, total program cost, average # of hours, and number of caregiver presentations.

1. Caregiver Information Services

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>	<u>Number of Activities</u>
SFY 2016 (July 2015 – June 2016) Actual	\$5,018	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$9,126	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$2,556	Not Available
SFY 2019 (July 2018 – June 2019) Actual	\$2,038	Not Available
SFY 2020 (July 2019 – June 2020) Actual	\$4,887	Not Available
SFY 2021 (July 2020 – June 2021) Budget	\$16,448	

2. Access Assistance (I&A)

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>	<u>Number of Contacts</u>	<u>Program Expense per Contact</u>
SFY 2016 (July 2015 – June 2016) Actual	\$53,354	1,650	\$32.34
SFY 2017 (July 2016 – June 2017) Actual	\$53,201	320	\$166.25
SFY 2018 (July 2017 – June 2018) Actual	\$60,303	504	\$119.65
SFY 2019 (July 2018 – June 2019) Actual	\$56,550	1,241	\$45.57
SFY 2020 (July 2019 – June 2020) Actual	\$59,551	1,460	\$40.79
SFY 2021 (July 2020 – June 2021) Budget	\$86,318		

3. Caregiver Counseling and Group Programs

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>	<u>Number of Unduplicated Clients Served</u>	<u>Number of Sessions</u>	<u>Program Expense per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	\$1,235	Not Available	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$0	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$3,198	Not Available	15	Not Available
SFY 2019 (July 2018 – June 2019) Actual	\$30,121	85	110	\$354.36
SFY 2020 (July 2019 – June 2020) Actual	\$43,936	103	103	\$426.56
SFY 2021 (July 2020 – June 2021) Budget	\$2,618			

4. Respite

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Annual Expense</u>	<u>Number of Unduplicated Clients Served</u>	<u>Number of Hours</u>	<u>Program Expense per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$95,063	91	5,272	\$1,045
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$75,503	78	4,041	\$968
SFY 2018 (July 2017 – June 2018) Actual	\$35,592	\$33,543	\$69,135	62	3,831	\$1,115
SFY 2019 (July 2018 – June 2019) Actual	\$81,610	\$25,365	\$106,975	99	6,430	\$1,081
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$212,502	\$212,502	144	11,610	\$1,476
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$135,226	\$135,226			

5. Supplemental Service (Limited Basis)

Supplemental Caregiver Legal Assistance

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>
SFY 2016 (July 2015 – June 2016) Actual	\$14,289
SFY 2017 (July 2016 – June 2017) Actual	\$11,011
SFY 2018 (July 2017 – June 2018) Actual	\$1,200
SFY 2019 (July 2018 – June 2019) Actual	\$0
SFY 2020 (July 2019 – June 2020) Actual	\$0
SFY 2021 (July 2020 – June 2021) Budget	\$0

Benchmark:

- Increase Caregiver Contacts by 5% annually.
- Increase the number of Caregivers served by 5% annually.
- Customer satisfaction at 80% or higher.

B. NFCSP Coordination Strategy: Collaborate with community partners, contracted service providers, the Alzheimer Association, A3SSA Advisory Council, Veterans Administration, Southwest Health Collaborative, to promote NFCSP resources.

Performance Measure: Number of caregiver presentations conducted with community partners.

Baseline: No caregiver presentations conducted during State Fiscal Year July 1, 2016-June 30, 2017

Benchmark: 2 presentations conducted annually.

Focus Area B: Older Americans Act (OAA) Discretionary Programs

ICOA Goal: To collaborate with aging network partners to implement discretionary programs that enhance Title III Core Services.

1: Senior Medicare Patrol (SMP) Objective: To have well educated and knowledgeable consumers who know how to identify, report, and prevent Medicare and Medicaid Fraud.

Service Description: SMP funds are used to educate Medicare and Medicaid beneficiaries to detect, report, and prevent health care fraud. Trained SMP staff and volunteers conduct group education sessions, provide one-to-one counseling with Medicare beneficiaries, and hold regional Scam Jams co-sponsored by the Idaho Scam Jam Alliance which includes the SMP, Idaho Attorney General’s Office, Idaho Department of Insurance, Idaho Department of Finance, Idaho Legal Aid Services, AARP, Better Business Bureau and other valued partners to help consumers learn to protect against fraud.

Service Eligibility: Medicare beneficiaries and their Caregivers.

Service Implemented by:

Provider Name	Phone #	Time of Operations
Metro Community Services	208-459-0064	M-F: 8:30- 5:00

A. SMP Service Delivery Strategy: : Coordinate with Metro Community services to strengthen the local SMP Program by increasing volunteer recruitment and retention as well as increasing the number of group presentations and one-one-one counseling sessions.

Performance Measure:

- Effectiveness = # of Volunteers, # of group presentation, # of community events, # of one-to-one counseling sessions and total program cost.

Baseline:

State Fiscal Year (SFY)	Volunteers	Group Presentations	Community Events	One-to-one Counseling
SFY 2016 (July 2015 – June 2016) Actual	4	21	62	502
SFY 2017 (July 2016 – June 2017) Actual	3	15	30	374
SFY 2018 (July 2017 – June 2018) Actual	4	29	71	614
SFY 2019 (July 2018 – June 2019) Actual	4	28	128	739
SFY 2020 (July 2019 – June 2020) Actual	4	20	210	588

Benchmark:

- Fill and sustain four volunteer positions.
- 30 group presentations annually.
- 25 one-on-one counseling sessions.
- SMP providers fully utilizing the VRPM.

B. SMP Coordination Strategy: Coordinate with Metro Community services to improve referrals between AAAIII and Metro Community Services. Additionally, coordinate with ICOA, the Idaho Scam Jam Alliance, and other area

partners to conduct community events which include education about Medicare fraud prevention, identity theft, and exploitation.

Performance Measure: Number of referrals to SHIBA and Metro Community services.

Baseline: State Fiscal Year July 1, 2016-June 30, 2017 Referral counts.

- Metro Community Services 33
- SHIBA 3
- Medicare 1

Benchmark:

- Increase the number of referrals to SHIBA and Metro Community services by 25% annually.

2: Medicare Improvements for Patients and Providers Act (MIPPA) Objective: To provide statewide outreach and referral to eligible Medicare Savings Program and Low Income Subsidy beneficiaries throughout the State.

Service Description: MIPPA funds are used to provide education and outreach for Medicare Savings Programs (MSP), Low Income Subsidy (LIS), Medicare Part D and Prevention and Wellness benefits. The MIPPA project develops Medicare Improvement outreach partners statewide including, pharmacies, churches and not-for-profit organizations.

Service Eligibility: Low income Medicare beneficiaries.

Service Implemented by:

- Area Agencies on Aging (AAAs)

PSA III: Medicare Improvements for Patients and Providers Act

Funding Source: (Actual expenditures for completed years and Budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	N/A
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$6,625	\$6,625
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$11,235	\$11,235
SFY 2020 (July 2019 – June 2020) Actual	\$0	\$11,290	\$11,290
SFY 2021 (July 2020 – June 2021) Budget	\$0	\$11,188	\$11,188

A. MIPPA Service Delivery Strategy: Provide outreach to Medicare beneficiaries by engaging organizations to share MSP and LIS information and assist eligible beneficiaries to apply for benefits.

Performance Measure:

- Efficiencies = Average cost per participating agency.
- Effectiveness = Total Host Agency and total program cost.

Baseline:	
State Fiscal Year (SFY)	Participating Host Agencies
SFY 2016 (July 2015 – June 2016) Actual	N/A
SFY 2017 (July 2016 – June 2017) Actual	N/A
SFY 2018 (July 2017 – June 2018) Actual	19
SFY 2019 (July 2018 – June 2019) Actual	21
SFY 2020 (July 2019 – June 2020) Actual	73

Benchmark: Increase the number of individuals served in PSAIII by 5% annually.

B. MIPPA Coordination Strategy: Coordinate with Metro Community services to integrate the SMP and MIPPA programs.

Performance Measure: Public awareness materials and statewide media campaigns.

Baseline: AAAIII did not participate during SFY 2016 and 2017.

Benchmark: Annually increase the number of LIS and MSP referrals.

Focus Area C: Older Americans Act (OAA) Participant-Directed/Person-Centered Planning

ICOA Goal: Integrate person-centered planning into existing service delivery system.
1: Participant-Directed/Person-Centered Planning Objective: To define and implement person centered processes with aging and disability network partners.
Service Description: The service directs eligible consumers to organizations that provide long-term care service coordination. Person-Centered Planning is a process that ensures an individual has a choice in determining the long-term care services that are best for them.
Service Eligibility: General public needing long-term care services and supports.
Service Implemented by: <ul style="list-style-type: none"> Area Agency on Aging (AAA)
A. Participant-Directed/Person-Centered Planning Service Delivery Strategy: Expand Veterans participant directed services and provide Person Centered Planning training to I&A, Ombudsman and AP staff.
Performance Measure: <ul style="list-style-type: none"> Number of Veteran's Served Number of AAA staff completing Person Centered Planning training
Baseline: One Participant Directed services provided, VD-HCBS.
Benchmark: <ul style="list-style-type: none"> Increase Veterans Served 6. 50% of the staff trained in Person Centered Planning.

<p>B. Participant-Directed/Person-Centered Planning Coordination Strategy: Coordinate referrals with the following Participant-Directed/Person-Centered Planning trained staff:</p> <ul style="list-style-type: none"> • Idaho Home Choice Transition Managers • Targeted Service Coordinators • Health and Welfare Navigators • Independent Living Specialists • Employment Training Coordinators
<p>Performance Measure: Number of referrals to Participant-Directed/Person-Centered Planning programs.</p>
<p>Baseline:</p> <ul style="list-style-type: none"> • No cross trainings provided in previous fiscal year 2016-2017. • Number of referrals to organizations: <ul style="list-style-type: none"> ○ LINC: 9
<p>Benchmark:</p> <ul style="list-style-type: none"> • Incorporate Participant-Directed/Person-Centered Planning programs into GetCare Listing Manager • Increase the number of referrals to programs by 20%

Focus Area D: Elder Justice

<p>ICOA Goal: Ensure all older individuals have access to OAA and SSA Elder Justice Services.</p>
<p>1: Ombudsman Objective: To develop Idaho specific policies and procedures to comply with new Older Americans Act (OAA) Ombudsman rules.</p>
<p>Service Description: The Ombudsman funds are used to:</p> <p>(A) identify, investigate, and resolve complaints that—(i) are made by, or on behalf of, residents; and (ii) relate to action, inaction, or decisions, that may adversely affect the health, safety, welfare, or rights of the residents (including the welfare and rights of the residents with respect to the appointment and activities of guardians and representative payees), of— (I) providers, or representatives of providers, of long-term care services; (II) public agencies; or (III) health and social service agencies;</p> <p>(B) provide services to assist the residents in protecting the health, safety, welfare, and rights of the residents;</p> <p>(C) inform the residents about means of obtaining services provided by providers or agencies described in subparagraph (A)(ii) or services described in subparagraph (B);</p> <p>(D) ensure that the residents have regular and timely access to the services provided through the Office and that the residents and complainants receive timely responses from representatives of the Office to complaints;</p> <p>(E) represent the interests of the residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of the residents;</p> <p>(F) provide administrative and technical assistance to entities designated under paragraph (5) to assist the entities in participating in the program;</p> <p>(G)(i) analyze, comment on, and monitor the development and implementation of Federal, State, and local laws, regulations, and other governmental policies and actions, that pertain to the health, safety, welfare, and rights of the residents, with respect to the adequacy of long-term care facilities and services in the State; (ii) recommend any changes in such laws, regulations, policies, and actions as the Office determines to be appropriate; and (iii) facilitate public comment on the laws, regulations, policies, and actions;</p>

(H)(i) provide for training representatives of the Office; (ii) promote the development of citizen organizations, to participate in the program; and (iii) provide technical support for the development of resident and family councils to protect the well-being and rights of residents; and
 (I) carry out such other activities as the Assistant Secretary determines to be appropriate.

Service Eligibility: Seniors 60 years of age or older.

Service Implemented by:

- Area Agencies on Aging (AAAs)

PSA III: Ombudsman

Funding Source: (Actual expenditures for completed years and budget for current year)

State Fiscal Year (SFY)	State	Federal	Total
SFY 2016 (July 2015 – June 2016) Actual	\$9,909	\$117,988	\$127,897
SFY 2017 (July 2016 – June 2017) Actual	\$35,091	\$107,882	\$142,973
SFY 2018 (July 2017 – June 2018) Actual	\$35,497	\$93,320	\$128,817
SFY 2019 (July 2018 – June 2019) Actual	\$116,779	\$88,635	\$205,414
SFY 2020 (July 2019 – June 2020) Actual	\$131,359	\$122,693	\$254,052
SFY 2020 CARES COVID-19 Actual	\$0	\$43,045	\$43,045
Total 2020 Actual	\$131,359	\$165,738	\$297,097
SFY 2021 (July 2020 – June 2021) Budget	\$216,337	\$59,554	\$275,891

A. Ombudsman Service Delivery Strategy: Support A3SSA State Ombudsman to receive training on new State Ombudsman Program Manual.

Performance Measure:

- Average beds/Ombudsman
- Information and Education Presentation
- Reporting

Baseline:

State Fiscal Year (SFY)	Number of Ombudsman	Number of	Number of	Total Number of Beds	Average Bed Count per Ombudsman	Total Volunteer Ombudsman	Total Information and Education	Total Facility Visits
		Skilled Nursing Facilities	Assisted Living Facilities					
SFY 2016 (July 2015 – June 2016) Actual	3	N/A	N/A	6,239	2,080	0	24	N/A
SFY 2017 (July 2016 – June 2017) Actual	3	N/A	N/A	6,321	2,107	0	31	N/A
SFY 2018 (July 2017 – June 2018) Actual	3	31	137	6,665	2,222	0	34	N/A
SFY 2019 (July 2018 – June 2019) Actual	4	29	123	7,541	1,885	0	11	650
SFY 2020 (July 2019 – June 2020) Actual	4.15	30	125	7,403	1,784	9	15	466

PSA III: OmbudsmanFive Most Frequent Complaint Areas and Corresponding Number of Complaints (SFY 2018): **Data comes from GetCare report, Custom**

SFY16		SFY17		SFY18		SFY19		SFY20	
Type of Complaint	Total Complaint	Type of Complaint	Total Complaints	Type of Complaint	Total Complaint	Type of Complaint	Total Complaints	Type of Complaint	Total Complaints
Discharge Eviction	43	Medication #44	16	Medication #44	23	C-19 discharge/eviction: planning, notice, procedure	25	C-03 Discharge Evictions	11
Dignity Respect	42	Dignity/Respect #26	15	Failure to Respond to Requests #41	18	F-44 medications: administration, organization	25	D-09 Other rights and preferences	14
Medication Administration	27	Discharge/Eviction #19	9	Food Service #71	15	J-71 food service: quantity, quality, variation, choice, condiments, utensils	24	E-01 Billing and Charges	8
Personal Hygiene	17	Failure to Respond to Requests #41	9	Discharge/Eviction #19	12	F-41 failure to respond to requests for assistance	22	F-04 Medications	13
Equipment Building in Disrepair	16	Short Staffed #97	9	Personal Property Lost #38	11	D-26 dignity, respect, staff attitudes	18	F-05 Personal Hygiene	7

Benchmark:

- Meet or exceed the required level of Community and facility Presentations
- Increase the number of referrals to the Ombudsman Program by community partners.

B. Ombudsman Coordination Strategy: Implement processes and policies between the Ombudsman and Adult Protective Services program that will be required by the new Ombudsman Program Manual.

Performance Measure:

Newly implemented policies

Baseline:

- ICOA Program Manual
- New Ombudsman Program Manual
- Adult Protective Services and Ombudsman Conflict of Interest policies

Benchmark:

- Ombudsman program compliance with new manual.

2: State Adult Protective Services Objective: To ensure that Adult Protective Services are consistently implemented statewide to prevent abuse, neglect and exploitation.

Service Description: State Adult Protective Services (APS) funds must be used to provide safety and protection for vulnerable adults (age 18 and older). The APS program receives reports and investigates allegations of abuse, neglect, self-neglect, or exploitation and assists in reducing the risk of harm.

- Abuse means the intentional or negligent infliction of physical pain, injury or mental injury.
- Neglect means failure of a caretaker to provide food, clothing, shelter or medical care reasonably necessary to sustain the life and health of a vulnerable adult. Self-neglect is the choice of a vulnerable adult not to provide those services for themselves.
- Exploitation means an action which may include, but is not limited to, the unjust or improper use of a vulnerable adult's financial power of attorney, funds, property, or resources by another person for profit or advantage.

Service Eligibility: Vulnerable adults 18 years old and older.

Service Implemented by:

- Area Agencies on Aging (AAAs)

PSA III: Adult Protection Services

Funding Source: (Actual expenditures for completed years and budget for current year)

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$247,793	\$0	\$247,793
SFY 2017 (July 2016 – June 2017) Actual	\$252,149	\$0	\$252,149
SFY 2018 (July 2017 – June 2018) Actual	\$289,705	\$0	\$289,705
SFY 2019 (July 2018 – June 2019) Actual	\$309,063	\$0	\$309,063
SFY 2020 (July 2019 – June 2020) Actual	\$348,450	\$0	\$348,450
SFY 2021 (July 2020 – June 2021) Budget	\$348,466	\$0	\$348,466

A. Adult Protective Services Service Delivery Strategy: Ensure AAAs Adult Protective Services procedures comply with statewide standards.

Performance Measure:

- Presentations
- Reporting

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Abuse Allegations</u>	<u>Neglect Allegations</u>	<u>Self-Neglect Allegations</u>	<u>Exploitation Allegations</u>	<u>Interagency Coordination Law Enforcement</u>	<u>Total Information and Education Presentations</u>
SFY 2016 (July 2015 – June 2016) Actual	393	310	291	311	184	18
SFY 2017 (July 2016 – June 2017) Actual	367	294	304	292	143	15
SFY 2018 (July 2017 – June 2018) Actual	331	187	185	236	141	29
SFY 2019 (July 2018 – June 2019) Actual	242	191	125	128	107	13
SFY 2020 (July 2019 – June 2020) Actual	218	204	67	117	122	13

Benchmark:

- Procedures are in place

B. Adult Protective Services Coordination Strategy: Utilize ICOA training and education materials to strengthen communication and partnership with law enforcement, Justice Alliance for Vulnerable Adults, DHW, Mobile Crisis, Legal Aid, medical services; facilitate external community in-service trainings and develop creative collaboration strategies with community partners.

Performance Measure:

- Number of educational presentations provided by A3SSA Staff.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total AP Presentation focusing on Prevention of Maltreatment of Vulnerable Adults</u>
SFY 2016 (July 2015 – June 2016)	18
SFY 2017 (July 2016 – June 2017)	15
SFY 2018 (July 2017 – June 2018)	31
SFY 2019 (July 2018 – June 2019)	13
SFY 2020 (July 2019 – June 2020)	13

Benchmark:

- Provide a minimum of 2 educational presentations per month.

ATTACHMENT B

SFY 2021 Updated AREA PLAN INTRASTATE FUNDING FORMULA (IFF)

Intrastate Funding Formula (IFF)

Goal: To Provide funding in accordance with OAA guidelines that distribute priority funding to the target population identified in OAA 305(a)(2)(C).

Objective 1: Intrastate Funding Formula (IFF): The IFF is the methodology used to calculate how much Title III funding, including the Title IIID Disease Prevention and Health Promotion Services, goes to each Planning and Service Area (PSA). As seen in the Table below, it is based on the “At Risk” factors in each of the PSAs. This factor is then weighted and applied to the total available funding to determine the funding allocations. The formula provides that funding reaches individuals with the greatest economic and social needs for such services and reaches areas throughout the state that are medically underserved.

Formula Development: The Intrastate Funding Formula was developed in consultation with area agencies using the best available data, and published for review and comment taking into account —(i) the geographic distribution of older individuals in the State; and (ii) the distribution among planning and service areas of older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority older individuals; OAA 305(a)(2)(C) and 45 CFR 1321.37.

Each Planning and Service Area (PSA) is allotted an equal amount of “base” funding. This funding is 10% of the total available State and Federal funding divided equally between each of the six PSAs. The remaining funding is then multiplied by the “At Risk” percentages and distributed to each of the PSAs accordingly.

At the February 4, 2016 ICOA Board of Commissioners’ meeting, Commissioners and the AAAs agreed to form a subcommittee to analyze the IFF methodology. Multiple scenarios were developed by the subcommittee and presented to the AAAs. On February 25, 2016 all AAA Directors agreed to keep the existing IFF. After all stakeholder and public comments have been received, the ICOA Commissioners approved Idaho’s Senior Services State Plan and the Intrastate Funding Formula at the June 21, 2016 special Commissioners’ meeting. The funding formula for the current fiscal year **(FY2021: July 1, 2020 to June 30, 2021 and reference explanation is provided below):**

Idaho Intrastate Funding Formula SFY 2021											Attachment E					
OAA Title III Funds (not including Title VII) and State of Idaho General Funds											Adopted April 30, 2013 Effective July 1, 2020					
											Updated: 5/8/2020					
											\$ 588,698	\$ 377,825	\$ 5,298,281	\$ 3,400,421	\$ 9,665,224	
Total OAA Federal Funds																
Total State Funds																
Total Funds																
Less 10% Base Amount of Federal and State Funds																
Balance to be Distributed by Formula:											\$ 8,698,702					
Factors used in Weighted Elderly Population (At Risk)																
PSA	2018 TOTAL PSA POPULATION	TOTAL PERSONS AGED 60+ IN PSA	NUMBER OF 65+ LIVING IN POVERTY	65+ LIVING ALONE	60+ RACIAL MINORITY (Not Hispanic)	60+ HISPANIC (ETHNIC MINORITY)	60+ LIVING IN RURAL COUNTY	AGED 75+	AGED 85+	WEIGHTED ELDERLY POPULATION (AT RISK)	WEIGHTED "At Risk" PERCENTAGE	Federal Funds Distributed by Formula				TOTAL FUND ALLOCATION
												Federal Fund Base	State Fund Base	Federal Funds Distributed by Formula	State Funds Distributed by Formula	
I	240,202	67,421	3,387	10,742	1,954	1,227	25,892	19,038	4,824	66,954	17.51%	\$ 98,116	\$ 62,971	\$ 927,838	\$ 595,493	\$ 1,694,408
II	109,874	28,807	1,856	5,367	1,234	362	10,508	9,107	2,644	31,080	8.14%	\$ 98,116	\$ 62,971	\$ 451,346	\$ 276,836	\$ 869,269
III	806,688	168,188	10,519	27,913	5,833	8,539	30,813	46,493	12,259	142,369	37.29%	\$ 98,116	\$ 62,971	\$ 1,975,877	\$ 1,268,112	\$ 3,405,077
IV	199,069	42,875	2,720	7,330	1,042	3,594	24,855	13,130	3,593	56,264	14.74%	\$ 98,116	\$ 62,971	\$ 780,864	\$ 501,156	\$ 1,443,107
V	172,466	35,781	1,899	6,148	1,611	1,777	18,287	10,285	2,845	42,852	11.22%	\$ 98,116	\$ 62,971	\$ 594,724	\$ 381,692	\$ 1,137,504
VI	226,109	41,452	1,978	6,566	966	1,592	15,997	11,988	3,254	42,341	11.09%	\$ 98,116	\$ 62,971	\$ 587,832	\$ 377,141	\$ 1,125,860
TOTAL	1,754,208	384,524	22,361	64,066	12,640	17,091	126,142	110,041	29,419	381,760		\$ 588,698	\$ 377,825	\$ 5,298,281	\$ 3,400,421	\$ 9,665,224
Column Ref.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

The source documentation is from the ID Department of Labor.

Column 1	Source: U.S. Bureau of the Census,, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column used as a reference only.
Column 2	Source: U.S. Bureau of the Census,, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column used as a reference only.
Column 3	Source: U.S. Bureau of the Census, American Community Survey, 2006-2013, 5-year estimates, December 2015, Table B17001. Column 3 is used with columns 4 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 4	Source: U.S. Bureau of the Census, American Community Survey, 2006-2013, 5-year estimates, December 2015, Table B17001. Column 4 is used with columns 3 and 5 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 5	Source: U.S. Bureau of the Census, Population Estimates - County Characteristics: Vintage 2014, June 2015. Column 5 is used with columns 3 - 4 and 6 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 6	Source: U.S. Bureau of the Census, Population Estimates - County Characteristics: Vintage 2014, June 2016. Column 6 is used with columns 3 - 5 and 7 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 7	Source: U.S. Bureau of the Census,, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 7 is used with columns 3 - 6 and 8 - 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 8	Source: U.S. Bureau of the Census,, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 8 is used with columns 3 - 7 and 9 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 9	Source: U.S. Bureau of the Census,, 2010-2014 American Community Survey 5-Year Estimates, December 2015, Table S0101. Column 9 is used with columns 3 - 8 to calculate the total "Weighted Elderly Population (At Risk)" in Column 10.
Column 10	Column 10 sums each row for columns 3 - 9 and identify the total "Weighted Elderly Population (At Risk)" per PSA.
Column 11	Weighted At Risk percentage from the Intrastate Funding Formula: Column 11 turns Column 10's totals into percentages. These percentages are used to calculate federal funds in column 14 and state funds in column 15 for each of the PSAs.
Column 12	Federal "Base" funds are evenly divided amongst the 6 PSAs. Column 12 is used to record the total federal base funding located at the top of Column 12 into six even amounts for each of the PSAs.
Column 13	State "Base" funds are evenly divided amongst the 6 PSAs. Column 13 is used to record the total state base funding located at the top of Column 13 into six even amounts for each of the PSAs.
Column 14	Federal Funds multiplied by the Weighted Percentage: Column 14 shows the distribution of the remaining federal funds after the "base" was distributed. The remaining federal funding is located at the top of Column 14 and is multiplied by each "Weighted At Risk Percentage" in Column 11 to determine the appropriate distribution.
Column 15	State Funds multiplied by the Weighted Percentage: Column 15 shows the distribution of the remaining state funds after the "base" was distributed. The remaining state funding is located at the top of Column 15 and is multiplied by each "Weighted At Risk Percentage" in Column 11 to determine the appropriate distribution.
Column 16	Column 16 shows the total federal and state distribution and is a total of Columns 12, 13, 14 and 15.

Service Eligibility: “older individual” or “older persons” refers to an individual 60 years of age or older. OAA 102(a)(40) and Idaho Code Title 67-5006(4).

Developed by: ICOA in consultation with State Plan Steering Committee, AAAs, ICOA Commissioners and feedback from the Public. OAA 305(a)(2)(C).

Funding Source: OAA and SSA funds.

**Idaho Commission on Aging
Title III, Title VII, and State Funding Allocation Summary
State Fiscal Year 2021**

AAA 3

Budget Period: 7/1/20 to 6/30/21

	Base FY21 Allocation	ACL Award (7/31/20)	FY20 Carryover (8/10/20)	Budget Transfer 8/25/20	Adjusted FY21 Allocation
	2,073,994				
Title III: Area Plan Administration	207,399	6,746	27,449	-	241,595
Title III-B: Supportive Services	515,571	17,098	113,979		646,647
Title III-C1: Congregate Meals	697,026	17,486	333,173		1,047,685
Title III-C2: Home-Delivered Meals	364,065	14,279	8,813		387,157
Title III-D: Disease Prevention	37,677	2,032	9,611		49,321
Title III-E: Family Caregiver Support	252,255	9,818	62,750		324,823
Total Title III Funding:	2,073,994	67,459	555,775	-	2,697,228
Total Title VII Funding:	39,842	332	-		40,174
FFCRA Admin	-	-	36,423		36,423
FFCRA Title III-C1 Congregate Meals	-	-	-		-
FFCRA Title III-C2 Home Delivered Meals	-	-	-		-
Total Families First Funding:	-	-	36,423	-	36,423
CARES AAA Admin	-		129,656		129,656
CARES Act III-B	-		156,484	(146,573)	9,911
CARES Act III-C	-		261,190	146,573	407,763
CARES Act III-E	-		-		-
CARES Act VII-Ombudsman	-		1,722		1,722
Total CARES Act Funding:	-	-	549,051	-	549,051
Total Federal Funding:	2,113,835	67,791	1,141,249	-	3,322,876
Title III: State Admin Match	116,226	-	-		116,226
Title III: State Services Match	825,562	-	-		825,562
FFCRA: State Match	14,222	-	-		14,222
CARES: State Match	-	-	-		-
Adult Protective Services	348,466	-	-		348,466
Total State Funding:	1,304,475	-	-	-	1,304,475
Total Funding From All sources:	3,418,311	67,791	1,141,249	-	4,627,351

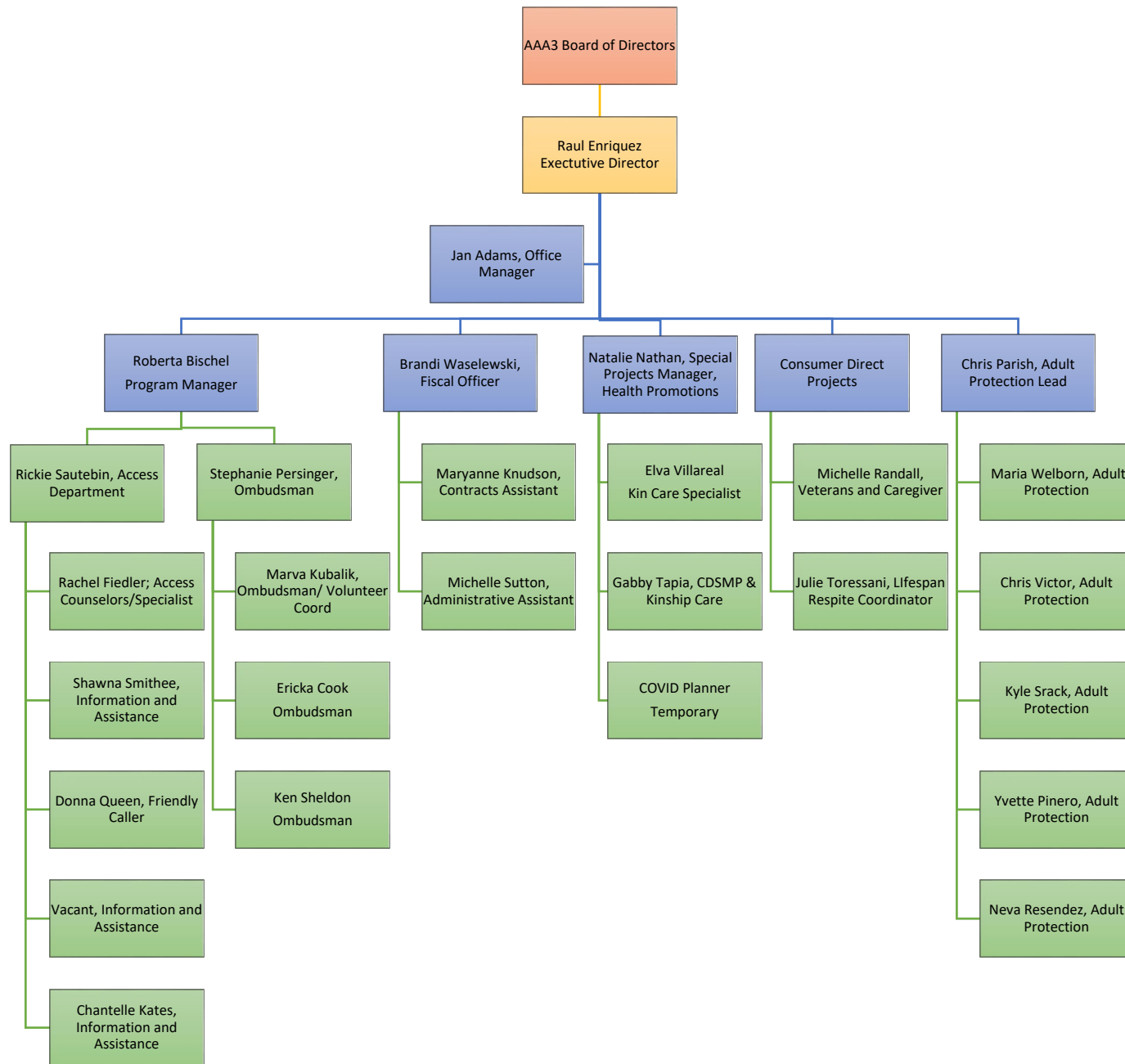
Note 1: Title III and VII Federal funding projections for SFY 2021 are based on the most recent ACL award dated 1/31/2020.

Note 2: Unused FFCRA funds at 7/1/2020 will be carried over to SFY21.

Note 3: Unused CARES Act funds at 7/1/2020 will be carried over to SFY21.

Note 4: Base State Funding includes Governor's 5% holdback for SFY21.

Note 5: Base APS allocation is equal to FY20.



Attachment H

PSA Advisory Council Profile

In Accordance with Section 306 (a)(6)(D) of the Older Americans Act and IDAPA 15.01.20.051.01, the Area Agency on Aging (AAA) shall establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan. More than fifty (50) percent of the advisory council shall consist of people 60 years old or older. (CFR 45 Section 1321.57)

Advisory Council Member's Name: <u>Debra Mueller</u>										
County of Residence: <u>Ada County</u>										
Beginning Term Date: <u>08/01/2017</u>										
Ending Term Date: <u>07/31/2019</u>										
Select <u>all</u> Categories that the Council Member Represents										
Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
									X	

Advisory Council Member's Name: <u>Dolly Baughman</u>										
County of Residence: <u>Ada County</u>										
Beginning Term Date: <u>08/01/2017</u>										
Ending Term Date: <u>07/31/2019</u>										
Select <u>all</u> Categories that the Council Member Represents										
Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
X	X									X

Advisory Council Member's Name: <u>Grant Jones</u>										
County of Residence: <u>Ada County</u>										
Beginning Term Date: <u>08/01/2017</u>										
Ending Term Date: <u>07/31/2019</u>										
Select <u>all</u> Categories that the Council Member Represents										
Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
X						X				

Advisory Council Member's Name: <u>John O'Keefe</u>										
County of Residence: <u>Ada County</u>										

Beginning Term Date: 08/01/2017

Ending Term Date: 07/31/2019

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
						X	X			

Advisory Council Member's Name: Karin Hoffer

County of Residence: Ada County

Beginning Term Date: 08/01/2017

Ending Term Date: 07/31/2019

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
X	X		X							X

Advisory Council Member's Name: Kelly Aberasturi

County of Residence: Owyhee

Beginning Term Date: 08/01/2017

Ending Term Date: 07/31/2019

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
X			X					X		

Advisory Council Member's Name: Lana McCollough

County of Residence: Ada County

Beginning Term Date: 08/01/2019

Ending Term Date: 07/31/2021

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
X		X								

Advisory Council Member's Name: Liz Mummey

County of Residence: Ada County

Beginning Term Date: 08/01/2019

Ending Term Date: 07/31/2021

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
x		X			x					

Advisory Council Member's Name: Patti Williams

County of Residence: Ada County

Beginning Term Date: _____

Ending Term Date: _____

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
				X						

Advisory Council Member's Name: Kristen Tracy

County of Residence: Ada County

Beginning Term Date: _____

Ending Term Date: _____

Select all Categories that the Council Member Represents

Eligible Participant (60 or older)	Participates in OAA Program	Minority	Resides in Rural Area	Family Caregiver	Represents Older Individual/s	Service Provider	Business Community	Local Elected Official	Provider of Veterans Health Care	General Public
							X			

Basic Components of an Area-Wide Disaster Plan:

1. Name, title, and contact information of AAA person responsible for implementation of area's Disaster Plan:

NAME	TITLE/POSITION	TELEPHONE / EMAIL
Raul Enriquez, LSW	Executive Director	208-898-7070 raul.enriquez@a3ssa.com

2. Names, titles and duties of other AAA staff with Emergency Assignments:

NAME (AAA STAFF)	TITLE/POSITION	TELEPHONE	EMERGENCY ASSIGNMENT
Roberta Bischel	Program Manager & Adult Protective Services Supervisor	208-898-7079 Roberta.bischel@a3ssa.com	Full agency staff coordination/supervision; emergency service provider point of contact; communications and community liaison
Brandi Waselewski	Fiscal and Contracts Manager	208-898-7077 brandi.waselewski@a3ssa.com	Admin and staff support; contract/service provider coordination and point of contact
Rickie Suatebin	Information and Assistance (I&A) Senior Services Specialist (SSS) and Supervisor	208-898-9872 Rickie.sautebin@a3ssa.com	SSS Services and I&A staff supervision; Assist Program Manager with staff I&A coordination; community resource expert;
Michelle Randall, LSW	Veterans Care Advisor	208-898-7063 michelle.randall@a3ssa.com	SSS Services with the following additional skills: Licensed Social Worker w/ 14 years field experience in case management and resource brokering
Stephanie Persinger	Ombudsman Supervisor	208-898-7069 Stephanie.persinger@a3ssa.com	Ombudsman advocacy for vulnerable adults residing in facilities with the following additional skills: Licensed Social Worker with broad direct practice experience; well-developed outdoor survival skills