

2019 Area Plan Update



Area VI – Eastern Idaho Area Agency on Aging Eastern Idaho Community Action Partnership

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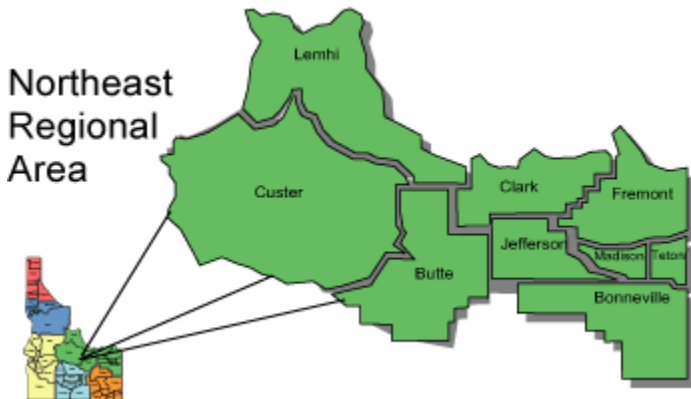
Information and Referral Phone Number: 208-522-5391 or 1-800-632-4813

Website – <http://www.eastidahoaging.com>

Email – seniors@eicap.org

Counties – *Bonneville, Butte, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, Teton*

PSA VI



Geographic Information:

The region in PSA VI covers 19,330 square miles in nine eastern-most counties in the state: Bonneville, Butte, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, and Teton. The AAA serving PSA VI operates out of Idaho Falls and is part of Eastern Idaho Community Action Partnership. From the high plains of Bonneville County to the mountainous terrain of Lemhi County, the region's topography is diverse. PSA VI borders Wyoming near Yellowstone National Park and the Teton Mountains.

Demographic Information:

Based on the 2017 American Community Survey Estimates, the total population in PSA VI was 221,179 of which 40,013 (18.1%) individuals were over the age of 60. Idaho Falls is the largest city. 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 40,710.

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	\$0
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$45,970	\$62,140	\$108,110
SFY 2019 (July 2018 – June 2019) Actual	\$45,941	\$74,928	\$120,869
SFY 2020 (July 2019 – June 2020) Budget	\$46,428	\$70,257	\$116,685

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	\$0
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$0
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$22,644	\$22,644
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$23,047	\$23,047
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$23,518	\$23,518

SFY 2019 Coordination and Planning Activities:

1. Coordinate with Area V Agency on Aging through the VD-HCBS, and other community partners to identify and increase services for Veterans.
2. Coordinate with TRPTA and other transportation providers to identify gaps in transportation services and work with those providers, community partners, senior centers, etc. to fulfill unmet needs.
3. Continue to expand the “Operation Red File Project” and work towards bringing that as a resource to our nine county PSA.
4. Participate and coordinate with local community partners for the incontinence supply program for low-income seniors in order to assist with needed incontinence supplies.
5. We intend to explore opportunities to apply for additional funding through local community grants, the Idaho Community Foundation, and other resources to sustain our senior programs.

Identify Outcomes/Successes for previous plan (2019): We were able to make progress in each of the five planning activities listed above. We continue to work with Area V and provide referrals as appropriate to the VD-HCBS program. Unfortunately, TRPTA closed their doors at the end of April 2019, so we have been working with other local providers to help fill this unmet need. We were able to expand “Operation Red File” to the upper valley counties that we serve, which include Jefferson, Madison, Fremont, and Teton. We have gratefully received grant funding through Regence Blue Shield to expand our incontinence supply program. We continue to explore additional funding opportunities in order to sustain the shortfall in resources that we continue to experience each year in our administration funds. All these goals will be continued into SFY 2020.

SFY 2020 Coordination and Planning Activities:

1. Continue to coordinate with Area V Agency on Aging through the VD-HCBS, and other community partners to identify and increase services for Veterans.
2. Coordinate with local transportation providers to identify gaps in transportation services and work with those providers, community partners, senior centers, etc. to fulfill unmet needs.
3. Continue to expand the “Operation Red File Project” and work towards bringing that as a resource to our nine county PSA.
4. Participate and coordinate with local community partners for the incontinence supply program for low-income seniors in order to assist with needed incontinence supplies.
5. We intend to explore opportunities to apply for additional funding through local community grants, the Idaho Community Foundation, and other resources to sustain our senior programs.

<p>1: Transportation Objective: To utilize best available data and resources from current transportation systems to maximize available services to older individuals.</p>
<p>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.</p>
<p>Service Eligibility: Individual 60 years of age or older.</p>

Service Implemented by:			
Provider Name	Address	Phone Number	Service Hours
Ashton Senior Center	522 Main Street, Ashton, ID 83420	208-652-3594	Thurs. & Fri. (Times are based on demand)
Challis Senior Center	695 Challis Creek Rd., Challis, ID 83226	208-879-6338	Mon., Wed., Fri. (Times are based on demand)
Lemhi Co. Economic Development Association (LCEDA)	803 Monroe St. Salmon, ID 83467	208-756-1875	Mon.-Fri. 9am-5pm
Mackay Senior Center	301 Cedar Ave., Mackay, ID 83251	208-588-2105	Mon. & Fri. (Times are based on demand)
Madison Co. Senior Center	41 S 2nd W. / PO Box 361 Rexburg, ID 83440	208-356-0080	Mon.-Fri. (Times are based on demand)
South Fremont Senior Citizens, Inc.	420 N. Bridge St. Ste. D., Saint Anthony, ID 83445	208-624-3458	Mon.-Thurs. (Times are based on demand)
Road Runner Shuttle, LLC	2740 Vesta Circle Idaho Falls, ID 83402	208-359-1100	Mon.-Sat. (Times are based on demand)
En Route Transportation	3144 Tipperary Lane Idaho Falls, ID 83404	208-227-6321	Mon-Fri. 8am-5:30pm
CT Transportation	6579 E. 113 N. Idaho Falls, ID 83404	208-569-2965	Mon-Fri. (Times are based on demand)
Qualicare, Inc.	3539 Briar Creek, Ste. A Ammon, ID 83406	208-542-1388	Mon.-Fri. 7 AM-6 PM (Only serving current HMK/Chore/Respite customers for transportation)

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

State Fiscal Year (SFY)	State	Federal	Total
SFY 2016 (July 2015 – June 2016) Actual	\$60,088	\$4,929	\$65,017
SFY 2017 (July 2016 – June 2017) Actual	\$66,528	\$0	\$66,528
SFY 2018 (July 2017 – June 2018) Actual	\$55,957	\$5,522	\$61,479
SFY 2019 (July 2018 – June 2019) Actual	\$52,502	\$0	\$52,502
SFY 2020 (July 2019 – June 2020) Budget	\$47,966	\$60	\$48,026

A. Transportation Service Delivery Strategy: Identify best practices in conjunction with local transportation service providers, public transportation agencies, and other local government agencies that result in increased service provision in our 9 county PSA.

Performance Measure:

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

Baseline:

State Fiscal Year (SFY)	Annual Boardings	Average Cost per Boarding	Consumer Satisfaction %
SFY 2016 (July 2015 – June 2016) Actual	28,419	\$2.29	Not Available

SFY 2017 (July 2016 – June 2017) Actual	25,148	\$2.65	Not Available
SFY 2018 (July 2017 – June 2018) Actual	24,908	\$2.47	Not Available
SFY 2019 (July 2018 – June 2019) Actual	19,949	\$2.63	Not Available
SFY 2020 (July 2019 – June 2020)			

Benchmark:

- Increase total number of boardings by 2% annually and specifically focus on increasing boardings in our rural and underserved counties.
- Using standardized consumer satisfaction will be at 85% or higher.

B. Transportation Coordination Strategy: Coordinate with local transportation service providers, senior centers, public transportation agencies, and other local government agencies to identify ways to improve access to senior transportation information and resources.

Performance Measure: Transportation information access points for seniors located in each of the 9 counties in our PSA.

Baseline:

County	Current Senior Transportation Providers/Transportation Information Access Points
Bonneville	En Route Transportation, CT Transportation, Road Runner Shuttle, LLC, Qualicare, Inc.
Butte	NONE
Clark	NONE
Custer	Challis Senior Center, Mackay Senior Center
Fremont	Ashton Senior Center, South Fremont Senior Center, Road Runner Shuttle, LLC, CT Transportation
Jefferson	Road Runner Shuttle, LLC, CT Transportation
Madison	Madison Senior Center, Road Runner Shuttle, LLC, CT Transportation
Lemhi	Lemhi Co Economic Development Association (LCEDA), Salmon Senior Center
Teton	None

Benchmark: Identify additional senior transportation information/resource access points to counties that are currently underserved.

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:

Provider Name	Address	Phone Number	Service Hours
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Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm
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Funding Source: (Actual expenditures for completed year 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	\$2,290	\$2,290
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$9,383	\$9,383
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$8,477	\$8,477
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$6,252	\$6,252
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$4,539	\$4,539

A. Outreach Service Delivery Strategy: Identify best practice through tracking core performance data for each OAA Core service prior to and for a period after outreach events to see if outreach was successful. Each outreach activity should emphasis reaching the six target areas:

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

Performance Measure: Outreach units for each OAA service.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>One-to-one Contacts</u>
SFY 2016 (July 2015 – June 2016) Actual	2,096
SFY 2017 (July 2016 – June 2017) Actual	2,562
SFY 2018 (July 2017 – June 2018) Actual	2,922
SFY 2019 (July 2018 – June 2019) Actual	4,460
SFY 2020 (July 2019 – June 2020)	

Benchmark: Target outreach to specific services based on performance data. Outreach efforts must show a direct impact to the targeted service.

A. Outreach Coordination Strategy: Coordinate efforts with local community partners to increase “access to” and “participation in” OAA core services.

Performance Measure: Local level partner for each OAA core service.

Baseline:

<u>Service</u>	<u>Partner</u>
Transportation	Road Runner Shuttle, LLC, CT Transportation, Lemhi Rides, Senior Centers/Meal Sites
Homemaker	Contracted In-Home Providers, Home Health Agencies, Idaho Department of Health & Welfare.
National Family Caregiver Support Program: Respite, Caregiver Support Groups, Caregiver Evidence Based Program—Powerful Tools for Caregivers	AAA VI, Idaho Department of Health & Welfare.

Chore	Contracted In-Home Providers
Minor Home Modification	Eastern Idaho Community Action Partnership, LIFE, Inc.
Legal Assistance	Idaho Legal Aid, Senior Legal Aid Hotline
Evidence Based Programs	AAA VI, Qualis Health, Idaho Falls Senior Center, Eastern Idaho Public Health, Lions Club
Congregate Meals	Senior Centers/Meal Sites
Home Delivered Meals	Senior Centers/Meal Sites
Disease Prevention Health Promotions	AAA VI, Qualis Health, Idaho Falls Senior Center, Eastern Idaho Public Health, Lions Club

Benchmark:

- Identify additional local partners that the AAA can provide information to in order to increase the overall utilization of core OAA services.
- Target outreach to specific OAA services based on performance data.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

Funding Source: (Actual expenditures for completed year 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	\$114,104	\$114,104
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$99,206	\$99,206
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$88,100	\$88,100
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$93,596	\$93,596
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$113,153	\$113,153

A. I&A Service Delivery Strategy: Utilize performance data from our PSA to increase both the efficiency and effectiveness of I&A services.

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 Staff</u>
SFY 2016 (July 2015 – June 2016) Actual	6,973	\$16.36	2.09	278
SFY 2017 (July 2016 – June 2017) Actual	4,271	\$23.23	1.67	213
SFY 2018 (July 2017 – June 2018) Actual	3,660	\$24.07	1.67	183
SFY 2019 (July 2018 – June 2019) Actual	4,560	\$20.53	1.55	245
SFY 2020 (July 2019 – June 2020)			2.26	

Benchmark: Increase the number of I&A contacts by 3% each year.

B. I&A Coordination Strategy: Coordinate with local community partners in our PSA to increase awareness of I&A services as well as distribute brochures and other literature informing community members and service providers of I&A and other AAA services.

Performance Measure: Increase number of local community partners to provide access to long-term care I&A resources and supports.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>SFY 2016 (July 2015-June 2016) Community Partners</u>	<u>SFY 2017 (July 2016-June 2017) Community Partners</u>	<u>SFY 2018 (July 2017-June 2018) Community Partners</u>	<u>SFY 2019 (July 2018-June 2019) Community Partners</u>	<u>SFY 2020 (July 2019-June 2020) Community Partners</u>
Bonneville	15	16	16	17	
Butte	7	7	7	7	
Clark	2	2	2	2	
Custer	9	9	9	9	
Fremont	10	10	11	11	
Jefferson	13	13	13	13	
Lemhi	9	9	9	9	
Madison	11	11	12	13	
Teton	8	8	9	9	

Benchmark: Identify additional community partners, especially in counties that are underserved by I&A and other AAA services.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

Funding Source: Federal: Administration for Community Living (ACL), and the State of Idaho.

(Actual expenditures for completed year 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) Budget	\$0	\$0	\$0

A. Case Management Service Delivery Strategy: Utilize AAA supervisory staff for those cases where no other Case Management service is available, and an individual is unable to manage multiple services for themselves. If Case Management is needed, cost and corresponding units of service will be accounted for under case management.

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)				

Benchmark: Account for Case Management Cost and Units provided by the AAA.

B. Case Management Coordination Strategy: Establish Case Management protocols with providers who serve the following: individuals with disabilities (Center for Independent Living, Idaho Department of Health & Welfare), Veterans (Veterans Service Officer), and Facility Residents (discharge planners) to ensure that seniors and individuals with disabilities are being referred to the correct provider.

Performance Measure:

- Local Protocols
- Referral List with specific type of Case Management services available

Baseline:

<u>Case Management Focus Area</u>	<u>Agency</u>	<u>Protocol In Place</u>
Disabilities	Center for Independent Living—LIFE. Inc., Idaho	No

	Department of Health & Welfare—Medicaid, Mental Health, Developmental Disability Crisis Team, Regional Medicaid Unit	
Veterans	Veterans Service Officer	No
Facility Residents	Idaho Home Choice—LIFE, Inc. and AAA	No

Benchmark: Each year increase Case Management referral resources and Protocols.

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:

- a. 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.
- b. 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.
- c. They are Adult Protective referrals and homemaker service is being requested as a component of a Supportive Service Plan (SSP) to remediate or resolve an adult protective complaint.
- d. They are home health service or hospice clients who may be eligible for emergency homemaker service.

Service Implemented by:

Provider Name	Address	Phone Number	Service Hours
Rockwell Care (formerly Senior Care)	359 E Main St, Ste. 4 American Fork, UT 84003	801-642-2665	Mon.-Fri. 8:30 AM-5 PM
All Heart Home Care, LLC	211 S Woodruff, Ste. B-1 Idaho Falls, ID 83401	208-542-5100	Mon.-Fri. 8 AM-4 PM
First Choice Home Care	1680 Elk Creek Drive Ammon, ID 83406	208-227-0478	Mon.-Fri. 8 AM-5 PM
Gables In-Home Care (formerly Lifestyles)	3767 Professional Way Idaho Falls, ID 83402	208-569-9160	Mon.-Fri. 8 AM-5 PM
Personal Home Care, LLC	PO Box 52 Mackay, ID 83251	208-588-2302	Mon.-Fri. 8 AM-5 PM
Premium Choice Homecare, Inc.	1675 Curlew Drive Ammon, ID 83406	208-932-3798	Mon.-Fri. 8 AM-5 PM
Qualicare, Inc.	3539 Briar Creek, Ste. A Ammon, ID 83406	208-542-1388	Mon.-Fri. 7 AM-6 PM
Assisting Hands Home Care	5700 E. Franklin Rd. #105 Nampa, ID 83687	208-756-1349	Mon.-Fri. 8 AM-5 PM
Angelic Personal Home Care	3885 Stein Creek Circle, Idaho Falls, ID 83401	208-220-4505	Mon.-Fri. 8am-5pm

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

State Fiscal Year (SFY)	State	Federal	Total

SFY 2016 (July 2015 – June 2016) Actual	\$74,493	\$9,794	\$84,287
SFY 2017 (July 2016 – June 2017) Actual	\$78,366	\$1	\$78,367
SFY 2018 (July 2017 – June 2018) Actual	\$56,284	\$4,748	\$61,032
SFY 2019 (July 2018 – June 2019) Actual	\$26,895	\$44,095	\$70,990
SFY 2020 (July 2019 – June 2020) Budget	\$49,896	\$18,299	\$68,195

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: Utilize performance data from our PSA to increase the efficiency, effectiveness, and quality of Homemaker services.

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.
- Quality=Consumer Satisfaction

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	161	5,765	\$14.62	36	\$523.52
SFY 2017 (July 2016 – June 2017) Actual	155	5,352	\$14.64	35	\$505.59
SFY 2018 (July 2017 – June 2018) Actual	150	4,324	\$14.11	29	\$406.88
SFY 2019 (July 2018 – June 2019) Actual	192	4,744	\$14.96	25	\$369.74
SFY 2020 (July 2019 – June 2020)					

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)	12,731/33,677 =38%	59/163 =36%	1,430/33,677 =4%	65/163 =40%	5,041/33,677 =15%	115/163 =71%
SFY 2017 (July 2016 – June 2017)	12,731/33,677=38%	61/155=0.39%	1,430/33,677 =4%	85/155=55%	5,041/33,677 =15%	139/155=89%
SFY 2018 (July 2017 – June 2018)	14,041/36,922=38%	47/150=31%	1,532/36,922=4%	72/150=48%	5,811/36,922=16%	132/150=88%
SFY 2019 (July 2018 – June 2019)	14,634/38,467=38%	54/192=28%	1,722/38,467=4%	101/192=53%	6,127/38,467=16%	143/192=74%
SFY 2020 (July 2019 – June 2020)						

*Greatest Economic Need: 65 or older living in Poverty

**Greatest Social Need: 65 or older living alone

<p>Benchmark:</p> <ul style="list-style-type: none"> Maintain standard number of maximum Homemaker units per month per consumer. Increase total number of Homemaker consumers by 5% annually. Maintain or exceed the number of at-risk consumers identified in the above demographic baseline. Using ACL's POMP, consumer satisfaction will be at 85% or higher.
<p>B. Homemaker Coordination Strategy: Establish standardized service units and cost-sharing parameters through coordination and collaboration with ICOA and the other AAA's.</p>
<p>Performance Measure: Establish service unit and cost sharing standards.</p>
<p>Baseline:</p> <ul style="list-style-type: none"> AAA VI currently has a maximum of 5 hours per month per consumer. Current cost-share starts at 100% of poverty.
<p>Benchmark:</p> <ul style="list-style-type: none"> Implement established service unit and cost-sharing standards for Homemaker services.

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:

Provider Name	Address	Phone Number	Service Hours
Rockwell Care (formerly Senior Care)	359 E Main St, Ste. 4 American Fork, UT 84003	801-642-2665	Mon.-Fri. 8:30 AM-5 PM
All Heart Home Care, LLC	211 S Woodruff, Ste. B-1 Idaho Falls, ID 83401	208-542-5100	Mon.-Fri. 8 AM-4 PM
First Choice Home Care	1680 Elk Creek Drive Ammon, ID 83406	208-227-0478	Mon.-Fri. 8 AM-5 PM
Gables In-Home Care (formerly Lifestyles)	3767 Professional Way Idaho Falls, ID 83402	208-569-9160	Mon.-Fri. 8 AM-5 PM
Personal Home Care, LLC	PO Box 52 Mackay, ID 83251	208-588-2302	Mon.-Fri. 8 AM-5 PM
Premium Choice Homecare, Inc.	1675 Curlew Drive Ammon, ID 83406	208-932-3798	Mon.-Fri. 8 AM-5 PM
Qualicare, Inc.	3539 Briar Creek, Ste. A Ammon, ID 83406	208-542-1388	Mon.-Fri. 7 AM-6 PM
Assisting Hands Home Care	5700 E. Franklin Rd. #105 Nampa, ID 83687	208-756-1349	Mon.-Fri. 8 AM-5 PM
Angelic Personal Home Care	3885 Stein Creek Circle, Idaho Falls, ID 83401	208-220-4505	Mon.-Fri. 8am-5pm

Funding Source: (Actual expenditures for completed year and Budget for current year) Note, if AAA only refers consumers to other organization and does not fund this service, place N/A (Not Applicable) in SFY16 and SFY17 below.

<u>State Fiscal Year (SFY)</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>
SFY 2016 (July 2015 – June 2016) Actual	\$986	\$0	\$986
SFY 2017 (July 2016 – June 2017) Actual	\$653	\$0	\$653
SFY 2018 (July 2017 – June 2018) Actual	\$657	\$120	\$777
SFY 2019 (July 2018 – June 2019) Actual	\$2,071	\$0	\$2,071
SFY 2020 (July 2019 – June 2020) Budget	\$1,650	\$0	\$1,650

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: Expand chore service in our PSA through our contracts with service providers.

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	Contract	7	338	\$2.92
SFY 2017 (July 2016 – June 2017) Actual	Contract	6	44	\$14.84
SFY 2018 (July 2017 – June 2018) Actual	Contract	7	52	\$14.94
SFY 2019 (July 2018 – June 2019) Actual	Contract+Referral	15	134.3	\$15.42
SFY 2020 (July 2019 – June 2020)				

Benchmark: Increase the number of chore consumers by at least 2 annually.

B. Chore Coordination Strategy: Coordinate with local community partners, service providers, and contracted providers in our PSA to increase awareness and utilization of Chore services.

Performance Measure: Increased awareness and overall utilization of Chore services via referrals to AAA.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Number of Chore Referrals received by AAA</u>
SFY 2016 (July 2015 – June 2016)	N/A
SFY 2017 (July 2016 – June 2017)	6
SFY 2018 (July 2017 – June 2018)	6
SFY 2019 (July 2018 – June 2019)	8

SFY 2020 (July 2019 – June 2020)

Benchmark: Increase the number of Chore service referrals to the AAA by 2 annually.

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:

- Eastern Idaho Community Action Partnership, 935 E. Lincoln Rd. Idaho Falls, ID 83401, 208-522-5391, Mon.-Fri. 8 AM-4:30 PM
- LIFE, Inc., 250 S Skyline Dr. # 1, Idaho Falls, ID 83402, 208-529-8610, Mon.-Fri. 8 AM-5 PM
- Good Samaritan, 825 Whittier Cir. Idaho Falls, ID 83401, 208-522-0577, Mon.-Fri. 9 AM-5 PM

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

<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) 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: Expand Minor Home Modifications through community 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	Not

			Applicable	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)	Referral	Not Applicable	Not Applicable	Not Applicable

Benchmark: Increase the number of home modification referrals by 3% annually.

B. Minor Home Modification Coordination Strategy: Coordinate with service providers to meet the need of minor home modification.

Performance Measure: The number of identified minor home modification providers/referral sources.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Minor Home Modification Providers</u>
SFY 2016 (July 2015 – June 2016)	EICAP, LIFE, Inc.
SFY 2017 (July 2016 – June 2017)	EICAP, LIFE, Inc. Good Samaritan
SFY 2018 (July 2017 – June 2018)	EICAP, LIFE, Inc., Good Samaritan
SFY 2019 (July 2018 – June 2019)	EICAP, LIFE, Inc., Good Samaritan
SFY 2020 (July 2019 – June 2020)	

Benchmark: Identify at least 2 additional minor home modification providers/referral sources annually.

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:

- Idaho Legal Aid Services, 482 Constitution Way # 101, Idaho Falls, ID 83402, (208) 524-3660

Funding Source: (Actual expenditures for completed year 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	\$8,168	\$8,168
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$10,178	\$10,178
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$7,988	\$7,988
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$12,271	\$12,271
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$9,100	\$9,100

A. Legal Assistance Service Delivery Strategy: Establish consistent system to track legal assistance data for our PSA in order to increase efficiency and effectiveness of service delivery.

Performance Measure:

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

Baseline:

Older Americans Act Service Priority	SFY16 Cases	SFY17Cases	SFY18 Cases	SFY19 Cases	SFY20 Cases
Income	6	9	8	21	
Health Care	16	8	13	19	
Long-term care	11	6	5	8	
Nutrition	0	0	0	0	
Housing	7	4	8	17	
Utilities	0	0	0	0	
Protective Services	0	0	0	0	
Defense of Guardianship	0	1	5	12	
Abuse	0	0	0	0	
Neglect	0	0	0	0	
Age Discrimination	0	1	0	0	
Total	40	29	39	77	

Older Americans Act Service Priority	SFY16 Hours	SFY17 Hours	SFY18 Hours	SFY19 Hours	SFY20 Hours
Income	14.8	33.5	6.6	51.9	
Health Care	43.5	30.8	18.3	28.1	
Long-term care	15.7	21.7	7	15.1	
Nutrition	0	0	0	0	
Housing	16.2	13.9	22.9	32.7	
Utilities	0	0	0	0	
Protective Services	0	0	0	0	
Defense of Guardianship	0	14.8	70.4	32.1	
Abuse	0	0	0	0	
Neglect	0	0	0	0	
Age Discrimination	0	1.8	0	0	
Total	90.2	116.5	125.2	159.9	

SFY16: State Fiscal Year, July 1, 2015 – June 30, 2016

SFY17: State Fiscal Year, July 1, 2016 – June 30, 2017

SFY18: State Fiscal Year, July 1, 2017 – June 30, 2018

SFY19: State Fiscal Year, July 1, 2018 – June 30, 2019

SFY20: State Fiscal Year, July 1, 2019 – June 30, 2020

Benchmark:

- Ability to track types and categories of legal assistance billed to the AAA in order to ensure service delivery compliance.

B. Legal Assistance Coordination Strategy: Coordinate efforts with ICOA and local Idaho Legal Aid Services to promote awareness and increase the utilization of the Senior Legal Hotline.

Performance Measure: The number of calls received by the Idaho Senior Legal Hotline.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Number of calls received by the Idaho Senior Legal Hotline in PSA VI</u>
SFY 2016 (July 2015 – June 2016)	Unknown
SFY 2017 (July 2016 – June 2017)	Unknown
SFY 2018 (July 2017 – June 2018)	Unknown
SFY 2019 (July 2018 – June 2019)	Unknown
SFY 2020 (July 2019 – June 2020)	

Benchmark: Increase the number of calls received by the Idaho Senior Legal Hotline in our PSA by 5% annually.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Ashton Senior Center	522 Main Street / PO Box 806 Ashton, ID 83420	208-652-3594	Mon., Tues., Thurs. & Fri. 12 Noon
Challis Senior Center	695 Challis Cr Rd / PO Box 997 Challis, ID 83226	208-879-6338	Mon., Wed., Fri. 12 Noon
Idaho Falls Senior Center	535 W 21st St Idaho Falls, ID 83402	208-522-4357	Mon.-Fri. 12 Noon
Lost River Senior Center	555 S Water Street Arco, ID 83213	208-527-8296	Mon.-Fri. 12 Noon
Mackay Senior Citizens Inc.	PO Box 413 Mackay, ID 83251	208-588-2105	Mon. & Fri. 12 Noon
Madison Co Senior Citizens Assoc., Inc.	41 S 2nd W / PO Box 361 Rexburg, ID 83440	208-356-0080	Mon.-Fri. 12 Noon

Rigby Senior Center	392 Community Lane / PO Box 525 Rigby, ID 83442	208-745-8211	Mon.-Fri. 12 Noon
Ririe Senior Citizens Center	395 Main Street Ririe, ID 83443	208-538-7313	Tues. & Fri. 12 Noon
Salmon Nutrition Site, Inc.	200 Main Street Salmon, ID 83467	208-756-3556	Mon., Wed., Fri. 1pm
Senior Citizens of Teton County, Inc.	60 S Main St / PO Box 871 Driggs, ID 83422	208-354-6973	Mon., Tues., Thurs. 12 Noon
South Fremont Senior Citizens, Inc.	420 N Bridge St, Ste. D Saint Anthony, ID 83445	208-624-3458	Mon.-Thurs. 12 Noon
West Jefferson Senior Citizens	1075 E 1500 N / PO Box 25 Mud Lake, ID 83450	208-663-4916	Mon. & Wed. 12 Noon

Funding Source: (Actual expenditures for completed year 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	\$124,038	\$124,038
SFY 2017 (July 2016 – June 2017) Actual	\$17,854	\$97,731	\$115,585
SFY 2018 (July 2017 – June 2018) Actual	\$25,264	\$79,804	\$105,068
SFY 2019 (July 2018 – June 2019) Actual	\$20,334	\$86,754	\$107,088
SFY 2020 (July 2019 – June 2020) Budget	\$13,800	\$235,573	\$249,373

A. Congregate Meal Service Delivery Strategy: Increase senior participation at current senior centers/meal sites and particularly in our rural counties that are underserved.

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	998	51,198	\$2.42	\$2.30
SFY 2017 (July 2016 – June 2017) Actual	1,081	53,418	\$2.16	\$2.30
SFY 2018 (July 2017 – June 2018) Actual	1,080	43,657	\$2.41	\$2.30
SFY 2019 (July 2018 – June 2019) Actual	1,137	44,020	\$2.43	\$2.30
SFY 2020 (July 2019 – June 2020)				

*Cost includes AAA wages, nutritionist and provider reimbursement.

<u>State Fiscal Year (SFY)</u>	<u>Average *Provider Cost per Meal</u>	<u>Current AAA Contracted Meal Reimbursement Rate</u>	<u>Average Program Income per Consumer</u>	<u>Consumer Satisfaction %</u>

SFY 2016 (July 2015 – June 2016)	\$ Unknown	\$ 2.30	\$ 125.26	N/A
SFY 2017 (July 2016 – June 2017)	\$ Unknown	\$ 2.30	\$ 58.01	N/A
SFY 2018 (July 2017 – June 2018)	\$ Unknown	\$2.30	\$ 108.61	N/A
SFY 2019 (July 2018 – June 2019)	\$ 8.62	\$2.30	\$ 121.18	N/A
SFY 2020 (July 2019 – June 2020)	\$	\$	\$	

*Provider Meal Cost Include: Food, Supplies, Labor Cost, Overhead.

Benchmark:

- Increase total number of meals served by 1% annually.
- Using ACL’s POMP, consumer satisfaction will be at 80% or higher.

B. Congregate Meal Coordination Strategy: Conduct meetings with current senior center/meal sites and communities to determine possible ways to increase participation (activities, transportation, etc.). Coordinate meetings with local county officials, community partners, community members, etc. to explore the possibility of re-opening or establishing new meal sites.

Performance Measure:

- Meetings in each county that currently has a senior center/meal site as well as in counties that senior center/meal sites have closed or where new meal sites might be established.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>SFY 2016 (July 2015-June 2016)</u>	<u>SFY 2017 (July 2016-June 2017)</u>	<u>SFY 2018 (July 2017-June 2018)</u>	<u>SFY 2019 (July 2018-June 2019)</u>	<u>SFY 2020 (July 2019-June 2020)</u>
	<u>Meetings</u>	<u>Meetings</u>	<u>Meetings</u>	<u>Meetings</u>	<u>Meetings</u>
Bonneville	N/A	N/A	N/A	N/A	
Butte	N/A	N/A	N/A	N/A	
Clark	N/A	N/A	N/A	1	
Custer	N/A	N/A	N/A	N/A	
Fremont	N/A	N/A	N/A	N/A	
Jefferson	N/A	N/A	N/A	N/A	
Lemhi	N/A	N/A	N/A	N/A	
Madison	N/A	N/A	N/A	N/A	
Teton	N/A	N/A	N/A	N/A	
TOTAL:	0	0	0	1	

Benchmark:

- Increase total number of congregate meal consumers by 2% annually.
- Increase meal sites by at least 1 in PSA VI.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Ashton Senior Center	522 Main Street / PO Box 806 Ashton, ID 83420	208-652-3594	Mon., Tues., Thurs. & Fri. 12 Noon
Challis Senior Center	695 Challis Cr Rd / PO Box 997 Challis, ID 83226	208-879-6338	Mon., Wed., Fri. 12 Noon
Idaho Falls Senior Center	535 W 21st St Idaho Falls, ID 83402	208-522-4357	Mon.-Fri. 12 Noon
Lost River Senior Center	555 S Water Street Arco, ID 83213	208-527-8296	Mon.-Fri. 12 Noon
Mackay Senior Citizens Inc.	PO Box 413 Mackay, ID 83251	208-588-2105	Mon. & Fri. 12 Noon
Madison Co Senior Citizens Assoc., Inc.	41 S 2nd W / PO Box 361 Rexburg, ID 83440	208-356-0080	Mon.-Fri. 12 Noon
Rigby Senior Center	392 Community Lane / PO Box 525 Rigby, ID 83442	208-745-8211	Mon.-Fri. 12 Noon
Ririe Senior Citizens Center	395 Main Street Ririe, ID 83443	208-538-7313	Tues. & Fri. 12 Noon
Salmon Nutrition Site, Inc.	200 Main Street Salmon, ID 83467	208-756-3556	Mon., Wed., Fri. 1pm
Senior Citizens of Teton County, Inc.	60 S Main St / PO Box 871 Driggs, ID 83422	208-354-6973	Mon., Tues., Thurs. 12 Noon
South Fremont Senior Citizens, Inc.	420 N Bridge St, Ste. D Saint Anthony, ID 83445	208-624-3458	Mon.-Fri. 12 Noon

Funding Source: (Actual expenditures for completed year 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	\$123,707	\$154,690	\$278,397
SFY 2017 (July 2016 – June 2017) Actual	\$91,772	\$195,757	\$287,529
SFY 2018 (July 2017 – June 2018) Actual	\$138,307	\$165,149	\$303,456
SFY 2019 (July 2018 – June 2019) Actual	\$260,781	\$111,368	\$372,149
SFY 2020 (July 2019 – June 2020) Budget	\$77,087	\$119,523	\$196,610

A. Home Delivered Meal Service Delivery Strategy: Identify best practice for managing contracted providers in order to ensure all eligible consumers are served and that there are no 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 Meal</u>	<u>AAA Contracted HDM Reimbursement Rate</u>
SFY 2016 (July 2015 – June 2016) Actual	579	78,616	\$3.54	\$3.10
SFY 2017 (July 2016 – June 2017) Actual	689	91,214	\$3.15	\$3.10
SFY 2018 (July 2017 – June 2018) Actual	765	97,762	\$3.10	\$3.10
SFY 2019 (July 2018 – June 2019) Actual	809	112,265	\$3.31	\$3.25
SFY 2020 (July 2019 – June 2020) Budget				\$3.25

*Cost includes AAA wages, nutritionist and provider reimbursement.

<u>State Fiscal Year (SFY)</u>	<u>Average *Provider Cost per Meal</u>	<u>Current AAA Contracted Meal Reimbursement Rate</u>	<u>Average Program Income per Consumer</u>	<u>Consumer Satisfaction %</u>
SFY 2016 (July 2015 – June 2016)	\$ Unknown	\$ 3.10	\$ 176.92	N/A
SFY 2017 (July 2016 – June 2017)	\$ Unknown	\$ 3.10	\$ 164.71	N/A
SFY 2018 (July 2017 – June 2018)	\$ Unknown	\$ 3.10	\$ 143.20	N/A
SFY 2019 (July 2018 – June 2019)	\$ 8.11	\$ 3.25	\$ 193.00	N/A
SFY 2020 (July 2019 – June 2020)	\$	\$	\$	

- *Provider Meal Cost Include: Food, Supplies, Transportation, Labor Cost, Overhead.

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)	12,731/33,677 =38%	226/579 =39%	1,430/33,677 =4%	172/579 =30%	5,041/33,677 =15%	331/579 =57%
SFY 2017 (July 2016 – June 2017)	12,731/33,677=38%	288/689=42%	1,430/33,677 =4%	259/689=37%	5,041/33,677 =15%	361/689=52%
SFY 2018 (July 2017 – June 2018)	14,041/36,922=38%	320/765=42%	1,532/36,922=4%	266/765=35%	5,811/36,922=16%	385/765=50%
SFY 2019 (July 2018 – June 2019)	14,634/38,467=38%	304/809=%38%	1,722/38,467=4%	336/809=42%	6,127/38,467=16%	399/809=49%
SFY 2020 (July 2019 – June 2020)						

*Greatest Economic Need: 65 or older living in Poverty

**Greatest Social Need: 65 or older living alone

Benchmark:

- Ensure that there are no waiting lists and all eligible consumers are served.
- Maintain or exceed the number of at-risk consumers identified in the above demographic baseline.
- Using ACL’s POMP, consumer satisfaction will be at 85% or higher.

B. Home Delivered Meal Coordination Strategy: Coordinate with contracted providers (Senior Centers/Meal Sites) as well as with local community partners and service providers to identify consumers as well as their in-home family

caregivers who could most benefit from the Home Delivered Meal program.

Performance Measure: Number of registered home delivered meal consumers.

Baseline:

State Fiscal Year (SFY)	SFY 2016 (July 2015-June 2016)	SFY 2017 (July 2016-June 2017)	SFY 2018 (July 2017-June 2018)	SFY 2019 (July 2018-June 2019)	SFY 2020 (July 2019-June 2020)
	Number of Registered HDM Consumers	Number of Registered HDM Consumers	Number of Registered HDM Consumers	Number of Registered HDM Consumers	Number of Registered HDM Consumers
Ashton Senior Center	12	30	33	29	
Challis Senior Center	2	5	8	12	
Idaho Falls Senior Center	140	347	371	401	
Lost River Senior Center	6	29	34	32	
Mackay Senior Center	0	8	10	8	
Madison Co. Senior Citizens Assoc., Inc.	33	70	83	100	
Rigby Senior Center	27	61	67	59	
Ririe Senior Citizens Center	7	20	20	24	
Salmon Nutrition Site, Inc.	18	53	67	65	
Seniors West of the Tetons (SWOT)	12	6	7	14	
South Fremont Senior Citizens, Inc.	17	64	68	66	

Benchmark:

- Increase the number of registered home delivered meal consumers served by 2% annually.

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 the 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:

- Pam Wake with Qualis Health, schedule of DSMP classes can be found online at: <http://medicare.qualishealth.org/projects/everyone-with-diabetes-counts/diabetes-self-management-program-Idaho>
- Timalee Geiser, Eastern Idaho Public Health (schedule of Fit & Fall Proof Classes can be found by calling (208) 522-0310 Hollipark Dr., Idaho Falls, ID 83401, Mon.-Fri. 8 AM-12 Noon and 1 PM-5 PM.

Funding Source: (Actual expenditures for completed year 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	\$18,060	\$18,060
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$17,195	\$17,195
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$3,050	\$3,050
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$7,571	\$7,571
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$13,221	\$13,221

A. Disease Prevention and Health Promotion Service Delivery Strategy: Enhance current Evidence Based Programs (as approved by ACL and ICOA) for seniors in our 9 county PSA.

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>Evidence Based Program Expense</u>	<u>Total Unduplicated Clients</u>	<u>Average cost per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	\$2,755	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	Not Available	Not Available	Not Available
SFY 2019 (July 2018 – June 2019) Actual	Not Available	Not Available	Not Available
SFY 2020 (July 2019 – June 2020)			

Fit and Fall Proof Program

<u>State Fiscal Year (SFY)</u>	<u>Evidence Based Program Expense</u>	<u>Total Unduplicated Clients</u>	<u>Average cost per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	\$10,205	Not Available	Not Available

SFY 2017 (July 2016 – June 2017) Actual	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	Not Available	Not Available	Not Available
SFY 2019 (July 2018 – June 2019) Actual	Not Available	Not Available	Not Available
SFY 2020 (July 2019 – June 2020)			

Chronic Disease Self-Management Program

<u>State Fiscal Year (SFY)</u>	<u>Evidence Based Program Expense</u>	<u>Total Unduplicated Clients</u>	<u>Average cost per Client</u>
SFY 2016 (July 2015 – June 2016) Actual	Not Available	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	Not Available	Not Available	Not Available
SFY 2019 (July 2018 – June 2019) Actual	Not Available	Not Available	Not Available
SFY 2020 (July 2019 – June 2020)			

Benchmark: Increase the number of eligible consumers who participate in Evidence-Based Programs.

B. Disease Prevention and Health Promotion Coordination Strategy: Coordinate with current contracted providers and community partners to identify ACL and ICOA approved evidence-based programs that meet the needs of the older individuals in our PSA.

Performance Measure: Number of Evidence-Based Programs in our PSA.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Number of Evidence-Based Programs</u>
SFY 2016 (July 2015 – June 2016)	3
SFY 2017 (July 2016 – June 2017)	3
SFY 2018 (July 2017 – June 2018)	2
SFY 2019 (July 2018 – June 2019)	3 (if Powerful Tools for Caregivers is included)
SFY 2020 (July 2019 – June 2020)	

Benchmark:

- Maintain current ACL and ICOA approved Evidence-Based Programs.
- Explore possibility of adding additional Evidence-Based Programs in our PSA (as approved by ACL and ICOA).

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 VI Agency on Aging (See tables above)
- Contracted Nutrition providers (See tables above)
- Contracted In-home providers (See tables above)
- Idaho Legal Aid (See information above)

Funding Source: (Actual expenditures for completed year 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	\$77,811
SFY 2017 (July 2016 – June 2017) Actual	\$18,306	\$61,243	\$79,549
SFY 2018 (July 2017 – June 2018) Actual	\$17,592	\$45,863	\$63,455
SFY 2019 (July 2018 – June 2019) Actual	\$25,328	\$86,432	\$111,760
SFY 2020 (July 2019 – June 2020) Budget	\$19,223	\$86,286	\$105,509

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: Utilize performance data from our PSA to increase the efficiency, effectiveness, and quality of Title III E Caregiver Program.

Performance Measure:

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

Baseline:

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	\$0	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$6	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$13	Not Available
SFY 2019 (July 2018 – June 2019) Actual	\$9,106	Not Available
SFY 2020 (July 2019 – June 2020) Budget	\$3,119	

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	\$40,230	888	\$45.30
SFY 2017 (July 2016 – June 2017) Actual	\$41,292	101	\$408.83
SFY 2018 (July 2017 – June 2018) Actual	\$37,262	218	\$170.93
SFY 2019 (July 2018 – June 2019) Actual	\$41,023	\$231	\$177.59
SFY 2020 (July 2019 – June 2020) Budget	\$31,156		

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	\$4,653	Not Available	Not Available	Not Available
SFY 2017 (July 2016 – June 2017) Actual	\$8,531	Not Available	Not Available	Not Available
SFY 2018 (July 2017 – June 2018) Actual	\$6,941	17	46	\$408.29
SFY 2019 (July 2018 – June 2019) Actual	\$15,082	66	151	\$228.52
SFY 2020 (July 2019 – June 2020) Budget				

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 Hour</u>
SFY 2016 (July 2015 – June 2016) Actual	N/A	N/A	\$24,916	24	1,684	\$15
SFY 2017 (July 2016 – June 2017) Actual	N/A	N/A	\$28,662	21	1,910	\$15
SFY 2018 (July 2017 – June 2018) Actual	\$17,592	\$1,564	\$19,156	26	1,326	\$14
SFY 2019 (July 2018 – June 2019) Actual	\$25,328	\$20,010	\$45,338	45	2,911	\$16
SFY 2020 (July 2019 – June 2020) Budget	\$19,223	\$23,727	\$42,950			

5. Supplemental Service (Limited Basis)

Supplemental Caregiver Legal Assistance

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>
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SFY 2016 (July 2015 – June 2016) Actual	\$2,302
SFY 2017 (July 2016 – June 2017) Actual	\$1,058
SFY 2018 (July 2017 – June 2018) Actual	\$83
SFY 2019 (July 2018 – June 2019) Actual	\$1,211
SFY 2020 (July 2019 – June 2020) Budget	\$1,050

Supplemental Caregiver Nutrition Service

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Federal</u>
SFY 2016 (July 2015 – June 2016) Actual	\$5,710
SFY 2017 (July 2016 – June 2017) Actual	N/A
SFY 2018 (July 2017 – June 2018) Actual	N/A
SFY 2019 (July 2018 – June 2019) Actual	N/A
SFY 2020 (July 2019 – June 2020)	

Benchmark:

- Complete a minimum of 10 public information events each year (large group presentations, printed materials, caregiver newsletters, media, health and community fairs and events, forums, etc.).
- Increase the number of NFCSP contacts by 3% annually.
- Increase the number of consumers participating in our Caregiver Support Group and our Grandparents Raising Grandchildren Group by at least 2 per year.
- Increase the number of NFCSP consumers by 3% annually.
- Maintain consumer satisfaction at 85% or higher for Powerful Tools for Caregivers workshops.

B. NFCSP Coordination Strategy: Collaborate with community partners, contracted and other service providers, the Alzheimer Association, Idaho Legal Aid, 211 Careline, Idaho Department of Health & Welfare Children Services, Certified Family Homes and local schools to provide access to NFCSP resources.

Performance Measure: Number of collaborative partners in our PSA.

Baseline:

<u>Service</u>	<u>Collaborative Partner</u>
Caregiver Information Services	211 Idaho Careline
Access Assistance	211 Idaho Careline, The Alzheimer’s Association
Caregiver Support Programs	Idaho Department of Health & Welfare Children Services, Certified Family Homes, local schools
Respite	Contracted in-home providers, other local service providers
Supplemental: Powerful Tools for Caregivers workshops	Idaho Department of Health & Welfare Children Services, Certified Family Homes, local schools
Supplemental: Caregiver Home Delivered Meals	Senior Centers/Meal Sites
Supplemental: Legal Assistance	Idaho Legal Aid

Benchmark: Increase in number of collaborative partners by at least 2 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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

Funding Source: (Actual expenditures for completed year 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	\$18,100	\$18,100
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$24,500	\$24,500
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$20,000	\$20,000
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$21,000	\$21,000
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$21,000	\$21,000

A. SMP Service Delivery Strategy: Strengthen the local SMP Program by increasing volunteer recruitment and retention as well as increasing the number of group presentations and one-to-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:

<u>State Fiscal Year (SFY)</u>	<u>Volunteers</u>	<u>Group Presentations</u>	<u>Community Events</u>	<u>One-to-one Counseling</u>
SFY 2016 (July 2015 – June 2016) Actual	6	39	2	9
SFY 2017 (July 2016 – June 2017) Actual	2	92	41	22

SFY 2018 (July 2017 – June 2018) Actual	2	73	43	18
SFY 2019 (July 2018 – June 2019) Actual	3	93	79	198
SFY 2020 (July 2019 – June 2020)				

Benchmark:

- Recruit and retain at least 2 additional volunteer positions annually.
- Complete at least 45 group presentations annually.
- Complete at least 12 one-on-one counseling sessions annually.

B. SMP Coordination Strategy: Continue to coordinate with the Senior Health Insurance Benefits Advisors (SHIBA) in order to provide volunteers and staff additional SMP program education about Medicare fraud prevention. 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 trainings/program education for SMP volunteers and staff
- Number of local SMP partners, including the Idaho Scam Jam Alliance
- Consumer satisfaction/survey results from community fraud prevention events (such as SMP Presentations and AAA Presentations given at Scam Jam Events in our PSA)

Baseline: Current partnership with SHIBA and fraud prevention event survey results.

<u>Contract Year</u>	<u>Trainings/Program Education</u>	<u>Total Partners</u>	<u>Consumer Survey/Satisfaction</u>
2016 (May 2015 – May 2016)	N/A	3	4.81 out of 5=96% (Salmon Scam Jam)
2017 (May 2016 – May 2017)	N/A	1	N/A
2018 (May 2017 – May 2018)	N/A	1	N/A
2019 (May 2018 – May 2019)	N/A	1	N/A
2020 (May 2019 – May 2020)			

Benchmark:

- Increase the number of trainings/program education for SMP volunteers and staff by 2 per year.
- Increase the number of local SMP partners by 2 per year.
- Increase consumer satisfaction of those who attend community fraud prevention events (such as SMP Presentations and AAA Presentations given at Scam Jam Events in our PSA) by 75% or higher.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
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Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm
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Funding Source: (Actual expenditures for completed year 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	\$10,408	\$10,408
SFY 2017 (July 2016 – June 2017) Actual	\$0	\$13,000	\$13,000
SFY 2018 (July 2017 – June 2018) Actual	\$0	\$10,800	\$10,800
SFY 2019 (July 2018 – June 2019) Actual	\$0	\$11,290+	\$11,290+
SFY 2020 (July 2019 – June 2020) Budget	\$0	\$11,290	\$11,290

A. MIPPA Service Delivery Strategy: Expand outreach to pharmacies, churches, and non-profit organizations to strengthen the MIPPA outreach program in our PSA.

Performance Measure:

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

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Participating Host Agencies</u>
SFY 2016 (July 2015 – June 2016) Actual	14
SFY 2017 (July 2016 – June 2017) Actual	N/A
SFY 2018 (July 2017 – June 2018) Actual	N/A
SFY 2019 (July 2018 – June 2019) Actual	20
SFY 2020 (July 2019 – June 2020)	

Benchmark: Increase number of participating host agencies by 10 per year.

B. MIPPA Coordination Strategy: Coordinate with ICOA and SHIBA to develop public awareness materials and conduct a media campaign to increase the MIPPA participation.

Performance Measure: Public awareness materials and statewide media campaigns.

Baseline: Three-year MIPPA Media Campaign.

Benchmark: Identify if campaigns and MIPPA materials increase the number of applications.

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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

A. Participant-Directed/Person-Centered Planning Service Delivery Strategy: Identify best practices from organization/s that provide Person-Centered Planning.

Performance Measure: Best practices.

- Baseline:**
- Home and Community Base Services Person-Centered Planning Rules and training (Center for Independent Living, Idaho Department of Health & Welfare)
 - Person Centered Planning programs implemented in our PSA (Idaho Home Choice, VD-HCBS)

Benchmark: Implement Person-Centered Planning standard practices in our PSA.

B. Participant-Directed/Person-Centered Planning Coordination Strategy: Coordinate with our local Center for Independent Living (LIFE, Inc.) and Idaho Department of Health & Welfare to train AAA staff to work with individuals who have various types of disabilities.

Performance Measure: Number of Person-Centered Planning AAA trained staff.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Number of Trained AAA Staff</u>
SFY 2016 (July 2015 – June 2016)	3
SFY 2017 (July 2016 – June 2017)	3
SFY 2018 (July 2017 – June 2018)	3
SFY 2019 (July 2018 – June 2019)	3
SFY 2020 (July 2019 – June 2020)	

- Benchmark:**
- Complete Person-Centered Planning training with local aging and disability network partners in order to increase the number of Person-Centered Planning AAA staff.

Focus Area D: Elder Justice

ICOA Goal: Ensure all older individuals have access to OAA and SSA Elder Justice Services.

1: Ombudsman Objective: To develop Idaho specific policies and procedures to comply with new Older Americans Act (OAA) Ombudsman rules.

Service Description: The Ombudsman funds are used to:

(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;

(B) provide services to assist the residents in protecting the health, safety, welfare, and rights of the residents;

(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);

(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;

(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;

(F) provide administrative and technical assistance to entities designated under paragraph (5) to assist the entities in participating in the program;

(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;

(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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

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	\$15,363	\$60,622	\$75,985
SFY 2017 (July 2016 – June 2017) Actual	\$20,635	\$41,536	\$62,171
SFY 2018 (July 2017 – June 2018) Actual	\$6,768	\$57,622	\$64,390
SFY 2019 (July 2018 – June 2019) Actual	\$50,366	\$43,811	\$94,177
SFY 2020 (July 2019 – June 2020) Budget	\$84,940	\$18,116	\$103,056

A. Ombudsman Service Delivery Strategy: Utilize data to identify complaint trends, quarterly reports to analyze service delivery, and volunteer training materials to increase effectiveness, provide trainings and presentations to

facilities and the general public to educate individuals about resident's rights.

Performance Measure:

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

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Number of Ombudsman</u>	<u>Number of Skilled Nursing Facilities</u>	<u>Number of Assisted Living Facilities</u>	<u>Total Number of Beds</u>	<u>Average Bed Count per Ombudsman</u>	<u>Total Volunteer Ombudsman</u>	<u>Total Information and Education Presentation</u>	<u>Total Facility Visits</u>
SFY 2016 (July 2015 – June 2016) Actual	1.23	N/A	N/A	1,630	1,325	6	24	N/A
SFY 2017 (July 2016 – June 2017) Actual	1	N/A	N/A	1,665	1,665	6	17	N/A
SFY 2018 (July 2017 – June 2018) Actual	1	8	40	1,646	1,646	6	8	N/A
SFY 2019 (July 2018 – June 2019) Actual	1.5	8	31	1,775	1,183	5	21	320
SFY 2020 (July 2019 – June 2020) Budget	1.64			1,826	1,113			

**PSA VI
Ombudsman**

Five Most Frequent Complaint Areas and Corresponding Number of Complaints (SFY 2019):

<u>SFY16</u>		<u>SFY17</u>		<u>SFY18</u>		<u>SFY19</u>		<u>SFY20</u>	
<u>Type of Complaint</u>	<u>Total</u>	<u>Type</u>	<u>Total</u>	<u>Type</u>	<u>Total</u>	<u>Type</u>	<u>Total</u>	<u>Type</u>	<u>Total</u>
Menu: quantity, quality, variation, choice	21	Equipment/ Building Repairs #79	7	Discharge/ Eviction #19	13	C-19 discharge/eviction: planning, notice, procedure	17		
Dignity, respect, staff attitudes	18	Discharge/ Eviction #19	5	Dignity/ Respect #26	12	D-26 dignity, respect, staff attitudes	13		
Medication administration, organization	14	Dignity/ Respect #26	4	Cleanliness and Housekeeping #78	8	F-44 medications: administration, organization	9		
Cleanliness, pests	13	Failure to Respond #41	4	Family Conflict #120	8	K-78 cleanliness, pests, general housekeeping	9		
Discharge, evictions: planning notice and Snacks, time between meals (tied)	11	Food Services #71	4	Exercise Preference/ Choice #27 and Care Plan #42	7	D-27 exercise preference/choice, civil/religious rights	8		

Benchmark:

- Increase the number of Volunteer Ombudsman by at least 1 per year.
- Use complaint trend data to determine areas that need focus and utilize training and presentation materials

developed by ICOA to address these complaint trends.

- Use quarterly report data to ensure on-going improvement.

B. Ombudsman Coordination Strategy: Provide resident rights education and training to providers, or representatives of providers of long-term care services, public agencies, health, and social service agencies to ensure the health, safety, welfare, and rights of the residents are being met.

Performance Measure: Number of educational presentations and trainings.

Baseline:

<u>State Fiscal Year (SFY)</u>	<u>Total Information & Education Presentations</u>
SFY 2016 (July 2015 – June 2016)	24
SFY 2017 (July 2016 – June 2017)	17
SFY 2018 (July 2017 – June 2018)	8
SFY 2019 (July 2018 – June 2019)	21
SFY 2020 (July 2019 – June 2020)	

Benchmark: Complete a minimum of 15 educational presentations and trainings per year.

2: State Adult Protective 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, or the failure of a vulnerable adult to provide those services for him/herself.
- 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:

<u>Provider Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Service Hours</u>
Area VI Agency on Aging	935 E. Lincoln Rd. Idaho Falls, ID 83401	208-522-5391	Mon.-Fri. 8am-4:30pm

Funding Source: (Actual expenditures for completed year 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	\$114,367	\$0	\$114,367
SFY 2017 (July 2016 – June 2017) Actual	\$105,268	\$0	\$105,268
SFY 2018 (July 2017 – June 2018) Actual	\$112,905	\$0	\$112,905
SFY 2019 (July 2018 – June 2019) Actual	\$124,603	\$0	\$124,603

SFY 2020 (July 2019 – June 2020) Budget	\$123,287	\$0	\$123,287
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A. Adult Protective Service Delivery Strategy: Utilize Standardized Adult Protective training resources provided by ICOA as well as data of reported allegations and cases reported to law enforcement to ensure consistent service delivery and to mitigate the risk of future abuse, neglect, and exploitation of vulnerable adults in our PSA.

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>Reports to Law Enforcement</u>	<u>Total Information and Education Presentations</u>
SFY 2016 (July 2015 – June 2016) Actual	71	43	44	50	46	9
SFY 2017 (July 2016 – June 2017) Actual	47	46	58	46	37	6
SFY 2018 (July 2017 – June 2018) Actual	68	43	73	58	13	23
SFY 2019 (July 2018 – June 2019) Actual	70	40	67	49	47	9
SFY 2020 (July 2019 – June 2020)						

Benchmark: Use data of reported allegations to determine areas that need focus and utilize ICOA Standardized Adult Protective user guide, educational videos, brochures, and presentation materials developed by ICOA to address these allegation trends.

B. Adult Protective Coordination Strategy: Coordinate with the Idaho Department of Health & Welfare (Regional Medicaid Unit, Mental Health, Developmental Disability Crisis Team, Certified Family Home), local law enforcement agencies, hospitals, medical providers, in-home care service providers, financial institutions, local counties Board of Community Guardians, and other local service providers to present information and education to facilitate appropriate reporting protocols and to reduce the risk of abuse, neglect, and exploitation of vulnerable adults.

Performance Measure: The number of Adult Protective presentations focusing on the prevention of maltreatment of vulnerable adults.

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)	9
SFY 2017 (July 2016 – June 2017)	6
SFY 2018 (July 2017 – June 2018)	23
SFY 2019 (July 2018 – June 2019)	9
SFY 2020 (July 2019 – June 2020)	

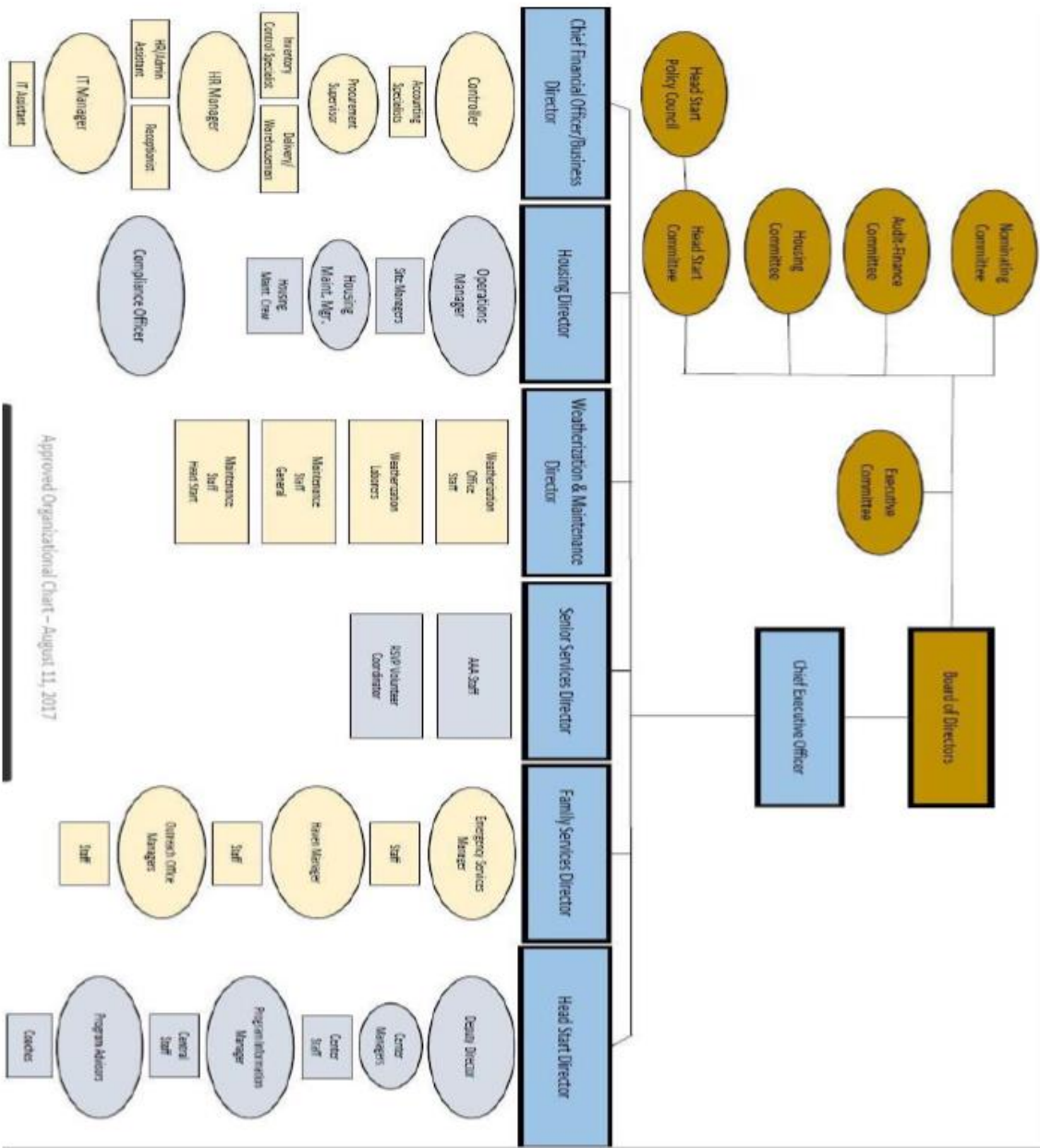
Benchmark: Increase the number of Adult Protective presentations by 30% each year.

ATTACHMENT D

AAA ORGANIZATION CHART INCLUDING AAA'S GOVERNING BODY

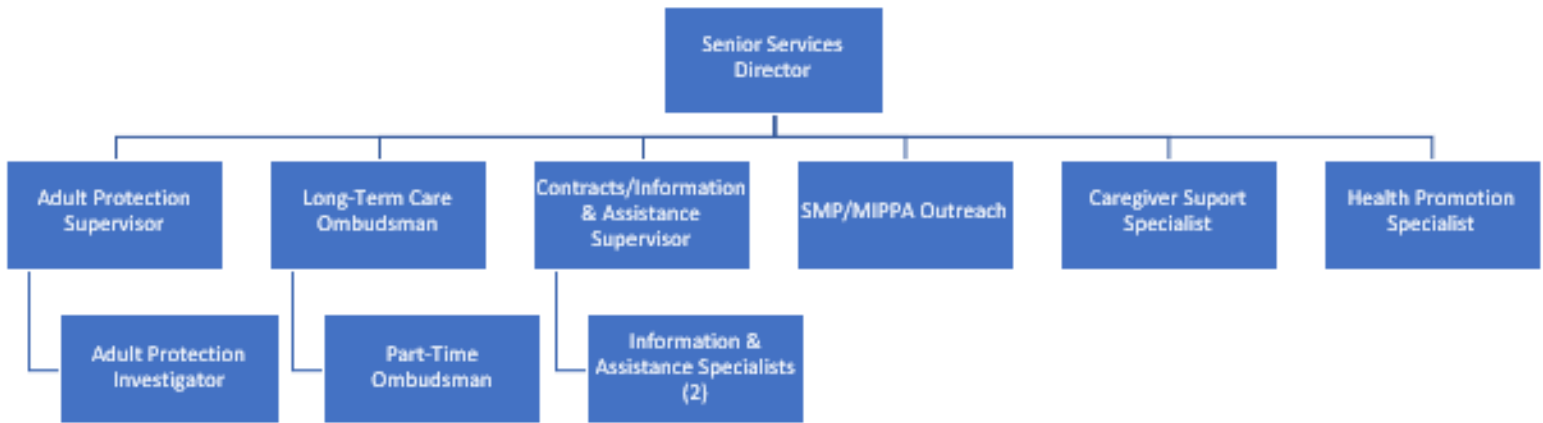
***Refer to next page for specific breakdown on Area VI Agency on Aging Organization

EICAP ORGANIZATIONAL CHART



Approved Organizational Chart - August 11, 2017

Area VI Agency on Aging Organization Chart



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>Arianne Holt</u>										
County of Residence: <u>Bonneville</u>										
Beginning Term Date: <u>Dec. 2018</u>										
Ending Term Date: <u>Dec. 2020</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			X

Advisory Council Member's Name: <u>Laura Gramirez</u>										
County of Residence: <u>Bonneville</u>										
Beginning Term Date: <u>Dec. 2018</u>										
Ending Term Date: <u>Dec. 2020</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			X

Advisory Council Member's Name: <u>Lyle Jensen</u>										
County of Residence: <u>Bonneville</u>										
Beginning Term Date: <u>Dec. 2017</u>										
Ending Term Date: <u>Dec. 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	X			X

Advisory Council Member's Name:		Dean Nielson (Area VI Commissioner)								
County of Residence:		Bonneville								
Beginning Term Date:		Nov. 2018								
Ending Term Date:		Nov. 2020								
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		X		X	X

Advisory Council Member's Name:		Janell Price								
County of Residence:		Bonneville								
Beginning Term Date:		Dec. 2018								
Ending Term Date:		Dec. 2020								
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	X

Advisory Council Member's Name:		Valisa Say								
County of Residence:		Bonneville								
Beginning Term Date:		Dec. 2017								
Ending Term Date:		Dec. 2019								
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			X

Advisory Council Member's Name:		Chanse Powell								
County of Residence:		Bonneville								
Beginning Term Date:		Mar. 2019								
Ending Term Date:		Mar. 2021								
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	X			X

Advisory Council Member's Name:		Karolyn Hodge								
County of Residence:		Fremont								
Beginning Term Date:		Dec. 2017								
Ending Term Date:		Dec. 2019								
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	X	X			X

Advisory Council Member's Name:		Wylie Powell								
County of Residence:		Bonneville								
Beginning Term Date:		Mar. 2019								
Ending Term Date:		Mar. 2021								
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:		Cheryl Mastel								
County of Residence:		Bonneville								
Beginning Term Date:		Mar. 2019								
Ending Term Date:		Mar. 2021								
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	X	X			X

Advisory Council Member's Name:		Diane Nielsen								
County of Residence:		Bonneville								
Beginning Term Date:		Aug. 2019								
Ending Term Date:		Aug. 2021								
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	X		X	X

ATTACHMENT B

SFY 2020 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 **(FY2020: July 1, 2019 – June 30, 2020 and reference explanation is provided below):**

Idaho Intrastate Funding Formula										SFY 2020		Adopted April 30, 2013		Updated: 5/10/2019			
OAA Title III Funds (not including Title VIII) and State of Idaho General Funds										Effective July 1, 2019							
Total OAA Federal Funds										\$	6,018,393			\$	601,839	\$	397,710
Total State Funds										\$	3,977,100			\$	5,416,554	\$	3,579,390
Total Funds										\$	9,995,493			\$	9,995,493	\$	9,995,493
Less: 10% Base Amount of Federal and State Funds										\$	999,549						
Balance to be Distributed by Formula:																	
\$8,995,944																	
Factors used in Weighted Elderly Population (At Risk)																	
PSA	2018 TOTAL PSA POPULATION	TOTAL PERSONS AGED 80+ IN PSA	NUMBER OF 65+ LIVING IN POVERTY	65+ LIVING ALONE	80+ RACIAL MINORITY (Not Hispanic)	80+ HISPANIC (ETHNIC MINORITY)	80+ LIVING IN RURAL COUNTY	AGED 75+	AGED 80+	WEIGHTED ELDERLY POPULATION (AT RISK)	WEIGHTED "At Risk" PERCENTAGE	Federal Fund Base	State Fund Base	Federal Funds Distributed by Formula	State Funds Distributed by Formula	TOTAL FUND ALLOCATION	
I	234,845	64,487	2,935	10,198	1,954	1,131	24,689	17,866	4,570	63,333	17.30%	\$ 100,307	\$ 66,285	\$ 936,950	\$ 619,160	\$ 1,722,702	
II	108,520	28,055	1,546	5,042	1,199	341	10,224	8,795	2,611	29,748	8.12%	\$ 100,307	\$ 66,285	\$ 440,093	\$ 290,824	\$ 897,508	
III	784,838	193,951	10,340	26,711	5,970	7,924	29,559	43,502	11,926	135,932	37.13%	\$ 100,307	\$ 66,285	\$ 2,010,982	\$ 1,328,906	\$ 3,506,480	
IV	196,712	41,646	2,887	7,275	1,261	3,363	24,154	12,546	3,518	55,004	15.02%	\$ 100,307	\$ 66,285	\$ 813,731	\$ 537,733	\$ 1,518,056	
V	169,849	34,590	1,708	5,882	1,683	1,850	17,795	9,911	2,775	41,404	11.31%	\$ 100,307	\$ 66,285	\$ 612,532	\$ 404,776	\$ 1,183,900	
VI	221,179	40,013	1,686	6,469	1,015	1,485	15,399	11,449	3,207	40,710	11.12%	\$ 100,307	\$ 66,285	\$ 602,265	\$ 397,991	\$ 1,166,848	
TOTAL	1,715,943	368,742	21,102	61,577	13,082	15,894	121,820	104,049	28,607	366,131		\$ 601,839	\$ 397,710	\$ 5,416,554	\$ 3,579,390	\$ 9,995,493	
Column Ref. #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	

**Idaho Commission on Aging
Title III, Title VII and State Funding Allocation Summary
State Fiscal Year 2020**

Area 6

Budget Period: 7/1/19 to 6/30/20

AAA Funding Distribution	SFY20 Allocation	Budget Mod 1 SFY 19 Carryover	Budget Mod 2 (Adjustment)	Total SFY 20 Allocation
Total Title III State and Federal Funding	702,572	-	-	702,572
Title III: Area Plan Administration	70,257	-	-	70,257
Title IIIB: Supportive Services	177,711	-	-	177,711
Title IIIC1: Congregate Meals	235,573	-	-	235,573
Title IIIC2: Home-Delivered Meals	119,523	-	-	119,523
Title IIID: Disease Prevention & Health Promotions	13,221	-	-	13,221
IIIE: National Family Caregiver Support Program	86,286	-	-	86,286
Total Funding	702,572	-	-	702,572
Total Federal Title VII Funding:	9,074	-	-	9,074
Total Federal Funding:	711,646	-	-	711,646
Total State Funding:	464,276	-	-	464,276
Total Title III, Title VII and State Funding:	1,175,922	-	-	1,175,922

Note 1: Title III federal funding for SFY 2020 is an estimate from 12/20/2018 Notice of Award (the most recent federal fiscal year).

Note 3: There is a new budget development tab for Capital Outlay items such as a vehicle or equipment valued over \$5,000.

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.

SLIDING FEE SCALE

State Law, Title 67, Chapter 50, Idaho Code, requires that fees to consumers for services provided under the Senior Services Act will be calculated by use of a sliding fee schedule, based upon household income. For Federal Funds utilize the individuals Income only. The Reauthorized OAA permits cost sharing for all services funded by this Act, with certain restrictions [OAA, Title III, Section 315 (a)]. The fee will be redetermined annually. Income, for this purpose, means gross income from the previous year, including, but not limited to, Social Security, SSI, Old Age Assistance, interest, dividends, wages, salaries, pensions, and property income, less non-covered medical and prescription drug costs. This form should be used after completion of the Standard Income Declaration Form.

Circle the client's income range, then circle the Percentage of the hourly fee the client will be required to pay.

Client's Name: _____ Date: _____

MONTHLY INCOME	ANNUAL INCOME	FEE	HMK FEE	RESPITE FEE	ADULT DAY CARE FEE
Individual Income					
\$1,041.00	\$12,490.00	0%			
\$1,041.00 - \$1,249.00	\$12,490.00 - \$14,988.00	20%			
\$1,250.00 - \$1,457.00	\$14,989.00 - \$17,486.00	40%			
\$1,458.00 - \$1,665.00	\$17,487.00 - \$19,984.00	60%			
\$1,666.00 - \$1,874.00	\$19,985.00 - \$22,482.00	80%			
\$1,875.00 - & Over	\$22,483.00 - & Over	100%			
TWO Persons in Household					
- \$1,409.00	- \$16,910.00	0%			
\$1,409.00 - \$1,691.00	\$16,910.00 - \$20,292.00	20%			
\$1,692.00 - \$1,973.00	\$20,293.00 - \$23,674.00	40%			
\$1,974.00 - \$2,255.00	\$23,675.00 - \$27,056.00	60%			
\$2,256.00 - \$2,537.00	\$27,057.00 - \$30,438.00	80%			
\$2,538.00 - & Over	\$30,439.00 - & Over	100%			
THREE Persons in					
- \$1,778.00	- \$21,330.00	0%			
\$1,778.00 - \$2,133.00	\$21,330.00 - \$25,596.00	20%			
\$2,134.00 - \$2,489.00	\$25,597.00 - \$29,862.00	40%			
\$2,490.00 - \$2,844.00	\$29,863.00 - \$34,128.00	60%			
\$2,845.00 - \$3,200.00	\$34,129.00 - \$38,394.00	80%			
\$3,201.00 - & Over	\$38,395.00 - & Over	100%			
FOUR Persons in Household					
- \$2,146.00	- \$25,750.00	0%			
\$2,146.00 - \$2,575.00	\$25,750.00 - \$30,900.00	20%			
\$2,576.00 - \$3,004.00	\$30,901.00 - \$36,050.00	40%			
\$3,005.00 - \$3,433.00	\$36,051.00 - \$41,200.00	60%			
\$3,434.00 - \$3,863.00	\$41,201.00 - \$46,350.00	80%			
\$3,864.00 - & Over	\$46,351.00 - & Over	100%			

The full cost for one hour of Homemaker Service is: \$ _____
 The full cost for one hour of Respite Service is: \$ _____
 The full cost for one hour of Adult Day Care is: \$ _____

Percentage Above Poverty Line: 100%
 Each Additional Person: \$ 12,140.00
 The 2019 poverty guidelines will be in effect as of January 21, 2019.

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

Area Plan: Attachment E
 State Plan: Attachment F, page 30 of 143

GU.AD.01: Sliding Fee Scale 1/24/2019: Previous Editions are Obsolete

Idaho Commission on Aging

Department of Health and Human Services 2019 Poverty Guidelines:

Persons In Family or Households	100% Poverty	125 % Poverty	150 % Poverty
1	12,490	15,613	18,735
2	16,910	21,138	25,365
3	21,330	26,663	31,995
4	25,750	32,188	38,625
5	30,170	37,713	45,255
6	34,590	43,238	51,885
7	39,010	48,763	58,515
8	43,430	54,288	65,145
Families with more than 8 persons:	Add 4,420	Add 5,525	Add 6,630

The 2019 poverty guidelines will be in effect as of January 21, 2019

HHS Website for obtaining program fiscal year poverty guidelines is located at

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

Note: the poverty guideline figures listed on HHS website normally are calculated at 100%. Provided is the HHS chart that has been calculated to meet the 100%, 125% and 150%.

When computing the percentage of poverty guidelines that are required for your program client eligibility, remember HHS charts are always at 100% of poverty. Agencies need to multiply the % of the threshold by your set program eligibility of poverty guidelines.

Area Plan: Attachment F

State Plan: Attachment G, page 32 of 143

ATTACHMENT N
AREA AGENCY ON AGING serving Eastern Idaho
EMERGENCY PREPAREDNESS PLAN

TO MEET THE NEEDS OF SENIORS IN THE EVENT OF NATURAL OR
MAN-MADE DISASTER OR OTHER WIDESPREAD EMERGENCY

The Idaho Commission on Aging (ICOA) is actively involved in the emergency management planning and operations of the State of Idaho as a supporting agency. The Administrator of ICOA has appointed a staff member as the Emergency Preparedness/Disaster Coordinator, and two others as the alternates. These individuals work with the Idaho Bureau of Homeland Security (BHS), state agencies and the regional Area Agencies on Aging (AAAs) to plan for and respond to the needs of seniors in an emergency event. The State of Idaho's Executive Order No. 2010-09 and the Idaho Emergency Operations Plan assign specific emergency support activities to the ICOA and the AAAs in assisting and in supporting local and state government prior to and during emergencies and disasters.

As the primary agency, BHS notifies the appropriate persons/agencies and activates the Idaho Emergency Operations Plan (IDEOP). The ICOA supports with following functions:

- Assessing the needs of the elderly and homebound elderly including older individuals with access and functional needs.
- Coordinating senior services through the AAAs during natural or man-made disasters.
- Providing information/assistance to their clientele and the public.
- Coordinating senior citizen centers for shelter, mass feeding, and rest centers.
- Identifying homebound/isolated elderly clients.

The Administration for Community Living (ACL) and the Aging Network composed of State and AAAs, Native American Tribal Organizations, service providers and educational institutions have the legislative mandate to advocate on behalf of older persons and to work in cooperation with other federal and state programs to provide needed services. The authority and responsibility of ACL and the Aging Network to provide disaster services is found within the charge from the Older Americans Act to serve older persons in greatest need and from Title III, Sec. 310, and Disaster Relief Reimbursements, which provides for limited resources to fund disaster response services.

Older adults and people with disabilities are frequently overlooked during the disaster planning, response, and recovery process. Emergency management planning integrates older adults and people with disabilities of all ages—and their caregivers—into community emergency planning, response, and recovery. ACL provides the following link

http://www.acl.gov/Get_Help/Preparedness/Index.aspx with best practices to support the needs of older adults and people of all ages with disabilities during an emergency.

Statement of Understanding (SOU) between the American National Red Cross and The Administration on Aging further demonstrates the commitment and responsibility of the Aging Network to prepare for and respond in disaster relief situations. This SOU emphasizes the Aging Network’s ability to perform two basic types of disaster assistance service, which are:

- Advocacy and Outreach – assuring that older persons have access to and the assistance necessary to obtain needed services, including locating older persons; getting medical attention if needed, including medications and assistive devices; assisting in the completion and filing of applications for financial and other assistance; and follow-up monitoring to assure needs are met.
- Gap-filling – to assure that needed services and follow-up are provided beyond the timeframes and restrictions of other relief efforts if necessary. OAA funds can be used for chore, homemaker, transportation, nutrition, legal, and other temporary or one-time only expenses which help older persons retain maximum independent living.

Methods of Cooperation agreed upon and encouraged in the *Statement of Understanding* include; disaster planning and preparedness, sharing statistical and other data on elderly populations, establishment of disaster advocacy and outreach programs, and making congregate and home delivered meals programs available to the general public during a disaster.

To help meet these obligations, to ensure business continuity and to meet the needs of older citizens in an emergency, the Area Agency on Aging is required to develop an emergency disaster plan, that supports ICOA’s emergency disaster plan.

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
Morgan Nield	Senior Services Director	208-522-5391 Ext. 1052/mnield@eicap.org

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

NAME (AAA STAFF)	TITLE/POSITION	TELEPHONE	EMERGENCY ASSIGNMENT
Jay Doman	Executive Director	208-522-5391	Contact employees and support Senior Services Director

Casie Adams	Contracts/Information and Assistance Manager	208-522-5391	Contact contractors
Casie Adams	Information and Assistance/Contracts Manager	208-522-5391	Coordinate incoming calls & messages and link clients to resources
Tera Fellows	Ombudsman	208-522-5391	Coordinate Skilled Nursing & Assisted Living Centers
Ruby Hall	Intake Specialist	208-522-5391	Coordinate Spanish speaking incoming calls & messages
Erica Giles	Intake Specialist	208-522-5391	Document all Events

3. Alternate AAA business location if primary office is inaccessible or uninhabitable:

LOCATION NAME AND ADDRESS	TELEPHONE / OTHER CONTACT NUMBERS
275 Stationery Place Rexburg, ID 83440	208-356-8849
955 Riverfront Dr., Suite A Salmon, ID 83467	208-756-3999 or 1-800-359-9163

4. Describe the AAA’s process to have personal and community disaster preparedness information available for clients, services providers and the general public:

The Area VI AAA has a good working relationship with the Eastern Idaho Public Health (EIPH) Department, who is very involved in community disaster preparedness. In addition, the AAA attends regular Healthcare Coalition Meetings at EIPH, where emergency and disaster preparedness for the communities are discussed. Included in these meetings are physicians, first responders, local emergency coordinators, behavioral and mental health specialists, and representatives of EIPH. The AAA obtains community disaster preparedness information at these meetings and has this information readily available at the office. In addition, the AAA has partnering agencies that provide emergency access to information through Home Delivered Meals, Meal volunteers, in Congregate Meal Site settings, and through notifying registered consumers.

5. Local Emergency coordinators and Red Cross coordinators in EACH county or city with whom the AAA coordinates emergency planning for the needs of older citizens, and will collaborate during an emergency or disaster situation:

AGENCY NAME AND ADDRESS	COUNTY/ OTHER JURISDICTION	CONTACT NAME	PHONE / E-MAIL
Emergency Management Services 605 N Capital Ave. IF	Bonneville	Brad Clements	208-529-1223
Butte County Sheriff's Dept. 256 Grande Ave., Arco	Butte	Wes Collins	208-527-8553
Clark County Emergency Management 320 W. Main, Dubois	Clark	Russ Kerr	208-374-5403 208-768-7549
Custer County Disaster Coordinator PO Box 385, Challis	Custer	Michael Graham	208-833-6168
Fremont County Emergency Management 146 N. 2 nd W., St. Anthony	Fremont	Keith G. Richey	208-624-1535
Jefferson County Emergency Management 134 N Clark, Rigby	Jefferson	Emily Kramer	208-745-0868
Lemhi County Emergency Services 206 Courthouse Dr., Salmon	Lemhi	Janet Nelson	208-756-2815 Ext. 266
Madison County CERT 145 E. Main, Rexburg	Madison	John Corpany	208-502-0742
Teton County Emergency Management 89 N Main, Driggs	Teton	Greg Adams	208-201-6898
American Red Cross 410 Memorial Dr. #204, Idaho Falls	Area VI	Trevor Covington	1-800-853-2570 Ext.702 208-243-0517 Cell

6. Included clauses in contracts, grants and agreements with service providers describing and assuring their response during a disaster or emergency.

The below language is in the Statement of Work for all our in-home service providers:

Training & Supervision:

- All service worker shall receive an employee orientation from the provider before performing homemaker/respite/chore services. Orientation shall include the purpose and philosophy of the service review of necessary skills, program regulations, policies and procedures, proper conduct in relating to clients, and

- handling of confidential and emergency situations involving a client.
- CPR: Service workers shall complete CPR training within three months of hire and shall maintain certification thereafter.
 - In-Service Training: Providers shall annually provide service workers with a minimum of ten hours training, including CPR, for the purpose of upgrading their skills and knowledge.
 - Supervision: All Providers shall maintain written job descriptions for service workers and shall have written personnel policies. All service workers shall receive an annual performance evaluation. Service worker supervisors shall be available to service workers during work hours to discuss changes in clients' circumstances, to resolve problems with schedules, or to respond to emergencies.
- Medical Emergencies:
- In case of a medical emergency, the service worker shall immediately call 911 or the available local emergency medical services and, if appropriate, shall initiate CPR.

7. List service providers of major programs (transportation, nutrition, homemaker, etc.) with whom the AAA will coordinate emergency services.

SERVICE PROVIDER NAME AND ADDRESS	COUNTY/ OTHER JURISDICTION	CONTACT NAME	PHONE / E-MAIL
Ashton Senior Center 52 Main Street Ashton, ID 83420	Fremont	Beth Wright	208-652-3594
Challis Senior Citizens Center, Inc. 695 Challis Cr Rd. Challis, ID 83226	Custer	Kellie Wahlstrom	208-879-6338
Idaho Falls Senior Center 535 W 21st St. Idaho Falls, ID 83402	Bonneville	Valisa Say	208-522-4357
Lost River Senior Center 555 S Water Street Arco, ID 83213	Butte	Joyce Collins	208-527-8296
Mackay Senior Citizens Inc. PO Box 413 Mackay, ID 83251	Custer	Otto or Betty Higbee	208-588-2105
Madison County Senior Citizens Center 41 S. 2nd W.	Madison	Terry Potter or Ken Hart	208-356-0080

Rexburg, ID 83440			
Rigby Senior Center 392 Community Ln. Rigby, ID 83442	Jefferson	Stephanie Butler	208-745-8211
Ririe Senior Citizens Center 395 Main Street Ririe, ID 83443	Jefferson/Bonneville	Kendall or Ollie Syverson	208-538-7313
Salmon Nutrition Site, Inc. 200 Main Street Salmon, ID 83467	Lemhi	Arla Boots	208-756-3556
South Fremont Senior Citizens, Inc. 420 N Bridge St., Ste. D St. Anthony, ID 83445	Fremont/Madison	Karolyn Hodge	208-624-3458
Senior West of the Tetons 60 S Main St. Driggs, ID 83422	Teton	River Osborn	208-354-6973
West Jefferson Senior Citizens 1075 E. 1500 N. Mud Lake, ID 83450	Jefferson	Shawna Bare	208-663-4916

8. Describe the AAA’s process to identify homebound, frail, disabled, isolated and/or vulnerable clients who may need assistance in the event of a man-made or natural disaster:

All recipients of Home Delivered Meals, Homemaker, and Respite Services have an addresses and/or directions to their home on file at the AAA in the database system. Those files also include listings of drugs and oxygen needs of clients per their annual assessments. The data base has client demographics and emergency contact information in order to determine the status of the individual that there may be a concern about.

9. Provide a process for “call downs” to service providers, nursing homes and residential care facilities, individual case management clients, etc., to check on their preparedness status and welfare in the event of an emergency:

Refer to #2 above: Names, titles and duties of other AAA staff with Emergency Assignments.

10. Describe the AAA’s process for intake and recording of information about the disaster related needs of older people, providing access to needed services, and follow-up during and beyond the recovery period.

The capability and extent of assistance the AAA's are able to provide, in case of a disaster or emergency are limited. Primary to the mission is disaster relief and assistance. The first 24 hours of a disaster or emergency are key to accessing relief and assistance. In case of a disaster or emergency the following information should be recorded on any known victims:

- Name
- Home address
- Telephone number, if working
- Known health conditions
- Next of kin and telephone number
- Nature of need
- Location of individual if not at home

This information should be relayed to Bureau of Homeland Security (BHS) if rescue is required. The AAA Director should be made aware of all efforts accomplished by the ICOA and BHS.

It is imperative any contracted nutrition providers who provide commodities or meals during a disaster or emergency, keep extensive and accurate records of what was provided to whom, when, and under what circumstances and at whose direction. These services are reimbursable by the federal government if properly authorized but require good records in order to make a claim.

The AAA involved must be able to indicate how many older persons might be residing in a given area and pass this information onto the Idaho Commission on Aging.

11. Describe the AAA's process for staff and service providers to record employee's time and expenses associated with disaster related activities:

AAA staff and service providers must maintain accurate records during an emergency event, including time worked, emergency purchases made, personal miles driven for work purposes, as well as noteworthy benchmark activities, instructions and information. These documents will be required for monetary reimbursement and payroll and be invaluable after the event in order to improve emergency preparedness plans.

Refer to Example below: necessary to apply for reimbursement in the event of a presidential disaster declaration

Authorized Peron's Name: _____

Date	Time Worked	Emergency Purchases Made	Purpose of Purchase	Costs of Emergency Purchase	Personnel Miles Driven	Store Purchase made and Location	Receipt Required	Instructions & information	Instructions Came From

12. Describe activities the AAA will undertake during the contract period to expand emergency preparedness of the Aging Network within the PSA (i.e. attend LEPC meetings, work with local emergency management officials to advocate for inclusion of older citizens' needs in emergency planning, establish CERT Training in senior centers, make 72-hour kits available for homebound clients, establish "call-down" lists and procedures to be used during emergencies, include emergency preparedness activities in contracts with providers, etc.)

- We will attend Emergency Management Meetings (East Idaho Volunteer Organizations Active in Disasters EIDVOAD) and Emergency Preparedness Meetings to continue to forge relationships with those individuals in addition to the Department of Homeland Security. We will also work to update our call down lists annually.
- AAA will research grant opportunities to purchase 72-hour kits (or coordinate with the local Humanitarian Center) that can be distributed to seniors. Excess kits will be kept at the AAA or senior centers.
- AAA will contact the senior centers in the area to identify person who wish to become CERT trained.
- AAA will contact senior centers to assist them in organizing call down lists.